## Questions

## About you

(Note: Information entered in this "About You" section may be published with your response (unless it is "not for publication"), except where indicated in **bold**.)

## 1. Are you responding as:

 $\Box$  an individual – in which case go to Q2A

☑ on behalf of an organisation? – in which case go to Q2B

## 2A. Which of the following best describes you? (If you are a professional or academic, but not in a subject relevant to the consultation, please choose "Member of the public".)

□ Politician (MSP/MP/peer/MEP/Councillor)

 $\Box$  Professional with experience in a relevant subject

□Academic with expertise in a relevant subject

Member of the public

Optional: You may wish to explain briefly what expertise or experience you have that is relevant to the subject-matter of the consultation:

## 2B. Please select the category which best describes your organisation:

□Public sector body (Scottish/UK Government or agency, local authority, NDPB)

Commercial organisation (company, business)

Representative organisation (trade union, professional association)

Third sector (charitable, campaigning, social enterprise, voluntary, non-profit)

Other (e.g. clubs, local groups, groups of individuals, etc.)

Optional: You may wish to explain briefly what the organisation does, its experience and expertise in the subject-matter of the consultation, and how the view expressed in the response was arrived at (e.g. whether it is the view of particular office-holders or has been approved by the membership as a whole).

The British Geriatrics Society (BGS) is the membership organisation for all healthcare professionals engaged in the treatment and care of older people across the UK. Since 1947, our members have been at the forefront of transforming the quality of healthcare for older people. Our vision is for a society where all older people receive high-quality patient-centred care when and where they need it. We currently have over 4,600 members, over 400 of whom are based in Scotland, including geriatricians, nurses, GPs, allied health professionals and pharmacists working across acute, primary and community care settings. BGS takes a leading role in policy debates relating to healthcare for older people, acting as a voice for our members and the speciality of geriatrics. BGS's work in Scotland is led by the Scotland Council, which comprises healthcare professionals working with older people in Scotland. The views outlined in this consultation response represent those of the organisation and have been collated with input from the BGS Scotland Council Chair.

#### 3. Please choose one of the following:

⊠I am content for this response to be published and attributed to me or my organisation

 $\Box$ I would like this response to be published anonymously

 $\Box$ I would like this response to be considered, but not published ("not for publication")

If you have requested anonymity or asked for your response not to be published, please give a reason. (Note: your reason will not be published.)

# 4. Please provide your name or the name of your organisation. (Note: The name will not be published if you have asked for the response to be anonymous or "not for publication".)

### **British Geriatrics Society**

Please provide a way in which we can contact you if there are queries regarding your response. Email is preferred but you can also provide a postal address or phone number. (Note: We will not publish these contact details.)

#### l.aldridge@bgs.org.uk

#### 5. Data protection declaration

 $\boxtimes$ I confirm that I have read and understood the Privacy Notice to this consultation which explains how my personal data will be used.

If you are under 12 and making a submission, we will need to contact you to ask your parent or guardian to confirm to us that they are happy for you to send us your views.

 $\Box$  Please ONLY tick this box if you are UNDER 12 years of age.

## Your views on the proposal

Note: All answers to the questions in this section may be published (unless your response is "not for publication").

### Aim and approach

1. Which of the following best expresses your view of the proposed Bill? Please note that this question is compulsory.

 $\boxtimes$  Fully supportive

 $\Box$  Partially supportive

- □ Neutral (neither support nor oppose)
- $\Box$  Partially opposed

□Fully opposed

#### Please explain the reasons for your response.

The BGS is pleased to see the proposed bill to establish a Commissioner for Older People in Scotland and recognises its vital importance in campaigning for and championing the rights of older

individuals. In May 2023, the BGS was one of 30 organisations to sign a consensus statement published by Independent Age in support of an Older People's Commissioner for Scotland, broadly supporting the need for an independent champion for older people. The BGS supports the proposed role of the commissioner to ensure that the needs of an ageing population are fully considered in policy and practice right across all government departments and public bodies. This is especially important in healthcare, considering that older people, especially those with frailty, use health and care services more than any other group. With the population of Scotland ageing and the number of people aged 65 and over projected to grow by 29.7% by mid-2045 (an increase of 36,000), it is essential that national and local government decision-makers place older people and their health and social needs at the centre of strategic planning and commissioning processes.

Considering this, the BGS recommends that the proposed bill refers to the role of the commissioner in improving healthcare for older people, which is currently absent from the proposal. The proposal highlights two important examples where the commissioner can campaign for and champion the rights of older people: returning to society after the COVID-19 pandemic; and closing the digital divide. Advocating for improved healthcare is a crucial component in achieving these goals. For example, for older individuals to play a "full and active role" in society after the COVID-19 pandemic, the NHS and care systems need the capability and capacity to care for them. Older individuals must receive the highest quality care at the right time to be able to remain healthy, independent, and active members of society for longer. However, there is insufficient capacity within the current workforce to meet the needs of an ageing population. BGS has advocated for the need for more geriatricians to make up a current shortfall, which has been highlighted in our recent publication: The case for more geriatricians. Older people's care is delivered by multidisciplinary teams and there are workforce shortages across all these professions. An important role for a dedicated commissioner would be to campaign for the need to increase recruitment, retention, training and support of the workforce specialising in healthcare for older people, alongside improving current working conditions.

The experience of the COVID-19 pandemic highlighted systemic ageism within healthcare and the importance of a dedicated voice for older people to ensure that their healthcare needs are prioritised. The BGS has published a **<u>Blueprint</u>** to show what good quality age-attuned integrated care for older people can look like, aimed at system leaders and commissioners of health and care services. It is recommended that a new Commissioner for Older People in Scotland use the document as guidance for what care for older people should look like in Scotland.

The BGS also recognises the importance of ending the digital divide and supports this being a key focus of the proposed bill. The digitalisation of health and care services, such as electronic appointment booking systems, can contribute to health inequalities. This is because older individuals are less likely to use digital technologies than other age groups and therefore less likely to use more efficient methods of healthcare support.

Similarly, we would support the establishment of an Advice and Assistance team focused on connecting older people with support and services throughout Scotland, similar to the Welsh Older People's Commissioner's Advice and Assistance Team. Ensuring older people are linked to the right support in a timely manner makes for more effective and efficient interventions, leading to better health outcomes.

The BGS currently has a good relationship with the Older People's Commissioner for Wales and the Commissioner for Older People for Northern Ireland. If the bill is passed, we look forward to forging a similar relationship with a Commissioner in Scotland.

# 2. Do you think legislation is required, or are there are other ways in which the proposed Bill's aims could be achieved more effectively? Please explain the reasons for your response.

It is the understanding of the BGS that legislation is required for the aims of the bill to be implemented, and for the commissioner to be of a similar standing to the commissioners in Wales and Northern Ireland, and the Children and Young People's Commissioner Scotland.

# **3.** Which of the following best expresses your view on whether there is a need for a specific, dedicated Commissioner focusing solely on older people's rights and interests?

⊠ Fully supportive

□ Partially supportive

□ Neutral (neither support nor oppose)

□ Partially opposed

□ Fully opposed

 $\Box$  Do not wish to express a view

# Please explain the reasons for your response, including your views on the list of proposed functions set out between pages 29 and 32 of the consultation document, and any additional functions you think the commissioner should have.

The BGS fully supports the need for a dedicated and independent commissioner for older people in Scotland. Supporting Scotland's ageing population requires a joint effort across multiple government departments, the NHS, and social care systems. A dedicated commissioner will have a vital role to play in joining up these services and campaigning for the rights of older individuals across the wide range of stakeholders.

The BGS fully supports the proposed high-level functions of the commissioner in promoting awareness of the rights of older people; promoting the provision of opportunities; encouraging best practice in the treatment of older people; and reviewing the adequacy and effectiveness of law affecting the interests of older people. Improving healthcare for older people is a vital component to all these functions, and the BGS highly recommends that a key function of the proposed commissioner should be to promote the rights of older individuals and encourage best practice in healthcare. The BGS would also suggest adding an additional high-level function of the commissioner to encourage recruitment and retention of the workforce supporting an ageing population, both in healthcare and other sectors.

As noted in question 1, the BGS supports proposed functions of the commissioner to help support older individuals return to society after the COVID-19 pandemic; closing the digital divide; and the establishment of an Advice and Assistance Team. It is important that healthcare needs are embedded into all these proposed focus areas. The BGS recommends that improving healthcare for older individuals should also be a priority focus for a new commissioner and should be named alongside these important examples. We recommend that a new commissioner focuses on promoting good quality age-attuned integrated care; and strengthening the older people's healthcare workforce.

# 4. Which of the following best expresses your view on the age range of the proposed Commissioner's remit covering all those in Scotland aged 60 and over?

- $\boxtimes$  Fully supportive
- $\Box$  Partially supportive
- □Neutral (neither support nor oppose)
- □ Partially opposed
- □ Fully opposed
- $\Box$  Do not wish to express a view

## Please explain the reasons for your response.

The BGS does not use a strict definition regarding the age range of an older person or geriatric patient. It is difficult to apply strict definitions due to people biologically ageing at different rates, which depends on a wide range of factors throughout a person's lifetime. Instead, a geriatric patient is considered regarding their level of frailty and multimorbidity. Since the proposed Commissioner will be responsible for promoting the rights and interests of older individuals across a range of settings, not just healthcare, the over 60s is a reasonable remit which covers the wide range of issues affecting older age. By selecting an age at the lower end of what would be traditionally considered as older age, this encompasses those who may be experiencing illnesses typically associated with later life at a younger age, often as a result of unequal life circumstances or poverty. Importantly, this age remit also aligns with the approach taken by the Commissioner for Older People for Northern Ireland and Older People's Commissioner for Wales. The BGS recommends allowing flexibility to this age remit depending on individual circumstance, similar to that of the Northern Ireland Commissioner. For example, if a matter was raised by someone over the age of 50 or there was an issue affecting people over the age of 50, then the Commissioner should be allowed to act on this, if deemed relevant.

# 5. Which of the following best expresses your view on whether the proposed Commissioner should hold powers of investigation?

- $\boxtimes$  Fully supportive
- □ Partially supportive
- □ Neutral (neither support nor oppose)
- □ Partially opposed
- □ Fully opposed
- $\Box$  Do not wish to express a view

# Please explain the reasons for your response including how the powers of investigation would work in practice.

The BGS recognises the vital importance of the proposed Commissioner to investigate individual cases and how service providers take account of the rights, interests and views of older people.

It is important that healthcare providers, such as Health Boards, are held accountable and investigated appropriately regarding their treatment of older individuals. For example, the COVID-19 pandemic highlighted the ageism embedded within healthcare systems when there were cases of older individuals being denied access to treatment or escalation.

# 6. Given a number of other bodies have similar functions to some of those proposed for the Commissioner, which of the following best expresses your view on whether the proposed Commissioner's work can avoid duplication with existing officeholders?

□ Strongly agree

□ Tend to agree

⊠Neutral (neither agree nor disagree)

□ Tend to disagree

□ Strongly disagree

 $\Box$  Do not wish to express a view

Please explain the reasons for your response, including any views on how the Commissioner and existing officeholders can operate to ensure they do not replicate each other's work.

7. Which of the following best expresses your view on whether the proposed Commissioner should be independent of Government?

 $\boxtimes$  Fully supportive

□ Partially supportive

□ Neutral (neither support nor oppose)

□ Partially opposed

□ Fully opposed

 $\Box$  Do not wish to express a view

## Please explain the reasons for your response, including any views on what the accountability and governance arrangements should be for the Commissioner.

The BGS fully supports that a proposed Commissioner should be independent of government. This will allow the Commissioner to hold government to account; allow the commissioner to investigate cases without needing to seek permission from a government department; and independently publish reports. The BGS also supports the idea that a proposed Commissioner should publish an annual report which is laid before parliament and recommends that this is made publicly available.

### **Financial implications**

8. Any new law can have a financial impact which would affect individuals, businesses, the public sector, or others. What financial impact do you think this proposal could have if it became law?

 $\Box$  a significant increase in costs

 $\Box$  some increase in costs

- $\boxtimes$  no overall change in costs
- $\Box$  some reduction in costs

 $\Box$  a significant reduction in costs

 $\Box$  skip to next question

# Please explain the reasons for your answer, including who you would expect to feel the financial impact of the proposal, and if there are any ways you think the proposal could be delivered more cost-effectively.

Whilst the BGS recognises that there will be operational costs involved in setting up a new Commissioner's office, this is outweighed by the long-term financial benefits of investing in an ageing population. Without investment in initiatives that support older individuals to lead healthier and fuller lives, such as a dedicated Commissioner, older people are likely to need healthcare services earlier than they otherwise would. Implementing preventative measures to support an ageing population lead healthier lives can deliver significant downstream savings for the NHS and social care.

## Sustainability

**10.** Any new law can impact on work to protect and enhance the environment, achieve a sustainable economy, and create a strong, healthy, and just society for future generations.

Do you think the proposal could impact in any of these areas?

If you do not have a view then skip to next question.

# Please explain the reasons for your answer, including what you think the impact of the proposal could be, and if there are any ways you think the proposal could avoid negative impacts?

It is the view of the BGS that a proposed commissioner would contribute towards creating a strong, healthy, and just society for future generations. Through acting as an independent voice for older individuals in Scotland, the Commissioner will lead the way in championing the rights and needs of older individuals not just now, but also by setting the standard for future generations.

## General

# 11. Do you have any other additional comments or suggestions on the proposed Bill (which have not already been covered in any of your responses to earlier questions)?

No