

Scottish party manifesto analysis: Social Care

SNP

Key policies:

- £20m recurring Complex Care Investment to free up hospital beds.
- Legal right to breaks and annual health checks for unpaid carers.
- Displaced Workers Scheme expansion to support international social care staff.
- Hospital to home support through improved adaptations and packages of care.
- Integration and reform of social care as part of wider NHS renewal.
- Public health approach to drug and alcohol harms with expanded community recovery.

Summary and analysis:

The SNP's social care commitments centre on delivering a rights-based system with national oversight, consistent standards, and improved workforce conditions (e.g. commitment to embed Fair Work principles and improve pay and conditions through collective bargaining). It also emphasises expanding community-based care and support, shifting more provision closer to home and strengthening prevention. These align with the focus on rights-based care, national oversight and fair work. However, the feasibility of these reforms depends on resolving long standing workforce shortages, securing sustainable funding for improved terms and conditions, and ensuring local services have the capacity to meet national standards.

The manifesto frames social care reform as essential to improving outcomes, reducing delayed discharge and supporting people to live independently, but delivering this requires significant system-wide coordination. Expanding community-based pathways and raising quality standards rely on local authorities, providers and the third sector having the staffing, infrastructure and commissioning capacity to implement change at pace. National oversight may improve consistency, but it also introduces governance and transition challenges that the manifesto outlines only at a high level. Overall, the SNP sets out a direction of travel focused on rights, fairness and national standards, but its success will depend on workforce availability and local delivery capacity.

Scottish Labour

Key policies:

- Reform the National Care Service.
- 1,000 care-at-home packages + 300 step-down beds.
- Improve respite and support for unpaid carers.

- Remove non-residential care charges.
- Crack down on poorly run care homes; more inspections.
- £15 minimum wage for care workers; collective bargaining.
- Clear career pathways, training, registration.

Summary and analysis

Labour's social care agenda is built around fair work and stronger integration, presenting social care as both a core public service and an important part of Scotland's workforce. Their commitments to improve pay, conditions, and career pathways recognise that workforce stability is essential for a sustainable system. However, the manifesto does not explain how these improvements would be funded, how they would be phased in, or how they would interact with existing contracts and commissioning arrangements across a mixed provider landscape.

Labour also emphasises closer integration between health and social care, signalling that governance and accountability structures would need to change. Yet the manifesto provides limited detail on how responsibilities would shift between local authorities, integration authorities, and national bodies, or how variation in local practice would be managed. Their focus on reducing delayed discharge and expanding community-based support implies investment in intermediate care (e.g. rapid community response teams, reablement and supported discharges), housing adaptations, and multidisciplinary teams, but the manifesto does not set out how these developments would be sequenced, prioritised, or protected within tight fiscal conditions.

Reform UK (Scotland)

Key policies:

- Reduce bureaucracy in social care by cutting management layers and streamlining administrative processes.
- Expand independent provider capacity to increase choice and reduce delays in accessing care.
- Deregulate commissioning processes to speed up provider entry and simplify service delivery.
- Shift funding toward frontline care by reducing central administrative and management costs.
- Improve rural access to care through expanded provider choice and targeted local support.
- Support unpaid carers by reducing administrative burdens and improving access to respite.
- Increase patient and family choice in selecting care providers and care pathways.

Summary and analysis:

Reform UK outline a social care approach focused on cutting administrative overheads, streamlining processes, and expanding the role of independent providers. This reflects a belief that a lighter regulatory framework and greater market flexibility would widen

access and reduce costs. However, the manifesto does not explain how essential safeguards, such as quality monitoring, protection for vulnerable adults, and consistent standards across providers would be maintained if oversight is reduced. Their intention to scale back management structures also raises questions about whether local and national bodies would retain the capacity needed to commission services, monitor performance, and regulate a diverse provider landscape.

Workforce issues receive comparatively limited attention. Despite widespread shortages, high turnover, and persistent concerns about pay and conditions, the manifesto offers little on how staffing pressures would be addressed or how providers would be supported to recruit and retain skilled workers. Reform UK also highlight affordability and user choice but provide minimal detail on how support for unpaid carers, rural communities, or people with complex needs would be strengthened within a more market driven system.

Overall, the party set out a clear preference for a simpler, more commercially oriented model of social care, but the manifesto gives less detail on how quality, equity, workforce stability, and local delivery capacity would be safeguarded within this approach.

Scottish Conservatives

Key policies:

- Oppose National Care Service centralisation
- Reduce delayed discharge via temporary care home placements.
- Reform Adults with Incapacity Act to speed discharge.
- Review integration of health and social care.
- Workforce planning for care sector.

Summary and analysis:

The Scottish Conservatives set out a social care approach focused on improving standards, strengthening accountability, and giving local areas more flexibility within the existing mix of public, private, and third sector providers. Their proposals emphasise modernising care delivery, improving commissioning, and targeting support where pressures are greatest, alongside commitments to support unpaid carers and improve access in rural communities. This reflects a preference for stability and incremental improvement rather than major structural reform, with the party explicitly rejecting a new National Care Service.

While the manifesto highlights decentralisation and more efficient delivery, it provides limited detail on how longstanding challenges such as workforce shortages, low pay, and provider fragility would be addressed. The Conservatives reference a wider Health and Social Care Workforce Strategy, but there is little social care specific discussion of recruitment pipelines, training, or retention. Similarly, proposals for stronger local accountability do not set out how already stretched local authorities would be resourced to commission and sustain services, nor how coordination between health

and social care would be strengthened to reduce delayed discharge and improve community capacity.

Scottish Liberal Democrats

Key policies:

- Human-rights focused approach to social care
- Improving the recruitment and retention of care workers through national bargaining and commit to funding the outcomes
- Backing UK Liberal Democrat proposals for a new UK-wide national minimum wage for care that is at least £2 higher
- Increasing support payments so that unpaid carers are at least £1000 per year better off than they would be under the old system of Carer's Allowance.
- Boosting access to housing for care workers to enable them to take up posts

Summary and analysis:

Scottish Liberal Democrats set out a rights-based, person centred model of social care, positioning support as something people should be able to rely on rather than navigate through crisis. Their programme focuses on prevention, early help, and enabling people to live independently, with local authorities given the powers and resources to design services around community needs rather than centralised structures. Workforce reform is central: the manifesto commits to a new career ladder, improved pay and conditions, and better support for unpaid carers, including an uplift to Carer Support Payment and guaranteed help for young carers. The party also aims to halve delayed discharge by the end of the decade, linking this to wider NHS pressures and the need for coordinated health and care planning.

Delivering this vision depends heavily on local authority capacity, both financial and organisational. Councils are expected to lead on prevention, redesign services, and expand community-based support, yet the manifesto offers limited detail on how sustained funding or workforce expansion would be secured in a system already under strain. The ambition to halve delayed discharge requires significant increases in home care capacity and coordination with the NHS, but the scale and sequencing of investment are not fully set out. Similarly, improving pay, conditions and career progression for care workers is central to the model, but the feasibility of delivering this across a fragmented provider landscape, while maintaining service stability, remains a key constraint. The overall direction is clear and locally driven, but delivery relies on long term investment, workforce availability, and consistent implementation across Scotland's varied local systems.

Scottish Greens

Key policies:

- Create a National Care Service based on human rights and fair work.
- Increase pay for care workers.
- Expand respite and community support.

Summary and analysis:

The Scottish Greens set out a social care agenda based on universal access, rights-based provision, and a publicly delivered National Care Service. This marks a clear shift away from the current mixed market model toward a system led mainly by public and community providers. However, the manifesto does not fully address the scale of delivery capacity that would be required for this transition. Local authorities and providers already face significant workforce shortages, fragmented commissioning arrangements, and limited capital investment, all of which make rapid expansion of public provision challenging. The Greens place fair work, bargaining, and improved conditions at the centre of their model, but the manifesto gives limited detail on how these reforms would be funded or phased in across a sector with tight margins and high turnover.

Their preventative approach depends on much closer working between health, housing, and community services, yet the manifesto provides little information on how governance would be aligned to support this. It does not set out how responsibilities would shift across councils, integration authorities, and national bodies, or how differences in local capacity would be managed. Moving toward a publicly delivered system also raises questions about how existing providers would be supported during the transition, how continuity of care would be maintained, and whether local systems have the staffing and infrastructure needed to take on new responsibilities. Overall, the Greens present a clear rights-based vision, but the manifesto provides less detail on the funding, governance, and transition pathways required to deliver it.

*This manifesto analysis was published by the UofG Centre for Public Policy on 19 May 2026.
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The University of Glasgow, charity number SC004401