

Anne's Law factsheet

What is Anne's Law?

Anne's Law is a piece of planned Scottish legislation which is intended to strengthen the rights of people living in adult and older people's care homes to see and spend time with the people who are important to them, even in the event of an outbreak of infectious disease. It recognises that meaningful contact is a fundamental right and is essential to supporting health and wellbeing.

How did it come about?

Anne's Law is the result of campaigning by family members of people in care homes who were separated from their loved ones for lengthy periods during the Covid-19 pandemic, with devastating impacts on people's health and wellbeing. A petition to the Scottish Parliament, lodged in November 2020, called on the government to allow a designated visitor into care homes to support loved ones. Subsequent [public consultation](#) on Anne's Law found widespread support for the overall aim – that people in care homes should always have the right to see their loved ones. Anne's Law enshrines in legislation the role of the Essential Care Supporter – a family member, friend, or close contact who is an integral part of their loved one's care team.

Is Anne's Law currently in force?

Anne's Law entered into legislation as part of the Care Reform (Scotland) Act, which was passed by the Scottish Parliament in June 2025. Consultation is ongoing regarding the details of the Regulations and Code of Practice, which will help decide how the legislation will operate in practice.

What is happening in the meantime?

Pending full implementation of Anne's Law, [two new Health and Social Care Standards](#) were introduced in March 2022. These reinforce the rights of people in care homes to see and get support from people important to them, even in the event of an infectious disease outbreak. All registered care homes for adults and older people are expected to meet these standards, and they are used by the Care Inspectorate during its regulatory activity to assess outcomes for people.

Where can I find more information?

The Care Inspectorate's [dedicated webpage](#) provides further information and guidance for care home residents, their families and friends, and care home providers and staff on visiting, meaningful connection and Anne's Law. This includes advice for people on how they can seek assistance if they have any concerns.

Meaningful Connection fact sheet

A human-rights based approach, including the Health and Social Care Standards

This factsheet has been designed to accompany this webinar, which you can view [here](#).

Human rights are the basic rights and freedoms which belong to everybody. They are based around respect for the fundamental dignity, autonomy and equality of all people, and underpin the [Health and Social Care Standards](#). In the UK, the current legislation which protects our rights is the [Human Rights Act 1998](#).

People who experience care are among the most vulnerable and often face the biggest difficulties in realising their rights. It's therefore essential to ensure that human rights principles are embedded in day-to-day care and in policy and practice, and that people are empowered to know and claim their rights. >>



Article 8 of the Human Rights Act (1998) addresses the right to respect for private and family life. This includes the right to privacy; to family life; to physical, psychological and moral wellbeing; to home life; and to private correspondence. It is a qualified right, meaning it can be limited in certain circumstances, but any limitations must be legitimate, proportionate and the minimum necessary.

Article 5 of the Human Rights Act (1998) covers the right to liberty and security and protects against unjustified deprivations of liberty – this too is a qualified right.

Human rights principles are integral to the **Health and Social Care Standards (HSCS)** and their five overarching principles of:

- Dignity and respect
- Compassion
- Being included
- Responsive care and support
- Wellbeing

The HSCS set out what we should expect when using health, social care and social work services in Scotland. They seek to provide better outcomes for everyone. This includes the care and support people receive, how decisions are made, and ensures people experiencing care and those important to them can have confidence in the people supporting them, the organisation providing the service and the environment if the provider has a premises.

A **human rights-based approach** can be applied by considering the [PANEL principles](#):

- Participation
- Accountability
- Non-discrimination
- Empowerment
- Legality

Human rights principles give a strong starting point for decision-making. **The FAIR approach**, developed by the Scottish Human Rights Commission, involves considering:

- **Facts** of the situation
- **Analysing** what human rights are at stake
- **Identifying** what needs to be done and by whom
- **Reviewing** what has been done and the outcomes

Using a self-evaluation tool, consider applying the PANEL principles and the FAIR approach within your service. Look for creative ways to discuss this with the different people in your service and work collaboratively to build on what is working well.

A human rights-based approach should be an everyday thing: something that we consider in all aspects of the care and support we provide. Helping to understand why we do things and the benefits this approach brings is the essence of true person-centred, relationship-centred care.

More resources on meaningful connection are available [here](#).

Including family carers as partners in care

This factsheet has been designed to accompany this webinar, which you can view [here](#).

Families and friends of people who live in care homes have an essential part to play as partners in care, fulfilling a variety of roles which support people's wellbeing and personhood, and going far beyond "just being a visitor". They have been described as "guardians of the identity and dignity of their loved ones".

Enabling people to maintain their important relationships supports their health and wellbeing and is part of their human right to respect for private and family life. The [Health and Social Care Standards](#) set out expectations that people will be able to maintain relationships in the ways that suit them best and will always have the right to see and, where appropriate, receive support from people important to them.

[Research](#) tells us that positive family involvement is associated with better physical, mental and emotional health and wellbeing outcomes for people. Family carers can provide emotional and social support; act as advocates; provide vital information to support person-centred care; provide continuity with life outside the care home; and be involved in direct care when that's what people want.

When people have legal powers (Guardianship or Power of Attorney) to act on someone's behalf, this must be clearly documented in the notes. Decisions must be made in accordance with the [principles of the Adults with Incapacity \(Scotland\) Act 2000](#).

Services can foster family inclusion and help make visiting meaningful in various ways. Some of the things families have said they value are: feeling welcome (for example, being given the door entry code); being kept well informed; being included (for instance, being invited to join in activities, being able to stay for a meal); having a choice of where to spend time during visits; positive and constructive relationships with staff who are friendly and approachable; being able to freely raise any concerns and have them addressed.

Family inclusion is supported by a person-centred and relationship-centred approach and clear, transparent, jargon-free communication. Including people in planning and decision-making where it is appropriate to do so is integral to a human-rights based approach. An organisational culture which actively values and welcomes inclusion and collaboration is an important contributor to partnership. Identifying and addressing any barriers, challenges and potential conflicts supports collaborative working and keeps every relationship at the centre.

More resources on meaningful connection are available [here](#).

Supporting meaningful connection and why it is important for people

This factsheet has been designed to accompany this webinar, which you can view [here](#).

Meaningful connection is about all the connections that are important to people – families, friends, staff, pets, the wider community, and can also include our environment and belongings. [Research](#) has evidenced how beneficial meaningful connection is to physical, mental and emotional health and wellbeing. Isolation and loneliness can have profound negative outcomes for people. Meaningful engagement – being involved in activities and spending time doing things that are important to us – influences quality of life, supports personhood and has been shown to increase life expectancy. Nevertheless, many people who live in care homes for adults and older people can experience moderate to severe loneliness, and this is linked to a range of negative health consequences including depression, dementia, cardiovascular disease and poor nutrition, as well as a reduced quality of life.

The right to respect for private and family life is also a fundamental human right (Article 8, Human Rights Act 1998). ([Webinar](#).)

During the Covid-19 pandemic, people who lived in care homes were separated from their loved ones for lengthy periods, resulting in negative consequences for many people. Two new [Health and Social Care Standards](#) (5.16 and 5.17) have since been introduced which support people's rights to see and get support from those important to them, even in the case of an outbreak of infectious disease. The planned [Anne's Law](#) will also ensure these rights are protected.

Everyone has their individual "recipe for connection" which supports their own health and wellbeing needs, and good quality, responsive, person-centred personal planning is essential to ensure people are supported to connect in the ways that are most meaningful to them.

People who experience care often face a range of barriers and challenges, such as sensory impairment, dementia or learning disabilities, which can affect their ability to connect with other people. This can lead to an increased risk of social disconnection and isolation, and may lead to people experiencing stress and distress. It's important therefore to find out what is important to people, how they prefer to connect and communicate, what the barriers are, and to ensure people have opportunities to connect in ways that are right for them and support them to get the most out of life.

More resources on meaningful connection are available [here](#).

Meaningful Connection fact sheet

Supporting positive peer relationships for people who live in care homes

This factsheet has been designed to accompany this webinar, which you can view [here](#).

[Research](#) has shown that meaningful connection is integral to promoting health and wellbeing. It is also a fundamental human right. It allows people to feel valued as individuals and enhances personhood. A lack of connection has profound negative consequences for people's emotional, mental and physical health and wellbeing.

Moving into a care home provides opportunities to develop new friendships which can enrich day-to-day life, supporting people to have a sense of belonging and to feel more at home. However, research has also found high levels of social isolation and loneliness among people who live in care homes. Many people said they would like more opportunities to socialise and form friendships within the care home. Everyone has their own "recipe for connection" and some people prefer their own company, but still need opportunities to spend time with others if they choose. >>



Here are some things that services can do to foster positive peer relationships.

- Finding out and recording people's social preferences and interests as part of person-centred [personal planning](#), creating opportunities for how these outcomes can be supported and addressing any barriers.
- Introducing people to each other who have shared interests/commonalities and creating opportunities for them to get to know each other.
- Introducing people to their neighbours when they move in and continuing to introduce people to others and in lounge areas when they may forget.
- Consider "buddying up" people to help them settle in.
- Intentionally looking for opportunities to bring people together in twos, or small groups.
- Identify and address specific impairments people have which affect their ability to interact.
- Ensure people are enabled to spend time with their friends even if their needs change, for instance by becoming less mobile.
- Provide opportunities for participatory group activities. Creative arts activities like music, singing, seated dance and reminiscence activities have been found to be particularly effective.
- Include family carers and friends in activities and in small groups as people may feel more confident to connect with others with support.
- Getting out and about on trips and in the community where possible.
- Trying things more than once and looking for new opportunities.
- Events, parties and celebrations which encourage interaction.
- Ensuring the [physical environment](#) is well planned with a range of options to encourage group and one-to-one socialising.
- Mealtimes are a natural point of interaction – consider how social connections can be maximised at this time.

Potential barriers can include:

- sensory, cognitive or functional impairments which affect people's ability to connect
- an organisational culture which doesn't prioritise meaningful connection
- a physical environment which is not conducive to meaningful interaction
- outside space which is difficult to access
- staffing allocation which is not supportive
- lack of person-centred personal planning.

Using a [self-evaluation tool](#) can help to identify strengths and challenges, fostering a culture where people experience meaningful connection which enriches their day-to-day lives and supports their health and wellbeing.

More resources on meaningful connection are available [here](#).

Supporting meaningful connection during an outbreak situation

This factsheet has been designed to accompany this webinar, which you can view [here](#).

Meaningful connection is important for everyone. Experiencing connections with others that are valued and meaningful has profound impacts on physical, mental and emotional health and wellbeing. It is essential to our identity and personhood and is a fundamental part of our [human rights](#). [Research](#) confirms that when people do not experience meaningful connection, the negative consequences for their physical, mental and emotional health and wellbeing are far-reaching.

Outbreaks of infectious disease in care homes can generate dilemmas around balancing reducing the risk of infection and potential harm with upholding the right to private and family life. The [two new Health and Social Care Standards](#) support services by setting out the clear expectation that everyone who lives in a care home will always have the right to see and get support from the people who are important to them, even in an outbreak situation when restrictions are needed on advice from Public Health. Any restrictions must be for the shortest possible period.

Named visiting is the default position during care home outbreaks. It enables people experiencing care to choose family members or friends who can visit and spend time with them – [current guidance](#) specifies up to three named people, of whom one can visit per day.

Essential visiting is a more restricted form of visiting and should always be supported, regardless of outbreak status, when needed to alleviate distress or upset for the person experiencing care or relative, or in end-of-life situations.

To reduce infection risks and contain any spread, it is important for all staff to be familiar with their roles and responsibilities about [infection prevention and control](#), ensuring standard infection control precautions are embedded into daily practice and that the most up to date guidance is known and followed.

Services can prepare and **be outbreak ready** by considering the following questions to help inform decision-making.



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- Have you a communication plan in place in the event of an outbreak, to ensure everyone has access to early, clear, regularly updated information which supports their needs and preferences, and highlights how they can ask questions?
- How will people's individual needs be best supported during any periods of isolation, including people with dementia/cognitive impairment?
- How will PPE (particularly face masks) impact on communication, and how can this be minimised?
- Does the personal planning reflect people's individual needs in the event of an outbreak (for instance around communication, isolation, stress and distress, use of communication technology)?
- Does it include details of named people and how they prefer to be contacted?
- How can staff best be deployed during an outbreak to support people's physical, mental and emotional wellbeing?
- Do all staff know and follow the appropriate transmission-based precautions in the event of an outbreak, to minimise spread and ensure restrictions are in place for the shortest possible time?
- Focus on taking any necessary measures to reduce risk while considering the individual impact on people experiencing care.

More resources on meaningful connection are available [here](#).

Supporting meaningful connection when people are living with dementia

In Scotland, an estimated 90,000 people are living with dementia, with or without a formal diagnosis, and they account for approximately 65% of the care home population.

Importance of meaningful connection

Meaningful connection with others is important for everyone. Experiencing connections which are valued and meaningful has many benefits for people who live with dementia. It can improve wellbeing, support identity and personhood, boost self-esteem, and slow cognitive decline. However, over half of people living in care homes experience feelings of moderate to severe loneliness, which can significantly impact on quality of life and overall wellbeing. Certain types of communication, such as expressing themselves verbally or understanding what is said, may become more difficult when people are living with dementia, and they may withdraw from social interactions and activities as a result.

This factsheet provides strategies to support meaningful connection for people who are living with dementia. It focuses on people who live in care homes but will also be relevant in other settings. Of course, everyone is unique and will experience their dementia journey differently, but the strategies below have been helpful for many.

Relationships with family carers

Positive interactions and relationships with family and friends are associated with generally higher levels of wellbeing for people living with dementia. Family carers can provide emotional support, help people adjust to life in a care home and maintain contact with the wider world and extended family and friends.

However, many, though not all, family carers describe finding the changes in their loved one as difficult, struggling when they see cognitive abilities decreasing, and feeling they are losing connection.

Strategies for supporting connection will vary according to the needs and wishes of people living with dementia and their family carers. Some possible strategies to make time together more meaningful and enjoyable include:

- Carrying out meaningful activities together such as going for a walk, reading or listening to music together, or reminiscing by looking at photographs.
- Carrying out tasks which are meaningful to the person can make time together more enjoyable and satisfying, and help connect the person to their life and interests.
- Joining in activities together in the care home or sharing a mealtime together.
- Affectionate physical contact such as hugs and handholding can become more important when verbal communication becomes more difficult, as long as the person is comfortable with this.
- Arranging visits or outings at the “right time of day”, when the person is more alert and able to interact, can also be helpful.
- Getting out and about to familiar places together.
- “Just being there” and spending time together, even if conversation is limited.
- Using the “strategies for communication” below, when appropriate.

Relationships with staff

The relationship between people living with dementia and staff who are caring for them is an important factor influencing wellbeing. Research has found that positive interactions with staff are strongly associated with overall positive emotional wellbeing. However, if people become less able to communicate verbally, this can lead to negative impacts on wellbeing – for instance, increased stress and distress – if staff do not have the skills to overcome this.

Here are some strategies to build positive relationships.

- Find out what is important to the person and what their interests are and encourage conversations and activities that support this. Ensure this is included in care planning.
- Encourage people to express their thoughts and views, and contribute to conversations, including those about their care.
- Try to allocate key workers based on shared interests or personality, wherever possible.
- Be mindful of barriers such as hearing or visual impairment, and address these as far as possible.
- Encourage people to express any concerns or worries they have and ensure these are listened to and addressed wherever possible.
- Use reminiscence – engage the person in conversation about their experiences and memories. This can be comforting and stimulate conversation.
- Create opportunities for people to spend meaningful time with and get to know staff, for instance carrying out tasks or activities together.
- Support people to connect with the community beyond the care home and spend time in nature, either through going out and about or “bringing the outside in”.
- Create opportunities for fun and laughter.
- Use the strategies for communication below, when appropriate.

Strategies for communication

While everyone is different, some of the following strategies have been found to be helpful in aiding communication when people are living with dementia.

- Avoid outpacing – speak clearly in a positive, friendly tone and allow the person plenty of time to respond. Use short and simple sentences. Give simple choices, perhaps supported with a visual representation, and rephrase questions if the person does not understand.

- Use eye contact, gestures, facial expression, and (where appropriate) physical touch, such as touching the person's hand, to aid communication.
- Ensure body language is relaxed and open.
- Use names of people and objects when talking about them.
- Try to avoid guessing what the person is trying to say – allow them time to complete their thoughts and choose their words.
- Be patient and respectful. Speak to the person as an adult – don't speak to others in their presence as if they are not there.
- Acknowledge and validate the person's emotions, even if you don't fully understand their words. This can help them feel heard and supported.
- Consider using non-verbal methods such as pictures, writing, or other communication aids to help communication, if appropriate for the person.
- Avoid a noisy, distracting environment where possible.
- Don't correct the person if they are making mistakes. Acknowledge their reality.
- Be prepared to adjust your communication approach based on the person's needs and responses. What works one day may not work the next.

Some useful resources

[Bradford Well-being Profile](#) - an observational tool which can help services to understand where the person finds joy, and what may be the barriers to this, supporting development of the personal plan.

[The King's Fund 'Is your care home dementia friendly?'](#) audit helps services to assess if the space is supporting connection and social opportunities.

[Life story books](#) help to gain an understanding of what is important to the person, for inclusion in personal plans.

[Enriched model of psychological needs poster](#) - while this was developed during the pandemic, it still has relevant information.