

# **CELCIS's response to the Scottish Social Services Council 'Conversation on the Codes of Practice'**

#### October 2022

CELCIS, the Centre for Excellence for Children's Care and Protection is a leading improvement and innovation centre in Scotland. We improve children's lives by supporting people and organisations to drive long lasting change in the services they need, and the practices used by people responsible for their care. Our response is based on research evidence, practice and policy experience, and expertise offered through our long-standing, cross-organisational networks, including people with lived experience. We welcome this opportunity to contribute to the Scottish Social Services Council (SSSC) 'Conversation on the Codes of Practice', a matter which directly impacts the workforce with whom we collaborate, and the children and young people we work to support.

There are approximately 13,255 children in Scotland who are 'looked after'.i, i'All looked after infants, children, young people, their parents, and carers, as well as care leavers, will have regular contact with professionals registered with the SSSC, including social workers, residential care workers, support workers, continues to grow, and there are currently 5,920 workers in children's services settings, and 8,650 in residential childcare services, a 21.5% increase over the past decade and an increase of 230 alone since 2019.iii

### The current codes

Registration of the social service workforce in Scotland with the SSSC, and the requirement to adhere to the codes, brings an assurance to those needing help and support that the people working with them are properly qualified and supported. For workers, it brings increased confidence, learning and development opportunities, a stronger professional identity, and the credibility of recognition as a regulated professional. Any proposed SSSC Codes of Practice amendments must therefore continue this focus: so that the workforce benefit, and the people they work with are protected and supported to the highest standards. Refreshing the current codes is something to be welcomed, but these must not become overly complex, or systems focussed. It is important that system changes such as this can really benefit workers within the system, and those who use services, rather than becoming too bureaucratic or overly burdensome.

Currently, the codes are compliance-led and deficit-based. Their current framing starts from the negative, rather than helping develop an enabling context for true person-centred, relationship-based working. Reducing the 'must not' 'should not' elements of the codes will enable workers to think creatively, supporting them to deliver high quality practice by focusing on the positive and lasting impact that workers can have, rather than fearing that any creative practice will be a breach of the codes. As The Promise of the Independent Care Review states, it is important to move away from risk-averse language as it can often be disempowering.

# **Accessibility and Co-production**



While the primary purpose of the codes is to provide guidance for practitioners working in the social services sector, including those who have a responsibility to keep children and young people safe, in line with the expectations of The Promise, and the need to uphold children's rights under the United Nations Convention on the Rights of the Child (UNCRC), we would welcome plans to produce a version of the codes that children, young people and families can access to assist them to understand what they can expect from these practitioners. This could include a video or audio version of the codes, as well as published in a form that can be accessed easily on a mobile device including smart phones, so that anyone can access the codes readily, whenever they need to. Guidance around what the codes look like in practice – scenarios and good practice examples – would also help embed the codes into everyday practice, by enabling these to be more understandable within varying contexts. It is important that any resources aren't overprocessed, or too long in length or duration.

It is our understanding that the proposed new codes will be out for full consultation early next year (2023). To ensure their relevance, shared ownership, and credibility, we strongly recommend the new codes are coproduced alongside practitioners from across the social services workforce, and users of these services. To enable people with lived experience to input and codesign the new codes, a longer reviewing and redesign period is needed. Such a co-productive process will take time but provides a real opportunity to shift ownership of the codes back to workers, individuals and families using services, rather than the system. An excellent example of where this has been done elsewhere is the Scottish Secure Care Standards in 2020. The codes were written, designed, and agreed by young people with personal experience of secure care. A dedicated, accessible website about these standards was then developed especially for young people and their families, with all the standards listed in both written and audio format.

## Aligning with a complex landscape

There is a real opportunity during this refresh, for the codes to become more closely aligned with the <u>Health and Social Care Standards</u>, <u>The Promise</u> and the <u>UNCRC</u>. Scotland has such a complex and fast-changing policy landscape, so it is important that any further updates to practice, policy or frameworks are aligned, rather than risking fragmentation and/or adding circumstances that could cause confusion for practitioners.

A consultant to CELCIS who we engaged with throughout the writing of this response reiterated the importance of alignment. They spent time in care themselves as a child, went on to graduate and practice as a social worker and recently has become a foster carer, and reflected on how the codes of practice are both utilised and 'felt' from many angles. They highlighted implementation gaps (the persistent gap between policy intentions and practice 'on the ground'). If new policies and frameworks such as the refreshed codes of practice are introduced without the necessary implementation support, awareness raising or training for practitioners, then the new approaches are unlikely to be incorporated and embedded into practice enough to lead the change we aspire create.



# **Workforce Training and Continued Professional Development**

Practitioners: Even practitioners with a high knowledge and skills, still require continuous professional development, and crucial to this is the infrastructure to support workforce development and, in turn, workforce planning. To enable people to work and train in a context of changing legislation and new guidance, it is critical that the workforce throughout the sector is supported, and has training, quality supervision and coaching. Everyone needs continuous support to be clear about their role and how to continue to perform to the high level expected.

A focus on workforce competencies that attend to the ways in which practitioners are recruited and selected, is also important. High quality services and practices should not only be defined, but there must be support in place to ensure people are trained, supported, and observed, to meet this quality standard over time, with the goal of improving the experiences and outcomes of people they are working to support.

However, it is important to emphasise that training and CPL (Continuous Professional Learning) alone are not sufficient to build the confidence and competence of workforces. A service which establishes clear requirements for training alongside a clear expectation for 'on-the-job' quality supervision and observational coaching, is fundamentally important to the learning and skilling of the care workforce and to the quality of their practice. Although there are several core skills and areas of knowledge that are essential for any worker to be competent in - trauma-informed and relationship-based practice, for example - there are still multiple areas of setting-specific and specialist training that will be required for certain roles, for example, in residential childcare.

# Employers' codes and embedding workforce support

Further detail on how the workforce will be supported is required in the employers' section of the codes. The tone of the employers' codes should be supportive and demonstrate an engaged approach which goes further than the basic requirements. For example, in the current codes for employees there are phrases such as 'build relationships' and 'maintain trust' – these also need to be included in the employers' codes in relation to both workers and people needing support too. This is especially important in the context of the COVID-19 pandemic, as the workforce at all levels has been working beyond the requirements of their roles to fill gaps in support. Working this way is not sustainable in the long-term, and significant recruitment and retention issues have already emerged across the health, social care, and social work sectors in Scotland. The urgent need to support the workforce must be realised and recognised within the codes, with any feedback received from practitioners around this review of the codes being considered.

The Promise also recognises the need to support the workforce and suggests that providing adequate time for effective, flexible, day-to-day, and more regular structured support, supervision, and reflective practice, is vital in caring for all the workforce so they can better care for others. Without proper supervision and support, the workforce is more likely to feel isolated, vulnerable and risk averse.<sup>vii</sup>



To meet the needs of those using their services, this means that the workforce must have the necessary support through line management arrangements and within meaningful supervision in order to cope with the emotional impact of their practice. viii It is important to highlight that the SSSC codes of practice are just one aspect of the support infrastructure for social care workers in Scotland, and other support measures such as a more manageable workload are equally important. This support must anticipate that members of the workforce will also be impacted by factors outside their work, such as the COVID-19 pandemic or the cost-of-living crisis, and support for their mental health and wellbeing must incorporate these needs too. The impact of line management and supervision being insufficient can result in harm to a practitioner due to vicarious trauma, which may impact on the quality of the care they are able to give. ix There may also be ramifications for the recruitment and retention of skilled staff, for example residential childcare staff, which then impacts on the provision of consistent, relationship-based support that children need. Considering the ongoing recruitment problem, any way in which the codes can be used to promote a career in social care as a positive option is to be much welcomed.

Thank you for providing us with this opportunity to submit written evidence in response to the consultation. We would be happy to provide further information in respect to any of the areas discussed here.

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<sup>1</sup> Children's Social Work Statistics, Scotland 2020-21, Retrieved from: https://www.gov.scot/publications/childrens-social-work-statistics-scotland-2020-21/pages/5/

ii Looked after' and 'looked after child' are the terms used in current legislation to refer to a child or young person who is cared for under a formal arrangement with a local authority. It has a specific legal meaning, but wherever possible, the more inclusive term 'care experience' is preferred.

iii https://www.gov.scot/publications/fairer-greener-scotland-programme-government-2021-22/documents/

iv Scottish Government (2020), Retrieved from:

vi Miller, E and Barrie, K (2022) Setting the Bar: towards an indicative maximum caseload for Scotland's public sector social workers, Social Work Scotland vii The Promise (2020) Retrieved from: https://www.carereview.scot/wp-content/uploads/2020/02/The-Promise.pdf

viii Colton M and Roberts S (2007) Factors that contribute to high turnover among residential child care staff, Child and Family Social Work, 12 (2), 133-142; Furnivall J, Wilson P and Barbour R (eds) (2006) Only connect: addressing



the emotional needs of Scotland's children and young people: A report on the SNAP Child and Adolescent Mental Health Phase Two Survey, Edinburgh: NHS Health Scotland

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