



Response to the Scottish Government Discussion Document – 'National Health and Social Care Workforce Plan'

March 2017

CELGIS (Centre for excellence for looked after children in Scotland), based at the University of Strathclyde in Glasgow, is committed to making positive and lasting improvements in the wellbeing of Scotland's children living in and on the edges of care. Taking a multi-agency, collaborative approach towards making change, CELGIS works alongside leaders, managers and practitioners to break down barriers and forge new paths in order to change thinking and ways of working with everyone whose work touches the lives of vulnerable children and families.

General Comments

We fully recognise the need for thorough, thoughtful workforce planning across the entire health and social care sector. Changes to demographics, with our population living longer, necessitate planning to meet changing need, and we welcome the opportunity to contribute our views to this discussion.

Whilst we recognise the discussion paper focuses on the workforce across all health and social care services, our primary concern is with the workforce related to children's social care services. As of July 2015, there were 15,404 looked after children in Scotland. In addition, a total of 2,751 children were on the child protection register (of whom 798 were also 'looked after').¹ While the circumstances, needs and views of looked after children and their families are rich and varied, all have experienced major difficulties in their lives. A significant number will have experienced multiple, serious adversities, including neglect, abuse and pre-birth trauma. The backgrounds of many feature socio-economic disadvantage, drug and alcohol misuse, and domestic violence.² Due to a complex combination of economic and social issues, many children and families in Scotland experience such precarious lives, acutely vulnerable to instability, neglect, abuse

and, as a result, the risk of significant state intervention (with children becoming 'looked after' as perhaps the most serious outcome). Failure to respond early and comprehensively to these children's needs leads to adverse experience compounding adverse experience, with the impact (personal and societal) felt across the individual's life course. For Scotland to have a positive future, from the health and wellbeing of its population, through to its national economic output, there must be a focus on securing safe, nurturing and educationally rich environments for every child, supported by parents and carers whose own complex needs are being assessed and met proactively.

The benefits of taking an early years and preventative approach in terms of public sector planning and spending are clearly supported by the policy context. The 2011 report of the [Christie Commission](#) clearly articulates the need for preventative action to tackle the root causes of inequality and remove demand from the system.³ The national framework to secure the wellbeing of all children, [Getting it Right for Every Child](#), is an explicitly preventative agenda, with objectives of delivering the right help, at the right time, in the right way to children and families. Workforce planning clearly forms a crucial part of realising what this policy promises, and requires a comprehensive understanding of the holistic needs of children, young people, families and communities. As such, a broad conception of the workforce is required, not restricted only to ensuring the provision of qualified social workers, but a range of services such as family support, early learning and childcare, third sector and community development. As an organisation which exists in large part to support this workforce, CELCIS will be pleased to offer further input and insight if this would be useful.

[The Children and Young People \(Scotland\) Act 2014](#) (the 2014 Act) introduced a number of changes which have implications for workforce planning. Part 6 of the 2014 Act increases the amount and flexibility of early learning and childcare available to all 3 and 4 year olds, and to vulnerable 2 year olds. Part 9 places corporate parenting duties on a range of publicly funded organisations in respect of looked after children and care leavers, increasing the breadth and depth of support available to those groups of children and young people. Part 10 extends eligibility to aftercare assistance up to an individual's 26th birthday, and Part 11 introduces 'continuing care' provisions, through which eligible care leavers have the opportunity to continue with the accommodation and assistance they were

provided with before they ceased to be looked after. Part 12 of the 2014 Act increases the support available to children at risk of becoming looked after. In order to meet these legislative requirements, and achieve the Scottish Government's aspiration that Scotland will be the best place in the world to grow up, each of these provisions requires planning and resource to ensure quality, with a critical emphasis on workforce planning.

Our response to relevant consultation questions

1. Are these roles [national, regional and local activity/roles suggested in the discussion document] the right ones, or do you have an alternative model? What steps will be needed to ensure these proposals are fully effective?

Undoubtedly, there are particular roles which must be held, and activities which must take place, at national, regional and local levels. Of critical importance to this working well is the presence and functioning of effective feedback loops^a between each part of the system. Through ongoing effective feedback, complementary national, regional and local approaches can be developed, implemented and maintained, which will ensure coordination and the ongoing removal of barriers to the provision of services to those in need.

The views and rights of service users must be respected and taken into account for service planning. For Community Planning Partnerships (CPPs), this means having an in-depth understanding of how the current system is working to support children and families, assessing evidence of which approaches are meeting the needs of children and families, and using this information to inform workforce planning. Legislative duties enshrined in the 2014 Act provide a framework for joint planning in which a commitment to workforce planning can be shared and prioritised at all levels. Health boards and local authorities are jointly and equally responsible for Children's Services Planning under Part 3 of the 2014 Act; and both partners have duties and responsibilities in relation to Children's Rights under Part 1, and Corporate Parenting under Part 9. With such frameworks already in place, efforts should be made to ensure they are implemented effectively, and there is

^a Practice to Policy Feedback Loops are PDSA cycles designed to provide leaders and policy makers with information about implementation barriers and successes, so that a more aligned system can be developed – for further information please refer to the [AI Hub](#).

no additional unnecessary bureaucracy from any new workforce planning requirements.

2. How can organisational and individual collaborative working be improved, and barriers removed, so that workforce planning can be effectively co-ordinated to ensure people get the care they need where and when they need it, nationally, regionally and locally?

Legislative requirements of corporate parents provide a framework to facilitate this for looked after children and care leavers. Part 9 of the 2014 Act, and associated [statutory guidance](#), sets out the legal duties and responsibilities of a range of public sector bodies (including health boards and local authorities) as corporate parents to all looked after children, and care leavers. As well as responsibilities to promote the interests of looked after children and care leavers, corporate parents also have a duty to collaborate with one another where doing so will safeguard and promote wellbeing. Full implementation and governance of corporate parenting, including a consideration of workforce planning as a collaborative corporate parenting responsibility could provide the necessary ethos and culture shift to achieve this.

3. How should workforce data be best collated and used to undertake workforce planning in an integrated context based on current approaches of a nationally-led NHS system and a locally-led care system?

We fully support the assertion made in the discussion document that 'intelligent and insightful data is crucial to workforce planning'. Workforce data relating to the Scottish social services sector has been routinely gathered and published in an [annual report](#) by the Scottish Social Services Council (SSSC) for the past 8 years. Whilst these publications identify useful 'key messages', they tend to be standalone statements rather than conclusions based on analysis. The interrogation and analysis of the data, and any resulting recommendations are principally absent. The SSSC held [Workforce Intelligence Events](#) in late 2016 to engage with the sector regarding what data they generate, and what else could be useful in the future. To work from an evidence base, decisions relating the workforce planning must be made based on the thorough analysis and interpretation of data, and this as an area in need of continued further attention.

4a. How might employers and other relevant interests in the Health and Social Care sector work, jointly and individually, to identify and tackle recruitment and retention issues, ensuring priority gaps are identified and addressed nationally, regionally and locally?

Funding arrangements for posts within commissioned services are likely to impact on recruitment/retention of staff. Community Planning Partnership areas should be encouraged to build longer term financial planning into their Children's Service Plans, to ensure services are available for families and employment opportunities are attractive for staff. This would require the Scottish Government to look at how it allocates resources through the budget.

Opportunities and support to pursue qualifications and continuing professional development, as well as options for alternative career pathways must be developed. Within a more flexible framework, individuals with transferrable skills, and suitable qualifying experience could undertake 'fast-track' routes into positions related, but separate, to their original employment. With the right infrastructure and support for staff, such flexibility could allow for career progression and change, rather than lengthy training routes which lead some employees down a rigid career path, with limited options to pursue related careers without starting back at 'square one' as far as training is concerned. Those in family support or residential childcare roles could be supported to remain in the health and social care workforce by valuing and recognising their relevant experience and offering them the incentive of both a career and continuing professional development pathway in these roles.

5. Would it be helpful at national level to have an overarching process (or principles, or framework) for workforce planning across the Health and Social Care sectors?

We would support the development of a national framework with a focus on accurately assessing service user need, and ensuring workforce planning is based on meeting need, rather than resource constraints.

6b. What other issues should be addressed to remove barriers to successful workforce planning in both health and social care?

Employees require clarity about the expectations of them, and support to meet them. The already high levels of knowledge and skills of staff working with our vulnerable children and young people must continue to develop, and crucial to this is the infrastructure to support workforce development (and in turn, workforce planning). With changing legislation, guidance and expectations, it is critical that staff throughout the sector are supported, trained and coached in an ongoing manner so all are clear about their role, and how to continue to perform it to a high level.

Thank you for providing us with this opportunity to respond. We hope the feedback is helpful; we would be happy to discuss any aspect in further detail.

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¹ Scottish Government (2016). [Children's Social Work Statistics Scotland 2014/15](#). Edinburgh: Scottish Government.

² SWIA (2006). *Extraordinary Lives: Creating a positive future for looked after children in Scotland*. Edinburgh: Social Work Inspection Agency.

³ Christie, C (2011). [Commission on the Future Delivery of Public Services](#). Edinburgh: Scottish Government.