



# Progress with Complexity

## The 2003 National Overview Report

The Chief Social Work Inspector's 3rd Annual Report



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The Chief Social Work Inspector's 3rd Annual Report

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## Introduction

Social work services across Scotland continue to be at the forefront of major changes in public services. Most Scottish local authorities now either have in place some other structure than that of a stand-alone social work department led by a Director (who is also the Chief Social Work Officer) or are actively considering different options. This growing diversity of structure reflects the diversity of different local authorities' circumstances. What they share is the realisation of the importance of addressing organisational development in order to deliver the reforms of services that are required and to do so in ways that work best for their communities.

Completed in 2003, this is the third annual report of social work services across Scotland. It includes a national overview and short reviews of services in each of the 32 councils contained in a separate document.

Both documents can be found on the Social Work Services Inspectorate web pages, which appear on the Scottish Executive's website.

(The full URL is <http://www.scotland.gov.uk/about/CS/UNASS/00015838/home.aspx>.)

The annual report is based on analyses of authorities' existing data, plans, reports and reviews carried out by a small Inspectorate team. The team visited all 32 authorities and consulted with them on the overall approach and the arrangements for the visits.

The individual reports that accompany this overview report are as up to date as we could make them, but changes advance daily, and information often lags behind, sometimes considerably. Our aim with the annual report process is to establish a picture of the services and developments in each authority, which is regularly updated and becomes as near to real-time as possible, and is web-based. Our visits to each authority each year provide the basis for an accountability review of service provision, priorities and development, however they are organised. Over the next few years, we will join this process ever more closely with the related bodies and processes for health, education and criminal justice. SWSI has been leading joined-up approaches to regulation and inspection for 10 years, modelling what is required of services.

In the second half of this decade, we expect to see this annual report process evolved further so that rather than reporting on social work services, there are reports on the well-being and development of children and young people, on services for older people and valuing and supporting ageing, for people with learning disabilities, for people with physical disabilities, for people with sensory impairment, and in criminal justice a well joined-up approach across all agencies. These should nest within the frame of community planning, and be well joined-up with community health partnerships.

# The Complexity of the Task

The challenges facing authorities in providing modern and effective social work services are wide-ranging, in the face of:

- demographic change, most significantly growth in the numbers of older people;
- pockets of serious and persistent poverty, unemployment and deprivation in a number of urban areas and, though in fewer numbers, rural areas;
- increasing problems – often associated with deprivation – which individuals, families and whole communities face as a result of drug and alcohol misuse; and
- rising expectations of the reach and quality of support services and significant questions over the sustainability of some policy directions, notably how far the emphasis on increasingly providing care at home as opposed to residential settings can be taken.

All authorities have to confront some or all of these challenges to different degrees, depending on local conditions such as size, resources and the mix of urban and rural areas. Expenditure on social work services has doubled over the last 10 years. Whilst there are significant resource challenges ahead, the main priorities now are not additional financial resources but the best deployment, development and stewardship of human resources – the people – who provide social work services whether working directly for local authorities or in the voluntary or private sectors.

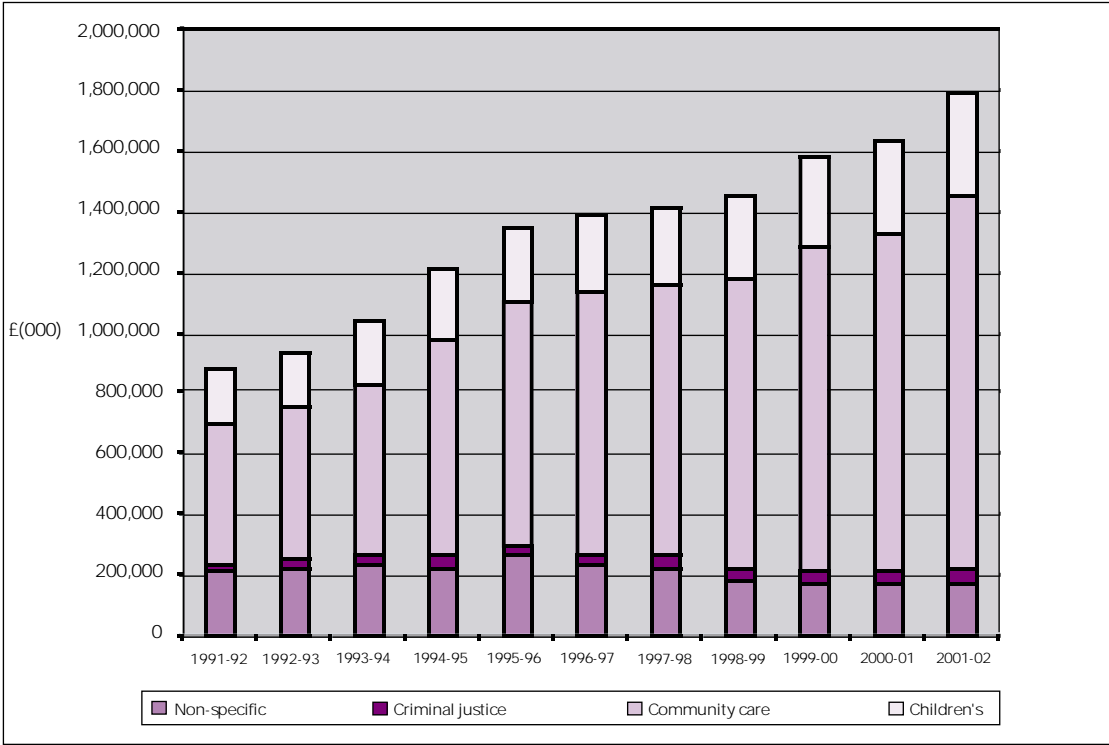


Figure 1: Growth in Social Work Services Expenditure (Gross)

### **Partnerships: the key to service provision**

The voluntary sector is the key partner of local authorities in the provision and planning of social work services in community care, in services for children and young people, and in criminal justice. This vital, central network of partnerships, which also includes the private sector, needs to be maintained with care, and never taken for granted. Local authorities, however they organise social work services, face – and must face up to – significant challenges in securely maintaining these partnerships, in particular in recognising the staff training and back-up costs that voluntary organisations, like others, must meet if they are to retain staff.

Authorities are increasingly required to work in close partnership with other statutory agencies and organisations to provide services which are effective and flexible in meeting local needs. For provision of community care services the Joint Future agenda requires joint management and working with the health service, and authorities have made varying degrees of progress with their health partners. A few are very advanced and beginning to derive positive benefits in reformed and more effective services, while a number are still at an early stage. In some areas, progress is conditioned by limits on health service resources. “For Scotland’s Children” set out the policy of integrating services for children and young people. Some authorities have taken that policy forward with innovative implementation at a good pace, others more gradually and some hardly at all. In Criminal Justice, authorities have made some, though limited, progress in working together in new groupings. Collaboration with Police services has advanced significantly, particularly in respect of sex offenders, youth justice and child protection. The importance of that collaborative relationship with the Police should be considered carefully in deciding on proposals for new forms of organisation designed to create better collaboration with the Scottish Prison Service.

The major agenda for change and development of services to meet future needs makes demands on all authorities, which can be particularly difficult to meet in smaller authorities and those with large rural areas. Examples of changes are:

- shift to joint working, sharper citizen focus and direct use of technology to support service delivery;
- progress towards integration of community teams in areas like mental health; and
- development of services to meet identified gaps and shortcomings in areas like sensory impairment and children with disabilities.

The Modernising Government scheme is addressing the need to invest in well-designed computer-based systems and, in some authorities, it is beginning to make an impact. There is a long way to go both in terms of designing systems that can handle the complexity of information sharing and confidentiality issues across the services, and in terms of investment in hardware. The technology is readily available. System design and staff training are the areas which need most investment. Current issues include:

- cultural barriers to information sharing;
- limitations of existing and inherited IT systems;
- unreliable basic information which calls for a major changeover to a completely new system;
- limited information which leads to over-dependence on anecdotal evidence; and
- inability of existing disjointed systems to interact resulting in a dearth of accurate information on which to plan services.

Increased collaboration between authorities is essential if the challenges are to be met. The arrangements and form of this collaboration will vary for different issues, sometimes two or three authorities collaborating over child protection training, sometimes six or seven collaborating over regional workforce planning or out-of-hours services, sometimes all 32 working together more effectively.

## **Criminal Justice**

### **Context**

This has been the first full year since the establishment of the groupings for criminal justice social work and therefore the first opportunity to report on progress. It is worth bearing in mind that there are only eight groupings and that three unitary authorities and the island authorities have remained as they were. Thus, some authorities have experienced the additional demands of establishing a grouping with partner authorities, whilst others have not. Because of the policy drive for those in groupings to develop their services in partnership, a different approach was taken to the annual report process for criminal justice, where separate meetings were arranged with the partner authorities rather than within the individual component authorities. Where appropriate, therefore, the local authority reports include a grouping report for criminal justice social work. Additionally, we sought to ensure that we addressed the collaborative work that takes place within authorities between criminal justice, child protection, mental health, addictions and youth justice services.

### **Structures**

The requirement for this relatively small element of a local authority's social work service to operate under different structures from the bulk of other services places significant demands on a range of staff both within criminal justice social work and with more senior management and elected members. Structural arrangements for delivering criminal justice social work services vary across the groupings to meet the circumstances of a range of very different authorities. One grouping has appointed a manager with direct accountability for all criminal justice social work services across the grouping, other groupings have delegated management responsibility for specific services across the grouping in varying degrees. Some authorities have formalised partnership arrangements that were previously informal, building on these foundations. Others have established new arrangements. All are to be commended for the work that has gone into establishing the groupings. Groupings are still at an early stage of development. However, there are already some examples of positive collaboration including: the work of the Northern Partnership in taking forward joint training and developing more consistent approaches to service delivery and the work of the Argyll, Bute and the Dunbartonshires in developing and implementing the Constructs programme. Most of the groupings have developed their delivery arrangements for work with sex offenders in partnership. The ongoing national rollout of Drug Treatment and Testing Orders has benefited from the joint planning arrangements in the groupings.

However, these arrangements have also created their own pressures, demanding substantial time for meetings both at a managerial level and also at practitioner level in order to achieve joined-up working practices. It will take time for the results to begin to show although, as noted, there is already evidence of practice development being progressed jointly.

The new financial arrangements mean that there is now a single budget allocation to a nominated lead authority. However, as yet few groupings have agreed a single point of contact. This means that there are difficulties in communicating with groupings as single entities so that individual authorities must still be copied in. A solution to this needs to be agreed soon.

## Workload

The past year has seen significant increases in the demand for social enquiry reports across nearly all authorities (15%). Probation orders and community service orders have also had significant increases (5% for probation orders in 2002-03 following a 19% increase the previous year and a 13% increase for community service). The increased demand for social enquiry reports has placed a substantial burden on resources in many areas. It is difficult to be clear about what is causing this rise in demand. However, the net effect is to erode the resources available to service the increasing number of orders. Whilst sentencers require to have certain background information to assist with their decision making, it may be timely to consider approaches to providing this information that are less resource intensive, particularly for cases where an initial assessment does not indicate a need for extensive enquiries.

We are also aware from our meetings that matching services to assessed risk, and need, and delivering structured programmes, frequently requires a greater investment of resources than was the case for more traditional approaches to servicing a standard probation order. This reflects the impact of increased knowledge and understanding of what is more likely to be effective in reducing re-offending and requires a robust and imaginative approach to making best use of resources.

Despite the increases in demand for core services, it is noteworthy that criminal justice social work largely continues to meet performance indicators at a high standard. For example, all but four authorities achieved 95% or more of their social enquiry reports submitted to the courts by the due date.

## Effective Practice

A major policy drive in recent years has been to deliver interventions in a way that research evidence indicates is most likely to reduce re-offending. All authorities have reported developing their methods to achieve better and more consistent service outcomes. The wide range of communities in Scotland, from densely populated cities to scattered rural villages presents many challenges for delivering structured programme work. The Scottish Community Justice Accreditation Panel has been established to ensure that the structured interventions being used with offenders in Scotland are designed according to the best research evidence of what works to reduce offending and are delivered in ways that ensure they have the desired impact. The Panel has already considered one general offending programme developed by Scottish criminal justice social workers. Work continues to bring this programme to accreditation level. It is a commendable achievement to have reached this stage and there are other programmes in the wings, including a programme for women offenders and one for sex offenders. The indications are that criminal justice social work is beginning to see some pay off for its hard work.

## Public Protection

Criminal justice social work services play a significant role in public protection both in working to reduce the offending levels of those convicted of a range of non-violent and violent offences including sexual offences. Many groupings now have well developed sex-offender programmes and the move to adopt a rigorous and robust programme developed and accredited elsewhere will ensure a consistent high standard of service delivery in this important area of work. Work is currently underway to develop a programme for delivery in areas which cannot sustain a groupwork programme.

As well as delivering services focused on offenders, all local authorities reported on the work criminal justice teams undertook to support child protection work in their area. All have protocols to underpin the importance of partnership work and sharing of information. In most authorities,

criminal justice social workers work in partnership with child protection colleagues to support assessment and other work. However, as demonstrated all too tragically in the case of Caleb Ness, protocols and systems simply provide a framework. Adhering to, and regularly reviewing, a protocol, will not of itself ensure that defensible decision making and best practice in risk management takes place. Effective risk management requires sound and ongoing assessment, planning and intervention based on the best available knowledge which is routinely reviewed and shared with all those involved. However, it should also be seen as an everyday task rather than something special, otherwise the point at which a situation moves from routine to one of concern may be missed. Communication across agency and disciplinary boundaries is vital. Individuals who offend are also part of wider systems and in managing risk, criminal justice social workers cannot afford to operate solely within the narrow sphere of the individual.

### **The Future**

This year's review of criminal justice social work demonstrates a high level of endeavour and much innovative work. The increases in workload suggest that sentencers generally have a positive view of the work being undertaken by criminal justice social work services. It is worth noting that the increases in offending rates in 2001-2002 relate particularly to crimes of violence and carrying offensive weapons; criminal activity that is likely to incur a custodial sentence irrespective of the alternatives made available by criminal justice social work services.

A significant number of prisoners (83%) receive sentences of six months or less. Because of automatic release, this means that they serve less than three months in prison. In this time, prison can do little to address any but the most basic of their needs. On release, these individuals are not subject to statutory supervision, although entitled to a social work service if they request it up to 12 months following release. Criminal justice social work, therefore, has a very limited ability to provide services in respect of them. This is a large group of offenders substantially consisting of those whose offending is persistent rather than serious. Evidence suggests that this is the group of offenders with the potential to be deflected from offending if they have the opportunities to address their offending and the range of issues that underpin their offending.

Importantly, this is the group that we need to target if the present high levels of custody and re-offending are to be reduced.

Criminal justice social work, the Scottish Prison Service and the Scottish Executive have long been concerned about how best to meet the needs of this group. The commitment in the Partnership Agreement to consult on a single agency to deliver both custody and community disposals present an opportunity for open discussion about how best our collective experience of working with offenders can be harnessed together to deliver a modern, efficient and effective service.

Uncertainty and change inevitably add stress to an already complex and difficult area of work. Nevertheless, the good work and progress reported on this year must continue to ensure that social work makes the most significant impact it can in whatever new arrangements emerge.

## Community Care

### Context

Local authorities' expenditure on community care has risen steadily year on year since 1991 in response to a significant increase in volume of need. Demographic predictions indicate that the increase in demand will continue at an accelerating pace for the foreseeable future.

A straightforward increase in the capacity of existing services is not sustainable in the longer term, either from the perspective of those using services and their carers, whose expectations for high standards and individually tailored provision are also increasing, or from the perspective of service providers. Their challenge to meet rising demand – both in quantity and quality – against a backdrop of constricting human resources and new financial pressures will require vision, creativity and flexibility that go beyond positive responses to policy initiatives.

Pressures will continue to grow across the whole spectrum of community care. The recommendations of "The same as you?" report require major investment in community-based resources, as does the implementation of the Mental Health (Care & Treatment) (Scotland) Act. The development of planning mechanisms, standards and staff training for services to people with sensory impairment are necessary to address the identified gaps in provision for these groups. Pressures on acute health services require imaginative responses to increased frailty of older people to prevent unnecessary hospitalisation and ensure appropriately supported early discharge. The development of equipment and adaptation services will require energy and resources in the short-to-medium term, but has the potential to make a significant impact across all community care groups to the quality of people's lives and, by the maximisation of their independence, to reduce demand for some care services.

The Annual Report process has identified both a number of strengths and a number of service areas where progress still requires to be made.

### Services for Older People

The implementation of the Executive's policy on Free Personal and Nursing Care was a very complex challenge set to local authorities at a time of significant pressure on them from competing demands. The commitment with which this challenge was addressed ensured a smooth transition to universal adoption of the policy across Scotland. Where implementation issues have arisen, these are being addressed with equal commitment on a partnership basis between individual local authorities, COSLA and the Executive.

The Joint Future agenda is another example of a major change that has been required, not only of local authorities, but of health services, to improve the quality of life for individuals in the short term, and to provide an organisational framework for increased capacity to meet future demand.

All but one authority operate a rapid response service, although the shape of provision varies, and not all have established the "Rapid Response Teams" as recommended in the Joint Future Group's report. Approximately half of those with a rapid response service deliver this via a comprehensive inter-agency team; the remainder report incomplete geographical coverage due to piloting, inaccessibility (islands) and general transport problems in rural areas.

All authorities (with one possible exception) have responded to the requirement to increase respite care provision. Services range from care home placements to home-based sitter arrangements. The variation of level of service remains considerable.

Provision of intensive home care packages is also variable across the country, with fluctuations in service levels over time, and with most, but not all, authorities reporting no upper ceiling on the costs of individual packages.

All authorities have adopted mechanisms to consult with carers, whose views, to varying degrees, influence service planning and delivery. The use of carers' assessments is inconsistent. Two authorities have no formal mechanism for carrying out carers' assessments, and most authorities report a low take-up. Two authorities have made the carers' assessment a mandatory part of the overall assessment process.

### **Services for People with Learning Disabilities**

There are excellent examples of progress across the country towards implementing the recommendations of "The same as you?" report. The appointment of Local Area Co-ordinators is widespread; alternatives to traditional day centre provision are being developed; and real employment opportunities are increasing significantly in some local authority areas.

24% of people with a learning disability in Scotland are living independently in their own home, with varying levels of support. This compares with 1.8% in Southern Ireland. 47% of people attending traditional day centres get an alternative day opportunity in a typical week.

There remain issues of concern, particularly in respect of the long-stay hospital closure programme. Although this has been well progressed in some areas, only 22 authorities report that they have a financial framework in place to allow for the completion of the programme. Ten authorities either have no agreed framework or are in the process of reviewing this. Uncertainty over the financial framework could put the 2005 resettlement deadline in jeopardy, and this issue therefore requires urgent attention.

### **Services for People with Physical Disabilities**

Thirty authorities have established a Direct Payments scheme, the other two are in the process of implementation. Only one authority has rolled out the scheme to all client groups – others may find the requirement to do so challenging. The availability, and the uptake, of Direct Payments varies very widely between authorities.

Most authorities have substantially reduced their waiting times for equipment, using a variety of approaches, including delegated budgets and joint equipment stores. In practice, use of the stores is often not a fully reciprocal arrangement between health and local authority. Self-assessment appears to accelerate the process, as does the use of mobile assessment units in rural and urban areas, however, these mechanisms are used by only a few authorities. Authorities have been less successful in reducing waiting times for adaptations, with budgetary constraints and the need for joint agreements with housing services the most frequently quoted reasons.

### **Services for People with Sensory Impairments**

Services for people who are deaf or hard of hearing, blind or partially sighted, or deafblind, have tended to develop in an *ad hoc* way and are variable across the country. Planning mechanisms are generally poor, with ineffective capture of data on which to base service development. A number of authorities have quoted the absence of a central directive for their lack of focus in this area. A review of training for rehabilitation workers and the development of service standards for people who are blind or partially sighted are underway, and will be followed in due course by consideration of service needs for people who are deaf or hard of hearing. These developments will provide a framework against which local authorities and their partners will be expected to develop their services for these groups.

### Services for People with Mental Health Problems

There is evidence of a substantial increase in the number of people with mental health problems receiving a community care service over the past few years; a trend which continues to rise. Local authority mental health services are a fertile ground for rolling out the Joint Future agenda, given the level of joint assessment, care planning and commissioning that takes place already, and with social work staff playing an active role in community mental health teams.

There is evidence of the development of innovative, responsive services at a local level in many areas. The response to the Executive's Choose Life Programme (National Strategy and Action Plan to Prevent Suicide in Scotland) has been very positive and should result in the development of a range of local initiatives.

While at a service delivery level joint working appears to be embedded in many areas and growing, some areas are experiencing problems in progressing strategic developments in line with the Framework for Mental Health Services, primarily due to the financial constraints of health service partners. These difficulties are affecting the pace at which resources are being shifted from institutional provision to community-based services. This is a finding echoed in the Annual Report of the Mental Health and Well Being Support Group.

The Mental Health (Care & Treatment) (Scotland) Act represents a significant challenge to local authorities in planning new services and improving delivery. Implementation is being supported by an additional £13m for local authorities; however, it will nevertheless place considerable strain on Mental Health Officer services, as well as on certain areas of community provision. To date, the drafting of implementation plans is patchy, with only two plans completed, 22 in progress and eight not yet commenced. A further £15m is being made available through health boards to assist local partner agencies in developing implementation plans. These should be available by the end of March 2004.

### Drugs and Alcohol

The abuse of drugs and alcohol permeates many aspects of social work services.

The number of adults across the country receiving a rehabilitative service is variable, as is the variation year on year. It is unlikely that the national target of a 10% increase in drug misusers receiving a service will be met. Some authorities with previously low incidences of substance misuse do not have the systems in place to provide a service to rapidly increasing numbers of substance misusers.

Scottish Executive guidance "Getting Our Priorities Right" highlighted the need for more effective links between services for adult substance misusers and child protection services. The report into the death of Caleb Ness reinforced the critical aspect of collaborative working and information-sharing between key services, whether within local authorities or between local authorities and their partners. The implementation by local partnerships of the expectations of "Getting Our Priorities Right" will contribute to the necessary improvements.

The joint funding of Scottish Training on Drugs and Alcohol (STRADA) across health and social work services has proved very successful. However, despite some examples of good service development, progress overall is currently very limited, perhaps stalled. For children and for adults, the problems are not getting less, but greater.

A new approach is called for; perhaps several new approaches. It is not our task here to set out what they may be. That is next year's work. As in several areas of social work services, and

indeed of public services in Scotland generally, there is a certain learned helplessness; a sense that the problems are too big, too difficult to ever really deal with. It is time for a new, more confident approach.

### **The problem of variation**

There continues to be wide variations in the level of service delivered across the country for different care groups and a variation within local authorities depending upon the type of service provided, as is shown in the charts at Annex B and in the individual authority reports.

Variations based on locally-determined priorities linked to assessed volume of need and clearly articulated standards, should be a feature of service delivery. Articulated in local health and community care plans and subject to transparent public consultation, these priorities should indicate to communities what they can expect of public services in their area. However, it is not clear that this is the basis for these variations, and further work should be done by local partnerships to formalise service prioritisation. This may result in agreed changes to service levels in different areas, but would allow for a higher degree of confidence that services were targeted effectively and were of a consistent standard.

There are numerous examples of imaginative joint service developments throughout Scotland. These are not limited to social work and health, but extend to a range of partner agencies, in all sectors, and demonstrate the added value that partnership working brings to service design and delivery. Examples are set out in the individual authority reports.

The benefits of an integrated approach apply to the quality of services to individuals. The protection of vulnerable individuals, whether children or adults, is dependent on co-operation and joint working, not only between agencies, but between services within agencies. Traditional demarcation lines and organisational boundaries mitigate against this shared responsibility. It is critical that integrating community care and health services in pursuance of the Joint Future agenda does not sever or discourage essential links between other services. Improved joint working between health and social care in the field of substance misuse with adults must recognise the impact of adults' addiction on children in their care. A sharper focus on communication between mental health and criminal justice services for mentally disordered offenders must also take account of children's needs.

The benefits of integrated working also apply critically to the capacity of partner organisations to address and meet the challenges that are set to face health and community care services well into the future. Significant progress has been made in the organisational changes required of partner agencies delivering community care services. However, much remains to be done. Local authorities and health services need to give particular attention to their partnerships with voluntary organisations on which so much depends. Without underestimating the challenges that these changes represent for partnerships – culturally and organisationally – their implementation with creativity and imagination represents the basis on which the capacity of services to meet future needs depends.

Joined-up working is not about new organisational forms, replacing one set of boundaries with another; it is about new ways of working, with diverse and shifting organisational forms.

## Children and Young People

### Looked After Children

There are few, if any, more critical responsibilities held by local authorities than to look after the children in their care.

On 31 March 2003, there were 11,388 children and young people looked after by local authorities in Scotland. This represents 1 per cent of all children under 18 and is a similar figure to that in 2002.

However, the rate varies considerably: from 21 per 1,000 children aged 0-17 in Glasgow to 3 per 1,000 in East Renfrewshire.

The cost of a residential school placement can be up to £195,000 a year.

Some authorities have been successful in developing early intervention initiatives to prevent young people ending up in residential schools or secure care and a few authorities have successfully developed reintegration projects to bring young people back from residential schools. The increasing number of exclusions from residential schools has forced social work and education to develop individual crisis packages for some young people.

The number of children in foster placements increased slightly in 2003 but there are still more than 360 children in Scotland awaiting a foster placement. Some of these children are at home or in residential units or schools and are waiting for a temporary placement, others are already in a short-term placement but are waiting for a permanent one. Local authorities often find it difficult to obtain placements for sibling groups, young people with challenging behaviour, teenagers and children with disabilities.

Payment structures for foster carers vary across Scotland. As a way of trying to compete with local employers and private fostering agencies some authorities have developed specialist salaried foster carer schemes. Other authorities have developed payment for skills programmes where qualified foster carers are paid in relation to their level of skills.

There is an increasing number of children and young people in kinship placements probably because of the increase in the number of drug-abusing parents and a shortage of foster carers. Remuneration and support for kinship carers varies across Scotland, and can be contentious.

Over 200 children are waiting to be adopted in Scotland. Many local authorities find it difficult to find adoptive parents for children over 8 and sometimes over 5. There are serious delays in the adoption processes in all agencies.

In only three authorities are all looked after children, including those on home supervision, receiving full-time education; part-time provision abounds and is of vague definition in many cases. Several hundred looked after children and young people in Scotland have no social worker. Many others complain that they see their social worker far too seldom. Around 60% of young people leaving care are not in education, employment or training compared to 14% of all 16-19 year olds in Scotland.

However, progress has been made and there are some good signs for the future.

Most authorities have introduced positive initiatives to improve the educational attainment of young people who are looked after. For instance:

- personal education plans for children and young people who are looked after;
- extra tuition where they are falling behind their peers;
- training on education issues for foster carers and residential staff;
- computers and software for residential homes and foster carers; and
- some authorities have provided arts and craft materials, music and drama lessons and driving lessons for young people.

Almost all authorities now have a designated teacher for looked after children in all schools and some authorities also have link teachers who cover young people in residential units.

More young people now stay with carers until they are 18 or over and many local authorities are actively encouraging this. Many authorities have developed supported lodgings schemes, residential units or flats for young people who are moving towards independence and some apprenticeship schemes or other employment initiatives for young people leaving care.

Health input has improved significantly where there are dedicated health teams for looked after children. However, mental health services for looked after children are inadequate in most areas. There are difficulties in obtaining psychiatric assistance, in recruiting psychologists or contracting their assistance.

### **Child Protection**

All local authorities have considered their child protection practice following the recommendations of the report of the Child Protection Review "It's everyone's job to make sure I'm alright". Several authorities have carried out case file audits or introduced new child protection monitoring systems.

Some local authorities have also initiated positive work in relation to meeting the needs of children with drug misusing parents following the recommendations of "Getting our priorities right" including work with maternity hospitals, protocols for referral of new-born babies, and work on sharing information between child protection agencies and Drug Action Teams. But there is still much to be done. This will be followed up extensively through the Child Protection Reform Programme and the Action Team now established in the Scottish Executive, and is therefore not dealt with in depth in this report.

There were 2,289 children on child protection registers at 31 March 2003, an increase of 13% on the previous year. The rates per thousand show wide variations which are not explicable by other factors – drugs or deprivation. There were 8,033 referrals, an increase of 12% on the previous year. Child protection referrals are counted in different ways in different authorities.

### **Children with Disabilities**

Most authorities provide a wide range of services to children with disabilities and, in general, there has been a decrease in residential respite and an increase in respite services provided in the home, and in playschemes and out-of-school care. Some authorities are developing initiatives to enable children with disabilities to access mainstream universal services such as

Brownies and Guides. However, many authorities also have waiting lists for services for children with disabilities, particularly for respite services.

There appears to have been an increase in the number of children with very high needs who may not have survived infancy in the past. These children require very high levels of support sometimes costing local authorities up to £200,000 a year.

Many authorities acknowledge that the transition from child to adult services can be problematic and some have introduced transition workers to ease the process.

Better integration of children's services will aid resolution of these issues; but their extent should not be underestimated.

### **Youth Justice**

Local authorities are working in partnership with other agencies in youth justice work. Many authorities commission restorative justice services from voluntary organisations and a number commission intensive support services. Some authorities have mentoring schemes.

Many youth justice services are relatively new and at an early stage in terms of evaluation and monitoring but some services have been evaluated and appear to have reduced reoffending. Some authorities have had problems obtaining information on re-offending and have had to rely on self reporting.

Five authorities are using the assessment tool Asset in their youth justice work, while eighteen authorities are using the assessment tool YLS/CMI. The latter assesses the risk of re-offending but not the risk of harm and most authorities did not have a separate tool for assessing risk of harm. Nine authorities are not using any validated assessment tool. The delivery of structured programmes remains very variable in spread and quality.

Most authorities succeed in submitting only around a third of reports on time. Not all authorities are able to make referrals within five working days of the case conferences and some are not able to measure their performance on this standard. Only three authorities achieved the standard of submitting 80% of reports within 20 working days of the date of request.

Around half of local authorities were able to give effect to supervision requirements with no condition of residence within 15 working days of date of issue by the Children's Hearing. Some authorities were unable to provide information on their performance in relation to this standard.

Social work services for children are experiencing the greatest extent of strain and transition, as we noted last year. The raft of new initiatives makes heavy demands on local authorities and the benefits have yet to show through.

## Workforce Issues

### Context

There are just under 37,000 (whole-time equivalent) staff employed by Scottish local authority social work services. This represents around one-third of the social care sector. (See SWSI workforce Intelligence Unit report at Annex A.) Total staff numbers in local authority social work services have risen by 5% since 2001; the total number of social workers has risen by 4% over the same period.

As services continue to expand, vacancies are also increasing, particularly for qualified social workers. From 564 in 2002 to 621 in 2003. The issues are about the management of rapid growth and expectations.

Following the first annual report in 2001, the Scottish Executive launched a 12-point Action Plan for the Social Services Workforce in 2002 since when there has been unprecedented activity at national and local level to develop and take forward a new agenda of workforce development, recruitment and retention.

### Activity

The first phase of the national recruitment and awareness campaign "Care in Scotland" made a significant impact. The response lines and website took 85,000 enquiries and independent surveys evidenced that public awareness and attitudes towards social work and social care improved as a result of the campaign. The success is built on effective partnership across the sector. The "Care in Scotland" brand is adopted by employers in recruitment advertising.

Phase two of the campaign begins in January 2004. It will target specific audiences with a focus on people who want to consider changing their jobs into social work and social care. It will therefore be a campaign directed at people who already have work and life experience, perhaps considerable and thus valuable.

A new strategy is also to encourage talented young people to come into the profession earlier by entering a new honours degree course direct from school or college. In recent weeks, the Social Work World Tour campaign aimed at 14-17 year olds has reached every school and college in the country.

From June 2004, the Scottish Executive will fund an Incentive Scheme to encourage newly-qualified staff to designated posts in areas of shortage. The scheme will offer up to £9000 to those who complete their social work degree and work in an area of staff shortage.

In partnership with COSLA, the Scottish Executive took action to get more qualified social workers into the workforce quickly. Launched in May 2003, the Fast-Track scheme has, to date, brought 97 graduates into the workforce and will fund up to 120 trainees this year. A second Fast-Track scheme is planned for 2004 and others will follow. The scheme is likely to be copied in England next year.

Over the past year, higher education in the sector has been transformed with the development of new standards in social work education, preparations in hand for the new honours level degree and most importantly the establishment of the Institute for Excellence in Social Work Education. This new body – the creation of a unique partnership between nine Higher Education Institutions and jointly funded by the Scottish Higher Education Funding Council, HEIs and the Scottish Executive – has already shown its capability to deliver, imaginatively,

reliably and to a high standard. Working closely with the Scottish Social Services Council, it will be a major contributor over the next decade and beyond as its streams of funded projects flow through (e.g. e-learning, developing ethical and effective practice learning in a much wider range of options) and as it joins up increasingly with professional education initiatives for teachers, doctors, nurses and others.

These measures will continue to attract new entrants and raise the esteem of the profession in the eyes of the public. In addition, £1m has been invested in high quality education for the social work leaders of tomorrow.

To ensure the range of activities is co-ordinated effectively, a National Workforce Group (NWG) has been established. The NWG is chaired by the Minister with responsibility for the social services workforce, Euan Robson. This Group will develop a national strategy and new action plan for the social work and social care workforce. It will look to the future, developing strategy in line with changes in the labour market and the wider economic environment and will advise Ministers on priorities for workforce development across the sector.

The NWG has three core streams of activity:

- promoting excellence in organisational development and human resource management;
- developing a national training and education strategy across the sector; and
- building workforce and labour market information and intelligence that can be effectively applied. To achieve this, a Workforce Intelligence Unit has been established in SWSI.

### Looking ahead

In addition to current activity, a series of new initiatives is planned for 2004. These include the further development of education and training across the sector, the expansion of practice learning and carefully targeted investment in the residential child care workforce which will be based on individual assessments.

The Scottish Executive will continue to promote the image of social services within and outwith the sector. The new care awards to be launched in 2004 are an example.

### Local activity

Local authorities have been key partners in all the national initiatives identified above. However, many authorities have also taken their own initiatives to deal with their recruitment and retention problems which are affecting their ability to deliver services, particularly in children and family teams. A number of larger authorities have introduced "golden handshakes" to attract new staff, and in some cases to retain existing staff. These appear to have been successful in reducing local vacancy rates but they are not a sustainable option. A growing number of authorities are restructuring salary scales to recruit and retain staff and this is increasingly associated with major structural change.

A number of authorities who do not wish to, or feel they cannot afford to, offer financial incentives are looking at other ways to make themselves more attractive to potential employees. These include introduction of flexible working schemes which are particularly relevant to a largely female workforce.

The recruitment issue has focused employers' minds on the importance of "growing their own" social workers through sponsoring existing staff through the DipSW. This will be vital to expanding the number of social workers. Some authorities have made a very strong commitment to making high quality training opportunities available at all levels for all staff.

There are encouraging signs that authorities are preparing to meet the qualification requirements of the Social Services Register for the staff in Phase 1. A number of authorities now have detailed audits of their staff's qualifications. However, the focus is currently on registering social workers who are already qualified. However, there is likely to be a minority of other social service workers who are either unable or unwilling to achieve the requisite qualifications. Redeploying these staff will be a major challenge which authorities need to prepare for.

Most authorities had operational training plans but there was little evidence of training strategies, clearly linked to organisational objectives. Training is still sometimes treated as a dispensable extra, rather than a core business activity. The employer's and employee's Code of Practice sets out an explicit requirement to develop a much stronger learning culture with individual and shared responsibility for learning. Embedding a culture of learning is now a key priority if authorities are to meet the complex demands facing them.

Many authorities have introduced measures to support frontline staff through good HR practices including measures to protect staff working alone or in particularly dangerous circumstances. A handful of authorities have used exit polls to identify problems with the workforce but few authorities systematically seek the views of their staff through staff surveys or other channels. If frontline staff are to be given more devolved decision making, employers need to give priority to improving communication channels at all levels but especially with frontline staff.

There is little evidence of local workforce planning or succession planning although within the decade some authorities will lose a substantial part of their management resource through retirement. However, it is very encouraging that a number of authorities have now established dedicated workforce planning units or staff to take a longer-term, more strategic approach towards workforce planning and development.

## **Race Equality**

All authorities had a corporate Racial Equality strategy in place. However, relatively few of them had actually moved on to tailor the strategy specifically for social work services or taken steps to monitor the use of services by minority ethnic groups. That said, the requirements of the Act has led to the recognition of problems of data collection and ethnic monitoring, particularly for looked after children and procedures were being changed. Most authorities had organised staff training in the requirements of the Act and social work services and functions were being reviewed. A number of authorities with relatively high proportions of minority ethnic groups had already developed substantial translation and interpreting services, with one producing a multilingual video setting out the type of services available. Many authorities had well-established Race Equality Forums which they used to consult stakeholders' views on services; one authority was using three native language speakers to carry out outreach work on their behalf.

## Conclusion

Social work services have moved beyond the crossroads which we highlighted in last year's report. They face major challenges in child protection, of course, but in many other areas also. Meeting those challenges will require organisational and professional leadership of the highest level as services and staff are empowered in adapting to new organisational forms and to the opportunities for excellence these offer. Leadership for the future is essential.

Political and public support for these services is also crucial. It is important to emphasise that some recent reports which have rightly made severe criticisms are analysing events that happened two years or more ago. Yes, change was essential; and change is happening.

Each local authority will make its own decisions about the right political and managerial arrangements for social work services to attune to local circumstances. The idea that there is one right organisational model for managing social work services is finally behind us. However, irrespective of structure it will be important to ensure that measures are in place to deliver high quality social services. The role and position of the Chief Social Work Officer within the organisational structure is particularly important in this respect.

As authorities consider new arrangements, with colleagues in health, education, police and others, two priorities should be emphasised, and they provide the right emphases for ending this overview.

First, whatever the top management arrangements, no improvements will flow unless there is a clear and effective empowerment of decision making and reliable action as close to the user as possible. Many authorities will have to change their first-line systems and middle management arrangements if they are to achieve that. Making organisational changes in terms of top management or political responsibilities is relatively easy. To effect real changes, changes in users' experiences and inter-agency working at the first-line requires concentrated and careful attention to the experience of users and of first-line staff. Listen to them.

Secondly, the voluntary sector is local authorities' key partner in social services. The future development of these services depends very largely on strengthening those partnerships with voluntary sector organisations whether in community care, or children and young people's services, or in criminal justice. They can easily be taken for granted, which won't do. Proactive work to strengthen these partnerships is vital, and in many cases well overdue. Listen to them.

Paying attention to these priorities may yield great benefits.

Angus Skinner  
Chief Social Work Inspector  
December 2003

## **ANNEX A**

### **SWSI Workforce Intelligence Unit Report**

#### **Introduction**

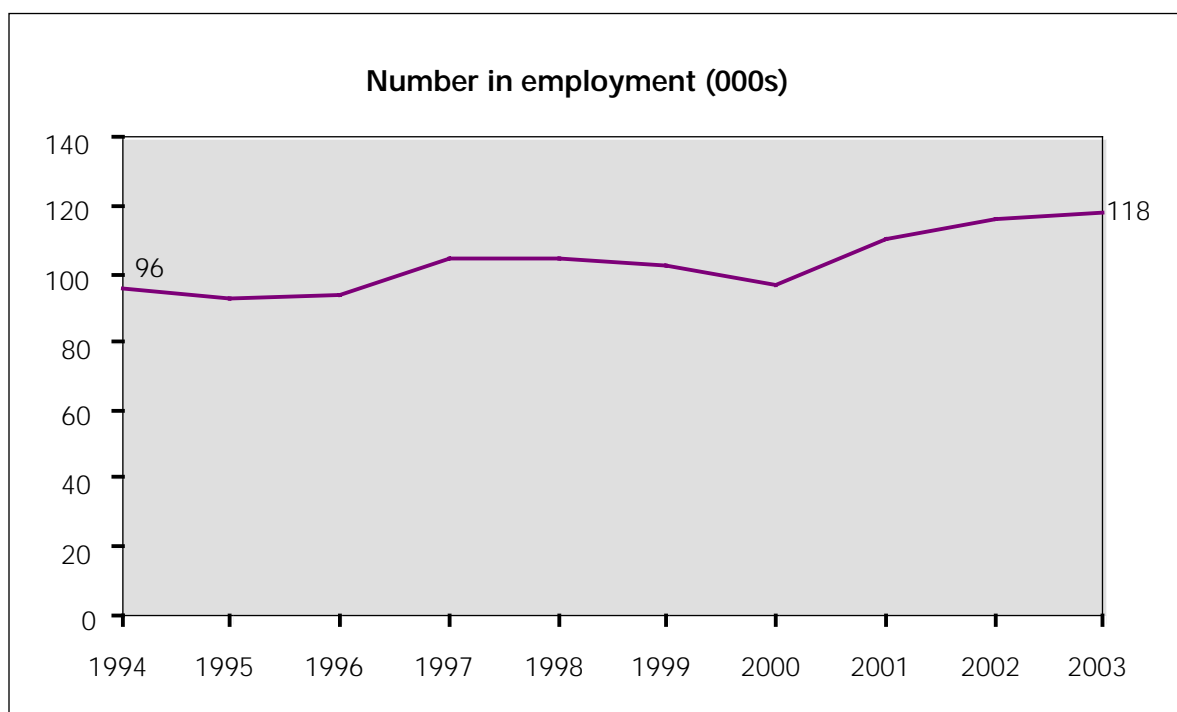
The SWSI Workforce Intelligence Unit has been set up by the Scottish Executive in order to provide labour market information and analysis on the sector. The following summary provides some current information on trends and analysis of the Social Care Labour Market in Scotland. A full report will be available in April 2004.

#### **Overview**

Social work activities employment has been expanding and its importance as a proportion of total Scottish employment has also grown. The recent growth in local authority employment in social work services is therefore set against a backdrop of wider expansion throughout the whole sector. The growth in reported local authority vacancies over the last few years will therefore be partly explained by the pace of expansion since 1999 and future vacancy rates will hinge on whether the demand from local authorities and the independent sector continues to grow and on the rate at which it does so.

Changes in the composition of the workforce also seem evident in terms of age and gender. There has been a significant increase in the proportion of male employment in the sector although initial levels were quite low. A large proportion of the workforce now falls in the older categories and this would reflect the ageing nature of those already in the sector but possibly also expansion in the sector being met primarily by older age groups. The age composition of the workforce is important as a glut of retirements would affect staffing levels and vacancies across the sector not just within local authorities.

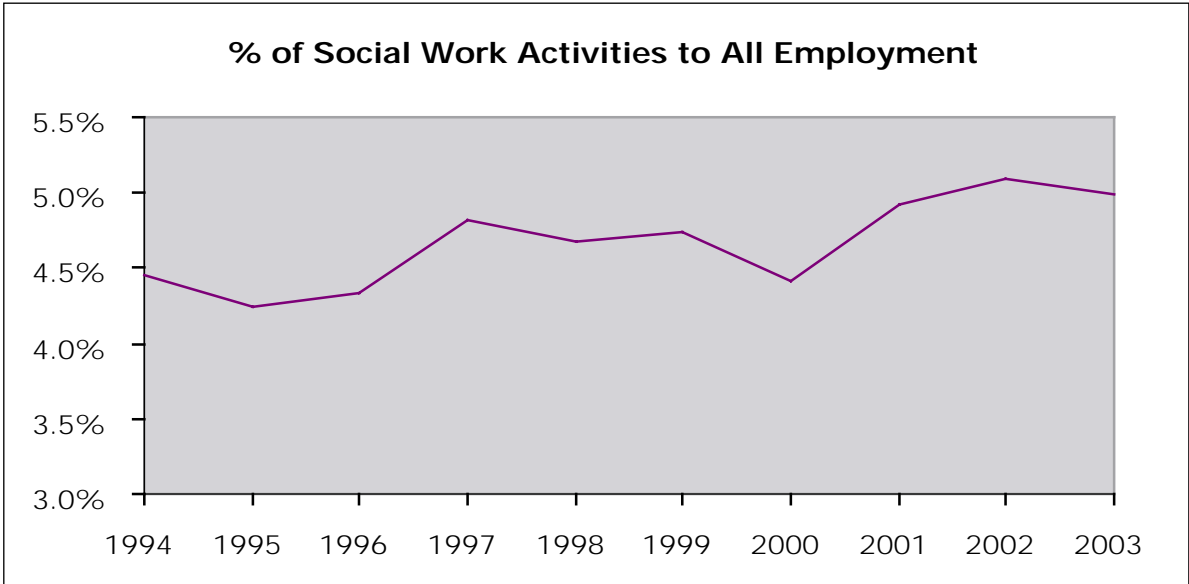
Figure (i)



Source: 85.3 Social Work Activities Labour Force Survey (ONS)

The Labour Force Survey provides an estimate of the numbers of employees working in the Social Work Activities category. This includes employees in the public, private and the voluntary sector and covers all types of job activities associated with the sector. The numbers in employment have been growing over the last decade and have expanded from 96,000 in 1994 to 118,000 in 2003. These estimates are subject to margins of error such that relatively small fluctuations during this time-period cannot be interpreted; however, the trend in the growing size of the workforce is clear.

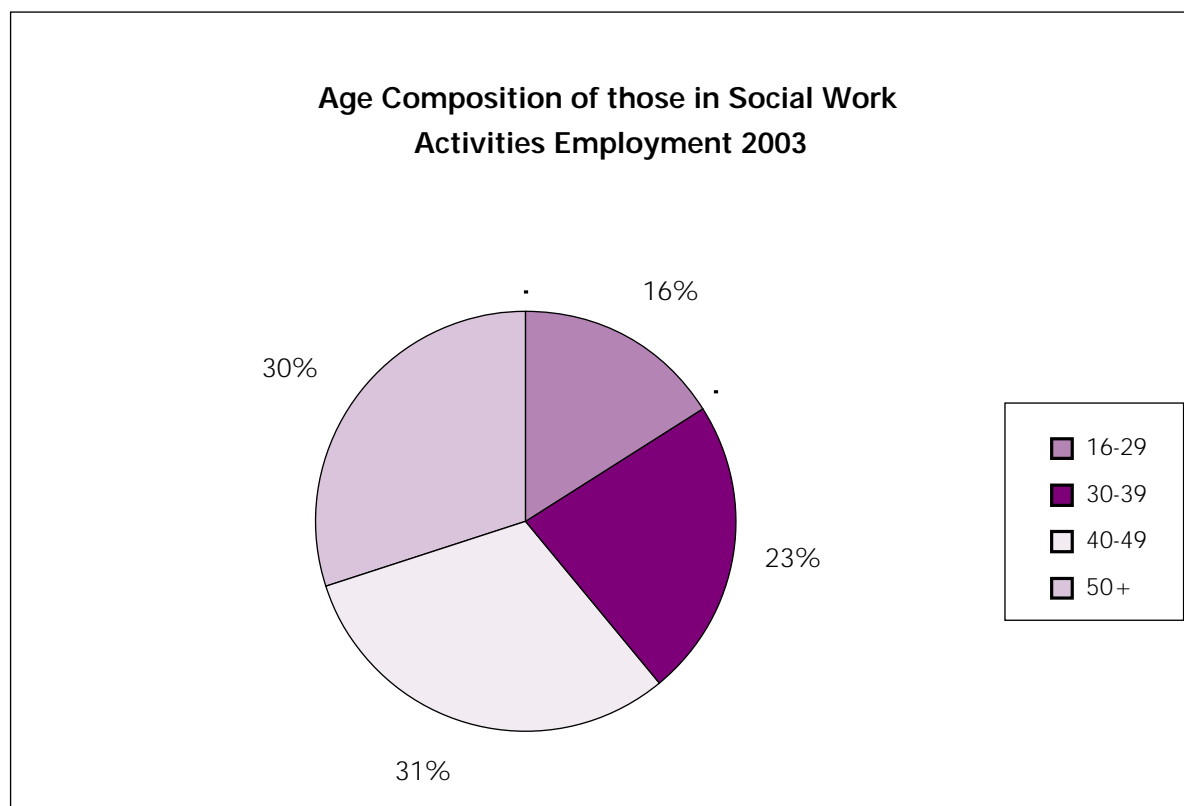
Figure (ii)



Source: 85.3 Social Work Activities Labour Force Survey (ONS)

The proportion of employees in Social Work Activities compared to the rest of the Scottish workforce has also been growing. This provides evidence of the increasing importance of the sector to the economy in terms of employment – Social Work Activities now account for around 5% of total employment in Scotland.

Figure (iii)



**Source: 85.3 Social Work Activities Labour Force Survey (ONS)**

Currently, 61% of the Social Work Activities Workforce is aged 40 or above. Additionally, most of the employment expansion between 1994 and 2003 revealed in Figure (i) appears to have been through this age group. Between 1994 and 2003, the growth rate of numbers employed in the youngest age band was 5.6% compared to a growth rate of 33.3% in the over 50s. These figures could potentially capture a trend in the ageing of the existing workforce but also the expansion of the workforce through entry into the sector by the workforce in the older categories.

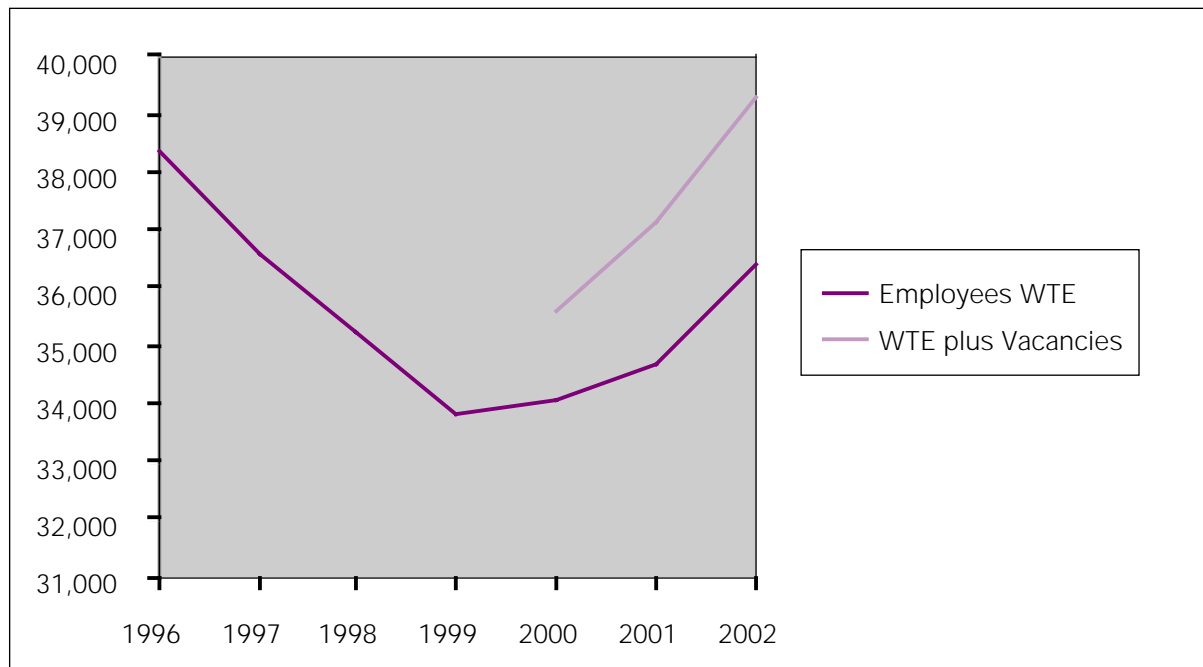
Figure (iv)



Source: 85.3 Social Work Activities Labour Force Survey (ONS)

Both female and male employment levels have been increasing since 1994. Male employment now stands at 24,000 which represents 20% of the Social Work Activities Workforce. This is an increase from 13% in 1994 which shows a significant shift in the traditional composition of the sector.

Figure (v)



Source: Scottish Executive Annual Local Authority Social Work Services Staffing Census

Year	2000	2001	2002
Vacancies (WTE)	1526	2420	2861

It is estimated that local authorities account for around one-third of the total Social Care Labour Market with 36,415 whole-time equivalent employees in 2003. It should be noted that the census data used in this graph do not have the same definition boundaries for the sector as the Labour Force Survey but give an indication of the total of staffing levels in all local authorities in Scotland. The main drawback is that the degree of contracting out is not reflected in these figures which may be part of the explanation behind the dip in staff between 1996 and 1999. It is evident that from 1999 there have been rising (Working Time Equivalent) staff levels. Vacancy figures are available from 2000 and there has been a growing gap between actual staffing levels and desired staffing levels (WTE plus vacancies). Evidently employment levels have been expanding in local authorities but demand has been growing faster than supply which has been reflected in growing vacancy rates. It should be noted, however, that vacancy figures may not give an accurate reflection of labour market shortages because of a range of other factors that may affect the reported vacancy rates.

## ANNEX B

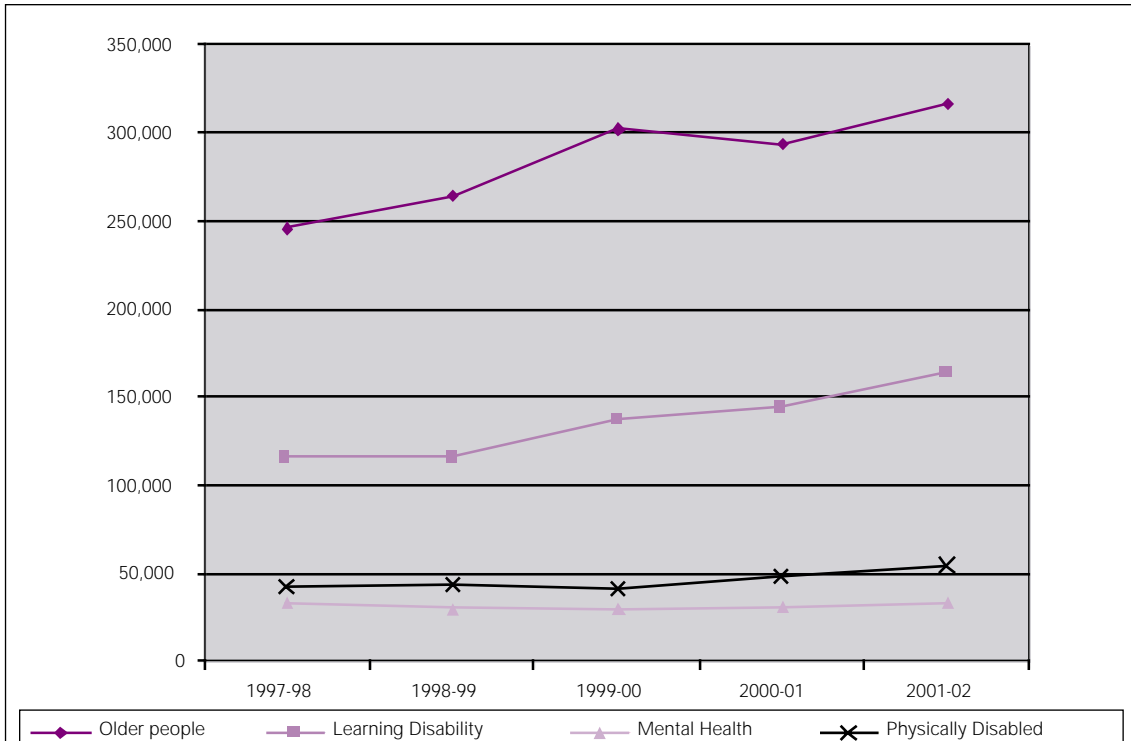


Figure 2: Changes in Community Care Net Revenue Expenditure (£000s)

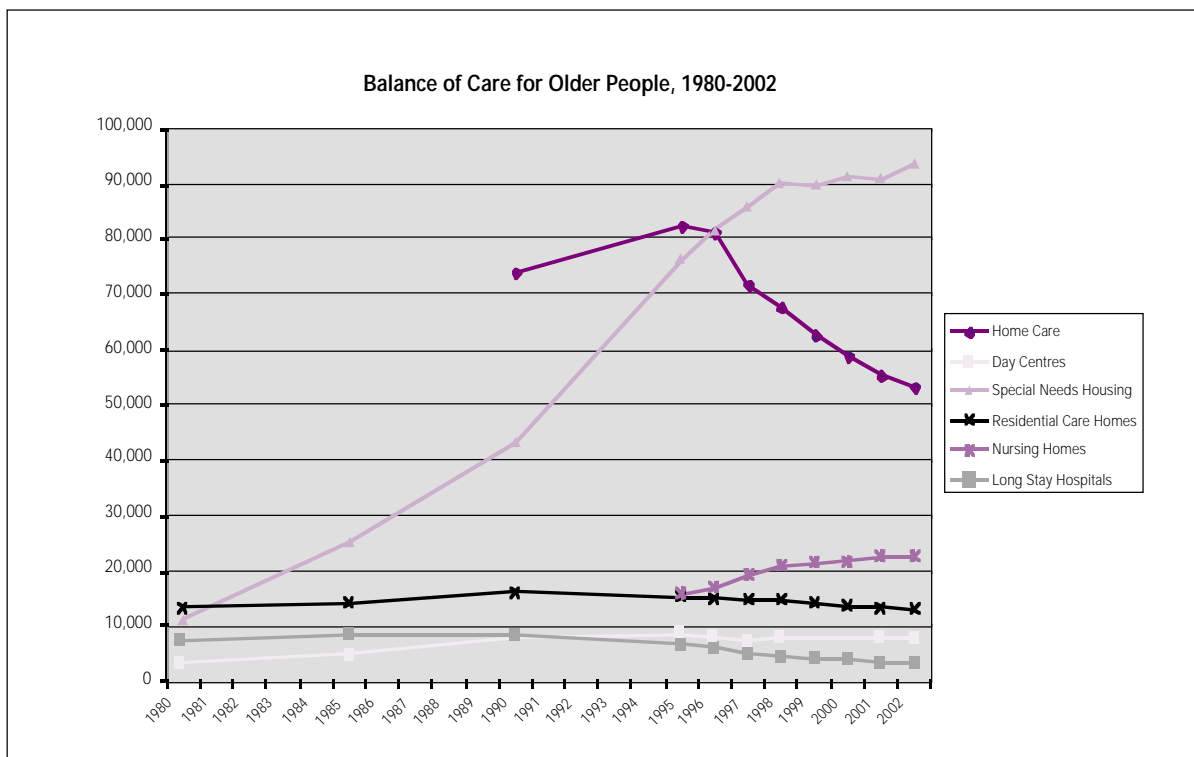
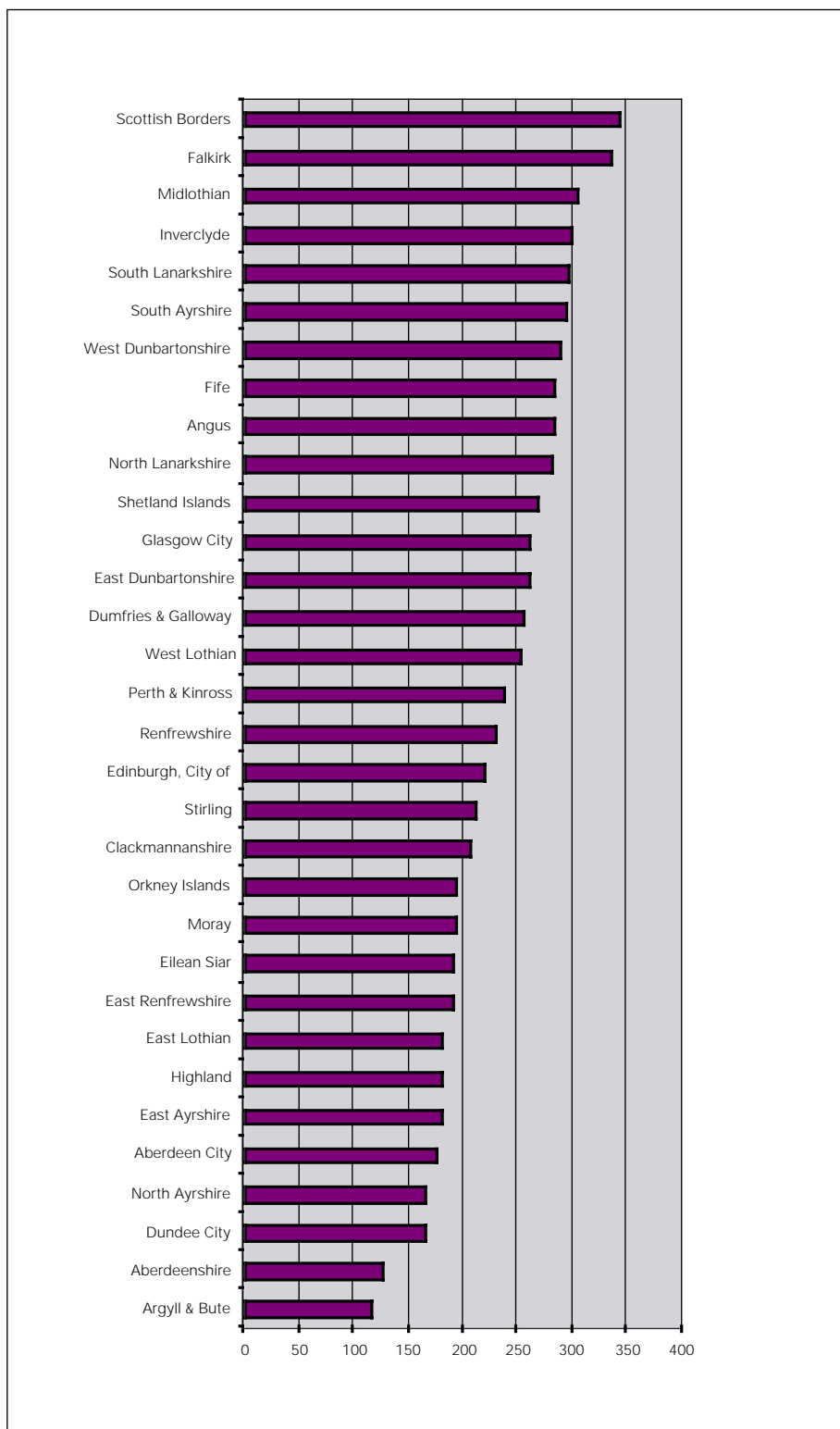


Figure 3: Balance of Care for Older People, 1980-2002



**Figure 4: Number of Older People Aged 65+ per 1,000 Population Receiving a Service, 2001-2002**

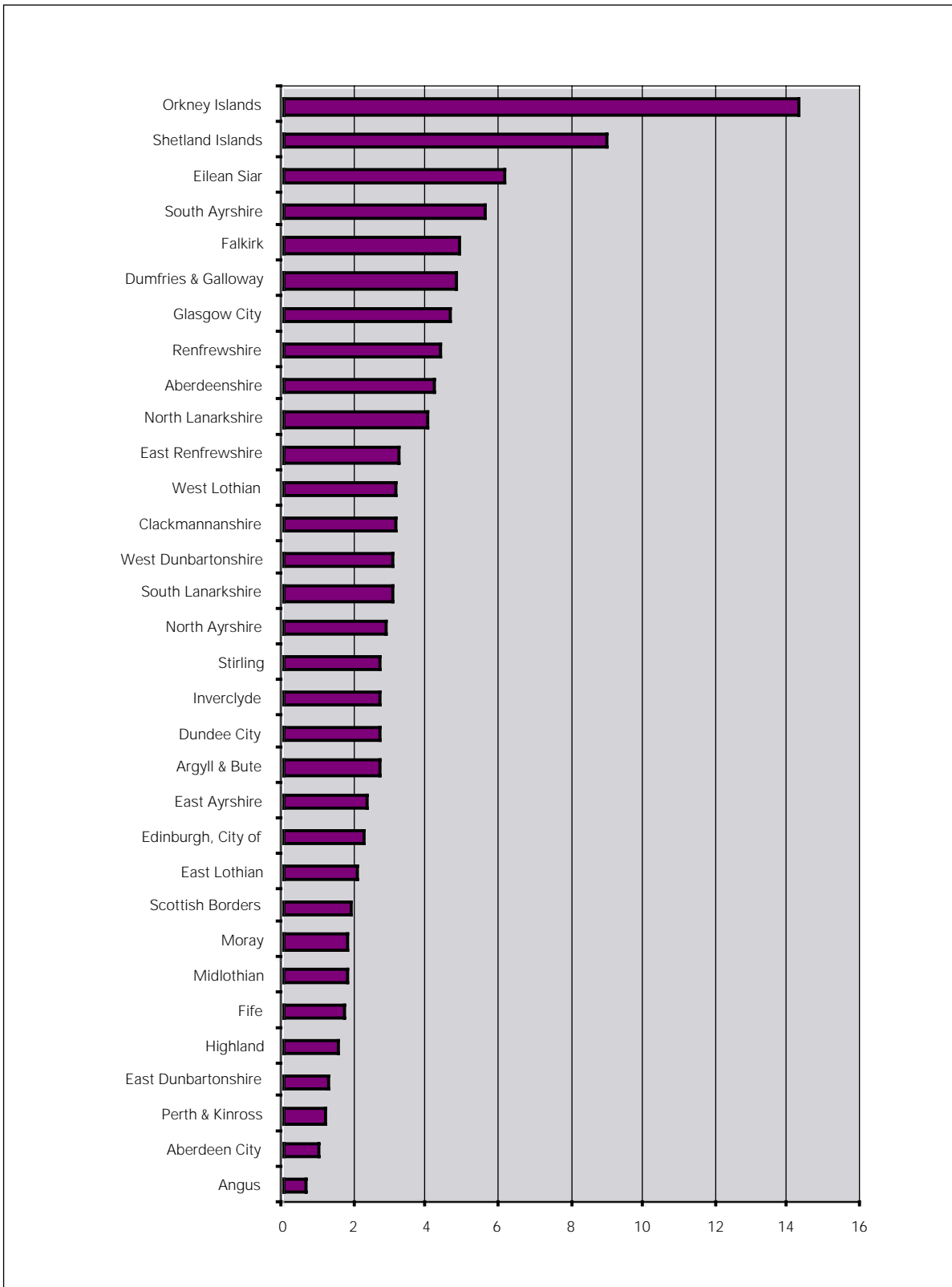
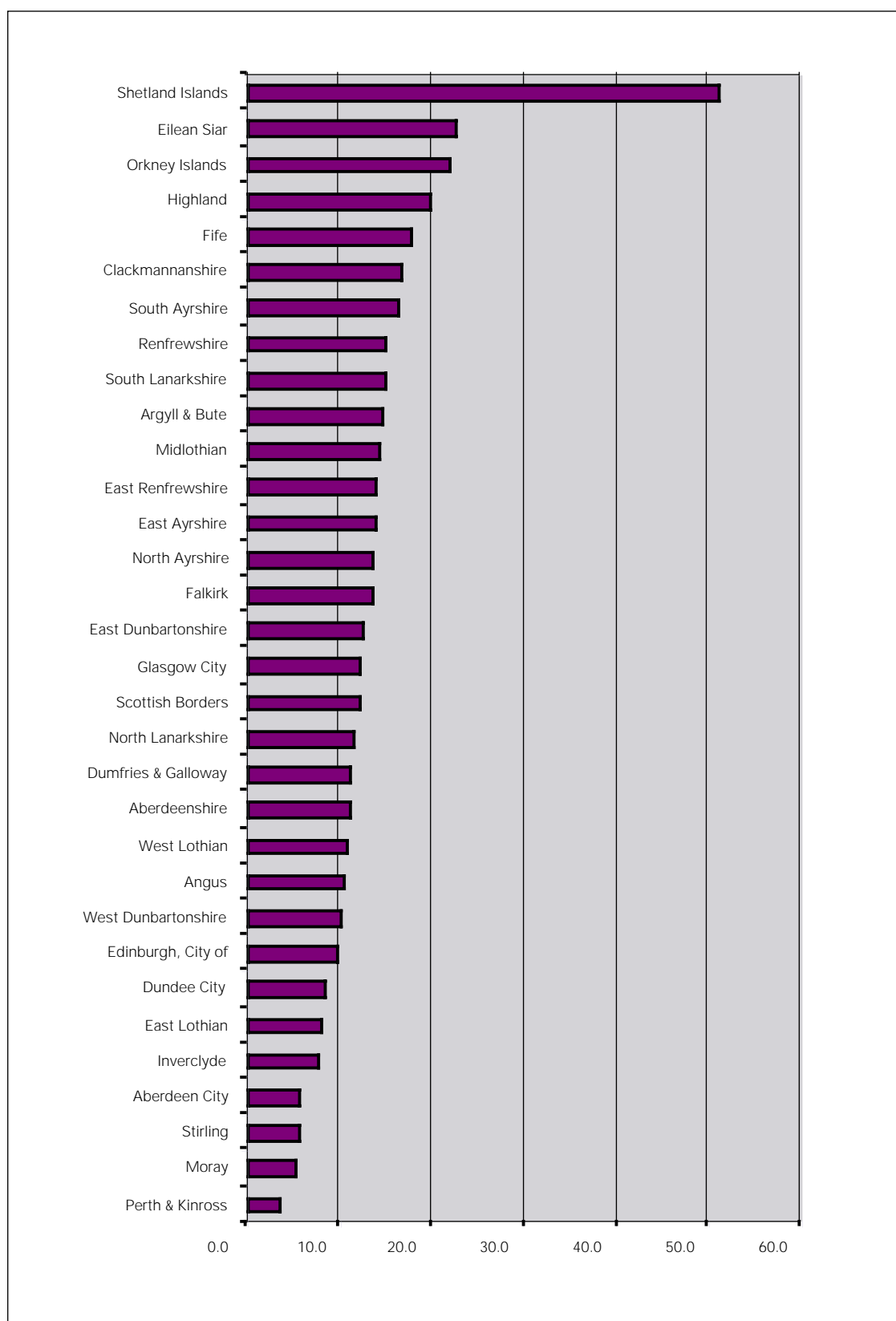


Figure 5: 20+ hrs Home Care for 65+ per 1,000 Population, 2002



**Figure 6: Number of Older People Aged 65+ Receiving Residential Respite Care per 1,000 Population, 2001-2002**

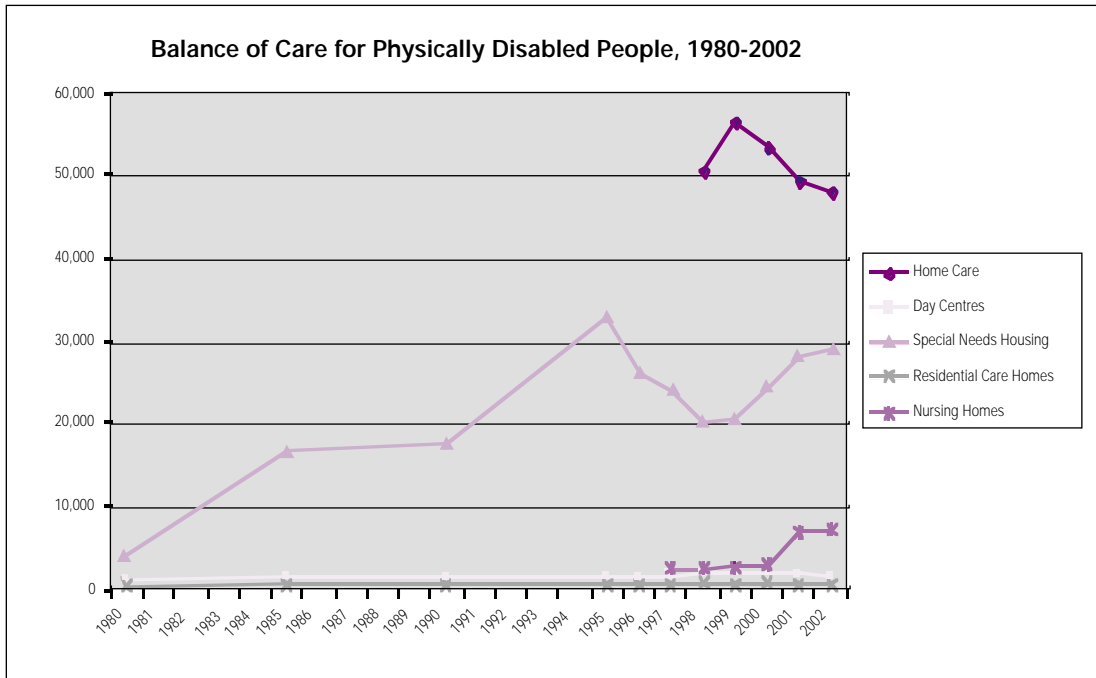
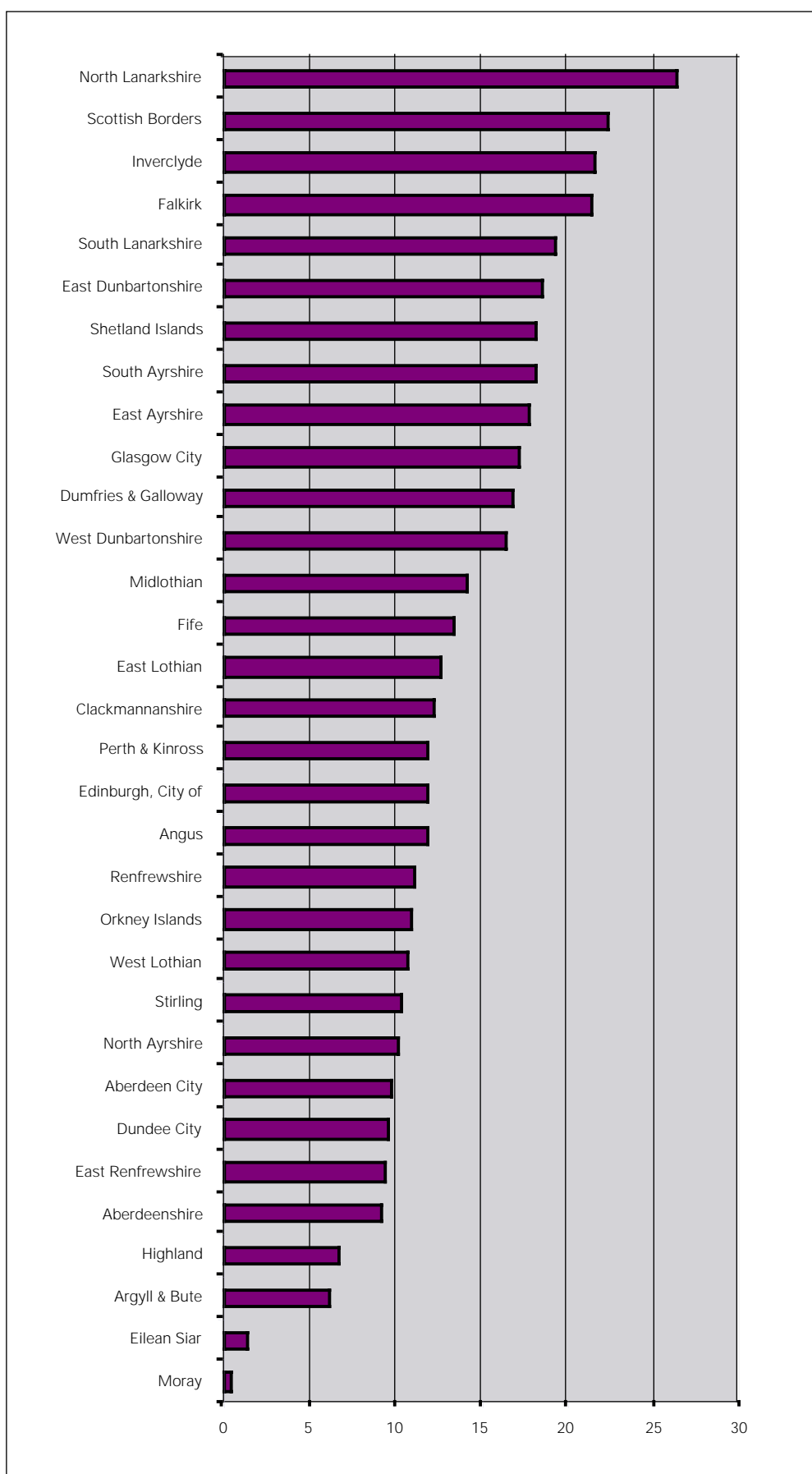


Figure 7: Balance of Care for Physically Disabled People, 1980-2002



**Figure 8: Number of Physically Disabled People per 1,000 Population aged 18-64 Receiving a Service, 2001-2002**

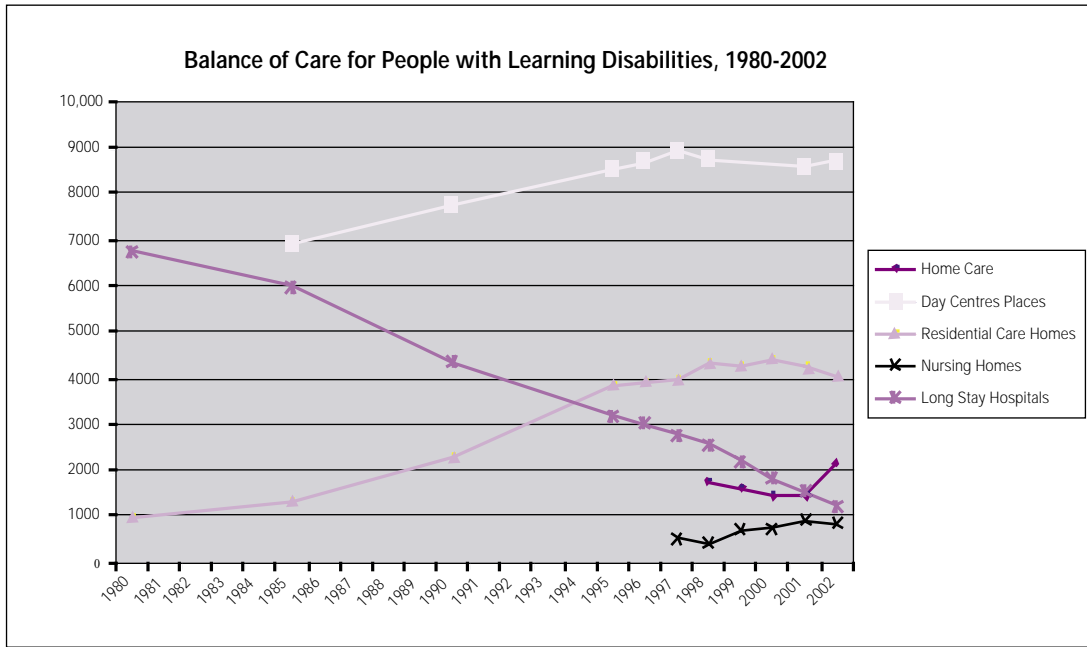
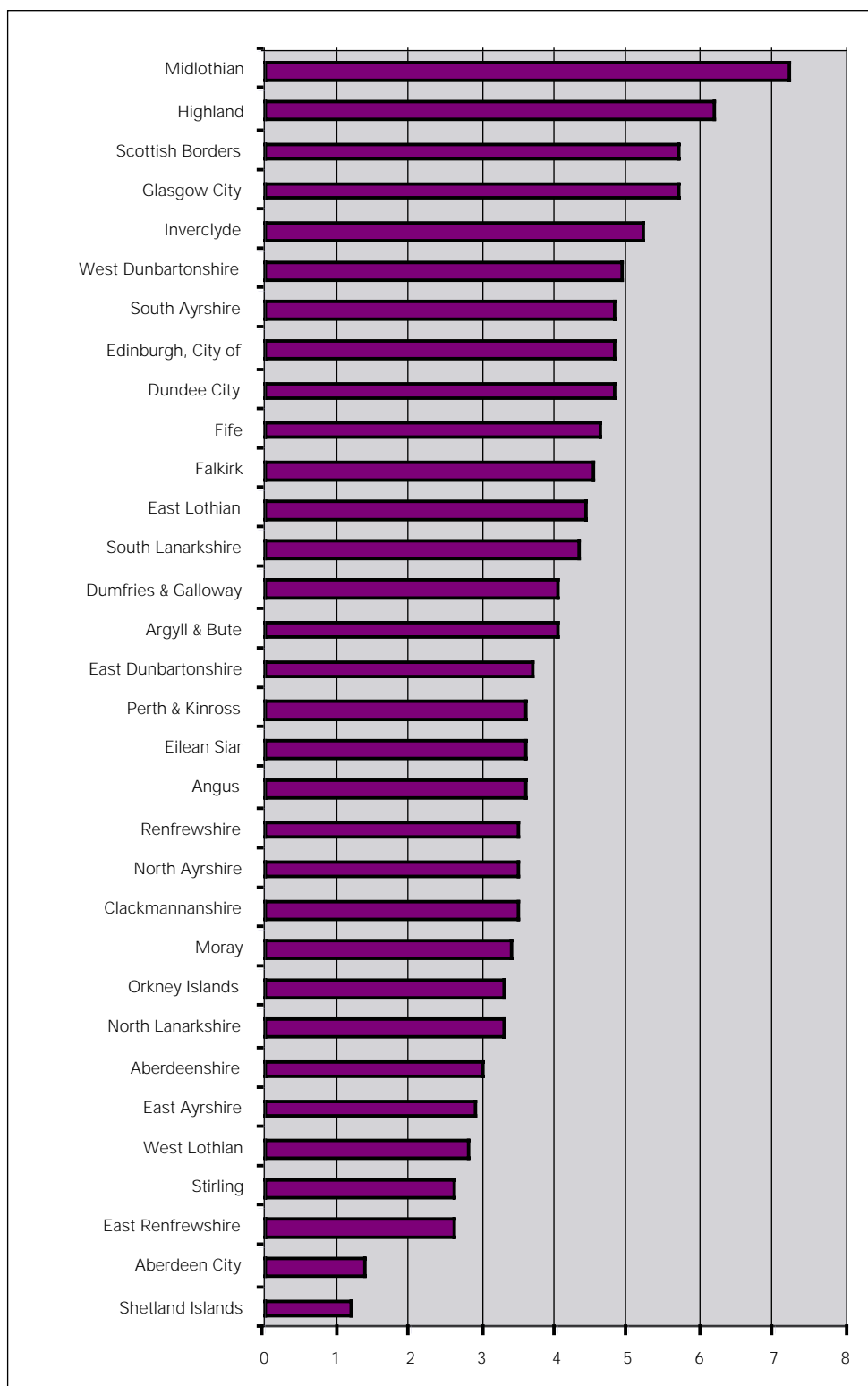


Figure 9: Balance of Care for People with Learning Disabilities, 1980-2002



**Figure 10: Number of People Aged 18-64 with Learning Disabilities Receiving a Service per 1,000 Population, 2001-2002**

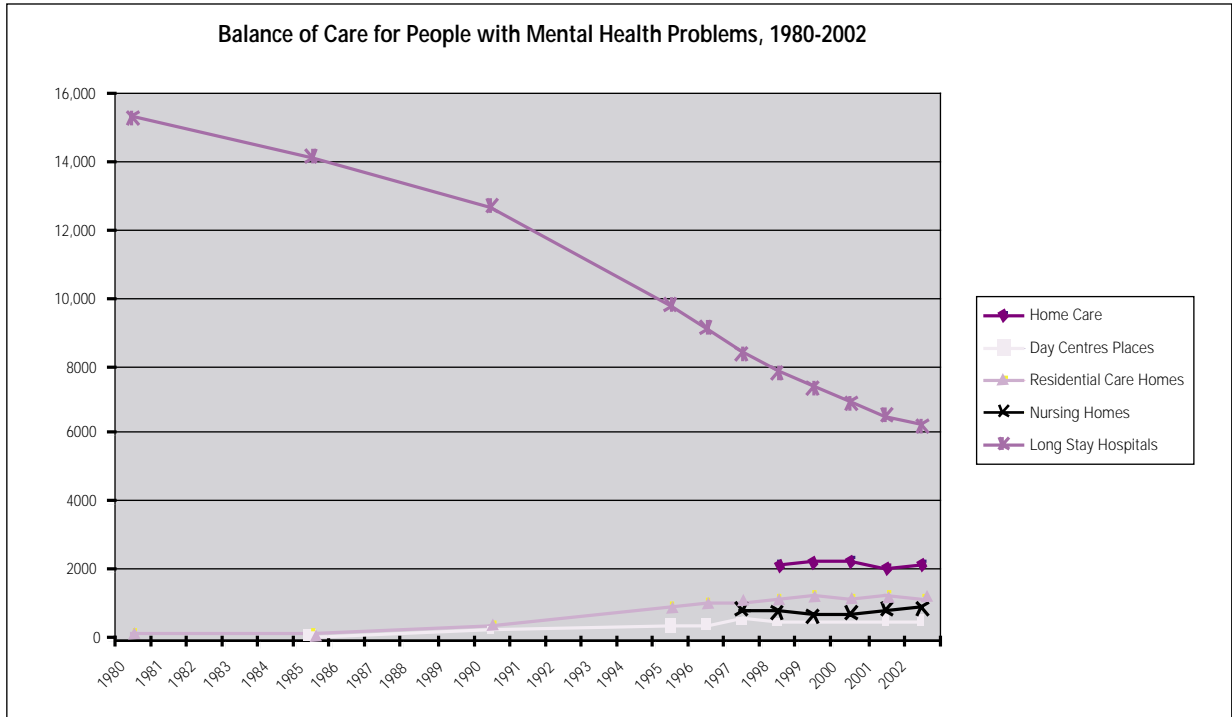
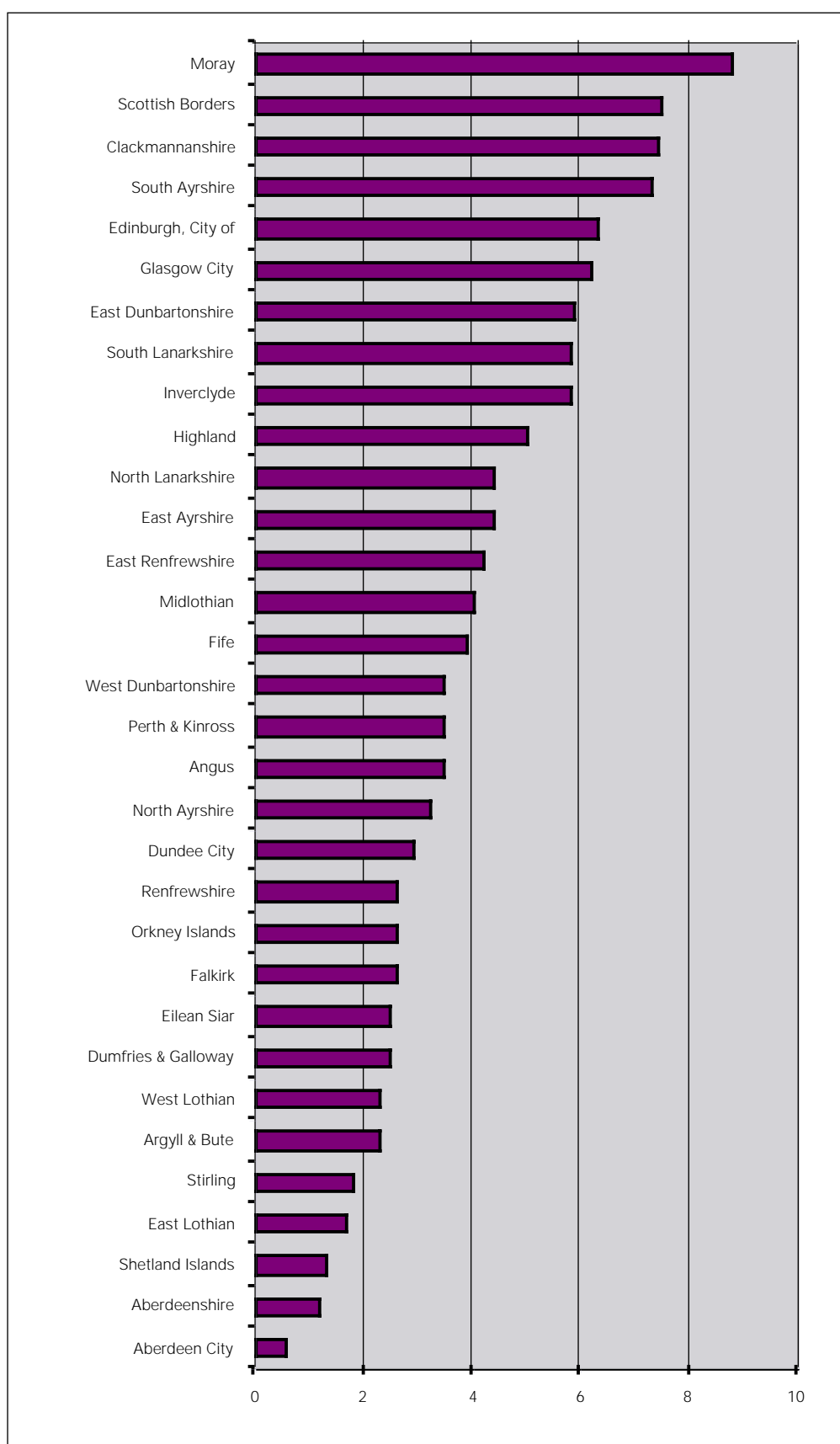


Figure 11: Balance of Care for People with Mental Health Problems, 1980-2002



**Figure 12: Number of People Aged 18-64 with Mental Health Problems/Dementia Receiving a Service per 1,000 Population, 2001-2002**

## Children and young people

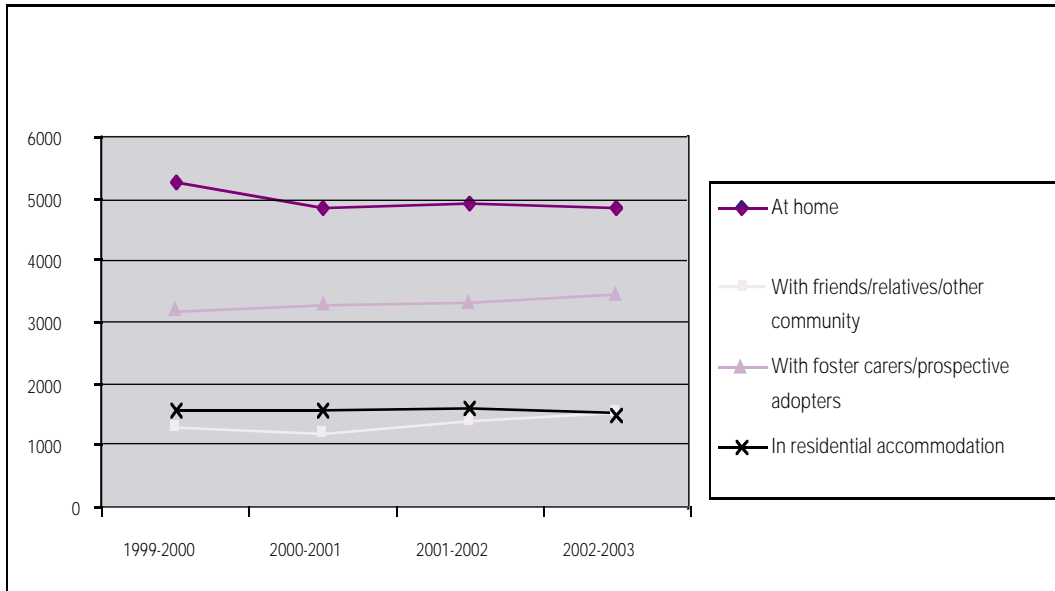


Figure 13: Balance of care for Looked After Children – Scotland

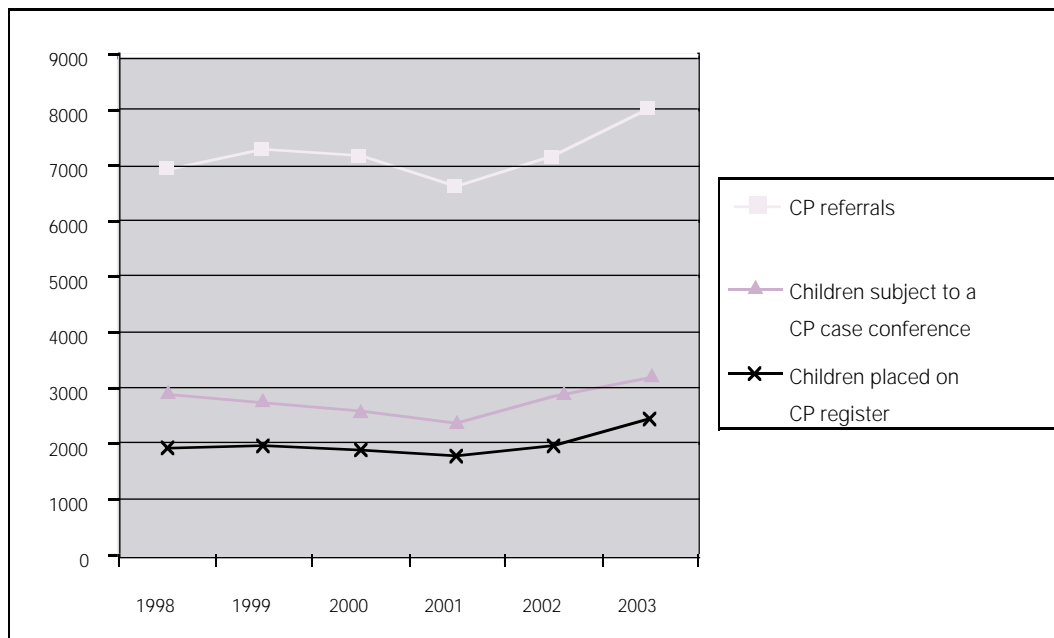
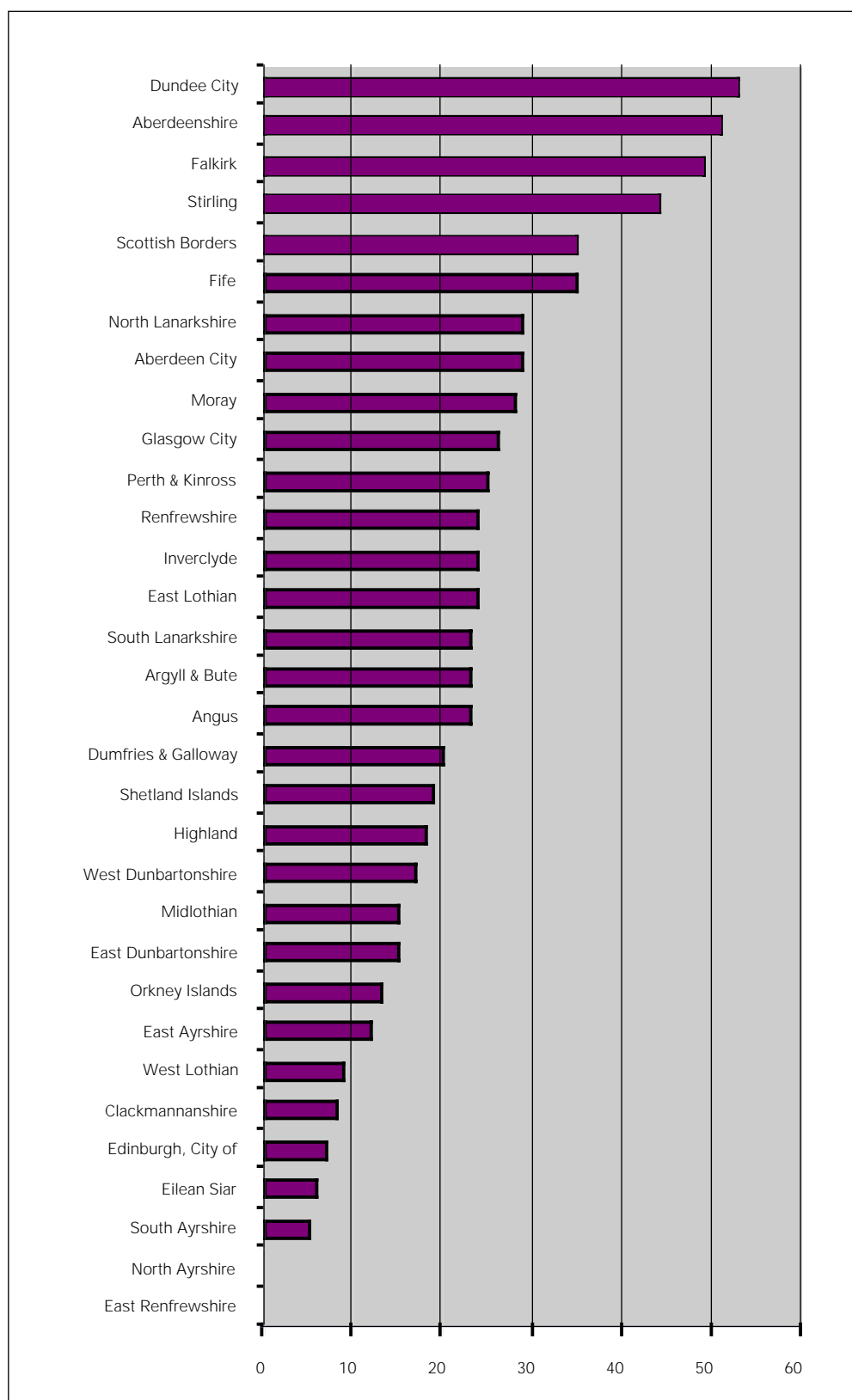
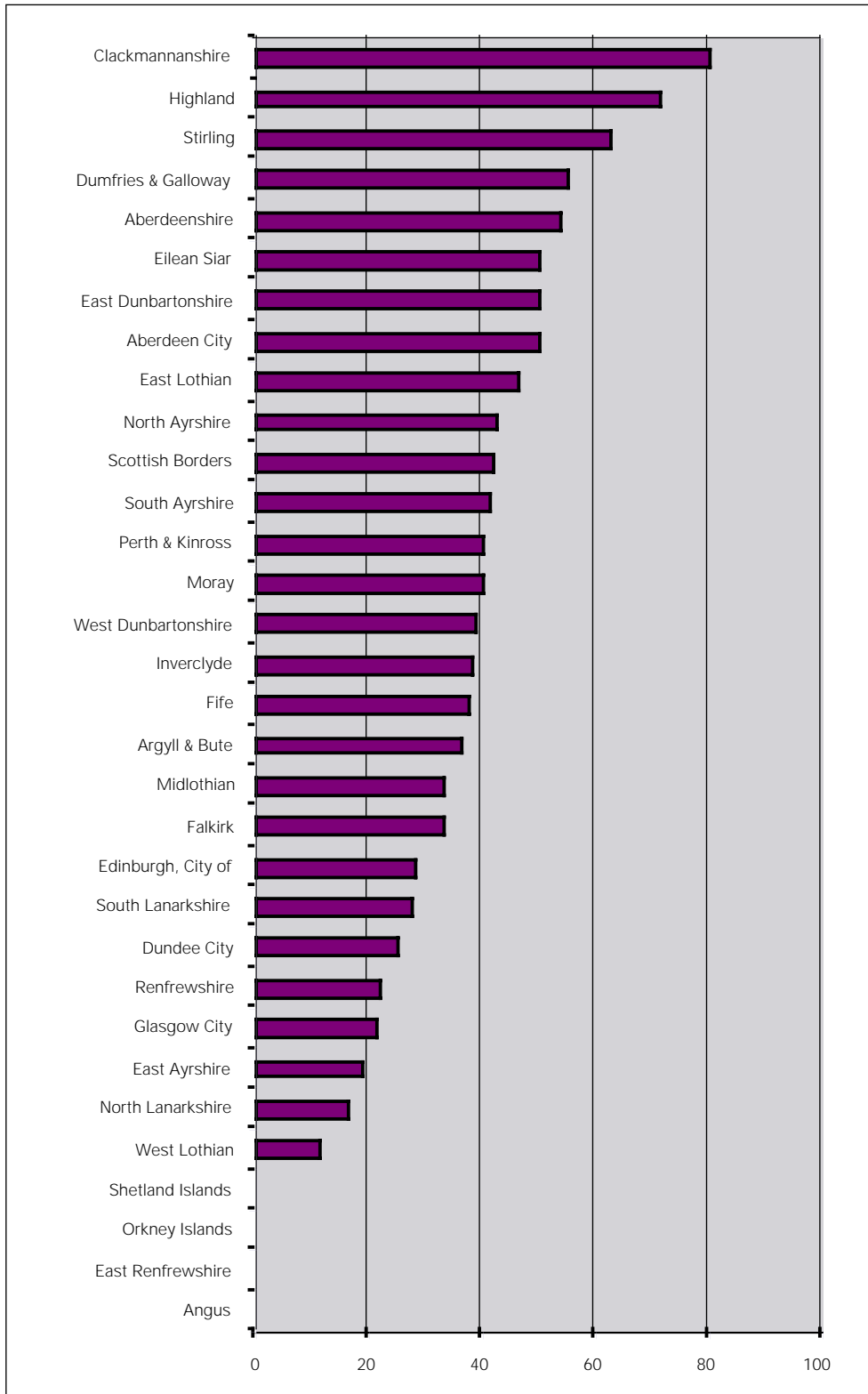


Figure 14: Child Protection – Scotland



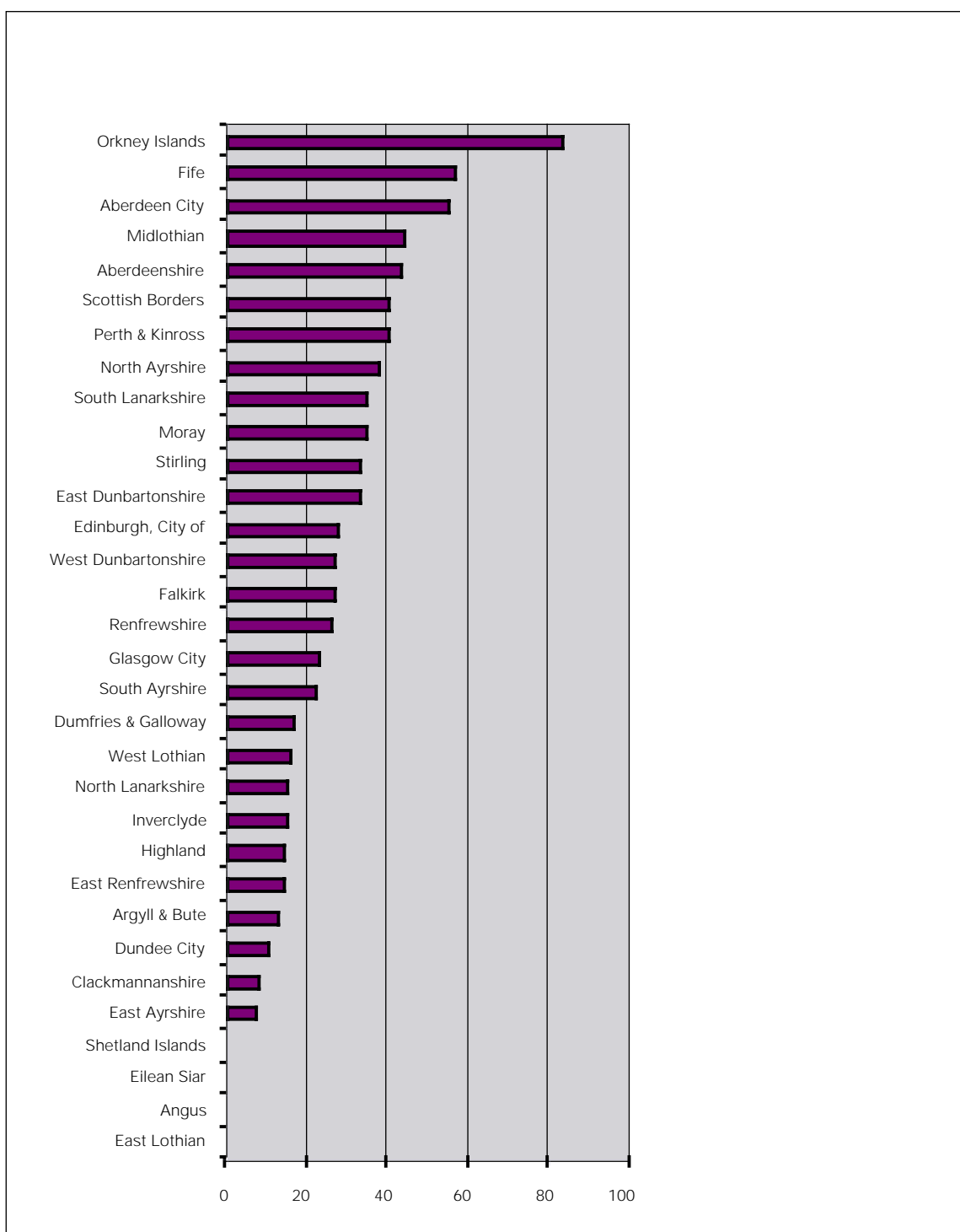
**Figure 15: Percentage of Children with 3+ Placements, 2001-2002**

Note: We have not shown the information for authorities with fewer than five for reasons of confidentiality.



**Figure 16: Percentage of Looked After Children Leaving Care Having Attained Standard Grade English and Maths, 2001-2002**

Note: We have not shown the information for authorities with fewer than five for reasons of confidentiality.



**Figure 17: Percentage of Looked After Children Leaving Care with English and Maths at SCQF3, 2002-2003**

Note: We have not shown the information for authorities with fewer than five for reasons of confidentiality.

## Use of Information Communications Technology (ICT)

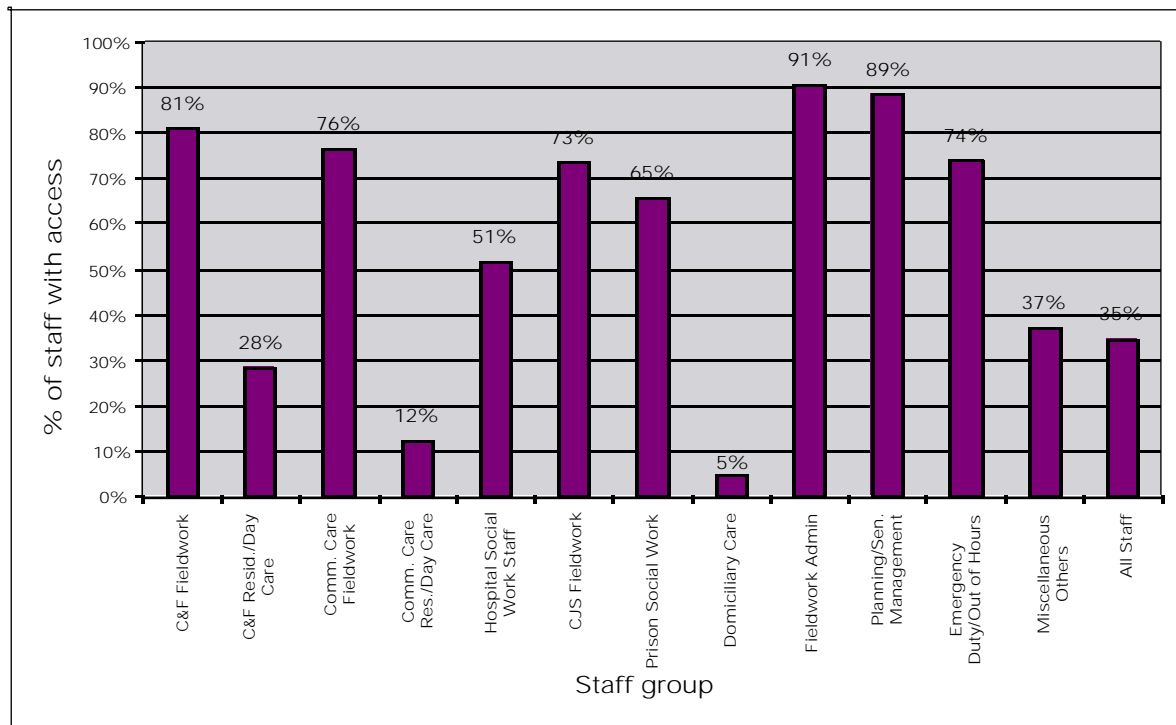


Figure 18: Percentage of Staff with Access to Council Intranet, March 2003

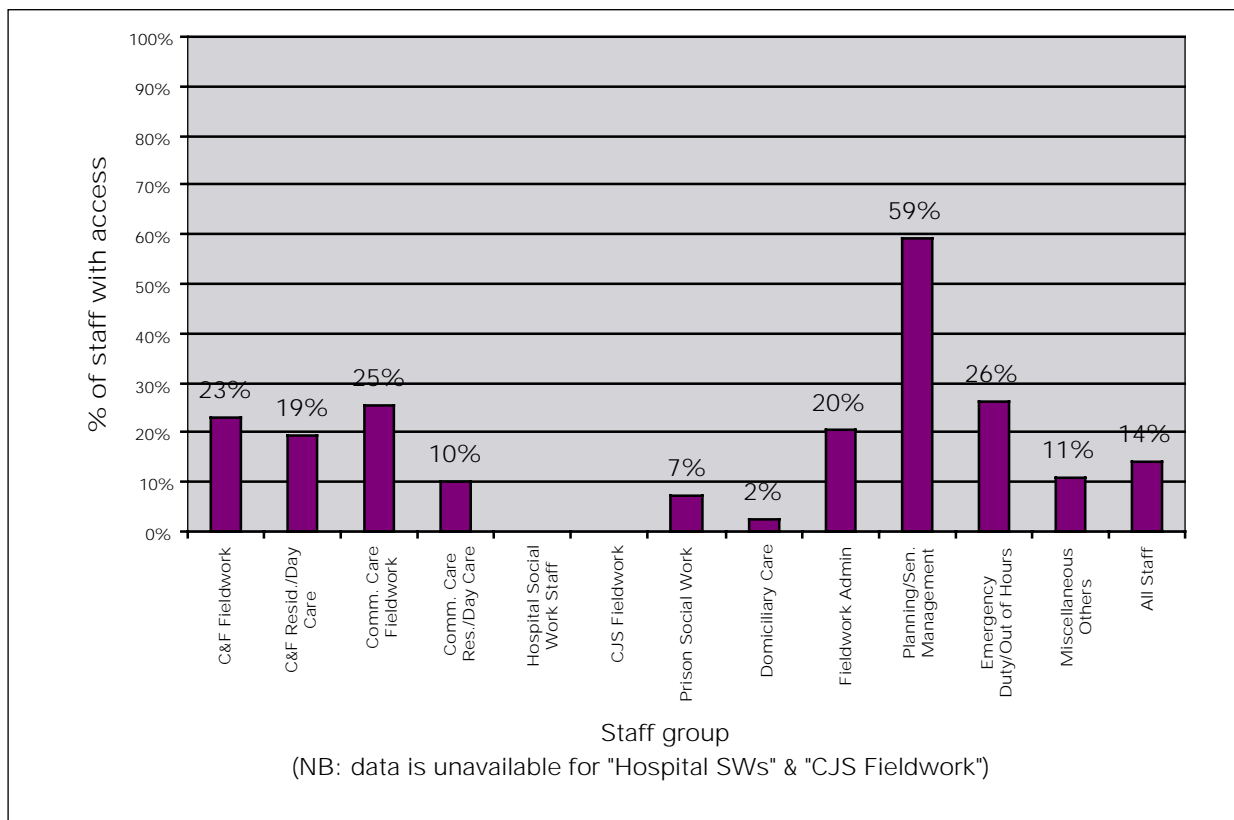


Figure 19: Percentage of Staff with Access to the Internet, March 2003

## Information Sources

Figure 1 SE Finance Returns

### Annex A

Figure (i) Office of National Statistics (Labour Force Survey)

Figure (ii) Office of National Statistics (Labour Force Survey)

Figure (iii) Office of National Statistics (Labour Force Survey)

Figure (iv) Office of National Statistics (Labour Force Survey)

Figure (v) SE Statistics

### Annex B

Figure 2 SE Statistics

Figure 8 Audit Scotland: Performance Indicators

Figure 9 SE Statistics

Figure 10 Audit Scotland: Performance Indicators

Figure 11 SE Statistics

Figure 12 Audit Scotland: Performance Indicators

Figure 13 SE Statistics

Figure 14 SE Statistics

Figure 15 SE Statistics

Figure 16 SE Statistics

Figure 17 SE Statistics

Figure 18 SE Data Standards Project – LA Social Care IT Systems Survey

Figure 19 SE Data Standards Project – LA Social Care IT Systems Survey

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