



ALL PARTY PARLIAMENTARY GROUP ON SOCIAL CARE

6.00-7.00pm, 15 January 2008

Committee Room 6, House of Commons

Attendees

Members

Joan Humble MP (chair) MP

Speakers

Joan Munro	Improvement and Development Agency for local government (IDeA)
Maurice Bates	Association of Directors of Adult Services
Julia Skelton	College of Occupational Therapists
Julia Scott	College of Occupational Therapists

Other

David Drew	MP
Clare Smith	Leonard Cheshire Disability
John Metcalfe	British Association of Social Workers
Anna Ross	Department for Children, Schools and Families
Joanna Mackie	Department for Children, Schools and Families
Emma Mamo	MIND
Judy Welemisky	MHPF
Elena Scherbatykh	General Social Care Council
George Christian	Children's Workforce Development Council
Janis Stout	Care Services Improvement Partnership
Ruth Cartwright	British Association of Social Workers
Jo Cleary	Lambeth Council
Bernard Walker	Wigan Council
Richard Banks	Skills for Care
Jean Stogdon	Grandparents Plus
Julie Jones	Social Care Institute for Excellence
Iris Steen	Social Care Institute for Excellence

1. Apologies

Anne Main	MP
Angela Browning	MP
Peter Bottomley	MP
Bob Russell	MP
James Brokenshire	MP
Jo Williams	Mencap

2. Oral evidence sessions

A summary of written evidence is attached. The following is a summary of main points given during oral evidence session.

Joan Munro, National Adviser Workforce Strategy, Strategy Division, Improvement and Development Agency for local government (IDeA)

- IDeA is pleased that the Group is undertaking this work.
- Local government has three roles in relation to social care – direct employer; commissioner; and advisor to service users and carers.
- IDeA is concerned about vacancy rates which would be unacceptable in other services (eg teaching or nursing).
- There is, however, strong cross-organisation working on major themes (eg Options for Excellence).
- There are severe problems but no quick fixes. Improvements are in train with signs of stabilisation (eg national minimum dataset, Children's workforce strategy, Department of Health's workforce strategy, Sector skills agreement etc).
- IDeA is sending the message to local authorities that they need to tackle the social care workforce challenge – now and in the future.
- Workforce development is not just an issue at local authority level. It takes three years to train a social worker.
- Options for Excellence shows that the number of social workers has increased by 80% in 16 years. The challenge is to get ahead of the pace – we need enough people coming into post. Social work is now in the top ten occupations of choice for young people.
- It is estimated that the demand for carers will increase by 80% between 2004 and 2010.
- Development of more personal assistants will change the dynamics between people using services and care professionals.

Maurice Bates, Co-chair of the Workforce Development Committee, Association of Directors of Adult Social Services (ADASS) and Director of Adult and Children's services, Redcar and Cleveland Council

- Coordination amongst key national organisations is crucial. SCIE, GSCC, Skills for Care, Department of Health and other lead organisation meet on a quarterly basis to coordinate work.
- Directors of Adults Services within local authorities now manage social care, alongside culture, arts, leisure etc.
- There are 30,000 social care employers – it is therefore a very complex business.
- There are four times more social care employees in the independent sector than in local government.
- Commissioning is the crucial role of local government – especially for Directors of Adult Services.
- Local authorities are developing commissioning jointly with healthcare (eg carrying out joint needs assessments). This should also help the integration of workforce planning.
- Most local authorities are skilled at recruitment and development.

- The development of social workers needs to be joined between children and adults. Need equity in terms of importance and funding.
- Changes to choice and control in social care has led to changes in commissioning – eg commissioning service user led services.
- The recent Concordat between government departments and leading health and social care organisations will take work to a new level and could change the face of workforce planning and development.

Jon Sutcliffe, Strategy Team, Local Government Employers (LGE)

- Local government employs 1.4m frontline workers including 250,000 social care staff, with a workforce bill of £21 bn.
- Equal pay issues particularly affect lower paid workers – including part-time female workers.
- It is a complex problem that requires a coherent approach to whole local government workforce – including social care workforce.
- Local government has a carefully balanced pay structure, with a single national pay spine – but individual grading is the responsibility of each local authority.
- There are claims from social care staff that equal pay issues are not taken into consideration. But if social care salaries were raised, there would be equal pay differences across all local authority salaries.
- There have been improvements in salaries across local authorities – including for social care staff.
- Home care staff salaries have increased from an average maximum of £5.74 ph to £7.93 ph in 2006.

Julia Skelton, Head of Professional Practice, College of Occupational Therapists (COT)

- OTs (occupational therapists) tend to be the forgotten workforce in social care.
- In 1970s OTs were always part of local authority.
- OTs make up 1.5% of workforce in local authority social care teams.
- The demand for OT assessments is increasing – from 25 to 40% of total number of referrals. This assessment is particularly important for people with disabilities.
- OTs who work in adult services are often used to assess children as well. This is a problem if they do not have appropriate training for children's work.
- There are no longer any significant waiting lists for OT assessments.
- Recruitment in England has improved but it is not clear why. It may be that OTs are transferring from health to social care services following a freeze in the health service.
- There are variations in pay between local authorities and health care, with between a £2k and £5k difference.
- OT skills can be used in different ways (eg rehabilitation and review of care packages – this would reduce need to move to residential care).
- OTs also work with young offenders and can help people to return to work.
- New OT graduates are finding it difficult to get work – therefore there is an untapped resource available to social care. They should be considered for alternative roles within social care.
- Retention and recruitment will remain a problem.

- Status of OTs workforce is often over looked. The opportunity for engagement in bigger debates is often limited – but it is improving (eg SCIE work with OTs).
- Service users tend to be satisfied with work of OTs.

Julia Scott, Chief Executive, College of Occupational Therapists

- There are a range of qualification courses for OTs – funded through strategic health authorities (SHAs). These courses are valued and local – OTs tend to remain in the area.
- Social care workforce needs are overlooked by workforce training commission. Health is asked, but social care is not asked about training needs as part of this process.
- OTs train for up to 1 year on placement. Student placements are currently being turned down – services say they cannot afford the time and energy to manage the placement. COT has very grave concerns about this in terms of future workforce and future planning issues.
- Inhouse training tends to focus on social work skills and competencies. While there is shared training – there is rarely a much on OTs social care training.
- Promotional opportunities are limited - OTs need to move in order to develop their careers.
- OTs post qualifications are not recognised as PQ in social care workforce.
- There are equity issues between social care workforce and OTs.
- Some management posts are only offered to those with social work qualifications. There is no logical reason why an OT could not fulfil this role.
- There are a lot of unqualified support workers in social care – they are very valuable and need to be well managed.
- Some local authorities do have parity of pay for OTs and social workers.
- Having an OT amongst senior management structure provides professional leadership and supports recruitment and retention.
- Social workers are paid to have placement – OTs are not.
- OTs almost had two regulation bodies. GSCC accepted that registration with Health Professional Council.
- Service user and carer involvement is featured strongly in OT training. Service users are on appointment panels and help to deliver training.

3. Comments and questions

Joan Humble MP: Are there issues that we should be aware of re restructure of local government and impact on workforce?

Maurice Bates (ADASS): Varies from each locality. Skills for Care indicate that 90% of care workers are happy in their work.

Joan Humble MP: Social workers saw themselves as budget managers – but restructure seems to have enabled them to work with people again.

Joan Munro (IDeA): Budget regime means that local authorities may be looking at expenditure again – this may result in further restructuring.

More integrated working is resulting in changes in roles. If done well, could result in positive outcomes. Managers need good change management skills to deal with this effectively.

Bernard Walker (Wigan): Social workers are feeling liberated. There is a possibility for creativity with introduction of individual budgets. SCIE is part of the work to redefine roles and tasks which should result in a transparent statement about what social work should do.

Jon Sutcliffe (LGE): Social care staff are not on picket lines – they have benefited from pay reviews. If you can ensure pay levels are acceptable, they can get on with the job. Local authorities are committed to being an employer of choice.

Jean Stogdon (Grandparents Plus): Grandparents who provide kinship care tell me that social workers are not performing well and that morale is low. Everything varies according to postcode therefore it is not possible to say anything about everything (ie cant say that social work is improving because in some areas it is not). Young people say that they do not have time to build up relationships with social workers as they move on too quickly.

Joan Munro: We are encouraging local authorities to look holistically at people management issues. There are particular issues in London re family structure changes and role of social workers. Yet in Barnet there are no vacancies for social workers in adults' services.

Jean Stogdon: Barnet has poor kinship care.

Joan Humble MP: Why is there such a variation in vacancy rates across the country?

Judy Welemisky (MHPF): People need to feel valued.

Joan Munro: IDeA is running a Best Councils programme – same criteria as Best Companies approach. We are using this as method of diagnosing improvement requirements, and providing support in form of events and conferences to councils.

Jon Metcalf (BASW): Social workers feel threatened by management. BASW is providing advice and support to them.

Julie Jones (SCIE): Need to rebalance the picture here. The policy challenges – particularly personalisation – is very difficult for staff and managers, but it is what service users want. Staff views are not enough. Service users clearly want services to be shaped and delivered in a different way than they have been.

- Janis Stout (CSIP):** Key challenge is how to integrate activities and improve delivery. For example, in Cheshire and Merseyside, local authorities, PCTs and parents are training together. We need to look at what skills and competencies are needed locally – including from parents.
- Joan Humble MP:** Ministers want clear recommendations and outcomes. There is much more debate on social care issues than before (eg You and Yours and Women’s Hour series). Unless we have a workforce committed to delivering choice then it will be difficult to deliver the outcomes that service users want. How can we reassure the social care workforce that they are valued and will be valued even more if the people they are supporting get what they want.
- Maurice Bates:** Involving people who use services, plus the workforce is a very important key to making radical change.
- Jon Sutcliffe:** Independent social workers are particularly well geared up to supporting a user-led approach. We also need to be aware that some people who use services, don’t want dramatic change in how their services are provided.
- Jean Stogdon:** Please avoid jargon in any discussions so that service users and carers can genuinely take part.
- Jo Cleary:** Directors of Adults Services are responsible for forward thinking and commissioning of workforce in localities – not just services provided directly by the authority. It is a very challenging agenda to work on alongside issues such as safeguarding adults and children (how can we ensure we have appropriate safeguarding protocols) and the Mental Health Act. The APPG may be interested in asking further questions about these areas.
- Janis Stout:** Changes in mental health arrangements has led to new ways of working.

4. Date of next meeting

6-7pm Tuesday 29 January 2008, Committee Room 11, House of Commons

Oral evidence to be provided by:

Sue Bott, Director, National Centre for Independent Living (NCIL)

Alex Fox, Assistant Director (Policy and Service Development), Princess Royal Trust for Carers

Nick Johnson, Chief Executive, Social Care Association

Sian Lockwood, Chief Executive, National Association of Adult Placement Services (NAAPS)