

EAST RENFREWSHIRE COUNCIL
AUDIT AND SCRUTINY COMMITTEE
19 January 2017
Report by Clerk
NATIONAL EXTERNAL AUDIT REPORT
SOCIAL WORK IN SCOTLAND

PURPOSE OF REPORT

1. To provide information on the Audit Scotland report *Social Work in Scotland*.

RECOMMENDATION

2. It is recommended that the Committee considers the report.

BACKGROUND

3. Copies of the Audit Scotland report *Social Work in Scotland*, published in October 2016, have already been circulated to all Audit and Scrutiny Committee Members. Under the Committee's specialisation arrangements, the Members who are leading the review of the report are Councillor Grant and Councillor Reilly. In accordance with arrangements established by the Committee for dealing with such reports, the Chief Officer, Health and Social Care Partnership has provided comments on it. A copy of the feedback is attached. (see Appendices 1 and A).

RECOMMENDATION

4. It is recommended that the Committee considers the report.

Local Government Access to Information Act 1985

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Background Papers:-

1. Audit Scotland Report *Social Work in Scotland*

EAST RENFREWSHIRE COUNCIL

AUDIT AND SCRUTINY COMMITTEE

Report by Julie Murray, Chief Officer

AUDIT SCOTLAND REPORT - SOCIAL WORK IN SCOTLAND

PURPOSE OF REPORT

1. This report provides the Audit and Scrutiny Committee with an overview of the Audit Scotland Report on Social Work in Scotland and the implications for East Renfrewshire Integration Joint Board.

RECOMMENDATION

2. The Audit and Scrutiny Committee is asked to:-
 - Note and comment on the Audit Scotland Report on Social Work in Scotland
 - Note and comment on the local actions detailed in Appendix A.

BACKGROUND

3. In September 2016 Audit Scotland published its report on Social Work in Scotland. The overall aim of the audit was to examine how effectively councils are planning to address the financial and demographic pressures facing social work. The objectives were to assess:
 - the scale of the financial and demand pressures facing social work the strategies councils are adopting to meet these challenges;
 - the effectiveness of governance arrangements, including how elected members lead and oversee social work services;
 - the impact of financial and demand pressures on people who use services and on carers, and how councils involve them in planning how services are provided.
4. The report did not examine health and social care integration arrangements, but did consider their impact on councils' financial, operational and governance arrangements.
5. The audit included: fieldwork interviews with elected members, senior managers and social workers in six council areas including East Renfrewshire. In addition a number of national focus groups and desktop research was carried out.
6. The report has three parts:
 - Part 1 Challenges facing social work services.
 - Part 2 Strategies to address the challenges.
 - Part 3 Social work governance and scrutiny arrangements

REPORT





Part 1 Challenges facing social work services

7. The key messages are that Council's social work departments provide important services to some of the most vulnerable people across Scotland. But they are facing significant challenges, including financial pressures caused by a real-terms reduction in overall council spending, demographic changes, and the cost of implementing new legislation and policies. Audit Scotland estimates that these changes require councils' social work spending to increase by between 16% and 21%, if councils and IJBs continue to provide services in the same way. It acknowledges that additional funding provided to IJBs via the NHS may partially relieve the financial pressures.
8. Implementing a wide range of legislation and policy changes aimed at improving services, better supporting carers, improving outcomes for people and increasing the wages paid to adult care workers has significant financial implications. Councils are also under pressure due to increasing demand associated with demographic changes, particularly people living longer with health and care needs.
9. Since 2010/11, councils' total revenue funding has reduced by 11 per cent in real terms. Social work spending increased by three per cent in real terms over the same period, and now accounts for a third of overall council spending. Further reductions in councils' budgets are an additional pressure on social work services, particularly as their financial commitments continue to increase.
10. Social care providers have difficulty recruiting and retaining suitably qualified staff, particularly homecare staff and nursing staff. However, the number of social workers has increased over recent years.

Exhibit 7

Potential financial pressures facing Scottish councils by 2019/20

Councils face significant cost pressures.

Reason for cost increase	Lower limit (£ million)	Upper limit (£ million)
 Demographic change (older people only)	£141	£287
 The Children and Young People (Scotland) Act 2014	£98	£98
 The Carers (Scotland) Act 2016	£72	£83
 The Living Wage	£199	£199
Potential cost increase by 2019/20	£510	£667

Source: Audit Scotland analysis of financial memorandums and information provided by the Scottish Government

Part 2 Strategies to address the challenges

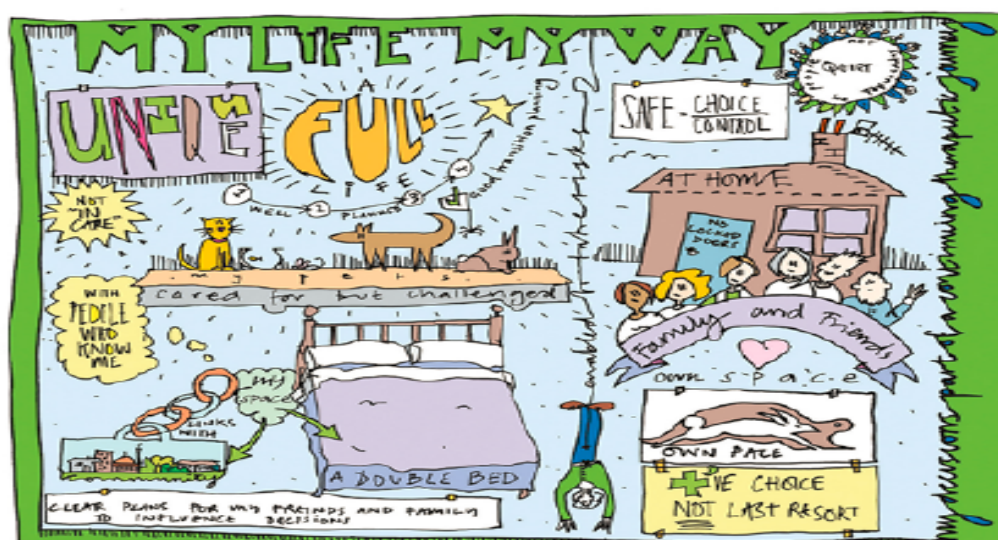
11. Audit Scotland found that Councils have adopted a number of strategies to achieve savings. They have tightened eligibility criteria so that fewer people receive services and targeted funding to people in greatest need. They have also achieved significant savings in the cost of homecare and care homes through competitive tendering and the national care home contract. However the report points out that these approaches will not be sustainable given the scale of the challenge, and there are risks that reducing costs further could affect the quality of services. Fundamental decisions are required on long-term funding and social work service models for the future.
12. Many councils have taken an opportunistic or piecemeal approach to changing how they deliver services, often to meet financial challenges or as the result of initiative funding by the Scottish Government. Across Scotland there has been a limited shift to more prevention and different models of care, but East Renfrewshire and West Lothian are cited as two areas that have a strong focus on prevention.
13. The report states that opportunities for people who use social work services and carers to be involved in planning services are limited. There is scope for councils and IJBs to do more to work with them to design, commission, deliver and evaluate services to achieve better outcomes. It notes that service providers also have an important role to play in commissioning and designing services based around user needs. They cite as an example of good practice the public social partnership approach being taken in East Renfrewshire.

Case study 2

East Renfrewshire Council: innovation in commissioning services



The Public Social Partnerships approach is a two-year funded programme, supported by the Scottish Government and designed to develop creative ideas for meeting the needs of people in, or about to enter, residential care. The partnership is across sectors and between people who use services. It is designed to develop thinking and support innovation. Participation in the project also helps to build resilience in people and communities by focusing on what people want rather than the services they currently receive. The illustration below describes one of the outputs from the process showing a visualisation of residential care from the point of view of someone who uses services.



14. People who use services and their carers value the support they get from social work and social care services. Audit Scotland's focus groups had a number of concerns about homecare, such as shorter visits and people using services seeing a number of different carers. Whilst the Scottish Government's Living Wage commitment provides an opportunity to improve recruitment and retention of social care staff, and to create a more stable skilled workforce, it adds to the financial pressures on councils and provide

Part 3 Social work governance and scrutiny arrangements

15. Audit Scotland has identified that integration of health and social care has resulted in complex and varied governance arrangements for social work services. Elected members have important leadership and scrutiny roles, but there are risks that increased complexity could lead to members not having an overall view of social work. At a time of great change, it is essential that elected members assure themselves that the quality of social work services is being maintained and that councils are managing risks effectively. It is important that elected members receive training and guidance on the operation of the new governance arrangements and that elected members not involved in the IJB are fully informed about its operation.
16. The Audit Scotland report found that the key role of the chief social work officer (CSWO) has changed significantly in recent years and there are risks that CSWOs may have too many roles and have insufficient status to enable them to fulfil their statutory responsibilities effectively.
17. Audit Scotland believes that there is scope for councils and their community planning partners to do more to promote and empower communities. This includes working with them to design, commission, deliver and evaluate services to achieve better outcomes, and to build capacity to allow communities to do more to support themselves. Elected members need to play a key role engaging with communities in a wider dialogue about council priorities.

CONCLUSIONS

18. The Audit Scotland Report contains recommendations in the areas of social work strategy and service planning; governance and scrutiny arrangements; workforce; and service efficiency and effectiveness. The majority are for Councils and Integration Joint Boards but a few are specifically for Councils only. The following paragraphs provide an overview of these recommendations with a more detailed breakdown included in the appendix to this report.
19. In terms of strategy and service planning, Audit Scotland encourages Councils and Integrated Joint Boards to instigate a frank and wide-ranging debate with their communities about the long-term future for social work and social care in their area given the funding available and the future challenges. Locally we have commenced this work both through the conversations to inform the Strategic Plan for the Health and Social Care Partnership and the engagement activity for Community Led Support, but we recognise that is a long term commitment and that we need to make sure it is fully inclusive of all the members of our local communities.
20. Audit Scotland also recommends that Councils and Integrated Joint Boards to work nationally and locally to review how to provide social work services for the future, future

funding arrangements and to develop long-term strategies. We have a strong foundation in East Renfrewshire in terms of our working together approach, investment in prevention and long-standing commitment to building local community capacity and resilience. This could be strengthened by working with improvement colleagues to see if we can more accurately model the future impact of our preventative approaches in reducing some of the rising demands of our ageing population and increasing numbers of people living with complex medical conditions and disability.

21. This report has been shared with the Integration Joint Board's Performance and Audit Committee on 23 November 2016.

RECOMMENDATIONS

22. The Audit and Scrutiny Committee is asked to:-
 - Note and comment on the Audit Scotland Report on Social Work in Scotland
 - Note and comment on the local position as detailed in Appendix A

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BACKGROUND PAPERS

Main report

http://www.audit-scotland.gov.uk/uploads/docs/report/2016/nr_160922_social_work.pdf

Check list for Elected Members

http://www.audit-scotland.gov.uk/uploads/docs/report/2016/nr_160922_social_work_supp4.pdf

Minute of Council Meeting – 17 December 2008

<http://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=3922&p=0>

KEY WORDS

Audit Scotland, social work, social care, audit, finance,

Appendix A Audit Scotland Report – Social Work in Scotland - Recommendations for Integration Joint Board and Council

Recommendation	For	HSCP Position
Social work strategy and service planning		
<ul style="list-style-type: none"> instigate a frank and wide-ranging debate with their communities about the long-term future for social work and social care in their area to meet statutory responsibilities, given the funding available and the future challenges (paragraph 111) 	Council and IJB	Conversation begun in shadow year of HSCP as part of initial conversation on Strategic Plan for Integration Joint Board. More recently Community Led Support conversations have begun with local people and communities about how we can deliver supports with them. This conversation needs to continue and include more members of our local communities.
<ul style="list-style-type: none"> work with the Scottish Government, their representative organisation (COSLA or the Scottish Local Government Partnership (SLGP)), Social Work Scotland and other stakeholders to review how to provide social work services for the future and future funding arrangements (paragraph 36-41) 	Council and IJB	The HSCP attends a number of national groups led by Cosla/Scottish Government. The Head of Children and Families (Chief Social Work Officer) is currently chair of the Social Work Scotland Children and Families Standing Committee.
<ul style="list-style-type: none"> develop long-term strategies for the services funded by social work by: 	Council and IJB	
<ul style="list-style-type: none"> – carrying out a detailed analysis of demographic change and the contribution preventative approaches can make to reduce demand for services (paragraph 52) 	Council and IJB	Demographic change and pressures modelled. Investment in preventative approaches made in both early years and older people as part of Single Outcome Agreement and Outcome Delivery Plan – continued in HSCP Strategic Plan. Outcomes actively measured but modelling of impact is a challenge. The HSCP is working with Healthcare Improvement Scotland and Information Services.
<ul style="list-style-type: none"> – developing long-term financial and workforce plans (paragraph 81) 	Council and IJB	Work on financial strategy and workforce planning has commenced with links to wider Council and NHS planning activity.
<ul style="list-style-type: none"> – working with people who use services, carers and service providers to design and provide services around the needs of individuals (paragraphs 69-72) 	Council and IJB	Christie principles of working together with people who use services, carers and service providers underpin all planning work of Health and Social Care Partnership and we are cited as an example of good practice in the report.
<ul style="list-style-type: none"> – working more closely with local communities to build their capacity so they can better support local people who may be at risk of needing to use services (paragraph 112) 	Council and IJB	Work to build capacity commenced with Reshaping Care for Older People and Single Outcome Agreement Commitments. Health and Social Care Partnership have continued this work in partnership with Voluntary Action Third Sector Interface.
<ul style="list-style-type: none"> – considering examples of innovative practice from across Scotland and beyond (paragraphs 54, 67-68) 	Council and IJB	Health and Social Care Partnership actively reviews examples of good practice from across Scotland and beyond and has introduced a number of these locally including Advanced Nurse Practitioners, Community Led Support, alternative models of day opportunities.
<ul style="list-style-type: none"> – working with the NHS and Scottish Government to review how to better synchronise partners' budget-setting arrangements to support these strategies (paragraph 36). 	Council and IJB	Both NHSGGC and Scottish Government are aware of the issues. Chief Finance Officers have been exploring opportunities to improve on current systems.

Governance and scrutiny arrangements		
<ul style="list-style-type: none"> ensure that the governance and scrutiny of social work services are appropriate and comprehensive across the whole of social work services, and review these arrangements regularly as partnerships develop and services change (paragraphs 87– 93) 	Council and IJB	The Integration Joint Board has established formal scrutiny committees. The Chief Social Work Officer's report will go the Council in December and is also shared with the Integration Joint Board. The Council's Chief Executive took a paper to Council in April 2016 providing Council with clarification on the responsibilities of the new East Renfrewshire Integration Joint Board (ERIJB) and the relationship between the Council and the ERIJB.
<ul style="list-style-type: none"> improve accountability by having processes in place to: 	Council and IJB	
<ul style="list-style-type: none"> – measure the outcomes of services, for example in criminal justice services, and their success rates in supporting individuals' efforts to desist from offending through their social inclusion 	Council and IJB	Outcome measures are in the form of talking points personal outcomes are in place for community care services and recovery outcomes have been developed for additions services. A national consultation on performance measures for criminal justice is underway.
<ul style="list-style-type: none"> – monitor the efficiency and effectiveness of services 	Council and IJB	Effectiveness and benchmarking data is included in Health and Social Care Performance Reports.
<ul style="list-style-type: none"> – allow elected members to assure themselves that the quality of social work services is being maintained and that councils are managing risks effectively 	Council and IJB	The Integration Joint Board has a Clinical and Care Governance Committee (papers available to elected members) and Performance and Audit Committee (papers available to elected members)
<ul style="list-style-type: none"> – measure people's satisfaction with those services 	Council and IJB	Satisfaction is measured through National Outcomes, Citizen's Panel and Talking Points Personal Outcomes.
<ul style="list-style-type: none"> – report the findings to elected members and the IJB 	Council and IJB	Information about satisfaction and experience of HSCP support is included in the Annual Performance Report.
<ul style="list-style-type: none"> demonstrate clear access for, and reporting to, the council by the CSWO, in line with guidance (paragraphs 104–106) 	Council Only	This is set out in the Integration Scheme for the Health and Social Care Partnership. A paper on the role of the CSWO was agreed by Council in December 2008. Subsequent annual CSWO reports have informed Council about the role.
<ul style="list-style-type: none"> ensure the CSWO has sufficient time and authority to enable them to fulfil the role effectively (paragraphs 102–107) 	Council Only	The portfolio of the Chief Social Officer was redesigned to allow more time for professional leadership and quality assurance.
<ul style="list-style-type: none"> ensure that CSWO annual reports provide an annual summary of the performance of the social work service, highlighting achievements and weaker areas of service delivery, setting out the council's response and plans to improve weaker areas and that these are actively scrutinised by elected members (paragraphs 108–110). 	Council Only	Chief Social Work Officer's Report follows the national template which includes highlight and areas for development.

Workforce		
<ul style="list-style-type: none"> work with their representative organisation (COSLA or the SLGP), the Scottish Government and private and third sector employers to put in place a coordinated approach to resolve workforce issues in social care (paragraphs 21–23) 	Council Only	We have collaborated on the production of national guidance and shared our local approach to implementation. Creative responses to how we recruit, train and reward staff must also be a feature of how we collaborate in the future to improve the workforce across health and social care
<ul style="list-style-type: none"> as part of their contract monitoring arrangements, ensure that providers who use zero hours contracts allow staff to accept or turn down work without being penalised (paragraph 24). 	Council Only	As zero hour contracts are primarily a feature of the home care market it is reassuring to note that providers within the home care market are moving away from zero hours contracts to develop stability within their operations and to promote their businesses to a wider range of potential staff. Moreover they are developing a package of measures to promote fair work practices across their operations, a much broader set of measures including paying for uniforms; staff benefits including in some cases discounts and loyalty cards. Through our recent tender exercise we have ensured that the fair work practice agenda is reflected in our contract terms. We will monitor the range of approaches through a specific audit of workforce practices.
Service efficiency and effectiveness		
<ul style="list-style-type: none"> when planning an initiative, include evaluation criteria and extend or halt initiatives depending on the success of new approaches in improving outcomes and value for money (paragraphs 53–53) 	Council and IJB	Evaluation is built into all new work including Safe and Supported work stream and Community Led Support. .
<ul style="list-style-type: none"> work with COSLA to review the eligibility framework to ensure that it is still fit for purpose in the light of recent policy and legislative changes (paragraphs 46–47) 	Council and IJB	Social Work Scotland resources committee are reviewing current practice in this area.
<ul style="list-style-type: none"> benchmark their services against those provided by other councils and providers within the UK and overseas to encourage innovation and improve services (paragraphs 54, 67–68) 	Council Only	Benchmarking information is included in performance reporting. The HSCP actively explores examples of good practice and this is recognised in the Audit Scotland Report.