

EDUCATION, LIFELONG LEARNING AND CULTURE COMMITTEE

Wednesday 4 February 2009

Session 3

£5.00

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EDUCATION, LIFELONG LEARNING AND CULTURE COMMITTEE **4th Meeting 2009, Session 3**

CONVENER

*Karen Whitefield (Airdrie and Shotts) (Lab)

DEPUTY CONVENER

Kenneth Gibson (Cunninghame North) (SNP)

COMMITTEE MEMBERS

*Claire Baker (Mid Scotland and Fife) (Lab)
*Aileen Campbell (South of Scotland) (SNP)
*Ken Macintosh (Eastwood) (Lab)
Christina McKelvie (Central Scotland) (SNP)
Elizabeth Smith (Mid Scotland and Fife) (Con)
*Margaret Smith (Edinburgh West) (LD)

COMMITTEE SUBSTITUTES

Ted Brocklebank (Mid Scotland and Fife) (Con)
*Bill Kidd (Glasgow) (SNP)
Hugh O'Donnell (Central Scotland) (LD)
Cathy Peattie (Falkirk East) (Lab)

*attended

THE FOLLOWING GAVE EVIDENCE:

Alan Baird (Association of Directors of Social Work)
Professor Joyce Lishman (Universities Scotland)
Annie Gunner Logan (Community Care Providers Scotland)
Stephen Smellie (Unison)
Carol Wilkinson (Scottish Social Services Council)
David Wiseman (Scottish Commission for the Regulation of Care)

CLERK TO THE COMMITTEE

Eugene Windsor

SENIOR ASSISTANT CLERK

Nick Hawthorne

LOCATION

Committee Room 1

Scottish Parliament

Education, Lifelong Learning and Culture Committee

Wednesday 4 February 2009

[THE OLDEST COMMITTEE MEMBER *opened the meeting at 10:15*]

Social Work

Ken Macintosh (Oldest Committee Member): Good morning, everybody, and welcome to this meeting of the Education, Lifelong Learning and Culture Committee. I am standing in as temporary convener of the committee until the convener arrives. Apologies were received in advance of the meeting from my colleagues Christina McKelvie, Kenny Gibson and Liz Smith.

The convener has just come in, which is perfect. Convener, we have just kicked off. I have the dubious honour of being the oldest member present, so I had to sit in the chair. That has never happened to me before. I was about to ask people to make introductory statements, but I will let you take over.

The Convener (Karen Whitefield): Thank you. I am sorry for keeping everybody waiting. Everybody probably knows who I am—the very late convener of the committee.

I invite Aileen Campbell to introduce herself; others around the table can then follow.

Aileen Campbell (South of Scotland) (SNP): Good morning. I am one of the MSPs who represent the South of Scotland region.

Alan Baird (Association of Directors of Social Work): I am president of the Association of Directors of Social Work in Scotland.

Stephen Smellie (Unison): I chair Unison's social work issues group. I am employed by South Lanarkshire Council social work department.

Ken Macintosh (Eastwood) (Lab): I am an East Renfrewshire MSP. You know how old I am relative to the other members of the committee.

David Wiseman (Scottish Commission for the Regulation of Care): I am deputy chief executive of the Scottish Commission for the Regulation of Care, which is the regulator of care services in Scotland.

Carol Wilkinson (Scottish Social Services Council): I am chief executive of the Scottish Social Services Council, which is the workforce regulator for the social services sector.

Bill Kidd (Glasgow) (SNP): I am a Glasgow MSP. I think that I am older than Ken Macintosh, but I hid away in a corner.

Professor Joyce Lishman (Universities Scotland): I am convener of the heads of social work in higher education in Scotland. In my day job, I am head of the school of applied social studies at the Robert Gordon University in Aberdeen.

Claire Baker (Mid Scotland and Fife) (Lab): I am an MSP for Mid Scotland and Fife.

Annie Gunner Logan (Community Care Providers Scotland): I am director of Community Care Providers Scotland, which is a voluntary sector association for care providers.

The Convener: Thank you very much. It is obvious that having to declare himself as the oldest member of the committee has greatly scarred Mr Macintosh. I am sure that having to do so was a rare occurrence for him in the Parliament.

The purpose of the meeting is to have a round-table discussion about social work matters. We are particularly interested in four themes: workforce issues, service development, integrated partnership working, and leadership and management issues. I intend to deal with one theme at a time and to allocate roughly 20 minutes to each.

We will kick off with workforce issues. To get the discussion under way, I will ask about recent Government initiatives to attract people into social work, particularly the fast-track social work scheme and the new social work degree. Are they having an impact on social work recruitment and retention? Could we do more to address those issues?

Carol Wilkinson: The fast-track initiative was very successful in recruiting people to social worker posts. To remind members, the scheme was designed to attract graduates into social work, particularly from other professions. The scheme was successful—it was oversubscribed by interested recruits—and we learned from it that some people in well-paid, high-status professions want to join social work because they regard it as a career that will help them to make a difference.

Other recruitment campaigns, particularly the one that focused on recruiting younger people, appear to have had some success because the figures for students entering social work courses show that more young people are training to be social workers than were previously. Vacancy levels have dropped, but we do not want to be complacent about that because levels vary across Scotland and some parts of the country struggle more than others to recruit. However, we seem to

have conveyed a positive message through the campaigns that social work is a good sector to work in, with good jobs that allow people to make a difference to others' lives.

The Convener: You highlighted the success in getting young people into the profession. However, I was struck by written evidence that the committee received in advance of the meeting that indicated that we have not been as successful in encouraging people from ethnic minority groups in Scotland into the profession, nor have we been particularly successful in recruiting men. How can we encourage young men, men in general and people from our ethnic minority groups in Scotland into the social work profession?

Carol Wilkinson: You are right about recruitment. The profile of students on social work courses is that they are predominantly white and female. Again, it is about targeted campaigns. You may know of the Kibble education and care centre, which provides residential services for children; it has run successful campaigns specifically to recruit men into care work. We have learned that campaigns that target particular groups are a better way of encouraging people to come into the profession. The issue of recruiting men, of course, is always linked to safe recruitment and concerns about men working with young children. I think that we have scared men off in that regard, so we need to think about framing campaigns to address that issue.

Ken Macintosh: Many of the reforms of the social work profession were introduced in response to national inquiries, particularly on child protection. The recent Haringey case raised the profile again of social work involvement in harrowing cases. Is the profession now more resilient and more capable of absorbing the bad publicity from such cases, or is it as vulnerable as ever to such stories?

Alan Baird: Staff in child protection work under severe pressure, and some publicity does not help the morale of front-line staff. It has an impact that our association is concerned about. Equally, the public and the media's understanding of the role of social work and social care is diverse and complex. Recently, the ADSW and the Scottish Social Services Council established a public relations strategy, and we have recruited a PR company to help us over the next 12 months and perhaps beyond to change the profession's public image. That will be difficult, particularly in some parts of the press. The Minister for Children and Early Years will formally launch the strategy in Parliament on 1 April.

We need to do such proactive things, but the profession's resilience is perhaps stronger now because of the national reform programme in child protection, on which we have worked for many

years. However, being realistic, we know that we cannot prevent the kind of tragedies that we have read about in recent years north and south of the border.

David Wiseman: In the move towards having a more proportional and better-targeted inspection or scrutiny regime—especially one that is based on self-evaluation—we have to ensure that the processes are rigorous. Both the self-evaluation and the external scrutiny must be as effective as they can be.

In Haringey, the inspection by Ofsted—the Office for Standards in Education, Children's Services and Skills—was much more of what it calls a light-touch, desktop exercise. We can go down the road of a light-touch exercise, but dangers arise if there is no rigour behind the exercise. We must ensure that the evidence that is put in front of a scrutiny body can be dug into and verified.

I think that the regime in Scotland is much better. Our colleagues in the unit in Her Majesty's Inspectorate of Education have indicated clearly when concerns have arisen, and action has subsequently been taken by the relevant authorities.

Professor Lishman: The adverse publicity has not been helpful for students. When those students go on to become workers, they will have a professional identity, but while they are still students they are just developing that identity and are more vulnerable.

We have introduced key capabilities in child care. They are designed to ensure that, while training, students learn and practise in order to become much more sophisticated in their understanding of child protection and of how to work with children.

Carol Wilkinson: I was going to mention that as well. We have built aspects of child protection into the training and development of our social workers. As Joyce Lishman suggests, beyond their initial training, all newly qualified and registered social workers have to undertake specific additional training and development related to working with vulnerable groups. Child protection comes into that.

A lesson to learn from what is happening down south is the importance of good-quality support and supervision. Workers have to have opportunities to develop. The London boroughs struggle with the recruitment and retention of staff and with the recruitment of good supervisors and managers. If you consider the previous two cases in Haringey, you can see a thread. Social workers who were not very experienced were working in teams in which there were probably a lot of temporary agency workers. They were not

receiving the good supervision and support that are so important for social workers.

Professor Lishman: An area that is a developing strength is knowledge exchange and continuing professional development. Universities and agencies are working together to increase the evidence base of social work practice. Staff are therefore continuing to develop and learn, which is hugely important for motivation and morale. I am sure that we will come on to discuss those issues.

The Convener: Mr Smellie has been very patient while waiting to contribute.

Stephen Smellie: I am not always. [*Laughter.*]

I would agree with others that there have been improvements in the resilience of the profession. People are now better prepared for the kind of situations that arise. However, there is no doubt that the Baby P incident in Haringey was a huge blow to morale. That was not only because of the incident itself. To a certain extent, the workforce and the wider social care community know that such things will occasionally happen, no matter how good the training, the inspections and the regulatory framework are. However, the response of the media in such cases can be extremely damaging. For example, *The Sun* ran a petition to get people sacked. There was a furore in the press at a UK level and, unfortunately, some politicians seem to pander to that kind of agenda. To be fair, there is not much evidence that that was replicated in Scotland, either in the media or politically. Nonetheless, we are part of the UK and that reaction dealt a significant blow to morale. People think, "We have moved forward, but the same sort of reaction happens."

10:30

As Alan Baird said, despite the progress that has been made, workers continue to work in stressful circumstances and with difficult workloads. We might return to that. When workers who are trying to cope with that then get the stuff in newspapers and on television, that is fairly devastating for morale. It is a challenge for everyone involved—including the trade unions—to recover from that, get back onside and take steps forward. I put on record our recognition and appreciation that a different approach was taken in Scotland. That is probably attributable to the work that has been done and the progress that has been made in the past five or six years, which is a tribute to all of us, although there is still a lot to do, obviously.

Ken Macintosh: We appear to be moving in the right direction—you have outlined some of the measures to help those who work in the profession—but is there anything else that the Parliament or Government should do to help? For

example, when we discussed the getting it right for every child programme, or perhaps the Protection of Vulnerable Groups (Scotland) Bill, one little suggestion that arose was that we should change the inquiry system, as it helps to ingrain the blame culture and ends up pointing the finger at social workers and social work departments. There was talk of reforming the inquiry system, but I do not think that that came to anything. That is one suggestion, but is there anything else that we could or should do?

Annie Gunner Logan: This is a bit of a non sequitur in some respects but, from a voluntary sector perspective, there are recruitment issues that are slightly different from the issues for some of our colleagues. In the voluntary sector, 80 per cent of the workforce are not social workers—they are social services workers but not social workers. They are generally support workers. One difficulty that voluntary organisations have with recruitment relates to pay and conditions. Nobody has mentioned that yet, but it is a serious problem in the sector and creates a lot of churn. A survey that we carried out of our members a couple of years ago found that 60 per cent of support workers move on within two years. That is an on-going difficulty. One of the chief reasons why people move from one agency to another is pay differences, even though those can be fairly marginal. My colleague from Unison might want to return to that point. We should bear it in mind that social care and support workers are a relatively low-paid group and that that has a bearing on recruitment. People move from one agency to another within the field or they move outside the field. Alternatively, they do not come into the field at all, because much better pay rates are on offer elsewhere, in superstores for example. That has become a bit of a cliché, but there is truth in it.

Carol Wilkinson: I have some simple suggestions on what you as politicians can do to help to raise the sector's profile. You can take every opportunity to make positive comments about what workers do and you can find out what is happening in your constituencies and profile that work. When people out there, particularly people such as you, recognise what social services workers do, they feel valued and positive about their job.

Alan Baird: I have two points. First, the social work sector very much welcomed the statements in the Parliament post-Haringey from Adam Ingram and Alex Salmond. I personally circulated those comments to colleagues on the front line throughout Scotland, because that sort of thing makes a huge difference.

Secondly, to answer Mr Macintosh's question, we ought to consider a proper career grade for front-line staff. We need the most experienced and

skilled workers to remain on the front line. "Changing Lives: Report of the 21st Century Social Work Review" was the opportunity to do that. We have a continuous learning framework, which is very supportive of staff and will make a big difference to how staff feel. However, if we are to retain our best front-line staff on the front line, we need to consider opportunities nationally and not just in individual councils. We have seen the difference that that has made in education over a number of years.

Stephen Smellie: I absolutely support what Alan Baird said about a career grade. Social workers work under very difficult circumstances. The only way in which they can improve in monetary terms is by going for promotion. We have argued that for a long time. Some local authorities and voluntary organisations started to move towards having senior practitioner roles. That has perhaps lost a bit of momentum, but it would be worth revisiting.

I endorse Annie Gunner Logan's point. It is not just in the voluntary sector that 80 per cent of the workforce are not social workers. In fact, in local authorities, social workers can be a small minority of the social care workforce. For understandable reasons, social workers get most of the attention. However, social workers cannot deliver any services without the support workers, residential workers and so on throughout the different sectors. As Annie Gunner Logan said, they continue to be low paid. The churn that Annie referred to is not just in the voluntary sector; it is across the board. If anything good comes out of the current economic downturn, it may be that other people will be prepared to come and work in the sector. However, they will still be coming in at the low-wage part of the workforce. In the long term, the workforce will not stabilise.

There are other factors that make the situation worse, one of which is the contracting culture in public authorities, where services are part of a mixed economy. We have many members working in the voluntary and private sectors. Increasingly, the pursuit of value for money is one of Government's concerns. Social care is a labour-intensive industry, and there comes a point at which contracts come down to cost. The way to make savings and to make things more efficient is to start chipping away at pay and conditions. Annie Gunner Logan highlighted that. Whether it is holidays or pension rights or anything else that is chipped away, that process continues to make things worse.

From a trade union point of view, one of my frustrations about the whole sector—whether it is social workers, home carers or day care workers—is that there are few examples of effective workload management systems in place

to allow workers to say, "I've got a manageable case load and a manageable number of clients to get round." We find that social workers are allocated further cases without being able to close off other ones. There are pressures on time. How many visits to children or vulnerable adults can someone cram into a week when they have an increasing case load? There are home carers who have to cut short their visits by five or 10 minutes. That is a real issue, which is not only to do with paying people to do a job but to do with giving them the time to do the job properly.

I have a small anecdote from my personal experience. My mother was recently provided with a home care package that consisted of a home carer coming in for half an hour to prepare her meal. I am not a great cook, but I know that it takes more than half an hour to make a nutritious meal. However, what was provided was microwave stuff, and it was not particularly nutritious. That is a small example, and I realise that it is a personal one, but I find that it is repeated across the board. For example, instead of home carers or social workers spending half an hour sitting and talking to a family or a child, they will get five minutes to check up on things. It is not good practice. That should be addressed, among other things.

The Convener: I am conscious that the 20 minutes that I allotted for this section are up, but a couple of people still want to ask questions on this matter.

Bill Kidd: Retention of staff of whatever grade is a problem when the jobs are so stressful, but retention of experienced staff is important. Over a period of time, stress and health issues affect members of staff. Do they have to self-refer when suffering from stress and illness, or is that being regularly monitored by whichever organisation they happen to be working with?

Alan Baird: As was said earlier, we are much better than we used to be at supporting staff. The outcomes from the performance inspection reports indicate—largely, although not entirely—that the situation is better in Scotland. Dundee has a counselling service, for example, which is open to any member of staff and is paid for by the department. Of course, sometimes it is difficult to distinguish between workforce stress and stress that arises from someone's personal life—often, the problem is a combination of both. However, more employers are open to the fact that they need to examine absence rates with an eye to the increasing number of people who are absent through stress, which is becoming more common throughout the country's workforce, not just in social work. More employers in Scotland than elsewhere have put in place measures in that regard. Employers need to provide the best

working conditions that they can in order to keep the experienced front-line staff in position.

Aileen Campbell: Earlier, we talked about attracting members of black and minority ethnic groups and men into social work. What are the specific problems with recruitment in rural areas? I represent the South of Scotland region, much of which is very rural, and I have seen situations in which, because of the rural nature of the place where a person lives, it is difficult to put in place even the sort of home care packages that Mr Smellie talked about.

Carol Wilkinson: It is certainly much more challenging to do that in rural areas. From the evidence that we pick up, we can see that rural areas in some cases struggle to recruit care home staff or care-at-home staff.

Obviously, rural areas are recruiting people who live in the area and have an attachment to the area, which is both a strength and a weakness and puts the onus on employers and providers to work together.

The situation varies across Scotland. Some councils and voluntary and private sector providers will tell you that they are quite successful at recruitment not only because they can sell the job as being a good job to do, but because there is no alternative employment for people. However, there are difficulties, and the demographic changes will make the situation even more challenging.

We have to work more closely with health. In some places, there are currently two people—one from health and one from social care—doing a job that could be done by one person and, in the future, will be done by one person. Around Scotland, there are interesting examples of situations in which health and social care are beginning to develop generic jobs and training.

David Wiseman: On ethnic minorities, one of this year's care commission forums will be run jointly with the Equality and Human Rights Commission Scotland and the Scottish Commission for Human Rights and will examine issues to do with equality and diversity in care services, including recruitment, which is particularly important if care is being provided for people from ethnic minority communities who might have particular needs.

10:45

The issue for rural areas arises before recruitment. In rural areas, we need more flexibility in the registration of care services, because a service may not survive if it is purely a care home, for example; it may be a care home that also provides care at home. We have tried to consider

that. In light of the potential for future review of the new scrutiny bodies and the legislation, we raised with the Scottish Government the need to be more flexible about the type of care service that can be developed. The current structures could be barriers to innovation, particularly in rural areas, where it is difficult to maintain a service in one factor.

The Convener: Professor Lishman was nodding a lot. Does she want to add anything?

Professor Lishman: I was agreeing with my colleagues. Universities are keen to increase the diversity of their student populations. They are working to have a range of ages and backgrounds among students and more students from ethnic minorities. Support services are also needed for people from non-traditional backgrounds. Social work students tend to come from a wider background than, say, classics students, which makes sense. We are working with your wish for a diverse group of employees.

The Convener: Our next subject for discussion is service development. The "Changing Lives" report talked at great length about the need to make care more personalised. When the committee considered social work in the autumn of last year, the Government officials from whom it heard acknowledged that considerable work was still needed on personalisation. A shared vision of what that agenda means is also needed. It would be helpful to the committee if the witnesses could give their views on what personalisation will mean for service delivery.

Alan Baird: I am happy to kick off, but I do not pretend to be an expert on this area.

Over the past nine months, the ADSW has been engaged with partners in trying to help move the agenda forward. There are different perspectives about what personalisation means and how much it will cost. We held a seminar for 150 people last September as a means of providing some cohesion across the sector, notwithstanding the really good work of the service development group that was one of the work streams from the "Changing Lives" report.

As a result of that seminar, we have continued to nudge forward attempts to find common ground. We talk about trying to find a road map forward and are just finishing a paper, on which we consulted a wide range of people, including service users. We do not want to produce something prescriptive, because a lot of really good work is going on in different parts of Scotland, but we recognise that personalisation is the way ahead and want to contribute to that. That is how we are trying to move the agenda forward.

David Wiseman: One of the first challenges that the care commission faced in its role as a

regulator concerned direct payments. There was a clear expectation in the Regulation of Care (Scotland) Act 2001 that services provided directly by personal assistants, for example, would not be regulated in the context of direct payments.

We sat round the table with a variety of interest groups—including people who use care services and receive direct payments—to consider the tensions between the concerns about vulnerability and the wish for people to have independence and the right to make choices and control their own care. The legislation does not allow us to regulate the independent part of the process, in which a personal assistant works for someone, but we got an agreement that, if the assistant is part of a care agency or employs other people, they should be regulated.

We give people more independence if we give them the necessary support to manage the process. People face huge challenges in managing budgets and handling employment issues, and they need a lot more support if we are to deliver in that respect.

The national care standards were developed six or seven years ago and we are keen for the Scottish Government to review them to ensure that they are up to date with the changes that have taken place in care. In most cases they will be, because they were written from an outcome perspective and focus on what people should expect from care services, but every now and then we look at them and ask whether they really pick up on the personalisation agenda. They need to be refreshed to ensure that they do so.

The new scrutiny arrangements from 2011 under the new care and social work body will add value by bringing together the work that the care commission does in examining the level of service provided by the care home or the housing support service and the work that the Social Work Inspection Agency does in examining the organisational level in local authorities. That will mean that we can start to link things and do much better tracking of what they mean for the individual.

Alan Baird: I agree. In talking about social work and social care, we must be careful that we do not regard personalisation as solely the responsibility of social work. It is a much wider responsibility for local authorities, including housing and leisure services. If personalisation is to work effectively, there needs to be a corporate agenda within local authorities and across the various social work and social care sectors.

The Convener: As well as there being a corporate personalisation agenda, is there also a need for service users to have some input? I am sure that the terminology of personalisation would

mean nothing to most service users. Mr Smellie spoke about his mother's experiences, and I know about my granny's experiences as a user of home care services who continues to live in the community. If somebody spoke to her about the personalisation of care, that would mean nothing to her. How do we break down the barriers so that service users are engaged in the process of developing services?

Alan Baird: It is better to talk about choice and about giving people control over their lives than to use the jargon of personalisation. If we put it in those terms, people begin to see that decisions are made about their lives in order to help them make choices, but we have to put those choices in front of people and enable them to make them.

The personalisation of services is not about giving people a blank sheet of paper, because that would be just as difficult for people. We have to say, "Look, if you want to take control of your life, here are the choices. These are the things that can effectively enhance the quality of your life." That is why I say that it has to be more than just social work that offers those choices and opportunities.

The Convener: Many of our participants want to contribute their ideas on the subject.

Professor Lishman: In social work education, users and carers are heavily involved in selecting and teaching students. Students are exposed to the views of users and carers about the choices that they would like to be able to make, which changes the culture. The personalisation agenda implies that not the professional, but the user of services is in control. Students gain the understanding that personalisation is about trying to offer choices in a way that makes sense to the user of services.

Stephen Smellie: I echo those comments. One problem in the discussion about personalisation is that many people have no idea what the jargon means, and people who profess to know what it means will have entirely different views from one another. Personalisation can be all things to all people; everybody can have a different road on the map to reach wherever they are going. That is one difficulty. Alan Baird's comments about identifying common ground are helpful. It would also be better to talk more about people having influence and control over decisions that are made about their lives.

Unison represents the workforce. One of our concerns is about perceived and real threats to staff, especially when people talk about personalisation as if it means just individualised budgets, for example. Individualised budgets mean that local authority and voluntary sector services are no longer needed, because

everybody has their own budget with which to buy services—although the marketplace in which they will buy those services is never too clear.

The vast majority of the workforce—Unison members and others—are committed to providing services and genuinely wish to involve service users, their carers and their families in the process. Social care and social work have a long history of trying to achieve that in different ways. I come from a community development background, in which we work with groups to influence matters. The jargon is new, but some of the concepts are quite old.

Several issues are creating problems. With the Scottish Personal Assistant Employers Network, we commissioned research into people's experience of direct payments, which are only one part of the wider agenda. We obtained some concerning evidence. Direct payments sound nice—they give people control. However, as David Wiseman said, controlling their care and employing staff put a huge burden on people. The research found that people take on the task and think that the arrangement is good but then leave themselves open and vulnerable on employment matters, for example. Some employees did not have contracts and were not paid the right amount of money in the right way. From a trade union point of view, we can see that that would result in automatic decisions at employment tribunals, which would undermine the system.

When we produced that report with the employers network, we sought a discussion about it with civil servants and the Government. That was some months ago, but they have not yet picked up the phone to arrange a meeting with us. We are a wee bit concerned that people are blinkered to the difficulties that are out there.

Genuine engagement with the workforce is needed. Alan Baird gave the example of a seminar that involved 100-odd people. That is good, but we need discussions and conferences with the workforce. If staff do not buy into the system and if they perceive it—understandably—as just the threat of direct payments, they will resist it. We must have a much wider discussion about how we engage with service users and carers to give them more influence and control, alongside the people who provide services.

11:00

Annie Gunner Logan: By focusing on personalisation and trying to make it clear that the most important thing about a service was what it did for a person, "Changing Lives" attempted to address the situation in which every discussion about services came down to whether someone received 10, 15 or 20 hours of support, what

qualifications the people providing support had, how many teaspoons were in the drawer and so on. After all, only the individual can say whether they want to have a circle of friends, get a job, live more independently or have less stress and more peace of mind. Indeed, that is what we mean when we talk about outcomes in care and support.

Of course, that is what personalisation means for service delivery. However, it has to start much further back than that with the assessment of need and the whole commissioning strategy. We need to isolate what individuals want from a service at that point because by the time we reach service delivery and referrals it is almost too late. As a group of service providers, we are very interested in how personalisation can be built into the commissioning process and not simply left for service providers to deal with.

David Wiseman: We certainly believe that the input of service users and carers is fundamental in the regulation of care services. Part of our role in that respect is to find out how we involve people in that work and, to that end, we employ lay assessors who are themselves service users or carers. A significant element of our inspection process involves talking not only to carers but to service users about the quality of care provided by a service.

That work has been moved even further forward with the inspection regime that we introduced last year. That process not only grades the involvement of service users and their carers in the service but sends out a clear message that a service cannot get a high grade for the rest of what is being graded unless it can demonstrate and provide evidence of the involvement of service users and their carers. Although there are very good examples out there of people being involved in service design, in their own care and in monitoring the service, a lot of work still has to be done in other areas to ensure that people have more meaningful and direct involvement.

Two or three years down the line, we will need to test the current view that involving people in that way leads to better-quality services. I hope that comparing what is happening now with the situation in three years' time, after that approach has developed somewhat, will prove the point.

Carol Wilkinson: I am less concerned than Stephen Smellie about the current workforce's reaction. When social workers and social service workers discuss the issue at seminars and conferences, they tend to say, "Well, this is what the job is all about; this is how we want to work with people." They do not find that part of the job threatening; in fact, they find it enjoyable and challenging.

However, I have to say that there are issues for employees with regard to the range of services, particularly where they are employed by service users. Those people have exactly the same support, development and training requirements as any other worker.

Stephen Smellie forgot to say that we were party to the Unison study. I should point out that, although it was quite small scale, it mirrored the larger study that was carried out in England, which concluded that certain serious issues involving employers, service users and employees have to be addressed if we are to put control in service users' hands.

Alan Baird: In response to a comment made by Stephen Smellie, I point out that the seminar that we held in September involved service users, carers and front-line staff. I accept that only 150 were present, but the principle behind it was that such wider engagement is of huge importance.

I think that that a cultural change is happening in Scotland. Notwithstanding Stephen Smellie's concerns, there is probably an appetite for personalisation. The work of HMIE and the SWIA and, as David Wiseman said, the expectation around gradings and the involvement of service users and carers are changing how we think, so the opportunities are much greater. We must remember that it is not all or nothing and that a number of people will still want formal day care services, but there will be a demand for more individualised time. However, we must be careful not to throw the baby out with the bath water.

Aileen Campbell: I have a question about direct payments. How do you interact with the UK Government in relation to direct payments? I imagine there is a reserved element to certain payments; employment law is also reserved.

Carol Wilkinson: Benefits and pension payments are reserved functions of the UK Government, but social care policy is a devolved matter, so how local authorities develop their direct payment schemes and dish out money is a Scottish decision, not a UK one.

Ken Macintosh: Roughly how many people take up direct payments? I think that there is wide variation in take-up—for example, they are not taken up in my local authority area—but I would like an overall picture.

Carol Wilkinson: The number is small.

Ken Macintosh: I think that a different device is used instead of direct payments—I am not sure what it is called—which is a kind of halfway house between direct payments and the old-fashioned delivery of care services, with the local authority having an approved list of providers. I thought that direct payments would be widely adopted, but it is

clear that they have not been. I want to get a feel for the numbers involved, though.

Annie Gunner Logan: I may be shot down in flames for this figure after the meeting, but I think that between 2,000 and 3,000 people in Scotland get direct payments. The majority of people use direct payments to employ a personal assistant, which is when the issues arise that Carol Wilkinson and Stephen Smellie mentioned. People with direct payments are not obliged to employ a personal assistant; they can purchase a service from an agency or another provider, although I think that few people purchase services in that way. I am not sure of the breakdown of the figures but I think that, generally, a personal assistant is directly employed.

The halfway stage that Mr Macintosh talked about may be the individual budget system. Members may have heard of the in control scheme, in which the needs of a group of people are assessed and they are each given a notional budget but, unlike what happens with direct payments, they do not get any actual money. The in control scheme, and similar schemes that are being developed rapidly in England, attach a budget to an individual, who discusses with their social worker and commissioner how that will be spent on services; they do not get the money in their hand.

Ken Macintosh: That does not qualify as a direct payment.

Annie Gunner Logan: No.

Ken Macintosh: Is that system widespread?

Annie Gunner Logan: Certainly not in Scotland. It is being developed in England, but it is still very much in a pilot phase.

Stephen Smellie: I will go with Annie Gunner Logan's figures on the uptake of direct payments. As in Mr Macintosh's local authority area, there was not a huge uptake of direct payments in my local authority, which is South Lanarkshire Council. Some people would claim that that is because direct payments were not promoted properly. However, some people do not want direct payments because of the hassles attached to employing a personal assistant. If we are arguing that people should have a choice, we must take on board the fact that people also have the choice not to take up direct payments.

However, one outcome in South Lanarkshire—it is not unique to South Lanarkshire, but that is the area that I am familiar with—arises when someone is provided with a service through the local authority, a voluntary organisation or a private organisation and is satisfied with it, but then finds that the local authority has awarded the contract to another organisation. The person is told that they

will no longer receive that particular service and carer, but will receive a service from a different company and from somebody whom they do not know. They are told that, as an alternative, they can use direct payments. There has been a huge upsurge in the use of direct payments in South Lanarkshire Council. If direct payments mean that a person can keep a particular carer and set of arrangements, they opt for that system.

However, that is not what the direct payments system was designed for and it is not what people in the direct payments movement advocate. The reality is that the inflexibility of the way in which the contracting culture works sometimes encourages people to take on direct payments, but not because they really want to go down that road. By and large, as Annie Gunner Logan described, the direct payment goes into the bank account of the agency that delivers the service. Whether that gives the individual any more personalised control over the service than they had previously is entirely debatable. As Annie said, the policy must be consistent from the beginning if we want meaningful personalisation.

The Convener: This might be a good point at which to move on to our third topic for discussion, which is integrated and partnership working. I am sure that commissioning will come up and will be the focus of the discussion. However, before we get on to that, I want to ask how well social work services are being integrated with other local authority services and statutory bodies. What is your perspective on that? Mr Baird, do you want to comment?

Alan Baird: I just saw my colleagues looking at me.

The Convener: You can go first and then they will contradict you, maybe.

Alan Baird: That is always possible.

The world in which we now live recognises that social work cannot do everything on its own. The "Changing Lives" report was clear about capacity, and that we should use qualified social workers as they ought be used, given their experience and skills. It is important that new and emerging strategies such as the early years framework become a reason for good dialogue. We talked earlier about child protection, which is a case in point, in that a much more integrated approach is now taken to it.

Social work would like the universal services to take on a bit more responsibility for individuals and families, particularly at an early stage. If we are to deal with the capacity issues and the pressures on front-line staff, earlier intervention work needs to be undertaken by the universal services—which was a key component of "Changing Lives". That said, the GIRFEC—getting it right for every child—

programme has made a big difference. We are continuing to learn and develop. For example, we are building capacity in relation to the single assessment, but we are not flooding individuals and families with several workers. We have a way to go, but progress to date is encouraging.

Professor Lishman: Social work students are now educated with nursing students and sometimes with teaching and medicine students. They do their practice learning in a variety of settings, including integrated health and social care and education settings. They are exposed to ways of working that are different from the traditional social work ones, which involved barriers. One hopes that that will also help with the change in culture.

11:15

Carol Wilkinson: The picture is variable. I would not contradict Alan Baird: there are parts of Scotland where services and individuals work well together. However, that work is largely between social work and education, or social work and health, so Alan is right to say that we have yet to crack it in terms of the notion that responsibility should go much wider.

Joyce Lishman is right in what she says, but education and training can be patchy. Some universities and colleges are committed to the idea and ensure that their health and social work departments work together, but such provision is not universal. It depends on the commitment of senior managers and individual workers, and on the culture of the organisation. In some parts of Scotland, you might get a joined-up service; in others, you might not. That is clearly important.

The Convener: You are all correct that the service is patchy. However, there is also real willingness to make things work.

Carol Wilkinson: Yes.

The Convener: There might be willingness within local authorities, but what do they struggle with? Is there anything that we could do to make it easier for them?

David Wiseman: My comments may touch slightly on those questions, but I wanted to give the perspective of the Scottish Commission for the Regulation of Care—not in the context of our regulatory role but in the context of our role in informing and influencing policy. We use the evidence that we gather to try to inform and influence policy.

We must integrate the approaches of the scrutiny bodies. The new arrangements will bring in the Social Work Inspection Agency, the care commission and the child protection part of HMIE, but there will be separate health scrutiny and

education scrutiny bodies. Those bodies will have to work together. When we consider services from the point of view of the individual, it is the whole package that is important. Work across the scrutiny bodies will have to be integrated.

I used to work in South Lanarkshire Council. With "The same as you? A review of services for people with learning difficulties", we were reasonably successful in getting local authorities to understand their corporate role and in gathering round the table people who had a significant contribution to make to ensuring that people really were treated "The same as you". For example, leisure and recreation services were involved; it was not just about social work, education and health services.

People have to understand their rights and responsibilities. In the case of services for older people, we were quite successful in getting the Government to understand that people in care homes are as entitled as anyone else is to community health services. For the first time, that idea was spelled out in policy, which helped people to understand the issue. Tensions can arise if people do not know about the rights of people in residential accommodation to use services in the wider community.

There can be barriers. Local authorities sometimes struggle when working with their partners in community health partnerships and community planning if different targets are set for different partners. Tensions can exist because of differences between outcome agreements and HEAT—health improvement, efficiency, access and treatment—targets. When integrating services, we also have to integrate targets and performance measures.

The Convener: Does the voluntary sector have a particular perspective on integration?

Annie Gunner Logan: Oh, yes.

The Convener: Would you care to share it with us?

Annie Gunner Logan: I would be happy to. The "Changing Lives" review took quite a good look at commissioning and partnership working, and the report said that there should be more partnership working. The report took the view that voluntary sector providers had almost been relegated to the role of suppliers and had much more to offer. It contains some interesting passages about the need for providers' expertise and experience to be brought to the table because, in many respects, the providers know more about what is required than the commissioners do.

I wish that I could tell the committee that huge leaps, bounds and advances were made in commissioning. In fact, the reverse is true. I said in

my written submission that the relationship between providers and commissioners has become characterised by commercial transactions that are driven by procurement policy. That is not happening everywhere, but where it is happening, it is causing serious ructions.

Because of a combination of financial pressure on local authorities—which everybody understands—a big push for public procurement reform and some significantly strengthened procurement regulations, a number of authorities have decided to retender all their services in a particular category. That approach has been especially prevalent in learning disability community services, but it is not restricted to that category. Once an authority decides to retender a service, procurement regulations take over and everything that we seek to achieve in social care is supplanted by the need to follow procurement rules.

We undertook a study of our members' experience of 14 or 15 different procurement exercises over the past couple of years and found that those exercises pretty much drove a coach and horses through some of the principles that we have talked about this morning, such as personalisation. We found that the individuals whom the services support are not only not consulted but are often not even notified that retendering will happen. They are certainly not always offered direct payments as an alternative, although that alternative exists.

We have talked about partnership, but our study found that voluntary organisations are now having to compete with and bid against one another. It is not simply a question of a voluntary organisation submitting a bid to continue to provide its services and to carry on supporting the people whom it currently supports—geographical areas are being reconfigured so that it has to bid against its fellow voluntary organisations for consolidated contracts.

We have talked about a stable and confident workforce, but people are not sure whom they will work for after a procurement process has been gone through. They will have entered into a contract with an organisation but might find, when the service has been retendered, that they have been transferred to another voluntary or private sector organisation under the Transfer of Undertakings (Protection of Employment) Regulations, which creates significant instability and uncertainty for the workforce.

We have talked about service quality and how we are starting to consider outcomes and trying to raise standards. However, our study found that retendering exercises are dominated by cost, which has knock-on effects on the workforce and on pay and conditions.

We did not find much evidence that particular benefits come from the retendering exercises, other than marginal savings. Everybody recognises that such savings exist and understands that the need to make savings is a reality for authorities, but the principal benefit of retendering seems to be that authorities are able to congratulate themselves for having followed the procurement regulations, which means that they will not be subject to litigation. I know that that sounds harsh. It is not happening everywhere. Some authorities are finding creative ways to recommission, deal with some financial pressures and stay within procurement regulations without doing what I described, but such exercises are increasing.

The news is not especially happy. There is a fundamental tension between everything for which we have ambitions in social care and the drive towards public procurement reform and financial pressures. It is extremely difficult to resolve those tensions, but because we are making a fuss about it, several authorities have asked us to talk to them about how best they can manage the tensions. We are always ready to talk to people about that. We have been working with the Scottish Government procurement directorate, the joint improvement team, ADSW, the Convention of Scottish Local Authorities and various others to try to find a way through. However, I impress upon the committee that much of what we are trying to achieve in social care is trampled underfoot by some of what is happening. I would not put it any less strongly than that.

Ken Macintosh: That point was well made in the various papers.

A while back, some organisations including CrossReach gave a very powerful presentation on the added value that is provided by many voluntary sector organisations—all members will be aware of examples from their areas. Do local authorities acknowledge the additional contribution that the voluntary sector can make in bidding for contracts or caring for individuals? Does the sector have any status at all in working with local authorities or other commissioning bodies?

Annie Gunner Logan: Yes, it can have. Even in the retendering process, the quality parameters of a tender can be framed to enable organisations that offer added value to bring what they have to the table for scoring. The situation is beginning to improve a bit—that is actually happening in some tender evaluations. In one excellent case, providers were asked not only about their policies, procedures, staff complements, rotas and so on but about how the service could improve people's lives and how they would provide support that focuses on outcomes and so on.

It is well and good when the kind of added value that a voluntary organisation can provide is scored in an evaluation, but that is not always the case. Indeed, there seems to be no common ground on the matter, which is why we are working with the people I mentioned earlier to put together some best practice guidance or, at least, some material on best practice. Authorities tend to do their own thing and, as with everything else, some are better at it than others.

I do not want to overstate the added value that the voluntary sector brings. Although voluntary organisations have the capacity to bring an awful lot of added value to social care, it needs to be demonstrated rather than stated. Certainly, every organisation is different.

Carol Wilkinson: There is no doubt that the voluntary sector delivers certain services that the private sector and local authorities choose not to deliver. The fact that those organisations can move into more complex and difficult areas and can, with their expertise, develop small projects itself brings added value.

Something that might have been lost in the process that Annie Gunner Logan described is the recognition of certain expertise. A voluntary sector or private organisation that has been delivering a particular service to particular groups for a long time might well have a lot more expertise than the person commissioning the service. Annie is right to say that that does not mean that, as a result, an organisation should automatically get a contract but, if we are not careful, recognition of an organisation's expertise and its ability to deliver a service can be lost.

The SSSC is concerned about protection of workforce development in this process. Now that all providers have to get their staff qualified and registered with us, are contracts building in sufficient financial resources for such development? We fear that they are not.

Annie Gunner Logan: After I finished my earlier great tirade, I suddenly remembered that the care commission is beginning to publish evidence on the grading system that has recently been introduced. The picture is not yet clear, but what is beginning to emerge is that voluntary organisations are receiving the highest grades in significant community support services. The irony is that those organisations have, although they are among the leading providers, become more vulnerable to certain cost-related pressures.

The Convener: I suppose that Mr Wiseman should be allowed to come back on that, but I will let Mr Baird in first.

11:30

Alan Baird: Mr Macintosh mentioned CrossReach. It is important to say that local authorities depend absolutely on voluntary organisations and private providers throughout Scotland for the services that they deliver. That is clear. The reality is that more and more local authority services are moving from internal to external providers.

The committee has heard Annie Gunner Logan's eloquently expressed view of CCPS, with which we have had several discussions. The debate needs to continue and we need to resolve the situation. There are vulnerabilities in local authorities and in CCPS's membership and there are still different views about what we should and should not tender for. It was helpful that John Swinney suggested in Parliament that we did not really need to go down the route that we in local authorities had had to take—that of following the public pound and achieving best value. Many more discussions need to be had, but the bottom line is that service users, the community and the voluntary sector will suffer if we do not get the system right. A lot is riding on resolving the situation.

The Convener: I will let Mr Wiseman have the last comment.

David Wiseman: My comments are in support of what was said about grading. It is still early days—we are starting only now to analyse the full year of grading—but we published in November a report entitled "Gradings so far", a copy of which can be sent to the clerk, if it would be useful. As Annie Gunner Logan said, that report showed that 17 per cent of voluntary sector providers received grades of 5 or 6—the top end of gradings—for support services, which include care at home and day care for adults. That was the highest percentage of such grades among the sectors. Similarly, 13.2 per cent of care homes in the voluntary sector received grades of 5 or 6, which was the highest percentage of such grades.

It would be worth checking back on whether another outcome of a procurement exercise could be seen as a negative. It would be interesting to know whether services that had good grades lost contracts to services that had lower grades. We need to track that. If that were the case, it would place a question mark against information, intelligence and the weighting of quality in procurement processes.

The Convener: Mr Macintosh has a very brief supplementary question.

Ken Macintosh: My question is about an issue that I had hoped would have emerged by now. We talked about pay and conditions. Does anybody—particularly Ms Gunner Logan—have a view on the

cost differences between the voluntary sector, private providers and local authority provision? Until relatively recently, that caused huge problems. I had thought that a process was being followed to resolve that through continuing discussions to achieve a common platform of agreed costs for local authority care provision, particularly for care of elderly people.

Annie Gunner Logan: A national negotiation applies to care home rates, but they represent the cost of caring for an individual resident. That money goes to employers, who decide the rates of pay for their staff. That negotiation harmonises not pay and conditions, but the rate that is payable for the service. Only voluntary sector and private sector providers are involved in that; local authorities are not part of it and will continue to pay what they pay. The negotiated rates apply only to externalised services, which is a bit of an issue for some of us.

Ken Macintosh: Has the gap narrowed? Has harmonisation been achieved? The issue was huge just a few years ago.

Annie Gunner Logan: I cannot answer those questions. I think that some differentials still exist. What private sector and voluntary sector organisations receive is fixed, whereas what local authorities pay directly for their own services is not fixed by the same mechanism. I would need to look into the difference between the two rates. Information on that is available, but I do not have it here.

Alan Baird: I do not think that there is a clear picture, but I can give the committee anecdotal information from Dundee. We tendered for social care services for older people in their homes. The difference between the cheapest and most expensive tenders was £6 or £7 an hour. The committee will be pleased to know, however, that it was not about the cheapest tender but about quality. We must take into account that there was such wide variation among large and local providers of social care. In Dundee, the gap is closing between the pay of those who work for approved providers and that of our council staff.

Carol Wilkinson: We have picked up that there are issues, but I do not think that they are evenly spread across the country, as Alan Baird suggested.

We have picked up issues about the requirement for people to get qualifications. The private sector in particular says that its staff move on when they get qualifications because they can get better paid jobs elsewhere. Incidentally, the private sector has asked me whether workers in different health care and education services are paid differently, and whether that is a factor in integrated services. I do not know the answer.

There is a range of issues to consider, and I think some people have a bit of a head-in-the-sand attitude to them. Concerns about certain issues will be voiced more strongly, so we must sort out the problems, particularly in relation to registration of the workforce.

Annie Gunner Logan: As we said previously, registration applies to any organisation, so it does not matter by whom a person is employed. If the person is categorised as a social services worker, he or she must be registered and have X, Y or Z qualification, which is where differences in pay and conditions get acute and problematic. I am sure that Stephen Smellie will tell you that it is not necessarily the pay that is different. For example, there will, for various structural reasons, be a huge disparity between a local authority employee's pension entitlement and that of a private or voluntary sector employee. The upshot is that, although we are all in the same game trying to attain the same standards and are measured by the same yardsticks, there is a structural imbalance in pay and conditions, particularly in pensions, which causes difficulty and has an effect on recruitment. Anecdotally, voluntary organisations will say that many of the staff that they lose go to local authorities because they have a better package for them.

Stephen Smellie: The corollary of that is the financial cost of services. As Alan Baird said, if more services are tendered externally, it is a race to the bottom in terms of pay and conditions. Nothing has been done to push up pay and conditions. Of course, I am not saying that there is a deliberate policy, but pay and conditions are effectively being depressed rather than lifted up. Determinations on competing bids according to cost would often involve the costs of different pension schemes. There can be big savings from the cost of pension schemes, so pension entitlements are going down. Given the concern about the future of pension provision, that situation should be of concern to the UK and Scottish Governments. If we depress not only pay and conditions but pension entitlements, we will store up further trouble for the future in our workforce.

David Wiseman: Reference was made to registration of the social care workforce. The people who are authorised to inspect and to investigate complaints in that context are care commission officers, who must be registered with the Scottish Social Services Council. Therefore, both a professional qualification and a qualification in regulation are required. That is a challenging issue for future scrutiny regimes because none of the other bodies concerned—HMIE, SWIA and NHS Quality Improvement Scotland—has a requirement to be registered with the workforce regulator or to have a regulation qualification.

The Convener: We move now to our final topic for discussion this morning: leadership. The topic was touched on in the "Changing Lives" report, and it was highlighted in SWIA's annual report. SWIA said that the picture of leadership around the country was patchy. What difference could a chief social work officer make to leadership in social services? What will be the challenges in strengthening that role? Anyone?

Alan Baird: It looks like it is me again.

Stephen Smellie: Well, you are a chief social work officer.

Alan Baird: That is true.

An important issue has been the position of the chief social work officer within organisations, which has varied from council to council. In the view of the ADSW, it is critical that the chief social work officer sits high up within the organisation and is directly accountable to the chief executive. Pretty well 100 per cent—not far off it—of the functions of social work are statutory. If we take child protection as an example, we can see the importance of having that strong connection within a council.

The advisory capacity is also important. We use our skills, background and knowledge to inform elected members and chief executives about the key issues and to advise them on how they might respond in particular situations. The recent consultation—through "Changing Lives"—on the role of the chief social work officer has now concluded. It has been very helpful. The policy document showed tangible evidence of progress.

A wider issue arises. Being a chief social work officer does not necessarily make someone a leader. The leadership agenda is hugely important for the profession. We have had 32 local authorities for almost 13 years now. In 1996, at the time of reorganisation, we lost a lot of experience because people retired. Furthermore, the workforce is getting older, so it is critical that we concentrate on the next leaders in social work. The outcome of the leadership work stream will be significant for the strengthening of the profession in Scotland. The work stream is coming to an end, and I have been involved in recent discussions on taking the work forward. It is important that, from within social work, we are able to contribute towards developing the next leaders and the next chief social work officers. We need to have the right people in place, and the leadership work stream has focused on where they will come from.

Carol Wilkinson: Scotland has worked hard to retain the specific role and function of the chief social work officer. Over the past few days, there has been a lot of interest in the press—on the back of the child protection cases in England—about whether England should introduce the same

kind of role. That role has become rather diluted over the past 10 or 15 years.

The chief social work officer could be given certain responsibilities that would reinforce some of the ideas that we have been talking about today. We should consider other sectors such as health, in which there are nursing leaders and leadership among doctors and other health professions. We have been talking about integrated working, and the social work leadership role will be important.

Another point that I wish to make is that we should get away from considering only the role of the chief social work officer. The "Changing Lives" report talked a lot about leadership at all levels. We are trying to get all workers in social services to see that they have a leadership role at whatever level they are operating at. That is a huge cultural shift, and we still have quite a long way to go on that.

11:45

Professor Lishman: In social work education, students are exposed to thinking critically about themselves as leaders. "Changing Lives" placed emphasis on social workers taking on a leadership role as part of their professional accountability, and that was incredibly helpful. It has strengthened social work education. Leadership is also now seen as a continuing professional development activity, and 500 middle managers in Scotland have gone through a programme called leading to delivery, which has recently been evaluated positively. The idea was to get a tranche of middle managers who were confident and articulate and who could hold their own in integrated services discussions.

Stephen Smellie: We very much support the role of the chief social work officer and share some of the concerns that Alan Baird and Carol Wilkinson have touched on. Over the past 30 years, there has been a dilution of the role. Whereas, in the regional council days, the director of social work tended to relate directly to the chief executive and elected members, the role has been diluted in some areas. Sometimes, social work departments no longer exist as they did—they have been split. Sometimes, the chief social work officer has dropped down the hierarchy, so to speak, although that is not always the case. If there is suitable corporate responsibility and political commitment, that may not be an immediate issue. However, we share the concerns that there may not be someone in that role at the very top table in local authorities. The recent consultation has been quite encouraging in that respect.

I agree with Carol Wilkinson that leadership is not just about the chief social work officer or the management of the services in whatever area. I have spoken to people who have participated in the leadership development courses and, from what I can make out, the courses have been very good. Nevertheless, they are, by and large, seen as a career-stepping, management-development approach. I do not think that much has been done to develop the concept of the leader in the team or in the workplace. We need to move forward on that.

Education plays a critical role in enabling people to see themselves developing in that way, and one of the difficulties that we face currently goes back to the workload issues that we touched on at the beginning of the discussion. One of the critical roles in social work is that of the practice teacher—the person who works with the students when they are on placement. It is becoming increasingly difficult to persuade social workers to take on that role. In most cases, they do not get any more money for it, but that was never a big problem in the past—I am not saying that they should not get more money for it. The problem is mainly to do with workloads. If a social worker wants to take on a student and do it properly, that takes a fair amount of commitment. In most of the council areas—I think that it is the same in the voluntary sector—there is, in principle, an agreement to adjust workloads to accommodate that. However, that does not always happen in practice, as there is always other stuff to be done. Many workers do it for a year or two and then say, "I've had my turn and I'm not going to do it any more." That is the problem.

The practice teacher is one of the leaders in the workplace in whom we need to invest. We must find ways in which to release time to allow social workers to take on that role. We should not talk about leadership only from the top down. There needs to be leadership throughout the entire workforce.

The Convener: Professor Lishman might have something to add on practice teachers.

Professor Lishman: The position regarding practice learning opportunities varies throughout Scotland. There are shortages of practice teachers in some areas but not in others. One needs to investigate what factors make for successful placements—employer support is clearly one factor. The SSSC pays a daily placement rate through the universities. Certainly in the north, that has helped the provision of practice learning hugely and we have appreciated it. The SSSC developed the practice learning qualification, which is being taken by tranches of practitioners. It is a variable picture: some areas have practice

learning as a part of every worker's duty but, sadly, others have not reached that point.

Carole Wilkinson: Stephen Smellie is right that there is an issue. The main issues are in the west of Scotland, although there are some difficulties in Edinburgh. The factors that seem to govern what happens are to do with workload; the outcome of single status and the fact that some people are no longer paid for being a practice teacher and are therefore unwilling to do it; and whether organisations have space.

There is also a cultural issue. Nurses and teachers accept as part of their profession that they train and support the development of workers of the future, but we are yet to embed in our sector that professional sense and leadership role. The Government puts over £3 million into practice learning for something like 500 social work students, which is much more money than it puts into training thousands of workers in the voluntary sector. It is a huge investment. Annie Gunner Logan might want to comment on that.

Joyce Lishman is right that the picture is patchy. I am due to go and meet the directors in the west of Scotland tomorrow to talk about that very issue and see how we can find some longer-term solutions. We stumble from problem to problem every year with students ending up with late placements, which is not a good thing.

Annie Gunner Logan: I come back to the consultation on the role of the chief social worker, which Alan Baird mentioned. It was a very interesting and important document from the voluntary sector's point of view. For the first time, it was made explicit that the chief social work officer has a role not just in relation to the local authorities' workforce development, service quality or view of the world but to all the services that are provided from the public purse in that local authority area, including those provided by the voluntary and private sectors. That is very important. For some time, my organisation, the CCPS, has been trying to promote a view—with limited success, I have to say—that an authority that uses public money should have a responsibility to see all its services and workforce as something to be invested in.

We talk about the social services workforce in policy terms but, in reality, we have my workforce, her workforce and his workforce in different organisations.

We have already spoken about some of the disparities between directly provided services and externalised services, which is where such issues start to come out. I will give you an example of that. We are currently working with an authority on commissioner-provider relationships, which is a positive way forward. We are looking at the budget

statement for social work in that authority. There is a list of services that shows how they are going to be cut, reprovisioned, recommissioned or reorganised in some way to make the necessary savings. The first column tells the elected members what the financial impact of that is and the second column tells them about the personnel impact. However, the personnel impact refers only to the council's personnel, whereas many such services are provided externally so the personnel impact will be on the externalised service providers rather than the council.

What is really important about the consultation on the role of the chief social work officer is that it makes it explicit that there is a responsibility in relation to those externalised services that have sometimes been seen as having to look after their own affairs. It is a view that we have been trying to promote so I think that the consultation is hugely significant.

David Wiseman: We also welcome the consultation on the role of the chief social work officer. One of the important things about it is that it suggests an accountability role for the quality of care services provided. Where there are reports about the directly provided services of a local authority, it is important that the chief social worker has an input, particularly where enforcement actions are involved. It is clear that the corporate body and the chief executive have a role in that respect, but it is important that someone has that responsibility.

The four quality themes in the grading scheme include one about the quality of staffing and another about the quality of management and leadership. Care homes and day care services for children had the highest number of overall gradings at grades 1 and 2, which are weak and unsatisfactory. It is not surprising that those services also had the poorest gradings for quality of management and leadership. That link has always been there.

We have always felt that, without good-quality leadership and management and good-quality staffing in terms of qualifications, experience and skills, we will not get good-quality care. That is beginning to show through in the grading scheme. When we look at changes in risk in services, we note certain trigger points. One such trigger point is a change in manager in a care service. You can quickly see a care service move from being very good to being very bad when there has been a change in management if that change has not been the right one.

The Convener: I think that Carole Wilkinson wants to say a final word on behalf of the Scottish Social Services Council.

Carole Wilkinson: I will go back to a question that was posed earlier that none of us took up and answered. There has been quite a lot of investment in leadership and management in our sector and Alan Baird is right about all the work that has come out of "Changing Lives" and leading to deliver, as Joyce Lishman mentioned, but we are now doing leadership management in boxes. Health has all sorts of programmes, teaching has programmes and there are programmes that the private and voluntary sectors might tap into. If we are going to get to the place where we want to be, particularly in relation to delivering personalised and integrated services, we need to do some of that leadership and management development jointly. That would make a real difference. At the moment, we are in danger of just going down the tramlines, which would be a shame.

The Convener: Thank you. That is an interesting challenge to leave the committee to contemplate. Thank you very much for your attendance this morning.

11:58

Meeting continued in private until 12:25.

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