



**A National Care Service for Scotland
Consultation Response from
Child Protection Committees Scotland
1st November 2021**

1 Introduction

Chairs and Lead Officers from all 30 Child Protection Committees (along with associate members representing national organisations and networks with an interest in Child Protection) were invited to attend a ½ day consultation session dedicated to consideration of the National Care Service consultation. A total of 28 CPCs were represented. Members engaged in general and focussed discussion with a particular focus on the implications of the proposals for children and young people in need of care and protection, informed by a presentation from Scottish Government. The views expressed form the basis of this response.

We note that members agreed that the consultation format had significant limitations including the lack of detail within the proposals and the leading nature of the consultation questions which we felt could not be adequately answered with a yes or no response. We have therefore chosen to submit our response in the form of a position paper and have answered relevant questions where indicated.

We would also note that opinions on aspects of the proposals varied amongst members and as such while this response provides a general consensus of Child Protection Scotland members position it should not be considered as fully representing the views of every individual member.

2 General Position of CPCScotland

(ref Q23. Should the National Care Service include both adults and children's social work and social care services?)

CPCScotland cannot support the proposal that the National Care Service include both adults and children's social work and social care services. This is based on the limited detail and evidence provided in the consultation paper alongside the significant risks outlined in section 3

CPCScotland acknowledge that there are potential theoretical benefits of the transformational change that the creation of a National Care Service which includes children's services alongside adult services could offer. These would be primarily in relation to opportunities for: stronger implementation of national standards; co-ordinated workforce development; improved alignment and consistency of services; and shared information systems.

CPCScotland also acknowledges that Scotland has an overview of what needs to change in care and protection services for children through The Independent Care Review & The Promise and from the publication of new National Guidance for Child Protection in Scotland, currently at the start of the implementation phase. However, we note that the Independent Care Review did not recommend a structural solution and there is no mention in 'The Promise' of structural change along the lines of the National Care Service.

It appears that the inclusion of children's services within the proposals for a National Care Service were an afterthought, added in haste with insufficient detail provided and very little evidence presented for the rationale for inclusion. We were also disappointed at the lack of consideration given to the Public Protection role of health and care services and in particular the lack of consideration of the role of the National Care Service in the protection of children at risk of significant harm.

As such Child Protection Committees Scotland concludes that the case has not been made to convince the large majority of our members that the creation of a National Care Service will help to achieve the improvements to services and most importantly outcomes for children in general, in particular those children in need of care and protection, that we all want to see.

We are however aware of the risk of not including children's services / child protection within a National Care Service for adult services should this proceed. The disruption associated with the establishment of a National Care Service will have knock on effects for children's services, regardless of inclusion or not in the new arrangements. Adopting an alternative governance structure for children's services needs careful consideration. The consultation document itself highlights the different models currently adopted across the country in relation to the governance of children's services however there is no analysis or evaluation of these models or rationale for the model proposed.

We believe therefore that a formal review of the risk and benefits of the proposals in relation to children's services, including an option appraisal of alternative structural models for delivery should be undertaken and published to inform further consultation prior to any decision being taken regarding the

creation of a National Care Service to include both adults and children's social work and social care services. This review should include consideration of models for the delivery of children's services adopted within other countries in the UK and a detailed consideration of how Public Protection and in particular Child Protection services could be delivered and governed.

3 Structural change as a solution to recognised problems

- **Structural change with the creation of a National Care Service (or any other major structural change) in and of itself will not create the transformational change identified as required in both the Independent Review of Adult Social Care and the Independent Care Review**

There was a strongly held view amongst CPCScotland members that consistently delivering an individual person centred approach based on quality relationships between practitioners and children and their families and between practitioners and managers within and across agencies were key to improvement.

The investment in services for children, support and recognition of the valuable role played by the children's workforce, promoting a culture of trust and collaboration, multidisciplinary and multiagency working relationships are all significantly more important to improving services and outcomes for children than the governance structure in which services sit. Changing structures does not necessarily result in the improved working required.

- **Structural change with the creation of a National Care Service will not in and of itself result in consistency of service**

The assumption is made or is at least implicit within the consultation paper that a national approach would generate consistency as a result of the creation of a National Care Service. We believe this is at best optimistic with members sharing examples of unified structures under a national service (eg NHS Scotland The Scottish Fire and Rescue Service and Police Scotland) where there are still significant inconsistencies of service across the country.

4 Children and Families in Specific Circumstances

(Ref Q24. Do you think that locating children's social work and social care services within the National Care Service will reduce complexity for children and their families in accessing services?)

- *Children with disabilities*
- *Transitions to adulthood*
- *Children with family members needing support)*

CPCScotland members recognise that current system is not functioning as well as it should for too many children and families in the above groups with transition to adulthood a particular point of vulnerability for children who have experienced neglect, abuse or exploitation. However, we also recognise that the barriers to services working well together exist equally between services managed under one agency (for example between different parts of the NHS system or between different services managed by local authorities) and between services managed by different agencies. This highlights that a single governance structure does not automatically result in reduced complexity or a more joined up service for children and families. Rather the change required is in relation to culture, leadership and practice, supported by investment. Where services work well for children and families in these circumstances this is as a result of a culture of collaboration and good working relationships within and between organisations across all levels and is not directly linked to any single governance structure. All of this is covered comprehensively in the Promise, rather than any call for structural change in the form of a National Care Service.

5 Alignment between children's social work and children's health services in the context of GIRFEC

(ref Q25. Do you think that locating children's social work services within the National Care Service will improve alignment with community child health services including primary care, and paediatric health services?)

Good alignment and a shared child's plan developed jointly by all agencies involved in supporting the wellbeing of the child in partnership with the child and family is a core principle of GIRFEC. Effective implementation of GIRFEC should continue to be our focus and will be supported by the publication of refreshed GIRFEC guidance, due by the end of 2021. We believe structural change may detract and potentially undermine efforts in this regard and may have the unintended consequence of marginalising education colleagues who fulfil the key role of the named person for the majority of children in Scotland.

6 Risks of creating a National Care Service including children's services

(Ref Q26. Do you think there are any risks in including children's services in the National Care Service?)

Through discussion and sharing experiences of members involvement in other significant structural change we have identified a number of risks associated with the creating of a National Care Service and in particular the inclusion of Children's Services within this service. These are outlined below.

- ***Diversion of resources and energy in planning***

There is a risk that the change management required to create the National Care Service will divert significant resource and energy into preparation and planning to implement the new structural arrangements and away from improvement of services to protect children and support their wellbeing. This at a time when both resources and staff resilience are under considerable strain due to the ongoing impact of the pandemic and the existing change priorities to improve practice and outcomes. There is still significant work to be done to more fully embed GIRFEC, keep the Promise and make children's rights real. There is a real risk that this ongoing improvement activity would be overshadowed by a focus on structural change and the significant change management resource this would entail.

- ***Increased risk during the transition phase***

CPCScotland members come from a variety of backgrounds and include individuals with significant experience at a senior management level of navigating structural change within their agencies; the creation of Police Scotland; the creation of the Scottish Fire and Rescue Service; the development of CHCPs; and the development of Integrated Joint Boards. They have highlighted risk and unintended consequences such as difficulties in retention and recruitment of staff, a negative impact on staff morale, disruption to services and financial costs (both anticipated and unanticipated).

- ***Focus on adult social care at the expense of services for children***

It is clear that the Independent Review of Adult Social Care is the main driver of the National Care Service Proposals and, as such, getting it right for adult social care / care homes is likely to be the highest priority within the planning and implementation / delivery stages for the service should it be created. This comes with a significant risk to services for children which we believe are unlikely to receive the necessary level of priority as has been evidenced in the lack of priority and detail afforded to children's services in the development of the proposals to date. It is of note that the Independent Care Review did not conclude that structural change was necessary or recommended.

- ***Fragmentation of existing joint working arrangements for children***

The proposals for a National Care Service do not appear to adequately reflect that the range of agencies involved in services for children is much wider than those services and practitioners who would form part of a National Care Service. Consideration of the significant role played by staff within education in protecting children and promoting their wellbeing is a particular omission given their pivotal role within the GIRFEC practice model. We note that GIRFEC is used as a model for the development of GIRFE in the National Care Service, yet children's inclusion in the National Care Service will risk the fragmentation of GIRFEC with the removal of key components to different management structures – potentially making it more complex rather than less complex and making integrated support for children and their families harder to deliver.

- ***An absence of focus on child protection risk of significant harm***

The tone of the consultation document appears to signal a move away from a focus on risk of harm and the protection of vulnerable people, and an overly optimistic view that crisis intervention to protect those at risk of harm will not be required once cultural change and significant resource re-allocation towards early help and support is achieved. Evidence based theories of organisational change tell us that such transformational change will take a significant time to implement. Even then, assuming change is broadly successful in reducing the demand for crisis intervention, there will still be some people (including both children and adults) who will experience significant harm or be at risk of significant harm from abuse, neglect, and/or exploitation where urgent multiagency intervention will be required. The protection of those at risk of harm is a complex area requiring collaborative multiagency and multidisciplinary working with local Child Protection Committees having a key co-ordination and governance role. Child Protection must be a key element of service design whatever the ultimate organisational structure, yet there is scant mention of this in the National Care Service proposals.

- ***Loss of local responsiveness and accountability***

The benefits of local decision making involving communities and those with lived experience is widely recognised. Local solutions that are innovative, involve and strengthening communities, and are responsive to local needs would be at risk within a National Care Service. Local governance and accountability may also be lost along with the ability to set priorities and allocate resources according to the needs of areas with very different demographics. Members cited examples from their experience where the creation of a national organisation for the delivery of local services had resulted in a loss of local responsiveness. In particular there is a risk that it will be much more difficult to maintain the important locally responsive role third sector organisations play in supporting families within their communities when the future commissioning process remains unclear.

The role of the Chief Social Work Officer and Public Protection Chief Officer Groups and the vital role they play in local governance and accountability are not given due consideration within the proposals.

7 Mental Health Services for Children and Young People

(Ref Q52. What elements of mental health care should be delivered from within a National Care Service?)

There was a strong view amongst CPCScotland members that mental health services for children and young people were in crisis. This is due to a range of factors including lack of staff and resources, increased demand, limited range of therapeutic services available and inconsistent pathways to access services. These issues need to be addressed urgently. In many areas CAMHS is the only service for children with mental health and emotional wellbeing needs and this model is not coping with the level of need in our communities, particularly with increased needs due to the pandemic and associated restrictions. It is questionable whether these issues would be addressed by delivery from within a National Care Service.

8 A single model of integration

Q58. "One model of integration... should be used throughout the country." (Independent Review of Adult Social Care, p43). Do you agree that the Community Health and Social Care Boards should be the sole model for local delivery of community health and social care in Scotland?

This proposal generated many questions unanswered in the consultation paper around the implications in practice of a move from IJBs to CHSCBs. There is an argument that, assuming a National Care Service is created, then there should be consistency of integration arrangements that aligns with this service. The lack of detailed proposals and potential risks of change versus the limited evidence of benefit were however identified as concerns that would prevent us endorsing this position.

9 Conclusion

Given our position as outlined in this response Child Protection Committees Scotland would recommend that a formal review should be commissioned of the risks and benefits of the inclusion of children's social work and social care services and public protection arrangements in the National Care Service and of alternative models in relation to children's services, child protection and wider public protection arrangements. CPCScotland would welcome the chance to engage in such an evidence informed review.