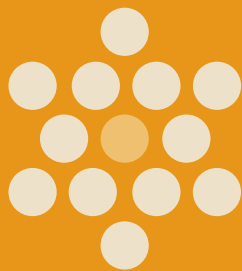


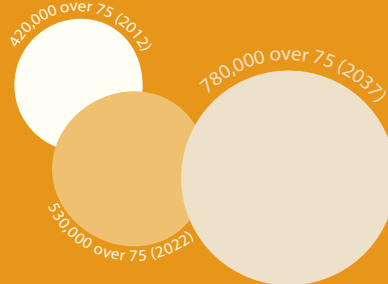
# Workforce Skills Report 2013-14

## Stakeholder feedback and overview

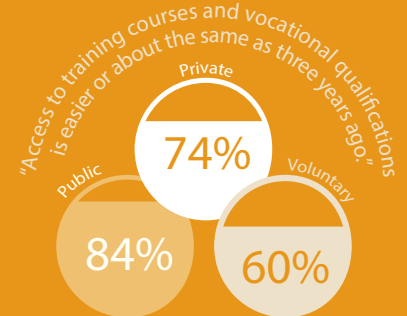
### Scottish Social Services Council



1 in 13 people employed in Scotland work in social services.



Current and projected numbers for adults over the age of 75.



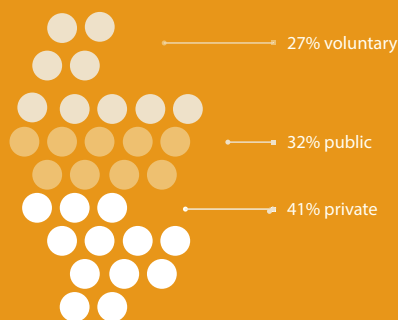
Almost three quarters of the private sector respondents agreed with this statement.



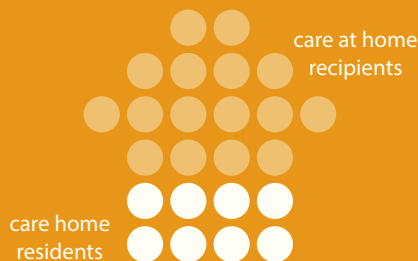
"I/we would anticipate a growth in the numbers of workers employed by our service over the next three years."



Registrations in HSC and CCLD SVQs decreased by 22% between 2010 and 2012.



Workforce of 192,000 people in paid employment.



As of March 2013 there are 60,950 care at home clients and 36,578 care home residents.



● = 1,000 direct payments

The number of direct payment packages increased between 2007 and 2012.



## **WORKFORCE SKILLS REPORT – STAKEHOLDER FEEDBACK AND OVERVIEW**

The Workforce Skills Reports (WSRs) examine a number of key social services workforce challenges. The first three reports cover:

1. service trends and workforce implications for the social service workforce in Scotland
2. qualifications and training provision in the social services sector in Scotland
3. key policy drivers and skills challenges for the social service workforce in Scotland.

This fourth and final report brings together the key feedback from employers and other stakeholders. This report concludes by drawing out some thoughts from the SSSC on the messages for employers and the sector as a whole.

Please note that the workforce data within these reports is taken from the SSSC's 'Scottish Social Services Sector: Report on 2012 Workforce Data'. This report provides a summary of the social services workforce as of December 2012. The SSSC has recently published a report which examines the workforce as of December 2013.

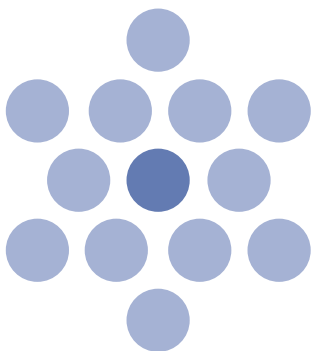
All reports are available from the SSSC's data website: <http://data.sssc.uk.com/>

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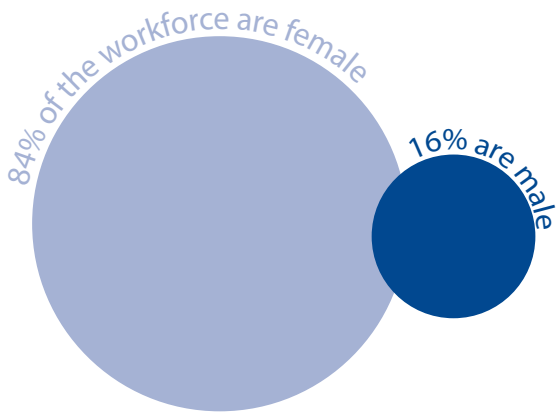
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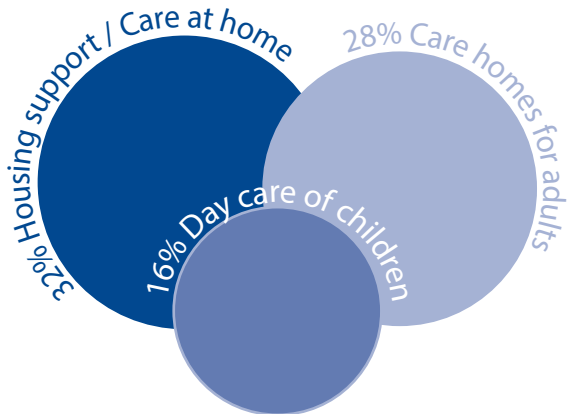
# Workforce Skills Report - workforce in numbers



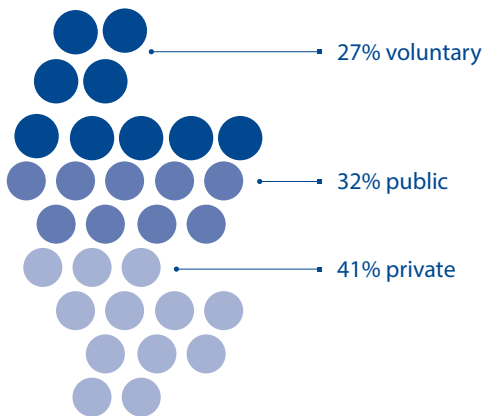
1 in 13 people employed in Scotland work in social services.



The percentage of men in the workforce has remained at 16% since 2009.

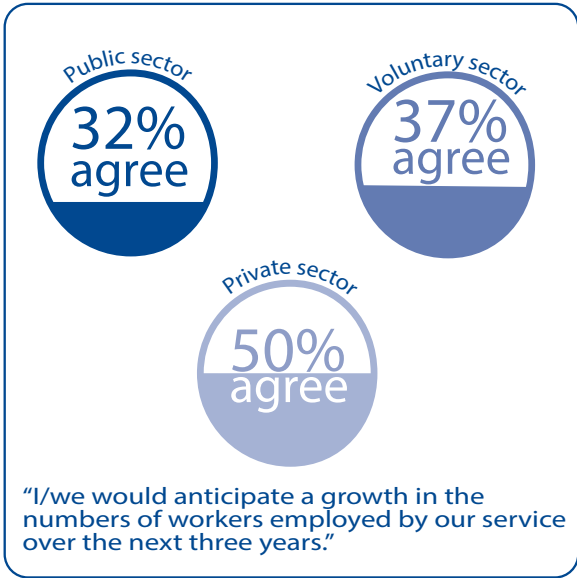
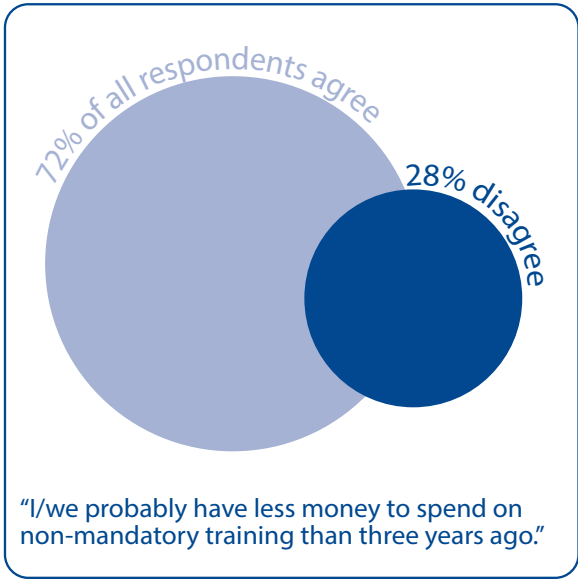
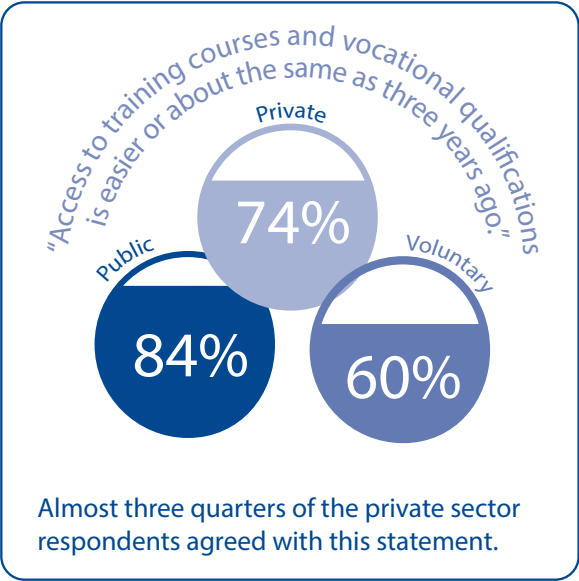


Together the three largest sub-sectors account for almost 76% of the workforce.



Workforce of 192,000 people in paid employment.

# Workforce Skills Report - feedback from employer questionnaire



## **EXECUTIVE SUMMARY**

This report outlines key messages from the three Workforce Skills Reports and summarises the findings from a survey of 780+ employers.

### **The workforce in context**

- There are approximately 192,000 social service workers in Scotland. The majority of workers are employed within the following three sub-sectors: housing support/care at home, care homes for adults and day care of children. The total number of workers fell by approximately 3% between 2011 and 2012.
- The 192,000 figure does not all include all workers in the Scottish social services sector. We don't include personal assistants, childminding assistants and centrally based office staff in private and voluntary services. Also excluded are carers, foster parents and volunteers.
- As of December 2012 there were nearly 14,000 registered care services in Scotland. There were 8,845 separate organisations providing one or more of these registered services. Approximately 41% of the workforce in 2012 were employed by the largest 50 organisations. Just under half of the 50 largest organisations are within the public sector.

### **Access to training**

- Our survey of employers suggests that many services are finding it easy or easier to access training courses than they did three years ago. The majority of employers appear to be focusing a greater proportion of resources on meeting mandatory training requirements. The level involvement of people who use services and carers in training programmes appears to be mixed.
- Many employers have less money to spend on non-mandatory training and dedicate a greater proportion of their resources to meeting registration requirements. Some providers have cut the percentage of their budget allocated to meeting SSSC registration requirements, as they believe they are 'ahead of the game'. A number of providers appear to be increasing the financial contribution they require from staff to pay for their qualification.

### **A growing workforce**

- Approximately 40% respondents to our survey anticipate that they will employ more workers over the next three years. The private sector appears to be more optimistic about growth than other sub-sectors. A number of stakeholders are basing their optimism around the future development of a service believing demand for services will grow. The extent to which this confidence will lead to an overall growth in the number of social service workers is unclear.
- Approximately 37% of respondents to our survey expect to employ a greater proportion of part-time workers during the next three years. Some employers believe that an increase in the proportion of part-time workers in the sector will reflect negatively on a career in care while others believe this change is necessary to deliver flexible services.

### **Key skills challenges and priorities**

Employers report a number of key skill priorities for their workforce. These include:

- supporting staff to focus on the implications of self-directed support (SDS) and moving from a care management approach to one of support and brokerage

- supporting staff to think about risk assessment and risk enablement
- supporting people to develop the skills required to self-manage an illness or condition.

Part 3 of this report contains a table outlining the key skills needs and issues for the social service workforce.

## INTRODUCTION

The SSSC developed Workforce Skills Reports in 2013-2014 cover:

- service trends and workforce implications for the social service workforce in Scotland
- key policy drivers and skills challenges for the social service workforce in Scotland
- qualifications and training provision in the social services sector in Scotland.

We've outlined the key messages from these reports in this overview. This overview report also analyses the feedback from a survey we undertook with approximately 800 social service employers and a series of events we held with employers. The survey and events covered a number of areas including:

- employers' ability to access training courses and vocational qualifications
- changes around the employment of agency workers over the past three years
- employers' levels of optimism around future growth
- the key skills issues and needs for the sector.

The discussion of the findings from the questionnaire and events is contained in part 3 of this report. This section also examines the messages from similar surveys and studies.

The final part of this report draws out the key messages from the earlier discussions.

We would welcome the opportunity to find out more about how you undertake workforce planning and whether these reports support you in that role. We would take a note of information in confidence. If you would be willing to share your experiences please contact Mike Docherty at: [Mike.Docherty@sssc.uk.com](mailto:Mike.Docherty@sssc.uk.com)



## **1. THE SOCIAL SERVICE WORKFORCE IN CONTEXT**

The SSSC publishes an annual Workforce Data report examining the size and characteristics of the social service workforce in Scotland. The report combines data from the Care Inspectorate's annual returns and an annual survey of Scottish local authority social work services. The latest survey indicates that the sector employed approximately 192,000 people in December 2012. Housing support/care at home, care homes for adults and day care of children services employ the majority of these workers. These three sub-sectors account for approximately 76% of the total workforce (SSSC, 2013).

The total number of workers fell by approximately 3% between 2011 and 2012. The majority of this reduction is within the housing support/care at home sub-sector. There was a significant reduction in the number of workers in the adult day care and nurse agency sub-sectors (SSSC, 2013). The social service sector employed 197,900 workers in 2009 compared to 192,000 in 2012. Changes in the timing of the data collection mean the figures do not include childminding assistants and personal assistants (PA). We explore this further in the report.

The 192,000 figure doesn't include all workers in the Scottish social service sector. Categories not included are:

- PAs employed by individuals in receipt SDS
- childminding assistants
- centrally based office staff in private and voluntary sector services
- some office workers in local authority services will also be excluded from the total workforce figure
- the data does not include similar staff working in other departments such as local authorities who employ centralised administrative support teams.

Local authority fieldwork services staff are included within the 192,000 figure. There were more than 15,000 local authority fieldwork staff supporting adults, children, offenders and providing 'generic' social work services in December 2012 (SSSC, 2013). The extent to which local authorities commission fieldwork services is unknown.

The 192,000 figure doesn't include carers or volunteers. The 2011 census findings contain information on approximately 492,000 people who provide unpaid care in Scotland per week. Approximately 44% of carers provide 20 or more hours of care per week (National Records of Scotland, 2013). There are more than 6,600 volunteers known to be supporting public, private and voluntary social services in Scotland (SSSC, 2013).

### **1.1 Services and organisations**

As of December 2012 there were nearly 14,000 registered care services in Scotland. The sub-sectors with the greatest number of registered care services were childminding (5,810), day care of children (3,800) and care homes for adults (1,278). This total represents a slight decrease on the equivalent 2011 figure (SSSC, 2013).

In December 2012 there were approximately 8,900 separate organisations providing one or more registered care service. When we remove childminding providers the revised total is approximately 2,700 separate organisations. The majority of childminders employ one individual. This figure includes local authorities and health boards which deliver a registered care service. These organisations vary from those which run a single care service to those that deliver more than 200 services throughout Scotland. Approximately 41% of the entire workforce are employed by the largest 50 organisations in 2012. Twenty four of these organisations are based within the public sector, 16 in the voluntary sector and the remaining 19 organisations are located in the private sector.

## 1.2 Zero hours contracts

There are significant challenges around examining the number of social service workers on a zero hours contract in Scotland. The Office for National Statistics (ONS) indicated that there were an estimated 583,000 workers in the UK on zero hours contracts in 2013 (ONS, 2014). In April 2014 the ONS reported that there were 1.4 million employee contracts that do 'not guarantee a minimum number of hours'. This revised figure includes workers on zero hours contracts. There has been debate about whether some shift-workers are also on a zero hours contract (ONS, 2012) and the Chartered Institute for Personnel Development (CIPD) estimate that the number of people on a zero hours contract may be closer to one million.

The ONS identifies a number of challenges around developing a better understanding of the number of workers on zero hours contracts. These challenges include:

- no standard definition for the term 'zero hours contract'
- there are workers who will not recognise that they are employed on a zero hours contract
- a zero hours contract (or variable contract) does not necessarily mean that an employee is working for a small number of hours most weeks. Many workers on zero hour contracts are essentially working in a full-time role. A number of employers use zero hour contracts to support the development of a flexible workforce. A CIPD study suggests that there is little difference in job satisfaction between workers on zero hours contracts and the survey average (CIPD, 2013).

Given these challenges all data on zero hours contracts should be treated with caution.

There has been much debate about the appropriateness of zero hours contracts in the social service sector. For example, senior managers in a number of voluntary sector providers have indicated that the use of these contracts lead to challenges around ensuring a 'consistent service and sufficient training for a workforce that was casualised'. These providers were exploring alternative approaches such as the use of relief staff to ensure that their workforce was sufficiently flexible to attract new business (Cunningham and Nicksen, 2014). A recent UK Government consultation on zero hours contracts notes that a number of social service respondents have reported concerns about the way that these contracts are used to avoid paying for travel time for some care workers (Department for Business Innovation and Skills, 2013).

The views around the appropriateness of zero hours contracts within the care sector appear to be mixed. There are some concerns about the use of zero hours contracts in a sector which is keen to focus on professionalism and ensure continuity of care for individuals. However, zero hours contracts are also viewed by some as a way of supporting the development of a flexible workforce capable of delivering high-quality services.

## **2. KEY MESSAGES FROM THE WORKFORCE SKILLS REPORTS**

This section summarises a number of key messages from the first three Workforce Skills Reports 2013-14.

### **2.1 Access to services**

- More than 220,000 people regularly attend registered child care services in Scotland. The gap between the number of registered children and number using services is narrowing. Demographic projections suggest that the number of children using services will increase over the next 25 years.
- Over the next 25 years we will have an ageing population in Scotland. The number of people in care homes has decreased over the past decade. The data suggests that care at home services are increasingly focusing on people with the highest level of need. The number of people receiving care at home services has dropped but the average number of hours of care per person has increased.

### **2.2 Key policy challenges**

- There are a number of policy challenges for the social service workforce in Scotland. The public services reform agenda highlights the need for a focus on prevention and reducing inequality. The need for a workforce with strong leadership at all levels is a key priority for the sector.
- Services must adapt to meet the implications of recent legislation including the Social Care (Self-Directed Support) Act 2013, the Children and Young People (Scotland) Act 2014 and the Public Bodies (Joint Working) (Scotland) Act 2014.
- Many more workers will register with the SSSC over the next decade.

### **2.3 Changing training trends**

There have been a number of changing trends around training activity over the past four years.

- A decrease in the Health and Social Care (HSC) and Children's Care, Learning and Development (CCLD) SVQ registrations during 2011-12.
- A significant decrease in the number of over 25 year olds registering for modern apprenticeships in 2012.
- The number of Mental Health Officer (MHO) trainees has decreased between 2011-12 and 2012-13.

### 3. KEY MESSAGES FROM EMPLOYERS AND OTHER STAKEHOLDERS

As part of this report a short survey of employers was undertaken. The survey covered 10 areas including the extent to which employers:

- are able to access training courses and vocational qualifications for their staff
- have changed the proportion of their resources which focus on non-mandatory training
- involve people who use services and carers in their training
- anticipate an increase in the numbers of workers employed by their service over the next three years.

All evidence was gathered in confidence and employers contributed to the survey in two ways.

- An online questionnaire asked employers to provide a brief reaction to 10 multiple choice questions or statements. Approximately 800 respondents completed the questionnaire. Of the respondents, 32% were from the private sector, 44% from voluntary sector and 24% private sector. We received responses from most workforce sub-sectors. Nearly half of the responses were from day care of children (47%), with 28% from housing support/care at home and 15% from care homes.
- We held stakeholder meetings with individual employers, staff from umbrella bodies and civil servants within Scottish Government. These meetings focused on the 10 questions and statements. More than 100 people contributed to the events held.

There are a number of areas to bear in mind when examining the results. There were a high number of responses to the questionnaire but respondents were self-selecting and as a result some sub-sectors are better represented than others. For example, the public sector is under-represented while the day care for children sub-sector is overrepresented. The feedback from the online survey and stakeholder meetings provides a valuable insight into the key challenges for employers. The extent to which these findings clarify the challenges for the wider sector is unclear. We have also undertaken separate discussions with a number of key stakeholders. This evidence is entirely anecdotal.

We have created eight sub-sector groups to examine the data in more detail. The groups are set out below.

#### Survey results – individual sub-sectors

Adult day care	Care homes for adults	Day care services for children	Housing support/care at home
Combined adult services	Residential child care and school Care accommodation services	Local authority social work field work service	Other

These combined categories contain sub-sectors where there has been a low response rate. For example, we combined the responses from residential child care and school care accommodation services. The combined adult services category brings together the answers from respondents who identified themselves as part of more than one registered service to adults.

This part of the report examines the responses to the 10 questions and statements. Each question or statement begins with an analysis of the key findings from the questionnaire. The figures do not always total 100% due to rounding up. The sub-section then examines the key themes covered in the discussions with employers around this

question or statement. Each sub-section also includes analysis from reports or research studies which have examined similar issues.

### **3.1 Question 1. How easy is it to find training courses and vocational qualifications for your staff now compared to three years ago?**

#### **Questionnaire findings**

**The vast majority of all employers (72%) told us that access to training courses and vocational qualifications is easier or about the same as three years ago.**

There were differing opinions within individual employer types.

Approximately 84% of public sector employers agreed that access to training was just as easy or about the same as three years ago. The equivalent figures for the private sector and voluntary sector were 74% and 60% respectively. This analysis suggests that most sub-sectors generally find it easier to access training. The one exception to that rule is the combined residential child care and school care accommodation services sub-sectors. The majority of these respondents indicated that it was harder to access training and vocational qualifications than it was three years ago.

**Access to training and vocational qualifications appears to be easier or about the same as it was three years ago.**

A number of individuals told us about a substantial increase in the availability of relevant e-learning courses over the past three years. These online courses play a vital role in supporting workers to access relevant qualifications and training.

**Key role of the local authority in supporting access to workforce development and training.**

A number of voluntary and private sector providers told us that the support they receive from local authorities can be inconsistent. For example, they noted that some local authorities will complete an audit of local training need and provide subsidised training but this approach was not universal. Some providers gave positive examples about the way their local authority supports opportunities for multi-agency training. A number of local authority staff noted that their service provides free training for private and voluntary sector staff but course attendance can be mixed. One training manager highlighted the frustrations around organising a course which was poorly attended as staff were unavailable at the last minute. The manager from that service had advised them it had not been possible to release staff to attend courses. At least one local authority may introduce a charge for attending their courses in future.

**Ongoing challenges around allowing staff time to take part in learning and development.**

The challenges around allowing staff time to attend training opportunities was a key theme throughout many of the discussions and a key barrier is staff replacement costs. A number of employers told us that the problem is complicated further by decisions to cut back on their employment of agency or relief staff.<sup>1</sup> The cost of replacing staff while other workers attend training courses is a long-standing issue in this sector (SSSC, 2004). Further work would be required to assess whether these issues are becoming more prominent at a time when demand for many services has grown and the numbers of agency workers appears to have decreased.

**Training remains a key priority for many providers.**

A key theme identified throughout many areas of the sector is the importance of

<sup>1</sup> Question 6 of the survey (see later in this report) examines the extent to which employers are continuing to use agency workers.

workforce development. For example, the importance of investing in staff training was one of the five top themes identified in a recent survey of Scottish nurseries (National Day Nurseries Association Scotland, 2014).

#### **Access to funding for learning and development.**

Many of our discussions with stakeholders around this question focused on the availability of funding for learning and development. A wider debate took place about the extent to which providers work in partnership. Some discussions focused on the wider principles around sharing budgets and resources. These issues have been picked up in a number of similar reports. For example, Scottish Care highlight a number of positive examples of partnership working which involve the public, private and voluntary sector but note the need for a genuine commitment to partnership to deliver key priorities around integration of health and adult social care (Scottish Care, 2013). The implementation of the Reshaping Care for Older People strategy was highlighted.

#### **Access to training and qualifications should be part of a wider debate around terms and conditions.**

A number of stakeholders believe that training budgets are one part of a bigger picture. These employers focus on the extent to which providers have had to reduce their overall operating budgets. There have been a number of surveys examining these areas. For example, a survey by the Coalition of Care and Support Providers Scotland (CCPS) include a question about training budgets in their regular service provider optimism surveys. A survey of 34 of their members in June 2012 reported that many of these services are continuing to protect their training budgets at the expense of other areas.

‘We protect and invest in training - however we have had to adjust annual leave.’  
(Coalition of Care and Support Providers Scotland, 2012)

A previous survey of 71 voluntary sector providers reported that 60% of all services had cut their training budget over the previous three year period (Cunningham, 2011).

The pressures on employers to address financial challenges has led to many services making changes to their structures. The Taskforce for the Future of Adult Residential Care in Scotland highlight some of the ways that care homes have cut back on staffing in recent years:

‘Supervisory and managerial tiers within care homes in some areas have been stripped out to sustain services at the frontline and development and training budgets are reported as being under pressure.’  
(Taskforce for the future of residential care in Scotland, 2014)

### **3.2 Question 2. Do you involve people who use services in your training programmes?**

#### **Questionnaire findings**

#### **Approximately 74% of respondents told us that their service involves people who use services in their training programmes.**

The figure was highest in the voluntary sector (89%). Approximately 70% of private sector and public respondents indicated that they involve people who use services in their programmes.

The data suggests that the extent to which people who use services are involved in training programmes varies by individual sub-sectors. On the face of it our survey suggests that there are some sectors (including care homes and care at home services) which are more likely to involve people who use services in their training. However, it is

important to bear in mind that involving people who use services can take many forms. The purpose of this question was to get a sense of the extent to which employers are actively considering this issue.

**Some evidence of involvement of people who use services in training programmes. There is a need to ensure involvement is meaningful.**

The need to ensure that involvement of people who use services is meaningful was a key theme throughout most sessions. A number of staff from nurseries highlighted the role of family networks and group events for people who use services. Employers spoke about the challenges around getting people to take part in training. One employer explained they had recently seen an increase in male parental involvement in their training. They believe that their decision to undertake more outdoor-based activities with children is a key reason behind this change.

A small number of nursery staff didn't believe there is a role for people who use services in training programmes. One respondent was clear that their organisation doesn't use people who use services as they believe that they do not understand the dynamics of the employee/employer relationship. The majority of respondents disagreed with this view.

One staff member from a Centre of Excellence was unconvinced about the extent to which people who use services are involved in local authority social work training.

'My expectation is that involvement of service users in training programmes is likely to be patchy in social work fieldwork services, likely to be driven by an individual with a passion or particular drive for this. I have seen no evidence that there is wide-scale or systematic programmes across local authorities for involving service users in training'.

**Involvement of people who use services in training can take many forms.**

A local authority representative said that training is a two-way process and that people who use services should be able to participate in the courses. This individual noted that their local authority regularly allows people who use services to attend their courses as participants and they can access a number of the e-learning modules which are available to staff.

### 3.3 Question 3. Do you involve carers in your training programmes?

**Questionnaire findings**

The survey results were very similar to those in question 2. With hindsight it seems likely that different respondents have interpreted the term 'carer' differently. For example, while the term in this context refers to unpaid carers, it appears from the follow-up discussions that some respondents have interpreted 'carer' to mean a frontline worker. We have therefore chosen to remove the results from this survey. However, a sample of comments from the discussion groups follow.

**Some evidence of carer involvement in training programmes.**

Representatives from the public, private and voluntary sector all note the importance of involving carers in training programmes. A number of providers from early years noted the increased role of kinship carers and the need to ensure that they were actively involved in the delivery of training programmes. The importance of understanding the roles of carers is a key priority in the Carers' Strategy for Scotland.

'Health and social care staff should have a proper appreciation of the role of carers and young carers and commit to engage with carers as equal and expert partners in the design and delivery of health and social care services'

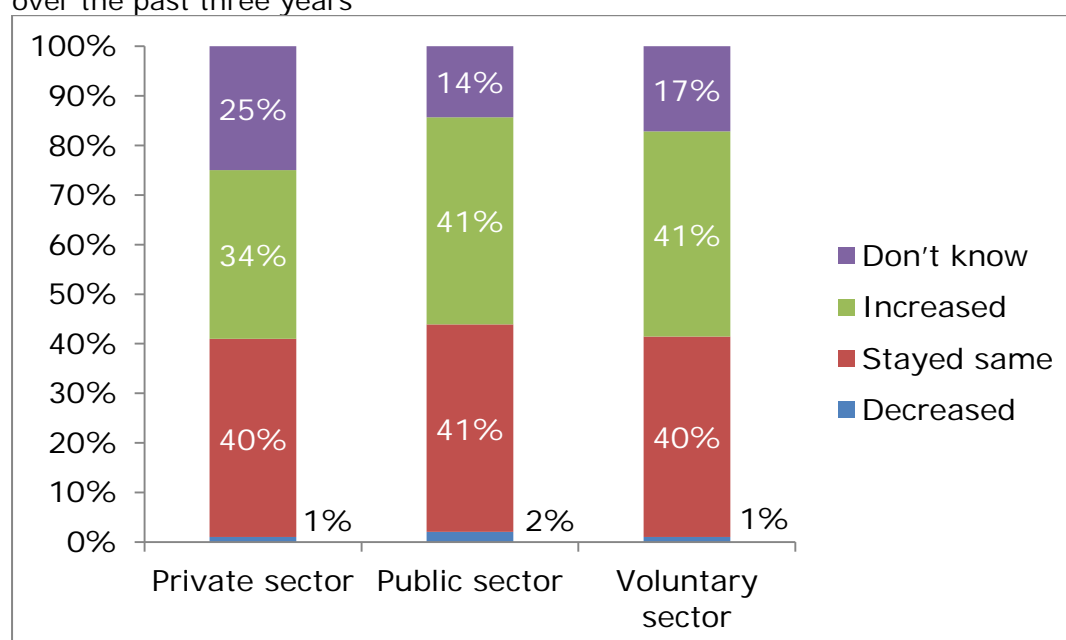
(Scottish Government, 2010)

The SSSC is working with NHS Education for Scotland (NES) on a number of relevant resources about carers. We've developed a set of core principles for working with carers and young carers. The principles cover everyone who may have any contact with carers including receptionists, housing workers and service commissioners (SSSC; NES, 2013).

The Carers' Strategy also highlights the importance of identifying and supporting carers and young carers in workforce training and education (Scottish Government, 2010).

### 3.4 Question 4. How has your involvement in the delivery of SDS services changed over the past three years?

Graph: Responses to 'how has your involvement in the delivery of SDS services changed over the past three years'



#### Questionnaire findings

**The majority of respondents told us that their involvement in the delivery of SDS has increased or stayed the same.**

Approximately 40% of respondents told us their involvement in the delivery of SDS services has increased over the past three years. This figure was highest amongst public and voluntary sector respondents and lowest in the private sector. A further 40% of respondents told us that their involvement has not changed in the past three years.

The findings from these respondents confirm that services for adults such as housing care, care at home and adult day care have experienced the greatest increase in the involvement of SDS over the past three years.

**Mixed evidence around involvement in SDS. A new mind-set is required to support change.**

A number of local authority staff told us about a substantial increase in their delivery of SDS services. Some local authorities have established teams to support internal staff and employers to develop the 'mind-set' required to ensure that their services are ready for SDS. At least one local authority is providing middle managers with training. Local authorities are delivering training courses for assessors and social workers around the principles and roll-out of SDS.



Employers from early years and other children's services indicated that the picture around SDS was mixed. They were aware of a few examples of children or young people using direct payments to provide their care. They noted that direct payments work best when families have a clear idea of the outcome they want for their children and see a way of using the system to deliver a flexible solution. These respondents were unconvinced that the principles of choice, control are commonplace in children's services. They believe that SDS can play a key role in driving the necessary culture change.

A representative from the Looked After Children sector said there are a number of key challenges around the delivery of SDS. Some local authority staff must develop the skills required to help individuals make decisions about their care. Some workers highlighted a concern about not trusting Looked After Children to make financial decisions.

#### **Access to training to support the promotion of SDS.**

A recent survey of the views of development officers within 14 local authorities suggests that providers have limited involvement in training or planning training developed by the local authority (Scottish Care People as Partners project, 2014). A separate study of 23 voluntary sector providers suggested these services have a plan to prepare for SDS. The need to prioritise staff training is a key priority for providers (Coalition of Care and Support Providers Scotland, Providers and Personalsisation, 2013).

Many individuals in receipt of direct payments will employ one or more (PAs to deliver their services. The extent to which training is available for PAs is unclear at present. One major study of PAs and their employers noted that a quarter of these workers have asked their employer about additional training. The study also indicated that a small number (4%) of PAs have had a request for training refused. There were a number of reasons for this refusal which included a lack of funding or the cost of a course. This study also highlighted mixed views on the extent to which PAs' employers require training (Reid Howie, 2010). The need for effective partnership working between PAs and their employers is a critical factor in the success of these partnerships. Promoting trust between the PA and employer is a key priority (SSSC, 2014).

A SDS Project Board (chaired by the SSSC) is delivering a programme of work to support workforce development. Eight workstreams are examining a number of topics which include learning and resources, statutory training and the PA workforce.<sup>2</sup>

### **3.5 Question 5. How has your service's use of telecare and community alarm services changed over the past three years?**

#### **Questionnaire findings**

##### **Almost 40% of respondents found that their use has increased.**

Approximately 39% of respondents told us about an increase in their use of telecare and community alarm schemes during the past three years. The figure was greatest in the public sector (42%) and lowest in the private sector (34%). Approximately 20% of all providers did not know how their service's use of telecare and community alarm schemes has changed over the past three years.

<sup>2</sup> SSSC, Self-directed support workforce development day audio and presentations, 12 December 2013: <http://ssscnews.uk.com/2013/12/self-directed-support-workforce-development-day/>

The findings suggest that care at home and care homes for adults are more likely to have increased telecare and community alarm services than other sub-sectors.

#### **A key role for telecare and community alarm schemes.**

Local authority representatives referred to telehealth pods as an example of how technology is increasingly supporting individuals to stay at home for longer. These pods monitor a number of variables including pulse and blood pressure.

A manager from a private sector service explained they are continuing to use community alarms within their care at home services but they haven't increased their usage over the past three years. They are making more use of electronic profile beds. These beds can be electronically adjusted and help people to sit-up independently. Studies suggest that profile beds have benefits for individuals and workers and can help individuals maintain their independence for longer. The beds can reduce the risk of injuries for staff as they can reduce the need for manual handling (Health and Safety Laboratory, 2010).

A number of childminders told us about the vital role that technology plays in updating parents. They referred to an increased use of automatic mobile phone text services. They use a number of apps which allow them to share regular photo updates with parents. The providers from other children's services were unaware of any use of telecare within their services.

#### **Technical barriers can create issues.**

Staff from a number of care at home and housing support providers highlight technical barriers which prevent them from making more use of technology. The incompatibility of many software systems and the cost were two key issues.

#### **A new workforce strategy for electronic assistive technology.**

The Workforce Learning Strategy sets out the vision for embedding electronic assistive technology (eAT) in social care.

'By 2019, individuals will be supported by a confident, knowledgeable and skilled social care workforce, working creatively with eAT to support their well-being, choice and independence' (Skills for Care and Development, 2014).

The strategy focuses on the need for social inclusion and person centred approaches to play a key part in the delivery of services. The workforce must be supported to use eAT in a way which is consistent with social care values and ethics. All workforce development activity must be consistent with the relevant Code of Practice or Code of Conduct<sup>3</sup> (Skills for Care and Development, 2014). A range of relevant resources and further information about the implementation of the strategy is available from the Technology to Care website: [www.technologytocare.org.uk](http://www.technologytocare.org.uk)

### **3.6 Question 6. 'I/we tend to employ more agency workers than we did three years ago'.**

#### **Questionnaire findings**

#### **The majority of respondents employ a similar number or fewer agency workers than they did three years ago.**

Over 86% do not employ more agency workers than they did three years ago. This figure was highest in the private sector (87%) and lowest in the public sector (82%).

<sup>3</sup> Scottish Social Services Council (2002) Code of Practice for Social Service Workers and Employers

These results were broadly similar across every sub-sector category.

**An effective business case is required before services can recruit agency workers.**

The vast majority of respondents told us that the number of agency workers employed by their service has decreased. Two local authority respondents explained the figure varies for different services and will depend on their 'business case' for recruiting agency workers. A number of local authority staff highlighted an increase in the use of relief staff and zero hours contracts as a way of delivering services. One local authority manager said their service was more likely to recruit someone from the private or voluntary sector than they were to make use of agency workers. Staff from one island-based local authority told us there are no local agency workers in their service. That service employs a mixture of relief staff and workers on zero hours contracts.

Almost all of the children's service providers told us they had not experienced an increase during the past three years or would not employ agency workers in the first place. One nursery manager said they have employed more agency workers during the past 12 months but did not expect this trend to continue. They anticipated an overall decrease in the number of agency workers employed by their service during the next year.

**Workforce data suggests there has been a drop in the number of agency workers within child care agencies and nurse agencies.**

The SSSC collects data on two agency sub-sectors. Both sub-sectors experienced a decrease in the number of workers employed between 2009 and 2012. There are a number of areas to consider when making annual comparisons of the data. See the Workforce Data report<sup>4</sup> for further information.

- Child care agency staff fell from 560 to 400.
- Nurse agency staff fell from 2,340 to 1,440.

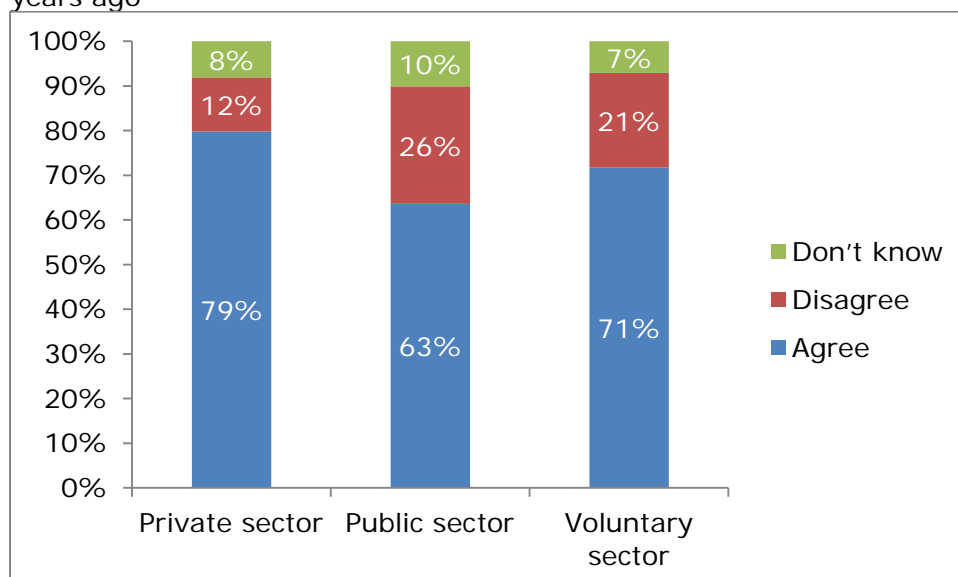
The numbers of active child care agencies and nurse agencies registered with the Care Inspectorate has remained relatively constant during this period (SSSC, 2013).

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<sup>4</sup> The Workforce Data report is available from the SSSC's website, [www.sssc.uk.com](http://www.sssc.uk.com)

### 3.7 Question 7. 'I/we probably allocate a greater proportion of our resources (staffing, financial, etc) to meeting SSSC's registration requirements than we did three years ago'.

Graph: Responses to 'I/we probably allocate a greater proportion of our resources (staffing, financial, etc) to meeting SSSC's registration requirements than we did three years ago'



#### Questionnaire findings

##### **The majority of respondents agree with this statement.**

Approximately 72% of all respondents agreed with this statement. Only 12% of private sector providers disagreed compared to 26% in the public sector and 21% in the voluntary sector (21%). This message was broadly similar in every sub-sector category.

##### **A greater need to recruit qualified staff.**

A number of staff from local authority training departments told us their service is spending a greater proportion of their resources on meeting registration requirements. The need to comply with registration requirements has become a pressing priority for their service. They also identified an ongoing need to recruit qualified staff.

'Training is a key priority but the need to find staff who already have qualifications is paramount. There is definitely a smaller cake for funding and more of it is focussed on registration' (local authority representative).

One care home manager has seen an increase in the proportion of his time spent ensuring their service meets registration requirements. The service has not increased the proportion of money spent on meeting these requirements during the past three years.

A number of surveys give further information about the extent to which organisations focus on registration requirements. For example, a survey of 71 voluntary organisations reported that more respondents have increased resources towards statutory training over the previous year (35%) than had reduced this figure (21%) during this time (Cunningham, 2011).

##### **Many workers make a contribution to their learning.**

A number of stakeholders told us that they increasingly expect staff to contribute to their learning. This contribution can vary. For example, workers may be required to:

- pay for their Disclosure Scotland and SSSC registration fee
- contribute towards the cost of their qualification
- contribute towards the cost of their qualification if they move to a new job within a set period of time
- undertake more of their personal development within their own time.

The need for staff to contribute to these costs is not a new development. For example, one survey of 87 services by the National Day Nurseries Association noted that 80% of their members require staff to pay their own registration fee. A further 10% indicated that the cost was shared or paid for by the nursery respectively (National Day Nurseries Association Scotland, 2009).

### 3.8 Question 8. 'I/we probably have less money to spend on non-mandatory training than three years ago'.

#### Questionnaire findings

##### **The majority of respondents (74%) agreed with this statement.**

The figure was highest in the voluntary sector where 79% of respondents agreed that their service probably has less money to spend on non-mandatory training than they had three years ago. We recorded similar figures in the private and public sector (70% and 71% respectively). Approximately 8% of all respondents did not feel able to comment on this statement. The reduction in money available for training was a key theme across all types of services.

##### **The need to meet SSSC requirements remains a priority for many services.**

A manager from one rural-based care at home service agreed that their training budget increasingly focuses on mandatory training. The manager explained there is a need to make sure that staff continue to receive the opportunities to develop specialist skills. For example, they highlighted the importance of percutaneous endoscopic gastrostomy (PEG) feeding and noted that their nurses have a key role to play in supporting the development of care assistants.

A representative from the Looked After Children sub-sector told us they believe providers are spending a greater proportion of their budgets on mandatory training. They also believe the majority of these services are exploring how they can make better use of in-house staff to support workers to meet SSSC post registration training and learning (PRTL) requirements.

A group of nursery managers did not believe that there has been much change in the balance of their training budget over the past three years. However, they did note ongoing issues in relation to attracting financial support from their local authority. Particular challenges were around accessing funding for staff aged 21 years or over. They also told us there is some inconsistency in terms of the financial support provided by local authorities. They believe that some local authorities are better at supporting services than others.

##### **Some providers are seeing cuts in their budget for mandatory and non-mandatory training.**

Some respondents have less money to spend on non-mandatory training due to general cutbacks within their service. They were keen to point out that these cuts in money for non-mandatory training were not due to an increased emphasis on meeting registration requirements. These services have experienced an overall drop in resources for any training.

**Some services believe that they are 'ahead of the game'.**

Some individuals believe that their organisation is 'ahead of the game' as the majority of their staff already meet relevant qualification requirements. One organisation told us that their service made sure the majority of their workforce met registration requirements as early as possible. One training manager indicated that an increasing priority for their service is to provide training opportunities which will support individuals to meet their PRTL requirements.

**Similar surveys highlight key challenges for many providers.**

There are studies which have attempted to explore how mandatory training has evolved in recent years. A series of interviews with a small sample of voluntary sector providers noted a number of approaches to delivering this training. For example, some services highlighted a move to deliver manual handling training and hygiene training every two years. A number of services also note that they have explored joint training opportunities and are selling places on courses to smaller voluntary sector providers (Cunningham, 2011).

The National Day Nurseries Association (NDNA) examined the challenges around funding at a UK level. A survey of more than 270 nurseries (including 36 in Scotland) reported:

- 66% of nurseries have seen training offered by local authorities reduced or significantly reduced
- 72% of nurseries have seen subsidised or free training from local authorities reduced or significantly reduced.

(National Day Nurseries Association, 2012)

A subsequent survey by NDNA highlighted training priorities for nurseries around a number of areas such as Getting It Right For Every Child (GIRFEC) and the implications of the Children and Young People (Scotland) Act 2014 (National Day Nurseries Association Scotland, 2014).

An annual survey of all employers highlights the importance of qualifications for the social service workforce. Social service employers are more likely to seek staff with a particular qualification than employers across the entire Scottish economy (Alliance of Sector Skills Councils, 2011). The level of training which leads to qualifications has increased faster within the social service sector than it has for the wider Scottish economy (Alliance of Sector Skills Councils, 2011).

**3.9 Question 9. 'I/we would anticipate a growth in the numbers of workers employed by our service over the next three years'****Questionnaire findings****Approximately 40% of respondents agreed with the statement.**

Approximately 40% of respondents told us they anticipate a growth in the number of workers employed by their service over the next three years. The figure was highest in the private sector where 50% of respondents anticipated an increase. The equivalent figures for the voluntary sector and public sector were lower (37% and 32% respectively). There appears to be slightly more optimism for growth in adult services than in children's services.

The level of growth anticipated by children's services is broadly similar with findings from elsewhere. For example, 34% of respondents to a recent survey of nurseries indicated that they plan to expand their service over the next 12 months. The survey includes the views of 81 services (National Day Nurseries Association Scotland, 2014). Approximately 63% of nurseries plan to 'offer more flexibility' over the next six months while 25% of services aim to extend their opening hours and/or offer out of school care for children

aged five years or under (National Day Nurseries Association Scotland, 2014).

**Some sub-sectors have experienced more growth in recent years than others.**

Data published by the SSSC indicates that the total number of workers increased within a number of sub-sectors between 2009–2012:

- local authority fieldwork services for adults (8%)
- fostering services (7%)
- fieldwork services for children (4%).

In addition, there are a number of sub-sectors which grew by 1% or less during this period (SSSC, 2013).

**Optimism around future growth varies within different sub-sectors.**

A group of providers from the children's sector told us they anticipate an increase in the demand for their services over the next few years. A number of these employers identified the Children and Young People (Scotland) Act 2014 as the key driver behind this expected growth. They believe that their services will become more flexible to meet evolving demand. One or two providers told us their service intends to employ more workers but had identified a number of challenges. A nursery owner indicated that they hope to expand their service but weren't sure if their service will have room to do so as they share the premises with another group.

The manager of one private employer provider told us they do not anticipate an increase in the numbers of their care home staff. They highlighted a need to make better use of existing staff capacity within their service. The same manager noted that the local authority is introducing more reablement services which may lead to an increased demand for their care at home service.

The need to make services more flexible is a key consideration for many providers. We explore this point further in the report when we discuss part-time contracts. There is an issue around understanding the impact that one service change may have on another. For example, a family may employ a childminder to take their child to nursery because the service is not open when the parent goes to work. If nurseries become flexible there are two workforce implications to consider:

- the impact on the nursery's service and workforce
- the impact on the childminder (and any assistants employed by their service).

Similar examples are available from other sub-sectors:

- an increase in the number of PAs is likely to affect the number of care at home workers
- a care at home provider planning to recruit PAs may have to do so at the expense of their current business.

These examples reinforce the critical role of workforce planning.

**Optimism around future growth varies within different employer types.**

A group of local authority representatives discussed the extent to which the overall number of workers will grow over the next three years. Most of these providers told us their service is unlikely to grow over the next three years. They believe any growth will take place in the private or voluntary sector.

Information on the SSSC's Workforce Data website (<http://data.sssc.uk.com>) suggests that the public sector has recently experienced a substantial drop in the number of workers employed by their services. However, the data also indicates that there also been a slight drop in the number of voluntary sector workers during this period. The

number of private sector workers remained relatively stable, see table below.

**The social service workforce, 2009-2012 (headcount)**

Employer type	Number of workers in 2009	Number of workers in 2012
Public sector	67,940	62,200
Private sector	77,520	78,440
Voluntary sector	52,540	51,700

The CCPS conduct a twice-yearly survey of voluntary sector providers. The latest survey between November and December 2013 covered the views of 45 members. The survey noted that 43% of services reported an increase in the number of workers employed by their service during the past six months, but 20% of the surveyed providers anticipate a drop in the number of workers employed during the next six months (Coalition of Care and Support Providers in Scotland, 2014).

**Optimism around demand is partly driven by any expected growth in the numbers of people who use services or demand for services.**

The data does not entirely support the conclusion that there will be a substantial increase in service demand and number of workers. Scotland's population has grown steadily in recent years but there has been a drop in the number of children using some services including child care services and care homes. There has also been a drop in the people using care at home services for older people (Care Inspectorate, 2013; Information Services Division, 2013; Scottish Government, 2013). The number of social service workers has also fallen during the past three years (SSSC, 2013). A range of factors will drive the trends around the number of people using services but these points reinforce the challenges around predicting future demand. For example, an increase in the number of people taking control of their own budgets and employing PAs may have an effect on demand for care at home services.

A key role in determining the levels of demand (and the overall number of workers required to provide services) is around eligibility criteria. One recent report suggests that the number of people receiving social services in Scotland has fallen by 20,000 during the past five years due to changing eligibility criteria (Learning Disability Alliance Scotland, 2014).

A number of providers partly base their optimism around the future development of their service on a belief that demand for their service will grow. A number of private and voluntary sector services are optimistic that many local authorities will commission a greater proportion of their services. Other services are optimistic about their chances of successfully tendering for services.

**Uncertain funding has an impact on providers' confidence around growth.**

A common theme is the role that funding can play in workforce planning. Two housing support managers identified the lack of involvement in local commissioning arrangements as a key barrier to planning the future development of their service. A number of providers noted that short-term funding could affect their ability to plan for the future.

A number of reports and surveys over the past few years have identified the impact of competitive tendering on workforce planning and staffing (SSSC, 2013; Community Care Providers Scotland, 2007; Scottish Care, 2013)



**The extent to which the overall social service workforce will grow over the next few years remains unclear. Further information would be required to develop a better understanding of a possible growth in the numbers of social service workers.**

A decrease in the number of public sector workers will not necessarily lead to a substantial increase in the number of workers employed within the private and voluntary sectors. The social service workforce 2009-2012 table featured earlier in this section shows this. The number of public sector social service workers decreased during this period. The private sector and voluntary sector have not experienced substantial increases in their workforce numbers during this time.

One key point is that the data in the table does not include information on all PAs involved in the delivery of social services. A representative from an organisation which supports PAs told us that they expect to see an increase in the numbers of these workers over the next three years. The Social Care (Self-Directed Support) Act 2014 is likely to lead to an increase in the number of people choosing to employ a PA.

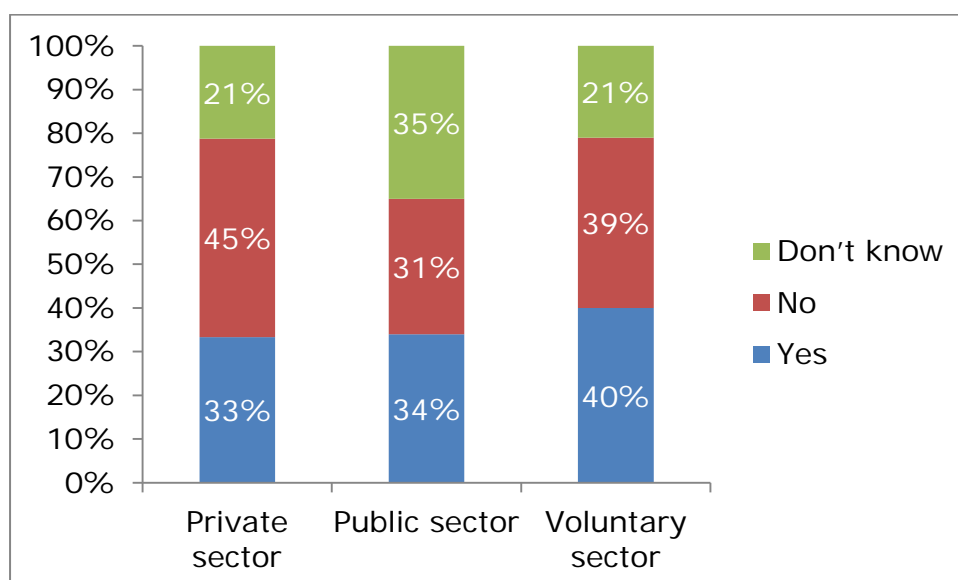
The SSSC estimates show that the number of PAs has grown steadily since 2007. We believe there are approximately 4,700 PAs as of March 2012 (SSSC, 2013). An increase in the numbers of PAs may be partly behind any ongoing fall in the number of workers employed by the public sector.

Approximately 40% of questionnaire respondents were optimistic about the future growth in the number of workers employed by their service. The earlier references to commissioning are a reminder that the growth of one provider will often be at the expense of another service. Developing an understanding of the extent to which the overall workforce will grow over the next few years would require an understanding of various issues, including:

- the impact that an increased number of PAs employed directly by individuals (or via brokerage schemes) would have on other sub-sectors such as care at home
- the impact of nurseries increasing the flexibility of their service. A change could have implications for nurseries and alternative services such as childminders
- an understanding of key stakeholders' future plans around commissioning and service delivery. For example, we would need to develop a better understanding around the business plans within individual local authorities or health and social care partnerships. We would also need further information around the private and voluntary sector services' plans.

### 3.10 Question 10. 'I/we would anticipate that we'll employ a greater percentage of our workforce on part-time contracts during the next three years than we do now'.

Graph: 'I/we would anticipate that we'll employ a greater percentage of our workforce on part-time contracts during the next three years than we do now'



#### Questionnaire findings

##### **Approximately a third of respondents agree with this statement.**

Approximately 24% of respondents told us they do not know whether their service will employ a greater percentage of their workforce on part-time contracts over the next few years. Approximately 40% of voluntary sector providers anticipate an increase in the proportion of part-time workers within their service. The adult sub-sector categories are expecting a greater percentage of staff on part-time contracts than services in the children's sector.

##### **The extent to which the workforce will include a greater percentage of part-time workers is unclear.**

The social service sector in Scotland has a higher proportion of part-time jobs than the wider Scottish economy. Social service providers are more likely to make use of part-time staff than other Scottish industries. One survey indicated that 85% of employers in this sector make use of part-time staff compared to an average of 64% across all Scottish industries. (Alliance of Sector Skills Councils, 2011).

None of the surveys referred to in this report identify the extent to which services have changed their approach to employing part-time workers in recent years. Similarly, there have been no surveys exploring whether providers expect to increase the proportion of part-time workers in the future.

The median hours worked by all social service workers in Scotland is 32.5. The median figure for public sector social service workers is 35. The equivalent figures in the private and voluntary sectors are 33 and 30 respectively (SSSC, 2013). There are a number of variations within individual sub-sectors. For example, many voluntary sector day care of children services are part-time such as out of school clubs and playgroups. The proportion of part-time workers in this area of the workforce tends to be greater than other sub-sectors. (SSSC, 2013).

This survey focuses on the proportion of part-time workers. Many respondents told us that any increase in the proportion of part-time working within their service is largely due to a reduction in funding or limited resources. A number of employers told us that their service is introducing more part-time workers as part of a move towards developing a more flexible workforce. The importance of flexibility within social services appears to extend to the working arrangements of staff. A Scottish-wide survey suggests that the use of flexible working arrangements is greater in the social service sector than it is across the wider Scottish economy (Alliance of Sector Skills Councils, 2011).

One survey notes that a recent increase in the number of workers employed by a sample of voluntary sector providers is partly down to an increase in the numbers of part-time rather than full-time staff (Coalition of Care and Support Providers in Scotland, 2014). The data around 'headcount' and 'whole time equivalent' (WTE) workers is often required to develop an understanding of the whole story. th

A representative from an organisation which supports people to employ PAs said they expect to see an increase in the proportion of part-time PAs employed by the sector over the next few years. They also told us that the majority of PAs were already on part-time contracts and they could see no reason to expect any moves toward full-time PAs over the next few years.

The manager of one private sector care at home service was clear that his service would increase the number of part-time contracts. They told us that their service will have to make sure they can continue to meet the needs of the people who use their services.

#### **A number of reasons why there could be a growth in the numbers of part-time workers.**

There was some debate about what the impact of a growth in the number or proportion of part-time workers would be within the social service workforce. We heard a number of views:

- a concern that an increase in the proportion of part-time workers will impact negatively on the image of the sector and the workforce
- a concern that increasing the proportion of part-time workers (and total number of workers) will lead to challenges around the continuity of care
- a view that an increase in the number of part-time posts may impact (positively or negatively) on employers' ability to recruit staff
- a view that a move towards a greater number of part-time staff is an essential part of delivering flexible services.

An increase in the number of part-time workers could have a range of implications for workforce development. For example, it could create more demand for training. An increase in the proportion of staff on part-time contracts may also create issues for staff around finding the time to attend training courses.

### **3.11 Regularly cited skills needs and issues for the social service workforce**

We held discussions with employers about the key skills issues for the workforce. There were a number of general themes.

- **A focus on SDS:** Providers from the private, voluntary and public sectors told us about the need for training around the impact of SDS on assessments, budgets and resource allocation. There is a need for training around the cultural changes associated with SDS. A number of employers mentioned a need for further exploratory work around the implications for brokerage. For example, one learning

and development manager within a local authority told us staff need help to move 'from a care management approach to one of support and brokerage'.

- **Community skills and the asset-based approach:** Many services are looking to involve local 'assets' such as community organisations, volunteers and local resources. The need for staff to develop the skills required to work in this way is a priority for many employers. Local authority representatives were particularly keen to discuss this area. They told us that some staff require the skills to identify the various contributions made by organisations, friends, families, carers, networks and other key stakeholders. The need for workers to develop these skills is becoming increasingly prominent as part of the drive around SDS.
- **A broader definition of support:** There is a need to continue fostering a wider understanding of support. This includes the wider informal networks of support (such as family, friends, carers, community activities) and the ability to purchase support for services which may not be recognised as traditional social work services.
- **Risk assessment and risk enablement:** A number of respondents told us about a need for workers to develop skills around risk enablement. The anticipated growth in the number of people taking control of their personal budgets is a key driver for this.
- **Leadership:** During a number of our discussions with employers, they mentioned effective management and leadership. We explore leadership and management in the Workforce Skills Report on key policy drivers and skills challenges for the social service workforce (SSSC, 2014).
- **Human Rights:** A number of employers told us about the need for their staff to have a broad understanding of human rights
- **Resilience:** The need for social service workers to demonstrate and promote resilience is a key theme. The Strategy for Building Leadership and Management within Social Services also identifies this (SSSC, 2014).
- **Alcohol and drugs misuse:** A number of employers told us about the need for workers to develop skills around supporting people with alcohol and drugs misuse issues. The Scottish Government is currently auditing the drug and alcohol education delivered within social work training and by local authorities (SSSC, 2014).
- **Supporting people with long-term conditions:** A number of employers talked to us about the need for workers to help people to manage their own conditions. The need for workers, volunteers and individuals to develop self-management skills has also been identified by the Scottish Government (Long Term Conditions Alliance Scotland; Scottish Government, 2008).
- **Mental health issues:** There is a need for many workers to receive training around mental health issues. This issue was particularly prominent in our discussions with providers of services to children and young people.
- **Trauma:** The need for workers to have an understanding of the issues in relation to trauma is a key challenge with a number of older people's services.
- **IT skills:** A care home manager told us it is a priority for staff to develop IT skills. People in care homes are increasingly turning to staff for support with their phones and tablets.
- **Welfare reform:** Care at home and housing support representatives told us staff need to have a broad understanding of the welfare reform programme. The CCPS

and the Institute for Research and Innovation in Social Services (IRISS) are currently undertaking a study around the impact of welfare reform on the social service workforce in Scotland.<sup>5</sup> A recent survey of a number of voluntary sector social service providers noted:

‘Staff are dealing with increased levels of anxiety and other mental and physical health effects. This is in turn placing greater demands on staff for expertise that they may not possess, as well as assistance and signposting in relation to advice and information about the changes’.

(Coalition of Care and Support Providers in Scotland, 2013)

- **Level of service/care management inventory (LS/CMI):** The LS/CMI tool identifies and measures risk and need factors for offenders. Workers within every Scottish local authority criminal justice social work service have received training in how to use the tool. Access to this training must be maintained and staff should be given opportunities to refresh and develop their skills.

The table on the following page summarises key skills needs and issues identified by employers during the discussions in 2013-14 and incorporates the key themes identified during previous studies.

The table illustrates the competing skills challenges and priorities social service employers in Scotland have. The recent review of the National Occupational Standards (NOS) also identified many of these themes.

The issues are not ranked within this table. We have not attempted to explore the extent to which these challenges vary throughout Scotland or individual sub-sectors. We've not grouped these skills as many of these issues are relevant throughout the social service sector. We are not suggesting that this list includes all key skills issues. The table demonstrates there are a range of complex training priorities – mandatory and non-mandatory, technical and general – which apply to social service workers.

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<sup>5</sup> IRISS blog (accessed 24<sup>th</sup> April 2014) The Impact of welfare reform on the social services workforce in Scotland:  
<http://blogs.iriss.org.uk/welfarereformscotland/2014/01/28/impact-welfare-reform/>

**Table: Regularly cited skills needs and issues for the social service workforce (2014)**

<b>Registration requirements</b>		
Recording and assessment	Soft skills, literacy and numeracy	Supporting people with long-term conditions
Contracting and commissioning	Administration of medication	Invasive procedures
Skills associated with the implementation of self-directed support	Alcohol and drugs misuse	Trauma
Leadership and management	IT skills	Working in partnership and self-management skills
Managing change	Skills required to remain focused on outcomes	Child protection
Risk assessment and risk taking	Managing challenging behaviour	Play
Working with people with dementia	Palliative care/end of life	Nutrition
Situational skills, the ability to change behaviour depending on environment	Dual diagnosis	Work with people at risk of self-harm
Management of paperwork	Food hygiene and preparation	Identify ways of doing more for less and to innovate
Customer care	Scenario planning/research	Person centred/personalisation
Attachment theory	Level of service/case management Inventory	Reflective practice
To implement Getting it Right for Every Child (GIRFEC)	Child protection and/or adult protection	Project management
Working with people with autism	Percutaneous endoscopic gastrostomy (PEG) feeding	Stoma care
Some medical tasks	Moving and assisting	Health and safety
Skills associated with telehealthcare	Knowledge of a Human Rights approach	Resilience
Community skills and the asset-based approach	Resilience	Knowledge of welfare reform

#### **4. KEY THEMES AND RECOMMENDATIONS**

This concluding section draws out a number of key messages from earlier discussions and feedback from employers.

##### **4.1 Improved access to training**

Employers told us that they can find relevant vocational and training courses more now than they did three years ago. The increased availability of e-learning options has supported many employers to find relevant training courses.

Some local authorities make training places available to voluntary sector and private sector providers. At least one local authority is considering whether to charge private sector providers for this. The cost of recruiting agency or temporary staff to cover the person on the course often stop employers sending staff to cover these courses.

##### **4.2 Ongoing challenges around people who use services and carer involvement**

Many providers involve people who use services and carers in their training programmes but these approaches are mixed. Some providers involve people who use services and carers in induction programmes. Making sure meaningful involvement from people who use services and carers remains a key challenge for many providers.

Some services say they do not involve people who use services and carers in training programmes but find other ways to make sure individuals are involved in service delivery. For example, some providers ensure people who use services and carers are able to access the same training courses as staff.

##### **4.3 The drive towards SDS is at an early stage for many services**

Approximately 40% of all questionnaire respondents indicated that their involvement in the delivery of SDS has increased during the past three years. It is worth bearing in mind that the questionnaire includes a high level of responses from the day care of children sector, where SDS take-up appears to be very limited to date. Voluntary sector and public sector providers are more likely to have increased their involvement in SDS than private sector services. Similar surveys by CCPS and Scottish Care indicate that a substantial number of services plan to develop services but the level of involvement with their local authority has been mixed.

The SSSC chairs a Self-Directed Support Workforce Project Board. The board is delivering a programme of work to support the development of this area.

##### **4.4 Substantial growth in the use of telecare and community alarm schemes but barriers remain**

A number of barriers appear to prevent employers from making greater use of assistive technology. The costs and incompatibility of many systems remain a key challenge for employers. The Strategy for Embedding Assistive Technology sets out the vision of a confident, knowledgeable and skilled workforce capable of working creatively with electronic assistive technology.

##### **4.5 Many services are employing fewer agency workers**

The majority of services in the public, private and voluntary sector told us they employ fewer agency workers than they did three years ago. Many services require a more detailed business case before they can employ agency staff. Two of the reasons suggested for the decreasing use of agency staff were an increase in the use of zero hours contracts and the use of relief staff. The SSSC's Workforce Skills Reports notes that the numbers of child care agency and nurse agency workers have both fallen from 2009 – 2012 (SSSC, 2013).

#### **4.6 Many services are spending less money on non-mandatory training and dedicating a greater proportion to meeting SSSC registration requirements**

Many organisations have seen a cut in their budgets for non-mandatory training in recent years. Some providers are spending a greater proportion of their budget on mandatory courses and meeting SSSC registration requirements.

However, a quarter of all local authority respondents have decreased the proportion of their resources used to meet SSSC's registration requirements. Some providers are increasing the contribution that they require from staff such as meeting the cost of their own Disclosure Scotland application, a contribution to the cost of a qualification or both. A number of services expect staff to undertake training or studying during their own time.

Some providers tell us that the reduction in the proportion of resources they spend on registration is a good sign. They believe that much of the hard work to meet these requirements has been accomplished. A number of providers spoke about being 'ahead of the game' in terms of ensuring that their staff meet the relevant requirements.

#### **4.7 Some services are more confident about future workforce growth than others**

The sector's optimism around short-term growth is mixed. For example, approximately 40% of respondents to our questionnaire anticipate a growth in the number of workers employed by their service over the next three years. The level of optimism was greatest in the private sector. The local authority staff we spoke to were convinced that any growth in the number of workers would be within the private or voluntary sector.

The optimism around growth appeared to be clearest in early years services. This trend is expected given the plans to increase the flexibility and number of funded-hours of child care provision. A growth in the number of PAs providing care and support is also expected. However, a number of the care home managers told us that they were not as optimistic about growth.

The extent to which the various growth projections will lead to an overall increase in the numbers of social service workers is unclear. Further information would be required to develop an understanding of the various drivers and their impact on other areas of the workforce.

#### **4.8 The extent to which services will employ a greater proportion of part-time workers is unclear**

Approximately 40% of those who answered the questionnaire from the voluntary sector told us the proportion of part-time workers within their service would increase. The impact of an increased proportion of part-time workers is a key theme within the discussion groups and the views were mixed. An increased proportion of part-time workers will create challenges around ensuring continuity of care.

A number of employers believe an increase in the proportion of part-time workers will reinforce stereotypes of the sector as a place for casual work. These views are not universal as other employers were clear that a move towards a greater number of part-time staff is an essential part of a flexible service. An increase in the proportion of part-time workers can be about providing increased flexibility or a sign of reduced service capacity.



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