

CEL CIS's response to the Scottish Parliament's Health, Social Care and Sport Committee's call for views on the National Care Service (Scotland) Bill

CEL CIS, the Centre for Excellence for Children's Care and Protection, based at the University of Strathclyde, is a leading improvement and innovation centre. We improve children's lives by supporting people and organisations to drive long-lasting change in the services they need, and the practices used by people responsible for their care. We welcome the opportunity to respond to the Scottish Parliament's Health, Social Care and Sport Committee's call for views on the National Care Service (Scotland) Bill.

This short response to the Committee draws on the evidence and expertise developed for our comprehensive [response](#) to the Scottish Government's consultation on a National Care Service in 2021. Our response then, and this response, draws from engagement with care experienced people, research evidence, as well as practice experience and policy expertise offered through our long-standing, cross-organisational networks of people across the children's and social care workforce. This response is focussed on the key issues for children and young people and their families that should be considered as scrutiny of the Bill progresses.

While the Bill covers suggested principles of the National Care Service, including the realisation of human rights and an early and preventative approach, as well as specific instructions around the establishment of care boards, transfer of functions and sharing of information, it is unclear from the Bill, or the associated Policy and Financial Memorandums, *how* these ambitious principles as originally stated in the Scottish Government's consultation on a National Care Service in 2021, will be realised. We do not feel there is sufficient detail drafted within the Bill or the associated memorandum to fully assess the potential benefits, risks, and impact of a National Care Service. This may be indicative of applying this type of Framework Bill to this level of complex and transformational change.

As such, this response includes analysis on the key risks, benefits and considerations that must be taken into account when determining whether a National Care Service should include services for children. We also consider the risks, benefits and considerations if the National Care Service does not include children's services. All of these issues must be considered as a matter of urgency.

Planning considerations for services for children, young people and families

The Scottish Government's aim that Scotland be the 'best place in the world for children to grow up' is well established, as is the underpinning aspirational policy

agenda that has been set out to achieve this commitment¹. This policy framework includes the outcomes for children and young people included within the [National Performance Framework](#), the national practice model [Getting it Right for Every Child](#) (GIRFEC), and [commitment from Scottish Parliament](#) to incorporate the United Nations Convention on the Rights of the Child (UNCRC) into Scots law, and to realise The Promise of the Independent Care Review. The commitment to, and progress on implementing The Promise is underway, including an [implementation plan](#) published by Scottish Government in 2022, yet there is greater work to be done in order to progress and achieve the ambitions set out by the Independent Care Review. The planning of any changes, such as the development of a National Care Service, must be coordinated and aligned to this existing policy framework, and associated improvement work.

There is no doubt that transformational change and improvement to children's services is needed. However, the suggested development of a National Care Service and how this will impact on the fulfilment of The Promise remains unclear and must be clarified as a matter of priority. There is also an urgent need for consideration about the impact across the wider policy agenda for children, young people and families in Scotland. The development of a National Care Service proposes a significant restructure of many services who support children in Scotland, as well as implications for the social services workforce. However, any restructuring which is not wholly aligned or cognizant of this agenda presents a risk both of disrupting the continuity of services currently offered, as well as to the significant momentum and commitment to change garnered through The Promise.

Evidence from research and engagement with practitioners across the children's and social care workforce indicates that the number of proposed and recent changes to this policy landscape is confusing, and can serve to detract from the planning required to co-ordinate and resource these changes, as well as the clarity needed by the workforce to enact practice change.² This includes a complex legislative system around the care and protection of children,³ and inconsistencies in how children, young people and their families experience care and protection across Scotland.⁴ Despite a progressive policy landscape, there remains a pervasive 'implementation gap' between policy intentions and the experiences of children, young people and families.⁵ We urge attention,

¹ Scottish Government (2018) [Delivering for today, investing for tomorrow: the Government's programme for Scotland 2018-2019](#)

² Anecdotal evidence is gathered from the networks of practitioners across Scotland that we host, facilitate or CELCIS a member of. Lough Dennell, B; McGhee, L; Porter, R. (2022) [Continuing Care: An exploration of implementation](#). Glasgow: CELCIS; Miller, E and Barrie, K (2022) Setting the Bar: towards an indicative maximum caseload for Scotland's public sector social workers, Social Work Scotland; Independent Care Review (2020) [The Plan](#) Glasgow: Independent Care Review

³ In Scotland there are fragmented approaches to 'child protection', which are not congruent with other responses such as universal services, or care for 'looked after' children by their corporate parents. See CELCIS (2021) *CELCIS's response to A National Care Service for Scotland – Consultation* (page 21)

⁴ CELCIS (2020) [The Permanence and Care Excellence \(PACE\) programme Improvement in practice: leading positive change for children's services](#), Glasgow: CELCIS; Lough Dennell, B; McGhee, L; Porter, R. (2022) [Continuing Care: An exploration of implementation](#). Glasgow: CELCIS

⁵ Independent Care Review (2020) [The Rules](#) Glasgow: Independent Care Review; Lough Dennell, B; McGhee, L; Porter, R. (2022) [Continuing Care: An exploration of implementation](#). Glasgow: CELCIS.

resourcing and capacity-building across the care workforce to help close this implementation gap.

The development of a National Care Service, born out of the recommendations of the Independent Review of Adult Social Care (IRASC), seeks to ensure that everyone in Scotland has access to the support they need from the earliest point at which they need it. The Independent Care Review did not call for a National Care Service, nor did the [Independent Review of the Implementation of Additional Support for Learning Legislation](#). While there is potential for a National Care Service to overcome some of the existing barriers to improvement that are inherent in the current structures and arrangements for children's social care, it is not clear how a National Care Service will or can enact this intention in practice or be led by the changes set out in The Promise. There needs to be focused attention to addressing the existing barriers to improving the support to children and families, especially support for those experiencing poverty. These barriers include a lack of sufficient investment in children's services - and children social work services specifically; the implementation support and infrastructure required to support the workforce to deliver improvements effectively in a way that will improve the health and wellbeing of children and their families in need of support, care and protection; the disparity within corporate and multi-agency responsibility and response for children in need of support, and their families across Community Planning Partners.

Our engagement with practitioners and leaders across the children's and social care workforce also highlight a lack of national practice models; inconsistencies in strategic commissioning and effective workforce planning development and support. More work must be done to engage with the evidence base as well as children, families and the workforce, to build consensus about what changes are needed and how they are best implemented.

Decision-making timeline and sequencing

It is concerning that plans to develop a National Care Service are progressing without proper consideration at this stage of the planning for the inclusion of, or the relationship between, a National Care Service and services to support children, young people and their families. Proper consideration to this must be given now, otherwise there is a significant risk of detriment and harm to children, young people and their families, if the services they rely on to experience wellbeing, safety, protection and love are disrupted or 'left behind' as the National Care Service is developed for adult services.

Children's services must always be developed with an explicit focus on the holistic needs of children, so that these are child-centred, and meet the needs of children in practice. Although the needs of children, and adults who care for them, are interconnected, the needs of children, and therefore the services which support these needs, are distinct from those of adult services. While these are not determinate, children's very earliest experiences, including adverse childhood experiences and trauma, have an impact on the whole of their life

course. Support to meet children's needs, whether this is as the earliest point of need or where specialist support is required, is critical.⁶

There are complex relationships between how services for children and services for adults interact in current integrated boards and/or community planning partnerships (CPPs), for example. To this end, there is an even greater a need for evidence-based appraisal of how these services would interact through the proposed care boards. Advancing plans for services for adults now, while plans for children's services are developed later, may have a detrimental impact on children's services, including the funding of services for children, planning and governance of services based on children's need, as well as transition planning. Adult social care expenditure dwarfs that of children's social care, with adult services costing close to £3.8bn per year, in comparison to an estimated £680 million for children's services.⁷ The design, staffing of, and funding for services for children and families must not be put at risk of being deprioritised in comparison to adult services, which by nature of its size and scale takes up more resources and capacity.

In light of the lack of consideration of children's services in initial proposals for a National Care Service, and the progression of plans for adult services before decisions about children's services, we are concerned that current plans will result in the planning and funding of children's services being dependent on and required to develop around structures for adult services. For example, what consideration is being given to the critical role Chief Social Work Officers play in the wellbeing, safety and protection of children. In essence, we are concerned that children's services are becoming an afterthought in comparison to adult services and the decisions about both should have coherence and align.

Whole family support and support for children as they grow up

It is not possible to consider or plan for children's needs in isolation from the needs of adults in their lives. Many children come into contact with children's services because of difficulties and support needs that their parents experience, such as poverty, mental health needs or substance misuse, for example. A child's needs cannot be fully met without supporting their parents or carers when they also need support. While the needs of children and adults are interconnected in this way, the needs of children are distinct from those of adults.

The quality and consistency of support to family members (including collaborative working between agencies such as housing and welfare), will impact on the wellbeing of a child (and vice versa); however, inconsistencies in the implementation of the GIRFEC model have also been identified, which mean that the experiences of children and families differ across Scotland⁸. This

⁶ UK Trauma Council, [Childhood Trauma and The Brain](#), Brennan, R., Bush, M., Trickey D., Levene, C. and Watson, J. (2019) *Adversity and Trauma Informed Practice, a short guide for professionals working on the frontline*, London: YoungMinds

⁷ Feely, D (2021) Independent Review of Adult social Care in Scotland, Edinburgh: Scottish Government (page 88); Competitions and Market Authority (2022) [Children's social care market study final report Scotland](#), London: Competitions and Market Authority (page 3)

⁸ Scottish Government (2021) '[Coronavirus \(COVID-19\): Children and Families Collective Leadership Group minutes - 8 April 2021](#)', Edinburgh, Scottish Government

includes barriers and a lack of resources that are preventing universal services managing wellbeing concerns earlier (when a child and their family first need support from services), as well as how the numerous systems involved in multi-agency responses to a child's needs can result in fragmented responses that therefore do not best support the needs of each child. There is potential for a National Care Service to better coordinate support in this overlap between children's and adult's services; however, the goal must be to improve how services are experienced and how impactful they are for the communities who they serve, not how these are structured. We urge focus on addressing the current implementation gap in relation to GIRFEC, to better deliver on policy and practice intentions. Addressing this implementation gap represents an opportunity for Scotland to realise the policy ambitions of The Promise and successful incorporation of the United Nations Convention on the Rights of the Child (UNCRC).

Whether or not children's services are included in a National Care Service, services for adults and children must improve the way they work together to support different members of a family. To support and care for any child or young person, we must also offer consistent and co-ordinated support to meet the needs of all members of their family, through a whole family approach. This support enables children to thrive and remain within their families, and is integral to protecting and promoting wellbeing into adulthood by aiming to reduce the instances of adversity in childhood. Family support must be provided consistently, in a joined-up way and, crucially, from the earliest point at which the support is needed.⁹ There is also a need for a joined-up approach between services that meet the needs of children as they grow up and move between services for children and adults.

The UNCRC, to which GIRFEC is aligned and is set to be incorporated into Scots law, defines a child as a person under the age of 18. However, currently the criteria for support in children's and adult's services is inconsistent in Scotland. Some services and areas of legislation define a child as a person under 16, and others a person under 18. This differs across local areas and between different services. This can result in interruption or termination of care for individuals, contrary to their support needs. To ensure that children and their families experience consistent, joined-up support, and for this support to continue if it is needed as children grow up, there is a need for a rigorous and comprehensive scoping of current learning and improvement programmes around child and adult services, to ensure any changes are aligned, effective in practice and based on this learning.¹⁰

Some of this learning is drawn from the national [Permanence and Care Excellence \(PACE\) programme](#) led by CELCIS, which worked with 27 out of 32 local authorities across Scotland to support change to enable infants, children

⁹ Independent Care Review (2020) [The Promise](#) Glasgow: Independent Care Review (page 45)

¹⁰ Scottish Government (2020) [Support for Learning: All our Children and All their Potential](#) Edinburgh: Scottish Government (page 63); McGhee, K. (2017) *Staying Put and Continuing Care: The Implementation Challenge*, CELCIS, Clan Child Law; Care Inspectorate (2020) [Continuing Care and the Welfare Assessment: Practice Note](#)

and young people to have greater stability and security in where they live and who cares for them, and the [Addressing Neglect and Enhancing Wellbeing programme \(ANEW\)](#), which worked with local authorities to respond to the needs of infants, children, young people and their families where neglect had been identified where they needed help. Reflections from the PACE and ANEW programmes have resulted in crucial system-wide local and national learning about the ways in which universal services could be better supported to address the unmet needs of families, including how to meet them earlier and in non-stigmatising ways, preventing the escalation to statutory services.

The need for urgent improvements in the support that children receive at this time in their life was a key finding of The Promise.¹¹ The proposals for a National Care Service have the intention of better meeting the needs of children and young people during these transitions; however, planning for services to support children throughout their childhood and as they grow up, *after* the planning of adult services, is concerning, and poses a significant risk to continuity of these services and any potential improvements.

Children with disabilities are especially likely to require support from adult services as they grow up and must experience joined up services that meets their needs. Children with disabilities often experience inconsistency in the support they receive depending on where they live in Scotland, as they may receive multiple services from NHS Scotland, as well as from social work and education services.¹² Adequate planning for children's services within or outside of a National Care Service, including the transitions between child and adult services must anticipate and fully meet the needs of disabled children.

Participation

Under Article 12 of the UNCRC, children have a right to express their views on matters that concern them, and have these views taken into account. We are concerned that delays in adequate planning for children's services, should these become part of the National Care Service, will not enable effective participation to take place in the planning of any changes. While we note the principles of co-design stated in parts of the Bill, we ask that children's views and needs are taken into account at this juncture, rather than when a decision has been made on the inclusion or non-inclusion of children's services.

To ensure that services for children are child-focused, children's views must be included, in particular children and/or young people with experiences of using those services or with support needs, including care experienced children and young people. Doing so is a core principle of The Promise, and reflected in the Scottish Approach to Service Design. All participatory approaches to service planning require resources, including adequate time. This is especially the case for children and young people, and for those with experience of care who are

¹¹ Independent Care Review (2020) [The Promise](#) Glasgow: Independent Care Review (page 92)

¹² Competitions and Market Authority (2022) [Children's social care market study final report Scotland](#), London: Competitions and Market Authority (page 3); Scottish Government (2020) [Support for Learning: All our Children and All their Potential](#) Edinburgh: Scottish Government (page 63)

likely to have multiple demands on their time including their education or involvement in formal systems, such as Child Protection measures or involvement in the Children’s Hearing System, for example.

Scaffolding and implementation of change

The Bill as currently drafted, and the associated Policy and Financial Memorandums, give limited consideration of the evidence base being used for the planning and implementation of the proposed changes as part of a National Care Service. Research and policy can provide a framework and enabling context for change; however, the current evidence base does not provide sufficient clarity on the potential efficacy of the proposals. Detailed information about these processes will be required for effective consultation and planning to occur.

Ensuring that every child and young person in Scotland receives the love and care they need to flourish requires a sustained commitment to the resourcing of early and preventative support to reduce the incidence, or mitigate impact of, any adverse experiences, whilst also meeting any support needs that children and young people have both *now* and *over their lifetime*. Meeting the needs of children and young people is fundamental to ensuring that the whole population of Scotland is healthy, flourishing and can reach their full potential in life.

For many people in Scotland, the cost-of-living crisis has entrenched pre-existing poverty and their resulting support needs.¹³ The social care workforce at all levels has been working above and beyond the requirements of their roles to meet the new demands placed on them as a result of the COVID-19 pandemic¹⁴. The impact of any disruption to services delivery or the pace of change, cannot be overstated. It is crucially important to value the children’s care workforce, especially in the aftermath of the COVID-19 pandemic and throughout the developing cost of living crisis and the toll this is having on the demand for their work and indeed on their own lives and circumstances. It is concerning that the Financial Memorandum is not clear as to whether the entire children’s care workforce is included in the proposed financial planning for the National Care Service, including planning to ensure their wages reflect the value of their work.

We call for greater and sustained investment in support for frontline services, as a matter of urgency, with particular attention to gaps in services which have been exacerbated by the COVID-19 pandemic and cost of living crisis. The Financial Memorandum does not provide clarity on the urgent investment in infrastructure and scaffolding support that is required to achieve the intentions of The Promise.

That planning for a National Care Service with a remit for adult services is being progressed through this Bill, before the status of children’s services within a National Care Service is properly understood, agreed upon and planned for, poses a risk to the funding and stability of services for children. The

¹³ Schmuecker, K., Matejic, P., Bestwick, M. and Clark, T. (2022) [Going without: deepening poverty in the UK](#), Joseph Rowntree Foundation

¹⁴ Social Work Scotland (2022) [Setting the Bar Report](#), Edinburgh: Social Work Scotland

proportionate funding for services for children, including the required improvements to services, in comparison to services for adults must be adequately planned for and ringfenced at this stage. This funding must meet all of children's needs, from prevention of adverse experiences, to early, specialised or crisis support. There is a need for clarity in the planning set out in the Financial Memorandum, which considers both the changes set out in the National Care Service (Scotland) Bill, and other services to potentially be incorporated into the National Care Service in future, including children's services. To progress with change at this scale requires a comprehensive assessment of the options around integration of children's services, an understanding of the related risks and opportunities, and with consideration of necessary mitigations. This must consider the risk of disruption caused by divergence with those services which would be outwith the proposed National Care Service, including housing or education which are central to the lives and wellbeing of our children, and who share responsibilities as corporate parents and key GIRFEC partners. There must also be attention to any learning and evidence from the alignment of health and social care services, which remain at a comparatively early stage in Scotland.

There is also a need for clarity about the changes to functions, processes or roles that will result from the establishment of Care Boards, and any other changes that will be part of National Care Service, including how these changes will support practitioners to meet the needs of those they work with. This will require effective buy-in, and co-ordination from strategic leadership, who will be required to plan, communicate and sustain the changes required. Detailed consideration and evaluation needs to be given to how experiences of access to services will be improved, and how accountability for the quality of services will be improved by the changes set out in the Bill for Scottish Ministerial involvement, and how children and adults with lived experience will be included within processes of accountability and evaluation.

National Social Work Agency

Whilst plans for the development of a National Social Work Agency do not require changes to legislation and are thus not included on the face of the National Care Service (Scotland) Bill, we note the inclusion of plans around a National Social Work Agency in the Policy and Financial Memorandums.

Our 2021 response to the Scottish Government's proposal for a National Care Service was supportive of the development of an independent National Social Work Agency. We suggest this agency should include strategic oversight, leadership and advocacy that promotes and supports stronger coordination and consistency for social work education, professional development, and quality in practice. There is also potential for a National Social Work Agency to play a key leadership role in the clearer articulation of practice models for social work services and support, and coordinate with the Care Inspectorate and/or Learning Reviews to ensure that local areas are supported to respond quickly and effectively to any issues identified from inspection or case reviews.

There is however a need for clarity at this stage around the remit and function of a National Social Work Agency and its relationship between the proposed National Care Service. In particular, we have some concerns that it will not retain its wider remit as first envisaged and its independence from government.

Health and social care information

We understand that changes to the structure of health and social care services, as well as the ambition to improve people's experiences of services through developing an integrated health and social care record, require legislative change. We do not feel that the proposed changes under section 36 and 37 of the Bill are currently insufficient to achieve the ambitions set out by Scottish Government in their 2021 consultation. We must have consideration of evidence and learning from:

- the different approaches to assessing and recording information about children across Scotland;
- the different archiving systems to organise and store that information;
- the experiences of accessing information that offers a coherent record of the care a person has received – which may reflect difficult experiences and/or formative life narratives.

Embedding this learning will require the development of guidance and resources for local areas to implement these changes. Further information about this can be found in our [2021 response](#) to the Scottish Government (pages 20-23), as well as the CELCIS's [Practice Briefing on developing practice for care records in Scotland](#).

Children's Rights and Wellbeing Impact Assessment

The scope of the Bill in its current form restricts the functionality and impact of the Children's Rights and Wellbeing Impact Assessment (CRIA). Currently, the CRIA provides speculative conclusions around the possible benefits that the development of a National Care Service would have on children's services; however, a greater depth of work is required both to the Bill and associated CRIA to ensure this assessment is robust. The assessment is limited to Articles 3 and 12 of the UNCRC, yet proposals within the Bill span beyond these two articles alone. This work should be revisited as the Bill and associated proposals are scrutinised.

Summary

Thank you for providing us with this opportunity to respond. CELCIS continue to support the development of policy and improvements that will implement The Promise to best meet the needs of children, young people and their families. At present, we do not feel this Bill includes sufficient detail in relation to meeting the outcomes Scottish Government seeks to achieve, and this risks disruption to the continuity of services currently offered to address wellbeing and protection as well as to the significant momentum and commitment to change garnered through The Promise. Our summary recommendations in regard to the progression and scrutiny of the National Care Service (Scotland) Bill are;

- A pause in progress of the Bill through Parliament for further research, to build a sufficient evidence base that supports decision-making on the inclusion or exclusion of children's services.
- Provide sufficient time and resource for consultation to take place, including engagement and co-design work with children, young people that supports this decision-making.
- Once these have been completed, a rigorous and evidence-based options appraisal should be undertaken.
- Continued focus on addressing the existing implementation gap in relation to GIRFEC, The Promise and UNCRC.
- Planning of any changes to align with this existing policy framework, and associated improvement work.
- Practical support and resource for the children's social work and care workforce to deliver improvements effectively in a way that will improve the health and wellbeing of children and their families in need of support, care and protection.

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