

# Education, Children and Young People Committee

Wednesday 23 November 2022



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## EDUCATION, CHILDREN AND YOUNG PEOPLE COMMITTEE 29th Meeting 2022, Session 6

#### **CONVENER**

\*Sue Webber (Lothian) (Con)

#### **DEPUTY CONVENER**

\*Kaukab Stewart (Glasgow Kelvin) (SNP)

#### **COMMITTEE MEMBERS**

- \*Stephanie Callaghan (Uddingston and Bellshill) (SNP)
- \*Graeme Dey (Angus South) (SNP)
- \*Bob Doris (Glasgow Maryhill and Springburn) (SNP)
- \*Ross Greer (West Scotland) (Green)
- \*Stephen Kerr (Central Scotland) (Con)
- \*Ruth Maguire (Cunninghame South) (SNP)
- \*Michael Marra (North East Scotland) (Lab)
- \*Willie Rennie (North East Fife) (LD)

#### THE FOLLOWING ALSO PARTICIPATED:

Iona Colvin (Scottish Government) Clare Haughey (Minister for Children and Young People) Kevin Stewart (Minister for Mental Wellbeing and Social Care)

#### CLERK TO THE COMMITTEE

Pauline McIntyre

#### LOCATION

The Robert Burns Room (CR1)

<sup>\*</sup>attended

## **Scottish Parliament**

# Education, Children and Young People Committee

Wednesday 23 November 2022

[The Convener opened the meeting at 09:16]

# National Care Service (Scotland) Bill: Stage 1

The Convener (Sue Webber): Good morning, and welcome to the 29th meeting in 2022 of the Education, Children and Young People Committee. We have received apologies from Stephen Kerr.

The first item on our agenda is our third evidence session on the National Care Service (Scotland) Bill. We will hear from Clare Haughey, the Minister for Children and Young People, and Kevin Stewart, the Minister for Mental Wellbeing and Social Care. Joining them from the Scottish Government are: Paul Beaton, the unit head of children's services; Iona Colvin, the chief social work adviser; and Donna Bell, the director of social care and national care service development.

The ministers will each give a short opening statement. We will start with Mr Stewart, followed by Ms Haughey.

The Minister for Mental Wellbeing and Social Care (Kevin Stewart): Good morning. Thank you very much, convener, for having Ms Haughey and me here today.

I will give an overview of our approach to the bill, and Ms Haughey will focus on services for children and young people in the context of the national care service. I should say at the outset that no decision has been taken on whether to transfer children's services or criminal justice services to the national care service.

It is fair to say that the national care service is one of the most ambitious reforms of public services. It will end the postcode lottery of care provision across Scotland, and it will ensure access to consistent high-quality care and support, which will enable people to live a full life.

The bill sets out the framework for the changes that we want to make, and it gives scope for further decisions to be made later through a codesign process. That flexibility will enable the national care service to develop, adapt and respond to specific circumstances over time.

I want to take time to reflect on why change of such scale is necessary. Scotland's community health and social care system has seen significant incremental change over the past 20 years. Despite that, people with experience of receiving care support, and of providing it, have been clear that there are some significant issues.

We are not changing just to address the challenges of today; we must build a public service that is fit for tomorrow. Today, about one in 25 people receive social care, social work and occupational health support in Scotland. Demand is forecast to grow, and the NCS must be developed to take account of our future needs. We will build a system that is sustainable and future proofed to take account of the changing needs of our population.

The principles of any new system will be person centred. That means that the NCS will be delivered in a way that respects, protects and fulfils the human rights of people who access and deliver care and support.

On Monday, I was in Perth to hear about Turning Point Scotland's excellent work in supporting people with complex needs. That includes preventative work with school leavers to turn their lives around. Its work highlights the value of focusing on the whole person and collaborating across boundaries.

Our co-design process will ensure that the NCS is built with the people that it serves, and with those who deliver it, at its very heart. We are committed to working with people who have first-hand experience of accessing and delivering community health and social care to ensure that we have a person-centred NCS. We must have a care service that is person centred and that best fits the needs of the people who will use, and work in, its services.

The Minister for Children and Young People (Clare Haughey): Good morning, and thank you for the committee's invitation to be here.

Mr Stewart has spoken about what we hope to achieve with this reform of Scotland's community health and social care system. I will speak about the impact that the national care service will have on services for children and young people.

The national care service will provide support for adults, including children's parents, grandparents and adult siblings. The most important structure around children is their family and services must wrap around the family. Children become adults and transition between services, which is often a difficult process.

The current landscape is complex, with 31 integration authorities taking a variety of approaches to the integration of children's services with adult, community health and justice services. We must ask ourselves whether the best

way to help children is for those services to be together or apart. To answer that question, we have commissioned independent research to consider how children's services are currently delivered across Scotland.

Making no change is not an option, so it would be too risky not to consider including children's services now. However, I reiterate Mr Stewart's point that no decision has yet been made about whether children's services will be included in the national care service. The bill therefore provides a mechanism to include children's services in the NCS by secondary legislation, if we ultimately decide that that is what is best for children, young people and families. The full detail of any proposal to include children's services in the NCS will be available scrutiny, consideration for consultation.

The independent care review told us that significant change is needed to improve the care and support that children and young people receive. All of us here, and across all the organisations that work with children and families, are committed to delivering the Promise. Building on our approach to getting it right for every child, we are continuing to make the improvements that we need to see in children's services. That work will not pause because of the national care service. Strong links with other services that support children, such as education and early learning and childcare, must be maintained and strengthened, whatever the decision is.

I also recognise the challenges and demands that those working with children and families face every day. If we transfer children's services to the national care service, that must improve the experience of the workforce.

We want to carefully consider whether it would be best to include services that support children and young people in the national care service. Meanwhile, we will make sure that the needs of children and young people are a key consideration in the development of the national care service.

**The Convener:** I thank you both for your opening statements.

In our previous two committee meetings, we heard from an extensive list of stakeholders. No one is looking for children's services to be included in the national care service; no one is demanding that. Most witnesses were ambivalent at best, and they were overwhelmingly concerned that that is a giant distraction that will get in the way of them doing their work. Can you honestly say that that will not be a bureaucratic monster that will get in the way of children's services providing the care that is needed? Why are those who are on the front line so unconvinced that that is the right approach?

**Kevin Stewart:** The committee can be assured that this will not become a bureaucratic nightmare. This is about improving services for people across the country. As we have already said, we are doing the groundwork that Ms Haughey outlined, to look at whether it is right to include children's services in the national care service.

I know that some people are not in favour of that change. However, during the discussions that we have had over the past 18 months, the voices of lived experience have highlighted to us some of the difficulties that they experience in accessing care and support.

One example of things that are key for people is transition phases. The movement from children's services to adult services is not smooth for a lot of people in our country at this moment. The scenarios are much better in some parts of the country than in other parts. Again, if you talk to the voices of lived experience, they will make quite clear their views about where that works best. In my opinion, things work best in areas where greater integration has occurred, and the scenario is one in which integration joint boards have been delegated various functions, including children's social work, social care services and children's health services. I would say that, without doubt, that is the view of many folks.

We are lucky enough to have lona Colvin as our chief social work adviser. Before she came to work in Government, she had a vast range of experiences in life. She was the chief officer of North Ayrshire Health and Social Care Partnership, where there is a greater degree of integration. It might be an idea, convener, to hear from Ms Colvin about her previous experiences in that.

lona Colvin (Scottish Government): Thanks, Mr Stewart. The first thing to say is that the status quo will not be an option if we are to have a national care service with adult services in it. That was one of our first considerations when thinking about what the options are for children's services. As ministers have said, time has been spent looking at that, but the decision has not been made yet.

For me, one of the key factors is the relationship of children's services to adult care services. Children do not come into the care system for the most part because of their own actions; it is mainly because of their parents—a disproportionate number of whom have learning disabilities—or their families, and usually it is because of drug or alcohol misuse or mental health problems. Therefore, there is a real core connection with the family support element.

In North Ayrshire, basically, the elected members and NHS Ayrshire and Arran agreed to

delegate all children's services to the health and social care partnership. When I was the director of mental health for Ayrshire and Arran as well as the director of health and social care in North Ayrshire, we also had an arrangement to delegate mental health services for children. That carries on—North Ayrshire is doing tremendously interesting stuff

Our approach meant that we were able to pool resources to look at how to develop seamless services around children and young people. Mental health is a classic case of where there was divergence between health services and social work for example, and where the role of the third sector was really important. Our approach allowed us to look at how to join up services around children, as well as how we could have a family focus in the adult side of services.

The really important point here is that this is not just about when children come into care; most of this is about how we prevent children who are at risk of being taken into care from reaching the point at which they need to come into care.

Bringing together health and social work services for children allows you to look at opportunities to work upstream as well. An example of that is working in schools to support teachers and to support a whole-school approach around children. That takes place in nurseries, too, and North Ayrshire also has a really good integrated universal team, which uses the health visiting service to push out multidisciplinary services. That service has an infant mental health nurse and a child and adolescent mental health services nurse, as well as social workers, so that they can push through that support at an earlier stage. Those are the opportunities that are afforded here.

The health and social care partnership, in my experience, also manages to work even though all those services are managed within health and social care—they are working in schools and in nurseries—and that is one of the opportunities.

#### 09:30

Kevin Stewart: Convener, I am sure that the committee has some of this information already, but we can provide more of it. There are 31 integration authorities in Scotland at the moment. Some operate with fully delegated powers for community children's health services, children's social care services and justice social work services. We can provide a breakdown to the committee of where those things are currently happening—where those delegations are complete—if you do not have it.

**The Convener:** I think that we have that information, minister, but thank you for the offer.

Ms Colvin's answer explains some of that thread, which I know that we will pick up later with questions from Mr Marra.

Everyone who has come to the committee and presented evidence has told us that structural change is not the answer. Ross McGuffie from North Lanarkshire told the committee last week that

"Transformative change takes ... time ... Sometimes, we can end up reaching the next restructure before the current one has had a chance to get to where it needs to be."—[Official Report, Education, Children and Young People Committee, 16 November; c 10.]

I know how complex the legislation around IJBs is, so I recognise that that is perhaps not the answer and that we need to do something. However, would it not be better to improve the current system and to take our time investing in what is taking place now rather than perhaps going through change of this magnitude? My concern lies in the huge structural change, which could mean that you focus on getting managers in place instead of focusing on those who are already working with children and families to deliver services.

Kevin Stewart: Convener, we have embarked on this journey towards a national care service because of Derek Feeley's independent review of adult social care; it is not a whim of Government. The report highlighted a number of things and made a huge number of recommendations, including the formation of a national care service. During our discussions with stakeholders, with the voices of lived experience and others before we went to consultation, people were telling us that this should encompass more.

We have been very careful in how we have done this. The consultation showed that more than 70 per cent of folk wanted to see a national care service. Many of those folks wanted to see the transfer of services such as children's services, criminal justice and social work into the national care service. We did not fully go ahead with all of that—that is why we are doing all this work around ensuring that we get this absolutely right, because, whether something is in or out, we have to make sure that the linkages are right.

Folk highlighted a number of things, with accountability being one of the main issues. People felt that, in many cases, there was no accountability in their areas. Lots of folk highlighted that, often, they are pushed from pillar to post when they are told, "That is the responsibility of the health and social care partnership," or, "That is the responsibility of local government," or, "That is the responsibility of the health board." That is frustrating for people when they are trying to get the care and support that they need.

The other key element is that folk want to see national accountability. That would mean that ministers could set national, high-quality standards, which would apply across the board and end the postcode lottery. That does not mean that it would be a centralisation, because local care boards would continue to shape and deliver services in their own locales. However, they would have to abide by those national standards.

The accountability aspect is way up the agenda for people because of the implementation gaps that exist in the system. In my opening remarks, I talked about the 20-year journey of integration. There has been change—and change for the better—but there are still a lot of implementation gaps. Why is that? It is because we have not involved people enough in shaping those services. We are all about ensuring that, as we move forward, the service is co-designed with people so that we can get it right, close those implementation gaps and deliver better services for people.

The Convener: We might well jump around with regard to some of the statements that you have just made, minister. I know that there will be questions on the issues that you have just raised in those comments, and I hope that we will keep track of things.

I call Mr Dey, who has a follow-up question, to be followed by Mr Rennie.

Graeme Dey (Angus South) (SNP): Mr Stewart, you have talked about addressing the postcode lottery and getting a service that is fit for tomorrow. We all want that, but you have also mentioned implementation gaps. In evidence that the committee has taken from some of the professionals, there has been-or, at least, I have taken from it—an underlying admission on their part that the sector is, in part, resistant to change and has been so for some time. We have seen that in the IJBs and the variation in and extent of local delivery of services. What makes you confident that the national care service, with all its laudable aims, will deliver what you want it to, given that the people on the ground who have been charged with delivering it might well be culturally resistant to change in general and this change specifically?

Kevin Stewart: I recognise that legislation and regulation do not necessarily change cultures. Indeed, we have examples of that in some of the very good legislation that has previously come before the Parliament. Perhaps the best example is self-directed support, in respect of which we put forward—and agreed on a cross-party basis—the ability for folk to have more independence and autonomy over their care, with four different options that they could access to best suit their needs. That approach has worked immensely well in some parts of the country but not in others

because, instead of sticking with the spirit of the legislation, some people in some places have looked for and found the flaws in it and have given reasons for certain things not applying to certain folks. That is not good enough, to be honest. Although we are about to publish new guidance on self-directed support that will help with some of the difficulties that people face, there is still an edginess towards the primary legislation.

One of the reasons for embarking on this codesign journey is to ensure that all people—the voices of lived experience and stakeholders—shape how we move forward on this. Beyond that, by putting some of the elements in secondary legislation, we can change things quite quickly if we find any flaws. We have been unable to do that with self-directed support, because it is enshrined in primary legislation. As a result, we will have greater flexibility.

As for the cultural aspect, there are a number of things to highlight. I think that the flexibility that I have mentioned will help to change cultures, but, beyond that, there is also the way in which we are putting the voices of lived experience at the heart of what we are doing. People have asked me, "Who do you see being on care boards?" There are certain folks who obviously have to be there, but I have tried to keep schtum on that question, because that, too, is a matter for the co-design process. However, I am absolutely adamant that the voices of lived experience must be on local care boards and must have votes. I hope—and I imagine—that that, too, will help us to change cultures.

**Graeme Dey:** You could have cited the Carers (Scotland) Act 2016 as another example of local delivery not living up to the expectations of the legislation. As I read it, this proposal has the potential to address that and give carers a better deal

**Kevin Stewart:** Absolutely. The week before last, I was at the carers parliament and a large amount of the questioning from the floor was about why money that had been allocated to areas was not being spent on carers.

As folk around the table know, the Government has said that it will not ring fence large elements of money that it gives to local authorities. Obviously, local authorities make choices, but there is a real difficulty in some respects for folks who care for people when they cannot access services and they know that the money that is being sent for carers is not going to carers.

Off the top of my head, I think that the Government is now sending £84 million or £85 million per year to ensure that the Carers (Scotland) Act 2016 is lived up to. I have talked to some folk out there, including a man from

Shetland who was at the carers parliament. He has requested information on what Shetland is doing through freedom of information legislation, but he canna get it. I am checking up on that, because such an allegation has to be checked up on. We have to ensure that that money is actually going to carers.

Another very important element in the bill for carers is that it will enshrine in law the right to short-term breaks. That is essential.

**The Convener:** We move to questions from Willie Rennie.

Willie Rennie (North East Fife) (LD): I am not sure that it is correct to brand the senior people that we have had appearing before the committee as recalcitrant and resistant to change. Claire Burns from CELCIS talked about concerns about "unpicking everything". Martin Crewe, who has decades of experience in children's services, said:

"I cannot see that the national care service would have a big positive impact."—[Official Report, Education, Children and Young People Committee, 16 November 2022; c 36.]

Jackie Irvine, from the Care Inspectorate, talked about "disruption". I am not sure that it is right to dismiss them as simply being resistant to change.

My main question is about the fact that children's services were clearly an afterthought. Why were they not included in the Feeley report, and why have you still not decided, even though the bill is currently going through the legislative process, whether they will be included?

**Kevin Stewart:** Convener—[Interruption.]

I am sorry—does Clare Haughey want to go first?

**Clare Haughey:** No, no—that is all right. I will come in to address the second part of Mr Rennie's question.

**Kevin Stewart:** I have not talked this morning about anybody being resistant to change—I want to put that on record. However, we sometimes have to take folk on a journey to see the benefits of the change on which we are embarking.

To answer Mr Rennie, in the previous session of the Parliament, the Government, under the then Cabinet Secretary for Health and Sport, Jeane Freeman, asked Derek Feeley to look at adult social care, and that independent review took place. I will not go through all the elements of that because I am quite sure that the committee is well aware of Mr Feeley's recommendations.

After that, we, as a Government, went and talked to the voices of lived experience about the recommendations. That included folks from the likes of the social covenant steering group with

real experience of where the service works for them and where it does not.

What became very apparent from those discussions with not only the voices of lived experience but stakeholders, too, was that folks thought that there could, and should, be a widening out of the proposed service and that we should look at that. That is why, in our consultation, we included questions to enable us to look at whether there was an appetite for moving beyond adult social care. From the responses that we have had, we see that there is such an appetite.

However, Mr Rennie asks a pertinent question about the work that we are doing in relation to not only children's services but criminal justice and other areas. If we are going to do this, we have to have the evidence and the reasoning for doing it. That is why we are currently carrying out the review work, which I am sure Ms Haughey will tell us much more about.

Clare Haughey: To follow on from what my colleague has said, the independent review into adult social care made recommendations that are equally applicable to children's services: fairness and equity; the removal of variation in eligibility in charging and commissioning; and removing unwanted variation across services, local authorities and integration joint boards.

09:45

Given the change that the National Care Service (Scotland) Bill will bring, if it is passed, it would be too risky not to consider the inclusion of children in the national care service. None of us would want to think of children as an afterthought. The interface between services for adults and children has been a critical consideration regarding the impact that the NCS could have on children's services. As Mr Stewart and lona Colvin mentioned in their evidence, we cannot view children in isolation. Children live as part of families; they do not live in silos, and their needs are not singular.

We are considering services in the round. The public consultation in 2021, which Mr Stewart mentioned, included questions on children's social work and social care services. The responses to that consultation were mixed, and key stakeholders highlighted the need for more evidence, which is what we have set out to address.

Willie Rennie: You are not looking at the whole system, though, are you? You have already decided that you are creating a national care service, which will have ramifications for children's services. You are not considering services in the round. You have decided that you will take one

part out of the system, and you will then decide, as an afterthought, what children's services are going to do in response to that disruption.

So, you are not looking at things in the round. You have talked an awful lot this morning about co-design. If, in the co-design process—which will presumably include the recipients of services as well as those who provide them—it is decided that it would be better to leave the structure as it is, are you going to undo all this?

**Kevin Stewart:** We are going to have a national care service to deal with adult social care.

Willie Rennie: Irrespective of the conclusion on children's services?

Kevin Stewart: That was the recommendation from the Feeley review. That is what the voices of lived experience want. That is what many stakeholders want. As we have explained this morning, we will consider whether to include other elements, including children's services and criminal justice services. If, as part of that codesign, folk say that a certain element might not work, we have to be cognisant of that. We are not going to be dismissive of folk in the sector or of the voices of lived experience.

No matter what is out of or in the national care service, we must ensure that the linkages are there between the NCS and the services that remain outwith the NCS.

Today, the concentration will be on whether something should be out of the NCS. On Thursday last week, folks at the Social Justice and Social Security Committee were saying that housing and homelessness services should perhaps be in it. The—

**Willie Rennie:** That makes my point for me—I am sorry to interrupt, Mr Stewart. You are making this up as you go along.

Kevin Stewart: Not at all.

**Willie Rennie:** You are already deciding that you will have a big disruption, with a new law to create a national care service, but without even deciding what is going to be in the national care service. That is making it up as you go along.

**Kevin Stewart**: The Government stood on a manifesto commitment of creating—

Willie Rennie: Not this.

**Kevin Stewart:** It stood on a manifesto commitment of creating a national care service to cover adult social care. Since then, we have listened to people who have said that we should make other considerations as well, which we are looking at and which we included in questions in the consultation. As the committee is well aware,

we are carrying out work to examine and review all the suggestions.

I canna reiterate this enough: no matter what is out or in the national care service, we have to ensure that the linkages are there, and that work is valuable, no matter what, in order to get things right for delivery for people. To get things right for delivery for people, people should be at the heart of co-designing that with us.

Willie Rennie: Well, that is clearly not the case.

Can you tell me how much this will cost? What will the additional cost be for restructuring the service to include children's services? What will be the cost of including children's services?

**Kevin Stewart:** The financial memorandum, as it stands, includes everything that is covered off by the bill. I have said to the Finance and Public Administration Committee—

Willie Rennie: So what is the figure?

**Kevin Stewart:** The Government has said to the finance committee that, at each stage as we move forward, we will publish the business case for each aspect of delivery. That will give the Parliament the transparency and openness to enable it to scrutinise everything.

**Willie Rennie:** Why can you not give me a figure, Mr Stewart?

**Kevin Stewart:** Mr Rennie is well aware that we produce a financial memorandum that covers the bill, and that is what we have done. If, at this moment, I were to pluck from the air a figure for care—

Willie Rennie: No—I am not asking you to pluck a figure; I am just asking you to give me an accurate one. I cannot understand that. It proves my point that you are making it up as you go along. You do not know how much the proposals will cost.

**Kevin Stewart:** According to the financial memorandum that covers off the aspects of the bill, if we transfer off children's services to care boards the figure for 2026-27 is £1.5 billion.

We will clarify all the figures with the Parliament as we move forward. I know that some folk want me to do the annual budgeting for the service for the next umpteen years—

Willie Rennie: I just want the cost of the restructure.

**Kevin Stewart:** —but I think that Mr Swinney would not be particularly happy with me if I were to do so. We have said to the finance committee that, as we move beyond the figures that are contained in the financial memorandum, we will publish every business case for scrutiny.

Willie Rennie: Members of the finance committee, including members of your party, have criticised you for not having the finances. You quoted a figure of £1.5 billion, but that is not the cost of restructuring the system to include children's services; I presume that it would be the cost of providing the children's services themselves. I am asking what the additional cost would be of including children's services in the national care service's structure.

**Kevin Stewart:** The financial memorandum contains a range of figures on the restructuring costs. Page 6 shows the total estimated cost of the bill's provisions, giving ballpark figures. For care boards, the figures for 2025-26 range from £132 million to £326 million. For 2026-27, the figures range from £142 million to £376 million.

We can spell out more of the financial memorandum to the committee if it requires us to do so. We can also provide it with a comprehensive report—or even have officials come and speak to its members—on the workings in the financial memorandum, on many of which I have already been questioned by the finance committee. The figures are there in the financial memorandum that covers the bill.

**The Convener:** The figures might be there, but Michelle Thomson—one of your own members—said that she felt that you might be

"under pressure ... of timescales ... to deliver"

on the bill, but that from the

"perspective of financial scrutiny,"

she was looking at

"a blank cheque. That is deeply worrying in respect of the public purse."—[Official Report, Finance and Public Administration Committee, 25 October 2022; c 16.]

That is the point that we are trying to get over here. Right now, there are significant pressures across budgets, so is this the right time to be doing it?

**Kevin Stewart:** There are significant pressures across budgets, and last week's United Kingdom Government budget did not help in that regard. That is why—

**The Convener:** I think, Mr Stewart, that an extra £1.5 billion is coming to the Scottish Government.

**Kevin Stewart:** Well, I would dispute that, convener, but I think that we had probably better not go into the machinations of that today.

The Convener: No, let us not—not today.

**Kevin Stewart:** I would dispute that figure. Beyond that, as I highlighted earlier, we cannot afford to stand still on the national care service. We know that we need to build services that are fit for the future. We have to build services that are

sustainable and meet the needs of the changing demographics of our population. That is required, so there can be no standing still.

What I cannot do here today is give the committee the annual budgeting for each aspect of service delivery, because that is dealt with annually. However, I assure the committee that I have reiterated to the finance committee that, as we move forward, we will publish all the financial and business cases for our decisions.

**The Convener:** The unknowns here are clearly alarming and should concern all of us.

I call Michael Marra.

Michael Marra (North East Scotland) (Lab): I have just a short question for Ms Haughey. How many children's social workers are you proposing to move to the national care service?

Clare Haughey: If the decision is to move children's services to the national care service, those services will move, too. If you—

Michael Marra: What about the social workers?

**Clare Haughey:** I cannot give you an exact figure just now.

Kevin Stewart: There are a number of important elements here. As I have previously told one committee—I forget which of them I have been to now—there need not be a wholesale transfer of staff to the national care service. I have explained that in terms of social care. In terms of social work, our ambition is to create a national social work agency, but that might not lead to a wholesale transfer of staff, either. We need to work our way through that.

As far as social work is concerned, what we definitely need to do is ensure that, no matter what, we look at pay and conditions and other aspects—

Michael Marra: If I can, Mr Stewart—

**Kevin Stewart:** If I can just finish, convener, because it is extremely important—

**Michael Marra:** But it is not an answer to my question, which was about the number of social workers who will be transferred. I think that the answer is that you do not know.

**Kevin Stewart:** No decision has been taken on that. It is part of the co-design process.

**Michael Marra:** Minister, please—I think that it should be a simple question to answer.

**Clare Haughey:** Mr Stewart has given you an answer, but I can give you the overall headcount for children's social services.

Michael Marra: That would be useful.

Clare Haughey: In 2021, the overall headcount was 15,300, an increase of 6.7 per cent, and the largest two subsectors in children's social services were residential care and fieldwork services. The latter accounts for 38 per cent of the total headcount and covers social work services. In 2021, 9,100 of the children's social services workforce were employed by a public employer. I point out that not all social workers are employed by public employers; 24 per cent are employed by the voluntary sector and 16 per cent by the private sector. Of course, that does not necessarily mean that all those employees are social workers; some will be social care workers.

**Michael Marra:** But we have no idea at the moment how many of those people will be transferred to a new body. I am just clarifying what you have said and whether that is the case. Indeed, Mr Stewart has just said that we do not know whether they will transfer or not.

As you will be aware, the Scottish Association of Social Work has asked for a pause on the bill. It is gravely concerned about the shape of all of this, because it does not have any answers. Have you considered at all in the financial memorandum the issue of pensions, which are not included under the Transfer of Undertakings (Protection of Employment) Regulations, and what will happen to social workers' pensions?

**Kevin Stewart:** In all of this, we will have to look at the national social work agency proposals and come up with a co-design in that respect. I will bring in Ms Colvin in a minute, but I must make the following points.

At the moment, there is no single national body that is tasked with oversight of or with leading on social workers' professional development, education or improvement. We have disparate pay and conditions across the country, which is leading to difficulties with recruitment and retention in many areas. Those issues have been highlighted by social workers over the piece, and we have to ensure that we get those things right.

Moreover, there is at the moment no mechanism for securing the placements that are required for future social work planning. Although several organisations advocate, deliver and advise on social work education, it has not been possible to scale up best practice. As a result, for there to be improvement in all of this, we need to look at change, and a lot of people believe that the right thing to do is to establish a national organisation for the training, development, recruitment and retention of adult social care support, including a specific social work agency for oversight of professional development.

I get the point that some organisations want a pause. However, if you asked them, I think that

they would say that they want to be at the heart of co-designing the elements of a national social work agency and how we get that right.

I will maybe pass over to Ms Colvin, convener.

10:00

**The Convener:** The questions from Michael Marra were specifically on numbers and finance, were they not?

**Michael Marra:** They were, although I do not think that the answer was.

**The Convener:** If the answer from Ms Colvin will respond to the specifics that Mr Marra is looking for, that would be helpful.

**Michael Marra:** Yes, with particular reference to social workers' working conditions in relation to pensions and whether that has been factored into the financial calculations.

**The Convener:** It seems that the answer will not be on that, so we will move to questions from Ross Greer.

Ross Greer (West Scotland) (Green): I accept what the minister has said on the current state of play being a postcode lottery across local authorities in relation to the services that are provided to children. A lot of the evidence that we have taken in recent weeks, particularly from local authorities, made the point that, especially in the areas where children's services are performing well, they are extremely well integrated with the other services that local authorities provide to children, particularly education.

Surely, centralising children's care services to the new bodies would be a step backwards in relation to our attempts to create a consistent network of support for each individual young person from all the various places from which they might need that, whether it is an education setting, a care setting or something else.

Clare Haughey: We know that there are some areas of extremely good practice. Iona Colvin referenced one in North Ayrshire. There are great examples of shared multidisciplinary culture with a shared goal of improving services for children and families. In looking at whether children's services should be in the national care service, we are considering the opportunities that that would give us to scale that up, to have national standards and to drive good practice in areas where it perhaps is not as good as it is in other areas that we can cite.

The points that Ross Greer raised about education and early learning are important. Ensuring that those linkages remain strong and are built on is absolutely key and really important. Of course, all of the Government's work with children and young people is underpinned by the

GIRFEC approach of getting it right for every child and, by extension into the care service, of getting it right for everyone. Those principles would remain the same. The care and support for a child and their family should be individualised for their needs in a wraparound service. Including children's services in the national care service would give us the opportunity to expand that across the country by having national standards.

Ross Greer: If the decision is made at a later point to include children's services, that will presumably entail a calculation of how much of what local authorities currently spend on children's services will be moved to the new delivery bodies. Given what I just said about the evidence on the high level of integration in some authorities between children's care services and the other services that they provide to children, how will you make that calculation of what to take from what is currently in the local government general revenue grant?

**Kevin Stewart:** There are a number of points there. I will come back to the general revenue grant in a second.

Ross Greer makes an absolutely excellent point about the areas where there is a greater degree of integration and where we are seeing very good service delivery. Iona Colvin talked about North Ayrshire, and another good example is East Renfrewshire. We want to absolutely ensure not only that that good service delivery remains in East Renfrewshire but that we can export those good services, with those right linkages, right across the board and across the country. We have the opportunity to do that as we move on.

As far as the general revenue grant is concerned, when I appeared before the Finance and Public Administration Committee, Mr Greer questioned me about the budgetary impact on local government, depending on what is in and what is out of the national care service. I give him the same pledge that I gave him then: we will do our utmost to ensure that all of what we propose is cost neutral for local government.

Ross Greer: I am sure that local government will welcome that statement, but I am interested in the process by which that will be achieved. At the heart of my question is the issue of how complicated the process will be, given how well integrated children's services are in some places, which means that it will be very difficult to disaggregate them. I am interested in what process you will follow to make that calculation and to ensure that the change is cost neutral.

**Kevin Stewart:** Again, Mr Greer will be well aware, from what I said to the Finance and Public Administration Committee, that the work that we are doing at the moment, including the review

work, will look at all of that as we move forward. As we propose and seek to make changes, we will bring all the elements of the business cases for those changes to committees and to Parliament so that they can be scrutinised. I imagine that a huge number of other stakeholders will scrutinise us on that front, too.

There are difficulties with some of those calculations. As the committee is well aware, it is often quite difficult for us to get certain aspects of data. The work that we are doing on the national care service creates a good opportunity to improve data collection as we move forward so that we know about the spend that goes on out there, some of which we are not quite sure about at the moment.

I go back to Mr Dey's point about carers. We know that the Government provides £84 million or £85 million—if that is not the right figure, I will correct it—to local authorities to ensure that the Carers (Scotland) Act 2016 is implemented, but we are not absolutely certain that all that money is spent on that particular service, as Mr Greer and others will know.

**The Convener:** Thank you, minister. We have a lot of ground to cover, and I am very aware that we not making much progress. I mean no disrespect, but some of your answers have been quite lengthy. I ask for some brevity and concise answers, if that is possible.

Ross, do you have any further questions?

Ross Greer: I am happy to finish at that point, convener.

**The Convener:** We move to questions from Stephanie Callaghan.

Stephanie Callaghan (Uddingston and Bellshill) (SNP): Chapter 3 of the bill is about creating an NCS charter. Will that be a touchstone for the work to develop the NCS? Is the charter likely to be limited to principles, or will it include rights and responsibilities?

You have spoken about the need to improve accountability. I am interested in how that might work in practice for individuals. Should ministers have a duty to ensure that advocacy services are available for children and young people with disabilities and additional support needs?

Kevin Stewart: Some of the early co-design work that we are doing is on the charter of rights and responsibilities. I was pleased to be able to attend a virtual event last week, or the week before last, on how we build that charter, when I faced a fair number of challenging questions from stakeholders about how we get that right. That is what needs to happen—we need to be challenged in all such regards.

We want to make sure that the co-design process is as inclusive as possible. We absolutely need to hear from a myriad of voices about how we get this right, because many people have previously been failed by the system. We have already garnered a lot of views, but there are missing voices, and we must do better in ensuring that those people, too, are at the table when it comes to helping us to create the charter.

You mentioned young people with disabilities. Many disabled folks have been excluded from helping to shape such things previously; we want them to be at the table. We have had some criticism, which I think is fair, from some ethnic minority groups, who say that they have been excluded from some of the design processes in the past. Again, we are going out of our way to try to get folks from those communities involved.

I will bring in Iona Colvin for a brief bit, and then I might come back in.

**The Convener:** I will interject again here—sorry, minister. I wonder whether Miss Haughey might want to respond to that question before we move on.

Clare Haughey: As a minimum, the charter will set out the rights and responsibilities in relation to the NCS so that people who are accessing support have information on the complaints and redress system, which will provide recourse if rights in the charter are not met, and information on how to access information, advice and advocacy services, which was one of the points that Miss Callaghan made. That is the basic minimum but, as Mr Stewart said, we are consulting, including with children and young people, on exactly what the charter should include.

The Convener: I can bring in lona Colvin, but I remind the panel that we are focusing on the children's services element. We know that there is extensive work going on with the national care service across adult services, but we really need to drill down on children's services, on which Stephanie Callaghan has questions. If we can pick up your questions now, Stephanie, that would be super.

Stephanie Callaghan: Minister, you have already talked about local care boards continuing to shape changes at local level. To what degree do you expect that ministers will be responsible for service delivery and directing those care boards? How will any shift in the powers and responsibilities of local and national Government ensure that the flexibility to adapt to those local circumstances is not lost?

**Kevin Stewart:** It is essential that local care boards continue to have the flexibility that is required to deliver for their area. They will have responsibilities for delivery and for shaping

services in their area, and they will have flexibility. However, the important element is that they will have to work to the national high-quality standards. That will prevent postcode lotteries, but it does not stop innovation in terms of the ability for local care boards to be as flexible as possible and to meet the needs of the people and the communities that they serve.

With regard to ministerial direction and the element of accountability that folk want to rest with ministers, that, in the main, is around the setting of the standards and ensuring that they are met across the board in order to achieve what we all want, which is the ending of postcode lotteries. Those lotteries most definitely exist, sometimes not only between but within areas, and we need to resolve those elements.

**The Convener:** Miss Haughey, would you like to comment on that?

Clare Haughey: I think that Mr Stewart has covered it all.

**The Convener:** That is fine. We move to questions from Bob Doris.

Bob Doris (Glasgow Maryhill and Springburn) (SNP): I will give a couple of specific examples, which is important, because the idea of what a national care service might look like for children can appear a bit vague.

I have been campaigning for a number of years on kinship care to ensure that children and young people who would otherwise be looked after in a residential setting get the support with family members and loved ones that they require. There are currently 4,456 young people in formal kinship relationships in Scotland who get kinship care allowances, but those allowances vary dramatically across Scotland. For example, for children between five and 10, a kinship carer might get £96 a week or £200 a week, or anything in between, across 32 local authorities.

Is the expectation that that would be standardised under a national care service? If so, can you give an assurance that it would be standardised at the higher end and not the bottom end of the scale? Where there is a financial gap in relation to what local authorities are currently putting into the system, who will fund that gap?

10:15

Clare Haughey: I think that there will be an opportunity to address that if children's services are transferred into the national care service. I am aware of the history of kinship care allowances and of different local authorities paying different rates and allowances.

Kinship care might be transferred into the national care service, with ministers having accountability. We envisage that the NCS will set standards and that national frameworks should be implemented at a local level by directly funded care boards. One key aim of the NCS is to end postcode lotteries across a number of areas, as we have spoken about today. That will bring consistency in areas where there should be consistency, such as financial assistance for kinship carers.

The short answer to your question is yes. We think that the proposals should help to ensure consistency in care allowances across the piece, rather than having the current situation in which different local authorities pay different rates. I appreciate that that can cause frustration.

**Bob Doris:** The Convention of Scottish Local Authorities would probably say that there will be negotiations between local authorities and the national care board about who picks up the tab. If a local authority is paying £100 a week and the national figure is £200 a week, there is a financial consequence to that. It would be helpful if you could say more about that.

There are 32 different local authorities. I think that Social Work Scotland has said that there is a lack of clarity. I know that there is clarity in law, but there is a lack of clarity about the criteria for kinship care and about when financial assistance is given. I have consistently given the committee the example of a grandmum who takes a child into her home after the death of the child's mum. Quite often, kinship care allowance is not granted in that situation but, if social workers turned up at the door with that child and said, "I'm really sorry your daughter has been lost—will you look after the grandchildren?", kinship care payments would be paid

That is deeply unfair. There are 32 ways in which that is interpreted across Scotland and, at local level, different social work service officers may interpret it differently on the ground. Will that be addressed by the national care service? I am trying to get to the reality of what that will look like on the ground, rather than looking at the abstract in a framework bill.

Clare Haughey: I am very familiar with that narrative. The bill gives us the opportunity to get consistency across the country. We have worked closely with kinship carers and have heard their concerns. This is one area in which we would have an opportunity to have national consistency for carers.

**Bob Doris:** I want to mention palliative care. Do I have time to do that?

**The Convener:** You will, but Michael Marra has a follow-up question on kinship care before you move on to that.

**Michael Marra:** Mr Doris has asked incredibly important questions. How much would that cost?

**Kevin Stewart:** As I said, some things would be brought forward as business cases. We are working on all aspects of this and gathering as much data as possible, and we will produce business cases for each of the elements.

**The Convener:** I think that Ms Haughey might have an answer to Mr Marra's question.

Clare Haughey: We are talking about a national care service that might or might not have children's services in it. I am sure that Mr Marra is aware that we are in negotiation with COSLA on that issue, and have been for some time. We are very keen to get a resolution to that. There would be a financial cost within that.

**Michael Marra:** My question for Mr Stewart was on the specific area of kinship care. In essence, how many kinship care payments would need to be levelled up to a higher level and how much would that cost? The answer is that we do not know.

Clare Haughey: I do not think that Mr Stewart could answer that question at the moment, simply because he does not have the figures in front of him, but we are not waiting—we are working on those issues.

**Michael Marra:** Could he provide those figures to the committee?

**Kevin Stewart:** I do not have an answer on whether we could provide those figures to the committee. We will see what we can do to provide anything that the committee asks for.

**Clare Haughey:** I assure Mr Marra that we are not waiting for a national care service to address that issue.

Michael Marra: That is helpful.

**The Convener:** It is helpful, but it would be good if someone could provide us with figures on the uplift that would be required.

**Kevin Stewart:** Ms Colvin has just told me that we are still in discussion with COSLA on that issue. We do not hold that data centrally so, in some regards, we are reliant on getting that information from COSLA. If we can get that information, we will get it to you.

**Bob Doris:** My substantive question is on palliative care, but I have a comment about specialist facilities and the commissioning of complex services and trauma-informed care for young people in kinship environments, who are

quite often very vulnerable. A specialist facility in my constituency is looking for money from the integration joint board, the local authority and the NHS. A number of local authorities are a bit uncertain about long-term funding for specialist facilities in those situations. I hope that the national care service will improve that kind of situation. That is not my substantive question, but I wanted to put that on the record.

I chair the cross-party group on palliative care in the Scottish Parliament, and I have to say that the engagement with the Government has been fantastic. I know that palliative and end-of-life care will form part of the new national care service. There is also a new national palliative care strategy pending. Based on 2020 figures, 16,700 babies, children and young people would benefit from palliative and end-of-life care because of lifeshortening conditions. Tragically, three die every week. There is good support out there, but it is sometimes inconsistent. I know that there has been good investment in the children's hospice network, but there is a feeling that integration joint boards and others perhaps still do not have a coherent strategy across the country to provide meaningful access to palliative care for babies, children and young people.

Can either minister say anything about how you will work with the sector to make that happen and ensure that the national care board drives forward improvements in that area?

Clare Haughey: Part of the drive for the national care service is to have consistency right across the country, so that there is access to the care that is needed, when it is needed, regardless of the part of the country where someone lives. The services that you are talking about are currently commissioned by IJBs, local authorities or health boards. That commissioning would be done by the national care service.

**Kevin Stewart:** That commissioning would be done by local care boards. Let me expand on that. In all of this, there is the opportunity for a once-for-Scotland approach for specialised services. One of the key elements of the bill is ethical commissioning, and we want to get that right.

I said that that commissioning would be done by local care boards. We are very aware that, for some specialisms and for some very complex cases, there is real difficulty at the moment in getting it right for folks. That is why the bill includes the ability to set up special care boards to deal with those once-for-Scotland elements that involve more complexity.

As the committee can well imagine, some pretty complex cases cross our desks regularly. Health and social care partnerships, local authorities and health boards have great difficulty in commissioning the right service for those individuals because of the complexity of their needs. We have the ability to make a real difference here and to take a national approach, with flexibility at a local level.

Ruth Maguire (Cunninghame South) (SNP): Good morning, ministers. I will direct my questions to the Minister for Children and Young People. The committee met in private with organisations that work with and represent children and young people, including care-experienced children and young people, those affected by domestic abuse, children and young people in conflict with the law, neurodivergent children and young people, and young carers.

Reflecting on the current situation in children's services, I think that we would all recognise that good work is on-going but, according to some of the feedback that we have received, families are being bounced around the system and a rights-focused approach has not been adopted across the piece. We have been told about organisational gatekeeping; about children, young people and families often having to prove extreme need in order to access services; about there being no shared language between organisations on occasion; and about responsibility shifting from organisation to organisation.

We have had integration for more than 10 years now, so how will a national care service that covers children's services make those experiences better for children and families? How will we ensure that a rights-based approach is taken?

Clare Haughey: That is a very fair and reasonable question to ask. Every MSP around the table will probably have had experience of constituency cases in which families and children have approached them with similar difficulties, concerns and worries. Those issues were certainly raised during the consultation and in the conversations that Mr Stewart has been having with children and young people, and I absolutely recognise those concerns.

Integration has worked well in some areas and provides some excellent services. I do not want to sound as though I am criticising the staff who work in those services—they have gone above and beyond, particularly in the past couple of years—but I think that this is evidence of why we need national consistency, minimum standards, a charter that sets out the rights that people can claim and those voices at the table when we codesign services. We need to ensure that there are no boundaries to accessing services and that we have consistency so that people who move from one local authority area to another can expect the same level of service.

Unfortunately, the things that those children and young people have experienced are not uncommon; they were certainly a driving force behind the independent review of adult social care, and they have lent a voice to the suggestion that children's services be included.

**Ruth Maguire:** The minister has talked about implementation gaps. We know that we have good policy and law, but the fact is that the experience of our citizens sometimes does not reflect the good intentions. We cannot ignore the resource aspects of the implementation gaps, so how will the national care service help in that respect?

Kevin Stewart: Ms Maguire is absolutely right to concentrate on implementation gaps. The committee has talked-and, more important, listened—to a number of young people. In some respects, far too much resource has been put in at points of crisis and not enough has been put into prevention. When people concentrate prevention and have linked-up services, they spend much less on crisis. We need to recognise that, at the moment, much of the system—not just children's services, but adult services—is focused on crisis spend. That costs a lot of money, and we also need to consider the human cost of not getting those preventative services right.

Ms Haughey is absolutely right to highlight the opportunity that we have in that respect. No matter whether children's services will be in or out of the national care service, the work that we are doing now means that we can look at where things are not working and see how we can improve them. That will be easier with the national standards in the NCS, but that does not mean that we should not be aspiring to bring up standards across the board for all services, whether they be out or in.

**Ruth Maguire:** Convener, my next question will probably not surprise you. I think that everyone would subscribe to the idea that we need to prevent problems before they happen; the real challenge is moving finance and resource from crisis to prevention. How will the national care service help us to do that?

#### 10:30

Kevin Stewart: There are certainly a number of things in that regard. Again, I will talk about what folks have said to us, and I will give the committee a good example from not so long ago. We talked with, and listened to, someone who currently has 15 different interventions in their life from a number of folks in social work and social care. It would be fair to say that that person felt that it would be much better if there was a much more joined-up approach rather than the current fragmented approach, in which someone deals with each individual element of what is a very

complex case. I will not go into the elements of that complexity, because that could identify the individual, and I do not want to do that.

From a person-centred perspective, the NCS gives us the ability, without a doubt, to listen to what folks' needs are and to actually make things better, rather than our doing certain things to folk that do not help them in any way, shape or form.

I do not know whether that answer is helpful to Ms Maguire.

**The Convener:** Ruth Maguire has another question, which might delve down a bit deeper.

**Kevin Stewart:** Iona Colvin wants to come in first.

**Iona Colvin:** Ruth Maguire hit on a number of critical issues. In relation to what Mr Rennie said earlier, we know that the system is not working just now. The independent care review told us that very clearly, and we now have the Promise, which is clear and to which we are all committed.

We have, so far, been talking about how best to deliver children's services at the point of need. Ruth Maguire's question gets to the heart of that with regard to earlier intervention, which, in the long run, saves money—The Promise has shown that through the work that it has done—because it saves people from coming into crisis care. Our aim is to have fewer children in formal care and more children supported in families—with fewer children being supported overall, we would hope—as those families are enabled to cope more and look after their own children.

However, the current system is a long way from that. Decisions around investment at a local level are taken locally—Ruth Maguire will know about the decision-making process, because she used to be a treasurer. Prioritisation at the local level is very different. That also relates to Mr Doris's question about the local allowances, for example, because different councils make different arrangements for what they invest in.

I know that, as an IJB chief officer, you spend most of the year negotiating the budget, with the health board on one side and the council on the other. It takes months and months, and then you have to go through all the usual things. Basically, the individual negotiation goes on for most of the year; there are a couple of months in the middle of the summer when it stops for a wee while. The focus is really difficult. Quite often, the process is undertaken on an individual basis.

One of the proposals for the national care service—this will be very different—is that the funds will be allocated directly and there will be a more direct relationship between the fund, what it is spent on and accountability for that spending and for meeting the standards. The relationship

will be more direct, but it is complex, because it is not about setting national requirements in stone. We are doing a lot of co-design work with people around that. In my head, it is almost like setting a specification. For example, drug services, which have been in the headlines this week, are very important to children, because their parents might need to access rehabilitation services so that they can continue to look after them. There needs to be a minimum standard for what people can expect to get at a local level, so that there is not a postcode lottery. However, those services need to flex around local need—for example, in island communities.

The national care service offers the opportunity to bring in more standardisation that is delivered in a flexible way at a local level. It is a complex relationship. That also means planning investment so that we can invest more upstream in prevention in order to reduce the numbers later on. At present, for example, it can cost £6,500 to take one child into severe care—we heard this week that one local authority has been paying £6,600 per week for a child.

That is what we need to get to, and that is what the Promise is about. I guess that the whole point of our research is to consider how we best deliver that.

Ruth Maguire: That is helpful.

**The Convener:** Michael Marra has questions about the complexities.

Michael Marra: I found all of those answers to be useful, particularly Ms Colvin's description of things. The timing of the bill is a concern, given the national crisis in social care and the huge issues with staffing and paying for that service. Indeed, it is one of the main causes of the disaster that we are seeing unfold in our national health service with regard to delayed discharge. Surely we are not intending, at this point in time, to drop children's services—services for the most vulnerable young people—into that maelstrom of a crisis. From the evidence that we have received so far, it is quite clear that people are concerned about the risk of children's services being lost in a care service that is dealing with that crisis.

As my question is about children, I would like to hear from Clare Haughey first.

Clare Haughey: Children and young people are right at the heart of co-designing the service. It is really important that their voices are at the table, and we have been doing a lot of work with children and young people in that respect. We have been hearing from a lot of hard-to-reach voices, disability organisations, children's disability representatives and so on to ensure that those voices are right at the heart of the co-design. That is important, no matter whether children's services

are included in the national care service, and the voices of the parents and carers of those children need to be heard, too.

It runs almost counter to some of the arguments that I have heard that we should not be looking at children's services when we have not decided whether they should be in the national care service, but the fact is that we have to design a national care service that will be able to provide such services for children if that decision is taken, to ensure that they are not an afterthought and that we are not doing things retrospectively. As I have said, their voices must be very much at the table.

There are difficulties with recruitment and retention in adult social care services and, indeed, in children's services, but those difficulties are not unique to Scotland. There are multifaceted reasons why people leave adult and children's social care services. Some people have returned home after Brexit. It has been difficult to recruit and retain those staff, but we continue to support social care services to ensure that we have the staff

I can give some examples of the work that we are doing to support recruitment across social care services—

Michael Marra: I am not sure that that was the nub of my question. Perhaps I did not phrase it appropriately. It was about dropping young people who have certain needs into what is a crisis. We can talk about the crisis and its causes, but what we have heard in our evidence so far is that this could be precisely the wrong moment to drop them into it and that there is a lot of risk that those children will get lost in a service that is, in essence, being designed to deal with acute care issues. Is there not a risk of those children being lost in that huge, on-going issue?

**Clare Haughey:** I hope that I answered some of that in my first response. We are ensuring that children and young people are involved in the codesign and that they are at the table.

I do not recognise what Mr Marra has said about young people being dropped into this. If children's services are covered by the national care service, the services that will be provided will be subject to national standards and, through the charter that is being designed, children will be given rights that they currently do not have. There will be risk either way—there will be risk if we do not bring children's services into the national care service, and there will be risk if we do. We have recognised that. Indeed, the task in the research that has been commissioned is to reach the best decision about where those services should be placed to best serve those children.

There will be changes, no matter whether children's services are brought into a national care service, and we need to be prepared for them. The Government has been doing preparatory work for that through our engagement with children and young people and their families through the organisations that represent them, as well as through the research that we have commissioned on an evidence base for the best way to provide the services.

lona Colvin: I emphasise that we are working with children and families to ensure that they are part of the co-design, so that they are not left out. That is not separate from the discharge of the Promise. For example, work is already under way on the redesign of the children's hearings system, which is being led by The Promise, with children and young people at the heart of it. Sheriff Mackie is the chair of that working group. The work is all part of the same thing: it is about how we reshape children's services as we move forward.

On the point about recruitment and retention, I think that Mr Marra said that, by dropping children's services into the national care service, we would make things worse. One of the issues—

**Michael Marra:** I was saying that we have heard evidence that there is risk. The question is really about resourcing and how resources are spread.

lona Colvin: Across social work and social care, the issue of recruitment and retention needs a national solution; it has gone beyond local solutions. There is an opportunity for the national social work agency to produce some national approaches to help to resolve our current issues and difficulties, and I am leading on that work along with Alison Bavidge from the Scottish Association of Social Work and Ben Farrugia from Social Work Scotland.

**Michael Marra:** I might briefly return to the issue of resourcing.

**The Convener:** Mr Rennie has a supplementary question on that theme.

Willie Rennie: The minister has just talked about being presented with risk. Has the risk not been caused by moving ahead with a national care service without having thought about where children's services will go? Is it not the case that the Government has caused the risk that you have talked about, minister?

Clare Haughey: I disagree. We are taking a very measured approach to whether children's services should be included in the national care service. We are looking at the evidence, consulting stakeholders, consulting the people who are using care services at the moment and

helping them to co-design what could be the children's element of a national care service.

**Michael Marra:** I will finish off the questions on this area. If it is okay, convener, I will ask one more question, which is on resourcing.

Is the Government minded to amend schedule 3 to narrow the scope of the powers in the bill that relate to the issues that we have been discussing and to give some clarity on what is in and what is out when it comes to children's services? I understand the arguments about co-design and the process, but it feels to me as though we are going back to managing risk. Perhaps the minister can reflect on where the lines fall between services; in fact, he himself has talked eloquently about the gap between different areas. Minister, can you reflect on my suggestion and see whether it might be a possibility?

More broadly on the issue of resourcing, you have talked in your evidence today about national collective bargaining, essentially around social work services, and you have also talked about a once-for-Scotland commissioning of services in this area. You have mentioned a variety of areas, including kinship care and levelling up the money in that respect, but I have not heard any analysis of the resourcing for any of those areas.

**Kevin Stewart:** I will start off with national collective bargaining, which Mr Marra has highlighted. The social work and social care profession has had difficulties with pay and conditions for many years now, because of the disparate amount of employers in social care—there are 1,200 in Scotland—and because of the competition, even between local authorities, in trying to attract folks into social work.

Having talked and listened to younger folk in social work and social care, I can say that, although pay and conditions are extremely important—pay is way up there, without a doubt—they want more of a ladder for career progression. They do not think that is there at the moment, and it is something that I think we can build on in the national care service.

#### 10:45

As for resourcing, there is undoubtedly a job of work to do in looking at what the co-design process will come up with and what the costings will be. As I have said, I am not here to talk about the totting up of annual budgets—that is a matter for Parliament. As we move forward with co-design and all the elements of the national care service, we will come up with the costs—and, indeed, the benefits. After all, some of the things that have been proposed or that will be proposed during the co-design phase might well have benefits as well as costs.

That work will continue. As I have said to the committee, to other committees and to Parliament as a whole, we will come back with the analysis and the business cases setting out our intentions with regard to any change that comes out of our co-design work.

Clare Haughey: I have a point to make in relation to Mr Marra's question about schedule 3 of the bill and the acts that are mentioned there. All of those acts cover social work-related local authority functions and duties—that is why they are included in schedule 3.

We will give on-going consideration to what is in and what is out on the basis of the evidence, the consultation and the research that has been commissioned. This is not set in stone; we will continue to consider these matters.

**Kevin Stewart:** We are in listening mode. Codesign is not lip service.

**The Convener:** Bob Doris has a supplementary question on this theme.

**Bob Doris:** I just want to follow up on that exchange with Mr Marra about funding. I get the impression that we cannot quite decide whether, if the national care service happens and children's services are part of it, it will be launched with a big bang and we will have a big shiny new service overnight or whether there will be a strategic evolution of the service over a number of years.

As for kinship care and the costings in that regard, is it the expectation that, in the first instance, there will be a standardised national kinship care allowance across 32 local care boards, or will the national commitment to that, which will be implemented over a number of years, have specific budgetary implications, both nationally and locally, on which there will have to be negotiations involving COSLA and the Scottish Government?

Having listened to today's discussion, I feel as though people are talking about a big bang, whereby—if it happens—we will have a national care service and everything will be fixed. However, it is clear that that is not going to happen. Minister, can you say a bit more about how resourcing will be allocated so that we do not oversell what we are trying to do and can get a better understanding of that process?

The Convener: I doubt that this is possible, but I must ask for a really concise answer to that question. I am looking at the clock, and there are a number of other themes that we need to follow up on.

**Kevin Stewart:** It is probably not possible to give a concise answer, but I will do the best that I can.

As Mr Doris rightly points out, there will be no massive big bang here. We will have to phase all of this in over time. We will also have to look at which priority elements should be brought forward first and what the costs of those priorities will be.

Mr Doris's priority today has been kinship carers, and I understand why from my own casework, but for other folks, the priority might be bringing up standards. We will work our way through those issues. We will speak to people and, more important, listen to them to find out their key priorities for change.

That is a key element of the co-design process, and I am sure that people will set out their stalls with regard to priorities. We must take cognisance of that as we move forward.

**Bob Doris:** That was quite concise, convener.

**The Convener:** It was very good for Mr Stewart this morning.

Do you have any comments, Ms Haughey? If not, we will move to questions from Mr Dey.

**Clare Haughey:** No—I am happy for you to move on.

**Graeme Dey:** I am going to put on my anorak and deal with some of the nuts and bolts. First, I am interested in the work that the Government is doing, or planning to do, to determine the exact number and nature of the pieces of existing primary legislation that will be engaged by proceeding with the inclusion of children's services within the national care service.

I am also interested in what work is being done to identify the pathways that would have to be established to interact with the aspects of children's services that are not intended to be captured by proceeding with the proposals. What flows from that is the question whether, if you were to proceed with the national care service for adults as intended but then decided not to proceed with it for children's services, any new pathways would have to be established. What work is going on or is intended to happen to identify the scale of the challenge and the solutions? After all, we all want to avoid unintended consequences.

**Clare Haughey:** Are you looking for a concise answer to that, too, convener? [*Laughter*.]

**The Convener:** I do not think that that is possible, minister. I wanted the previous answer to be concise so that we could spend a bit of time on this topic.

Clare Haughey: I covered some of the primary legislation that Mr Dey has alluded to in answer to Mr Marra's earlier question. The pieces of primary legislation in question, which are all listed in schedule 3 to the bill, relate to local authority social work functions and duties. We are in the

process of identifying all the relevant Scottish statutory instruments that might be affected if those functions were to be transferred, and much of that work has already been done. Where adjustments to SSIs are needed to further reflect the transfer of functions, that can be done through the ancillary powers in section 45 of the bill. I hope that that will reassure Mr Dey a bit.

I am afraid, though, that I will have to ask him to repeat the second part of his question. I must apologise for not scribbling it down.

**Graeme Dey:** We have the legislative angle to this, but we also have the practical application, which is about establishing pathways between a national children's care service and its interaction with existing localised services not captured by the bill. If we proceed with the intended national care service for adults and then decide not to proceed with the same service for children, we will need to establish new pathways to ensure that everything works. What work is going on in that area?

**Clare Haughey:** Mr Stewart has already talked about the phased approach to the NCS, and the approach to children's services will be similar if they are to be included.

We need to maintain strong links right across all the services that work with children, whether they be within or outwith the national care service. I touched on that a little when, in answer to Mr Greer's question about education and early learning and childcare, I said that we needed to ensure that such links were built strongly. However, we already have the underpinning of our getting it right for every child policy, which committee members will be familiar with. Everyday working for our health, social care and education staff is well embedded in all those services and gives a good, strong foundation for working across disciplines and services in the best interests of each child.

Our current work will help inform us as we move forward, regardless of whether children's services form part of the national care service. Included in that work are the research that CELCIS is carrying out and our engagement with children and young people on what they need from a national care service, what they have asked us for, what they have told us is not working well for them and how they would like services to work better for them—which is essentially what this process is about.

We all recognise that improvements have to be made right across children's services. As with adult services, they experience postcode lotteries, and they also encounter difficulties when they cross local authority boundaries, because one local authority might provide service X while the other does not. We will endeavour to continue our work to improve children's services; indeed, we

have already done a lot of work in that respect. For example, we have introduced the Promise, which lona Colvin referred to; we have established the whole family wellbeing fund; and, just a short while ago, we launched the new GIRFEC practice guidance.

In short, a lot of work has been done, but we are not standing still, regardless of whether children's services will be included in the NCS.

**Graeme Dey:** Mr Stewart, you said that you are in listening mode, but I wonder whether you are hearing MSPs concerns about the role of Parliament if you decide to move forward. I am talking specifically about the substantial volume of secondary legislation that will be required to deliver this. Parliament is rightly expressing concern about that approach. Do you understand that concern?

**Kevin Stewart:** Of course I do; after all, Parliament has a job of scrutiny to do. What I would say to Mr Dey, however, is that this framework—or enabling—bill is not unusual. In fact, it is the way in which the national health service was formed.

I gave Mr Dey a kind of answer earlier about the reasoning behind the approach. Having the ability to make changes through secondary legislation gives flexibility, because that sort of thing is not so easy to do in primary legislation. I have already given the committee the very good example of self-directed support. Parliament, with the best of intentions, wrote a piece of legislation that had some flaws; folk have since dug into those and hivna stuck to the spirit of that act. We want some flexibility so that we can adapt as we go along, in order to get service delivery absolutely right.

Graeme Dey: There is, absolutely, a logic to that, but what I would like to hear today is whether the Government is willing—at least in principle—to commit to taking a slightly different approach that affords this committee, or others, greater opportunity to scrutinise what is being proposed. What I am talking about goes beyond the affirmative and super-affirmative procedures. Is the Government willing—in principle at least—to commit to allowing committees to take evidence and produce reports, almost as they would do during stage 1 proceedings, and then treat the process of dealing with the secondary legislation more like a stage 2 process? That might give some colleagues a little more reassurance about having an opportunity to interrogate the proposal further, if you decide to take it forward.

**Kevin Stewart:** A number of elements to this are very different. First, the co-design aspect is very different to anything that we have ever done before. This is not just about scrutiny; we need to think about the folks who have helped us shape

the decisions that will take us to that point of making the secondary legislation. There will obviously be consultation on all of that. The process, therefore, will already be somewhat different.

Without making any commitments here and now, I will reflect on what Mr Dey has said. A number of folk around the table have worked with me before, and on tricky pieces of legislation. My door is open; I am willing to speak to anyone and everyone, whether informally or formally, about elements of this work, and I will certainly reflect on what Mr Dey has said.

Kaukab Stewart (Glasgow Kelvin) (SNP): The research has been referred to a few times, and I will spend a few minutes digging further into that.

You have made it clear that no decision has been made and that you have commissioned research from CELCIS. Please quickly explain the background reasons for commissioning that research. What is the timeline for that, and how does it fit into the progress of the bill?

Clare Haughey: We touched on that at the very beginning of the meeting, when we spoke about why children's services are being considered as part of the national care service. The independent review of adult social care looked only at social care for adults. When the public consultation on the national care service was concluded, it was clear that there were mixed responses to our questions about the inclusion of children's services within the NCS, mostly because people felt that there was a lack of evidence in that respect, whereas there had already been a large inquiry into adult social care.

#### 11:00

Therefore, as part of an evidence-gathering exercise, we commissioned CELCIS to carry out independent research on how we ensure that children, young people and their families get the help that they need when they need it. There are five strands to that research: first, a rapid evidence review of the published literature: secondly, a deep dive to examine approaches to the integration and delivery of children's services; thirdly, a national scoping and mapping exercise to explore different models of integrated service delivery and any potential effects on a range of outcomes; fourthly, a national survey of the children's services workforce and children's services leaders to build on emerging findings; and fifthly, targeted focus groups and interviews with the workforce. Although the research will not give us a yes/no answer, it will give us an evidence base for where we are, what is working and how the workforce feels.

In parallel with that, we are working with children, young people, their families, organisations that represent them and other groups on what they feel that they need from a national care service. We are not going back to ask them lots of questions for which we already have lots of evidence from the review of care services, but we will look at all that evidence in the round and make a decision in principle on whether children's services should or should not be in the national care service.

The research, which started in September, will run for a year to next September. The committee might be interested to know that the strands will report as they conclude, and I am more than happy to share those reports with the committee if it is interested in receiving them. Obviously, I am not asking you to make a decision on that today, but the offer is there to see those reports before the research itself is finally written up. The timeline for the research has been developed to ensure that we can make those decisions on the inclusion of children's services in the NCS, and the two things will run in parallel prior to the operation of the NCS itself.

**Kaukab Stewart:** It has been quite helpful to get that context, given the concern that there is not enough evidence. It sounds as though the scope of the research is quite wide, but are you confident that the research itself and the method of deployment will be enough to give you the evidence that you need? If you do not get enough evidence, is your mind open to gathering more?

Clare Haughey: We will look not only at what the research tells us but at what stakeholders and the people involved in the service will tell us. It is important that we do not look at things in isolation.

Mr Stewart and I have talked about co-design, and it is vital that we listen to those who use care services and hear their opinions on what the service for children should look like. As I said in response to Ms Maguire, all of this evidence gathering and consultation will not go to waste if it turns out that children's services are not to be included in the NCS. Instead, it will help us to drive forward change that is needed and wanted and that will best suit the needs of children and their families.

**Kaukab Stewart:** Thank you for that response, as it leads me neatly to some questions for Mr Stewart.

It has been pointed out—rightly—that the committee has already had two evidence-taking sessions in which we heard from a variety of stakeholders and service providers. Can you provide us with any evidence that you have received from advocacy groups during your own consultation processes or give some examples

from the lived experience that you have heard of services not having been as good as they could have been for certain young people?

**Kevin Stewart:** We could provide many examples of where services have not delivered well for people. Again, I hearken back to what I said earlier: some of the areas in which there are real difficulties for folks are the transition stages from children's services to adult services.

Members have probably had correspondence in their mailbags and inboxes about some young person who leaves school and is then left with nothing in terms of care and support. That will obviously have a major impact on somebody with a disability or a learning disability. There are a lot of examples of where that transition has not worked. We could probably provide the committee with some very good examples, but I am always a bit feart of giving examples, because we could end up with a situation in which an individual can be identified, given that some of the circumstances are so complicated.

Kaukab Stewart: I understand and respect that. I just think that it would be useful for the committee to hear from the perspective of a young person, with their voice, about a real-life example, as that would give a good illustration of their experience of the service. That is why I was keen to get an example.

**Kevin Stewart:** I am quite sure that we can provide you with many examples from the evidence that we have gathered. I do not know whether lona Colvin has anything to hand just now.

lona Colvin: That is a major strand of the work in the Promise. It is very clear that the voice is there. We have been working with Who Cares? Scotland and the young disabled people's forum, which are the two main groups with which we are engaged in thinking about co-design. The variation in experience in children's services is very real. There are examples of good practice; the basic problem is that it is not consistent and evenly spread across Scotland. If the system was operating to the highest level of the best partnerships, we would probably not be sitting in this room talking about it. The reality is that it is not.

Kaukab Stewart: We have the evidence from service providers and stakeholders about the services that they provide, but I want to be able to cross-check that with the real experience of the recipients of those services. That is the area that I was exploring. I am happy for Mr Stewart to come back on that.

**Kevin Stewart:** I will come back briefly. In some respects, one of the simple things to look at is self-directed support, so let us go back to that. In some

parts of Scotland, children and young people are not able to access self-directed support—it is as simple as that. If you talk to some of the stakeholders again, many of them will point out that the joining up of services for young people who have similar care needs can be very different from one area to the next. There can be top-quality service in one area, which ensures that all the linkages are there, and next to nothing in the next.

The Convener: We have heard a lot about a phased approach, but we have not been given a timescale as to how long it may take for the big new organisation to be embedded. We heard from Mike Burns of Social Work Scotland that culture change can take

"five, 10 or 15 years."—[Official Report, Education, Children and Young People Committee, 9 November 2022; c 20.]

Mr Stewart, you mentioned earlier that legislation and regulation do not bring about a change in culture. Given that it has taken so long for the integration legislation to get to this point, and it still has problems, do you think that all these years of change and adjustment are worth it? Should we not be focusing here and now on what we can improve on now?

**Kevin Stewart:** I think that we need to improve on the here and now as well, and we, as a Government, will continue to do that across services, even in these tough financial times. However, what we actually require is a service that is fit for the future, and which is built with people at its very heart.

At the moment, a huge amount of folks out there receive care and support in order to survive. We need to turn that around so that folks can thrive. That is the ambition for our approach, which is person centred with human rights at its heart. It is about closing those implementation gaps by actually getting those folks who are currently receiving services, and those folks who are on the front line, to help us in shaping the service.

We have a huge opportunity here to change the culture. At present, in many parts of the country, we find that, where front-line staff have more autonomy and independence, that means better delivery for people. If the committee were minded to go out and about and speak to front-line staff in certain places, it would find, without a doubt, that that freedom and autonomy for the front line, which in many places has been restricted and clawed back over the piece, is the right way forward. By doing that, we will improve services for people across the board.

**The Convener:** Thank you, Mr Stewart—we have had some informal sessions with service delivery organisations, albeit from the voluntary sector, so we are aware of that.

We have a final question from Willie Rennie.

Willie Rennie: Mr Stewart, you will have seen Daren Fitzhenry's contribution to the Health, Social Care and Sport Committee yesterday, in which he expressed concerns that the proposed changes would potentially give ministers sweeping powers to limit the scope of his investigations into social care complaints. What is your response to that?

Kevin Stewart: Ministers will not impose on any of those things. We are going to build a system that allows folks the opportunity to get redress—the right redress—for their complaints. We are talking about improving the complaints system, and what you have highlighted is certainly not how I would describe things. We want to get complaints and redress absolutely right. That is a major issue for the public at large, and it is one of the areas that we are absolutely adamant that we will get right.

**The Convener:** I thank you all for your time today. The public part of our meeting is now an end, and we will consider our final agenda items in private.

#### 11:12

Meeting continued in private until 11:58.

This is the final edition of the Official Repo	o <i>rt</i> of this meeting. It is part of the and has been sent for legal dep	e Scottish Parliament <i>Official Report</i> archive posit.
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