Local government social care workforce development expenditure: a survey of trends and funding (2008)

By Keith Brown, Natalie Bates and Steven Keen
Foreword

This is the fifth year that Learn to Care has carried out a survey, through its members, of the use by local authorities of the workforce development grants allocated by the Department of Health. The findings certainly make interesting reading. I’d like to record my grateful thanks to the 56 Learn to Care members for responding to this survey; and indeed to the authors of this publication for making these responses understandable and accessible to all.

Learn to Care continues to thrive on the creativity, enthusiasm and commitment to improve care services that is demonstrated by our members. Please do use our network for your day-to-day support needs via our website (www.learntocare.org.uk) and the regional representatives.

Trevor Hewitt
Chair, Learn to Care

info@learntocare.org.uk

For further information on the findings of this report, please contact Keith Brown at the following address:

Centre for Post-Qualifying Social Work
Bournemouth University
4th Floor Royal London House
Christchurch Road
Bournemouth
BH1 3LT

Telephone: 01202 964765
E-mail: pqsw@bournemouth.ac.uk
Social care workforce development funding survey

Contents

<table>
<thead>
<tr>
<th>Introduction</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Voluntary, independent and private (VIP) sector</td>
<td>3</td>
</tr>
<tr>
<td>Grants</td>
<td>7</td>
</tr>
<tr>
<td>People who use services and their informal carers</td>
<td>15</td>
</tr>
<tr>
<td>Good practice examples in workforce development</td>
<td>17</td>
</tr>
<tr>
<td>The future</td>
<td>18</td>
</tr>
<tr>
<td>Summary of findings</td>
<td>19</td>
</tr>
<tr>
<td>Implications</td>
<td>22</td>
</tr>
<tr>
<td>Appendix A: Learn to Care 2008 Funding Survey</td>
<td>24</td>
</tr>
</tbody>
</table>

Tables and charts

| Table 1: Response rate to 2008 survey by region | 1 |
| Table 2: Range of involvement of people who use services and their informal carers | 15 |

| Chart 1: Financial support planned for the VIP sector (mean planned spend) | 3 |
| Chart 2: Average percentage of the NTSG spent by local authorities in the VIP sector | 4 |
| Chart 3: Average percentage of the HRDSG spent by local authorities in the VIP sector | 4 |
| Chart 4: Estimated versus actual retention of 100% NTSG in 2007-08 | 7 |
| Chart 5: Estimated versus actual retention of 100% HRDSG in 2007-08 | 8 |
| Chart 6: Estimated versus actual spending of NTSG by authorities unable to retain 100% of the 2007-08 grant | 9 |
| Chart 7: Estimated versus actual spending of HRDSG by authorities unable to retain 100% of the grant | 9 |
| Chart 8: Number of local authorities accessing other grants for workforce development purposes | 10 |
| Chart 9: Additional sources of funding accessed by local authorities in 2007-8 | 11 |
| Chart 10: Average percentage of Social Service department gross expenditure spent on training directly employed staff | 12 |
| Chart 11: Percentage of authorities likely to retain 100% of the children's and adult workforce grant in 2008-09 | 12 |
| Chart 12: Percentage of workforce grant likely to be spent by authorities unable to retain 100% of the grant | 13 |
| Chart 13: Core funding from local authorities to support workforce development in social care | 14 |
| Chart 14: Percentage of authorities involving people who use services and their informal carers to improve learning and development activity | 16 |
Introduction

Learn to Care ([www.learntocare.org.uk](http://www.learntocare.org.uk)) represents people engaged in the management and implementation of workforce development in the social care sector and has undertaken an annual survey of its members since 2004 to see how the Department of Health’s workforce development grants are being used in England.

In 2007-08 the total workforce development grant of £157m was split into two, each with their own sub programmes:

<table>
<thead>
<tr>
<th>National Training Strategy Grant</th>
<th>Human Resources Development Grant</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Minimum Standards</td>
<td>£75.9m</td>
</tr>
<tr>
<td>Trainee Social Work schemes</td>
<td>£12m</td>
</tr>
<tr>
<td>Post-Qualifying Training</td>
<td>£13m</td>
</tr>
<tr>
<td>Learning Resource Networks</td>
<td>£7m</td>
</tr>
<tr>
<td>Human Resource Development</td>
<td>£46.8m</td>
</tr>
<tr>
<td>Skills for Care / Children’s</td>
<td></td>
</tr>
<tr>
<td>Workforce Development Council</td>
<td>£3m</td>
</tr>
</tbody>
</table>

For 2008-09 and beyond, the above grants have been replaced as components of the Local Area Based Grant. These two components are the Adult Social Care Workforce (£139m) and Children’s Social Care Workforce grants (£18.2m) and total £157.2m for 2008-09.

This report details the findings from the 2008 survey and compares them with its predecessors. The 2008 survey asks questions around the Department of Health’s workforce development grants; the funding of workforce development in the voluntary, independent and private (VIP) sector; the involvement of people who use services and their informal carers; and good practice examples. A copy of the 2008 survey is placed at the end of this document as Appendix A.

Learn to Care members working in 56 local authorities responded to the 2008 survey; therefore, 37% of local authorities in England are represented. Some regions are represented more than others, as Table 1 shows:
Table 1: Response rate to 2008 survey by region

<table>
<thead>
<tr>
<th>Region</th>
<th>Responses</th>
<th>Total no. of local authorities</th>
<th>% response rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>South East</td>
<td>6</td>
<td>19</td>
<td>32</td>
</tr>
<tr>
<td>South West</td>
<td>7</td>
<td>16</td>
<td>44</td>
</tr>
<tr>
<td>London</td>
<td>6</td>
<td>33</td>
<td>18</td>
</tr>
<tr>
<td>Eastern</td>
<td>3</td>
<td>10</td>
<td>30</td>
</tr>
<tr>
<td>East Midlands</td>
<td>3</td>
<td>9</td>
<td>33</td>
</tr>
<tr>
<td>West Midlands</td>
<td>8</td>
<td>14</td>
<td>57</td>
</tr>
<tr>
<td>Yorkshire</td>
<td>7</td>
<td>15</td>
<td>47</td>
</tr>
<tr>
<td>North West</td>
<td>12</td>
<td>22</td>
<td>55</td>
</tr>
<tr>
<td>North East</td>
<td>4</td>
<td>12</td>
<td>33</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>56</strong></td>
<td><strong>150</strong></td>
<td><strong>37</strong></td>
</tr>
</tbody>
</table>

This level of representation is lower than the 54% (or 81 authorities) who responded to last year’s (2007) survey, in part owing to a much reduced response rate from the London region. London contains some relatively small authorities and this may have impacted their ability to reply to the survey. The complexity of changes for 2008-09, together with the restructuring of many local authority Learning and Development functions, could also account for this lower level of representation. Separation of Children’s and Adult services could also be a contributory factor. Please note that not all Learn to Care respondents answered all the questions. Direct verbatim quotes from survey responses are contained in quotation marks and are italicised. What follows is split into seven subheadings:

- Voluntary, independent and private (VIP) sector
- Grants
- People who use services and their informal carers
- Good practice examples in workforce development
- The future
- Summary of findings
- Implications.

Some of these sections include mean (or average) figures and the standard deviation from this mean. Standard deviation (SD) is a measure of how the data is distributed around the mean. A low figure of standard deviation means the figures are grouped closely around the mean. A high figure of standard deviation means there is more variance in this data. Put another way, standard deviation is the most common measure of statistical dispersion, measuring how widely spread the values in a dataset are. If many data points are close to the mean, then the standard deviation is small; if many data points are far from the mean, then the standard deviation is large.
Voluntary, independent and private (VIP) sector

This section looks at how far local authorities are financially supporting the VIP sector. All those answering Question 10 of the survey (n=53) plan to support workforce development in the VIP sector to a mean of £366k (SD £236k) per authority in 2008-09. The figure of standard deviation is large here – this means that there is much variance in this data (this is to be expected owing to large variations in the size of local authorities). This figure can be broken down into spending in children (£66k) and adult (£300k) sectors. The mean spend of £366k per authority is higher than those from the 2007 (£363k), 2006 (£338k), 2005 (£322k) and 2004 (£298k) surveys, as displayed in Chart 1. These figures demonstrate that support for the VIP sector in 2008-09 is either slightly higher (n=29) or substantially higher (n=12) than in 2007-08, although for 13 authorities, support for the VIP sector is slightly lower than in 2007-08. As Chart 1 shows, the overall trend of spending in the VIP sector is on an upwards trajectory.

Chart 1: Financial support planned for the VIP sector
(mean planned spend)

Assuming these averages display a representative picture for all local authority councils with social services responsibilities, it can be estimated that a total of £55m (150 English councils x £366k) will be spent in the VIP sector during 2008-09. This figure equates to 35% of the children’s and adult social care workforce grants (£157.2m).

In 2007-08, 31 local authorities actually spent an average of 50% (SD 28%) of their National Training Strategy Grant on supporting the VIP sector; 29 local authorities actually
spent 47% (SD 30%) of their Human Resources Development Strategy Grant on supporting the VIP sector. Taken together, these actual figures are higher than those from the 2007 and 2006 surveys as Charts 2 and 3 show; and indeed, higher than 2005 (32%) and 2004 (33%) survey figures.

Chart 2: Average percentage of NTSG spent by local authorities in the VIP sector

Chart 3: Average percentage of the HRDSG spent by local authorities in the VIP sector
In 2008, as in the 2007 and 2006 surveys, most authorities (n=42 or 75%) spent all the funding allocated to the VIP sector. The 2008 survey asked Learn to Care members to specify any key issues – as in previous years, three issues stand out:

- VIP sector capacity to release staff for workforce development (n=10)
- Local authority related budgetary pressure impacting on a council’s ability to spend money in the VIP sector (n=6)
- Local authority capacity, i.e. lack of resource, to meet the VIP sector’s training and development needs and demands (n=4).

We asked two new questions (10 (h) and (i)) in the 2008 survey about the percentage of overall local authority budget for children’s and adults social care services spent on commissioning services from the VIP sector. Eight members responding for the children’s sector commission a 21% mean (SD 21%) of their overall local authority budget from the VIP sector. In comparison, 16 respondents from the adult sector spend a 50% mean (SD 26%) of their overall local authority budget for adult social care services on commissioning services from the VIP sector.

Learn to Care members answering question 10 (g) identify a large array of new initiatives that councils have been involved in during 2007-8 to make workforce development opportunities available across the VIP sector. In addition to offering fully funded places for direct training in the independent sector and providing joint training opportunities within the VIP sector, councils have also made a significant investment in e-learning. E-learning programmes have been used to provide online assessments and workshops to adult social care staff in the VIP sector, to measure staff competence against the Common Induction Standards and to integrate the new Foster Care Standards. The following initiatives have also been developed to increase workforce development opportunities across the VIP sector:

- Providing support to the VIP sector for completing the National Minimum Data Set
- Establishing independent training forums
• The funding of new posts, for example, the appointment of Learning and Development Officers for the independent sector

• Strengthening partnerships with contracting organisations and working closely with contracting and commissioning teams to target funding where it is needed most

• Investment into ‘Build a Better Business’ programmes, aiding a number of partner organisations to progress towards the Investors in People standard

• Increasing accessibility to post-qualifying awards (Enabling Others) for small independent sector providers

• Developing training materials for the VIP sector on Dementia, Mental Health Capacity Act, Safeguarding, a Human Resources advice line and an Employer’s forum.
Grants

2007-08

This section looks at the extent to which workforce development grants are secured for their intended purpose. In last year’s (2007) survey most authorities *estimated* they would be able to retain 100% of their National Training Strategy Grant (n=60 or 74%) and Human Resources Development Strategy Grant (n=56 or 69%) for workforce development in social care in 2007-08. It is worth noting at this point that these figures were slightly lower than the previous year’s (2006) survey findings of 81% (National Training Strategy Grant) and 75% (Human Resources Development Strategy Grant) for 2006-07. However, when we asked in the 2008 survey what percentage of the National Training Strategy (NTSG) and Human Resources Development Strategy grants (HRDSG) members *actually* secured in 2007/08, just 10 members (18%) from the children’s sector and 10 members (18%) from the adult sector secured *all* of the National Training Strategy Grant for workforce development in social care, as Chart 4 demonstrates.

**Chart 4: Estimated versus actual retention of 100% NTSG in 2007-08**

Similarly, in 2007-08, 10 Learn to Care members from the children’s sector (18%) and 12 members (21%) from the adult sector *actually* secured all the Human Resources Development Strategy Grant for workforce development in social care (see Chart 5).
Therefore, there is a clear mis-match between last year’s expectations and this year’s reality for the 100% retention of workforce grants in both adult and children’s sectors. This could be as a result of mid-year financial review in councils whereby spending is often re-prioritised as a result of operational pressures.

In last year’s (2007) survey, of those authorities estimating they would be unable to retain 100% of these grants, they thought they would be allowed to spend an average of 63% (SD 21%) of their National Training Strategy Grant and 51% (SD 33%) of the Human Resource Development Strategy Grant on social care workforce development in 2007/08. Again the actual figures are split into adult and children’s sectors. In 2007-08, 36 members from the children’s sector were able to retain an average of just 30% (SD 11%) of their National Training Strategy Grant and 30% (SD 13%) of their Human Resources Development Strategy Grant for workforce development in social care. In comparison, the adult sector fared better than they thought they would by actually retaining an average of 67% (SD 17%) of their National Training Strategy Grant and 62% (SD 22%) of their Human Resources Development Strategy Grant for workforce development in social care (see Charts 6 and 7).
In addition to National Training Strategy and Human Resources Development Strategy grants, local authorities are also accessing other types of grant for workforce development purposes. Members report often accessing more than one of the most common funding streams: Mental Capacity Act (n=45), Transforming Social Care (n=20), and Mental Health Grants (n=13) – see Chart 8.
In answer to Question 9 most Learn to Care members (49 or 88%) are also accessing other funding, mainly from the Skills for Care Training Strategy Implementation Fund and ‘Train to Gain’ – see Chart 9. In monetary terms, these funding streams gained by 36 authorities equate to a total of £2.4m or a mean of £67k (SD £67k) per authority; most of this funding has been allocated over the 2007-08 and 2008-09 financial years.
In answer to Question 4, 19 members from the children’s sector spent an average 3.84% (SD 2%) of social service department gross expenditure on training their authority’s directly employed staff in 2007/08. This compares with 41 members from the adult sector who spent an average 3.66% (SD 1%) of social service department gross expenditure on training their authority’s directly employed staff in 2007-08. Chart 10 demonstrates this figure has been increasing steadily over the past five years: from a 3% mean in the 2004 survey. In monetary terms, combining both children’s and adult sectors, this is likely to equate to an average spend of £1.2m (SD £785k) per authority in 2007-08. In our opinion, this data must be treated with caution given the potentially conflicting data recorded in Charts 6 and 7.
2008-09
Looking forward to 2008-09 local authorities estimated the extent to which workforce development grants are likely to be secured for their intended purpose (Question 6 (a) and (b)). Despite what has happened with the 2007-08 grants, about half of the Learn to Care members report they are likely to retain all the children’s (n=30 or 54%) and adult (n=31 or 55%) workforce grant in 2008-09 – see Chart 11. Given this year’s experience, their predictions may prove to be incorrect.

Chart 11: Percentage of authorities likely to retain 100% of the children’s and adult workforce grant in 2008-09
Of those authorities unable to retain 100% of these grants, they were likely to spend an average of 35% (SD 30%) of their children’s social care workforce grant and 73% (SD 16%) of the adult social care workforce grant in 2008-09 (Chart 12). In monetary terms, these percentages equate to local authorities being able to spend an average of (adult grant) £702k (SD £433k) and (children’s grant) £144k (SD £102k) per authority on workforce development in 2008-09.

Local authorities are supporting workforce development in social care during 2008-09 (Questions 5 (a) and (b)) in addition to National Training Strategy, Human Resources Development Strategy and other grants – otherwise known as ‘core’ funding – to a total of £18m or a mean of £530k per authority (Chart 13). This figure is made up of average spending per authority in children’s (£175k (SD £139k)) and adult (£355k (SD £272k)) sectors. Assuming these averages reflect all local authority councils with social services responsibilities, ‘core’ funding can be estimated at a total of £80m (150 English councils x £530k) for 2008-09; £6m less than last year’s survey figure for 2007-08 (£86m).
Question 7 asked Learn to Care members about what impact, if any, the delivery of grants through the Local Area Based Agreement mechanism has had on their funding for 2008-09. Although most authorities (38 or 68%) say their funding has not been affected, many Learn to Care members went on to state that the future might not be so secure. To illustrate:

There was ‘no change in funding for 2008-09 although training proposals were subject to far greater corporate scrutiny’

‘whilst we have secured all the funding for 2008-09, we are already being informed that this might not be the case for 2009-10 and beyond’

‘sor far we have held on to most of our allocation but we anticipate that in future years we will have much stronger [corporate] challenges and cannot take it for granted that funding formerly designated for the purposes of social care workforce development will necessarily remain the priority of the council’.

Five members mentioned how their children’s social care workforce grant had been significantly cut. This concurs with data from the children’s sector contained in Charts 6, 7 and 12, that is, the children’s sector is more likely to suffer severe cuts than the adult sector.
People who use services and their informal carers

This section looks at how local authorities are involving people who use services and their informal carers to improve learning and development activity (Question 11). Table 2 (below) displays how the majority of authorities involve people who use services and their informal carers at a number of levels, along with the change in activity between 2005 and 2008 survey data:

Table 2:
Range of involvement of people who use services and their informal carers

<table>
<thead>
<tr>
<th>Area of involvement</th>
<th>2005 %</th>
<th>2006 %</th>
<th>2007 %</th>
<th>2008 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delivery – e.g. direct and/or joint input on programmes</td>
<td>64</td>
<td>79</td>
<td>93</td>
<td>96</td>
</tr>
<tr>
<td>Training – e.g. carers completing a carer’s certificate, first aid training or a ‘train the trainer’ programme for people who use learning disability services</td>
<td>30</td>
<td>48</td>
<td>52</td>
<td>85</td>
</tr>
<tr>
<td>Planning – e.g. design and development of vulnerable adult training</td>
<td>25</td>
<td>55</td>
<td>77</td>
<td>91</td>
</tr>
<tr>
<td>Representation – e.g. on partnership boards or sub-regional committees</td>
<td>22</td>
<td>73</td>
<td>85</td>
<td>96</td>
</tr>
<tr>
<td>Consultation – e.g. with carers’ forums and users’ parliaments</td>
<td>19</td>
<td>72</td>
<td>79</td>
<td>92</td>
</tr>
<tr>
<td>Assessment – e.g. of practice or NVQ competence</td>
<td>16</td>
<td>35</td>
<td>44</td>
<td>89</td>
</tr>
<tr>
<td>Recruitment – e.g. on selection panels for Approved Social Workers</td>
<td>14</td>
<td>51</td>
<td>57</td>
<td>79</td>
</tr>
<tr>
<td>Posts – e.g. carer’s development or service user empowerment officers, or joint posts with higher education institutions</td>
<td>11</td>
<td>37</td>
<td>43</td>
<td>79</td>
</tr>
</tbody>
</table>
In 2005 we described local authority activity as being ‘inconsistent’ in terms of working with people who use services and carers to improve their learning and development activity in social care. This year there have been further increases across all areas of involvement, as Chart 14 illustrates. This level of involvement is far more consistent across the range of learning and development activity, is indicative of the active involvement of people who use services and their informal carers to improve learning and development, and in our opinion, is to be celebrated.

**Chart 14: Percentage of authorities involving people who use services and their informal carers to improve learning and development activity**
Good practice examples in workforce development

Question 12 (a) requested examples of what has gone particularly well in each local authority area in 2007-08. Forty Learn to Care members offer a response, although anecdotally these types of initiatives are replicated in the many other local authorities who have not responded to this survey. Last year there was a clear focus on the development of partnerships and this continues to be emphasised in this year’s [2008] survey. In particular, local authorities have worked in partnership with health teams to develop planning and joint training. The following examples of good practice are highlighted for 2008:

- Partnership development with health teams, contracting and commissioning staff, other local authorities and universities

- Increased support for managers’ learning and development including funded places on Post-Qualifying Leadership and Management programmes, the provision of training for the management of integrated services and the establishment of a Management and Leadership Development Centre

- The development of in-house Newly Qualified Social Worker induction programmes including opportunities for reflective practice and ‘buddy’ schemes

- Training for people who use services and carers. One local authority is training people who use services and and carers to assess workers’ skills in dignity and respect, and there is a plan to introduce this to National Vocational Qualification modules

- Use of e-learning continues to increase, particularly with regard to Safeguarding Adults and the Mental Capacity Act. E-learning has been made available for frontline staff and the VIP sector, and has also been used to measure staff’s knowledge against the Common Induction Standards

- New posts have been created to support the implementation of the National Minimum Dataset
• The development of a Black Minority Ethnic project to support the recruitment and development of a diverse children’s workforce

• Training members of the community to become ‘social champions’ to support better outcomes for children and young people.

The future
In addition to providing examples of good practice, the funding survey also asks respondents for details of longer term plans for development in their local authority area (Question 12(b)). In the 2007 survey, long term plans for development focused on increased working with the VIP sector. This year, support for the VIP sector again features strongly in future plans, with proposals to offer increased training, such as Moving and Handling training for trainers. Members also plan to continue supporting the transition to integrated working within social work teams.

Development of the personalisation agenda is highlighted as a future priority and full implementation of the National Minimum Dataset (NMDS) within the public sector is identified as a long term plan, as well as encouraging ‘take-up’ of the NMDS in the independent sector. Other areas of long term development include the increase of social work degree placements in schools, the integration and greater use of online assessments, and the involvement of people who use services and carers in the development and provision of courses. In one local authority, for example, people who use services are currently developing a ‘Parents with Mental Health issues’ training package to be offered to social workers in children’s and adult services.
Summary of findings

Learn to Care members working in 56 local authorities responded to the 2008 funding survey, representing 37% of all local authorities in England. A summary of the key findings is detailed below:

Voluntary, Independent and Private Sector

- Local authorities plan to support workforce development in the voluntary, independent and private (VIP) sector to an average of £366k (£66k – children and £300k – adult sector) per authority in 2008-09. This average spend has been steadily rising since 2004.
- Assuming these averages are representative of all local authorities councils with social services responsibilities in England, it can be estimated that a total of £55m (150 English Councils x £366k) will be spent in the VIP sector during 2008-09. This figure equates to 35% of the combined children’s and adult social care workforce grants (£157.2m).
- In 2007-08, as in 2005-06 and 2006-07, most authorities (74%) spent all the funding allocated to the VIP sector.
- The key issue for Learn to Care members working with the VIP sector remains ‘capacity’ – for example, VIP sector capacity to release staff for workforce development, and local authority related budgetary pressure impacting on a council’s ability to spend money in the VIP sector.

Grants

2007-08

- There is a clear mis-match between last year’s expectations and this year’s reality for the retention of workforce grants in both adult and children’s sectors. In last year’s [2007] survey about 7 in 10 Learn to Care members estimated they would be able to retain all of their workforce development grants. In this year’s survey, just 2 in 10 members actually secured all the National Training Strategy and Human Resources Development grants.
- Of those members estimating they would be unable to retain 100% of these grants, they thought they would be able to spend an average of 63% (SD 21%) of their National Training Strategy Grant and 51% (SD 33%) of the Human Resource Development Strategy Grant on social care workforce development in 2007-08.
The actual figures for 2007-08 are split into adult and children’s sectors. The children’s sector was able to retain an average of just 30% of their National Training Strategy Grant and 30% of the Human Resources Development Strategy Grant for workforce development in social care. In comparison, the adult sector fared better than they thought they would by actually retaining an average of 67% of their National Training Strategy Grant and 62% of their Human Resources Development Strategy Grant.

- Learn to Care members report often accessing more than one of the most common funding streams e.g. Mental Capacity Act, Train to Gain and the Skills for Care Training Strategy Implementation Fund.
- For 2007-08, an average 3.84% (children’s sector] and 3.66% (adult sector) of social service department gross expenditure has been spent on training local authority’s directly employed staff. These figures have been increasing steadily over the past five years.

**2008-09**

- Despite what has happened with the 2007-08 grants, about half the Learn to Care members report they are likely to retain all the children’s and adult social care workforce grant in 2008-09, but this may prove to be an overly optimistic prediction.
- Of those authorities likely to be unable to retain 100% of these grants, they estimate they are likely to receive an average of 35% (SD 30%) of their children’s social care workforce grant and 73% (SD 16%) of the adult social care workforce grant.

**People who use services and their informal carers**

- The majority of local authorities are involving people who use services and their informal carers to improve learning and development activity. In 2005, we described local authority activity as being ‘inconsistent’ in terms of working with people who use services and carers to improve their learning and development activity in social care. This year there have been further percentage increases, without exception, across all areas of involvement, most notably in training, assessment, recruitment and actual posts. This level of involvement is far more consistent across the range of learning and development activity, is indicative of active involvement and is, in our opinion, to be celebrated.
Good practice examples in workforce development

- Last year Learn to Care members highlighted an increased emphasis on the development of partnerships – this continues to be the case. In particular, local authorities work in partnership with health teams to develop planning and joint training.

The future

- In the 2007 survey, Learn to Care members’ long term plans for development focused on increased working with the VIP sector. This year, support for the VIP sector again features strongly in future plans. Members also plan to continue supporting the transition to integrated working within social work teams, alongside implementation of the National Minimum Dataset and development of the personalisation agenda.
Implications

Over the past five years of funding surveys we have received many comments from Learn to Care members that workforce development grants are under significant budgetary pressure. Until this year these comments have not translated into actual and significant reductions in spending. Last year, around 7 in 10 Learn to Care members thought they were likely to retain 100% of their National Training Strategy and Human Resources Development Strategy grants – this year, just 2 in 10 members actually secured all of these grants. The biggest reductions have come in the children’s sector – with those members unable to secure 100% of the grants actually receiving an average of just 30% of the grants intended for workforce development in social care. 2008-09 is unlikely to be any different for the children’s sector – of those unable to secure 100% of the grant, they estimate they will receive 35% of the grant intended for workforce development in social care.

As the adult and children’s social care workforce components of the Local Area Based Agreement may not now be used in full for their intended purpose, the Department of Health, in our opinion, should consider protecting the £25m per annum (the indicative allocations of the old National Training Strategy Grant for Trainee Social Work schemes and Post-Qualifying Social Work training) by possibly giving this to a third party to safeguard Trainee Social Work schemes and Post-Qualifying training. Indeed, the Department of Health have already top sliced £7m for regional work based learning funding. We suggest a further top slice to ensure the components of the grant are used for their intended purpose. Indeed, the notional £13m allocated for Post-Qualifying education should be sufficient to fund all Post-Qualifying activity in England.

Given the recent tragedy of the ‘Baby P’ case in Haringey it would appear unwise, to say the least, for 80% of local authorities to continue to spend only 30% of the children’s social care workforce component of the Local Area Based Grant for its intended purpose. This component of the grant is designed after all to fund the development of the workforce which works with vulnerable children and families. We therefore strongly recommend that an urgent review is undertaken to ensure the adult and children’s social care workforce development grants are used for their intended purposes.
Many members are concerned about the future. Some have already been informed that further cuts to grants originally intended for social care workforce development will come in 2009-10. A number of members are now being asked to align their spending plans to the Local Strategic Partnership. Couple this uncertainty with the current financial climate, the fact that workforce development activities are often the first to suffer when budgets are tight, and the unknown implications of the transformation / personalisation / service redesign agenda, and longer term planning becomes even more difficult than it already is.

There are, however, many findings from this survey to celebrate. The mean spend per local authority on supporting workforce development in the voluntary, independent and private sector has been increasing steadily since 2004, and now stands at £366k per authority or approximately 35% of the combined children’s and adult social care workforce grants. Local authorities are involving people who use services and their informal carers to improve learning and development activity at a higher level than ever before. And partnership working is again cited as the main area where good practice takes place and is the core focus of the future.

The Government has rightly put social care high on its agenda. Putting People First (DH December 2007), The Adult Social Care Workforce Strategy and Lord Darzi’s Next Stage Review all depend on a flexible and highly skilled workforce to make the vision a reality and this involves continued investment in workforce development. Learn to Care members continue to be committed to ensuring that the social care workforce, wherever it is located, is able to deliver care of the highest standard to the most vulnerable people in our communities. This vision is very much threatened if the social care workforce components of the Local Area Based Agreement are not used for their intended purpose.
Appendix A: Learn to Care 2008 Funding Survey

LEARN TO CARE

Funding Survey April 2008

Please would you consider completing this funding survey so we can gain a current view of how the workforce development grants are being used.

We have been receiving many comments that workforce development departments are having great difficulty in keeping their training grants to use for their intended purposes. We are therefore keen to repeat our funding survey from last year to compare the results.

The Learn to Care Executive Committee gives full assurance that the names of authorities and individuals will remain anonymous in the analysis of any data and in the writing of any subsequent reports.

Please return the completed survey to Catherine Cadogan, Learn to Care Administrator, at the end of the Annual Conference or post to Natalie Bates at the address opposite by 30.05.08.

Thank you!

Centre for Post-Qualifying Social Work, Bournemouth University, R401 Royal London House Christchurch Road Bournemouth BH1 3LT
Background to the survey

In the Local Authority Social Services letter of 26th February 2007 (LASSL (DH)(2007)1), the following statement is made in support of the purpose of the Social Services National Training Strategy (NTS) Grant and Human Resources Development Strategy (HRDS) Grant 2007/2008:

A skilled and competent workforce is vital to providing high quality social care services. Local councils should ensure that appropriate resources are made available to develop their own staff and those in private and voluntary organisations providing social care services on their behalf.

From April 2008, changes will be made to the delivery of the grants to support social care workforce development. The Adults Social Care Workforce Grant and Children’s Social Care Workforce Grant will contribute to the new Local Authorities’ Area Based Grant, the purpose of which is explained in the Local Authority Social Services letter of 12th February 2008 (LASSL (DH)(2008)2):

Although these contributions are now split between adults and children’s social care services they are designed, as in previous years, to support workforce training and development in the adults and children’s social care workforce in the statutory, private and voluntary sectors.

This survey aims to evaluate the impact and spending patterns of these grants so your help in completing the questionnaire is greatly appreciated.
1. Authority/Organisation/Region:

<table>
<thead>
<tr>
<th>GRANTS AND FUNDING</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. (a) What percentage of the NTS grant did you secure for workforce planning and development in 2007/2008?</td>
</tr>
<tr>
<td>Children %</td>
</tr>
<tr>
<td>(b) How much was this in monetary terms?</td>
</tr>
<tr>
<td>Children £</td>
</tr>
<tr>
<td>3. (a) What percentage of the HRD grant did you secure for workforce planning and development in 2007/2008?</td>
</tr>
<tr>
<td>Children %</td>
</tr>
<tr>
<td>(b) How much was this in monetary terms?</td>
</tr>
<tr>
<td>Children £</td>
</tr>
<tr>
<td>4. What percentage of the actual SSD gross current expenditure on staffing (2007/2008) was spent on training your council’s directly employed staff? (DIS figure)</td>
</tr>
<tr>
<td>Children %</td>
</tr>
<tr>
<td>5. (a) Is your local authority providing funding (on top of that which you receive via workforce development/training grants) for workforce development/training in social care during 2008/2009? This is otherwise known as CORE funding.</td>
</tr>
<tr>
<td>Please circle. YES / NO</td>
</tr>
<tr>
<td>(b) If yes, by how much?</td>
</tr>
<tr>
<td>Children £</td>
</tr>
</tbody>
</table>
6. (a) What percentage of the children's workforce grant are you likely to be able to secure for workforce planning and development in 2008/2009?
   **Total %**
   How much is this likely to be in monetary terms?
   **Total £**
   (b) What percentage of the adult's workforce grant are you likely to be able to secure for workforce planning and development in 2008/2009?
   **Total %**
   How much is this likely to be in monetary terms?
   **Total £**

7. What impact, if any, has the delivery of grants through the Local Authority Agreement mechanism made to your funding in 2008/9?

8. (a) What other grants do you access for workforce development purposes? E.g. the Transforming Social Care grant, Access Capacity Grant, Mental Health Capacity Act, etc. Please specify:

9. Are you accessing any other potential funding? E.g. Skills for Care Training Strategy Implementation, European Social Fund, Learning Skills Council, Train to Gain? **YES / NO**

   If yes, please complete the following table:

<table>
<thead>
<tr>
<th>Source of funding</th>
<th>How much do you estimate to receive?</th>
<th>Over what period of time?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### INDEPENDENT, PRIVATE AND VOLUNTARY SECTOR

10. (a) Is your local authority supporting workforce development in independent, private and voluntary sectors for 2008/2009? Please circle:

   - **Children**: YES / NO
   - **Adults**: YES / NO

   (b) If yes, please estimate how much?

   - **Children**: £
   - **Adults**: £

   (Please make sure that you include your total costs, for example, proportions of staff and administration costs, organisational on-costs, and programme and training costs for supporting workforce development in the independent, private and voluntary sector)

   (c) Please say how this compares to 2007/2008 by circling the appropriate statement below:

   - **Children**:
     - substantially less
     - slightly less
     - the same
     - slightly higher
     - substantially higher

   - **Adults**:
     - substantially less
     - slightly less
     - the same
     - slightly higher
     - substantially higher

   (d) What percentage of NTSG was actually spent on the independent, private and voluntary sector in 2007/2008? (Please make sure that you include your total costs)

   - **Children %**
   - **Adults %**
   - **Total _____ %**

   (e) What percentage of HRDG was actually spent on the independent, private and voluntary sector in 2007/2008? (Please make sure that you include your total costs)

   - **Children %**
   - **Adults %**
   - **Total %**

   (f) In your area/region, in 2007/2008, was the funding allocated to the independent, private and voluntary sector spent? Please circle:

   - **Children**: YES / NO
   - **Adults**: YES / NO

   What were the issues, if any?

   (g) What new initiatives has the council been involved in during 2007-08 to make workforce development opportunities available across the independent, private and voluntary sector?
(h) What percentage of the overall Local Authority budget for children’s social care services is spent on commissioning services from the independent, private and voluntary sector?

(i) What percentage of the overall Local Authority budget for adult social care services is spent on commissioning services from the independent, private and voluntary sector?

Additional comments please, for instance, on other ways in which you support the independent, private and voluntary sector:

### PEOPLE WHO USE SERVICES AND CARERS

11. How are you involving/commissioning people who use services and their informal carers to improve your learning and development activity? Please circle.

(a) Delivery e.g. direct and/or joint input on programmes. **YES / NO**

(b) Training e.g. carers completing a carers certificate/award. **YES / NO**

(c) Planning e.g. design and development of training. **YES / NO**

(d) Representation e.g. with people who use services on partnership boards. **YES / NO**

(e) Consultation e.g. with carers forums and user parliaments. **YES / NO**

(f) Assessment e.g. of practice or NVQ competence. **YES / NO**

(g) Recruitment e.g. of Approved Social Workers/Approved Mental Health Practitioners. **YES / NO**

(h) Posts e.g. service user empowerment. **YES / NO**

(i) Any other examples. Please specify:

### GOOD PRACTICE EXAMPLES

12. In order to help develop workforce performance across the sector, good practice examples are required detailing how your local authority is using the funding in creative ways and how this effects workforce development across the whole social care sector in your area.

(a) What has gone particularly well, so far, in your local authority area?

(b) What are your longer term plans for positive developments?

(c) If you are willing to be contacted about this by other interested colleagues, please give a contact e-mail address below. This will not be used in any analysis of the funding survey but will be incorporated in a future publication illustrating examples of good practice. The Learn to Care Executive Committee gives full assurance that the names of authorities and individuals will remain anonymous in the analysis of any data and in the writing of any subsequent reports.

E-mail:
13. Any further comments that you would like to contribute to this funding survey?

Please return the completed survey to Catherine Cadogan, Learn to Care Administrator, at the end of the Annual Conference or post to Natalie Bates at the following address by 30.05.08:

Centre for Post-Qualifying Social Work, Bournemouth University, R401 Royal London House, Christchurch Road Bournemouth, BH1 3LT

Many thanks for taking the time to complete this survey
Learn to Care Executive Committee (May 2008)
About the authors:

Keith Brown is a long-standing Learn to Care Executive Committee member and Director of the Centre for Post-Qualifying Social Work, Bournemouth University.

Natalie Bates works as a Research Assistant at the Centre for Post-Qualifying Social Work, Bournemouth University.

Dr Steven Keen is a Senior Lecturer in Research in the Centre for Post-Qualifying Social Work, Bournemouth University.