

3. VALUING THE WORKFORCE

SEPTEMBER 2021

The Scottish Government have invited response to their proposals for the establishment of a National Care Service. The document is divided into sections with 95 questions seeking responses – some with a simple YES or NO and most inviting comment and suggestion. You can find it here:

<https://consult.gov.scot/health-and-social-care/a-national-care-service-for-scotland/consultation/>

These briefings are to help people who would like to make a submission to these consultations. This one is about valuing people who work in social care (pages 119 – 132; questions 86-95).

Fair Work (86-89)

The key proposals put forward in this section fall far short of what is needed to bring about a fundamental change in the working conditions of social care workers.

- **Q 86:** This proposes a voluntary accreditation scheme. The answer must be **No**. This would not ensure better conditions for anyone, and would, in particular, not create improvement by those providers for whom worker health, safety and welfare is not a priority. The Independent Review of Adult Social Care (IRASC) called for national minimum terms and conditions as key component of new requirements for commissioning and procurement. This is the minimum that must be delivered. These national terms and conditions must be developed through national sectoral collective bargaining.
- **Q 87:** This asks people to rank a range of changes that would make workers feel more valued in their role. We think this is the wrong question; the issue is not how the workforce could be made to feel valued but rather how to change their material circumstances and treat them fairly. Asking for the proposals to be ranked leaves the unfortunate impression that the Scottish Government thinks that the answer to the problems of the social care workforce is to pick and choose a couple of measures which might make the workforce feel better. This won't work and won't address the underlying issues. All the proposed actions have to be included.
- Rank number one should be **formal national sectoral collective bargaining**. Unless this is introduced, there is little guarantee that any of the changes would be properly adopted.
- Rank number two should include: **Pay, terms and conditions, removal of zero-hour contracts, consistent jobs roles and expectations** as they are all linked and all crucial.
- Followed closely by three: all the proposal relating to access to education, training and qualifications. Better access requires financial and human resources including for: statutory and specialized training; support and supervision and case management. Workers should not have to pay for their own training and should be given paid time toward undertaking it. A NCS should provide life long education and support to all social care workers.

- **Q89:** The answer is **NO**. It proposes that the National Care Service set up a national forum with workforce representatives, employers and CHSC Boards (currently IJBs) to look at workforce priorities, terms and conditions and collective bargaining. However, this forum would be advisory only and there is no explicit assurance that relevant trade unions would be a core part of it.
- **Instead:** A formal mechanism should be set up involving all parties to take forward collective bargaining for the sector. Collective bargaining should cover pay, terms and conditions and training and development. **It should not simply be an advisory body.** Workforce representation must include all relevant trade unions*. Representation should be from the workforce, employers and local authorities rather than CHSC Boards. (The IJB/CHSC model should be abandoned and replaced with a National Care Service based on nationally co-ordinated and funded services administered through Local Authorities, that runs alongside the NHS – who should continue to administer health services including community health services.)

Workforce Planning (Q90)

Q90 proposes a series of changes to improve workforce planning. All of these would be of some help but would not solve the fundamental problem. As the consultation document says “the complexity of health and social care, given the number of employers, makes workforce planning difficult”.

This could be addressed directly by reducing the number of employers involved. We argue

that there is no place for the for-profit sector in social care. We would argue that the bulk of provision should be in the public sector with some contribution from the third sector. This would result in a dramatic reduction in numbers of employers and make workforce planning much more manageable. We understand that it may not be possible to eliminate for-profit provision immediately, but this could be done over time (as short a period as possible) by ceasing any new contracts with the private sector, putting caps and other controls on profits and taking any failing provision into the public sector.

Training and Development (Q91-92)

The proposals made in these questions are important and a welcome step in the right direction: that the National Care Service should set up training and development requirements for the social care workforce and that the National Care Service should be able to provide and / or secure the provision of training and development for the social care workforce. However, we are concerned that the inclusion of the words ‘or secure’ the provision could require additional procurement and potentially further privatisation. We believe training and development should be provided by the NCS in partnership with local authorities and educational and professional bodies, as for the NHS.

For training and development to work, the workforce needs to be supported financially to undertake it. That means all staff being paid when they attend training courses, rather than being expected to do it in their own time at present, and a variety of financial support mechanisms being introduced to support people to undertake social care training before they start work.

* *There appear to be differences between what is said in the consultation document and what is stated in the Programme for Government <https://www.gov.scot/publications/fairer-greener-scotland-programme-government-2021-22/> (page 27) and the First Minister’s speech on the Programme. These statements seem to confirm that there will be national bargaining and that relevant trade unions will be involved in NCS governance. The differences between Government statements and the consultation document are not helpful for those responding to the consultation. We would urge people to highlight them in answering Q89 and emphasise the importance of collective bargaining and trade union involvement.*

Personal Assistants (Q93-95)

Q93 proposes a register of all personal assistants. We agree that this would be important in providing information on the numbers of personal assistants which will be necessary to plan provision of the service to meet the demand from those wishing to employ them. We note there are no proposals to register other staff who currently form part of the social care workforce, like social work assistants and advocates. That needs to be addressed.

Q94-95 The proposals put forward in these questions treat personal assistants differently

than other social care workers. We believe this is a major mistake. We agree with the IRASC recommendation that personal assistants 'should be explicitly recognised as members of the (social care) workforce'. Personal assistants should be treated the same as other social care workers, should be part of collective bargaining and have nationally agreed contracts. In addition we would argue that ideally they should be employed by the public sector with those needing care being able to choose who will care for them, as under the Direct Payments system as it operates at present. There is no need for people requiring care to have to employ staff to have control over them.