The Highland Council	Agenda Item	**15**
	Report No	**ECAS 71/16**

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The Highland Council

**Education Children and Adult Services Committee
26 October 2016**

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Staffing in Family Teams in Children's Services

Report by Director of Care and Learning

Summary

This report provides detail on the staffing pressures within the Family Teams, further to information provided at the last meeting of the Council.

1. Background

1.1 The Family Teams were established in October 2014 as part of the integration of Children's Services. They comprise three functions; Early Years, School Years and Care and Protection. Each function is led by a Practice Lead and these in turn report to a District Manager.

1.2 The staffing of the teams is a mixture of social care staff, health staff (health visitors and school nurses), qualified social workers and early years practitioners.

1.3 As with any large service, there is regular staff turnover and the time period from a vacancy arising to a new appointee taking up post can vary, but will usually mean that there is some accrual of savings relating to the vacancy. Accordingly, savings targets have been set in successive Council budgets. This is a preferable savings option to the deletion of posts, as it enables ongoing monitoring, and posts can be filled in relation to local pressures.

1.4 Staffing costs and expenditure are reported in the regular revenue budget reports to the committee.

2. Vacancy Monitoring Process

2.1 There is a vacancy monitoring and approval process in place for the Care and Learning Service. All vacancies are reviewed on a weekly basis by the Directorate, and a decision is taken regarding the release of posts for recruitment. Posts may be released immediately, held for potential redeployment or held for further explanation of the need to fill. Unless there are good reasons not to fill a post, all will be released for recruitment at an appropriate stage.

2.2 Careful consideration is given to the operational impact of vacancies, balanced against any requirement to meet budget requirements. Use of agency staff is infrequent, but can be necessary because of levels of risk, and requires approval by the Director and Chief Executive.

2.3 The number and type of vacancies change from week to week. Appendix One provides the most recent list of vacant posts as an example.

2.4 It can be seen that many are part-time posts, often as a result of changes in the

working hours of team members due to the flexible working policy. Where there are only a few hours unallocated, it is not always practical to recruit to the vacant hours.

3. Other factors affecting staffing levels

3.1 The service was impacted by the Voluntary Redundancy scheme introduced by Highland Council earlier this year, with the loss of a number of management and practitioner posts. This included two District Managers, four Practice Leads, two team managers, and a number of social worker and other practitioner posts. Posts with external funding, including funding by NHS Highland, were exempted from this process. Some services have been reconfigured to take account of the resulting reduction in capacity.

3.2 Sickness absence can impact on teams, particularly smaller teams, as it is not routine practice to provide cover for long-term sickness absence (or for maternity leave). Managers are very well aware of this issue and endeavour to proactively manage absence.

3.3 Some posts are harder to fill for a variety of reasons and may require re-advertisement. This can be the case in the more rural areas such as Lochaber, Skye and Caithness, where it is difficult to attract experienced staff. Managers have observed that external candidates can be reluctant to consider posts outside the Inner Moray Firth area.

3.4 There are some types of posts where national, rather than local, factors have an influence. For example, the supply of qualified health visitors nationally is an issue, and particularly so with the increase in the number of health visitor posts in Scotland. School nursing has been subject to a national review, which is still awaiting conclusion, and this has meant that nurses have been unable to access the necessary qualifying course in the interim.

4. Actions taken to improve staffing

4.1 The Care and Learning Directorate has three initiatives in place to assist suitable staff to gain appropriate qualifications. The disciplines covered are social work, health visiting, school nursing and educational psychologists. This has enabled professionals to be employed whilst gaining the additional qualifications needed, and has been very successful.

4.2 There are currently three social work trainees, two of whom should qualify at the end of 2018 and one the following year. Each vacant social work post is considered for suitability as a trainee post, depending on the mix of current experience in the team. There are a further two employees in social care roles who have achieved places on distance learning courses on a self- funding basis. They receive some 'support in kind' from their Area management in terms of study time and leave to undertake placements.

4.3 There are currently seven trainees employed in Health Visitor posts, undergoing the one year programme and due to qualify in January 2017, with another six trainees starting in January 2017, qualifying in January 2018.

4.4 There are currently three school nurse trainees due to commence the new school

nurse programme at Robert Gordon University when it starts in September 2017 but undertaking the course part-time over 2 years i.e. qualifying in September 2019.

4.5 The service has engaged with HR colleagues to review recruitment options and practice. Changes have included featuring harder-to-fill posts in a more detailed advert, greater use of social media, allowing candidates to use a CV rather than require a completed Highland Council application form, highlighting information on the Highland Council relocation scheme and improving the information about Highland on the *MyJob* Scotland website.

4.6 Other ideas being explored include the development of more collaborative recruitment for posts such as health visitors or social workers, rather than individual teams recruiting for their vacancy on a stand-alone basis. The HR team are also looking into feedback from potential applicants so that there is better understanding of the factors which may attract or deter applications.

4.7 There are options which would require wider collaboration to progress. These may include the advertising of all types of vacant posts in an area, as it is recognised that often there are other family members who would be seeking employment at the same time if a family is re-locating to the Highlands.

4.8 Options to provide assistance with accommodation will be considered alongside the work to review recruitment practices for other groups of staff, notably teachers and Head Teachers. If it were possible to offer temporary accommodation, this could be beneficial in the more rural areas where accommodation can be difficult to access.

4.9 As outlined, managers are engaged in improvement activity and are supported by HR colleagues to progress ideas.

5. Implications

5.1 The **Resources** and **Rural** implications are set out in this report.

5.2 **Risk** - The Family Teams provide critical services, that safeguard and protect the wellbeing of children. Hence, all vacancies need to be assessed regarding risk.

5.3 There are no **Legal, Climate Change/Carbon Clever, Equalities or Gaelic** implications to highlight.

6. Recommendations

6.1 Committee is requested to scrutinise and comment on the information provided.

Designation: Director of Care and Learning

Date: 17 October 2016

Author: Sandra Campbell, Head of Children's Services

Area/Post	FTE
North	**10.61**
Support Worker (Care & Protection)	0.80
Children's Services Worker	0.07
Health Visitor	1.70
Practice Lead (Care & Protection)	1.50
Practice Lead (Schools)	0.50
School Nurse	0.50
Social Worker	3.54
Substance Misuse Worker	1.50
Support Worker (Disability)	0.50
Mid	**9.82**
Support Worker (Care & Protection)	0.04
Com. Early Years Practitioner	0.50
Community Children's Worker (C&P)	1.00
Children's Services Worker	0.32
Support Worker (Disability)	0.11
Health Visitor	1.80
Practice Lead (Early Years)	1.00
School Nurse	2.55
Social Worker	2.50
West	**6.97**
Support Worker (Care & Protection)	0.47
Com. Early Years Practitioner	1.90
Children's Services Worker	0.40
District Manager	1.00
Health Visitor	1.30
Social Worker	1.40
Support Worker (Disability)	0.50
South	**12.19**
Support Worker (Care & Protection)	3.65
Com. Early Years Practitioner	1.79
Community Children's Worker (C&P)	0.49
Children's Services Worker	1.60
Health Visitor	2.00
Practice Lead (Early Years)	0.40
Practice Lead (Schools)	0.16
School Nurse	1.70
Senior Early Years Worker	0.20
Social Worker	0.20
Total	**38.59**