

Agenda Item	6.
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Highland
Community
Planning
Partnership

Com-pàirteachas
Dealbhadh
Coimhearsnachd

na Gàidhealtachd

Highland Community Planning Partnership Board – 6 June 2025

Childcare Innovations

Report by: Jaci Douglas (Care & Learning Alliance - CALA), Hayley Brown (Highland Council) and Jacqueline McGuigan (Highland & Island Enterprise)

Summary

The purpose of the report is to update on the development of a Single Care Model (SCM) that recognises and responds to the unique circumstances of delivering care services in rural and island communities and seeks to have a positive impact, mitigating against the increases being seen in depopulation of such areas. This report highlights specific factors in the delivery of care which are particularly challenging in the Highlands and Islands, and which require a multi-agency, innovative place-based approach to address viability and sustainability. This report provides an update on the plans to develop and run a pilot, to test new place-based ways of working, which meet the needs of those using services, as well as the needs of rural and island communities. Quality and safety of a service must underpin all the work.

The Board is asked to:

- i) Recognise and endorse the multi-agency cross sector place based and person centred innovative approach
- ii) Endorse the SCM proposal and pilot
- iii) Help identify any funding streams that could support development on the ground
- iv) Provide advice, guidance and support to the project

1. Background

- 1.1 The ability to provide quality care services for all ages that are accessible, flexible and meet the needs of rural and island communities across Scotland is now at crisis point. The Single Care Model is designed to address challenges, particularly with the recruitment and retention of staff in both adult and childcare, which impacts on depopulation and potential economic growth of rural and island communities.

There are a number of factors contributing to the challenges of service provision in rural and island communities which are captured in reports including, HIE's Childcare Evidence Report. requested by Ministers and led by HIE, endorsed by HIREP and CoHI. The Evidence Report has been received by Ministers and Scottish Government officials and further information is awaited.

1.2 By care services we mean the provision of registered childcare (specifically for this pilot School Aged childcare) and adult social care within the home. Each of these services is vitally important to:

- the wellbeing of the people they support, regardless of age
- the sustainability of entire communities
- the ability of families to live (or remain living) and working in an area
- prevent depopulation from rural and island communities, and
- to address child poverty
- Working family carers – underemployment and inability to reach full economic potential due to caring responsibilities
- Lack of local care services – working families moving to more urbanised areas to find care
- Potential to grow a care economy within the region
- Increased productivity – enabling people to stay and work in their communities (population retention – inclusive of the cared and carer)

1.3 Key issues facing the care sector in Highland includes:

- crisis in recruitment and retention of the workforce in all sectors
- sparsity of population which means low numbers using services/lower income
- low wage sector but one that has high qualification expectation and level of responsibility
- high level of scrutiny and registration requirements for services and staff
- lack of affordable housing for staff
- geographical challenges including transport links
- national policies and legislation that are rigid and do not allow innovative approaches needed to meet the specific challenges and opportunities of rural and island life
- funding mechanisms based on high population urban models that do not meet the reality of rural and island low density areas, meaning business viability and sustainability is extremely challenging

1.4 All these have a very real impact on the ability to provide care across the ages, within the current regulatory and funding landscape, to meet the needs of Highland and Island communities. If we do not act quickly, we are facing a crisis in provision of rural and island services and the economic viability and sustainability of Highland and Island communities.

1.5 The crisis in both child and adult care sectors are interlinked – childcare must be available to allow parents to be able to work within the adult sector. Staff within both sectors, are caring for a relative as they cannot get the care service needed. Caring responsibilities impact disproportionately on women and supporting care across the generations will help mitigate this. The overarching issues are the same, regardless of age of client/service user, any pilot must tackle all issues in a holistic way while recognising some of the unique skills and regulations that apply to each service. The model creates greater emphasis on a place-based and community led solutions rather than trying to make a set of national policies fit a rural area.

2. Potential solution - Single Care Model (SCM)

2.1 The SCM looks at these issues in a holistic way, and seeks to address one key area, tackled together, to achieve the vision - which is the way current policies, processes, regulation and legislation may unintentionally create a barrier to providing care services to meet the needs of rural and island care services. The project is led by Care and

Learning Alliance (CALA) a 3rd sector childcare and children service charity, who also have a national profile as a representative and advisory body for the sector.

2.2 Update on the Single Care Model development and testing

There are 5 key areas and issues that we propose to test in 2 pilot communities:

1. Registration with SSSC of practitioners/workers in child and adult care to move flexibly and seamlessly between services to meet the needs of the community as well as with Disclosure Scotland PVG scheme.
2. Registration of the service with Care Inspectorate, under one provider and one manager regardless of what care service is being provided, so staff can move between the two. Any registration of a building/environment should consider the reality of often shared or historic buildings within rural communities.
3. Consider commissioning models in rural and island communities, which lack population density, for both childcare and adult social care. Identify sources of potential funding for childcare, especially that which is non statutory such as before and after school care, and holiday care.
4. Qualifications - to ensure staff have the skills and qualities needed to provide high quality care in a way that meets needs but does not impose a significant financial or time burden on the staff, through qualification streamlining.
5. Quality and safe service assured through Inspection process – any registered service will be subject to inspection and quality assurance processes; how these will be met against national Standard and key Quality Indicators.

Through testing, the SCM Pathfinder will evaluate new ways of working in care that crosses current barriers and encompasses all care within a defined rural locality.

2.3 Where are we now?

A Highland Steering Group (HSG) is in place with representatives from THC, NHS, private and 3rd sector care providers and Care Inspectorate. This group supports oversight of the pilot and will advise on identified local needs and priorities to ensure alignment with any existing or planned locality care solutions. Each organisation is also able to take back information and learning and barriers through their own governance and reporting routes, ensuring a joined up cross sector approach.

Highland Council have, as part of the Person-Centred Solutions (PCS) portfolio within the operational delivery plan, an ELC project which links with the HSG to complement the work undertaken by the ELC task force, to develop innovative and place-based solutions to childcare, within rural and island communities. Progress on SCM will be reported through PCS board and Education Committee.

A national Regulatory Advisory Group (RAG) with representatives from senior officers in SSSC, Care Inspectorate and Scottish Government provide guidance and advice on how to ensure any pilot stays within safe regulatory frameworks while also supporting flexibility opportunities. The members of RAG can also take barriers and issues back into their own organisations for discussion and resolution.

THC was successful in 2024/25 in receiving funding from Addressing Depopulation Fund (ADAP) to research and develop new models of delivery of childcare in NW Highland area. Research was undertaken and reports submitted to the Scottish Government who have confirmed they are keen to move forward with some of the proposals, particularly the piloting of a subsidised childminder model for which further funding has been agreed. SG indicated that whilst they would like to take the other two pilots (rural childcare practitioner and single care model) forward they don't currently have the staff resource required to overcome the regulatory, legislative and policy hurdles.

Work will now commence with THC and partners CALA, HIE, locality child/adult care action groups and communities, on the next steps and the funding required for the single care model Pathfinder. Two initial rural communities have been identified, with other possibilities, and work is due to start to understand if the communities themselves are supportive of the pilots.

2.4 What is being tested

There are 2 variations of the integrated service model theme utilising staffs' professional skills, knowledge, and experience in this 'designed for purpose' pilot model of care – which will both be tested – one in each selected community:

- A single staff member/team working across the age range of child and adult care, such as providing breakfast club at school/community hub; then in morning adult care in the home and afternoon school aged childcare,

and

- The creation of a care professional employed by a single employer with the ability to deliver both adult and childcare within a community under a single registration.

There are further discussions on the development of an integrated and flexible relief staff bank or agency, providing staff in both adult and childcare services across Highland working with NHH and other adult care providers to provide resilience to often fragile care services.

3. Next steps

The initial communities identified are being approached to start discussions on the ground about their care needs and how SCM could address some or all of them. Currently the work is being led by CALA's Chief Executive but it is recognised that an additional resource is needed to ensure robust development and implementation of the pilot. Funding is being sought to employ a Project Manager for the pilot to ensure strong oversight and accountability, in addition to evaluation and learning which will support continuous improvement. That Project lead will report to HSG as well as RAG. CALA will employ and manage that person as well as providing leadership and momentum to take the project forward. Funding will also be used to engage research and evaluation support to provide the evidence of care needs being met by the pilot as well as those that cannot be met due to regulatory or legislative barriers. That research is intended to inform strategic systems change that could transform rural and island care provision.

Recommendation

The Board is asked to:

- i) Recognise and endorse the multi-agency cross sector place based and person centred innovative approach
- ii) Endorse the SCM proposal and pilot
- iii) Help identify any funding streams that could support development on the ground
- iv) Provide advice, guidance and support to the project

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Date: 14th May 2025

Appendices: Childcare Evidence Report, HIE, April 2025 (Confidential – circulated separately)