



**Local government social care
workforce development
expenditure: a survey of trends
and funding (2007)**

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Foreword

This is the fourth year that Learn to Care has carried out a survey through its members, of the use by local authority councils 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 81 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.

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Chair, Learn to Care

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Introduction

Learn to Care (www.learntocare.org.uk) represents people engaged in the management and implementation of workforce development in the social care sector. Learn to Care has undertaken an annual survey of its members since 2004 to see how the Department of Health's National Training Strategy Grant and the Human Resources Development Strategy Grant are being used in England. Allocation of these grants stands at £100.8m and £46.7m respectively for 2006-07 and similarly for 2007-08. This report details the findings from the 2007 survey and compares them with its predecessors. The 2007 survey asks questions around the Department of Health's training and 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 2007 survey is placed at the end of this document as Appendix A.

Learn to Care members working in 81 local authorities responded to the 2007 survey; therefore, 54% of local authorities in England are represented. Some regions are represented more than others, as Table 1 shows:

Table 1: Response rate to 2007 survey by region

Region	Responses	Total no. of local authorities	% response rate
South East	6	19	32
South West	13	16	81
London	16	33	48
Eastern	5	10	50
East Midlands	5	9	56
West Midlands	11	14	79
Yorkshire	6	15	40
North West	16	22	73
North East	3	12	25
Total	81	150	54

This level of representation is higher than the 45% response achieved in last year's (2006) survey. (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:

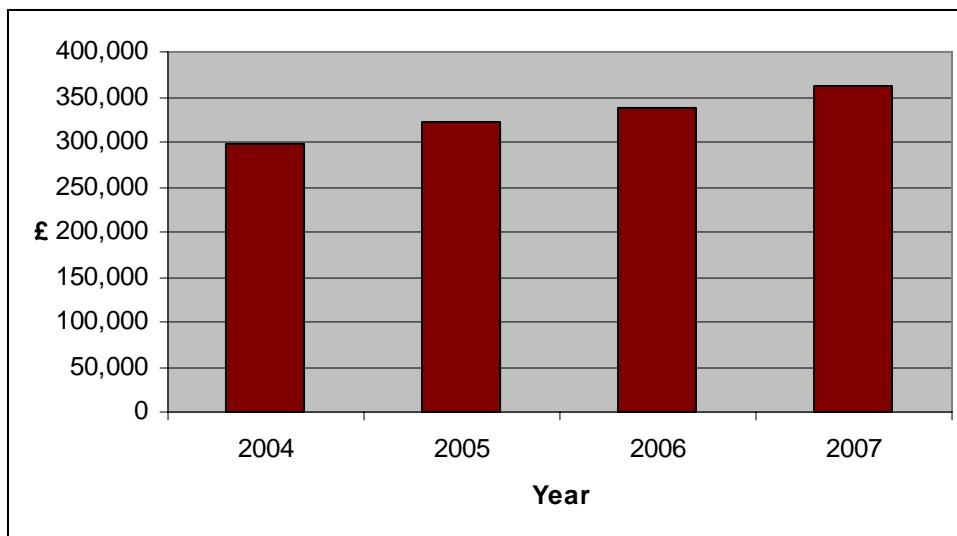
- Voluntary, independent and private (VIP) sector;
- Grants;
- People who use services and their informal carers;
- Good practice examples in workforce development;
- The future;
- Summary of findings;
- Implications.

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 6(b) of the survey (n=75) plan to support workforce development in the VIP sector to a mean of £363k (SD £319k) per authority in 2007-08. 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). The mean spend of £363k per authority is higher than those from the 2006 (£338k), 2005 (£322k) and 2004 (£298k) surveys, as displayed in Chart 1. These figures demonstrate that support for the VIP sector in 2007-08 is either slightly higher (n=34) or substantially higher (n=14) than in 2006-07 or the same (n=24), although, for eight authorities, support for the VIP sector is slightly lower than in 2006-07.

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 £54m (150 English councils x £363k) will be spent in the VIP sector during 2007-08. This figure equates to 44% of the National Training Strategy and Human Resources Development Strategy Grants (this is calculated by taking the total National Training Strategy Grant and Human Resources Development Strategy Grant for 2007-08 [£147.6m] less the allocation for post-qualifying training and social work trainee schemes [£25m] as these schemes are most likely to occur in the statutory sector).

In 2006-07 local authorities actually spent an average of 39.5% (SD 20%) of their National Training Strategy Grant and 37.6% (SD 21%) of their Human Resources Development Strategy Grant on supporting the VIP sector in 2006-07. These actual figures are slightly higher than those from the 2006 survey as Charts 2 and 3 show: 37% (SD 17%) of their National Training Strategy Grant and 31% (SD 18%) of their Human Resources Development Strategy Grant. Indeed, this actual spend is also higher than the 2005 (32%) and 2004 (33%) survey figures. In 2006-07 most authorities (n=60 or 74%) spent all the funding allocated to the VIP sector, a higher percentage than last year's (2006) survey (64%).

Chart 2:

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

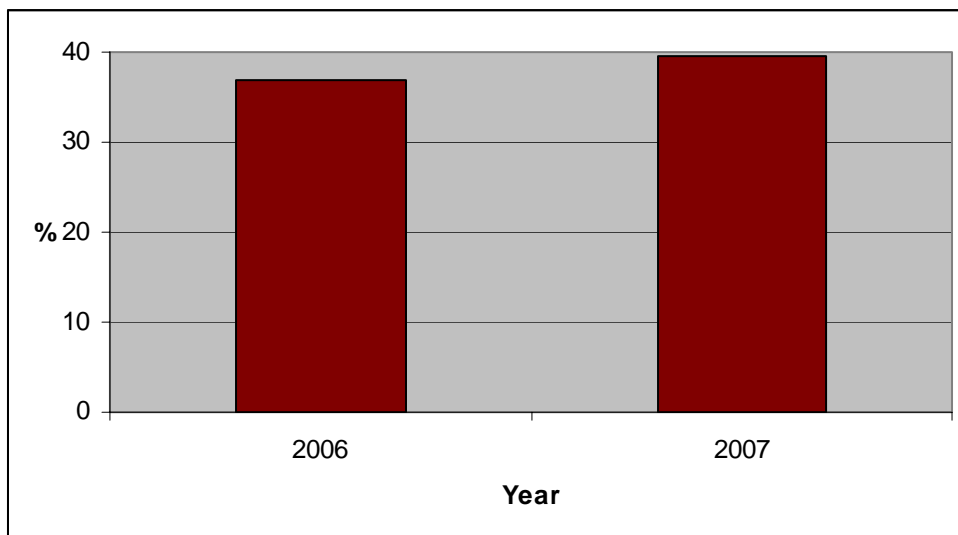
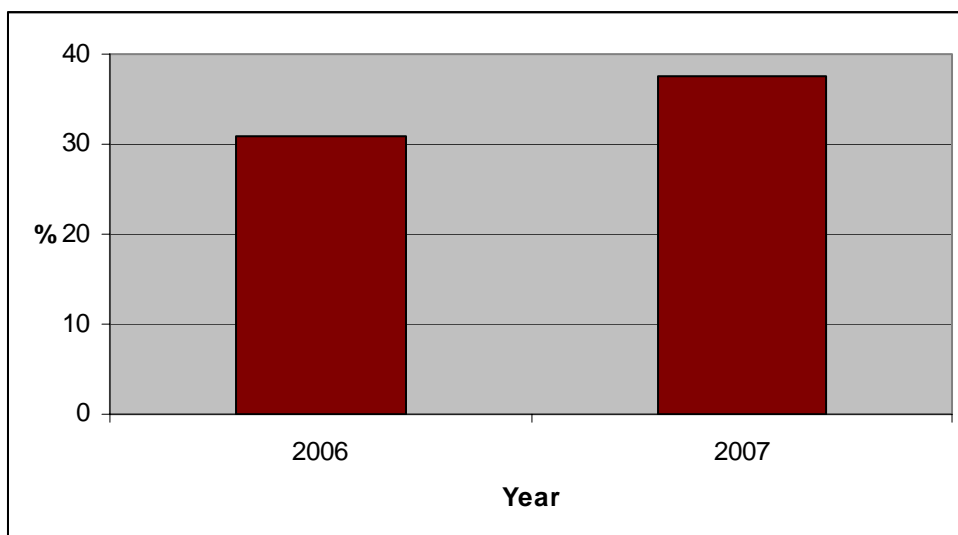


Chart 3:

Average percentage of the HRDSG spent by local authorities in the VIP sector



Last year (2006), the key issue for members working with VIP sector providers was capacity; for instance, VIP sector capacity for the release of staff, local authority capacity to cope with demand for training and development, or capacity to spend any allocated monies. There were wide ranging and complicated reasons for these capacity problems. Some related to the difficulties of gaining a clear idea of VIP sector workforce priorities and the subsequent failure to reach agreement on how monies should be spent. Some related to problems accessing good quality National Vocational Qualification assessment centres while others related to poor attendance on learning and development activities from the VIP sector. Others failed to spend monies because of the time taken to establish projects or because of the difficulties involved with making the myriad of partners and agencies aware of what is available. This year, even though there has been a considerable increase in funds allocated and spent in the VIP sector, the picture is very similar.

There is still frustration around VIP sector capacity to release staff to attend training. To illustrate:

“We undertake an exhaustive training needs analysis across the [VIP] sector and then provide a comprehensive range of free training (sometimes with paid workload relief). Although demand for places is always high, attendance on the day can be extremely poor, leading to massive wastage.”

This can mean that training often goes ahead, but with reduced numbers of participants. Costs remain the same, therefore, but the impact of the training is reduced. A number of members are trying to address this issue by employing peripatetic trainers:

“We provide a totally free range of high quality training opportunities, including a week block induction programme (with paid workload [relief] – currently £230 per trainee). Those doing the induction may proceed directly to an NVQ 2 or 3. [Our council] either provides the funding or tops up any difference in costs between generated income and the actual costs of NVQ delivery. Plans for 07-08 include the appointment of a peripatetic trainer who will work flexibly at any time of the day (including outside of normal office hours) to provide refresher, mandatory and update training on agency sites.”

As another member puts it:

“We need to convince the sector that it needs to up-skill its workforce. Anxieties are usually framed as ‘when they are qualified, we shall lose them’.”

Convincing the sector is partly about engaging with the VIP sector. In answer to Question 6(g), what initiatives have local authorities been involved in during 2006-07 to make development opportunities available for independent sector care homes and domiciliary care staff (and what has been the impact), nearly all members provided a wealth of information. Whilst the level of impact is, at present, difficult to measure beyond attendance and completion rates, the following responses demonstrate the depth of activity going on in this sector, including:

- Training needs analyses
- Paid workload relief
- Workforce development information websites
- Training bulletins/calendars/newsletters
- Training and conference bursaries
- E-learning
- Bespoke training
- Provision of training on agency sites
- Flexible training provision – weekends/evenings
- Pre-reserving training places
- The use of digital television to advertise and book places
- Teams of peripatetic assessors/verifiers
- Organisation to help with Criminal Record Bureau checks
- Support and direct assistance in completion of the National Minimum Data Set
- Local resource centres/libraries
- Telephone helpline for human resource development issues
- Dedicated local authority staff/posts
- Involvement of care home managers/owners on strategic partnership/consultation groups
- Development of local networks involving employers
- Award ceremonies/dinners/celebration events
- Free access to websites e.g. Scils [www.scils.co.uk] or Eils [www.eils.co.uk]
- Free provision of relevant books and other learning materials

Some keep meticulous records:

“[We have a] Senior Training Officer half time post to promote the Skills for Care agenda; organise knowledge and Skills Set seminars; commission and facilitate access to courses we offer and those of other organisations; provide consultancy and resources (e.g. induction workbook); information about training providers and e-learning. [The Senior Training Officer has] made 140 telephone contacts, mailed 2,436 items and completed 55 visits. We hold a contract with a voluntary organisation to improve training needs analysis within the sector.”

The following member also calls for the simplification of funding streams:

“The first [issue] is engaging with the hard-to-reach providers in the sector. We now have a full range of workforce development activities available to the independent sector. These activities are part of the mainstream activity of the workforce development/learning and development service. The next is related to the coordination of the funding available to support workforce development. There are currently too many different funding streams all with different conditions attached to them, all of them aimed at different groups in the workforce, many of them administered by different local or central government agencies. This makes it difficult to develop and deliver an overall workforce development strategy for the sector.”

Finally, the capacity of local authorities to spend any allocated monies also remains an issue. Local authority related budgetary pressures can impact on a council's ability to spend money in the VIP sector, as can the lack of a clear strategy, lack of relevant information on the VIP sector and council staff vacancies.

Grants

This section looks at the extent to which workforce development grants are secured for their intended purpose. Most authorities in 2007-08 are likely to be able to retain 100% of their National Training Strategy Grant (n=60 or 74%) and Human Resources Strategy Grant (n=56 or 69%) for workforce development in social care (Question 2). These figures are slightly lower than last year's (2006) survey findings of 81% (National Training Strategy Grant – see Chart 4) and 75% (Human Resources Strategy Grant for 2006-07 – see Chart 5). Given the combined grant figure of 76% for 2005-06, a slight downward trend is noted.

Chart 4: Percentage of authorities likely to retain 100% of the NTSG for workforce development in social care

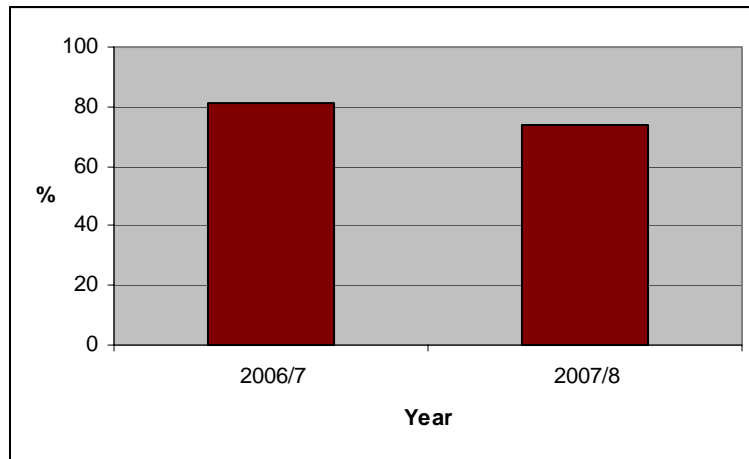
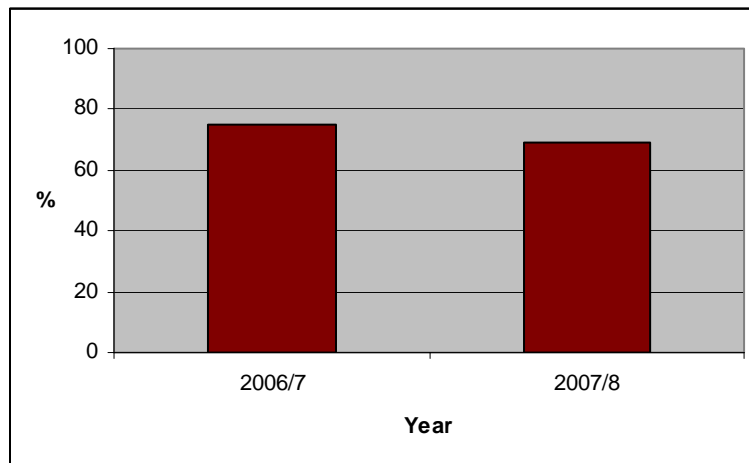


Chart 5: Percentage of authorities likely to retain 100% of the HRDSG for workforce development in social care



Of those authorities unable to retain 100% of these grants, they were likely 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. These figures are broadly similar to last year's (2006) survey findings of 58% (National Training Strategy Grant) and 51% (Human Resources Development Strategy Grant) (see Charts 6 and 7).

Chart 6: Percentage of NTSG likely to be spent by authorities unable to retain 100% of the grant

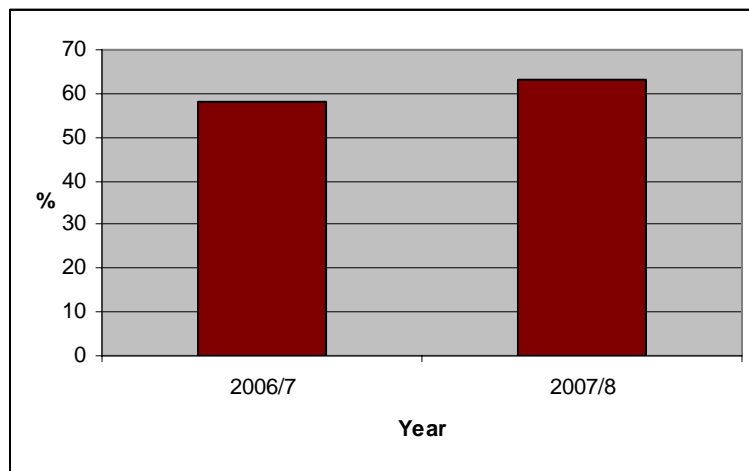
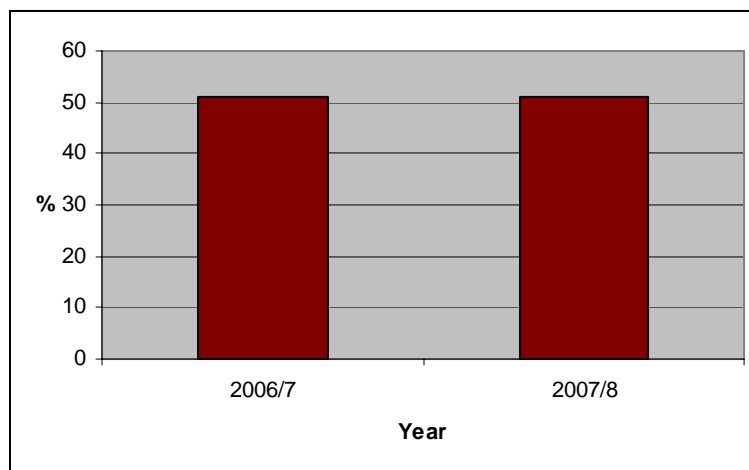


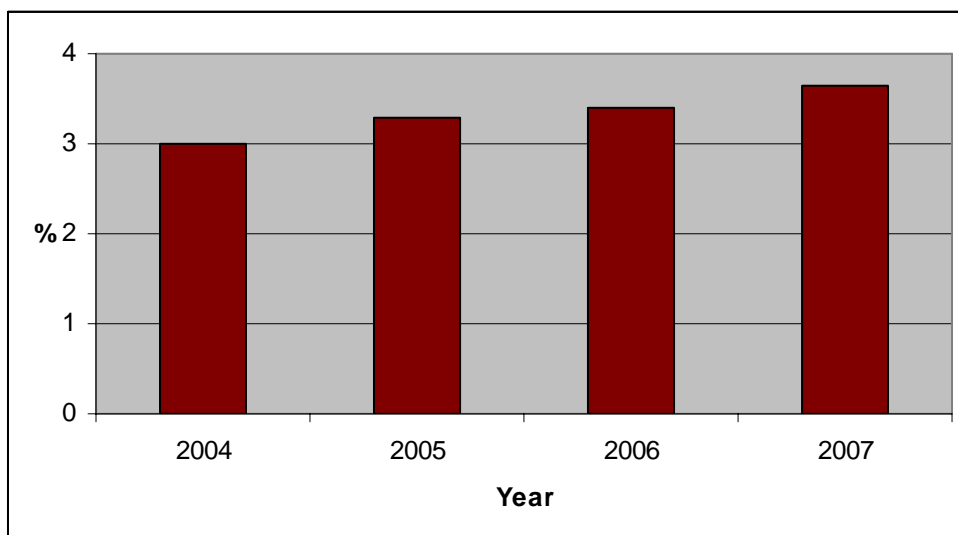
Chart 7: Percentage of HRDSG likely to be spent by authorities unable to retain 100% of the grant



Local authorities are supporting workforce development in social care during 2007-08 (Question 4) in addition to the National Training Strategy and Human Resources Development grants – otherwise known as ‘core’ funding – to the tune of £33.2m or a mean of £573k (SD £432k) per authority. Assuming these averages reflect all local authority councils with social services responsibilities, ‘core’ funding can be estimated at a total of £86m (150 English councils x £573k) for 2007-08. From the current dataset, we are not able to analyse how this is being spent. However, it is likely that some of this funding is being spent in the VIP sector. This is an area to be explored in further detail in next year’s survey.

In answer to Question 3, 67 members said that an average 3.65% (SD 1%) of social service department gross expenditure was spent on training their authority’s directly employed staff in 2006/07. This figure has been increasing steadily over the past four years: from a 3% mean in the 2004 survey, a 3.3% mean in the 2005 survey and a 3.4% mean in the 2006 survey (see Chart 8).

Chart 8: Average percentage of Social Service department gross expenditure spent on directly employed staff



People who use services and their informal carers

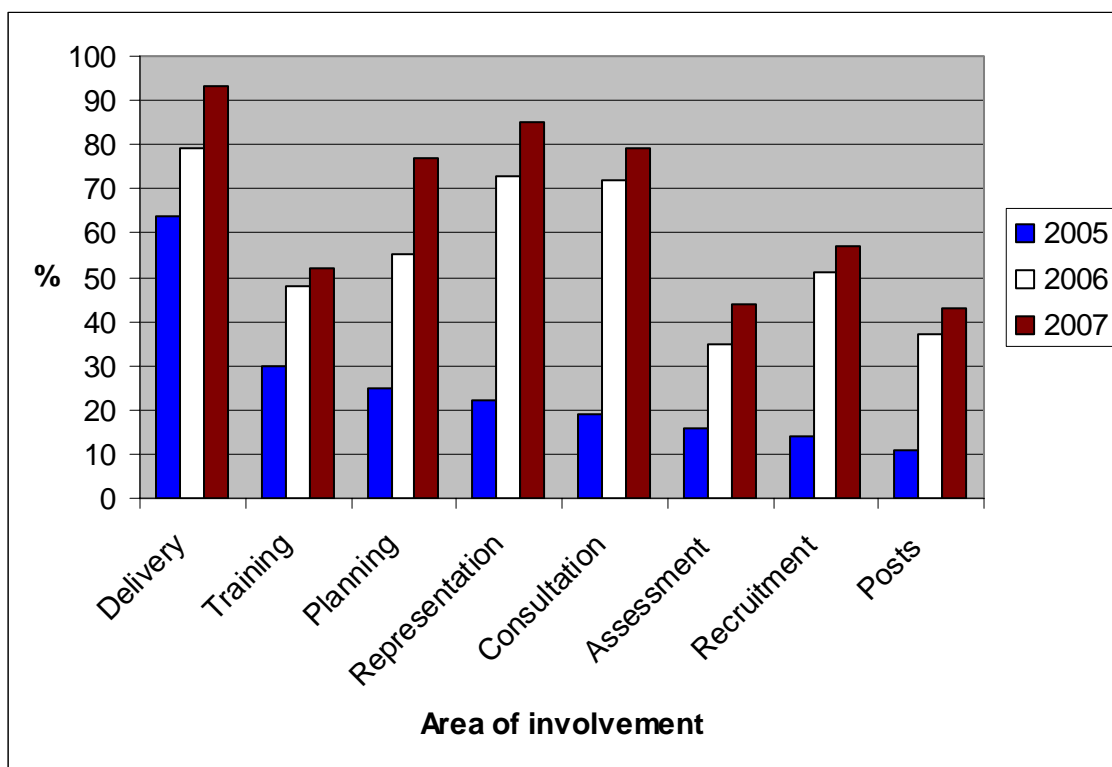
This section looks at how local authorities are involving people who use services and their informal carers to improve learning and development activity (Question 5). Table 2 below displays how the majority of authorities involve people who use services and their informal carers at a number of levels, along with the change in activity between 2005 and 2007 survey data:

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

Area of involvement	2005 %	2006 %	2007 %
Delivery – e.g. direct and/or joint input on programmes	64	79	93
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	30	48	52
Planning – e.g. design and development of vulnerable adult training	25	55	77
Representation – e.g. on partnership boards or sub-regional committees	22	73	85
Consultation – e.g. with carers' forums and users' parliaments	19	72	79
Assessment – e.g. of practice or NVQ competence	16	35	44
Recruitment – e.g. on selection panels for Approved Social Workers	14	51	57
Posts – e.g. carer's development or service user empowerment officers, or joint posts with higher education institutions	11	37	43
Other examples: <ol style="list-style-type: none"> 1. Comments from people who use services are fed into the probationary review process 2. Evaluation – people who use services and their informal carers are involved in evaluating training programmes 3. Carers' and family users' support group 			

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. As Table 2 shows, last year (2006) the percentage of those authorities involving people who use services and their informal carers to improve their learning and development activity more than doubled (compared with 2005) in such areas as planning, representation, consultation, assessment, recruitment and actual posts. This year there have been further increases across all areas of involvement, as Chart 9 illustrates. This level of involvement is far more consistent across the range of learning and development activity and is indicative of the active involvement of people who use services and their informal carers to improve learning and development.

Chart 9: Percentage of authorities involving people who use services and their informal carers to improve learning and development activity



Good practice examples in workforce development

“We have a range of examples of what we would consider good practice. These include: engaging effectively with the sector developing and delivering training and qualifications programmes that meet the needs of the sector; brokering with funding organisations and training providers to support the sector; the development of the Care Ambassador and Care for a Career scheme; the roll out of the National Minimum Data Set; and supporting the introduction of the core knowledge and skills. Several of these examples have been picked up at a regional level by Skills for Care who have supported the delivery of these models in other areas in the region.”

This section looks at answers to Question 7, at what has gone particularly well in each Learn to Care member’s local area. Last year (2006), examples of good practice focused on three areas: provision of programmes and qualification opportunities; development of partnerships; and creation of new posts to support learning and development. This year, the good practice examples appear to have less emphasis on the creation of new posts and more emphasis on the development of partnerships. The outcomes of these partnerships are wide-ranging as the above illustration shows. However, they include, more specifically, joint training provision between, for example, social care and health teams, stronger links with contracting and commissioning teams, and joint working between local authorities. As the following quotes highlight, many of these examples of good practice are based within the VIP sector:

“Joint National Vocational Qualification programmes with home carers from the statutory and independent sectors; training attendance at our Provider Forums for Learning Disability, Physical Disability, Home Care and Residential Homes; circulating details of free and cheap training opportunities available via ourselves, European Social Fund funding, Train to Gain, Learning Skills Council, etc.”

“Sharing and providing information to especially small care organisations to know what funding is available and how to access it as well as information about workforce development initiatives. These organisations now feel less vulnerable and many of them have developed good networks with other similar providers. They have also managed to develop lasting relationships with training providers. The Collaborative provided them with the time and space to think about long-term issues and to understand the benefits of developing their staff. Member organisations are now wanting to share information and to network, which did not happen before. They are also accessing more training programmes. The council managed to link commission of services with nurturing and developing these services provided by independent sector organisations. This, very often, has resulted in training programmes that have been developed for these specific organisations and funded by the Local Authority Grant.”

“All our training programmes are opened up free of charge to VIP sector and any service user representative group – there is a great take up and the programme has been expanded. A comprehensive skills analysis in the VIP sector was undertaken in December 2006 which has really allowed us to focus on the areas of strengths and weakness and plan our resources appropriately. We have held several successful joint recruitment campaigns. We hold monthly meetings with all our providers. We have jointly written competencies for new types of worker. We have developed train the trainer programmes in outcome-based commissioning where 60% of trainers are in the VIP sector and train council staff as well as their own staff.”

Fifty-five Learn to Care members were willing to share their email address in answer to Question 7(c), with a view to being contacted by interested colleagues about their examples of good practice. Based on these examples, Learn to Care intends to produce a second edition of the Directory of Good Practice in Social Care Workforce Development in April 2008 so that readers can follow up their interest by email.

The future

This section looks at Learn to Care members' longer term plans for positive developments in their local authority area. Last year (2006), plans for future development included a strong focus on partnership working to deliver training programmes and develop workforce planning. Examples of the outworking of these plans, for instance, the completion of National Minimum Data Set forms and joint learning and development activity are demonstrated in this year's good practice section. This year, it is expected that there will be increased partnership with the VIP sector. Members specify this development in terms of percentage increase in spending in the VIP sector over the next year, but also in terms of engagement ("*bringing all contracted providers on board*") and provision of tailored learning and development opportunities based on the needs of the sector. Also, one of the biggest challenges is to maintain employees' continuing professional development. In particular, answers to Question 7(b) highlight the increasing importance of leadership and management training and development. Furthermore, the survey has picked up for the first time Learn to Care members' desire to evaluate the impact of the work they are doing. This may be because the two year funding settlement from the Department of Health has given them some stability in planning ahead.

"The two year settlement last time was great as it allowed us to do things like employ peripatetic assessors. It is difficult to plan for the longer term until we know what the grants will be."

Summary of findings

Learn to Care members working in 81 local authorities responded to the 2007 funding survey, representing 54% 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 £363k per authority. This average spend has been steadily increasing since 2004 (£298k per authority).
- Assuming this average spend per authority of £363k to support workforce development in the VIP sector is representative of all councils with social services responsibilities, it can be estimated that a total of £54m (150 English council x £363k) will be spent in the VIP sector in 2007-08. This estimated figure of £54m equates to 44% of the National Training Strategy and Human Resources Development Strategy Grants (excluding post-qualifying training and social work trainee schemes as these schemes are most likely to occur in the statutory sector).
- In 2006-07 most authorities (74%) spent all the funding allocated to the VIP sector, a higher percentage than last year's (2006) survey (64%).
- The key issue for Learn to Care members working with the VIP sector is capacity; for instance, the capacity of employers to release staff to attend training and the capacity of local authorities under budgetary pressure to spend any allocated monies.

Grants

- For 2007-08, most authorities (74%) are likely to be able to retain all the National Training Strategy Grant intended for workforce development in social care, while 69% are likely to be able to retain all the Human Resources Strategy Grant for this purpose. These figures are broadly similar to findings from previous years' funding surveys, but do show a slight downward trend in the numbers of authorities likely to retain *all* grants for their intended purpose.
- For 2006-07 an average 3.65% of social service department gross expenditure was spent on training local authority's directly employed staff. This figure has been steadily increasing since 2004 (3%).

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. The percentage of those authorities involving people who use services and their informal carers to improve their learning and development activity has more than **tripled** since 2005, in such areas as planning, representation, consultation, recruitment and actual posts.

Good practice examples in workforce development

- Learn to Care members highlight an increased emphasis on the development of partnerships in this year's funding survey. To illustrate, these partnerships not only include the VIP sector, but also joint training provision e.g. between social care and health teams, stronger links with contracting and commissioning teams and joint working between local authorities.

The future

- Learn to Care members expect to see increased partnership with the VIP sector during 2007-08, in terms of percentage increase in spending in this sector and increased engagement.

Implications

With four years' worth of data from Learn to Care funding surveys, the picture of workforce development given by members is a consistent and progressive one. Those responding to the 2007 survey plan to spend an average of £363k per authority in the VIP sector. This mean spend per authority has been steadily increasing since 2004, and for 2007-08 equates to a total spend of £54m or 44% of the Department of Health's strategy grants. The percentage of those authorities involving people who use services and their informal carers to improve their learning and development activity has more than tripled since 2005 in such areas as planning, representation, consultation, recruitment and actual posts. Partnership working is again cited as the main area where good practice takes place and is the core focus of the future.

The findings are also consistent in other areas. About 3 in 4 local authorities are likely to retain *all* the 2007-08 National Training Strategy Grant. Three in 5 local authorities are likely to retain *all* the 2007-08 Human Resources Development Strategy Grant intended for workforce development in social care. But, there are still no guarantees as to how local authorities will allocate funding in subsequent years. Moreover, and following on from the Comprehensive Spending Review and the Chancellor's pre-budget statement, there is still a lack of clarity around the allocation and management of the Grants for 2008-09 and beyond. In this context, long term planning is difficult.

In the process of completing these surveys, we receive many comments from Learn to Care members that the Department of Health Grants are under significant budgetary pressure. Although, we have heard comments like these for 4 years, they have not translated into actual and significant reductions in spending. For 2008-09 funding streams and grants will be altered once again. These alterations may make it more difficult for Learn to Care members to keep any grant for its intended purpose – all the more reason to monitor this situation into 2008-09 and beyond.

Appendix A: Learn to Care 2007 Funding Survey

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:

Although these grants are not ring-fenced, they are made for a specific purpose. Local councils are reminded that services they directly provide and those they contract for are both required to meet the staff training and qualifications standards within the relevant National Minimum Standards. 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. These grants are made with the intention of assisting local councils achieve these specific purposes.

This survey is designed to evaluate the impact and spending patterns of these grants so your help in completing the questionnaire is greatly appreciated.

<p>1. Authority/Organisation/Region:</p>
<p>2. (a) What percentage of the NTSG grant are you likely to be able to secure for training and development in 2007/2008? children ____% adults ____% total ____%</p> <p>(b) What percentage of the HRDG grant are you likely to be able to secure for training and development in 2007/2008? children ____% adults ____% total ____%</p>
<p>3. What percentage of the actual SSD gross current expenditure on staffing (2006/2007) was spent on training your council's directly employed staff? (DIS figure) children ____% adults ____% total ____%</p>
<p>4. (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 2007/2008? This is otherwise known as CORE funding. Please circle. YES / NO</p> <p>(b) If yes, by how much? Children £____ adults £____ total £____</p>
<p>5. How are you involving people who use services and their informal carers to improve your learning and development activity? Please circle.</p> <p>(a) Delivery e.g. direct and/or joint input on programmes. YES / NO</p> <p>(b) Training e.g. carers completing a carers certificate. YES / NO</p> <p>(c) Planning e.g. design and development of training. YES / NO</p> <p>(d) Representation e.g. with people who use services on partnership boards. YES / NO</p> <p>(e) Consultation e.g. with carers forums and user parliaments. YES / NO</p> <p>(f) Assessment e.g. of practice or NVQ competence. YES / NO</p> <p>(g) Recruitment e.g. of Approved Social Workers. YES / NO</p> <p>(h) Posts e.g. service user empowerment. YES / NO</p> <p>(i) Any other examples. Please specify: _____</p>

6. (a) Is your local authority supporting workforce development in independent, private and voluntary sectors for 2007/2008? Please circle. YES / NO

(b) If yes, please estimate how much? £_____

(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 2006/2007 by circling the appropriate statement below:

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 2006/2007? _____%

(Please make sure that you include your total costs)

(e) What percentage of HRDG was actually spent on the independent, private and voluntary sector in 2006/2007? _____%

(Please make sure that you include your total costs)

(f) In your area/region in 2006/2007 was the funding allocated to the independent, private and voluntary sector spent? Please circle. YES / NO

What were the issues, if any?

(g) What initiatives has the council been involved in during 2006-07 to make training opportunities available for independent sector care home and domiciliary care staff and what has been the impact?

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

7. To help local authorities retain this funding, 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.

E-mail:

8. Any further comments that you would like to make regarding the impact or spending of these grants?

Please return the completed survey to Catherine Cadogan, Learn to Care Administrator, at the end of the Annual Conference or post to the following address by 31.05.07:

Learn to Care, Selly Wick House, 59-61 Wick Road, Selly Park,
Birmingham, B29 7JE
Alternatively, e-mail to: info@learntocare.org.uk

Many thanks for taking the time to complete this survey
Learn to Care Executive Committee (May 2007)

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