

Royal College of Nursing submission to the Housing, Communities and Local Government Committee inquiry into funding and provision of Local Authorities' children's services in England

Summary and recommendations

- Rising demand for children's services, coupled with significant cuts to funding for Local Authorities in England, have left children's services at a tipping point. Urgent action is required by Government to close the £3bn funding gap facing children's servicesⁱ and reverse cuts to public health and early intervention. Government must ensure that the future funding mechanism for Local Authority-provided services for children, including public health, is sustainable and equitable.
- Funding pressures have forced Local Authorities to focus spending on statutory late stage intervention services for children, with significant cuts to early intervention and preventative services. The Government must commit to embedding a preventative approach to improving children's outcomes across all departments, including health and local government. Scaling up an early intervention and prevention-based approach will necessitate greater investment in children's public health, and ensuring that there is an adequate workforce to deliver these services safely and effectively.
- Children's public health nurses, specifically health visitors and school nurses, have an essential role to play in early intervention and prevention. They act as knowledge brokers, working at the interface between families and core health, social care and education services to support vulnerable children and young people. They deliver truly holistic care, encompassing both physical and mental health promotion, and health education to support emotional wellbeing and build resilience.
- There has been a significant decline in school nurses and reductions in the health visiting workforce in England. NHS health visitor posts fell from 10,309 in October 2015 to 7,768 in August 2018, and between March 2010 and August 2018 the number of full-time school nurses employed by the NHS fell by 26.8%.ⁱⁱ A robust health and care workforce strategy is needed, underpinned by legislation which clarifies Government, national and local accountability for nurse staffing for safe and effective care, including health visiting and school nursing and covering the workforce within and outside the NHS, public health and social care.
- The RCN has previously raised concerns that the current Local Authority-led commissioning process for health visiting and school nursing services has resulted in fragmentation in provision and gaps in vital service coverage for infants, young children and their families.ⁱⁱⁱ This means that individuals are falling through the gaps, which could result in child protection risks/issues and children in need potentially going undetected, thereby posing a major child protection risk.
- A review of the commissioning of Health Visiting and School Nursing services in England should be undertaken, to determine the impacts of changes and consider options for improvement. These services should be commissioned and planned alongside other services they refer into and rely upon, with better integration between health and Local. It should be based on the needs of children, young people and their families, as identified by assessments of local population needs; should support a focus on prevention and early intervention; and encourage a seamless transition between services for patients.

Supporting information

The role of health visitors and school nurses

1. Children's public health nurses, specifically health visitors and school nurses, have an essential role to play in early intervention and prevention services for children. Through a recent RCN survey of health visitors and school nurses, members informed us that, in their experience, the most important issues facing children today include safeguarding and child protection, child and adolescent mental health, emotional resilience, wellbeing, and domestic abuse.^{iv}
 - 1.1 Health visitors are trained to recognise risk factors, triggers of concern, and signs of abuse and neglect in children, and can be the first to recognise whether a child is at risk of harm. They play a crucial role in supporting children and families to access support and ensure preventative action is taken. Their regular key contacts with children and families can provide crucial early help and support, thereby reducing the need for escalation.
 - 1.2 Although there is currently no overarching national strategy for early intervention in England or the UK, there are a range of specific programmes which support early intervention. A key example is the Healthy Child Programme (HCP), delivered by health visitors and school nurses. The HCP aims to ensure that every child gets the start they need to lay the foundations for a healthy life, and comprises screening tests, immunisations, developmental reviews, and information and guidance to support parenting and healthy choices. The role of health visitors in the HCP is crucial because of the potential to reach children and families who would otherwise not have any contact with services before they reach school. Therefore it is a key mechanism for early detection of issues and risks and advising on appropriate preventative action or support, thus preventing issues worsening.
 - 1.3 However, the universality of the health visitors' mandated checks are at serious risk. Reductions in funding for public health services have contributed to a decline in the number of health visitors^v, and coupled with increased demand this is putting a significant strain on the service. For recipients of these services, there is significant regional variation in access, particularly the mandated five visits from health visitors for every child, which risks undermining the universality of the service, with children in London the least likely to receive the required number of health visits.^{vi}
 - 1.4 According to one survey of English health visitors 44% reported working with caseloads of more than 400 children (despite the recommended maximum being one health visitor to 250 children to deliver a safe service). The survey also found that higher caseloads have led to 43% reporting that they are so stretched they fear a tragedy at some point.^{vii} Our members working in health visiting and school nursing have reported the decommissioning of non-statutory services and other services being significantly reviewed and redesigned to meet increasing cost pressures^{viii}. At the heart of many of these changes was a planned reduction in the number of skilled public health nurses. Huge increases in workloads for health visitors and school nurses, stemming from rising demand and declining workforce numbers, seriously compromise their ability to provide an effective service for children and families.
 - 1.5 As other early intervention services such as children's centres face cuts, universal health visitor reviews are increasingly important for safeguarding and child protection. However, with other front line universal services also under pressure, this increases the risk that vulnerabilities and signs of neglect and abuse will be missed.

- 1.6 School nurses deliver both universal and targeted services and work across education and health, providing a link between school, home, and the community. They play an important role in spotting the early signs a child could be at risk or experiencing difficulties and helping them to access timely support. Their role can involve building relationships with children and providing a safe space to talk about issues or problems related to their mental health or wellbeing and supporting emotional resilience and mental health. However, a survey of school nurses indicated that increasingly high thresholds operated by local children's services had made it more difficult to make successful referrals about children and resulted in school nurses picking early child protection work and developing support activities for rejected cases – work previously done by social workers.^{ix} Worryingly, a fifth of school nurses reported that their child protection caseload was limiting their capacity to perform other activities, which in turn reduced their time for the preventative work to spot the signs of abuse and help prevent problems developing.^x This supports intelligence from our members that safeguarding and child protection processes have become a key focus of school nurses' work.
- 1.7 Between March 2010 and August 2018 the number of full-time school nurses employed by the NHS fell by 26.8%.^{xi} We know that school nurses are being overstretched, with 29% of respondents to a National Children's Bureau survey stating they worked across 13 or more schools.^{xii} There has also been a drop in the numbers of nurses undertaking the Specialist Community Public Health Nursing qualification, to undertake public health nursing roles like health visiting and school nursing in England, with both a reduction in commissions and in those taking up training places on offer. It is clear that these services are facing a workforce crisis, as part of a wider crisis facing the health and care services.
- 1.8 We are concerned that the changes made to the way health visiting and school nursing services are commissioned in England^{xiii}, particularly the separation from other health commissioning, is leading to gaps in vital service coverage for infants, young children and their families. This means that individuals are falling through the gaps, and may present in a more acutely unwell state to other services; a situation which could be avoided if these services were planned and commissioned alongside each other. We have previously recommended that there should be a review of commissioning of health visiting and school nursing services in England, to explore the structural barriers and to consider options for how to address concerns about fragmented service provision and capacity, and determine how to most effectively commission these services as the system moves towards more integrated models of care. As we have previously flagged, we are particularly concerned about the impact this has on safeguarding children, and it is therefore a key issue for consideration in relation to children's services.

Rising demand for children's services

2. Demand for children's services is rising. According to the Local Government Association, the number of child protection enquiries undertaken by Local Authorities increased 158 per cent in 10 years - from 73,800 in 2006/07 to 198,090 in 2017/18; the number of children subject to a child protection plan almost doubled^{xiv}; and the number of looked after children reached a new high of 75,420 in 2017/18, representing the biggest annual rise of children in care in eight years.^{xv}
- 2.1 The demand for services is also becoming more complex. As reported by the Association of Directors of Children's Services, entrenched and more complex problems are increasing among children and families, which makes the planning and provision of services more challenging and resource intensive.^{xvi}

Funding crisis facing children's services

3. Overall central government funding for Local Authorities has decreased, and the main government grant funding for local services will be cut by a further 36% in 2019/20.^{xvii} Underneath this, funding for children and young people's services decreased by £2.4 billion (24 per cent) in real terms between 2010-11 and 2015-16^{xviii}. Overall, councils are facing a £3 billion funding gap for children's services by 2025.^{xix}
 - 3.1 In response to these pressures, many Local Authorities, such as Northamptonshire, Torbay and East Sussex, are being forced to reduce non-statutory services and use reserves to plug funding gaps.^{xx} Furthermore, Local Authorities are being forced to spend more than they have budgeted on their children's services^{xxi}. Research commissioned by the Local Government Association found wide variation in spending by Local Authorities on children's services, with spending on children's social care per child varying between £292 and £1,254 per year. Their research also found that the largest areas of spending on statutory services for looked after children and safeguarding are also the areas where spending is most variable, due to a variety of factors which are largely out of the control of individual Local Authorities.^{xxii}
 - 3.2 While the RCN welcomed the announcement in the recent Budget of an additional £84m over 5 years for up to 20 Local Authorities for children's social care^{xxiii}, it will not bridge the estimated £3bn funding gap facing children's services by 2025.^{xxiv} Government must urgently address the growing gap in resources and provide a sustainable funding package for children's services and public health, which scales up early intervention and prevention.
 - 3.3 There is a wealth of evidence supporting the return on investment to be gained from early intervention in children's lives to support better outcomes.^{xxv} But many Local Authorities have had to concentrate resources on services for children with the highest level of need and divert the majority of funding for children's services on late stage interventions, when problems for children and young people have reached crisis point. The result of this has been a focus of funding on late intervention reactive statutory services, and cuts to early intervention services.
 - 3.4 Analysis of public spending on children shows that almost half of the entire £8.6 billion children's services budget in England is now spent on 73,000 children in the care system, leaving the remaining half to cover 11.7million children.^{xxvi} This is despite warnings that cuts to early intervention were "driving up both referrals to, and demand for, statutory child protection services".^{xxvii}
 - 3.5 Government funding for early intervention has been cut by almost £600 million since 2013, and is projected to drop by around £100 million more by 2020.^{xxviii} Children's charities have reported that Local Authority spending on early intervention services for children and young people, including children's centres and family support, dropped 40% between 2010/11 and 2015/16.^{xxix} During the same period, spending on acute statutory services, which late intervention services for children and young people, such as child protection and children in care, increased by 7%. There is an urgent need to reduce the demand for costly acute children's services through investment in prevention and early intervention to help more children before problems escalate.
 - 3.6 Furthermore, children receive different levels of intervention and support depending on where they live, particularly in relation to access to early help and wider preventative services.^{xxx} Local Authorities approaches to early intervention also differ widely, and coupled with the lack of strategy or oversight has led to fragmentation.^{xxxi}

Future funding mechanism for Local Authorities in England

4. In October 2015 the Government announced its intention to enable local government to retain 100% of business rates raised locally and committed to a full review of the needs and redistribution mechanism for Local Authority funding through the 'Fair Funding Review'.^{xxxii} However, ongoing uncertainty about the timeline and mechanism reduces the capacity of Local Authorities to plan services effectively. The RCN believes that urgent clarity is needed from the Government about the future mechanism and allocation of funding for Local Authority-provided services across England.

4.1 The RCN has argued that in order for any meaningful improvements to be made to either the health service or social care system, the Government must first understand the needs of the population, and then determine the adequate provision and resources required to meet this need. Only by taking this approach (as opposed to one which seeks to make savings on an already stretched budget) can a national conversation be held on how to fund this system, and where the burden of cost should fall. The RCN has developed a number of principles which should be considered when making decisions about funding for children's social care services (see appendix).

About the Royal College of Nursing

With a membership of around 435,000 registered nurses, midwives, health visitors, nursing students, health care assistants and nurse cadets, the RCN is the voice of nursing across the UK and the largest professional union of nursing staff in the world.

For more information, please contact Rosalind Stainton, Policy Adviser
rosalind.stainton@rcn.org.uk

Appendix – RCN Principles for social care funding

I. **Joined-up approach:** Discussions about the future of social care should not be held in isolation from wider conversations about the NHS or the provision of public health services. There is a need to recognise that both health and social care depend upon there being enough nurses across the whole system.

II. **Based on population need:** Options should only be proposed once a robust assessment of population need has been undertaken, and an outline of the respective service provision and resource and workforce requirements detailed. Only with this level of detail can adequate scrutiny on the options and level of resource needed be provided by the general public.

III. **Supporting meaningful public engagement:** National Government and Local Authorities should invest in educating the general public about current and proposed models for social care funding. Evidence demonstrates that the majority of the public assumes social care is ‘free at the point of need’ and only changes this view when they or a loved one requires support. Without this education piece, any proposal which seeks to raise taxes or require individuals to pay for insurance is likely to be seen unfavourably, thus risking the entire issue of social care being avoided for political popularity reasons.

IV. **Specific consultation with the social care workforce:** Historically, staff groups are not meaningfully involved in the design of changes to the health and social care system, and they report that the impact of changes are not effectively communicated to them. Going forwards, we expect to see consultation with specific staff groups, involving staff across health and social care, about any reforms to the social care system.

V. **Evidence-based:** Any proposals for service provision and resources within the scope of the consultation should be evidence-based, and the evidence should be available and accessible for members of the public to engage with. Likewise, proposals should be fully costed, and should clearly detail the resources and costs for different groups.

ⁱ The Local Government Association estimates that councils are facing a £3 billion funding gap for children’s services by 2025

ⁱⁱ NHS Digital NHS Workforce Statistics August 2018 (published 22 November 2018) <https://digital.nhs.uk/data-and-information/publications/statistical/nhs-workforce-statistics/august-2018>

ⁱⁱⁱ RCN response to the Health and Social Care Committee’s inquiry on the first 1000 days of life <https://www.rcn.org.uk/about-us/policy-briefings/contr-4618>

^{iv} The results of this RCN survey in 2018 are unpublished.

^v There has been a significant drop in health visitors of over 1,000 since the Health Visitor Implementation plan finished in 2015.

^{vi} RCN (2017) The Best Start: The Future of Children’s Services <https://www.rcn.org.uk/professional-development/publications/pub-006200>

^{vii} <https://ihv.org.uk/news-and-views/news/we-are-walking-a-very-tight-rope-health-visitors-voice-fear-of-another-child-tragedy-waiting-to-happen/>

^{viii} RCN (2017) The Best Start: The Future of Children’s Services <https://www.rcn.org.uk/professional-development/publications/pub-006200>

^{ix} Children’s Commissioner for England 2016 *Vital role of school nurses threatened as paperwork eats into time with children* <https://www.childrenscommissioner.gov.uk/2016/09/12/vital-role-of-school-nurses-threatened-as-paperwork-eats-into-time-with-children/>

^x <https://www.childrenscommissioner.gov.uk/2016/09/12/vital-role-of-school-nurses-threatened-as-paperwork-eats-into-time-with-children/>

^{xi} RCN (2017) The Best Start: The Future of Children’s Services <https://www.rcn.org.uk/professional-development/publications/pub-006200>

^{xii} National Children’s Bureau (2016) *Nursing in Schools: how school nurses support pupils with long Term Health Conditions* available at: <https://www.ncb.org.uk/nursinginschools>

^{xiii} RCN response to the Health and Social Care Committee’s inquiry on the first 1000 days of life <https://www.rcn.org.uk/about-us/policy-briefings/contr-4618>

^{xiv} Local Government Association (2017) *Bright Futures* <https://www.local.gov.uk/about/campaigns/bright-futures/bright-futures-childrens-services/childrens-services-funding-facts>

^{xv} Department for Education *Children looked after in England (including adoption), year ending 31 March 2017* https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/664995/SFR50_2017-Children_looked_after_in_England.pdf

-
- ^{xxvi} Association of Directors of Children's Services (2016) Safeguarding Pressures Phase 5
http://adcs.org.uk/assets/documentation/ADCS_Safeguarding_Pressures_P5_Exec_Summary_FINAL.pdf
- ^{xxvii} NAO 2018 Financial sustainability of local authorities 2018 <https://www.nao.org.uk/wp-content/uploads/2018/03/Financial-sustainability-of-local-authorities-2018.pdf>
- ^{xxviii} Action for Children, National Children's Bureau, The Children's Society (2017) Turning the tide: Reversing the move to late intervention spending in children and young people's services <https://www.ncb.org.uk/resources-publications/resources/turning-tide>
- ^{xxix} Local Government Association <https://www.local.gov.uk/about/campaigns/bright-futures/bright-futures-childrens-services/childrens-services-funding-facts>
- ^{xxx} <https://www.theguardian.com/society/2018/aug/04/council-funding-crisis-could-be-catastrophic-for-vulnerable-children>
- ^{xxxi} Association of Directors of Children's Services (2016) Safeguarding Pressures Phase 5
http://adcs.org.uk/assets/documentation/ADCS_Safeguarding_Pressures_P5_Exec_Summary_FINAL.pdf
- ^{xxxii} Association of Directors of Children's Services (2016) Safeguarding Pressures Phase 5
http://adcs.org.uk/assets/documentation/ADCS_Safeguarding_Pressures_P5_Exec_Summary_FINAL.pdf
- ^{xxxiii} Budget 2018 <https://www.gov.uk/government/publications/budget-2018-documents/budget-2018#economy-and-public-finances>
- ^{xxxiv} Local Government Association 2018 Bright Futures <https://www.local.gov.uk/about/campaigns/bright-futures/bright-futures-childrens-services/childrens-services-funding-facts>
- ^{xxxv} Early Intervention Foundation *The Cost of Late Intervention* 2016 <https://www.eif.org.uk/files/pdf/cost-of-late-intervention-2016.pdf>; Graham Allen MP 2011 *Early Intervention: The Next Steps An Independent Report to Her Majesty's Government*
- ^{xxxvi} Institute for Fiscal Studies (2018) Public Spending on Children in England: 2000 to 2020, Report for the Children's Commissioner of England
- ^{xxxvii} http://adcs.org.uk/assets/documentation/ADCS_A_country_that_works_for_all_children_FINAL.pdf
- ^{xxxviii} Local Government Association <https://www.local.gov.uk/about/campaigns/bright-futures/bright-futures-childrens-services/childrens-services-funding-facts>
- ^{xxxix} Action for Children, National Children's Bureau and The Children's Society 2017 'Turning the Tide'
<https://www.actionforchildren.org.uk/media/9883/turning-the-tide-report-web.pdf>
- ^{xxx} APPG for Children 2018 'Storing up trouble: a postcode lottery of children's social care'.
<https://www.ncb.org.uk/sites/default/files/field/attachment/NCB%20Storing%20Up%20Trouble%20%5BAugust%20Update%5D.pdf>
- ^{xxxxi} House of Commons Science and Technology Committee Evidence-based early years intervention Eleventh Report of Session 2017–19 <https://publications.parliament.uk/pa/cm201719/cmselect/cmsstech/506/506.pdf>
- ^{xxxii} The Review concluded in March 2018 and we await the Government's report