

RESEARCH INTO *practice*

News from the Scottish Executive about research in social work and social care No 10 – April 2002

Free personal care unlikely to reduce informal caring

The provision of free personal care for older people is unlikely to lead to a substantial decline in informal caregiving, according to six studies published by the Scottish Executive.

An investigation by the Central Research Unit suggests that more than 130,000 full-time workers would be required to replace the informal labour given freely by voluntary carers in Scotland.

'Given that the size of the labour market in Scotland is only around 2,000,000, significant substitution from informal to formal care could not be accommodated easily,' it concludes.

'Defining the annual replacement cost of personal care as the cost of hours supplied by care workers in the formal labour market up to a maximum of 28 hours per week, estimates of this annual replacement cost in Scotland range around £200m.

'It is not clear that reported hours coincide with "required" hours. Substitution between informal care and publicly funded formal care is likely to be on the basis of more limited public provision, covering a specified set of essential tasks.'

The paper suggests that most carers of working age are already involved in the labour market – either part-time or full-time – so they are unlikely to give up their voluntary caring to increase their income.

It cites evidence from the USA where an attempt to improve the quality of homecare provision for the elderly during the 1980s showed limited substitution between informal and formal care. After six months, the amount

of personal care provided formally had increased by 25 per cent while the amount provided informally had declined by 3 per cent.

◆ Providing free personal care for older people can be viewed on the internet at www.scotland.gov.gsi.uk/cru

Older people determined to stay in their own homes

Older people receiving intensive domiciliary care are determined to stay in their own homes, according to research carried out for the Scottish Executive. Most of them place great value on the notion of 'home' and are reluctant to move from places where they feel content and safe.

The study formed the second stage of a programme of research on domiciliary care provision in Scotland and focused on the extent to which very frail older people are able to stay in their own homes supported by domiciliary services and informal care.

The research found that 56% of older people had support from informal carers recorded in their care plans; the level of support provided by informal carers was often substantial and appeared to be an important factor in maintaining older people in their own homes.

The average cost of a package of formal domiciliary care ranged from £453 a week in South Lanarkshire (where the majority of care was provided by the local authority) to £622 a week in Edinburgh (where services were predominantly provided by private sector agencies). Conservative estimates suggest that the cost of replacing informal care with formal care in the cases studied would range from £18 to £1,451 per week.

The main source of dissatisfaction with

Inter-agency working helps to prevent school exclusion

Teachers particularly value the support of other professionals when they face pressure from other staff to exclude the most difficult pupils, research in Scotland has found.

Three authorities each identified two secondary schools where there was established inter-agency practice, and each school identified 30 pupils for whom inter-agency initiatives were seen as effective in preventing or reducing exclusion from school. 150 interviews were carried out in each authority and school-based inter-agency meetings were observed.

The meetings were found to be central to the support of vulnerable pupils, and were not just about exclusion. In one local authority, school-based inter-agency meetings discussed individual pupils, and this increased the involvement of young people and parents/carers. In the other two authorities, meetings included strategic planning as well as individual case discussions. The researchers suggest these combined meetings had the advantage of developing positive working

relationships between agencies, and the ability to be imaginative in both case-based and strategic thinking.

All three authorities had policies promoting the involvement of young people and parents in decision making. One did this through inviting parents and pupils to meetings, and those who participated valued this, although they did not always understand what was happening or the language used.

Combined case/strategic meetings had a core of professionals from a range of agencies, but some – such as social workers – only attended irregularly.

The study concludes that inter-agency work provided a joined-up, child-centred perspective on young people's lives, and was effective in keeping pupils at least partly in their mainstream school.

◆ 'Hanging on in there': a study of inter-agency work to prevent school exclusion in three local authorities; by Gwynedd Lloyd, Joan Stead and Andrew Kendrick; published by the National Children's Bureau; £11.95.

domiciliary support services was the lack of continuity of care staff; older people often found it stressful having to deal with a number of different people, many of whom they did not know, when their regular carer was on leave or was sick.

The mean cost of providing nursing home care was £366 per week; the mean cost of residential care was £314 per week.

Home care accounted for 36% of the total cost of formal support in Aberdeen, 56% in Edinburgh and 48% in South Lanarkshire. Only in South Lanarkshire did home care services provided by the local authority represent the largest proportion of the home care costs.

Eighty-five per cent of the older people interviewed in the community valued their homes and said they had never considered moving. Home was important for the location, the fabric of the house and the memories vested in it. Privacy and security were also important issues. Those receiving intensive support packages were often very determined to stay at home.

To improve service quality, older people and their informal carers wanted a small team of regular careworkers; flexibility in the tasks that could be performed by careworkers; monitoring of their care plan; and training of all staff in the needs of the individual.

It was important to the older people and their informal carers that there was one trusted individual within the care network who could advocate the person's needs.

At the time of second interview (nine months after the initial interview) 60% of the older people studied were still in their own homes, demonstrating that people in need of intensive domiciliary support can be maintained in independent living.

◆ Over the threshold? – an exploration of intensive domiciliary support for older people; Lisa Curtice and Alison Petch with Martin Knapp and Angela Hallam; Research Finding No 19; Scottish Executive Central Research Unit; £5 from the Stationery Office, 71 Lothian Road, Edinburgh, EH3 9AZ; or on the Internet at www.scotland.gsi.gov.uk/cru/

Care management study highlights caseload burden

A study of the ways local authorities in Scotland are currently using care management to sustain people at home has found that the high caseloads of managers are a recurring problem.

The research found that care managers were carrying between 6 and 117 care managed cases each, the mean being 34. The mean estimate for 'intensive' care management cases was 23, representing about two thirds of all care managed cases.

It also found authorities reporting a diverse range of objectives, policies and practice surrounding care management. For example,

some authorities only 'care managed' people with complex needs while others offered it to all their clients.

No authority was using a single shared assessment tool across the board. One had developed such a tool for all user groups and had completed piloting it.

24-hour support was only provided to people in their own homes on a very limited basis. Authorities were better able to support disabled people and users of mental health services rather than older people. This was largely because alternative sources of funding were available to support the former groups.

Joint working between different agencies was seen as key to good practice but was unevenly developed across Scotland. Just over 300 care

Direct payments a closed book, even to professionals

The implementation of Direct Payments in Scotland has been disappointingly slow, according to new research published by the Scottish Executive. It is also inequitable, because most mental health service users are not being offered the choice to opt for Direct Payments.

The study was commissioned in 2001 as a follow up to an earlier study which showed that no mental health service users in Scotland were receiving direct payments. The research, which aimed to explore the barriers to mental health service users receiving direct payments, found 18 fully operational or pilot schemes but two of them had no recipients. A total of 213 people were receiving direct payments but only two of these were people with mental health problems or dementia.

Very few of the research participants, including professionals at senior practitioner and management level and voluntary agency staff, had heard about or knew much about direct payments.

People with mental health problems and dementia felt that direct payments would give them a greater say in their support and increase their choices but they did not know how they would manage cash payments, the responsibilities of being an employer or the paperwork when they were ill.

Professionals and carers thought that the relationship between people with mental health problems and directly employed personal assistants might be a problem. They were also concerned about misuse of funds and generally did not think that people with mental health problems or dementia would be able to manage direct payments.

Barriers to wider access to direct payments for mental health service included lack of information about direct payments, concerns about people's ability to manage and fears about the impact on local authority and voluntary sector jobs and services.

The finding that mental health service users are not routinely told about Direct Payments when assessed for community care services reveals a gap in practice that needs to be challenged, the report says. It suggests local authorities in Scotland might consider imitating the practice of Essex County Council, which has incorporated a question as part of the assessment proforma asking whether Direct Payments are being considered and, if not, why not.

◆ **Direct what?** A study of direct payments to mental health service users; Julie Ridley and Lyn Jones; Scottish Executive Central Research Unit; £5 from the Stationery Office, 71 Lothian Road, Edinburgh, EH3 9AZ; or on the internet at <http://www.scotland.gsi.gov.uk/cru/>

management posts were located in multi-disciplinary teams. The involvement of Housing Services was particularly under-developed.

Financial and resource constraints were the aspects of care management most often identified as problematic by both care managers and service managers.

Eight of the 32 care managers interviewed had not received any training in care management. The same was true for nine of the 32 service managers. Where staff had received training, this had often been several years ago.

◆ Review of care management in Scotland; by Kirsten Stalker and Isleen Campbell, University of Stirling; reported in Research Findings No 21; Scottish Executive Central Research Unit; <http://www.scotland.gov.uk/cru/>

Depressed mothers' problems in joining partnership

Research into the ability of depressed mothers to engage in partnership with social workers – a key dimension of social work practice with children and families – suggests that there may need to be a therapeutic content to social work practice because of the mothers' sense of inadequacy and low self-esteem.

The research was carried out in two urban local authorities in southern England. All the mothers in care-managed families on child and family care social work caseloads were invited to take part in the study; ultimately, 223 mothers participated, 43% of whom were depressed.

The research considered the energy, motivation and confidence of mothers relating to their involvement in decision making. A third of the depressed mothers did not feel they would be determined to overcome obstacles to their involvement in decisions about their children. A fifth said they found it hard to summon up the energy to say much at meetings and conferences, and the same number felt unsure of themselves when making decisions with a social worker about dealing with the family's problems.

A quarter of depressed mothers said they took little or no part in most or all decisions made about problems and plans for the family. The degree of satisfaction reflected their participation: depressed mothers were less satisfied than non-depressed mothers. They were also significantly less involved in decision implementation. A fifth said others usually took an active part in sorting things out.

The researcher concludes that there are groups of mothers whose partnership with social work departments, and involvement in resolving problems, is marginal. He suggests that the way in which social workers discuss issues before decisions are made, and provide information about work undertaken, may have an effect on women's capacity to be involved in decisions. He concludes that in order to encourage parental responsibility, the worker needs to be sensitive to the tendency of depressed mothers to interpret events and act upon them in a negative way.

◆ Depressed mothers' experience of partnership in child and family care; Michael Sheppard; BJSW, Vol 32, No 1.

The Scottish Executive is keen to publicise recent, relevant research about social work. If you know about such work, please send details to the Social Work Services Inspectorate, 1C North, Victoria Quay, Edinburgh EH6 6QQ. Mark your envelope 'Research into Practice'.

RESEARCH INTO practice is published by the Scottish Executive every two months as a contribution to good practice and debate within the profession. It can be freely photocopied. Extra copies can be ordered from: Gwen Smith, Social Work Services Inspectorate, 1-C North, Victoria Quay, Edinburgh EH6 6QQ. Tel: 0131-244 3737. Fax: 0131-244 0481. E-mail: Gwen.Smith@scotland.gsi.gov.uk

RESEARCH INTO practice can also be downloaded via the Internet at www.researchweb.org.uk

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SCOTTISH EXECUTIVE

Sites for Scotland: Social Work Internet Bulletin

Number 4, Spring 2002 – SENSORY IMPAIRMENT

Welcome to the fourth reSearchWeb internet bulletin for Scotland. This edition focuses on Scottish and UK-wide internet resources on sensory impairment. As we have limited space in this bulletin we cannot include everything, but if you do not see a certain website here, it may be in the links pages of the websites that are listed. The sites included here are good places to start searching for information, and most offer useful resources to download or print off.

In a hurry? Try these first.

- www.rnid.org.uk Excellent site from RNID (Royal National Institute for Deaf People), which covers Scotland. Contains nearly 100 factsheets on all aspects of deafness and hearing impairment, an equipment database, extensive pages of news and information on services.
- www.rnib.org.uk Go to the sitemap of the RNIB (Royal National Institute for the Blind) website as it clearly maps the huge and varied number of resources available, including information on blindness and visual impairment for parents, carers, professionals and companies.
- www.drc-gb.org/drc/default.asp Disability Rights Commission. Scroll down the links page for dozens of references to disability websites. The text size preference can be set to make the site easier to read. The information and legislation section contains a huge number of full text items, including a Disability Discrimination Act user guide for Scotland. Essential for anyone with an interest in disability issues.
- www.deafblind.com A-Z to Deafblindness is a valuable resource devised and maintained by John Gallagher, who is deafblind himself. It brings together diverse web documents on the condition, as well as information about communication methods and links to organisations. Very useful and accessible.

Central government

- www.scotland.gov.uk/publications/archive.asp?topickey=seim Scottish Executive publications on sensory impairment. Online list of relevant full text documents.
- www.researchweb.org.uk/pdfs/ppsi.pdf National Care Standards: Care homes for people with physical and sensory impairment. Full document online available to browse and print off.
- www.doh.gov.uk/scg/deafblind/index.htm Department of Health Deafblind Homepage. Gateway to official information on guidance, legislation, good practice, training and equipment for providers of services.
- www.disability.gov.uk Department for Work and Pensions Disability Homepage. Advice on employment and training for people with disabilities with a link to an online version of the Disability Discrimination Act 1995.

- www.doh.gov.uk/pdfs/stand25.pdf Inspection of Services for Adults who are Visually Impaired or Blind.
- www.doh.gov.uk/pdfs/stand9.pdf Inspection of Services for Deaf and Hard of Hearing People.

Deafblind organisations

- www.deafblindscotland.org.uk Deafblind Scotland's site gives access to information, advice and support for people with dual sensory impairment, their carers and families. Includes information about communication and online tutorials for the Deafblind Manual Alphabet and the Block Alphabet.
- www.sensescotland.org.uk This clear, accessible site from Sense Scotland provides details of its advisory and support services.
- www.deafblinduk.org.uk DeafblindUK offers a wealth of internet information on the disability, from

services to news, plus information on the development of a national centre for deafblindness.

Blind and visual impairment organisations

- www.viscotland.org.uk Visual Impairment Scotland's website is designed to inform visually impaired children and their parents. The home page leads to two sites: the Parental Information Base, for detailed information on Scottish services and 'viskids', for children and young people, where visitors are encouraged to share their advice and experiences.
- www.guidedogs.org.uk The website of the Guide Dogs for the Blind Association shows the scope of its work. The 'eyes' section hosts a series of factsheets on eye conditions and an affecting series of images showing what visually impaired people see.
- www.afbp.org Action for Blind People's website can be accessed in both graphical and large text format. There is an online information service covering topics as diverse as benefits, beauty and medical conditions.
- www.tiresias.org International Information on Visual Disability. Developed by staff at the Moorfields Eye Hospital in London, this website is a valuable source of information on non-clinical research on visual impairment.
- www.look-uk.org The website of the National Federation of Families with Visually Impaired Children acts as a 'one stop shop' for information and contacts on caring for children and young people with visual impairment.
- www.bcab.org.uk British Computer Association for the Blind provides information and support for visually impaired computer users. The site is a first rate resource for information on access technology, software and internet use.
- www.scod.org.uk Scottish Council on Deafness is the national co-ordinating body for voluntary and statutory deaf and hearing impairment organisations. The site is very good for current and parliamentary issues.
- www.ndcs.org.uk National Deaf Children's Society is dedicated to supporting deaf children, young people and their families. Its web pages give details of support services and provide an excellent series of factsheets.
- www.hearingconcern.com Hearing Concern's website has a wide variety of online factsheets about deaf and hearing issues, including hearing aids, benefits, lifestyle, communication and medical conditions.

- www.britishdeafassociation.org.uk/ British Deaf Association is a voluntary organisation run by deaf people for deaf people, with a strong Scottish presence.
- www.royaldeaf.org.uk/ The Royal Association for Deaf People site gives online access to the UK Communication Support Directory, which has a section for Scotland.
- www.deafconnections.co.uk The Glasgow-based organisation, Deaf Connections, provides interpreting services, social and youth clubs.

Research and information

- www.ssc.mhie.ac.uk The Scottish Sensory Centre exists to promote new and effective practice in the education of children and young people with sensory impairment.
- www.eyeu.com A straightforward, comprehensive list of links to internet resources related to the eye, vision and ophthalmology.
- www.websightuk.org A unique audio-based information service website for people with visual impairments which facilitates free exchange of ideas about living with a visual impairment.
- <http://phoenix.herts.ac.uk/SDRU/hmpage.html> The Sensory Disabilities Research Unit is based at Hertfordshire University and specialises in research into assistive technology.
- www.update.org.uk Update Online: Scotland's National Disability Information Service is a subscription service which aims to provide accurate and current disability and impairment related information.
- <http://cil.gcal.ac.uk/home.html> The Centre for Independent Living in Glasgow website describes itself as 'your first stop for information about independent living and employing a personal assistant'.
- www.bcodp.org.uk British Council of Disabled People is an umbrella organisation for groups controlled by disabled people. The site contains essential information about user-led campaigns.
- www.radar.org.uk The RADAR (Royal Association for Disability and Rehabilitation) site has a good current issues section and links area plus a list of frequently asked questions (FAQs).

Please let us know your views on this bulletin using the contact details below or through the feedback form at: www.researchweb.org.uk

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