THE MARKETISATION AND PRIVATISATION OF CHILDREN’S SOCIAL WORK AND CHILD PROTECTION: INTEGRATION OR FRAGMENTATION?

THE PAST AS A PLATFORM FOR THE PRESENT

State provision for children and families in difficulty has a long history in England and across the United Kingdom. From the 1601 Elizabethan Poor Law with services funded through parish rates, and the 1834 Poor Law Amendment Act, with its emphasis on social control as much care and compassion (Harris, 2007), to the 1948 National Assistance Act, which ended the Poor Law, and with the 1948 Children Act establishing children’s services departments in local authorities with responsibilities to care for children who were not, or could not, be cared for within their families, there has been acceptance of the responsibility of the state to make provision and care for vulnerable children.

But during the 1950s the child care officers in the new children’s services departments increasingly sought, ahead of a mandate in legislation, to work with families to help them care for children (Donnison, 1954), and this was then recognised in the 1963 Children Act. Local innovation and professional initiative led to this change.

It was in 1971 (following pressure from social workers within local authorities, the recommendations of the Seebohm committee (Seebohm, 1968), and the subsequent 1970 Local Authority Social Services Act, that social work and other care services for children and for disabled adults, including older people and people with mental health difficulties, were brought together within local authorities and within social services departments overseen by social services committees. The argument was that an integrated family social service would better meet the range of social care needs within families, would avoid duplication of social workers visiting families, and be more economic, efficient and effective.

However, whilst these new social services departments were still being formed the first of many scandals which attracted considerable media attention, largely targeted on social workers, followed the death of a child. The Maria Colwell inquiry (Department of Health and Social Security, 1974), with 7 year old Maria Colwell having been killed by her stepfather in Brighton, placed local authority social work centre stage in being seen as having a lead responsibility in tackling child abuse and with the first media targeting of social workers (Butler and Drakeford, 2011). Children’s social work subsequently became more and more focussed on child protection.

It was Mrs Thatcher’s governments of the 1980s which sought to develop a more mixed economy of social services provision for children. There had for over 200 years already been a mix of statutory and charitable social care services for children with philanthropists made rich during the industrial revolution establishing charities to provide care for children who were orphaned, homeless and neglected (see, for example, Magnusson, 2006). But in the 1980s the Conservative governments introduced funding streams which were only available to voluntary organisations – such as the Under Fives Initiative; Opportunities for Volunteering; the Intermediate Treatment Fund for services for adolescents in trouble – whilst at the same time cutting local authority revenue and capital budgets. This was a time when the big children’s charities expanded and also moved away from their traditions of providing residential care for children to work more with families.
The 1989 Children Act increased specialisation within local authorities with it leading to the development of separate divisions for children’s services and, also promoted by the 1990 NHS and Community Care Act (Means et al, 2003), adults services. The 1989 Children Act was supported by ten volumes of lengthy practice guidance. It was followed in the 1990s, and taken further by post-1997 New Labour Blair governments, by central government increasingly seeking to manage local government children’s services performance through more onerous inspections, and by more expansive reporting of performance indicators and national league tables (Barber, 2008).

The 1989 Act move towards specialisation in children’s services, but also now integrating children’s social services with local authority education services, was progressed by the 2004 Children Act. The 2004 Act followed the 2003 inquiry report into the death from abuse and neglect of seven year old Victoria Climbie (Laming 2013), but the government was already moving towards an integration within local government of all services for children, a policy which was presented in the ‘Every Child Matters’ green paper (HM Government, 2003).

There was a requirement in the 2004 Act that councils appoint directors of children’s services, and a lead councillor, with a combined responsibility for education and children’s social services. It was explicit, as argued in the Victoria Climbie inquiry report, that there should be clear professional and political leadership and accountability for children’s welfare and protection. As a consequence most local authorities formed children’s services departments headed by a director of children’s services.

The continuing raft of inquiry reports following the deaths of children from abuse and neglect, and selective subsequent media coverage and the public outrage it generated, reached a pinnacle in 2008 following the death of 17 month old Peter Connelly, known through the media as ‘Baby P’. The consequence of the media targeting of social workers has been greater difficulty in recruiting and retaining social workers at the front-line of children’s social services, and also a considerable increase in child protection workloads for social workers and others (Jones, 2014). Child protection investigations in England have increased between 2008 and 2014 by 60%, children subject to child protection plans increased by 50%, and care proceedings in the courts to seek orders to protect and remove children from their families by 76%. And this workload increase is at a time of significant reductions in funding from central government for local authorities (National Audit Office, 2014) and cuts in services and welfare benefits for families (see, for example, Dutta, 2014). As a consequence it has become more difficult to provide good children’s social work and child protection services.

The response and solution since 2007 to what have been characterised as failing children’s social services has been to look to remove children’s social services from direct local authority control and provision and the thrust now is towards marketisation and privatisation

THE KEY MESSAGES FROM HISTORY

So what are the lessons which might be taken from this brief history of the services to care for and to protect children? The key messages are that:

- It is the state, through central government legislation and local government delivery, which has had the major role and accountability for the care and protection of children.
Charitable voluntary organisations have enriched and extended, and supplemented and supported but not supplanted, statutory services and direct state accountability and responsibility.

Both the state and voluntary sectors have demonstrated an ability to innovate and to respond to changing social need, values, and legislation. A recent example, not necessarily wholly positive, of the responsiveness and ability to change within statutory children’s services was the dramatic reaction to public and political pressure with a quick increase in care proceedings initiated by local authorities following the media shaping of the ‘Baby P’ story (Jones, 2014, p 286-290).

This is also a reflection of the focus on child protection since the 1970s, with this focus dominating much of children’s social work compared to family-focused social work (Featherstone et al, 2014).

With it increasingly argued that there should be clear, direct and explicit accountability for children’s social services by local government councillors and directors of children’s services employed by local councils, and these leaders should stay close to and informed about their front-line services.

That there is a continuing task to bring together specialisation within children’s services with the integration of services which might assist children.

And with inspection, regulation and performance management, monitoring and reporting as levers which have gained great emphasis in driving progress and performance within the services.

But to-date there has been little private commercial profit-driven sector involvement or investment in children’s social work and in child protection.

A BRIEF RESUME OF THE RECENT CHILDREN’S SOCIAL WORK AND CHILD PROTECTION MARKETISATION AND PRIVATISATION JOURNEY

But this latter point about no history of private commercial sector involvement in children’s social work and child protection is changing. Over the past 8 years children’s social work services have been increasingly opened up to the market place (Jones, 2015). The time sequence of steps below shows how this journey is progressing, at increasing pace, and what key steps have already been taken:
Independent social work practices introduced from 2006 following the Care Matters green paper (Department for Education and Skills, 2006), allowing local authorities to contract out social work services for children in care and leaving care:

“SWPs [social work practices] could be forms of social enterprise, such as a professional partnership or voluntary sector organisation, or private sector firms of various types from share-holder owned corporations to small owner-operated businesses” (Le Grand, 2007, p 7).

This was seen at the time as a start of positioning for privatisation statutory social work services for children (Garrett, 2008; Cardy, 2010), and it has been commented that:

“Professor Julian Le Grand, a former Blair advisor, headed a government panel propagating ‘mutuals’, viewed by Tories as merely a precursor to privatisation” (Toynbee and Walker, 2015, p 276).

The regulatory change opening up children’s social work services to the market (including intrusion into families for child protection investigations, decisions about the safety of children, the initiation of care proceedings in the courts to seek the removal of children from families, and then deciding where children subject to a care order should then live) (HM Government 2013; Butler, 2014a).

The de-regulatory change to encourage market entrants so that organisations getting contracts to deliver children’s social services will not be regulated, registered or inspected in their own right (House of Lords, 2014).

The introduction of a central government ‘Innovation Fund’ for children’s social services with its policies and priorities determined by a programme investment board of three members from the investment banking private sector plus the chief social worker for children and a former president of the Association of Directors of Social Services (both of whom have been supportive of opening up more of children’s social work services to non-statutory sectors). ‘Spring Consortium’ (2014), the body which manages the Children’s Social Care Innovation Fund, comprises Deloitte (which provides “audit, consulting, financial advisory, risk management, tax, and related services”), the Innovation Unit (“an independent social enterprise”), and Mutual Ventures (which “led” on the outsourcing from local councils of ‘Achieving for Children’ in Richmond and Kingston and ‘Evolve YP’ in Staffordshire).

A Department of Education seminar in September 2014 on how to create a market in children’s social work services and child protection (Butler, 2014b), with the seminar run by private sector consultancies and attended amongst others by Virgin Care and Amey, and discussing how to encourage ‘newcos’ (new companies) into the market to be created.
A workshop organised by the Department for Education in December 2014 (Department for Education, 2014) to recruit new ‘improvement advisors’ for children’s social services. It was attended, along with others, by G4S, KPMG, Mouchel and Amey, all of whom have a strong track of gaining profitable government contracts but with little or no recognisable experience or expertise in children’s social work and child protection.

The advent of non-local authority trusts (Doncaster and Slough) and community interest companies (Richmond and Kingston’s Achieving for Children) which are potential Trojan horses having crossed the threshold away from local authorities taking crucial decisions about the safety and welfare of children and with these crucial statutory responsibilities now being contracted out other organisations (Jones 2015).

David Cameron’s comments in recent major speeches, focussing in part on children’s social work and child protection, about “intervening quickly and put failing organisations under new leadership” and “allowing other organisations like charities, trusts and social enterprises to come in and help do the job” [and the changes introduced by his government also allow private commercial organisations to take on these responsibilities] (Cameron 2015a) and that “what energises many markets are new insurgents, who break monopolies and bring in new ways of doing things” (Cameron 2015b).

The journey towards privatisation which has been depicted above is consistent, and in some services more advanced than within children’s social work and child protection, across what was the United Kingdom’s public sector and includes schools, prisons, probation, hospitals and other health services, and welfare benefits assessments (Jones, O., 2014; Meek, 2014). But within the increased devolution across the UK’s four administrations it is in England that the privatisation thrust is now greatest with Wales, Scotland and Northern Ireland, in different ways, emphasising partnership working and integration rather than market place competition and privatisation.

ARGUMENTS FOR PRIVATISATION OF STATUTORY CHILDREN’S SOCIAL WORK AND CHILD PROTECTION

There has been a view since at least the Thatcher governments of the 1980s that public services are inefficient and ineffectual. Their monopoly position in delivering public services, drawing on public funding, and implementing government legislation, it has been argued, means that they are sluggish, unwilling and slow to change, and with little concern about their own performance. Public sector professionals are seen as essentially self-interested and self-preserving. They are the ‘knives’ who look out for and after themselves rather than the knights who are focused on the well-being and interests of others (Le Grand, 2003). This was not only a view prevalent in Thatcher’s and subsequent Conservative governments, but also of Tony Blair when prime minister in the Labour governments after 1997. Blair talked of the ‘scars on his back’ (Seldon, 2005, p 430) from trying to get the public sector to change (see also Rawnsley, 2001; 2010; Toynbee and Walker, 2001; 2005).

It is also argued that because the resources allocated to public services are not earned by the public sector, but are awarded and largely guaranteed every year, there is little requirement for the public services to demonstrate these resources are used well or to show that they should continue to be allocated to the services.
National governments in the UK have used several mechanisms to challenge what was seen as this innate conservatism and unresponsiveness within public services. With regard to accountability for the use of money allocated to the services the Thatcher governments introduced a focus on the three ‘Es’ of economy, efficiency and effectiveness, with particular attention given to the cost of services. They were increasingly required to demonstrate ‘value for money’ (VFM) and VFM would be tested by benchmarking public services against each other and against what might be seen as similar services provided in other sectors.

Under Blair’s Labour government VFM became re-badged as ‘Best Value’ with public services being tested for their use of public funding through contestability and competition with other sectors. Compulsory competitive tendering (CCT) of services introduced by Conservative Thatcher governments had its reach extended by Labour Blair governments. But within VFM and ‘Best Value’ additional costs for public services were created in administering and publicly reporting, including to district auditor scrutineers as out-posts of the national Audit Commission, VFM and ‘Best Value’ exercises across services. CCT also added contracting costs to the core costs of services. VFM, CCT and Best Value gave a greater weight to cost over quality of services as cost was more easily, and less arguably, measured and reported than quality.

In addition to contestability and competition, it was also argued that consumer choice, as in the retail sector, would mean that consumers would prefer and choose more responsive and better value services, and including services of lower costs if they were given the money (through vouchers, cash, or - with greater rationing of public services and funding – through using their own money to self-fund and buy services or assistance).

But quality was not totally neglected in the mission to make public services, or the use of public money, more economic, efficient and effective. Two levers were used by government to give what was argued to be the necessary motivation to public services to improve. First there was the introduction of national inspectorates which would publicly report on services against pre-determined service standards. Secondly, public services were required to publicly report on key performance indicators (often about timeliness and amount of provision) and with national benchmarking and league tables created. Those low down in the league tables were publicly ‘named and shamed’ by government ministers.

So four mechanisms – competition, choice, inspection, and performance monitoring and benchmarking – were used by national government to seek to drive improvement within public services, but with services increasingly required to be contracted out of direct public sector delivery or control (Jenkins, 2007). All of this was based on the premise that the public sector was innately inefficient and competition and the market and private sector was innately efficient. It was an argument made by neo-liberal economists in the United States and then transferred and transplanted to the UK in the 1980s (Klein 2007; Jones 2012).

ARGUMENTS AGAINST THE PRIVATISATION OF STATUTORY CHILDREN’S SOCIAL WORK AND CHILD PROTECTION

But increasing marketisation and privatisation of services has a number of negative consequences:
There are the additional costs of cash and time incurred in implementing contracting processes, drawing on what was within the public purse and which then is not available to fund service provision.

The line of accountability and responsibility for what had been publicly-provided services becomes elongated, complicated and confused between contractors and contractees.

The extension of choice is restricted when a small number of ever-expanding big outsourcing conglomerates come to corner the public sector contracting-out markets.

These new monopolies become more and more powerful as local authorities lose the capacity, or the knowledge and expertise, to challenge the contractors or to take services back into direct public sector management.

Holding the contractors to account becomes more difficult as it is the contractors who provide the information about their own performance. Whether it was Serco GP out-of-hours services in Cornwall, described as having a ‘bullying culture’, ‘altering data’, and ‘overstating performance’ (Public Accounts Committee, 2013), or the overcharging for the Serco and G4S criminal justice offender tagging and monitoring services (BBC, 2013), the public service contractees were dependent of performance information and financial billing from the contractors.

The House of Commons Public Accounts Committee was particularly damning in its conclusions about Serco and its failure to deliver a satisfactory high-risk and crucial health service (with significant lessons about the potential marketisation of children’s social work and child protection):

“This inquiry validates concerns we have raised previously about the framework for devolved local services. In particular, evidence about the out-of-hours service in Cornwall raises issues about the capability of the NHS to contract effectively with private providers. We are concerned about the robustness and availability of performance information, the strength of local accountability mechanisms, and the quality of oversight of a contracted service. We are also concerned that large private providers are emerging who are extremely skilled in negotiating and securing contracts but then fail to deliver a good, value for money service” (Public Accounts Committee, op cit, p 7).

Equally damning was a report about G4S and Serco (both of which are now expanding into children’s social services):

“Private security firms G4S and Serco have been stripped of responsibility for tagging criminals in the UK. It follows allegations they charged the
government for tagging people who were either dead or in jail ... Ashley Almanza, chief executive of G4S told a committee of MPs last month his company had failed to "tell the difference between right and wrong" when dealing with the contracts. Serco chairman Alistair Lyons said it was "ethically wrong" to overcharge the government ... Prison reform campaigners the Howard League said it was 'surreal' ministers were still allowing private companies to bid for security contracts [and] 'tagging is a small part of a bigger picture of private security corporations being far better at winning contracts than keeping the public safe, with increased crime resulting in increased profits," director of campaigns Andrew Neilson said [and] 'from prisons to the probation service, the Ministry of Justice's dangerous experiments with privatisation should end’” (BBC, 2013).

- There is the opportunity for the international venture capitalists and others who have come to dominate the out-sourcing market place to make quick profits by asset stripping the services and resources, such as buildings. This led to the collapse of the Southern Cross residential care services for hundreds of older people (Scourfield, 2012) and of children’s homes run by Sedgemoor (itself a part of a much larger and diverse international holding company) (Wood, 2007).

- In the search for bigger profits service running costs are reduced, and in many public services where the major spend has been on staffing it means employing fewer staff at lower costs with reduced terms and conditions of employment and less experience and qualifications. It is an issue which has emerged in private prisons, including prisons for young people, with a consequent decline in service standards and safety:

  “The Parliamentary Public Accounts Committee in 1998 found that the cheaper running costs of the private sector [prisons] were ‘almost wholly to do with different wage rates and different staff levels, and also pension arrangements, sick leave arrangements and different lengths of the working week’. Low pay is a contributor to the high [staff] turnover in many private prisons” (Prison Reform Trust, 2005).

- Those charitable voluntary child care organisations which might see expansion and growth opportunities in the increasing marketisation and contract culture being promoted in children’s social work and child protection services may find themselves unwilling to drop service and professional standards and qualifications. They will then find themselves priced out of the competitive market place, especially as costs of contracts will be an increasing focus for local authorities and other public service contactors with significant reductions in their budgets. The government is also restricting the role of charities, curtailing their roles as advocates and pressure groups (Toynbee and Walker, 2015, pp 58-61) and:

  “The cabinet sent the hapless third sector minister, Nick Hurd, to conferences to explain not only would there be no extra money for charities to pick up the pieces from cuts to councils but they would have to put up with severe reductions in support” (Walker, 2015).
• Contractors are only required to deliver what they are contracted to provide. If the contractee wants to change the service specification there may well be an additional payment required by the contractor. This runs counter to the claim that the private commercial sector is inherently more open to invest in innovation.

• The new potential and actual players in the new market places are not deterred by taking on risk if it promises profit. They are already running prisons, offender management, and GP services, and within children’s social services are running children’s homes. These are all potentially services with a high risk to public and personal safety, and to reputational damage, if the services are not well provided. Even when well provided there is still the possibility of an event which was not reasonably anticipated or foreseen leading to a tragedy. It has been argued that these risks will deter companies like G4S, Serco and others moving in to the new market being created in children’s social work and child protection. Anyone understanding the recent history would recognise that business expansion and profit will tolerate these risks.

• And when it all gets too tough to deliver services within the funding available, when something untoward happens, or big profits have already been generated, the private companies take the profit which has been accrued, or determine it is too difficult to generate a profit margin attractive to owners, and sell-on or just walk away. This is illustrated by the changes of ownership and organisational turn-over in the private residential care home market for older people, increasingly as with academy schools, dominated by large chains and few competitors. The ending by Circle Holdings of its contract for Hinchingbrooke Hospital (BBC, 2015) is a further illustration of the fecklessness and fickleness of the market place. This is of particular concern for children’s social work and child protection where it is consistency and continuity of the workforce and leadership which is known to be important as highlighted over and over again in Ofsted inspection and overview reports of children’s social services and safeguarding children.

• But Ofsted (Jones, D., 2015), and the experience over the past 40 years, have also highlighted the importance of locally-embedded inter-agency and inter-professional partnership working and with leaders accountable and close to their front-line services. This is assisted by a focus on partnerships not profit, and on cooperation not competition, and with top managers and leaders being rooted locally and with local accountability. This is severely challenged when ultimate accountability is to international venture capitalists and owners elsewhere in Europe, or in the United States, Russia, and South East Asia, focussed on financial profit, and where the organisation has no previous demonstrable commitment, experience, expertise or wisdom in delivering services such as children’s social work and child protection.
CONCLUDING COMMENT: INTEGRATION NOT FRAGMENTATION; COLLABORATION NOT COMPETITION; AND PARTNERSHIPS RATHER THAN PROFIT

What is required, but not what is intended or promised by the current government (and without challenge to date from any major opposition party), within children’s social services and child protection is more integration rather than fragmentation. Services would be improved if the gap which has opened up since 1989, and widened in 2004, between services focused on adults, such as mental health, drug and alcohol, and domestic violence services (the so-called ‘toxic trio’ of issues impacting on the welfare and safety of children) were joined together in local management and multi-professional team arrangements along with those services focused primarily on children.

There are models from, for example, community mental health teams and youth offending teams about how different professional workers with different agency employers can still be managed together for a common purpose. More recently, and reflecting the capacity to innovate within local government children’s statutory social services with partner agencies, there have been the development of multi-agency safeguarding hubs (MASH), joint social services and police child abuse and specialist child sexual exploitation investigation teams, and even more recently specialist adult mental health, drug and alcohol, and domestic violence workers have been embedded within children’s social services teams. There is no lack of public sector and local authority innovation and change. What is missing is continuity and capacity amongst churn and cuts.

Multi-agency and inter-professional teams bring together the dual benefits of specialisation and integration. ‘Troubled families’ teams, where workers from a range of professions and agencies, join together to assist families tackle a wide range of issues have been found to be valued by families and by professionals (Jones et al, 2015). Using local children’s universal and less stigmatising and threatening opportunities, such as children’s centres and schools, as the location for these integrated specialists teams and services would also be positive, something which might now be promoted as local authorities take on the responsibility for public health nursing services for children, such as health visitors and school nurses, with health centres also being less stigmatising and threatening for families.

As Newsam noted in a presentation at a Department for Education seminar in December 2014 good children’s social services and child protection are characterised by a corporate “whole council approach” (Newsam, 2014) and Ofsted commented that “successful joint working between local agencies is paramount if children are to be effectively safeguarded” (Jones, D., op cit).

The political and professional commitment should be to integration and continuity with local focussed and experienced children’s services leaders staying close to front-line services rather than the remotely-led fragmentation and disruption threatened and delivered by market place competition and with the consequent repeated costly cycles of contracting, cash-cutting, uncertainty and re-contracting.


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Walker, D. (2015) David Cameron’s love affair with the voluntary sector is over,  