
Report To:	Social Work & Social Care Scrutiny Panel	Date:	26 August 2025
Report By:	Kate Rocks Chief Officer Inverclyde Health & Social Care Partnership	Report No:	SWSCSP/52/2025/JH
Contact Officer:	Jonathan Hinds Chief Social Work Officer Inverclyde Health & Social Care Partnership	Contact No:	01475 715365
Subject:	Health and Care (Staffing) (Scotland) Act 2019		

1.0 PURPOSE AND SUMMARY

- 1.1 ☐ For Decision ☒ For Information/Noting
- 1.2 The purpose of this report is to update members of the Social Work and Social Care Scrutiny Panel on work undertaken to meet the requirements of the Health and Care (Staffing) (Scotland) Act 2019.

2.0 RECOMMENDATIONS

- 2.1 Members of the Social Work and Social Work Scrutiny Panel are asked to:
- a) note the content of the report; and
 - b) note the report to the Scottish Government (Appendix 1).

**Kate Rocks
Chief Officer
Inverclyde HSCP**

3.0 BACKGROUND AND CONTEXT

- 3.1 The Health and Care (Staffing) (Scotland) Act (HCSSA) was enacted by the Scottish Parliament and received Royal Assent on 6 June 2019. Its implementation was delayed by the Covid-19 pandemic, coming into effect on the 1 April 2024 and makes provisions in relation to staffing by the National Health Service and by providers of care services.
- 3.2 The HCSSA legislation provides a statutory basis for the provision of appropriate staffing in health and care services, to enable safe and high-quality care and improved outcomes for service users. It builds on existing policies and procedures within both health and care services. Effective implementation aims to embed a culture of openness and transparency, ensuring staff are informed about decisions relating to staffing and able to raise concerns.
- 3.3 Inverclyde HSCP instigated a Safer Staffing Programme Board, chaired by the Chief Nurse and Chief Social Work Officer, which meets regularly to coordinate the implementation of the Act with representatives across relevant Health and Social Care teams.
- 3.4 Section 3(2) of the Act places duties on local and integration authorities when “planning or securing the provision of a care service from another person under a contract, agreement or other arrangement”. Specifically, this states that such authorities must have regard to:
 - (a) the guiding principles for health and care staffing; and
 - (b) the duties relating to staffing imposed on persons who provide care services.
- 3.5 Section 3 (6) of the Act places a duty on authorities “as soon as reasonably practicable after the end of each financial year” (by 30 June 2025) to publish information on:
 - (a) the steps they have taken, and
 - (b) any ongoing risk that may affect their ability to comply with Section 3(2) of the Act.
- 3.6 There has been significant consultation between the Scottish Government, the Care Inspectorate, CoSLA and integration authorities on the wider interpretation and scope of the reporting duty in Section 3(6) of the Act. The Scottish Government has said that, as each local authority/integration authority operates differently, the guidance has flexibility to sit alongside existing processes, policies and procedures.”
- 3.7 The HSCP Strategic Commissioning team has liaised with Council Legal Services who provided guidance in relation to inclusion of duties under the Act in relevant tender documents and procurement exercises as required. This liaison will continue for current and future procurement activities.
- 3.8 In addition, Strategic Commissioning colleagues have updated documents under the Contract Management Framework to ensure alignment with the Act.

4.0 PROPOSALS

- 4.1 The Scottish Government produced a template for the reporting duty under the Act which consists of two questions which reflect Section 2(5) of the Act:
 - Please detail the steps you have taken as an organisation to comply with section 3(2) of the Health and Care (Staffing) (Scotland) Act 2019;
 - Please detail any ongoing risks that may affect your ability to comply with the duty set out in section 3(2).

- 4.2 The completed template for Inverclyde HSCP was submitted to Scottish Government by the deadline of 30 June 2025 and is included at Appendix 1. Along with publication of this report on the Council website, this meets the duty under Section 3(6) of the Act.

5.0 IMPLICATIONS

- 5.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO
Financial		✓
Legal/Risk		✓
Human Resources		✓
Strategic (Partnership Plan/Council Plan)		✓
Equalities, Fairer Scotland Duty & Children/Young People's Rights & Wellbeing		✓
Environmental & Sustainability		✓
Data Protection		✓

5.2 Finance

There are no specific Finance implications arising from this report.

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report	Virement From	Other Comments
N/A					

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact	Virement From (If Applicable)	Other Comments
N/A					

5.3 Legal/Risk

There are no specific legal implications arising from this report

5.4 Human Resources

There are no specific human resources implications arising from this report.

5.5 Strategic

Publication of the template enables Inverclyde HSCP to fulfil its duty within the Act and its commitments in the relation to purchased services outlined within the strategic plan and our vision that "Inverclyde is a compassionate community, working together to ensure people live active, healthy, and fulfilling lives."

5.6 Equalities, Fairer Scotland Duty & Children/Young People

(a) Equalities

This report has been considered under the Corporate Equalities Impact Assessment (EqIA) process with the following outcome:

	YES – Assessed as relevant and an EqIA is required.
✓	NO – This report does not introduce a new policy, function or strategy or recommend a substantive change to an existing policy, function, or strategy. Therefore, assessed as not relevant and no EqIA is required. Provide any other relevant reasons why an EqIA is not necessary/screening statement.

(b) Fairer Scotland Duty

If this report affects or proposes any major strategic decision: -

Has there been active consideration of how this report's recommendations reduce inequalities of outcome?

	YES – A written statement showing how this report's recommendations reduce inequalities of outcome caused by socio-economic disadvantage has been completed.
✓	NO – Assessed as not relevant under the Fairer Scotland Duty for the following reasons: Provide reasons why the report has been assessed as not relevant.

(c) Children and Young People

Has a Children's Rights and Wellbeing Impact Assessment been carried out?

	YES – Assessed as relevant and a CRWIA is required.
✓	NO – Assessed as not relevant as this report does not involve a new policy, function or strategy or recommends a substantive change to an existing policy, function or strategy which will have an impact on children's rights.

5.7 Environmental/Sustainability

Summarise any environmental / climate change impacts which relate to this report.

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
✓	NO – This report does not propose or seek approval for a plan, policy, programme, strategy, or document which is like to have significant environmental effects, if implemented.

5.8 Data Protection

Has a Data Protection Impact Assessment been carried out?

	YES – This report involves data processing which may result in a high risk to the rights and freedoms of individuals.
✓	NO – Assessed as not relevant as this report does not involve data processing which may result in a high risk to the rights and freedoms of individuals.

6.0 CONSULTATION

6.1 The report has been informed by consultation with relevant senior officers in the HSCP and members of the local Programme Board.

7.0 BACKGROUND PAPERS

7.1 None.

Inverclyde Health & Social Care Partnership - Health and Care (Staffing) (Scotland) Act 2019: Annual Report

Declaration

Name of local authority / integration authority: Inverclyde Health & Social Care Partnership

Report authorised by:

Name: Jonathan Hinds

Designation: Chief Social Work Officer

Date: 16th May 2025

Details of where the report will be published: <https://www.inverclyde.gov.uk/health-and-socialcare>

Commissioning and reporting duties for local and integration authorities under the Health and Care (Staffing) (Scotland) Act 2019 (HCSSA)

1. Please detail the steps you have taken as an organisation to comply with section 3(2) of the Health and Care (Staffing) (Scotland) Act 2019.

Inverclyde Health and Social Care Partnership (IHSCP) have awarded sixteen contracts, for Registered Care Services, in the financial year April 2024 to March 2025. These sixteen contracts are a mixture of Direct Awards and Tenders. Service area breakdown is as follows:

- 4 Children and Families Services
- 6 Older People Services
- 1 Mental Health Services
- 1 Learning Disability Services
- 1 Primary Care Service
- 3 Services that cover various Client Groups

IHSCP have taken the following steps to comply with 3(2) of the Health and Care (Staffing) (Scotland) Act 2019.

During Procurement Process:

Stipulate that prospective providers must ensure staff are appropriately registered with SSSC or NMC as required.

Assess prospective providers in relation to staffing arrangements proposed to meet the tender requirements. This assessment contributes to overall technical evaluation and may include questions related to:

- Staff training and experience.
- Meeting service outcomes.
- Meeting individual outcomes.
- Support for staff wellbeing.
- Arrangements for ongoing appraisal and supervision, and
- Quality assurance systems.

At point of Contract Award

Terms and conditions of Inverclyde Council Health and Social Care contracts ensure that:

- Providers take cognisance of the HSSCA. Specific clauses are inserted into our Contracts. (For contracts that were awarded pre-inception of HSSCA retrospective Minute of Variations have been issued).
- Staff have PVG checks where required.
- Providers fulfil statutory obligations concerning the employment of staff and are required to ensure they have a sufficient number of suitably trained, qualified and competent staff, in accordance with legislative duties and any Regulatory Body conditions, as well as any additional requirements set out in the Service Specification.
- Providers are required to provide the Council, on request, with full details of all staff job descriptions, person specifications and titles and provide equivalent information in respect of any volunteers or students participating in or involved in the provision of services.
- The Provider is required to comply with all Scottish Government and regulatory and statutory requirements in relation to safe recruitment.
- Providers adopt Fair Work practices including:
 - (a) a fair and equal pay policy that includes a commitment to support the Living Wage (as published by the Living Wage Foundation) including, for example, being a Living Wage Accredited Employer accredited with the Living Wage Foundation or Scottish Living Wage organisation.
 - (b) clear managerial responsibility to nurture talent and help individuals fulfil their potential, for example, a clear career path that individuals can follow including Modern Apprenticeships and the development of Scotland's young workforce.
 - (c) promoting equality of opportunity and developing a workforce which reflects the population of Scotland in terms of characteristics such as age, gender, religion, or belief, race, sexual orientation, and disability.
 - (d) support for learning and development.
 - (e) stability of employment and hours of work, and avoiding exploitative employment practices including, for example, no inappropriate use of zero hours contracts.
 - (f) flexible working including, for example, flexitime and career breaks and support for family friendly working and wider work life balance.
 - (g) support progressive workforce engagement, for example, Trade Union recognition and representation where possible, otherwise alternative arrangements to give staff an effective voice.
- A whistleblowing policy is in place; and
- Providers understand and comply with Human Rights obligations.

During the Lifetime of the Contract

A robust contract management framework is in place which gives assurances to IHSCP and Council that services are being delivered in line with the contract.

The framework details how IHSCP and Providers will be monitored across the duration of the framework either via governance meetings, contract monitoring visits or any other visit that is required.

The governance process is in place for all providers, regardless of type of service or spend and includes six-monthly governance meetings. During these meetings, Providers outline how they ensure they continue to meet their duties within the HCSSA (subject to their requirement to adhere to this).

The contract monitoring template may change upon enactment of the HSCSA to provide better assurance to the HSCP that providers are working in line with requirements, however staffing is already a key area that is monitored during all visits to providers.

Currently contract monitoring covers:

- Organisational / Management issues.
- Services provided.
- Record keeping.
- Service user finances.
- Review procedures.
- Activities.
- Dependency levels & staffing levels.
- Service access/termination Issues.
- Complaints procedures.
- Medication Procedures.
- Review of Policies and Procedures.
- Inspection reports.
- Outcomes.
- Staffing issues (including recruitment practice, training records, supervision records).

While the team has a duty to scrutinise services in line with contractual obligations, this is always conducted in a supportive manner, with a clear focus on improving outcomes for individuals who use services. The contracts and commissioning team have well established working relationships with the Care Inspectorate, as well as colleagues from across the HSCP and wider health and social care system.

The Contracts and Commissioning team have close working relationships with provider organisations and out with formal contract monitoring visits, there can be multiple points of contact with providers in a period of a week. Each point of contact represents an opportunity to discuss any issues which may be impacting upon a provider's ability to deliver services effectively and to improve outcomes for individuals.

This established process allows for an assessment of the guiding principles of the Act:

- Improving standards and outcomes for service users.
- Taking account of the particular needs, abilities, characteristics, and circumstances of different service users.
- Respecting the dignity and rights of service users.
- Taking account of the views of staff and service users.
- Ensuring the wellbeing of staff.
- Being open with staff and service users about decisions on staffing.
- Allocating staff efficiently and effectively; and
- Promoting multi-disciplinary services as appropriate.

At point of Service Review

A service review provides an opportunity for the HSCP to gather information from a service from across the lifetime of a contractual period and to support future commissioning considerations. Service Review templates may be updated upon enactment of the HSCSA in

order to more fully capture how providers have worked to the guiding principles for health and care staffing.

Currently, service reviews will allow for an in-depth assessment of the following areas:

- Current Service Provision.
- Service Demand/Uptake/Outcomes (Quantitative Information).
- Service User and Stakeholder Engagement and Feedback.
- Contract Performance.
- Partnership Working.
- Management and Staff Information.
- Funding and Sustainability.
- Organisational Governance.

This process already allows for an assessment of the guiding principles of the act:

- Improving standards and outcomes for service users.
- Taking account of the particular needs, abilities, characteristics, and circumstances of different service users.
- Respecting the dignity and rights of service users.
- Taking account of the views of staff and service users.
- Ensuring the wellbeing of staff.
- Being open with staff and service users about decisions on staffing.
- Allocating staff efficiently and effectively; and
- Promoting multi-disciplinary services as appropriate.

2 Please detail any ongoing risks that may affect your ability to comply with the duty set out in section 3(2) (as specified above)

- The current financial context for Inverclyde IJB and the cost pressures facing local commissioned providers is projected to require difficult decisions to be made regarding overall health and social care service provision. There is a risk that this may impact on the ability to continuously improve services and outcomes for service users and service sustainability. One area which is placing a high risk on services is the National Insurance increase for employers, which without funding from Scottish Government will lead to significant pressures.
- Linked to the above risk, ongoing challenges in staff recruitment and retention in commissioned services may lead to a reliance on agency staffing models, with potential impact on (i) the continuity of care for service users and residents and (ii) the benefit to individuals' outcomes which derives from strong relationships and understanding with staff.
- While a broad suite of support is available at a national level there is a risk that (i) access to this support varies across commissioned services particularly given ongoing service pressures; and (ii) that the impact of increasing demand coupled with financial challenges and issues in recruitment and retention negatively impact on the wellbeing of staff.