



Building Resilience in Social Services by **Managing Demand**







About the European Social Network

The European Social Network (ESN) is the network for social services in Europe. It brings together the organisations that plan, deliver, finance, manage, research, and regulate local public social services, including health, social welfare, employment, education, and housing. We support the development of effective social policy and social care practice through the exchange of knowledge and expertise.

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EXECUTIVE SUMMARY

The demand for social care, support, and protection is rapidly increasing across Europe, driven by a variety of external and internal factors. This surge in demand places significant pressure on public social services, which are facing budget constraints and recruitment and retention issues. Failure to meet this rising demand could lead to inequality and division within communities' social services serve. Demand management can help empower social services to address these challenges.

Understanding managing demand in social services

Demand management involves efficiently addressing the diverse needs of individuals turning to social services. This encompasses a wide range of support, from welfare payments to long-term care, and aims to provide personalised and effective solutions. Managing demand requires a multi-faceted approach that helps plan and allocate resources appropriately to ensure quality outcomes for supported persons. Demand management also provides social services with an opportunity to develop new approaches and adapt services to address the ongoing cycle of crisis management and build resilience.

Factors driving demand

The demand for social care and support arises from both external and internal factors. Demographic shifts, economic inequality, and global crises contribute to growing demand. Organisational and workforce challenges within social services can further inadvertently create demand. This understanding is based on data collected by the European Social Network (ESN) from various public social service organisations across Europe.

A demand management framework for resilient social services

To address the rising demand for social services, ESN proposes a framework for managing demand and improve the resilience of social service organisations and the people they support. This framework focuses on five pillars:

1. Designing a person-centred journey: A person-centred approach ensures social services properly address individual needs and promote the autonomy of supported persons, which reduces demand. This involves individualised assessments, empowering individuals to navigate the social system independently, providing support with different thresholds, engaging persons in decision-making around their care and support, and ensuring self-sufficiency as the outcome of services.

- **2. Model of pro-active care and support:** By investing in prevention and early intervention, social services can reduce demand for more resource-intensive reactive crisis interventions. Universal prevention measures, relationship-based social work, health promotion, and community development contribute to this model.
- **3. Collaboration and Partnership**: To ensure a holistic approach to meeting complex and diverse needs, demand management involves collaboration with relevant organisations, both within and outside the social services sector. Creating formal partnerships, utilising shared systems such as IT case management systems, and securing buy-in from professionals are key aspects of effective collaboration.
- **4. Data-driven approaches enabled by technology:** Utilising data to understand and forecast demand is critical to making decisions about where to direct resources for tackling demand. Technology, such as predictive analytics and digital tools, can facilitate data collection, analysis, and communication.
- **5. A resilient workforce:** A well-planned, skilled, and supported workforce is essential for delivering person-centred and pro-active care and support that reduces demand. Attracting and retaining social workers, redistributing workforce roles and responsibilities based on training and experience, promoting skills development, and nurturing good leadership all contribute to building a resilient workforce.



About this briefing

This briefing has been drafted in the framework of the 2023 annual meeting of the European Social Network's 'Social Services Transformation and Resilience' Working Group. The meeting brought together social services directors from across Europe to explore strategies for improving demand management in their organisations. Based on this meeting, this briefing aims to provide social services professionals, managers, and directors with an understanding and initial framework of how the concept of demand management can be used to improve the resilience of their organisations and the care and support provided to their communities.

The content of this briefing is based on questionnaires completed by ESN members (mostly public social services at the local, regional, and national levels) in February-March 2023, desk research, and the presentations and discussions during the 2023 meeting of the Social Services Transformation and Resilience Working Group. The questionnaire collected data on the trends and challenges in relation to demand for care and support, as well as respondents' feedback on current efforts to make their organisations more resilient and manage these needs. ESN members from the following countries completed the questionnaire: Austria, Belgium, Croatia, Czechia, Estonia, Finland, France, Germany, Greece, Latvia, Malta, Northern Ireland, the Netherlands, Poland, Romania, Scotland, Slovenia, Spain, Sweden and the United Kingdom. For a detailed overview of respondents, please refer to the Annex.

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1. A crisis of demand

The demand for social care, support and protection is on the rise. Figures relating to people with social needs present an **alarming situation** for public social services in Europe that provide support to the children, young people, adults, and older people faced with personal challenges or crises. Globally, nearly one billion people suffer from some form of mental ill-health (World Health Organization, 2022), 1.3 billion people experience disability (World Health Organization, 2023), 150 million people are homeless (Chamie, 2017), 36 million people have harmful drug use patterns or dependences, (United Nations, 2021), and around 100 million are people forcibly displaced (UNHCR, 2022).

A report from the International Labour Organization (2018) highlights the scale of the challenge to manage this demand, estimating that governments and organisations worldwide will need to collectively invest an additional seven trillion US dollars (equivalent to just under six and a half trillion euros) in social care by 2030. In addition, data from the European Commission Joint Research Centre (2022) shows that investments made so far to improve the availability, affordability and quality of long-term care services have not been enough to meet the rising demand for age-related care services.

At the same time, public social services are increasingly expected to provide people with choice, with personalised services designed around their needs, and enabled by the coordination and integration of service delivery provision. This trend towards the **personalisation of services** places a considerable **financial burden** on local public services responsible for delivery requiring investment in enablers, such as technology and qualified staff (Baltruks, Hussein and Lara Montero, 2017). As a result, public services across Europe are reporting problematic budget constraints (Guagliardo and Palimariciuc, 2021), which, in addition to the **difficulties in recruiting and retaining staff**, is putting social services under immense pressure.

In this troubling context, there is a **growing risk** that people will not receive essential care and support due to **demand exceeding the capacity** of social services to meet it. Failure to meet this demand could also lead to widening inequality, dividing communities even further. Demand management can help empower social services to meet these challenges.

2. What does 'Managing Demand' mean in social services?

Demand in social services arises from a person turning to social services **to address a need.** This can range from a simple interaction, such as processing a welfare payment through an online portal, to responding to multiple and complex types of needs, such

as long-term care for those who wish to remain in their own homes. Social services respond to demand to fulfil their purpose of enhancing quality of life and enabling each person's, group's, and community's potential.

Demand management refers to the process of effectively and efficiently managing the demand for social services **to improve the outcomes** of the people they work for. The multi-faceted approach allows social services to effectively plan and allocate their resources, both human and financial, to deliver high-quality outcomes that respond to the actual needs of persons seeking support. In this way, demand management is a framework for **re-thinking the role and relationship** between social services and the people they support to ensure the **right service reaches the right person** when and where they need it, for the best cost (Local Government Association, n.d.).

Managing demand can improve the experience of persons engaging with social services, by ensuring that the evolving and complex needs of individuals are met in a more efficient and tailored manner. In addition, making work processes more efficient can help save on **unnecessary costs**. Demand management also provides social services with an opportunity to develop new approaches and adapt services to address the ongoing cycle of crisis management and **build resilience**.

Like the concept of social services resilience (ESN, 2022), demand management begins with looking at the system, community and person levels to understand how demand manifests itself across social services as a whole. By identifying **the root cause** of the demand and implementing changes that address these, the level of demand can be managed.

3. Factors driving demand

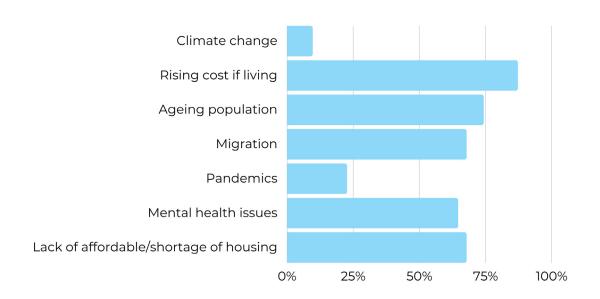
External or internal factors influence the demand for care, support, or protection. As part of the Social Services Transformation and Resilience Working Group, ESN collected quantitative and qualitative data about managing demand in social services. Representatives from public social services across Europe provided information about the global trends impacting demand (external factors) in their organisations and the organisational and workforce challenges (internal factors) to address this demand. This section will provide specifications of the external and internal factors, which are supported by graphs and country-specific examples based on this data.

3.1. External factors

External factors influencing demand are **long-term and broad trends** in our societies that turn into social needs, which are not impacted by how social services are organised and delivered. For instance, demographics can influence demand for social services. An ageing population in Europe has put pressure on welfare states by having to

accommodate increased demand for accessible and affordable quality long-term care (European Commission, 2023). Or when a crisis strikes, such as the Covid-19 pandemic, demand for social services spikes as social needs grow that need to be met while ensuring services' quality, accessibility, and continuity (ESN, 2021a).

Global trends driving increased demand for social services in Europe



"Social issues are becoming increasingly complex. They are often connected in one or multiple ways. The number of people who seek our help is increasing. Their problems cover subjects such as debt, housing issues, questions concerning the upbringing of their children and mental health."

Iris Leene, City of Apeldoorn, the Netherlands.

Several respondents called attention to how the social issues driven by **global trends** are connected in one or multiple ways, which increases the complexity of cases and drives demand. The sub-sections below highlight how economic inequalities, demographic ageing, and crisis situations are driving up social services demand.

3.1.1. Economic inequality

The majority of respondents stated that the **current cost-of-living crisis and growing economic inequality** are the global trends **driving increasing demand** for social services in their local contexts. The German Association for Public and Private Welfare reported that economic inflation, resulting in rising living costs and lack of affordable housing is impacting vulnerable households that were already vulnerable from the

consequences of the Covid-19 pandemic. Barcelona City Council noted that the capacity of their social services and municipal housing services to meet people's housing needs is under pressure due to the rise of housing costs and lack of income.

3.1.2. Demographic changes

As a result of a greying population in Europe, many respondents to our questionnaire noted an increased need for developing services, managing accessibility issues, and housing for older people. For example, for older people living alone in rural areas in Poland, the migration of their family members to urban areas has contributed to an increased demand for individualised services. Respondents from Belgium and Austria noted **the link** in their countries **between an ageing population and increased demand** for various types of care, including home and residential care, healthcare, and shortages of skilled workers to provide these services.

3.1.3. Crisis situations

After the recent crisis caused by the pandemic and the increase in the cost of living and energy costs caused by the invasion of Ukraine, Madrid City Council in Spain observed an increase in the demand for social services from families with minor children, especially single-parent families. The war in Ukraine triggered enormous efforts from social services, notably in Central and South-Eastern Europe, to respond to the needs of refugees from Ukraine. These needs have evolved over time; the Municipality of Bucharest, 6th District, Romania discussed in Episode 2 of the 'ESN Talks' Podcast that while initially accommodation was the most pressing issue, education, health, and financial support have now taken centre stage. As social services move from short-term crisis interventions towards longer-term integration measures, the National Association of Social Workers in Austria noted that this transition presents a challenge in terms of managing demand due to the uncertainty of whether the Ukrainian migrants will stay or wish to stay, as the conflict continues to evolve.

3.2. Internal factors

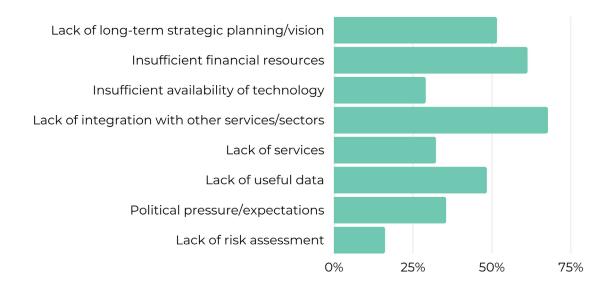
Looking at how demand manifests itself across social services requires also looking at the internal factors that drive demand. From this perspective, demand is understood to be **driven inadvertently by organisational challenges and resource constraints** that negatively impact the capacity of social services to address the root cause of social needs. An illustrative case is homelessness associated with complex needs that persists despite frequent emergency health and social services use, resulting in high human and financial delivery costs, (Pleace and Culhane, 2016), which drives demand through ineffective use of resources and the root causes of the demand not being addressed.

Identifying these internal factors allows social services to implement improvements that can ultimately reduce overall demand. For social services, examples include the following:

- ineffective services that **fail to make the change** that enables supported persons **to avoid repeated issues or use of services**;
- care and support models not geared towards preventing demand from escalating into more complex social needs that could have been addressed earlier;
- inefficient ways of working, such as the duplication of work by different agencies;
- **lack of integration**, such as no agreement for sharing data across agencies or sectors.

The following sub-sections explore how fragmentation and issues in the workforce are impacting social services capacity to reduce demand based on examples from the questionnaire.

We asked social services in Europe what organisational challenges they faced in managing demand:



We asked social services in Europe what challenges in managing demand from the perspective of workforce:



3.2.1. Lack of integration between social services and other sectors

Most of the respondents highlighted lack of cross-services or sectoral integration as the main organisational challenge to tackling demand, some of whom also provided examples of how this **fragmentation impacted their capacity**. Bucharest's 6th District City Council reported that cases of sexual abuse were not properly handled across the various systems involved due to inadequate coordination between the judicial and social support services. The Maltese Support Agency identified a lack of education and awareness on disability within other sectors as increasing demand on the disability support sector to cater for needs outside of the responsibilities of their services. The French National Observatory of Child Protection reported there is no coordination between national stakeholders and local authorities to create integrated databases on educational background and reasons why children are in the welfare system, resulting in a lack of useful data regarding child protection on a national level.

3.2.2. Workforce issues

Staff shortages and high workload were identified as key challenges to meet demand in their organisations that is increasing in volume and complexity of needs. The city of Apeldoorn in the Netherlands is facing acute staff shortages and high workloads in their youth and children's services, which has negatively impacted service delivery. The resulting turnover of staff has led to a loss of valuable knowledge and discontinuity in relationships between service providers and the persons they support. In the context of an ageing population and a crisis in workforce recruitment and retention, the Northern Ireland Social Care Council (UK) highlighted an urgent need for workforce transformation and improved development of, and recognition for, social services staff to be able to respond to demand.

4. Towards a demand management framework for resilient social services

The demand social services are facing requires a **holistic response** that considers external factors, such as demographic shifts or crisis situations, as well as internal factors, for example, how social services themselves are organised and delivered. The working group focused on discussing how social services leaders could transform their services and organisations to better manage demand taking these factors into account. Based on those discussions and good practice collected in the questionnaire, this section proposes five pillars that could be considered in a demand management framework to build resilient social services.



4.1. Designing a person-centred journey through social services

Everyone has their own experiences and complexities that may translate into specific needs. Service delivery should be **flexible and individualised** to ensure they respond to the care and support needs of a person. For example, older people need consistent, high-quality care in their community with intervention from as few people as possible to enable relationship-based practice at the heart of the model of care. Children and young people and their families with complex needs need long-term support that grows with the child across the life cycle.

Developing services that are person-centred in their design, implementation and evaluation supports better demand management and builds resilience of social services

and the people they work with. A person-centred approach acknowledges that human beings are **multi-dimensional** and places the goals, values, and preferences of the person, as an expert of their own experience, at the centre in the development and provision of their care and support.

Some of the building blocks of a person-centred journey for people supported by social services are:

i. Individualised assessment

A person-centred journey through social services begins "when a person comes looking for care or support, one caseworker should take charge of the whole story," said member of the ESN working group, Arnaud Lopez, Director of Solidarity and Child Protection, Department of Hauts-de-Seine, France. This approach will help minimise the risk of the person having to repeat their story multiple times to receive support. For instance, in child protection cases, this can lead to repeated trauma where a child could repeatedly be confronted with their memories of abuse. A good example of case handling comes from the Social Protection Department in Cluj-Napoca, Romania that assigns one caseworker per family who is responsible for managing all the benefits relating to their request for support.

ii. Empowered to independently access the system

For the person, being empowered means they know where to go for access, they know what services they can receive, and they do not need counselling to help them around the system. On the importance of making social services easily accessible, Kathleen Wabrowetz, Head of Department, German Association for Public and Private Welfare, highlighted certain challenges in Germany; "we have a very fragmented system, people need to go through a great deal of bureaucracy and go to different offices to get the support they need." Social services need to anticipate **potential barriers** to persons seeking and receiving support, such as a stigmatising environment where the person does not feel safe and secure or complicated and repetitive administrative procedures where the same documents need to be provided over and over again.

iii. Low threshold for preventative measures, support, or benefits

Building systems based on **trust over control** can allow for more resources to be directed towards **support and co-creation**, which can serve to improve the relationship of trust between people and public services. (see Case Study 1).

Case Study 1: Trust-Based Approach in Apeldoorn, the Netherlands

Responding to an increasing level of poverty and a lack of trust towards local social welfare support, the city of Apeldoorn decided to change the journey of receiving social assistance to a <u>Trust-Based Approach</u>. The new system allows persons seeking social assistance to direct the support they need instead of the system leading the journey with strict controls and benefit conditions relating to labour market integration.

Under the Trust-Based approach, when a person requests a social benefit, they first have a conversation style assessment (1.5 to 2 hours) in a comfortable setting to connect with the social welfare department. Following the assessment, the person can enter three tracks personalised to the level of support needed to re-integrate into the labour market.

- Green (high trust): Aside from identity check, no specific administrative proofs are required, such as bank details or proof of address. The contact point of the person is a front-office professional and within two days the request is completed.
- **Blue (trust):** For more complex situations, such as when the person has a mortgage or life insurance, some additional documents are needed. The person will receive a decision within eight days.
- **Red (distrust):** For cases when there are some risks, such as fraud history, a risk colleague takes over and takes a different approach with requests for more details.

In Apeldoorn, the majority of persons (70%) follow the GREEN track where they can decide how support they would need to find a job at their own pace. They are not subjected to an obligation to apply for jobs and control appointments. Persons from the self-directed track are more likely to become self-reliant, experience positive well-being and improved mental health, and find a job just as quicky as those in stricter control tracks.

In terms of impact on the social welfare department, there were fewer costs and less professionals involved as the process from intake to providing support was reduced from 4-6 weeks to 1-2 weeks.

iv. Participation in decision-making

The person being supported, relatives, carers, and communities should be included in the decisions around the care or support being provided. This means asking what help and support people would need to maintain their independence, co-designing services with them, soliciting feedback to evaluate the service delivery, and continuously refining and modifying responses based on feedback received. Adopting a **shared care and support relationship** means services will remain adaptable and consistent to personal needs and expectations in line with the principle of continuous improvement of service delivery.

v. Self-sufficiency as the outcome

Understood as living as independently as possible at home, or somewhere the person can identify as home and feels comfortable with, should be the outcome of a person-centred journey through social services. A framework for managing demand should also focus on **building the person's resilience**, where the system helps people understand their own condition and access support networks. Guest speaker at the meeting, John Bolton, an Independent Health and Care Systems Consultant, explained that "services focused around reablement, rehabilitation and recovery that help people, but not make them dependent on the system can significantly reduce demand." For example, England's Local Government Association has created a High-Impact Model on the actions to take to reduce preventable admissions to hospital and long-term care and enable people to stay in their homes (see Case Study 2).

Case Study 2: High Impact Change Model by the Local Government Association, England, United Kingdom

The Local Government Association developed a <u>High Impact Change Model</u> (<u>HICM</u>) that aims to support local care, health, and wellbeing partners to work together to prevent, delay or divert the need for acute hospital or long-term bed-based care. The HICM identifies actions and interventions which will enable systems to understand their populations, identify those most at-risk of a preventable admission and take action to engage individuals and target support to improve their health and wellbeing.

The model proposes nine 'changes' including multi-disciplinary working, flexible working patterns, and trusted assessment. Each change is accompanied by a maturity matrix of what the different stages of change look like and emerging or developing practices.

The tool includes a <u>planning template</u> for social services to develop an improvement plan for their own local context to minimise unnecessary hospital stays and encourage them to consider new interventions.

4.2. A model of pro-active care and support

By developing pro-active services, such as prevention and early-intervention, and focusing on community development, social services can, in the long-term, reduce the demand for more resource-intensive reactive services, such as crisis interventions, and keep people out of the system by promoting well-being and autonomy. Below are some key aspects of a pro-active model of care and support that supports better demand management:

i. Universal prevention

A wide variety of crisis situations including unemployment, homelessness, poverty, and addictions can lead to demand for social services. To create preventative measures addressing the root cause of these drivers of demand, Robert Brandt, Head of Social and Healthcare Department in Östersund, Sweden said it "requires a societal shift to include a social care perspective in all departments and agencies. This form of universal prevention goes beyond collaborating to address immediate needs." In Sweden, the social perspective is incorporated into city planning with national regulations obliging new or renovated residential buildings with multiple floors to have an elevator that is wheelchair-accessible.

ii. Relationship-based social work

By providing early intervention services, such as counselling or support groups, issues can be identified and addressed before they become more complex and require more intensive support. In turn, this will reduce demand. Creating relationships of trust with the person, families or children being supported is key to social services receiving the signals before crisis situations arise. In Riga, Latvia, social workers from the Youth Support Centre establish a relationship of trust with young people leaving out-of-family care at an early stage and provide peer support groups (see Case Study 3).

Case Study 3: Youth Support Centre in Riga, Latvia

The Youth Support Centre (YSC) was created by Riga City Council at the end of 2019 as part of changing their way of working with young people towards a more preventative approach.

The YSC is a unit of the Children and Youth Centre, which carries out social work with young people in the transition period to adult status. The unit ensures the well-being of children, facilitating a smooth transition to adulthood, addressing social exclusion, and dealing with challenges arising from family breakdown.

Social workers from the YSC make contact with young people before they leave state care, to co-create an independent living plan and educate them about their social rights. The young persons also have access to a support network, 18 interest groups and socially responsible events.

iii. Health Promotion

Prevention also involves promoting healthy behaviours and lifestyles to reduce the risk of illness or injury. Social services can play a role in health promotion by providing education and resources on topics such as nutrition, exercise, and mental health. An example of a universal preventative approach is automatically sending a letter when people turn sixty-five with information about nutrition, physical activity, social activities, and local meeting areas.

iv. Community development

A healthy and supportive community is crucial for early intervention measures and maintaining people's autonomy. By working collaboratively with community members and stakeholders, social services can receive early warning signals related to poverty, housing, and education, among others. Examples from Belgium include bridge figures between schools and social services and low-barrier outreach in the form of student drivers that deliver meals to people over sixty-five or in need of care who and make contact, listen to their needs, and answer questions.

Furthermore, concepts, such as the <u>Asset-Based Community Development (ABCD)</u>, can help tap into the potential of the community by focusing on their strengths and assets instead of approach that focuses on identifying and servicing needs. Marta Faba, Social Services Director of Barcelona City Council, Spain stressed that "a key aspect of reducing demand is maximising pre-existing resources in the community instead of creating new social resources." The city of Apeldoorn in the Netherlands has piloted ABCD in one of their neighbourhoods where the qualities, talents and ambitions of supported individuals are mapped out during their assessments.

v. Getting the balance right

The potential downside of prevention is that social services can inadvertently bring people into the system too early, which could lead to people **stop doing things** for themselves because they no longer need to live independently. Where possible, a needs assessment by the caseworker should be carried out at the right time for the person requesting support and before a crisis situation occurs.

For example, Chester Council, UK has implemented such a model where an occupational therapist is responsible for the first assessment when a person turns to the council for adult social care with a physical health issue. With a mindset of getting people to be physically independent, therapists are well placed to identify what can be done in the short term to support the immediate needs and living independently in their communities for longer, thereby avoiding the need for ongoing support.

4.3. Collaboration and partnership

Social services need to address complex and diverse needs, a demand best managed by adopting a holistic and integrated approach where all domains of life, such as access to work, childcare, mobility, housing, health care, and education are all taken into account. Addressing these needs requires different actors. Together with other organisations, social services need to develop outcome-focused collaborations around the social needs of a person and develop partnerships to share resources, coordinate services, and address social needs. The following aspects are important to consider:

i. Mapping and formalising partnerships

There is no one template for integrated working, therefore integration begins with mapping all the available support services and creating or re-designing the network of partnerships with the organisations involved in the provision and management of social care and support. For social services this may mean a discussion involving other departments, such as transport, health and education, community-based organisations, and the private sector. Formalised agreements between the involved organisations and government levels help ensure the collaboration is institutionalised and continues when staff move to other positions. For example, the Directorate of Social Assistance and Child Protection, Bucharest 6th District City Council, Romania led the establishment of collaborative procedures between social assistance services, the police, health services, and the prosecutor's office to coordinate more efficient responses to cases of child abuse.

ii. Shared IT systems

Social services should invest in tools to manage personal cases more efficiently, for sharing data across services, and improve agencies coordinating on cases. For example, case management systems can be used to track client information, schedule appointments, and coordinate services across multiple providers. These systems, such as assessment tools, should be co-created with the end users, in this case social services professionals, to ensure they are fit for purpose.

iii. Securing buy-in from professionals

Empowering the professionals that are delivering coordinated responses across teams and departments is critical to their success. The involvement of different agencies with different working cultures may bring challenges that require time to **nurture a shared vision**. Addressing this issue, the National Observatory for Child Protection, France organises monthly events between local authorities, nonprofit organizations, public services and the scientific community working on child protection focused on specific issues professionals are facing to try to develop collective solutions and tools to help improve the quality of child protection services.

4.4. Data-driven approaches enabled by technology

Better data on local social needs and the outcomes of services improves the capacity of social services to understand and manage demand. Technology can act as an enabler in the collection, analysis, and implementation of data relating to current and future social needs. Digital tools can also be used to empower people supported by social services and collect information on their needs. The following aspects are important to consider:

i. Collecting data to understand demand

To build an awareness on what is driving demand in their communities, social services need to look at how global trends, such as demographics and economic conditions, translate into local needs that may be interconnected and respond appropriately. A good example is a research report the Masovian Policy Centre in Warsaw, Poland is preparing on the regional causes and scale of energy poverty in response to rising energy prices and inflation.

Social services also need to collect **sufficient and relevant data** on the people they support and share this information in secure systems with other agencies involved in the provision of care. Outreach methods can be useful to collect data on needs in the community. Social services can engage with younger generations in digital spaces such as social media platforms and communities for this purpose.

ii. Using data to forecast needs

Social services need to uncover intelligence from collected or available data and information on the internal and external factors driving demand. Analysing data trends and patterns can enable social services to determine commonalities across cases, understand the root causes of social needs, and identify emerging needs and respond with targeted interventions at an early stage. For example, the Public Centre of Social Welfare in Bruges, Belgium compares their data on families in poverty with schools' student data to identify families requiring payment of school invoices via a third-party payer system.

Moving beyond using data to look back towards a **foresight perspective** is key to building up the **anticipatory and reactive capacity** of social services to manage demand. Social services should invest in predictive analytics, such as machine reading and learning techniques, to assess sets of data and forecast trends. Having better knowledge of future demand allows social services to make better informed decisions about where to **direct resources** and **optimise costs**. In this regard, forecasting and crisis management are linked by uncovering the data to be better prepared for emergencies.

iii. Harnessing digital solutions in the community

As technology is part of everyday life for many people in Europe, social services can adapt their models to consider that people are willing **to invest in their own technology** for their own care needs. There are many examples of trainings and workshops for older people to introduce them to, and improve their ability to use technology, such as mobile devices. This form of empowerment can then be used by social services to communicate with older people digitally. Online platforms and mobile applications can also be used by social services to provide people with information and support, as well as to collect data about their situation. One such platform, MyKanta, a national e-service in Finland (presented at the 31st European Social Services Conference), provides people with an overview of their own health and social data as well as facilitating the sharing of that data between social welfare and healthcare service providers, and pharmacies.

4.5. A well-planned, skilled, and supported workforce

Any framework is only as strong as its weakest element, and the social services and care workforce is under **immense pressure** with understaffing, an ageing workforce and difficulties in recruiting sufficient and skilled workers. A well-planned, skilled, and supported workforce is needed to deliver person-centred and pro-active care and support that reduces demand.

Below are several areas where social services can focus on to develop a workforce that can manage demand better:

i. Making social work more attractive

Social work is a skilled employment. However, the desired profiles do not always apply, resulting in unfilled or permanent vacancies. To increase numbers in the social work workforce, the profession needs to remain a viable and attractive option for future student generations. With younger generations increasingly motivated by the impact of their work, this will **require raising awareness and communicating about the impact of social services** workforce on today's significant and pressing societal issues.

"In Poland there is a great difficulty in recruiting young people as social work is not a first choice as a profession. In addition, due to a lack of attractiveness of the sector for men, there is a massive gender gap in the workforce."

Pawel Rabiej, Development Director, Janusz Korczak Pedagogical University, Warsaw,
Poland

Further opportunities could be created by basing recruitment on personal traits instead of pre-existing skills, opening up a larger pool of people from whom to recruit who can be supported to gain the skills required for the area they will work in. For example, in

Sweden, some public social authorities are employing people in social care with no prior specialised education and pay for their education as part of their onboarding.

ii. Improving retention

Staff engagement is important for creating a **positive workplace culture** and for retaining staff. This involves involving staff in decision-making processes, recognizing their contributions, and providing opportunities for feedback. The **management of workload** is critical for ensuring that staff can provide high-quality services while also maintaining a healthy work-life balance. This involves monitoring workload, providing support for staff who are experiencing high levels of stress, and offering flexible work arrangements where possible. In Episode4ofthe'ESNTalks'Podcast, Karin Schweinegger, Director of Human Resources, Consortium of Retirement Homes Vienna, Austria shared how they have considered individual needs of the workforce; staff are offered working from home arrangements and can bring pet dogs to the office.

iii. Redistributing workforce roles and responsibilities

Social services should have a workforce strategy in place to ensure the right people with the right knowledge and skills are in the right place at the right time. Social workers, especially, those who have more training and experience, should be placed **in more complex and decision-making tasks**. For example, social workers in Warsaw, Poland, carry out data analysis on the needs in specific districts and population groups and are responsible for contracting services to address these. If tasked with building relationships, social workers need the **time and freedom** for those relationships to develop and not be burdened by administrative and bureaucratic procedures.

"Taking into account that in the short term we are going to have a lack of workforce, part of the solution is dividing tasks. We need to save complexity for the more trained people with more experience. This is the only way we will cope with future demand."

Marta Faba, Social Services Director of Barcelona City Council, Spain

As part of the redistribution of tasks within social services and care workforce, the question of what other sectors can take on needs to be considered. Civil society, volunteers or para-professionals can be deployed at the community level, for example, to carry out assessments, if provided with the relevant training. **The voluntary and community sectors** need to be nurtured as part of the social services system, to ensure they are properly funded and resourced, community-based, needs-led and focused on empowering people to make their own decisions and choices about what they need and who should provide these services.

iv. Promoting skills development

Social services need to continuously identify the required competence and capability from the whole workforce to meet evolving demand. Creating the conditions for the workforce to learn and be trained in the necessary skills is a crucial next step. For example, the Northern Ireland Social Care Council, UK has created an online learning platform to support the continuous professional development of social care students, workers, and managers (See Case Study 4).

Case Study 4: Learning Zone by the Northen Ireland Social Care Council, UK

The <u>Learning Zone</u> is a website platform that offers free learning and development resources to complement the training offered by employers. The platform provides free modules on core transferable skills applicable to all of the workforce, such as building digital capability or values, behaviours and person-centred practice.

The Learning Zone aims to:

- Provide social carers and workers with access to a range of information/ topics that they need to know and remember – to supplement and support their continuous learning journeys
- Ensure social carers and workers are provided with consistent messages about standards, values and best practice and why continuous learning facilitates delivery of safe, effective and value-led care and support.
- Offer social carers and workers opportunities to learn at a time and pace that suits them, as and when they need to do so.

v. Nurturing good leadership

Within the workforce, it is important to have **leaders and champions** at all levels that can bring forward the ideas part of a demand management framework, such as person-centred approaches, early intervention, and empowerment. Achieving the changes in organisation to reorganise services to be person-centred is a time-consuming process. In a sector that is overburdened, it can be difficult to change the way of working when it may require extra efforts. Declan McAllister, Director at the Northern Ireland Social Care Council, emphasised the vital role of "leaders and champions in social services as high-trust individuals with a creative mindset and determination can incentivise change by bringing focus to the importance of the transformation and showcasing success."

5. Conclusion

This briefing has shown how creating **outcomes that promote the autonomy** of the people social services care, support and protect is central to **managing and reducing demand**. Leaders in social services designing a demand management framework for their organisation need to understand the root causes of the demand in their communities, which considers external factors, such as crisis situations, and internal factors, such as how their services are organised and delivered. In this way, demand management is also related to resilience in trying to understand how the future may look like, anticipate shocks, and adapt or transform accordingly.

This briefing proposes five pillars as the groundwork for a demand management framework for social services:

- 1. Place individuals at the centre of service planning, delivery, and evaluation. A person-centred journey through social services acknowledges the diverse needs of each individual and seeks to tailor support accordingly. Designing a journey guided by the principles of empowerment and self-sufficiency promotes autonomy of persons being supported, thereby reducing demand.
- 2. Shift towards a model of proactive care and support. By concentrating on prevention and early intervention, social services can reduce the demand for more resource-intensive reactive interventions. Universal prevention measures, a relationship-based model of early social work interventions in the community, as well as health promotion, all play crucial roles in creating a proactive model of care. Striking the right balance is essential to provide support for individuals at the right time, always promoting their autonomy.
- 3. Foster collaboration and partnership. Complex and diverse needs demand a holistic and integrated approach. Social services need to collaborate with other organisations and formalise partnerships while integrating digital systems to facilitate more effective coordination and information sharing. Collaboration is not an end in itself, but a means to improve outcomes for those being supported and manage demand.
- 4. Implement data-driven approaches enabled by technology. Collecting relevant data helps social services better understand the drivers of demand, and predictive analytics enable the anticipation of emerging needs. Investments made in technology by social services offer opportunities to improve data collection and analysis and support people to remotely manage their care and support.

5. Introduce measures to ensure a well-planned, skilled, and supported workforce, critical to delivering a person-centred and pro-active model of care and support, which also reduces demand. Attracting and retaining the right people in the social sector is essential. This can be achieved by making social work more attractive, improving retention through staff engagement and workload management, redistributing workforce roles and responsibilities, promoting skills development, and nurturing good leadership at all levels.

In conclusion, a demand management framework for social services requires a multifaceted and integrated approach. The five pillars outlined in this briefing are the initial steps social services can take in such a framework to improve the resilience of their organisations and the people they care and support. This framework should guide social services towards a person-centred, proactive, data-driven, collaborative approach to managing demand powered by a well-supported workforce, which will contribute to the sustainable development of social services, ensuring they continue to meet the needs of the communities they serve.



Annex: Respondents

Organisations completing the questionnaire on managing demand in social services.

Country	Type of Organisation	Organisation
Austria	Association	National Association of Social Workers (OBDS)
Belgium	Public authority-local	Public Centre for Social Welfare (PCSW) Bruges
Croatia	Public authority-local	City of Zagreb, Office for social protection, health, war veterans and persons with disabilities
Czechia	Public authority- national	Ministry of Labour and Social Affairs
Estonia	Public authority-local	Tartu City Government, Department of Social and Health Care
Finland	Public authority-local	Satakunta Wellbeing Services County (Association of Directors of Social Services – Finland)
France	Public authority-local	Department of Hauts-de-Seine
	Public authority- national	National Observatory of Child Protection (ONPE)
Germany	Association	German Association for Public and Private Welfare
Greece	Public authority-local	Municipality of Athens – Social Solidarity Directorate
	University/Research Institute	Social Administration Research Laboratory (SARL), University of West Attica
Latvia	Public authority-local	Riga City Council - Department for Welfare
Malta	Public authority- national	Agenzija Support

Country	Type of Organisation	Organisation
Northern Ireland	Public authority- national	Northern Ireland Social Care Council
The Netherlands	Public authority-local	City of Apeldoorn (DIVOSA)
Poland	University/Research Institute	Janusz Korczak Pedagogical University in Warsaw
	Public authority- regional	Masovian Social Policy Centre
	Public authority-local	City of Warsaw
Romania	Public authority-local	City of Cluj-Napoca, Department for Health and Social Welfare
	Public authority-local	Bucharest's 6th District City Council - General Directorate of Social Assistance and Child Protection
Scotland	Public authority- national	Care Inspectorate
Slovenia		Social Chamber of Slovenia
Spain	Public authority-local	Madrid City Council
	University/Research Institute	Avedis Donabedian Research Institute - Autonomous University of Barcelona
	Public authority-local	Barcelona City Council - Institute for Social Services
	Public authority- regional	Regional Government of Catalonia, Department of Social Rights
Sweden	Public authority- national	Swedish eHealth Agency
	Public authority-local	City of Ostersund (Association of Directors of Social Welfare Services)
United Kingdom	Association	Local Government Association

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