14th July, 1969

CABINET

IMPLEMENTATION OF THE REPORT OF THE COMMITTEE ON LOCAL AUTHORITY PERSONAL AND ALLIED SERVICES

Memorandum by the Secretary of State for Social Services

The central recommendation of the Committee on Local Authority Personal and Allied Services (the Seebohm Committee) was that a unified social work service should be provided at local level as follows:

(a) The local authority children's and welfare services should be amalgamated and should absorb social work functions of local authorities as health authorities and certain social work functions in the fields of education and housing.

(b) There should be a statutory committee responsible for these services and with no other major responsibilities.

(c) There should be a statutory officer responsible to this committee for these services and not subordinate to any other principal officer.

(d) Appointments to the principal officer post should initially be subject to Ministerial approval.

(e) These organisational changes should be made obligatory on all the responsible authorities (i.e. county councils, county boroughs and London boroughs) as soon as possible, without waiting for local government reorganisation.

We have made it clear that we should not announce any decisions upon the Report until we have consulted local authority and other interests concerned (CC(68) 36th Conclusions, Minute 3) and that we should have to examine the Seebohm Report and the administrative reorganisation of the health services together in the light of the recommendations of the Royal Commission on Local Government in England (the Redcliffe-Maud Commission).
2. The Ministerial Committee on Social Services have now considered all these in close association with the Ministerial Committee on Local Government Reorganisation. Their view is that we should —

(i) Announce how our agreement with the Seebohm Committee's central recommendation in respect of the children's and welfare services and the personal social services now in the health field (leaving social work in education and housing for later consideration).

(ii) Discuss with local authority and other interests how best to give effect to this against the background of the Redcliffe-Maud Report.

(iii) Announce in the autumn our decisions on this and the related issue of the future local authority role in the health field, and later in the year publish a revised Green Paper on the Administrative Structure of the Health Services.

The purpose of this memorandum is to seek the Cabinet's agreement to an announcement, in the terms of the draft attached, of our acceptance of the main Seebohm recommendation and of our intention to discuss with those concerned how best to make a start with implementing it.

Method of implementation

3. On the method of implementation the Social Services Committee saw three alternatives —

(i) To do nothing until decisions have been taken on the Redcliffe-Maud Report.

(ii) To implement across the board the essential Seebohm recommendation (paragraphs I(a)-(d) above) i.e., a unified local authority social work department; a statutory local authority committee; and a statutory principal officer.

(iii) To implement the essential package selectively. This means applying it where there is no good reason to wait for the completion of local government reorganisation. It is common ground that it should be applied to the London boroughs, which have already been reorganised, at an early date after legislation is obtained, and to Wales and Monmouthshire at a date which appears to the Secretary of State for Wales to be appropriate, having regard to the progress of local government reorganisation in Wales, assuming legislation in the 1969-70 Session.
To do nothing until after local government has been reorganised

4. The Ministers responsible for the principal local authority personal services (the Home Secretary and I), put strongly to the Social Services Committee our reasons for thinking that we could not afford to wait until the new reorganised local authorities were about to take over - perhaps in April, 1974 - before taking action on the central recommendations of the Seebohm Report. Our reasons were -

(a) That the formation of a single local authority social work service is long overdue.

(b) That delay is detrimental to the morale of the services and to the welfare of their clients, inhibiting necessary improvements in the service.

(c) That some local authorities were reorganising their committees or departments to bring the personal social services under the Medical Officer of Health, which conflicts both with the central core of the Seebohm Report and without our proposals for reorganising the health services.

The Social Services Committee accepted the view that, faced with this situation, we could not delay the implementation of the Seebohm Report until local government reorganisation was complete. We must therefore consider how best to proceed pending local government reorganisation.

The comprehensive solution

5. A clear majority of the Social Services Committee considered that the minimum requirements set out in paragraph 2(i) above should be made mandatory on all existing local authorities in England at an early common date. The principal argument in favour of this is that the integration of the local social services and the reorganisation of local government itself are operations of different kinds and would have their principal impact at different levels. The integration of the social services would mainly affect the social workers on the ground. The reorganisation of local government, however, would affect primarily the number of principal officer posts in the country as a whole, and the extent of the area, and hence the number of local sub-divisions, each with its social work team, for which each principal officer was responsible. But there is no reason why it should produce major repercussions on the social work teams on the ground. It might even be an advantage to have the reorganisation of the social work services well in train before the reorganisation of local government had to be undertaken.
6. In addition, the mandatory introduction of the central Seebohm reforms in all existing local authority areas would place a responsibility for child care and the legal obligations flowing from it clearly on the appropriate Committee and principal officer. It would restrain those councils which wanted to be free from statutory requirements in respect of children from setting up an unsatisfactory form of organisation. And it would give the social work services the confidence necessary for the proper development of the services. Any other course would be bitterly opposed by the professional social work organisations.

7. Finally, there is no guarantee that the reorganisation of local government would not take longer than is now planned. It is therefore the more important to ensure that the Seebohm reforms do not wait on the reform of local government. Delay or selective application would merely result in the best staff being drained from authorities that wait for the Redcliffe-Maud reorganisation, and the standard of the less able authorities would thus be depressed still further.

The selective implementation of the Seebohm recommendations

8. Selective implementation was preferred by a minority of the Committee which included the Minister without Portfolio and the Minister for Planning and Land. They argued that we should be liable to criticism if we introduced legislation to require all the 124 county councils and county boroughs in England outside Greater London to reorganise their social services at a time when it will already be known that a substantial proportion of them will have only two or three years of separate existence left, and when all local authorities will be preoccupied with wider problems of local government reorganisation. This reorganisation would have repercussions at both headquarters and operational levels in each authority; a double set of changes within a short space of time would be damaging to the services themselves. Moreover, the argument for carrying out the Seebohm reforms before the reform of local government itself is in embarrassing conflict with the argument for setting aside the recommendations of the Boundary Commission in order to avoid two changes in constituency boundaries within a few years.

9. On the other hand, a selective approach would permit the reorganisation of local authority social service arrangements to be linked with the progress of local government reorganisation. The 33 London authorities (which are not threatened with local government changes) would be required to adopt the new set-up straightaway. If, in addition, the Seebohm arrangements were applied to existing authorities which appeared likely to be the basis of a future main authority, it is estimated that the total in England on this basis might amount to nearly one-third of the existing authorities concerned, or, numerically, more than one half of the future Redcliffe-Maud authorities.
10. The selective approach would also make it possible to simplify the legislation by leaving undisturbed, pending general reorganisation, the present statutory arrangements which now allow about 30 larger district councils in some 20 counties to exercise delegated functions in the fields of health and welfare.

11. The alternative comprehensive solution would mean altering many authorities' arrangements again soon after they had been made and would involve the displacement of many newly appointed officers. Finally, with regard to the critical problem of morale, this could be restored and local authorities deterred from adopting different patterns of organisation by a clear Government statement in favour of the Seebohm pattern and a selective approach by legislation which would make a start on the implementation of Seebohm and would indicate the Government's intention that it should, on reorganisation, become general.

Conclusion

12. It is not necessary - and indeed would be wrong - for the Cabinet to reach a decision now on whether to implement the central Seebohm recommendations across the board or selectively. The Social Services Committee will make firm recommendations on this in November in the light of further discussions with the local authorities, with a view to the introduction of a Bill at the end of January. The points on which a decision is required are -

(i) The acceptance of the Seebohm Committee's central recommendation that the children's and welfare services together with certain personal services now the responsibility of the local authority health departments should be brought together in a single local authority social service department.

(ii) The proposal to make a start with implementing the Seebohm Report ahead of the main local government reorganisation by introducing early legislation.

13. In addition, the attached statement, which I propose to make before the Recess, will make it clear that the integrated administrative structure of the health services, the need for which will be restated in a revised Green Paper about the end of the year, will include the personal health services now provided by the local authorities. It is important to say this now, without prejudice to other decisions on the administrative structure of the health services, in order to give an indication of the future functions of the local authority social service departments and of the bodies responsible for the unified health authorities.
14. Accordingly I ask the Cabinet to authorise me to make a statement in the House of Commons in the terms of the draft annexed to this memorandum. The draft has been approved by the Social Services Committee.

R.H.S.C.

Department of Health and Social Security, S.E.I.

14th July, 1969
The Government has always made it clear that it would be necessary to examine further the report of the Seebohm Committee on Local Authority and Allied Personal Social Services and the form of the administrative reorganisation of the health services together in the light of the recommendations of the Royal Commission on Local Government in England. The Royal Commission's Report was not available until early June, and those concerned require time to assimilate it before giving their further views. We shall therefore aim to announce decisions on the Seebohm Committee's recommendations and on certain matters affecting the health services in the autumn and to issue later in the year a revised Green Paper on the administrative structure of the health services for public discussion.

But I can say now that the Government is in agreement with the Seebohm Committee that the main social work services, i.e. the children's and welfare services, together with certain personal social services now the responsibility of local authority health departments, should be brought together in a single local authority department. We are ready to make a start with implementing the Seebohm Report and we accordingly propose to conclude consultations at the end of October with a view to the introduction of early legislation.

Given this timetable, the Government wish to reiterate that local authorities would be most unwise to embark on schemes of reorganisation which might in the event be found incompatible with the Government's decisions.

I can also confirm that the Government's revised proposals for the health services will restate the need, which has commanded widespread support, for bringing together into an integrated administrative structure the hospital service, the family practitioner services under Executive Councils and the personal health services provided by local authorities. The Government further recognises the need for the new integrated structure to reflect the demand for participation by the community. The announcement I shall be making in the autumn will
deal with the latter point. It will also indicate where, in the Government's view, the dividing line should be drawn between the personal social services integrated in the new local authority departments and the newly integrated health services and the relationship of the latter to a reformed system of local government.