

Is it impossible to turn back the tide?

According to legend, King Canute put his throne on the beach and commanded the tide to halt and not wet his feet and robes; but the tide failed to stop. Canute leapt backwards and said "Let all men know how empty and worthless is the power of kings".

Canute was an especially powerful and successful king (simultaneously King of England, Norway, Denmark and parts of Sweden for almost 20 years) but even he knew there were some things he couldn't do. For officers in local government, the tidal wave of demand hitting them from vulnerable adults and children must sometimes make them feel like King Canute.

It isn't as if central government is helping much to reduce the financial burden – Directors of Adult Social Care don't expect the DH Green Paper on Adult Social Care (whilst welcome) to lead to anything significant for a few years at least; meanwhile DCSF is ratcheting up the pressure on Directors of Children's Services to eliminate risk to the point where the number of care proceedings are now at record levels – leading to ever more costs in future.

At the same time, many councils are also undergoing – or anticipating very soon – aggressive cost cutting at a corporate level, a situation which will accelerate given the deterioration in the public finances. Stuck between a rock and a hard place, one could forgive Directors of Adults and Children's Services for feeling unable to do anything to get out of their situation, and doom-laden about the prospects for achieving budget sustainability in the medium to long term.

Can anything be done?

The answer is an emphatic yes. Local government has a huge amount of scope to act, and act now – regardless of what central government or politicians do, or what happens at the next election. All across local government, people are responding to the financial crisis with experiments in new ways of thinking, of working and of spending money. The ideas are there. The problem is that for the most part these ideas remain a) experiments and b) disparate. The immediacy of the financial crisis creates a risk that new approaches will be parked as 'too radical and 'unaffordable' just at the time when the old model is looking more broken and less attractive than ever.

How can local government make a difference?

There are three areas to be tackled, and these need to be tackled together.

The first area is to invest in more effective preventative services – to stop people entering the system in the first place, and to enhance their life chances at the same time. Local government can do some of this by themselves (reablement is becoming more and more common and less radical with every passing week) but fundamentally they must secure the help of the health service with its scale and budget in order to make a significant difference. It also means being more disciplined about measuring what works, disinvesting in things which don't work and reinvesting in things which do, and working more cooperatively across the council.



Acting fast is vital; otherwise we will enter the public sector phase of cuts, and it will be too late – just like short-sighted companies do in a recession, when non-core budgets (marketing and training) are cut, thereby sowing the seeds of future failure. Local government needs to commit properly to prevention as a strategic, vital, long term investment.

Secondly, local government must more aggressively tackle the costs of care, once an adult or child enters the system. This does not mean more block contracts or squeezing an extra percentage point out of suppliers. It does mean spending money more appropriately to people's needs, more flexible provision, less institutional solutions, lowering fixed costs, and building positive incentives into the system. We need to focus on recovery as well – getting people back out of the system. This can be particularly powerful in mental health.

Personalisation has legs here; but it can no longer be seen as something in isolation of financial sustainability – instead it must be seen as a way of delivering it. Social work practices are another experiment in delegating responsibility to groups of social workers for spending budgets on looked after children and being accountable for outcomes – this could also be tried for adults.

In order for this to work, we need to enlist the help of care users and their families. Finding local, cheaper, better solutions cannot be the sole job of social workers or commissioners. Instead the system needs to enable and empower, because it will be relying on individuals to make a difference.

Thirdly, local government needs to examine hard the performance and costs of the system that supports spending on vulnerable people. Significant costs (up to 30% in Adults) are spent on salaries and systems, and we should not expect vulnerable adults to accept reductions in spending without also reducing system costs. Consistency of process, smarter application of skills to roles, better performance management and clearer incentives can all be brought together to deliver both a more effective and efficient workforce.

None of these are easy – in fact they are all hard. Moreover, in order to be effective, these three challenges need to be addressed together to ensure a balanced and sustainable system emerges the other side. Support from other parts of local government and from partners such as Health will be vital.

Timing is of the essence. The coming financial pressure on local government means that the case for change is already made. The question is what local government will do about it, and it needs to decide now.

King Canute couldn't stop the tide, but he didn't need to get wet.

