

Report No: IJB/37/2017/LL

12 September 2017



Report To: Inverclyde Integration Joint Date:

Board

Report By: Louise Long

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Partnership (HSCP)

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Subject: CHIEF OFFICER'S REPORT

1.0 PURPOSE

1.1 The purpose of this report is to update the Integration Joint Board on a number of workstreams that are currently underway.

2.0 SUMMARY

2.1 There are a number of issues or business items or workstreams that the IJB will want to be aware of, that perhaps do not require a full IJB Report. IJB members can of course ask that more detailed reports are developed in relation to any of the topics covered. This paper provides a brief summary of such workstreams that are currently or soon to be live.

3.0 RECOMMENDATIONS

3.1 That the Integration Joint Board notes the Chief Officer's Report and advises the Chief Officer if any further information is required.

Louise Long Corporate Director (Chief Officer) Inverclyde Health and Social Care Partnership

4.0 BACKGROUND

4.1 This report highlights workstreams that IJB Members should be alert to.

4.2 Scottish Child Abuse Inquiry

Inverclyde HSCP has been served with its Section 21 Notice (in terms of section 21(2) (b) of the Inquiries Act 2005) from the Scottish Child Abuse Inquiry. This means that we are required to check through files and archives for documents that might be of interest or evidence to the Inquiry, in respect of the period 1 January 1930 to 17 December 2014 inclusive. This is a significant task, as all of the historic documents need to be read through, to ascertain whether or not they are relevant. The deadline for submission is 4th September 2017.

4.3 Inverclyde HSCP SVQ Centre

Inverclyde HSCP SVQ Centre has received a very positive report after inspection, scoring *significant strengths in all areas* assessed in the recent evaluation by the SQA external verifier.

Particularly pleasing were the comments the verifier made on the day of the visit about all five assessor/ verifiers who currently make up our team: "you have a good team that are delivering to a high standard". The main focus of the visit included:

- resources,
- · assessor/ verifier activity and
- candidate support.

It was encouraging to note that the temporary full time and temporary part time assessors who we recruited to deliver 40 SVQ 2s and 3s to staff from 25 care at home providers in Inverclyde in one year are working to that same high standard. Eight months into the project, they are on track to support the completion of 13 SVQ3 and 27 SVQ2 awards. All staff had work sampled and were interviewed as was one candidate and the centre coordinator. The next challenge facing the centre is to meet future registration requirements, particularly in view of the introduction of mandatory registration for care at home and housing support staff from 02.10.2017. From that date all new staff will require to register with SSSC within 6 months and complete their SVQ Award within five years of their registration.

4.4 Inverclyde Council on Disability (ICOD)

Sadly, after 20 years in Inverclyde, ICOD closed its doors on 31st July 2017. HSCP officers had been working closely with ICOD over a number of months to try to resolve some of the problems the organisation was facing, however these proved to be too deep-rooted, and ICOD's Board took the decision to close.

The HSCP had supported ICOD through commissioning services such as Shopmobility and some additional Advice Services capacity. From 1st August, Your Voice – which is practically next door to the ICOD shop front – took over delivery of the Shopmobility service. CVS took the Advice Service workers, with professional supervision and development being provided by Financial Fitness. These arrangements have enabled services to continue, and are testament to the good collaborative working that exists in Inverclyde between the HSCP and the Third Sector.

4.5 Leadership

The HSCP is in the process of refreshing its vision, values and behaviours with staff

through the HSCP. New structures to support visible leadership which connect with staff and those who use the services are being developed.

The Strategic Planning Group (SPG) is having a development session to refresh its terms of reference and ensure it is more connected to the review of the 3 year Strategic Plan. A new Transformation Board is being established to ensure that all service redesigns are being progressed.

4.6 Inspection of Children's Service

Kylemore Children's unit recently underwent an inspection of the children's service carried out by the care inspectorate. Verbal feedback of the inspection outcome has been received. There were 2 areas of inspection focus. These were care and support and management and leadership. A grade of 6, excellent, was noted in respect of both areas. A written report will follow outlining the full inspection findings. It is worthy of note however that this is the maximum grading possible and 6 is classified as "sector leading" so we are very proud of the work of the staff and children in Kylemore.

5.0 PROPOSALS

- 5.1 The content of this report is mainly for noting, and to ensure that IJB Members are informed about the business of the HSCP. As agreed previously IJB development sessions are:-

 - 21st September 2017 Budget Savings
 23rd November 2017 Children Service Inspection/Cares Act Implications
 - 15th February 2018 Review Strategic Plan

6.0 IMPLICATIONS

Finance:

6.1 There are no financial implications in respect of this report.

Financial Implications:

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments
N/A					

Legal:

6.2 There are no legal implications in respect of this report.

Human Resources:

6.3 There are no human resources implications in respect of this report.

Equalities:

6.4 Has an Equality Impact Assessment been carried out?

	YES (see attached appendix)
√	NO - This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or Strategy. Therefore, no Equality Impact Assessment is required □

6.4.1 How does this report address our Equality Outcomes?

a) People, including individuals from the protected characteristic groups, can access HSCP services.

SVQ training is inclusive of people with protected characteristics, and also has elements within it to ensure that trainees take an equalities-sensitive approach to practise.

- Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.
 Not applicable.
- c) People with protected characteristics feel safe within their communities.

Not applicable.

d) People with protected characteristics feel included in the planning and developing of services.

SVQ training supports the skill base of practitioners, enabling them to develop equalities-sensitive approaches to including all groups in the planning and development of services.

e) HSCP staff understand the needs of people with different protected characteristics and promote diversity in the work that they do.

SVQ training is inclusive of people with protected characteristics, and also has elements within it to ensure that trainees take an equalities-sensitive approach to practise.

f) Opportunities to support Learning Disability service users experiencing gender based violence are maximised.

Not directly applicable, although the general equalities dimensions of training will relate to this client group as well.

g) Positive attitudes towards the resettled refugee community in Inverciyde are promoted.

Not applicable.

CLINICAL OR CARE GOVERNANCE IMPLICATIONS

6.5 There are no clinical or care governance issues within this report.

6.6 NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes?

a) People are able to look after and improve their own health and wellbeing and live in good health for longer.

SVQ training is central to ensuring high-quality services that support individuals and maximise independence.

b) People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.

SVQ training is central to ensuring high-quality services that support individuals and maximise independence.

c) People who use health and social care services have positive experiences of those services, and have their dignity respected.

SVQ training is central to ensuring high-quality services that support individuals and maximise independence. These principles are important in ensuring that dignity and self-determination are respected and promoted.

d) Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.

SVQ training is central to ensuring high-quality services that support individuals and maximise independence. These principles are important in ensuring that dignity and self-determination are respected and promoted.

e) Health and social care services contribute to reducing health inequalities.

The equalities-sensitive nature of SVQ training supports the outcome of reducing health inequalities.

f) People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.

As part of the implementation of our People Plan, we are committed to facilitating access to SVQ training for unpaid carers.

g) People using health and social care services are safe from harm.

Not applicable.

h) People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.

Staff training sends a clear message that our staff are values and that, particularly in times of financial challenge, that staff are seen as an important area of investment.

7.0 CONSULTATION

7.1 This report has been prepared by the Chief Officer, Inverclyde Health and Social Care Partnership (HSCP) after due consultation with relevant senior officers in the HSCP.

8.0 LIST OF BACKGROUND PAPERS

8.1 None.