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Report To: Inverclyde Integration Joint

Louise Long

**Board** 

Report No:

**Corporate Director (Chief** 

Officer)

Inverciyde Health & Social

**Care Partnership** 

Contact Officer: Sharon McAlees Contact No: 01475 715282

Subject: Progress Update on Criminal Justice Social Work

**Inspection Improvement Action Plan** 

### 1.0 PURPOSE

Report By:

1.1 The purpose of this report is to provide the Integration Joint Board with an update on progress made in taking forward the two areas of improvement identified following the inspection of Criminal Justice Social Work in 2019.

## 2.0 SUMMARY

- 2.1 On 1<sup>st</sup> May 2019 the Care Inspectorate advised of their intention to inspect Criminal Justice Social Work Services within Inverciyde. Their particular focus was on how well Community Payback Orders were being implemented and managed as well as how effectively the Service was achieving positive outcomes.
- 2.2 The Care Inspectorate published their findings in December 2019. Using a quality indicator model to form their evaluation, they scored the Service's performance as follows:

| Quality Indicator                                  | Score     |
|--|-----------|
| 1.1 Improving the life chances and outcomes for    | Very Good |
| people subject to a community payback order.       |           |
|  |           |
| 2.1 Impact on people who have committed offences.  | Very Good |
| 5.2 Assessing and responding to risk and need.     | Good      |
| 5.3 Planning and providing effective intervention. | Good      |
| 9.4 Leadership of improvement and change.          | Very Good |

- 2.3 Although this was a very positive outcome and to date the highest grading received by a Local Authority, two areas were identified for improvement:
  - Senior officers should review policy and practice relating to the timescales for completing Level of Service/Case Management Inventory (LSCMI) assessments and plans to ensure that a best practice approach is implemented and clear guidance is provided to staff.
  - · Senior officers should ensure that quality assurance processes are well-

embedded in order to improve the quality of practice around statutory reviews and case recording.

2.4 An improvement action plan addressing these areas was developed. Notwithstanding the understandable interruption presented by the COVID-19 pandemic, considerable progress has been made in relation to taking forward the identified actions.

### 3.0 RECOMMENDATIONS

- 3.1 It is recommended that the Integration Joint Board:
  - a. Notes and comments on the content of the report including the progress made in taking forward the identified improvement actions.
  - b. Requests a further update on the improvement action plan.

Louise Long Chief Officer

#### 4.0 BACKGROUND

- 4.1 The Care Inspectorate provides scrutiny and assurance of Criminal Justice Social Work and commenced a programme of Criminal Justice Social Work Inspections in 2018. To date, this has included an inspection of four Local Authorities, with Inverclyde being the third Local Authority Criminal Justice Social Work inspection area.
- 4.2 Inverclyde received formal notification of the inspection on 1<sup>st</sup> May 2019. This involved five distinct stages that concluded with the Care Inspectorate publishing their findings in December 2019.
- 4.3 As well as considering the self-evaluation and evidence submitted by the Service, the Care Inspectorate read ninety Criminal Justice Social Work case files and spoke to forty people subject to a Community Payback Order. In addition, the Care Inspectorate undertook focus groups and interviews with key members of staff, partner agencies, stakeholders and senior managers and elected members with responsibility for Criminal Justice Social Work.
- 4.4 Using a quality indicator model, the Care Inspectorate applied a six-point scale to score five indicators. The score for each is outlined below:

| Quality Indicator  | Inverclyde |
|--|------------|
| 1.1 Improving the life chances and outcomes for people subject to a community payback order. | Very Good  |
| 2.1 Impact on people who have committed offences.  | Very Good  |
| 5.2 Assessing and responding to risk and need.   | Good       |
| 5.3 Planning and providing effective intervention.   | Good       |
| 9.4 Leadership of improvement and change.  | Very Good  |

It is important to note that from similar inspections undertaken in three other Local Authority areas, Inverclyde has achieved the highest grading to date.

- 4.5 Whilst this was a very positive outcome, the Care Inspectorate identified two areas for improvement:
  - Senior officers should review policy and practice relating to the timescales for completing LS/CMI assessments and plans to ensure that a best practice approach is implemented and clear guidance is provided to staff.
  - Senior officers should ensure that quality assurance processes are wellembedded in order to improve the quality of practice around statutory reviews and case recording.

An improvement action plan to address these areas was developed.

- 4.6 Although COVID-19 has had an impact on progressing these actions, the following has been achieved to date:
  - Detailed Guidance has been developed covering the use of Level of Service/Case Management Inventory LS/CMI) at all stages in the Criminal Justice system (i.e. pre- and post-sentence and in the community and custodial environments). It provides staff with a clear steer on the use of the shortened and full versions of the tool as well as when to review and reassess. The Guidance has been shared with staff and was the feature of a staff practice development session on 2<sup>nd</sup> October 2020. Whilst this action is ostensibly complete, it will be the subject of ongoing monitoring by the Criminal Justice Social Work management team.

- A comprehensive protocol to support the review of all cases involving statutory supervision has been developed and shared with staff. As well as providing clear guidance on content and timescales, the framework advanced also incorporates service user engagement and makes full use of information obtained through the application of our Criminal Justice Needs Review tool. A staff development session to support the protocol's introduction is in the process of being arranged for early November. Discussion is also underway with our Performance and Information and Quality and Development Service to consider how we capturing data on compliance for reporting within the Service's Quarterly Performance Service Review framework.
- On case recording, a Short Life Working Group (SLWG) involving staff from three different Criminal Justice settings (community, prison, court) was established in December 2019. This met three times, focusing on current practice and learning from feedback from the Care Inspectorate, research on case recording and applying learning. The SLWG also reached out to Community Justice Scotland and IRISS for their expertise and knowledge of current developments. They found there to be a dearth of research concerning case recording in Criminal Justice Services as opposed to other areas of Social Work practice. The SLWG therefore adapted learning from existing research and is in the process of finalising a report which will be disseminated to staff across the Service. Development sessions will be planned thereafter to support implementation.
- 4.7 The Service, as can be seen from the above, has already begun to identify ways in which evidence can be gathered to support the effective implementation of the newly developed Guidance and protocols. Notwithstanding this, it is the Service's intention to consider longer term the development of an all-encompassing quality assurance strategy.

### 5.0 IMPLICATIONS

### **FINANCE**

5.1 There are no financial implications.

| Cost Centre | Budget<br>Heading | Budget<br>Years | Proposed<br>Spend this<br>Report<br>£000 | Virement From | Other<br>Comments |
|-------------|-------------------|-----------------|--|---------------|-------------------|
| N/A         |                   |                 |  |               |                   |

Annually Recurring Costs / (Savings)

| Cost Centre | Budget<br>Heading | With<br>Effect<br>from | Annual Net Impact £000 | Virement<br>From | Other Comments |
|-------------|-------------------|------------------------|------------------------|------------------|----------------|
| N/A         |                   |                        |                        |                  |                |

### **LEGAL**

5.2 There are no specific legal implications in respect of this report.

### **HUMAN RESOURCES**

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

# **EQUALITIES**

5.4 Has an Equality Impact Assessment been carried out?

|          | YES   |
|----------|---|
| <b>√</b> | 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. |

5.4.1 How does this report address our Equality Outcomes?

| Equalities Outcome                                     | Implications |
|--|--------------|
| People, including individuals from the above           | None         |
| protected characteristic groups, can access HSCP       |              |
| services.  |              |
| Discrimination faced by people covered by the          | None         |
| protected characteristics across HSCP services is      |              |
| reduced if not eliminated.                             |              |
| People with protected characteristics feel safe within | None         |
| their communities.                                     |              |
| People with protected characteristics feel included in | None         |
| the planning and developing of services.               |              |
| HSCP staff understand the needs of people with         | None         |
| different protected characteristic and promote         |              |
| diversity in the work that they do.                    |              |
| Opportunities to support Learning Disability service   | None         |
| users experiencing gender based violence are           |              |
| maximised.   |              |
| Positive attitudes towards the resettled refugee       | None         |
| community in Inverclyde are promoted.                  |              |

# **CLINICAL OR CARE GOVERNANCE IMPLICATIONS**

5.5 There are no clinical or care governance implications arising from this report.

# **NATIONAL WELLBEING OUTCOMES**

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

| National Wellbeing Outcome   | Implications |
|--|--------------|
| People are able to look after and improve their own health and wellbeing and live in good health for longer.   | None         |
| 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 | None         |
| People who use health and social care services have positive experiences of those services, and have their dignity respected.  | None         |
| Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.  | None         |
| Health and social care services contribute to reducing health inequalities.  | None         |

| 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.  | None |
|--|------|
| People using health and social care services are safe from harm.   | None |
| 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. | None |
| Resources are used effectively in the provision of health and social care services.  | None |

## 6.0 DIRECTIONS

6.1

|                    | Direction to:                         |   |
|--------------------|---------------------------------------|---|
| Direction Required | No Direction Required                 | Χ |
| to Council, Health | 2. Inverclyde Council                 |   |
| Board or Both      | 3. NHS Greater Glasgow & Clyde (GG&C) |   |
|                    | 4. Inverclyde Council and NHS GG&C    |   |

## 7.0 CONSULTATION

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

# 8.0 BACKGROUND PAPERS

8.1 None.