

A meeting of the Social Work & Social Care Scrutiny Panel will be held on Thursday 23 February 2023 at 3pm.

Members may attend the meeting in person at Greenock Municipal Buildings or via remote online access. Webex joining details will be sent to Members and officers. Members are requested to notify Committee Services by 12 noon on Wednesday 22 February 2023 how they intend to access the meeting.

In the event of connectivity issues, Members are asked to use the *join by phone* number in the Webex invitation and as noted above.

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IAIN STRACHAN
Head of Legal & Democratic Services

BUSINESS

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PERFORMANCE MANAGEMENT		
2.	Revenue & Capital Budget Report – Revenue Outturn Position as at 31 December 2022 Report by Chief Officer, Inverclyde Health & Social Care Partnership and Head of Finance, Planning & Resources, Inverclyde Health & Social Care Partnership	p
NEW BUSINESS		
3.	National Care Service Verbal update by Chief Officer, Inverclyde Health & Social Care Partnership	p
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4.	Inspection of Children’s Residential Care Homes - Kylemore Report by Chief Officer, Inverclyde Health & Social Care Partnership	p

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6.	Learning Disability – Community Hub Update Report by Chief Officer, Inverclyde Health & Social Care Partnership	p
7.	Cost of Living Support Report by Chief Officer, Inverclyde Health & Social Care Partnership	p
The documentation relative to the following item has been treated as exempt information in terms of the Local Government (Scotland) Act 1973 as amended, the nature of the exempt information being that set out in paragraphs 6 and 9 of Part I of Schedule 7(A) of the Act.		
8.	Reporting by Exception – Governance of HSCP Commissioned External Organisations Report by Chief Officer, Inverclyde Health & Social Care Partnership	p

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Enquiries to – Diane Sweeney - Tel 01475 712147

Report To:	Social Work & Social Care Scrutiny Panel	Date:	23 February 2023
Report By:	Kate Rocks Chief Officer Inverclyde Health & Social Care Partnership	Report	SWSCSP/13/2023/CG
	Craig Given Head of Finance, Planning & Resources Inverclyde Health & Social Care Partnership		
Contact Officer:	Samantha White	Contact No:	01475 712652
Subject:	Revenue & Capital Budget Report – Revenue Outturn Position as at 31 December 2022		

1.0 PURPOSE AND SUMMARY

1.1 For Decision For Information/Noting

1.2 This report advises the Social Work and Social Care Scrutiny Panel of the projected outturn on revenue and capital for 2022/23 as at 31 December 2022.

1.3 The projected Revenue Outturn for Social Care as at 31 December 2022 is a £1.326m underspend.

1.4 The Social Work 2022/23 capital revised estimate is £0.512m, with spend to date of £0.253m, equating to 49.41% of the revised estimate. Net slippage of £0.834m is anticipated in 2022/23 linked to the on-going development of the programme for the New Learning Disability Facility and the Swift Upgrade.

1.5 The balance on the Integration Joint Board (IJB) reserves at 31 March 2022 was £28.325m. A further £0.514m was approved by the Integration Joint Board for earmarking at its January meeting, giving a revised EMR balance of £28.839m. Within this revised balance, specific reserves totalling £3.699m have been delegated to the Council for use in 2022/23. Spend of £0.093m has been incurred to date, being 12% of the reserves held. Also, within the IJB reserves balance, smoothing reserves of £4.219m are held in relation to delegated functions to the Council of a more volatile nature, in order to mitigate the risk of in-year overspends. Where appropriate, any over / underspends in these areas can be transferred to/from the earmarked reserve at the end of the year. There is projected spend of £0.692m against the pay contingency smoothing reserve for the effect of the Council pay award in 2022/23, and a small spend against the LD redesign. It is not proposed to utilise any of the remaining smoothing reserves at this time as any

variances are being managed within the overall position. A review of the EMR position will be carried out as part of the IJB budget setting process and an update will be provided in due course.

2.0 RECOMMENDATIONS

- 2.1 That the Scrutiny Panel notes the projected current year revenue outturn of a £1.326m underspend at 31 December 2022 as detailed in paragraphs 4.1-4.12.
- 2.2 That the Scrutiny Panel notes the current projected capital position as detailed in paragraphs 5.1-5.3.
- 2.3 That the Scrutiny Panel notes the current earmarked reserves position as detailed in paragraphs 6.1-6.4.
- 2.4 That the Scrutiny Panel notes the recommendation to the IJB to earmark the underspends as detailed in Section 4.

Kate Rocks
Chief Officer
Inverclyde Health & Social Care
Partnership

Craig Given
Head of Finance, Planning & Resources
Inverclyde Health & Social Care
Partnership

3.0 BACKGROUND AND CONTEXT

3.1 The purpose of the report is to highlight the main variances contributing to the 2022/23 projected £1.326m underspend.

4.0 2022/23 Current Revenue Position

4.1 The table below provides a summary of this position, including the impact on the earmarked reserves.

2021/22 Actual £000		Revised Budget £000	Projected Outturn £000	Projected (Under) / Overspend £000	Period 7 Variance £000	Movement from Period 7 £000
11,555	Children & Families	12,152	12,542	390	30	360
106	Criminal Justice **	118	212	94	92	2
22,965	Older Persons	29,649	29,009	(640)	(476)	(164)
8,931	Learning Disabilities	9,289	9,359	70	(24)	94
2,507	Physical & Sensory	2,478	2,460	(18)	236	(254)
2,174	Assessment & Care Management	2,629	2,534	(95)	(58)	(37)
795	Mental Health	1,324	1,043	(281)	(300)	19
498	Alcohol & Drugs Recovery Service	970	886	(84)	(67)	(17)
1,210	Homelessness	1,098	987	(111)	(67)	(44)
1,684	PHIC	2,060	2,103	43	53	(10)
2,617	Business Support	4,905	4,211	(694)	(621)	(73)
55,042	Delegated Social Work Budget	66,672	65,346	(1,326)	(1,202)	(124)
3,472	Transfer to EMR	(514)	(514)	0	0	(0)
58,514	Social Work Net Expenditure	66,158	64,832	(1,326)	(1,202)	(124)

2021/22 Actual £000	Earmarked Reserves	Approved IJB Reserves £000	Revised IJB Reserves £000	Council-related Reserves £000	Projected Spend £000	Projected Carry Forward £000
28,325	Earmarked Reserves	28,325	28,839	7,918	1,769	6,149
0	CFCR	0	0	0	0	0
28,325	Social Work Total	28,325	28,839	7,918	1,769	6,149

Appendix 1 provides details of the movement in the budget to date and Appendix 2 contains details of the projected outturn position. The material variances are identified by service below and detailed in Appendix 3.

4.2 Children and Families

The projected overspend of £0.390m for Children and Families sees an increase in projected spend of £0.360m from the period 7 position. The movement in the projected underspend mainly comprises:

- An increase in spend of £0.160m in Employee Costs, giving a projected overspend of £0.077m at Period 9, which relates to additional spend on overtime and sessionals within Residential Services. Discussions are ongoing with the service to develop a plan to manage this spend area.

- An increase in spend of £0.105m, giving a projected overspend of £0.139m against external residential placements at Period 9. The increase is due a net increase of 2 placements (5 new placements and 3 which have ended).
- An increase in spend of £0.074m, giving a projected underspend of £0.170m against fostering, adoption and kinship, with the increase mainly due to the decision taken to contain the projected overspend of £0.087m against continuing care within the overall HSCP position.

There are currently no planned transfers at the end of the year to or from the external residential placements, fostering, adoption and kinship earmarked reserve or to or from the continuing care reserve.

4.3 Criminal Justice

Criminal Justice is currently projected to overspend by £0.094m, a minor increase in spend of £0.002m from the period 7 position in relation to community package costs. An exercise is under way to claim for a proportion of these costs from Scottish Government, and the position will be updated on notification of the outcome of this process.

4.4 Older Persons

Older Persons is currently projected to underspend by £0.640m, a reduction in projected spend of £0.164m from the period 7 position. This reduction mainly comprises:

- A reduction in the projected spend for external homecare of £0.119m, giving an underspend of £0.829m at Period 9. The movement is mainly due to no further growth in hours being anticipated for one of the new framework providers (£0.055m), a further reduction in hours against one of the SDS2 providers (£0.040m) and a reduction in Direct Payments packages (£0.020m).
- Continuing recruitment and retention issues, for both in house and external services are contributing to current pressure on the service to deliver all their commissioned home care hours.
- A reduction in the projected spend of £0.242m within residential and nursing care, giving a projected underspend of £0.005m at Period 9, This is due to a combination of lower bed numbers than projected for November and December (£0.142m) and an increase in client income following financial assessment (£0.100m).
- Within other client commitments there is a reduction in projected spend of £0.203m, reflecting the updated anticipated respite provision, which gives a projected underspend for the year of £0.026m.

These reductions are partially offset by:

- An increase in projected spend of £0.125m within employee costs, giving a £0.015m underspend across Homecare, Day Services and Respite. This movement is mainly due to an increase in spend on additional hours, overtime and sessionals due to the high level of vacancies.

Within Payments to Other Bodies there is the projected underspend in relation to recurring care, which we are recommending to the IJB that they earmark, leaving a net nil position on the projected outturn being reported

- £0.270m – from the new Care at Home monies to fund planned expenditure in this area in future years.

At Period 9 there is currently no planned transfer at the end of the year to or from the nursing and residential placements earmarked reserve.

4.5 Learning Disabilities

Learning Disabilities is currently projected to be overspent by £0.094m, an increase in projected spend of £0.094m from the period 7 position, which is due to an earlier transfer date being agreed for a transition case within client commitments.

There is currently no planned transfer at the end of the year to or from the learning disability client commitments earmarked reserve.

4.6 Physical and Sensory

Physical & Sensory is currently projected to underspend by £0.018m, a reduction of £0.254m from the period 7 position.

The movement mainly comprises a reduction in the client commitments projected spend of £0.235m, giving an underspend of £0.005m, following the decision that a significant care package previously included in projections, will not transfer to Inverclyde at this time, together with a reduction in one further care package.

4.7 Assessment and Care Management

Assessment & Care Management is currently projected to underspend by £0.095m, a reduction in projected spend of £0.037m from the period 7 position, reflecting the lower anticipated spend on domiciliary respite.

4.8 Mental Health

Mental Health is projected to underspend by £0.281m in relation to client commitments (£0.210m) and employee costs (£0.066m), a minor increase of £0.019m in projected spend from the period 7 position.

4.9 Alcohol and Drugs Recovery Service

Alcohol & Drugs Recovery Service is currently projected to underspend by £0.084m, a minor reduction in projected underspend of £0.017m from the period 7 position.

4.10 Homelessness

Homelessness is projected to underspend by £0.111m, a reduction in projected spend of £0.044m from the period 7 position.

The movement reflects the projected underspend of £0.043m against the Bad Debt Provision budget heading in relation to rental income that it is anticipated will be required at the year end.

4.11 Planning, Health Improvement & Commissioning

Within Supplies and Services there is the following projected underspend against system maintenance, which we are recommending to the IJB that they earmark, leaving a net nil position on the projected outturn being reported

- £0.070m – to fund a temporary post within the wider Finance Planning and Resources service.

4.12 Business Support

Business Support is projected to underspend by £0.694m, a reduction in projected spend of £0.073m from the period 7 position and reflects further slippage in filling vacancies.

Within Payments to Other Bodies there is the following projected underspend, which we are recommending to the IJB that they earmark, leaving a net nil position on the projected outturn being reported

- £0.200m – to fund pressures in client commitments in future years.

5.0 2022/23 Current Capital Position

5.1 The Social Work capital budget is £12.035m over the life of the projects with £1.346m originally projected to be spent in 2022/23. Net slippage of £0.734m (54.53%) is currently being reported linked to the current programme for the New Learning Disability Facility. Expenditure on all capital projects to 31 December 2022 is £0.253m (18.8% of approved budget, 41.34% of the revised projection). Appendix 4 details capital budgets.

5.2 New Learning Disability Facility:

The project involves the development of a new Inverclyde Community Learning Disability Hub. A more detailed separate report on the project and progress is included on the agenda.

5.3 Swift Upgrade

The SWIFT replacement system preferred bidder was OLM systems for their product ECLIPSE. As previously reported, discovery work including establishment of implementation plans is under way, with the first payment milestone of £0.100m due to be paid following this initial period. The remainder of the overall spend is anticipated in 2023/24 financial year.

6.0 Earmarked Reserves

6.1 The balance on the IJB reserves at 31 March 2022 was £28.325 million. A further £0.514m was approved by the Integration Joint Board for earmarking at its January meeting, giving a revised EMR balance of £28.839m. The reserves noted in this report are those delegated to the Council for spend in 2022/23, and smoothing reserves held for areas of volatility within Council services. The opening balance on these reserves were £3.248 million and £4.156 million respectively. The aforementioned £0.514m earmarking (£0.415m and £0.063m respectively) has been added to the balances, giving a revised overall reserve of £7.918m. Current projected spend for 2022/23 is £1.769 million. Any balance remaining will be the subject of a review being carried out as part of the IJB budget setting process. An update will be provided in due course.

6.2 An earmarked reserve of £8.130m was held at the start of 2022/23 financial year. Scottish Government have confirmed that any of this funding which is unused is to be returned to them via Greater Glasgow and Clyde Health Board. Current projections show anticipated spend of £3.455m for the HSCP (£3.140m Council Spend), therefore £4.675m is currently expected to be returned to Scottish Government as at Period 9 projections.

6.3 The smoothing reserves held are for the following service areas:

- Children’s Residential Care, Adoption, Fostering & Kinship,
- Residential & Nursing Accommodation,
- Continuing Care,
- Learning Disabilities (LD) Redesign,
- LD Client Commitments
- Pay Contingency

6.4 The projections above now include the effect of the 2022/23 backdated pay award and reflects the budget transfer of £1.100m pay award funding from the Council, and a drawdown of £0.692m from the earmarked reserve held for this purpose

7.0 IMPLICATIONS

7.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO	N/A
Financial	✓		
Legal/Risk		✓	
Human Resources		✓	
Strategic (LOIP/Corporate Plan)		✓	
Equalities & Fairer Scotland Duty			✓
Children & Young People’s Rights & Wellbeing			✓
Environmental & Sustainability			✓
Data Protection			✓

7.2 Finance

All financial implications are discussed in detail within the report

One off Costs

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

Annually Recurring Costs/ (Savings)

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

7.3 Legal/Risk

There are no specific legal/risk implications arising from this report. This is a performance report for noting.

7.4 Human Resources

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

7.5 Strategic

There are no specific strategic implications arising from this report.

8.0 CONSULTATION

8.1 This report has been jointly prepared by the Chief Officer, Inverclyde Health Social & Care Partnership and the Head of Finance, Planning and Resources, Inverclyde Health & Social Care Partnership.

9.0 BACKGROUND PAPERS

9.1 There are no background papers for this report.

Social Work

Budget Movement - 2022-23

Period 9 1 April 2022 - 31 December 2022

Service	Approved Budget £000	Movements				Transfers (to)/ from Earmarked Reserves £000	Amended Budget £000	IJB Funding Income £000	Revised Budget £000
		Inflation £000	Virement/ Reallocation £000	Supplementary Budgets £000	IJB Funding £000				
Children & Families	11,638	0	171	343	0	0	12,152	0	12,152
Criminal Justice	118	0	0	0	0	0	118	0	118
Older Persons	28,026	0	1,545	78	0	0	29,649	0	29,649
Learning Disabilities	9,359	0	(227)	157	0	0	9,289	0	9,289
Physical & Sensory	2,607	0	(188)	59	0	0	2,478	0	2,478
Assessment & Care Management	2,804	0	(273)	98	0	0	2,629	0	2,629
Mental Health	1,222	0	39	63	0	0	1,324	0	1,324
Alcohol & Drugs Recovery Service	950	0	(35)	55	0	0	970	0	970
Homelessness	1,266	0	(222)	54	0	0	1,098	0	1,098
Planning, Health Improvement & Commissioning	1,792	0	176	92	0	0	2,060	0	2,060
Business Support	5,740	0	(986)	151	0	0	4,905	0	4,905
Totals	65,522	0	0	1,150	0	0	66,672	0	66,672

Social Work

Revenue Budget Projected Outturn - 2022/23

Period 9 1 April 2022 - 31 December 2022

2021/22 Actual Subjective Analysis £000	Approved Budget £000	Revised Budget £000	Projected Outturn £000	Projected Over / (Under) Spend £000	Budget Variance %
32,184 Employee costs	33,965	35,808	35,019	(789)	(2.20)
1,347 Property costs	1,025	1,024	1,108	84	8.20
1,045 Supplies & services	1,005	1,336	1,367	31	2.32
183 Transport & plant	352	397	367	(30)	(7.45)
900 Administration costs	732	730	762	32	4.33
43,886 Payments to other bodies	51,100	51,689	51,092	(597)	(1.15)
(24,503) Income	(22,657)	(24,312)	(24,369)	(57)	0.23
55,042	65,522	66,672	65,346	(1,326)	(1.99)
3,472 Transfer to Earmarked Reserves	0	(514)	(514)	0	0
58,514 Social Work Net Expenditure	65,522	66,158	64,832	(1,326)	(2.00)

2021/22 Actual Objective Analysis £000	Approved Budget £000	Revised Budget £000	Projected Outturn £000	Projected Over / (Under) Spend £000	Budget Variance %
11,555 Children & Families	11,638	12,152	12,542	390	3.21
106 Criminal Justice	118	118	212	94	5.50
22,965 Older Persons	28,026	29,649	29,009	(640)	(2.16)
8,931 Learning Disabilities	9,359	9,289	9,359	70	0.75
2,507 Physical & Sensory	2,607	2,478	2,460	(18)	(0.73)
2,174 Assessment & Care Management	2,804	2,629	2,534	(95)	(3.61)
795 Mental Health	1,222	1,324	1,043	(281)	(21.22)
498 Alcohol & Drugs Recovery Service	950	970	886	(84)	(8.66)
1,210 Homelessness Planning, Health Improvement &	1,266	1,098	987	(111)	(10.11)
1,684 Commissioning	1,792	2,060	2,103	43	2.10
2,617 Business Support	5,740	4,905	4,211	(694)	(14.15)
55,042	65,522	66,672	65,346	(1,326)	(1.99)
3,472 Transfer to Earmarked Reserves	0	(514)	(514)	0	0
58,514 Social Work Net Expenditure	65,522	66,158	64,832	(1,326)	(2.00)

Social Work

Material Variances - 2022/23

Period 9 1 April 2022 - 31 December 2022

2021/22 Actual	Budget Heading	Revised Budget	Proportion of budget	Actual to 31/12/22	Projected Outturn	Projected Over/(Under) Spend	Percentage Variance
£000		£000	£000	£000	£000	£000	%
	Employee Costs						
6,379	Children & Families	6,705	3,582	4,748	6,782	77	1.15
2,502	Learning Disabilities	2,885	1,541	1,822	2,605	(280)	(9.71)
2,066	Assessment & Care Management	2,591	1,384	1,601	2,513	(78)	(3.01)
1,194	Mental Health	1,323	707	865	1,256	(67)	(5.06)
1,012	Alcohol & Drugs Recovery Service	1,285	687	819	1,234	(51)	(3.97)
1,004	Homelessness	1,099	587	695	1,035	(64)	(5.82)
1,852	Planning, Health Improvement & Commissioning	1,976	1,056	1,354	2,040	64	3.24
2,123	Business Support	2,465	1,317	1,535	2,295	(170)	(6.90)
28,383		20,329	10,861	13,439	19,760	(569)	(2.80)
142	Criminal Justice package costs	0	0	37	74	74	n/a
2,363	Residential Childcare	2,687	2,014	1,648	2,826	139	5.17
2,102	Adoption / Fostering / Kinship	2,033	1,641	1,689	2,202	169	8.31
14,673	Residential Nursing & Free Personal Care	17,083	11,827	12,139	16,986	(97)	(0.57)
3,758	Older People - External Homecare Payments	4,571	3,164	2,450	3,742	(829)	(18.14)
501	Older People - Residential Nursing - other client commitments	741	556	323	620	(121)	(16.33)
9	Learning Disabilities - External Transport	84	63	12	34	(50)	(59.52)
9,885	Learning Disabilities - Client Commitments	10,694	8,021	7,106	10,951	257	2.40
(174)	Learning Disabilities - Day Care & Support Services Income	(255)	(191)	(12)	(128)	127	(49.80)
220	Assessment & Care Management - Respite	322	242	145	261	(61)	(18.94)
1,567	Mental Health - Client Commitments	2,022	1,517	1,192	1,781	(241)	(11.92)
48	Mental Health - Agency Staff	0	0	3	30	30	n/a
304	ADRS - Client Commitments	515	386	226	333	(182)	(35.34)
0	Homelessness - Bad Debt Provision	73	55	0	30	(43)	(58.90)
35,398		40,570	29,293	26,958	39,742	(828)	(2.04)
63,781	Total Material Variances	60,899	40,154	40,397	59,502	(1,397)	(2.29)

Social Work

Capital Budget 2022/23

Period 9 1 April 2022 - 31 December 2022

Project Name	Est Total Cost £000	Actual to 31/03/22 £000	Approved Budget £000	Revised Estimate £000	Actual to 31/12/22 £000	Estimate 2023/24 £000	Estimate 2024/25 £000	Future Years £000
Social Work								
Crosshill Childrens Home Replacement	2,315	2,016	249	299	252	0	0	0
New Learning Disability Facility	9,507	133	884	100		3,070	6,204	0
Swift Upgrade	200	0	200	100		100	0	0
Complete on Site	13	0	13	13	1	0	0	0
Social Work Total	12,035	2,149	1,346	512	253	3,170	6,204	0

Social Work

Earmarked Reserves - 2022/23

Period 9 1 April 2022 - 31 December 2022

Project	Lead Officer / Responsible Manager	Earmarked Reserves	Phased Budget To Period 9	Actual To Period 9	Projected Spend	Amount to be Earmarked for 2023/24 & Beyond	Lead Officer Update
		2022/23 £000	£000	2022/23 £000	2022/23 £000	£000	
Tier 2 School Counselling	Audrey Howard	312	234	0	42	270	EMR covers the contract term - potentially to 31 July 2024. Contract commenced 1 August 2020. Projected spend in 2022-23 of £42k reflects shortfall in SG grant against contract.
C&YP Mental Health & Wellbeing	Audrey Howard	84	110	35	84	0	Plan and implement a programme aimed at supporting children and young people in the community whose life chances are negatively impacted through mental health based issues. Expenditure will be on staffing: two FTE staff from Action for Children, 2 FTE staff from Barnardo's, 1 FTE research assistant based in Educational Psychology and 0.2 FTE Educational Psychologist to act as development Officer with backfill.
Whole Family Wellbeing	Audrey Howard	64	0	0	64	0	Funding will help Inverclyde to achieve the vision set out and improve outcomes for children, young people and families and support whole system transformational change which is necessary in line with GIRFEC and the
Refugees	Allen Stevenson	1,077	0	0	150	927	Funding to support Refugees placed in Inverclyde. Funding extends over a 5 year support programme. Updated anticipated income and planned spend being prepared and will be updated for next report.
Autism Friendly	Allen Stevenson	164	0	0	164	0	Plans in place to fully spend.
Integrated Care Fund	Allen Stevenson	109	0	1	26	83	Plans in place to fully spend.
Delayed Discharge	Allen Stevenson	102	0	-4	28	74	Plans in place to fully spend.
Winter Planning - Care at Home	Allen Stevenson	712	198	24	268	444	Plans being finalised to utilise remaining reserves fully.
Winter Pressures Interim Beds	Allen Stevenson	92	0	0	0	92	To fund the balance of the Interim Beds contract due in 23-24
Temporary posts	Allen Stevenson	250	0	0	0	250	Earmarked for temporary posts.
Dementia Friendly	Anne Malarkey	89	67	37	89	0	Now linked to the test of change activity associated with the new care co-ordination work. Proposals for spend of circa £90k over 18 months, to fund a Development Worker post and a Training Co-Ordinator post. This will continue to be reviewed at the Steering Group.
ADRS fixed term posts	Anne Malarkey	109	0	0	0	109	Earmarked for ADRS non-recurrent posts.
RRTP	Anne Malarkey	136	90	0	0	136	RRTP funding- progression of Housing First approach and the RRTP partnership officer to be employed. Full spend is reflected in 5 year RRTP plan.
Welfare - IDEAS Projects	Craig Given	350	50	0	93	257	Plans currently being developed. New post being created to achieve outcome, 2x Grade 6 money advisor posts for Advice Services. 2x advice posts for financial fitness. Further delivery tbc for 22/23 and 23/24
Covid Recovery - Establish Inverclyde's Board and Memorial	Craig Given	5	5	0	5	0	Creating a social movement that promotes kindness and neighbourly communities
Covid Recovery - Develop Food to Fork project to promote growing strategy	Craig Given	30	15	0	30	0	Supporting people to reconnect who have remained at home during COVID. 2 part time staff now in place
Covid Recovery - Develop Wellbeing Campaign	Craig Given	14	7	0	14	0	Mental health support
Pay contingency	Craig Given	891	668	476	692	199	£692k will be utilised in 2022-23.
Adoption/Fostering/Residential Childcare/ Kinship	Audrey Howard	800	0	0	0	800	This reserve is used to smooth the spend on children's residential accommodation, adoption, fostering & kinship costs over the years.
Continuing Care	Audrey Howard	425	81	0	0	425	To address continuing care legislation.
Residential & Nursing	Allen Stevenson	1,003	0	0	0	1,003	This reserve is used to smooth the spend on older people residential and nursing costs over the years.
Learning Disabilities Client Commitments	Allen Stevenson	600	0	0	0	600	This reserve is used to smooth the spend on Learning Disabilities Client Commitment costs over the years.
Learning Disabilities Redesign	Allen Stevenson	500	0	0	20	480	Minor areas of spend anticipated as the project progresses.
Council related total		7,918	1,525	569	1,769	6,149	

Social Work

Earmarked Reserves - 2022/23

Period 9 1 April 2022 - 31 December 2022

Project	Lead Officer / Responsible Manager	Earmarked Reserves	Phased Budget To Period 9	Actual To Period 9	Projected Spend	Amount to be Earmarked for 2023/24 & Beyond	Lead Officer Update
		2022/23 £000	£000	2022/23 £000	2022/23 £000	£000	
IJB PCIP	Allen Stevenson	1,527	1,527	1,527	1,527	0	This is an IJB reserve & is coded to 94012.
IJB ADP	Anne Malarkey	843	843	843	843	0	This is an IJB reserve & is coded to 94013.
IJB Mental Health - Action 15	Anne Malarkey	236	236	236	236	0	This is an IJB reserve & is coded to 94014.
IJB Mental Health Transformation	Anne Malarkey	750	135	44	135	615	This is an IJB reserve & is coded to 94016. The split of the funding between Council and Health is tbc.
IJB Contributions to Partner Capital Projects	Kate Rocks	1,103	0	0	200	903	This is a shared reserve & is coded to 94017.
IJB Primary Care Support & Public Health	Hector McDonald	338	57	57	49	289	This is an IJB reserve & is coded to 94019.
IJB Prescribing Smoothing Reserve	Allen Stevenson	798	0	0	0	798	This is an IJB reserve & is coded to 94020.
IJB Addictions Review	Anne Malarkey	250	0	0	0	250	This is an IJB reserve & is coded to 94021.
IJB CAMHS Post	Audrey Howard	68	0	0	0	68	This is an IJB reserve & is coded to 94022.
IJB Transformation Fund	Kate Rocks	1,975	1,035	222	473	1,502	Expenditure on projects approved by the Transformation Board and IJB. Updates reported regularly to both the Transformation Board and IJB. Projects can be Council, Health or Joint. This is an IJB reserve & Health spend is coded to 94024.
IJB DN Redesign	Allen Stevenson	88	88	88	88	0	This is an IJB reserve & is coded to 94026.
IJB Covid-19	Kate Rocks	8,130	2,475	1,886	8,130	0	This is an IJB reserve & is coded to 94027. P8 uncommitted balance of £4,924k to be returned to SG.
IJB Covid Community Living Change	Allen Stevenson	320	0	0	80	240	This is an IJB reserve & is coded to 94028.
IJB Covid Shielding SC Fund	Allen Stevenson	34	0	0	34	0	This is an IJB reserve & is coded to 94029.
IJB Staff L&D Fund	Audrey Howard	254	0	0	79	175	This is an IJB reserve & is coded to 94030.
IJB Homelessness	Anne Malarkey	350	0	0	0	350	This is an IJB reserve & is coded to 94031.
IJB Fixed Term Staffing	Allen Stevenson	200	0	0	0	200	This is an IJB reserve & is coded to 94033.
IJB Swift	Craig Given	504	0	141	144	360	This is an IJB reserve & is coded to 94035. Previously included within the Transformation Fund as a project
IJB CAMHS Tier 2	Audrey Howard	100	0	0	0	100	This is an IJB reserve & is coded to 94036. Previously included within the Transformation Fund as a project
IJB WP MDT	Allen Stevenson	217	217	217	34	183	This is an IJB reserve & is coded to 94037.
IJB WP HSCW	Allen Stevenson	206	206	206	0	206	This is an IJB reserve & is coded to 94038.
IJB Care Home Oversight	Allen Stevenson	115	55	55	55	60	This is an IJB reserve & is coded to 94039.
IJB Digital Strategy	Allen Stevenson	676	0	72	0	676	This is an IJB reserve & is coded to 94040.
IJB MH Recovery & Renewal	Allen Stevenson	877	428	616	335	542	This is an IJB reserve & is coded to 94041.
IJB Free Reserves	Kate Rocks	962	0	0	-1,083	2,045	This is an IJB reserve & is coded to 94025. Per IJB reporting at P7.
IJB total		20,921	0	6,210	11,359	9,562	
Overall Total		28,839	8,827	6,779	13,128	15,711	

Report To:	Social Work & Social Care Scrutiny Panel	Date:	23 February 2023
Report By:	Kate Rocks Chief Officer Inverclyde Health & Social Care Partnership	Report No:	SWSCSP/11/2023/AH
Contact Officer:	Audrey Howard	Contact No:	01475 715282
Subject:	Inspection of Children’s Residential Care Homes – Kylemore		

1.0 PURPOSE AND SUMMARY

- 1.1 For Decision For Information/Noting
- 1.2 The purpose of this report is to advise the Social Work & Social Care Scrutiny Panel of the outcome of the inspection completed by the Care Inspectorate in respect of Kylemore Children’s Residential Care Home Services on 15th November 2022.
- 1.3 The Care Inspectorate regulates all care services in Scotland. The Care Inspectorate completed an unannounced inspection of Kylemore on 15th November 2022.
- 1.4 The Inspection was conducted in line with Health and Social Care Standards and the quality of service provided was evaluated under: -
- How well do we support children and young people’s wellbeing
 - Children and young people are loved and get the most out of life
- 1.5 A full public report of the inspection and grades is available on the Care Inspectorate website.
- 1.6 The summary of the grades awarded were as follows: -
1. How well do we support children and young people’s wellbeing 4 – good
 2. Children and young people are loved and get the most out of life 4- good

2.0 RECOMMENDATIONS

- 2.1 The Social Work & Social Care Scrutiny Panel note the outcome of the inspection.

**Kate Rocks
Chief Officer
Inverclyde HSCP**

3.0 BACKGROUND AND CONTEXT

- 3.1 All of Inverclyde's residential children's care home services are registered with the Care Inspectorate and are inspected on a regular basis. An unannounced inspection of Kylemore was completed on 15th November 2022.
- 3.2 The inspection evaluated the quality of two specific standards:
- How well do we support children and young people's wellbeing
 - Children and young people are loved and get the most out of life
- 3.3 During the inspection the Care Inspectorate spoke with staff, young people, parents and other professionals and reviewed relevant written information including care plans. The inspection graded the service as good – 4 in the two quality standards evaluated.
- 3.4 The inspection looked closely at the care and support young people receive. They found young people enjoyed nurturing and trusting relationships. They reported examples of young people being 'claimed' by staff and felt part of a family. In addition, they commented on evidence of established and enduring relationships which contributed to positive transitions for some young people who have moved on from the service.
- 3.5 The inspection noted that young people who live in Kylemore had positive relationships with staff. Young people were kept safe in the house and staff were confident about their roles and responsibilities in safeguarding the young people. This was supported by individual risk assessments and positive working relationships between the service and other agencies.
- 3.6 It was noted within the inspection that young people had a good awareness of their rights and who they could go to in times of need or if they needed someone to act on their behalf. The role of advocacy services were embedded into the supports offered to the young people and the young people benefited from access to external advocacy and support from the provider's Children's Rights Officer.
- 3.7 The inspection found that staff were proactive in helping young people access new opportunities and experiences.
- 3.8 The inspection found young people engaged in the care and support they received. They had awareness of their care plans and were able to contribute to these. They were noted to be comprehensive and child centred.
- 3.9 An area identified for improvement in the inspection related to the service not having a working internal system that recorded significant events involving the young people. The Inspector was not able to view records of any of these important events and therefore unable to consider how these were managed or how the young people and staff were supported.
- 3.10 The inspection highlighted a failure to notify the Care Inspectorate when the number of young people exceeded the service's capacity.
- 3.11 Overall the inspection was positive and highlighted areas of good practice, however the areas identified for improvement did result in the overall grade being reduced.

4.0 PROPOSALS

- 4.1 The service took on board areas of improvement and developed a central log and system of record keeping of any significant incidents or events that is now in place across all 3 houses. This

will allow for greater transparency, monitoring and quality assurance of the young people's care and support.

- 4.2 The inspector identified that the provider should consider its wider response to increasing demands on service capacity. This should include efforts to minimise the occasions when the admission of young people results in the service exceeding capacity. This service will always aspire to not going over capacity however at times of emergency for children and young people it can be difficult to avoid.

5.0 IMPLICATIONS

- 5.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO	N/A
Financial		✓	
Legal/Risk		✓	
Human Resources		✓	
Strategic (LOIP/Corporate Plan)		✓	
Equalities & Fairer Scotland Duty			✓
Children & Young People's Rights & Wellbeing			✓
Environmental & Sustainability			✓
Data Protection			✓

5.2 Finance

One off Costs

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

Annually Recurring Costs/ (Savings)

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

5.3 Legal/Risk

No Implications. This is a performance report for noting.

5.4 Human Resources

No Implications.

5.5 Strategic

No Implications.

6.0 CONSULTATION

6.1 N/A

7.0 BACKGROUND PAPERS

7.1 Care Inspectorate Report.

Kylemore Care Home Service

13 Kylemore Terrace
Greenock
PA16 0RY

Telephone: 01475 715 789

Type of inspection:
Unannounced

Completed on:
15 November 2022

Service provided by:
Inverclyde Council

Service provider number:
SP2003000212

Service no:
CS2003001106

About the service

Kylemore is a residential children's house located in a residential area of Greenock. It is registered to provide care and accommodation for up to seven children and young people. During our inspection, seven young people were living in the service.

The house itself is purpose built and a modern design that offers space and comfort. The layout has been well considered and consists of a lounge area, a games room, a large kitchen, a dining room and a sunroom with bi-fold doors that open onto decking. All of the bedrooms within the service have either an ensuite or access to their own bathroom. The grounds surrounding the house offer lots of space for outdoor activities and relaxation.

About the inspection

This was an unannounced inspection which took place on 8 and 9 November 2022. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- spoke with three people using the service, one of their family and one representative
- spoke with five staff and management
- observed practice and daily life
- reviewed documents
- spoke with a visiting professional.

Key messages

- Young people had positive relationships with staff.
- Young people were kept safe in the house and staff were confident about their roles and responsibilities in safeguarding the young people.
- Staff were proactive in helping young people access new opportunities and experiences.
- Staff promoted and supported the young people to have positive physical and mental health.
- The service did not have a working, internal record-keeping system containing significant incidents.
- There was a failure to properly notify the Care Inspectorate of important changes to the service, including when the service exceeded their capacity.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support children and young people's rights and wellbeing?	4 - Good
--------------------------------------------------------------------------	----------

Further details on the particular areas inspected are provided at the end of this report.

How well do we support children and young people's rights and wellbeing?

4 - Good

The overall evaluation of this key question is good, meaning that there were important strengths with some areas for improvement.

Young people were kept safe at the service and their emotional and physical safety was a priority. The majority of the young people expressed feeling safe and secure. This was supported by individual risk assessments and positive working relationships between the service and other agencies.

Young people had a good awareness of their rights and who they could go to in times of need or if they needed someone to act on their behalf. The role of advocacy services were embedded into the supports offered and the young people benefited from access to external advocacy and support from the provider's children's rights officer.

The service did not have a working, internal system that recorded significant incidents involving the young people. We were unable to view records of any of these important events and, therefore, unable to consider how these had been managed or how young people and staff were supported at such times. This also made it impossible to ascertain if the service were notifying the Care Inspectorate when relevant incidents took place.

A central log for records allows staff and managers to have a greater understanding of incidents that have taken place and ensure ongoing learning from these. This, in turn, enables better support and outcomes for young people, (see area for improvement 1).

A new manager has recently been appointed within the service and there has been a period of transition. We found that there was a failure to notify the Care Inspectorate of management changes and also when the number of young people in the service exceeded the service's capacity. This resulted in the service breaching their registration for a period.

The provider has a duty towards young people who are in need of care, including in emergency situations, however such admissions should be carefully managed. The impact of this on the service's design, staffing levels and outcomes for young people should be considered, (see area for improvement 2).

Young people enjoyed nurturing and trusting relationships with staff. We saw examples of young people who had been 'claimed' by staff and felt part of a family. One young person told us, "It's nice to know you have someone there..... someone that is like family". We saw examples of established and enduring relationships and this had contributed to positive transitions for some young people who have moved on from the service.

We were made aware of one example that highlighted the need for careful recruitment procedures, particularly in the context of a small community.

Young people were engaged in the care and support they received. They had awareness of their 'care plans' and were able to contribute to these. One young person explained, "(staff) put your exact words down". The written plans for the young people were comprehensive and child-centred.

Staff had a good knowledge of young people's health needs and positive physical and mental health was promoted. Staff advocated on behalf of young people to access the right supports and supported young people to overcome any barriers.

The service supported close connection to family and friends when this was possible. Some of the young people enjoyed regular time with their family and staff were able to oversee this and provide support when needed. This support extended to parents and the service's role in working towards young people returning to their family's care.

Young people's individual ambitions, interests and life skills were supported and developed well. We saw examples of days out, activities and holidays that were tailored around individual interests. The support was adapted depending on the age and needs of the young people, for example supporting older young people to pass their driving test.

We saw that young people were well supported to maximise their opportunities and attainment in education and employment. There were examples of staff articulating the needs of young people within education and advocating on their behalf. This contributed to positive educational outcomes for some of the young people.

Areas for improvement

1. The service should develop a central log and system of record-keeping of any significant incidents or events. This will allow for greater transparency, monitoring and quality assurance of the young people's care and support.

This is to ensure that the quality of care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice (HSCS 4.11) and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes (HSCS 4.19).

2. The provider should consider its wider response to increasing demands on service capacity. This should include efforts to minimise occasions when the admission of young people results in the service exceeding capacity.

This is to ensure that the quality of care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If I experience care and support in a group, the overall size and composition of that group is right for me (HSCS 1.8) and 'My care and support meets my needs and is right for me (HSCS 1.19).

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support children and young people's rights and wellbeing?	4 - Good
7.1 Children and young people are safe, feel loved and get the most out of life	4 - Good

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Report To:	Social Work & Social Care Scrutiny Panel	Date:	23 February 2023
Report By:	Kate Rocks Chief Officer Inverclyde Health & Social Care Partnership	Report No:	SWSCSP/12/2023/AH
Contact Officer:	Audrey Howard	Contact No:	01475 715282
Subject:	Inspection of Children’s Residential Care Homes – The View		

1.0 PURPOSE AND SUMMARY

- 1.1 For Decision For Information/Noting
- 1.2 The purpose of this report is to advise the Social Work & Social Care Scrutiny Panel of the outcome of the inspection completed by the Care Inspectorate in respect of The View Children’s Residential Care Home Services on 1st November 2022.
- 1.3 The Care Inspectorate regulates all care services in Scotland. The Care Inspectorate completed an unannounced inspection of The View on 1st November 2022.
- 1.4 The inspection was conducted in line with Health and Social Care Standards and the quality of service provided was evaluated under: -
- How well do we support children and young people’s wellbeing
 - Children and young people are loved and get the most out of life
- 1.5 A full public report of the inspection and grades is available on the Care Inspectorate website.
- 1.6 The summary of the grades awarded were as follows: -
1. How well do we support children and young people’s wellbeing 4 – good
 2. How well is our care and support planned 4 - good

2.0 RECOMMENDATIONS

- 2.1 The Social Work Scrutiny Panel note the outcome of the inspection.

**Kate Rocks
Chief Officer
Inverclyde HSCP**

3.0 BACKGROUND AND CONTEXT

- 3.1 All of Inverclyde's residential children's care home services are registered with the Care Inspectorate and are inspected on a regular basis. An unannounced inspection of Kylemore was completed on 26 and 27 October 2022.
- 3.2 The inspection evaluated the quality of two specific standards:
- How well do we support children and young people's wellbeing
 - Children and young people are loved and get the most out of life
- 3.3 During the inspection the Care Inspectorate spoke with staff, young people, parents and other professionals and reviewed relevant written information including care plans. The inspection graded the service as good – 4 in the two quality standards evaluated.
- 3.4 The inspection looked closely at the care and support young people receive. They found young people enjoyed nurturing relationships with staff. They reported examples of young people being 'claimed' by staff and felt part of a family. The inspection noted that young people who live in The View had positive relationships with staff there was warmth and affection and as sense of the house being a home. These relationships were noted to be based on staff knowledge of child development, attachment and trauma.
- 3.5 Young people were kept safe with their emotional and physical safety a priority. Most of the young people said to the inspector they felt safe and secure. This was evidence and supported by individual risk assessments and good working relationships between the service and other agencies. Staff were noted to be confident in best practice and child protection.
- 3.6 It was noted within the inspection that young people had a good awareness of their rights and who they could go to in times of need or if they needed someone to act on their behalf. The role of advocacy services were embedded into the supports offered to the young people and the young people benefited from access to external advocacy and support from the provider's Children's Rights Officer.
- 3.7 The health needs of the young people were promoted by staff. The inspection highlighted staff had a good knowledge their physical and mental wellbeing. Staff were reported to advocate on behalf of young people to access supports and supported young people to overcome any barriers.
- 3.8 The importance of promoting close family connections and friendships was highlighted. Family and friends were made welcome.
- 3.9 The involvement of young people in their care plans was found to be positive as young people were aware of them and able to contribute. Two young people's records were viewed and found to be full and robust. The inspection reported that the service had a strong commitment to involving young people in their care and decision making.
- 3.10 An area of strength highlighted related to young people's individual ambitions, interests and life skills being supported and well developed. Staff were proactive in helping young people access opportunities and new experiences.
- 3.11 The inspection saw that young people were well supported with attainment in education and employment. This was supported by examples of staff advocating on behalf of the young person which contributed to positive educational outcomes for some of the young people. It highlighted concerns for one young person's educational outcomes. The provider has escalated this with multi – agency colleagues.

- 3.12 An area identified for improvement in the inspection related to admissions and matching informing that the needs of the young people within the house need to be considered when making new admissions. The issue of the service going over capacity during an emergency was noted and the Care Inspectorate were not informed.
- 3.13 The report noted the complex needs of one young person which had an impact on their outcomes. This was considered to be a reflection on the initial admission and matching process and drift in the multi-agency team's wider planning for the young person.
- 3.14 The Inspection noted concern regarding the high level of restraints for one young person. In our children's houses staff are trained in Promoting Positive Behaviour (PPB). This programme refers to the use of safe holds and it is used as a last resort to keep a young person safe and help them regain control of their emotions. The term 'restraint' is no longer used as the connotations are punitive and institutional and it is language that is not in keeping with the pledges within The Promise.
- 3.15 The concern noted when incidents took place there were gaps in the service's record keeping and in the quality assurances that followed some incidents. There were also issues identified with the systems of reporting notifications to the Care Inspectorate.
- 3.16 Overall the inspection was positive and highlighted areas of good practice, however the areas identified for improvement did result in the overall grade being reduced.

4.0 PROPOSALS

- 4.1 The service took on board areas of improvement and developed a central log and system of record keeping of any significant incidents or events that is now in place across all 3 houses. This will allow for greater transparency, monitoring and quality assurance of the young people's care and support.
- 4.2 The inspector identified the provider should consider its wider response to increasing demands on service capacity. This should include efforts to minimise the occasions when the admission of young people results in the service exceeding capacity. This service will always aspire to not going over capacity however at times of emergency for children and young people it can be difficult to avoid.

5.0 IMPLICATIONS

- 5.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO	N/A
Financial		✓	
Legal/Risk		✓	
Human Resources		✓	
Strategic (LOIP/Corporate Plan)		✓	
Equalities & Fairer Scotland Duty			✓
Children & Young People's Rights & Wellbeing			✓
Environmental & Sustainability			✓
Data Protection			✓

5.2 Finance

One off Costs

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

Annually Recurring Costs/ (Savings)

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

5.3 **Legal/Risk**

No Implications. This is a performance report for noting.

5.4 **Human Resources**

No Implications.

5.5 **Strategic**

No Implications.

6.0 **CONSULTATION**

6.1 N/A

7.0 **BACKGROUND PAPERS**

7.1 Care Inspectorate Report

The View

Care Home Service

Cardross Crescent
Greenock
PA15 3HT

Telephone: 01475 715 809

Type of inspection:
Unannounced

Completed on:
1 November 2022

Service provided by:
Inverclyde Council

Service provider number:
SP2003000212

Service no:
CS2003001105

About the service

The View is a residential children's house located in a residential area of Greenock. It is registered to provide care and accommodation for up to seven children and young people. During our inspection, seven young people were living in the service. The service is provided by Inverclyde Council.

The house itself is purpose built and a modern design that offers space and comfort. The layout has been well considered and consists of a large kitchen/diner, a dining room, a large lounge, a games room, two bathrooms and a sunroom with bi-fold doors that open onto decking. There are seven bedrooms, six of which have en-suite facilities. The staff have access to a small office. The grounds surrounding the house offer lots of space for outdoor activities and relaxation.

About the inspection

This was an unannounced inspection which took place on 26 and 27 October 2022. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we: • spoke with four people using the service and one of their family members • spoke with four staff and management • observed practice and daily life • reviewed documents.

Key messages

- Young people had warm and nurturing relationships with staff.
- Young people were kept safe in the house and staff were confident about their roles and responsibilities in safeguarding the young people.
- Staff were proactive in helping young people access new opportunities and experiences.
- Staff promoted and supported the young people to have positive physical and mental health.
- There was a failure to properly record significant incidents and notify the Care Inspectorate of significant incidents and changes. The service needs to develop systems to address this and improve their internal record keeping.
- The service and provider need to improve procedures for admissions and matching of new young people to the service. This will help ensure that the service is able to meet the needs of all their young people.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support children and young people's rights and wellbeing?	4 - Good
--------------------------------------------------------------------------	----------

Further details on the particular areas inspected are provided at the end of this report.

How well do we support children and young people's rights and wellbeing?

4 - Good

The overall evaluation of this key question is good, meaning that there were important strengths with some areas for improvement.

Young people were kept safe at the service and their emotional and physical safety was priority. The majority of the young people expressed feeling safe and secure. This was supported by individual risk assessments and positive working relationships between the service and other agencies. Staff were confident in best practice in child protection.

Young people had a good awareness of their rights and who they could go to in times of need or if they needed someone to act on their behalf. The role of advocacy services were embedded into the supports offered and the young people benefited from access to external advocacy and support from the provider's children's rights officer.

We had concerns about the admission and matching of young people to the service, (see area for improvement 1). The service and provider do not have an admissions and matching policy. Some of the young people arrived at the service in an emergency and insufficient attention was paid to ensure that it was a suitable placement for them. We saw one example when this meant the service exceeded their capacity and thus breached the conditions of their registration with the Care Inspectorate. This also failed to consider the needs of the young people already living within the house.

There was evidence that the house was not best placed to meet the complex needs of one young person. Indeed, the outcomes for this young person were poor. This was considered to be a reflection on the initial admission and matching process and subsequent drift in the multi-agency team's wider planning for this young person.

There have been a high level of restraints for one young person. Restraints refer to incidents when it is been necessary to physically hold a young person for their safety or the safety of others. We found that when these incidents took place there were gaps in the service's record keeping and in the quality assurance that followed some incidents. There were also issues identified with the systems for reporting notifications to the Care Inspectorate. These appear to have broken down and incidents or changes have not been reported when they should have been, (see area for improvement 2).

Young people enjoyed nurturing and trusting relationships with staff. There was warmth and affection and a sense of the house being a family home. These relationships were based on staff knowledge of child development, attachment and trauma. We saw examples of established and enduring relationships between staff and young people.

Young people were engaged in the care and support they received. They had awareness of their 'careplans' and were able to contribute to these. We reviewed the records for two young people. These were full and

robust. We found the service had a strong commitment to involving young people in their care and decision-making.

Staff had a good knowledge of young people's health needs and positive physical and mental health was promoted. Staff advocated on behalf of young people to access the right supports and supported young people to overcome any barriers.

The service supported close connection to family and friends when this was possible. Family and friends were made welcome. A few of the young people enjoyed regular time with their family and staff were able to oversee this and provide support when needed.

Young people's individual ambitions, interests and life skills were supported and developed well. We saw many examples of days out, activities and holidays that were tailored around individual interests. Staff were proactive in helping young people access new opportunities and experiences.

We saw that young people were well supported to maximise their opportunities and attainment in education and employment. This was assisted by good links with local schools and the community. There were examples of staff articulating the needs of young people within education and advocating on their behalf. This contributed to positive educational outcomes for some of the young people. One young person's educational outcomes were very poor and there was long-standing, inadequate educational provision to meet their needs. The provider will escalate this with multi-agency colleagues.

Areas for improvement

1. The service should improve their admissions and matching procedures, as described within the 'Matching Looked After Children and Young People: Admissions Guidance for Residential Services', published 7 June 2022. This should include consideration of the age range within the house and how the service ensures that young adults needs are consistently met at the same time as much younger children.

This is in order to ensure that the quality of care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If I experience care and support in a group, the overall size and composition of that group is right for me' (HSCS 1.8), and 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4:14).

2. The service should notify the Care Inspectorate of incidents as described within 'Records that all registered children and young people's care services must keep and guidance on notification reporting', published 25 October 2022.

This is in order to ensure that the quality of care and support is consistent with the Health and Social Care Standards which state that: 'I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected' (HSCS 4.18); and

In order to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care

Services) Regulations 2011 - Regulation 4(1)(a) - 'A provider must make proper provision for the health, welfare and safety of service users'.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support children and young people's rights and wellbeing?	4 - Good
7.1 Children and young people are safe, feel loved and get the most out of life	4 - Good

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ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

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Report To: Social Work & Social Care
Scrutiny Panel

Date: 23 February 2023

Report By: Kate Rocks
Chief Officer
Inverclyde Health and Social Care
Partnership

Report No: SWSCSP/10/2023/AS

Contact Officer: Allen Stevenson
Head of Health and Community
Care
Inverclyde Health and Social Care
Partnership (HSCP)

Contact No: 01475 712472

Subject: Learning Disability - Community Hub Update

1.0 PURPOSE AND SUMMARY

- 1.1 For Decision For Information/Noting
- 1.2 The purpose of this report is to update the Scrutiny Panel on the on-going development of the Inverclyde Learning Disability Community Hub project.
- 1.3 The project continues to be progressed through the design stages towards market testing and financial close with a summary of key risks included within the report.

2.0 RECOMMENDATIONS

- 2.1 It is recommended that the Scrutiny Panel:
- note the current progress and delivery programme for the project;
 - note the on-going review of the design proposals and affordability cap position including the inherent inflation risks;
 - note the on-going engagement with the relevant Scottish Government officials on maintaining the external funding commitment to the project.

Kate Rocks
Corporate Director (Chief Officer)
Inverclyde HSCP

3.0 BACKGROUND AND CONTEXT

- 3.1 The progression of the Learning Disability Redesign followed a Strategic Review of Services for Adults with Learning Disabilities in Inverclyde. The Outline and Final Business Cases for the new Learning Disability Community Hub, including identification of the preferred site, have been the subject of previous reports to the Health & Social Care Committee. The new Hub will support and consolidate development of the new service model and integration of learning disability services with the wider Inverclyde community in line with national and local policy.
- 3.2 The progression of the project for the new Learning Disability Community Hub has been the subject of regular update reports to the Corporate Management Team and Health and Social Care Committee / Social Care Scrutiny Panel / Integration Joint Board. Reports presented in June and July 2022 involved the approval of additional funding and a fundamental review of the design proposals to address the overall affordability of the project including the adoption of a low carbon design approach with the support of external grant funding through the Low Carbon Fund / Vacant and Derelict Land Investment Programme (VDLIP).
- 3.3 The Learning Disability Programme Board chaired by the Head of Health and Community Care continues to meet every three weeks to monitor progress including the development of the design for the site and building and review / update of the project risk register.

Project Delivery Programme and Key Risks

- 3.4 A summary of the current high level programme for the Inverclyde Learning Disability Community Hub is included below. The programme has been developed in conjunction with the Council's chosen delivery partner (hub West Scotland) following their formal engagement in late July 2022:

Inverclyde Learning Disability Community Hub High Level Programme	
Hub Stage 1	
Consultant Appointments	August - September 2022
Concept Design (RIBA Stage 2)	September - October 2022
Contractor Appointment (Stage 1)	September - December 2022
Spatial Design (RIBA Stage 3)	October 2022 – February 2023
Planning Application	February- March 2023
Hub Stage 1 Approval	February - March 2023
Hub Stage 2	
Detail Design (including enabling works)	February – June 2023
Market Testing	June – August 2023
Potential Site Enabling Works Package	June – September 2023
Hub Stage 2 Approval	August – September 2023
Financial Close	September 2023
Mobilisation and Construction	September 2023 – October 2024

The delivery programme position has been developed and influenced by the factors / constraints outlined below:

- the design proposals required to be fundamentally reviewed and brought back to the Health and Social Care Committee / Inverclyde Integration Joint Board to address the affordability / budget gap and incorporate the low carbon design elements that formed part of the VDLIP funding bid;
- the Committee approval process and additional funding commitment was obtained at a special meeting of the Integration Joint Board on 20th July. The Council were unable to formally engage the delivery partner (hub West Scotland) ahead of this approval;

- the Council's Property Service does not have the capacity to progress large construction projects utilising in-house staff and rely on external consultants including established delivery vehicles such as hub West Scotland with the input of senior officers on project management;

3.5 The Scrutiny Panel will be aware of the recurring reference within reports to the Council's Committees on the challenging economic and market conditions, including the extraordinary rise in the price of materials which are impacting the delivery of the capital programme. The projects within the capital programme, and particularly the small number of larger scale projects, remain at risk in terms of projected capital cost, primarily as a result of the uncertainty around future price increases linked to the factors below:

- General inflation/tender cost indices – rising oil and gas prices; material and labour shortages; the impact of various socio-economic factors and worldwide events; manufacturing and distribution constraints; local, national and worldwide demand;
- Risk management – contractors, sub-contractors and suppliers are factoring in additional risk allowances to cover any further increases, particularly for projects with a longer construction period, thus exacerbating the overall position.
- More stringent design and energy performance standards; this includes the adoption of the low carbon design principles for new build assets, and the requirement to work towards ambitious targets in relation to achieving Net Zero Emissions and a reduction in Construction Embodied Carbon.

3.6 The project is currently being progressed to the conclusion of hub stage 1 which includes a review of the cost plan in relation to the developing proposals and timescales within the high level programme. During the development of the RIBA Stage 2 and in the early stages of Stage 3 design, the cost reviews identified a projected budget gap of circa £240K predominantly linked to inflation and the current programme which has been influenced by the factors outlined in 3.4 above. A list of value engineering options was compiled and reviewed to address cost reductions associated with each item. This exercise has resulted in a reduction of the projected gap of circa £120K. The Panel is requested note however that the inflation risk will remain a live risk through the remaining design development period up to the point of market testing and financial close and there will be further cost reviews at key stages within the high level programme as the project is developed through the remaining RIBA stages 3 and 4. It is imperative that every effort is made to maintain the current high level programme in light of the continuing market challenges and volatile construction inflation position. In terms of potential mitigation of the main financial risks outlined above, the feasibility of an enabling works package is currently being explored. The main areas of risk in the next period relate to the progression of statutory approvals (Planning and Building Standards) with formal Planning application anticipated to be submitted in February 2023.

3.7 As confirmed in the reports in June and July 2022, the Property Services team liaised with officers in the Regeneration and Planning on an application to the VDLIP, initially in November 2021 and thereafter with a stage 2 submission in February 2022. A formal grant offer was received on 26 May 2022 with the original application and grant conditions based on the grant of £990k being received in the 2022/23 financial year. Officers from Property Services with the support of other Senior Council Officers have continued to engage with Scottish Government officials to provide information on the current programme for delivery including confirmation of the continued Council commitment to the project and the formal engagement of the delivery partner hub West Scotland, who have also provided supporting information. Officers will continue to engage with Scottish Government to provide the necessary grant claim information and evidence to support grant draw down by the end of the current financial year.

Project Design Development and Stakeholder Engagement

- 3.8 Engagement with the Client Service has continued in respect of the development of room layouts, interior design studies, development of loose and fitted furniture and equipment schedules, access control strategy etc. in conjunction with Property Services and the design team. Every effort has been made by the service to keep costs within available project funding whilst maintaining the requirement to achieve a high quality environment for service users. A site visit and workshop was undertaken with the Landscape Architect which has enabled the development of the external works design including hard and soft landscaped areas.
- 3.9 Consultation with service users, families, carers and all learning disability staff both NHS and Social Care continues. Four staff events took place in November / December. Up-dates on progress are included in the Learning Disability newsletters that are sent out to a wider group of service users, families, carers, staff and the wider community, published on social media platforms and council web pages.

4.0 PROPOSALS

- 4.1 The Panel is requested to note that the project continues to be progressed through the current hub delivery schedule as per the high level programme outlined in 3.4 and Officers continue to engage with Scottish Government on the terms and conditions of the VDLIP funding.

5.0 IMPLICATIONS

- 5.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO	N/A
Financial	x		
Legal/Risk	x		
Human Resources		x	
Strategic (LOIP/Corporate Plan)	x		
Equalities & Fairer Scotland Duty		x	
Children & Young People's Rights & Wellbeing			x
Environmental & Sustainability	x		
Data Protection			x

5.2 Finance

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
Capital	Learning Disability	2020/24	8,517		Original £7.4m prudential borrowing plus additional £550k prudential borrowing and £567k IJB reserves (as July IJB approval)
Grant Funding (VDLIP)	Learning Disability	2022/23	990		

CFCR	Learning Disability	2020/24	500		Estimated kit out and ICT costs Funded from EMR.
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Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact	Virement From (If Applicable)	Other Comments
General Fund	Loans Charges	2022/23	388		Original £360k estimated loans charges to deliver the £7.4m plus estimated £28k for additional £550k.
Learning Disabilities	Running Costs	2022/23	1,327		Estimated sum available for the running costs of the new facility

5.3 Legal/Risk

The progression of key capital programme projects continues to be challenging in the context of the current economic and market conditions with inherent cost risks up to the point of financial close.

The current VDLIP conditions of grant offer requires the full grant amount to be drawn down in 2022/23 and Officers continue to engage with Scottish Government to provide the necessary supporting information.

5.4 Human Resources

There are no human resources issues.

5.5 Strategic

The project for the new Learning Disability Community Hub is a key element of the Learning Disability Redesign which will support and consolidate development of the new service model and integration of learning disability services with the wider Inverclyde community in line with national and local policy.

5.6 Equalities and Fairer Scotland Duty

(a) Equalities

This report has been considered under the Corporate Equalities Impact Assessment (EqIA) process with the following outcome:

	YES – Assessed as relevant and an EqIA is required.
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x	NO – This report does not introduce a new policy, function or strategy or recommend a substantive change to an existing policy, function or strategy. Therefore, assessed as not relevant and no EqlA is required. Provide any other relevant reasons why an EqlA is not necessary/screening statement.
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(b) Fairer Scotland Duty

If this report affects or proposes any major strategic decision:-

Has there been active consideration of how this report’s recommendations reduce inequalities of outcome?

	YES – A written statement showing how this report’s recommendations reduce inequalities of outcome caused by socio-economic disadvantage has been completed.
x	NO – Assessed as not relevant under the Fairer Scotland Duty for the following reasons: Provide reasons why the report has been assessed as not relevant.

5.7 Children and Young People

Has a Children’s Rights and Wellbeing Impact Assessment been carried out?

	YES – Assessed as relevant and a CRWIA is required.
x	NO – Assessed as not relevant as this report does not involve a new policy, function or strategy or recommends a substantive change to an existing policy, function or strategy which will have an impact on children’s rights.

5.8 Environmental/Sustainability

The Inverclyde Learning Disability Community Hub project is included within the Council’s Net Zero Action Plan which provides the objectives and associated actions that will achieve Carbon Reductions over the five years of the plan. The inability to progress the project or maintain the low carbon design approach will impact the current targets.

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
x	NO – This report does not propose or seek approval for a plan, policy, programme, strategy or document which is like to have significant environmental effects, if implemented.

5.9 Data Protection

Has a Data Protection Impact Assessment been carried out?

	YES – This report involves data processing which may result in a high risk to the rights and freedoms of individuals.
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x	NO – Assessed as not relevant as this report does not involve data processing which may result in a high risk to the rights and freedoms of individuals.
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6.0 CONSULTATION

6.1 The Interim Director, Finance & Corporate Governance and the Head of Health and Community Care have been consulted on the contents of this report. There has been ongoing consultation sponsored by the Learning Disability Programme Board with support from partner organisations.

7.0 BACKGROUND PAPERS

7.1 Project Risk Register – P76 ALDH - 12 January 2023.

Report To:	Social Work & Social Care Scrutiny Panel	Date:	23 February 2023
Report By:	Kate Rocks Chief Officer Inverclyde Health & Social Care Partnership	Report	SWSCSP/14/2023/CG
	Craig Given Head of Finance, Planning & Resources Inverclyde Health & Social Care Partnership		
Contact Officer:	Marie Keirs	Contact No:	01475 715365
Subject:	Cost of Living Support		

1.0 PURPOSE AND SUMMARY

1.1 For Decision For Information/Noting

1.2 This report advises the Social Work and Social Care Scrutiny Panel of the range of measures agreed by the IJB at its meeting of 28 November 2022 to provide cost of living support for citizens of Inverclyde as follows:-

- Increase access to Health staff to cash assistance under Section 12 of the Social Work (Scotland) Act 1968 and Section 22 of the Children (Scotland) Act 1995 to reduce the impact of harm through the cost of living crisis and promote welfare principles as per the legislation.
- Ensure that the increased cash distribution meets the principals of Early Help by Health Staff having direct access to resources without referral to Social Work.
- Increase the provision of warm boxes to Care at Home service users and Third sector.
- Create small grants to Third Sector providers for hardship payments for affected individuals within the community.

1.3 These proposals mirror the current arrangements that are being implemented in some of the HSCPs across NHS GG&C and are an enhancement of the wider suite of financial inclusion and anti-poverty response between all partners within Inverclyde.

2.0 RECOMMENDATIONS

It is recommended that the Social Work and Social Care Panel:-

- 2.1 Notes the agreement to widen access under Section 12 of the Social Work (Scotland) Act 1968 and Section 22 of the Children (Scotland) Act 1995 to funding to health staff employed in Health Visiting, Family Nurse Partnership, Advice Services, Community Mental Health and Occupational Therapy to a maximum of £0.300m, to be funded from 2022/23 underspend.
- 2.2 Notes that a Standard Operating Procedure has been developed which ensures delivery within a governance framework.
- 2.3 Notes the distribution of an initial 500 warm boxes to service users receiving a Care at Home package from HSCP and commissioned providers via colleagues in Education Services at an estimated cost of £0.030m, funded from the 2022/23 underspend.
- 2.4 Notes the work with the Third Sector to implement a new funding distribution scheme to assist individuals in the community and promote social welfare under Section 10 of the Social Work (Scotland) Act 1968 up to the value of £0.100m, funded from 2022/23 underspend.
- 2.5 Notes the progress to date detailed in Section 4

Kate Rocks
Chief Officer
Inverclyde Health & Social Care
Partnership

Craig Given
Head of Finance, Planning & Resources
Inverclyde Health & Social Care
Partnership

3.0 BACKGROUND AND CONTEXT

3.1 Section 12 and 22 payments

The cost of living crisis is at the forefront of everyday life across Scotland. Many individuals and families in Inverclyde are already affected by poverty and the current situation is adding to the difficulties faced, affecting increasing numbers of working people and those who would not normally approach our services. Frontline staff are increasingly seeing the effects of this and even with the range of supports available, often a referral to Social Work is required to access immediate funding for those in crisis. The ability to increase the number of staff that can have access and distribute hardship and destitution funding via the Section 12 of the Social Work (Scotland) Act 1968 and Section 22 of the Children (Scotland) Act 1995 to a wider cohort of staff that will have immediate access to hardship and destitution funding. This will improve access to universal early help, reduce duplication from services in their response and improve resident's ability to access help due to more simplified pathways.

- 3.2 At its September 2022 meeting, Glasgow City IJB approved the request 'to allow Children's Services Health Visiting and Glasgow City Family Nurse Partnership to make Section 22 destitution payments to enable a more flexible, needs-led response to financial hardship, fuel poverty and destitution.'

Extending the scope and reach of Section 12 & 22 payments and a cash first approach to immediate assistance in Inverclyde will support our strategic planning intentions including:

- Strategic Plan- Six Big Actions
- Children's Services Plan
- Child Poverty Action Plan
- Financial Inclusion Strategy
- Local Outcomes Improvement Plans - Inequalities

4.0 Progress to date

4.1 Section 12 and 22 payments

Since the IJB gave its approval on 28 November 2022, officers have developed a standard operating procedure, and have updated and simplified forms for the Section 12 and Section 22 cost of living support which have been distributed to HSCP staff. A number of drop in sessions are also underway to allow staff who are unfamiliar with the legislation the opportunity to ask questions, and to empower them to issue funds as they carry out their duties. These have been well attended with 50 staff from a range of services including homelessness, school nursing, occupational therapy, welfare rights and business support coming along to drop in sessions so far and a further session is also scheduled for any who have been unable to attend.

- 4.2 The funds will be disbursed on a cash first approach, but a supply of supermarket vouchers have also been purchased to make available as an alternative option, should this be more appropriate. An electronic solution, which would allow cash, heating vouchers and shopping vouchers to be issued via mobile phones or email addresses, is also being explored and will be made available as soon as it is ready, but is expected to go live by the time Scrutiny Panel meets.
- 4.3 Expenditure will be monitored centrally by the Finance team, who will analyse the use of funds on an ongoing basis over the coming weeks to ensure sufficient funds and vouchers are available when and where they are required. The management team and staff will be kept up to date on the level of funds and be informed in advance when the funds are coming to an end to allow control of expenditure.

4.4 An amount of £0.050m from the agreed £0.300m has been allocated to the team within the Council responsible for the Warm Hand of Friendship programme, for continuation of their current project, which is in line with the cost of living support principles set out.

4.5 Warm boxes

500 warm boxes have been prepared and issued to residents of Inverclyde since the IJB gave their agreement of the expenditure in November 2022.

4.6 Third Sector funding initiative

We are working with third sector partners, CVS to facilitate the allocation of £0.100m to constituted community organisations via an application process to be notified locally via their e-bulletin. A Service Level Agreement has been set up to ensure that funds are allocated to all areas within the Inverclyde region, and that they are issued in a secure and equitable manner. Monitoring data will be received from CVS on a two weekly basis to provide us with information on the geographical areas and amounts being issued.

We are also in discussion with other local organisations who can facilitate the issue of funds as they go about their day to day business.

4.7 Data

Data will be held on the number and amount of payments issued, whether they have been issued to individuals or families, geographical areas of beneficiaries and also the SIMD (Scottish Index of Multiple Deprivation) level for each area to allow us to analyse the level of need addressed and any trends emerging for future consideration.

4.8 Finance

Spend will be recorded and monitored by Finance, and regular updates will be provided to the Senior Management Team. Staff will be notified prior to and also when the funds come to an end. Updates on spend will be provided to both Scrutiny Panel and IJB via the budget monitoring reporting process. Should an under spend remain against any of the allocated funds at the end of the financial year, this will be earmarked for continuation of support in 2023/24.

5.0 IMPLICATIONS

5.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO	N/A
Financial	x		
Legal/Risk	x		
Human Resources	x		
Strategic (LOIP/Corporate Plan)	x		
Equalities & Fairer Scotland Duty		x	
Children & Young People's Rights & Wellbeing		x	
Environmental & Sustainability			x
Data Protection			x

5.2 Finance

All financial implications are discussed in detail within the report.

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report	Virement From	Other Comments
03156	various	2022/23	£0.430m	underspend	One –off funding – any underspend to be earmarked at year end

Annually Recurring Costs/ (Savings)

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

5.3 Legal/Risk

Section 22 of the Children (Scotland) Act 1995 states that Local Authorities can support the welfare of children in need by “giving assistance in kind, or in exceptional circumstances, cash”.

The Social Work (Scotland) Act 1968 makes it a duty for Local Authorities to promote welfare in their area. This duty includes providing, in terms of Section 12, helps to “a person in need requiring assistance in kind, or in exceptional circumstances, cash”.

Section 10 of the Social Work (Scotland) Act 1968 allows the Local Authority to make contributions by way of grants or loans to any voluntary organisation whose sole purpose is the promotion of social welfare.

5.4 Human Resources

The decision to extend access to Section 12 and Section 22 funding to additional health staff does not affect access to that funding for Council staff with existing access.

As detailed in the report, an operating procedure has been developed and staff drop in sessions organised to address any issues.

5.5 Strategic

The proposals in this report will contribute to the targets and priorities set out in the plans and strategies highlighted at Paragraph 3.2 of this report.

5.6 Equalities and Fairer Scotland Duty

(a) Equalities

This report has been considered under the Corporate Equalities Impact Assessment (EqIA) process with the following outcome:

✓	YES – Assessed as relevant and an EqlA will be made available on the Council website in due course.
	NO – This report does not introduce a new policy, function or strategy or recommend a substantive change to an existing policy, function or strategy. Therefore, assessed as not relevant and no EqlA is required. Provide any other relevant reasons why an EqlA is not necessary/screening statement.

(b) Fairer Scotland Duty

If this report affects or proposes any major strategic decision:-

Has there been active consideration of how this report's recommendations reduce inequalities of outcome?

✓	YES – The agreed actions will support improvement of families' quality of life and the reduction of health and social inequalities.
	NO – Assessed as not relevant under the Fairer Scotland Duty for the following reasons: Provide reasons why the report has been assessed as not relevant.

5.7 Children and Young People

Has a Children's Rights and Wellbeing Impact Assessment been carried out?

	YES – Assessed as relevant and a CRWIA is required.
✓	NO – Assessed as not relevant as this report does not involve a new policy, function or strategy or recommends a substantive change to an existing policy, function or strategy which will have an impact on children's rights.

5.8 Environmental/Sustainability

Summarise any environmental / climate change impacts which relate to this report.

N/A

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
✓	NO – This report does not propose or seek approval for a plan, policy, programme, strategy or document which is like to have significant environmental effects, if implemented.

5.9 Data Protection

Has a Data Protection Impact Assessment been carried out?

YES – This report involves data processing which may result in a high risk to the rights and freedoms of individuals.

NO – Assessed as not relevant as this report does not involve data processing which may result in a high risk to the rights and freedoms of individuals.

6.0 CONSULTATION

6.1 This report has been jointly prepared by the Chief Officer, Inverclyde Health Social & Care Partnership and the Head of Finance, Planning and Resources, Inverclyde Health & Social Care Partnership.

7.0 BACKGROUND PAPERS

7.1 There are no background papers for this report.