
Report To:	Inverclyde Integration Joint Board	Date:	26th June 2023
Report By:	Kate Rocks Chief Officer Inverclyde Health & Social Care Partnership	Report No:	IJB/32/2023/KR
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Subject:	Chief Officer's Report		

1.0 PURPOSE AND SUMMARY

1.1 For Decision For Information/Noting

1.2 The purpose of this report is to update the Integration Joint Board on service developments which are not subject to the IJB's agenda of 26th June 2023.

2.0 RECOMMENDATIONS

2.1 The report details updates on work underway across the Health and Social Care Partnership in relation to:

- Scottish Ballett
- Scottish Child Abuse Inquiry Hearing: Phase 8
- The Women in Justice Project
- IDEAS Project
- MAT Standards

Kate Rocks
Chief Officer
Inverclyde Health and Social Care Partnership

3.0 BACKGROUND AND CONTEXT

3.1 The IJB is asked to note the HSCP service updates and that future papers may be brought forward to the IJB as substantive agenda items.

4.0 BUSINESS ITEMS

4.1 Scottish Ballett

Scottish Ballett Duet is a new digital dance resource developed by Scottish Ballet Health for people with reduced mobility to share with their carers one-to-one by the bedside. This resource has been piloted across 3 care homes in Inverclyde and the evaluation has now been completed. The aims of the evaluation were to 1) assess the feasibility, acceptability, and appropriateness of SB Duet, 2) evaluate the impact of SB Duet on well-being, and 3) explore any potential benefits for care home staff and relatives.

Data collection occurred across the three Inverclyde care homes. Participants included 17 residents, 11 care home staff, and one relative.

Findings indicate SB Duet is feasible and acceptable for residents with some age related reduced mobility to use and for staff to deliver. Most residents and staff found SB Duet doable, suitable, and enjoyable. Most sessions were enjoyed by all participants present, making a significant difference to the feel of the care home, and often were characterised by smiling, laughter, and joyful, interactive movement. Benefits reported included positive changes in mood and evidence of engagement in meaningful social interaction, creative expression, and appropriate physical activity.

Moving forward, increased support, both internal and external to care homes, is recommended to enhance the accessibility, adoption, and further application of SB Duet.

4.2 Scottish Child Abuse Inquiry Hearing: Phase 8

Later this year, the Scottish Child Abuse Inquiry will begin its public hearings in relation to Phase 8 of its investigations: "The abuse of children in residential accommodation for young offenders and children, and young persons in need of care and protection".

The focus of this case study is residential accommodation provided or used by the state between 1930 and 2014 to accommodate (a) young offenders under the age of 18 (and children and young persons under 18 awaiting trial), and (b) children and young persons under 18 in need of care and protection. This accommodation was managed by a range of providers including local authorities, religious bodies, voluntary bodies, and the Scottish Prison Service.

The case study will explore the nature and extent of physical, sexual, and emotional abuse including the abusive use of corporal punishment, restraint, and segregation. Reporting and impact, staff recruitment, training, and culture will also be explored during the case study. Following evidence from relevant experts, regulatory bodies, inspectorates and providers, the Inquiry will hear evidence from individuals who experienced abuse and a range of other witnesses.

Thirty-nine establishments have been confirmed as being included in the case study, including two former establishments which were located within the current Inverclyde Council area. These are Balrossie School, formerly of Kilmacolm and Langlands Park, formerly of Port Glasgow.

The Council has been granted leave to appear and Counsel has been instructed to assist with preparation for the Inquiry which is due to be held later this year or early next year. Officers from the HSCP and the Council's Legal Services will agree the nature of work to prepare for this phase of the Inquiry. Further information about expectations from the Inquiry, and associated timescales, will be provided in due course.

4.3 The Women in Justice Project

The Women in Justice Project presented at the Pride in Practice Conference at the University of Dundee. The themes of the Conference were children and families social work, system change, trauma informed practice and relationship working. Our presentation focused on early action system change, where we are delivering trauma training to HSCP staff and our third sector partnerships, the links with children and families colleagues and the work being done with our lived experience group (Women in Justice Support Group). The main slides identified the numbers of staff who have completed the Scottish Trauma Informed Leadership Training (STILT) and the practitioner focused Level 3 Trauma Enhanced Training (Safety & Stabilisation).

We also identified some of the positive outcomes for women in our Women in Justice Support Group, including enhancement of their self-confidence, self-esteem, coping capacities and resilience which they felt helped them engage more appropriately with other Services, such as children and families social work. An unintended positive consequence for some women has been where short reports have been completed by Project staff to supplement Court Reports which resulted in some women being diverted earlier than would have been anticipated from the Justice system.

The presentation was well received, with feedback from attendees indicating they found the presentation interesting, informative and insightful in terms of where Inverclyde is and our direction of travel with this work. Following our presentation, about 10/15 people attended our small discussion group, where salient points from the presentation were discussed in more detail and we were able to answer supplementary questions around the Project.”

4.4 IDEAS Project

The opening balance on the Welfare / IDEAS earmarked reserve as a at 1 April 2023 is £350,000. The proposed non-recurrent spend of £340,600 detailed above and summarised in the table below will be fully funded by the Welfare EMR, leaving at this stage an unallocated balance of £6,400.

The table below outlines the detail of the spend requested by the IJB.

Cost Centre	Budget Heading	Proposed Spend this Report		Other Comments
		2022/23 £	2023/24 £	
Welfare EMR	IT, training, promotional & support materials	100	10,000	Banners, leaflets etc.
	Audit / peer review support		20,000	Third sector/ partner agencies accreditation for Scottish National Standards for Information and Advice Providers

	Mentored loans		22,000	Via agreement with Local Credit Unions applicants are mentored by HSCP money advisors
	Financial inclusion		25,000	Sustainability of local agencies TBC set aside to support/develop local third sector
	Financial Inclusion conference and public engagement		5,000	Challenge Poverty week 1/2 day conference for officers with ½ day public engagement & information events
	Children, families & young people		30,000	TBC and to support and develop new ways of working which contribute to outcomes in Child Poverty Action Plan
	HSCP employee costs	10,010	90,170	2x Grade 6 additional Money Advisors Supporting Thrive under 5 project and additional targeted money advice within community settings including working closer with Credit Unions
			38,320	Continue 1x Grade 5 Advice worker following end of SLAB funding. Directly supporting triage, access to the service & access to Section 12/22 payments based in Port Glasgow
	Third sector	33,000	60,000	Financial Fitness 1x Debt Advisor and 1x Welfare Benefit Advisor Support for Starter Packs
		43,110	300,490	

4.5 MAT Standards

Inverclyde ADP received final confirmation in May 2023 of RAGB status for each of the MAT Standards which will be published in the SG National Benchmarking Report for all ADP areas across Scotland.

The work was led by ADRS to facilitate and manage the ADP submission of all three evidence strands – process evidence, data collection and experiential evidence by the nominated submission dates.

Although it has been challenging to achieve full roll out for MAT 1-5 by April 2023, Inverclyde ADP has achieved green status for MAT 2 and 5, with provisional green for MAT 1, 3 and 4. This demonstrates full implementation of the standard, with some refining of the experiential evidence gathering required to evidence full service user/patient benefit for standards 1, 3 and 4.

For MAT 6-10, full implementation is required to be achieved by April 2024. The current status is Amber or provisional Amber for Inverclyde on standards 6-10, with a local workplan in place. As the MAT Implementation Support Team (MIST) have not yet agreed formal numerical measures for MAT standard 6-10, no ADP is able to achieve green status as yet.

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 Plan Priorities		X	
Equalities		X	
Clinical or Care Governance		X	
National Wellbeing Outcomes		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	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

There are no legal implications within this report.

5.4 Human Resources

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

5.5 Strategic Plan Priorities

5.6 Equalities

(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.
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 EqIA is required. Provide any other relevant reasons why an EqIA is not necessary/screening statement.

(b) Equality Outcomes

How does this report address our Equality Outcomes?

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups, can access HSCP services.	Strategic Plan aimed at providing access for all.
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	Strategic Plan is developed to oppose discrimination.
People with protected characteristics feel safe within their communities.	Strategic Plan engaged with service users with protected characteristics.
People with protected characteristics feel included in the planning and developing of services.	Strategic Plan engaged with service users with protected characteristics.
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	Strategic Plan covers this area.
Opportunities to support Learning Disability service users experiencing gender-based violence are maximised.	Strategic Plan covers this area.
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	Strategic Plan covers this area.

5.7 Clinical or Care Governance

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

5.8 National Wellbeing Outcomes

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.	Strategic plan covers this.
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	Strategic plan covers this.
People who use health and social care services have positive experiences of those services, and have their dignity respected.	Strategic plan covers this.
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	Strategic plan covers this.
Health and social care services contribute to reducing health inequalities.	Strategic plan covers this.
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.	Strategic plan covers this.
People using health and social care services are safe from harm.	Strategic plan covers this.
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.	Strategic plan covers this.
Resources are used effectively in the provision of health and social care services.	Strategic plan covers this.

5.9 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.

5.10 Environmental/Sustainability

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

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.

5.11 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.
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.

6.0 DIRECTIONS

6.1	Direction Required to Council, Health Board or Both	Direction to:	
		1. No Direction Required	X
		2. Inverclyde Council	
		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.