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**Report To:** Inverclyde Integrated Joint Board      **Date:** 22 January 2024

**Report By:** Kate Rocks  
Chief Officer  
Inverclyde Health & Social Care Partnership      **Report No:** IJB/04/2024/JH

**Contact Officer:** Jonathan Hinds  
Head of Children & Families  
Chief Social Work Officer  
Inverclyde Health & Social Care Partnership      **Contact No:** 01475 715282

**Subject:** Chief Social Work Officers Annual Report 2022-23

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## **1.0 PURPOSE AND SUMMARY**

- 1.1  For Decision                                       For Information/Noting
- 1.2 There is a requirement on each Local Authority to submit an annual Chief Social Work Officer (CSWO) report to the Chief Social Work Advisor to the Scottish Government. This enables the Chief Social Work Advisor to present a national picture of the social work profession and practice which in turn influences the development of social work practice and delivery.
- 1.3 The Chief Social Work Officer Annual Report 2022-23 at Appendix 1 seeks to provide an overview of the delivery of social work and social care services in Inverclyde. The report provides an overview of governance and accountability arrangements and examines service quality and performance of children and families, adult services and justice social work.
- 1.4 As with previous reports, the annual report for 2022-23 seeks to highlight the positive work undertaken and the continued strong track record of participation and consultation with the communities of Inverclyde.

## **2.0 RECOMMENDATIONS**

- 2.1 Members of the Inverclyde Integration Joint Board are asked to note the content of the Chief Social Work Officer Annual Report 2022-23 and submission to the Office of the Chief Social Work Advisor to the Scottish Government.

**Kate Rocks**  
Chief Officer  
Inverclyde Health and Social Care Partnership

### 3.0 BACKGROUND AND CONTEXT

- 3.1 The requirement for each Council to have a Chief Social Work Officer (CSWO) was initially set out in section 3 of the Social Work (Scotland) Act 1968 and is also contained within section 45 of the Local Government etc. (Scotland) Act 1994.
- 3.2 During 2022-23, the role of CSWO in Inverclyde was undertaken by the Head of Health and Community Care. Since May 2023, the role of CSWO in Inverclyde has been fulfilled by the Head of Children and Families.
- 3.3 The role of the CSWO is to ensure professional oversight of social work practice and service delivery. This includes professional governance, leadership and accountability for the delivery of social work and social care services, whether provided by the local authority or purchased through the third sector or independent sector.
- 3.4 The CSWO Annual Report has been prepared in line with national guidance: 'The Role of the Chief Social Work Officer' (Scottish Government: 2016). This report also fulfils the statutory requirement for each CSWO to produce an annual report on the activities and performance of social work services within the local area.
- 3.5 The CSWO Annual Report for 2022-23 provides information on the statutory work undertaken on the Council's behalf, including a summary of governance arrangements, service delivery, resources and workforce.

### 4.0 PROPOSALS

- 4.1 CSWOs produce annual reports, based on a template agreed with the Office of the Chief Social Work Adviser. The report guidance and template developed for this year focuses on local governance arrangements, service delivery, resources and workforce.
- 4.2 The annual report will be submitted to the Office of the Chief Social Work Advisor and, along with reports from all other CSWOs in Scotland, will be used to prepare a national overview in due course.

### 5.0 IMPLICATIONS

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

SUBJECT	YES	NO
Financial		X
Legal/Risk	X	
Human Resources		X
Strategic Plan Priorities		X
Equalities, Fairer Scotland Duty & Children and Young People		X
Clinical or Care Governance		X
National Wellbeing Outcomes		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

Provision of statutory social work services requires appropriately qualified and skilled staff; analysis of activity and demand is intended to inform future service planning to continue to meet statutory duties.

## 5.4 Human Resources

N/A

## 5.5 Strategic Plan Priorities

N/A

## 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?

<b>Equalities Outcome</b>	<b>Implications</b>
People, including individuals from the above protected characteristic groups, can access HSCP services.	Protects characteristics
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	Reduces discrimination
People with protected characteristics feel safe within their communities.	Protects communities
People with protected characteristics feel included in the planning and developing of services.	Includes the views of our community
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	Promotes diversity
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	Supports people with a learning disability
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	Supports refugees within our community

(c) 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.

(d) **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.

5.7 **Clinical or Care Governance**

N/A

## 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.	Supports wellbeing
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	Promotes Independence
People who use health and social care services have positive experiences of those services, and have their dignity respected.	Promotes positive experiences
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	Improves quality of life
Health and social care services contribute to reducing health inequalities.	Reduces inequalities
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.	Supports people to look after their own health
People using health and social care services are safe from harm.	Keeps people safe
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.	Engages with our community
Resources are used effectively in the provision of health and social care services.	Makes best use of our resources.

## 5.9 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.

## 5.10 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 <b>Direction Required to Council, Health Board or Both</b>	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 CSWO Annual Report has been informed by information provided by managers across the HSCP; members of the HSCP Senior Management Team have also been consulted on the report content.

## 8.0 BACKGROUND PAPERS

8.1 Appendix 1: Chief Social Work Officer Annual Report 2022-23



INVERCLYDE  
**HSCP**

Health and Social  
Care Partnership

Appendix 1



**Inverclyde Health and Social Care Partnership**

**CHIEF SOCIAL WORK OFFICER**

**ANNUAL REPORT 2022-2023**

**This document can be made available in other languages, large print, and audio format upon request.**

Arabic

هذه الوثيقة متاحة أيضا بلغات أخرى والأحرف الطباعية الكبيرة وبطريقة سمعية عند الطلب.

Cantonese

本文件也可應要求，製作成其他語文或特大字體版本，也可製作成錄音帶。

Gaelic

Tha an sgrìobhainn seo cuideachd ri fhaotainn ann an cànanan eile, clò nas motha agus air teip ma tha sibh ga iarraidh.

Hindi

अनुरोध पर यह दस्तावेज़ अन्य भाषाओं में, बड़े अक्षरों की छपाई और सुनने वाले माध्यम पर भी उपलब्ध है

Kurdish

Li ser daxwazê ev belge dikare bi zimanên din, çapa mezin, û formata dengî peyda bibe.

Mandarin

本文件也可应要求，制作成其它语文或特大字体版本，也可制作成录音带。

Polish

Dokument ten jest na życzenie udostępniany także w innych wersjach językowych, w dużym druku lub w formie audio.

Punjabi

ਇਹ ਦਸਤਾਵੇਜ਼ ਹੋਰ ਭਾਸ਼ਾਵਾਂ ਵਿਚ, ਵੱਡੇ ਅੱਖਰਾਂ ਵਿਚ ਅਤੇ ਆਡੀਓ ਟੇਪ 'ਤੇ ਰਿਕਾਰਡ ਹੋਇਆ ਵੀ ਮੰਗ ਕੇ ਲਿਆ ਜਾ ਸਕਦਾ ਹੈ।

Soraini

ئەم بەلگەنامەیە دەتوانرێت بە زمانەکانی تر و چاپی گەورە و فۆرماتێکی دەنگی لەسەر داواکاری بەر دەست بکەیت.

Tigrinya

እዚ ሰነድ እዚ ብኸልእ ቋንቋታት፡ ብዓቢ ፈይላትን ብድምጺ ቅርጽን ምስ ዝሕተት ክቕርብ ይኸእል።

Urdu

درخواست پر یہ دستاویز دیگر زبانوں میں، بڑے حروف کی چھپائی اور سننے والے ذرائع پر بھی میسر ہے۔

Ukrainian

За запитом цей документ може бути доступний іншими мовами, великим шрифтом та аудіоформатом.

☎ Inverclyde HSCP, Clyde Square, Greenock, PA15 1NB 📠 01475 715365



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## 1. Foreword

I am pleased to present the Inverclyde Chief Social Work Officer Annual Report for 2022-23. Having taken up post near the end of the reporting period, I have been keenly aware of the continued commitment and dedication of the entire Health and Social Care Partnership workforce as we continue to recover from the pandemic phase of Covid-19.

The impact of the pandemic on our communities, services and staff, however, has continued alongside the cost-of-living crisis and its significant, adverse effect on communities already struggling with multiple deprivation. The national landscape within which social work and social care services are provided has also continued to be shaped by resource pressures and policy developments including the National Care Service and our commitment to #Keep the Promise.

Strong collaborative working with our partners and the strength of our communities continue to be our greatest assets to tackle these challenges. I hope this report provides a helpful insight into social work activity in Inverclyde over the past year and how we will continue to work with our communities to improve lives with compassion and kindness in the year ahead.

**Jonathan Hinds**  
**Chief Social Work Officer**

## 2. Local Profile

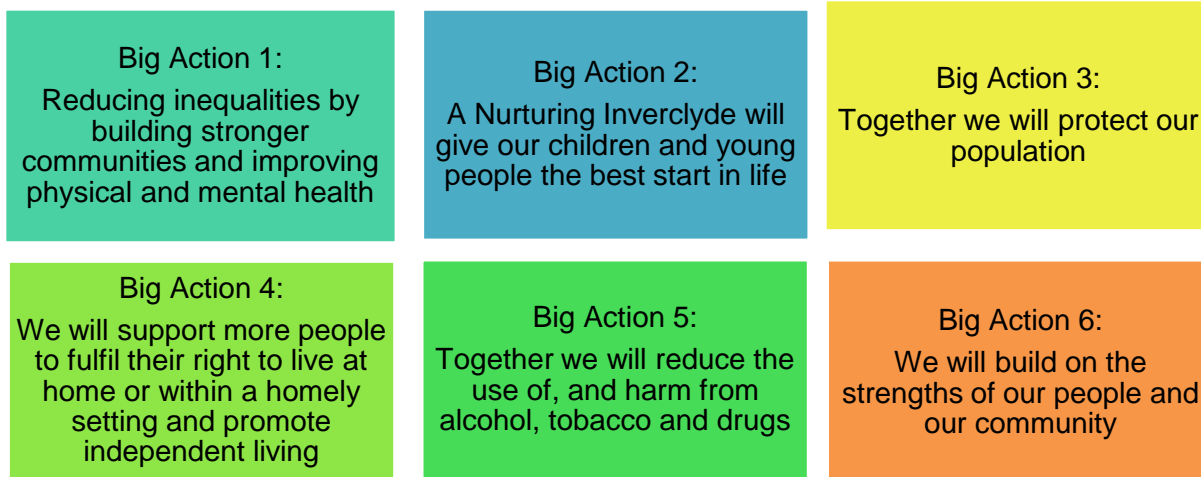
### Our Vision

“Inverclyde is a caring and compassionate, community working together to address inequalities and assist everyone to live active, healthy and fulfilling lives.”

### Strategic Vision

Inverclyde Integration Joint Board (IJB) set out, through its five-year Strategic Plan (2019-24) and the Six Big Actions, our ambitions and our vision. These reflected the many conversations we have with the people across Inverclyde including our professional colleagues; staff; those who use our services including carers; and our children and young people across all sectors and services. Within Inverclyde we fully support the national ambition of ensuring that people get the right care, at the right time, in the right place and from the right service or professional.

### Our Priority 6 Big Actions



This plan was refreshed throughout 2022/23 to reflect updated priorities and key deliverables for 2023/24. The refreshed plan has retained the Six Big Actions which link clearly with the nine National Outcomes for Scotland and the National Outcome Framework for Children, Young People and Community Justice.

This refreshed Strategic Plan and associated Implementation Plan and Performance Framework will lead the IJB forward for 2023/24 and plans are already underway for development of the next Strategic Plan for 2024/25 onwards.

The refreshed plan and associated documents can be accessed here [Strategies, Policies and Plans - Inverclyde Council](#)

## Inverclyde Key Population (estimates) Information

### Population



**76,700**

Inverclyde's population estimated for mid-year 2021.

**21.8%** of Inverclyde's

population is aged over 65 years compared to

**19.6%** for Scotland.

### Overall Deprivation

**43.6%** of the population live in the most deprived SIMD quintile.

This shows a heightened gap in deprivation compared to Scotland.

### Life Expectancy

Male 74.1 Female 78.9



Both the life expectancy for males and females is lower than the Scottish average (M 76.6; F 80.8).

### Healthy

#### Life Expectancy

Male 57.7 Female 59.3



Healthy life expectancy in Inverclyde is lower than the Scottish average. (M 60.4 F 61.1).

### Births 2020-21

Decrease from **13.5** per 1,000 population to **13.4** compared to a rate of **11.6** per 1,000 population for Scotland.

## Our Population Projections

The size and make-up of the population is a key consideration when planning and delivering health and social care services. Inverclyde is expected to continue experiencing a population decrease.

**23.8%** child poverty estimates after housing costs.

**207** Number of children who are looked after.

**28** Child Protection registrations with Parental Alcohol/Drug Misuse concerns.

Rates of Crime recorded by Police per 10,000 population 2020-21

Inverclyde **511** Scotland **451**

Adult Claiming Incapacity Benefit/Severe Disability Allowance **3941**

## 3. Governance and Accountability

### Role of the Chief Social Work Officer (CSWO)

Local authorities are required, under Section 3 (1) of the Social Work (Scotland) Act 1968 as amended, to appoint a Chief Social Work Officer (CSWO). The role of CSWO in Inverclyde is fulfilled by the Head of Service, Children and Families.

The role of the CSWO is to ensure professional oversight of social work practice and service delivery. This includes professional governance, leadership and accountability for the delivery of social work and social care services, whether provided by the local authority or purchased through the third sector or independent sector. Social work services are delivered within a framework of statutory duties and powers and are required to meet national standards and provide best value.

In July 2016, the Scottish Government issued revised national guidance on the role and function of the CSWO (The Role of the Chief Social Work Officer: Principles, Requirements and Guidance pursuant to Section 5 (1) of the Social Work (Scotland) Act 1968), replacing guidance previously issued in 2009.

### Delivery of Statutory Functions

The CSWO has specific responsibilities in respect of statutory decision making and ensuring the provision of appropriate advice in the discharge of a local authority's statutory functions.

The CSWO also has oversight of practice standards relating to services delivered by registered social workers, which will involve public protection and / or the restriction of individual liberty. This requires consideration of individual circumstances, regarding rights, risks, needs and capacity. These judgements are rarely simple, and often require taking account of a range of issues, including the risks to the wider community.

These legislative provisions include the placement of children in secure accommodation, transfers of children subject to supervision requirements, adoption, fostering, Community Payback Orders, statutory interventions linked to the Mental Health Officer role, Adults with Incapacity measures and the protection of children and adults at risk.

It has long been recognised nationally that the role of the CSWO is a complex one and recent years have seen several additional duties and responsibilities added to the role. This is within the context of the vast majority of CSWOs holding a full remit in respect of professional leadership for key service areas and increasingly general management responsibility for often complex, integrated services. The Covid-19 pandemic has resulted in a new focus on this issue. Over the period of the pandemic, CSWOs were required to conduct an increased range and depth of functions associated with the role. This is an area that is subject to discussion within Social Work Scotland and between Social Work Scotland and the office of the Chief Social Work Advisor to the Scottish Government.

Key legislation relevant to the Chief Social Work Officer responsibilities are noted below.

Social Work (Scotland) Act 1968	Children (Scotland) Act 1995
Criminal Procedure (Scotland) Act 1995	Adults with Incapacity (Scotland) Act 2000
Mental Health (Care and Treatment) (Scotland) Act 2003	Adult Support and Protection (Scotland) Act 2007
Children's Hearings (Scotland) Act 2011	Social Care (Self Directed Support) (Scotland) Act 2013
Children and Young People (Scotland) Act 2014	Public Bodies (Joint Working) (Scotland) Act 2014
Mental Health (Scotland) Act 2015	Community Justice (Scotland) Act 2016
Carers (Scotland) Act 2016	Domestic Abuse (Scotland) Act 2018
Duty of Candour (Scotland) Regulations 2018	Health and Care (Staffing) (Scotland) Act 2019

The CSWO meets at regular intervals with the Chief Executive of the Council about matters relating to the delivery of social work and social care and is a non-voting member of the Integrated Joint Board (IJB) and a member of the HSCP Strategic Planning Group (SPG).

In representing the unique contribution of social work services in the delivery of public protection, the CSWO attends the Inverclyde Public Protection Chief Officers Group, is Chair of Inverclyde Child Protection Committee, a member of the Adult Protection Committee and the North Strathclyde Multi-Agency Public Protection Arrangements (MAPPA) strategic oversight group.

At the end of 2022-23, public protection arrangements were augmented by the development of an interim post of Head of Service: Public Protection. The post holder will have delegated authority for the social work and social care training board, workforce development and ensuring that the social services workforce practices within the standards and codes of practice as set out by the Scottish Social Services Council (SSSC).



## 4. Service Quality and Performance

How social work services are improving outcomes for children, young people and families.

### Request for Assistance (RfA) Team

The focus of the Request for Assistance team is to provide a first point of contact for referrals to children and families social work, undertaking initial assessments and supporting families to get the right help at the right time.

During 2022-23, the team undertook 1358 initial assessments and, in addition, provided initial provision advice and guidance on 480 occasions. A key area for development in the next year is improving how we identify and provide support to families to access the most appropriate services in a way that is timely, sustainable, non-stigmatising and needs-based with a focus on systemic whole family wellbeing. Work is progressing around the Whole Family Wellbeing Fund to develop improved cross-sectoral, trauma-informed access to services that builds capacity in our children, young people and families.



1358 initial assessments completed.



480 records of initial provision of advice and guidance.

A key partnership development in February 2023 was the Children 1<sup>st</sup> Family Wellbeing Service commencing in Inverclyde, co-located with the Request for Assistance Team. The aim of this partnership is to increase and improve families' access to early help, reduce unnecessary social work involvement and reduce the number of Interagency Referral Discussions.

By developing trusting relationships and working in partnership with families, appropriate supports to build capacity and reduce risk of further involvement in protective services will be identified. This may include Family Group Decision Making (FGDM), trauma informed systemic whole family wellbeing support and trauma-informed support to individual family members. This may also include working in partnership with other agencies to develop and contribute to multi-agency packages of support in line with GIRFEC, as well as emotional and practical support including access to the Children 1<sup>st</sup> National Money Advice Service.

#### *A young person's feedback:*

*'I am not worrying about school anymore; this is something that caused me a great deal of anxiety. I am now focused on the future and looking forward to starting college in August.'*

As an Early Help Test of Change, 34 families have been introduced to-date, with five currently involved in FGDM. Whilst we are in the initial stages of the journey, a high level of engagement has already been evident from the families referred to Children 1<sup>st</sup> and strong partnership working is already developing.

During 2022-23, 95 child protection investigations were undertaken involving 144 children. Of these, 10 children had more than one investigation. This is higher than last year where there were 82 child protection investigations involving 133 children.

The average number of children on Inverclyde Child Protection Register (CPR) over this year has decreased from 32.75 last year to 31 this reporting period. Inverclyde is 2% above the Scottish average for the number of children on the child protection register (5.6 per 1,000 of the population aged 0-15 years compared to the Scottish average of 3.6 per 1,000 of the population aged 0-15 years).

The majority (95.5%) of children were included on the child protection register for less than one year and 50% were included for less than six months. In addition, 4.5% were included on the register for between 12 and 18 months, reflecting a similar picture during the last reporting period. The number of children whose names were removed from the child protection register (de-registrations) remained broadly consistent across the year, with an average of 17 de-registrations taking place per quarter. There was a small rise (fewer than five) in the number of children who were re-registered within 12 months of being de-registered. It is important to understand the reasons why a family has returned to crisis, therefore quality assurance and audit activity will review decision-making in these cases to inform practice improvement activity for the next year.

Parental mental health difficulties and parental drug use remain the main categories of concern, followed by domestic abuse and parental alcohol misuse. Further analysis and improvement activity will explore how categories of neglect and emotional abuse are identified, including as a consequence of other categories of concern and how this informs assessment processes and decision-making meetings.

Inverclyde Child Protection Committee (CPC) is a locally based, multi-agency strategic partnership responsible for the design, development, publication, distribution, dissemination, implementation and evaluation of child protection policy and practice across Inverclyde. The CPC are also responsible for the quality assurance of multi-agency practice and ensuring that the performance measures put in place lead to improving outcomes for children and young people. During 2022-23 the CPC continued to meet bi-monthly and returned to in-person meetings, having moved to online meetings during the Covid-19 pandemic.

Whilst the immediate crisis of the Covid-19 pandemic may have receded over the past year, our children and their families continue to feel the impact in terms of bereavement and loss of loved ones, personal resilience in relation to ongoing adversity and its impact on mental health and wellbeing. Added to this, the cost-of-living crisis has further adversely impacted families already struggling with inter-generational poverty.

Services responded proactively, building on the Winter Fund for Social Protection which saw individual payments to families in need and widening the criteria for Section 12 and Section 22 payments for children in need, extending access beyond social work staff to Health Visitors, meaning that early help could be accessed more readily for families. Other activity over the past year included income maximisation, summer holiday hubs for children whose parents are in low paid work, support

with the cost of the school day and a fundamental commitment to working in partnership with the families we serve.

Through this activity, the Child Protection Committee and the Child Poverty Action Group (CPAG) have continued to work to reduce and mitigate the impact of child poverty, particularly given increasing evidence that children living in poverty are more likely to be subject to child protection procedures than those who are not.

### Scottish Child Interview Model (SCIM) and Barnahus

This is a joint initiative, involving Inverclyde, East Renfrewshire, East Dunbartonshire, Renfrewshire, Police Divisions G and K and Children's 1<sup>st</sup>. The SCIM pilot was first rolled out across North and South Lanarkshire and has since been built on by our pilot known as the North Strathclyde consortium. Pilots are also running in Dumfries and Galloway and Glasgow and are being developed across a number of other regions in Scotland. The SCIM pilots aims are to ensure that:

- joint investigative interviews of children (interviews conducted where there is a suspicion of criminality on the part of an adult) are conducted in a trauma informed manner.
- that children and their non-abusing care giver will have access to support and advice throughout the JII process with an opportunity to express their views, needs and concerns to inform a best evidence approach.
- that all interviews take place in a safe child friendly, age-appropriate way that considers any developmental or additional needs.
- that all children and their families will receive the practical and emotional support they require to recover.

The North Strathclyde project is in the process of developing a Barnahus, renamed in Scotland as a Bairns Hoose, where children can be supported by a range of services in a single location. This will follow a Scandinavian model for supporting children and young people who are victims of abuse and aims to provide seamless support through investigation, interview and recovery. The Bairns Hoose will launch in autumn 2023.

### iPromise

The iPromise Proposal November 2020 set out the plan for a small, dedicated team to work across the partnership in Inverclyde and with children, young people and their families to deliver the vision of The Promise and iPromise. The team continues to raise awareness of The Promise, what it means to Inverclyde and the role of our workforce, including opportunities to participate in activities to discuss and reflect on our local systems, practices, processes, and culture.

The current plan relating to The Promise for Scotland is the three year 'Plan 21-24' which mapped and sequenced the 80+ calls to action in The Promise and identified our five priority areas.

- ♥ a good childhood
- ♥ whole family support
- ♥ planning
- ♥ supporting the workforce
- ♥ planning and building capacity.

The Promise Scotland produced a mapping tool to help local areas track data around the progress of these areas. Locally, a tracker has been developed to measure progress in each of these areas.



In Inverclyde, the strategic direction and purpose are governed by the iPromise Board, chaired by the Council Chief Executive and three of our young people. The iPromise team are responsible for ensuring the voices of all children and young people are heard at the Board and the response is fed back, promoting Inverclyde’s well-established approach/pledge to [#nothingaboutuswithoutus](#).

## Fostering, adoption and Kinship

### Fostering

By the end of 2022-23, there were 26 fostering households in Inverclyde. Across Scotland, the demand for foster carer placements continues to present significant challenges to capacity and locally, awareness activity including media and digital campaigns have sought to encourage people living in Inverclyde to consider becoming foster carers. Nevertheless, to expand the number of foster carers for Inverclyde children, the team are looking at more innovative ways of working alongside our third sector colleagues and the established workforce to reach a new audience.



101 Formal Kinship Carers in Inverclyde.



128 cared for Children and Young People.



26 Fostering Households in Inverclyde.



25% uplift for fostering fees.

In recognition of the value and importance of foster carers in Inverclyde, a 25% uplift in fostering fees was introduced locally within the past year. Furthermore, we continue to work as part of national activity around a national recommended allowance for foster carers, however until any Scotland-wide agreement is reached, we will finalise a proposal to uplift allowances for foster and kinship carers in Inverclyde.

## Adoption

During the pandemic the number of adopters who enquired and were assessed increased, however the number of children whose permanency plans progressed remained stagnant or reduced, not least of all because of the ongoing impact of the Covid-19 pandemic upon assessment processes and staffing capacity. As a result, the number of approved adopters outweighs the number of children who are seeking adoptive families.

In response, the service focussed on the skills and knowledge of workers within the adoption and fostering team to support front line workers to progress children's permanence plans through legal processes, enabling the team to focus on re-assessing family circumstances and ensuring parents or carers are given the opportunity to take part in Parental Capacity Assessments. This is a key aspect of making permanence decisions about children and mentoring support from the adoption team enabled new workers to develop skills to undertake this work. The model has improved certainty around outcomes for children and it is intended that, with this intensive support, children who have been looked after and cannot return home will have more timely, accurate assessments around their future needs. This will offer children permanent families at a much younger age and improve capacity within foster placements locally.

Inverclyde Adoption and Permanence panel, led by an independent Chair, comprises a medical advisor and a legal advisor as well as Panel members from a range of professional backgrounds or with relevant direct experience. During 2022-23, our Panel included senior social work staff, the service manager for Specialist Children Health Services, an Educational Psychologist, Education Services representative, our Children's Rights Officer, an elected member and an adoptive parent. The panel undertook a range of duties such as registering children who required to be cared for out with their birth family, approving prospective adopters and foster carers, matching between prospective adopters and children and reviewing foster carers every three years.

## Kinship

The kinship care service has grown over the past two years as there has been a steady increase in the number of formal and informal kinship carers using the service. By the end of 2022-23, there were 101 formal kinship carers caring for 128 children and young people in Inverclyde. All carers are offered ongoing support via a dedicated worker from the kinship team. They also have access



to regular support groups, financial advice, support to the children and young people in their care and a kinship allowance once formally approved. They continued to be reviewed at the Kinship Panel on an annual basis to ensure financial and other supports were provided.

The Kinship team has worked with the Kinship Advisory Service in Scotland, (KCASS) and attended their kinship forum. All kinship carers, whether formal or informal carers, were also supported to contact KCASS directly for advice. Locally, the team continue to use a range of methods to enhance communication with kinship carers and to seek their views to evaluate the kinship service.

Training is provided to kinship carers to support the children in their care. Other services have also provided input at support groups, e.g.: alcohol services and KCASS.

## Supporting Young People

Within Inverclyde, 158 young people were eligible for Throughcare, Continuing Care and Aftercare support, with 99 people being actively supported during 2022-23. The focus of the team is to support young people in a relational way to increase their self-esteem through training, education and/or employment, develop practical and financial skills/knowledge and create a safe environment from where they can develop their move towards independence in adulthood.

Learning from the importance of access, communication and community through the pandemic, the team are developing a weekly drop in facility to be launched later in 2023 which will provide our young people with access to additional support services and a place where they can discuss issues which may affect their daily lives and impact on their independence.

In recognition of the need for young people to have flexible support, including out with standard working hours, we expanded our staffing capacity within a model of support packages over seven days, reflecting that young people are often most vulnerable at evenings and weekends. Established, strong links with partners in education and housing services supported individual plans for young people and enhanced key relationships.



158 Young People eligible for Throughcare, Continuing Care and Aftercare support.



99 Young people actively supported.



We have improved our offer of seven days per week support for young people.

The Throughcare team has grown during 2022-23 to provide group work and enhanced transition support to young people as they move towards independence. In addition, two full-time continuing care posts were created to provide dedicated support to young people as they prepare to take on their own tenancies.

The service has continued to offer support to young people who moved on to third and higher-level education out with Inverclyde, alongside more intensive, bespoke packages of care for young people who are more vulnerable within the local area.

Moving into 2023-24, the service will enhance continuous access to supports, recognising that, for many young people, their lives have been characterised by chaotic living and early childhood trauma



which can limit future life choices. With consistent support we hope to increase young people's future life choices and support them to achieve independence.

## Disabled Children and Young People

Throughout 2022-23, the children and families service has included a small team working with disabled children, young people and their families who may require additional resources and other support where children have more complex needs. The journey for many disabled children, young people, and their families through the Covid-19 pandemic has been particularly challenging and is reflected in the service responding to more children and their families in crisis.

The forthcoming national thematic review of social work services for Disabled Children and Young People by the Care Inspectorate echoes some initial self-assessment by the team which enabled a renewed focus on areas of strength and areas for change and improvement. Work has included improved data sets to help us better understand the needs of children and young people as well as cross-sectoral support available in Inverclyde. How we provide support to disabled children and young people, their families and carers will be a key area of development into the next year to enhance the focus on early and effective help including via Self-Directed Support.

## Children's Rights

Our young people designed their own flag for Care Experience Week 2022 which was flown from the Municipal Buildings. They spoke to other young people for ideas and voted on the linked hands and the colours representing the Promise. It includes our Proud to Care partnership and their "nothing about us without us".



Young people also launched a 'Council takeover' for Care Experience week, with young people from our Proud 2 Care group making a video that was shared on all social media platforms. They also took over the Council's corporate communications for a day to raise awareness of our care experienced community and show that we must work together for the benefit of our children, young people and families. The Minister for Children and Young People visited Inverclyde and met our young people, the iPromise team, social workers, and some of our Better Hearings volunteers.

Our young people led a range of discussion-based activities and attendees took part in placing handprints on each of our Inverclyde 5 stop and go pledges to show their support and their commitment in ensuring that these are undertaken.

Our young people also scripted, filmed and directed a film around "language matters" <https://youtu.be/7vrJ1CxBILY> and a corresponding jargon buster document as an easy-to-follow guide of what language we need to change. Feedback from wider agencies was very positive.



Work continued with Inverclyde schools, nurseries and learning establishments to work on their Rights Respecting School Award. This will continue to be an ongoing partnership approach with UNICEF, with Children's Rights awareness raising sessions being rolled out to all schools and a range of partner agencies to ensure that children's rights remain at the heart of all we do in Inverclyde.

Furthermore, our iPromise in the park family fun day brought over 350 people together, in partnership with Your Voice Inverclyde and Active Schools to involve the community in our Promise journey. As part of the commitment to hearing and learning from the lived experiences of the children and young people, other activity with our children and young people included:

- ♥ Co-developing the Inverclyde Rights of the Child (IROC) Award, with young people co-delivering as young assessors.
- ♥ Introduction of the Mind of My Own App for care experienced children and young people to provide their views.
- ♥ Conducting digital surveys and face-to-face engagement with children, young people and their families to inform child protection process, children's services plans, refresh of the strategic plan and Inverclyde's Promise plan.
- ♥ The iPromise in Hearings Working Group listening to children and young people to develop our iPromise in Hearings film and communication toolkit, written and produced by young people.
- ♥ Our approach to participation and engagement has continued to be guided and informed by UNCRC, Children and Young People (Scotland) Act 2014 and the Scottish Approach to Service Design framework for designing services to ensure they are designed with, not for, the people who will use the service, as well as National Standards for Community Engagement good-practice principles.

## How Social Work Services are Improving outcomes for adults.

### Mental Health Officer activity/Adults with Incapacity/Guardianship

The Mental Health Officer (MHO) team delivers core statutory functions contained within the Mental Health (Care and Treatment) (Scotland) Act 2003 and the Adults with Incapacity (Scotland) Act 2000. During 2022-23, the service commenced a process of service re-design and progressing an action plan following an external service review which concluded in early 2021. Most actions have been completed including:

- Creation of a dedicated MHO team leader post.
- Creation of two additional whole time equivalent MHO posts to enhance team capacity.
- Senior Practitioner status available to qualified MHOs who meet the criteria to retain staff and encourage others to take up the MHO training award.
- Annual re-validation process for MHOs.
- Move primary recording of MHO activity to the Social Work electronic recording system.
- Co-production approach with the Learning and Development team to encourage uptake of MHO award.
- Use of risk management triage process for waiting list allocations.



MHO service holds 202 Guardianships (primarily welfare and finance)



42 of these Guardianships are local authority orders with a designated MHO.



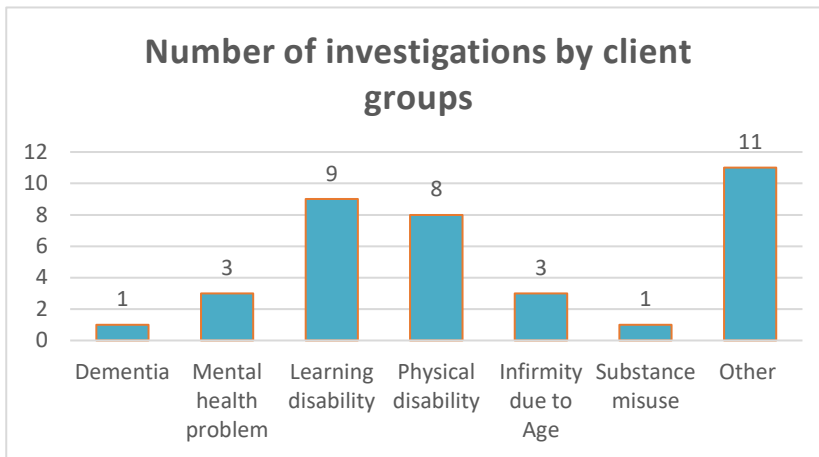
160 are private orders with a named MHO.



There is no waiting list for delayed discharge allocations or L.A. applications for AWIA intervention.

### Adult Support and Protection (ASP)

Adult Support and Protection activity for 2022-23 reflected a 37.5% increase in referrals and investigation rates compared with the 5-year average. The conversion rate from referral to adult protection investigation fell slightly to 11%, from 14.1% the previous year but within the ranges for previous years despite the number of adults referred under adult protection concerns having increased. The principal categories recorded continued to be as follows:



310 Adult Protection Referrals



36 progressed to Adult Protection Investigations



12 of which Progressed to Adult Protection Conference

Local initiatives to support people where there is concern for their wellbeing and welfare included the Inverclyde Distress Brief Intervention Programme, the Emergency Department and Alcohol, Drugs and Recovery Service, Repeat Presentation meetings, alongside an increase in assertive outreach and liaison.

Following the inspection of Adult Protection services in January 2021 the service continued to progress the improvement plan, including the following:

- Roll out of training to all Council Officers and Assessment Staff about chronologies.
- Revised Risk Assessment Guidance and template reissued to staff with briefing sessions completed. Subsequent audit activity noted that risk assessments were evident in 90% of case files, compared to 71% at the time of inspection, with 76% rated good or better compared with 59% at the time of inspection.
- Established explicit recording of the application of 3-point test at all stages of the adult support and protection process - revised templates and guidance were implemented along with staff briefing sessions. Follow up audit of templates found that application of 3-point test was evident in 100% of files and in 88% of files overall when recording within case notes was included.
- New recording guidance for systems, with the ability to upload documents to the electronic document management system (CIVICA).
- Refresh of the Quality Assurance framework, Adult Protection Committee Business Plan and Quality Improvement Plan agreed, where the Business Plan 2022/2024 forms part of the Biennial Report with updates provided to the Public Protection Chief Officers Group, Inverclyde Integration Joint Board and Social Care and Social Work Scrutiny Panel.

## Community Mental Health Services (CMHS)

The CMHS operates an integrated service delivery model, where social work is critical to operational service delivery for the range of interventions provided and in support of wider strategic development and improvement activity. During 2022-23, the team co-ordinated and provided essential mental health treatment and support services to adults and older people, including urgent mental health assessments. Local services worked alongside centralised Mental Health Assessment Units (MHAU) as well as delivering programmes of scheduled treatment/support and an accessible duty service.

During the past year, recruitment challenges across all disciplines continued both locally and across the NHS Greater Glasgow & Clyde Health Board area, with several positions subject to multiple rounds of recruitment due to limited suitable applicants. Hybrid working arrangements, accelerated by the Covid-19 pandemic along with a blended approach to delivering interventions, including face to face and 'Near Me' technology remained a key part of the CMHS operating model, informed by feedback, emerging service demands and staffing capacity to safely deliver services underpinned by individual service user assessed need, risk, vulnerability, and associated legislation.

At the onset of the pandemic caseloads were reviewed and individuals allocated a risk assessed priority of Red, Amber or Green (RAG) to inform frequency and type of contact, with regular review to ensure status remains current. This continued during 2022-23 and is now embedded as a critical element in supporting safe service delivery for individuals, alongside the management of service demand/capacity issues.

## Adult Community and Older People's Mental Health Teams (CMHT and OPMHT)

Our integrated Adult Community Mental Health Team (CMHT) and Older People's Community Mental Health Team (OPMHT) continued to provide specialist multi-disciplinary assessment and evidence-based interventions determined by assessment of risk and vulnerability for individuals experiencing severe and enduring mental health conditions.

During 2022-23, the aims of the teams were to:

- Reduce the stigma associated with mental illness.
- Work in partnership with service users and carers.
- Provide assessment, diagnosis and treatment, working within relevant Mental Health legislative processes.
- Focus upon improving the mental and physical well-being of service users.

Partnership working within the HSCP, inpatient mental health services, with families and carers, primary care and other agencies were critical elements of service delivery. These continued to support the design, implementation, and oversight of comprehensive packages of health and social care to support people with complex mental health needs in suitable settings that meet the needs of individuals and their carers.

Over the past year, an important development was the establishment of a joint Incident Review Group for community and in-patient Mental Health and Alcohol and Drug Recovery Services, which

has provided a more robust, consistent approach to decision making as well as improving the interface between services and service users.

Evidence-based improvement work also continued within the CMHS to ensure safe, timely and effective person-centred care which supported statutory elements of service delivery as well as broadening assurance and developing a range of shared and local initiatives. These included:

- Mental Health support in key areas such as Emergency Departments.
- Implementation of Mental Health Assessment Units and Acute Psychiatric Liaison services.
- Development of the Distress Brief Intervention initiative,
- Increase capacity and develop new ways of working within the Primary Care Mental Health Team and support GP practices and
- Introduction of 'In reach worker' post to support individuals admitted to hospital are discharged home with appropriate support at the earliest opportunity.

### Alcohol and Drug Recovery Service (ADRS)

Inverclyde ADRS is an integrated multidisciplinary team delivering a range of evidence-based care and treatment for adults in Inverclyde experiencing harm from alcohol and drugs. The team supports the delivery of Inverclyde Health and Social Care Partnership (HSCP) Strategic Plan - big Action 5: 'Together we will reduce the use of, and harm from alcohol, tobacco and drugs and the Scottish Government's Drug and Alcohol Strategy: Rights, Respect and Recovery which focuses on improving health by preventing and reducing alcohol and drug use, harm, and related death.

As the service recovered from the pandemic, face-to-face clinics for all scheduled contacts were re-established, with a blended approach to delivering interventions available if appropriate as part of individual care and treatment plans.

The addiction liaison team also worked within acute hospital settings and primary care, including social care drug and alcohol workers returning to support GPs, delivering shared care clinics with governance and support via addiction liaison nurses; assertive outreach to support engagement in treatment; in-reach to people involved with the Homeless Service; and nursing response to near fatal overdose. Interface with other service areas and partner agencies also increased significantly during 2022-23, including development of a Residential Rehabilitation Pathway delivered jointly by ADRS liaison nurses and lead practitioners from Turning Point Scotland (TPS).

Along with local partners from the Alcohol and Drug Partnership (ADP) and across the Health Board area, the service continues to implement and embed the requirements of the Medication Assisted Treatment (MAT) Standards, set up to ensure consistent delivery of safe, accessible, high-quality drug treatment across Scotland. The service has adapted to meet the standards with 1-5 now embedded in practice and 6-10 being progressed for full implementation by April 2024. MAT is the term for use of medication such as opioids, together with any psychological and social support. The 10 MAT standards adopt a rights-based approach, ensuring individuals have choice in their treatment and are empowered to access the right support for where they are in their recovery journey.



In 2022, there were 1,051 drug misuse deaths registered in Scotland, a decrease of 21% (279 deaths). This is the lowest number of drug misuse deaths in Scotland since 2017. Locally, within Inverclyde, the significant reduction in deaths reported in 2021 sadly did not continue into 2022 with an increase of 81% from 16 to 29, more aligned with the 5-year rolling average.

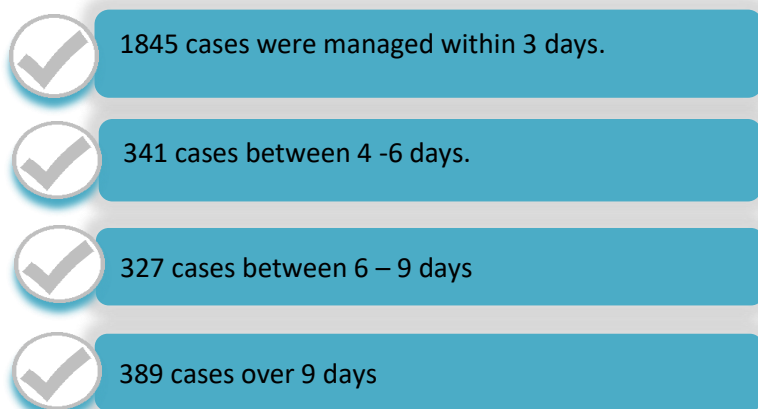
Figures published by National Records of Scotland indicated there were 1,276 alcohol-specific deaths registered in Scotland in 2022, an increase of 2% (31) since 2021. Within Inverclyde, the number of alcohol-specific deaths increased from 26 in 2021 to 28 in 2022, again in line with the 5-year local average, but higher than the Scottish average. The ADP will refresh the strategy and develop a new delivery plan to ensure that we are using resources in prevention activity, care and treatment. We will continue to focus on harm reduction, ensure easy access to care and treatment via the recovery community, ADRS, roll out of the residential rehabilitation pathway and other commissioned supports available locally including roll out of MAT Standards 6-10.

The service contributes to the wider statutory social work function in relation to public protection, overseen by a Team Leader /Senior Social Worker. The social work team returned to full staffing, adding capacity to meet ongoing demand. Improvement in partnership working between HSCP social work and acute colleagues continued to be a priority, to support reduction in delayed discharges from acute hospital settings. During 2022-23, pathways with Justice Social Work were improved, with the introduction of a Criminal Justice Support Worker (Addictions). During 2023-24, this model will be further expanded with the creation of a Young Persons Alcohol Worker to children's services to support young people experiencing harm from alcohol.

## Access 1<sup>st</sup>

Access 1<sup>st</sup> is the local single point of access pathway into Health and Community Care Services. The service continued to receive, screen, and manage referrals to ensure that service users only require to contact the HSCP once and have confidence that their referral will be responded to appropriately in line with the eligibility criteria and individual need.

### 2902 referrals were received during 2022-23:



This table indicates performance in completing and closing cases from the date received. Overall, 86.6% of referrals were managed and closed within 0 to 9 days. 13.4% of referrals continued beyond the 9-day target timescale, largely due to challenges making initial contact with the service user and waiting for information, feedback or responses from other services.

The Advice Service continued to see an increase in demand for face-to-face services during 2022-23 because of developing advice services within local GP practices and other community venues.



2165 new cases opened with around half having used the service before.



152 appeals undertaken by welfare rights officers with 70% outcomes in favour of client.



Financial gains of £5,923,828.95 through benefits awarded, debt written off, grants gained.



486 new service users with a cancer diagnosis seen by our Macmillan welfare advise service.

The Financial Inclusion Partnership delivered a new Strategy in December 2022 with a focus on the following objectives:

- Mitigate the impact of the cost-of-living crisis on (1) children living in poverty and (2) our most vulnerable families/households inc. those living with disabilities and our unpaid carers.
- Engage, equip, and empower a range of “trusted intermediaries” (for example, Health Visitors and Teachers) to ensure that those who are isolated or have restricted access to information/services, are provided with support / connected to partner resources.
- Provide and promote the range of partner services available to Inverclyde Residents as support and responses to the impact of the cost-of-living crisis on their financial wellbeing.
- Provide the range of partner services via an outreach approach within local community facilities and within community focal points on a regular programmed basis.
- Promote the diverse range of partner delivered financial inclusion services and support the financial wellbeing of staff working across our services.
- Provide a programme of financial literacy and capacity building specifically targeted at young people in the 16-18 age range alongside support for schools.
- Involve those who use partner services in the design, deployment, and delivery of services.
- Put in place quality assurance measures to ensure service provision is of best possible quality.
- Establish a sequence and cycle of performance reporting, monitoring and evaluation to ensure that the key objectives are being met.

The partnership agreed the use of additional available funding from the previous IDEAS (Inverclyde Delivering Effective Advice Services) project which supported HSCP Advice Services and third sector partners to deliver on these objectives by mitigating the ending of other temporary funding and responding to the current cost of living crisis.

## How Social Work Services are Improving Outcomes for people involved with Justice services.

### Justice Social Work

Justice Social Work continued to provide a full range of services to individuals with involvement in the criminal justice system within Inverclyde, from early intervention and prevention work with individuals charged, but not yet convicted of crimes, through to supervising those released from prison to serve the remainder their sentences in the community on licence.

During 2022-23, the service expanded early intervention and prevention with the commencement of the Bail Supervision Service in November 2022. This has offered Greenock Sheriff Court a credible alternative to remand for individuals charged with a crime and for those convicted at Court and awaiting sentencing. The provision of Bail Supervision is a key strand in the Scottish Government's National Strategy for Community Justice (2022).

From commencement until 31 March 2023, 166 bail supervision assessments were conducted at Greenock Sheriff Court, with 66 bail supervision orders made. Local Sheriffs provided positive feedback about the service, including the quality of assessments and the professionalism of staff. Defence agents working in Greenock Sheriff Court and local Police colleagues have also spoken positively about the service.

Community-based justice social workers (CBSW) continued to work with the Scottish Prison Service to ensure that release planning for those due to be released from custody is timely and effective. During 2022-23, staff attended 102 Integrated Case Management case conferences (ICMs) for individuals with a proposed release address in the Inverclyde area, an increase of nine from the previous year. The prison-based social work (PBSW) team at HMP Greenock attended 113 ICM case conferences (an increase of 11 from the previous year), regardless of where the individual intended to be released. The service continued to work on building closer links between community and prison-based teams, to enhance benefits across the service by sharing knowledge, skills, and experience. This approach was noted by representatives of the HMIPS/Care Inspectorate team in their inspection of HMP Greenock in early March 2023.

Over the past year, the service employed an additional Justice Support Worker with a specialist focus on addictions. Funding for this post, for one year, was provided by the Alcohol and Drugs Partnership (ADP). The Addictions Support worker supported delivery of effective Drug Treatment and Testing Orders (DTTO) and provided early assessment and intervention to those involved with the service through Bail Supervision or Diversion from Prosecution. This postholder has been proactive in reducing barriers restricting service users' ability to access addiction treatment and recovery services.

The expansion of availability of section 12 funding enabled staff to offer support to individuals in financial crisis including assistance to purchase food and utilities as well as supporting service users to purchase clothing for job interviews. Staff supporting the Unpaid Work Service worked to ensure that food was available for service users during their shift, having noticed people attending hungry and with no means to purchase food. At the end of March 2023, Community Justice Scotland published their annual report on the use of Community Payback Orders (CPOs) which featured a

case study from the Inverclyde CPO annual report reflecting efforts to respond effectively to poverty and deprivation.

The TARL (Throughcare Assessment for Release) process was rolled out to Justice Social Workers in both community and custody settings in November 2022 to support an integrated approach to social work assessment and information to the Parole Board around the prospective release of long-term prisoners.

This replaced the previous system of separate reports and was the culmination of many years of work by practitioners and managers to develop and pilot the current process and guidance. Around 80% of the workforce attended training delivered by Community Justice Scotland prior to the new template coming into practice.

The anticipated benefits of the TARL include stronger communication and consensus between community and prison-based teams around risk assessment and about any identified risk of serious harm.

### Multi Agency Public Protection Arrangements (MAPPA)

The fundamental purpose of MAPPA is public protection and managing the risk of serious harm posed by statutorily defined categories of individuals. MAPPA is a statutory framework through which Responsible Authorities discharge their statutory responsibilities and protect the public in a co-ordinated manner.

The North Strathclyde MAPPA Unit is located within Greenock and supports six local authorities, three Police Divisions and two Health Boards. The Unit consists of two MAPPA Co-ordinators (one part-time), a resource worker, and an admin worker.

In 2022/23 the MAPPA Unit produced a short, animated video outlining the MAPPA process, to support staff induction across all agencies within the North Strathclyde area which can be followed up with more formal training where appropriate. The video was well received, leading to the Scottish Government requesting that a national video be created for use by all MAPPA areas. The North Strathclyde MAPPA Unit assisted in producing the updated video which has since been incorporated into Police and Prison Officer training, whilst work is ongoing with Health colleagues to integrate the video to relevant training programmes.

During 2022-23, the North Strathclyde MAPPA Unit also commenced work to refresh the training provided to Housing and Homelessness colleagues. This work is significant as having access to stable housing has been shown to impact positively in reducing an individual's risk of re-offending, Preparatory work involved senior housing colleagues from local Registered Social landlords (RSLs) and HSCP Homelessness Services. This was supplemented by input from Inverclyde Justice Social Work and the Inverclyde Community Justice Lead Officer to consider the wider Justice landscape and to identify potential opportunities for early engagement to sustain a tenancy or to prevent the need for individuals to make a homelessness presentation.

Finally, the Unit continued to organise MAPPA meetings for all level 2 and 3 offenders, bringing individuals together from various services and agencies to create Risk Management Plans to

manage individuals who pose a risk of serious harm to their community. The MAPPA Unit provided local training for meeting Chairs who also were able to access further, national training provided by Professor Hazel Kemshall.

## Community Justice Partnership

The Inverclyde Community Justice Partnership hosted by Inverclyde Health and Social Care Partnership continued to meet during 2022-23. This year, the Partnership focused on the preparation of a new Inverclyde Community Justice Outcomes Improvement Plan following publication of a revised national strategy for Community Justice in June 2022. A Strategic Needs and Strengths Assessment helped partners to understand local needs and the services and interventions available or needed locally. This indicated:

- a third of people liberated from prison registered as homeless on their release.
- The use of remand and prison for people from Inverclyde is consistently higher than the national average.
- The number of people on community-based sentences who have, (i) left school without qualifications, (ii) are currently not in employment and live in Scottish Index of Multiple Deprivation areas is significantly above the wider Inverclyde population.

This activity has led to a review of governance arrangements for the partnership to reflect the local community justice outcome improvement plan. Aligned to this, other work during the reporting period by the Community Justice Partnership included.

- Working with the Inverclyde Alcohol and Drug Partnership supported the Inverclyde Early Help in Police Custody project.
- creation of the Inverclyde Community Justice Voluntary and Third Sector Forum recognising the role this wider sector plays in delivery justice services or supporting those people who use justice services.
- reviewed the functions of the Unpaid Work Operations Group to have a specific focus on group and individual placements in Inverclyde.
- Contributed to the forthcoming Inverclyde Local Housing Strategy including a focus on individuals experiencing severe and multiple disadvantage (including involvement in justice services) and its impact on housing and homelessness services.
- Supported Justice Social Work in the establishment of a Short Life Working Group to further develop practice around housing needs for people subject to MAPPA.

## Early Action System Change Project

Inverclyde HSCP currently hosts an externally funded Early Action System Change Project – Women Involved in the Criminal Justice System. The Project Team are co-producing system change with a group of women in Inverclyde who are involved in the Criminal Justice System.

Two tests of change were agreed to improve outcomes for women engaged with services: development of trauma informed and responsive services and staff and a commitment to make referral pathways to supportive community resources more accessible and inclusive.

Work from across the reporting year included:

- managers and leaders participating in the Scottish Trauma Informed Leadership Training (STILT). During the reporting year 33 HSCP staff completed this.
- A workshop with those managers and leaders agreeing the cascading of trauma informed systems, services, and practice to staff across Inverclyde HSCP and third sector organisations. This resulted in a series of proposed recommendations across five broad themes; action planning, leadership, staff recruitment and retention, staff supervision, and wellbeing and lived experience.
- An operational STILT Conference in September 2022 bringing together operational managers from HSCP (Criminal Justice, Children and Families, Homelessness, Alcohol and Drug Recovery Service), CVS Inverclyde and Your Voice Inverclyde. This conference supported those services to identify actions to become trauma informed.
- Staff engaging in the trauma training agenda, supported by their managers and embedding this into their practice with people who use Justice services. During 2022-23, 22 staff members completed the Level 3 Trauma Enhanced Training with further training planned for next year.

## Challenges and Improvements

### Cost of Living – Section 12

During 2022/23, the Integration Joint Board agreed to create a Cost-of-Living Fund of £430,000 to support residents via the use of Section 12 and Section 22 legislation for a larger range of staff: grants via the third sector to community organisations and distribution of warm boxes to those in need.

These funds were utilised to combat food and fuel poverty and to support people in need due to the overall cost of living crisis. Spend of £0.165m was recorded in 2022/23, with the remaining funds earmarked for continuation of assistance during 2023/24 financial year.



£0.430m Cost of Living Fund granted in 2022/23



£0.165m spend recorded in 2022/23



401 Individuals and families supported.



284 supported families in SIMD areas 1-5

During 2022/23, 401 individuals and families were supported via the Section 12 and 22 process, a further 194 through grants to community organisations and 500 warm boxes were distributed over the winter period.



The review of home care services which includes both internal and external commissioned services has continued since it began in January 2022. It has considered the additional service requirements due to changes in the Care Inspectorate Standards and the requirements of the Ethical Care Charter. This included thinking about the shape, scope, resilience, and sustainability of internal and external care at home services, informed by increased demand and complexity emerging from the pandemic, whilst managing reducing staffing capacity due to the local and national crisis in social care recruitment and retention.

Throughout the review the HSCP and commissioned providers recognised that recruitment and retention remain a significant challenge. Several initiatives were implemented to attract more people to work in the sector. Although there has been some success, the staff turnover rate has remained high. Analysis of staff leaving the service shows that 47% go on to work within the retail sector for a higher hourly rate.

As part of the review, several initiatives were progressed including incentives such as training opportunities, pension scheme and a career path being promoted. Within the HSCP, joint work with Human Resources, Corporate Communications and Finance teams was progressed around recruitment and retention. Further examples include.

- HR, Corporate Communications, Graphics, DWP regular liaison with dedicated staff resource.
- Recruitment Huddle twice weekly for home care operational staff to monitor and progress and address any delays.
- Fast track events began in priority geographic areas, overview of job role sessions ongoing with Trust Development and DWP.
- TV advertising, posters, social media, internal, my job Scotland all updated and distributed with intention to expand.
- Partnership set up with Inverclyde Development Trust and WCS Head of Social Care Social Care with regular sessions in the Greenock waterfront campus, exploring Clydebank and Paisley with discussion around a bespoke course.

## Learning Disability Hub

Over the past year, Inverclyde HSCP and the Council's Property Services worked with Hub West Scotland, Holmes Miller Architects and appointed contractors McLaughlin and Harvey to complete the technical design stages for a new Learning Disability community building. Detailed Planning Permission will be applied for by the end of the financial year.

Day Opportunities and the Community Learning Disability Team (an integrated team of social work and health professionals) will be co-located in the new build to ensure a more coordinated approach to improving health and wellbeing.



Consultation and engagement with service users, parents and carers, staff and other stakeholders has been integral to this design process. It is intended that the new building will support adults with learning disability and people with autism, particularly those with complex needs.

New energy performance and low carbon emission standards have been included in the design – to work towards achieving net zero emissions. A successful bid was made to the Low Carbon Vacant & Derelict Land Investment Programme, adding £990k of grant funding.

Facilities in the new building will include rebound therapy with a specially designed trampoline installed in the floor, track hoisting, sensory rooms, an Autism zone, and outdoor sensory areas including an accessible woodland walk.

## New Scots

During 2022-23 there was a notable increase in the range and scope of refugee, resettlement and asylum work undertaken. The New to Scotland Team continued to support the established resettlement schemes whilst a range of partnership work developed new pathways of support for refugees and asylum seekers within Inverclyde. During 2022, the conflict in Ukraine led to the UK Government issuing visas for travel to the UK, Scottish Government introducing a super- sponsor scheme and local host families offering accommodation to those fleeing the conflict as well as the opening of dedicated contingency hotel accommodation.

This was a different approach to other resettlement schemes which required a range of partnership working with health, education, housing and third sector colleagues to respond to quickly changing pathways and processes and with families often arriving at very short notice. In addition, Inverclyde also saw the opening of an asylum contingency hotel where single males awaiting asylum outcome decisions were accommodated under the care of MEARS (the UK Government support partner) alongside the provision of dispersed accommodation within the community also supported by MEARS. In response, an asylum health team was created in Inverclyde, which attends the asylum contingency hotel twice weekly, and Ukraine contingency hotel as required, providing a full health assessment, registration with a GP, advice, signposting and onward referral as necessary for every arrival. The team was recognised for their work in the past year when they received a Pride of Inverclyde Award for Outstanding Achievement.

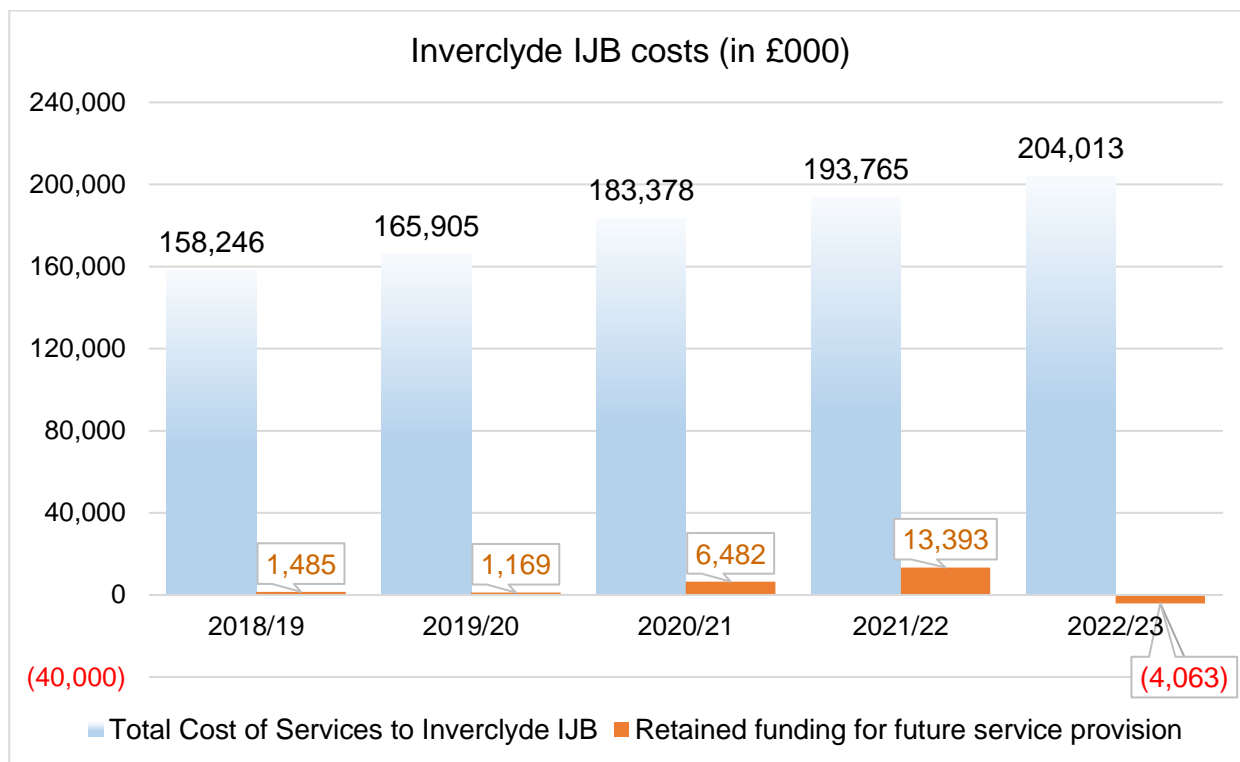
## 5. Resources

### Financial Summary

	2018/19 £000	2019/20 £000	2020/21 £000	2021/22 £000	2022/23* £000
Strategy and Support Services	2,416	2,111	2,133	1,881	1,751
Older Persons	27,020	28,407	30,383	31,015	34,482
Learning Disabilities	11,898	12,545	12,299	13,286	14,427
Mental Health – Communities	6,712	7,101	7,485	7,807	7,292
Mental Health – In Patients	8,729	9,737	10,607	10,689	11,844
Children and Families	13,738	14,114	14,711	16,571	17,152
Physical and Sensory	3,117	3,203	2,939	3,166	3,498
Addiction / Substance Misuse	3,464	3,181	3,826	3,807	4,146
Assessment and Care Management / Health and Community Care	8,258	9,981	10,789	13,055	12,604
Support / Management / Administration	4,174	4,339	450	2,840	7,938
Criminal Justice / Prison Service	26	49	148	85	39
Homelessness	791	1,043	1,173	1,240	1,516
Family Health Services	25,547	27,056	29,618	25,911	27,331
Prescribing	18,591	18,359	18,242	19,166	20,569
Covid-19 pandemic Funding			10,400	7,288	3,388
Change Fund	1,133	1,044	0	0	
<b>Cost of Services directly managed by Inverclyde IJB</b>	<b>135,614</b>	<b>142,270</b>	<b>155,201</b>	<b>157,805</b>	<b>167,977</b>
Set aside	22,632	23,635	28,177	35,960	36,036
<b>Total cost of Services to Inverclyde IJB</b>	<b>158,246</b>	<b>165,905</b>	<b>183,378</b>	<b>193,765</b>	<b>204,013</b>
Taxation and non-specific grant income	(159,731)	(167,074)	(189,860)	(207,158)	(199,950)
<b>Retained (deficit) funding for future service provision</b>	<b>1,485</b>	<b>1,169</b>	<b>6,482</b>	<b>13,393</b>	<b>(4,063)</b>

\*At the time of publishing the 2022/23 figures were provisional and still to be approved by committee.

The IJB collaborates with all partners to ensure that best value is delivered across all services. As part of this process the IJB has continued to review services to seek opportunities for developing services, delivering service improvement and generating additional efficiencies.



#### Budgeted Expenditure vs Actual Expenditure per annum

	2018/19	2019/20	2020/21	2021/22	2022/23
	£000	£000	£000	£000	£000
Projected surplus / (deficit) at period 9 (22/23 – Period 11)	(897)	(37)	(690)	855	(6,302)
Actual surplus / (deficit)	1,485	1,169	6,482	13,393	(4,603)
<b>Variance in Under/(Over) Spend</b>	<b>2,382</b>	<b>1,206</b>	<b>7,172</b>	<b>12,538</b>	<b>1,699</b>

#### Explanation of variances

**2022/23** – the last reported position to the IJB was Period 11 which showed a projected deficit of (£6.302m). The year end position shows an overall deficit on provision of services of (£4.603m), being a favourable movement of £1.699m before year end. This related to movements in client package costs offset by an under recovery in homelessness arrears income and in relation to new and additional reserves created to earmark underspends for use in future years including Cost of Living Funds, refugee funds, children’s residential placements and pay contingency.

## 6. Workforce

### Social Worker Recruitment

Recruitment and retention of social workers continued to be challenging during 2022-23 across the social care sector. In Inverclyde, services have been similarly impacted by recruitment challenges. In response, in January 2023, the Integration Joint Board approved an innovative £150,000 scheme to recruit newly qualified social workers.

This new support scheme will provide funding for the final year of studies for up to 10 Master's students who are not already employed by the council/HSCP to complete their studies. Fees will be paid upon successful completion of the Master's course on the basis the student agrees a three-year contract as a newly qualified social worker.

### Homecare Recruitment Drive

As referred to above, Care and Support at Home recruitment and retention of staff continued to impact directly on internal and external service provision. In a bid to combat persistently high vacancy rates, a recruitment campaign was launched including radio, TV/Digital and multi-media.

The campaign led to 50% of vacancies being filled with a spike in web traffic to the landing page over the campaign period, with 1,872 page visits from 1 September to 15 November 2022.

### Workforce Plan

A three-year workforce plan 2022 - 2025 was developed in line with guidance provided by the Health Workforce Directorate of Scottish Government in DL 2022 (09) 'National Health and Social Care Workforce Strategy: Three Year Workforce Plans'. This builds on both the previous plans of 2020-24 and the comments received from Health Workforce Directorate on the 2020/21 HSCP Interim Workforce Plan. The National Workforce Strategy for Health and Social Care (2022) has been used to guide development of the HSCP plan focussing on the Five Pillars of the Workforce Journey:



**National Workforce Strategy for Health & Social Care 2022**

Core values and principles also apply to services for children and families, as indicated in the Inverclyde Integrated Children's Services Plan 2020-2023 which is the overarching plan that supports all aspects of work with children, young people and families, and these values and principles support our commitment to achieving the National Outcomes for Children. In addition to is the legal requirement to adhere to the National Outcomes and Standards for Social Work Services in the Criminal Justice System.

Other local and national policies and strategies continue to guide planning during the timescale of this plan:

- Refresh and update the Business Support review.
- Continue to implement the Primary Care Improvement Plan and build the multi-disciplinary team. Complete new Learning Disability Services hub building.
- Commence Homeless Service review.
- Continue to develop our Digital Strategy and digital capabilities.
- Further development of Compassionate Inverclyde and Inverclyde Cares.
- Develop a Trauma informed workforce and organisation.
- Continue to promote and support staff health & wellbeing.
- Support and implement formalised hybrid/ home working policies.
- Remobilisation and Covid recovery in line with Scottish Government plans.

## Workplace Wellbeing Matters

The local three-year plan 2020-23 supports the HSCP's organisational recovery and to ensure that support for the mental health and wellbeing of the HSCPs staff remains a priority. The overall aim of the plan is:

*“Across Inverclyde we will deliver on integrated and collaborative approaches to support and sustain effective, resilient, and a valued health and social care workforce.”*

This aim will be fully supported by the primary drivers of:

- Embed and support organisational cultures, where all staff are valued.
- Staff Feel Supported in their Workplaces.
- Staff maintain a sense of connectedness to their team, line manager and organisation.
- Staff, where possible, have the tools and resources to work flexibly (Home, Office, and Community)
- Staff, where possible, have the tools and resources to work in a blended approach (Home, Office, and Community)

As the plan has progressed, key achievements include:

- **Wellbeing Fund:** to support and promote health and wellbeing across the health and social care workforce. Staff and teams can apply for funds to support health and wellbeing initiatives. Staff teams have made the most of the fund by applying for various team activities e.g., team building outdoor events such as paddle boarding, kayaking, scavenger hunts, creating a safe outdoor fire and pizza making.
- **Leisure Activities:** with Inverclyde Leisure to provide closed fitness classes for Inverclyde Council employees, including Nutrition/health classes and staff challenges i.e., March into Spring walking challenge.



- **Central Repository/Hub:** with Inverclyde Council, an online wellbeing hub available to all staff (and the local community). Within this, the HSCP has a dedicated page for staff to find local and national health and wellbeing resources.
- **Monday Messages:** regular information provided, signposting local and national resources, training etc. to the entire HSCP workforce, third sector and independent sector colleagues.
- **Healthy Working Lives:** The 2020 annual assessment was on 'pause' whilst the national team focussed on other priorities. During the past year, the working group has restarted and is working towards meeting the criteria to retain the Gold Award.

## Training, Learning and Development

### Training Board

Several initiatives were progressed during the past year, including a 'grow your own' scheme to support employees to undertake training to become qualified social workers. This approach recognised that Inverclyde HSCP has experienced, skilled, local, and committed social care workers and would benefit from improved career progression opportunities. The Training Board will continue to develop employee support to encourage career development.

During the next year, a Training Board development day will enable teams to discuss and prioritise future training needs across the HSCP. Service needs and staff development will be considered and expertise from practitioners will be used to develop training.

**Newly Qualified Social Workers:** Inverclyde has been part of the early implementation of the Scottish Social Services Council (SSSC) supported year for newly qualified social workers (NQSW) and this has helped to make Inverclyde a more attractive employer. The supported year offers increased supervision, a protected caseload, increased training opportunities and protected learning time. NQSWs have a mentor to offer support to meet the new SSSC standards.

### Homecare Training Programme

The training and development of our Care at Home Staff is crucial to ensure that our workforce have the necessary skills, knowledge, and expertise to provide high-quality care to our service users. Well trained staff are more likely to adhere to best practices, infection control protocols and safety measures, reducing the risk of incidents and errors.

Specific training over the past year enabled staff to keep up to date with requirements to ensure regulatory compliance with the SSSC to ensure that they meet the professional standards and qualifications required for providing quality care services.

## 7. Looking Ahead

The next year will present several opportunities and challenges for the development and delivery of social work and social care services in Inverclyde, in line with many wider national changes.

Services will need to continue to respond to changing demand that reflects both the needs of local communities as well as the impact of Scottish Government priorities around early intervention, prevention and managing risk for the most vulnerable. The impact of the cost-of-living crisis will continue to affect people already facing multiple indicators of deprivation, whilst pathways into and out of services will be critical to managing demand and improving outcomes.

The development of an interim post of Head of Public Protection will strengthen the strategic oversight and co-ordination of child, adult and public protection activity, planning and resources. This will be informed by national strategic scrutiny activity and will provide additional capacity to lead on recruitment, retention and staff development.

For children and families' services, we will review and develop our practice model, including scoping accredited programmes to upskill the workforce and ensure that we provide strengths-based interventions that support improved outcomes for children and young people.

We will improve our data collection and analysis to inform continuous improvement of services that protect children and young people from harm as well as working to shift the balance of care towards earlier help and family support to prevent placement breakdown and enable families to remain together where it is safe to do so.

The financial landscape for social work services will continue to be challenging, where limited budgets and existing resources are likely to be impacted by Safer Staffing legislation, ring-fenced grants coming to an end and the potential impact of reducing or flat cash settlements. It will therefore be important to work within financial parameters whilst highlighting areas of risk and uncertainty that could impact on the provision of social work and social care services.

The voices and views of people who use our services will therefore be critical as we move into the next year. Involving people in decision-making and planning can lead to more tailored and effective care, with empowerment of children, young people and adults continuing to be an opportunity for social work and social care services in Inverclyde to grow and develop within a culture of continuous improvement that can adapt to changing needs.

Finally, I would like to thank my social work, social care and health colleagues, as well as our partners, for their continued dedication, commitment and support to working together with our communities to improve the lives of people in Inverclyde.





**Inverclyde Health and Social Care Partnership (HSCP)**

**Hector McNeil House**

**Clyde Square**

**Greenock**

**PA15 1NB**