

Date: 26 April 2024

A meeting of the Social Work & Social Care Scrutiny Panel will be held on Tuesday 14 May 2024 at 3pm.

Members may attend the meeting in person at Greenock Municipal Buildings or via remote online access. Webex joining details will be sent to Members and officers. Members are requested to notify Committee Services by 12 noon on Monday 13 May 2024 how they intend to access the meeting.

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

Please note that this meeting will be live-streamed via YouTube with the exception of any business which is treated as exempt in terms of the Local Government (Scotland) Act 1973 as amended.

Further information relating to the recording and live-streaming of meetings can be found at the end of this notice.

VICKY POLLOCK Interim Head of Legal & Democratic Services

BUSINESS

** to follow

1.	Apologies, Substitutions and Declarations of Interest	Page
PERFORM		
2.	Revenue & Capital Budget Report – 2023/24 Revenue Outturn Position as at 29 February 2024 Report by Chief Officer, Inverclyde Health & Social Care Partnership and Head of Finance, Planning & Resources, Inverclyde Health & Social Care Partnership	р
ROUTINE	DECISIONS AND ITEMS FOR NOTING	
3.	National Care Service Update Report by Chief Officer, Inverclyde Health & Social Care Partnership	р
4.	Stock Transfer Authorities Homelessness Performance 2022/23 (with presentation)Report by Chief Officer, Inverciyde Health & Social Care Partnership	р

Report by Chief Officer, Inverclyde Health & Social Care Partnership Inverclyde Community Justice Outcomes Improvement Plan (CJOIP) 2024	р
Inversive Community Justice Outcomes Improvement Plan (C.IOIP) 2024	
Report by Chief Officer, Inverclyde Health & Social Care Partnership	р
Inspection of Inverclyde Fostering, Adoption and Continuing Care Services	
Report by Chief Officer, Inverclyde Health & Social Care Partnership	р
Inverclyde Integration Joint Board Budget 2024/26	
Report by Chief Officer, Inverclyde Health & Social Care Partnership	р
The documentation relative to the following item has been treated as exempt information in terms of the Local Government (Scotland) Act 1973 as amended, the nature of the exempt information being that set out in paragraphs 6 and 9 of Part I of Schedule 7(A) of the Act.	
Reporting by Exception – Governance of HSCP Commissioned External Organisations	
Report by Chief Officer, Inverclyde Health & Social Care Partnership	р
	Report by Chief Officer, Inverclyde Health & Social Care Partnership Inverclyde Integration Joint Board Budget 2024/26 Report by Chief Officer, Inverclyde Health & Social Care Partnership The documentation relative to the following item has been treated as exempt information in terms of the Local Government (Scotland) Act 1973 as amended, the nature of the exempt information being that set out in paragraphs 6 and 9 of Part I of Schedule 7(A) of the Act. Reporting by Exception – Governance of HSCP Commissioned External Organisations

The reports are available publicly on the Council's website and the minute of the meeting will be submitted to the next standing meeting of the Inverclyde Council. The agenda for the meeting of the Inverclyde Council will be available publicly on the Council's website.

Please note: this meeting may be recorded or live-streamed via You Tube and the Council's internet site, where it will be capable of repeated viewing. At the start of the meeting the Provost/Chair will confirm if all or part of the meeting is being recorded or live-streamed.

You should be aware that the Council is a Data Controller under the Data Protection Act 2018. Data collected during any recording or live-streaming will be retained in accordance with the Council's published policy, including, but not limited to, for the purpose of keeping historical records and making those records available via the Council's internet site or You Tube.

If you are participating in the meeting, you acknowledge that you may be filmed and that any information pertaining to you contained in the recording or live-stream of the meeting will be used for webcasting or training purposes and for the purpose of keeping historical records and making those records available to the public. In making this use of your information the Council is processing data which is necessary for the performance of a task carried out in the public interest. If you are asked to speak at the meeting then your submission to the committee will be captured as part of the recording or live-stream.

If you have any queries regarding this and, in particular, if you believe that use and/or storage of any particular information would cause, or be likely to cause, substantial damage or distress to any individual, please contact the Information Governance team at <u>dataprotection@inverclyde.gov.uk</u>

Enquiries to - Diane Sweeney – Tel 01475 712147



AGENDA ITEM NO: 2

Report To:	Social Work & Social Care Scrutiny Panel	Date:	12 March 2024
Report By:	Kate Rocks, Chief Officer, Inverclyde Health and Social Care Partnership	Report No:	SWSCP/33/2023
	Craig Given, Head of Finance, Planning and Resources Inverclyde Health and Social Care Partnership		
Contact Officer:	Samantha White	Contact No:	
Subject:	Revenue & Capital Budget Report - as at 29 February 2024	– 2023/24 Reve	enue Outturn Position

1.0 PURPOSE AND SUMMARY

- 1.2 This report advises the Social Work and Social Care Scrutiny Panel on the projected outturn on revenue and capital for 2023/24 as at 29 February 2024.
- 1.3 The current year, 2023/24 revenue projected outturn as at 29 February 2024 is an overspend of £0.710m.
- 1.4 The Social Work capital budget is £9.707m over the life of the projects with £2.601m originally projected to be spent in 2023/24. Slippage of £2.181m is being reported linked to the delay and the re-tender of the Community Hub project which is impacting the ability to achieve financial close and progress to the construction phase. Expenditure on all capital projects to 29 February 2024 is £0.147m (5.65% of approved budget, 45.51% of the revised projection). Appendix 4 details capital budgets.
- 1.5 The balance on the Integration Joint Board (IJB) reserves at 31 March 2023 was £24.262m. Within this balance, specific reserves totalling £6.764m have been delegated to the Council for use in 2023/24. Also, within the IJB reserves balance, smoothing reserves of £5.501m are held in relation to delegated functions to the Council of a more volatile nature, to mitigate the risk of in year overspends, for use during the financial year if required. As at 29 February 2024, it is projected that £0.926m of the smoothing reserves will be utilised in 2023/24.
- 1.6 The projected overspend is likely to remain at year end. As part of the budget paper agreed by the IJB on 25 March 2024, a proposed allocation of the overspend was reported which will mainly affect smoothing reserves. The final outturn position will be reported as part of the annual accounts process and the allocation will be finalised at that time and year end reserve balances updated accordingly. For the purposes of this report the overspend is shown in Appendix 5 as one line until the final allocation is known.

2.0 RECOMMENDATIONS

- 2.1 That the Panel notes the projected current year revenue outturn of £0.710m overspend at 29 February 2024.
- 2.2 That the Panel notes the current projected capital position.
- 2.3 That the Panel notes the current reserves position and the intention to allocate any year end overspend against appropriate reserves.

Kate Rocks Chief Officer Inverclyde Health and Social Care Partnership

3.0 BACKGROUND AND CONTEXT

3.1 The purpose of the report is to advise the Panel of the current position of the 2023/24 Social Work revenue and capital budgets and to highlight the main variances contributing to the 2023/24 projected £0.710m overspend.

3.2 2023/24 Current Revenue Position

As at 29 February 2024, it is currently projected that Social Care will overspend by £0.710m. The table below provides a summary of this position, including the impact on earmarked reserves.

2022/23				2023/24 (£00	00)	
Actual £000	Service	Revised Budget	Outturn	Variance	Prior Variance	Variance Movement
12,449	Children & Families	13,502	16,987	3,485	3,480	5
40	Criminal Justice	97	170	73	81	(8)
26,703	Older Persons	31,620	29,527	(2,093)	(2,185)	92
9,214	Learning Disabilities	10,413	10,464	51	(43)	94
2,740	Physical & Sensory	3,219	3,212	(7)	9	(16)
1,768	Assessment & Care Management	1,929	1,684	(245)	(282)	37
1,080	Mental Health	1,756	1,476	(280)	(202)	(78)
633	Alcohol & Drugs Recovery Service	1,125	762	(363)	(362)	(1)
1,235	Homelessness	1,231	1,595	364	271	93
1,897	PHIC	2,592	2,488	(104)	39	(143)
2,961	Business Support	2,558	2,387	(171)	(36)	(135)
60,719	Delegated Social Work Budget	70,042	70,752	710	770	(60)
3,617	Transfer to EMR	0	0	0	0	(0)
64,336	Social Work Net Expenditure	70,042	70,752	710	770	(60)

2022/23		2023/24 (£000)				
Actual £000	Earmarked Reserves	Approved IJB Reserves	Revised IJB Reserves	Council- delegated Reserves	Projected Spend	Projected Carry Forward
28,325	Earmarked Reserves	24,262	24,563	6,764	1,028	5,736
0	CFCR	0		0	0	0
28,325	Social Work Total	24,262	24,563	6,764	1,028	5,736

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

3.2.2 Children and Families

Children and Families is currently projecting an overall overspend of £3.485m. External residential placements is projected to overspend by £2.593m, an increase of £0.392m from the position reported at period 9. This reflects changes in packages since last reported. A review group continues to closely monitor these placements on a bi-monthly basis to ensure a focussed approach on placements and the associated financial implications, with a view to management

action bringing down the overall costs in the longer term. This group, along with the Children and Families redesign work will contribute to the reduction of future recurring costs.

Fostering, adoption and kinship is currently projecting an overspend of £0.162m, a reduction of $\pounds 0.052$ since period 9 following the allocation of $\pounds 0.163m$ Home Office funding for Unaccompanied Asylum-Seeking Children, offset by additional Kinship placement costs of $\pounds 0.084m$ due to new placements and placement changes, together with other minor movements. A drawdown of $\pounds 0.142m$ of the continuing care reserve is assumed ($\pounds 0.133m$ at period 9).

There is currently a projected net overspend of £0.364m against Employee Costs, a reduction in projected spend of £0.443m from the reported period 9 position. The reduction is due additional vacancies within Other Services, a reduction in the use of sessionals and overtime within Residential Services and updated assumptions across Other and Integrated Services, together with other minor movements across services.

As at period 11 a drawdown of £0.5m has been assumed against the Children and Families residential placements reserve and reflected in the reported position. It is also anticipated that a further draw will be made from this reserve as part of the year end process to address any final overspend. The final allocation will be reported to the IJB in June as part of the annual accounts process.

3.2.3 Criminal Justice

A year-end overspend of $\pounds 0.073$ m is currently anticipated for the service, a minor reduction of $\pounds 0.008$ m from the period 9 position.

3.2.4 Older Persons

Employee costs are currently projected to underspend by $\pounds 0.805m$, an increase in costs of $\pounds 0.092m$ against the position reported at period 9, reflecting revised vacancy assumptions and increased use of additional hours.

The external care at home service has experienced recruitment and retention issues throughout the year, and the number of providers able to provide services has been limited, resulting in a projected underspend of $\pounds 0.926m$ for 2023/24. The increase in projected costs of $\pounds 0.038m$ since period 9 reflects an additional 9 service users being taken on by a provider. It is anticipated that the inception of the new care at home framework from April 2024 will improve this position going forward.

For Residential and Nursing placement costs the projected net underspend is $\pounds 0.234$ m, which represents an increase in projected costs of $\pounds 0.025$ m from the position reported at period 9. This is largely due to a minor reduction in net income from recoveries of $\pounds 0.016$ m for charging orders, $\pounds 0.062$ m additional income from service users following financial assessment, offset by $\pounds 0.071$ increases in direct payments packages and respite bookings.

Day services are currently projected to underspend by $\pounds 0.072m$, a reduction in spend of $\pounds 0.034m$ due to a reduced client count within the service.

The underspends noted above are contributing to an overall projected underspend of £2.093m for Older Persons at this stage.

3.2.5 Learning Disability

Learning Disabilities is currently projecting an overall overspend of £0.051m. Following a review of the income position there is now a projected shortfall of £0.173m, as the day service is no longer generating income from Other Local Authority placements. An exercise is under way to identify virement to address this pressure going forward. This is partially offset by a reduction of £0.025m in the projected overspend on client commitments to £0.305m due to minor changes across the service. There has also been a reduction in the projected underspend for employee

costs of £0.075m in relation to overtime, vacancies and atypical allowances, bringing the revised underspend to £0.334m.

A smoothing reserve of £0.6m is held for Learning Disability client commitments and final allocations of the overall overspend to reserves will be reported at year end.

3.2.6 Physical and Sensory Disability

The service is currently projecting a minor underspend of £0.007m within Physical and Sensory Disability, a minor reduction in costs of £0.016m from the reported period 9 position.

3.2.7 Assessment and Care Management

A year end underspend of ± 0.245 m is currently anticipated for the service, an increase in costs of ± 0.037 m from period 9.

3.2.8 Mental Health

Current commitments for client packages within Mental Health are anticipated to under spend against the full year budget by £0.200m, a minor reduction in projected costs since period 9. There is also a projected over-recovery of payroll management target within employee costs at present of £0.037m, which taken together largely account for the overall projected underspend for Mental Health of £0.240m.

3.2.9 Alcohol and Drugs Recovery Service (ADRS)

As at 29 February 2024, underspends of £0.054m for employee costs and £0.249m for client packages are currently anticipated for the ADRS service for the year. These are the main variances contributing to the overall projections reported.

3.2.10 Homelessness

Homelessness is currently projecting an overspend of £0.364m, a further increase of £0.093m from the period 9 position. The movement is mainly due to additional anticipated agency costs of £0.045m, together with a net increase in the projected property-related costs of £0.051m across various headings.

3.2.11 Planning, Health Improvement & Commissioning

The projected position for PHIC has improved by $\pounds 0.143m$ from period 9 to a projected underspend of $\pounds 0.104m$. This is largely due to additional Improvement Service income of $\pounds 0.058m$ and $\pounds 0.077m$ MacMillan income contributing to temporary staffing costs incurred.

3.2.12 Corporate Director

The reduction of $\pounds 0.135m$ from the projected period 9 position is mainly due the release of contingency budgets within corporate support, following a review of budgets requirements in advance of year-end. An underspend of $\pounds 0.171m$ is currently anticipated for the service.

4.0 2023/24 Current Capital Position

4.1 The Social Work capital budget is £9.707m over the life of the projects with £2.601m originally projected to be spent in 2023/24. Slippage of £2.178m is being reported linked to the delay and the re-tender of the Community Hub project which is impacting the ability and delays on the delivery of the Swift upgrade. Expenditure on all capital projects to 29 February 2024 is £0.147m (5.65% of approved budget, 45.51% of the revised projection). Appendix 4 details capital budgets.

4.2 New Community Hub

Detailed planning approval is in place. Demolition and first stage building warrants are in place with second stage submitted. Engagement continues in respect of the current statutory approvals and planning conditions related to the re-tender exercise;

- Detail design stage has been completed. As previously reported, there has been slippage on the programme due to delays associated with the market testing process with a re-tender exercise necessary involving a value engineering review predominantly focused on the foundation and groundworks elements of the project;
- As previously reported, the main risk to the project remains in connection with overall affordability in relation to inflation and the challenging economic / market conditions which continue to impact the delivery of all capital programme projects, and this has been a significant factor in the requirement for a re-tender exercise.
- Tenders have been returned and are currently being evaluated including addressing any tender qualifications. Final hub stage 2 report is anticipated imminently to allow final reports to be prepared on the outcome and comparison with current budget allocation.

4.3 SWIFT replacement

The discovery phase of the implementation of the ECLIPSE system is ongoing, with officers conducting detailed due diligence in relation to the content of OLM's Discovery Report. A report on proposed next steps is currently being prepared for consideration by CMT. The first payment milestone will only be met once the report has been considered and the project progresses. This delay means that the payment milestones are now expected to occur in 2024/25 financial year, and this is reflected in Appendix 4.

5.0 PROPOSALS

5.1 Proposals for this paper are contained within the Recommendations at Section 2.0.

6.0 IMPLICATIONS

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

SUBJECT	YES	NO
Financial	Х	
Legal/Risk		Х
Human Resources		Х
Strategic (Partnership Plan/Council Plan)		Х
Equalities, Fairer Scotland Duty & Children/Young People's Rights		Х
& Wellbeing		
Environmental & Sustainability		Х
Data Protection		Х

6.2 Finance

One off Costs

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

Annually Recurring Costs/ (Savings)

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

6.3 Legal/Risk

There are no legal implications arising from this report.

6.4 Human Resources

There are no human resources implications arising from this report.

6.5 Strategic

There are no strategic implications

6.6 Equalities, Fairer Scotland Duty & Children/Young People

(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.
	No policy changes/implications

(b) Fairer Scotland Duty

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

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

	YES – A written statement showing how this report's recommendations reduce inequalities of outcome caused by socio-economic disadvantage has been completed.
	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.
x	No policy changes/implications

(c) 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.

6.7 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.

6.8 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.

7.0 CONSULTATION

7.1 There has been no consultation in relation to this report

8.0 BACKGROUND PAPERS

8.1 Not applicable

Budget Movement - 2023-24

Period 11 1 April 2023 - 28 February 2024

	Approved Budget			Movements			Amended Budget	IJB Funding Income	Revised Budget
Service	£000	Inflation £000	Virement / Reallocation £000	Supplementary Budgets £000	IJB Funding £000	Transfers (to)/ from Earmarked Reserves £000	£000	£000	£000
Children & Families	12,905	0	(40)	637	0	0	13,502	0	13,502
Criminal Justice	97	0	0	0	0	0	97	0	97
Older Persons	31,062	0	332	226	0	0	31,620	0	31,620
Learning Disabilities	9,669	0	550	194	0	0	10,413	0	10,413
Physical & Sensory	2,906	0	261	52	0	0	3,219	0	3,219
Assessment & Care Management	2,824	0	(843)	(52)	0	0	1,929	0	1,929
Mental Health	1,735	0	(54)	75	0	0	1,756	0	1,756
Alcohol & Drugs Recovery Service	1,017	0	18	90	0	0	1,125	0	1,125
Homelessness	1,160	0	56	15	0	0	1,231	0	1,231
Planning, Health Improvement & Commissioning	1,949	0	115	528	0	0	2,592	0	2,592
Corporate Director (including Business Support)	3,634	0	(395)	121	0	0	3,360	0	3,360
Contribution from Pay Contingency Reserve	(199)	0	0	0	0	0	(199)	0	(199)
Contribution from General Reserves	(603)	0	0	0	0	0	(603)	0	(603)
Totals	68,156	0	0	1,886	0	0	70,042	0	70,042

Revenue Budget Projected Outturn - 2023/24

2022/23		20	23/24 (£000)		
Actual Subjective Analysis £000	Approved Budget	Revised Budget	Outturn	Variance	Budget Variance (%)
34,507 Employee costs	37,478	39,649	38,574	(1,075)	(2.71)
1,652 Property costs	1,122	1,341	1,678	337	25.13
1,435 Supplies & services	1,211	1,253	1,261	8	0.64
254 Transport & plant	355	355	324	(31)	(8.73)
958 Administration costs	772	851	1,025	174	20.45
48,379 Payments to other bodies	50,866	52,919	54,866	1,947	2.88
(26,466) Income	(23,648)	(26,326)	(26,976)	(650)	2.47
60,719	68,156	70,042	70,752	710	1.01
3,617 Transfer to Earmarked Reserves	0	0	0	0	0
64,336 Social Work Net Expenditure	68,156	70,042	70,752	710	1.01

2022/23			20	23/24 (£000)		
Actual £000	Objective Analysis	Approved Budget	Revised Budget	Outturn	Variance	Budget Variance (%)
12,449	Children & Families	12,905	13,502	16,987	3,485	25.80
40	Criminal Justice	97	97	170	73	2.93
26,703	Older Persons	31,062	31,620	29,527	(2,093)	(6.62)
9,214	Learning Disabilities	9,669	10,413	10,464	51	0.49
2,740	Physical & Sensory	2,906	3,219	3,212	(7)	(0.22)
1,768	Assessment & Care Management	2,824	1,929	1,684	(245)	(12.70)
1,080	Mental Health	1,735	1,756	1,476	(280)	(15.95
633	Alcohol & Drugs Recovery Service	1,017	1,125	762	(363)	(32.27)
1,235	Homelessness	1,160	1,231	1,595	364	29.57
	Planning, Health Improvement &					
1,897	Commissioning	1,949	2,592	2,488	(104)	(4.01
	Corporate director (including					
2,961	Business Support	2,832	2,558	2,387	(171)	(6.68
60,719		68,156	70,042	70,752	710	(20
3,617	Transfer to Earmarked Reserves	0	0	0	0	0
64,336	Social Work Net Expenditure	68,156	70,042	70,752	710	1.01

Material Variances - 2023/24

2022/23				2023/24	(£000)		
Actual £000	Budget Heading	Revised Budget	· · ·	Actual to 28/02/24	Outturn	Variance	Percentage Variance (%)
	Employee Costs						
6,792	Children & Families	7,732	6,482	7,253	8,096	364	4.71
1,764	Criminal Justice	1,975	1,656	1,699	1,877	(98)	(4.96)
11,907	Older Persons	13,962	11,705	12,183	13,158	(804)	(5.76)
2,642	Learning Disabilities (LD)	3,197	2,680	2,612	2,863	(334)	(10.45)
1,253	Physical Disabilities	1,407	1,180	1,251	1,357	(50)	(3.55)
2,326	Assessment & Care Management	2,446	2,051	2,111	2,310	(136)	(5.56)
1,263	Mental Health	1,499	1,257	1,337	1,461	(38)	(2.54)
1,215	Alcohol & Drugs Recovery Service	1,349	1,131	1,162	1,295	(54)	(4.00)
1,087	Homelessness	1,087	911	1,002	1,075	(12)	(1.10)
2,023	Planning, Health Improvement & Commissioning	2,169	1,818	2,088	2,250	81	3.73
33,253		36,823	30,871	32,698	35,742	(1,081)	(2.94)
	Non-Employee Costs						
	Children & Families						
2,332	Client Commitments - External residential placements	2,810	2,378	4,755	5,102	2,292	81.57
2,091	Client Commitments - Adoption, fostering & kinship placements	2,244	1,899	2,420	2,407	163	7.26
	Client Commitments - Homecare	0	0	0	105	105	
237	Client Commitments - LD Child respite and homecare packages	248	210	561	653	405	163.31
35	Property Costs - Rates	29	25	66	66	37	127.59
22	Transport Costs - Residential	5	4	29	37	32	640.00
0	Payments to Other Bodies (PTOB) - Homestart	54	46	50	101	47	87.04
	PTOB - Section 22	16	14	61	62	46	287.50
	Criminal Justice						
(264)	Income - Prison cost recoveries	(430)	(364)	(244)	(314)	116	(26.98)

Material Variances - 2023/24

2022/23		2023/24 (£000)								
Actual £000	Budget Heading	Revised Budget	Proportion of budget	Actual to 28/02/24		Variance	Percentage Variance (%)			
	Older Persons									
3,690	Client Commitments - External Homecare	4,789	4,052	3,197	3,894	(895)	(18.69)			
16,932	Client Commitments - Residential & Nursing	18,491	15,646	15,717	18,238	(253)	(1.37)			
564	Client Commitments - Day Services external packages	663	561	499	591	(72)	(10.86)			
27	Property Costs - Cleaning	0	0	26	29	29				
29	Transport Costs - Day Care - Internal Transport Drivers and External Hires	147	124	26	50	(97)	(65.99)			
82	PTOB - CM2000	155	131	83	111	(44)	(28.39)			
(28)	Income - Charges and Recoveries	(53)	(45)	(17)	(31)	22	(41.51)			
	Learning Disabilities									
11,032	Client Commitments	11,584	9,802	9,841	11,889	305	2.63			
0	Various - LD Estates underspends	64	44	0	0	(64)	(100.00)			
(129)	Income - Day Services	(186)	(157)	(2)	(13)	173	(93.01)			
	Physical and Sensory									
2,317	Client Commitments	2,573	2,177	2,234	2,594	21	0.82			
	Assessment & Care Management:									
200	Client Commitments - Respite/Short break commitments	338	286	155	211	(127)	(37.57)			
0	PTOB - Independent Sector Lead	0	0	48	48	48				
0	Income - Cost Recoveries	0	0	(51)	(51)	(51)				
	Mental Health									
1,747	Client Commitments	2,112	1,787	1,515	1,912	(200)	(9.47)			
8	PTOB - Community Mental Health Other Expenditure	35	30	8	8	(27)	(77.14)			
	Alcohol & Drugs Recovery Service:									
310	Client Commitments	536	454	198	287	(249)	(46.46)			
20	Property Costs - Cleaning	1	1	20	24	23				
7	PTOB - Recovery Café and Moving On	105	89	0	0	(105)	(100.00)			

Material Variances - 2023/24

2022/23				2023/24	4 (£000)		
Actual £000	Budget Heading	Revised Budget	· ·		Outturn	Variance	Percentage Variance (%)
	Homelessness						
252	Client Commitments	218	184	132	188	(30)	(13.76)
229	Property Costs - Scatter Flats Rent	102	86	194	215	113	110.78
27	Property Costs - Furniture & Fittings	32	27	57	77	45	140.63
0	PTOB - Agency Staff	0	0	194	225	225	0.00
	Planning, Health Improvement (HI) & Commissioning:						
182	Supplies & Services - Software Maintenance	200	169	171	162	(38)	(19.00)
(36)	Income - Improvement Service and MacMillan	(47)	(40)	(258)	(183)	(136)	289.36
	Business Support						
190	Administration Costs - Insurance	145	123	0	190	45	31.03
0	PTOB - Contingency budgets	183	155	0	0	(183)	(100.00)
42,164		47,163	39,897	41,685	48,884	1,721	3.65
75,417	Total Material Variances	83,986	70,768	74,383	84,626	640	0.76

Appendix 4

Social Work

Capital Budget 2023/24

Period 11 1 April 2023 - 28 February 2024

Project Name	Est Total Cost		••		Actual to 28/02/2024		Estimate 2025/26	Future Years
	£000	£000	£000	£000	£000	£000	£000	£000
Social Work								
New Community Hub	9,507	332	2,401	323	147	5,447	3,405	0
Swift Upgrade	200	0	200	0	0	200	0	0
Social Work Total	9,707	332	2,601	323	147	5,647	3,405	0

5.65% App Budget 45.51% Rev Est 87.58% Slippage

Earmarked Reserves - 2023/24

Period 11 1 April 2023 - 28 February 2024

Project	Lead Officer/ Responsible Manager	c/f Funding	New Funding Reserves	New Funding Other	Proposed Write Backs	Total Funding	Projected Spend	Amount to be Earmarked for 2024/25 & Beyond	Lead officer Update
		2022/23	2023/24	2023/24	2023/24	2023/24	2023/24		
		£000	£000	£000		£000	£000	£000	
Tier 2 School Counselling	Jonathan Hinds	329				329	63		Commissioning of new contract underway. Full spend anticipated over next few years of contract. Transfer to EMR to be made at year-end in line with previous years.
Whole Family Wellbeing	Jonathan Hinds	486		267		753	243		Some recruitment now in place. Consideration of spending plans under way
National Trauma Training	Jonathan Hinds	50				50	0	50	Spending plans being developed.
Refugees	Alan Best	2,190				2,190	-646		New Scots team and associated spend. EMR committed for use over approximately next 4 years. Balance of income over expenditure to be transferred at year-end as in previous years.
Autism Friendly	Alan Best	157				157	82		To implement the National and Local Autism strategies with an aim to create an 'Autism Inclusive Inverclyde'.
Integrated Care Fund	Alan Best	108				108	0		Fully committed - independent sector lead post years 2 and 3.
Delayed Discharge	Alan Best	94				94	28	66	Fully committed.
Winter Pressures Care at Home	Alan Best	1,059				1,059	299		Care and support at home review commitments plus ongoing care at home requirements being progressed.
Winter Pressures Interim Beds	Alan Best	92				92	92	0	Fully utilised
Carers	Alan Best	304				304	0		Work is underway to identify the best use of these funds. An update will be provided on plans in due course.
Dementia Friendly	Katrina Phillips	9				9	9	0	Fully utilised
ADRS fixed term posts	Katrina Phillips	109				109	85	24	Fully committed.
Rapid Rehousing Transition Plan (RRTP)	Alan Best	180		34		214	146	68	Fully committed.
Temporary posts	Craig Given	675				675	175	500	Will be fully utilised 23/24 to 25/26
Welfare	Craig Given	341				341	173	168	Fully committed.
Cost of Living	Craig Given	265				265	265	0	Fully utilised
Wellbeing	Alan Best	15				15	14		Wellbeing campaign to raise awareness and enable access to wellbeing resources available.
Council delegated reserves		6,463	0	301	0	6,764	1,028	5,736	

Earmarked Reserves - 2023/24

Period 11 1 April 2023 - 28 February 2024

Project	Lead Officer/ Responsible Manager	c/f Funding	New Funding Reserves	New Funding Other	Proposed Write Backs	Total Funding	-	Amount to be Earmarked for 2024/25 & Beyond	
		2022/23	2023/24	2023/24	2023/24	2023/24	2023/24		
		£000	£000	£000		£000	£000	£000	
Pay contingency	Craig Given	1,085				1,085	199	886	To address any additional pay award implications for 23/24.
Client Commitments - general	Craig Given	605				605	85		To address potential demographic pressures.
Adoption/Fostering/Residential Childcare/ Kinship	Jonathan Hinds	1,500				1,500	500	1,000	Smoothing reserve to address in year pressures if required.
Continuing Care	Jonathan Hinds	425				425	142	283	Smoothing reserve to address in year pressures if required.
Residential & Nursing	Alan Best	1,286				1,286	0	1,286	Smoothing reserve to address in year pressures if required.
Learning Disabilities Client Commitments	Alan Best	600				600	0	600	Smoothing reserve to address in year pressures if required.
Learning Disabilities Redesign	Alan Best	500				500	0	500	Fixtures and fitting for LD hub.
IJB PCIP	Alan Best	156				156	136	20	IJB reserve
IJB ADP	Katrina Phillips	894				894	383	511	IJB reserve
IJB Mental Health - Action 15	Katrina Phillips	21				21	-89	110	IJB reserve
IJB Mental Health Transformation	Katrina Phillips	637				637	147	490	IJB reserve
IJB Contributions to Partner Capital Projects	Kate Rocks	1,099				1,099	4		Shared reserve including commitment for Community Hub
IJB Primary Care Support & Public Health	Hector McDonald	569				569	99	470	IJB reserve
IJB Prescribing Smoothing Reserve	Alan Best	1,091				1,091	0	1,091	IJB reserve
IJB Addictions Review	Katrina Phillips	292				292	55	237	IJB reserve
IJB Transformation Fund	Kate Rocks	1,739	50			1,789	370		Expenditure on projects approved by the Transformation Board and IJB. Updates reported regularly to Transformation Board. Projects can be Council, Health or Joint. This is an IJB reserve & Health spend is coded to 94024.
IJB Covid Community Living Change	Alan Best	292				292	178	114	IJB reserve
IJB Staff L&D Fund	Jonathan Hinds	404				404	200	204	IJB reserve
IJB Homelessness	Alan Best	450				450	403	47	IJB reserve
IJB Swift	Craig Given	371				371	156	215	IJB reserve

Earmarked Reserves - 2023/24

Period 11 1 April 2023 - 28 February 2024

Project	Lead Officer/ Responsible Manager	c/f Funding 2022/23	New Funding Reserves 2023/24	New Funding Other 2023/24	Proposed Write Backs 2023/24	Total Funding 2023/24	Projected Spend 2023/24	Amount to be Earmarked for 2024/25 & Beyond	Lead officer Update
IJB CAMHS Tier 2	Jonathan Hinds	£000 100	£000 -100	£000		£000 0	£000 0	£000	IJB reserve
IJB WP MDT	Alan Best	253	100			253	220		IJB reserve
IJB WP HSCW	Alan Best	331				331	207	124	IJB reserve
IJB Care Home Oversight	Alan Best	65				65	-23	88	IJB reserve
IJB Digital Strategy	Alan Best	583				583	353	230	IJB reserve
IJB MH Recovery & Renewal	Alan Best	784				784	477	307	IJB reserve
IJB LD Health Checks	Alan Best	32				32	32	0	IJB reserve
The Lens Project	Jonathan Hinds	0	50			50	44	6	Projects identified and committed
IJB Free Reserves	Kate Rocks	1,635				1,635	603	1,032	IJB reserve
Draw on reserves for year end overspend - to be allocated to appropriate reserves at year end	Craig Given					0	818		Anticipated draw for IJB overspend at P9
Overall Total Check		24,262	0	301	0	24,563	6,727	17,836	



AGENDA ITEM NO: 3

Report To:	Social Work & Social Care Scrutiny Panel	Date:	14 May 2024
Report By:	Kate Rocks Chief Officer Inverclyde HSCP	Report No:	SWSCSP/15/2024/JH
Contact Officer:	Jonathan Hinds Chief Social Work Officer Inverclyde HSCP	Contact No:	01475 715282
Subject:	National Care Service Update		

1.0 PURPOSE AND SUMMARY

- 1.2 The purpose of this report is to update members of the Social Work and Social Care Scrutiny Panel regarding the National Care Service (Scotland) Bill and national developments in this regard.
- 1.3 Within the last verbal update to the Social Work and Social Care Scrutiny Panel on 12 March 2024, members were advised that the Bill returned to the Scottish Parliament on 28 February 2024.
- 1.4 Further activity has taken place nationally, including meetings of COSLA and Scottish Government representatives as well as operational updates to the national Chief Social Work Officers Committee.

2.0 RECOMMENDATIONS

2.1 Members of the Social Work and Social Care Scrutiny Panel are asked to note the update on national activity around the proposed National Care Service Bill.

Kate Rocks Chief Officer Inverclyde HSCP

3.0 BACKGROUND AND CONTEXT

- **3.1** Following Stage 1 reading on 28 February 2024, the National Care Service (Scotland) Bill has proceeded to Stage 2, where MSPs have the opportunity to propose amendments. This stage involves detailed scrutiny of the Bill's provisions, including consideration of further amendments.
- 3.2 The Health, Social Care and Sport Committee continue to meet to consider its approach to the scrutiny of the Bill at Stage 2. Matters pertaining to the National Care Service, including any papers, however, continue to be taken in private.
- 3.3 A key change at Stage 2 will be the plan to establish a new National Care Service (NCS) Board including Scottish Government, Local Government, NHS and people with lived experience as a minimum. The NCS Board would provide oversight and governance of social work, social care and community health services, including an improvement framework, embedding good practice and supporting local areas when standards or needs are not being met, informed by further co-design work.
- 3.4 Reformed Integration Joint Boards (IJBs) would be accountable to the NCS Board whilst local authorities and NHS would retain existing responsibilities, staff and assets.
- 3.5 Regular tri-partite meetings between the Scottish Government, NHS and Local Government have continued; IJB Chief Officers are now also represented within this forum. Meanwhile, a recently established Local Government Advisory Group is jointly chaired by COSLA and SOLACE, to consider the challenges around the development of the National Care Service. This group also includes representatives from SOLAR, SPDS, Social Work Scotland and Directors of Finance.
- 3.6 COSLA and Scottish Government officials have continued to meet to consider the options pertaining to the place of children's and justice social work services within the proposed model for the NCS.
- 3.7 Challenges continue around options that reflect the different delegation arrangements currently in place for children and justice social work services across Scotland, as well as the aim to reduce geographical variations in the scope of the NCS whilst ensuring the design, development and delivery of services reflect local needs.
- 3.8 As members are aware, the National Social Work Agency (NSWA) was introduced within a Policy Memorandum accompanying the National Care Service (Scotland) Bill to provide national leadership and to oversee social work education, improvement, workforce planning and training. Arrangements for how the NSWA would be established and implemented remain subject to ongoing discussion with partners through a national advisory group.
- 3.9 Representatives from COSLA, the office of the Chief Social Work Advisor, Social Work Scotland, Scottish Government and Local Government advisers are considering the potential form and governance arrangements for a NSWA.
- 3.10 This includes whether the NSWA would be an Executive Agency (part of the Scottish Government but a separate public body) or a Non-Departmental Public Body (not part of the Scottish Government).
- 3.11 Discussion with Local Government advisors, including SOLACE and Chief Social Work Officers has emphasised the importance of a meaningful partnership approach between Local and Scottish Government and Social Work Scotland, with clear accountability arrangements, particularly regarding the role of the Chief Social Work Officer. It is expected that a formal options appraisal will take place in the near future to inform this discussion.

4.0 PROPOSALS

- 4.1 The Chief Social Work Officer, through the national Chief Social Work Officer Committee (Social Work Scotland) shall continue to contribute to ongoing discussions about the proposed National Care Service and National Social Work Agency and the potential implications for provision of quality social work and social care services in Inverclyde.
- 4.2 A further report can be brought to a future meeting of the Social Work and Social Care Scrutiny Panel as appropriate.

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		Х
Legal/Risk		Х
Human Resources		Х
Strategic (Partnership Plan/Council Plan)		Х
Equalities, Fairer Scotland Duty & Children/Young People's Rights		Х
& Wellbeing		
Environmental & Sustainability		Х
Data Protection		Х

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 (lf Applicable)	Other Comments
N/A					

5.3 Legal/Risk

N/A

5.4 Human Resources

N/A

5.5 Strategic

N/A

5.6 Equalities, Fairer Scotland Duty & Children/Young People

N/A

(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) 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.

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.

(c) Children and Young People

Х

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

5.7 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.

5.8 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.
х	NO – Assessed as not relevant as this report does not involve data processing which may result in a high risk to the rights and freedoms of individuals.

6.0 CONSULTATION

6.1 N/A

7.0 BACKGROUND PAPERS

7.1 N/A



AGENDA ITEM NO: 4

Report To:	Social Work & Social Care Scrutiny Panel	Date:	14 May 2024
Report By:	Kate Rocks Chief Officer Inverclyde Health & Social Care Partnership	Report No:	SWSCSP/12/2024/AB
Contact Officer:	Alan Best Interim Head of Health & Community Care	Contact No:	01475 715372
Subject:	Stock Transfer Authorities Homele	ssness Perfo	rmance 2022/23

1.0 PURPOSE AND SUMMARY

- 1.1 □ For Decision □ For Information/Noting
- 1.2 The purpose of this report is to advise the Social Work & Social Care Scrutiny Panel of the comparative performance of homelessness services across the six Large Scale Voluntary Transfer (LSVT) authorities in Scotland. The report will compare Inverclyde to a selection of Scottish average key performance indicators. The data, published by the Scottish Government in September 2023 was presented to Inverclyde Health and Social Care Partnership in October 2023 by Scotland's Housing Network.
- 1.3 During 2022/23 there was a significant increase in homeless applications across Scotland taking numbers well above pre-pandemic levels. Despite this Inverclyde has managed to achieve a 10% reduction in applications due to focussing on homelessness prevention and working to facilitate moves in a more planned way avoiding a crisis in the first place.
- 1.4 In 2022/23, let's to homeless households for Inverclyde Registered Social Landlords (RSL's) was 34%, with the Scottish local authority average being 49%.

2.0 RECOMMENDATIONS

- 2.1 Members are invited to note the content of the report which provides a data driven view to both positive achievements and note the direction of travel of the change programme.
- 2.2 Members are asked to note the proposed joint development of a temporary Local Lettings Initiative (LLI) to increase the percentage of allocations to homeless households across the Inverclyde RSL's which would serve to increase choice and control for households in crisis and improve tenancy sustainment figures and prevent costly repeat homelessness.

Kate Rocks, Chief Officer Inverclyde Health & Social Care Partnership

3.0 BACKGROUND AND CONTEXT

COMPARISONS

- 3.1 In October 2023 a Service Improvement Manager from Scotland's Housing Network (SHN) delivered a presentation to Health and Social Care Partnership Officers and representatives from River Clyde Homes on comparative data relating to key performance indicators in homelessness across the six LSVT authorities and as a national average comparative also.
- 3.2 The data highlighted that 2022/23 saw a significant increase (13%) in homeless applications across Scotland, taking numbers well above pre-pandemic levels. Average length of time to close a homeless case had also increased with the Scottish average reported as 223 days.
- 3.3 Inverclyde HOHAS managed to reduce homeless applications by 10% and case duration although remained static since 2021/22 was reported to the Scottish government in 2022/23 well below the Scottish average (38 weeks) at 23 weeks.
- 3.4 Time taken to assess a case also reduced in Inverclyde from 41 days in 2020/21 to 13 days in 2022/23, a 68% reduction for households waiting on the outcome of an assessment. Households in Inverclyde spent on average 71 days in temporary accommodation compared to the Scottish average of 114 days.
- 3.5 These achievements are a result of significant improvements brought about by a change programme which implemented a service re-design focussing on homelessness prevention and providing varying intensities of support to households facing crisis. Early intervention has seen prevention activities such as mediation and negotiation increase to ensure crisis is avoided.
- 3.6 Improved communication and partnership working between HOHAS and local RSLs particularly around service redesign, homeless prevention and supporting individuals with more complex needs have resulted in better outcomes.
- 3.7 The SHN presentation also highlighted some areas of concern, repeat homelessness remains high (7%) although the figure has reduced by half since 2020/21 and is still on a downward trajectory but has still some way to go to mirror the Scottish average of 4%.
- 3.8 It has been agreed that a temporary LLI will increase the proportion of housing allocations to homeless households would return a degree of equity and improve the likelihood of achieving rapid rehousing in Inverceyde. It will also reduce the risk of the high costs of repeat homelessness and in the long-term create integrated and sustainable communities.
- 3.9 Introducing the opportunity to attain better quality allocations in areas of aspiration would introduce greater choice and control over where people want to live and would align with the delivery outcomes of the Local Housing Strategy, the HSCP Strategic Plan's Housing Contribution Statement, the RRTP and would also align with the anticipated Human Rights bill which will see decent housing as a statutory human right.

4.0 PROPOSALS

- 4.1 That the Board note active improvement activity of a proposed joint development of a temporary LLI. This will increase the percentage of housing allocations being offered to homeless households and increase the choice and control over offers of housing to ensure a human rights-based approach is being taken to the provision of adequate housing.
- 4.2 A LLI can be a useful way of taking specific local factors into account. RSL's would therefore need to consider the match between the needs of the applicant and the supply of properties to make sure they make best use of that property i.e. prevention of repeat homelessness.

- 4.3 A LLI will ensure that the strategic calculation of appropriate percentages is undertaken to agree a figure for the social housing stock across Inverclyde and broken down into individual percentages for each of the five main RSL's dependent on their proportion of the overall stock and presented as a full policy at a future committee.
- 4.4 LLI development will coincide with an independent review of Housing options which will seek to facilitate the change programme agenda by analysing homelessness demand and producing a model which will incorporate the provision of temporary accommodation in Inverclyde as well as improving choice and control over settled solutions.
- 4.5 Scotland's Housing Network will undertake this comparative approach on an annual basis following the publication of Scottish Government data on Key Performance Indicators in homelessness for 2023/24. This data is usually available in September, and it is anticipated that a further presentation will be delivered by the Service Improvement Manager to HSCP officers in October 2024. It is proposed invitations be extended to interested elected members to attend.

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		Х
Legal/Risk		Х
Human Resources		Х
Strategic (Partnership Plan/Council Plan)		Х
Equalities, Fairer Scotland Duty & Children/Young People's Rights	Х	
& Wellbeing		
Environmental & Sustainability		Х
Data Protection		Х

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 identified Legal/Risk issues contained within this report.

5.4 Human Resources

There are no identified Human Resource issues contained within this report.

5.5 Strategic

There are no identified Strategic risks contained within this report.

5.6 Equalities, Fairer Scotland Duty & Children/Young People

(a) <u>Equalities</u>

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.
х	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.

(b) Fairer Scotland Duty

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

X	YES – A written statement showing how this report's recommendations reduce inequalities of outcome caused by socio-economic disadvantage has been completed.
	NO – Assessed as not relevant under the Fairer Scotland Duty.

(c) 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.
х	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 Environmental/Sustainability

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
х	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.

5.8 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 CONSULTATION

6.1 None

7.0 BACKGROUND PAPERS

7.1 Appendix 1 - Stock Transfer Homelessness Authorities – Performance Presentation 2022/23



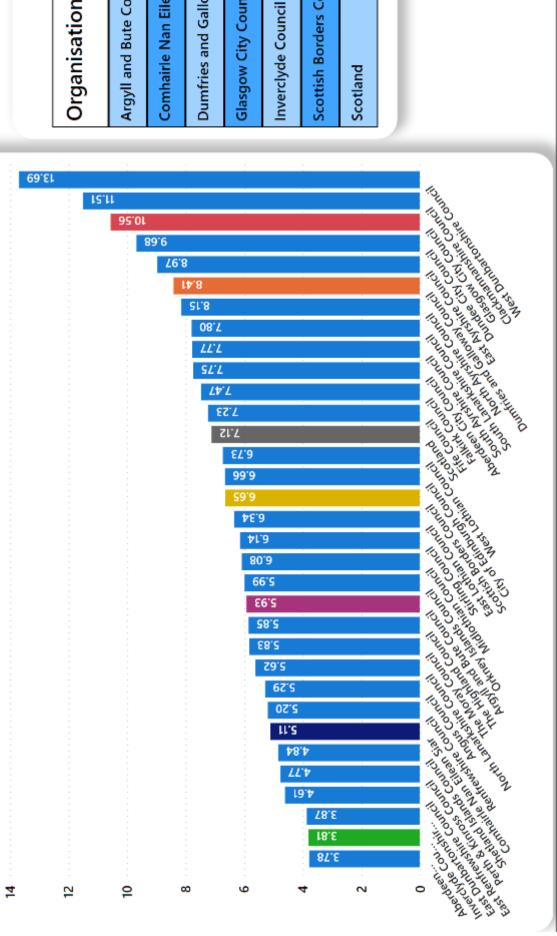
Inverclyde Council

Performance Analysis Visit 2022/23 October 2023



Homeless Applications

H1 Applications per 1,000 people

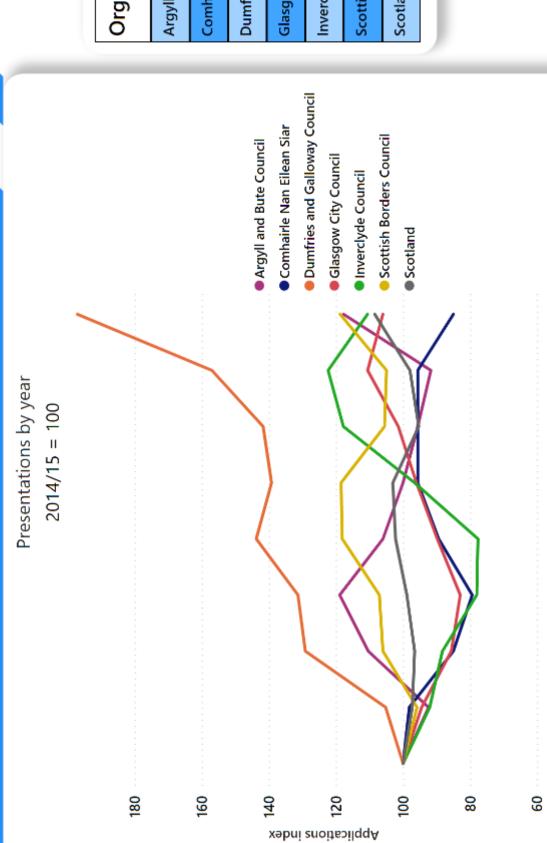


20/21 21/22 22/23 39,006 6,708 1,252 136 292 772 511 35,230 6,995 398 153 323 997 682 H1 Applications 34,286 6,417 686 415 153 006 311 Dumfries and Galloway Council **Organisation Name** Comhairle Nan Eilean Siar Scottish Borders Council **Argyll and Bute Council** Glasgow City Council



Applicants (trends)





14/15 15/16 16/17 17/18 18/19 19/20 20/21 21/22 22/23

Index set at 100 for 2014/15

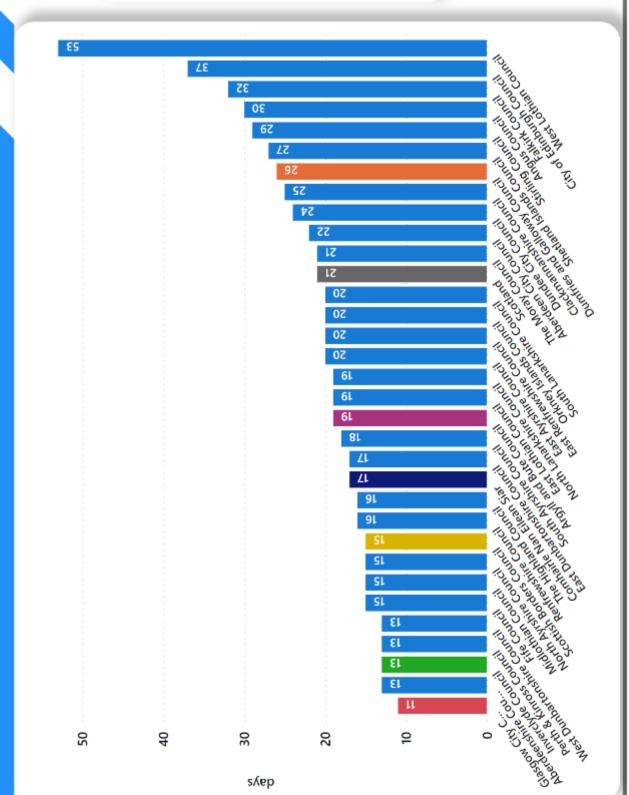
Organisation Name	20/21 21/22 22/23	21/22	22/23
Argyll and Bute Council	95.62	91.71	91.71 117.74
Comhairle Nan Eilean Siar	95.63	95.63	85.00
Dumfries and Galloway Council 141.73 157.01 197.17	141.73	157.01	197.17
Glasgow City Council	101.42	101.42 110.56 106.02	106.02
Inverclyde Council	117.80	117.80 122.35 110.61	110.61
Scottish Borders Council	105.54	105.54 104.92 118.77	118.77
Scotland	95.32	97.95	108.45

SHN SHA

HL1: Time in days to assess applications

Timescale to assess

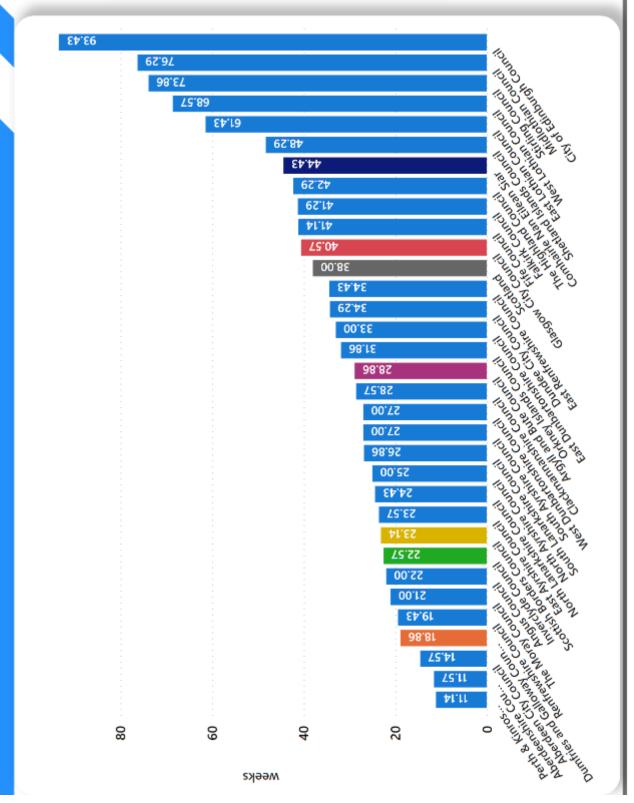
23							_
22/	19	17	26	11	13	15	21
21/22	16	17	23	6	15	14	19
20/21 21/22 22/23	18	15	23	6	41	13	16
Organisation Name	Argyll and Bute Council	Comhairle Nan Eilean Siar	Dumfries and Galloway Council	Glasgow City Council	Inverclyde Council	Scottish Borders Council	Scotland



HL1: Average number of weeks to

Weeks to close case

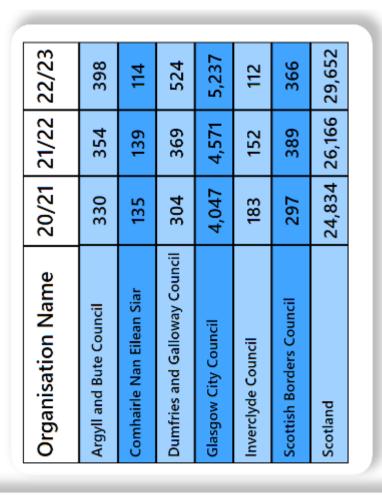
Organisation Name	20/21	20/21 21/22 22/23	22/23
Argyll and Bute Council	36.00	31.00	28.86
Comhairle Nan Eilean Siar	51.43	46.43	44.43
Dumfries and Galloway Council	23.57	17.00	18.86
Glasgow City Council	38.86	34.14	40.57
Inverclyde Council	29.00	29.00 22.57	22.57
Scottish Borders Council	19.86	24.00	23.14
Scotland	36.43	36.57	38.00

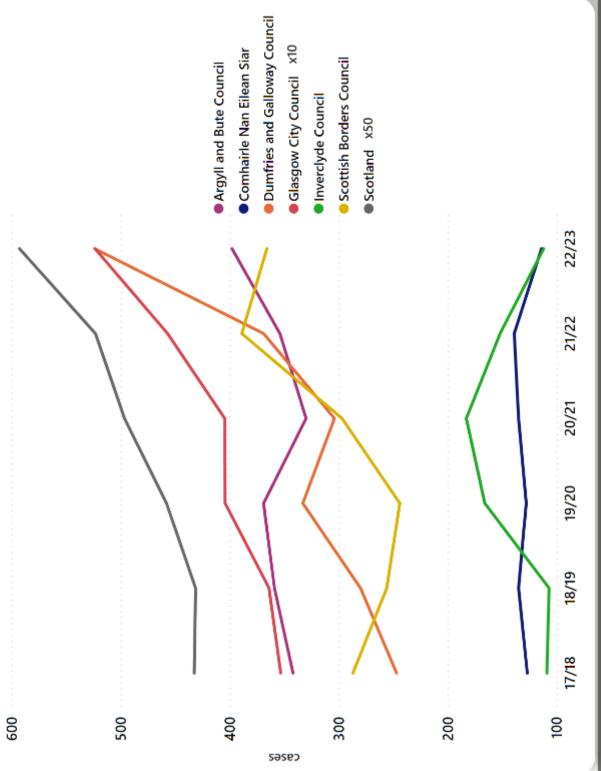


Live Cases



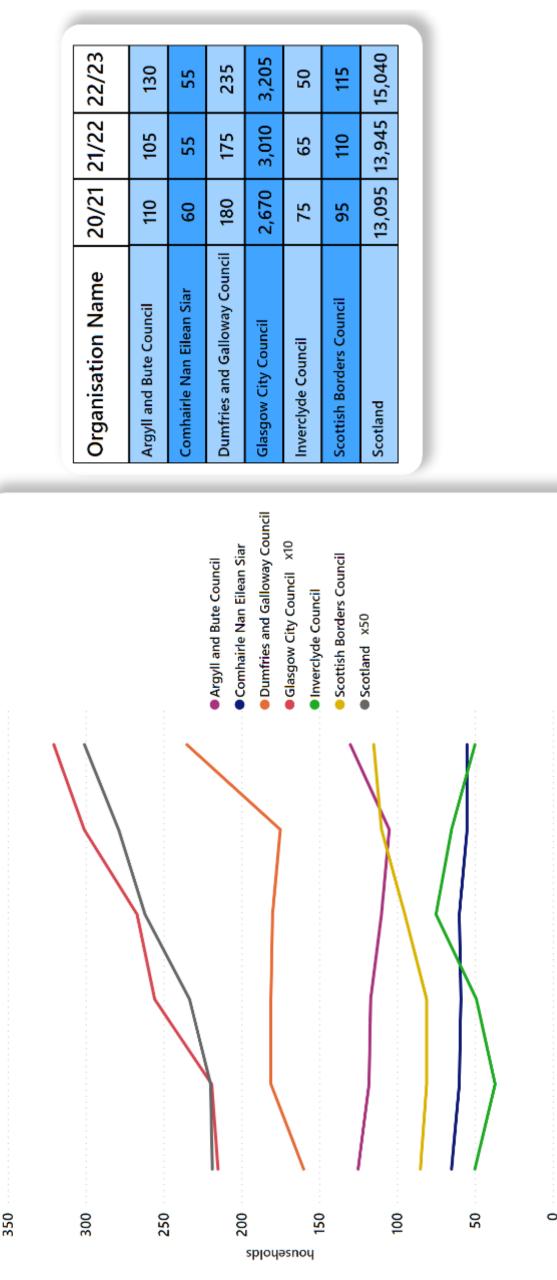






Household in TA (trends)

HL3 Number of households in temporary accommodation at year **SHN** end



22/23

21/22

20/21

19/20

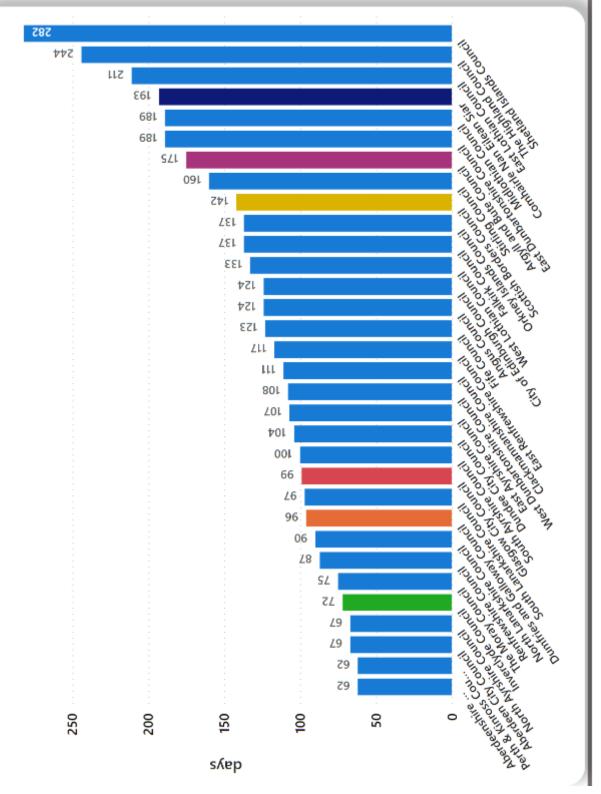
18/19

17/18

H15 Average duration by type all

SHN

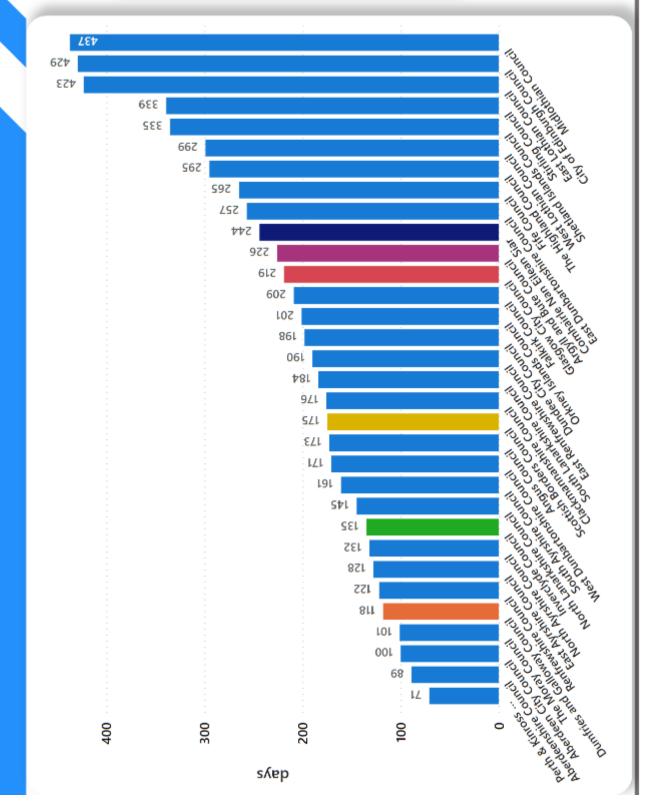
Organisation Name	20/21	20/21 21/22 22/23	22/23
Argyll and Bute Council	176	154	175
Comhairle Nan Eilean Siar	200	212	193
Dumfries and Galloway Council	106	76	96
Glasgow City Council	105	95	66
Inverclyde Council	69	62	72
Scottish Borders Council	121	145	142
Scotland	106	107	114



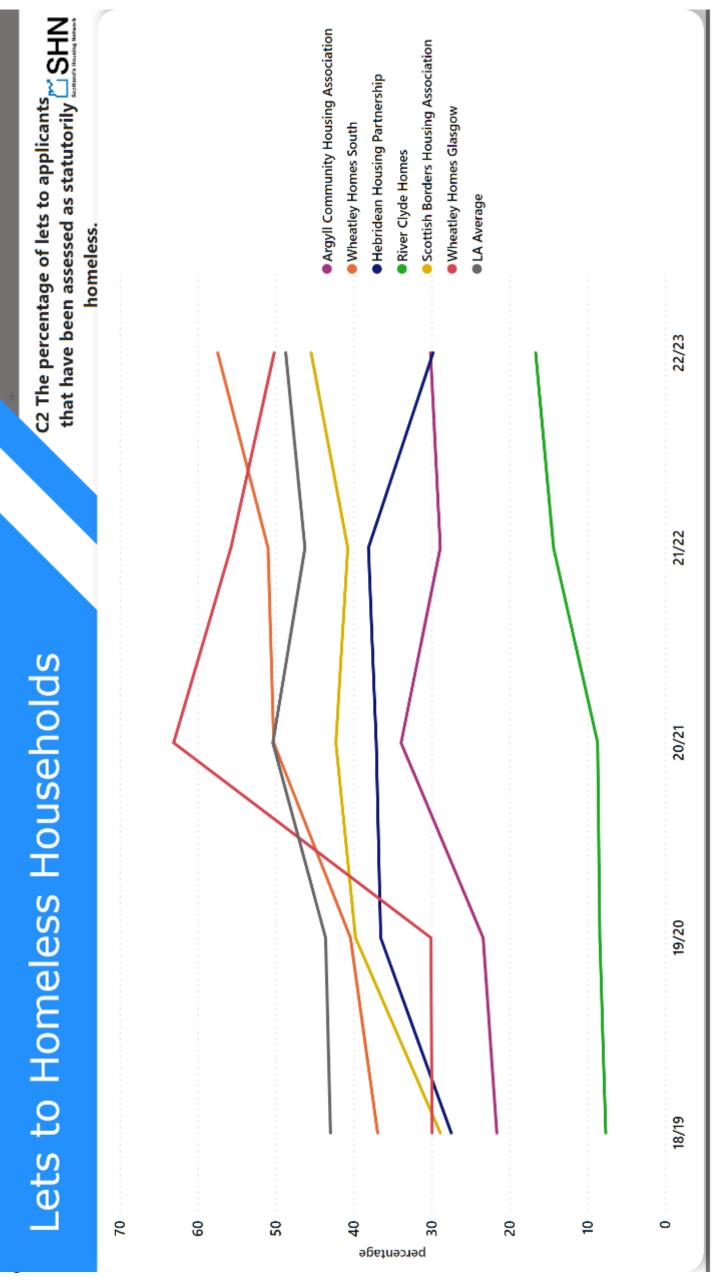
Average duration of TA Placement

HL3 Average total time spent in TA for entire placement - cases that closed

Organisation Name	20/21	20/21 21/22 22/23	22/23
Argyll and Bute Council	245	202	226
Comhairle Nan Eilean Siar	326	297	244
Dumfries and Galloway Council	131	109	118
Glasgow City Council	225	196	219
Inverclyde Council	119	138	135
Scottish Borders Council	135	165	175
Scotland	204	207	223



Length of Stay in TA





AGENDA ITEM NO: 5

Report To:	Social Work & Social Care Scrutiny Panel	Date:	14 May 2024
Report By:	Kate Rocks Chief Officer, Inverclyde Health & Social Care Partnership	Report No:	SWSCSP/17/2024/JH
Contact Officer:	Jonathan Hinds, Head of Service, Inverclyde Health & Social Care Partnership	Contact No:	01475 715372
Subject:	Publication of Care Inspectorate	Report: Prison	Based Social Work:

1.0 PURPOSE AND SUMMARY

- 1.2 The Social Work and Social Care Scrutiny Panel were advised in July 2023 of the Care Inspectorate/ HMIPS intention to carry out a thematic review of Prison Based Social Work activity across Scotland. The report into this activity has now been published and is appended for member information.
- 1.3 The completed Thematic Review addresses the Prison Based Social Work activity across Scotland. As regards Prison Based Social Work activity at HMP Greenock, the service will make a presentation to the Panel to ensure members are fully cited on local matters.

2.0 RECOMMENDATIONS

- 2.1 It is recommended that the Social Work and Social Care Scrutiny Panel notes the publication of the national Thematic Review into Prison Based Social Work activity and proposed next steps.
- 2.2 It is recommended that the Social Work and Social Care Scrutiny Panel notes the presentation given by Officers as regards Prison Based Social Work Activity within Inverclyde.

Kate Rocks Chief Officer Inverclyde Health and Social Care Partnership

3.0 BACKGROUND AND CONTEXT

- 3.1 The Thematic Review was undertaken jointly by the Care Inspectorate and His Majesty's Inspectorate of Prisons (HMIPS) between July 2023 and April 2024. Prior to this, there had been no specific scrutiny of prison based social activity since 2011.
- 3.2 The review encompassed all of Scotland's 18 custodial establishments and focussed on the governance, leadership and accountability of prison based social work arrangements in Scotland. The review considers the strengths and challenges of current arrangements and explores the strategic direction of prison based social work activity. The quality of prison based social work practice was not considered to be within the scope of the current review.
- 3.3 Inspectors gathered information to inform the review by way of scoping meetings with key partners; desktop review; staff survey; focus groups and interviews with individuals with living experience. Staff from Inverclyde HSCP Justice Social Work Services at all levels completed the staff survey and participated in focus group discussions.
- 3.4 The report highlighted strengths regarding the workforce commitment to effective public protection and to discharging their statutory duties but expressed the view that fundamental reform is needed. A lack of national leadership; ineffective commissioning, assurance and governance arrangements; fragmented and outdated guidance and inconsistent application of existing quality assurance mechanisms were among the areas highlighted within the report as hindering the development of a modern, professional and effective prison based social work service that utilises the skills and knowledge of the workforce to best effect.
- 3.5 It is noted that these challenges are particularly acute given the current high prison population; the increasingly complex levels of risk and need faced by prisoners and the absence of any meaningful review of funding arrangements. Areas of improvement for consideration by Scottish Government; SPS and Justice Social Work leaders are presented consistent with these conclusions.
- 3.6 The report indicates that further inspection activity in this area will focus on the efficiency and effectiveness of prison-based social work practice. It will include looking at the collaboration between prison-based and community-based justice social work and the related outcomes for people in custody, their families, people affected by crime, and communities.
- 3.7 Inverclyde HSCP provides a prison based social work service locally to HMP Greenock. Service reflections on the current position of the service locally, in the context of the nationwide thematic review, will be presented to the panel.

4.0 PROPOSALS

4.1 The Social Work and Social Care Scrutiny Panel is asked to note the content of the Thematic Review in Prison Based Social Work activity across Scotland and the associated presentation offering a local context to this work.

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		NA
Legal/Risk		N/A
Human Resources		N/A
Strategic (Partnership Plan/Council Plan)		N/A
Equalities, Fairer Scotland Duty & Children/Young People's Rights & Wellbeing		N/A
Environmental & Sustainability		N/A
Data Protection		N/A

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 (lf Applicable)	Other Comments
N/A					

5.3 Legal/Risk

None.

5.4 Human Resources

None.

5.5 Strategic

None.

5.6 Equalities, Fairer Scotland Duty & Children/Young People

None.

(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.
Х	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) Fairer Scotland Duty

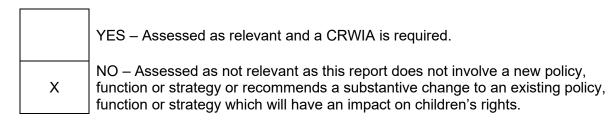
If this report affects or proposes any major strategic decision:-

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.

(c) Children and Young People

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



5.7 Environmental/Sustainability

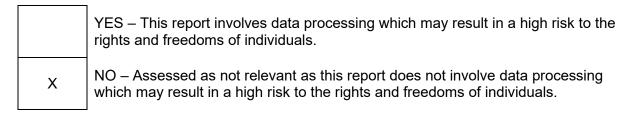
Summarise any environmental / climate change impacts which relate to this report.

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
х	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.

5.8 Data Protection

Has a Data Protection Impact Assessment been carried out?



6.0 CONSULTATION

6.1 None.

7.0 BACKGROUND PAPERS

7.1 Care Inspectorate/ HMIPS Final Report: Prison Based Social Work: Thematic Review (April 2024)

Appendix 1





Prison-based social work: thematic review



Contents

		Page
1	Introduction	3
2	Key messages	5
3	Background and context	8
4	Governance	13
5	Leadership	19
6	Accountability	23
7	Impact and experience of prison-based social work	32
8	Conclusions	36
9	Areas for improvement	38
10	Next steps	39
Ар	pendix 1 How we conducted this review	40
Ap	pendix 2 Quality improvement framework	42
Ap	pendix 3 Terms we use in this report	43

1. Introduction

The Care Inspectorate is the independent scrutiny, assurance and improvement support body for social care and social work in Scotland. The powers and duties of the Care Inspectorate are set out in the <u>Public Services Reform (Scotland) Act 2010</u>. The Scottish Government tasked the Care Inspectorate to lead on scrutiny and assurance of justice social work and support the implementation of the community justice model.

His Majesty's Inspectorate of Prisons for Scotland (HMIPS) is responsible for the inspection and monitoring of Scotland's 17 prisons and custody centres. HMIPS report publicly on its findings. Inspection and monitoring activity focuses on establishing the treatment of and the conditions for prisoners. It also focuses on the conditions in which prisoners are transported or held in pursuance of prisoner escort arrangements.

The justice inspectorates in Scotland are committed to working in partnership on shared areas of interest and responsibility. The Care Inspectorate routinely contributes to HMIPS' annual inspection programme. However, this is the first time we have undertaken a joint focus on prison-based social work services.

The Care Inspectorate's <u>Community Justice Social Work: Throughcare Review</u> was published in 2021. It focused on community justice social work practice, specifically breach and recall of people released from custody. The scope of this work did not include prison-based social work services. There has been no specific scrutiny of social work services in Scotland's prisons since the former Social Work Inspection Agency's 2011 national inspection programme.

As a first step, this thematic review focused on the governance, leadership, and accountability of prison-based social work in Scotland. Our approach was informed by the European Foundation of Quality Management (EFQM) model. We looked at the strategic direction of prison-based social work services. We considered the national picture in terms of the strengths and challenges of current arrangements and highlight areas for improvement. It is important to emphasise that evaluating the quality of prison-based social work practice was outwith the scope of this phase of the review. However, our findings provide a basis for the Care Inspectorate's future activity in this regard.

It must be noted that prison-based social work operates in the secondary setting of a prison within a complex system. Therefore, many of the issues identified in this review are beyond their direct control. Further, prison-based social work cannot be divorced from wider justice social work services. Some of the strengths and areas for improvement identified in this review are echoed or amplified in the sector as a whole. This was highlighted in a recent <u>research report</u> about justice social work services commissioned by the Scottish Government. The cross-cutting areas for improvement will therefore require a multi-partner response at national and local leadership levels.

The 2011 SWIA review of social work services in prison identified a need to strengthen leadership and strategic planning. This remains an important area of improvement. This review highlighted a strong consensus from all partners that

significant change was required. This was with a view to achieving robust and consistent leadership, governance, and accountability of prison-based social work services at a local and national level.

For the purposes of this report, the term 'partners' refers to the people and organisations we engaged with as part of the thematic review (please see Appendix 1).

We are very grateful to everyone who gave so willingly of their time by responding to our survey, sharing their views within meetings and focus groups, and reflecting on what needs to improve. Particular thanks go to the people who use prison-based social work services for sharing their views and experiences.

2. Key messages

Governance

- Governance arrangements for prison-based social work services lack clarity. There is a strong consensus that fundamental reform of the current arrangements is required.
- The current funding and commissioning arrangements for prison-based social work services are no longer fit for purpose. This requires revision as a priority.
- Governance arrangements across the women's estate are characterised by stronger collaborative working between the Scottish Prison Service and prison-based social work services.
- Despite out-of-date guidance and insufficient governance arrangements, prison-based social work staff generally have a consistent understanding of their day-to-day roles and responsibilities and are committed to delivering effective services.
- Scottish Prison Service leaders experience challenges in their attempts to work collaboratively and consistently across local authorities and establishments.

Leadership

- There is no clear national vision nor a consensus on the aims of prison-based social work, linked to a lack of clear national governance and leadership.
- There is a significant gap in leadership of strategy and direction for prisonbased social work at a national level. This contributes to inconsistencies in prison-based social work practice across establishments.
- The commitment of Social Work Scotland in engaging with key partners to drive improvement for prison-based social work is a strength. However, as a non-statutory body there are limitations to this role in terms of reaching consensus and influencing change.
- The role of prison-based social work is not as visible or as well-understood as it could be across Scottish Prison Service establishments, among national and local partners, and by people in custody. The challenges of operating in a secondary setting compound this.
- Where collaborative leadership and planning, characterised by mutually respectful relationships, is taking place between the Scottish Prison Service and social work at an establishment level, there is a clearer shared vision.
- Justice social work service managers clearly retain leadership for their prisonbased social work teams. However, there was a desire for prison-based social work services to have greater priority within local strategic planning.

• The Scottish Government should take a more direct leadership role in the coordination and oversight of improvement and change.

Accountability

- Overall, prison-based social work teams are comprised of skilled and experienced staff. They are characterised by a strong value base, a clear commitment to public protection and to supporting desistance from offending, and supportive line management.
- Pressurised resources for prison-based social work impacts on the capacity to deliver services effectively and timeously. This also affects capacity to build relationships, engage in offence-focused work, or develop services.
- The role of prison-based social work services could be enhanced to address holistic needs. However, this would require a fundamental service redesign and increase in resources.
- There are no consistent, meaningful, or suitably robust performance management or quality assurance measures nationally. Without these, there is limited evidence to drive improvement.
- There is no clear national multi-partner training strategy nor strategic workforce planning for prison-based social work, despite the changing prison population and subsequent workload pressures.

Key messages from people with living experience of prison-based social work services

- Some people find their prison-based social worker very accessible, characterised by frequent contact and open, supportive, and caring relationships. People value contact being made outwith critical dates in their sentence.
- However, the majority of people view contact levels with prison-based social workers as insufficient. They feel they have limited time to build relationships, which fosters a perception of workers being 'task-oriented'.
- When prison-based social workers are able to develop meaningful and constructive relationships, using their broad range of skills, this has a positive impact on people in custody's welfare and involvement in key processes.
- Prison-based social work services are often viewed as not sufficiently visible, understood, or accessible to people. There can be a conflation of the prison-based and community-based social work role. There is sometimes a perception of imbalanced power differences between people in custody and social work.
- The impact of these challenges contributes to increased stress and decreased motivation for some people in custody.

3. Background and context

Scotland's prison population remains among the highest in western Europe. On any one day, the Scottish Prison Service (referred to throughout this report as the acronym SPS) is responsible for the security and welfare of approximately <u>8,000</u> people in 17 establishments across Scotland.

The <u>Vision for Justice in Scotland</u> (Scottish Government, 2022) acknowledges the negative impact of short-term custodial sentences on people's life chances. A key aim is that people should only be held in custody where they present a risk of serious harm. The vision includes a commitment to transformational change by shifting the balance between the use of custody and community justice. It outlines the complex needs and challenges that people in contact with the criminal justice system experience, such as trauma, mental and physical health difficulties, and substance use. People entering custody are disproportionately from the most deprived areas of Scotland. Further, the proportion of people in prison over the age of 50 is rapidly growing. This reflects the complexity of some of the people who receive a prison-based social work service.

Although fewer people are receiving a custodial sentence each year, those who are sent to prison tend to receive longer sentences. The number of people in prison for sexual offences had more than doubled over the last decade. This means an increase in people requiring a prison-based social work service during their sentence. This might involve people with complex needs and/or serious and organised offending behaviour. Nonetheless, the national vision for justice makes no explicit reference to prison-based social work services.

The SPS, through Scottish Government ministers, is one of the eight statutory partners within local community justice governance arrangements. The service is expected to work with <u>local justice partners</u> to deliver the aims and priorities outlined by the Scottish Government in the <u>National Strategy for Community Justice</u> (2022).

One of the four national aims for community justice partners is to:

"...Strengthen the leadership, engagement, and partnership working of local and national community justice partners", with a priority action to: "Deliver improved community justice outcomes by ensuring that effective leadership and governance arrangements are in place and working well, collaborating with partners and planning strategically".

This review considered arrangements for prison-based social work in this context.

Public protection remains the first priority within the national strategy. Protecting the public cannot be achieved by any one agency. As such, community justice partners are expected to form strong partnerships at each point of the justice system. The SPS therefore works in partnership with national and local agencies to fulfil its core responsibilities.

The <u>Scottish Prison Service Corporate Plan 2023 – 2028</u> intends to ensure that:

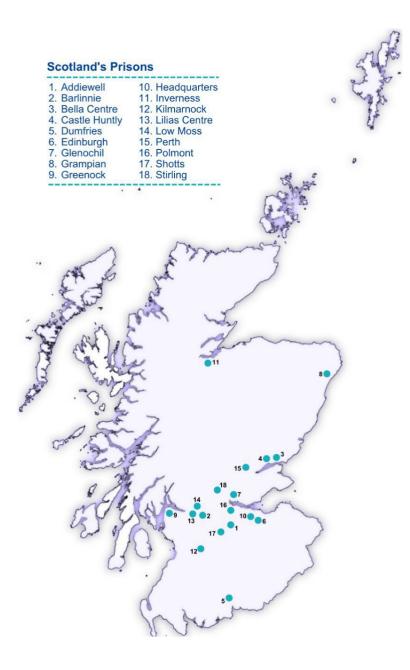
- people in Scotland's prisons live in establishments that are safe, secure and suitable
- the health, wellbeing and care of people who live in Scotland's prisons are better promoted, managed and tailored to individual needs
- people in Scotland's prisons are better supported to follow an individualised pathway towards release, in ways that prioritise public protection.

Scottish Government ministers provide funding to the SPS that enables them to pay local authorities for the provision of prison-based social work services. Each of the 17 custodial establishments has a dedicated social work service provided by the relevant local authority. These local arrangements are incorporated within a memorandum of understanding (MoU) between the SPS and every local authority with a prison in their area.

Aberdeenshire council	HMP Grampian
City of Edinburgh council	HMP Edinburgh
Clackmannanshire council	HMP Glenochil
Dundee City council	Bella Centre (community custody unit)
Dumfries and Galloway council	HMP Dumfries
East Ayrshire council	HMP Kilmarnock
East Dunbartonshire	HMP Low Moss
Falkirk council	HMPYOI Polmont
Glasgow City council	HMP Barlinnie Lilias Centre (community custody unit)
Highland council	HMP Inverness
Inverclyde council	HMP Greenock
North Lanarkshire council	HMP Shotts
Perth and Kinross council	HMP Castle Huntly HMP Perth
Stirling council	HMPYOI Stirling
West Lothian council	HMP Addiewell

Figure 1: Local authorities providing social work services in prisons

Figure 2: Map of Scotland's prisons (reproduced from the SPS website)



Prison-based social work responsibilities

The <u>Social Work (Scotland) Act 1968</u>¹ states that all local authorities in Scotland have a legal duty to provide "advice, guidance and assistance" for people in prison or subject to any form of detention. The social work service provided by a local authority is therefore integral to the legal, efficient, and effective operation of any prison or custody unit. In this context, the range of statutory social work services provided to people in prison and their families is termed 'throughcare'. This is from the point of being sentenced to custody, during the period of imprisonment, and following return to the community. Prison-based social workers hold important responsibilities for the assessment and communication of risk and need within prisons, and preparing people to return to the community.

In general, prison-based social work services prioritise work with people who will be subject to statutory supervision following their release. People in custody serving the following types of statutory sentences (each of which has its own legislative basis) require a prison-based social work service.

- Supervised release order
- Long-term sentence (four or more years)
- Extended sentence
- Life sentence
- Order for lifelong restriction
- People subject to a short-term sex offender licence
- Recalled prisoners

The Scottish Government's annual <u>Justice Social Work Statistics in Scotland</u> <u>publication 2022-23</u> noted that, as at 31 March 2023, the statutory custody-based and community-based throughcare caseload totalled 5,400 people. Two-thirds of the caseload was custody-based, compared to one-third that was community-based. As such, there were 3,572 people in custody requiring a prison-based social work service at that time.

The core responsibilities and tasks of prison-based social workers include:

- providing risk assessments and case and risk management plans
- preparing reports for the Parole Board for Scotland to inform sentence and release planning
- contributing to release planning meetings such as integrated case management, case conferences, and risk management team meetings

¹ Section 27(1)(ac).

• working with prisoners, their families, SPS, other agencies, and communitybased justice social work services to reduce the risk of reoffending and harm on release and to assist reintegration within the community.

Over the past 12 years, prison-based social workers have been required to undertake an increasingly important role in the provision of structured risk assessments. This involves specialist training in the use of appropriate tools to inform professional decision-making.

4. Governance

The Scottish Government, on behalf of its ministers, sets the legislation and vision for the justice system. It also holds responsibility for directing policy and providing a range of guidance to support delivery of priorities and intended outcomes. Within the Scottish Government, the chief social work adviser advises ministers and policy teams on all aspects of social work.

The <u>Community Justice (Scotland) Act 2016</u> places a duty on statutory partners, which includes the local authority and SPS, to work together to deliver the national aims and priorities. Community Justice Scotland is the national leadership body for community justice. It has a statutory duty to monitor local community justice performance and promote the National Strategy for Community Justice. It also promotes good practice and provides support to community justice partners.

Social Work Scotland has an important leadership role in representing the voice of justice social work services. This is due to the absence of a dedicated statutory governance function for justice social work services at a national level. As a professional leadership body for social work, members work closely with justice partners to influence policy and practice and shape legislation. This is with the aim of improving the experience of social work services and the people they work with.

Depending on local governance arrangements, responsibility for the oversight of social work services sits with either the local authority or health and social care partnerships. While reporting and management structures are determined locally, in legislation, the chief social work officer (CSWO) holds responsibility for providing professional leadership and governance for all social work functions. This includes prison-based social work services.

Commissioning arrangements

The memorandum of understanding

The Scottish Government allocates funds to the SPS to enable it to pay for the statutory prison-based social work services provided by the relevant local authority. These arrangements are then detailed within a memorandum of understanding (MoU). The common purpose between SPS and local authorities denoted in the MoU is to:

"reduce reoffending by ensuring that persons in custody have access to an appropriate range and quality of prison-based social work services according to their risks, needs and responsivity to support delivery of national strategy".

This purpose reflects the previous national vision for justice, rather than the current vision.

The MoU is not viewed as a commissioning document and is instead presented as a governance framework. We found that it does not assist in providing clear governance arrangements. The section on scope of service provides a list of prison-based social work responsibilities, SPS responsibilities and any that are shared. The MoU is confirmation that the SPS and the local authority agree the annual resource

and funding requirements for provision of prison-based social work services.

Social work and SPS strategic leaders noted a significant increase in pressure on prison-based social work services. This was attributed to various factors such as increasing responsibilities in relation to assessing risk of serious harm and multi-agency public protection arrangements (MAPPA). The changing prison population, including people with increasingly complex needs, as well as an increase in oral hearings were also contributing to pressures. The MoU allows for variations to the designated tasks to be requested, due to the changing demographics in custody, or plans to improve service efficiency. While this had occurred in some establishments, requesting further resources was often experienced as difficult and contentious for local authorities. This contributed to tensions with the SPS. This was compounded by arrangements lacking neither a clear funding formula nor consistent performance monitoring and reporting to usefully inform a business case. This was contrasted with the previous service-level agreement process, which some partners believed to have been clearer.

The standard MoU requires parties to acknowledge that allocated funding would not be revisited until any new service design is agreed nationally. It emphasises that the availability of funding remains a matter for Scottish Government ministers. However, there were no current plans to redesign services nor revisit the MoU nationally. This was despite all partners agreeing that it should be revisited due to the increased pressure on services.

According to the MoU, both the SPS and the local authority are expected to jointly and regularly consider matters of accountability and best value. That said, there was a considerable lack of clarity among partners on what constituted best value. There was also uncertainty on the course of action taken should prison-based social work services not be delivered in accordance with the agreed MoU. The MoU states that the SPS' director of strategy and innovation (or a representative) is responsible for providing corporate oversight of all social work MoU arrangements in prisons. This would seem to be a key national governance and accountability role. However, the MoU also expects matters to be kept to "as local a level as possible". This tension in governance contributed to difficulties in achieving consistency of practice in prison-based social work services across the estate. It also made it difficult to aggregate themes at a national level, and to escalate issues at an establishment level up to strategic leaders for resolution.

Furthermore, social work leaders viewed the MoU arrangements as contributing to an inherent power imbalance between prison-based social work services, the SPS and other agencies. This was characterised by what was viewed as a 'bean counting' culture and a 'wish list' of what prison-based social work should be doing. There was far less emphasis on the quality of the work undertaken. This contributed to a perception that as a profession, prison based social work was less valued within establishments. SPS leaders recognised a need for greater clarity on what prisonbased social work distinctly offers and how this aligned with the corporate direction of the organisation.

In general, partners were frustrated by the governance and funding arrangements for prison-based social work services. The MoU was not delivering the desired results. There was therefore a strong consensus across all partners that the funding

and commissioning arrangements for prison-based social work required review. Indeed, as part of the criminal justice sector Pre-Budget Scrutiny 2024-25 responses to the Scottish Government, a joint submission by Social Work Scotland and COSLA suggested that:

"...Consideration should be given to including prison-based social work services within the Section 27² financial allocation...rather than a service commissioned by SPS...while taking account of the changing nature of the prison population in some areas".

They argued that this would serve to address the "backlog of parole reports within the system, due to under funding and workforce issues".

It was noted by social work leaders that the MoU was to have been reviewed following its inception, but this did not happen. SPS leaders confirmed that there were no plans to review the MoU at present due to the view that a more fundamental reform of prison-based social work arrangements was required.

Commissioning arrangements were viewed as more effective by some partners with experience of operating in a private prison. Different contractual arrangements and performance reporting frameworks were noted, which were perceived to be clearer. Also worth noting were the MoU arrangements for the new community custody settings for women. This included an additional annexe within the MoU containing a "situation, background, assessment and recommendation" analysis not found in the standard MoU. This supported a more bespoke and responsive approach when additional resources were required to meet particular needs.

For the majority of partners however, the status quo was not viewed as an option. There was an appetite for further review to inform a fundamental reform of current arrangements. Given its responsibilities for national justice policy and strategy and the allocation of funding, the Scottish Government was identified as uniquely placed to co-ordinate and oversee any agreed reforms. This would include the co-ordination of cross-cutting strategic groups such as the funding review group³, the transformational change programmes⁴, and the prison population leadership group⁵.

² Section 27 of the <u>Social Work (Scotland) Act 1968</u> covers the "Supervision and care of persons put on probation or released from prisons etc." Section 27 and subsequent sections make provision for the related grant funding. This is the key funding received annually from Scottish Government which is allocated to local authorities to pay for justice social work services

³ Established by the Scottish Government in 2021, this group considers issues relating to community justice funding and how it is distributed. It includes consideration of the impact of Covid-19 on justice social work services and the third sector, and will recommend possible improvements.

⁴ The <u>transformational change programmes</u> reflect the priorities of Scottish Government ministers and the wider justice sector as a subset of work which aims to deliver some of the outcomes set out in the Vision for Justice (2022). One of the programmes includes "shifting the balance between custody and community".

⁵ This group was established in 2023 by the Scottish Government. It comprises senior representatives from the justice sector and beyond. It aims to identify long- and short-term options to address the challenges presented by the increased prison population and ensure a collective response.

Policies, procedures and guidance

The arrangements for delivery of social work services in Scottish prisons are set out in the Circular SEJD 12/2002 (revised May 2004): <u>Throughcare provision for long term prisoners and prisoners subject to supervised release orders</u>. The function of prison-based social work is described here as providing continuity of risk and need assessments, and the sharing of relevant information between prison and the community and across disciplines and agencies.

The Scottish Government produces standards that are intended to support the quality and consistency of social work practice. The <u>National Outcomes and</u> <u>Standards for Social Work in the Criminal Justice System</u> (2010) updated some elements of prison-based social work practice. However, prison-based social work continues to rely on the significantly outdated National Objectives for Social Work Services in the Criminal Justice System: Standards – Throughcare (2004). These are currently being updated. The Scottish Government is also currently working with stakeholders to scope a review and update the 2010 standards, which is welcomed.

In addition, there is a wide range of policies, procedures and guidance covering key processes involving prison-based social work services. This includes, but is not limited to:

- Integrated Case Management Guidance (2007)
- Framework for Risk Assessment, Management and Evaluation (2011)
- Process for LS/CMI use in Prison and Throughcare and Alignment with Integrated Case Management Guidance Manual (2012)
- <u>Standards and Guidelines for Risk Management</u> (2016)
- Risk Management, Progression, and Temporary Release Guidance (2018)
- <u>Throughcare Assessment for Release on Licence</u> (2021)
- <u>Multi-Agency Public Protection Arrangements (MAPPA): National Guidance</u> (2022)
- Parole Board for Scotland Guidance for Members (2023).

Over the past two decades, various addendums and amendments had been made to this suite of guidance. However, there had been no systematic review to evaluate their alignment and efficacy in promoting rehabilitation and reintegration. Some partners felt that prison-based social work relied too much on outdated guidance and circulars that were no longer fit for purpose.

In addition to national legislation and guidance, each prison-based social work team was governed by its own local authority's policies and procedures. This included child and adult protection responsibilities. The majority of staff reported that they were familiar with these local expectations and confident in fulfilling them.

Progression of people from custody back into the community relied on effective multi-agency collaboration between key partners as laid out in relevant guidance. Prison-based social work staff were generally clear on their roles and responsibilities for risk assessment, management, and progression. In this regard, they were informed by more appropriate guidance and frameworks. That said, despite the Risk Management, Progression, and Temporary Release Guidance (2018) outlining the respective roles of prison-based social work and prison psychology, there remained some uncertainty within these services as to who held responsibility for key tasks.

There were also issues with the consistency of language when considering risk. At times, this had contributed to a lack of consensus about the measures required to manage risk and need in the community, and a lack of assurance on practice. This was commensurate with the findings of HMIPS' thematic review of prisoner progression (soon to be published). As the Care Inspectorate also commented in the Community Justice Social Work: Throughcare Review (2021), maintaining a shared understanding of the language of risk in accordance with the framework for risk assessment, management and evaluation (FRAME) was crucial to best practice. The Risk Management Authority had recently announced a review of FRAME, which was welcomed by all partners.

There was recognition across all partners with a role in progression that the various policies, procedures, and guidance were driven by critical dates based on the length of a person's sentence. This contributed to peaks in demand within prison-based social work services which impacted upon their ability to respond quickly. This was often despite prison-based social work being aware of these critical dates in advance. This created delays in the completion of risk assessments in some establishments for some people. For example, a recent SPS prisoner journey audit recorded that out of 30 cases reviewed, 17 did not have the Level of Service/Case Management Inventory (LS/CMI) completed for the initial integrated case management case conference. Delays in the LS/CMI being completed at this stage can impact on other key processes, including access to programmes and progression. A greater emphasis on individualised risk and needs-based planning was viewed as offering opportunities for potentially more effective targeting of resources and aiding progression.

Social Work Scotland and other partners developed and introduced the new throughcare assessment for release on licence (TARL) process in 2021. This process produces an integrated parole board report prepared jointly by prison-based and community-based social work for people serving long-term sentences. The intention of this was to increase collaboration and joint working between prison and community-based social work. The timescale for producing the TARL report was also increased from six to 12 weeks. This was to strengthen risk assessment, risk management and the overall quality of parole reports. As yet, there had been no evaluation of whether it had achieved these aims. Prison-based social work welcomed the potential improvements to joint working with community-based social work. However, the process was viewed as having brought additional workload pressures which had not been reflected by any increase in resources.

The Parole Board for Scotland's Guidance for Members (2023) was comprehensive and detailed, and included reference to the role of social work. It also highlighted the application of the <u>'Osborn' ruling</u> (2013). The judgment in this case

fundamentally changed the way the parole boards across the UK must view the concept of oral hearings. It therefore significantly broadened the circumstances in which the law requires them to be held. This ruling had contributed to a significant increase in the number of oral hearings requested by the board. This had implications for prison and community-based social work staff who were regularly required to attend and give evidence at oral hearings, sometimes without sufficient notice. This increased workload was not supported by an increase in resources and was having an adverse impact on staff morale. Social work staff in prison and community settings were required to commit significant time, and often experienced hearings as adversarial in nature. This was also a finding in the Care Inspectorate's Throughcare Review report (2021). Although these issues were regularly raised with social work, SPS and parole board leaders, there had been no real change.

Additionally, the forthcoming <u>Bail and Release from Custody (Scotland) Act 2023</u> will place a duty on partners, including local authorities, to extend their engagement in release planning. This will include people on remand and serving short-term sentences, as well as those serving long-term sentences. This represents a significant shift in policy and practice for both prison-based and community-based social work. The Act also contains provisions for the creation of new guidance in this regard, as well as throughcare support standards for all relevant agencies. Social work leaders remained uncertain and concerned about what further impact the new Act might have on prison-based social work resources.

5. Leadership

Strategic vision for prison-based social work services

As previously mentioned, the Vision for Justice (2022) makes no explicit reference to the work of prison-based social work services or their contribution to delivering on the intended outcomes. The MoU had yet to be updated to reflect the new vision.

It was positive that the majority of respondents to our prison-based social work staff survey agreed that there was a clear vision for their service at a local level. In contrast, there was consensus amongst respondents and partners that there was no clear national vision for prison-based social work services.

Many social work leaders held a holistic vision across social work and the wider justice system, including prison-based social work. Having a prison in their local authority area was viewed as an asset by some managers. They felt this provided opportunities for social work services to contribute meaningfully to a person's journey through the justice system and make a difference to their personal outcomes. However, overall, prison-based social work leaders were not routinely involved or consulted on the development of strategy, direction planning or decisionmaking for prison-based social work at national or local levels.

Most partners, including people in custody and prison-based social work staff, were of the view that the role of prison-based social work was often not well understood. Services were not sufficiently visible within many establishments. This was compounded by the lack of overall vision for the service.

All partners were of the view that realignment of the vision and purpose for prisonbase social work was required to shift focus on to shared objectives. There was a consensus that this realignment should be driven by the collective efforts of the Scottish Government, the SPS, and justice social work representatives.

Strategy and direction

There was a significant gap in ownership of strategy and direction for prison-based social work services at a national level. This was despite a range of national bodies involved in leadership. All partners agreed that prison-based social work (and justice social work services more widely) lacked a collective voice or real influence.

In terms of shaping strategy and direction, Section 6 of the MoU formally lays out principles of joint liaison and leadership between SPS, Social Work Scotland, and the local authority. Social Work Scotland was recognised and valued for its commitment and dedication to representing justice social work and prison-based social work services. This was at a national level and within regular meetings with SPS headquarters personnel. However, all partners recognised the limitations of Social Work Scotland's role. This was both in terms of resource constraints and the lack of a statutory basis by which to influence strategy and service delivery across 32 local authorities. Social Work Scotland was viewed by the SPS as having more of a brokering role rather than being able to instruct strategic direction and delivery of services.

There was consensus that current leadership roles were not sufficiently defined or linked. The Scottish Government directs legislation and policy that impacts on partners, their staff and people receiving a service. Other national bodies including Community Justice Scotland, the Risk Management Authority, and the Scottish Social Services Council (SSSC) also had leadership responsibilities and set expectations for prison-based social work. The office of the chief social work adviser within the Scottish Government was viewed as a potentially influential role in representing the interests of prison-based social work but needed to be more visible in this regard.

The role of the Risk Management Authority in leading the direction of risk practice, assurance and training for the sector was particularly recognised and highly valued by partners. However, as noted earlier, all partners expressed concern that the application and understanding of FRAME among relevant partners was not always consistent. This contributed to difficulties in collaborative working across establishments.

SPS leaders experienced challenges in their attempts to work collaboratively and consistently across 32 local authorities, 29 community justice areas, and 17 establishments to achieve consistency in practice. This was due to them being a national organisation, with no equivalently influential national body to negotiate with. Where there had been disputes or disagreement between SPS and prison-based social work or justice social work more widely, these at times had to be escalated to the Scottish Government. Partners reported inconsistencies in the messages from leadership at SPS headquarters level and leadership at a local establishment level. Social work leaders advised that they tended to address issues through local SPS leadership, often through heads of offender outcomes.

All partners were in agreement that the changing demographics of the prison population and resultant increased demands on prison-based social work services were not routinely taken into account by leaders. There was a perception among some social work leaders that they were viewed as an add-on service and therefore not prioritised by the SPS in strategic planning. Changes were therefore experienced as reactive, rather than as a result of informed and collaborative planning by leaders to address new developments or emerging concerns. This was compounded by a perception that prison-based social work services were continuously having to justify their role and required resources to the SPS. Social work leaders felt that the role and identity of prison-based social work needed to be clearer and better understood. They believed this would allow them to be a full partner in the development of strategy and direction.

Positively, in the most recent developments across the women's estate, the SPS and social work leaders had engaged in some joint strategic planning on what was expected and required for effective social work practice in these settings. This had usefully informed early service design considerations, the effectiveness of which was demonstrated at an operational level in the women's community custody units. Nonetheless, key SPS strategies such as those relating to women and <u>young people</u> did not specifically mention the role of prison-based social work. There was an implicit assumption that social work was involved in the key processes such as progression. However, there was a general absence of meaningful social work involvement and consultation in the development of these strategies. This was

despite the bearing they had on the day-to-day practice of prison-based social work. At a local level, some SPS and social work leaders reported good relationships between leaders and managers in establishments. These were characterised by strong communication and a shared understanding of expectations. Justice social work service managers retained clear leadership for their prison-based social work teams. They strived to ensure that prison-based social work had parity of professional identity with their community-based justice social work colleagues.

Social work leaders advised that most community justice partnership arrangements included local SPS leaders but that prison-related activity was not a significant component of community justice outcome improvement plans. The focus of community justice partnerships was seen to be early intervention, community disposals, and effective resettlement and reintegration, including housing, which relied on local authority resources and strategy. This resulted in a view that prison-based social work services were not prioritised at a local strategic level. Justice social work service managers reported mixed experiences in terms of the level of involvement of their chief social work officers in prison-based social work and wider justice social work matters. Some found them to be very involved and supportive, while others did not. This echoed the views of some other justice partners in that there did not seem to be the same priority focus given to prison-based social work services that other social work services were given across partnerships.

There was a consensus across all partners that there was a lack of collective leadership and influence for prison-based social work at a national level. This meant there was a lack of shared vision and aims and a lack of consistency in the translation of national strategies and policies at an operational level. This ultimately contributed to the potential for inequitable outcomes for people in custody.

Collaborative leadership and planning

Most prison-based social work staff recognised their team managers and senior justice social work managers as being responsible for leadership of the service and brokering partnership working. There was also some recognition of staff's own individual responsibilities in supporting and developing partnership working.

Central to collaborative leadership was a sense of shared values, vision, and purpose between partners, or at least an understanding of these. The majority of respondents to the prison-based social work staff survey believed there was a shared purpose, vision, and values between: prison-based social work and SPS management; programmes staff; integrated case management teams, the risk management team; prison psychology; offender management colleagues; and substance use colleagues. This contributed to a perception of strong partnership working with these partners. The Parole Board for Scotland also believed it shared a vision and understanding with prison-based social work. It noted their professionalism and that the quality of reports were generally of a high standard. Nevertheless, other partners identified a need for improvement in the overall quality of reports and consistent quality assurance of these.

Less robust connections were experienced between prison-based social work services and health services in prisons. The majority of survey respondents disagreed that they shared a purpose, vision, or values. Less than half believed that the work of prison-based social work was valued by health services.

A shared purpose, vision and values between prison-based social work and community-based justice social work services was noted by almost all respondents to the staff survey. This was a significant strength and indicated confidence in their respective roles and responsibilities in collaboratively working with people in custody. Most respondents to the survey also believed that the prison-based social work role was valued by their community-based justice social work colleagues. A majority felt well-connected to their local community-based social work service. This was in contrast to less than half of respondents feeling well-connected to justice social work services at a national level. This supported the view that there was a stronger vision for prison-based social work services at a local level than at a national level.

There was consensus that prison-based social workers were generally managing to maintain their core social work values. Respondents viewed themselves as having a responsibility to advocate for people in custody when any clashes in values with other professionals had an impact on people. Working in a secondary setting, prison-based social work staff and leaders recognised the challenges of upholding social work values in a prison. Clashes of values with some SPS colleagues was, at times, a barrier to collaborative working.

Collaborative leadership between SPS and prison-based social work was often dependent on the relationship and communication between key SPS personnel within establishments, including deputy governors and governors. However, difficulties arose when there were personnel changes. There had previously been a lead within SPS for social work. Social work partners felt that this role fostered a stronger sense of collaborative working between SPS and prison-based social work. This post was no longer in place and social work leaders experienced this as a significant gap. However, SPS leaders were less certain of the usefulness of this role, advising that it was not something that they intended to fund in the future.

At a strategic level, partnership working had been impeded by a lack of mutual understanding of the respective roles and responsibilities between partners. Existing mechanisms for joint strategic planning, such as meetings between SPS headquarters and Social Work Scotland, had limitations. For example, in the development of consistent implementation of agreed strategies across the prison estate and all local authorities.

An example of where a lack of collaborative strategic planning had an impact on the delivery of prison-based social work services was the limited communication of changes in the management of the prison population. Prison-based social work services had not always been informed with sufficient notice of intentions to move prisoners with different gender, need or risk profiles between prisons. This resulted in insufficient time to consider and jointly plan for the demands on services. This included consideration of the specialist skills and staff numbers required.

6. Accountability

Effective use and management of resources

All partners recognised that the prison-based social work role was complex and multifaceted, with many essential and interlinked responsibilities. A key priority for most social work staff was collaborating with partners on public protection by assessing risk through relationship-based practice, including consideration of actual and potential victims. Some partners, including some social work leaders, believed the role of prison-based social work was to primarily undertake risk assessments and reports. There was recognition that this did not necessarily align with the aspirations held by all prison-based social work leaders and staff. Otherwise, there was no real consensus among partners on what the key role and aims of prison-based social work services should be.

Significant pressure on resources impacting on the ability of prison-based social work to complete tasks effectively and timeously was a strong and repeated theme from all partners. In a few prison-based social work services, there had been delays in the delivery of critical work such as LS/CMI assessments and parole reports. This impacted on decision-making for the progression of people in custody.

The majority of social work staff intimated that they did not have sufficient time to build relationships with people. Social worker activity was focused on priority assessment, caseload management, and report-writing. For some, this compromised relationships with prisoners and impacted negatively on effective contributions to key case management and progression processes. Social work also highlighted the insufficiency of in-house IT systems, and a continued reliance on paper files. This was viewed as significantly hampering the capacity of both SPS and social work to jointly contribute to case management, report on activity outcomes, and undertake informed workforce planning. A specific example was the migration of prison-based social work IT to a web-based system, which was perceived to be not fit for purpose and impacting on day-to-day work.

Where teams and individual workers were successfully creating opportunities to work more frequently with people on a planned basis, this was acknowledged in the positive experiences we heard from some people in custody.

As mentioned, prison-based social work services form part of a wider system, with each part impacting the other. The pressures experienced by other services, such as prison psychology, were also highlighted. Combined, these inevitably impact on the capacity of the whole system to efficiently contribute to effective progression management for people in custody.

Potential expansion of the prison-based social work role

Despite the increasing pressures, some partners suggested that there were opportunities to broaden the social work role in prisons in order to achieve better outcomes for people in custody. This was in line with some wider policy drivers. For example, the role of social work in prisons being enhanced to better address people's wider health and social care needs. <u>A New Vision for Social Care in</u>

<u>Prisons</u> (University of Dundee, 2018; commissioned by the Scottish Government) and the <u>Integrated health and social care in prisons tests of change: workstream</u> <u>findings and recommendations</u> (Social Work Scotland, 2020) highlighted the case for the role of social work in prisons to be enhanced or extended due to the complex health and social care needs of the prison population. A key recommendation was:

"The Memorandum of Understanding between SPS and the local authorities on prison-based social work and the connections with the integrated authority, as well as the role of social work within prisons more widely, should be reviewed to establish and promote a more cohesive approach to social work in prisons in the future".

The report was published during the pandemic, which made it challenging for the recommendations to be implemented. However, the findings from the report were incorporated to some extent in the provisions around social care in prisons in the proposed <u>National Care Service (Scotland) Bill</u> (2022)⁶. Relatedly, the Scottish Government's Prison Social Care Improvement Programme 2023 – 2025 seeks to establish an integrated, consistent social care service in prisons equivalent to community provision. Exploration of the role of social work in prisons remains a key element of this workstream.

Ongoing considerations around the National Care Service ultimately offer opportunities to consider how social work practice in both community and custodial settings align to their counterparts in community health and across prison health and social care. All partners recognised, however, that any wholesale broadening of the prison-based social work role would require significant additional resource, as well as buy-in from leaders and staff.

That said, there were many examples provided in the staff survey of prison-based social work in some establishments already undertaking a range of tasks beyond risk assessments and the preparation of reports. These included:

- training prison officers in child and adult protection
- supporting prisoners in equality and diversity matters, including advocating for their rights and challenging discrimination
- supporting and monitoring pregnant women and women with children in custody
- involvement in local homelessness initiatives
- redeveloping a prison throughcare service.

These additional responsibilities were not all covered by the MoU nor included in key strategy or planning by leaders. Reviews of the changing requirements of prisonbased social work were happening in a few individual establishments, but were limited by insufficient mechanisms to gather, report and analyse data. This meant that the resource impact of additional tasks beyond the MoU was not fully

⁶ The Bill establishes the National Care Service, which aims to improve the quality and consistency of social services in Scotland. The Bill allows Scottish Government ministers to transfer social care responsibility from local authorities to a new, national service. This could include adult and children's services, as well as justice social work.

understood by the SPS.

There was recognition that prison-based social work services in the newer SPS establishments across the women's estate were better able to focus on relationshipbased practice and work holistically and in trauma-informed ways to identify and address needs and risks. This was driven at a strategic level by the SPS' <u>Women's</u> <u>Strategy</u>. While recognising that there were fewer women in custody than men, these new developments offered opportunities for improvement across the wider prison estate.

Social work and SPS leaders would welcome a shift in the focus for prison-based social work services to enable them to work more holistically with people in custody across the entire estate, supported by sufficient resources. Nonetheless, the SPS highlighted that the onus was not just on prison-based social work to provide support. The key role of the third sector in working with people in custody was emphasised. Further, the upskilling of SPS staff to work in person-centred ways was viewed as important in supporting people throughout their sentence.

Overall, the absence of a clear leadership and governance structure, where leaders have the specialist social work knowledge, responsibility, and authority to review and deploy resources nationally, was recognised by all partners.

Performance management and quality assurance

Prison-based social work managers were expected to complete monthly data returns to evidence performance against the responsibilities outlined in the MoU. They reported they were in the main completing these. The collation and reporting of these quantitative measures were done manually by prison-based social work managers. This was due in part to the lack of functionality of the LS/CMI portal.

The <u>Report on the Review of Closed Cases</u> (2023) by the LS/CMI review group⁷ made various linked recommendations to the Scottish Government. For example, that the LS/CMI IT system provider should ensure LS/CMI system reporting enables self-evaluation, quality assurance measures, and service planning for partners. The group updated the cabinet secretary for justice and home affairs in December 2023. The update confirmed that the system reporting functionality was being developed, alongside revised LS/CMI governance arrangements to guide future development work. This work is welcomed.

All partners were in agreement that the data gathered and submitted to the SPS by prison-based social work services was not useful. The accompanying data capture document was described as not fit for purpose. It did not support performance monitoring in any meaningful way. There was also an over-reliance on quantitative rather than qualitative data. As a result, the data gathered did not provide a true reflection of the range or quality of work undertaken by prison-based social work.

The MoU also included an expectation of monthly meetings between SPS heads of offender outcomes and prison-based social work managers. The purpose of this

⁷ This group was convened in 2022 by the Risk Management Authority at the request of the Scottish Government due to the identification of a national LS/CMI system issue.

was to review the data submitted by prison-based social work and identify any arising issues, in order to confirm payment for the service provided. These meetings were not happening consistently across all establishments. Where they did take place, in some establishments they were seen to facilitate positive communication between SPS and prison-based social work. However, they were universally not viewed as particularly meaningful by SPS and social work leaders. Where heads of offender outcomes and prison-based social work managers had a shared understanding of the expectations of the MoU, this was seen as offering more value.

Due to the reliance on prison-based social work self-reporting the data, neither the data nor the monthly meetings provided the anticipated assurance for the SPS and prison-based social work services. One establishment, by agreement between the SPS and the local authority, gathered additional data. This was used more meaningfully to inform collaborative decisions about resources required within that particular prison. This learning may be of interest to leaders across the wider sector in terms of agreeing meaningful, consistent approaches to performance reporting.

Periodic audits of prison-based social work performance were also expected in accordance with the MoU, but these were not happening with any consistency. This was due in part to ongoing resource pressures. There were no national audit templates or tools to assist this process, apart from those relating to specific risk assessments. Some prison-based social work services had developed their own audit tools, albeit based on outdated national guidance.

The SPS, the Risk Management Authority and other partners were not confident that management oversight and the quality assurance of risk assessments were being undertaken consistently in line with current guidance and standards. This was despite the existence of quality assurance tools for specific risk assessments. Robust quality assurance was also viewed as an important element of providing confidence in decision-making at risk management team meetings and other forums. To this end, the LS/CMI Review of Closed Cases (2023) report recommended that the Risk Management Authority should work with all relevant agencies to ensure that LS/CMI quality assurance templates are embedded within audit and evaluation processes to assist decision-making forums such as the risk management team. The Risk Management Authority recirculated the existing LS/CMI quality assurance templates to justice social work services in September 2023, with the intention to embed these across all relevant agencies.

Partners reported that SPS staff, particularly risk management team members and integrated case management staff, were not routinely trained in the principles of the LS/CMI assessment. This was despite the centrality of LS/CMI to social work's contribution to overall risk assessment, management, and planning. This was seen to limit some SPS staff's understanding and confidence in these assessments. This echoed the findings of the Care Inspectorate's Throughcare Review (2021). This noted that partners and groups with responsibility for the various aspects of LS/CMI should ensure training needs were appropriately addressed. This was also highlighted in HMIPS' forthcoming thematic review of prisoner progression in the context of risk management teams, where they recommended that the SPS and partners should develop a shared understanding of the use of risk assessment tools.

Performance frameworks and frequency of reporting in private prisons were viewed as more robust. Regular contract meetings assisted prison social work services to better evidence the demands on the service, and in successfully securing additional resources when required.

Significant case reviews were considered by some partners to be a driver for learning and subsequent improvement activity. These often led to recommendations at an operational level, but by their nature were reactive rather than embedding a culture of continuous improvement. Therefore, it was felt that they had little impact on driving improvement at a strategic level.

In the absence of a consistently used performance reporting mechanism, partners had no real assurance about the range and quality of the prison-based social work service being delivered. Improvements in this area would therefore be welcomed by all partners.

Improvement and change

The review noted that there was a series of multi-agency workstreams and activities that may impact on the direction and delivery of prison-based social work services. For example, the review of the National Objectives for Social Work Services in the Criminal Justice System Standards: Throughcare, and HMIPS' forthcoming review of progression. At the time of writing, it was too early for these developments to demonstrate any effect or improvements for prison-based social work.

The regular engagement between the SPS, Social Work Scotland and other key partners at a national level to drive improvement was viewed as positive by all. This often involved a significant investment of time by justice social work service managers and staff to drive and implement change, which was appreciated by partners.

Social Work Scotland's justice social work standing committee had a number of subgroups, including one specifically for throughcare. This was attended by social work staff from both community and prison settings at all levels. The group's purpose was to drive strategic and operational prison-based and community-based throughcare matters forward to support national consistency and improvement. Examples included the implementation of the throughcare assessment for release on licence (TARL) which leaders felt contributed to improvements in communication between prison-based and community-based social work. The group continued to identify and address any issues with the TARL following its roll-out. Nonetheless, the SPS and other partners felt that a significant overall barrier to effecting real change was the lack of a national social work leadership body with the statutory power to direct the implementation of any ratified changes.

A further significant barrier to driving improvement was the fact that the MoU between the SPS and local authorities had not been revised or updated to reflect the increased pressures on prison-based social work services. For example, the ageing prison population was noted as a significant issue by the SPS and social work leaders. Therefore, partners were not adapting service delivery in a planned way in response to changing profiles. This issue was also highlighted in HMIPS' thematic review of prisoner progression. They found that there had been no meaningful

review of the impact of the changing prison population on prison-based social work. Furthermore, partners advised that SPS financial constraints and flatline budgets placed significant limitations on the ability to invest in targeted improvement actions.

All partners recognised that in order for improvements to be made, there must be buy-in and action at an operational level across establishments. Communication of changes was raised as an issue. For example, a recent pilot process whereby the Risk Management Authority provided external secondary assurance for complex first grant of temporary release cases referred by the SPS. Social work leaders stated that this was not communicated well to them or their staff at operational levels, which led to implementation issues. Some prison-based social work leaders noted that capacity for improvement at a local level was limited without agreed priorities at a national level. An exception was the developments across the women's estate. These were generally viewed as a clear strength in terms of improvement, by responding to the specific needs of women in the justice system in line with national vision and strategy.

A forum for prison-based social work managers took place biannually, chaired by Social Work Scotland. This was viewed by some as very positive, and seen as assisting in driving improvement across the sector. That said, many prison-based social work managers were not aware that the forum continued to take place. In general, prison-based social work staff and leaders felt there was a lack of opportunities for peer support and mechanisms to share good practice across establishments and local authorities.

The role of Community Justice Scotland was highlighted, given their focus on improvement and change across the justice system and their role in providing training for prison-based social work staff. Some partners felt that Community Justice Scotland tended to focus on lower-level community interventions rather than driving improvement with people who might pose a higher risk, including those working with prison-based social work services. This was despite Community Justice Scotland's role in providing training and support in relation to risk assessment and interventions for people convicted of domestic and sexual offences.

All partners lacked clarity as to whether the development of the National Care Service would drive improvement for prison-based social work. A benefit of justice social work being included in the National Care Service was the potential for a 'national voice' for justice social work services. A potential benefit for the SPS was the possibility of streamlining communication to more effectively drive improvement and change Relatedly, the proposed National Social Work Agency⁸ was viewed by some partners as a potential solution to driving engagement, improvement and consistency for social work services at national and local levels.

There was a desire among partners for the Scottish Government to assume more direct leadership of improvement and change. Some partners reflected very positively on the effectiveness of a previous tripartite group. This was an

⁸ The Scottish Government's vision for the NCS includes provision in the Bill for the establishment of a National Social Work Agency, which will aim to provide national leadership, oversight, support, and opportunities for training and development for social work services (<u>National Care Service (Scotland)</u> <u>Bill: Policy Memorandum</u> (2022).

arrangement between the SPS, local authorities through the former Association of Directors of Social Work (which became Social Work Scotland), and the Scottish Government. This was established in 2001 to consider ways of strengthening partnership working between the three partners in order to improve arrangements for the transition of people from custody to the community. However, the group was discontinued. Not all partners were of the view that it was able to effectively influence change.

Partners ultimately expressed the urgent need for a wholesale review of prisonbased social work leadership, governance, and accountability arrangements. There was a consensus that this should be through a multi-partner working group led by the Scottish Government, in order to take ownership of improvement and change.

Recruitment, deployment and joint working

Responses to the prison-based social work staff survey demonstrated an overall picture of committed staff who benefited from supportive supervision and strong team leadership. Prison-based social work teams comprised experienced practitioners, sometimes drawn from a range of other relevant social work backgrounds and equipped to deliver on their responsibilities.

All partners, including the SPS and the Parole Board for Scotland indicated that the wealth of skills, knowledge, and experience of prison-based social work in being able to address offending behaviour and reduce risk were not being fully deployed. Partners recognised that the role of prison-based social work in working with people serving long-term statutory sentences had become generally limited to risk assessment and report-writing. All partners felt that this contributed to prison-based social work staff feeling deskilled and undervalued. There were reports of elevated stress resulting from demands on capacity and the restrictive range of process-driven tasks taking up most of workers' time.

Despite the broad range of experience and skills noted within our survey, leaders found recruitment of prison-based social work staff to be challenging at times. There was a view from partners that prison-based social work was not always attracting suitably experienced professionals. This was due in part to a perception of limited opportunities to use social work knowledge and skills in the role. Bringing in new staff was seen as important in maintaining a positive culture within teams.

The SPS often expected rapid responsiveness and flexibility from prison-based social work services to meet the changing demands of the prison population. These expectations were not always mindful of the requirements of local authority recruitment processes and did not always give enough notice. The limitations of being able to move social work staff across local authority boundaries or within local authority justice social work services were at times unfavourably compared by the SPS to their greater flexibility as a national organisation.

Learning and development

Community Justice Scotland and the Risk Management Authority hold responsibilities for most prison-based social work training. Prison-based social work staff noted that they generally had access to an appropriate range of core training to support them in fulfilling their roles and responsibilities. However, staff did not always have timely access to particular training to undertake key tasks. Specifically, staff noted challenges in accessing training in specialist risk assessment tools, the Fundamentals of Risk Practice training provided by the Risk Management Authority, and risk practice refresher training. This reflected the findings of the Care Inspectorate's Throughcare Review (2021), which noted at that time that a clear learning and development pathway was required for staff with throughcare responsibilities, including access to risk practice training.

It was noted by some prison-based social work staff that, despite the positive developments across the women's estate commensurate training had not been provided. This was to account for the gender-specific specialist social work knowledge and skills required in these settings.

The Children and Young People's Centre for Justice (CYCJ) similarly highlighted the specialist knowledge and skills required for working with children and young people in custody. They had rolled out the <u>Whole System Approach</u> in HMP YOI Polmont and HMP YOI Stirling, and recognised opportunities for future joint training. This included exploring the possibility of increased prison-based social work staff involvement in initial custody reviews for young people up to the age of 21 entering custody. Staff survey respondents working in this setting demonstrated clear knowledge of the Whole System Approach in usefully informing their day-to-day work.

All partners recognised the benefits of joint multi-agency training to improve interagency communication, consistency of practice, and understanding of respective roles. Some areas had collaborated on strategies to deliver this locally. In some establishments, the Risk Management Authority had delivered joint training to multidisciplinary risk management team members. Partners reported that this improved alignment to guidance and a shared language when communicating risk. It was felt by partners that if this training were to be delivered to all risk management teams across Scotland, it could improve consistency.

While training opportunities on compiling parole reports and giving evidence at oral hearings and tribunals were available, awareness of their existence was limited among some prison-based social work staff. For example, staff from two local authorities had worked jointly with the Parole Board for Scotland to develop training videos for giving evidence at hearings and tribunals. The Parole Board for Scotland also responded to requests for training in preparing parole reports but noted that these requests mostly came from community-based social work. Overall, the publicising and sharing of available training and good practice occurring at local levels was limited.

The absence of an agreed strategic approach to national prison-based social work training limited opportunities to maximise learning and development. This gap was noted as relevant for further consideration by the strategic training provision group, led by Community Justice Scotland. This group included key partners such as Social Work Scotland, the Risk Management Authority, and the Scottish Government. It offered a strategic forum for formulating policy and operational responses to training needs for justice social work staff and other community justice practitioners. Community Justice Scotland intended to undertake a training needs

analysis of the justice social work services workforce, which would include a separate analysis of the specific training needs of the prison-based social work workforce. This intention was welcomed. The findings of this thematic review will also further inform the work of the group.

Relatedly, the LS/CMI review group report on the Review of Closed Cases (2023) recommended that the Risk Management Authority work with Community Justice Scotland and all agencies represented on the LS/CMI review group to analyse training needs relating to the application of the FRAME approach. This was being progressed by a recently-formed Risk Management Authority multi-agency training strategy yet to be published.

In addition, the development work around the proposed National Social Work Agency included a workstream relating to workforce, education, and training. This had a focus on recruitment, retention and enhanced training options and opportunities for social work in Scotland. Resources to support these system improvements were still to be quantified and identified. Further, the Scottish Government's office of the chief social work adviser, the Social Work Education Partnership, and partners including the SSSC were developing an advanced social work practice framework. This aimed to establish developmental pathways for all social workers in Scotland, operating in any setting. These workstreams offered opportunities for the specific needs of prison-based social work services to be taken into account as part of future workforce development activities.

Operational support for prison based social work

Effective line management ensured that almost all staff survey respondents were supported and appropriately held accountable for their work. Access to professional supervision assisted them to understand and meet the expectations of their role. The robust approach to line management was commended by the SPS and highlighted as an example of good practice which they would wish to emulate.

For prison-based social work managers, having a service manager with direct knowledge and experience of the challenges of operating in a prison setting was noted as a strength. This was viewed as providing well-informed support and focus on the service.

There were examples at a local level of justice social work services promoting opportunities to encourage staff to work in both community and prison-based settings. This was either as a hybrid role, or on a rotational basis. A few of the staff survey respondents noted that their role was split between community-based and prison-based social work teams. Partners perceived that this served to improve knowledge and understanding of both roles. This was seen as contributing to more effective planning for people during their sentence and preparing for release.

7. Impact and experience of prison-based social work services

Gathering the views and experiences of people with living experience of prisonbased social work services was central to our review. It must be noted that the views outlined were based on people's own personal experiences and perceptions of the service they received. Scrutiny of the quality of prison-based social work practice was outwith the scope of this phase of the review. As such, we were unable to validate these experiences at an individual level. Future scrutiny will focus on the efficiency and impact of social work practice.

The strengths and areas for improvement noted at strategic levels and by prisonbased social work staff were strongly echoed by the people in custody and on licence that we consulted. This was significant.

Some people in custody found their prison-based social worker very accessible, characterised by frequent contact and good, open, supportive, and caring relationships. This was a particularly strong finding from the women's community custody units. In these settings, prison-based social workers often checked in with the women on an ad hoc basis, rather than initiating contact only at critical dates. This allowed more meaningful relationships to develop and a perception from women that there were fewer barriers to progression. In these settings, people reported that prison-based social workers also tended to have useful links with their personal officers. This provided more holistic support and continuity.

Where collaborative practice was working well, people in custody told us that they felt well-informed about the management of their sentence. They believed this fostered mutual trust, contributing to better overall outcomes for them. The majority of prison-based social work staff across all establishments reported that they felt valued by the prisoners they were working with.

That said, the majority of people with experience of prison-based social work services that we spoke with did not feel they had enough contact with their prisonbased social worker. Some people were unsure how to contact prison-based social work services. Most felt there was a significant lack of visible, accessible information around establishments about the service.

Many people felt their prison-based social worker did not have enough time to build a relationship. Other than staff leaving the team or them moving establishments, it was difficult for them to understand why they could not retain the same allocated worker throughout their journey in custody. As a result, people felt that they had to repeat their personal stories several times to different workers.

Most people advised that they usually only had contact with their prison-based social worker when critical dates or processes were approaching. They reported that they would value more regular check-ins. They echoed the perception of other partners, including social work services themselves, that they were task-oriented. They expressed surprise that social workers in prisons were not operating in the way that they would expect 'traditional' social workers to work, for example having less emphasis on their overall welfare. Many people felt this was because there were not enough social workers in prisons. People expressed a view that prison-based social

work should also be involved in programme work with them to help address waiting lists. Some people expressed their perceptions of major differences between establishments in terms of the level and quality of the service they received.

There was also significant conflation of the prison-based and community-based social work role. People were not always clear about the distinct roles and who was responsible for what. They had not heard of key developments in collaborative report-writing such as the throughcare assessment for release on licence (TARL). Some people had had positive experiences of their prison-based and community-based social worker working together effectively throughout their sentence. Others had fewer positive experiences and felt there was no connection or consistency between prison-based and community-based social work.

Most people felt risk assessments and release plans were not properly explained to them. Some people reported that the lack of contact with their prison-based social worker throughout their sentence meant that information about them within reports or at risk management team meetings often came as a surprise.

Some people felt prison-based social work held a significant amount of power and this was not always balanced. As such, they often felt unable to raise or address issues. They believed it might lead to them being perceived as anti-authority or hostile, and therefore hinder their progression.

The importance of addressing trauma was recognised. People with living experience of custody felt prison-based social workers should be better equipped to deal with the impact of trauma. This was particularly when discussing adverse experiences for the purpose of reports. The SPS expressed its commitment for all staff to become trauma-informed.

Particular challenges were highlighted for prisoners who were foreign nationals awaiting deportation. They tended not to be allocated a community-based social worker in some areas but were allocated a prison-based social worker. They felt the prison-based social work role could have offered them support, but the very limited contact with them was a barrier to this.

Overall, the reported impact of these less positive experiences was an increase in stress, adding to mental health difficulties, and decreased motivation for some prisoners. Reflecting some of what we heard from partners, people with experience of prison-based social work services felt that areas for improvement related to:

- more prison-based social workers
- more contact with prison-based social workers to allow increased opportunities to build relationships
- greater transparency in their role and risk assessments
- better communication and following up on actions
- being able to challenge reports or decisions more equitably

- opportunities to provide feedback on the service they receive
- greater awareness of and access to social work support in prisons.

SPS leaders referred to an ongoing workstream to introduce targeted integrated case management. This aimed to focus resources on people who would benefit from increased support, based on assessed risk and need. HMIPS' review of prisoner progression (2024) noted that a more targeted approach to integrated case management case conferences may be more purposeful. This approach might also mean less frequent contact with prison-based social workers for people subject to these arrangements. A more targeted approach to case conferences may offer the potential to be more purposeful. In light of the findings from this review, the SPS and partners recognised the importance of not decreasing opportunities for prison-based social workers to build and sustain relationships with people in custody throughout their sentence.

Families

In terms of prison-based social work services' role with prisoners' families, most partners reported that they had a limited role but that more could be made of this. People in custody and other organisations would value prison-based social work introducing themselves to family members and maintaining more contact in order to keep them informed. This was in recognition of the important role in supporting people's transition from custody that families can often have. Partners felt that the impact of imprisonment of children should also be recognised and addressed more directly by prison-based social work services and leaders. Where there was family involvement, contact with them was viewed as particularly pertinent when setting realistic licence conditions. It was noted by partners that contact with families was usually undertaken by the person's allocated community-based social worker, as per guidance and practice. Just under half of the prison-based social work survey respondents felt their work was valued by prisoners' families. This highlighted opportunities to better understand this issue with a view to improving families' perception and experience of the service.

Value of prison-based social work

SPS strategic leaders demonstrated strong understanding, respect, and support for prison-based social work services and their role and value in prisons. It was recognised by all partners that prison-based social work services had specialist skills, knowledge, and experience that was an asset to their work. The SPS was supportive of prison-based social work being able to utilise these skills in programme work. However, it recognised that these opportunities had become limited due to the MoU and the ever-increasing pressure on prison-based social work resources.

Positively, prison-based social work staff agreed that their work was valued by most key stakeholders. This included the SPS, psychology colleagues, the Parole Board for Scotland, and people in custody. However, only a third of staff agreed that the work of prison-based social work was valued by the Scottish Government.

Despite some of the positive staff survey results, some social workers and prisonbased social work managers still perceived that the service was not valued equitably with other services in the prison, such as prison psychology. Examples provided to illustrate this sense of inequity were a lack of access to meeting spaces in some establishments, poor environmental conditions, and differential IT systems. These were viewed as having a significant negative impact on their day-to-day work and efficiency. Further, some social work leaders noted that at an establishment level, the SPS at times made unfavourable comparisons to other prison-based social work services. This eroded morale and created division and tension.

As previously noted, the absence of clear assurance mechanisms also contributed to challenges in prison-based social work services being able to demonstrate the range and quality of their work and ultimately, a more tangible sense of value.

8. Conclusions

National and local leaders responsible for prisons and social work services face difficult choices if they are to successfully deliver on the intention to shift the balance between the use of custody and community justice. This review considered the direction of prison-based social work services within the context of the changing prison population, resource constraints, and competing, often increasingly complex, demands.

Prison-based social work services were seen as essential to protecting the public and supporting change for people serving sentences and subject to statutory social work supervision upon release. Prison-based social work staff were strongly committed to protecting the public and fulfilling their statutory responsibilities through the provision of effective services. This was an important strength. Nevertheless, prison-based social work services and their justice partners faced considerable pressures working within fragmented systems, to outdated and ineffective guidance, and with a lack of sufficiently clear leadership. A key area of improvement related to how prison social work services were commissioned and the limitations and inconsistencies with the MoU arrangements.

The inadequacies of these arrangements became particularly acute when faced with a record high prison population, increasingly complex needs and risks, and funding arrangements not being routinely reviewed and updated to keep pace with change. Existing assurance mechanisms were of limited use and offered very little assurance to national or local partners with responsibility for monitoring and improving prison-based social work performance. The quality assurance process and measures that did exist were not used consistently or routinely. This made it difficult for prison-based social work services to demonstrate their value and professional standing within the secondary setting of a prison. As a result, the MoU was no longer seen as fit for purpose.

Where things were working well, this was often in spite of the governance arrangements and the MoU, with some exceptions. Well-established relationships between prison-based social work and the SPS resulted in some positive collaboration at a local level. More recent arrangements across the women's estate were viewed as more efficient and effective. This offered opportunities to do things differently and better.

Gaps remained in national strategic workforce planning and training for prison-based social work, including joint training. It was recognised by all partners that the skillset of such a specialised and often highly experienced staff group was not being used to best effect to support rehabilitation and desistance from offending. There were ambitions and aspirations to expand the prison-based social work role to meet the wider needs of people in prison, their families and children. This is unlikely to be realised without a fundamental review to reach agreement on the vision, role and responsibilities of a contemporary prison-based social work service.

There was a universal consensus across all partners that fundamental reform was required in order to strengthen and improve the governance, leadership, and accountability arrangements for prison-based social work. A disconnect between

national and local arrangements meant change was not always effectively managed. As a result of a fragmented strategic landscape, there was a clearly held view that the necessary transformational change could only be delivered through better direction and co-ordination. Further, the needs of prison-based social work cannot be considered in isolation from the cross-cutting policy developments impacting wider justice social work services and prisons. As such, the Scottish Government was viewed by partners as having the appropriate authority and oversight to adopt a lead role in transformational change for prison-based social work services and justice social work services more widely.

Cultural change will be necessary if partners are to achieve their ambitions. This will require goodwill, flexibility, and an openness to doing things differently to the ultimate benefit of people in the justice system, their families, and people and communities affected by crime.

9. Areas for improvement

To better co-ordinate and direct improvements in the governance, leadership and accountability of prison-based social work, the Scottish Government, the SPS, and justice social work leaders should do the following.

- Agree the mechanism by which the necessary changes identified within this report and other related developments can be delivered. These include, but are not limited to:
 - reviewing the current funding and commissioning arrangements for prison-based social work, including a complete review of the MoU between the SPS and local authorities as a priority
 - reviewing the requested prison-based social work data to ensure this is fit for purpose and provides assurance on accountability and quality for all stakeholders. This includes collaboration on the development of nationally agreed, consistent quality assurance and audit tools for prison-based social work services and embedding these in relevant guidance
 - agreeing a clear national vision and aims for prison-based social work supported by a national structure to oversee the consistent delivery of services. This includes within any revision of relevant standards and guidance
 - taking account of and including prison-based social work and wider justice social work services in all relevant policy, strategy and direction planning that impacts on the delivery of prison-based social work services and their work with people in custody
 - identifying and communicating clear lines of accountability for continuous improvement and change for prison-based social work.
- With a view to increasing the visibility of their service and understanding of their role within establishments and more widely, local social work leaders should collaborate with the SPS to improve the professional standing of prison-based social work.
- To ensure a competent, confident, and well-trained workforce, the needs of prison-based social work staff should be reflected within any strategic approach to training and workforce planning. This also includes the establishment of opportunities for peer learning and support for prison-based social work staff and managers to reduce isolation.
- To support robust performance reporting and quality assurance, partners at a national and local level should ensure electronic recording systems are fit for purpose and used consistently to produce reliable data through which quantitative and qualitative results can be demonstrated.

10. Next steps

Having reviewed the strategic context in which prison-based social work services are operating, the next phase of our review will focus on the efficiency and effectiveness of prison-based social work practice. It will include looking at the collaboration between prison-based and community-based justice social work and the related outcomes for people in custody, their families, people affected by crime, and communities.

To this end, we will seek to establish a multi-partner steering group to inform our approach to the future scrutiny and assurance of prison-based social work. As well as representation from national and local stakeholders, the involvement of people with living experience of custody and throughcare will be essential to both the design and delivery of any future methodology, and in listening to their experiences.

We are aware that some of the key standards underpinning prison-based social work's roles and responsibilities are currently under review. As scrutiny bodies, it will be of benefit for any future scrutiny and assurance work to use the revised standards as a baseline for any inspection or self-evaluation activity.

Findings from other related workstreams will also need to be taken into account in any future scrutiny or reforms. For example, there are ongoing considerations around the National Care Service, the National Social Work Agency and the future arrangements for justice social work services (and therefore prison-based social work services) in this context. The findings and recommendations from HMIPS' thematic review of prisoner progression are also likely to bring about changes in the operational delivery of progression processes that will affect prison-based social work.

The prison-based social work staff survey we conducted was invaluable in providing detail on the range and complexity of the prison-based social work task. Our findings from the survey will therefore be key to informing the next phase of scrutiny activity. A fully anonymised summary of our survey findings will also be shared with justice social work leaders following the publication of this review report.

Appendix 1

How we conducted this review

Scoping meetings

We held scoping meetings with Social Work Scotland, the Risk Management Authority, Community Justice Scotland, the Scottish Government, and the Children and Young People's Centre for Justice. This was to gain an initial overview of the strengths and challenges for prison-based social work and to help shape the direction of the review.

Desktop review

We examined relevant documents pertaining to prison-based social work services. This included strategies, policies, procedures, guidance, findings from other relevant scrutiny and reviews, and quality assurance materials.

Staff survey

We distributed a link to our online staff survey to all prison-based social work team leaders, senior social workers, social workers, paraprofessionals, and business support staff across all establishments. We received 68 survey responses.

Focus groups and interviews with key partners

We held focus groups and interviews over MS Teams with SPS colleagues at strategic and operational levels, prison psychology, all justice social work service managers with a prison in their local authority, prison-based social work senior managers, the Parole Board for Scotland, and a third sector organisation. In total, 46 colleagues across these partner organisations contributed to seven focus groups and four interviews.

Consultation with people with living experience

Support from HMIPS and SPS colleagues enabled our review team to engage with people who had experience of working with prison-based social work services. In total, 32 people currently serving a long-term sentence contributed to six focus groups across four establishments. We also conducted a telephone interview with one person released on licence.

Final report

This report summarises the overall findings across the relevant quality indicators to highlight strengths, challenges and areas for improvement that may have national relevance. The quality indicators informing this report are outlined below (please also see Appendix 2).

- 2.1 Impact on people accused or convicted of offences
- 6.1 Policies, procedures and legal measures

- 6.2 Planning and delivering services collaboratively
- 6.4 Performance management and quality assurance
- 7.1 Recruitment, retention and joint working
- 7.2 Staff development and support
- 8.1 Effective use and management of resources
- 8.2 Commissioning arrangements
- 9.1 Vision, values and aims
- 9.2 Leadership of strategy and direction
- 9.3 Leadership of people and partnerships
- 9.4 Leadership of improvement and change

Guide to quantitative terms used in the report

Almost all	90% or more
Most	75% to 89%
Majority	50% to 74%
Less than half	35% to 49%
Some	15% to 34%
A few	14% or less

Limitations of methods used

Our focus was high-level and on direction with a view to reporting on the clarity of purpose, leadership and strategy for prison-based social work services in achieving their aims. As such, scrutiny of operational practice was outwith the scope of this phase of the thematic review. This will be central to any future scrutiny and assurance focused on the efficiency, effectiveness, and impact of prison-based social work services.

The views from colleagues across partner organisations and people with living experience reflect only those who responded to the staff survey and took part in focus groups and interviews.

We sought to gather the views of a range of third and voluntary sector services by arranging focus group dates through the criminal justice voluntary sector forum, however organisations were unable to attend focus groups due to time pressures.

Appendix 2

The quality improvement framework

This report summarises the overall findings of the review across the quality indicators highlighted below.

outcomes have we achieved?	How well do we jointly meet the needs of our stakeholders?	How good is our delivery of community justice services?	How good is our management?	How good is our leadership?
1. Key performance outcomes	2. Impact on people accused or convicted of offences, and people affected by crime.	5. Delivery of key processes	6. Policy, service development and planning	9. Leadership and direction
1.1 Improving the life chances and outcomes of people with living experience of community justice	 2.1 Impact on people accused or convicted of offences 2.2 Impact on victims of crime 2.3 Impact on families 3. Impact on staff 3.1 Impact on staff 4.1 Impact on the communities 4.1 Impact on the community 	 5.1 Providing support when it is needed 5.2 Assessing and responding to risk and need 5.3 Planning and providing effective interventions 5.4 Involving people accused or convicted of offences, and people affected by crime 	 6.1 Policies, procedures, and legal measures 6.2 Planning and delivering services collaboratively 6.3 Participation of people accused or convicted of offences, people affected by crime, and other stakeholders 6.4 Performance management and quality assurance 7. Management and support of staff 7.1 Recruitment, retention and joint working 7.2 Staff development and support 8.1 Effective use and management of resources 8.2 Commissioning arrangements 8.3 Securing improvement through self-evaluation 	 9.1 Vision, values and aims 9.2 Leadership of strategy and direction 9.3 Leadership of people and partnerships 9.4 Leadership of improvement and change

Appendix 3

Terms we use in this report

Accountability: assurance that an individual or organisation is evaluated on its performance or behaviour related to something for which it is responsible.

Best value: Local authorities in Scotland have a statutory duty to demonstrate best value, introduced by the <u>Local Government in Scotland Act 2003</u>. This means ensuring there is good governance and effective management of resources, with a focus on continuous improvement to deliver the best possible outcomes for the public.

Care Inspectorate: the independent scrutiny, assurance and improvement support body for social care and social work in Scotland. Further information is available at: https://www.careinspectorate.com/

Chief social work adviser: leads the office of the chief social work adviser within the Scottish Government, advising ministers and policy teams with an interest or responsibility for aspects of social work services and practice across children and families, adult social care and justice social work.

Chief social work officer: a post held in every local authority to ensure the provision of effective, professional advice to elected members and officers in authorities' provision of social work services.

Children and Young People's Centre for Justice (CYCJ): an organisation that works towards ensuring Scotland's approach to children and young people in conflict with the law is rights-respecting and contributing to better outcomes for children, young people and communities. Further information is available at: <u>https://www.cycj.org.uk/</u>

Community custody units: accommodation for women in custody to support the specific needs of women. The units allow closer community contact and access to local services to create and sustain independence in preparation for successful reintegration into the community.

Community justice outcomes improvement plans: plans setting out how community justice partners are achieving national and local outcomes.

Community justice partnerships: these comprise community justice partners as defined in the Community Justice (Scotland) Act 2016. They come together locally to assess the community justice-related needs of people and communities in their area and ensure that appropriate services and interventions are in place.

Community Justice Scotland: the national body with responsibility to promote the National Strategy for Community Justice. It is responsible for monitoring, promoting and supporting improvement in the performance, quality, and range of community justice, and keeping Scottish Government ministers informed about this. It also promotes public awareness of benefits arising from community justice. Further information is available at: <u>https://communityjustice.scot/</u>

Convention of Scottish Local Authorities (COSLA): a councillor-led, cross-party organisation that champions the work of Scotland's local authorities and their 1,226 elected councillors. Further information is available at: <u>https://www.cosla.gov.uk/</u>

Criminal justice voluntary sector forum: a collaboration of voluntary sector organisations working in criminal justice in Scotland. Further information is available at: <u>https://www.ccpscotland.org/cjvsf/</u>

European Framework for Quality Management (EFQM) model: the globally recognised management framework that supports organisations in managing change and improving performance. Further information is available at: https://efqm.org/

First grant of temporary release: the process by which SPS risk management teams apply to Scottish Government ministers on behalf of people serving life sentences, who are otherwise prohibited from temporary release, to be released temporarily. For example, for work placements, unescorted day release, and home leave.

Framework for risk assessment, management and evaluation (FRAME): a framework developed in partnership with justice agencies which aims to develop a consistent and evidence-based approach to risk assessment and management.

Governance: a system that provides a framework for managing organisations. It identifies who can make decisions, who has the authority to act on behalf of the organisation and who is accountable for how an organisation and its people behave and perform.

Health and social care partnerships: integrated arrangements for health and social care across Scotland. All partnerships are responsible for adult social care, adult primary health care and unscheduled adult hospital care. Some are also responsible for children's services, homelessness, and justice social work services.

HMIPS (His Majesty's Inspectorate of Prisons for Scotland): responsible for the inspection and monitoring of Scotland's 17 prisons and custody centres. Further information is available at: <u>https://www.prisonsinspectoratescotland.gov.uk/</u>

HMP & YOI Polmont: Scotland's national holding facility for young people aged between 16 - 21 years.

Initial custody review: a meeting held within 10 working days for children and young people entering custody on remand or who have been sentenced. The purpose of the review is to ensure that a plan is developed for the child or young person throughout their stay, including a plan for their release.

Integrated case management: a case management structure used by the Scottish Prison Service that brings together the prisoner and other key staff and agencies to assess the prisoner's progress through custody and to plan for release.

Leadership: a set of behaviours used to help people align their collective direction, to execute strategic plans, and continually renew an organisation.

Level of Service/Case Management Inventory (LS/CMI): a comprehensive risk/need assessment and management planning method for general offending used by justice social work services across Scotland.

Licence: certain people are released from prison into the community under conditions. Being on licence means they are still serving their sentence in the community and are subject to social work supervision.

MAPPA: the acronym for multi-agency public protection arrangements put in place to manage the risk posed by people subject to sex offender registration and notification requirements, and other people who pose a high risk of harm to people and communities.

Memorandum of understanding (MoU): the governance framework that details the arrangements for use of Scottish Government funding allocated to the SPS to pay for statutory social work services in prisons provided by relevant local authorities. It provides a comprehensive list of prison-based social work responsibilities, SPS responsibilities and any that are shared.

Office of the chief social work advisor: part of the Scottish Government, led by the chief social work adviser. They advise Scottish Government ministers and policy teams with an interest or responsibility for aspects of social work services and practice across children and families, adult social care and justice social work.

Parole Board for Scotland: a tribunal non-departmental public body, members of which are appointed by Scottish Government ministers. Its main aim is to ensure that people in prison who are no longer regarded as presenting a risk to public safety may serve the remainder of their sentence in the community on licence under the supervision of social work. The Parole Board for Scotland operates independently from the Scottish Government. Further information is available at: https://www.scottishparoleboard.scot/

Parole report: a report provided by prison-based and community-based social work to the Parole Board for Scotland to inform its decision-making about a person's release from custody.

Reintegration: upon release from custody, a person enhances social inclusion through maintaining supportive relationships and access to the opportunities and resources required to maintain desistance. As a result, the person is no longer a significant risk to others. A reduced risk of reoffending enables the person to focus on developing an offence-free lifestyle.

Risk Management Authority: a non-departmental public body established in 2005 by the Criminal Justice (Scotland) Act 2003. Its work is to reduce the risk of serious harm posed by violent and sexual offending. Further information is available at: https://www.rma.scot/

Risk management team: a multidisciplinary team of professionals representing a range of agencies involved in the management of people in custody. Its primary purpose is to consider the assessment, intervention and management needs of those referred through the integrated case management process. It is also the

decision-making body that considers progression to less secure conditions and/or community access.

Scottish Social Services Council (SSSC): the regulator for the social work, social care and children and young people workforce in Scotland. Further information is available at <u>https://www.sssc.uk.com/</u>

Service level agreement: in place between the SPS and local authorities before the introduction of memorandums of understanding. The document constituted a form of agreement between the local authority and the SPS in which they agreed to provide the services outlined in the service level agreement to the SPS on the terms set out within it.

Significant case review: a multi-agency process for establishing the facts and learning lessons from a situation where a child has died or been significantly harmed.

The Social Work Education Partnership: <u>The Social Work Education Partnership</u> is a national partnership of key stakeholders across social work and social work education dedicated to shaping the future of social work education in Scotland.

Social Work Scotland: the professional leadership body for the social work and social care professions. Further information is available at https://socialworkscotland.org/

Third sector: an umbrella term that covers a range of different organisations with different structures and purposes, belonging neither to the public sector nor the private sector. It includes voluntary organisations, charities, social enterprises, and community groups.

Throughcare: describes the range of social work services provided to people in prison, and their families, from the point of sentence or remand in custody, during the period of imprisonment and following return to the community.

Trauma-informed practice: a strengths-based approach grounded in an understanding and responsiveness to the impact of trauma. It emphasises physical, psychological, and emotional safety for everyone and creates opportunities for survivors to rebuild a sense of control and empowerment.

Whole system approach: the Scottish Government's <u>programme</u> for addressing the needs of children and young people involved in offending.

OFFICIAL

Headquarters

Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY Tel: 01382 207100 Fax: 01382 207289

Website: www.careinspectorate.com

This publication is available in alternative formats on request.













OFFICIAL



AGENDA ITEM NO: 7

Report To:	Social Work & Social Care Scrutiny Panel	Date:	14 May 2024
Report By:	Kate Rocks Chief Officer, Inverclyde Health and Social Care Partnership	Report No:	SWSCSP/14/2024/JH
Contact Officer:	Jonathan Hinds Head of Children, Families and Justice	Contact No:	01475 715365
Subject:	Inspection of Inverclyde Fosterir Services	ng, Adoption a	and Continuing Care

1.0 PURPOSE AND SUMMARY

- 1.2 The purpose of this report is to advise the Social Work and Social Care Scrutiny Panel that the Care Inspectorate have notified of their intention to inspect Adoption, Fostering and Continuing Care Services in Inverclyde. Inspection activity will take place over a four-week period from Monday 22nd April 2024.

The inspection methodology will refer to the Health and Social Care Standards and will be undertaken in line with the Quality Framework for Fostering, Adoption and Adult Placement Services (May 2021)¹ using quality indicators within the following key questions:

- Key Question 1: How well do we support children and young people's wellbeing?
- Key Question 5: How well is our care and support planned?

2.0 RECOMMENDATIONS

- 2.1 It is recommended that the Social Work and Social Care Scrutiny Panel:
 - (a) Note the commencement of Inspection of Inverclyde Adoption, Fostering and Continuing Care Services.
 - (b) Considers a future update following publication of the Inspection Report.

Kate Rocks Chief Officer Inverclyde Health and Social Care Partnership

¹ <u>A quality framework for fostering and adoption and adult placement services May2021.pdf</u> (careinspectorate.com)

3.0 BACKGROUND AND CONTEXT

- 3.1 The Care Inspectorate has responsibility for undertaking continuous inspection of regulated social work and social care services. Inverclyde's fostering, adoption and continuing care services were last inspected in 2018. From this inspection, the service was graded as follows:
 - Quality of care and support: very good.
 - Quality of management and leadership: very good.
- 3.2 Since then, the Care Inspectorate has developed new approaches to scrutiny, with greater emphasis on experiences and outcomes, as well as a focus on supporting improvement in quality. This new inspection methodology will be applied in the next inspection of Inverclyde's fostering, adoption and continuing care services which will commence on 22 April 2024 until 17 May 2024.
- 3.3 Services will be inspected in line with the Quality Framework for Fostering, Adoption and Adult Placement Services and will consider the following quality indicators during the inspection:
- 3.4 Key Question 1: How well do we support children, young people's wellbeing?
 - Children, young people, adults, and their care giver families experience compassion, dignity and respect.
 - Children, young people and adults get the most out of life.
 - Children, young people and adults' health and wellbeing benefits from the care and support they receive.
 - Children, young people, adults and their care giver families get the service that is right for them.
- 3.5 Key Question 5: How well is our care and support planned?
 - Assessment and care planning reflects the outcomes and wishes of the children, young people and adults.
- 3.6 Inspectors will review a range of evidence and sources of information, as indicated below:
 - a sample of records of children, young people and adults will be read and evaluated.
 - anonymised questionnaires have been sent out to people using the service, working in the service, stakeholders, and education and health professionals.
 - inspectors will attend Fostering, Adoption and Continuing Care Review panels/reviews.
 - conversations with selected individuals and professionals, including some of the people whose records they have reviewed and the staff groups that support them.
 - attend any support groups taking place during the period of inspection.
 - review policies and procedures relating to adoption, fostering and continuing care.
 - care and support provision offered by the service.

4.0 PROPOSALS

- 4.1 In addition to reviewing case records and seeking the views of users of the service, staff and stakeholders, inspectors will also consider a range of documents including:
 - service development/improvement plan
 - policies and procedures
 - quality assurance information.
 - handbooks, training and support materials for foster carers and adopters

- examples of post adoption support, advocacy, health and education outcomes
- staff training, supervision and development records
- Panel business reports, minutes, Panel Member training and appraisals
- 4.2 Inspectors will review documents covering the last two years and will then seek to meet with families, children and young people to inform their final report, to be published later this year. The inspection team will advise the HSCP of the date of publication of the inspection report in due course.
- 4.3 Panel members may therefore wish to request a further report with information on the outcomes of the inspection report and subsequent improvement plan.

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		х
Legal/Risk		Х
Human Resources		Х
Strategic (Partnership Plan/Council Plan)		Х
Equalities, Fairer Scotland Duty & Children/Young People's Rights		х
& Wellbeing		
Environmental & Sustainability		х
Data Protection		Х

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 (lf Applicable)	Other Comments
N/A					

5.3 Legal/Risk

None.

5.4 Human Resources

None.

5.5 Strategic

None.

5.6 Equalities, Fairer Scotland Duty & Children/Young People

(a) <u>Equalities</u>

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) 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.
х	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.

(c) 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 Environmental/Sustainability

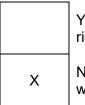
Summarise any environmental / climate change impacts which relate to this report.

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
х	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.

5.8 Data Protection

Has a Data Protection Impact Assessment been carried out?



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

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

6.0 CONSULTATION

6.1 None.

7.0 BACKGROUND PAPERS

7.1 None.



AGENDA ITEM NO: 8

Report To:	Social Work & Social Care Scrutiny Panel	Date:	14 May 2024
Report By:	Kate Rocks Chief Officer Inverclyde Health & Social care Partnership	Report No:	SWSCSP/19/2024/CG
Contact Officer:	Craig Given	Contact No:	01475 715381
Subject:	Inverclyde Integration Joint Board	Budget 2024/2	6

1.0 PURPOSE AND SUMMARY

- 1.1 □For Decision □For Information/Noting
- 1.2 The purpose of this report is to advise the Social Work & Social Care Scrutiny Panel of the Inverclyde Integration Joint Board (IIJB) budget for 2024/26 as presented to the IIJB meeting of 25 March 2024.

2.0 RECOMMENDATIONS

2.1 It is recommended that the Social Work & Social Care Scrutiny Panel note the Inverclyde Integration Joint Board (IIJB) budget for 2024/26.

Kate Rocks Chief Officer Inverclyde Health & Social Care Partnership

3.0 BACKGROUND AND CONTEXT

3.1 The IIJB met on 25 March 2024, considered the report attached as appendix 1 and agreed all the recommendations as detailed at paragraph 2.1 of that report.

4.0 IMPLICATIONS

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

Implications for HSCP are detailed in the report attached as appendix 1

SUBJECT	YES	NO
Financial		
Legal/Risk		
Human Resources		
Strategic (Partnership Plan/Council Plan)		
Equalities, Fairer Scotland Duty & Children/Young People's Rights		
& Wellbeing		
Environmental & Sustainability		
Data Protection		

5.2 Finance

The IIJB set a budget as detailed in report attached as appendix 1.

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

See report attached as appendix 1.

5.4 Human Resources

See report attached as appendix 1.

5.5 Strategic

See report attached as appendix 1.

6.0 CONSULTATION

6.1 See report attached as appendix 1.

7.0 BACKGROUND PAPERS

7.1 See report attached as appendix 1.



AGENDA ITEM NO: 4

Report To:	Inverclyde Integration Joint Board	Date:	25 March 2024
Report By:	Kate Rocks Chief Officer Inverclyde Health & Social Care Partnership	Report No:	IJB/12/2024/CG
Contact Officer:	Craig Given	Contact No:	01475 715381
Subject:	Inverclyde IJB Budget 2024/26		

1.0 PURPOSE AND SUMMARY

- 1.1 ⊠For Decision □For Information/Noting
- 1.2 The purpose of this report is to agree the budget for the Inverclyde Integration Joint Board (IJB) for 2024/26. The IJB Scheme of Delegation (3.2) requires that the IJB approves an annual budget. The Inverclyde IJB Integration Scheme (4.1) requires that the IJB allocate and manage an annual budget.
- 1.3 Inverclyde Council set their 2024/26 budget on 29 February and then confirmed their funding allocation for the IJB for the year. Greater Glasgow & Clyde Health Board are still to confirm their final allocation but have given the IJB indicative allocations on 14 March 2024. In line with our partners in Inverclyde Council the IJB would like to set a 2-year budget to give additional financial security and focus over our finances for the next 2 years.
- 1.4 As part of its 2024/25 settlement Scottish Government announced a £550m funding uplift for Health, it should be noted that this was the baselining funding of the 2023/24 pay award. As part of the budget assumptions this budget has also assumed that any 2024/25 pay award will be fully funded. No other additional funding has been announced on the Health side of the budget and we are assuming a 0% uplift on all other elements of the budget. The proposed contribution from Health is £135.566m including £35.398m set aside budget.

As part of its 2024/25 settlement the Scottish Government announced on 19 December outlining the details of the Draft Budget announcement. Within the announcement it directed additional funding to Inverclyde of £3.833m for the £12 per hour uplift to Adult Social Care providers, Free Personal & Nursing Care of £0.167m to be transferred to IJBs and must be additional to existing IJB budgets. Also additional Fostering and Kinship Care funding of £0.238m to be allocated to the IJB.

Inverclyde Council have also written to the IJB and advised that the Council will pass over in full the share of the extra recurring Scottish Government funding relating to the 2023/24 pay award

(£1.315m), also that the Council will not reduce its contribution to the IJB to reflect the estimated ± 0.468 m recurring reduction in employer superannuation contributions following the triennial actuarial review. That the Council will not seek to recover the estimated one-off saving of ± 5.72 m from the IJB relating to the 11% reduction in employers' superannuation rates over 2024/26 on the condition that the one-off saving is ring-fenced for use by the IJB in the following functions – Social Care Workforce, Children and Families, Homelessness and up to ± 0.5 m as the IJB contribution to historical child abuse claims being met by the Council's insurance fund. The proposed 2024/25 contribution to the IJB as being ± 73.714 m which is a ± 5.558 m (8.2%) increase from the recurring contribution agreed on 28 February 2024.

- 1.5 There are cost pressures within both the Social Care and Health services which are detailed in this report. The paper highlights a 2024/26 funding gap of £5.256m. The paper proposes savings/ workstreams and budget adjustments which together will close this gap along with the use of £0.709m worth of reserves in 2024/25.
- 1.6 Mental Health Inpatients medical agency, Children's External Placements and Prescribing represent ongoing areas of financial risk within the IJB budget. These will be monitored closely throughout the year. The IJB have several smoothing reserves in place to help offset the impacts of any potential pressures in these areas. The one-off pension actuarial saving of £5.72m will be used to assist with the current pressures in the Children & Families, Social Care workforce and Homelessness.
- 1.7 The proposed Set Aside budget for 2024/25 remains at £35.398m and has not been uplifted.
- 1.8 Any in year over/underspends will be funded or carried forward into IJB reserves.

2.0 RECOMMENDATIONS

- 2.1 It is recommended that the Integration Joint Board:
 - 1. Notes the contents of this report;
 - 2. Notes the anticipated funding of £73.714m from Inverclyde Council.
 - 3. Notes the anticipated funding of £135.566m from Greater Glasgow & Clyde (GG&C) Health Board, which includes £35.398m for Set Aside;
 - 4. Authorise the Chief Officer delegated authority to accept the formal funding offers from the Council and Health Board;
 - 5. Agrees indicative net revenue budgets of £73.714m, to Inverclyde Council and £136.133m, including the "set aside" budget, to NHS Greater Glasgow and Clyde and direct that this funding is spent in line with the Strategic Plan. These figures reflect the £19.158m of Resource Transfer from Health within Social Care.
 - 6. Approves the savings / Budget adjustments detailed at 4.5 and 5.2.
 - 7. Approve the Reserve proposals identified in Section 6 and shown in Appendix 6.
 - 8. Authorises officers to issue related Directions to the Health Board and Council in Appendix 5a and 5b.
 - 9. Approves the updated financial plan contained within Appendix 7.

Kate Rocks Chief Officer Inverclyde Health and Social Care Partnership

3.0 BACKGROUND AND CONTEXT

- 3.1 From 1 April 2016 the Health Board and Council delegated functions and are making allocations to the IJB in respect of those functions as set out in the integration scheme. The Health Board also "set aside" an amount in respect of large hospital functions covered by the integration scheme.
- 3.2 The IJB makes decisions on integrated services based on the strategic plan and the budget delegated to it. Now that the resources to be delegated have been proposed the IJB can set a 2024/26 budget, give directions and allocate budget where relevant to the Health Board and Local Authority for delivery of the services in line with the Strategic Plan.

4.0 PROPOSALS

4.1 REVENUE FUNDING ALLOCATION FROM INVERCLYDE COUNCIL AND PROPOSED SAVINGS FOR SOCIAL CARE FOR 2024/26

4.2 As part of its 2024/25 settlement the Scottish Government announced on 19 December outlining the details of the Draft Budget announcement. Within the announcement it directed additional funding to Inverclyde of £3.833m for the £12 per hour uplift to Adult Care providers, Free Personal & Nursing Care of £0.167m to be transferred to IJBs and must be additional to existing IJB budgets. Also additional Fostering and Kinship Care funding of £0.238m to Inverclyde. Inverclyde Council have also written to the IJB and advised that the Council will pass over in full the share of the extra recurring Scottish Government funding relating to the 2023/24 pay award (£1.315m), also that the Council will not reduce its contribution to the IJB to reflect the estimated £0.468m recurring reduction in employer superannuation contributions following the triennial actuarial review, That the Council will not seek to recover the estimated one -off saving of £5.72m from the IJB relating to the 11% reduction in employers' superannuation rates over 2024/26 on the condition that the one-off saving is ring-fenced for use by the IJB in the following functions -Social care Workforce, Children and Families, Homelessness and up to £0.5m as the IJB contribution to historical child abuse claims being met by the Council's insurance fund. The recurring reduction in superannuation contributions will be used to address management capacity issues to deliver our savings workstreams over the next few years.

The proposed 2024/25 contribution to the IJB as being £73.714 million which is a £5.558million (8.2%) increase from the recurring contribution agreed on 28 February 2024

	2024/25	2025/26
Social Care Estimated Inflationary Pressures	£000s	£000s
Recurring element of additional 2023/24 pay award	1,315	0
Pay award	1,335	748
Scottish Living Wage uplift for providers	3,833	2,643
Total Inflationary Pressures	6,483	3,391
Social Care Estimated Other Cost Pressures	£000s	£000s
Demographic pressures	734	746
Utilities & fuel	34	38
Recurring pressure - 2023/24 budget gap funded by reserves	802	0
Free Personal and Nursing Care uplifts	167	0
Fostering and Kinship	238	0

4.3 There are several cost pressures in Social Care which require to be funded from the new funding or via savings initiatives. A full breakdown of Social Care pressures for 2024/26 are detailed below:

Whole Family Wellbeing	58	0
Other minor adjustments	4	0
Total Other Cost Pressures	2,037	784

	2024/25	2025/26
Budget reductions	£000s	£000s
Removal of Mental Health Recovery funding	(52)	0
Other minor adjustments	(5)	0
Total Budget Reductions	(57)	0
TOTAL PRESSURES (NET OF BUDGET REDUCTIONS)	8,463	4,175

4.4 The pressures outlined above are to be funded through a combination of new funding, budget adjustments, service redesigns / workstreams and service reductions. The additional funding is detailed as follows:

	2024/25	2025/26
Funded by	£000s	£000s
Share of Social care funding from Scottish Govt	3,833	2,643
Settlement adjustments	410	0
Recurring funding for 2023/24 pay award - Inverclyde Council	1,315	0
Total Funding	5,558	2,643
Gap to be funded by savings	2,905	1,532

As per the table this leaves a remaining funding gap in Social care for 2024/26 of £4.437m which needs to be addressed.

4.5 Over the last number of months the SMT and the IJB have met on several occasions and have developed the following service redesigns / workstreams, budget adjustments and service reductions:

	2024/25	2025/26
Social Care Proposed Savings	£000s	£000s
Service redesign/Workstreams		
Redesign of Childrens Community Supports	(15)	(15)
Review of commissioning arrangements	(250)	(250)
Day Service redesign	(239)	
Review of Community Alarms Service		(72)
Independent Living Services		(200)
Supported Living Services		(100)
Review of Integrated front doors		(380)
Business Support Review		(150)
Review of HSCP Senior Staff Structure		(200)
Homemakers - Assessment and Care Management/ Mental		
Health		(167)
Budget adjustments		
Payroll management target	(450)	
Review of previous year underspends/budget adjustments	(267)	
Service Reduction		
Review of Respite Services	(257)	

Review of long term vacancies Review of Adult services self directed supports	(500)	(500)
Residential/Nursing care home beds		(99)
Education placement support		(83)
Total proposed savings	(2,170)	(2,216)

These savings and workstream targets have been developed with the view of closing our budget gap over the next 2 years. It is our intention to work closely with staff and staff side representatives over the next year to deliver the targets in these redesigns / workstreams which impact our staff and providers. These workstreams are assuming no compulsory redundancies and manageable staff implications. As per appendix 4 a number of these workstreams are already carrying vacant posts or staff currently deployed elsewhere which will minimise the impact. Where relevant targeted Voluntary Severance packages will be considered. Updates on their progress will be brought back to the IJB where relevant detailing full implications and final approval where necessary.

Although there are no exceptional additional charging recommendations, the IJB will follow Inverclyde Council inflationary proposals and apply a 5% uplift to current social care charges.

4.6 The IJB recognises that there are existing core funding pressures in Children and Families of over £3.5m. This is currently the subject of an overall review of Children & Families services. For 2024/26 this pressure will be funded via service redesign and the use of overall reserves or use of the pension actuarial rebates if required.

The proposed recurring budget for Social Care services based on the above is £73.714m. The net budget direction to the Council may be updated during the year.

5.0 REVENUE FUNDING ALLOCATION FROM GREATER GLASGOW & CLYDE (GG&C) HEALTH BOARD AND PROPOSED SAVINGS FOR HEALTH FOR 2024/26

5.1 The Health Board has provided an indicative budget. The Invercive funding for 2024/25 for recurring budgets is indicatively confirmed to be £135.566m, including £35.398m for Set Aside and £19.132m Resource Transferred to social care. Other than the recurring element of the 2023/24 pay award, no other additional funding was allocated by the Health Board. At present the funding allocation does not include the recurring element of any potential 2024/25 pay award. However, this paper assumes this will be fully funded.

	2024/25	2025/26
Health Estimated Inflationary Pressures	£000s	£000s
Pay award - 2%	567	579
Prescribing - 2%	405	414
Total Inflationary Pressures	972	993

52	Health antici	nated cost	nressures	and funding	changes a	are detailed below:
J.Z		paleu cos	. pressures	and funding	changes a	ale detailed below.

	2024/25	2025/26
Funded by	£000s	£000s
Additional Health Funding allocation 2024/25 - pay award	567	579
Total Funding	567	579
Gap to be funded by savings	405	414

	2024/25	2025/26
Health Proposed Savings	£000s	£000s
Service redesign/Workstreams		
Redesign of Strategic Services		(230)
Business Support Review		(150)
Review of HSCP Senior Staff Structure		(200)
Budget adjustments		
Payroll management target	(150)	
Review of previous year underspends/budget adjustments	(223)	
Service Reduction		
Review of long term vacancies	(58)	
Total proposed savings	(431)	(580)
Remaining surplus	(26)	(166)

5.3 The estimated increase linked to Pay Award assumes a similar uplift to last year in the costs. It is expected that the Health pay award for 2024/25 will be fully funded.

Similar to the Social care side these savings and workstream targets have been developed with the view of closing our budget gap over the next 2 years. It is our intention to work closely with staff and staff side representatives over the next year to deliver the targets in these redesigns / workstreams which impact our staff. Updates on their progress will be brought back to the IJB where required detailing full implications and final approval where necessary.

- 5.4 The notional "set aside" budget for large hospital services is indicatively confirmed as £35.398m for 2024/25. This figure represents the estimated actual usage of in scope Acute services. It has to be noted that this figure has not been uplifted for 2024/25.
- 5.5 The IJB has historically taken a very prudent approach to Prescribing budgets to allow for the high volume and cost pressures within the local area. For 2024/26 in line with 2023/24 the IJB expects this to be an area of risk. Recent drug pricing issues are likely to continue in 2024/26 mainly due to issues such as short supply, hyperinflation, increased volumes and supply issues. In 2024/26 it is proposed to increase the Prescribing budget by £0.819m in line with previous years. In the event the budget isn't sufficient to cover in year pressures the IJB has smoothing reserves in place to cover any ongoing volume and price implications. The pharmacy / Prescribing working group will focus its effort in 2024/25 with the view of reducing these pressures. The Greater Glasgow and Clyde Health Board are also conducting a larger scale savings exercise which we are part of to help reduce these pressures.
- 5.6 The IJB is also aware of current pressures in the Mental Health Inpatients service. This is also an area of focus for senior management as they work towards reducing this pressure.
- 5.7 As part of the Scottish Government agenda for change Health pay deal an initial 30 minute reduction to the 37.5 hour working week is to phased in from the 1 April 2024. As the financial impact of this is unknown no provision has been included in this budget at this stage.
- 5.8 The proposed budget for Health services based on the above is £136.133m. The net budget direction to the Health Board may be updated during the year.

5.9 The summary position for the IJB is as follows:

	2024/25	2025/26	Cumulative position
Summary Position	£000s	£000s	£000s
Council Funding Gap/ (Surplus)	735	(684)	51
Health Funding Gap/(Surplus)	(26)	(166)	(192)
Remaining gap/(surplus)	709	(850)	(141)
Hold for contingency			141
2 year budget balanced position			(0)

5.10 Our integration Schemes state the following around the budget process "The Integration Joint Board will direct the resources it receives from the Parties in line with the Strategic Plan, and in doing so will seek to ensure that the planned activity can reasonably be met from the available resources viewed as a whole, and achieve a year-end break-even position". As such officers feel the above proposals meet this requirement.

6.0 RESERVES

- 6.1 As per the Financial Monitoring reports issued throughout the year any over/under spends in the final 2023/24 outturn will be offset against or added to reserves. An updated reserves position will be included in the IJB Revenue Monitoring reports issued throughout the year. Appendix 6 details the proposed carry forward of £17m to earmarked and general reserves.
- 6.2 Officers of the IJB have carried out a review of the current Reserves and would like to propose the redistribution of existing reserves as per appendix 6.

These movements and redistributions are aimed at the IJB's highest risk areas for 2024/26. Attention should be drawn to the proposed creation of the new severance cost reserve. This has been created to fund any potential voluntary redundancy costs because of the various service review / workstreams and the recent enhanced Voluntary redundancy scheme approved by Inverclyde Council. It should be noted that potential voluntary redundancy is only available on the Social Care / Council side of the partnership.

The IJB are asked to approve these Reserve recommendations.

7.0 INDICATIVE 5 YEAR PLAN

- 7.1 Appendix 7 contains the indicative 5-year financial plan for the IJB. This shows the proposed 2024/26 budget and indicative budgets for the next 3 years. The indicative future year budgets are based on the 2024/26 budget adjusted for known variations and the same core assumptions and scenario planning that was used in developing the Medium-Term Financial Plan to 2027/28 which was agreed by the IJB in June 2023. It should be noted that this statement excludes the potential National Care Service from the financial assumptions at present until further financial and operational information is available.
- 7.2 The statement indicates that based on current projections there is a potential budget gap of £6.869m by 2028/29. Work is ongoing to mitigate any financial risks for the initial 2-year period as part of the recommendations of this report. Further work will be required in to address the medium term financial gap.
- 7.3 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

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

8.0 Finance

One off Costs

The IJB is being asked to set a 2024/26 budget at this stage in line with the recommendations above.

Cost Centre	Budget Heading	•	Proposed Spend this Report	Other Comments

Annually Recurring Costs/ (Savings)

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

8.1 Legal/Risk

There are no specific legal implications arising from this report.

8.2 Human Resources

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

8.3 Strategic Plan Priorities

The overall budget reflects the current Strategic Plan.

8.4 Equalities

(a) Equalities

Equalities Outcomes have been considered with every saving proposal considered.

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

x YES – Assessed as relevant and an EqIA is required. NO – This report does not introduce a new policy,

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	Each area
groups, can access HSCP services.	has been
	considered
	with each
	budget saving
Discrimination faced by people covered by the protected characteristics	None
across HSCP services is reduced if not eliminated.	
People with protected characteristics feel safe within their communities.	None
People with protected characteristics feel included in the planning and	None
developing of services.	
HSCP staff understand the needs of people with different protected	None
characteristic and promote diversity in the work that they do.	
Opportunities to support Learning Disability service users experiencing	None
gender based violence are maximised.	
Positive attitudes towards the resettled refugee community in Inverclyde	None
are promoted.	

(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.
х	NO – Assessed as not relevant under the Fairer Scotland Duty.

(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.

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.

8.5 Clinical or Care Governance

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

8.6 National Wellbeing Outcomes

There are no National Wellbeing Outcomes implications within this report.

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

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	None
People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community	None
People who use health and social care services have positive experiences of those services, and have their dignity respected.	None
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	None
Health and social care services contribute to reducing health inequalities.	None
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	None
People using health and social care services are safe from harm.	None
People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	None
Resources are used effectively in the provision of health and social care services.	Development of a robust budget and effective budget management can ensure that resources are used effectively

8.7 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.
х	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.

8.8 Data Protection

Has a Data Protection Impact Assessment been carried out?



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

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

9.0 DIRECTIONS

9.1

1		Direction to:		
		1. No Direction Required		l
	to Council, Health	2. Inverclyde Council		
	Board or Both	3. NHS Greater Glasgow & Clyde (GG&C)		1
		4. Inverclyde Council and NHS GG&C	Х	1

10.0 CONSULTATION

10.1 This report has been prepared by the IJB Chief Financial Officer. The Chief Officer, the Council's Chief Financial Officer and Director of Finance NHSGGC have been consulted.

11.0 BACKGROUND PAPERS

11.1 None.

INVERCLYDE HSCP

Б

REVENUE BUDGET 2024/25

SUBJECTIVE ANALYSIS	Base Budget 2024/25 £000	Other Budget Movements/ Pressures £000	Savings £000	Transfers to/from NHS/Council/C ontribution from Reserves	Budget 2024/25 £000
Employee Costs	65,791	3,275	(1,299)	0	67,767
Property Costs	1.128	,	(2)	0	1,160
Supplies & Services, Transport, Admin & PTOB	57,896	4,919	(1,322)	0	61,493
Family Health Services (net)	28,330	0	0	0	28,330
Prescribing (net)	19,781	405	0	0	20,186
Resource Transfer (Health)	19,589	0	0	26	19,615
Income	(23,389)	0	22	(26)	(23,393)
One off cont from reserves - pressure 24/25	(802)	802	0	0	0
Contribution from General reserves	0	0	0	(709)	(709)
Notional Set Aside Expenditure	35,398	0	0	0	35,398
	203,722	9,435	(2,601)	(709)	209,847

OBJECTIVE ANALYSIS	Base Budget 2024/25 £000	Other Budget Movements/ Pressures £000	Savings £000	Transfers to/from NHS/Council/C ontribution from Reserves	Budget 2024/25 £000
Strategy & Support Services	6,619	1-		0	6,766
Older Persons	39,324		(730)	0	42,025
Learning Disabilities	10,320		1 /	0	11,484
Mental Health - Communities	5,312			0	5,508
Mental Health - Inpatient Services	11,237	219	(58)	0	11,398
Children & Families	15,826	877	(130)	0	16,573
Physical & Sensory	2,876			0	3,148
Alcohol & Drug Recovery Service	3,453	179	(27)	0	3,605
Assessment & Care Management / Health & Community	2,562	219	(32)	0	2,749
Support / Management / Admin	2,177	40	(152)	0	2,065
Criminal Justice / Prison Service	36	0	(17)	0	19
Homelessness	1,119	99	(14)	0	1,204
Family Health Services	28,330	0	0	0	28,330
Financial Planning	835	3	(59)	0	779
Prescribing	19,968	405	0	0	20,373
Resource Transfer	19,132	0	0	0	19,132
One off cont from reserves - pressure 24/25	(802)	802	0	0	0
Contribution from General reserves	0			(709)	(709)
HSCP NET EXPENDITURE (DIRECT SPEND)	168,324	9,435	(2,601)	(709)	174,449
Notional Set Aside Expenditure	35,398	0	0		35,398
HSCP NET EXPENDITURE	203,722	9,435	(2,601)	(709)	209,847

PARTNERSHIP FUNDING/SPEND ANALYSIS	Base Budget 2024/25 £000	Other Budget Movements/ Pressures £000	Savings £000	Transfers to/from NHS/Council/C ontribution from Reserves	Budget 2024/25 £000
NHS Contribution to the IJB	135,566	972	(431)	26	136,133
Council Contribution to the IJB	68,156	8,463	(2,170)	(735)	73,714
HSCP NET INCOME	203,722	9,435	(2,601)	(709)	209,847
NHS Expenditure on behalf of the IJB	135,566	972	(431)	26	136,133
Council Expenditure on behalf of the IJB	68,156	8,463	(2,170)	(735)	73,714
HSCP NET EXPENDITURE	203,722	9,435	(2,601)	(709)	209,847
HSCP SURPLUS/(DEFICIT)	0	0	(0)	0	(0)

APPENDIX 2

SOCIAL CARE

REVENUE BUDGET 2024/25

SUBJECTIVE ANALYSIS	Base Budget 2024/25 £000	Other Budget Movements/ Pressures £000	Savings £000	Transfer from NHS /Contribution from Reserves £000	Budget 2024/25 £000
SOCIAL CARE					
Employee Costs	37,494	2,708	(1,091)		39,111
Property costs	1,122	34	(2)		1,154
Supplies and Services	1,211	0	(66)		1,145
Transport and Plant	355	0	(43)		312
Administration Costs	778	0	(3)		775
Payments to Other Bodies	50,930	4,919	(987)		54,862
Income	(22,932)	0	22	(26)	(22,936)
One off cont from reserves - pressure 24/25	(802)	802			0
Contribution from General reserves	0			(709)	(709)
SOCIAL CARE NET EXPENDITURE	68,156	8,463	(2,170)	(735)	73,714

OBJECTIVE ANALYSIS	Base Budget 2024/25 £000	Other Budget Movements/ Pressures £000	Savings £000	Transfer from NHS /Contribution from Reserves £000	Budget 2024/25 £000
SOCIAL CARE					
Children & Families	12,812	818	(114)		13,516
Criminal Justice	36	0	(17)		19
Older Persons	31,281	3,310	(687)		33,904
Learning Disabilities	9,649	1,201	(47)		10,803
Physical & Sensory	2,876	304	(32)		3,148
Assessment & Care Management	2,562	219	(32)		2,749
Mental Health	1,689	241	(17)		1,913
Alcohol & Drugs Recovery Service	1,042	138	(16)		1,164
Homelessness	1,119	99	(14)		1,204
Planning, Health Improvement & Commissioning	2,042	121	(20)		2,143
Corporate directorate (incl business support)	3,850	1,210	(1,174)		3,886
Contribution from Health/Resource transfer	0			(26)	(26)
One off cont from reserves - pressure 24/25	(802)	802			0
Contribution from General reserves	0			(709)	(709)
SOCIAL CARE NET EXPENDITURE	68,156	8,463	(2,170)	(735)	73,714

COUNCIL CONTRIBUTION TO THE IJB	Base Budget 2024/25 £000	Other Budget Movements/ Pressures £000	Savings £000	Transfer from NHS /Contribution from Reserves £000	Budget 2024/25 £000
Council Contribution to the IJB	68,156	8,463	(2,170)	(735)	73,714
Surplus/(Funding Gap)					0

APPENDIX 3

<u>HEALTH</u>

REVENUE BUDGET 2024/25

SUBJECTIVE ANALYSIS	Base Budget 2024/25 £000	Other Budget Movements/ Pressures £000	Savings £000	Resource Transfer to Social Care £000	Recurring Budget 2024/25 £000
HEALTH					
Employee Costs	28,297	567	(208)		28,656
Property	6				6
Supplies & Services	4,622		(223)		4,399
Family Health Services (net)	28,330				28,330
Prescribing (net)	19,781	405			20,186
Resource Transfer	19,589			26	19,615
Income	(457)				(457)
HEALTH DIRECT NET EXPENDITURE	100,168	972	(431)	26	100,735
Notional Set Aside Expenditure *	35,398				35,398
HEALTH NET EXPENDITURE	135,566	972	(431)	26	136,133

OBJECTIVE ANALYSIS	Base Budget 2024/25 £000	Other Budget Movements/ Pressures £000	Savings £000	Resource Transfer to Social Care £000	Recurring Budget 2024/25 £000
HEALTH					
Children & Families	3,014	59	(16)		3,057
Health & Community Care	8,043	121	(43)		8,121
Management & Admin	2,177	40	(152)		2,065
Learning Disabilities	671	13	(3)		681
Alcohol & Drug Recovery Service	2,411	41	(11)		2,441
Mental Health - Communities	3,623	59	(87)		3,595
Mental Health - Inpatient Services	11,237	219	(58)		11,398
Strategy & Support Services	727	13	(3)		737
Family Health Services	28,330				28,330
Prescribing	19,968	405			20,373
Resource Transfer	19,132			26	19,158
Financial Planning	835	3	(59)		779
HEALTH DIRECT NET EXPENDITURE	100,168	972	(431)	26	100,735
Notional Set Aside Expenditure *	35,398				35,398
HEALTH NET EXPENDITURE	135,566	972	(431)	26	136,133

HEALTH CONTRIBUTION TO THE IJB	Base Budget 2024/25 £000	Other Budget Movements/ Pressures £000	Savings £000	Resource Transfer to Social Care £000	Recurring Budget 2024/25 £000
NHS Contribution for Direct Services	100,168	972	(431)	26	100,735
Notional Set Aside Expenditure *	35,398	0	0		35,398
Total NHS Contribution to the IJB	135,566	972	(431)	26	136,133
Surplus/(Funding Gap)					0

Inverciyde HSCP - Savings proposals 2024/25 to 2026/27

_							Phasing of Sav	ring	
				Potential FTE	No of vacancies/staff deployed				
Service	Saving Type	Savings title	Value £	reduction	elsewhere	RAG	2024/25	2025/26	2026/27
Children and Families	Service Reduction	Education placement support	82,677	2.00	0.00			82,677	
Children and Families	Workstream	Redesign of Childrens Community Supports	50,000	-	-		15,000	15,000	20,000
Community Care and Health	Service Redesign	Review of Community Alarms service	72,000	-	-			72,000	
Community Care and Health	Service Redesign	Day Service redesign	238,526	5.83	5.83		238,526		
Community Care and Health	Service Reduction	Review of Hillend respite service	257,206	6.79	6.79		257,206		
Community Care and Health	Workstream	Independent Living Services	500,000	TBC	-			200,000	300,000
Community Care and Health	Service Redesign	Supported Living Services	100,000	-	-			100,000	
Community Care and Health	Workstream	Review of Integrated front doors - incorporating review of advice services and wider review of HSCP front doors including Access First and Request for Assistance as examples	380,000	TBC	-			380,000	
Community Care and Health	Service Reduction	Residential/Nursing care home beds - 6 over Yr 2 and 3	198,000	-	-			99,000	99,000
Finance, Planning and Resources	Workstream	Redesign of Strategic Services	230,710	3.00	2.00			230,710	
Finance, Planning and Resources	Workstream	Business Support Review	300,000	10.00	7.77			300,000	
Community Care and Health/Mental Health	Workstream	Homemakers - Assessment and Care Mngmnt/ Mental Health	166,724	4.61	0.00			166,724	
All	Workstream	Review of commissioning arrangements	500,000	-	-		250,000	250,000	
All	Budget Adjustment	Payroll management target - Council	450,000	-	-		450,000		
All	Budget Adjustment	Payroll management target - Health	150,000	-	-		150,000		
All	Budget Adjustment	Review of previous year underspends/budget adjustments	490,000	- TBC	-		490,000		
		Review of long term vacancies Review of HSCP Senior Staff Structure	250,000 400.000	TBC	-		250,000	400.000	
All	Service Redesign		/	IBC	-		500.000	/	
All	Service Reduction	Review of Adult services self directed supports	1,000,000 5,815,843	32.23	22.39		500,000 2,600,732	500,000 2,796,111	419,000

2 year total 5,396,843

APPENDIX 4

Appendix 5a



INVERCLYDE INTEGRATION JOINT BOARD

DIRECTION

ISSUED UNDER S26-28 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

THE INVERCLYDE COUNCIL is hereby directed to deliver for the Inverclyde Integration Joint Board (the IJB), the services noted below in pursuance of the functions noted below and within the associated budget noted below.

Services will be provided in line with the IJB's Strategic Plan and existing operational arrangements pending future directions from the IJB. All services must be procured and delivered in line with Best Value principles.

- Services: All services listed in Annex 2, Part 2 of the Inverclyde Health and Social Care Partnership Integration Scheme.
- Functions: All functions listed in Annex 2, Part 1 of the Inverclyde Health and Social Care Partnership Integration Scheme.

SUBJECTIVE ANALYSIS	Budget 2024/25
	£000
SOCIAL CARE	
Employee Costs	39,111
Property costs	1,154
Supplies and Services	1,145
Transport and Plant	312
Administration Costs	775
Payments to Other Bodies	54,153
Income (incl Resource Transfer)	(22,936)
SOCIAL CARE NET EXPENDITURE	73,714

OBJECTIVE ANALYSIS	Budget 2024/25
	£000
SOCIAL CARE	
Children & Families	13,516
Criminal Justice	19
Older Persons	33,904
Learning Disabilities	10,803
Physical & Sensory	3,148
Assessment & Care Management	2,749
Mental Health	1,913
Alcohol & Drugs Recovery Service	1,164
Homelessness	1,204
Planning, Health Improvement &	2,143
Corporate directorate (incl business support)	3,860
Contribution from General reserves	(709)
SOCIAL CARE NET EXPENDITURE	73,714

Associated Budget:

Budgot



INVERCLYDE INTEGRATION JOINT BOARD

DIRECTION

ISSUED UNDER S26-28 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

GREATER GLASGOW & CLYDE NHS HEALTH BOARD is hereby directed to deliver for the Invercelyde Integration Joint Board (the IJB), the services noted below in pursuance of the functions noted below and within the associated budget noted below.

Services will be provided in line with the IJB's Strategic Plan and existing operational arrangements pending future directions from the IJB. All services must be procured and delivered in line with Best Value principles.

- Services: All services listed in Annex 1, Part 2 of the Inverclyde Health and Social Care Partnership Integration Scheme.
- Functions: All functions listed in Annex 1, Part 1 of the Inverclyde Health and Social Care Partnership Integration Scheme.

Г

	Budget
SUBJECTIVE ANALYSIS	2024/25
	£000
HEALTH	
Employee Costs	28,656
Property costs	6
Supplies and Services	4,399
Transport and Plant	28,330
Administration Costs	20,186
Payments to Other Bodies	19,615
Income	(457)
HEALTH DIRECT NET EXPENDITURE	100,735
Set Aside	35,398
HEALTH NET EXPENDITURE	136,133

	Budget
OBJECTIVE ANALYSIS	2024/25
	£000
HEALTH	
Children & Families	3,057
Health & Community Care	8,121
Management & Admin	2,065
Learning Disabilities	681
Alcohol & Drug Recovery Service Mental Health - Communities	2,441
Mental Health - Communities	3,595
Mental Health - Inpatient Services	11,398
Strategy & Support Services	737
Strategy & Support Services Family Health Services Prescribing	28,330
Prescribing	20,373
Resource Transfer	19,158
Financial Planning	779
HEALTH DIRECT NET EXPENDITURE	100,735
Notional Set Aside Expenditure *	35,398
HEALTH DIRECT NET EXPENDITURE	136,133

Associated Budget:

ANTICIPATED EARMARKED RESERVES BALANCE AS AT 1 APRIL 2024 (Assuming approval of proposed adjustments and draws)

EMR type/source	Projected balance as at 31 March 2024	Proposed draws to fund projected overspend	Proposed adjustments to reserves	Fund 2024/25 shortfall from general reserve	Anticipated balance as at 1 April 2024
SCOTTISH GOVERNMENT FUNDING - SPECIFIC FUNDS	£000s	£000s	£000s	£000s	£000s
Mental Health Action 15	110				110
Alcohol and Drug Partnership	511				511
Primary Care Improvement Plan	20				20
Community Living Change Fund	114				114
Winter planning - MDT	33				33
Winter planning - Health Care Support Worker	124				124
Winter pressures - Care at Home	760				760
Care home oversight	88				88
Carers	304				304
MH Recovery & Renewal	340	(17)			323
Sub-total	2.404	(17)	0	0	2.387
EXISTING PROJECTS/COMMITMENTS			· · · · · ·		
Integrated Care Fund	108				108
Delayed Discharge	65				65
Welfare	93				93
Primary Care Support	470	(146)			324
SWIFT Replacement Project	216				216
Rapid Rehousing Transition Plan (RRTP)	34				34
LD Estates	500				500
Refugee Scheme	2.990				2.990
Tier 2 Counselling	2,330				2,330
Whole Family Wellbeing	243				243
Contribution to Partner Capital Projects	1,095				1,095
Staff Learning & Development Fund	204				204
Homelessness	47				47
Autism Friendly	75				75
HSCP temporary posts	500				500
ADRS fixed term posts	24				24
Wellbeing	1		(1)		0
Sub-total	6,931	(146)	(1)	0	6,784
TRANSFORMATION PROJECTS	0,001	(140)		, v	0,704
Transformation Fund	1,613				1,613
Addictions Review	237				237
Mental Health Transformation	490				490
IJB Digital Strategy	230				230
Sub-total	2.570				2.570
BUDGET SMOOTHING	2,570				2,570
Adoption/Fostering/Residential Childcare	1.000	(448)	(100)		452
Continuing Care - Children and Families	292	(440)	(100)	(118)	452
Prescribing	1,091			(118)	972
Residential & Nursing Placements	1,091		(736)	(119)	432
LD Client Commitments	1,286		(736)	(118)	382
Client commitments - general	435	(135)	(100)	(118)	382
Severance costs contingency	435		1.492	(118)	1.492
	886	(19)		(440)	
Pay contingency			(376)	(118)	373
Sub-total	5,590		180	(709)	4,459
Total Earmarked	17,495	(765)	179	(709)	16,200
GENERAL RESERVES					
General	1,032	(53)	(179)	(500)	800
TOTAL Reserves	18,527	(818)	0	(709)	17,000

INVERCLYDE HSCP

5 year financial plan 2024/25 to 2028/29

IJB position	2024/25	2025/26	2026/27	2027/28	2028/29
	£000s	£000s	£000s	£000s	£000s
Pressures					
20234/24 additional pay uplift	1,315	-	-	-	-
Payroll uplift	1,902	1,327	1,425	1,453	1,482
Inflationary uplifts	3,833	2,643	2,777	2,920	3,066
Prescribing	405	414	1,421	429	438
Demographic pressures	734	746	757	769	780
Utilities and fuel	34	38	42	46	51
Settlement adjustments	410	-	-	-	-
23/24 amount funded from reserves	802	-	-	-	-
Hold for contingency - 25/26	-	-	141	-	-
Proposed efficiencies	(2,601)	(2,796)	(419)	0	0
Total budget requirement	6,834	2,372	6,144	5,617	5,817
Funding available/assumed (Health pay uplift and Council SG					
passthrough)	(6,125)	(3,222)	(3,368)	(3,521)	(3,679)
Budget gap (24/25 funded from reserves)	709	(850)	2,777	2,096	2,138
Cumulative budget gap		(141)	2,635	4,731	6,869