

AGENDA ITEM NO: 6

9 September 2024

Report To: Inverclyde Integration Joint Date:

Board

Report By: Kate Rocks Report No: IJB/32/2024/AB

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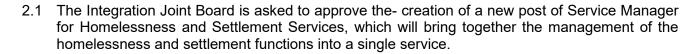
Subject: HSCP Service Manager for Homelessness & Settlement

1.0 PURPOSE AND SUMMARY

1.1 ⊠For Decision □For Information/Noting

- 1.2 This proposal outlines the need to integrate the functions of homelessness and asylum/refugee settlement into a single management structure. As a consequence, a service manager post is required to be created to ensure that there is cohesion around strategic planning, service delivery and improve performance that supports the inter-dependant and related activity within these service areas.
- 1.3 Historically, the function of homelessness and addictions has been aligned to a service manager since integration in 2011. Data and service activity within both of these services have demonstrated a considerable capacity issue to ensure that we are delivering effective services that are required in the management of risk for people whilst focusing on improved outcomes.
- 1.4 The demand on the Homelessness service is awaiting a final report from the independent reviewer about the implementation of a new model of support that will be presented to the Integration Joint Board in November 2024.
- 1.5 Inverclyde Health and Social Care Partnership (HSCP) has successfully supported refugee and people seeking asylum alongside strong partnership working with statutory and third sector partners across several National and Scottish Government work streams. The increasing complexity (including the recent support to Ukrainian nationals) and the UK Home office short time notification of the arrival and decision making is presently placing demands and duplication on both the Settlement and the Homelessness service.
- 1.6 The role of the service manager is essential in taking forward the service and providing the governance, strategy and implementation changes within the service to meet the changing support requirements of people who are homeless or requiring resettlement.

2.0 RECOMMENDATIONS



Kate Rocks Chief Officer Inverclyde Health and Social Care Partnership

3.0 BACKGROUND AND CONTEXT

3.1 For several years Inverclyde HSCP has successfully supported refugee and people seeking asylum alongside strong partnership working with statutory and third sector partners across several National and Scottish Government work streams:

Syria (Vulnerable Persons Resettlement Scheme) - From late 2015 – 2024, 42 families, consisting of 152 individuals, have been accommodated in the Inverciyde area. Of those, 40 families (146 individuals) have remained, including 13 children born.

Afghanistan (Afghan Relocations and Assistance Policy, ARAP, and Afghan Citizens Resettlement Scheme, ACRS) - Through multiple strands of the above schemes since 2016, 44 Afghan families, consisting of 237 individuals, have initially resettled in Inverclyde. 23 families (123 individuals) have remained to date, including 9 children born.

Ukrainian National Support - Scottish Government work stream

243 Ukrainians living within Inverclyde in 85 family groups are being supported by the New Scots settlement team. There are 8 Inverclyde families hosting 16 Ukrainian nationals.

- 3.2 The HSCP New Scots Integration Team provides intensive support to all those arriving via UK resettlement schemes. In addition to procuring, furnishing and equipping tenancies prior to families arriving locally, an allocated worker provides food, clothing and assistance to access state benefits, banking facilities and GP registration immediately upon arrival. This is followed up with local orientation; attention to cultural and religious needs, education and ESOL provision registration, and any other person-centred supports required.
- 3.3 Since 2023 Inverciyde HSCP has been liaising with the UK home office in the support of people seeking asylum in the UK whist residing in a local hotel with the health and social care complexities associated with this group (currently 110 individuals). Late UK Home office notification of arrival and decision making is presently placing demands and duplication on both the Settlement and the Homelessness service.
- 3.4 Currently the Homelessness service supports:
 - 94 individuals in temporary accommodation. Temporary accommodation is currently within the Inverclyde Centre and furnished Accommodation within Inverclyde community.
 - 229 people are being supported to prevent homelessness.
 - 62 people who are now in permanent accommodation either following a period of homelessness or being at risk of homelessness are being supported to maintain their permanent tenancy.

Across Scotland there has been an increase of 13% in homelessness applications (Scotland's Housing Network (SHN), 2022/2023), taking numbers well above pre-pandemic levels. The average time to close a homelessness case has also increased with the Scottish average reported as 223 days.

Inverciyde has seen a reduction of 10% and has maintained the case duration at 23 weeks, well below the Scottish average of 38 weeks. Time taken to assess a case also reduced in Inverciyde 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 Inverciyde spent on average 71 days in temporary accommodation compared to the Scottish average of 114 days.

A high level of Service Manager oversight will be required to maintain this positive trajectory and, work through areas of service development.

3.5 The Homelessness and Settlement services have recently been working closer together to anticipate challenges and to create solutions as required. Shared planning and senior oversight has led to a more seamless experience for staff and clients. The vision for the service manager post is to act as a single point of strategic oversight for accommodation needs across the care groups and to be the main HSCP liaison with local and national Registered Social Landlords.

4.0 PROPOSALS

- 4.1 It is proposed that a permanent service manager post is developed which will oversee both Homelessness and Settlement and for this to be managed by the Head of Mental Health, Homelessness and ADRS.
- 4.2 The cost of the post at top of Grade 12 including on costs is £90,807. Funding for the post will be from Recurring reduced pension contributions funding.

5.0 IMPLICATIONS

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

SUBJECT	YES	NO
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		Х

5.2 Finance

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report	Virement From	Other Comments
NA					

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact	Virement From (If Applicable)	Other Comments
Reduced Pension Contribution 1wte			£90,807		

5.3 Legal/Risk

The new post will build resilience and create capacity within the Homelessness and Settlement functions, therefore reducing risks within the HSCP.

5.4 Human Resources

The post will be subject to the Council's job evaluation process and the Council will be directed to progress recruitment to this post.

5.5 Strategic Plan Priorities

This proposal supports the HSCP strategic partnership priority to work with partners to improve mental health & wellbeing support for those experiencing inter-generational trauma, homelessness, care experience & the justice system.

5.6 Equalities

(a) Equalities

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, a copy of which will be placed on the Council website: Equality Impact Assessments - Inverclyde

Council

NO – This report does not introduce a new policy, function or strategy or recommend

a substantive change to an existing policy, function or strategy or recommend as ubstantive change to an existing policy, function or strategy. Therefore, assessed as not relevant and no EqIA is required. Provide any other relevant reasons why an EqIA is not necessary/screening statement.

(b) Equality Outcomes

How does this report address our Equality Outcomes?

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups,	Positive
can access HSCP services.	impact
Discrimination faced by people covered by the protected characteristics	Positive
across HSCP services is reduced if not eliminated.	impact
People with protected characteristics feel safe within their communities.	Positive
	impact
People with protected characteristics feel included in the planning and	Positive
developing of services.	impact
HSCP staff understand the needs of people with different protected	Positive
characteristic and promote diversity in the work that they do.	impact
Opportunities to support Learning Disability service users experiencing gender	Not specific
based violence are maximised.	
Positive attitudes towards the resettled refugee community in Inverclyde are	Positive
promoted.	Impact

(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?

Х	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.

(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.
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 Clinical or Care Governance

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

5.8 National Wellbeing Outcomes

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

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and	Positive
live in good health for longer.	Impact
People, including those with disabilities or long term conditions or who are frail	Positive
are able to live, as far as reasonably practicable, independently and at home	Impact
or in a homely setting in their community	
People who use health and social care services have positive experiences of	Positive
those services, and have their dignity respected.	Impact
Health and social care services are centred on helping to maintain or improve	Positive
the quality of life of people who use those services.	Impact
Health and social care services contribute to reducing health inequalities.	Positive
	Impact
People who provide unpaid care are supported to look after their own health	Positive
and wellbeing, including reducing any negative impact of their caring role on	Impact
their own health and wellbeing.	
People using health and social care services are safe from harm.	Positive
	Impact

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.	
Resources are used effectively in the provision of health and social care services.	Positive Impact

5.9 Environmental/Sustainability

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

Has a Strategic Environmental Assessment been carried out?

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

5.10 Data Protection

Has a Data Protection Impact Assessment been carried out?

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

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

7.0 CONSULTATION

7.1 Corporate & Senior Management Teams. Staff Partnership Forum

8.0 BACKGROUND PAPERS

8.1 None.



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

~	Reference number	IJB/32/2024/AB
7	Report Title	HSCP Service Manager for Homelessness & Settlement
က	Date direction issued by IJB	09 09 2024
4	Date from which direction takes effect	09 09 2024
2	Direction to:	Inverclyde Council only
ဖ	Does this direction supersede, revise or revoke a previous direction – if yes, include the	No
7	Functions covered by direction	All HSCP Homelessness services & Resettlement Services.
∞	Full text of direction	
		The IJB directs the Council to allocate the identified budget resource to
		create and recruit to an additional Service Manager post covering the areas
		of Homelessness and Resettlement all as detailed in the report
6	Budget allocated by IJB to carry out direction	Budget of £90, 807 allocated from Reduced Pension Contribution As detailed in
		paragraphs 4.2 and 5.2 of the report.
10	Outcomes	As detailed in paragraphs 5.6 and 5.8 of the report. To take forward service
		improvement, providing the governance, strategy and implementation to meet the
		changing support requirements of people who are homeless or requiring
		resettlement. To act as a single point of strategic oversight for accommodation
		needs across the care groups and to be the main HSCP liaison with local and
		national Registered Social Landlords.

11	Performance monitoring arrangements	In line with the agreed Performance Management Framework of the
		Inverclyde Integration Joint Board and the Inverclyde Health and Social
		Care Partnership. This Direction will be monitored and progress reported bi-
		annually.
12	Date direction will be reviewed	31 March 2025.