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|-------------------------|---|--------------------|-------------------------|
| <b>Report To:</b>       | <b>Inverclyde Integration Joint Board</b>   | <b>Date:</b>       | <b>9 September 2024</b> |
| <b>Report By:</b>       | <b>Kate Rocks<br/>Chief Officer<br/>Inverclyde Health &amp; Social Care Partnership</b> | <b>Report No:</b>  | <b>IJB/35/2024/KR</b>   |
| <b>Contact Officer:</b> | <b>Kate Rocks<br/>Chief Officer<br/>Inverclyde Health &amp; Social Care Partnership</b> | <b>Contact No:</b> | <b>01475 715365</b>     |
| <b>Subject:</b>         | <b>Chief Officer's Report</b>   |                    |                         |

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## **1.0 PURPOSE AND SUMMARY**

1.1  For Decision  For Information/Noting

1.2 The purpose of this report is to update the Integration Joint Board on service developments which are not subject to the IJB's agenda of 9<sup>th</sup> September 2024.

## **2.0 RECOMMENDATIONS**

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

- Delayed Discharge
- Review of Social Work Governance and Assurance in Scotland
- Connected 2 Care: Young Person-Led Conference

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

### 3.0 BACKGROUND AND CONTEXT

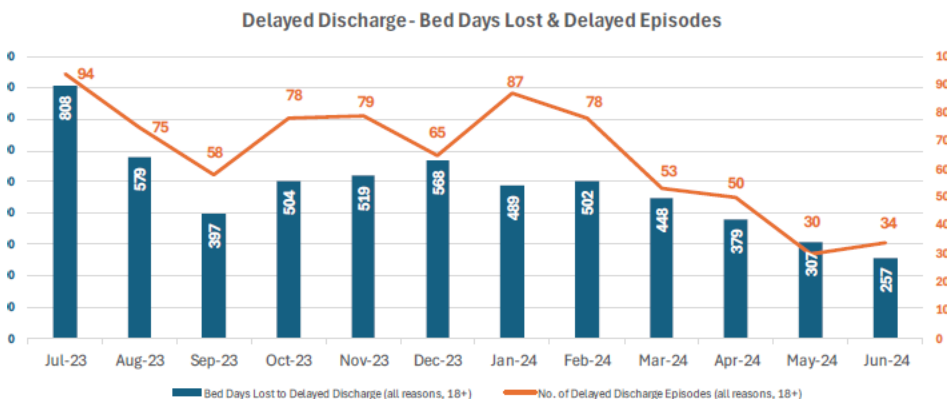
3.1 The IJB is asked to note the HSCP service updates and that future papers may be brought forward to the IJB as substantive agenda items.

### 4.0 BUSINESS ITEMS

#### 4.1 Delayed Discharge

##### Delayed Discharge Performance

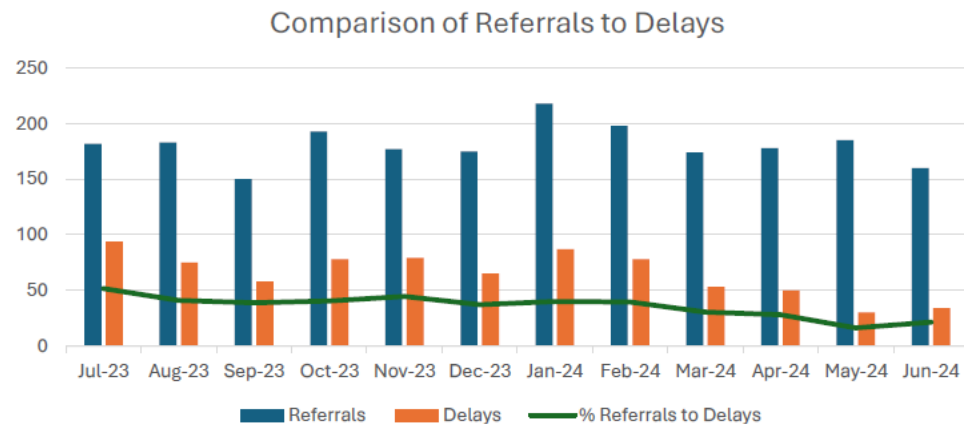
Inverclyde HSCP delayed discharge performance has shown sustained improvement in 2024. Bed days lost has reduced from a peak of 808 in July 2023 to 257 in June 2024 an improvement of 68.2%. The number of people who were delayed in hospital has also reduced from a peak of 94 people in June 2023 to 30 people in May 2024, an improvement of 68.1%. A particular area of success has been the reduction in people becoming delayed in hospital while waiting for a care package which has reduced from a high of 72 people in June 2023 to a low of 12 people In May 2024, this is an improvement of 83.3%.



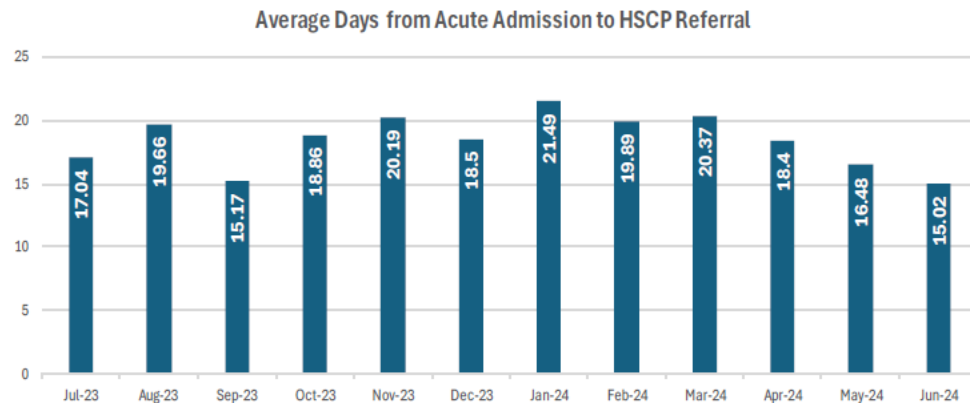
##### Delays as a Percentage of Referrals

Comparing referral volume and delay volume aids understanding of true performance. There has been recent improvement in the percentage of people referred who become delayed in hospital. Between July 2023 and February 2024, between 38.7% and 51.6% of people referred became delayed in hospital.

Between March 2024 and June 2024, this reduced to between 16.2% and 30.5%. This further demonstrates the high level of improvement achieved.



Prolonged hospital stays can negatively impact on patients' health and wellbeing. One way to prevent unnecessary delays is for Acute Hospitals and HSCP's to focus on early referrals for those with complex needs. This allows time for social workers to work with the multidisciplinary team, patients and their families to identify the right plan for the individual to achieve a safe discharge. Inverclyde patients have seen improvement in 2024. In January the average time from admission to referral was 21.49 days compared with 15.02 days in June.



#### 4.2 Review of Social Work Governance and Assurance in Scotland

The Care Inspectorate is undertaking a national review of social work governance and assurance until December 2024, with the aim of better understanding of the role, remit, effectiveness and the current challenges facing social work services. The review will explore the impact of governance and assurance arrangements in each local authority area, across the full range of social work duties, including adults, children and justice.

The approach will involve the following activities:

- a national staff survey, focussing on community based front line social work staff and their first line managers.
- review of core documents that can demonstrate governance and assurance approaches in local authority areas
- structured interviews with a small number of core staff including Chief Social Work Officers. Local managers will also participate in themed focus groups.

The review will include consideration of how staff are supported to fulfil their roles and how social work leaders are able to influence decision making as well as having strategic oversight of significant risk relating to the statutory duties within legislation. The Care Inspectorate have advised that the review has been designed to reflect the current pressures experienced by the sector and seeks to be mindful of the impact on those leading and working in social work services. As a national review, the Care Inspectorate team will not evaluate the performance of individual partnerships but expect to identify what is working well nationally and areas to consider for improvement.

#### 4.3 Connected 2 Care: Young Person-Led Conference

Care Experienced children and young people were supported to design and deliver a full day conference at the Beacon Arts Centre, Greenock, on 19 June 2024, exploring care experience and how our workforce and communities can better support children, young people and their families to thrive.

From October 2023, 19 young people completed a leadership programme with Columba 1400 and the young people used their learning and leadership skills to plan the event. The aim was for the conference was to be fully youth led from design to delivery and give Inverclyde's workforce and wider community an opportunity to listen and then respond through their own practice with an enhanced understanding of our care experienced communities needs and aspirations. Over 100 people participated in the conference and workshops and the young people plan to regroup after the summer holidays and take forward their plans including a 'Care Aware' Schools movement across Inverclyde.

## 5.0 IMPLICATIONS

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

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

## 5.2 Finance

One off Costs

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

Annually Recurring Costs/ (Savings)

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

## 5.3 Legal/Risk

There are no legal implications within this report.

## 5.4 Human Resources

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

## 5.5 Strategic Plan Priorities

## 5.6 Equalities

### (a) Equalities

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

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

### (b) Equality Outcomes

How does this report address our Equality Outcomes?

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

### (c) Fairer Scotland Duty

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

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

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

**(d) Children and Young People**

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

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

**5.7 Clinical or Care Governance**

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

**5.8 National Wellbeing Outcomes**

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

| <b>National Wellbeing Outcome</b>   | <b>Implications</b>         |
|---|-----------------------------|
| People are able to look after and improve their own health and wellbeing and live in good health for longer.  | Strategic plan covers this. |
| People, including those with disabilities or long-term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community. | Strategic plan covers this. |
| People who use health and social care services have positive experiences of those services, and have their dignity respected.   | Strategic plan covers this. |
| Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.   | Strategic plan covers this. |
| Health and social care services contribute to reducing health inequalities.   | Strategic plan covers this. |
| People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.                   | Strategic plan covers this. |
| People using health and social care services are safe from harm.  | Strategic plan covers this. |
| People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care, and treatment they provide.                 | Strategic plan covers this. |
| Resources are used effectively in the provision of health and social care services.   | Strategic plan covers this. |
|   |                             |

## 5.9 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. |

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

Has a Strategic Environmental Assessment been carried out?

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

## 5.10 Data Protection

Has a Data Protection Impact Assessment been carried out?

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

## 6.0 DIRECTIONS

|     |  |                                       |   |
|-----|--|---------------------------------------|---|
| 6.1 | <b>Direction Required to Council, Health Board or Both</b> | Direction to:                         |   |
|     |  | 1. No Direction Required              | X |
|     |  | 2. Inverclyde Council                 |   |
|     |  | 3. NHS Greater Glasgow & Clyde (GG&C) |   |
|     |  | 4. Inverclyde Council and NHS GG&C    |   |

## 7.0 CONSULTATION

7.1 The report has been prepared by the Chief Officer of Inverclyde Health and Social Care Partnership (HSCP) after due consideration with relevant senior officers in the HSCP.

## 8.0 BACKGROUND PAPERS

8.1 None.