
Report To: Inverclyde Integration Joint Board **Date:** 24 March 2025

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Subject: Housing Options & Housing Advice Services – Update on Staff
Consultation Programme

1.0 PURPOSE AND SUMMARY

1.1 For Decision For Information/Noting

1.2 This paper provides an update on the progress of the staff consultation programme previously approved at IJB as part of the broader Housing Options & Housing Advice Services (HOHAS) redesign. The findings of the staff consultation are, presented, aligned to strategic intent and next steps are defined.

2.0 RECOMMENDATIONS

2.1 The Integration Joint Board is asked to note:

- The intention to establish a Programme Board to ensure appropriate governance to support the decommissioning of the Inverclyde Centre
- The intention to communicate newly evaluated job descriptions to staff and UNISON in early April 2025
- The intention of HOHAS management to continue to communicate the planned closure of the Inverclyde Centre to ensure all stakeholders can plan for amendments within their own services.
- The intention of the Programme Board to support a whole system and collective responsibility for the prevention of homelessness aligned to the anticipated statutory duties of the new Housing Bill in May 2025.

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Chief Officer, Inverclyde Health and Social Care Partnership

3.0 BACKGROUND AND CONTEXT

- 3.1 In November 2024, the IJB approved proposals to re-design the delivery of homelessness services in Inverclyde.
- 3.2 The approval included a restructuring of the HOHAS staffing model and a programme of governance around decommissioning the Inverclyde Centre and transition to a community based temporary accommodation model
- 3.3 This option was approved on the understanding that a full consultation exercise be undertaken with affected staff to ensure the HSCP actively listened to and discussed proposed changes or issues with staff, to gain feedback, address concerns, and work collaboratively to achieve the objectives of the change programme. Whilst the consultation programme is now complete, the analysis of findings to inform future staffing model is still in progress. This report therefore provides an update of progress thus far with a commitment to providing a full report in May2025.

4.0 PROGRESS

- 4.1 Staff and management have been collectively working towards solutions that address the needs of the population whilst supporting staff to engage with innovative service redesign. The following principles of consultation were agreed:
- **Two-way communication:** Providing sufficient opportunity for staff to express their view, ideas and concerns whilst maintaining focus on objectives.
 - **Building trust:** By actively listening to staff, management will build trust and foster a more positive working environment.
 - **Informed decision-making:** Consulting with staff will support more informed decision making by considering different perspectives
 - **Addressing concerns:** Staff will be able to raise any issues or anxieties they have about proposed changes during the consultation.

4.2 CONSULTATION PROCESS

- 4.3 An online survey was conducted in partnership with representatives from Planning, Performance and Equalities. Links to the survey were distributed to all HOHAS staff in early December 2025 and a four-week period was provided to ensure the survey captured the anonymous views of as many members of staff as possible.
- 4.4 17 surveys were completed equating to 50% of the full staff group. This was a fair representation of the staff and results were quantified.
- 4.5 The following themes emerged: -
- 65% Are concerned regarding the current recruitment freeze and staff shortages
 - 53% Report blurred lines of responsibility across the three teams
 - 59% Feel there could be improved integration across the HSCP
 - 29% Would like to see improved liaison with RSL's
 - 53% Feel the service is used as a "Dumping Ground" to fill gaps in other services
 - 53% Positively report desires to prioritise homelessness prevention
 - 59% Endorsed the positive Outcomes Framework currently used to identify and measure outcomes
 - 41% Would like to implement a duty appointment system
 - 47% Want to ensure there is an increased multi-agency approach
 - 51% See the closure of the Inverclyde Centre as a positive objective
 - 59% Would like to work towards improved tenancy sustainment
 - 6% are concerned about subsequent Rough Sleeping

4.6 Further to survey analysis, two staff focus groups were held to address both the concerns and the positive ambitions of the teams. The outcomes evidenced a clear desire of staff to engage with proposed changes.

5.0 WORKFORCE

5.1 Significant work was undertaken to design a modernised structure to provide a temporary accommodation model based entirely in the community with a focus on early intervention and prevention.

5.2 Staff were overwhelmingly positive about the structure and provided the following feedback

- agreed the job titles are clear and concise.
- agreed the roles are simplified, clear, concise and leave no room for blurred lines
- tasks moved from one role to another are reasonable and staff agreed there is rationale behind this with a clear 'separation' of duties
- clear management structure for staff to report to is welcome
- staff were however concerned that removing duties from one role to another role may result in the job evaluation / re-grading of roles. They were assured that HR policy would be adhered to and staff would be supported throughout the process. Protection of pay policy would apply where appropriate

6.0 OUT OF HOURS (OOH) SERVICE

6.1 Closure of the Inverclyde Centre will have an impact on how services are delivered during the evening and over weekends. HOHAS management conducted an extensive benchmarking exercise across 19 other local authority areas to determine the best practices in the provision of out-of-hour services. Each approach was ranked in accordance with responsiveness, delivery model, costs, OOH location, decision making and access to accommodation.

6.2 Scottish Borders Council (SBC) provided the highest ranking with a weighted score of 85 out of a possible 100. To localize the approach taken by SBC, an example of a model of an OOH service was presented to staff at both workshops. Staff were provided with three options for the initial call handler response element of the service as follows: -

- Option 1 – HSCP 24 Hour Response Centre
- Option 2 – A contractual on call rota across HOHAS staff group
- Option 3 – A commissioned service from another LA or the 3rd Sector

Option 2 was identified as the preferred option to ensure an informed decision is made that supports positive outcomes and models of prevention.

7.0 COMMUNICATION AND ENGAGEMENT

7.1 Communication between staff and the management team was reported to be very good and conveyed transparency in terms of information sharing and consultation.

7.2 Revised job descriptions may create a level of anxiety and / or resistance from the operational teams.

7.3 The consultation process has allowed an open and transparent decision-making process to find the "right fit" for each member of staff where possible whilst prioritizing the strategic objectives of the service.

8.0 LIVED EXPERIENCE GROUP

8.1 A steering group of local people with lived experience of homelessness have been working with Homeless Network Scotland (HNS) in recent months to help shape Inverclyde's homelessness re-design and have welcomed the decision to close the Inverclyde Centre. Evidence shows that communal style hostels rarely support positive experiences and outcomes for people and the HSCP intends to implement a modern, rights-based system that prioritises rapid rehousing and early intervention. The group identified how important it is to be part of a community, with access to holistic and joined-up support for those experiencing homelessness. These priorities, set out by the people who have experienced homelessness in Inverclyde, align with the national direction of travel and the position of HNS.

9.0 NEXT STEPS

9.1 A Programme Board will now be established to ensure appropriate governance and risk analysis throughout the decommissioning of the Inverclyde Centre. It is anticipated that newly evaluated job descriptions will be communicated to the staff and UNISON in early April 2025. HOHAS management will continue to communicate the planned closure of the Inverclyde Centre to ensure all stakeholders can plan for any amendments within their own services. The Programme Board will support a whole system and collective responsibility for the prevention of homelessness aligned to the anticipated statutory duties of the new Housing Bill in May 2025.

10.0 IMPLICATIONS

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

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

10.2 Finance

There are no financial risks relating to the consultation progress update provided in this paper.

10.3 Legal/Risk

There are no legal risks relating to the consultation progress update provided in this paper.

10.4 Human Resources

There are likely to be Human Resource implications with the adoption of the preferred service structure. However, as a direct result of the consultation programme, this has been kept to a minimum and staff have been fully informed throughout.

10.5 Strategic Plan Priorities

The strategic plan priorities remain aligned to those in the original paper and this progress report does not have any implications for those priorities.

10.6 Equalities

(a) Equalities

This progress report is aligned to the Corporate Equalities Impact Assessment (EqIA) process undertaken as part of the original report with the following outcome:

To progress with the preferred proposal. No adverse impacts have been assessed against any group as a result of this proposal.

✓	YES – Assessed as relevant and an EqIA is required.
	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
We have improved our knowledge of the local population who identify as belonging to protected groups and have a better understanding of the challenges they face.	
Children and Young People who are at risk due to local inequalities, are identified early and supported to achieve positive health outcomes.	
Inverclyde's most vulnerable and often excluded people are supported to be active and respected members of their community.	Positive if preferred option is chosen
People that are New to Scotland, through resettlement or asylum, who make Inverclyde their home, feel welcomed, are safe, and able to access the Health and Social Care Partnership services they may need.	

(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.
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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.

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.

10.7 Clinical or Care Governance

No impacts currently assessed.

10.8 National Wellbeing Outcomes

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

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	
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	Positive if preferred option approved
People who use health and social care services have positive experiences of those services, and have their dignity respected.	Positive if preferred option approved
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	Positive if preferred option approved
Health and social care services contribute to reducing health inequalities.	
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	
People using health and social care services are safe from harm.	Positive if preferred option approved
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 if preferred option approved

10.9 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.
✓	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.

10.10 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.
✓	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.

11.0 DIRECTIONS

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

12.0 CONSULTATION

12.1 This report describes the significant consultation process to date and confirms further planned consultation with staff and stakeholders.

13.0 BACKGROUND PAPERS

13.1