
Report To:	Inverclyde Integration Joint Board Audit Committee	Date:	24 March 2025
Report By:	Kate Rocks Chief Officer Inverclyde Health & Social Care Partnership	Report No:	IJBAC/17/2025/CG
Contact Officer:	Jonathan Hinds Chief Social Work Officer Inverclyde Health & Social Care Partnership	Contact No:	01475 715365
Subject:	Joint Inspection on Adult Services: Update		

1.0 PURPOSE AND SUMMARY

- 1.1 For Decision For Information/Noting
- 1.2 The purpose of this report is to advise the Integration Joint Board Audit Committee of the progress made in relation the HSCP Improvement plan following the joint inspection by the Care Inspectorate and Healthcare Improvement Scotland of adult services: integration and outcomes – focus on people living with mental illness.
- 1.3 The report was published in May 2024, following inspection activity conducted between October 2023 and March 2024.

2.0 RECOMMENDATIONS

- 2.1 It is recommended that the Integration Joint Board Audit Committee notes the progress made within the Improvement Plan.

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

3.0 BACKGROUND AND CONTEXT

- 3.1 The joint inspection of adult services, focussed on people living with mental illness was undertaken using the Joint Inspection of Adult Services Integration and Outcomes Quality Improvement Framework¹ and structured around the following inspection question: 'how effectively is the partnership working together, strategically and operationally, to deliver seamless services that achieve good health and wellbeing outcomes for adults?'
- 3.2 The inspection report was published on 7 May 2024 and included evaluation against five key areas based on a series of key findings.
- 3.3 A number of improvement actions were already underway within adult services, however an improvement action plan based on the report findings was developed and submitted to the Care Inspectorate.
- 3.4 The integrated improvement plan, included at Appendix 1, includes a number of updates on improvement actions. These are focussed on:
- Developing outcome measures informed by the views of people living with mental illness and their unpaid carers;
 - Support to staff to identify and respond to the needs of unpaid carers;
 - Reviewing the effectiveness of arrangements for integrated and co-located teams to maximise opportunities to deliver seamless services;
 - ensure staff confidence in self-directed support to maximise choice and control for people and unpaid carers;
 - strengthened governance of social work practice, including the statutory functions of mental health officers.

4.0 PROPOSALS

- 4.1 Progress against each area for improvement and local actions to achieve these are monitored on an ongoing basis by the HSCP Clinical and Care Governance Group and, in turn, reported to the IJB Committee on a twice-yearly basis, with the next update due in March 2025.
- 4.2 In addition, the Chief Social Work Officer is updated on a minimum quarterly basis in terms of improvement activity and evaluates the impact that actions have on service users and carers.

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	

¹ [JIAS Integration and Outcomes FrameworkV1.1_as.pdf \(careinspectorate.com\)](https://www.careinspectorate.com/JIAS%20Integration%20and%20Outcomes%20FrameworkV1.1_as.pdf)

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

N/A

5.4 Human Resources

N/A

5.5 Strategic Plan Priorities

N/A

5.6 Equalities

(a) Equalities

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

YES – Assessed as relevant and an EqIA is required.

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.	None
Children and Young People who are at risk due to local inequalities, are identified early and supported to achieve positive health outcomes.	None
Inverclyde's most vulnerable and often excluded people are supported to be active and respected members of their community.	None
People that are New to Scotland, through resettlement or asylum, who make Inverclyde their home, feel welcomed, are safe, and able to access the HSCP services they may need.	None

(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?

<input type="checkbox"/>	YES – A written statement showing how this report's recommendations reduce inequalities of outcome caused by socio-economic disadvantage has been completed.
<input checked="" type="checkbox"/> 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?

<input type="checkbox"/>	YES – Assessed as relevant and a CRWIA is required.
<input checked="" type="checkbox"/> 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

The attached action plan includes update on quality assurance and governance arrangements.

5.8 National Wellbeing Outcomes

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

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	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.	None

5.9 Environmental/Sustainability

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

Has a Strategic Environmental Assessment been carried out?

<input type="checkbox"/>	YES – assessed as relevant and a Strategic Environmental Assessment is required.
<input checked="" type="checkbox"/> X	NO – This report does not propose or seek approval for a plan, policy, programme, strategy or document which is likely to have significant environmental effects, if implemented.

5.10 Data Protection

Has a Data Protection Impact Assessment been carried out?

<input type="checkbox"/>	YES – This report involves data processing which may result in a high risk to the rights and freedoms of individuals.
<input checked="" type="checkbox"/> 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 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	

7.0 CONSULTATION

7.1 N/A

8.0 BACKGROUND PAPERS

8.1 N/A

Joint inspection of adult services in Inverclyde Health and Social Care Partnership
Priority Areas for Improvement

Green – On Target

Amber – Progressing well

Red – Still to commence

Area for Improvement	Local Actions	How will we measure this?	Responsible Officer/s	Target Date	Progress	RAG
The partnership should develop processes for capturing information about the outcomes of people living with mental illness and their unpaid carers. This should include meaningful opportunities for people to feed back about their experience of services. The partnership should use this information	Develop suite of outcome measures that capture our processes to deliver outcomes.	Quarterly reporting to HSCP Clinical and Care Governance Group	Head of Mental Health and ADRS	October 2024	Commissioning Team operate ongoing contract monitoring. New contracts with third sector providers detail the requirement for outcome measurements and service user feedback	GREEN
	Commissioning framework to be developed that captures qualitative and quantitative data whilst measuring impact.	Quarterly reporting to Mental Health Commissioning Group	Head of Finance and Commissioning	December 2024	Head of service MH reviews contract data and has met with individual care providers prior to renewal of contracts and contract extensions to discuss outcome measurements and impact for service users, including service user feedback	GREEN

<p>to support plans for improving outcomes.</p>	<p>Other carer engagement processes are in place across adult and children's services</p> <p>Implementation of Inverclyde HSCP Carers Strategy Board Development plan is ongoing</p>	<p>Mental Health Service has initiated contact with (Unity) Inverclyde carers Gateway to complete joint working on development and implementation of recommendations. This will be completed through interagency working. This joint working will also consider how we improve both the quantity and quality of Adult Carers Support Plans and highlighting where there is potential need for young Carers statements.</p>
	<p>Audit clinical and professional tools that strengthen carers' voices to better understand and improve our support.</p> <p>Audit report to be presented to Clinical and Care Governance Group</p>	<p>Service Manager, Mental Health and Complex Care</p> <p>Service Manager, Mental Health and Complex Care</p>

				GREEN
				GREEN
Develop digital solutions that are accessible and user-friendly to capture feedback from our service users and unpaid carers.	Report findings and recommendations to HSCP Digital Strategy Group	Service Manager, Strategic Planning and Performance	December 2024	Primary care mental health team is exploring current feedback mechanisms following completion of episode of care.

The partnership should support staff in mental health services to identify and respond to the needs of unpaid carers of people living with mental illness. It should monitor the impact of its approach.	Staff awareness sessions that explore our statutory duties to unpaid carers to contribute to improvement.	Evaluation of improved staff awareness that demonstrates that the voice of the carer is reflected in planning.	Commissioning and Learning & Development Manager	<p>Inverclyde HSCP Carers Strategy Board' Development plan -Nov 2024 Priority 4 has a focus on improved assessment of carers needs.</p> <p>The new CMHT operational policy has particular focus on identifying both caring and carers roles within initial assessment criteria.</p> <p>Awareness sessions have taken place in Dec 24 for all the Mental health Team.</p> <p>Mental Health Service are now focusing on building on the previous learning to support the completion of carers assessment, benefit support,</p>

	<p>unpaid carers support and young carers support. A plan of intervention, recording engagement and reviewing our joint working is now being developed to ensure this information is captured and to allow for development and improvement.</p> <p>A media campaign by Unity has highlighted the service to the public.</p>		MH/ADRs has peer support workers employed within its service and will look further develop support groups alongside our third sector partners.	GREEN
Build on what is working well for peer support across the HSCP and develop a consistent, recovery-focussed approach.	Increased number of people participating in recovery-focussed groups, in our communities.	Head of Health and Community Care	February 2025	
Ensure that carers get the right support at the right time.	Increase the number of (assessments) Adult Carers Support Plans for carers of people living with mental health.	Head of Health and Community Care	December 2024	The new CMHt operational policy highlights the need to provide and consider carers assessment and support plans and/or young carer statements for all service users. It is a key question re

		caring responsibilities or dependents within initial assessment.	
The partnership should review the effectiveness of its arrangements for integrated and co-located teams, with a view to maximising opportunities for delivering seamless services for people living with mental illness.	We are currently carrying out a review of all our integrated front doors to simplify access to integrated services.	<p>Report to Inverclyde Integration Joint Board will be produced as part of our commitment to wider redesign.</p>	<p>Head of Finance and Commissioning</p> <p>September 2025</p> <p>Mental Health Service Management representation at the overarching HSCP Integrated Front Doors group which seeks to ensure there is a “no wrong door” approach to referrals.</p> <p>We have explored what this might mean for MH secondary care services and how we can establish better joint working and pathways between services e.g. ADRS / LD / ACM</p>
	Refresh our guidance for health and social work practitioners to ensure that people receive good quality	<p>Development of outcome-focussed assessment and planning guidance.</p>	<p>Head of Adult Social Work</p> <p>September 2025</p> <p>AMBER</p>

	assessment and planning.			collaborative approach to assessment and care planning.
The partnership should ensure that all staff working in mental health services are confident in the principles and practice of self-directed support, to maximise choice and control for people and unpaid carers.	Relaunch our strategy for person-centred assessment and planning and ensure that self-directed supports are primarily the delivery model to maximise choice and control for people and their unpaid carers.	Develop online training module that improves staff skill base and enhances professional confidence.	Commissioning and Learning & Development Manager	<p>Noted within new operational policy and will form part of staff training at the 3 upcoming staff engagement sessions with frontline staff.</p> <p>Will be monitored by Social work Service manager who will provide an overview of caseload supervision and direct supervision and governance.</p>
The partnership should strengthen its oversight and governance of social work practice, with particular reference to the statutory	Improve quality assurance, governance and professional oversight of statutory social work practice.	Develop enhanced CSWO role as part of SMT.	Service Manager, Strategic Planning & Performance	<p>In progress.</p> <p>New Senior Service Manager for Mental Health and MHO services to provide operational governance and supervisions to all staff now in post.</p>

functions of mental health officers.	<p>Enhanced CSWO role commences 24 February 2025. CSWO annual report 2024/25 to include update on quality assurance and governance arrangements.</p>		GREEN
	<p>Review social work assessment and planning framework.</p> <p>Findings and action plan will be presented to CSWO at social work performance and assurance board.</p> <p>Head of Mental Health and ADRS</p> <p>March 2025</p> <p>HSCP wide workshops, facilitated by external consultant, with Service Manager and Social Work Team Leads across adult services have taken place with focus on improving person centred assessment and planning.</p> <p>Next phase is to deliver similar sessions to front line Social Workers. This is being coordinated Head of Service for adult social work.</p> <p>Report to CSWO thereafter to inform development of HSCP social work governance sub-group.</p>		

	Review of MHO service, operational model, capacity etc.	Demand analysis for statutory mental health work to inform model for future practice as part of wider adult social work capacity.	Head of Mental Health and ADRS/CSW O	March 2025	Review commenced February 2025.	GREEN
	Standardise recording and information-sharing practice across the partnership.	Improved, integrated and co-ordinated approaches to information sharing and recording.	Service Manager, Strategic Planning & Performance	March 2025	MHO specific recording, monitoring and reporting via SWIFT going live March 2025. Thereafter development of similar for other mental health Social Work service delivery to ensure appropriate access and recording for all staff across EMIS and SWIFT systems.	GREEN

Owners of plan:

HSCP Chief Officer and CSWO Review date: December 2024 – Progress Update February 2025