

EAST RENFREWSHIRE COUNCIL**30 October 2019****Report by Chief Social Work Officer****CHIEF SOCIAL WORK OFFICER ANNUAL REPORT 2018/19****PURPOSE OF REPORT**

1. The report presented to elected members is the Chief Social Work Officer Annual Report for 2018/19. The report is attached at Appendix 1. It is formatted to comply with the template issued by the Office of the Chief Social Work Adviser to the Scottish Government. Use of the template by Chief Social Work Officers across Scotland is intended to help information sharing and benchmarking across services regarding good social work practice and improvement activity. The office of the Chief Social Work Adviser in Scottish Government uses this information to produce a national report.

RECOMMENDATIONS

2. The Council is asked to comment on and approve the content of the Chief Social Work Officer Annual Report attached as Appendix 1 for submission to the Office of The Chief Social Work Advisor, Scottish Government.

BACKGROUND

3. Each year, the Chief Social Work Officer is required to produce an annual report. To ensure consistency across Scotland, the Office of the Chief Social Work Adviser to the Scottish Government developed a template for these reports in 2014. The intention was to allow succinct and consistent presentation of information on how social work services are being delivered, what is working well, what needs to be improved and why, and how local authorities, and partners, are planning for and delivering change. It is also designed to highlight innovative and good practice as well as areas of challenge for local authorities.
4. The report provides a brief narrative on the local authority to set the delivery of social work services in context. It describes partnership structures and governance arrangements, as well as the social services landscape. The report then sets out information relating to:
 - Finance
 - Performance
 - Statutory functions
 - Continuous improvement, including complaints
 - Planning for change
 - User and carer empowerment
 - Workforce planning and development; and
 - Key challenges for 2019/20.

5. Performance data on some of the key social work indicators are set out throughout the report and reflects the operational delivery of services into the main key groups, childrens services, criminal justice and community care. The report also acts as the annual report to Clinical and Care Governance Group on the operation of the statutory social work.

CONSULTATION AND PARTNERSHIP WORKING

6. The Chief Social Work Officer role is key in a number of partnership arrangements including the Health and Social Care Partnership, North Strathclyde MAPPA Strategic Oversight Group, East Renfrewshire Child Protection Committee, East Renfrewshire Adult Support and Protection Committee, East Renfrewshire Violence to Women and Girls Partnership Group, East Renfrewshire Community Justice Partnership, Chief Officers Public Protection Group.

IMPLICATIONS OF THE PROPOSALS

Finance

7. There are no financial implications arising from this report, although the report does refer to the significant financial challenges facing the Council and other public sector partners in delivering within the constraint of diminishing budgets.

CONCLUSIONS

8. This report provides an overview of the professional activity for social work within East Renfrewshire for 2018/19 through the delivery of the statutory functions and responsibilities held by the Chief Social Work Officer and the key successes are outlined in page 41 of the report.
9. There continues to be a number of significant challenges and risks facing social work and the Council in East Renfrewshire including:
 - The continuing challenging financial climate and the uncertainty for all public services
 - The increasing expectations and demands from the public and stakeholders
 - The increasing cost of supporting vulnerable people
 - The impact of the living wage.
 - The redesign services to ensure that savings are delivered over 2018/19 and the potential for any unintended consequences for service users and carers due to change management activity.
 - The management of increased service demand at a time of diminishing resources.
10. In summary 2018/19 continues to be a challenging year for the HSCP and Council in delivering social work services that remain high quality, responsive and provide value for public money against a background of budgetary constraint. Despite these very real difficulties there are key successes and improvements and this has been outlined within the annual report.

11. The landscape for all public service will continue to change over the coming years and, in particular, statutory social work and social care will be required to adapt to meet the growing demands associated with protecting and caring for our most vulnerable citizens and those who at risk in our communities.
12. At the heart of the social work profession lies a commitment to enabling and supporting vulnerable individuals to make positive, sustainable changes to their lives to achieve the best outcomes for them, their families and communities as a whole.

RECOMMENDATIONS

13. The Council is asked to comment on and approve the content of the Chief Social Work Officer Annual Report attached as Appendix 1 for submission to the Office of The Chief Social Work Advisor, Scottish Government.

REPORT AUTHOR

Kate Rocks
Head of Public Protection and Children Services (Chief Social Work Officer)
kate.rocks@eastrenfrewshire.gov.uk

October 2019

BACKGROUND PAPERS

Chief Social Work Officer Annual Report 2017-18

KEY WORDS

A report presenting an overview of the Chief Social Work Officer role in 2018-19

CSWO; adoption; fostering; protection; guardianship; statutory; governance; social work

BLANK PAGE



EAST RENFREWSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP

CHIEF SOCIAL WORK OFFICER ANNUAL REPORT

2018 – 2019

BLANK PAGE

CONTENTS

1. INTRODUCTION 3

2. PARTNERSHIP STRUCTURES / GOVERNANCE ARRANGEMENTS 4

3. IMPACT OF LEGISLATIVE CHANGE 7

4. DEVELOPMENT AND PERFORMANCE OF KEY STATUTORY RESPONSIBILITIES,
INCLUDING PLANNING FOR CHANGE 7

5. FINANCE 36

6. CONTINUOUS IMPROVEMENT 37

7. WORKFORCE PLANNING AND DEVELOPMENT 38

8. CARERS 40

9. STATUTORY FUNCTIONS 41

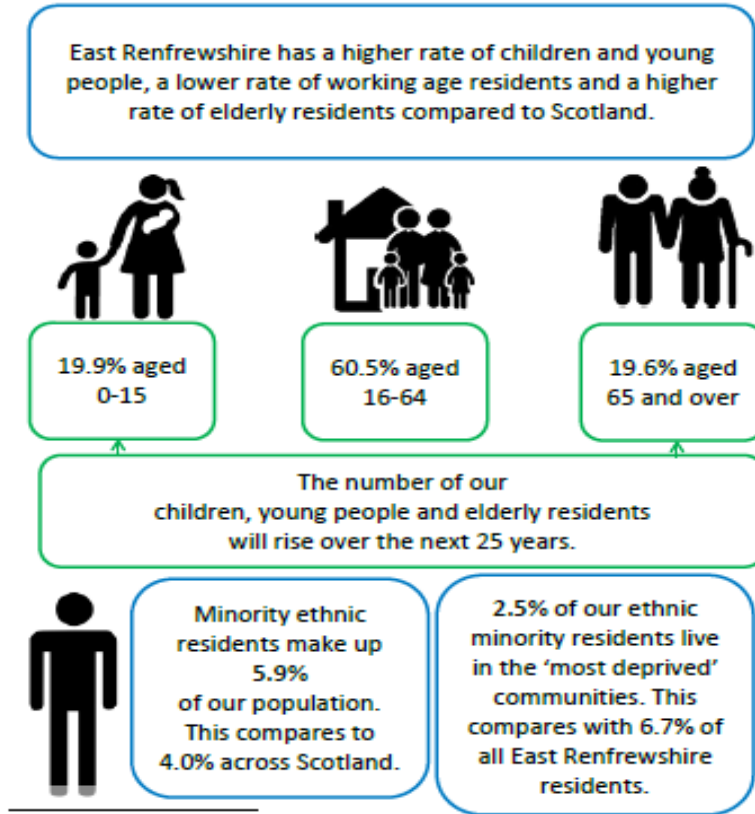
10. KEY CHALLENGES AND PRIORITIES FOR YEAR AHEAD 42

BLANK PAGE

1. INTRODUCTION

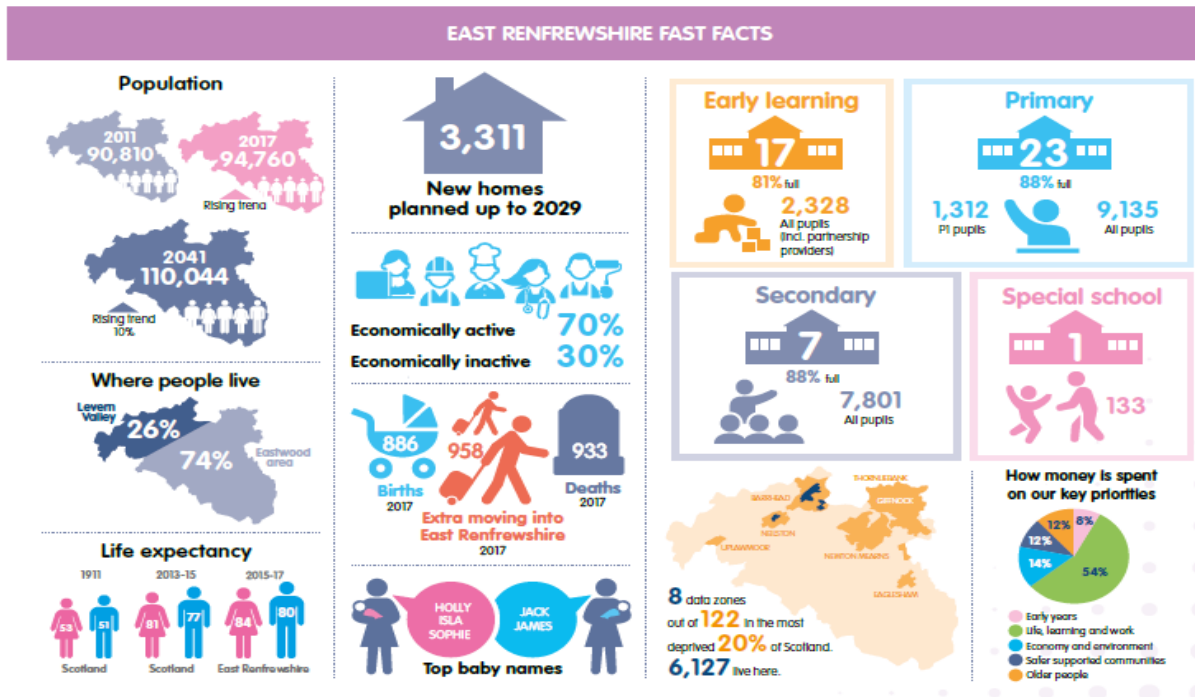
East Renfrewshire covers an area of 174 square kilometres and borders the City of Glasgow, East Ayrshire, North Ayrshire, Renfrewshire and South Lanarkshire.

Some key facts:



Local context





2. PARTNERSHIP STRUCTURES / GOVERNANCE ARRANGEMENTS

East Renfrewshire Health and Social Care Partnership was established in 2015 under the direction of East Renfrewshire's Integration Joint Board and it has built on the Community Health and Care Partnership, which NHS Greater Glasgow and Clyde and East Renfrewshire Council established in 2006.

Our Partnership has always managed a wider range of services than is required by the relevant legislation. Along with adult community health and social work and care services, we provide health and social work services for children and families and criminal justice social work.

During the last thirteen years our integrated health and social care management and staff teams have developed strong relationships with many different partner organisations. Our scale and continuity of approach have enabled these relationships to flourish. We have a history of co-production with our third sector partners and we are willing to test new and innovative approaches.

East Renfrewshire Health and Social Care Partnership is one of six partnerships operating within the NHS Greater Glasgow and Clyde Health Board area. We work very closely with our fellow partnerships to share good practice and to develop more consistent approaches.

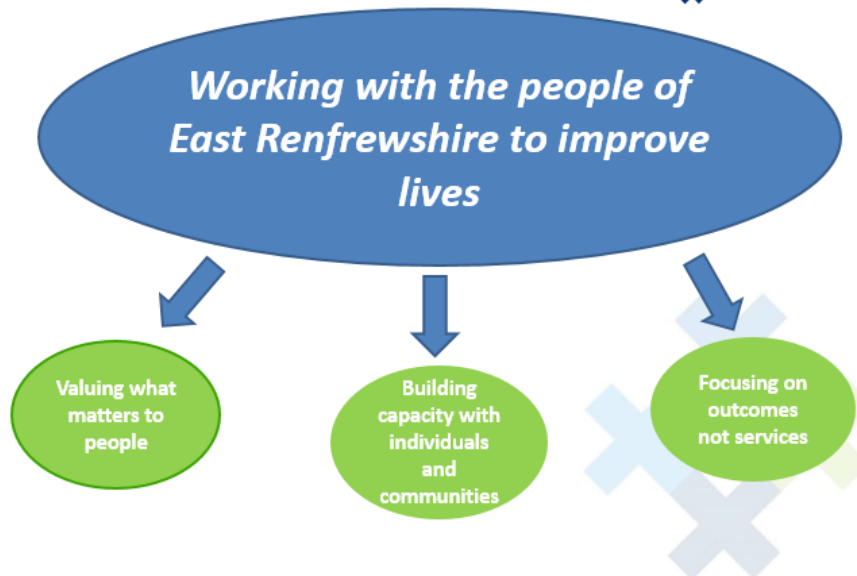
This Chief Social Work Officer report reflects the fourth year of the move to a Health and Social Care Partnership and whilst it outlines the key statutory social work functions, it also explains how they are delivered within the spirit of the Public Bodies (Joint Working) (Scotland) Act 2014 legislation.

Our Strategic Vision and Priorities

East Renfrewshire has been integrating health, social work and care services for thirteen years. From the outset of the Community Health and Care Partnership we have focused firmly on outcomes for the people of East Renfrewshire that improve health and wellbeing and reduce inequalities. Under the direction of East Renfrewshire's Integration Joint Board, our Health and Social Care Partnership builds on this secure foundation. Throughout our integration journey, we

have developed strong relationships with many different partner organisations. Our longevity as an integrated partnership strives to improve outcomes for the citizens of East Renfrewshire.

Our Vision



Our vision statement, “*Working together with the people of East Renfrewshire to improve lives*”, was developed in partnership with our workforce and wider partners, carers and members of the community. This vision sets our overarching direction through our Strategic Plan. At the heart of this are the values and behaviours of our staff and the pivotal role individuals, families, carers, communities and wider partners play in supporting the citizens of East Renfrewshire.

The Social Care Landscape

In last year’s report we noted that we were seeing some adjustments to the local care market which in turn were introducing uncertainty and risk. We were concerned about the quality of care homes, with our local market reflecting the national challenges of turnover and recruitment. In July 2018 a court order suspended the registration of local care home service. The closure of this home took place less than six months on from the closure of Greenlaw Grove Care home.

In response to the rapid closure, locality social work staff supported residents and their families to move to alternative care settings with Health and Social Care Partnership staff working together to ensure safety and continuity of care in the interim. Independent advocacy and colleagues from other local authority areas also supported our activity. Whilst this was a very distressing situation for residents and their families, once they were settled in their new homes many complimented our social work staff on the work they did to support their moves at a difficult time. We shared our learning about responding to rapid home closures with other areas at a Joint Chief Officer and Care Inspectorate event in February 2019.

A number of care and support providers have signalled that they are experiencing issues sustaining services in the local area. There are challenges in recruiting and retaining a local social care workforce. In response to this the Health and Social Care Partnership is extending its workforce planning to include third and independent sector providers.

The Health and Social Care Partnership recently engaged with a broad spectrum of local and national stakeholders to develop our commissioning intentions. This exercise highlighted the commitment of a range of stakeholders to work differently in our localities, including a willingness to work in a place based approach; to developing and working with local assets building on digital opportunities and to reimagine ‘care in the home’.

Our Strategic Plan

The strategic plan for 2018 - 2021 sets out seven strategic priorities where we need to make significant change or investment during the course of the plan. These are:

- Working together with **children, young people and their families** to improve mental wellbeing.
- Working together with our community planning partners on new **community justice** pathways that support people to prevent and reduce offending and rebuild lives.
- Working together with our communities that experience shorter life expectancy and **poorer health** to improve their wellbeing.
- Working together with people to maintain their **independence at home** and in their local community.
- Working together with people who experience **mental ill-health** to support them on their journey to recovery.
- Working together with our colleagues in primary and acute care to care for people to reduce **unplanned admissions** to hospital.
- Working together with **people who care for someone** ensuring they are able to exercise choice and control in relation to their caring activities.

Strategic Commissioning

Similar to the rest of Scotland, the challenges we experience are of increased demand set against diminished funding. Although incredibly challenging, our commissioning plan outlines a wider 'public' service context and is written to compliment the strategic plan. The commissioning plan provides the drivers for our strategic objectives and sets out the following commissioning priorities:

- Transformation and Sustainability
- Community Led Support
- Prevention and Early Intervention
- Mental Health and Recovery
- Getting the Right Support
- Transforming Models of Care
- Building Capacity in Primary and Community Care
- Digital and Technology Enabled Care and Support

Our new commissioning focus on market facilitation within our localities will develop clear and specific solutions to the needs of those communities.

Our carer's service operating within the provisions of the 2016 Act have been trained and resourced to provide adult and young carers assessments within East Renfrewshire and will be a key partner (in collaboration with other stakeholders) in facilitating changes to the way we deliver prevention and manage demand.

Annual Performance Report

Our [Annual Performance Report 2018-19](#) has given us an opportunity to demonstrate how we have delivered on our vision and commitments over 2018/19. It provides information about the progress we are making towards achieving the national outcomes for children, the national health and wellbeing outcomes, and criminal justice outcomes.

Clinical and Care Governance Committee

In order to exercise its governance role in relation to the delivery of effective social work and social care services, the Clinical and Care Governance Committee focuses on governance, risk management, continuous improvement, inspection activity, learning, service and workforce

development, service user feedback and complaints. Over 2018/19 we reviewed the purpose, governance, membership and reporting arrangements of this group. Although no longer a formal structure of the Integrated Joint Board it continues to provide regular scrutiny on the areas requiring development and improvement. Quality assurance is fundamental to safe and effective care and the Chief Social Work Officer Annual Report is remitted to the Clinical and Care Governance Group to provide them with assurance concerning the delivery and performance of statutory social work functions. Furthermore, this allows the group to consider the interdependencies of delivering effective and high quality care within the context of integrated practice. More information can be found in the [Annual Clinical and Care Governance Report](#).

3. IMPACT OF LEGISLATIVE CHANGE

In East Renfrewshire in 2018/19, the key areas of legislative change which have had significant implications for social work services include:

- Children’s and Young People Act (2014)
- Community Justice
- Carers Scotland Act 2016
- Mental Health (Scotland) Act 2015
- Domestic Abuse Act 2019

All of these will be referenced throughout the report.

4. DEVELOPMENT AND PERFORMANCE OF KEY STATUTORY RESPONSIBILITIES, INCLUDING PLANNING FOR CHANGE

4.1 CHILDREN SERVICES

As a consequence of the roll out of the Fit for the Future programme over the last year we have revised our management structure this in turn has enabled us to:

- Provide a consistent approach to relational and intensive interventions across all ages
- Ensure support and development of staff to deliver evidence-based programmes
- Embed relational practice to our interventions with children and families when they need it most
- Develop our support for parents by including our fathers

We have also commenced on a refresh of our vision and delivery of intensive support to younger children and their families. Our focus has been to continue to develop innovative and creative ways to engage with children and families working in partnership with the third sector.

Early Identification and Intervention

The Request for Assistance (RFA) team was established in 2014 and continues to ensure that children and their families receive a thorough and prompt response to any referrals and/or inquiries for a child or young person. The team is staffed by experienced social workers, an experienced Health Visitor and also benefits from the expertise of our third sector partner Children 1st who consider referrals under Section 12 of the Children and Young People (Scotland) Act 2014 for Family Group Decision Making (FGDM). The Request for Assistance team provides advice, guidance, assistance and interventions on a range of issues from child wellbeing to child protection.

From 1 April 2018 to 31 March 2019, the Request for Assistance team completed a total of 1151 initial assessments, with 22% requiring targeted intervention. This is a significant increase in the number of referrals from last year (12%). Early analyses suggest that this is due to an increase in

the number of parents seeking assistance under Section 23 of the Children (Scotland) Act 1995 for their children that have additional needs.

A key function for the team is to support our partners' agencies at the earliest opportunity. Sharing information and offering advice at these early stages promotes our preventative approach for children, young people and their families.

Family Group Decision Making

The Family Group Decision Making Service provided by our third sector partner Children 1st supports families at an earlier stage. The service offers an opportunity for families to work together with professionals by making decisions that focuses on managing their own plans to keep their children safe. 8% of all children who may have required social work intervention have been redirected to the service. Encouragingly, 52% of children and young people have actively participated in the Family Group Decision Making conference. Although in its first year we can evidence that it is preventing the need for repeat referrals or social work intervention at a later stage.

Our Response to Domestic Abuse

Domestic Abuse continues to be one of the most common reasons for referral to our service. Over the course of this year, 376 children were referred to Children's Services by police due to concerns relating to domestic abuse. Of these children, 12% were referred to our Domestic Abuse Referral Group, with 10% of them progressing to Scottish Children's Reporter Administration.

Over this year we implemented a new domestic abuse pathway for children and adult victims and the pathway continues to support early identification and intervention. Of significance our pathway has now been further strengthened by the involvement of Education Services and Adult Services.

Strength Based Practice Models

Support for Families and Parenting

Children social work teams within East Renfrewshire work alongside our partners to support families and carers access a range of high quality family and parenting programmes that are delivered across the localities. Joint working ensures that families receive early help that prevents concerns escalating to a level where statutory legislation would be required. Similarly, as the population of children and young people with complex needs increases, demand for advice and support from parents locally has risen too.

Psychology of Parenting Programme

The Psychology of Parenting Project is aimed at improving the availability of high-quality evidence-based parenting programmes for families with young children who have elevated levels of stress and associated behavioural problems. In East Renfrewshire, Education and Health and Social Work staff have worked together to coordinate and deliver the programme over the last four year.

The programme is robustly evaluated after delivery with each family and child's experience individually measured across a range of outcome indicators. 45 families enrolled in Psychology of Parenting Project courses in 2018 and the table below outlines the positive impact of the programme locally with national comparator data also included for benchmarking purposes.

East Renfrewshire Psychology of Parenting Project Delivery in 2018/19 – Key Indicators

Indicator	East Renfrewshire	Nationally
% children with pre and post SDQ data available had an improved SDQ score.	89%	82%
% parents who complete the group they have started	60%	53%
% children (whose parents completed a group) who started in the high risk clinical range	81%	67%
% children (whose parents completed a group) who moved out of the clinical range	68%	61%
% children (whose parents completed a group) moved into normal range	59%	44%

Barnardo's Cygnet

Barnardo's Cygnet Programme was introduced to East Renfrewshire in 2016 as a means of providing post diagnostic support for parents whose children were diagnosed by East Renfrewshire Autism Diagnostic Team (ERADT). The programme aims to improve outcomes for children and young people by increasing parental confidence in positively supporting behaviours associated with an Autism Spectrum Condition.

Currently around 50 school age children living in East Renfrewshire per year receive an autism spectrum diagnosis. Additional to this approximately 18 children per year are diagnosed by our pre-school diagnostic team. Post diagnostic supports are not provided as part of this pathway. In addition young people may also receive a diagnosis within a CAMHS pathway. Within the school age population in East Renfrewshire Educational Psychologists have determined the prevalence of a diagnosed autism spectrum condition as 2.88 per 100.

The Cygnet Programme is offered to parents within one year of diagnosis. During 2018/19, six Cygnet courses were delivered with 68 families attending the programme. Programme evaluation and feedback strongly indicates high parental satisfaction with the course content and methods of delivery. An external evaluation is planned over the next year to provide independent feedback on family and child experience and the overall impact.

Mellow Ability

In the last quarter of 2018/19 a Mellow Ability parenting programme to support parents of children aged 4-7 years with additional needs was delivered jointly by Education, Psychological Services, and Social Work staff. The programme is a partnership between the charitable organisation "Mellow", East Renfrewshire Council, Glasgow City Council and Falkirk Council and it ran for 14 weeks with six local families, with a dads group emerging from the wider group.

Evaluation results have highlighted improvements across a range of parent and child measures. For parents these include reduced reports of symptoms of depression and anxiety and enhanced understanding of their child(ren)s' behaviour and improved confidence in managing behaviour. Our

intention would be to continue to support the programme run in East Renfrewshire and continue to promote attendance amongst the families who are known to social work.

Targeted evidence based programmes.

Over 2018/19 we implemented targeted evidence based practice models; Safe and Together and Signs of Safety.

Safe and Together was introduced in East Renfrewshire in 2017 and since then we have continued to promote the model across Children's Services. We have now become one of the first local authorities recognised in Scotland as accredited *Safe and Together* Champions delivering gold standard child protection domestic abuse training to all staff including adult services, health visitors, early years, education and after school care. Over and above this we have engaged with our local general practitioners and our Children's Hearing panel members who have enthusiastically engaged with the principles and standards of Safe and Together. Over the course of 2019/20, it is our intention to provide this training to our citizens who live in our communities where domestic abuse is a significant issue.

Signs of Safety

Over 2018/19 we have commenced the implementation of the Signs of Safety model, led by the Chief Social Work Officer and the Head of Education Services (Equality and Equity). The model is child focused, inclusive, solution orientated and risk sensible. The Signs of Safety model will support us to improve our practice but more importantly it will enhance how we relationally intervene with children, young people, their families and carers in order to reduce risk and improve children's wellbeing.

Our key outcomes for the first year of our five year implementation plan are:

- Children and families involved in the child protection system feel listened to.
- Children and their families are integral to the development of their plans.
- Professionals recognise what needs to happen for children and their families and what could happen if risk is not reduced.

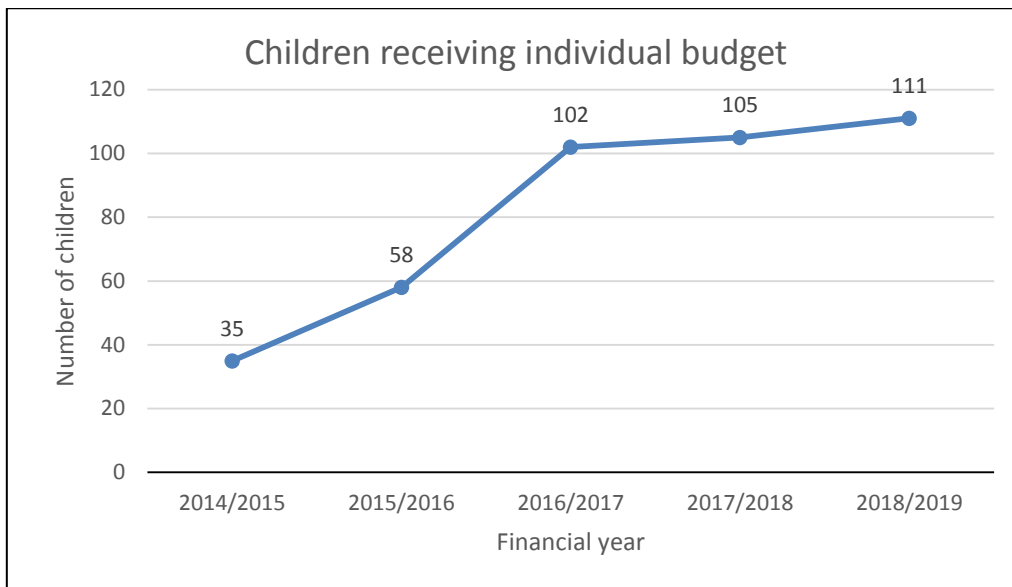
Some of the early learning from implementing Signs of Safety has identified the need for cultural shifts in practice across all agencies. The model will be used across the whole children's system within East Renfrewshire.

In our first year some of our achievements have been:

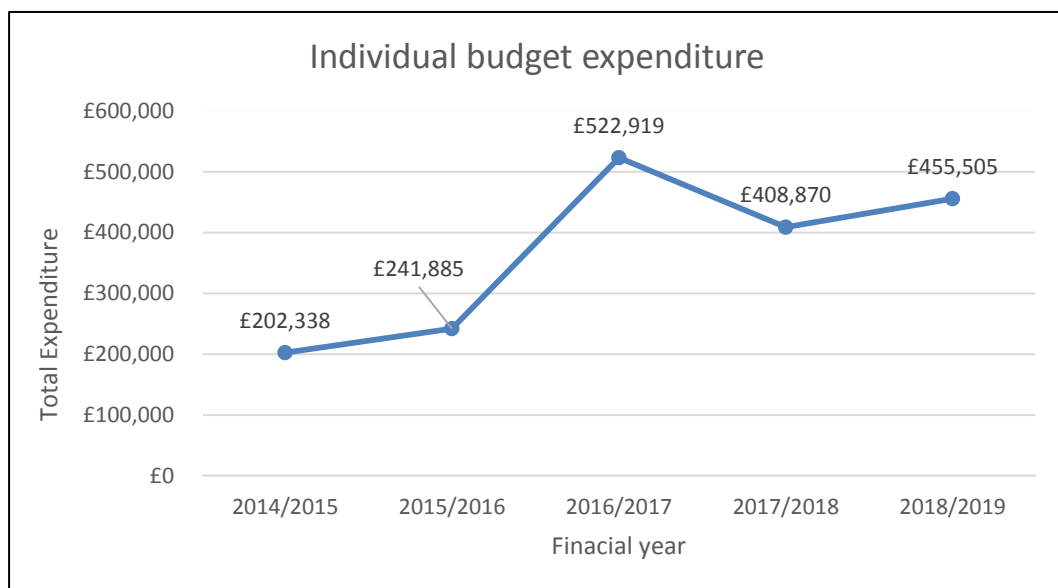
- Establishment of Multi Agency Implementation Team and Plan.
- Workforce training provided at different levels, advanced and generic for all staff groups including education, health, police and adult services. In total 215 individuals across children and adult services have been provided various levels of training.
- All our processes and documentation have been reviewed to complement the model.
- The review and restructure of our Child Protection Case Conferences to ensure they are solution orientated, strength based and risk focused.

Children with Disabilities

The number of children and young people affected by disability continues to rise in East Renfrewshire and constitutes a third of allocated cases across children and families social work teams. Over a number of years we have been fully adopting the principles of self-directed support in partnership with children and their families. We recognise that good support planning is reliant on good relationships and this means starting with the family and recognising what matters to them. This is consistent with our approaches throughout childrens social work services.



The number of children in receipt of an individual budget has increased more than three times from 35 to 111 since 2014. In 2018/19, 57% of children with disabilities known to a social worker were in receipt of an individual budget. This will be an area of significant growth and budgetary pressure as we move forward.



Over 2014-19, there has been a 225% rise in the expenditure for children / young people who receive self-directed support, with the average budget award for a child / young person reducing by 29% in the same period due to robust review of childrens plans. It is however anticipated that this will be an area of significant demand over the years, considering the migration of families who have children with disabilities into the local authority area. Further analysis is being undertaken to consider the required financial investment moving forward. The impact has been recognised as a considerable pressure for families and the service at the transition stage, with a growth of 100% from last year for young people requiring an individual transition budget. This reflects the increase in families moving to the area who have a child with a disability.

Children's Community Occupational Therapy Service

The Children's Community Occupational Therapy Service within social work aims to promote and maintain independence in children aged 0 – 18 years of age who are experiencing functional difficulties that may arise due to of one or more of the following:

- Physical disability
- Complex multiple disability
- Accident or operation
- Co-ordination difficulty impacting on ability to function
- Sensory difficulty impacting on function and occupational performance.

A child's life is made up of occupations (daily activities) which include, playing, learning and self-care. The service aims to promote the child's health and wellbeing through everyday activity, enabling the child to participate successfully by minimising the impact of their difficulty. This is achieved by adapting the environment, providing specialist equipment and advice and strategies which work to:

- Improve the child's and family's quality of life
- Increase independence and safety
- Enable the child to access other services (for example education or the wider community)
- Increase choice and control (in line with Health and Social Care standards).

The Children's Community Occupational Therapy Service works in partnership with social workers and others to provide specialist equipment and adaptations. Referrals to the service continue to increase, as does the complexity of the conditions that the children present with. Parental feedback reflects the value placed on the service particularly as new adaptations or equipment are provided with a focus on long term needs that provides continuity as children grow or their condition changes.

Inclusive Support Service

The Inclusive Support Service supports to children and young people with complex additional support needs. The service provides:

- Holiday Play Scheme - Spring, Summer and October breaks by providing fun activities, outings and events, supported by trained staff. Parents / carers value the support that this provides throughout the school holidays and young people enjoy the activities, achievements and friendships that develop.
- Clubs – sports, activities, hobbies. Throughout school term there is an extensive programme of evening / weekend events, supported by trained staff, delivered in partnership with the Leisure Trust.
- Individual Support – this provides opportunities for friendship groups to develop and access to community facilities. It also provides many opportunities for individual and small groups of young people to access mainstream activities.

The number of young people being supported by the service has significantly increased as has the complexity of their additional support needs. The service now supports 224 children and young people. There continues to be a steady increase in demand for the service which in turn mirrors the demand for statutory social work assessments, plans and resources. There has been a higher number of requests for places for clubs and holiday programmes than previous years, with more requests being made by children and young people who attend mainstream schools.

In addition to the individual support provided, the service works in partnership with young people, families, and partnership with Cosgrove Care Children's Services, Young Person's Services, Isobel Mair School and East Renfrewshire Culture and Leisure Trust (ERCLT) and have continued to develop strong relationships that provide further opportunities for children and young people with additional support needs to access a variety of social and physical activities with their friends in their local community.

Over 2018/19, an average of five clubs per week was delivered to families over a Monday, Tuesday, Wednesday, Thursday and Saturday. We continue to co-deliver our Holiday Programme with Cosgrove Care and have supported Isobel Mair School deliver an extended school year.

During 2018/19, the Inclusive Support Team worked with East Renfrewshire Culture and Leisure Trust to support the provision for children with additional support needs to access movie screenings due to the challenges they experience as families to undertake ordinary activities.

Corporate Parenting in East Renfrewshire

Within East Renfrewshire, robust strategic partnerships continue to support the delivery of improved outcomes for children and young people. The Corporate Parenting Group comprises senior representation from both local and national corporate parenting bodies and continues to be the main vehicle which, in conjunction with Champions Board, progresses the actions within the East Renfrewshire Corporate Parenting Plan.

In 2018/19, key improvements have included:

- Ensuring early decision making is in place that provides children with permanence destinations.
- Minimising placement moves for children where they are looked after away from home.
- Early improvements in children's baseline assessments in numeracy and literacy and their developmental milestones.
- Improvement in the uptake of advocacy support.
- Continued success of the Family Firm initiative which has supported 70 young people with a range of work-related activities in 2018/19.
- Provision of 4 traineeships for care experienced young people within East Renfrewshire Council Environment Services.

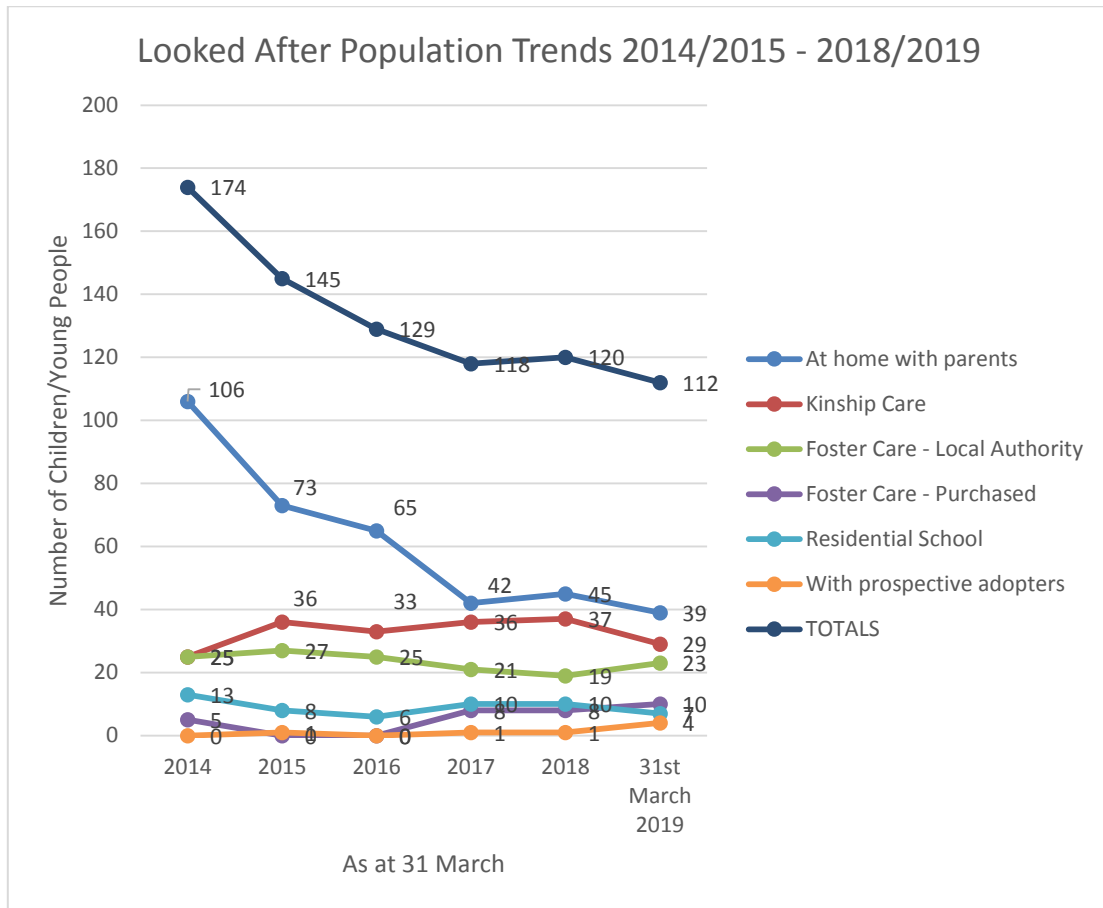
In addition, participation through the Champions Board and Mini Champs remains amongst the highest in Scotland and this will be outlined later on in the report.

In line with national issues, some areas of challenge continue in accessing specialist children mental health services and looked after health services. A new Specialist Children's Health pathway commenced in autumn 2018 and the introduction of local outreach clinics is supporting the delivery of children's health assessments within four weeks of them becoming looked after. For children's mental health there has been creative use of resourcing to provide an extension of the Family Wellbeing Service in schools where particular emotional support needs have been identified. Following consultation with looked after and care experienced children and young people, a new education Looked After Children Policy will be implemented in June 2019. This will strengthen support for looked after children in relation to attainment and achievement. Our focus remains on ensuring the greatest possible access to opportunities not only for our children and young people who remain within East Renfrewshire, but also those looked after and attending school outwith the authority.

The current corporate parenting plan came to an end in 2018/19, with a further plan taking account of both current and newly identified areas for improvement for 2019/20.

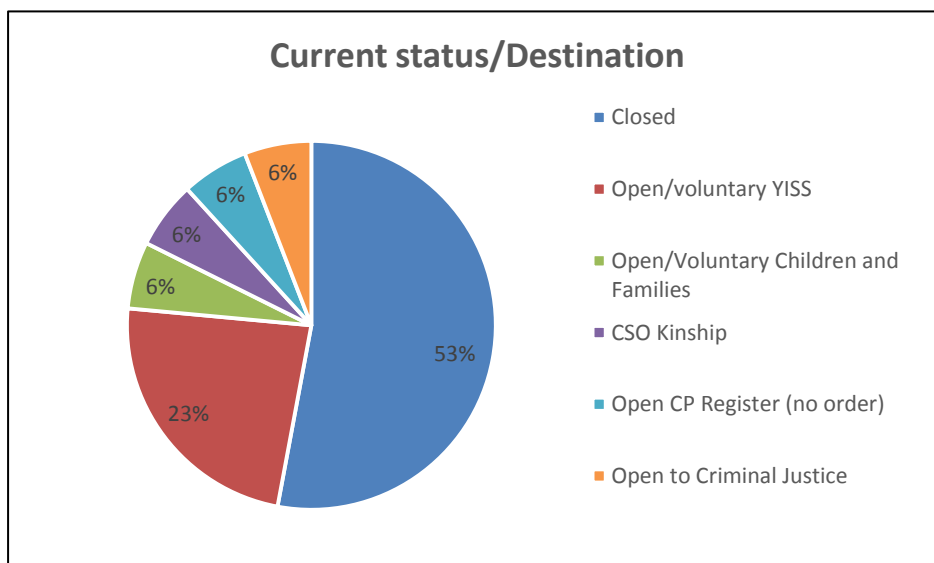
East Renfrewshire's Looked After Children and Young People's population - A profile of our children

On 31 March 2019, 112 children and young people in East Renfrewshire were looked after in a range of settings. 55% of the children were boys and 45% were girls. This constitutes approximately 0.5% of the total children's population of the area and is one of the smallest proportions in Scotland. We have continued to consolidate the PACE (Permanence and Care Excellence) programme, that is working to improve outcomes for children by securing permanent destinations for them. Its success can be seen in a continued overall reduction of looked after children, in particular those looked after at home by birth parents (see graph below).



The numbers of children in each of the placement categories has shown some subtle changes as several children have been secured on kinship care orders therefore no longer required to be looked after and subject to a statutory legal order. There also has been an increase in prospective adopters again reflecting our priority to secure children in permanent placements. There were four adoption orders granted in 2018/19.

Analysis of our looked after population



Further analysis of the reduction of children who are looked after at home has shown that during 2018/19 a total of 14% compulsory supervision orders for children and young people at home with parents were terminated and 53% no longer have any involvement with social work.

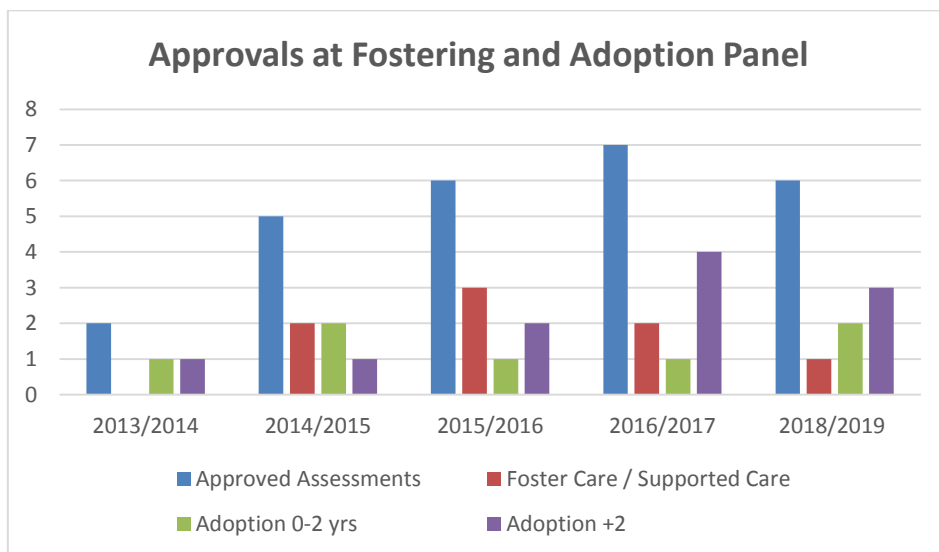
Intensive Services

In 2018/19, the Intensive Family Support Service, Youth Intensive Support Service and Fostering, Adoption and Supported Care Service were aligned to a singleton management structure under the umbrella of Intensive Services. This resulted in management efficiencies that were re-invested in operational delivery. This has strengthened our capacity to deliver for children, young people and their families that require intensive supports due to the trauma, adversities and complexities they face.

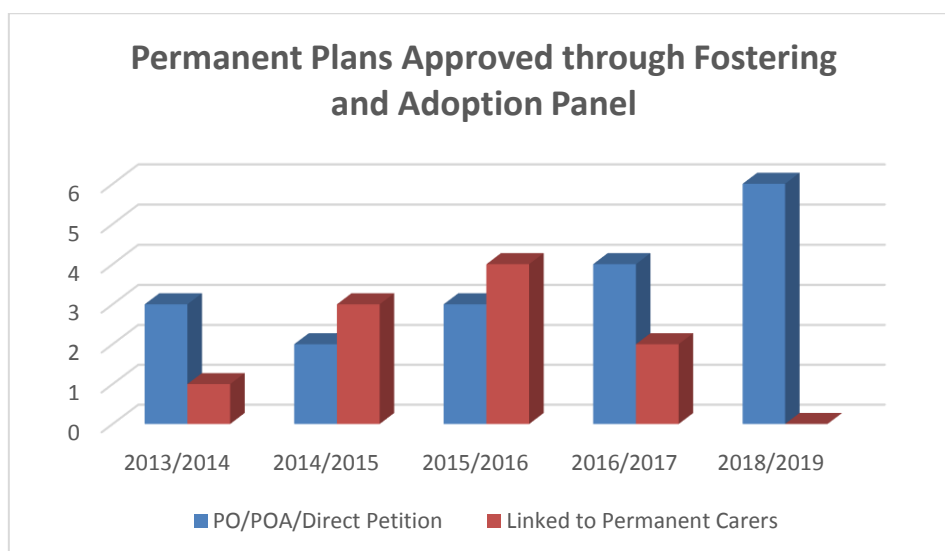
Intensive Services provides flexible intensive service to children and young people (0 – 26 years) and their families over seven days per week, including evenings and weekends. The service delivers a range of tailored support to children, young people and their families to enhance parenting capacity, improve relationships, build resilience and promote positive change. The service has continued to place relationship based practice at the centre of intervention, listening to and empowering the families we work alongside, providing individualised responsive support. Interventions offered include direct support for children, group work, family/parenting support and activity programmes.

Fostering and Adoption and Supported Care

Fostering and Adoption services remain pivotal to ensuring that our most vulnerable children are provided with high quality services and permanent family care.



Our adoption assessments have remained relatively static as a result of the success of the Permanence and Care Excellence Programme in securing children’s futures.



As outlined in last year's report, an independent review of the Fostering and Adoption service and the Fostering and Adoption Panel was commissioned. A series of recommendations around practice improvement, team processes, competence-based assessments and decision making, as well as agency practice have been taken forward. Key to this has been the appointment of an independent chair of the Fostering, Adoption and Permanence Panel. This has improved the resilience of the service and enhanced practice. Implementation of the independent review recommendations will be regularly reviewed during 2019/20 to monitor improvement progress.

Our adoption work with children and their carers continues to improve and again evidences the shift in culture and practice.

The Adoption Service also provides direct support to families affected by adoption, including providing post adoption support for all those affected. Working in this area can be challenging and there is a legislative duty to provide post-adoption support following the granting of an Adoption Order. The service provides a counselling role to birth families who have themselves been adopted, as well as the siblings of adopted families. During 2018/19, the service has:

- Provided targeted intervention and letter box contact support to a number of birth families.
- Provided support to a small number of families who have been affected by adoption issues in the form of origin counselling and access to file requests.
- Provided an adoption support group to families on a quarterly basis.

Over 2018/19 the service will explore support to parents whose children have been removed on a permanent basis.

We have had significantly more enquiries from prospective carers for foster care rather than supported care. Analysis of our looked after children population patterns has identified that we require carers for older children. To address this need we are working with our existing carers to expand their capacity to care for older children. We will undertake a further recruitment campaign later in 2019/20 with a specific focus on meeting the needs of older young people.

Fostering enquiry, assessment and approval

	Completed Assessments	Approvals
2016/17	3	1
2017/18	1	1
2018/19	1	1

Supported carer enquiry, assessment and approval

	Assessments	Approvals
2016/17	0	0
2017/18	2	1
2018/19	1	1

Improvement Activity for Looked After Children

The Permanence and Care Excellence programme formally started in February 2016 with the aim of reducing drift and delay in permanence planning for infants, children and young people. This improvement work was important because East Renfrewshire had the highest percentage of children in Scotland on Compulsory Supervision Orders (CSOs) per head of population and more than 50% of those children had been on a Compulsory Supervision Order for more than two years. 2018/19 has seen a 6% drop in the number of children looked after in comparison with a national reduction of 1.1%.

The Permanence and Care Excellence Champions group continues to be a positive and committed multi-agency team that are working together to improve outcomes for looked after children. This has led to stronger partnership working.

The focus of their work during 2018/19 has been on children in kinship care and looked after at home for more than 15 months. Just under 75% of children who had been placed in kinship care since 2016 had been in placement for more than one year. 2018/19 has seen a 22% reduction of children looked after in kinship placements. This reduction can be attributed in part to the work of Permanence and Care Excellence in securing children's permanent futures through kinship orders. A review of the kinship guidance was undertaken and implemented which includes a new assessment framework and refreshed timescales with the aim of strengthening and consolidating consistency in practice. The following examples demonstrate this:

- Kinship Guidance completed and implemented
- Updated LAC review minute format in place, including a checklist for chairs
- New tracking document for all LAC in place with introduction of exception reporting to senior management
- Permanence report writing training and development of mentorship approaches

Young People's Services

Intensive Services for Young People was established during 2015 as the lead service for all looked after young people (12 years of age and over) and for young people eligible for Continuing Care and After Care. This is in recognition that for these young people more intensive interventions are required to improve their recovery from trauma, neglect and abuse.

The team reflects the statutory duties within the Children and Young People's (Scotland) Act 2014, to support young people eligible for continuing care up to the age of 21 and for after care up to the age of 26. For young people subject to the Children (Scotland) Act 1995, Section 22 who are at risk of being accommodated and or custody, intensive services provide direct interventions alongside their community social work colleagues and 3rd sector.

Intensive Services for young people also comprises the Youth Intensive Support Service (YISS) and Child and Adolescent Mental Health Services (CAMHS). The service has the following shared aims across social work and health services:

- To reduce the number of young people looked after, looked after and accommodated and at risk of hospitalisation.
- To reduce the impact of historical trauma and abuse for young people.

- To ensure that the transition into adulthood achieves better long term outcomes.

Of the 134 young people allocated to the Youth Intensive Support Service as at 31st March 2019

- 56% were receiving intensive support services.
- 34% were care experienced young people in receipt of Continuing or After Care support.
- 28% were subject to Compulsory Measures of Supervision.

Participation - Model of our Champions Board groups

Champions Board

East Renfrewshire Council is now in its third year of their Champions Board. The board members consist of care experienced young people, elected members, directors and senior managers within the organisation and care experience people jointly chair this board with the Chief Executive. Some of the young people who contribute are looked after at home and away from home and have been defined as on the edges of care or hard to reach. Some have been hospitalised due to mental health issues. Their inclusion in the Champions Board has proven to boost their confidence and resilience. It allows them to feel included in the decisions that are made by corporate parents and to influence local policy and practice for care experienced young people in the future.

Engagement

We have continued to be creative and innovative in our approaches in engaging with young people by offering different opportunities and experiences in showcasing their fantastic talents. Over 25% of our looked after young people have attended champions board meetings and they continue to build relationships with their adult champions whilst directing the agenda setting by identifying thematic improvements. The young people are mandated to be the voices of their peers and they take this seriously as they understand the significance of this role to influence and work with their corporate parents to find solutions to the barriers that have been identified.

Participation

The table below outlines a high level of engagement by our care experienced young people with the service.

	2016/2017	2017/2018	2018/2019	TOTAL
Number of Hours of Participation Activities	244hrs	378hrs	260hrs	882hrs
Number of Participation Opportunities	26	39	32	97
Number of Champions Board Prep meetings	3	15	25	43
Number of Engagement events for young peoples and their family	1	3	3	7
Number of young people who have taken part in participation	26	45	47	118
Number of team building events with corporate parents	2	2	1	5
Number of Residential weekends	1	1	1	3
Number of Young People Attending Residential Weekend	14	17	24	55

Mini Champs (Age Group 8-12)

The Mini Champs continue to develop. Over this year the focus of this group is to create a safe and fun environment to explore and address some of the challenges that the younger children that are looked after may face over time and assist them in developing their confidence. They also contribute to the champions' board as they are supported by older young people who are champions to ensure their voices are also heard.

Innovation and Leading Practice

East Renfrewshire's Champions Board has strengthened through integration as we are a fully integrated Health and Social Care Partnership; the Champions Board is supported by a dedicated co-ordinator who is a social worker in the Youth Intensive Support Service team and benefits from strong partnerships between Council departments and across the statutory and voluntary sector. This landscape of joined-up service delivery is 'alive and kicking' at the Champions Board.

Other group work activity

Throughout the year, a group work programme has been delivered for all young people involved in Intensive Services with an average 22 young people attending weekly. We have found this has been an effective way of bringing young people together and has led to many of our care experienced young people joining the Champion's Board groups.

Throughcare and Aftercare Drop in (Age: 16 – 25)

A monthly drop in service for all care experienced young people aged 16 plus is operated from a locally accessible venue. A Champions Board member and Family Firm coordinator are always present at these evening sessions. Drop in sessions are always led by young people, and usually involve a meal cooked by all who attend. There is an open forum for questions / issues and also consultation around themes for board meetings.

Summer Holiday Programme

Our summer programmes have run for four years and have given care experience young people and their sibling's opportunities to try new activities and have adventures throughout the summer holidays. It further enhances the development of relationship based practice between children, young people, families and practitioners.

As Chief Social Worker Officer I have had the privilege to participate in these activities where I have seen over time the young people grow and social workers strengthening their relationships with young people and their families.

In-Control Scotland and East Renfrewshire – Rights and Equalities project

In March 2019, In Control Scotland and East Renfrewshire embarked on a partnership project to support young disabled people with care experience to be more included; in their home life, local community and in decision-making and in their local champions board. There are three central aims for the project:

- To support young disabled people with care experience to plan their future.
- To support young people to develop skills, that would help them in gaining employment.
- To support young disabled people with care experience to be more included in the work of the local Champions Boards.

In Control Scotland will be working alongside the Champions Board over the next couple of years to support the board to be inclusive and for the young disabled people to access self-directed support by the use of an individual budget. This work is in its early stages.

Key Results through Engagement and Participation

We have seen some tangible outcomes achieved from our work with corporate parents through the champion's board

- Two school nurses who will specialise in mental health intervention have been aligned to care experienced children and young people. These posts will ensure that care experienced young people have early access to mental health services and there will be a focus on relationships and prevention. This was identified by care experienced young people as a significant gap in maintaining positive emotional wellbeing.
- Housing practitioner to be employed who is knowledgeable of care experienced young people to lead the review of the supported accommodation within East Renfrewshire.
- More inclusive opportunities to learn new skills within supported accommodation in East Renfrewshire.
- Ring-fenced tenancies for care experienced young people in areas that they desire to live in.
- Bespoke service for care experienced young people by Money Advice and Rights Team.
- Plus one scheme to be adopted for looked after children when accessing sports, art and cultural activities within East Renfrewshire through their free entitlement card.

Family Firm

Family Firm is an innovative programme supporting East Renfrewshire's care experienced young people into sustainable work-related activities.

Since its inception in 2016, Family Firm has supported 60 care experienced young people into 130 work related activities by putting the young person at the heart of their own employment journey. Through a long-term relationship based approach supported by a 'no fails' policy, our young people have grown in confidence and skills with 25% of current recruits already reaching employment and 100% of those surveyed saying the programme had a positive long term impact on their life. Through the support and experience gained by our young people, we aspire to improve employment prospects and wellbeing in later life and reduce the need for future interventions.

Commitment from corporate leaders within the Council is excellent. The Director of Environment who is the champion for training and work within our Corporate Parenting Plan, has created, funded and ring-fenced four trainees posts within Environment for 2018/19, a pilot expected to continue into 2019/20.

Outcomes to date

- 100% of young people surveyed feel Family Firm has a positive long term effect.
- 50% increase in care experienced young people engaging in positive work related activities.
- 60 young people supported, participating in 130 work related activities (since 2016).
- 35 'hard to reach' young people currently meaningfully engaged with Family Firm; of these 30% supported in further education and 50% working towards removing barriers to work and moving young people up the employability pipeline.
- 25% of young people supported into work. Four young people entered full time work but they were unable to sustain this and are receiving ongoing support.

In 2018/19 Family Firm has had:

- 70% young people engaged with programme and all receiving one to one work coaching and support during this period.
- 37% young people supported to vocational/further training and education.
- 39% young people gaining qualifications.
- 41% young people supported to employment and in employment.

Young Carers

New arrangements for the identification, assessment, and support of young carers were outlined in the East Renfrewshire Carers Eligibility Framework approved in April 2018. The framework agreed a tiered approach to responding, with schools leading on the task of initial identification and support, in partnership with the East Renfrewshire Carers Centre. It is expected that the majority of young carers will be supported through this approach. Where schools and/or the local Carers Centre identify a child or young person in an inappropriate or high risk caring role they may seek the involvement of children's social work to support a more thorough assessment of the child or young person situation.

To support the introduction of new duties Health and Social Care Partnership and Education have commissioned the Carers Centre to provide support to young carers individually, and within a group programme. Along with this young carers can access advocacy advice and support from Partners in Advocacy, a service commissioned by Health and Social Care Partnership for this purpose. In addition a new Young Carers App has been developed to enable self-identification and referral to services. This has been piloted in primary and secondary schools and will be rolled out further to increase the number of young carers known to schools and wider services.

Mental Health

East Renfrewshire Health and Social Care Partnership has an established joint forum between Child and Adolescent Mental Health Services, Social Work and Educational Psychology to establish better joint working practices and allow staff to share professional advice and guidance. Staff have found this useful in coordinating support for young people. Our care experienced young people have benefitted from this approach, as a full range of options from differing professional bodies can be explored in pursuing better outcomes for them. Speech and Language Therapy will join us in our next phase of this planned work.

Family Wellbeing Service

The Family Wellbeing Service was commissioned initially as a pilot by Children 1st to provide direct support to children and young people aged 8 - 18 years who present to their GP with a range of significant social, emotional and mental wellbeing concerns. Initially delivered across two GP practices before being rolled out to six, the service works with the child and their family to ensure that early help is offered to improve the connection, relationships and resilience of the family. Children and parents who have accessed the service have reported improved outcomes in relation to emotional resilience and family relationships, GPs reported less repeat presentations for the same issues and schools have also indicated that there have been additional benefits in relation to improved school attendance.

Central to the success of the service has been the deployment of systemic family work as the key method of engagement. This involves working with all family members to develop empathy and create understanding that improves connections that build a sense of safety within relationships.

In 2018/19, East Renfrewshire Health and Social Care Partnership, in partnership with Children 1st, was successful in securing funding through the Robertson Trust, Social Bridging Fund to test the service rolling out across the fourteen GP surgeries in East Renfrewshire. From June 2019, the

service will begin this extension building on the learning from the earlier successes of the original pilot to ensure that:

- Children and young people's wellbeing is improved;
- Family relationships are stronger; and
- Children and young people and families get effective support at the right time.

4.2 CRIMINAL JUSTICE

During 2018/19, in contrast to the previous year increase, we experienced a decrease in the overall workload of the service. This is unlikely to continue as the Scottish Parliament has recently voted to extend the presumption against short sentences from 3 to 12 months.

Workload variation of +/- 5% or more: 2018-2019 from 2017-2018

Area of service	Number 2018-19	Number 2017-2018	Change (n)	Change %
Criminal Justice Social Work Reports	241	259	-18	-7%
Community Payback Orders	103	126	-23	-18%
Community Service Orders	0	0		0
Through-care (released prisoners)	5	12	-7	-58%
Drug Treatment & Testing Order	0	0		0
Fiscal Work Order	8	14	-6	-43%
Diversion	26	39	-26	-33%

The reduction in workload helped bridge the additional resourcing implications of the disaggregation of the specialist sexual offender programme, which was previously delivered by Renfrewshire on behalf of Inverclyde and East Renfrewshire. In 2018/19, East Renfrewshire had 3 social workers undertake specialist training in preparation for taking over full case management of sexual offenders which due to their complexity, require both specialist programmes of work and higher levels of supervision.

The service has continued to benefit from strong and effective relationships across the Health and Social Care Partnership and with external partners as well as strategic linkages with the Alcohol and Drug Partnership, Child Protection Committee and Adult Protection Committee. In March 2019, we commenced a multi-agency programme of offender focussed trauma training. Led by the criminal justice service and delivered to a multi-agency group of professionals, this has strengthened the effectiveness of multi-agency partners in delivering interventions with those who hold convictions.

Community Payback Orders (CPOs)

Community Payback Orders are statutory imposed court orders that include: community supervision, unpaid work, alcohol / drug treatment, mental ill health treatment, programme requirements and compensation. Community Payback Orders can last from 6 months to 3 years. Non-compliance can result in a return to court and an alternative disposal being imposed, including a custodial sentence.

During 2018/19, 103 people living in East Renfrewshire were sentenced to Community Payback Orders. This represents a reduction from previous years. Nationally, social work orders imposed by courts has have reduced by 6% over the past two years.

Supervision requirement

Individuals subject to supervision often present with complex needs and require intensive levels of support and interventions. In addition to addressing offending behaviour, other support needs may

include multiple deprivations such as poor education, lack of housing and money, addiction, poor mental health and trauma.

Those offenders who pose a Risk of Serious Harm (RoSH) are robustly managed Under Multi Agency Public Protection Arrangements (MAPPA). All registered sex offenders subject to statutory supervision are jointly managed by ourselves and police from the Offender Management Unit (OMU). Accredited intervention on an individual or group-work basis is provided to offenders which seeks to reduce the risk of further offending. This service was previously delivered by Renfrewshire Council and following staff training, is now provided by our own service.

Existing links with employability services including WorkEastRen, Family Firm and Apex, have supported people subject to Community Payback Orders to overcome barriers to accessing employability services. This resulted in a number of people having successful outcomes in accessing training and employment. Similarly, our links to adult education remain strong with the focus in 2018/19 being on our Barrhead project, No Barriers Barrhead, which provides support with literacy and numeracy.

During 2018/19 we made some changes to the structure of the team, including recruitment of three new unpaid work sessional supervisors and an additional support worker. This was undertaken with a view to meeting the demands placed on the service with the introduction in 2019 of the presumption against short sentences. There is an expectation that this legislation, which is set to increase from 3 to 12 months, will increase the number of people made subject to community supervision by the courts.

Unpaid Work

People who were sentenced to undertake unpaid work completed a range of activities within our work squad which operates 7 days per week. During 2018/19 the service completed 10,779 hours of unpaid work in East Renfrewshire. We continue to have strong links with a number of charitable and voluntary agencies with the service assisting in painting and decorating and environmental work. During 2018/19 we chose to focus on developing environmental projects with local partners in order to enhance the local area and enable those on unpaid work to learn new skills. This included tree planting, restoration of Barrhead allotments and building an area to house bee hives in Eastwood. The service also helps to clear sites where unsightly fly tipping has been reported by members of the community.

Diversion from Prosecution

This service is provided to people who have been referred by the Procurator Fiscal who are accused of minor offences. Such cases are overseen by support workers in the justice team. People who agree to participate in Diversion can receive one to-one counselling support, be referred to services such as alcohol and drug recovery or be referred to mental health services for support. There has been a decrease in the number of cases referred by the Crown Office Prosecution Service, although due to reported administrative Crown Office delays, it may be that this increases in 2019/20.

Fiscal Work Orders (FWO)

When an alleged offender appears to have committed an offence, the Procurator Fiscal may make the offender an unpaid work offer. The focus of these cases is public nuisance type offences. A minimum of 10 hours and a maximum of 50 hours unpaid work can be imposed. There was slight reduction in the number people referred for Fiscal Work Orders during 2018/19. Those who agreed to participate carried out a range of duties including assisting with painting, decorating and gardening tasks.

Prison Through-Care

Pre and post sentence support is provided by social workers to people serving long term custodial sentences. The purpose of this is to ensure a smooth transition from prison back into the community. People serving longer term sentences require to abide by licence requirements upon release specified by the Parole Board. Social Workers have attended annual Integrated Case Management meetings with the individual, prison staff and family members to agree release plans and supervision arrangements in the community.

In 2018/19, we had on average 45 – 50 people at any one time serving a custodial sentence (less than 1% of the prison population). Our numbers of women and young people serving custodial sentences remains very low.

In East Renfrewshire, a strong partnership exists between our criminal justice and housing services. These close links ensure short stay accommodation is identified for individuals at the release stage and that they are supported in accessing an appropriate council tenancy.

The Justice Lead Officer has representation on the Multi Agency Risk Assessment Committee (MARAC), bringing valuable information around risk and perpetrators' patterns of behaviour as part of the local multi-agency response to domestic abuse.

East Renfrewshire Community Justice Partnership

The Health and Social Care Partnership has been involved in developing and delivering parts of the local plan for Community Justice – this partnership is led by the Council's Deputy Chief Executive. We work with our partners to lead, develop, support and promote Smart Justice measures that work for those who have offended, those who have been harmed and for our community at large. Criminal justice social work services have supported the partnership's [Community Justice Outcome Improvement Plan](#) (CJOIP).

As a partnership, during 2018/19 we have:

- Engaged with local communities to improve the environment, completing 10,779 hours of activity equating to £88,496 of unpaid work which directly benefited the local community.
- The Community Payback Team have been involved in a range of new projects bringing benefits to the environment, local community and service user groups including local people with learning and physical disabilities. We continue to receive regular feedback from the public on the positive impact that community payback has had on their local community.
- Worked in partnership with adult learning, employability and justice services to support people with pre-employment needs and literacy to support and reduce reoffending.
- Engaged with the Crown Office Procurator Fiscal service (COPFS) to increase and develop the use of Diversion.
- Completed a trauma needs assessment and implemented trauma informed practice training across our services.
- Worked closely with our partners in Victim Support to ensure that victim's rights and needs are supported within the justice system.

4.3 PUBLIC PROTECTION IN EAST RENFREWSHIRE

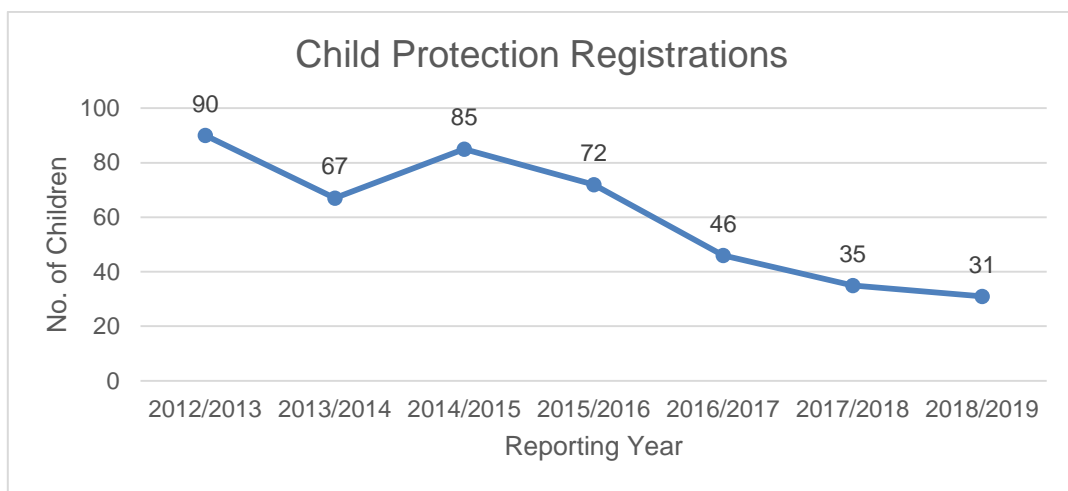
The Chief Officer Group is responsible for the scrutiny and quality assurance of all public protection services in East Renfrewshire. This also includes Violence against Women and Girls. The group is chaired by East Renfrewshire Council's Chief Executive and meets bi-annually and the Chief Social Work Officer acts as their professional advisor. The use of driver diagrams and logic modelling supports the scrutiny of public protection processes, outputs and outcomes. For the purposes of this Chief Social Work Officer report, the data and analysis of all child and adult protection are

provided in the [Annual Public Protection Report](#). In November 2018, East Renfrewshire had its first Public Protection conference focusing on the impact for people and this was a huge success.

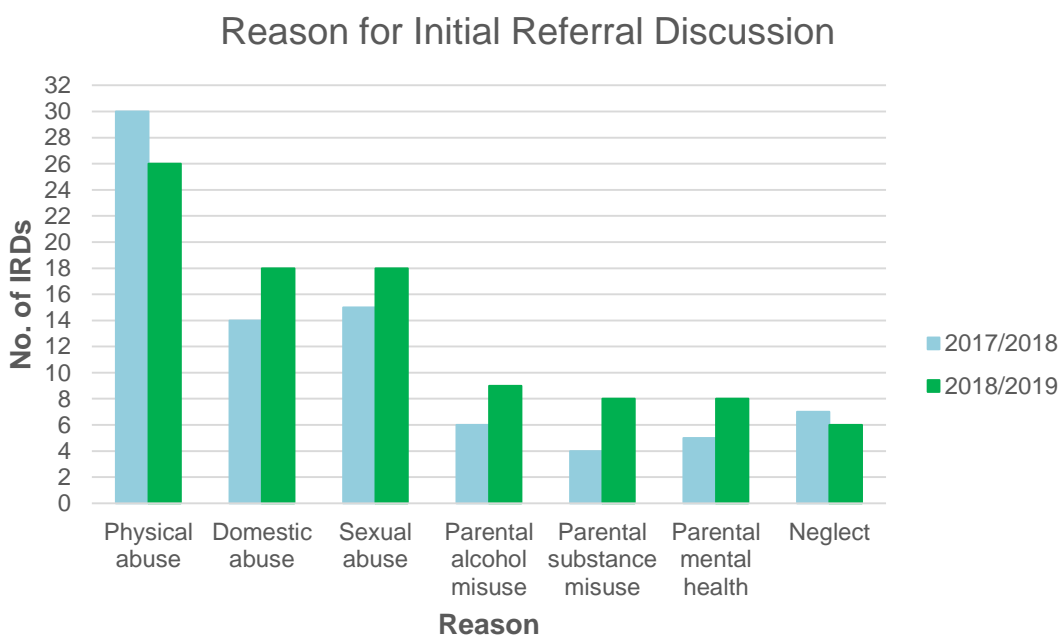
Child Protection, Quality Assurance and Continuous Improvement

The number of children on East Renfrewshire’s Child Protection Register was 31 last year. This is a reduction of 4 on the 2017/2018 year, with the trajectory over the last few years showing a steady reduction. The numbers of children on the register in East Renfrewshire are subject to fluctuation when reporting on individual children and sibling groups due to small numbers. Nationally there has been a 3% increase from 2016/2017 to 2017/2018 and as a consequence of the continued downward trajectory we continually benchmark our self against comparator authorities and have undertaken quality assurance activity that measures the impact for children. We continue to be confident that the reduction in registration has not ultimately impacted on the safety for children within East Renfrewshire.

Child Protection Registrations



Initial Referral Discussion (IRD)

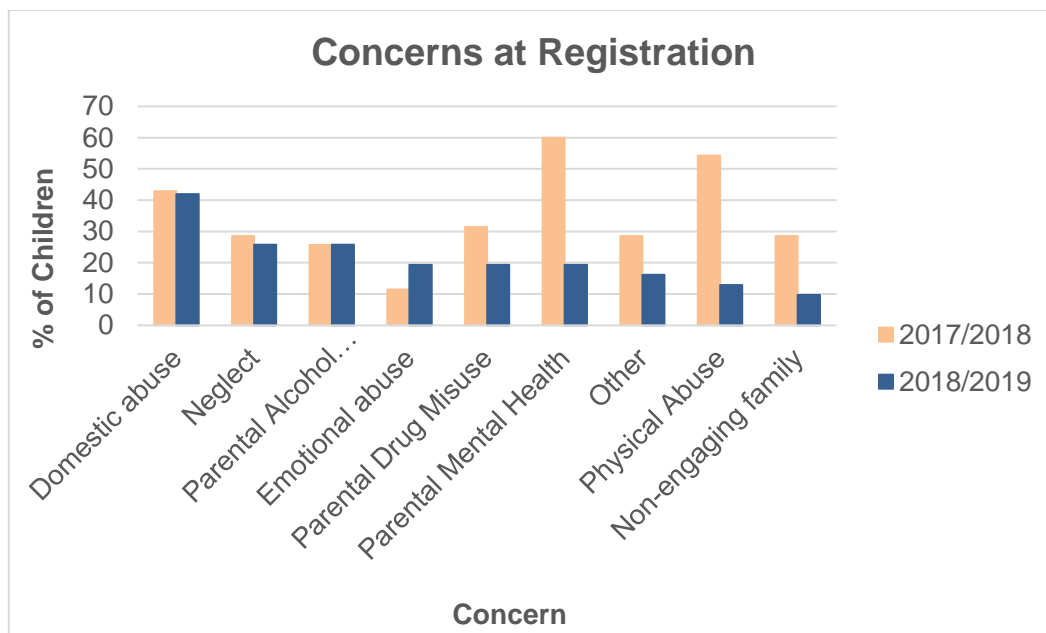


During the period April 2018 – March 2019, we have undertaken 128 Initial Referral Discussion's in respect of 214 children. Initial Referral Discussions are undertaken with police and health staff. This is a significant increase on the 91 children who were subject to Initial Referral Discussion in the preceding year. Following our audit of our Initial Referral Discussion we learned that we had not included children who were currently allocated to a social worker where significant harm had been identified and included them in an Initial Referral Discussion. In August 2018, we implemented the requirement for all children to be subject to an Initial Referral Discussion and this does account for the significant increase.

The six most common reasons for initiating an Initial Referral Discussion during 2018/2019 were physical abuse, domestic abuse, sexual abuse, parental alcohol/substance misuse and neglect. There has been a slight increase in Initial Referral Discussion's relating to domestic abuse, sexual abuse, parental alcohol/substance misuse and a slight decrease in Initial Referral Discussion's relating to physical abuse and neglect. We will continue to monitor these trends over the coming years.

Of the 214 children and young people subject to Initial Referral Discussions, 26% went on to have an initial or pre-birth child protection case conference. Of the 26% of children and young people who were subject to an initial/pre-birth child protection case conference 48% were registered, equating to approximately 12% of all the children and young people who were subject to an Initial Referral Discussion.

Concerns Identified at Registration



The proportion of children who were registered for domestic abuse, neglect and parental alcohol misuse remained the same as 2018/2019. We have seen a significant reduction in the proportion of children who were registered because of concerns of parental drug misuse, parental mental health, physical abuse and non-engaging families. One possible explanation for the reduction may be the implementation of the Signs of Safety model that promotes stronger partnership working with children and their families. This will be explored further over 2019/20.

Children's Quality Assurance and Self-Evaluation

Building on our annual audit of Initial Referral Discussions, a quarterly programme of audit activity was approved by the East Renfrewshire's Child Protection Committee (ERCPC). This is now an established part of our continuous improvement programme for Child Protection and it has identified

significant strengths in our practice and provides us with the reassuring evidence that quickly identifies and timely respond to children at risk of significant harm:

- Our Initial Referral Discussion audit identified that 100% of the children subject to child protection investigation met the threshold for child protection.
- Initial Referral Discussion was assessed as good or above in identifying, analysing and making a decision for children about the risk of significant harm in over 90% of cases.
- Planning to reduce risk to children was assessed as good or above in 97% of cases.

In addition to an established quarterly programme of audit for Initial Referral Discussion, we also regularly review the quality of our Joint Investigative Interviews (JII's), with the audit team comprising of Police (G Division), Social Work, Health, Educational Psychology, Scottish Children's Reporter Administration and Speech and Language Therapy. The multi-agency audit team brings considerable skills and knowledge that is assisting us to improve the quality of the experience for children.

The audit programme is providing us with clear evidence of improvement in this area and both audits have identified significant strengths in systems, practice and reassuringly support's our relational based practice shift that we are building strong supportive relationships with children and their families.

Our improved data set and management information continues to provide the necessary reassurance that children and their families are getting the help when they need it most. This is a significant feature within our continuous improvement and self-evaluation activity.

From our data we can evidence that we intervene earlier. In 2013/14 it took an average of 46 days to complete an initial assessment where there were wellbeing/welfare concerns. In 2018/19 this has reduced to just 11 days. We are confident that children and / or young people who require social work (targeted) intervention are provided with this support timeously. Repeat registrations of children who were previously on the child protection register are nil and this is providing strong evidence that step down support is achieving positive outcomes and continuing to keep children safe.

4.4 ADULT SOCIAL WORK AND SOCIAL CARE

During 2018/19 as part of our Health and Social Care Partnership, Fit for the Future programme we have been working to develop new structures for Adult Health and Social Care (older adult and adult populations). This has seen a move to two localities; Barrhead and Eastwood. The managers for each locality will have responsibility for service planning and delivery for their locality, along with responsibility for an East Renfrewshire wide specialist service.

The new senior management team for Adult Health and Social Care Localities includes a service manager for Adult Support and Protection. This post was added by the Chief Social Work Officer to the structure to strengthen the professional governance for social work, with a dedicated focus on Adult Support and Protection, Adults with Incapacity and Mental Health legislation.

The next phase of our Fit for the Future programme focused primarily on our social work teams and structures as part of our integrated pathways for Adult Health and Social Care Localities. The team managers were appointed in February 2019 in preparation for the new team structure implementation in May 2019.

Barrhead and Eastwood Locality Teams

The Locality Social Work teams have been set up to strengthen our performance in relation to our statutory duties. The purpose of creating the locality community teams is to:

- Improve our response to adult support and protection; delivering proportionate and timely interventions where required.
- Undertake outcome assessment and support planning with people and their carers underpinned by principles of Self Directed Support.
- Respond to Carers Act requirements for adult carer support plans working in partnership with Carers Centre.
- Focus on sustaining people in their homes wherever possible, working together with primary care, community nursing and rehabilitation services.
- Risk enablement approaches to working with people underpinned by sound risk assessment and analysis.
- Further embed the use of technology as part of assessment and support planning.

For some time Jewish Care workers (Health and Social Care Partnership staff aligned to work with the Jewish welfare organisation) have been based at Eastwood Health & Care Centre not Jewish Care. As part of this move there is no longer a dedicated Health and Social Care Partnership Jewish Care resource, although we identify link staff.

Complex Assessment and Review Team

The purpose of creating the Complex Assessment and Review Team is to:

- Review people's outcomes and meet outcomes that remain to be addressed.
- Ensure use of personal, family, community assets and technology has been fully considered in meeting outcomes.
- Enable people in receipt of care and support to exercise choice and ensure they are aware of their individual budget and SDS options.
- Improve the consistency, quality and analysis of the review 'intelligence' specifically focusing on care setting and providers, working closely with contracts staff, care home liaison and care inspectorate.

Learning Disability Team

The Learning Disability Team provides support to people with a learning disability who live in East Renfrewshire Health and Social Care Partnership area and are aged over 16 years, support is also offered to people who care for those who have a learning disability. The team is a mix of social work and health professional staff (nursing, OT, physio, speech and language therapy) and aligned psychiatry and psychology clinicians.

The purpose of the Learning Disability team is to:

- Promote social inclusion, independence and self-care focussing on people's strengths and promoting the outcomes that are important to them.
- Ensure that, as far as possible, people with a learning disability have the same opportunities, rights and responsibilities as everyone else.
- Enable people with learning disability to live as full a life as possible, working closely with colleagues from housing, social enterprises and employability services.
- Support carers of people with a learning disability in accordance with carers legislation.

Further work will be undertaken at the next stage to review the span of control and links with wider locality rehabilitation services.

Hospital to Home Team

The Hospital to Home team leads on our hospital discharge pathways. The purpose of creating the Hospital to Home team is to:

- Develop strong links with hospital sites to enable identification and referral.

- Focus on returning people to their homes wherever possible, working together with care at home, community nursing and rehabilitation services.
- Improve pathways through hospital for adults with incapacity.
- Ensure the right supports are in place to reduce hospital readmissions.

Initial Contact Service

The Initial Contact Service provides a single point of access for all new referrals and contacts for Adult Health and Social Care localities, with the exception of professional to professional health referrals and hospital discharge. The purpose of creating the Initial Contact Service is to:

- Enable us to focus on early engagement - improving outcomes for adults and older people and reducing crisis interventions.
- Create a culture where people feel able to engage in a good conversation, which focuses on outcomes and strengths.
- Provide rapid access to professional advice, equipment, aids and technology – supporting people and their carers to live at home.
- Simplify and streamline referral routes.
- Improve the consistency and quality of information gathered at an earlier stage that informs quality decision making.

Talking Points

Over the past two years the Health and Social Care Partnership and partners have been developing and testing 'Talking Points', a community led support early intervention and prevention approach. Talking Points are places in the community where people can come along and get information, support and advice about adult health, wellbeing and community activities going on in their local area. The Talking Points Core Group consists of 12 cross-sector partners; Voluntary Action East Renfrewshire, Carers Centre, Care & Repair, Recovery Across Mental Health, East Renfrewshire Disability Alliance, Enable Scotland, Health and Social Care Partnership, East Renfrewshire Council Communications Team, Self-Directed Support Forum, Neilston Development Trust, East Renfrewshire Culture & Leisure Trust/Libraries, and Community Volunteers.

Twenty one Talking Points were held between October and December 2018 at various locations across East Renfrewshire. During this time 124 people attended with only 6 requiring referral to Health and Social Care Partnership for further assessment. Following this the Talking Points partners reviewed the model and developed plans for workstreams to look at communications, talking points documentation, third sector and community involvement, and practical arrangements moving forward.

Rolling out in 2019/20 Talking Points will take place across East Renfrewshire at regular and pop up venues. Anyone attending a Talking Point will be welcomed by a 'Greeter', normally a community volunteer, before being introduced to a third sector partner who engages in the Good Conversation. Good Conversations are structured, asset based discussions that enable people to identify what matters to them and to develop a plan that supports them to achieve their outcomes.

In line with the community led support approach, third sector partners take the lead at the Talking Points. East Renfrewshire Health and Social Care Partnership social work staff are present at all Talking Points to support with more complex discussions and to action statutory and protective duties. Agile equipment allows social work staff to access all information on the CareFirst system and if necessary add a referral in 'real time'. Similarly, if the person wishes to meet with a social worker, this can be arranged at their local Talking Points instead of the person having to come into either of the Health & Care Centres. The service offered by Health and Social Care Partnership staff at the Talking Points should replicate the service to be offered via the Initial Contact Team at the Health and Care Centre.

In-house Care at Home Service

An inspection of our in-house Care at Home service highlighted a number of concerns and areas for improvement which we have been working on and will continue to deliver in 2019/20. We have established a comprehensive improvement plan which will see a wide range of activity including improvement to the following areas:

- Care and Support Personal Plans – new quality processes and documentation.
- Medication Management – updated policy, training module and assessment tool.
- Review of Personal Plans – improved planning and review processes.
- Complaints Handling – improved quality in our handling of complaints through training, better processes for compliance and more learning/analysis from complaints.
- Service Delivery Times – in consultation with service users and analysing visit time data we will aim to deliver the most appropriate scheduling for homecare.
- Staffing levels – addressing recruitment and retention issues within the service.
- Staff training and supervision – improving supervision and staff development within the service.

The Care Inspectorate carried out an unannounced inspection of the Health and Social Care Partnership's Care at Home service in February 2019. The Care Inspectorate found that whilst service users spoke very highly of the support workers and their care and compassion, the Health and Social Care Partnership care at home service is delivering poor outcomes to service users. In light of this the Care Inspectorate has graded the service as unsatisfactory for both care and support and management and leadership and weak for staffing. The service has been given nine requirements and one recommendation to meet.

An external mentor who has supported other areas with care at home and quality improvement activity has provided critical friend support to the development of the improvement plan.

The Integration Joint Board agreed an additional investment of £0.750 million in care at home to allow increased capacity within the service to support sustainability and allow management of new demand. An additional £0.250 million from reserves will be used to meet one off costs such as recruitment, development, training and temporary resources.

Health and Social Care Partnership senior officers, including the Chief Social Work Officer in her role as professional advisor to the Council, are meeting regularly with the Council's Chief Executive to report progress on quality improvement activity.

Day Opportunities

We support a wide range of meaningful activities in the community for people with learning disabilities. This includes social enterprise groups delivering bike workshops, jewellery making, gardening groups and kitchen/café training. We also support a foodbank which provide opportunities for people with learning disabilities to develop skills for moving on to more formal training and potential employment. We also support a range of community groups, e.g. social/leisure groups that allow people to follow their interests as well as health groups.

There has been a wide variety of day opportunities for older adults during 2018/19. As a service we have supported 394 adults throughout the year.

Our workforce received an award for Chair based exercise groups and Singing for the Brain Group and this was a joint initiative by the care inspectorate, the Kirkton Service and the Scottish Government to help older people in care be active more often.

Working in partnership with East Renfrewshire Culture and Leisure Trust we support a range of health and leisure Ageing Well activities in the community to help older people keep their bodies and mind as active as possible.

Bonnyton House

During 2018/19 the focus and direction of Bonnyton House has been developed. We supported the closure of Mearns Kirk and we had residents move into Bonnyton House from Mearns Kirk. Although this was a difficult transition for them and their family they have now settled well into living in Bonnyton House. It was agreed that the Health and Social Care Partnership could continue to provide residential accommodation at Bonnyton House and in addition, offer focused support to prevent unnecessary hospital admission, intensive post discharge support, and create a dedicated palliative care service using existing beds. The rehabilitation unit is now operational with dedicated support from a physiotherapist, an occupational therapist and Bonnyton staff. Although we don't currently have a specific unit for palliative care we are supporting individuals within the service. We are developing the knowledge and skills of staff in partnership with MacMillan Cancer through a four day foundation course in Palliative Care.

We have secured funding to refurbish Bonnyton House, which will commence in 2020. This will include refurbishing all the bedrooms, lounge and dining areas, corridors, gardens and the replacement of the roof.

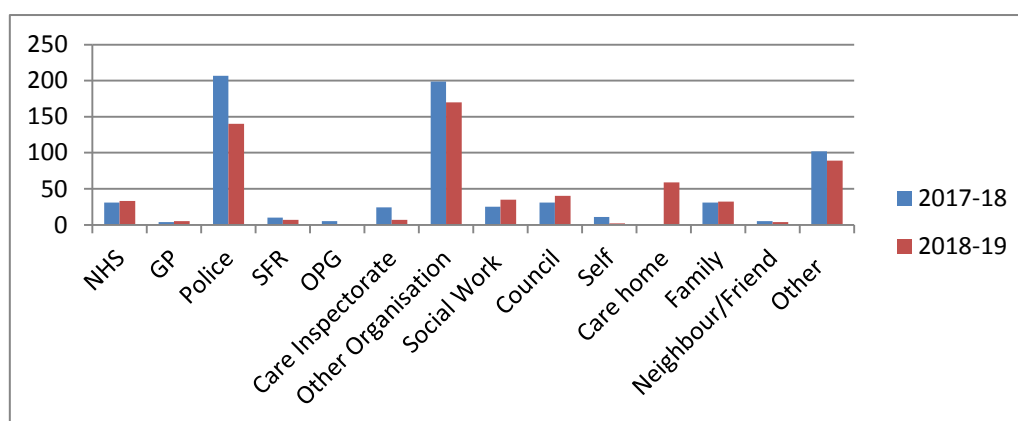
4.5 ADULT PROTECTION QUALITY ASSURANCE AND CONTINUOUS IMPROVEMENT

Adult Support and Protection Inquiries

For the period 2018/19 there were 624 Adult Protection inquiries. This was a decrease of 10% from the previous year when there were 690 Adult Protection inquiries. The reason for the decrease is due to the significant adult protection activity within care homes in 2017/18, when two local homes were closed following intervention by the Care Inspectorate.

Since February 2018 welfare concerns received by the Health and Social Care Partnership have also been recorded and monitored. For the period of 2018/19 the Health and Social Care Partnership received 543 welfare concern referrals. These were predominantly received from Police Scotland.

The table below gives an overview of adult support and protection referrals by source.

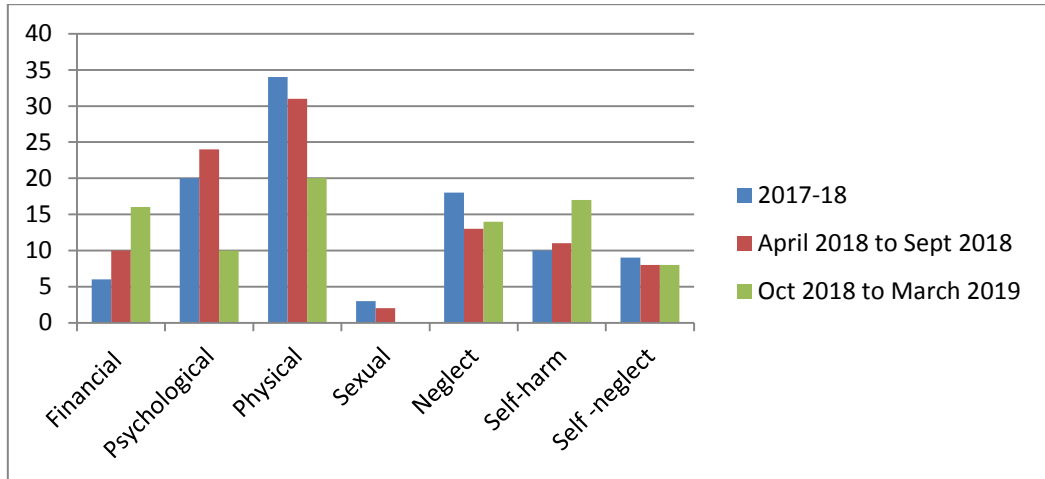


Each year we review the categories of source of referral. In 2018/19 we introduced the category of care home. The referrals categorised as Other Organisation and Other continue to be at a high level, for 2018/19 these categories accounted for 41% of all referrals for that period. This requires further examination and analysis to be able to identify trends; this is currently being looked at as part of the improvement work by the Adult Protection Committee.

Adult Protection Investigations

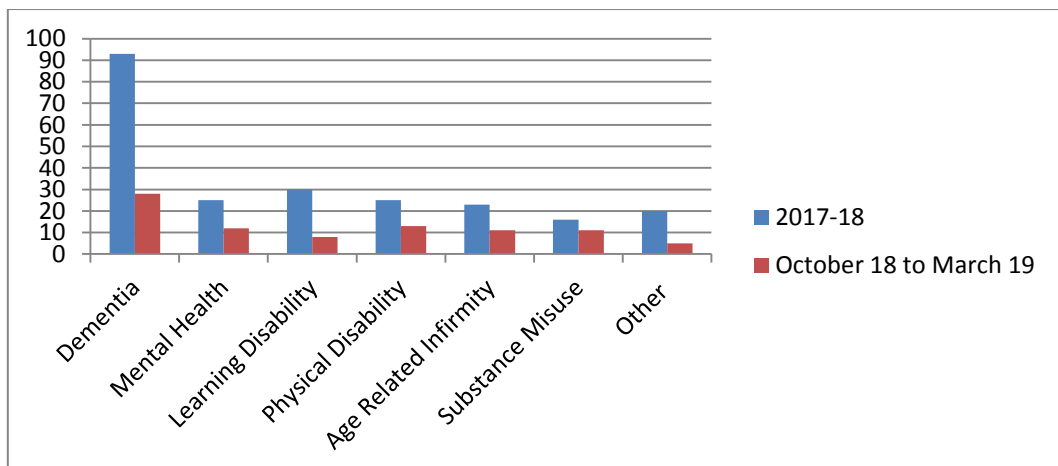
For the period 2018/19 there were 224 Adult Support and Protection investigations that involved 206 individuals. (For the period 2017/18 there were 232 Adult Support and Protection investigations that involved 202 individuals). The investigation activity for the past 2 years has continued to be at a higher than the previous years. The conversion rate for investigations has continued to be at a similar level, for 2017/18 the conversion rate was 34%. For the period 2018/19 the conversion rate was 36%.

The type of harm identified in Adult Support and Protection investigation is analysed in the table below



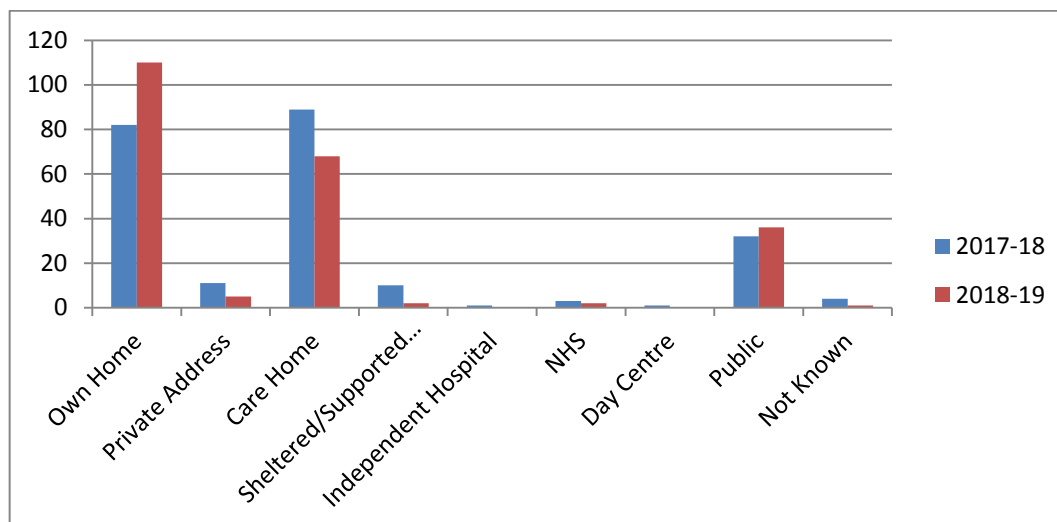
For the periods 2017/18 and April 2018 to September 2018 our Adult Support Protection forms required the council officer to identify all types of harm. As of October 2018 the council officer must now identify the principle type of harm and the secondary types of harm. This change was required due to the reporting requirements for Scottish Government. The figures for October 2018 to March 2019 are for the principle type of harm identified within an investigation.

Service User Group identified in Adult Support and Protection Investigation



There has been a significant decline in the dementia category; it is considered that this is due to the Large Scale Investigation activity that took place in a care home during 2017/18. Due to system issues during April 2018 to September 2018 manual work was required to be undertaken to identify the service user group for investigations. The system issue has been resolved and from the 1st October 2018 we are confident that the data we now receive is accurate.

Location of harm – Adult Support and Protection Investigation



There has been a change in the main location of harm identified during investigations; this has changed from care home to own home. Again the high level of location of harm being in care home in 2017/18 the figures reflected the Large Scale Investigation activity within the local authority.

Adult Support and Protection Improvement Activity

During this period there has been significant improvement activity which has included:

- Training
- Development of Adult Support and Protection processes and practice
- Developing confidence of council officers and team managers within Adult Support and Protection
- Development of accurate data within Adult Support and Protection

The Chief Social Work Officer in the absence of an independent chair for the Adult Support and Protection committee led on an extensive improvement plan for 2018/19 with tasks delegated to the various relevant sub committees. The range of improvement activity that has been carried out has been supported by the established practitioners forum and managers. These groups have been invaluable in offering both a frontline perspective, and provides constructive appraisal on proposed changes. Working with council officers has helped to raise the confidence levels of all the staff involved. Importantly the result of all of this activity has increased the profile of adult support and protection across the Health and Social Care Partnership and with partner agencies. This is ultimately helping to contribute to safer communities across East Renfrewshire.

As part of the Fit for the Future redesign of services within the Health and Social Care Partnership, in March 2018 the Adult Support and Protection strategic lead role became part of the remit for the Chief Social Work Officer, who is now the lead for all Public Protection within East Renfrewshire. This will strengthen the links and the delivery of affective public protection services.

As part of our improvement work quality assurance is the key stone to effective delivery and in May 2018, an Independent Consultant sampled sixteen cases to consider the quality of work being undertaken within Adult Protection. This exercise identified a number of weaknesses and improvement work has been undertaken that includes practice and system development.

In January 2019 a multi-agency case file audit led by the independent consultant took place. It was identified that there had been a number of improvements in practice and systems however it also identified a number of areas for improvement:

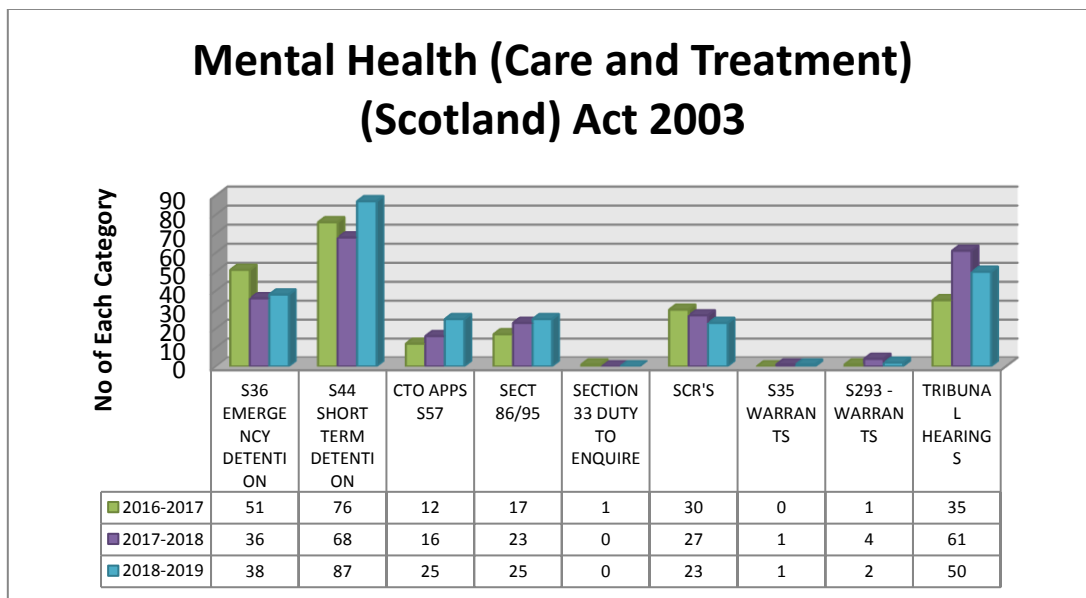
- Risk assessment and Analysis
- Protection Planning
- Involvement of Advocacy and Police
- Multi-agency Working.

In October 2018 an independent learning review into the practice around the Large Scale Investigation into Greenlaw Grove was commenced. The review is scheduled to conclude in May 2019 and the identified findings and outcome will be outlined in next year's Chief Social Work Officer Report.

4.6 MENTAL HEALTH

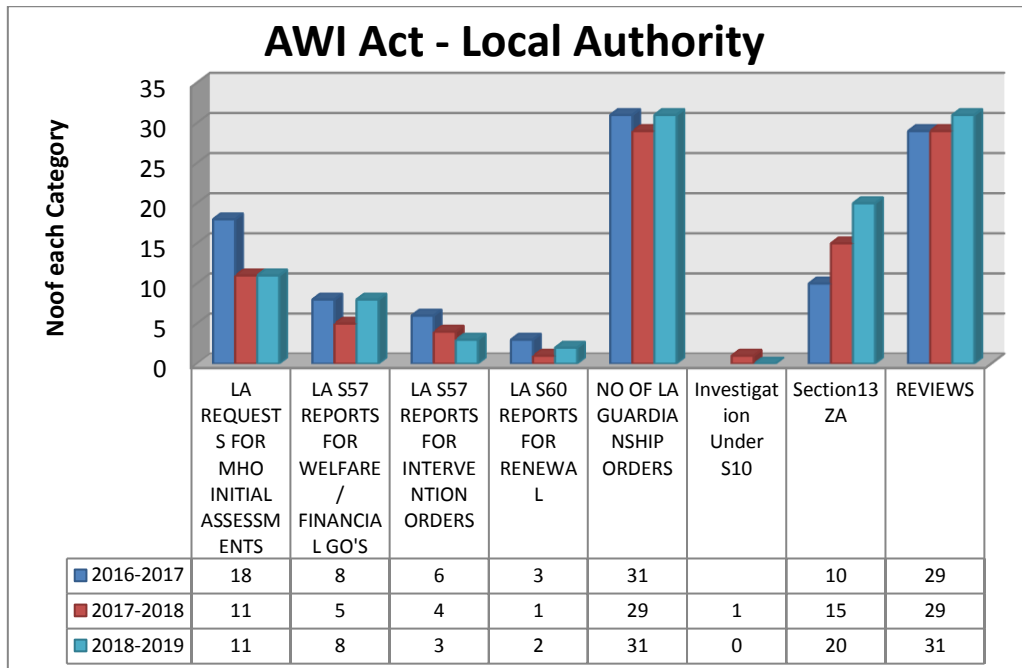
The Mental Health Officer service continues to discharge its functions under the Mental Health (Care and Treatment) (Scotland) Act 2013, Mental Health (Scotland) Act 2015, and Adults with Incapacity (Scotland) Act 2000, on behalf of the Local Authority as delegated to the Health and Social Care Partnership.

The Mental Health (Care and Treatment) (Scotland) Act 2003, and Adults with Incapacity (Scotland) Act 2000 continues to present challenges and pressures on the service. Contributory factors to this have been due to an increased demand for Mental Health Officer service over the past few years, new legislative responsibilities and workforce pressures. The graphs below highlight statutory activity under both Acts in comparison with the previous year's figures.



There has been a steady increase in the number of short term detention certificates granted e.g. 28% increase from 2017/18. Significant Case Reviews (SCRs) have not been completed for all significant events due to pressures on the Mental Health Officer service as noted above. However, not all will require a Significant Case Review, or a Significant Case Review has already been completed and only requires updated. The increased number of short term detentions has impacted on the number of Compulsory Treatment Order applications made and granted i.e. 16 in 2017/18 to 25 in 2018/19. Attendance at Mental Health Tribunal Hearings has also increased with Mental Health Officer's having attended 27 Tribunal hearings in 2017/18 and 34 in 2018/19.

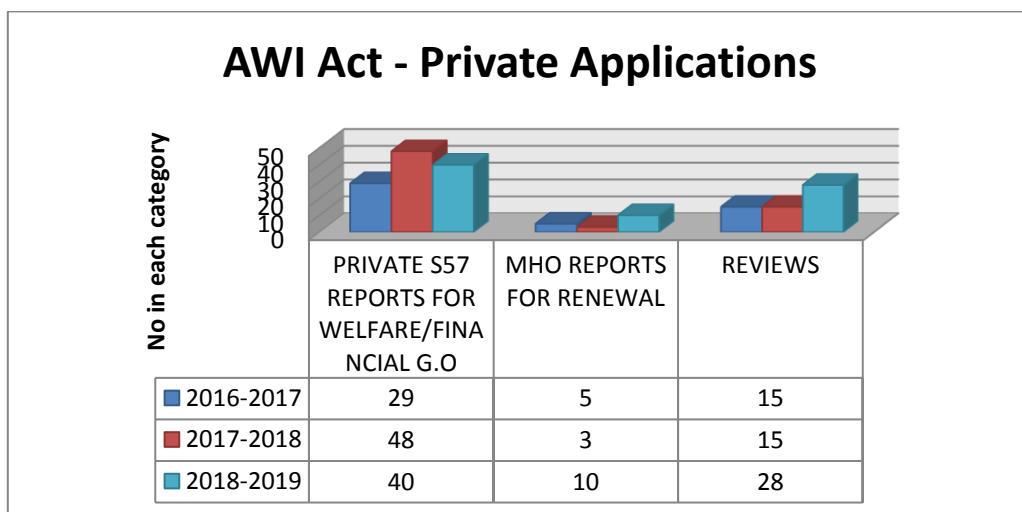
The Chief Social Work Officer is responsible for the governance and management of local authority Guardianship Orders. The graph below shows that the number of initial assessments remains much the same as the previous year.



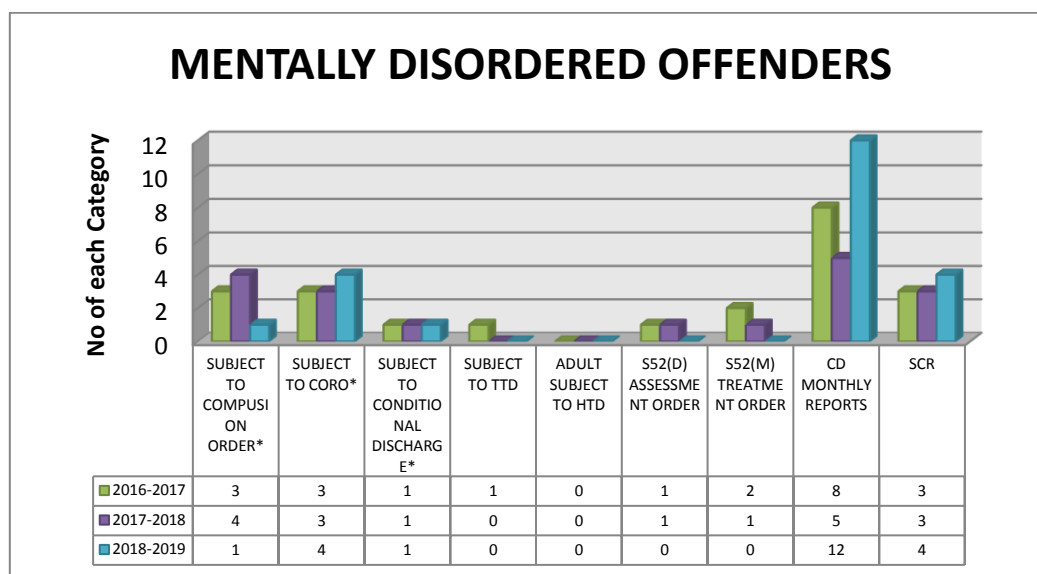
There has been an increase in the number of Section 13za meetings requiring attendance of Mental Health Officers that is necessary to ensure that the rights, will and choices of the adult are upheld and that there is no deprivation of liberty.

Private Welfare and/or Financial Guardianship referrals have reduced slightly from the previous year. However there was an increase in the number of renewal of guardianship orders. This number will continue to rise over the next few years as Orders are being granted for shorter terms i.e. 3 or 5 years with few orders are being granted for 10 years or indefinitely.

Supervision of private welfare guardians continues to present a major challenge to the Authority given the increasing numbers of guardians to be supervised. The current number is approximately 170 Guardianship Orders for supervision, with many of these orders having two or three guardians. There has been an increase in the number of complex cases where more intensive supervision of the guardian/s is required.



Referrals to the Authority in relation to mentally disordered offenders remain low.



Moving forward, the challenge will be to recruit Mental Health Officers to ensure that there will be sufficient numbers of qualified social work available to fulfil duties and functions under both Acts. The age demographics, nationally, of this workforce is also a significant pressure and will compound our longer term ability to fulfil statutory duties. The Adult Protection Unit at the Scottish Government is in process of implementing a Mental Health Officers development grant scheme, as one of the key commitments of the 2017-2027 Mental Health Strategy. It aims to support Local Authorities in identifying a shortfall in their Mental Health Officers numbers to train additional Mental Health Officers between 2020 and 2023. Locally the Chief Social Work Officer over 2019/20 will reviewing the delivery, functions and capacity of the Mental Health Officers within East Renfrewshire.

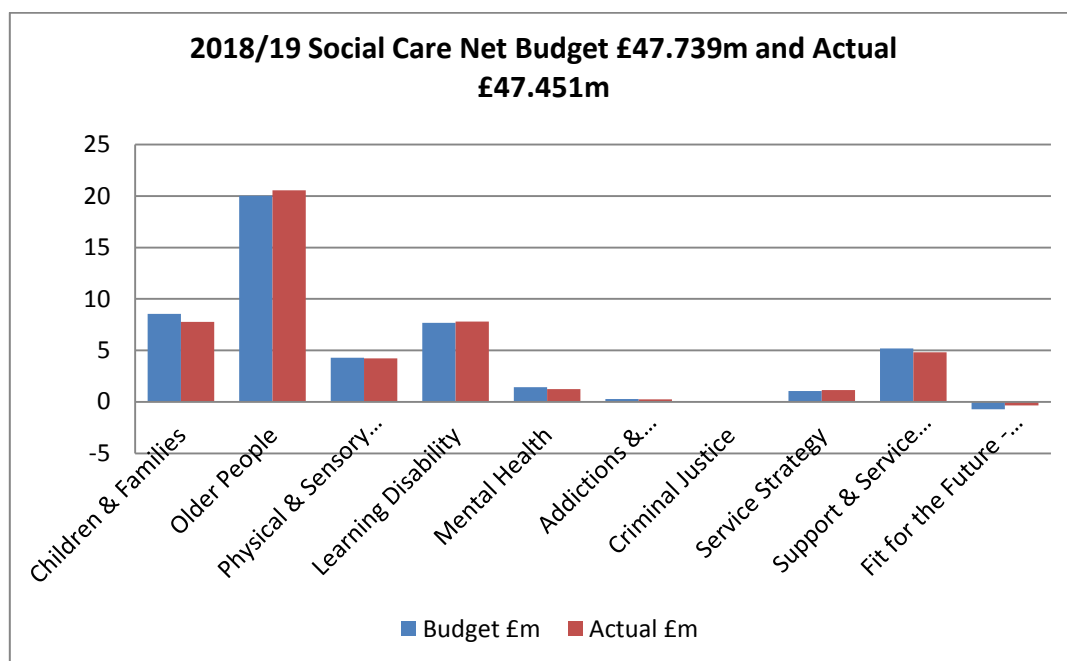
5. FINANCE

East Renfrewshire Integration Joint Board has the strategic responsibility for planning and delivery of health and social care services for the residents of East Renfrewshire. The 2018/19 total Integration Joint Board resources were £133 million, of which £116 million was our directly controlled revenue budget. The Integration Joint Board ended the year with a £0.26 million underspend.

The social care net budget was £47.7 million and we ended the year with an under spend of £0.29 million (0.6%) and the key messages are:

- We had a continued focus on delivering future financial sustainability. As a long standing integrated partnership we have already made savings and efficiency gains that can be achieved from the integration of health and social care. We delivered our savings target of £0.4 million.
- We made significant progress on our Fit for the Future change programme and did not need to use planned reserves of £0.4 million against the £0.73 million saving attached to the programme.
- The main reasons for our operational underspend were turnover from vacancies and the impact of restructuring, offset in part by the costs of purchased care.
- We continued to work with our service providers to ensure the Scottish Living Wage and other Fair Work practices were fully implemented.

The service performance against budget is summarised:



Future Financial Challenges

Our Medium Term Financial Plan sets out the potential pressures we face over the next five years. Demographic pressures remain a particular challenge for East Renfrewshire as we have an increasing elderly population, a higher life expectancy than the Scottish average and a rise in children with complex needs, resulting in an increase in demand for services.

6. CONTINUOUS IMPROVEMENT

East Renfrewshire Health & Social Care Partnership has had a sharper focus on continuous improvement and quality assurance. The aim of all of our improvement activity is to further support the principles outlined in our strategic plan, namely a commitment to relational, strength and evidenced based approaches across all areas of our work.

Training has been provided in continuous improvement to staff within Children Services, with a specific focus on service user feedback and the continued promotion of improvement methodology across childrens workforce.

Further work has been undertaken with managers across adult and children services to support the implementation of practice standards in key areas namely; recording, professional supervision and chronologies, this work is ongoing and there will be a considerable focus over 2019/20 on the adult services social work workforce.

A programme of large scale partnership events has taken place in children and families, bringing staff together across the partnership to share best practice and learn from each another. These sessions have been led by the Chief Social Work Officer and have provided an opportunity for staff to connect with the strategic vision, reflect on achievements and consider opportunities for learning.

As previously outlined in the report the Chief Social Work Officer assumed responsibility for all public protection activity in an effort to strengthen links across this area. This led to a review of the various subgroups that serve the respective child and adult protection committees, with a sharper focus on continuous improvement, quality assurance, policy and procedure and training. This change also resulted in the development of East Renfrewshire's first Public Protection Multi-Agency

Development Programme, launched at its inaugural Public Protection Conference in November 2018 and a new Public Protection Quality Assurance Timetable.

7. WORKFORCE PLANNING AND DEVELOPMENT

Learning and Development

In addition to the various public protection events and implementation of evidence based models, there has been a range of other learning and development activity, with the aim of improving staff knowledge and skills. This has been undertaken with a strong commitment to evaluate the impact of learning and development activity that ensure sustainable and meaningful improvements for practice.

The Health and Social Care Partnership has a workforce plan for 2016 - 18 to support the Strategic Plan that has been updated for 2019. A newly revised workforce planning group was established in 2019 with the task of producing a new plan in line with Scottish Government guidance. In the meantime, the Health and Social Care Partnership and Integration Joint Board have continued their Fit for the Future review programme which they embarked on in 2017/18 to address future needs and meet required savings. The programme has been established to undertake:

- End to end reviews for all services in community care.
- Consider structural changes to be fit for the future.
- Review roles and responsibilities.
- Review and lean processes.
- Explore digital opportunities and review fitness of IT equipment.

The principles underpinning the structure review are that:

- It supports our focus on strategic priorities.
- It delivers the required savings.
- It enables stronger integration.
- It is consistent in approach re span of control and layers of management.
- It embeds planning and analytic capacity in operational services.
- General management will be supported by strong professional leadership.

In line with the strategic plan and recognising our responsibilities to the wider workforce, the Health and Social Care Partnership intends to work together with providers and contractors to shape our local health and social care market and define our future whole system shared health and care workforce requirements including:

- Whole system workforce numbers and skill mix
- Future roles, competencies and registration requirements
- Qualities, interests and behaviours

This work will enable us to inform the next update of the workforce plan including actions relating to:

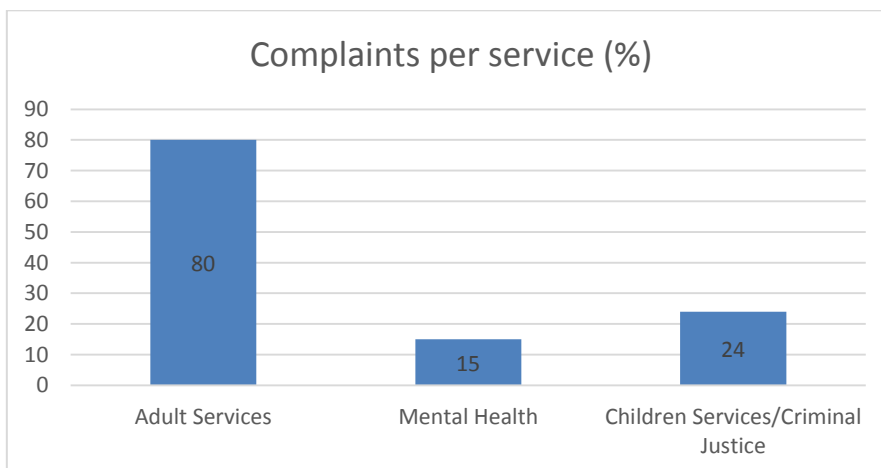
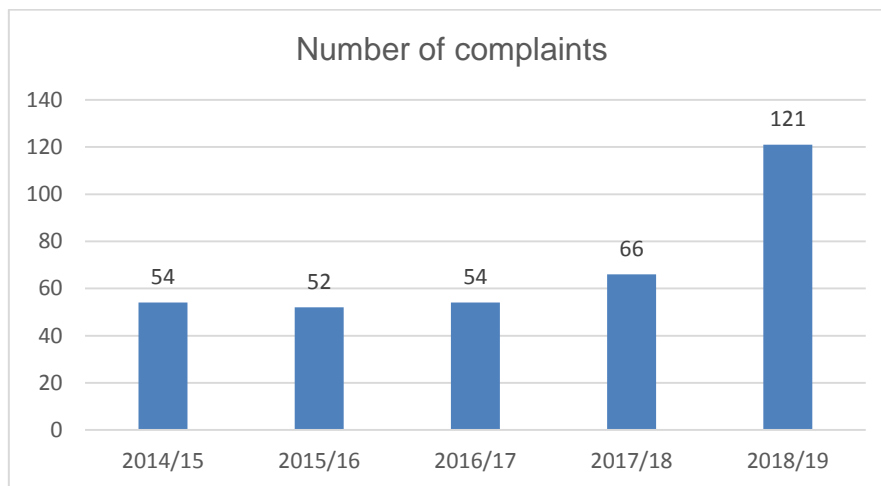
- Joint recruitment and development of employability pipelines
- Development of wider health and care career pathways
- Integrated health and care learning and workforce development plan

Complaint Handling and Learning

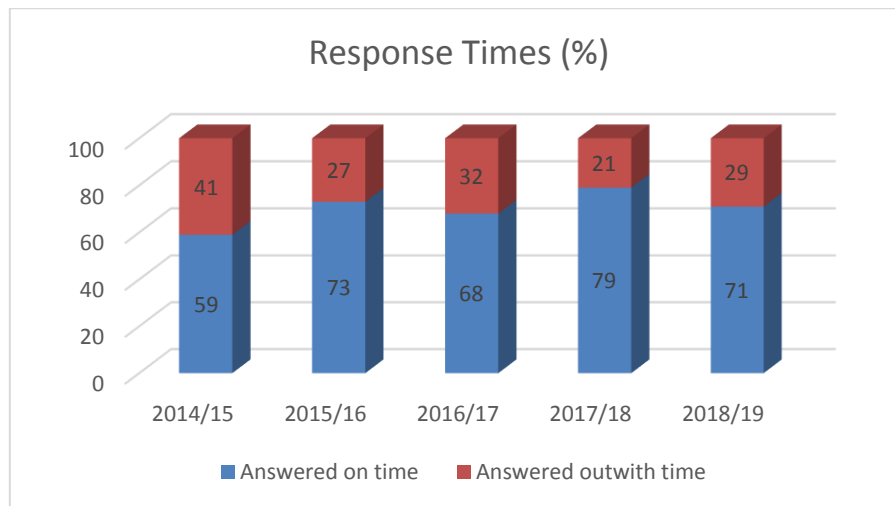
From 1st April 2017 East Renfrewshire Social Work Service adapted and adopted the Scottish Public Service Ombudsman (SPSO) Social Work Model complaint handling process.

During 2018/19 no complaints were referred to the Scottish Public Service Ombudsman for consideration.

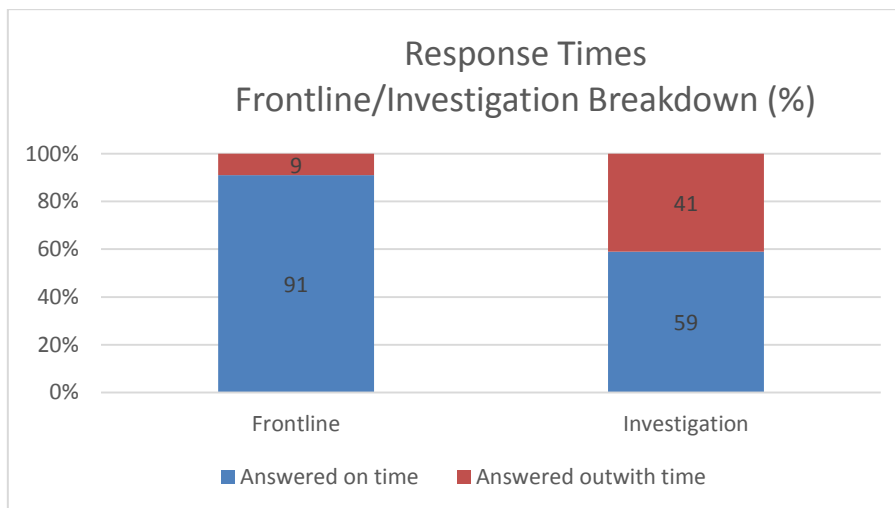
During 2018/19, 121 complaints from service users and carers were received. This represents a significant increase compared to the 66 complaints logged the previous year. This increase was due in part to changes and improvements in the way Adult Intensive Services (Home Support) record complaint details onto the complaint database and not necessarily an increase in the number of complaints received.



71% of complaints were responded to within the required timescale, a decrease in the previous years performance figure of 79%. The often complex and multi organisational nature of the Health and Social Care Partnership complaints continues to be a challenge in meeting timescales.



Of those complaints logged 38% were frontline complaints. 91% of frontline complaints were responded within the target of 5 working days. 62% were investigation complaints. 59% of investigation complaints were responded to within the target of 20 days.



25% of complaints were not upheld, 19% partially upheld and 56% upheld. Each of the upheld complaints have been analysed and learning actions identified.

An overview report detailing complaint type, timescales, complaint detail, actions and learning is presented to the Clinical and Care Governance Group for scrutiny and action on a quarterly basis.

8. CARERS

During 2018/19 the partnership work collaboratively with a range of stakeholders, including individuals who care for and receive care, to develop our approach to the requirements of the Carers (Scotland) Act 2016.

The Health and Social Care Partnership developed a 'Care Collaborative' with our partners in Voluntary Action East Renfrewshire to engage and plan with people in their everyday lives, differently. This approach encouraged involvement in the design and development of how we are delivering our services to carers. For example, our carers centre has a devolved responsibility for producing adult carer support plans, testing a 'trusted assessors' approach to that could be used across care services. Working with GPs and the NHS to promote social prescribing, with the end result being that GPs can directly refer patients on to appropriate carer service from their consulting

room utilising SciGateway. Team members are working with Shared Care nationally on innovative approaches to developing a range of short breaks for people to access.

The partnership has supported a number of initiatives within East Renfrewshire schools to create a general understanding of what it means to be a young carer and how this can be a short term or even a longer term role that will require ongoing support.

Working with the NHS at Board level we have developed good quality advice and information so that hospital have an understanding of the carer role and how NHS staff will involve carers in discharge planning.

In 2019/20 we will build on this through the creation of a dedicated carers lead role to support the work force and carers across East Renfrewshire.

9. STATUTORY FUNCTIONS

Summary of key achievements and areas of strength

- Strong performance and more robust quality assurance processes across statutory functions for children and adults at risk of harm.
- Excellent work in permanency improvement that is making a real difference to securing and improving children and young people's life chances.
- Our Integrated Children's Services Plan formal one year annual report was published in 2018/19 and the report highlighted significant improvements and progress across a suite of wellbeing indicators.
- Our Corporate Parenting approach and Champions Board.
- Our partnership with children and young people through the Champions Board and other creative approaches to improve outcomes of care experienced young people in East Renfrewshire.
- The shift in culture towards relational based practice that is underpinned by evidence based programmes that support family decision making.
- The strong performance of our Request for Assistance team that provides a single point of access for children, young people and families resulting in them accessing the right help at the right time.
- Improvement in the compliance with Initial Referral Discussion (Child Protection) supported by a rolling programme of audit activity including Joint Investigative Interviews.
- Positive feedback from children, their families, social workers and our partners concerning the impact of our evidence based models of intervention.
- The work of the Intensive Support Service in shifting the balance of care for children and young people within the authority.
- Self-Directed Support (SDS) and the increasing number of people, including children, young people and their families exercising choice and control over their support.
- Continued delivery of high standard criminal justice services.
- Implementing the carers legislation.
- Establishing carers eligibility framework.
- Developing a shared Short Breaks statement across the partnership.
- Re-establishing the strategic planning group and developing a commissioning plan.
- The consistent delivery of positive outcomes on our Personal Outcomes measures.
- Reduction in delayed discharge bed days.
- Community led support and the implementation of our new front door.
- Development of person centred planning tools to support our Community Led Support Talking Points.
- Promoting and supporting the local development of recovery communities and peer support / mutual aid.

- Supporting people to engage in meaningful activities and make a positive contribution to their communities through our day opportunities.
- Our first annual Public Protection Conference.

10. KEY CHALLENGES AND PRIORITIES FOR YEAR AHEAD

I am delighted to report that there have been significant improvements made over the last year, in particular within children and families but not exclusively. The shared vision and belief by all within the Health and Social Care Partnership has made this happen and I am extremely proud of the many social workers and our health colleagues who have gone that extra mile for our most vulnerable children and adults that no doubt will have a lasting impact on their lives.

During 2018/19 we entered the final year of our current Corporate Parenting Plan and early indication identifies improved outcomes for our looked after children. Our corporate parenting plan co-exists with our Champions Board and as we enter year four of our Champions Board (2019/20), we will build on the momentum and commitment already made by members of the board and wider corporate parents. Our Champions Board will shape our new corporate parenting plan and this will be aligned to the Care Review Stop:Go list.

We plan to expand our learning and development plan around corporate parenting; this training is aimed for council employees and elected members. As part of this learning and development plan, the Health and Social Care Partnership will also support a modern apprenticeship (ring fenced) for care experienced young people to work alongside the Champions Board Coordinator and Youth Intensive Support Service.

We will also review all documentation within children and families that supports assessment and planning to ensure that the focus starts and finishes with the child at the centre. We are committed to learning from families about the impact of our systems and practice on their ability to keep their children safe. We will support this work by quality assurance and audit. Alongside other local authorities who have implemented Signs of Safety and Safer Together, we will establish a learning community.

Whilst we changed our Domestic Abuse pathways this year, for all citizens within East Renfrewshire. We will review the impact of the new ways of working and measure the outcomes that they have delivered for the residents within East Renfrewshire. We will strengthen our approach by creating a post specifically for Domestic Abuse that will lead whole system change.

We will continue to focus on ensuring the best outcomes possible for children looked after at home. The success of our model of integrated service delivery for children continues to generate interest across the national sector and with a number of local authorities across Scotland. They are keen to explore with us the success we have made in shifting the balance of care, improving outcomes for our care experienced children and young people and the provision of the right support at the right time, through our single point of access.

The adoption of relational based practice across integrated children's service workforce has made a significant impact on the culture and practice. We will also take time over the forthcoming year to reflect on how the journey of redesign has inspired and motivated a workforce, providing opportunities for learning and career progression.

For 2019/2020 our approach will continue to build and embed our relational based approaches to working with children and their families with good practice examples being shared across the children's workforce. This will strengthen our integrated delivery and help us to consolidate our innovative practice that is evidencing improved outcomes for our children and their families.

For those who cannot live at home with their parents, we will continue to explore all kinship care options as early as possible so that we can help children remain within their extended families and

communities. However, we recognise that for some children, this may not be possible and we will continue to endeavour to improve our timescales for making permanence decisions for children in foster care, in order that they may have a safe, stable and secure home for the remainder of their childhood.

As already stated throughout the report, developing the workforce is key to improving outcomes for our service users, so in the year ahead we will continue to focus on improving our recording practice by training our staff in new recording standards. The quality of supervision practice will be a significant area of work over 2019/20.

Over the last year we have continued to strengthen our Adult Support and Protection practice by training and developing our workforce. This will continue to be underpinned by the implementation of the Adult Support Improvement Plan that has created a more robust Quality Assurance Framework. The Adult Support and Protection Committee will continue to oversee the multi-agency training and awareness rising around Adult Support and Protection.

Within Adult Services we continue to experience a rise in demand. We have been concerned that the building of new retirement and care homes in East Renfrewshire has led to an increase in our most frail and complex older population and a gradual increase in older people moving into care homes. During 2019/20 we will seek to understand this trend and redesign our services to be more effective in supporting people to maintain their independence at home and in their local community.

We also experience demand from young people leaving school with complex needs. We know that we cannot sustain this demand moving forward and will have to reconsider the remit of our learning disability services. Closer working between Children's Services and Adult Services will identify how we address this demand together. We have not only focussed on the demands on both services but have also highlight the positive outcomes being achieved for our young people underpinned by social workers drive and commitment to focus on young people's strengths and aspirations. This will continue to be a clear priority for us moving forward as it will help us develop stronger pathways.

There is an emerging need to develop a local learning disability strategy this will be carried out alongside our colleagues in day service to ensure a joint approach regarding how we move ahead to address some of the emerging issues whilst ensure positive outcomes for the people within the East Renfrewshire Health and Social Care Partnership area.

Whilst Day Opportunities embarked on a period of review and transformation around four years ago and whilst there has been some progress made in how we support people in East Renfrewshire there is a recognition that we still have a journey to make if we are to sustain the ongoing demands and to fully embed the vision of people being part of their local community with a sense of identity and belonging.

A key priority for adult services is to develop a suite of management and performance information for adult statutory social work and social care with the intention that the data produced will be used 'intelligently' to support continuous improvement and transformational change. We will also focus on our service users experience of our Initial Contact Team and the data collated will inform moving forward the design of adult social work services. Governance is critical to the effectiveness of quality service delivery to our residents and a specific adult services Clinical and Care Governance group will be established to drive this improvement.

The delivery of high quality mental health statutory services remains a challenge nationally due to the shortages of Mental Health Officers and the general demographics and age profile of the workforce. As a consequence of these emerging national issues the Chief Social Work Officer will lead the local review of our Mental Health Officers statutory function and delivery within East Renfrewshire.

Our Strategic Plan 2018-21 sets out our vision for "Working together with the people of East Renfrewshire to improve lives" and our seven strategic priorities are to support:

- Mental wellbeing among children, young people and their families;
- Community justice outcomes and reduced offending;
- Reduced health inequalities;
- Greater independence at home;
- Support for people experiencing mental ill-health;
- Reduced unplanned admissions to hospital;
- Support for unpaid carers.

Our improvement activity will focus on each of the above priorities.

For 2019/20 our net budget for social care is £49.3 million and that includes a savings challenge of £3.1 million. To date we have achieved £1.7 million of this target and are working to ensure the remaining £1.4 million can be achieved on a recurring basis. We recognise we may not realise all of the £1.4 million in 2019/20 and will use reserves to bridge any gap.

We have also made a significant investment of £1 million in our Care at Home service to increase capacity, support sustainability and allow management of new demand.

We expect 2019/20 to be a challenging year, as we have a much leaner structure and have taken out flexibility within the budget for projects and investment in order to meet our savings challenge. We are monitoring the impacts of the extension of free personal care and carers legislation on our demand for services.

As outlined in this report, the impact of continuing efficiency savings over the last four years has been a significant challenge for the health and social work from both a health and social care perspective. This will continue to be a significant challenge over the next year. There are many benefits of sharing the risks associated for service users and patients by being integrated and particularly having a shared approach to risk however it needs to sit alongside the efficiencies that require to be delivered and the challenges this will present moving forward.

The Chief Social Work Officer is central to addressing these challenges and will be required, alongside her fellow management team, to advocate, challenge and develop strategies that lessen the real impact to the most marginalised and excluded citizens who through poverty, health, unemployment and adversities will continue to experience inequality through harm and abuse.

Finally, I would like again to thank all the social work staff and our health colleagues who have and continue to work tirelessly for the benefit of the citizens of East Renfrewshire. Your dedication, commitment, creativity and humanity truly never ceases to amaze me, the improvements and successes within this year's report are all yours.

Kate Rocks
Chief Social Work Officer
Head of Public Protection & Children Services