

EAST RENFREWSHIRE COUNCIL31 October 2018Report by Chief Social Work OfficerCHIEF SOCIAL WORK OFFICER ANNUAL REPORT 2017/18**PURPOSE OF REPORT**

1. This report presents to elected members the Chief Social Work Officer's Annual Report for 2017/18. The report is attached at Appendix 1. It is presented in the format 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 Chief Social Work Adviser to Scottish Government uses this information to produce a national report.

**RECOMMENDATIONS**

2. The Council is asked to comment 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. This report will be submitted to the Clinical and Care Governance Committee on 31<sup>st</sup> October 2018 and to the Integration Joint Board on 28<sup>th</sup> November 2018.
5. The report provides a brief overview on the profile of the local authority and outlines the delivery of statutory social work services within this context. Furthermore it describes partnership and governance arrangements that support the delivery of effective social work services. The report seeks to set this out over the following area:
  - Statutory functions for all care groups;
  - Performance;
  - Continuous improvement and practice development;
  - Planning for change;
  - User and carer engagement and participation;
  - Finance;
  - Workforce planning and development; and
  - Key challenges for 2017/18.

6. 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, children's services, criminal justice and community care. The report primarily acts as the required annual report to elected members and council on the operation of the statutory social work. It also acts as the Chief Social Work Officer report to the Clinical and Care Governance Group.

## **FINANCE AND EFFICIENCY**

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 financial austerity and references the likely impact to providing high quality services over the forthcoming years.

## **CONSULTATION**

8. None

## **PARTNERSHIP WORKING**

9. The Chief Social Work Officer role is key in a number of partnership arrangements including the Health and Social Care Partnership, North Strathclyde Multi Agency Public Protection Arrangements (MAPPA), East Renfrewshire Child Protection Committee, East Renfrewshire Adult Support and Protection Committee, and the voluntary sector.

## **IMPLICATIONS OF THE PROPOSALS**

10. There is no direct equalities impact arising from this report

## **CONCLUSIONS**

11. This report provides an overview of the professional activity for social work within East Renfrewshire for 2017/18 through the delivery of the statutory functions and responsibilities held by the Chief Social Work Officer.
  - The report outlines strong performance across the sector in the statutory functions most notably.
  - Strong performance and more robust quality assurance processes across statutory functions for children and adults at risk of harm.
  - The improvement in performance measures for our most vulnerable children and young people.
  - 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.
  - Self-Directed Support (SDS) and the increasing number of people, including children, young people and their families exercising choice and control over their support.
  - The work of the Youth Intensive Support Service in shifting the balance of care for children and young people within the authority.

- 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.
  - Continued delivery of high standards within criminal justice services.
  - The shift in sectorial culture towards relational based practice that is underpinned by evidence based programmes that support family decision making.
  - The consistent delivery of positive outcomes on our Talking Points - Personal Outcomes measures.
  - The best performance in Scotland for number of bed days due to delay discharge for people aged 75+.
  - Lowest emergency admission rate for adults in Greater Glasgow.
  - Reduction in delayed discharge bed days through the contribution of the social care workforce.
  - Re-design and efficiency work within services including rehabilitation and enablement services, child health services, dementia post-diagnostic support and public social partnership work.
  - The implementation of improvement science throughout the Health and Social Care Partnership and the positive impact on practice, systems and culture.
  - Expansion of our telecare programme, with, 1600 additional residents benefitting from Telecare over the course of the 3 year national Tec programme.
  - 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.
  - Through our day opportunities redesign work supporting people to engage in meaningful activities and make a positive contribution to their communities.
12. There does continue 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 policy and new legislation.
  - The impetus to redesign services to ensure that savings are delivered over the forthcoming years and the potential for any unintended consequences for service users due to change management activity.
  - The management of increased service demand at a time of diminishing resources.

The landscape for all public service will continue to change over the coming years and, in particular, social work will be required to adapt to meet the growing demands associated with protecting and caring for those most vulnerable and at risk in our community. 2017/18 continued to be a challenging year for 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.

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 in 2018/19. The Fit for the Future review although needed in response to the rising demand, greater expectations and pressures on public finance

will need to ensure that the delivery of this programme of change does not have any unintended consequence of increasing risk for our most vulnerable citizens. Particularly as our workforce for the future will be required to become more resilient due to the financial impetus to deliver services in a more targeted, innovative way to ensure that we continue to improve the life chances and opportunities for our most marginalised residents.

13. At the heart of all effective social work practice 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 and this annual report is a strong testimony to our staff who make that difference every day.

## **RECOMMENDATIONS**

14. The Council is asked to comment 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**

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October 2018

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## **BACKGROUND PAPERS**

Chief Social Work Officer Annual Report 2016-17

## **KEY WORDS**

A report presenting an overview of the Chief Social Work Officer role in 2017-18

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



# **EAST RENFREWSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP**

## **CHIEF SOCIAL WORK OFFICER ANNUAL REPORT**

**2017 – 2018**

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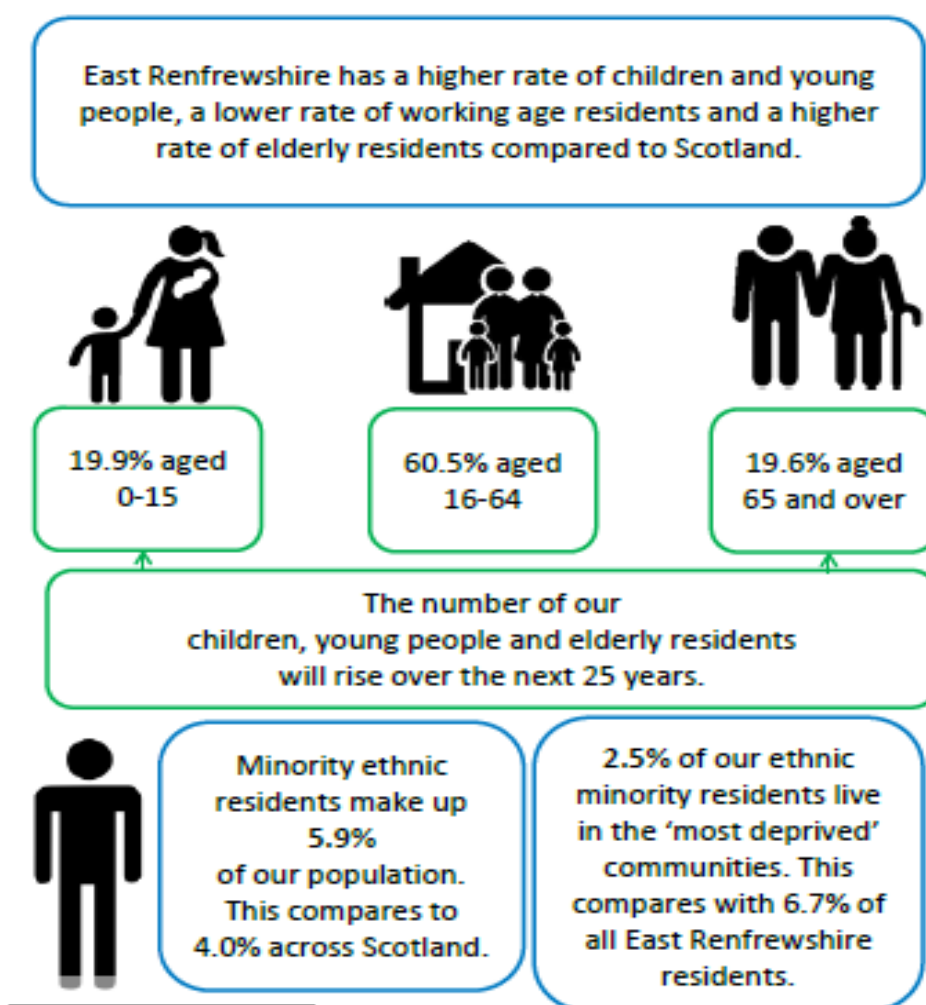


## 1. INTRODUCTION

### Our Population

From community planning work locally we know that:

- East Renfrewshire's population is increasing. In particular both our youngest and oldest populations are increasing. These are the groups which are the greatest users of universal health care services.
- People over 80 are the greatest users of hospital and community health services and social care. East Renfrewshire is attracting people of this age because more retirement and care homes are choosing to open in our area.
- People with complex health conditions and profound and multiple disabilities are living longer and require intensive health and social care supports.



East Renfrewshire is an area that generally performs well in a national context with:

- Lower rates of teenage pregnancies.
- Higher breastfeeding rates.
- Lower rates of children living in poverty.
- Higher positive school leavers' destinations.
- Lower proportions of residents claiming out of work benefits.
- Lower crime rates.
- Lower levels of early mortality and higher life expectancy rates.

Some of the biggest inequalities are experienced by whole populations in geographic communities suffering from deprivation although there are also issues which affect people regardless of where they live. Mental health and social isolation are less dependent on geographical location and continue to be a challenge for all services and partner organisations.

## 2. PARTNERSHIP STRUCTURES / GOVERNANCE ARRANGEMENTS

East Renfrewshire Health and Social Care Partnership's integration scheme was developed and approved under section 7(2) (a) of the Public Bodies (Joint Working) (Scotland) Act 2014. This CSWO report reflects the third year of us moving 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 aforementioned legislation.

### Strategic Planning Group

Our Strategic Planning Group was established in December 2014. To date the group has focused on developing and consulting on the Strategic Plan and considering the approach to Locality Planning. It has:

- Overseen the development of the Strategic Plan through a focus on each of the strategic priorities;
- Supported the development of locality planning and engagement; and
- Ensured alignment between the Strategic Plan and the plans of each of six Health and Social Care Partnerships within the Greater Glasgow area.

In our Strategic Plan we set out our partnership vision of how we will achieve this. Working together with the people of East Renfrewshire to improve lives by:

- Valuing what matters to people.
- Building capacity with individuals and communities.
- Focusing on outcomes, not services.

Our commitment to working together is:

- With individuals - as partners in planning their own care and support.
- With carers and families - as partners in the support they provide to the people they care for and ensuring their support needs are recognised.
- With communities - as partners in shaping the care and support available and in providing opportunities for people to get involved in their communities.
- With organisations - across sectors, including our Community Planning partners and the Third Sector. We will work in partnership to co-commission, forecast, prioritise and take action together.
- With our staff - as partners in developing and delivering our vision, valuing their knowledge, skills and commitment to health and social care.

### Strategic Commissioning

The Health and Social Care Partnership is currently refreshing its strategic plan. The challenges of increased demand set against diminished funding will be reflected within a set of options for delivering safe services within a reduced funding context. To achieve this, the development of a wider 'public' service context is required. Community Led Support is an initiative within adult

services to develop a range of responses that reduce demand by positioning advice and information within a 'good conversation' model at the front door. For this model to work, it is essential to involve community anchor organisations (including the local TSI) and the wider third sector provider base in the planning and delivery of services. Our carer's service within the provisions of the 2016 Act have been trained and resourced to provide adult and young carers assessments within East Renfrewshire.

### **Annual Performance Report**

In East Renfrewshire we have been leading the way in integrating health and care services. Our partnership has always managed a much wider range of services than is required by the legislation. Along with community health and care services, we provide health and social care services for children and families and criminal justice social work.

Over the last ten years, our integrated health and social care management and staff teams have developed strong relationships with many different partner organisations, which focus on improving outcomes for the people of East Renfrewshire.

Our [Annual Performance Report 2017-18](#) has given us an opportunity to demonstrate how we have delivered on our vision and commitments over 2017-18. 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 deliver effective social work services, the Clinical and Care Governance Committee considers the following areas fundamental; service and work force development, governance, risk management, service user feedback and complaints, standards, education, learning, continuous improvement and inspection. It is a formal sub structure of the Integrated Joint Board and provides regular scrutiny on the areas requiring development and improvement. Quality assurance is equally weighted to social work and health, ensuring that the interdependencies and integrated practice is captured. More information can be found in the [Annual Clinical and Care Governance Report](#).

The membership of the group includes the Chief Social Work Officer; Clinical Director, Chief Nurse, Allied Health Professional Lead, service user and carer representatives, third sector and independent sector representatives and Health and Social Care Partnership senior management.

### **The Social Care Landscape within East Renfrewshire**

The local market covers provision for a range of services for children and young people, adults and older adults. Set out below are some of our challenges.

We are now seeing some adjustments to the local care market which is introducing uncertainty and risk. An increase in care home developments continues to place demands on primary care services and social care services provided by the partnership. Whilst the council is keen to support economic development this places a corresponding pressure on the range of health and social care services provided locally.

In addition the quality of care home provision reflects some of our concerns with the closure of one home by the Care Inspectorate. The occupancy levels of care homes continue to be above 85% within the local area. Nationally staff turnover within care homes is 22%, compared to 17% in 2015, which indicates a trend that should concern us all.

The percentage of long-stay residents in the 85-94 age range (males and females) has grown by 6% (20012-17), this compares to a Scottish picture showing a gradually reducing trend over the same period of approximately 1%. The HSCP will need to work closely with the local market to develop a range of solutions that can influence positively this trend.

We continue to see local commitment to the Fair Work practices agenda across our supplier market. 100% compliance with the requirement to pay the living wage and East Renfrewshire's decision to fully fund the payment for overnight support has been welcome by our supplier market. However, whilst in the care home market the average increase has been 13% over 3 years, the sector estimates that the actual staffing costs increase has been between 22% and 26% for an average independent sector provider.

Whilst the ambition of the Scottish Living Wage (SLW) policy is welcome, it needs to be considered within the overall settlement when considering demand for social care services. Recruitment and retention remains an issue for the public sector and independent sectors alike, it is therefore unlikely that the fair work practices policy on its own will encourage people to view social care as a positive career choice.

### **Services for Children and Young People**

The partnership has a full range of options for supporting our children and young people. The closure of a commissioned residential service in East Renfrewshire in 2016 has supported the involvement and contribution of parent / carers in developing individual support options for their children. This is outlined in section Children with Disability. The range of specialist children's secure, residential / non-residential and education services offers operational staff certainty with regards to both price and quality when arranging particular types of placements. For example, the Fostering Framework has seen an actual spend of £304,500 (ERC) and will run to March 2019, providing value and purchasing certainty in key areas of service delivery.

### **3. IMPACT OF LEGISLATIVE CHANGE**

The key areas of legislative change, all of which have had significant implications for social work services in 2017-18 in East Renfrewshire include:

- Children's and Young People Act (2014)
- Community Justice
- Carers Scotland Act 2016
- Mental Health (Scotland) Act 2015

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**

##### **Early Identification and Intervention**

The Request for Assistance (RFA) team was established in 2014 and continues to ensure that children and their families, the community and partners receive a thorough and prompt response to any referrals and / or enquiries for a child or young person. The team remains staffed by

experienced social work practitioners who provide advice, guidance, assistance and interventions on a range of issues from child wellbeing to child protection.

From May 2017 to May 2018 the RFA Team completed a total of 1294 initial assessments, with just under 12% of these referrals being placed for allocation within the Community Teams. Through robust pathways and signposting most children are best placed to be supported by other partners whether that be universal services or Tier 2 services.

Robust screening of referrals continues to be a feature of the success and there is now much earlier identification of children who may be at risk of significant harm or require a Tier 3 (targeted) intervention from our Community Teams.

Additionally, the waiting time of children who are assessed as needing a social work intervention has significantly reduced, with just under 90% of children who require a Tier 3 service (targeted intervention) from the Community Team being allocated a social worker within two weeks of an initial assessment being completed.

## **Our Response to Domestic Abuse**

Within the same time period the RFA team received 290 referrals in respect of domestic abuse. From these referrals 48 families were referred to the East Renfrewshire Domestic Abuse Referral Group (DARG). From this some children went on to require a child protection investigation.

The RFA team continues to provide a robust domestic abuse pathway and this is working well; with much earlier identification, intervention and multi-agency working being at its foundation. All domestic abuse referrals are risk assessed and screened on a weekly basis and a very pro-active and prompt response is in place for all victims of reported domestic abuse.

Examples of the many improvements include: prompt referrals to The Scottish Reporter's Administration (SCRA) where there is a need for compulsory measures for the child / young person and earlier planning and assessment for those requiring more targeted intervention. This service reduces risk and improve outcomes for survivors and children affected by perpetrator patterns of coercive control.

The team also has a joined up approach in working with partner agencies and our colleagues in Criminal Justice. It is our aim that the principles of 'Safe and Together' will strengthen our practice and those of our partners in health, education, housing, the third sector and the Police. This is an exciting and innovative development that will be fully implemented over 2018/19.

## **Our Process**

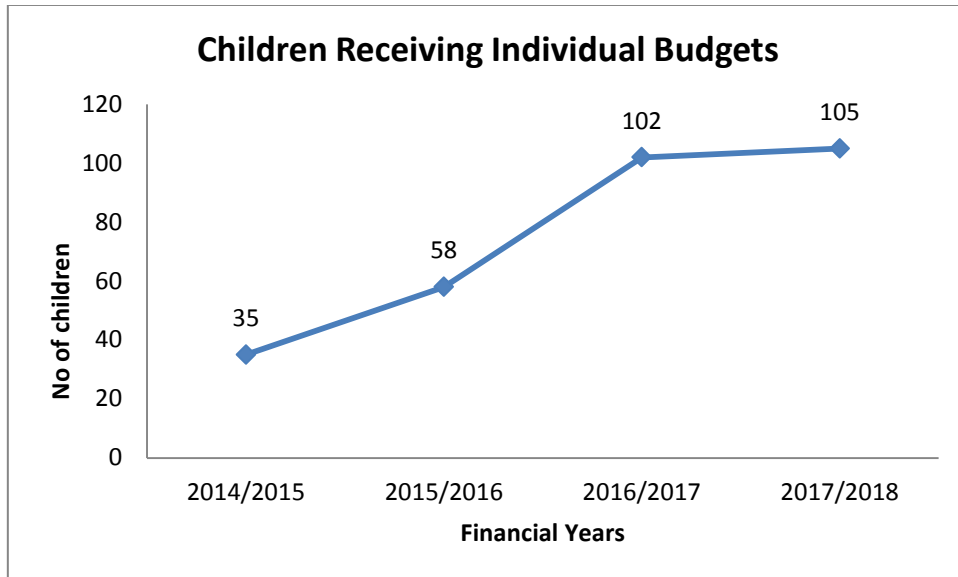
Our multi-agency Domestic Abuse Referral Group (DARG) meets on a monthly basis and is now well embedded in practice and Multi-Agency Risk Assessment Conference (MARAC) will be established in late summer 2018 within East Renfrewshire. Moving forward, funding has also been agreed for a MARAC Co-ordinator and the Request for Assistance team will also screen all adult domestic abuse referrals, recognising that the same pathways into support should equally apply to all.

## **Children and their Families**

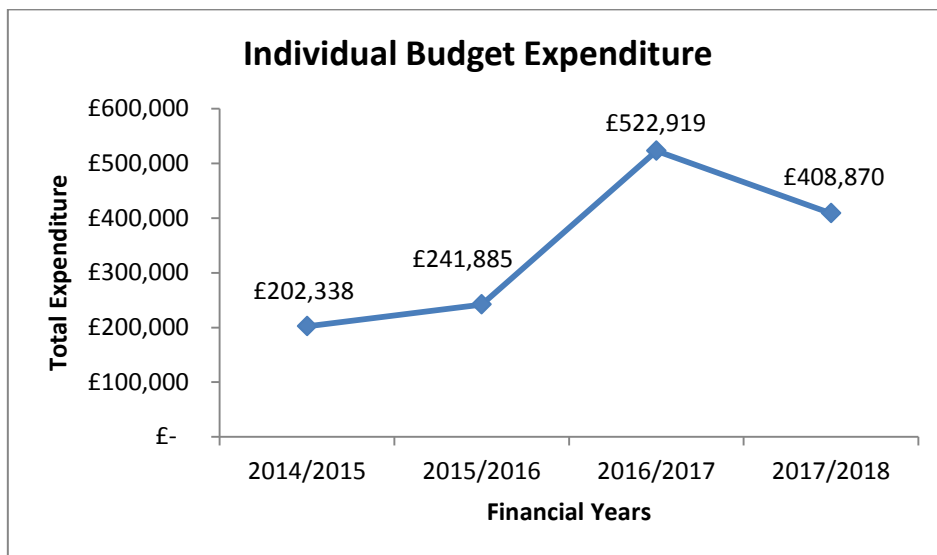
### **Children with Disabilities**

The number of children and young people affected by disability has risen in East Renfrewshire and children with disabilities constitute a third of all allocated cases within the teams. We have fully

adopted the principles of self-directed support in partnership with the children, their families and other people who are important to them. We recognise that good support planning is reliant on relationship based practice, starting with the family recognising what matters to them and we are embedding this way of working throughout children’s services.



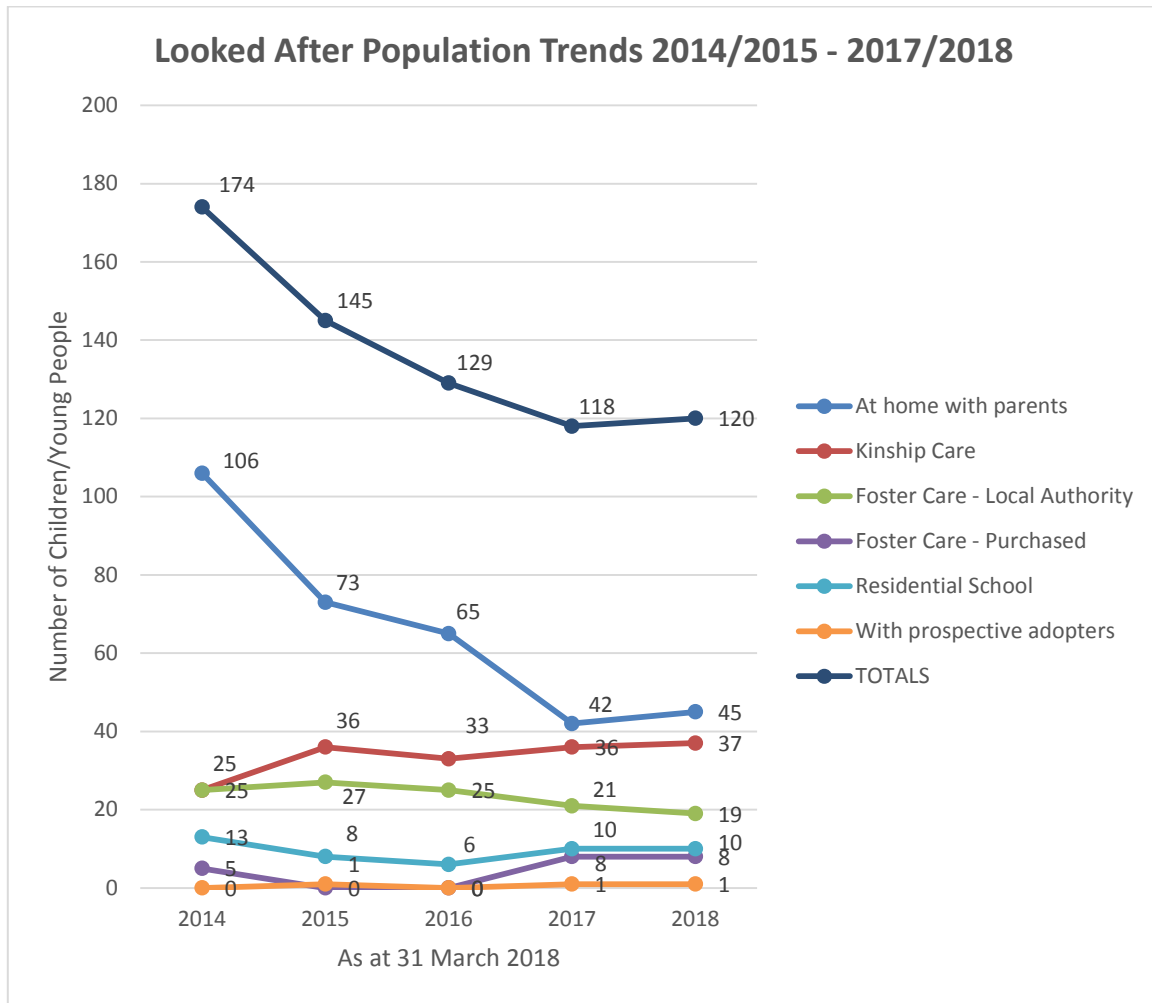
The number of children in receipt of an individual budget has increased by 300% (35 – 105) since 2014. In 2017 60% of children with disabilities who are allocated to social workers are in receipt of an individual budget. This will be an area of significant growth and budgetary pressure as we move forward.



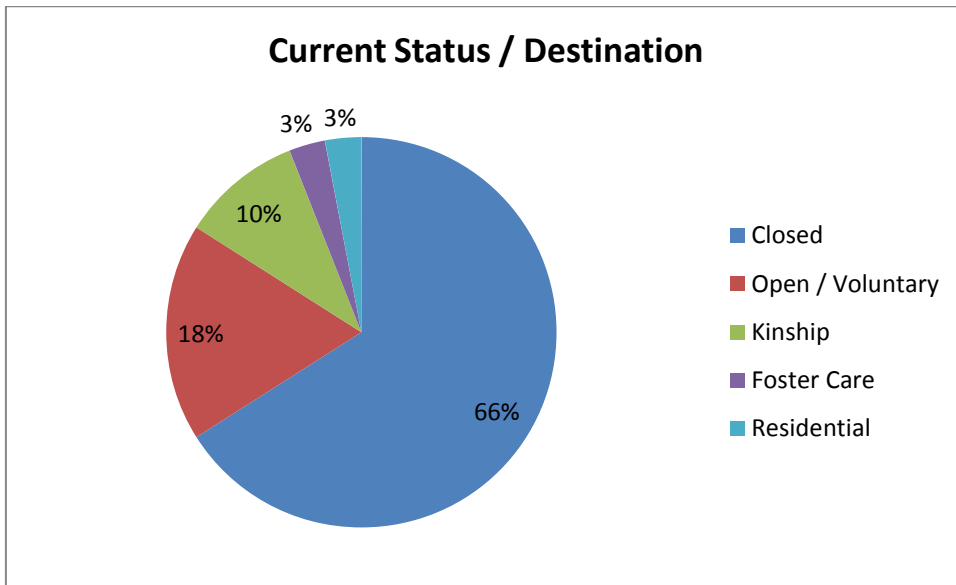
There has been a 200% rise in the expenditure for children / young people who receive SDS over 2014-18, with the average budget award for a child / young person reducing by 32% in the same period. This would appear to demonstrate the effectiveness of new planning frameworks and a strengthened approval and review process that seeks to ensure a consistency and equity of approach. 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, and further analysis will be needed to consider the required financial investment moving forward.

**East Renfrewshire’s Looked After Children and Young People’s Population - A Profile of our Children**

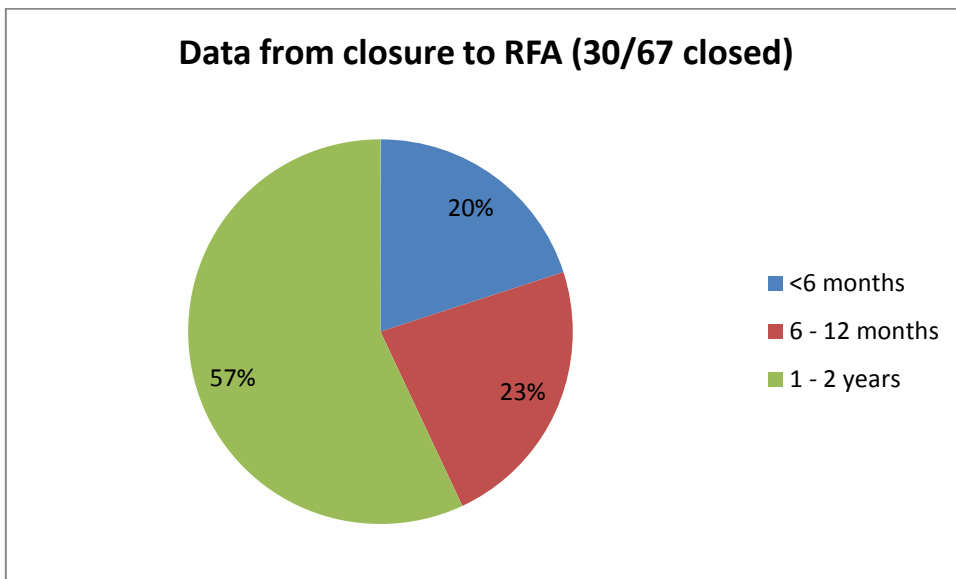
On 31 March 2018, 120 children and young people in East Renfrewshire were looked after in a range of settings. Of these 68 of the children were boys (57%) and 52 were girls (43%). This constitutes approximately 0.5% of the total children’s population of the area and is one of the smallest proportions in Scotland. We have continued to consolidate the PaCE (Permanence and Care Excellence) Programme, working to improve outcomes for children by securing permanent destinations for them. This 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 respective placement categories has remained stable from 2017 to 2018.



Further analysis of our reduction in children who are looked after at home has shown that since January 2016 to March 2018 a total of 102 Compulsory Supervision Orders for children and young people at home with parents were terminated. Of the 102 children and young people, 66% of their cases have been closed to social work. The remainder remain open on a voluntary basis with 16% moving to kinship care, foster care or residential respectively.



We undertook further analysis of the 67 cases that were closed and found that 30 had a further contact with RFA since closure, however for each there was a recommendation of no further action from social work and the child / young person's wellbeing was more appropriately supported by the named person services.

**Intensive Family Support Team**

The Intensive Family Support Team provides flexible intensive services to young children (under 12 years) and their families over a seven days per week service, including evenings and weekends. In partnership with families and community social work staff, the team deliver a range of tailored supports to younger children and their families to enhance parenting capacity, improve relationships, build resilience and promote positive change. Over 2017-18 this service has continued to place relationship based practice at the centre of intervention, listening to and

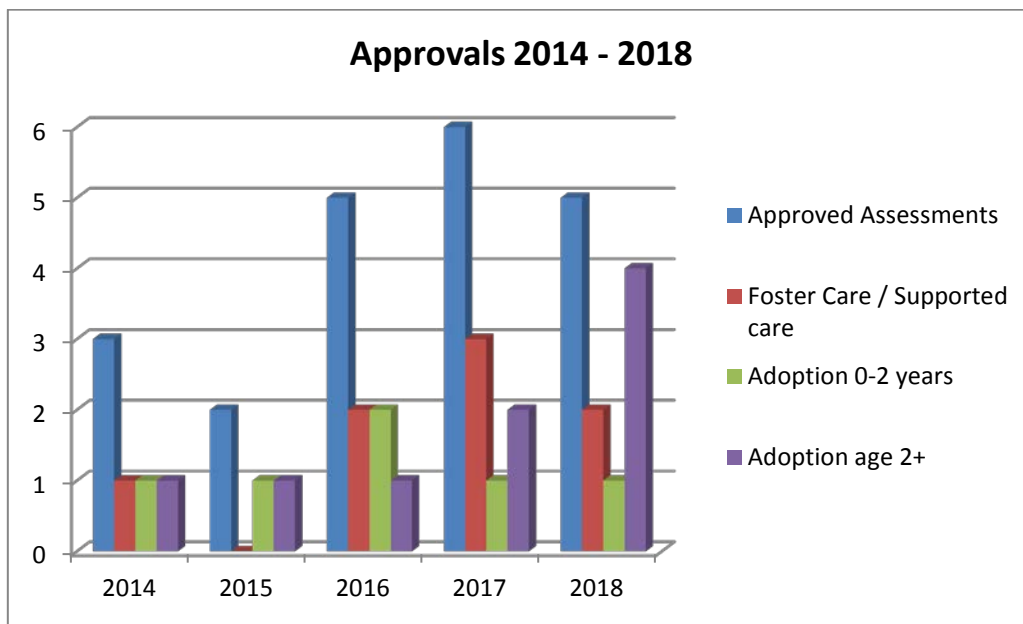


empowering the families we work alongside, providing individualised, responsive support. Interventions offered include: direct support for children; group work; family/parenting support; holiday activity programmes. The team also provide parenting capacity assessments which contribute to decision-making in permanence.

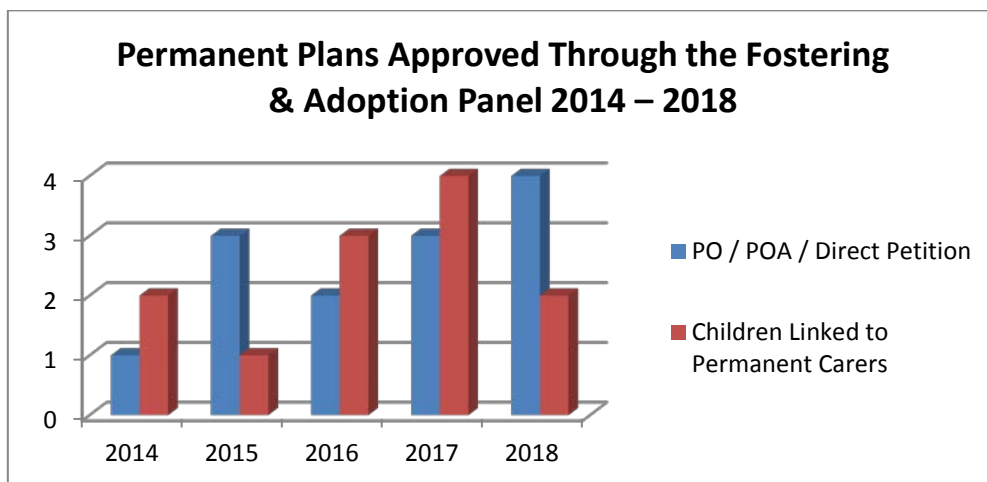
**Fostering and Adoption**

Fostering and Adoption Services are managed through the Intensive Services (Child and Family Support) and are pivotal to ensuring that our most vulnerable children are provided with high quality services and permanent families.

Adoption and Family Placement - the tables below provide information on activity in this area:



Our adoption assessments overall continue to increase at a steady rate evidencing the shift in culture and practice by securing children earlier.



This is also an area that overall continues to improve and again evidences the shift in culture and practice.

During 2017-2018, the service had 20 referrals in relation to adoption enquiries; 5 adoption assessments were completed by the Intensive Services for Children and Family Support team and three of these families have been linked to children. There are 3 further adoption assessments in progress. The team have engaged in process mapping and reflective sessions to screen and assess prospective adopters in order to maximise opportunities to recruit families. The team has progressed step-parent applications to adopt and inter-country adoption applications.

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 2017-18, 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.

### **Foster Care and Supported Care**

There are currently 17 registered foster carer households with 24 children / young people looked after. Carer's registration is regularly reviewed in line with regulations. Continuous opportunities for learning and development are provided to meet the ongoing needs of carers and to ensure that children and young people feel safe, included and respected within their placements.

During 2017, the service registered an adult placement service with the Care Inspectorate to enable East Renfrewshire to develop a supported carer service where young people can remain in their placements up until they are 21 years. The service will also support additional carers to enable more young people to live in loving households. This reflects the statutory duties of Children & Young People's Act (2014) for continuing care and aftercare. It also reflects a local commitment to support our young people to remain in their area of origin and benefit from the ongoing support and guidance from those who are important to them.

In November 2017 East Renfrewshire launched a campaign to provide young people aged 16 years and over with a loving family home in recognition of changing responsibilities to support care-experienced young people up to the age of 26. We are actively working across our Intensive Services to build capacity and encourage people to take on this rewarding role and will continue to involve our young people in this process. To date, the service has responded to 19 enquiries. Two supported carers have been approved and young people have benefitted from placements with our new supported carers.

In 2017, 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 integrated into an action plan which is currently being progressed. This is expected to improve the resilience of the service and enhance practice to support future need by care-experienced children and young people within East Renfrewshire, and will be regularly reviewed during 2018-19 to monitor improvement progress.

## Improvement Activity for Looked After

The PACE 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 CSO for more than two years. We also wanted to prioritise planning for our most vulnerable 0-3 year olds.

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

Vision: Our children are loved, safe, and secure and involved throughout their life journey.

Stretch Aim 1: By 31st October 2017 all children looked after and accommodated before 1st April 2017, will have a LAC review that makes a permanence decision.

Stretch Aim 2: From 1st April 2017, any child accommodated will wait no longer than 6 months for a LAC review to make a permanence decision.

Both aims have been met 100% and we will continue to measure the stretch aim 2 to allow for consolidation of good practice.

Improvement Activity:

- New Permanence Planning Procedures completed.
- New LAC review minute format in place, including a checklist for chairs.
- Adaptations to CMAP in place to include previous LAC episodes and analysis of permanence options.
- New tracking document for all LAC in place.
- Joint training between panel members and social workers.
- Workshops on parenting capacity assessments and analysis
- First concurrent planning case.
- New Kinship Care Guidance and Procedures in final draft.
- IFST changes to parenting assessments, working agreements and contact.

Moving forward into 2018/2019 we will consider a refreshed Stretch Aim which will take into account the needs of children in kinship care and build on the learning to date.

## Young People

Intensive Services for: Young People was established during 2015 as the lead professional 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 young people's 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 and who are at risk of being accommodated / custody, intensive services provide direct interventions alongside Community Social Work colleagues.

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 115 young people allocated to the YISS service, as at 31 March 2018

- 49% were receiving intensive support services.
- 51% were care experienced young people in receipt of Continuing or After Care Support.
- 33% were subject to Compulsory Measures of Supervision.

## **Champions Board**

East Renfrewshire Council is now in its second year of Champions Board activity. The Board members consist of care experienced young people, elected members, Directors and senior managers within the organisation, including the Chief Executive. There have been two formal Champions Board meetings in the past year with the areas of focus being Health and Well-being and Housing. The young people were proactive in sharing their experiences and views and did this creatively using drama and film. The meetings have led to follow on actions and activity that will be progressed and monitored jointly by the Board.

## **Engagement**

We have been creative and innovative in approaches at engaging with young people and in offering different opportunities and experiences in showcasing their talents. We held an event in Eastwood Theatre in July 2017, where young people took part in hosting the event, performing drama pieces with award winning actors, taking part in stand up and dance routines. The young people taking part age range spanned from 8 – 22 years.

Some of these young people were 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 this and other types of participation boosts their confidence and resilience. It allows them to feel included in their communities and brings pride to their families. We will continue to explore creative approaches with our young people.

## **Participation**

We currently have five distinct groups for participation, this has evolved naturally over the past two years and enables maximum participation for care experienced children and young people.

### **Mini Champs (Age Group 8-12)**

The Mini Champions has brought together a small group of younger children who have varied care experiences. The aim of the Mini Champions is to give younger children a better sense of identity, connection and for the corporate parents to gain a greater understanding of their lives as looked after children.

### **Champions Board (Age 13- 24)**

This is the main Champions Board with young people who attend meetings and feedback to the wider participation group. The young people have also forged strong relationships with the corporate parents that are members of the Board.

### **Young People Group. (Age 12- 24)**

This is a group for all young people involved in Youth Intensive Support Service, including young people not necessarily looked after but at risk of being accommodated in care. These groups are usually activity based and include summer programmes, opportunities around diversion or group work. We have found this has been a great way of bringing young people together, and it has encouraged many of our care experienced young people to join the Champion's Board groups.

### **Continuing Care and Aftercare Drop in (Age 16- 25)**

This is monthly drop in service for all care experienced young people aged 16+. A Champions Board member and the Family Firm Coordinator are always present at these evening sessions. They are young people led and usually involve a meal cooked by all who attend. It is also an open forum for questions / issues and for consultation around themes for Champions Board meetings.

All our participation and engagement has been key in promoting our vision of building real meaningful relationships with families and young people. We have sought to fully embed relational based practices and culture within our organisation and our children and young people benefit from these approaches.

### **Innovation and Leading Practice**

East Renfrewshire's Champions Board has taken shape within a strong culture of integration – from the fully integrated HSCP, where the Champions Board is supported by a dedicated co-ordinator in the YISS team, to the strong partnerships between Council departments and across the statutory and voluntary sector. This landscape of joined-up service delivery has benefitted the Champions Board.

### **Our Partnerships**

#### **Youth Services**

East Renfrewshire Council Young Persons Services provides a member of staff to support the work of YISS, aiming to jointly deliver programmes targeted at young people. Accreditation for these courses is also being sought and we will continue to work together to consider how best to do this, reflecting the ability of our young people.

Youth Services in East Renfrewshire were nationally recognised award winners at this year's Local Government Awards. This related to the success and innovation of the courses offered to young people. We have now negotiated a range of these courses for care experienced young people including:

- Parenting and Healthy Relationships
- Duke of Edinburgh
- Living life to the Full – a CBT based positive mental health attitude course
- No Knives, Better Lives –incorporating drug and alcohol issues

### **Housing**

The Housing Department continues to commit a Housing Support Worker for care-experienced young people, partly co-located within YISS. Housing was the theme of the last Champions Board

and from this, the Environment Director asked young people to join him on a working group to further explore these issues and seek to improve them.

Housing and the HSCP have also jointly drafted a new Housing policy, echoing national good housing protocol guidance and explicitly stating East Renfrewshire's commitment as a signatory of the Scottish Care Leavers Covenant.

Our young people have already had significant impact on re-shaping housing policy and key themes being explored from our Champions Board include:

- Increasing housing options including supported accommodation and supported tenancies.
- Peer mentoring for care experienced young people to learn about managing their tenancy.
- Training for all housing staff around issues faced by care experienced young people.
- A commitment that no care experienced young person will be viewed as intentionally homeless.
- All care experienced young people to have Wi-Fi in their flats.
- The need for a care experienced link worker from the Council's Money Advice team.

## **Mental Health**

Further evidence of the impact of our Champions Board is found around mental health service provision to care experienced young people. Young people wrote and presented a drama piece to the Board which illustrated their experience and concerns around services. This has resulted in a commitment to recruit a nurse to the YISS team, focussed on relational practice who care-experienced young people can contact directly; expanding a pilot project with a third sector partner to support more young people with low mood and emotional health issues (thereby diverting referrals from over-stretched adolescent mental health services) and a commitment by the CEO of the Culture and Leisure Trust to explore the impact of physical health on mental health to provide free opportunities for all care experienced young people. Education and Educational Psychology colleagues will develop a clear pathway for school pupils to access appropriate support from trained staff.

In 2017 East Renfrewshire established a joint forum between CAMHS, 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 Services will join us in our next phase of this planned work.

## **Family Wellbeing Service**

As outlined in last year's report, in 2017/18 we commenced our pilot Family Wellbeing Service to support children and young people who present at GP's with a range of significant mental and emotional wellbeing concerns. The service has been delivered by Children 1st as a one year pilot and it commenced in September 2017, taking direct referrals from two designated GP practices. The need to introduce the Family Wellbeing Service and test the effectiveness of its family centred approach was based on a wide recognition that many East Renfrewshire children and young people have presented at universal services, particularly GP's, with requests for support around anxiety, depression, distress, and associated behaviours which are often symptomatic of relational disconnection and trauma.

The Family Wellbeing Service pilot deploys a unique approach to supporting children within the target age group of 8-18 years. Referrals come directly from GP's, who assess that a child's distress is significant, but social or emotional in origin rather than clinical or medical. The service works with the child and the family together to restore the connection, relationships and resilience of

families, reduce the reliance on statutory and clinical interventions, with the overall aim of improving the mental and emotional wellbeing of the child.

Based on early indications the service is having a positive impact and we have agreed to roll out the pilot for an extra year to allow more data to be collected for evaluation purposes.

### **Family Firm**

The Family Firm Programme forms an essential part of our Corporate Parenting duties for our care experienced young people. Training and work are integral to improving the life chances for our young people and it is recognised that this cohort require long term, resource intensive support to help them into positive destinations. The Director of Environment plans to resource 4 flagship traineeships within the Environment Department.

The good news is that positive destinations are improving with 69% of all young people who are open to Youth Intensive Support firm being referred to Family Firm. Of all CEYP entitled to aftercare 34% are engaging with Family Firm with 100% of young people engaged in Family Firm or further / higher education.

This dedicated employability support demonstrates that the Council and its partners are taking an active role in providing employment for our care experienced young people and thereby reducing the inequality these young people face. This is based upon better collaborative partnership approaches delivering earlier interventions and where possible taking a preventative approach.

Regular caseload meetings are held with Family Firm, Skills Development Scotland work coaches and the Activity Agreement Coordinator (Education) to work together to support post 16 transition and to ensure that there is no duplication. Additional funding was made available to Family Firm for 2017 which helped to fund qualifications and sector specific training. Funding was also provided for work placement supports including travel, food, equipment and clothing. Additional programme support has also been made available through the recruitment of a Family Firm Graduate Intern (Jan 2018 – Jan 2019). Support can range from assistance in job applications and preparation, in work support, or assistance in FE or HE courses application and/or sustainability.

### **Relational Based Practice across the Sector**

We have had a number of opportunities to showcase and promote our work around relational based practice at national conferences and training events. CEYP and SW staff have been involved in this activity. This has included a workshop at the national Social Work Scotland conference in June 2017, an input to Dumfries and Galloway children services, facilitating a workshop at the CELCIS Care Leavers Covenant Conference, providing an input to Forth Valley Children's Panel members training and other varied Children's Hearing Scotland training.

### **Functional Family Therapy**

East Renfrewshire Health and Social Care Partnership continues to commission Action for Children to deliver Functional Family Therapy (FFT) to 14 families per year. FFT is a short-term intervention, working with parents / carers and young people aged 11-17 years old, usually for around five months. FFT is aimed at supporting families experiencing relationship or communication difficulties and those experiencing high levels of conflict.

A positive impact evaluation of the families completing this evidence-based programme has led to a partnership arrangement with two other local authorities to support longer-term provision of FFT.

## Out of Hours Provision

It is recognised that children, young people and their families may face crises and we aim to ensure help is at hand when families need it most. We recognise the added value and benefit that third sector providers can offer and we continue to commission Up 2 Us to provide our out of hours service. As partners we recognise the need to provide intensive services and we work jointly and efficiently together, supporting 23 young people that are at risk of being accommodated.

## Corporate Parenting in East Renfrewshire

East Renfrewshire benefits from a very committed partnership of Corporate Parents who own their responsibilities and the legal duties that underpin these. The Corporate Parenting Planning Group comprises local Corporate Parent bodies and a number of national ones too. In relation to ongoing evaluation of the local Corporate Parenting Plan, a key activity has been the audit of individual children's plans.

The purpose of this activity has been to identify the actual impact of East Renfrewshire's Corporate Parenting Plan on the wellbeing of individual looked after children and young people. Approximately 25% of all Child's Plans have been evaluated using a specific audit tool over the last 12 month period and each sample has considered one of the six themes within the Corporate Parenting Plan: permanence, raising attainment, health and wellbeing, rights and participation, stable home environment, training and work. From this activity strengths were identified in the following areas.

- Significant progress with implementation of PACE programme, which in turn is reducing drift for children and young people – more details later in this report.
- Family Firm initiative which has secured two modern apprenticeships for care leavers along with a range of work placement experiences internally within the Council and HSCP, and with external local employers.
- Viewpoint surveys – uptake has increased and children's experiences are being reflected in their assessment plans and reviews.
- Wider achievement awards for looked after young people have significantly increased as a consequence of closer collaborative working with Youth Services and schools.
- Participation through Champions Board and Mini Champs is among the highest in Scotland according to Life Changes Trust.

The local partnership to deliver on the commitments in the East Renfrewshire Corporate Parenting Plan remains strong. As we approach the end of the life of our plan we will be identifying further areas of improvement to take forward, mainly in relation to our children accommodated and educated out with East Renfrewshire, care leavers and those entitled to continuing care / aftercare.

## 4.2 Criminal Justice

Criminal Justice Social Work Services have strong and effective relationships across the Health and Social Care Partnership and with external partner agencies. Links with the Alcohol and Drug Partnership, Child and Adult Protection Committees have enabled multi-agency partners to consider their role in relation to their interventions with those who hold convictions.

During 2017/18, we saw an increase in the overall workload of the Criminal Justice service with a rise in Criminal Justice Social Work Report (CJSWR) requests. There was also a slight increase in the number of Community Payback Orders (CPO) imposed by the courts, Fiscal Work Orders and Prison Through-care. No new Drug Treatment and Testing Orders were made during this period.

The table below demonstrates the changes in workload.



Fig. 1: Workload variation of +/- 5% or more: 2017-2018 from 2016-2017

Area of service	Number 2017-18	Number 2016-2017	Change (n)	Change %
<b>Criminal Justice Social Work Reports</b>	259	240	+19	+7.92
<b>Community Payback Orders</b>	126	122	+4	+3.28
<b>Community Service Orders</b>	0	0	0	0
<b>Through-care (released prisoners)</b>	12	10	+2	+20
<b>Drug Treatment &amp; Testing Order</b>	0	0	0	0
<b>Fiscal Work Order</b>	14	10	+4	+40
<b>Diversion</b>	39	42	-3	-7.14

### **Diversion from Prosecution**

This service is provided to people who have been referred by the Procurator Fiscal for relatively minor offences. People who agree to use the service 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. This year there has been a slight decrease in the referral rate, but overall this figure is fairly consistent. This reflects the closer links that now exist between justice services and the Crown Office Procurator Fiscal Service (COPFS) and the focus on increasing opportunities for the use of diversion nationally.

### **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. These can require a minimum of 10 hours and a maximum of 50 hours unpaid work, to be undertaken under the supervision of Criminal Justice Social Work staff. In East Renfrewshire 14 people undertaking FWO's during 2017-18 carried out a range of duties including assisting with painting, decorating and gardening tasks.

### **Community Payback Orders (CPOs)**

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

People sentenced to a supervision requirement as part of their CPO were supported by social workers in the team to address their offending behaviour, as well as to access a number of services such as addiction, housing, health, employability, money advice, adult education and welfare services. During 2017/18 we managed to increase referrals to Work East Ren, East Renfrewshire Council's Employability Service by 50%, with 23 people being referred to the service. Links with Adult Learning remain positive with the well-established No Barriers service providing access to education services for people undertaking CPOs.

Registered Sex Offenders sentenced to community based supervision with a programme requirement during 2017-18 were provided with accredited intervention on an individual or group-work basis, which seeks to reduce the risk of further offending. This service is delivered in partnership with Inverclyde and Renfrewshire Councils by Renfrewshire Council's Pathways Partnership Service.

## Unpaid Work

People who were sentenced to undertake unpaid work completed a range of activities within our work squad including: litter and graffiti removal, environmental conservation work, recycling and furniture removal. During 2017/18, the service's strong links with voluntary sector and charitable organisations led to the development of several new projects, including painting and decorating of flats for disadvantaged and vulnerable people and gardening for adults with additional support needs. We also responded to requests from members of the community particularly in relation to the clearing of unsightly litter and fly tipping within the local area.

## 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 will be required to abide by licence requirements specified by the Parole Board. Social workers have attended annual Integrated Case Management (ICM) meetings with the prisoner, prison staff and family members to agree release plans and supervision arrangements in the community. Strong links exist between our service and East Renfrewshire Housing Services, thus ensuring that procedures are in place to support the successful resettlement of people being released from prison.

During 2017-18, there were on average 50 people from East Renfrewshire in prison serving custodial sentences (less than 1% of the total prison population), two thirds of these cases are long term prisoners. The numbers of women and young people from East Renfrewshire in custody remains very low.

As previously stated, the Criminal Justice Service continues to have effective working relationships across Children and Families and Adult Services with social workers regularly attending case conferences, core groups and reviews. A member of the team attends the Young Person's Referral Group (YPRG) when young people become involved in alleged offending; on occasion working jointly with Youth Intensive Support staff in the preparation of Diversion assessments, as well as when the a young person is the subject of a report to court.

From January 2018, the Team Manager has had representation on the Domestic Abuse Referral Group (DARG), bringing valuable information around risk and perpetrators' patterns of behaviour as part of the local multi-agency response to domestic abuse.

## Community Justice

### East Renfrewshire Community Justice Partnership

The HSCP 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).

During 2017/18 we have:

- 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.
- Undertaken trauma needs assessment and review to develop awareness of trauma informed practice across addictions, homelessness and justice 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**

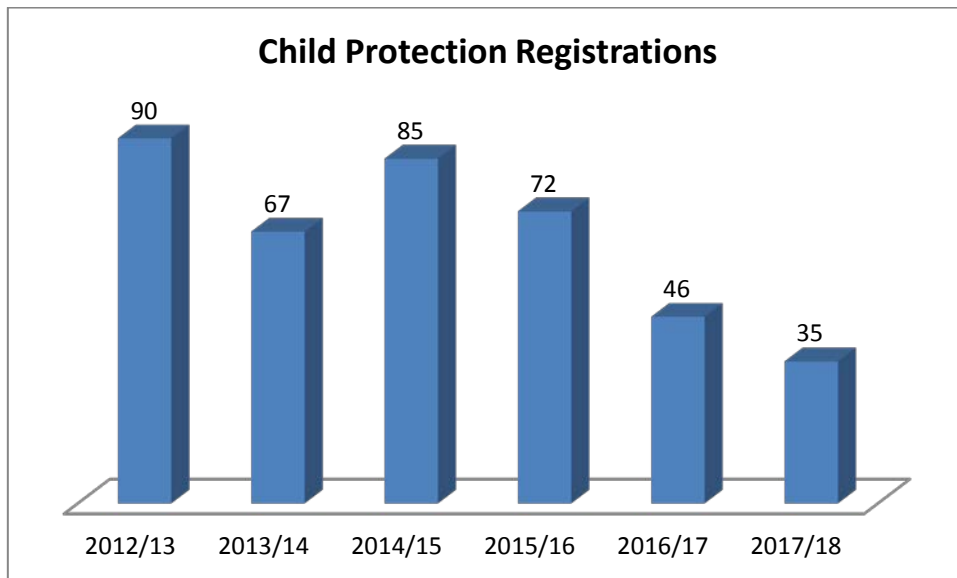
The Chief Officer Group is responsible for the quality assurance of all public protection services in East Renfrewshire. This also includes Violence against Women and Girls. The group is chaired by East Renfrewshire Council’s Chief Executive and meets bi-annually and the Chief Social Work Officer acts as their professional advisor. The use of driver diagrams and logic modelling supports the scrutiny of public protection processes. For the purposes of the CSWO report, the data and analysis of child and adult protection are provided in the [Annual Public Protection Report](#).

**Child Protection**

The number of children on East Renfrewshire’s Child Protection Register in the period April 2017 to April 2018 was 35. As reflected in last year’s report, recent years has seen a steady reduction in the number of registered children (see fig 1). This reduction here in East Renfrewshire, also reflects a reduction at a national level. Within East Renfrewshire our numbers of registered children are low and as such, always subject to fluctuation when reporting on individual children, however with overall decreases over a six year period, this is worth exploration.

Last year’s report highlighted a more robust screening process, though the Supreme Court ruling on information sharing was anticipated to have an unintended impact. As outlined in last year’s report we have undertaken a planned review and quality assurance of child protection. The outputs from this audit are outlined under Section 8 continuous improvement and self-evaluation.

Figure 2: Child Protection Registrations

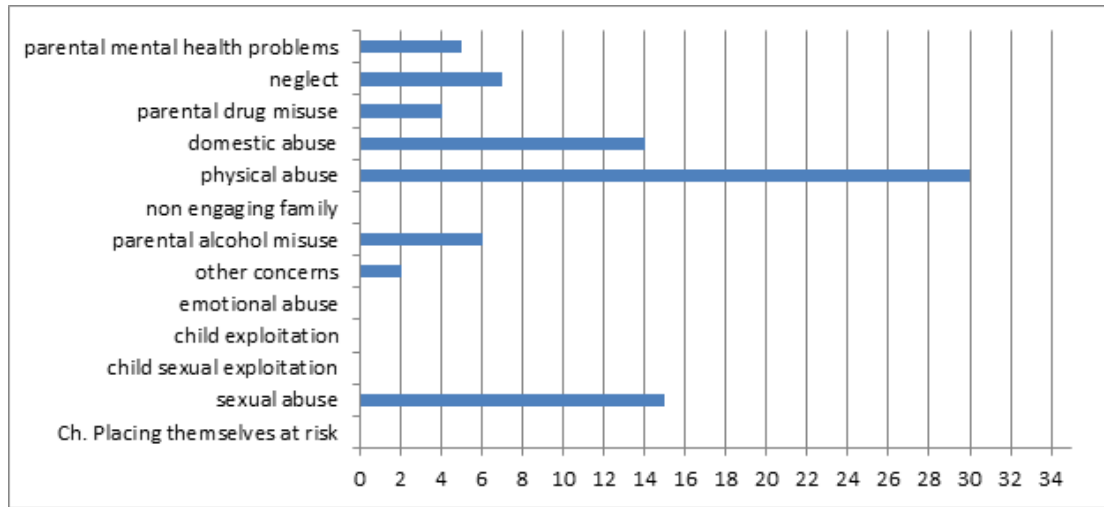


**Initial Referral Discussion (IRD)**

During this period East Renfrewshire children’s social work service worked with police and health staff in respect of 91 children and / or young people where there was a child protection concern. The most common reason for initiating an Initial Referral Discussion (IRD) was physical abuse, with sexual abuse, domestic abuse, substance misuse, neglect and parental mental health being prominent features also (Figure 3). From this 57 (62%) children and / or Young People proceeded

to formal child protection investigation. Of those, 35 (61%) children / young people went on to be subject to child protection registration.

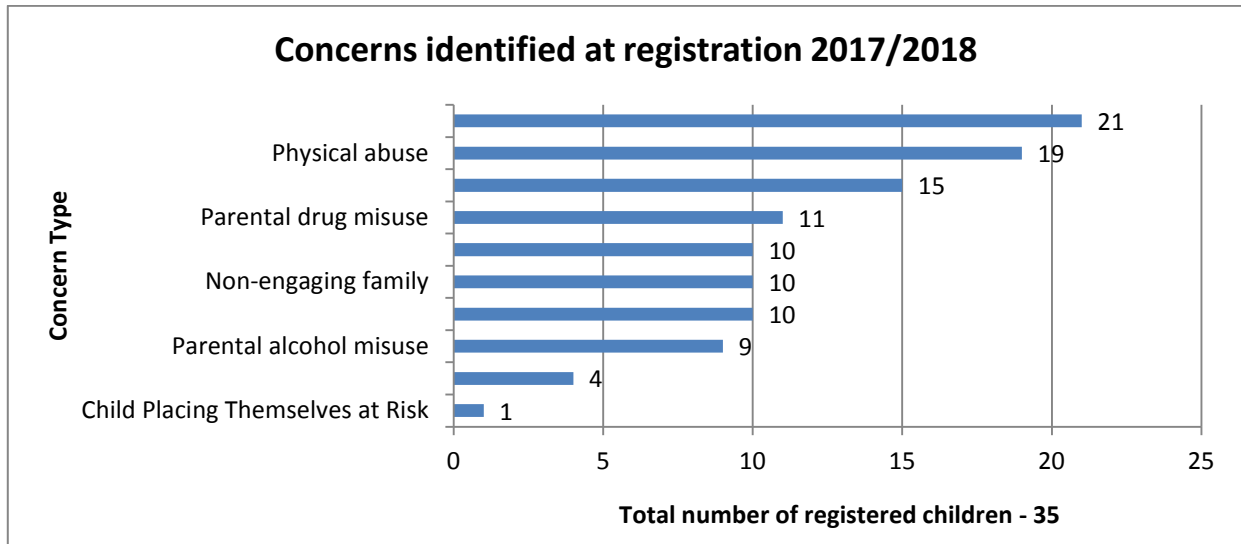
Figure 3: Reason for IRD



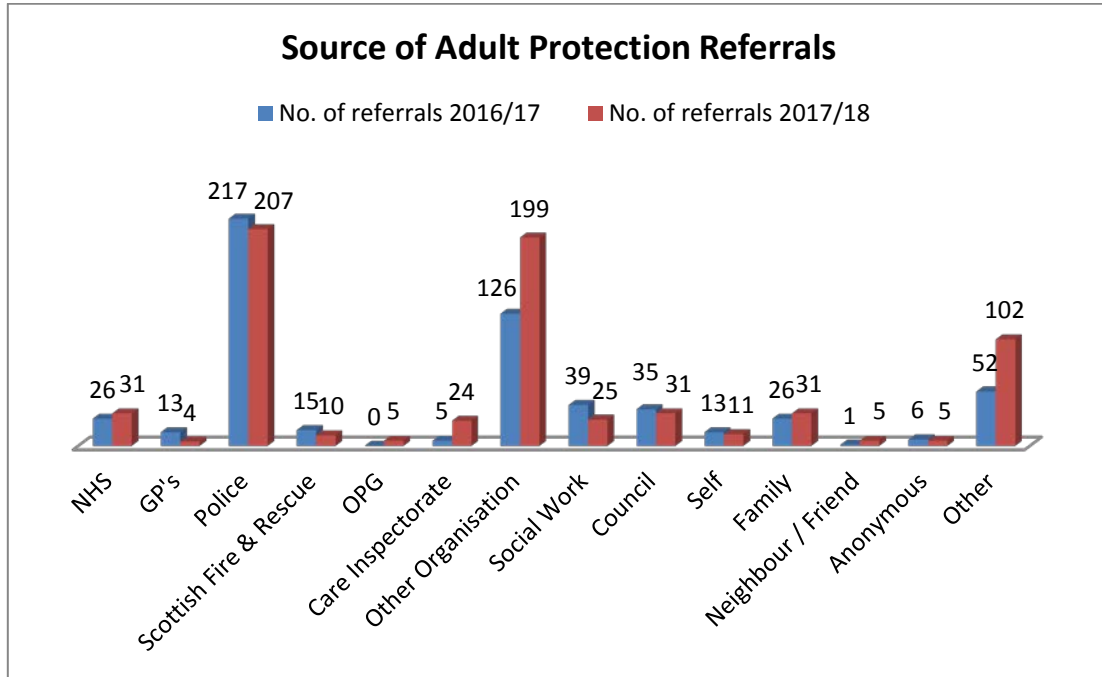
**Primary Concern leading to Initial Referral Discussion (IRD)**

There is symmetry at all stages of the child protection process between the concerns that resulted in investigation and the concerns recorded at Child Protection Case Conference when the child is registered (Figure 3). The increase of concerns around parental mental health reflects a continuing trend in East Renfrewshire that is also prevalent in the high demand for our primary care mental health services. Over 18/19 we plan to look at this in greater depth with our colleagues in Adult Services.

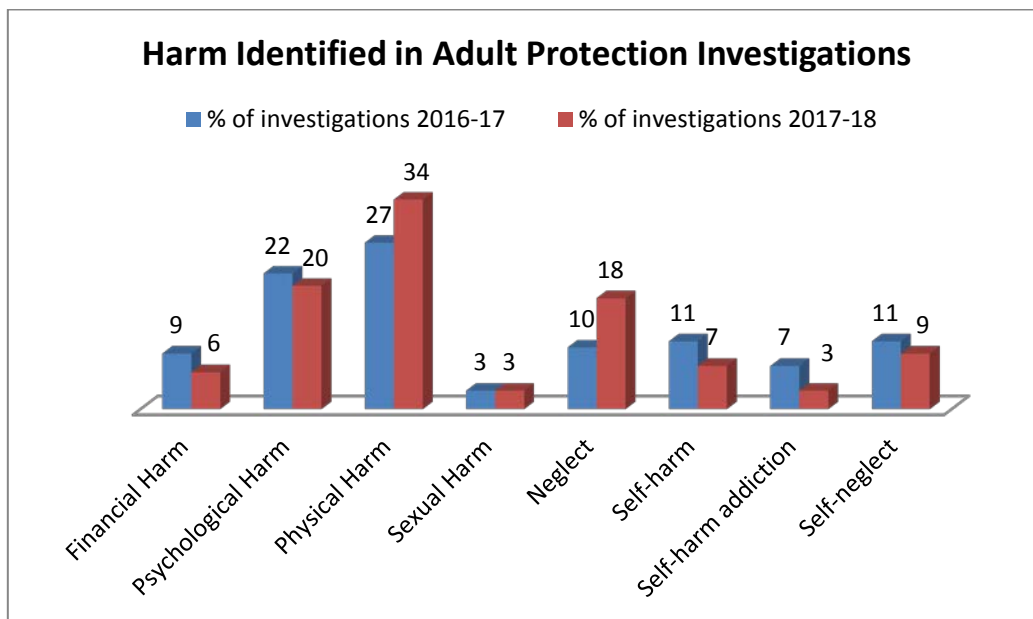
Figure 4: Concerns Identified at Registration



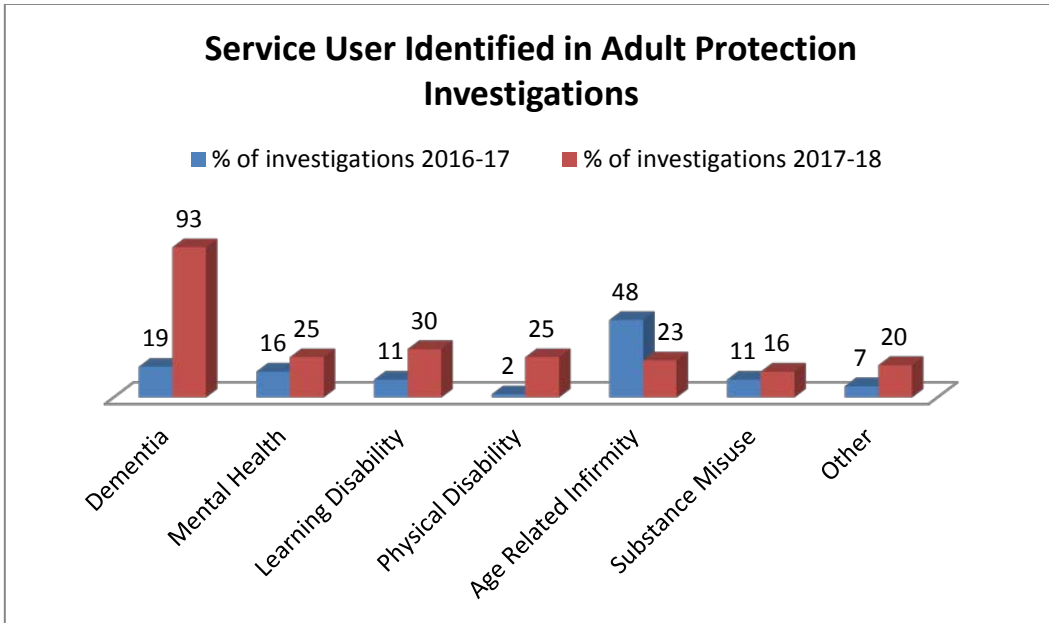
Adult Support & Protection



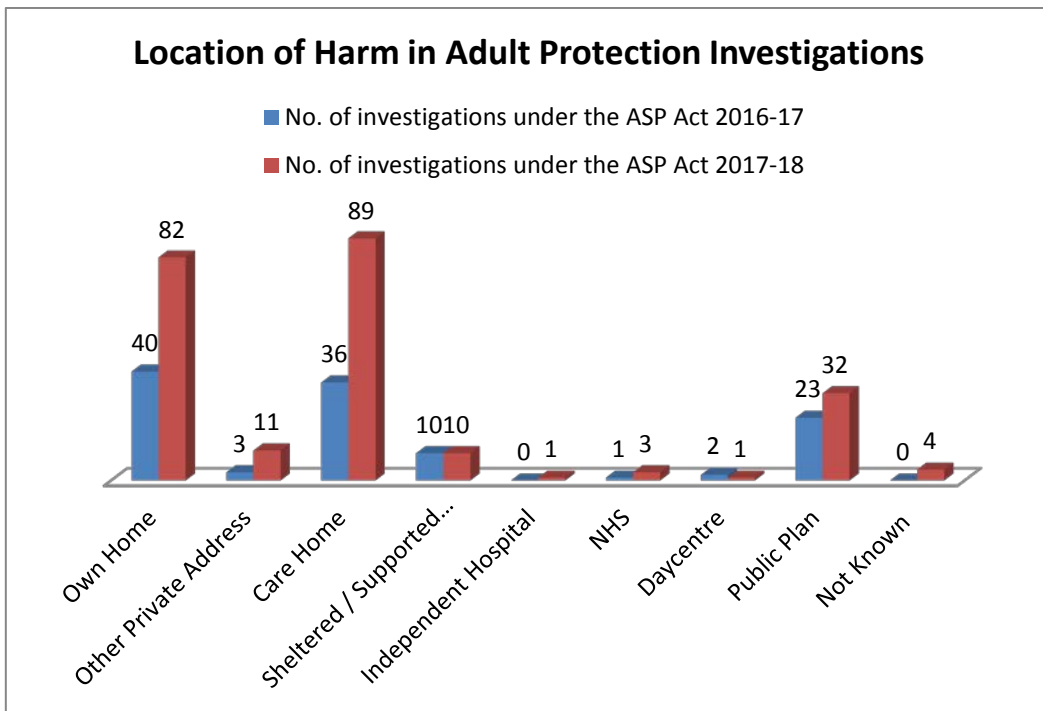
For the period 2016-17 there were 574 Adult Protection inquiries. For the period 2017-18 there were 690 Adult Protection inquiries, this was an increase of 20% from the previous year. The reason for this increase may be due to the Large Scale Investigation activity and increased awareness of Adult Support and Protection as a result of a range of improvement activity.



For the period 2016-17 there were 105 ASP investigations that encompassed 94 individuals. For the period 2017-18 there were 232 ASP investigations that encompassed 202 individuals. The figure for 2016-17 previously reported was different due to incomplete data that has now been rectified. The number of investigations has more than doubled (increase of 121%). This may have been due to the Large Scale Investigation activity and a clearer definition of what constitutes an inquiry and an investigation. For the period 2016-17 the conversion from ASP inquiry to investigation was 18%. For the period 2017-18 the conversion from ASP inquiry to investigation was 34%. This was a significant increase. This may be due to the increased understanding and awareness of ASP roles and responsibilities and at this stage this is considered a positive indicator that we are keeping people safe.



In 2017-18 there was a significant increase in the dementia client group and the age related infirmity client group; this is likely to be linked to the increase in referrals for care homes and the Large Scale Investigation process into a care home.



For the period 2017-18 there was a significant increase in harm being identified within a care home. This can be explained by the Large Scale investigation that was on-going throughout this period. There are no available national figures for the past 2 years. The Scottish Government have indicated that the national figures will be published over the coming months. This data will be considered at the Adult Protection Committee.

From September to December 2017 a self-evaluation exercise was completed with staff and managers involved in ASP inquiries and investigations. This evaluation was based upon the care inspectorate draft indicators for ASP. This evaluation indicated that there was a level of confusion regarding the ASP process and practice. At the same time issues regarding the accuracy of data

within Adult Protection recording were identified and from February 2018 the accuracy of this data has significantly improved by developing a refreshed process and recording tools.

#### 4.4 Adult Services

##### Locality Planning

In East Renfrewshire we divided the area into three localities based around our GP clusters. Since the last report our GP clusters for the Eastwood area have changed with the GPs in the Eastwood Health and Care campus forming one cluster and the other Practices in Newton Mearns and Clarkston forming the other. As GP practice populations do not reflect natural communities, we have found it challenging to coordinate this approach. Moving forward we propose to move away from a cluster based locality model. We will develop two localities one for Eastwood and one for Barrhead. The new localities also reflect our hospital flows with the Eastwood Locality linking to South Glasgow hospitals and the Barrhead Locality to the RAH, which is part of Clyde.

Our HSCP adult health and social care management arrangements will change to mirror this new structure and strengthen our ability to support and engage meaningfully in locality planning. In redesigning our HSCP services we will look to:

- Understand and refresh our pathways.
- Redesign our Locality Services around our key pathways.
- Ensure we have right person, doing the right thing at the right time.
- Build on community led support and talking points.
- Strengthen and build on our relationships with General Practitioners and the opportunities arising from the new GP contract.

We already have co-located health and social care teams in place but our ambition is to work together in localities with staff from a range of provider and voluntary organisations, wherever possible sharing premises and information. We will work with our communities and partners building on the strengths of each local area to support people's wellbeing and feeling of being connected and more independent. We also aim to see increased locality commissioning and market facilitation encouraging more flexible service provision and social enterprises.

##### Community Led Support

Since 2016 the HSCP have been working with local people, community groups and organisations in the 3<sup>rd</sup> voluntary sector to challenge our thinking about new 'Front Doors' and new ways of engaging with people in their communities.

The HSCP engaged with the National Team for Inclusion (NDTi) to help us progress this approach by adopting the Community Led Support Programme principles and key components.

- Coproduction bringing people and organisations together around a shared vision.
- A focus on communities.
- A culture based on trust and empowerment.
- People treated as equals.
- Bureaucracy at the absolute minimum.
- People receiving good advice and information that helps avoid crises.
- A system that is responsive, proportionate and delivers good outcomes.

Our Community Led Support approach is based on involving local people in the planning and delivery of a series of Talking Points; places where they can come and find out about all aspects of what is available locally. This includes community activities and voluntary organisations, local

amenities and transport, council and HSCP help and support. Our assumption is that everyone we have contact with has the capacity to help themselves and to make a contribution to their community – our job is to help them do this.

To support this Good Conversation training was delivered in partnership with Voluntary Action between April and November 2017 (delivering 20 courses to over 300 attendees from a range of partners and staff.) Training with frontline Single Point of Access (SPOA) staff has been undertaken to change the front door conversation, signpost and create new directions for referrals.

Different formats of Fixed and Community Talking Points were tested over the course of the year. For example an initiative carried out between September and November 2017 sought to reduce current social work waiting lists. Individuals were invited to a Talking Point appointment where their needs were assessed and advice/support provided as required.

## **Learning Disability**

As an HSCP we are currently supporting 259 people with learning disabilities to live a good life, realise their aspirations and achieve their outcomes within the local community. This at times has been a difficult journey, but one which has enabled so many people to contribute to the community and recognise that they have much to offer. This has resulted in increased confidence and self-esteem as well as a sense of belonging.

The demographics of the population we support is made up of 150 men and 109 women, aged between 17- 96 years.

Most people are supported within their own homes in the community with the exception of 20 people who remain placed out with the authority. It is our intention to return people to their own community, with supports to help them achieve their potential and identified outcomes. Service users who previously accessed traditional building based residential resources as a form of short breaks, are now being encouraged to be creative in how they use their allocated budget to meet their individual needs. Whilst the uptake of this has been slower than we anticipated, people are now starting to recognise that they have increased choice and have shown interest in activity based short breaks.

As we move forward we recognise the increasing demographic pressures on East Renfrewshire HSCP, particularly the growth of children and young people with disabilities by 12% across the local authority over the last 4 years that will increase year on year the demand on adult services. This in turn places pressure on our partners in the 3<sup>rd</sup> sector who at times find it difficult to recruit and retain staff.

We recognise that transition planning at all stages of life is essential, so Adult Services have been working closely with Children's Services to ensure that transition pathways to Adult Services for young people with additional support needs are clearer. We established a group from both services alongside representatives from our local additional support needs school and day supports to ensure we have an accurate picture of the young people who will be transitioning over the next 2 years. This allows us to plan and ensure that their experience is fulfilling and person centred as they move into their adult life.

The introduction of smart technology has been a priority for the HSCP. For people with learning disabilities, we have implemented technology where possible, as a realistic alternative and or as a combination approach to supported living. We have been working alongside providers to design technical solutions specifically tailored to individuals. For example a service user is prompted to take medication by a changing colour on his wall, which has promoted his independence and increased his confidence.

This method has also been used to move from the traditional method of providing a physical presence in someone's home overnight, to using digital technology to alert the need for intervention.



We have currently reduced the need for a physical presence by 14 and currently have 9 live trials in place. Over 2018/19 we will work to review the 45 sleepovers that are in place for 69 people.

### **Day Opportunities**

Our day opportunities services and partnerships aim to support people to engage in meaningful activities and make a positive contribution to their communities. For people with learning disability the Brew Crew provides skills, training and experience to people who wish to move on to employment opportunities. The programme of learning is tailored to each person's ability and needs.

The Brew Crew offers experience of what a working environment is like and also of the quality expected in a catering environment. It has provided over 30 short term placements for individuals since we have started the project. Many people move onto the Greenhouse, a Community Interest Company that runs the café in Eastwood and Barrhead Health and Care Centres. The Greenhouse offers employment training and opportunities. The Greenhouse is now a SQA accredited training centre and the first cohort of trainees have received their SQA certificates.

Shopping Buddies is a service offered to people in the community who are housebound and require some support with their weekly shopping. This initiative has been hugely successful in building natural networks. The Garden Tidy project covers the sheltered housing complexes across East Renfrewshire. The initial tasks for this group were weeding, sanding benches / tables and painting. This has further developed to sourcing planters / boxes and building raised beds. Residents working alongside the team and assist with the gardens. If they can't assist they come to chat about progress, developing strong intergenerational relationships.

In addition to the wide variety of day opportunities offered through the Kirkton Service for older people, during 2017/18, staff have been actively involved in the CAPA (Care about Physical Activity) programme with the Care Inspectorate. This has involved promoting more movement throughout day opportunities and respite activities and a greater focus on strength & balance exercises. Participants are encouraged to continue with additional activity during the week, for example choosing a different exercise pledge stick each week and pledging to do the exercise 3 times daily over the week. Participants showed a marked improvement from baseline to 20 weeks.

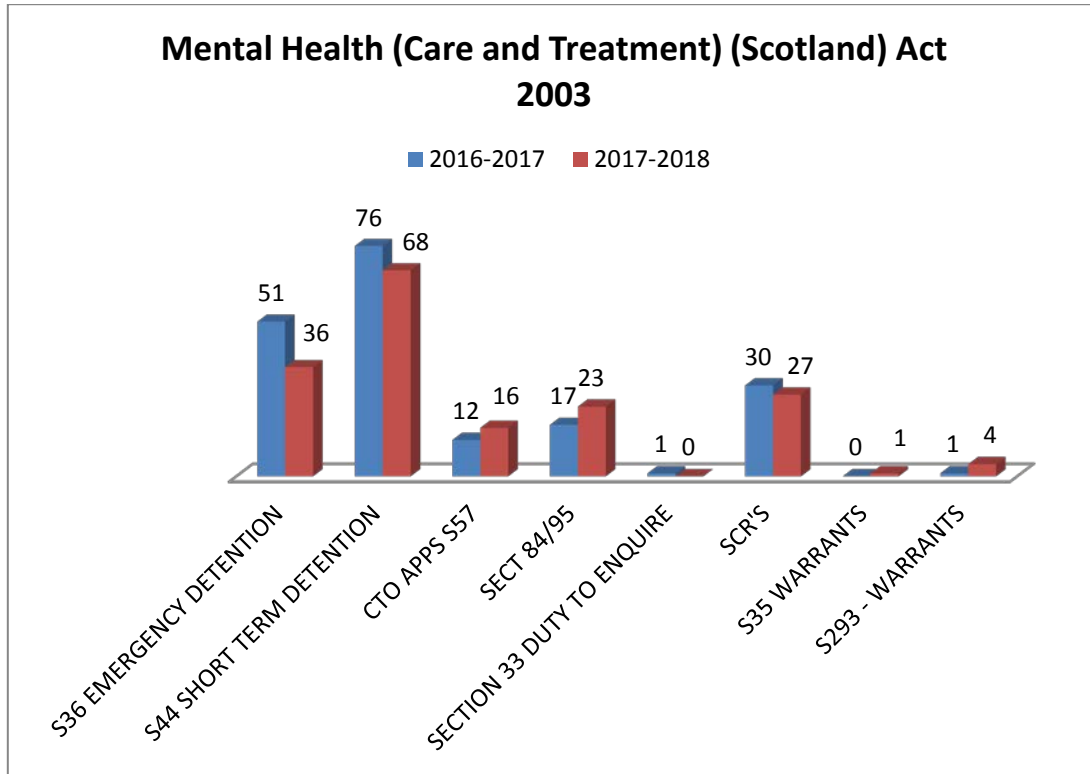
### **Bonnyton House**

During 2017/18 the IJB had the opportunity to look again at the future of Bonnyton House care home. The decision to sell Bonnyton was reluctantly agreed as part of the cost savings for 2015/16 – 2017/18. After two marketing attempts the Council had not been able to source a buyer who would develop the care home and ensure a smooth transition for residents and staff. The financial position of Bonnyton was challenging, with uncertainty affecting new referrals and existing residents and their families concerned about their future. The planned closure of NHS continuing care beds at Mearns Kirk in 2019 offers the possibility to plan for a different future for Bonnyton.

It was agreed that the HSCP 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. This would build on the experience of the care home staff in providing end of life care and with opportunities to further develop their skills, working with our community nursing staff. A health and care service based at Bonnyton should allow us to manage increased demand for services in a much more integrated way.

4.5 Mental Health

The Mental Health Officer service continues to discharge its functions under the Mental Health (Care and Treatment) (Scotland) Act 2003, 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. Staffing levels have remained stable, however over 2018/19 work will be undertaken to consider the workforce for the future.



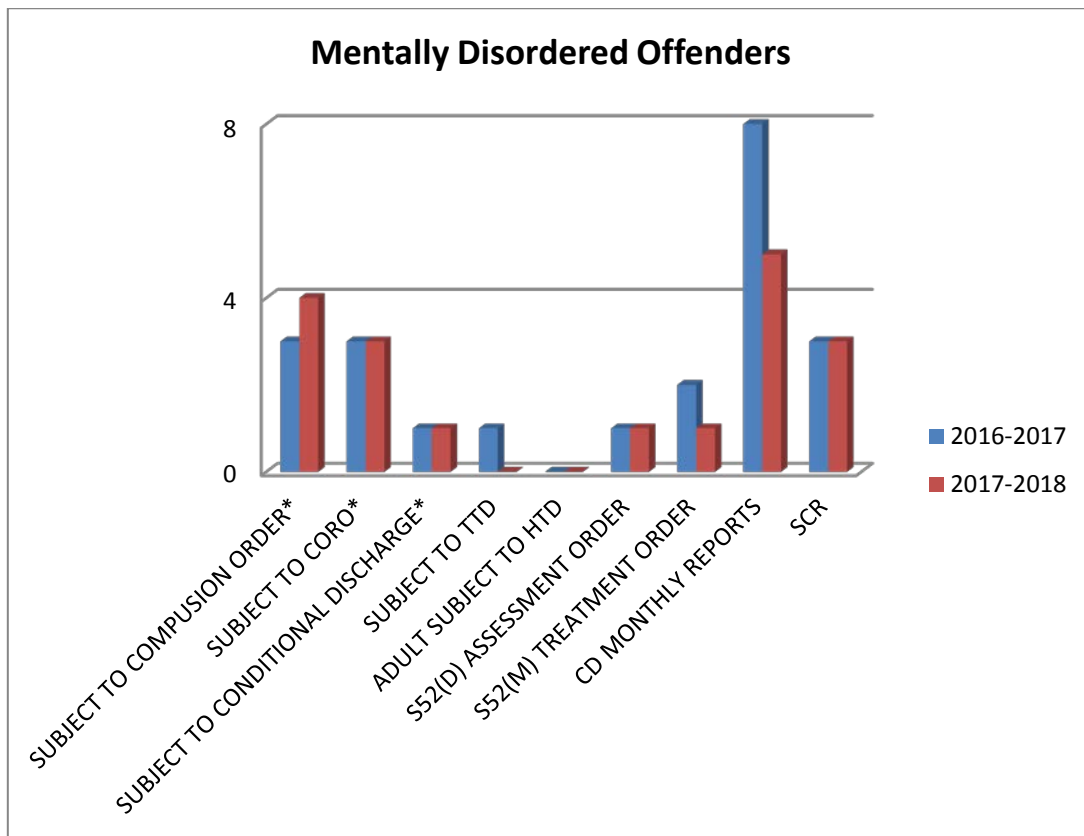
The above chart highlights a consistent demand over a 2 year period for MHO services under the Mental Health (Care and Treatment) (Scotland) Act.

The Mental Welfare Commission continue to closely monitor the increased use of Emergency Detention Certificates (EDC) during working hours and those granted out of hours where there was no consent of an MHO. Following this, it has to be noted that whilst the EDC figure still remains high, there has been a 29% decrease in number of EDCs logged over the past year.

There was a slight decrease of 10% in Short Term Detention Certificates (STDC) in the past year. The lower number of Social Circumstance Reports (SCR) completed can be explained by the number of STDC's and Compulsory Treatment Orders (CTO) in that a SCR has already been completed or only requires to be updated.

There has been a 33% increase in the number of adults subject to either a community based or hospital based CTO and a 35% increase in the number of extension and variation reports completed for CTO's.

In relation to number of warrants granted at Court the numbers are usually low. This past year we have had 5 warrants granted at Court for entry and removal to a place of safety for various reasons, which is an increase on the previous year.



The Mentally Disordered offenders chart above highlights a similar picture to 2016-2017 with the number of referrals from Court remaining low.

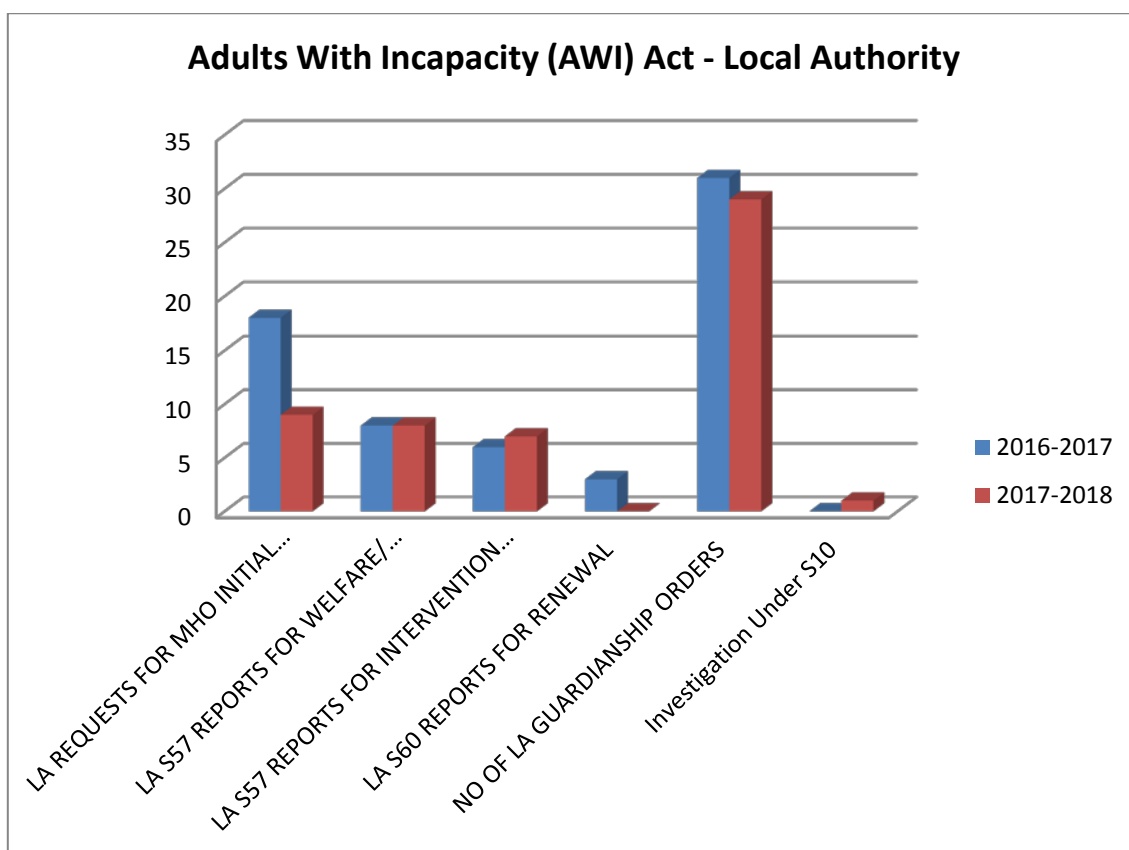
Given the low numbers of referrals being received from the Courts, we acknowledge that it is important for MHO's to continue to update their knowledge and skills in working within this specialist area of statutory work. ER HSCP is represented on the national Forensic Social Work Sub Group. This forum provides the opportunity to discuss issues, consolidate practice and identify and source relevant training.

The New Mental Health (Scotland) Act 2015 became fully operational in June 2017 and has created new challenges to the MHO service with additional duties and responsibilities, changes to Criminal Justice (Scotland) Act 1995, victim notification scheme, excessive security, named person, advance statements, suspension of detention and technical changes to CTO's etc. Work is ongoing nationally to finalise The Code of Practice.

The demand for MHO reports to accompany applications for both Private and Local Authority Welfare and Financial Guardianships to April 2018; continues to be high. The Local Authority currently has responsibility for supervising 152 Private Welfare Guardianship Orders. Many of these orders have multiple Welfare Guardians.

In the past year the number of S57 reports for private Welfare and Financial Guardianship orders increased from 29 to 48 reports. Whilst there are ongoing media campaigns to encourage more adults to take out P.O.A. and there is an increasing number of P.O.A's being registered with the Office of Public Guardian, we have recognised that the need to influence this locally in terms of informing the public and educating front line staff who work across all care groups.

A number of requests continue to be received for young people with complex needs / disabilities who are transitioning to adulthood and family wish to be able to continue to manage an SDS payment and require to have legal authority under Financial Guardianship to do this.



There are currently 29 Local Authority Welfare Guardianship Orders in place. This has decreased in the past year.

The demand on the MHO service remains constant in relation to statutory duties and functions under the AWI Act.

## 5. FINANCE

East Renfrewshire Integration Joint Board (IJB) has the strategic responsibility for planning and delivery of health and social care services for the residents of East Renfrewshire. The 2017-18 total IJB resources were £127 million, of which £112 million was directly controlled revenue budget. The social care net budget was £45.2 million and we ended the year with an over spend of £0.06 million (0.1%). This overspend was planned as we are redesigning services to meet our 2017/18 saving target through a significant service redesign. We recognised that this will take time to deliver and agreed a reserves strategy to meet our savings target on a non-recurring basis during the year. We planned to use a maximum of £0.73 million from reserves to balance the 2017-18 revenue budget, but only required £0.06 million as we gained from operation underspends in year.

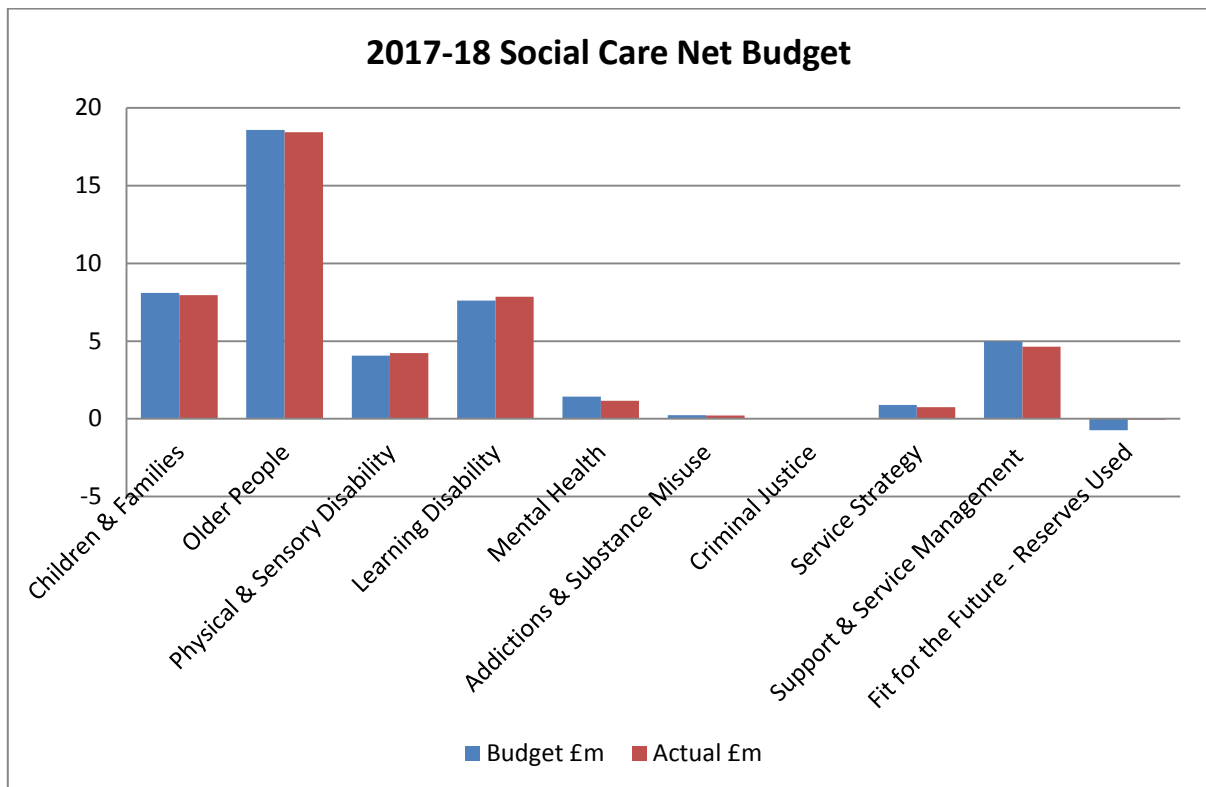
The key messages from financial year 2017-18 are:

- 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 achieved our existing 2017-18 savings target, from our previously agreed 3 year budget, of £2.64 million with a one off over recovery of £0.12 million within children's services.
- We recognised early the scale of future financial challenges and the IJB invested funding to a budget savings reserve to allow us to achieve our new 2017-18 savings requirement of £1.39 million on a phased basis. This strategic approach recognised that future savings

can only be achieved through a radical review of the way we deliver our services and we embarked on our change programme “Fit for the Future”. We achieved £0.66 million of our new savings target on a recurring basis with the remaining £0.73 million to come from our change programme.

- Children and Families – one off savings over achievement £0.16 million.
  - Older People - £0.14 million underspend from care package costs including additional interim funding.
  - Physical and Sensory Disabilities overspend by £0.17 million in care costs.
  - Learning Disabilities overspend by £0.25 million in care costs.
  - Mental Health care package cost underspend by £0.28 million.
  - Service strategy underspend by £0.14 million mainly in staff costs.
  - Property and other overhead costs underspend by £0.34 million.
- We had our first full year of operation from our headquarters to the new Eastwood Health and Care Centre and completed minor building and refurbishment works on Barrhead Health and Care Centre to enhance our agile working facilities.
  - 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**

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

Continuous Improvement, Self-Evaluation, Quality Assurance and Practice Development is at the heart of what we do in East Renfrewshire. A new Quality Assurance Manager was appointed in 2017 to work across the HSCP to develop this area of work.

Within Children's Services and amongst some of our achievements over the last year, there is evidence that targeted activity is making a real difference to improving the outcomes for children. The learning and data from the PACE pilot and associated PDSA approaches to improvement is being rolled out across the service. Relational based practice underpinned by data which is being led across the teams will ensure that our model of improvement has the optimal likelihood of improving permanence destinations from the outset. Internal tracking systems and robust outcomes data have been developed and will continue to be refined over the next year, to allow us to report on the difference our teams are making to children's lives.

In addition to the various audits and improvement work that has been undertaken in child and adult protection, a self-evaluation pilot exercise was carried out with the learning disability service with a view to a more extensive roll out across the HSCP.

Improvement work has been identified in relation to recording and the use of chronologies and new guidance has been devised in these areas to ensure consistent, high standards of practice are achieved.

Three large scale events have been held across children and families services to support integrated working and to offer opportunities for staff to share practice and learn from one another. The theme this year has been relational based practice and staff from all our professions have been encouraged to consider how they can develop this element of their practice, to ensure improved outcomes for children and their families.

### **Children's Quality Assurance and Self-Evaluation**

We have undertaken multi-agency audit activity focusing on Initial Referral Discussions (IRD) and an extensive audit of children who are subject to child protection.

Both audits have identified significant strengths in our systems, practice and provided us with the evidence that we are building strong supportive relationships with children and their families.

Robust management information has provided us with the necessary reassurance concerning the reduction of child protection registrations, as children and their families are getting the help when it is needed.

Our data demonstrates that we intervene earlier due to the embedding of stronger referral pathways. In 2013/14 it took an average of 46 days to complete an initial assessment where there were wellbeing concerns, in 2017/18 this was reduced to just 11 days. We are confident that children and / or young people who require social work intervention access this timeously and the audit also demonstrated that this was a similar picture for named person services within East Renfrewshire.

- 100% of our Initial Referral Discussion (IRD) audit identified that the children subject to child protection investigation met the threshold are the appropriate children for health, police and social work intervention.
- Repeat registrations of children who were previously on the register within the previous academic calendar year were nil providing strong evidence that step down support is achieving positive outcomes and continuing to keep children safe.

## **Adult Protection Quality Assurance and Self-Evaluation**

In February 2018 a new streamlined ASP process was implemented. In May 2018 an independent reviewer audited 16 cases and concluded that the implementation of the streamlined ASP process has had a positive impact on both ASP recording and practice. The audit also highlighted some areas for improvement which have been incorporated into the work plan for the ASP committee.

To support development in ASP practice 2 development days involving the CSWO, Chair of the ASP committee and other key partners in ASP were held in March 2018 and April 2018. Each event was evaluated and considered to have been positive and productive. Further thematic development days are planned for 2018-19.

As part of the re-design of services within the HSCP, in March 2018 the ASP strategic lead role became part of the remit for the CSWO, who is now lead for all aspects of public protection within East Renfrewshire. This will strengthen links between all aspects of public protection.

An ASP improvement plan has been developed for 2018-19 and will be supported by the sub-committees, the practitioners' forum and the managers' forum that have been developed over the past few months. To support the improvement plan a quality assurance and training plan will be launched over the coming months.

The experience of the Adult at risk of harm is also being considered and the Adult Protection Committee has commissioned the Advocacy Project to evaluate the experiences of Adults considered to be at risk of harm at the case conference stage. The findings of this project will be embedded into the ongoing improvement work in ASP practice.

During 2017, East Renfrewshire HSCP was involved in its first Large Scale Investigation into a Care Home. This was a very complex process and involved a number of key partners. An independent learning review is in the process of being commissioned to identify the learning. The findings of this review will be the basis for the development of a more robust process to manage and monitor concerns in relation to care homes, supported living environments and registered service

## **Management Information**

In June 2017, as outlined in the previous Chief Social Work Officer Report, we embarked on developing a data set that provides a robust suite of management indicators to track performance and identify system and practice improvement. This report now provides us with the rationale for business change in order to support timeous decision making and improve upon our intervention for children, young people and their families.

Our first yearly report has been produced, detailing our activity in areas such as Child Protection, Looked after Children, Request for Assistance, Adoption and Permanence and the work of our Youth Intensive Support Service. In creating this report, we have identified areas where we needed to improve our information systems and associated recording in order to collate accurate management information. Moving forward, this will inform our focus in the area of key performance measures and target setting.

In the coming year, we will look to expand on this information to include outcomes for children and families which will assist us to identify areas for improvement in the future. This will also support delivery of our Integrated Children's Services Plan and the Corporate Parenting Plan.

A similar data set will be developed for adult social care over 2018/2019 to ensure that the Chief Social Work Officer is provided with the necessary assurance about the delivery and quality of Adult Services. This will be taken forward by the Head of Health and Social Care Localities.

## 7. WORKFORCE PLANNING AND DEVELOPMENT

The Health and Social Care Partnership has a workforce plan to support the Strategic Plan for 2015-18, however the Health and Social Care Partnership and Integration Joint Board recognised that a further review was needed in response to the rising demand, pressures on public finance and opportunities offered through the new modernised workplaces. The Fit for the Future Service Review 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.
- Underpinned by Quality Assurance.

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 November 2017 the Integration Joint Board approved the re-designation of Heads of Service roles. As of 1st April 2018 the configuration of Heads of Service is detailed below:

- Head of Public Protection & Children's Services (CSWO)
- Head of Health & Social Care Localities
- Head of Finance & Resources (CFO)

During 2017/18 the new senior management structure will take shape. This new structure reflects the principles of the programme.

As part of the new strategic plan 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 pathway.
- Integrated health and care learning and workforce development plan.

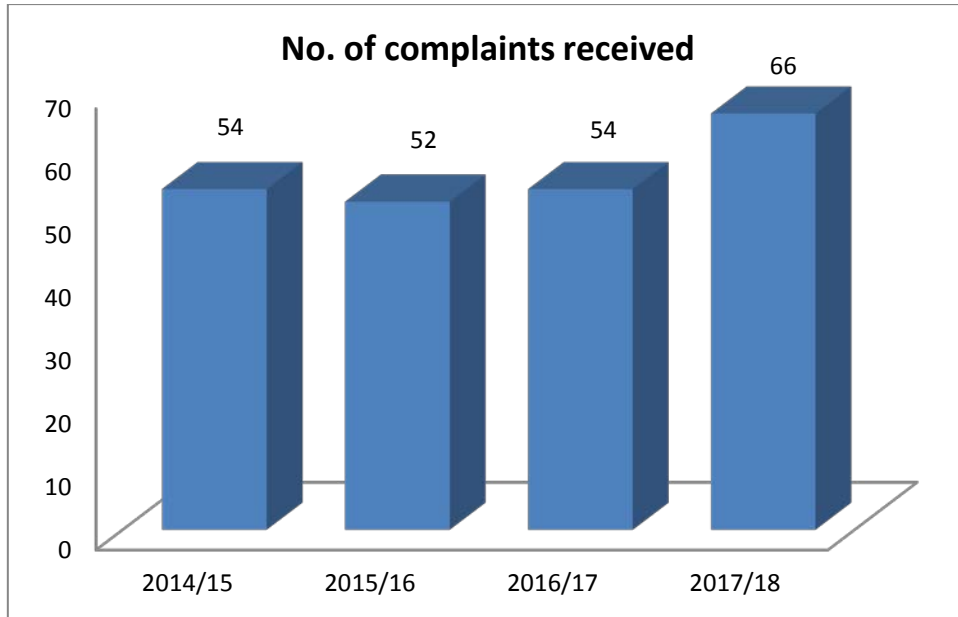
### Complaint Handling and Learning

From 1<sup>st</sup> April 2017 the way we handle complaints changed. East Renfrewshire Social Work Service adapted and adopted the Scottish Public Service Ombudsman (SPSO) Social Work Model complaint handling process. Key changes in this process are as follows:

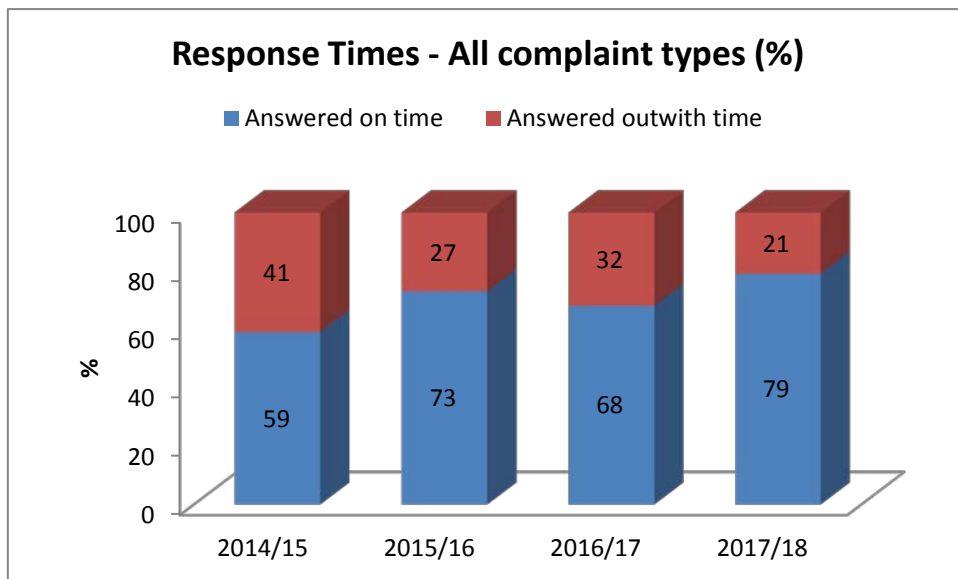


- A move from a three stage process to a two stage one with “Frontline Stage” complaints being handled quickly and locally ( 5 working days) and “Investigation Stage” complaints for dealing more complex issues (20 working days).
- Appeals against Social Work complaint outcomes for issues received after 1 April 2017 will be considered by the SPSO.
- The Social Work Complaint review committee consider appeals only for complaints received prior to 1 April 2017 and will stand down after that.

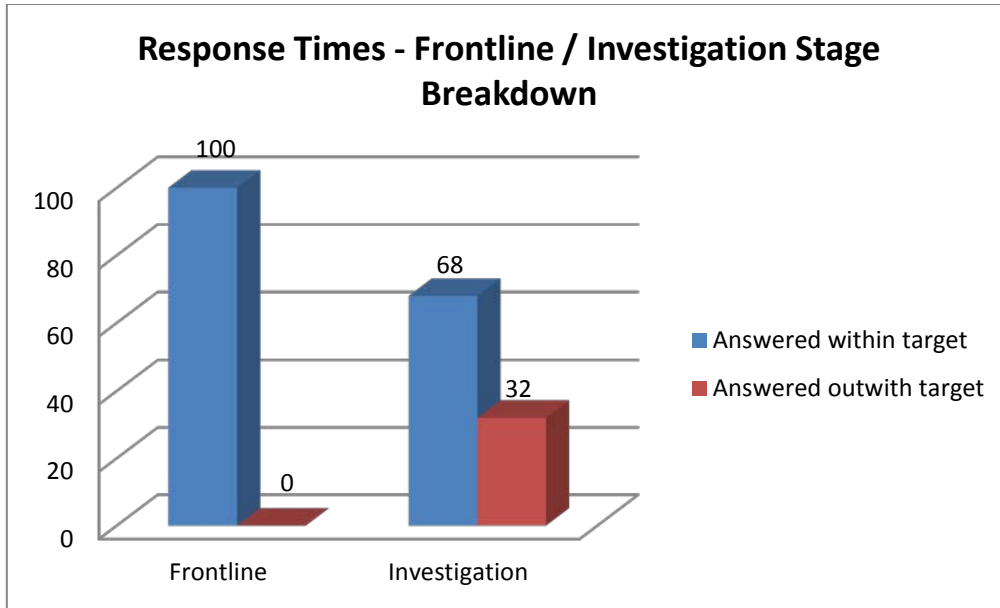
During 2017-18, 66 complaints from Health and Social Care Partnership service users, patients and carers were logged. This was an increase of 12 from the 54 complaints received the previous year.



52 (79%) of complaints were responded to within the required timescale, an increase in the previous years performance figure of 68%. The often complex and multi organisational nature of Health and Social Care Partnership complaints continues to be a challenge in meeting timescales.



Of those complaints received 33% (22) were frontline complaints and 100% were responded within the target of 5 working days and 66% (44) were Investigation stage complaints and 68% were responded to within the target of 20 days.



10 (15%) complaints were not upheld, 19 (29%) partially upheld and 37 (56%) upheld. Each of the upheld complaints has been analysed and learning actions have been progressed.

## 8. USER AND CARER EMPOWERMENT

In August 2016 the Integration Joint Board agreed its [Participation and Engagement Strategy](#). The strategy is based on four key commitments, linked to our touch stones that define our approach to engagement and participation:

- Valuing Voices and Lived Experience.
- Creating the conditions for open and honest conversations.
- Planning together with local people and community.
- Supporting everyone who wishes to be involved.

Over the course of the current Strategic Plan the focus has been developing plans to implement the new Carers legislation and the new detailed National Carers Performance Framework.

The Care Collective has taken a wider reaching and inclusive approach to developing a Carers strategy and service redesign. Whilst understanding the need to support carers' health and wellbeing, the Care Collective work has identified choice and control as the key strategic priority for carers.

The Care Collective has been engaging with local people and organisations involved in supporting carers to raise awareness of carers, gain insights into people's experiences of caring for someone else and explore the ways to enable local people to participate in developing services and strategies to best meet their needs. The aim of the Care Collective is to help local people and organisations work together so that their combined efforts add up to more than the sum of their parts. This is not solely related to the Carers Act but also to the long-term culture and ethos of working together for a 'Caring East Ren'.

Working together stakeholders including HSCP staff, the Carers Centre, VAER, the Care Collective and people with experience as Carers, have considered information and guidance for the Carers Act as it emerged from Scottish Government along with our local context and implications for implementation of the Act, including local people's thoughts and experiences of caring and support for carers.

They have identified the following conditions for success:

- Carers can participate in the decisions and the design of services that affect them.
- Stigma associated with the challenges of caring is reduced.
- Accurate information in relation to rights, eligibility criteria, statutory and non-statutory support is available and accessible.

Over the course of the plan we will work together to improve access to accurate, timely information that meets carers' needs and raises awareness of the range of supports available to them. We will continue to encourage collaboration between providers of supports to carers ensuring local provision best meets carers needs. We will provide information and training to raise awareness of the impact of caring responsibilities and ensure we have trained advisers in a range of organisations who can develop plans with and for carers.

Through our work on self-directed support we will develop and implement a consistent and clear prioritisation framework (eligibility criteria) and ensure that carers and support organisations are aware of the availability of suitable respite care and short-break provision. Working together with education we have been developing support systems that appreciate young carers and build resilience through opportunities for peer support. We will implement a digital tool for a young carers statement that has been designed by young carers for young carers and is owned by the young carer.

## 9. STATUTORY FUNCTIONS

### Summary of key achievements and areas of strength

- Our integrated model of operational delivery that is delivering quality, efficiency and improving practice.
- Strong performance and more robust quality assurance processes across statutory functions for children and adults at risk of harm.
- The excellent work of the PACE team and the real difference this is making to securing and improving children and young people's life chances through the use of improvement science.
- Our Corporate Parenting Plan.
- Our Children's Services Plan.
- The improvement in performance measures for our most vulnerable children and young people.
- 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.
- The work of the Youth Intensive Support Service in shifting the balance of care for children and young people within the authority.
- 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.
- 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.
- The consistent delivery of positive outcomes on our Talking Points - Personal Outcomes measures.
- Reduction in delayed discharge bed days.

- The delivery and planning for roll-out of our successful home care re-ablement model.
- Re-design and efficiency work within services including rehabilitation and enablement services, child health services, dementia post-diagnostic support and public social partnership work.
- Implementing community led supports.
- The implementation of improvement science throughout the Health and Social Care Partnership and the positive impact on practice, systems and culture.
- The best performance in Scotland for number of bed days due to delay discharge for people aged 75+.
- Lowest emergency admission rate for adults in Greater Glasgow.
- Expansion of our telecare programme, with, 1600 additional residents benefitting from Telecare over the course of the 3 year national Tec programme.
- Development of person centred planning tools to support our Community Led Support Talking Points.
- Good conversation training to staff and partners involved in community led support.
- Promoting and supporting the local development of recovery communities and peer support / mutual aid.
- Through our day opportunities redesign work supporting people to engage in meaningful activities and make a positive contribution to their communities.

## 10. KEY CHALLENGES AND PRIORITIES FOR YEAR AHEAD

Despite the many challenges over 2017-18, 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 others 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 will be entering the final year of our current Corporate Parenting Plan and as a consequence all local Corporate Parents will be engaged in an exercise to evaluate progress with the improvement priorities that were set, and identify the next steps for the local partnership in relation to our duties and commitment in this area. Our corporate parenting plan co-exists with our Champions Board and as we enter year 3 of our Champions Board, we build on the momentum and commitment already made by members of the board and wider corporate parents. Our Champions Board will begin to shape our new corporate parenting plan which is due to for review at the end of the coming year.

Over the next year we will look at developing a website for young people ensuring that care experienced young people can seek advice, be signposted to services and also be part of an online community. We will reach out to our aftercare population to ensure they are aware of the support and advice available to them under the Children and Young People Act 2014. We plan to expand a learning and development plan around corporate parenting, training aimed for council employees and an input for elected members. As part of this learning and development plan HSCP 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.

Integrated Children's Services Planning during 2018/19 a formal year one annual report will be published that outlines the progress made with implementation of "*Getting it right with you*" East Renfrewshire's Children's Services Plan for 2017 - 2020. This report will highlight areas where the local partnership has made considerable progress across a suite of wellbeing indicators, but also identify areas of challenge that require a multi- agency response.

For 2018/2019 our approach will continue to build upon our relational based approaches to working with children and families and continue to deliver large scale workshops that will enable us to share examples of good practice across the children's workforce. This will strengthen our integrated approach and help us to devise new and innovative practices that will help to secure improved outcomes for our children and families.

Our implementation of Signs of Safety (the international evidenced based model) will underpin our intent to do what matters to and with children, young people and their families, by continuing to develop relational based practice by moving towards family safety planning for children involved in the child protection system and intervening earlier by offering families, Family decision making meetings will be offered at the first point of contact through our partnership with our third sector provider, Children 1<sup>st</sup>.

Whilst we reviewed our Domestic Abuse Pathways for all citizens within East Renfrewshire. We will create a single point of access for all who are affected by domestic abuse and will introduce a Multi-Agency Risk Assessment Conference's (MARAC) to ensure that the children, young people and adults who are at the highest risk benefit from a more coordinated partnership response and get the right support when they need it most to ensure that they are safe. By adopting the Safe and Together model, all whose risk is high will have safety plans that are consistent in ensuring that the perpetrators' behaviour is in plain sight with our interventions / planning more focussed on the impact of these behaviours by engaging with perpetrators earlier and provide the right support / interventions for all the family that reduces the impact of risk to all.

In March this year we brought the Safe and Together Institute over from the USA and held our first ever community meeting chaired by our Chief Executive, which brought together over 170 staff, partners and our elected members. We will continue to improve our response to victims of domestic abuse by training a wide reaching number of staff and partners in this approach. We further plan to roll this model out to members of our communities who will then become champions across East Renfrewshire, supported and led by our Chief Officer Public Protection and elected members to ensure that the principles and philosophy of the model has the widest reach possible to our communities that are affected the most.

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 with a number of 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 / 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 childrens service workforce has made a significant impact on the culture, systems and practice. The emphasis on relationships, with children, young people and families being involved in co-design has resulted in a number of key opportunities in the coming year. This includes an input from young people at the 2018 Social Work Scotland Conference, Local Government Benchmarking Framework and Scotland Expo led by the Scottish Government. These inputs will explore our vision to engage with individuals, groups and families in a way that makes a difference to them by ensuring decisions are being co-produced by empowering families and communities. We will also take time over the forthcoming year to reflect on how the journey of redesign has inspired and motivated a workforce, providing opportunity for learning and career progression.

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, including adoption in order that they may have a safe, stable and secure home for the remainder of their childhood.

During 2018-19, we will further enhance our community and intensive services for children, young people and families within our revised management structure through Fit for the Future. This will enable us to:

- Provide a consistent approach to targeted, relational based 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

Redefine our intensive support to younger children and their families, including ensuring their voices are heard

- Continue to seek innovative and creative ways to engage with children and families working in partnership with the third sector.
- Launch phase 3 of our campaign for supported carers to provide a loving home for older young people.
- Finalise and implement management information so we can better measure the impact and outcomes of our services on children, young people and families.

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 focus on improving our recording practice by training our staff in new recording standards across the workforce. We will develop standards for chronologies, in order to strengthen the quality of our assessments, ranging from more robust risk assessment in public protection, to improved permanence planning for our looked after and accommodated children. We will also focus on improving our supervision practice across the workforce for social work.

In the coming year we will continue to strengthen our Adult Support and Protection practice by training and developing our workforce. This will be underpinned by the implementation of the Adult Support Improvement Plan which will create a more robust Quality Assurance Framework. The Adult Support and Protection Committee will develop further multi-agency working and continue to oversee the training and awareness raising around Adult Support and Protection.

We have been working together with local people, community groups and organisations to redesign a new 'front door' and new ways of engaging with people in their communities. We have tested this approach, designing new local Talking Points, where people can talk to different health and care staff and community volunteers about what matters to them. Through this approach we want to make sure that people can have access to the right conversation at the right time and have the right support to maintain their independence. During 2018/19 we will make this our main approach, with a fixed talking point in every locality and regular pop up talking points in our local communities.

Good progress has been made in learning disability redesign to support people to live as independently as possible. This needs to continue and inform our work with older people. For those people who require support for their daily lives, we will be developing and testing a new individual budget calculator. This should provide a more simple and transparent approach than our current equivalence model, which is based on a calculation of task and time. Introducing an outcomes based approach should support choice and control with more flexibility and potential for innovation.

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 2018/19 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 are redeveloping Bonnyton House using six beds as an intensive

rehabilitation resource to prevent hospital admission and to ensure a safe return home for people discharged from hospital.

HSCP activity to reduce delayed discharges and reduce lengths of stay by reaching into hospitals and getting people back to East Renfrewshire has been very successful and we are one of the best performing areas in Scotland. However we benchmark poorly on the percentage of time spent by people in the last 6 months of life at home or in a community setting. This is a sign that as an integrated health and social care system we are not yet supporting people as well as we could and that we may be missing opportunities to intervene and plan earlier for the last stages of a person's life. During 2018/19 this will be a particular focus of work colleagues in primary and acute care.

In preparation for the start of the new Carers Act, the Care Collective has been engaging with local people and organisations involved in supporting carers to raise awareness of carers and gain insights into people's experiences of caring for someone else. The aim of the Care Collective is to help local people and organisations work together so that their combined efforts add up to more than the sum of their parts. This is not solely related to the Carers Act but also to the long-term culture and ethos of working together for a 'Caring East Ren'.

Nevertheless as outlined in the 2016-17 report, the impact of continuing efficiency savings over the last three years has been a significant challenge for the Health and Social Care Partnership from both a health and social care perspective. There are many benefits of sharing the risks associated for service users and patients by being integrated and whilst this has been a continual feature for staff and teams of having a shared approach to risk it needs to sit alongside the efficiencies that require to be delivered through Fit for the Future.

In the current financial climate it is difficult to predict the future funding levels for both social care and for health. Whilst the 2018-19 budget settlement was better than was outlined in last year's report, we continue to develop our scenario planning to allow us to model the impact of different funding levels.

- We have recognised the challenges in the medium term and will continue to use invest to save models and reserves to smooth the impact of change.
- We are progressing with our significant service redesign and associated staffing structure; given the impact on staff costs from prior year savings and our Fit for the Future change programme there is little scope to make further savings in staffing moving forward.
- We have reviewed our approach to Individual Budget allocations and intend to implement our new model during 2018/19 following consultation.
- We are progressing with our Community Led Support programme focusing on prevention and maximising community.
- We continue to explore shared services; systems and technological opportunities.

The 2018-19 savings challenge relating to social care is £0.41 million, with firm plans in place to deliver this in full. 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 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 cease to amaze me, the improvements and successes within this year's reports are all yours.

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

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