

Date: 14 January 2022
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TO: MEMBERS OF THE EAST RENFREWSHIRE INTEGRATION JOINT BOARD

Dear Colleague

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

A meeting of the East Renfrewshire Integration Joint Board will be held on **Wednesday 26 January 2022 at 10.00 am.**

Please note this is a virtual meeting.

The agenda of business is attached.

Yours faithfully

Councillor Caroline Bamforth

Chair

For information on how to access the virtual meeting please email eamonn.daly@eastrenfrewshire.gov.uk

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**EAST RENFREWSHIRE INTEGRATION JOINT BOARD
WEDNESDAY 26 JANUARY 2022 AT 10.00 am**

VIRTUAL MEETING VIA MICROSOFT TEAMS

AGENDA

- 1. Apologies for absence.**
- 2. Declarations of Interest.**
- 3. Minute of meeting held on 26 November 2021 (copy attached, pages 5 - 16).**
- 4. Performance and Audit Committee Minute – 26 November 2021 (copy attached, pages 17 - 22).**
- 5. HSCP COVID Response (copy to follow).**
- 6. Revenue Budget Monitoring Report (copy to follow).**
- 7. Future Funding for Family Wellbeing Service (copy attached, pages 23 - 38).**
- 8. Date of Next Meeting: Wednesday 16 March 2022 at 10.30 am.**

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**Minute of virtual meeting of the
East Renfrewshire Integration Joint Board
held at 10.30 am on 24 November 2021**

PRESENT

Councillor Caroline Bamforth	East Renfrewshire Council (Chair)
Lesley Bairden	Head of Finance and Resources (Chief Financial Officer)
Councillor Tony Buchanan	East Renfrewshire Council
Dr Angela Campbell	Consultant Physician in Medicine for the Elderly
Dr Claire Fisher	Clinical Director
Jacqueline Forbes	NHS Greater Glasgow and Clyde Board
Anne Marie Kennedy	Third Sector representative
Dr Deirdre McCormick	Chief Nurse
Andrew McCready	Staff Side representative (NHS)
Geoff Mohamed	Carers' representative
Heather Molloy	Scottish Care representative
Anne-Marie Monaghan	NHS Greater Glasgow and Clyde Board (Vice-Chair)
Julie Murray	Chief Officer – IJB
Lynne Rankin	Staff Side representative (ERC)
Kate Rocks	Head of Public Protection and Children's Services (Chief Social Work Officer)
Councillor Jim Swift	East Renfrewshire Council
Flavia Tudoreanu	NHS Greater Glasgow and Clyde Board

IN ATTENDANCE

Liona Allison	Assistant Committee Services Officer, East Renfrewshire Council
Tracy Butler	Lead Planner (Recovery Services)
Mairi-Clare Armstrong	Governance and Systems Manager
Eamonn Daly	Democratic Services Manager, East Renfrewshire Council
Pamela Gomes	Governance and Compliance Officer
Tom Kelly	Head of Adult Services - Learning Disability and Recovery
Lee McLaughlin	Head of Adult Services – Communities and Wellbeing
Ian McLean	Accountancy Manager
Louisa Yule	Audit Scotland

APOLOGIES FOR ABSENCE

Provost Jim Fletcher	East Renfrewshire Council
Amina Khan	NHS Greater Glasgow and Clyde Board

DECLARATIONS OF INTEREST

1. There were no declarations of interest intimated.

MINUTE OF PREVIOUS MEETING

2. The Board considered and approved the Minute of the meeting held on 22 September 2021.

MATTERS ARISING

3. The Board considered and noted a report by the Chief Officer providing an update on matters arising from discussions that had taken place at the previous meeting.

ROLLING ACTION LOG

4. The Board considered a report by the Chief Officer providing details of all open actions, and those that had been completed or removed since the last meeting.

The Board noted the report.

PERFORMANCE AND AUDIT COMMITTEE

5. The Board considered and noted the Minute of the meeting of the Performance and Audit Committee held on 22 September 2021.

AUDITED ANNUAL REPORT AND ACCOUNTS 2020-21

6. Under reference to the Minute of the meeting of the Performance and Audit Committee held prior to the meeting of the Board, the Board considered a report by the Chief Financial Officer seeking approval for the final annual report and accounts for the IJB for the period 1 April 2020 to 31 March 2021, following the external audit of the accounts. A copy of the annual report and accounts accompanied the report.

The report referred to the establishment of IJBs and the requirements, in accordance with Section 106 of the Local Government (Scotland) Act 1973, for annual accounts to be prepared in compliance with the Code of Practice on Accounting for Local Authorities in the United Kingdom, and also to additional guidance produced by the Local Authority (Scotland) Accounts Advisory Committee.

Thereafter, the report explained that the annual report and accounts had been prepared in accordance with the relevant legislation and guidance, and set out the key messages from Audit Scotland. In summary, the annual report and accounts were unmodified and the operational underspend and reserves were unchanged from the unaudited position; effective financial management was in place to support monitoring and decision making; the potential future year financial challenges were unlikely to be addressed through efficiency alone and work with partners was required to ensure financial sustainability; the IJB has appropriate governance in place and arrangements during the Covid-19 pandemic have operated effectively; and the IJB has effective arrangements in place to demonstrate best value and for managing performance.

The report also referred to the 3 recommendations made by Audit Scotland and summarised the response and associated timescale for action in respect of each, with progress on these to be reported to the Performance and Audit Committee.

The report also highlighted that the main messages from the annual report and accounts remained unchanged from the unaudited position reported in June, with the operational underspend of £0.833 million remaining unchanged. Main budget variances were set out and it was noted that the reserves total remained unchanged at £10.415 million. COVID-19 spend was £9.115 million. Funding of £12.260 had been received with the balance taken to reserves.

Ms Monaghan, Chair of the Performance and Audit Committee, reported that the accounts, along with the external auditor's report, had been discussed at length at the committee, and that it had been agreed to remit the report and accounts to the Board with a recommendation that they be approved. She also expressed thanks to the Chief Financial Officer and her team for preparing the accounts as well as thanking both internal and external audit for their contributions.

In response to questions from Ms Tudoreanu in relation to financial planning, the Chief Financial Officer reminded the Board that the latest iteration of the Medium-Term Financial Plan was considered at the Board meeting in June. The Board's overall financial position was also reported as part of the revenue budget monitoring reports considered at each meeting. She highlighted that the biggest impact on the financial position would be in relation to winter funding, the details of which were expected to be available after the Scottish Government budget was announced on 9 December.

Councillor Swift questioned whether there were any early indications of the levels funding that would be made available by the partner organisations. In reply, the Chief Financial Officer outlined the early indicative funding arrangements in respect of the Health Board and the Council and that it was likely that the IJB would face some unfunded service pressures. However, it was hoped that any additional winter funding would help to alleviate some of the current demand pressures, although the challenge of dealing with legacy savings still remained.

Thereafter the Board:-

- (a) approved the audited annual report and accounts; and
- (b) authorised the Chair, Chief Officer and Chief Financial Officer to accept and sign the annual report and accounts on behalf of the IJB.
- (c) noted the summary overview of financial performance document for 2020-21.

WINTER PLAN 2021-2022

7. The Board considered a presentation from Lee McLaughlin, Head of Adult Services – Communities and Wellbeing providing an update on preparedness for winter across the NHSGGC area.

In the course of the presentation, key pressure points on the system were highlighted. These included significant increases in Care at Home referrals from both community and hospital services. Despite this, high levels of service provision had been maintained and the Care Inspectorate review of the Care at Home Service had shown significant improvements.

Reference was made to the additional financial resources being provided by the Scottish Government to provide Health Care Assistants. The East Renfrewshire share of funding had provided 16 Health Care Assistants locally with details of how the staff would be used being set out.

The presentation also set out the key objectives for Interim Care, Care at Home and Multi-Disciplinary Teams and the associated budget plan for each of the 3 service areas, and concluded by outlining next steps, including joint approaches to recruitment.

In relation to interim care, it was emphasised that whilst the primary objective was to support as many people as possible to stay at home, there were occasions when this was not possible. Details of the work being carried out to provide support at Bonnyton House were outlined.

Full discussion then took place in the course of which the Chief Officer referred to the need for recruitment to happen quickly in order to deal with the winter ahead, and that there may be the opportunity to look at some service redesign in future.

Having welcomed the improvements in the Care at Home Service, Ms Monaghan posed a series of questions in relation to the recruitment process for the additional Home Care Assistants, the Self Directed Support (SDS) Test of Change interim care key objective, and the Kindness Collaborative which formed part of the Home First - Whole Sector Response strategy to increase capacity in the Care at Home Service.

In relation to the recruitment process for the Health Care Assistants it was explained that this was a joint process with a range of different professionals on the recruitment panel, and that although the staff were being recruited through the NHS the objectives for the role were clear.

Details of the (SDS) Test of Change were also provided, it being noted that in many cases funding was used to employ family members or friends. In relation to the Kindness Collaborative it was explained that the services on offer may often be in addition to and not instead of other services available.

Dr Campbell welcomed the work being done, in particular the work that was taking place to tackle delayed discharge. She explained that some patients were reluctant to go into interim care as this was often seen by them as a delay in getting home. She also emphasised the importance of good communication between community and hospital services to help minimise delayed discharge.

In reply, the Head of Adult Services – Communities and Wellbeing explained that the “hub and spoke” model would involve frailty practitioners and confirmed that work to improve lines of communication was ongoing.

Responding to questions from Councillor Swift on the use of gyms and exercise for pulmonary and cardiac rehabilitation, the Chief Officer acknowledged the benefits of such an approach. She explained that good collaborative working with GPs in relation to exercise had been in place pre-pandemic. Whilst this approach had been paused, it was an area that officers were keen to restart, and it had been agreed to fund the Culture and Leisure Trust to help develop a programme in conjunction with local GPs.

Ms Forbes commented on the provision of respite care. Whilst recognising the benefits respite care could provide she also explained that providing care outwith a person’s home environment could have a negative impact and so any plans to provide respite care for people in their own home were to be welcomed.

Ms Molloy referred to the staffing crisis across the health and care sector. Whilst supporting collaborative working, she explained that many in the independent sector had

concerns and felt that despite the significant number of services commissioned from the sector the level of commitment to the sector could be better. The need for the right governance to be in place for true collaborative working was considered to be key.

Responding to Ms Molloy's comments the Head of Adult Services – Communities and Wellbeing explained that in relation to staffing the HSCP was facing the same challenges as the independent sector. She also gave examples of some of the collaborative work with the independent sector such as in the purchase of extra beds.

Ms Monaghan having been heard on the need for the independent and third sector to ensure any increase in the Living Wage was passed on to staff and on the importance of people being able to use SDS funds as flexibly as possible, the Board noted the presentation.

REVENUE BUDGET MONITORING REPORT

8. The Board considered a report by the Chief Financial Officer providing details of the projected outturn position of the 2021-22 revenue budget as at 30 September 2021. It was noted that this was the second monitoring report for 2021-22 and provided the projected outturn for the year based on the latest information.

The report referred to the recently announced winter funding for 2021-22, some of which was recurring. Not all winter funding had been distributed and so the impacts referred to in the report were provisional and subject to refinement. Thereafter the report summarised the position in respect of the proposed use of the funds. In particular the report referred to the proposed increase in hourly rates in support of the fair work agenda. It was explained that the funding to support the fair work agenda and increase the rates of pay for the HSCP's partner providers had not yet been distributed, however the mechanism for increase to hourly rates had been agreed.

The Board was reminded of previous commitments to implement the fair work agenda in full and it was hoped to have all rate changes and any backdating in place by January 2022. This was a complex piece of work and for the first time collaboration with Scotland Excel as part of the national framework was required where appropriate. On the basis that the social care increase was fully funded the Board was asked to agree to its implementation. In addition delegated authority was sought for the Chief Officer and management team to finalise the planned use of winter funding.

As in previous updates the report explained that HSCP costs related to COVID-19 activity were reported to the Scottish Government via NHS Greater Glasgow and Clyde, as health boards were the leads on this reporting. For 2021-22 Projected COVID related costs were £9.578 million. Taking account of available funding confirmed and received to date further funding of £6.213 million was required.

Costs were reviewed on a monthly basis and projections continually revised as response to the pandemic continued. The projections included in the report assumed full COVID-19 funding including support from the Scottish Government for unachieved savings. There was a significant risk to delivering a balanced budget without this support.

Thereafter it was reported that against a full year budget of £134.815 million there was a projected underspend of £0.175 million (0.13%), after assumed contributions to and from reserves.

Comment was then made on the main projected operational variances. Projected costs were based on known care commitments, vacant posts and other supporting information from financial systems as at 30 September 2021, and allowed for the latest known information with the exception of the detail that would support winter funding.

NOT YET ENDORSED AS A CORRECT RECORD

It was clarified that the underspend would be added to the budget savings reserve subject to final outturn and agreed reserves position at the end of the financial year.

The Head of Finance and Resources (Chief Financial Officer) was then heard further on the report in the course of which she highlighted that COVID related costs and associated funding were anticipated to reduce as winter funding was refined and some activities were established on a recurring basis. In response to Ms Molloy she also outlined the anticipated timescale for the payment of the increased hourly rates to independent contractors and the third sector.

The Board:-

- (a) noted the projected outturn for the 2021/22 revenue budget;
- (b) noted the projected reserves balances
- (c) agreed to delegate to the Chief Officer the planned use of the 2020/21 Winter funding; and
- (d) agreed to implement to social care pay uplift subject to the cost being fully funded

HSCP RECOVERY AND RENEWAL PROGRAMME UPDATE

9. Under reference to the Minute of the previous meeting (Item 8 refers) the Board considered a report by the Chief Officer providing an update on the HSCP Recovery and Renewal Programme.

Details of the work that had taken place since the update given to the September meeting were provided. This included the ongoing work in relation to the replacement of the HSCP care recording system. The revenue and capital funding for the project over the financial years 2021-22 to 2023-24 was outlined, and it was noted that a project board, with membership comprising each HSCP service and colleagues from Council procurement and ICT services had been established.

It was also explained that an initial financial framework for the recovery and renewal programme had been drafted. This identified efficiency targets against a number of projects, however, further work was required to finalise the framework. Furthermore, the recent announcement of additional funding (winter planning) to support health and social care would also impact on this programme of work. Once this was clearer this would also be incorporated into the programme of work and supporting financial framework. The framework would include those areas where the programme would support delivery to help the £3.4 million funding gap be achieved, at least in part.

Having heard the Head of Finance and Resources (Chief Financial Officer) respond to comments from Ms Forbes on the absence of 2 appendices referred to in the report, the Board noted the report and that the appendices would be circulated to all Board members.

EAST RENFREWSHIRE PEER SUPPORT SERVICE – MENTAL HEALTH AND ADDICTIONS FINAL EVALUATION REPORT

10. Under reference to the Minute of the meeting of 17 March 2021 (Item 10 refers), when the Board had considered and noted a report providing an update on the test of change to deliver an East Renfrewshire Peer Support Service, employing peer workers with lived experience to support individuals in their recovery journeys, the Board considered a further

report by the Chief Officer providing an overview of the final evaluation of the test of change and detailing further progress in embedding peer support in formal service settings and expanding the capacity of the peer support service.

Having reminded the Board of the background to the establishment of the peer support service including the appointment of Penumbra as the preferred provider, the report provided a summary of the final evaluation report, a copy of which accompanied the report.

The report highlighted that the test of change had 2 key aspects; delivering a service that worked locally and embedding a service within formal services to explore the extent and potential of using people with lived experience, alongside people with clinical experience, and where the right balance is.

It was noted that the service has benefitted from strong engagement with HSCP staff and partners, evidenced by the wide range of referrals to the service from Adult Mental Health Teams, Community Addictions Teams as well as from voluntary sector partners RCA Trust and RAMH. In particular the service has had strong support from psychiatrists, with more than half of referrals from the Adult Mental Health Teams coming from that source.

The report set out the 5 key findings from the evaluation, and it was explained that as peer support continued to develop, the recommendations made in the evaluation report provided a focus for continuing improvement and were already being actioned by Penumbra and the HSCP.

It was also reported that following the early, positive evaluation findings and evidence of the demand for peer support, the contract with Penumbra was expanded in June 2021, increasing the number of peer workers from two to three, and extending the contract to June 2024. This demonstrated the HSCP's commitment to peer support and maximised the opportunity to fully embed peer support, lived experience and a focus on recovery within the delivery of mental health and addiction services.

The report also emphasised the critical importance of lived experience being at the heart of peer support, and explained that Penumbra's peer workers had played an active role in influencing the initial design and delivery of the service and the ongoing evaluation. Details of the activities that had steered the test of change and the shape of peer support were set out.

It having been highlighted that the test of change and the learning from it would be shared with NHS Greater Glasgow and Clyde to inform the Five Year Mental Health Strategy, the report explained that the HSCP and Penumbra continued to work closely together to develop the service, including responding to the evaluation findings and recommendations, gathering and analysing data to inform continuous improvement, and developing group work. Further evidence gathering would focus on the impact of the service on individual's recovery outcomes and goals, the length of time that individuals might require peer support and what moving on from peer support looked like.

The Head of Adult Services - Learning Disability and Recovery was heard further on the report, and in response to comments from Ms Forbes on the imbalance between qualitative and quantitative improvements in the evaluation explained that the evaluation process was at an early stage and that he was confident quantitative improvements would get better over time.

Ms Monaghan having welcomed the positive evaluation and in particular the use of the test of change approach, Ms Tudoreanu referred to the apparent gender disproportionality in service use and questioned whether the service needed to be adjusted to address this.

In reply the Head of Adult Services - Learning Disability and Recovery explained that this issue had been recognised and that officers were already looking at ways in which to address it such as, for example, the use of male peer support staff.

Following further discussion in the course of which the Head of Adult Services - Learning Disability and Recovery referred to areas for further investigation identified in the report, and Councillor Bamforth acknowledged how quickly the service had reached capacity and still managed to sustain engagement with service users, the Board noted:-

- (a) the final evaluation report and agreed that it be approved for publication and circulation to recovery networks; and
- (b) that the capacity of the service had been increased and the contract with Penumbra extended until June 2024.

EAST RENFREWSHIRE ALCOHOL AND DRUGS PARTNERSHIP UPDATE

11. Under reference to the Minute of the meeting of 23 September 2020 (Item 9 refers), when the Board had approved the East Renfrewshire Alcohol and Drugs Strategic Plan and Delivery Plan 2020-23, the Board considered a report by the Chief Officer providing an update on work being undertaken to enhance the voice of lived experience in the work of the Alcohol and Drugs Partnership (ADP). In addition, the report also provided an update on the Drugs Mission and the implications and opportunities for East Renfrewshire.

By way of background, the report explained that the local Plan was strongly influenced by national ministerial priorities and strategic aims set by the Scottish Government.

During 2021, there had been a number of significant developments in the Scottish Government's approach to the drug related deaths emergency, and on 20 January 2021 the First Minister had announced the Drugs Mission, an enhanced approach focusing on fast access to treatment and increased access to residential rehabilitation, together with significant additional funding for ADPs. In May, new Medication Assisted Treatment Standards were published, and following a number of funding letters and clarifications over the period June to September, the East Renfrewshire ADP had a clear picture of the additional investment available locally.

The report then provided an update on enhanced lived experience involvement in the work of the ADP, which was a key priority as part of the delivery of the East Renfrewshire Alcohol and Drugs Plan. This included a peer research development programme, the establishment of a lived experience panel, and employing more people with lived experience. Information in respect of each of these 3 areas was set out.

The report then provided further information on how the additional funding made available to East Renfrewshire ADP as part of the National Mission was being used. It was noted that funding allocations were recurring for the life of the National Mission through to 2025-26. This confirmation was welcomed as it allowed longer-term planning for services and supports that met local need.

Although preparatory work had been under way for some time in advance of the financial package being confirmed in September, in October, following discussion with partners, the ADP had agreed 2 short-term actions, these being the recruitment of a fixed-term part-time medical officer in order to ensure delivery of same day prescribing for opiate substitution treatment for those who need it, by April 2022, and use of the residential rehabilitation allocation as required to place individuals appropriately based on a person centred approach. In relation to the first of these, the report explained that this was one of the key Medication Assisted Treatment Standards, details of which accompanied the report.

Thereafter the report explained that ADPs had been required by the Scottish Government to complete an Annual Review template for 2020-21. A copy of the submission approved by the ADP also accompanied the report.

The Chief Officer was heard on the background to the production of the initial Strategic and Delivery Plan, and on the criticisms at the time about the lack of involvement of people with lived experience in the development of the Plan. She explained that since then much work had taken place with people with lived experience being involved. This included their involvement in decisions on the use of additional funding to make sure the funding was used appropriately.

The Lead Planner (Recovery Services) was then heard in the course of which she explained that the peer research programme had been welcomed and had produced good information that would be used to help shape the service going forward. The Lead Planner (Recovery Services) and Chief Officer were then heard in response to questions from Councillor Swift on numbers of registered addicts in the area; access to the recovery service and funding. Recovery targets and the definition of recovery were also discussed.

The Head of Public Protection and Children's Services (Chief Social Work Officer) highlighted to the Board that issues of addiction often impacted across the whole health and care system with people often being involved with different services at the same time.

Ms Monaghan welcomed the report. She acknowledged that she had been critical of the lack of involvement of people with lived experience in the earlier plan. However commitments given at the time that people with lived experience would be involved in future had been kept.

The Board noted:-

- (a) progress to date on enhancing the involvement and influence of lived experience in the work of the Alcohol and Drug Partnership;
- (b) the significant additional funding allocated to East Renfrewshire Alcohol and Drug Partnership and that work is well underway to identify priorities for investment;
- (c) the Medication Assisted Treatment Standards and the work being undertaken to progress delivery of the standards; and
- (d) the Alcohol and Drug Partnership Annual Review 2020-21 which has been submitted to the Scottish Government.

CHIEF SOCIAL WORK OFFICER'S ANNUAL REPORT 2020-21

12. The Board considered a report by the Chief Social Work Officer providing details of her Annual Report for 2020-21. A copy of the Annual Report was appended to the report.

The Annual Report provided an overview of the professional activity for social work within East Renfrewshire for 2020-21 through the delivery of statutory functions and responsibilities held by the Chief Social Work Officer. The impact of COVID-19 on the production of the annual report was highlighted and it was explained that the report provided a narrative of social work and social care activity across 5 broad headings, these being Governance and Accountability arrangements; Service Quality and Performance; Resources; Workforce; and COVID-19.

A number of areas of strong performance and success were highlighted including the enhancement of the Family Wellbeing Service achieving positive outcomes for children and

young people's emotional wellbeing; reductions in the number of children and young people looked after away from home and strengthening the voices of families in processes; enhanced levels of participation and engagement by looked after children and young people; establishment of a Self Directed Support Steering Group with over 50% membership of individuals who use social care services and their families to shape, improve and streamline processes; significant improvement in Care at Home services with the Care Inspectorate inspection in July assessing all areas as good; Significant improvement of the multi-agency approach to Large Scale Investigations reducing harm and improving outcomes for local residents; and the overall strength of multi-agency and partnership working in East Renfrewshire

The report also highlighted a continuing number of significant challenges and risks facing social work and social care in East Renfrewshire. These included increased demand for social work support across both children's and adult services and care at home for adults both in terms of numbers and complexity of need; increased referrals to Child and Adolescent Mental Health Services (CAMHS) alongside staff vacancies resulting in a need to prioritise resources to meet the needs of young people experiencing emotional distress; growing complexity of significant domestic abuse which was being responded to through multi agency work, Safe and Together and the implementation of Multi-Agency Risk Assessment Conferences (MARAC); implementation of learning from the Care Review (The Promise) in all aspects of work with looked after children and young people; and the impact of Coronavirus (Covid-19) and the challenge of recovery, particularly as there has been a rise in poor mental health, emotional distress, and for older people, increased physical frailty and dependency alongside capacity challenges within social care services.

The Chief Social Work Officer was heard in detail on the report, highlighting that many of the issues in the report had been discussed during earlier items on the agenda.

She referred to the physical and emotional impact of the pandemic on staff and to the resilience of staff who managed to continue to deliver during such challenging times.

Ms Monaghan welcomed the report. In particular she welcomed the better balance between Children's and Adult Services reflected in the report and that it gave the Board real understanding and assurance on all social work activity.

Councillors Swift and Buchanan echoed the comments. Councillor Buchanan referred in particular to the pressures on staff over the previous 2 years. There were no signs of these pressures abating and the Board needed to recognise this going forward.

Thereafter the Board:-

- (a) recognised and paid tribute to the workforce for their efforts;
- (b) noted the Chief Social Work Officer's Annual Report; and
- (c) noted that the report had been considered and approved by the Council on 27 October.

DATE OF NEXT MEETING.

13. It was noted that the next meeting of the Integration Joint Board would be held on Wednesday 26 January 2022 at 10.00 am.

VALEDICTORY – FLAVIA TUDOREANU

14. The Chief Officer advised the Board that this would be the last meeting attended by Flavia Tudoreanu, and accompanied by Councillor Bamforth thanked her on behalf of the Board for her contribution and wished her well for the future.

Ms Tudoreanu responded in suitable terms.

CHAIR

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**Minute of virtual meeting of the
East Renfrewshire Integration Joint Board
Performance and Audit Committee
held at 9.00am on 24 November 2021**

PRESENT

Anne-Marie Monaghan, NHS Greater Glasgow and Clyde Board (Chair)

Councillor Caroline Bamforth	East Renfrewshire Council
Jacqueline Forbes	NHS Greater Glasgow and Clyde Board
Heather Molloy	Scottish Care
Anne Marie Kennedy	Non-voting IJB member

IN ATTENDANCE

Liona Allison	Assistant Committee Services Officer (East Renfrewshire Council)
Lesley Bairden	Head of Finance and Resources (Chief Financial Officer)
John Cornett	Audit Scotland
Eamonn Daly	Democratic Services Manager (East Renfrewshire Council)
Ian McLean	Accountancy Manager
Julie Murray	Chief Officer - IJB
Steven Reid	Policy, Planning and Performance Manager
Louisa Yule	Audit Scotland

APOLOGIES FOR ABSENCE

Councillor Barbara Grant	East Renfrewshire Council co-opted Member
Provost Jim Fletcher	East Renfrewshire Council

DECLARATIONS OF INTEREST

1. There were no declarations of interest intimated.

MINUTE OF PREVIOUS MEETING

2. The committee considered and approved the Minute of the meeting of 22 September 2021.

MATTERS ARISING

3. The committee considered a report by the Chief Officer providing an update on matters arising from discussions that had taken place at the previous meeting.

Having heard Ms Monaghan welcome the production of an easy read version of the annual

performance report and also welcome the £50 threshold below which receipts of expenditure were not required in relation to SDS payments, the committee noted the report.

ROLLING ACTION LOG

4. The committee considered a report by the Chief Officer providing details of all open actions, and those that had been completed or removed since the last meeting.

Having heard the Chief Officer, Ms Monaghan referred to Action 20 in respect of the Annual Performance Report which was identified in the report as a closed action. She suggested that this should remain as an open action as the issue of percentages against actual numbers to provide more contextual information remained unresolved. The Chief Officer undertook to review this.

The Committee noted the report.

INTERNAL AUDIT ANNUAL REPORT 2020-21 AND PROPOSED AUDIT PLAN 2021-22

5. The committee considered a report by the Chief Auditor, East Renfrewshire Council, relative to the Chief Auditor's Annual Report for 2020-21 which contained an independent opinion on the adequacy and effectiveness of the governance, risk management and internal control systems operating within the IJB. A copy of the Chief Auditor's Annual Report accompanied the report as an appendix.

The report explained in summary that the Annual Report concluded that the IJB had adequate and effective internal controls in place proportionate to its responsibilities in the year ended 31 March 2021. This was with the exception of a matter still under investigation by Police Scotland, and so no further information could be provided at this time.

In addition, details of the proposed 2021-22 audit plan, for which approval was sought, were contained in the report.

In the absence of the Chief Auditor the Head of Finance and Resources (Chief Financial Officer) was heard further on the report and confirmed that Internal Audit were satisfied that reasonable assurance could be placed on the control environment which operated in the East Renfrewshire Integration Joint Board. She confirmed that full details of the matter that was currently the subject of a police investigation would be brought to the committee at an appropriate time.

Commenting on the annual report and plan Ms Forbes again raised concerns that the committee did not have sight of any audit reports in relation to any matters delegated to the IJB by the Council and the health board. Responding to the concerns raised, the Head of Finance and Resources (Chief Financial Officer) reminded the committee that the format of the audit update report had been changed and that report contained every audit update/action in relation to either the HSCP or the IJB. However it members wished sight of the individual reports these could be provided.

The committee:-

- (a) noted the contents of Internal Audit's annual report 2020-21;
- (b) noted the annual assurance statement and the conclusion that the IJB had adequate and effective internal controls in place proportionate to its responsibilities in 2020-21 except for a matter still under investigation by Police Scotland;

- (c) approved the proposed 2020-21 audit plan; and
- (d) noted that copies of audit reports would be circulated to all members of the committee.

AUDIT SCOTLAND REPORT 2020-21

5. The committee took up consideration of the external audit annual report for 2020-21, which summarised the findings arising from the 2020-21 audit of the IJB.

The report provided a number of key messages. In relation to financial management and sustainability, it was noted that the auditor's report was unmodified; that the IJB had appropriate and effective financial management arrangements in place to support financial monitoring, reporting and decision making, and that the IJB had returned an underspend of £5.759 million against a budgeted overspend of £2.432 million, prior to any identified savings. This was mainly due to reduced service costs due to COVID-19 as well as earmarked funding received in-year that was unspent as at 31 March. In addition, the auditor noted that the medium-term financial outlook, covering the period 2022/23 to 2026/27, had been updated by the IJB to reflect the impact of COVID-19, with an identified funding shortfall of around £4 million per year from 2021/22 onwards. Future efficiency savings alone were considered unlikely to address this funding gap and the IJB would need to continue to work with partners to develop a revised financial strategy which ensured the organisation remained financially sustainable.

In relation to governance, transparency and best value it was noted that in the auditor's opinion the IJB has appropriate governance arrangements in place that support the scrutiny of decisions by the Board; governance arrangements operating throughout the COVID-19 pandemic have been appropriate and operated effectively; the IJB has put in place appropriate arrangements to demonstrate the achievement of Best Value; and the IJB has effective arrangements for managing performance and monitoring progress towards strategic objectives.

Included in the appendices accompanying the report was an action plan which set out the proposed management action in respect of areas where recommendations had been made.

Ms Monaghan introduced John Cornett and Louisa Yule from Audit Scotland.

Mr Cornett was heard further on the key messages and that it was intended to issue an unqualified audit opinion. In terms of financial sustainability he highlighted that COVID had led to the IJB having healthy reserves, due in part to the late receipt of additional funding from the Scottish Government. However it was important not to lose sight of the underlying financial challenges which lay ahead and which may not seem apparent in light of the "healthy" financial position.

In conclusion Mr Cornett thanked the Head of Finance and Resources (Chief Financial Officer) and her staff for their assistance in delivering the audit.

Thereafter having heard Ms Monaghan echo Mr Cornett's thanks to all those involved in the timeous production of the accounts and the annual report, the committee noted the report.

ANNUAL REPORT AND ACCOUNTS 2020-21

6. Under reference to the Minute of the meeting of the IJB of 23 June 2021, the committee considered a report by the Chief Financial Officer seeking approval for the final audited annual

20
NOT YET ENDORSED AS A CORRECT RECORD

report and accounts for the IJB for the period 1 April 2020 to 31 March 2021, following the external audit of the accounts. A copy of the annual report and accounts accompanied the report.

The report referred to the establishment of IJBs and the requirements, in accordance with Section 106 of the Local Government (Scotland) Act 1973, for annual accounts to be prepared in compliance with the Code of Practice on Accounting for Local Authorities in the United Kingdom, and also to additional guidance produced by the Local Authority (Scotland) Accounts Advisory Committee.

Thereafter, the report explained that the annual report and accounts had been prepared in accordance with the relevant legislation and guidance, and set out the key messages from Audit Scotland. In summary, the annual report and accounts were unmodified and the operational underspend and reserves were unchanged from the unaudited position; effective financial management was in place to support monitoring and decision making; the potential future year financial challenges were unlikely to be addressed through efficiency alone and work with partners was required to ensure financial sustainability; the IJB has appropriate governance in place and arrangements during the Covid-19 pandemic have operated effectively; the IJB has effective arrangements in place to demonstrate best value and for managing performance

The report also referred to the 3 recommendations made by Audit Scotland and summarised the response and associated timescale for action in respect of each, with progress on both to be reported to the committee.

The report also highlighted that the main messages from the annual report and accounts remained unchanged from the unaudited position reported in June, with the operational underspend of £0.833 million remaining unchanged. Main budget variances were set out and it was noted that the reserves total remained unchanged at £10.415 million. COVID-19 spend was £9.115 million. Funding of £12.260 had been received with the balance taken to reserves.

The Chief Financial Officer was then heard further on the accounts. She commented on the reduction in the operational overspend position from June, explained the reasons for the change and that identifying changes between the draft and final account stages was not unusual, and that the reasons why the overspend had not been identified in the first place had been investigated with additional checks already having been incorporated into procedures.

Ms Forbes expressed disappointment at the errors that had been identified but welcomed that additional checks had been added to the process for the future.

Referring to her earlier comments made during consideration of the Rolling Action Log, Ms Monaghan highlighted that the table providing information on Strategic Priority 1 provided percentages but in the absence of actual numbers it was not possible to put the percentages into context.

Thereafter, Ms Monaghan having commented on the key issues and the recommendations made by Audit Scotland the committee agreed that the audited annual report and accounts be remitted to the IJB for approval.

MID YEAR PERFORMANCE UPDATE 2021-22

7. The committee considered a report by the Chief Officer providing an update on key performance measures relating to the delivery of the strategic priorities set out in the HSCP Interim Strategic Plan 2021-2022.

It was explained that due to the ongoing COVID-19 pandemic availability of mid-year data was more limited than normal although it was expected that there would be a smaller number of updates compared with end-year. In addition, for many performance indicators, normal reporting of data trends against established targets was less meaningful due to the continuing impact of COVID-19 on provision.

The report included data for mid-year and any updated end-year data for indicators from the Strategic Plan that had not previously been reported to the committee. Each measure was presented with an RAG status in relation to the target for the reporting period (where a target was set), along with long-term and short-term trend arrows and commentary on performance. Many of the data trends reflected the unique circumstances faced by services over the course of the pandemic. Explanations of any notable shifts in performance were included in the commentary text.

The report contained data updates and commentary relating to the performance measures set out under the 8 strategic priorities in the HSCP Interim Strategic Plan 2021-22 details of which were listed, and concluded by providing a number of organisational indicators relating to staff and customers.

Commenting on the report, the Policy, Planning and Performance Manager explained that the data showed that despite the significant challenges of the pandemic support for most vulnerable residents had continued and services had performed well against many of the performance measures. Performance had been more negatively affected for service areas where patterns of demand had increased significantly during the reporting period.

Attention was drawn to various examples of performance and service provision across the strategic priorities. These included increased demand across mental health and addiction services, an increase in delayed discharges, and significant impact on the provision of unpaid work placements, amongst others.

In response to questions from Ms Monaghan on performance trends, the Chief Officer referred to the significant increases in service demand, to the introduction of new performance management processes, and that a number of areas where on the basis of the information in the report had seen drops in performance were already seeing improvements.

Ms Monaghan welcomed the improvements but referred to the challenges that would face the services in the coming winter months.

The committee noted the report.

AUDIT UPDATE

8. Under reference to the Minute of the previous meeting (Item 6 refers), the committee considered a report by the Chief Officer providing an update on new audit activity relating to the HSCP since last reported to the committee in June, summarising all open audit recommendations and providing information on internal audit planned activity for the IJB and the HSCP. Accompanying the report were a series of appendices. These contained information regarding audit activity relating to the IJB and HSCP; and information on recommendations from previous audits. Summary information in relation to the appendices was contained in the report

Referring to earlier discussions around audit reports the Head of Finance and Resources (Chief Financial Officer) confirmed arrangements for the circulation of audit reports to the committee. She also confirmed that the Audit Scotland Action Plan accompanying the report would be superseded to reflect the new recommendations made by Audit Scotland in their audit.

Ms Forbes noted that a high number of audits were considered to be complete but required verification by internal audit, and queried why there appeared to be such a delay in verification. In reply the Head of Finance and Resources (Chief Financial Officer) undertook to raise this with the Chief Auditor.

The committee noted the report.

IJB STRATEGIC RISK REGISTER UPDATE

9. Under reference to the Minute of the previous meeting (Item 8 refers), the committee considered a report by the Chief Officer providing an update on the Integration Joint Board Strategic Risk Register. A copy of the risk register accompanied the report.

Having set out the risk matrix used to calculate risk scores, the report then referred to the meeting of the committee on 22 September 2021 and explained that since then there had been no change in risk scores, no new risks added or any existing risks removed from the register.

However, risk control measures in place had been updated to include any proposed mitigation which had been completed since last reported.

Details of those risks still considered as high or significant post-mitigation were outlined. These related to the Scottish Child Abuse Inquiry where due to the historic nature of the risk no further mitigations had been identified, and Financial Sustainability, which continued to be a high/red risk as last reported and that this was still considered red post-mitigation reflecting the current economic climate and uncertainty around COVID-19 and Brexit implications.

As previously reported, although “Failure of a Provider” was considered as a medium level risk post-mitigation it was still considered a significant risk given the potential impact on service delivery.

The committee noted the report.

DATE OF NEXT MEETING

10. It was reported that the next meeting of the committee would take place on Wednesday 16 March 2022 at 9.00am.

CHAIR



Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board	
Held on	26 January 2022	
Agenda Item	7	
Title	Future Funding for Family Wellbeing Service	
Summary		
<p>This report outlines the funding shortfall for Family Wellbeing Service from 31st May 2022 due to the contract with The Robertson Trust for Social Bridging Finance concluding on that date.</p>		
Presented by	Kate Rocks, Head of Public Protection and Children Services, Chief Social Worker Officer	
Action Required		
<p>The Integration Joint Board is asked to:</p> <ul style="list-style-type: none"> • Note that the three year Social Bridging Finance contract between East Renfrewshire Health and Social Care Partnership and The Robertson Trust ends on 31st May 2022. • Approve the use of the Access to School Counselling Grant and the Children and Young Peoples Mental Health and Wellbeing reserves to fund the Family Wellbeing Service from 1 June 2022 for a two year period. These reserves have accumulated since 2019 - 2021 due to delays in commissioning service for mental health supports for schools as a consequence of the Covid-19 pandemic. 		
Directions		Implications
<input checked="" type="checkbox"/> No Directions Required <input type="checkbox"/> Directions to East Renfrewshire Council (ERC) <input type="checkbox"/> Directions to NHS Greater Glasgow and Clyde (NHSGGC) <input type="checkbox"/> Directions to both ERC and NHSGGC		<input checked="" type="checkbox"/> Finance <input checked="" type="checkbox"/> Policy <input checked="" type="checkbox"/> Workforce <input type="checkbox"/> Equalities <input type="checkbox"/> Risk <input type="checkbox"/> Legal <input type="checkbox"/> Infrastructure <input type="checkbox"/> Fairer Scotland Duty

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

26 January 2022

Report by Head of Public Protection and Children's Services

FUTURE FUNDING FOR FAMILY WELLBEING SERVICE

PURPOSE OF REPORT

1. The purpose of this report is to advise the Integration Joint Board members that the social bridging contract between The Robertson Trust and East Renfrewshire Health and Social Care Partnership comes to an end on 31st May 2022. The service is delivered by Children 1st and takes referrals direct from local GP practices. East Renfrewshire Health and Social Care Partnership and our partners have considered options to financially sustain the service to children, families, GPs and other stakeholders beyond this date. As a consequence of the Covid-19 pandemic reserves have been accumulated through the Scottish Government children's mental health grant reserves. Authorisation is sought to use this reserve to fund the shortfall due to the reduction of the social bridging finance by The Robertson Trust into the Family Wellbeing Service.

RECOMMENDATION

2. Integration Joint Board members are asked to:
 - Note that the three year Social Bridging Finance contract between East Renfrewshire Health and Social Care Partnership and The Robertson Trust ends on 31st May 2022.
 - Approve the use of the Access to School Counselling Grant and the Children and Young Peoples Mental Health and Wellbeing reserves to fund the Family Wellbeing Service from 1 June 2022 for a two year period. These reserves have accumulated since 2019 - 2021 due to delays in commissioning service for mental health supports for schools as a consequence of the Covid-19 pandemic.

BACKGROUND

3. In September 2017, Children 1st and East Renfrewshire's Health and Social Care Partnership (HSCP) developed a one year pilot service called the Family Wellbeing Service to offer early help for children and families who are experiencing emotional distress. The pilot, which included a partnership with two local GP practices, was evaluated as a success, exceeding service outcomes, and resulting in improved emotional wellbeing in children, young people and families. Noting the impact of the service, the Integration Joint Board in 2018 ratified the decision to continue to fund the Family Wellbeing Service for a further year to enable the expansion of service delivery to an additional four referring GP practices. By the beginning of 2019 the service was open to receive referrals from six GP practices.
4. During 2018 The Robertson Trust agreed to fund the scale up of the Family Wellbeing Service within East Renfrewshire rolling it out to all GP practices within the local authority. The Robertson Trust provided social bridging finance as it was the intention of the partnership to remodel the delivery of mental health services for children through the re-provision of mental health budgets from acute and primary care.

5. The purpose of additional investment was to develop the expansion of the service to reach even more children and families in East Renfrewshire. For the second year of delivery the service had been extended to work with six GP practices however the new funding further increased this to all GP practices in East Renfrewshire over the three years of the project 2019-2022.
6. The new partnership also agreed the following success criteria:
 - 50% reduction in repeat presentations at GP practices.
 - 90% of families referred to the service are contacted within two weeks of being referred.
 - The service will work with a minimum of 178 children and young people per year.
7. The most recent evaluation of the service has demonstrated that all of the criteria has been met even during the difficulties that have been experienced over the two years of the Covid-19 pandemic, specifically:
 - There was a 62% reduction in repeat presentations at GP practices.
 - 91% of referrals were contacted within the two weeks of the referral being received.
 - In 2020-2021 the service worked with 338 children and young people well in excess of the original target of 178.
8. The Robertson Trust have also provided their validation of this success (Appendix 2).

REPORT

9. Over the last three years there has been new Scottish Government policy and additional investment to accompany it; Counselling in Schools Grant and the Children and Young Peoples Mental Health and Wellbeing Supports and Services Framework which has enabled the children services partnership to respond to increasing demand and this in turn has ensured many more children, young people and their families receive the support they need, when they have need it, underpinned by the values, principles and components of Getting It Right For Every Child (GIRFEC) and The Promise.
10. Specifically the Counselling in Schools Grant was earmarked for the development of a new commissioned service that would work closely with schools to support early intervention, upskill the workforce, as well as deliver direct support to pupils experiencing significant emotional wellbeing concerns. Due to the requirement to respond to the immediate needs and to manage operational priority caused by the Covid-19 pandemic, the commissioning of the service was delayed which has led to an underspend of the grant for the last two years and the accumulation of a reserve. The core funding of £411k per annum in relation to School Counselling is fully committed from 2022/23 onwards.
11. The service for school wellbeing has now been commissioned and the successful provider is Children 1st. This service will provide a more targeted approach to supporting children at school who are displaying a range of emotional wellbeing issues. The service is due to commence on 1st April 2022 and will be fully funded by the recurring Counselling in Schools Grant.
12. At a partnership meeting on 17th November 2022, the Health and Social Care Partnership and Education Services agreed to realign the accumulated reserves from the Counselling in Schools Grant to replace the funding shortfall as a consequence of social bridging finance no longer being available from The Robertson Trust. Please see options paper appendix 1.

IMPLICATIONS OF THE PROPOSALS

Finance and Efficiency

13. The table below outlines the annual funding for the Family Wellbeing Service for each of the last three years - 2019/2020, 2020/2021 and 2021/2022. As The Robertson Trust investment will end on 31st May 2022 there is a shortfall of approximately £354,000 per year to continue service delivery at the current level. From recent lengthy discussions with all partners it was agreed that the service will not be viable to be delivered based on the existing Health and Social Care Partnership financial commitment of £320,000 alone. The options paper from October 2021 (appendix 1) details the considerations this decision was based on.

East Renfrewshire Family Wellbeing Service - Investment Budget 2019-2022

Expenditure	Year 1	Year 2	Year 3	
Investment from HSCP	£320,000	£320,000	£320,000	£960,000
Investment from The Robertson Trust	£350,677	£339,864	£353,815	£1,044,355
Total	£670,677	£659,864	£673,815	£2,004,355

14. In summary then it is expected that to fully fund the Family Wellbeing service over the next two years would require total funding of £675k per year to be identified. This does not take into account pay awards or other inflationary increases.
15. The proposal to fund this would be through a combination of current core funding, the use of the school counselling reserve and a small top up from Children and Young Persons Mental Health Framework funding – see the table and accompanying detail below.

East Renfrewshire Family Wellbeing Service – Funding Proposal 2022/23 to 2023/24.

	2022/23 (£k)	2022/23 (£k)
Expenditure: 675 675	675	675
Funded By:		
Investment from HSCP – Core Budget	320	320
Drawdown of School Counselling Reserve	343.5	343.5
Children’s Mental Health Framework Grant	11.5	11.5
Total Funding	675	675

16. The Health and Social Care Partnership currently has a reserve of £687k in relation to School Counselling funding that has built up over the last two financial years. It is proposed to fully utilise this reserve over the next two financial years towards the continuation of the Family Wellbeing Service, i.e. a contribution of £343.5k in each financial year.
17. Children and Young Persons Mental Health Framework funding of £261k per year is non-recurring and it is proposed that £11.5k per year is used to fund this activity.
18. The proposed funding would meet the costs of this service to April 2024. However based on the current budget there is only £320k recurring funding so further planning and/or exit strategy would have to be considered for future years.

Policy

19. Supporting children and young people’s mental health is among the highest priorities for East Renfrewshire Health and Social Care Partnership particularly as we seek to provide support to those impacted by the pandemic, and at the same time address the

significant needs that existed prior to it. Mental wellbeing services for children and young people are designed and delivered based on local need and informed by national policy expectations. Locally the East Renfrewshire Children's Services Plan 2021-2023 and the Health and Social Care Partnership Strategic Plan provide policy direction and steer over the following three year period.

Workforce

20. The East Renfrewshire Children 1st Family Wellbeing Service staff are highly trained and have considerable experience and local knowledge of the local authority area, schools, and Health and Social Care Partnership services. Service continuity beyond May 2022 will ensure this highly skilled professional workforce will be sustained and the expertise remains within East Renfrewshire.

CONSULTATION AND PARTNERSHIP WORKING

21. Feedback from children, young people and families confirms the positive impact of the Family Wellbeing Service on their mental health, and GPs regularly state that the service has been crucial to helping mentally distressed children and young people. Indeed the service has significantly contributed to our response in reducing the risk of harm by helping young people and their families who have been exponentially impacted by the Covid-19 pandemic access support. Throughout the pandemic we have seen both locally and nationally the demand for mental health services increase and we have been fortunate in East Renfrewshire to have this service, which greatly assisted in our response to the pandemic and currently its contribution towards the recovery of children & young people has been outstanding.
22. East Renfrewshire Health and Social Care Partnership are working closely with East Renfrewshire Education colleagues to plan and resource emotional wellbeing provision in East Renfrewshire, and have met with GPs and their representatives over the last twelve months.
23. Currently a new referral pathway that provides a single point of access to help for mental health and emotional distress is currently being designed and it is proposed that this pathway will be shared with the Integrated Joint Board at March 2022 meeting.

CONCLUSIONS

24. The tier two Family Wellbeing Service has been operating since late 2017 initially as a pilot working with the two GP surgeries. In 2019 East Renfrewshire Health and Social Care Partnership in partnership with Children 1st were successful in securing significant investment from The Robertson Trust to extend the delivery of the Family Wellbeing Service to all GP practices until May 2022. This new injection of funding for East Renfrewshire was approved as a social bridging finance partnership contract between the three partners – East Renfrewshire Health and Social Care Partnership, Children 1st, and The Robertson Trust. As the current funding will end on 31st May 2022 East Renfrewshire Health and Social Care Partnership is exploring opportunities to maintain the current level of resourcing to ensure this important children's mental wellbeing service continues beyond the end of the social bridging finance contract period. By accessing reserves of the Scottish Government children's mental health grants that have accumulated over the last two years, the Family Wellbeing Service will be able to continue beyond May 2022 for another two year period.

RECOMMENDATION

25. Integration Joint Board members are asked to:

- Note that the three year Social Bridging Finance contract between East Renfrewshire Health and Social Care Partnership and The Robertson Trust ends on 31st May 2022.
- Approve the use of the Access to School Counselling Grant and the Children and Young Peoples Mental Health and Wellbeing reserves to fund the Family Wellbeing Service from 1 June 2022 for a two year period. These reserves have accumulated since 2019 - 2021 due to delays in commissioning service for mental health supports for schools as a consequence of the Covid-19 pandemic.

REPORT AUTHOR AND PERSON TO CONTACT

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0141 451 0755

January 2022

IJB Chief Officer: Julie Murray

BACKGROUND PAPERS

Mental Health and Wellbeing in Children's Services (September 2021) -

https://www.eastrenfrewshire.gov.uk/media/5994/IJB-Item-13-22-September-2021/pdf/IJB_Item_13_-_22_September_2021.pdf?m=637668671045600000

Family Wellbeing Service Supplementary Report: Success Criteria 1 (September 2020) -

https://www.eastrenfrewshire.gov.uk/media/3204/Integration-Joint-Board-Item-13-23-September-2020/pdf/Integration_Joint_Board_Item_13_-_23_September_2020.pdf?m=637354314880070000

East Renfrewshire Family Wellbeing Service Annual Report 2019-20 –

https://www.eastrenfrewshire.gov.uk/media/1746/Integration-Joint-Board-Item-06-12-August-2020/pdf/Integration_Joint_Board_Item_06_-_12_August_2020.pdf?m=637318006680170000

East Renfrewshire Family Wellbeing Service Annual Report 2018-19 -

https://www.eastrenfrewshire.gov.uk/media/2272/Integration-Joint-Board-Item-08-27-November-2019/pdf/IJB_Item_08_-_27_November_2019.pdf?m=637351738779430000

Children and Young Peoples Mental Health Taskforce: Recommendations

<https://www.gov.scot/publications/children-young-peoples-mental-health-task-force-recommendations/documents/>

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Children's Mental Wellbeing Services
Delivery Options Paper

Values

This options paper is underpinned by the following *Getting it right for every child and young person* principles and values:

- Children and young people get the help they need when they need it.
- Responses to emotional wellbeing concerns must be accessible, timeous and responsive.
- The design and delivery of all emotional wellbeing services must be informed by the UNCRC in particular Articles 24 and 39 which outline children and young people's rights to health services and help to recover from trauma.
- The Promise and our commitment to care experienced children and young people and their fundamental right and entitlement to a good childhood which must include good mental health.
- The capacity of the universal children's services workforce should be strengthened in order for them to respond to identified concerns as early as possible in order to prevent children and young people's difficulties escalating in complexity that would require targeted and specialist intervention.
- The one child one assessment one plan approach will ensure efficient and effective use of finite resources and appropriate and proportionate responses to children and young people's needs.

Options that acknowledge the considerable investment in the existing Family Wellbeing Service workforce and outline a pathway to secure and retain these staff – all of whom have been trained to a high level and have considerable experience and local knowledge - are the most advantageous to delivery of the principles outlined above.

OPTIONS AND RECOMMENDATIONS

Option 1

Current funding arrangement from Robertson Trust and East Renfrewshire Health and Social Care Partnership continues. Robertson Trust and East Renfrewshire Health and Social Care Partnership agree to fund the project for an additional period of time beyond 31 May 2022 to the current funding level.

Outcome: No change to service delivery capacity. Service operates alongside new Healthier Minds contract through the Hub. As existing workforce have been trained to a high level and have considerable experience and local knowledge all staff remain in their Family Wellbeing Service posts.

Recommendation: As Robertson Trust have confirmed they are unable to continue to invest beyond 31st May 2022 Option 1 is not feasible and cannot be recommended.

Option 2

Robertson Trust funding ends on 31 May 2022 and Health and Social Care Partnership internally secures full funding for an additional year(s) in order for service to continue to current level of activity. This was the arrangement set out in the original Social Bridging Finance contractual agreement.

Outcome: No change to service delivery capacity. Service operates alongside new Healthier Minds contract through the Hub. As existing workforce have been trained to a high level and have considerable experience and local knowledge all staff remain in their Family Wellbeing Service posts.

Recommendation: The Family Wellbeing Service has significantly reduced the number of inappropriate referrals by GPs to CAMHs services over the last three years, as well as reduced the number of repeat presentation appointments at GPs' surgeries by parents and young people for mental distress. This is a phenomenal impact and the Health and Social Care Partnership and partners now require to explore all resource opportunities to keep the Family Wellbeing Service operating at its current capacity to meet existing high demand that GPs are experiencing and the expected increase in need over the next period. We recommend Option 2.

Option 3

East Renfrewshire Health and Social Care Partnership funds the service to its current funding level commitment but the proportion funded originally by Robertson Trust is not matched.

Outcome: Approximately 50% reduction in Family Wellbeing Service capacity to deliver service linked to GP practices. Service operates alongside new Healthier Minds contract through the Hub. A small proportion of Family Wellbeing Service staff remain in post to continue to deliver a significantly reduced service for GPs, a proportion of staff internally transfer over to the new Healthier Minds service contract, and the remainder are made redundant.

Recommendation: It will not be possible for the Family Wellbeing Service to deliver an accessible and responsive service to GPs at approximately 50% of the current service level capacity.

Current timescales for access of two weeks could not be met and the resultant referral waiting lists would mean that many children's mental wellbeing concerns would not be addressed timeously and would deteriorate. Pressure on GPs could mean more referrals to CAMHs but also for crisis intervention support. We do not recommend Option 3.

Option 4

Funding from Robertson Trust and East Renfrewshire Health and Social Care Partnership ends completely on 31 May 2022 and therefore Family Wellbeing Service ends.

Outcome: Family Wellbeing Service as a distinct service ends. New Healthier Minds contracted service starts but does not receive GP direct referrals and has limited capacity based exclusively on the contract agreement. A proportion of Family Wellbeing Service staff internally transfer over to the new Healthier Minds service contract and the remainder are made redundant.

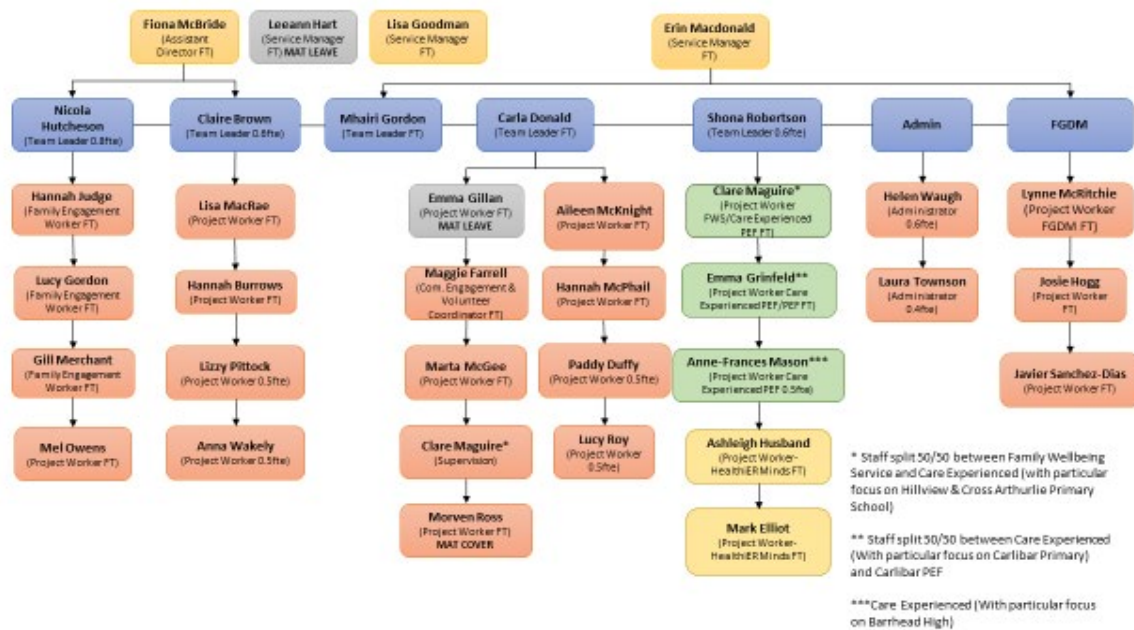
Recommendation: See Option 2 recommendation. We do not recommend Option 4.

Existing Children 1st East Renfrewshire staffing (see structure below)

- Family Wellbeing Service
 - 13.5 FTE Project Workers
 - 2.4 FTE Team Leaders
 - 1.6 FTE Service Managers
 - 1 FTE Administrator
- Healthier Minds Service Hub Input
 - 2 project workers, will reduce to 1 soon (one has resigned effective from December 2022)
- Care Experienced LAC Attainment Programme
 - Team Manager (0.6fte)
 - 1.5 project workers
- Family Group Decision Making Service (see above for service manager)
 - 3 project workers

All East Renfrewshire service provision and development is overseen by one Assistant Director

Children 1st Team Structure in East Renfrewshire (consists of Family Wellbeing Service, Family Group Decision Making, Care Experienced Project, HM Hub)



CURRENT Annual Service Cost for existing Delivery of Family Wellbeing Service and HM by Children 1st in East Renfrewshire

Service	Partner	Funding Amount	Staffing
Family Wellbeing Service	East Renfrewshire HSCP contribution	£320,000	<ul style="list-style-type: none"> • 13.5 FTE Project Workers • 2.4 FTE Team Leaders • 1.6 FTE Service Managers • 1 FTE Administrator
	The Robertson Trust	£353,915	
	East Renfrewshire HSCP Additional Funding	£77,999	
TOTAL		£751,914	
HealthiER Minds	East Renfrewshire HSCP	£77,999	<ul style="list-style-type: none"> • 2 FTE Project Workers (soon to be 1)
TOTAL		829,913	<ul style="list-style-type: none"> • 15.5 FTE Project Workers • 2.4 FTE Team Leaders • 1.6 FTE Service Managers • 1 FTE Administrator

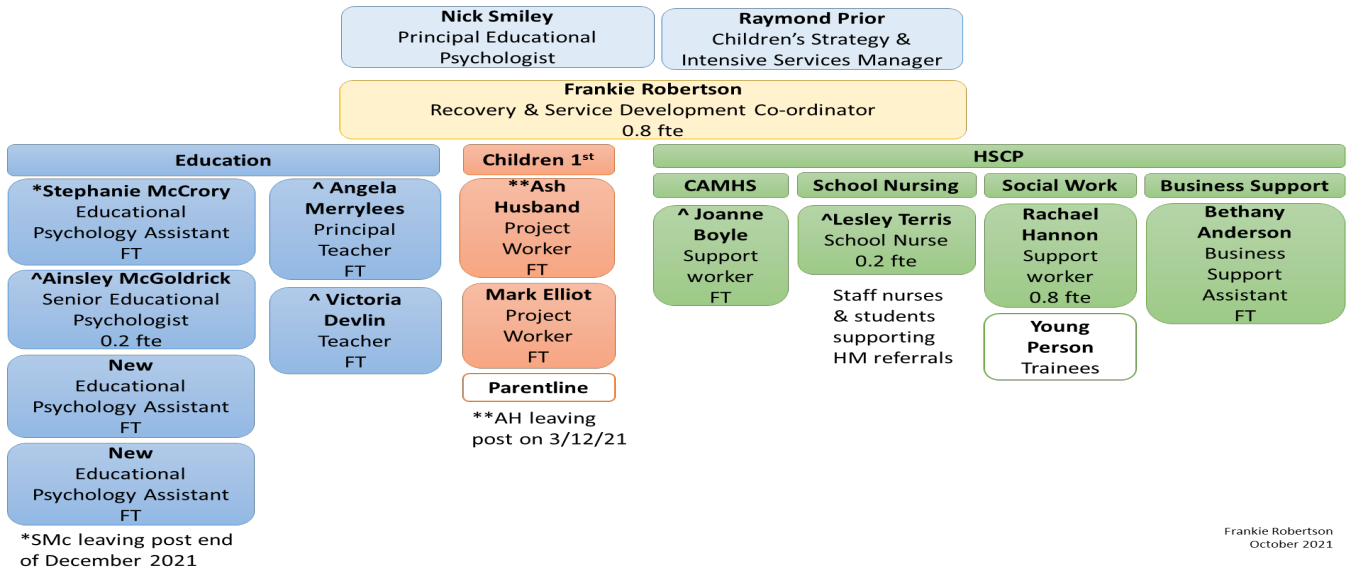
Existing Healthier Minds Hub (multi-disciplinary service) staffing (see structure below)

13 members of staff currently work within the service on a variety of working hour arrangements (full time, part time, 1 or 2 days a week etc)

- 7 are on secondment from Education and Health and have permanent jobs to return to if necessary on 31 March 2022.
 - Recovery and Service Coordinator HSCP (.8 fte)
 - 1 Educational Psychologist Assistant (full time)
 - 1 Senior Educational Psychologist (.2 fte)
 - 1 Principal Teacher (full time)
 - 1 Teacher (full time)
 - Support worker CAMHS (full time)
 - School nurse HSCP (.2 fte)
- 6 are employed on temporary contracts which will end on 31 March 2022 (one has resigned and will leave in December)
 - 2 Educational Psychologists Assistants (started November 2021)
 - 1 Children's 1st Worker (started March 2021)
 - 1 HSCP Support Worker (started January 2021)
 - 1 Business Support Assistant (started November 2020)

Two senior managers from Health and Social Care Partnership and Educational Psychology (Raymond Prior and Nick Smiley) support the management of the Hub and general service direction along with the Recovery and Service Coordinator Frankie Robertson. Also additional health staff have supported the service by taking on referrals. Two Care Experienced Modern Apprentices are aligned to the service a half day per week to support promotion and awareness along with other service development tasks.

Healthier Minds Hub Staffing Structure



New Tendered Healthier Minds Service (Children 1st successful bidder) contract to commence April 2022

Service	Partner	Funding Amount	Staffing
HealthiER Minds and Wellbeing	East Renfrewshire HSCP	299,952	<ul style="list-style-type: none"> 5.6 FTE Project Workers 1 FTE Team Leader

New service will continue to be staffed by the Recovery and Service Development Coordinator.

Tasks Ahead Dependent on Options selected

- Children 1st initiate discussion with Robertson Trust re OPTION 1 to explore whether they will continue funding to current level for an additional period of time (at least one year).
ACTION: CHILDREN 1ST
- HSCP secures funding internally at the same level for OPTION 1 **£320,000**. **OR** ERHSCP secures funding internally to cover the current full costs of the entire Family Wellbeing Service service for OPTION 2 **£673,915**.
ACTION: East Renfrewshire Health & Social Care Partnership
- If OPTION 3 is selected (due to OPTIONS 1 and 2 not being feasible) a proportion of Children 1st staff will need to be TUPED over to new Healthier Minds contract (5.6 FTE Project Workers
- 1 FTE Team Leader) and the remainder will require to be made redundant or transferred internally within Children 1st if appropriate vacant posts exist elsewhere in the organisation.
ACTION: Children 1st.

5. A very small Family Wellbeing Service will need to be redesigned with smaller workforce and new reduced targets. This service may be unfeasible.
ACTION: Children 1st and East Renfrewshire Health and Social Care Partnership
6. Agree commencement date for new Healthier Minds Service contract to be delivered by Children 1st – anticipated start date 1 April 2022.

Arlene Cassidy
HSCP Children's Services Strategy Manager
9 November 2021

12 January 2022

To whom it may concern

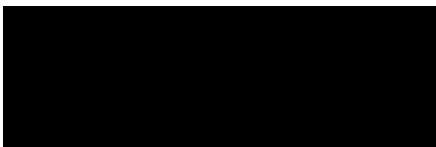
Since 2019, the pilot of the Family Wellbeing Service has been a partnership between Children 1st, East Renfrewshire Health and Social Care Partnership, East Renfrewshire Council and The Robertson Trust. Funding for the trial period came from both East Renfrewshire Health and Social Care Partnership and The Robertson Trust. The Robertson Trust's investment of £1,045,000 over three years was provided as Social Bridging Finance and, as a condition of this funding, the IJB made a commitment to continue funding the service should it achieve the agreed success criteria outlined in the contract.

These were:

1. 50% reduction in repeat presentations to GPs for young people referred to the Family Wellbeing Service with emotional distress by the end of the 2-year service
2. 90% of families referred to the Family Wellbeing Service are offered contact within 2 weeks of referral being received from the GP
3. The service will work with a minimum of 178 young people each year

I am pleased to share that all parties are satisfied the success criteria have been met and that the pilot has been successful, with further detail on the outcomes achieved by the service available to read in your accompanying papers. A full evaluation of the Social Bridging Finance model, including the experience of the Family Wellbeing Service, will be available in mid-2022. It is worth highlighting that this achievement is even more significant in the context of the pandemic, and we look forward to the continued success of the Family Wellbeing Service.

Yours sincerely,



Dr Jim McCormick
Chief Executive
jim.mccormick@therobertsontrust.org.uk

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