



<b>Meeting of East Renfrewshire Health and Social Care Partnership</b>	Integration Joint Board
<b>Held on</b>	21 <sup>st</sup> September 2022
<b>Agenda Item</b>	8
<b>Title</b>	Chief Social Work Officer's Annual Report 2021/22
<p><b>Summary</b></p> <p>This report provides an overview of the professional activity for social work within East Renfrewshire for 2021/22 through the delivery of the statutory functions and responsibilities held by the Chief Social Work Officer.</p>	
<b>Presented by</b>	Raymond Prior, Interim Head of Children Services and Criminal Justice, Chief Social Worker Officer
<p><b>Action Required</b></p> <p>The Integration Joint Board is asked is asked to consider the contents of the report and approve its submission to Council.</p>	
<p><b>Directions</b></p> <p><input checked="" type="checkbox"/> No Directions Required</p> <p><input type="checkbox"/> Directions to East Renfrewshire Council (ERC)</p> <p><input type="checkbox"/> Directions to NHS Greater Glasgow and Clyde (NHSGGC)</p> <p><input type="checkbox"/> Directions to both ERC and NHSGGC</p>	<p><b>Implications</b></p> <p><input type="checkbox"/> Finance</p> <p><input type="checkbox"/> Policy</p> <p><input type="checkbox"/> Workforce</p> <p><input type="checkbox"/> Equalities</p> <p><input type="checkbox"/> Risk</p> <p><input type="checkbox"/> Legal</p> <p><input type="checkbox"/> Infrastructure</p> <p><input type="checkbox"/> Fairer Scotland Duty</p>

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# **EAST RENFREWSHIRE INTEGRATION JOINT BOARD**

**21<sup>st</sup> September 2022**

## **Report by Interim Chief Social Work Officer**

### **Chief Social Work Officer's Annual Report 2021/22**

#### **PURPOSE OF REPORT**

1. This report presents to members the Chief Social Work Officer's Annual Report for 2021/22. The report is attached at Appendix 1.

#### **RECOMMENDATIONS**

2. The Integration Joint Board is asked to consider the contents of the report and approve its submission to Council.

#### **BACKGROUND**

3. In compliance with Chief Social Work Officers statutory functions under the Social Work (Scotland) Act 1968, they are required to produce an Annual Report. This is based on a template agreed with the Office of the Chief Social Work Adviser.
4. The report provides a narrative of statutory social work and social care activity. The template outlines the current pressures being experienced across the service and describes:
  - Governance and Accountability arrangements
  - Service Quality and Performance
  - Resources
  - Workforce
5. Performance data and analysis is set throughout the report and reflects the operational delivery of services for childrens services, criminal justice, mental health and adult services including social care.

#### **CONSULTATION AND PARTNERSHIP WORKING**

6. The Chief Social Work Officer role is key in a number of partnership arrangements including the Health and Social Care Partnership, Multi Agency Public Protection Arrangements (MAPPA), East Renfrewshire Child Protection Committee, East Renfrewshire Adult Support and Protection Committee, and the Violence Against Women Partnership as well as being the professional advisor to the Council.

#### **IMPLICATIONS OF THE PROPOSALS**

##### **Finance**

7. There are no financial implications arising from this report, however the report does refer to the significant financial challenges facing the delivery of social work and social care services for the Health and Social Care Partnership.

## **DIRECTIONS**

8. There are no directions arising from this report.

## **CONCLUSIONS**

9. This report provides an overview of the professional activity for social work and social care within East Renfrewshire for 2021/22 through the delivery of the statutory functions and responsibilities held by the Chief Social Work Officer.
10. We have many examples of success to celebrate and build on. There continues to be a number of significant challenges and risks facing social work and social care within East Renfrewshire.
11. The landscape for all Health and Social Care Services will change over the coming years as a consequence of COVID-19 and statutory social work and social care will be required to adapt to ensure we support the rising demand and renewal associated with protecting and caring for our most vulnerable citizens and all those who are at risk in our communities.
12. At the heart of the social work profession lies a commitment to enabling and supporting vulnerable individuals to make positive, sustainable changes to their lives to achieve the best outcomes for them, their families and communities as a whole.

## **RECOMMENDATIONS**

13. The Integration Joint Board is asked to consider the contents of the report and approve its submission to Council.

## **REPORT AUTHOR**

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September 2022

Chief Officer, IJB: Julie Murray

## **BACKGROUND PAPERS**

[Chief Social Work Officer Annual Report 2020-21](#)



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

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

**1 April 2021 – 31 March 2022**



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## **Introduction – Reflection on the Past Year**

The role of Social Work professionals is to support, care for and protect people across the whole of the life course, to enhance the wellbeing of and improve outcomes for children, young people, families and adults.

The report relates to the period that the previous Chief Social Work Officer was in post and is written by the interim appointed Chief Social Work Officer who assumed this position on 1<sup>st</sup> August 2022.

Over the past year our Social Work professionals have continued to support individuals and families within East Renfrewshire during continued unprecedented and challenging times. This has involved responding to higher demands for support in unpredictable times. We have seen our social work staff respond creatively with a commitment to improve outcomes for the individuals and families we support.

This report provides a detailed summary of our statutory services and the dedication of our staff in supporting our residents and improving outcomes. It also provides some reflections on the impact of Coronavirus (Covid-19) pandemic on our work and our plans as we move forward.

We have many examples of success to celebrate and build on:

- Improved interventions for children and families requiring targeted interventions.
- Increased referral route for Family Group Decision Making e.g. Education and Health Visitors.
- Referrals to Family Wellbeing Service has led to a reduction in the number of re-referrals to GPs by 86%.
- Enhanced participation and engagement of looked after young people by strengthening the support provided via partnership working the Health and Social Care Partnership and East Renfrewshire Culture and Leisure Trust.
- Care Experienced Young People traineeships successfully gaining employment with the Health and Social Care Partnership.
- Self-Directed Support Forum and East Renfrewshire Carer's Centre working in partnership to develop processes and the formation of a Self-Directed Support steering group.
- Enhanced outreach community support for individuals with a learning disability to ensure a blended approach of care in the community and in provision.
- Development and implementation of Care Home Assurance visits to ensure continued visits by senior managers.
- Working with third sector to identify the first "Bairns' Hoose" in East Renfrewshire and nationally in Scotland.
- Continued implementation of Signs of Safety practice model.

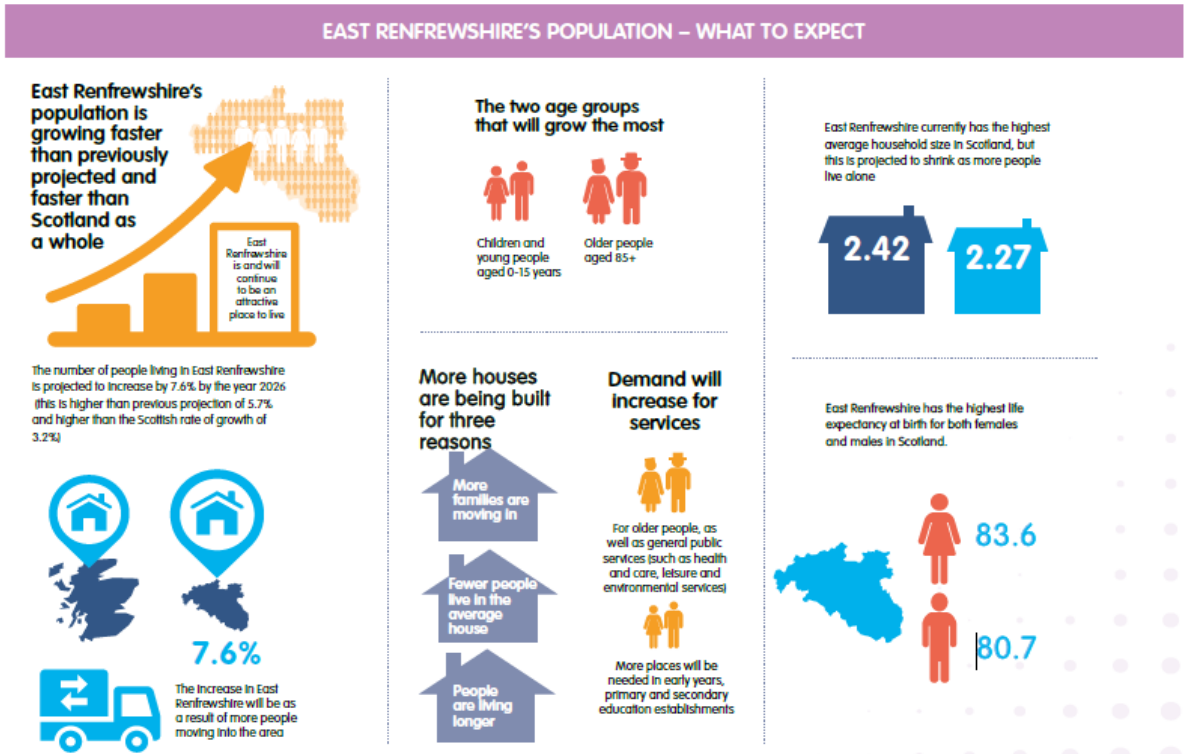
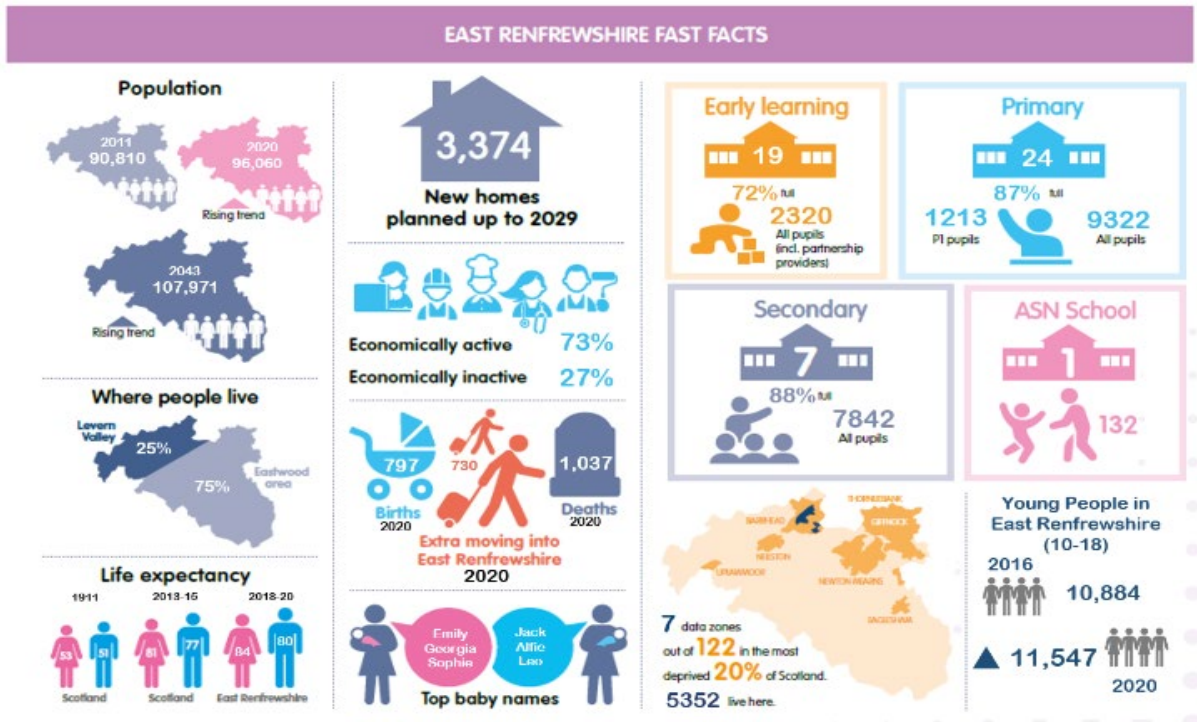
- An audit undertaken by the Multi Agency Public Protection Arrangements (MAPPA) Unit, evidenced that robust risk management arrangements were in place for those offenders who pose a high risk of harm.
- Robust Interagency Referral Discussion audit activity to monitor and quality assure trends in Child Protection work.
- Crown Office recorded that all interviews from the Scottish Child Interview Model team evaluated could be used as evidence in chief in court and there was no inadmissible material.
- East Renfrewshire Safe and Together was accredited gold standard champions in Domestic Abuse Child Protection training.
- Increase in Adult Support and Protection referrals from other professionals linked to high volume of Adult Support and Protection awareness raising and training.
- Initial Contact Team was introduced as a single point of access for all new referrals and contacts for Adult Health and Social Care.
- An implementation plan has been developed to support the launch of adults with incapacity procedures and includes a training programme for all Health and Social Care Partnership staff.

We also know what our most significant challenges are and are making progress in tackling these:

- Increase in child initial assessments requiring intervention has grown due to the pandemic.
- Increased of young people with neurodevelopmental profile, requiring more targeted support and resource.
- The pandemic has significantly affected families with children with additional support needs.
- The implementation of the mandated National Transfer Scheme (NTS) for Unaccompanied Asylum Seeking Children (UASC).
- Challenges of recruitment and retention of staff including care at home staff and Mental Health Officers.
- The suspension of unpaid work and pause in delivery of the nationally accredited sex offender group treatment programme, Moving Forward Making Changes, due to the pandemic.
- Domestic Abuse continues to be one of the main reasons for referrals to children services.
- Significant increase in demand for refuge accommodation and outreach support for woman experiencing domestic abuse.
- Supervision of increased private guardianship orders challenging given increased in complexity and demand.



# East Renfrewshire Population Facts



## **Section 1: Governance and Accountability**

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

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

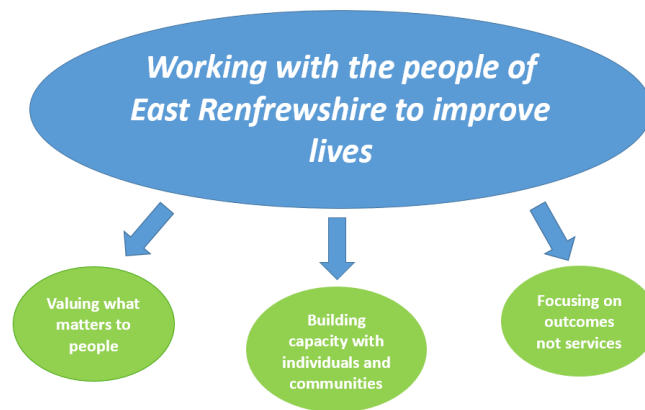
During the last 16 years our integrated health and social care management and staff teams have developed strong relationships with many different partner organisations. Our scale and continuity of approach have enabled these relationships to flourish. We have a history of co-production with our third sector partners and we are willing to test new and innovative approaches.

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

This Chief Social Work Officer report reflects the seventh year of the move to a Health and Social Care Partnership and whilst it outlines the key statutory social work functions, it also explains how they are delivered within the spirit of the Public Bodies (Joint Working) (Scotland) Act 2014 legislation. The Chief Social Work Officer provides the Health and Social Care Partnership and East Renfrewshire Council with professional advice, leadership and oversight of all social work and social care functions. The Chief Social Work Officer reports to the Chief Executive for East Renfrewshire Council in his role. The Chief Social Work Officer is responsible for the scrutiny and quality assurance of all public protection services in East Renfrewshire. This also includes Violence against Women and Girls. East Renfrewshire Council's Chief Executive chairs the Chief Officer Public Protection Group. The group meets bi-annually and the Chief Social Work Officer acts as their professional advisor. The use of driver diagrams and logic modelling supports the scrutiny of public protection processes, outputs and outcomes. The Chief Officer Public Protection Group met regularly throughout lockdown.

### **Our Strategic Vision and Priorities**

East Renfrewshire has been integrating health, social work and care services for 16 years. From the outset of the Community Health and Care Partnership we have focused firmly on outcomes for the people of East Renfrewshire that improve health and wellbeing and reduce inequalities. Under the direction of East Renfrewshire's Integration Joint Board, our Health and Social Care Partnership builds on this secure foundation. Throughout our integration journey, we have developed strong relationships with many different partner organisations. Our longevity as an integrated partnership strives to improve outcomes for the citizens of East Renfrewshire.



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

### **Strategic Planning and Commissioning**

Our strategic plan is our third iteration since the initial plan in 2015. The seven core strategic priorities have in general remained unchanged with an additional strategic priority providing a strong focus on the mental health and on the wellbeing of our workforce in response to the impact of the Coronavirus (Covid-19) pandemic.

- Working together with children, young people and their families to improve mental and emotional wellbeing.
- Working together with people to maintain their independence at home and in their local community.
- Working together to support mental health and wellbeing.
- Working together to meet people's healthcare needs by providing support in the right way, by the right person at the right time.
- Working together with people who care for someone ensuring they are able to exercise choice and control in relation to their caring activities.
- Working together with our community planning partners on new community justice pathways that support people to stop offending and rebuild lives.
- Working together with individuals and communities to tackle health inequalities and improve life chances.
- Working together with staff across the partnership to support resilience and wellbeing.
- Protecting people from harm.

We will build on our established relationship with our external provider and partners to work together to develop a shared approach to strategic commissioning and market facilitation for East Renfrewshire. Recent policy and guidance has been published over the past few years

which seek to develop an ethical commissioning approach with a strong focus on improving outcomes for people using services. The Independent review of Adult Social care sets out a strong vision for adult social care which is embedded in a human rights, fair work principles person centred, involves people with lived experience, and focuses on other factors other than price.

The Scottish Government proposals for the establishment of a National Care Service for Scotland go beyond the scope and recommendations of the review and set out how a National Care Service will define the strategic direction and quality standards for community health and social care in Scotland. The Bill published in June 2022 sets out a framework which will be consulted on with the view to implementation by 2026. Initial indications are that further engagement is required in relation to children's and young people and criminal justice social work.

Within East Renfrewshire the Health and Social Care Partnership have held a series of collaborative commissioning events with partners and stakeholders from Health and Social Care Partnership services, external third and independent sector, Participation and Engagement Network, service based forums, individuals, families and carers. A shared statement of intent setting out agreed principles and approach which have been co designed. This will build on existing knowledge and expertise across sectors, will be outcome focused and reflect local needs and priorities.

### **Annual Performance Report**

Our [Annual Performance Report 2021-22](#) has given us an opportunity to demonstrate how we have delivered on our vision and commitments over 2021/22. 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 Group**

In order to exercise its governance role in relation to the delivery of effective social work and social care services, the Clinical and Care Governance Group focuses on governance, risk management, continuous improvement, inspection activity, learning, service and workforce development, service user feedback and complaints. Although no longer a formal structure of the Integrated Joint Board it continues to provide regular scrutiny on the areas requiring development and improvement. Quality assurance is fundamental to safe and effective care and the Chief Social Work Officer Annual Report is remitted to the Clinical and Care Governance Group to provide them with assurance concerning the delivery and performance of statutory social work functions. Furthermore, this allows the group to consider the interdependencies of delivering effective and high quality care within the context of integrated practice. More information can be found in the [Annual Clinical and Care Governance Report](#).

## **Section 2: Service Quality and Performance**

### **2.1 Children's Services**

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

The Request for Assistance team ensures that children and their families receive a thorough and prompt response to any referrals and / or inquiries for a child or young person. We support our partner agencies at the earliest opportunity by sharing information and offering advice that strengthens our preventative approach to children, young people and their families.

From 1 April 2021 to 31 March 2022, the Request for Assistance team completed a total of 872 enquiries and 748 initial assessments, with 24% of those initial assessments requiring targeted intervention.

In September 2021 the screening process was reviewed and in order to provide a more proportionate and timely response, the use of a separate enquiry form was implemented, to ensure that children and families requiring further input and assistance were targeted quickly.

The number of initial assessments requiring further targeted intervention has seen an increase from the previous year reflecting the impact of the Coronavirus (Covid-19) pandemic on our most vulnerable families.

#### **Family Group Decision Making**

In response to the Coronavirus (Covid-19) pandemic and to ensure families have immediate support from the service, there has been continued development and this has widened the referral routes to include education and health visiting as direct referrers.

There were 37 families referred to the service during the reporting period and the team worked with 62 children and 73 adults, this includes supporting both family network meetings and direct work with both parents, carers and children.

#### **Children and Young People's Mental and Emotional Wellbeing**

As a local authority, East Renfrewshire has recognised the extent of mental health concerns among the children's population, and in our new Children and Young Peoples Services Plan 2020 – 2023 we have agreed mental and emotional wellbeing as a key priority. The impact of the Coronavirus (Covid-19) pandemic has exacerbated the circumstances of many children, young people and families, and we are now seeing a significant rise in the number of those experiencing challenges with their mental health and wellbeing. This includes those who have a neurodevelopmental diagnosis.

In response to this a multi-stakeholder Healthier Minds Service approach aligned to school communities has been developed to identify and ensure delivery of mental wellbeing support to promote children and families' recovery. This is working alongside our existing Family Wellbeing Service which links to GP practices. In addition local Youth Counselling provision has also been increased. Demand for these services is outlined below.

#### **Family Wellbeing Service**

Over the past year, the Family Wellbeing Service has successfully supported families while we all continue to emerge from the challenges that the Coronavirus (Covid-19) pandemic brought. Families are still recovering from the physical, emotional, and financial impact of the last couple of years and are presenting at GP surgeries with more acute wellbeing concerns

than that of pre-pandemic. The strength of our relationships with the families and partner agencies have allowed us to manage demand, meet the changing needs and keep children safe.

The referrals to the service continued to be high, although slightly down on the previous year. At the end of the reporting period 2020/21 184 families were still being supported by the service with a further 144 referrals received during the reporting period 2021/22. This meant that across this reporting period 328 children, young people and their families were offered the support of the Family Wellbeing Service.

The latest data suggests that a referral to the Family Wellbeing Service has reduced the presentations of young people experiencing emotional distress at GP surgeries by 86%. This, along with the individual progress made on emotional wellbeing and strengthened family relationships indicates that the service model continues to meet the needs of families within an unpredictable and ever-changing environment.

### **Healthier Minds Team**

The multi-disciplinary team established in autumn 2020 continues to directly respond to the emotional wellbeing needs of children and young people aged 10 – 18 years. Although the majority of referrals are from schools, other agencies can access the service, this includes GP's, Children and Adolescent Mental Health Services (CAMHS), Social Work, Recovery Across Mental Health (RAMH) and Children 1<sup>st</sup> but most importantly includes self-referrals from young people themselves. A total of 568 children and young people have been referred to the service, hub discussions take place weekly resulting in children, young people and their families being supported timeously.

The support offered is holistic, person centred and strengths based, allowing for the right support to be offered at the right time. Young people also have more choice on the support they are offered and how they wish to access it.

The sessions provided through the Healthier Minds Network ensure school communities, Health and Social Care Partnership staff and partners are effectively resourced with access to relevant knowledge, skills and expertise where this is required to support, children, young people and family recovery. These sessions include understanding anxiety, nurture, self-harm and emotional based school absenteeism. An extensive calendar of sessions and training has been planned for the new school year.

Training has also been created and developed to respond to the increased presentations of self-harm, this has evaluated well and will be delivered throughout the authority.

We continue to see positive outcomes for children, young people and their families through the support offered by the Healthier Minds team. All parents who responded to the evaluation said they would recommend this service to others, children and young people said they felt listened to throughout their support and that the team member was understanding.

The success of this work is through the strengths of the partnerships; the relationships, values, understanding and communication.

## Signs of Safety - Our Approach

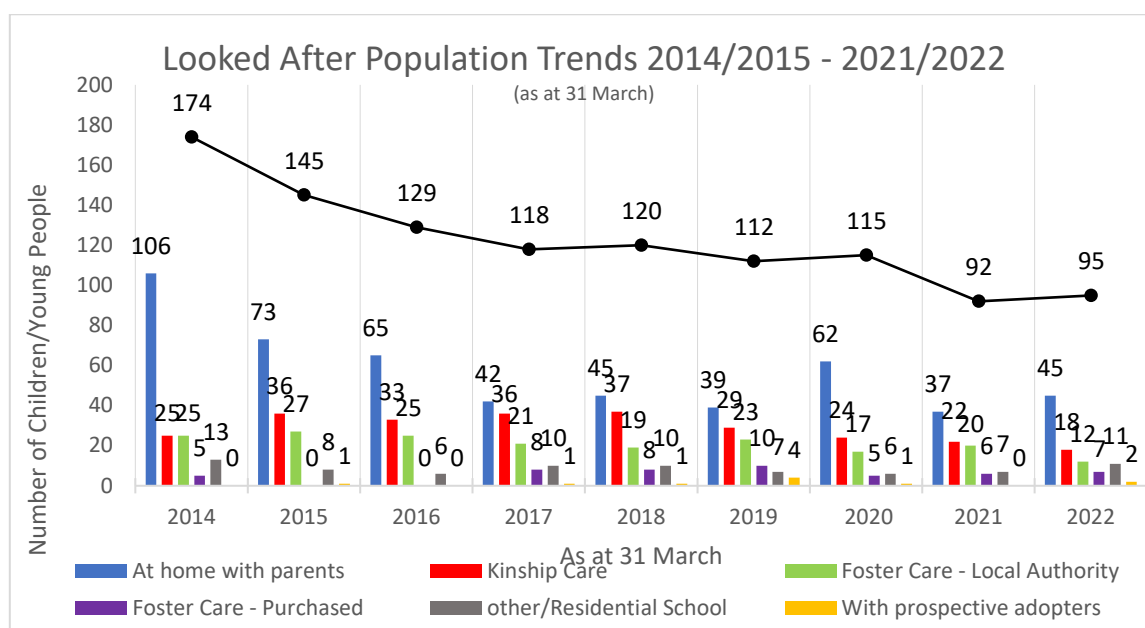
Over 2021/22 we have been able to continue our implementation of the Signs of Safety approach. Whilst we have continued to develop relational interventions with children, young people, their families and carers in order to reduce risk and improve children's wellbeing, we have also focussed on reviewing the assessment and planning paperwork. This was based on the learning and feedback of using partial assessments under the Coronavirus (Scotland) Act 2020. This review included feedback from children, families, staff and our partners.

Our key achievements for the third year of our five year implementation plan are:

- Continued commitment from the multi-agency Signs of Safety Implementation Team.
- Continued workforce training provided at different levels, advanced and generic for all staff groups including education, health, police and adult services. This was adapted to allow for appropriate social distancing guidelines applicable at the time.
- Review and amendment of the assessment and planning paperwork.
- Continued application of the model in our Child Protection Case Conferences to ensure they are solution orientated, strengths based and risk focused.

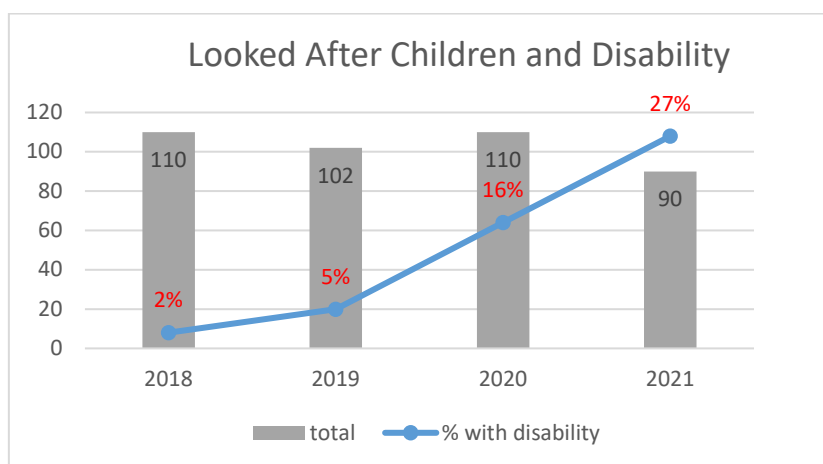
## East Renfrewshire's Looked After Children and Young People's Population - A Profile of our Children

On 31<sup>st</sup> March 2022, 95 children and young people in East Renfrewshire were looked after in a range of settings. This constitutes approximately 0.5% of the total children's population of the area and remains one of the smallest proportions in Scotland. The gender balance has been consistent in recent years with 58% boys and 42% girls. We have continued to work to improve outcomes for children by securing permanent destinations for them. The number of children looked after at home has returned to pre-pandemic levels and there is an overall reduction in the number of children looked after away from home when compared with pre-pandemic figures.



In this year, the average amount of time children were looked after at home decreased from 20 months to 18 months.

As a result of the pandemic there has been a significant increase in the number of children with complex and additional support needs who have become looked after. Currently 27% of looked after children have a disability evidencing that the pandemic has significantly affected families with children who have additional support needs.



### Intensive Family Support Team

The intensive family support service works alongside community social work, with families of children under the age of 12 years, where a need for more intensive support has been identified. In particular a referral to the team is recommended when children have been, or are at risk of being, removed from the care of their family and if child protection registration is being considered, including at the pre-birth stage.

Between April 2021 and March 2022, 59 children received support from the Intensive Family Support Service. The majority of children supported (52.5%) were in 5 – 11 age group. 45 of those are currently receiving support, as at the end of the year. Parenting concerns was the most commonly recorded concern, followed by child protection and parental mental health issues. Building parent / carer capacity was the primary intervention in 62.2% of cases. 46.7% of current cases are known to be at risk of accommodation.

### Youth Intensive Support Service

The Youth Intensive Support Service (YISS) is the lead service for all looked after young people aged 12 – 26 years, recognising that more intensive interventions are required to improve recovery from trauma, neglect and abuse.

Using a relationship based model the team delivers the statutory duties within the Children and Young People's (Scotland) Act 2014, namely to support young people eligible for Continuing Care up to the age of 21 years and for Aftercare up to the age of 26 years. The service's aim is to successfully engage the most hard to reach young people in East Renfrewshire by providing and co-ordinating multifaceted support plans. The service has the following shared aims across social work and health services:

- To reduce the number of young people looked after and accommodated and at risk of hospitalisation and custody.
- To reduce the impact of historical trauma and abuse for young people.
- To ensure that the transition into adulthood achieves better long term outcomes.



- To maximise social capital.
- To keep whenever safe to do so a connection to their local communities.

In 2021/22 a total of 143 young people received support from Youth Intensive Support Service and the most common age group was nineteen plus years, which made up 36.4% of the total supported.

Currently, Youth Intensive Support Service is directly supporting 116 young people and their families, of which:

- 46.6% are currently looked after
- 26.7% are known to be at risk of accommodation
- 15.5% are at risk of custody
- 12.9% are at risk of hospitalisation
- 24.1% receive additional (commissioned) support.
- In 65.5% of open cases, intervention involved support to gain employment, training or education. This was the most common intervention, followed by a signs of safety plan and participation.

The UK Government has been operating the National Transfer Scheme for unaccompanied minors arriving in England to be transferred to Local Authorities across the UK. The number of unaccompanied asylum seeking children requiring accommodation is projected to increase for every local authority in Scotland. Youth Intensive Support Service (YISS) will be the main support service for these unaccompanied children in East Renfrewshire.

### **Champions Board, Group Work and Participation**

Despite Coronavirus (Covid-19) restrictions in 2021/22, there was continued engagement with children, young people, families and communities. Although participation opportunities were reduced at times, there were key successes in the period.

- An Easter Programme for children supported by Social Work was held by East Renfrewshire Culture and Leisure Trust. This was attended by fifty Children and young people.
- Artivism projects based around The United Nations Convention on the Rights of the Child (UNCRC) were held in Easter and summer. Fifteen children and young people from Champions Board and Mini Champs created showcase of activity which they shared with Corporate Parents.
- The Enrichment Activity Programme was held in partnership with Health and Social Care Partnership and Culture and Leisure Trust (May – August 2021). There were thirty separate six week activity blocks adding up to 341 hours of activity with 104 children and young people took part.
- An Employability Programme was delivered by Andy Robertson Trust. Nine Young People successfully completed this five week programme around employability.

- In September 2021, four care experienced Health and Social Care Partnership trainees came into post. The young people are employed within the Health and Social Care Partnership and are aligned to the Champions Board. They benefit from bespoke opportunities and training within Health and Social Care Partnership and partner organisations.

## **Fostering, Adoption and Supported Care**

The Adoption, Fostering and Supported Care Team have sought to continue to provide safe and stable placements to meet the needs of children and young people. Our carers have been integral in continuing their support to our children and young people. They have provided consistency, stability and care to our children and young people throughout this year.

We have continued to support and work creatively with our current carers by offering direct and indirect support. We continued to progress assessments and foster carer annual reviews through an online Adoption, Fostering and Permanence Panel.

### **Fostering**

During 2021 / 2022, the service has:

- Sixteen foster carer households caring for sixteen children / young people looked after or ceasing to be looked after in receipt of continuing care.
- We have three carer households approved as permanent foster carers and one approved as long-term foster carers for children.
- We have one foster care household supporting two children through short break care to provide support to them and their families.
- We have placed nine children in foster placements with independent fostering agencies.

### **Adoption**

During 2021 / 2022, the service has:

- Assessed and approved two adoptive families.
- We have linked and matched four adoptive families to five children.
- Our post adoption support group has a membership of approximately 35 families.
- We have continued to provide indirect letterbox exchange between adoptive and birth families.
- We offer origins counselling to individuals and families through our service agreement with Scottish Adoption Support Services.

### **Supported Care**

During 2021 / 2022, the service has:

- Six foster carers who are also approved as supported carers for young people from age of 16 years to 26 years of age. They are providing support to five young people.

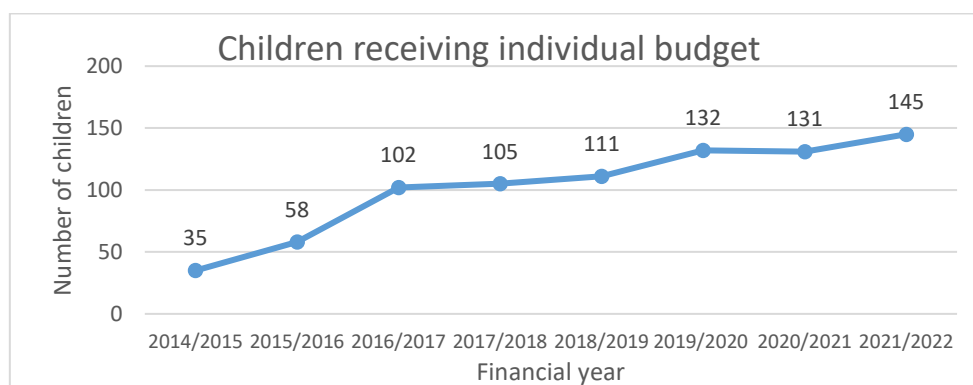
- We have integrated our support groups to include our supported carers as all of them have a dual approval to include foster care.

## Registered Services Inspection

Our three registered services, fostering, adoption and adult (supported care) placement were last inspected in October 2019 and all services received Grade 5 (very good).

## Children with Disabilities

We have fully adopted the principles of Self-Directed Support in partnership with 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. Given that 38% of children known to social work teams have a disability, we have undertaken a review of our assessment and planning and have implemented Signs of Wellbeing, a strengths based approach, adapted from Signs of Safety.



The number of children in receipt of an individual budget has quadrupled since 2014 as shown in the chart above. In 2021/22, three quarters of children with disabilities allocated to social workers were in receipt of an individual budget. This will continue to be an area of significant growth and budgetary pressure. Expenditure has increased from £471,558 for option one payments in 2020/21 to £611,222 which is a 29% increase with the same period last year.

It is anticipated that this will continue to be an area of significant demand over the years, considering the migration of families who have children with disabilities into East Renfrewshire.

## Cygnets Parenting Programme for Parents

East Renfrewshire Cygnets Parenting Programme for parents of children with an autism diagnosis has been a very successful programme with high attendance and completion rates and programme evaluation which reflected improvement in parental confidence in supporting children and young people with autism. It has not been possible to deliver this programme face to face due to Coronavirus (Covid-19) restrictions. A virtual programme was piloted over the summer months. However digital fatigue was commented on with many parents indicating a preference to wait until face to face programmes could recommence.

## Inclusive Support Service

The Inclusive Support Service (ISS) is comprised of three distinct services: holiday provision, out of school activity clubs and individualised support services. The service provides a range of targeted support for children and young people aged 5 – 18 years. All of the children and

young people who access the service have either complex health or behavioural support needs, with a significant number having limited verbal communication.

East Renfrewshire Inclusive Support Team in consultation with social work refocused activity during Coronavirus (Covid-19) pandemic by closely working with partners in Education and Health to ensure support for our most vulnerable children and young people. The team organised and delivered the holiday programme for 130 children over the spring, summer and autumn at Isobel Mair School. This approach targeted provision toward children and young people with complex support needs.

During spring 2022, the team delivered seasonal activity boxes to children and young people within the service who were not able to access the targeted Holiday Programme. We also linked with partners to support our young people to access Youth, Sports and Outdoor camps. This was done by ensuring staff with appropriate training and experience were available to support individuals and groups.

We reinstated our out of school activities in line with Coronavirus (Covid-19) restrictions, supporting our young people's engagement in activities such as football, drama, music and cooking. The individualised support provided for our most complex young people continued throughout. Staff within our service flexibly supported Education when required including during the extended school year.

Our ongoing planning and modelling for the service will take account of the different profile of need that has emerged during the pandemic, and will be carried out in consultation with others, including children and their families. We will refresh our learning and development programme, consider our staffing structure and plan for further recruitment of staff to ensure that the service can effectively support this group of children and young people.

## **Rights of Children**

Through The United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Bill, Scotland is the first country in the UK to directly incorporate The United Nations Convention on the Rights of the Child (UNCRC) into domestic law. Introduced to the Scottish Parliament on 1<sup>st</sup> September 2020 the Bill was passed unanimously on 16<sup>th</sup> March 2021. The new law was due to come into force six months after Royal Assent but shortly after the Bill was passed, the UK Government raised concerns that parts of the Bill exceeded the powers of the Scottish Parliament and referred the Bill to the UK Supreme Court. In October 2021, the Supreme Court judges decided that four sections of the Bill went beyond the powers of the Scottish Parliament, these related to definition of public authority and court powers.

Whilst the Scottish Government is looking at the changes that need to be made to the Bill to address the Supreme Court judgment, the Scottish Government have indicated that work by public bodies to implement The United Nations Convention on the Rights of the Child (UNCRC) should continue whilst these technical issues with the Bill are resolved.

In view of this East Renfrewshire Council and the Health and Social Care Partnership agreed to the establishment of a United Nations Convention on the Rights of the Child (UNCRC) Implementation Group made up of United Nations Convention on the Rights of the Child (UNCRC) champions representing East Renfrewshire Council, Health and Social Care Partnership, East Renfrewshire Culture and Leisure and other key partners. Key achievements of the group have included:

- Implementation of an audit tool to gather baseline data and identify next steps in promoting children's rights.

- Incorporation of Children’s Rights and Wellbeing Impact Assessment into East Renfrewshire Council’s Impact Assessment process and delivery of training to support staff.
- Engagement with children and young people to inform actions of group. In particular vulnerable children and those within pre-school age groups.

Over the last year the local United Nations Convention on the Rights of the Child implementation group has refocused their work to three areas: Participate, Promote and Publicise. This has allowed the group to continue to develop and promote children’s rights locally whilst incorporating the work being actioned at a national level.

### **Corporate Parenting and The Promise in East Renfrewshire**

East Renfrewshire Health and Social Care Partnership and the wider children’s partnership in East Renfrewshire are committed to delivering the necessary changes to meet the requirements of The Promise. Within our Children’s and Young People’s Services Plan 2020 - 2023 we have set the high level priority as follows - *Deliver on our Corporate Parenting responsibilities to our care experienced children and young people by fully implementing The Promise*. The plan was approved by East Renfrewshire Council thus ensuring progress is reported to elected members, Chief Officers, Scottish Government, and the public too. The commitment is accompanied by a detailed Corporate Parenting Plan and a multi-agency delivery group links to the Champions Board and Mini Champs groups.

A key aim within the plan is improving the quality of transition into young adulthood and the processes and procedures that can make this happen. Care experienced young people tell us their transition into young adulthood can often be often disappointing, with their experience of the adult world falling far from their expectations. Pathway planning is a crucial step in making the transition more satisfactory and more in line with their wider peer group.

In 2020 an application to the Corra Foundation (The Promise) was made to support a programme to deliver a new pathway planning framework for care experienced young people and care leavers. The programme, working in collaboration with young people, has achieved its key aims of locating best practice in this area and establishing a local framework and tools to assess the needs of those young people accessing aftercare services in particular. Furthermore the programme has strengthened the role and contribution of the multi-agency corporate parents who occupy the adult services world in enhancing the part they play in improving the outcomes for care leavers. With a growing population of care experienced young people in East Renfrewshire - approximately 240 in 2021 - we are now in the position to report more accurately on their needs and with partners redesign services in response to this.

Moving forward over the next year delivering on the Promise will be the key priority of the Health and Social Care Partnership along with other children’s services partners especially as we coordinate the local response to the Whole Family Wellbeing Framework.

### **East Renfrewshire’s Children’s and Young People’s Services Plan 2020-2023 – “At Our Heart”**

Despite the Coronavirus (Covid-19) pandemic, national lockdowns, and ongoing restrictions, East Renfrewshire’s children’s services partner agencies have continued to work together to implement the local Children’s Services Plan for 2020-2023. Children’s planning has a very high profile in East Renfrewshire and all partners have again demonstrated a determination during difficult times to work together to deliver on the commitments made especially in relation

to keeping children safe, improving children's mental wellbeing, enhancing support to children with complex needs, and ensuring The Promise is at the centre of all that we do.

The East Renfrewshire approach, as laid out in the plan, is underpinned by the Getting It Right For Every Child (GIRFEC) policy framework and informed by the United Nations Convention on the Rights of the Child. Across the partnership from nurseries, schools, youth services, social work, to health, the core values of relational based practice, listening to children, focusing on the strengths of families, and being trauma informed, drive our delivery and inform our understanding of what we need to improve. The next children's plan annual report will provide further detail of what is being achieved and the new challenges ahead.

## **2.2 Adult Social Work and Social Care**

### **Initial Contact Team**

As we continue to respond to the challenges of the Coronavirus (Covid-19) Pandemic, we are seeing increasing pressures on our services, not only in terms of demand but also in complexity.

The Initial Contact Team was introduced as a single point of access for all new referrals and contacts for Adult Health and Social Care. The operation of the Initial Contact Team was significantly impacted by the Coronavirus (Covid-19) pandemic and subsequent restrictions which limited in-person assessments.

The aim of the Initial Contact Team is to engage with people in their homes and communities, and identify alongside them what would make the difference at earlier points in recognising their need for assistance. Utilising the knowledge, skills and expertise of a wide range of disciplines we encourage collaboration and innovation alongside early interventions that supports people to live independently in the community as long as they can.

### **Adults with Incapacity**

The support and protection of the rights of adults who lack capacity to make informed decisions regarding their welfare and finances is a core responsibility of all social work practitioners within the East Renfrewshire Health and Social Care Partnership.

An implementation plan has been developed to support the launch of these procedures and includes a training programme for all relevant Health and Social Care Partnership staff.

The training was delivered in spring / summer of 2022 and included input from Mental Health officers, with implementation of the procedures in July 2022. The training will introduce our process and procedures with a focus on the enhancement of skills for those staff taking on new responsibilities. Training will place an emphasis on ensuring that rights and strength based practice is enshrined in the delivery of all services going forward.

### **Self-Directed Support**

The Social Care (Self-Directed Support) (Scotland) Act 2014 is a key piece of legislation and was enacted as part of the ten year National Self-Directed Support Strategy. The purpose of this legislation was to drive transformation in terms of shifting the balance of power from services to individuals who use them and to provide greater choice, control and creativity to individuals and families in terms of meeting their agreed personal outcomes.

In the last period we worked in partnership with the East Renfrewshire Self-Directed Support Forum and East Renfrewshire Carers Centre to understand the successes and challenges of Self-Directed Support in our area. This was a hugely successful process and led to the development of a Self-Directed Support steering group. This group has been co-chaired by a Head of Service and Self-Directed Support Forum manager with membership including people with lived experience of using self-directed support, practitioners, managers and finance officers. The steering group has contributed to improvements in Self-Directed Support practice in East Renfrewshire and has supported the development of effective collaboration between the Health and Social Care Partnership and Self-Directed Support forum.

In August 2021 we agreed to increase funding for the Self-Directed Support forum to support continuation of the budget management service, allowing this to be embedded in the Self-

Directed Support forum as an ongoing service for all who wished this support. This funding also supported the development of a personal assistant recruitment and employment service as part of the brokerage role provided by the Self-Directed Support Forum.

We have continued to benefit from our strengthened relationship with the Self-Directed Support Forum, inviting them to deliver toolbox talks to front line Health and Social Care Partnership staff. The intention of these sessions was to raise front line workers awareness of the supports available to assist individuals to operate an option one. These toolbox talks explored the practicalities of Self-Directed Support option one, the challenges of employment of friends and family, being flexible and applying the principles of the legislation. These sessions also introduced the role of the Self-Directed Support brokerage service.

### **Learning Disability Team**

The Learning Disability Team continue to support and develop the process of young people transitioning to adult services. Forthcoming developments that will be supported by the Learning Disability Team are the creation of a Transitions Team within adult services, the development and implementation of pathways for transition to the wide variety of paediatric health services to adult health services and earlier robust screening processes, which will identify the appropriate pathways for young people.

### **Learning Disability – Day Opportunities Services**

Since the onset of the Coronavirus Pandemic and subsequent restrictions around service provision, Day Opportunities have been providing services differently. This has involved supporting people within their local communities and homes on an outreach basis, which is a fundamental shift in how the service operated pre pandemic. The service will retain this blended model and will look to engage more with young people, aged fourteen years upwards in preparation for transition to adulthood.

The process of providing support to individuals on an outreach basis provides an opportunity to modernise the service and create more opportunities for a greater number of individuals who use the service and also for staff to develop their skills.

### **Supporting Unpaid Carers - Carers (Scotland) Act 2016**

Improving the support available to unpaid Carers has been challenging during the past year. Even with restrictions eased, with 76% reported their caring role had increased during the pandemic and 46% that the pandemic had impacted on their caring relationship. 76% reported their mental health had been impacted during this time and for 53% their physical health had been affected. Young carers have been affected similarly in their schools, at home and with caring.

Over the past year from April 21 to March 22 there has been a 72% increase in carers identified from the previous year. This means 479 Adult Carers received advice and support which included being signposted where to find this and were informed of their right to a support plan. East Renfrewshire Health and Social Care Partnership staff remain the main source of Adult Carer referrals to East Renfrewshire Carers Centre (ERCC) and Education the main source for Young Carers.

### **Assessment and Review Activity**

The Coronavirus pandemic has continued to affect all of our adult social work services, with sustained pressures affecting service capacity across reception, locality and specialist teams. Not only have we seen an increased demand for our services, the complexity of the issues



facing our clients has grown exponentially. Throughout the initial twelve months of the pandemic, the pressure of urgent new cases and ongoing case management resulted in an increasing waiting list for assessment, and an ever growing backlog of overdue permanent and community care reviews.

In April 2021, East Renfrewshire Health and Social Care Partnership commenced a piece of work to undertake individual reviews for all care home residents who did not have a recent review completed. With pressures upon the existing workforce, adult services moved swiftly to mobilise a dedicated review team.

## **Care Home**

### **Assurance Visits and Care Plan Reviews**

The pandemic has continued to have a significant impact on our care homes, staff, the residents, and their families. Care home support and assurance has been at the forefront of East Renfrewshire's pandemic response.

A care home assurance team was established at the beginning of the pandemic as requested by and reporting to Scottish Government. This team was directed to have regular assurance meetings and carry out assurance visits. There will now be a rolling programme of assurance visits to all the care homes in East Renfrewshire undertaken by dedicated members of the team.

### **In-house Care at Home Service**

Our in house Care at Home Service has continued to provide a pivotal role in the delivery of frontline high quality, person centred care to East Renfrewshire residents. Service delivery has remained a significant challenge in the reporting period due to the increasing complexity of care needs for those that we support and the difficulties we have faced in recruitment and retention within our staff team. The team have continued to deliver a high standard of care to help people to remain safe at home.

The service has maintained a re-enablement focus and we have strengthened our Occupational Therapy resources to ensure outcomes can be maximised for the people we support. Significant resources have been directed to multi-channel recruitment campaigns in the period and these have brought some success in terms of strengthening our resource base, however this remains an ongoing focus and challenge.

The service pressures have caused us to defer our planned redesign of the service and we will recommence this in the second half of 2022. We will use the learning from the pandemic and reflect the changing demands we have experienced post pandemic (including the increased complexity of individuals' care needs) to deliver a model and structure which maximises efficiency and well governed, high quality care delivery.

### **Bonnyton Care Home**

The Bonnyton House team have continued to perform in a strong and resilient manner and have shown considerable commitment to excellent resident care. They have welcomed the relaxation in pandemic restrictions, which have allowed a greater range of interactive activities to be conducted.

The phase two renovations which were originally planned for early 2022 were delayed and will commence in summer 2022.

To maximise the use of the Bonnyton House asset, the Scottish Government winter pressures funding was directed to the development of intermediate care beds and a wider multi-disciplinary team to enable and support this. This has been effective in the early stages in facilitating 'right time, right place' care and we will continue to develop and refine the approach as we embed the national discharge to assess model.

### **Telecare Services**

The in house Telecare team has delivered a service to almost 3000 customers, including carrying out approximately 16,000 emergency response visits over the period. When measured against key performance indicators, the service has performed well. This information will feed into the next annual audit by the Technology Enabled Care (TEC) Services Association in autumn 2022.

## 2.3 Mental Health

Mental Health Officers (MHOs) are responsible for carrying out specific duties on behalf of the local authority detailed within the Mental Health (Care & Treatment) (Scotland) Act 2003, Mental Health (Scotland) Act 2015, Adults with Incapacity (Scotland) Act 2000 and Criminal Procedures (Scotland) Act 1995.

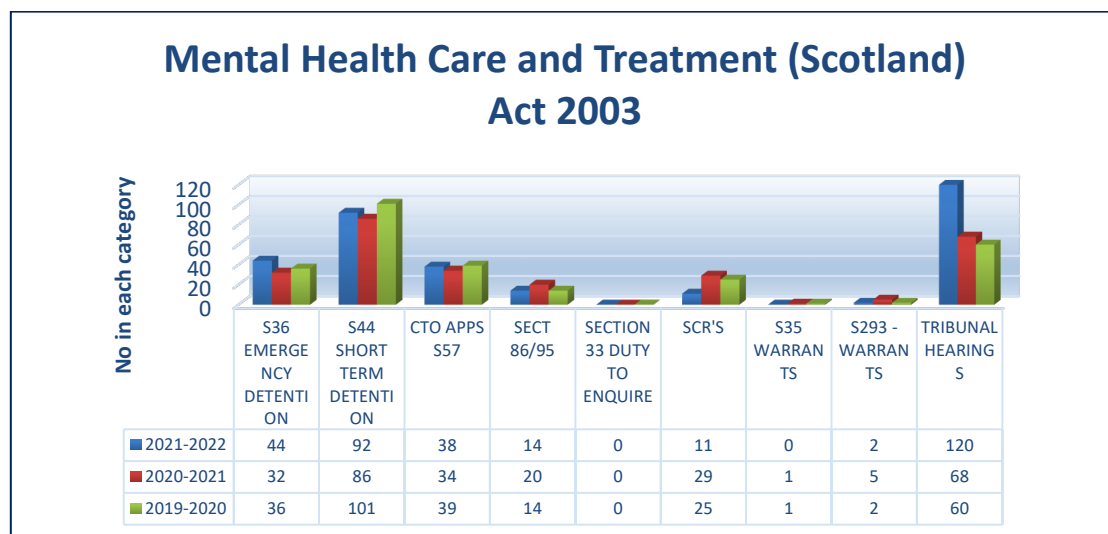
The East Renfrewshire Mental Health Officer service sits within the Mental Health and Recovery side of the partnership. Due to challenges in recruiting Mental Health Officers the team structure was adapted to include social workers who have taken on the majority of the care management responsibilities. This has enabled an increase in the capacity of the Mental Health Officers within the service to focus on statutory duties under the Mental Health and Adults with Incapacity legislation.

Our Mental Health Officers and Social Workers work closely with other agencies and professionals across the partnership to improve the quality of experience of people subject to statutory measures and ensure their rights are protected.

As we moved into the recovery period of the pandemic, the team adapted to an agile model of working which ensures a small staff presence within the office across the week. This ensures the service can be more responsive to service users and colleagues seeking support and advice.

A Development Day for all Mental Health Officers within the partnership was held in November 2021 with a specific focus on the Mental Health Officers National Standards and working toward ensuring that these are being met.

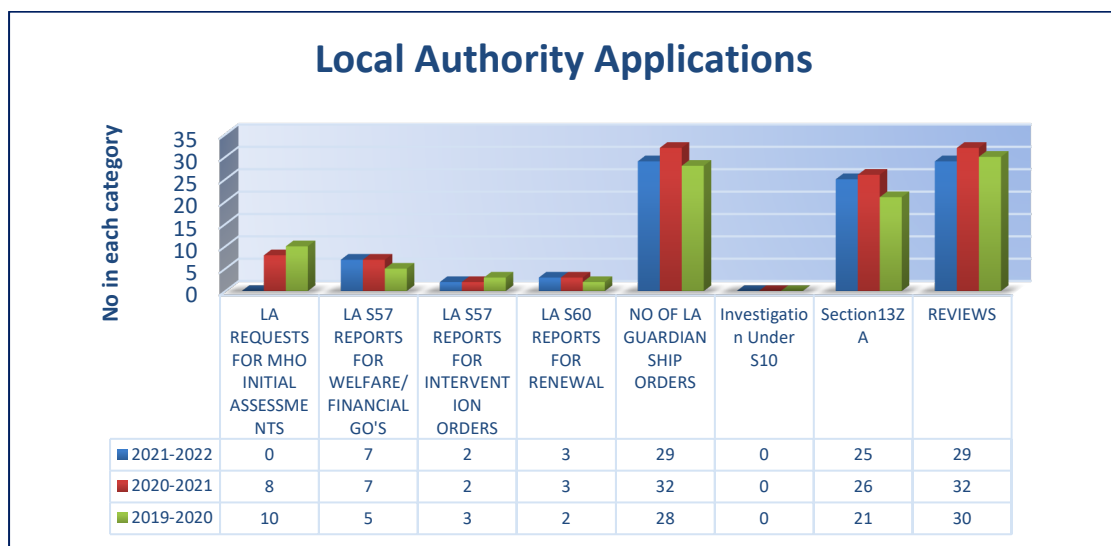
Over the last twelve months while the Mental Health Officers capacity within the partnership has reduced the activity generated by the Mental Health (Care & Treatment) (Scotland) Act 2003 has increased. The table below highlights that statutory work relating to Emergency Detention Certificates, Short Term Detention Certificates, and Compulsory Treatment Order applications has risen in comparison to the previous twelve months. Attendance at Mental Health Tribunals was an area which saw the highest increase. A possible explanation for this is as a result of increased capacity due to these being held virtually and the granting of interim orders.



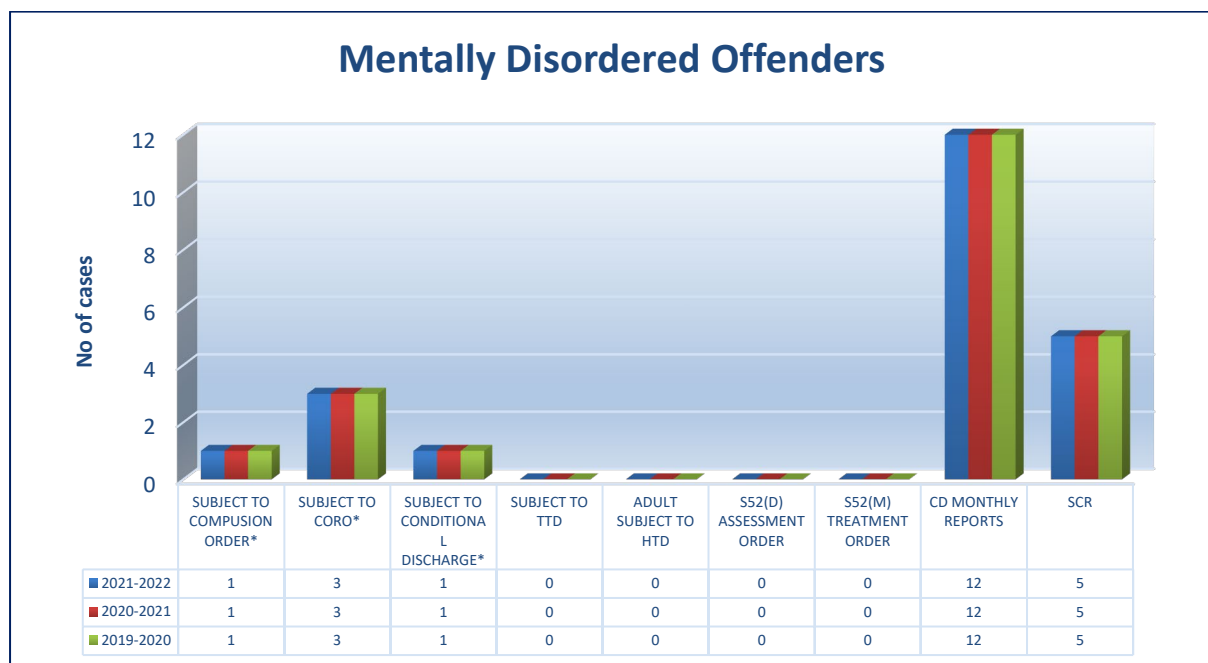
The Adults with incapacity legislation section 57(2) places a duty on the Local Authority to make an application for Welfare and / or financial Guardianship when specific criteria are met.

The graph below indicates:

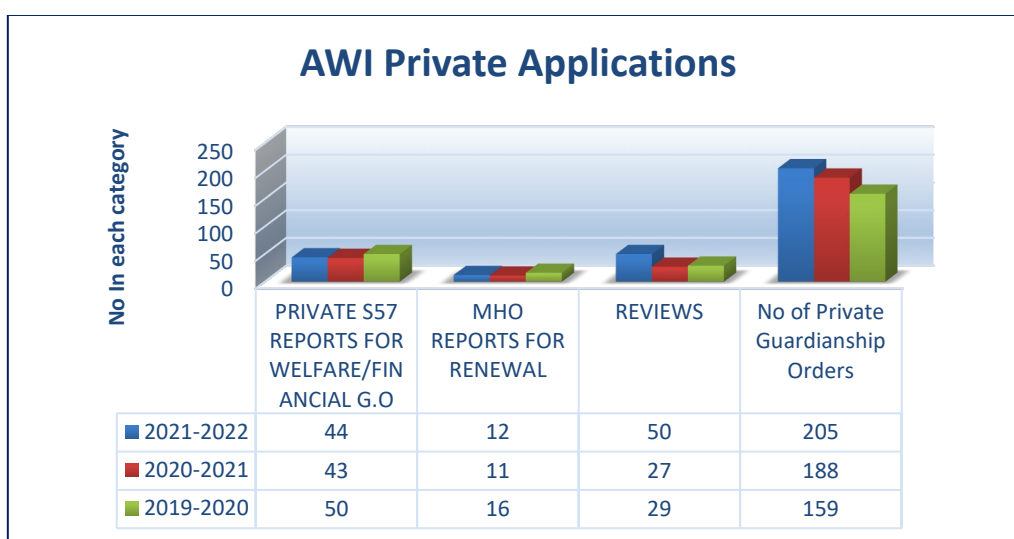
- Individuals currently subject to Local Authority Guardianship has reduced slightly to 29.
- 13za activity requiring the attendance of a Mental Health Officer to ensure appropriate application of the criteria and a human rights approach applied remained consistent.
- No change identified in the number of renewals of Local Authority Guardianship Orders over the last twelve months.



Referral for mentally disordered offenders remains low with only four individuals subject to mental health court disposals.



The demand for Mental Health Officers reports accompanying private applications for Welfare and Financial Guardianship continues to increase and a waiting list remains in place. The supervision of these orders continues to be a challenge due to the ever-increasing amount of guardians to be supervised which currently sits at 205 (an increase of 17 from last year), many of which are joint guardians which can bring with it additional challenges. While the expectation is that private guardianship orders will be reviewed within three months initially and then twelve months thereafter there remains a number of private guardians that require intensive supervision due to the complexity of the situation. The responsibility for these sits exclusively with the Mental Health Team. East Renfrewshire has not ceased supervision of private guardianship orders for any adult despite this being an option since 2015. In preparation for the role out of the new Adults with Incapacity procedures there has been a focus on the reviewing of private guardianship orders. This is reflected in an increase of 54% in review activity from last year.



## 2.4 Criminal Justice

The Coronavirus (Covid-19) pandemic has had a significant impact on the Justice System and associated Justice Service delivery during 2021/22. This is reflected in the table below which illustrates the number of Statutory Orders and requests for Criminal Justice Social Work Reports received by East Renfrewshire during that year.

	Number 2021-22	Number 2020-21	Change (n)	Change %
<b>Justice Social Work Reports</b>	137	55	+82	+149%
<b>Community Payback Orders</b>	80	31	+49	+158%
<b>Community Service Orders</b>	0	0		
<b>Through-care (released prisoners)</b>	9	5	+4	+80%
<b>Drug Treatment &amp; Testing Order</b>	0	0		
<b>Fiscal Work Order</b>	0	0		
<b>Diversion</b>	23	13	+10	+76%

### Community Payback Orders (CPO)

During Lockdown restrictions in 2021/22, there was a limited staff presence in offices with only essential services entering council buildings. Social Workers continued to supervise people by phone whilst maintaining office contact with those offenders who were deemed as vulnerable or assessed as posing the highest risk of harm. As restrictions eased, direct contact with service users increased.

Efforts have continued to reduce the backlog created by the suspension of Unpaid Work in 2020. We have sought to draw upon use of our Unpaid Work units alongside a blended approach. This has included working at home kits, a variety of work-packs for completion at home (with assistance rendered remotely by staff where necessary), all to ensure that the 'other activity' component of Orders were claimed appropriately.

The delivery of the nationally accredited sex offender group work treatment programme Moving Forward Making Changes (MFMC), was suspended during increased lock down restrictions. Whilst restrictions remain, the Justice Team secured a premises for Moving Forward Making Changes and established a commencement date. This will enable us to provide individuals subject to supervision access to the nationally-recognised programme.

### Key Successes

Strong partnership working was evident in planning support for people who were being released from prison. Throughout the Coronavirus (Covid-19) restrictions, we ensured that people being released from custody, including those not subject to statutory supervision, were supported and that housing had been identified for them. Service users released from custody during lockdown necessitated close collaborative working with Housing, Health, Addictions and Police Scotland to ensure needs were met and risks were managed during a particularly challenging time.

We have sought to develop the progress made within the previous year with regards our Unpaid Work Service. We complemented our workshop premises by securing an additional workshop. This increased our capacity, enabling the Justice Team to facilitate additional daily attendance to reduce the backlog of Unpaid Work hours. We have worked hard to ensure our premises enable service users to develop new skills. With the easing of restrictions, our Unpaid Work teams have further been able to resume community requests for assistance. This continues to strengthen our relationship with the local community and increase the profile of Unpaid Work.

As part of our commitment to work in close partnership with the third sector, we commissioned the Wise Group to deliver Community Payback Orders Connect, an online flexible course which provides support in a number of domains including mental health and financial inclusion. This additionally strengthens the digital literacy of those who receive a service from Justice Social Work.

In September 2021, an audit undertaken by the Multi Agency Public Protection Arrangements (MAPPA) Unit, evidenced that robust risk management arrangements were in place for those offenders who pose a high risk of harm.

Qualified social workers in the team, continued to access appropriate risk assessment training which was delivered on Microsoft Teams. This training included: Structured Assessment of Protective Factors (SAPROF), Stable and Acute 2007 (SA07) refresher training and The Spousal Abuse Risk Assessment version 3 (SARA V3).

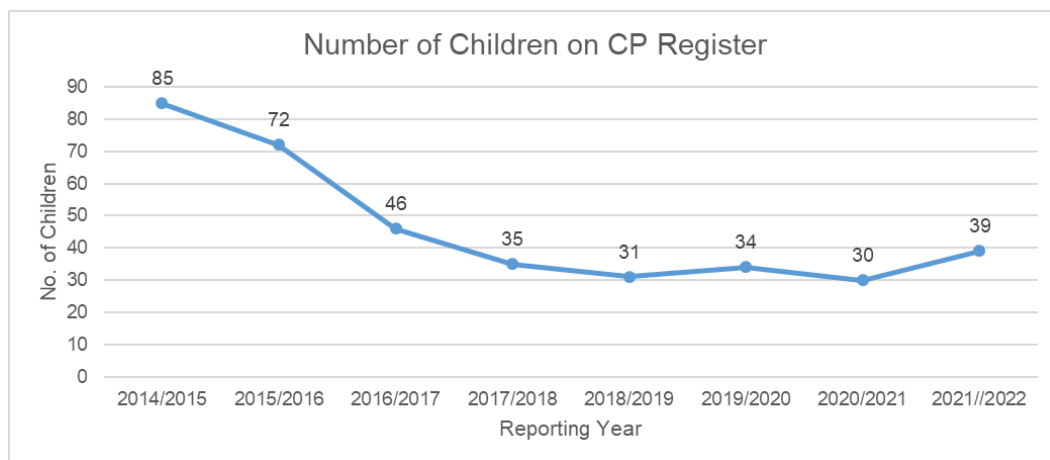
The Justice Team continued to ensure 100% attendance at scheduled Multi Agency Risk Assessment Conferences (MARAC) to complement the work undertaken by the Service.

## 2.5 Public Protection

### Child Protection, Quality Assurance and Continuous Improvement

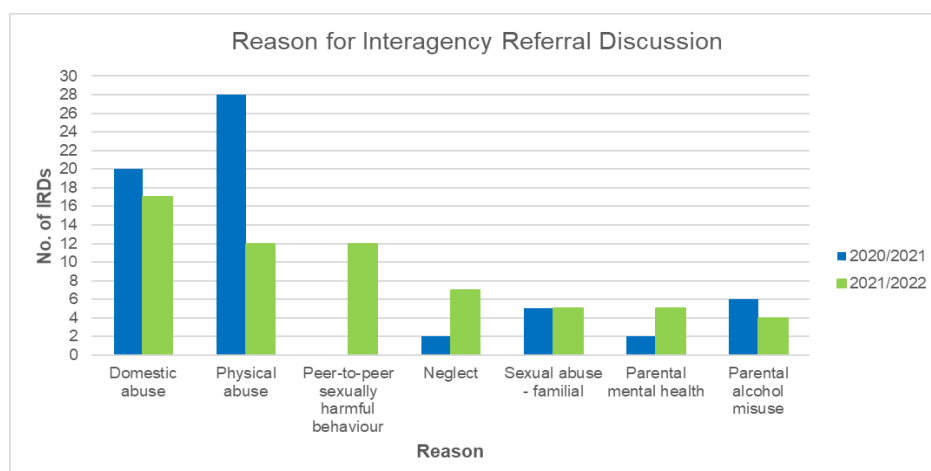
The number of children on East Renfrewshire's Child Protection Register was 39 in 2021/22. This is an increase of 30% on the previous year. This is contrary to the national data where there has been a decrease of 20% in the year 2020/21. There is a gap of one year in reporting periods so there may be an increase nationally for the year 2021/2022, before we can make any significant conclusions about this difference. In addition to robust management and audit activity, we continue to benchmark against comparator authorities to ensure that the rate of registration activity is proportionate and necessary.

#### Child Protection Registrations



#### Interagency Referral Discussions

During the period April 2021 – March 2022, we have undertaken 127 Interagency Referral Discussions (between social work, police, health and where appropriate education services) in respect of 197 children. This is an increase on the previous year and is most likely due to the restrictions being lifted and the ongoing impact of the pandemic.



The most common reasons for initiating an Interagency Referral Discussion (IRD) during 2021/22 are shown in the chart above. The highest reason for an Interagency Referral Discussion in the reporting period was domestic abuse. There has been a decrease in

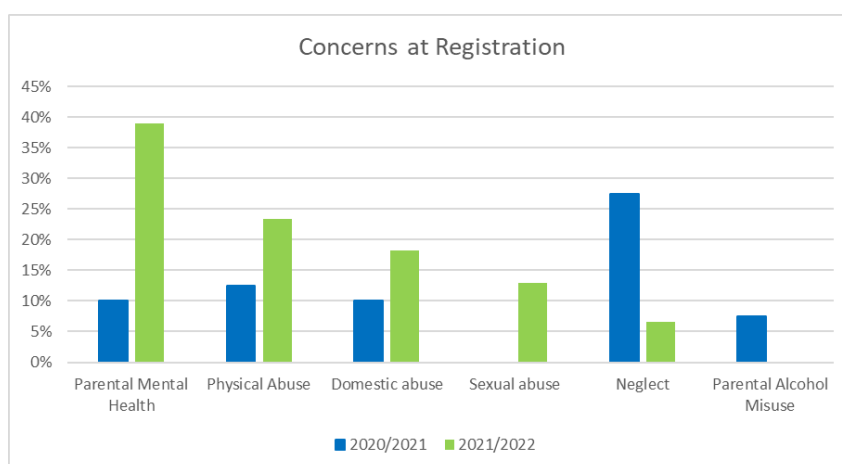


Interagency Referral Discussions for domestic abuse, physical abuse and parental alcohol misuses. There has been a significant increase in peer-to-peer sexually harmful behaviour, neglect and parental mental health.

Of the 197 children and young people subject to Interagency Referral Discussions, approximately half were subject to a child protection investigation. Of these children and young people 38% went on to have an initial or pre-birth child protection case conference. Of those children and young people just under half were subject to an initial / pre-birth child protection case conference, with 55% having their names placed on the child protection register. This is a decrease on the previous year of 27%. This equates to approximately 13% of all the children and young people who were subject to an Initial Referral Discussion, which is close to the 14% from the previous year.

### Concerns Identified at Registration

The proportion of children who were registered for parental mental health has increased significantly. This is a clear indication of the impact of the pandemic on parents' mental health. There was also an increase in children who were registered for physical and domestic abuse. There was a decrease children being placed on the register for neglect and parental alcohol misuse.



### Quality Assurance Activity

#### Interagency Referral Discussion Audits

A quarterly programme of Interagency Referral Discussion audit continues to be an ongoing exercise of our continuous improvement programme for Child Protection, allowing us to maintain an overview of the initial decision making in child protection processes. We have completed three quarterly audits for the reporting period so far, with the fourth audit postponed due to inspection activity.

The findings of the interim audit report were discussed by the Child Protection Committee Continuous Improvement Subgroup and presented to the Child Protection Committee. The feedback is shared with Team Managers to support development of practice. There is a strong link with the ongoing Scottish Child Interview Model work to ensure that the Interagency Referral Discussion process supports any joint investigative interviews.

The following strengths were identified in the interim 2021/22 audit report:

- 88% of Interagency Referral Discussions focussed on identifying, analysing and reaching a clear conclusion about the risk of significant harm.
- 85% of Interagency Referral Discussions considered the historical information relevant to the concern being discussed.
- 77% of Interagency Referral Discussions had clear reasons for subsequent actions and had a clear immediate safety plan respectively.
- 83% of Interagency Referral Discussions were able to reach a clear conclusion of risk.
- The average score in relation to the overall quality of the Interagency Referral Discussion was 'Very Good' (5/6).

### **Single Agency Child Protection Audit**

Due to the ongoing restrictions and pressures on frontline services, a decision was made to postpone the biennial Multi-agency Child Protection Case File Audit which was due to take place week beginning 31 January 2022. This was replaced by a Social Work single agency audit. Partners in Health, Education and Police undertake their own single agency child protection audits and the findings of those that have taken place will be discussed at the next Child Protection Committee with any exceptions brought to the next Chief Officers Meeting.

The following areas were identified as strengths:

- The majority of children had a multi-agency meeting and, in most cases, scored good or above in relation to the multi-agency response with information gathered from relevant appropriate sources and clear decision making recorded.
- Most assessments considered the needs, protective concerns and risks in relation to the child or young person with the majority of the assessments scoring good or above. The majority of these cases clearly evidenced the impact of harm on the child or young person.
- In almost all cases there was evidence of a review of the child's plan being held and the majority of these rated as very good or above.
- In most cases there was evidence of decision making and changes to the child's plan.
- There was clear evidence of relationship-based practice with children, young people and their parents / carers.
- Most cases scored good or above in the effectiveness of the work carried out to reduce the risk of abuse and / or neglect in relation to risk arising from the behaviour of parents / carers and in the community.
- The level of contact with children, young people and their parents / carers by professionals during the Coronavirus (Covid-19) pandemic was rated very good or above in almost all cases.

The following areas were identified as areas for improvement and action has already been taken to address these areas:

- In a minority of cases, reasons for decisions at multi-agency meetings are not always clearly recorded.
- In the minority of cases, the language used in assessments was that of professional and not that of the child and family.
- In a minority of cases the child's plan was not specific as to how the actions will improve the outcomes for the child or young person.

### **Joint Inspection**

We received notification of the Joint Inspection for Children at Risk of Harm on 22<sup>nd</sup> February 2022. The inspection activity runs until the report is published on 16<sup>th</sup> August 2022. Up to the end of this reporting period the following inspection activity has taken place:

Staff Survey: 21<sup>st</sup> March 2022 – 15<sup>th</sup> April 2022  
Partnership Discussion 1: 30<sup>th</sup> March 2022

Further inspection activity:  
Case File Reading: 2<sup>nd</sup> – 6<sup>th</sup> May 2022  
Partnership Discussion 2: 19<sup>th</sup> May 2022  
Parents and children/young people survey: 23<sup>rd</sup> May – 3<sup>rd</sup> June 2022  
Position Statement submission: 8<sup>th</sup> June 2022  
Engagement Week: 20<sup>th</sup> – 24<sup>th</sup> June 2022  
Partnership Discussion 3: 13<sup>th</sup> July 2022  
Report Published: 16<sup>th</sup> August 2022

### **The North Strathclyde Child Interview Team**

The North Strathclyde partnership, consisting of four Local Authorities and two Police Divisions went live on the 10<sup>th</sup> August 2020. The partnership works collaboratively with Children1st, NHS Greater Glasgow and Clyde, Scottish Children's Reporter Administration and Crown Office and Procurator Fiscal Service. The pilot continues to develop and fulfil the aim to ensure that all interviews take place in a safe, child friendly, age appropriate way that gives consideration to any developmental or additional needs. All children and their families will receive the practical and emotional support they require to recover.

In the reporting period, 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022, the team have received 442 referrals (17% increase from Year 1) and completed 382 interviews (13% increase). Our overall disclosure rate has been above 80% throughout this reporting period (an increase in first year of reporting). This provides evidence that children and young people feel safe to speak, where the time taken by interviewers to develop the child's needs plan in advance ensures a trauma informed approach throughout interview. The main primary concern recorded against referrals to the team is in respect of physical assault with offences under the Sexual Offences (Scotland) Act 2009 recorded as our second highest primary concern.

Over this reporting period, East Renfrewshire made 68 referrals (79% increase) to the child interview team, where 56 progressed (68% increase) to a joint investigative interview. A disclosure rate of 81% was recorded against these interviews with a crime report raised for 62% of these disclosures whereby 8% already had one raised.

In November, work commenced in respect of updating Interagency Referral Discussion guidance to reflect National Child Protection Committee Guidance (2021). This work was signed off by East Renfrewshire Child Protection Committee.

Feedback received from the child or young person and their family's perspective remains a valuable part of the work within North Strathclyde that we want to hear, respond to and influence change on. In respect of justice, as well as providing an opportunity to make a positive difference to these children and young people, as their case progresses, invaluable detail of just how the current system is experienced in the eyes of child victims and witnesses, has allowed us to identify areas for improvement.

In partnership with Children 1<sup>st</sup>, East Renfrewshire were instrumental in securing two premises which will become a 'Bairns' Hoose'. The vision remains, to design a truly child centred, trauma responsive approach with the best interests of children at the centre. These buildings will bring together child protection and justice system to one place. Support to recover will be offered immediately to those who wish it and all court appearances will be carried out via video link. This will be the first model of its kind in the UK and it is hoped that by using research and evaluation the house will be scaled across the whole country and UK.

### **North Strathclyde Child Interview Team Audit Work**

Development work continues under the new Scottish Child Interview Model (SCIM), and audit work to date has included:

- Peer evaluations to be undertaken on a quarterly basis involving three members of the team on each one.
- Quarterly self-evaluation undertaken by each member of the team.
- North Strathclyde have had their first Quality Assurance and Learning Group session, this being multi-agency and covered year on year comparison of the first six months data and a focus on the National Joint Investigative Interviews Quality Standards. The second is scheduled for April with a focus on Scottish Children's Reporter Administration and Crown Office and Procurator Fiscal Service evaluation work.
- Scottish Children's Reporter Administration have evaluated fifteen joint investigative interviews undertaken by the pilot team.
- Crown Office and Procurator Fiscal Office have evaluated four joint investigative interviews.

The audit and feedback work has identified:

- Crown Office recorded that all interviews evaluated could be used as evidence in chief and there was no inadmissible material. Thus reducing the trauma experienced by the child when having to give evidence in a formal court environment.

### **Our Response to Domestic Abuse**

Domestic abuse continues to be one of the most common reasons for referral to children's social work services. In the reporting period 2021/22 East Renfrewshire Health and Social Care Partnership Request for Assistance Team received 748 referrals of which 177 (24%) recorded domestic abuse as the primary concern. Similar to last year domestic abuse remains the main cause of referral to the Request for Assistance Team.

In 2021/22 Women's Aid service reported a significant increase in demand for refuge, outreach support, children and young people's support and advice / drop-provided in the last year. Women's Aid service supported 1226 women and children across their service compared to 805 during the same period the previous year. This is an increase of 72% in duty and helpline contacts, 37% increase in refuge and support, 14% increase in outreach, 12% increase in support for children and young people and a 52% increase across the whole service. The reporting period noted the highest recorded number of women supported in outreach services in the past two years.

Domestic abuse is a significant factor in child protection interagency discussions. In 2021/22 there were 101 child protection Interagency Referral Discussions (IRDs) held for 196 children (32.4% increase on previous year). 25 Interagency Referral Discussion's reported domestic abuse was a significant factor, this is 24.8% of the total Interagency Referral Discussion's and a 2.3% increase in the number of children where domestic abuse was noted (44 children last year compared to 45 this year).

There were 33 adults referred to East Renfrewshire Adult Support and Protection (ASP) where domestic abuse was highlighted as a concern during the reporting period 2021/22. There were 38 Adult Support and Protection inquiries, therefore several adults had multiple inquiries. This is a decrease on the previous year 2020/21 with 36 adults referred to Adult Support and Protection where domestic abuse was highlighted as a significant concern.

It is expected that domestic abuse referrals will continue to increase longer-term and that there are significant challenges in ensuring our services have sufficient capacity to respond.

### **Multi-agency Risk Assessment Conference (MARAC)**

Multi-Agency Risk Assessment Conferences (MARAC) are recognised nationally as best practice for addressing cases of domestic abuse that are categorised as high risk. In East Renfrewshire Multi-Agency Risk Assessment Conferences was first introduced in March 2019. Over the course of the last year Multi-Agency Risk Assessment Conferences in East Renfrewshire have remained online due to Coronavirus (Covid-19). This has continued to work very well and we have 100% attendance from the range of agencies that can attend.

In the reporting period 2021/22 the Multi-Agency Risk Assessment Conferences reported an increase in referrals for high risk victims and children with 125 victims and 205 children discussed at Multi-Agency Risk Assessment Conferences. This is an increase of 4% and 19% respectively in cases discussed compared to the previous year. This increase reflects that core agencies are more aware of Multi-Agency Risk Assessment Conferences and the referral process. Police Scotland remained the main referrer, followed by Children and Families Social Work, Women's Aid, ASSIST (Advocacy, Support, Safety, Information, Services, Together) and Adult Social Work.

A total of 428 actions have been agreed via Multi-Agency Risk Assessment Conference in this reporting period (compared to 592 the same period the previous year). It is important to note that in this reporting period, 32 survivors did not have school aged children compared to 21 survivors the previous year. This is an increase of 52%. Survivors without school aged children were not previously visible in the domestic abuse pathway prior to Multi-Agency Risk Assessment Conferences. The increase demonstrates increased awareness and identification of survivors across services and an improved pathway response from agencies.

Domestic Abuse, Risk Assessment and Multi-Agency Risk Assessment Conferences training continues to be delivered monthly on teams with staff trained across Adult Services, Children and Families, Mental Health, Addictions, Housing, Education, Care at Home, Health Visiting and our partner agencies. The evaluations and feedback have been positive. The awareness

of domestic abuse and understanding of the Multi-Agency Risk Assessment Conferences pathway is supported by the offer at the end of each training session to participants to observe a Multi-Agency Risk Assessment Conferences for their own professional development.

Safe Lives carried out an independent observation of the East Renfrewshire Multi Agency Risk Assessment Conference in May 2021. The observation report and findings were very positive highlighting a range of strengths in best practice, procedure and strategic oversight. This reflects the commitment by all agencies to share information to keep victims of domestic abuse and their children safe and improve outcomes.

### **Safe and Together**

We are one of the first local authorities recognised in Scotland as accredited Safe and Together Champions, delivering gold standard child protection domestic abuse training to staff. As with Signs of Safety training is being delivered at a whole system level, across adults and children's landscapes with the intention to have unity of purpose and delivery. This, in combination with our Signs of Safety approach, has strengthened our overall relational approach.

## **Adult Protection, Quality Assurance and Continuous Improvement**

### **Adult Support and Protection Inquiries**

Within the Reporting Period 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022 there has been a total of 805 inquiries undertaken by Council Officers (Adult Service Social Workers) of which 182 progressed to investigations. Within the previous reporting period 2020/21 there were 857 inquiries carried out and 224 investigations. This demonstrates that there has been a decrease of 6% (52) in the number of inquiries and of 19% (42) of the number of investigations undertaken compared to the previous period. This is consistent with the changing course of the Coronavirus (Covid-19) pandemic which had driven a significant increase in Adult Support and Protection activity in the previous period.

Of those inquiries carried out during 2021/22, 25% were received from third sector organisations delivering care and support to people in their own homes. This is consistent with last reporting period (27%) and provides assurance that the identification of harm by providers has been maintained. The slight decrease (2%) may be a result of the loosening of restrictions as we move into the recovery phase of the Coronavirus (Covid-19) pandemic.

Police Scotland continues to be the main single agency reporter for Adults at Risk, having generated 16% of inquiries in this reporting period (previously 22%). Our care home reporting shows little variation despite the significant impact of Coronavirus (Covid-19) pandemic on these environments. Referral rate remains at approximately 19% for this period which is consistent with the 2020/21.

We have seen an increase in reporting by a range of professionals including NHS and local authority. This increase is the expected outcome of delivering a high volume of Adult Support and Protection awareness raising / training sessions to these staff groups in this period.

We have enhanced our understanding and data reporting by capturing and analysing qualitative comment from council officers and team managers at the point of inquiry on areas such as time taken to complete inquiry, referral to advocacy and decision-making within inquiries. This has informed our understanding of the adult's Adult Support and Protection journey and allowed us to identify the application of professional judgement and application of the principles of the act in decision-making. We have also identified areas of improvement which have contributed to a review of our Adult Support and Protection procedures.

### **Adult Protection Investigations**

For the period 2021/22 there were 182 Adult Support and Protection investigations that involved 164 individuals, a 19% decrease from 2020/21. This year's rate is similar to investigations in reporting year 2019/20. The conversion rate from inquiry to investigations in this reporting year was 23%, down from 26% in the previous year.

Through the Adult Support and Protection Quality Assurance framework we have considered the application of the three point test by council officers and manager oversight. This process has not highlighted any concerns regarding conversion. We have delivered significant training for council officers which has promoted defensible decision-making and person centred planning in Adult Support and Protection which builds upon the strengths of the adult and their network. This has resulted in increased coproduction and collaboration with adults, their carers and key people in their life. We believed that has been factor in this continued low rate of conversion. This will be further explored through service user feedback and engagement.

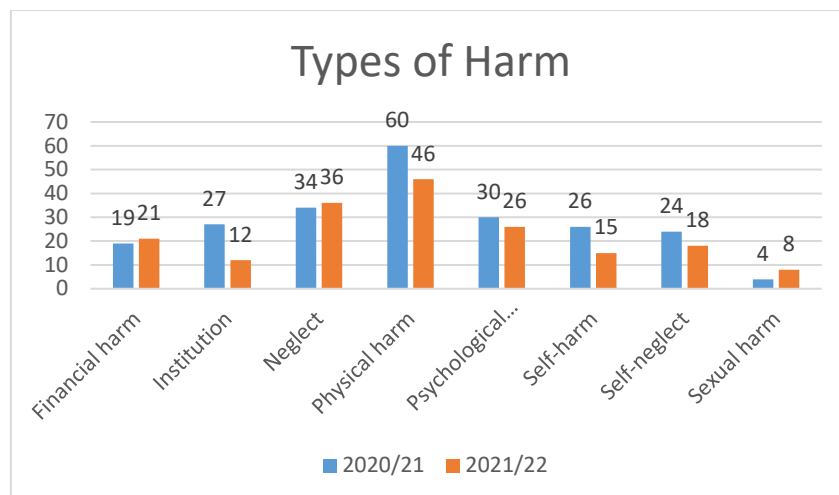
## Type of Harm

The breakdown of types of harm in the reporting period is as follows

- Neglect, which increased to 20% of total investigations, previous 15%,
- Sexual Harm, which increased to 4.4% of total investigations, previously 1.8 %
- Financial Harm increased from 8.5% to 11.5%.

Physical Harm remains the most common harm experienced by adults, accounting for 24% of investigations, down from 27% in 2020/21. Institutional harm accounted for 7% of investigations, down from 12% in 2020/21. The instances of institutional harm were much higher in 2020/21 due to two large scale investigations within care homes, there have been no large scale investigations in this period.

Financial harm has slightly increased since 2020/21 when it was 9% of the total investigations and in 2021/22 constituted 12%. East Renfrewshire Council Trading standards team have been engaged in consistent awareness raising in the community in recent years and this was promoted throughout the course of the pandemic.



## Key Characteristics

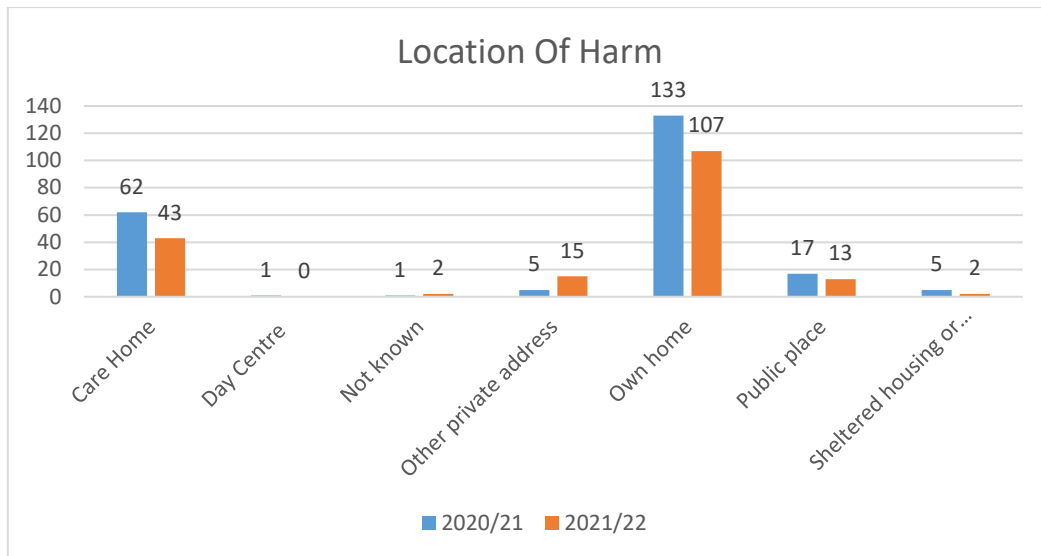
The adults most affected continues to be those with dementia, who make up 34% of all investigations, this is the same rate as 2020/21.

## Location of harm – Adult Support and Protection Investigation

The primary location of harm in 2021/22 in 59% of investigations was within the adult's home. This has remained static since 2020/21 (59%).

In 2021/22 Care Homes were the second highest location of harm in 23% of investigations. This is a decrease compared to the reporting period 2020/21 when this location of harm was identified in 28% of investigations. This reduction is expected as the increase in the last reporting period was driven by the large scale investigations in two care homes.





### Protection Plans in Adult Support and Protection

In 2021/22 we have continued to strengthen our use of protection plans. We have delivered specific training for the assessment and management of risk in Adult Support and Protection. This training provided guidance on effective protection planning and was well-received. This will be followed up in 2022/23 with workshops on the completion of Adult Support and Protection paperwork, including the Protection Plan to promote best practice.

### Adult Support and Protection – Referrals to Advocacy

The pattern of referrals to advocacy has been more effectively tracked in this reporting period and built upon the increased referral rate to advocacy witnessed in 2020/21.

There are now increased strong links at a senior management level between our Advocacy Project colleagues and the Health and Social Care Partnership which has informed our ongoing improvement journey to ensure we have systems that are seamless to ensure adults get the correct level of support.

The use of virtual technology established in the first year of the pandemic has continued with recent moves toward face to face contact with service users as we have progressed into the recovery phase of our response to the Coronavirus (Covid-19) Pandemic.

### Adult Support and Protection Improvement Activity

In this period our Adult Support and Protection team, has greatly strengthened our response to Adult Support and Protection activity. The team have provided practical support and guidance and strengthened relationships between locality services and external partners.

As part of our commitment to ongoing improvement, in spring 2021 we undertook a planned review of the Adult Support and Protection procedures. The review findings identified areas of improvements and changes were introduced to the Adult Support and Protection procedures which were relaunched in July 2021. These changes included:

- Promoting the role of professional decision making and defensible decision.
- Clarifying interface between adult and child protection through a joint process.
- Supported collaboration and engaged with partners.

- Improved oversight of investigations and case conferences.
- Improved recording and reporting of Domestic Abuse / Domestic Violence.
- Improved recording around advocacy.
- Specific recording around delay by council officer, to support recording of defensible decision-making and professional judgement.

We implemented the Adult Support and Protection Quality Assurance framework in April 2021. This has provided assurance of practice and governance throughout Adult Support and Protection activity.

The Adult Protection Committee continue to be updated and appraised of the improvement activity by the lead officer through their report which provides analysis and assurance supported by quarterly data reporting.

### **Section 3. Resources**

#### Finance Pressures

In 2021/22 we ended the financial year with an underspend of £0.837 million against a budget of £184.5 million (including set aside). This underspend increased our budget saving reserve as part of our pre-pandemic strategy of phasing savings. As with prior year, we recognised we would not achieve all savings required during the year however we received Coronavirus (Covid-19) funding to support us as we did not have capacity to progress our recovery and renewal programme given the continued focus on response.

We spent £8.9 million on Coronavirus (Covid-19) related costs and this was fully funded by the Scottish Government so has no impact on each service's budget.

The Scottish Government recognised the pressures across health and social care and provided additional funding to support winter pressures, to increase capacity and help address recruitment and retention. We received £3.124 million, spent £2.112 million and took the balance of £1.012 million into 2022/23.

The investment in health and social care by the Scottish Government in 2021/22 was welcomed by East Renfrewshire's Integration Joint Board (IJB) and whilst the majority of this new funding supports specific policy decisions such as the living wage for care providers, we were able to mitigate to some degree our pressures.

The £0.837 million operational underspend (0.54%) will be added to our budget phasing reserve. The main variances to our budget were:

- £1.904 million underspend in within Older Peoples Nursing, Residential and Day Care Services. This reflects the ongoing trend of reduction in care home admissions but does offset the increase in community activity; predominantly Care at Home.
- £1.715 million overspend within Intensive Services as our Care at Home costs reflect that we continued to operate a near full service in the second year of the pandemic. This is the position after we applied £0.826 million of winter funding to meet the increases in demand and complexity within this service
- £0.458 million underspend within Learning Disability Community Services from a combination of staff turnover and running costs.

Our unaudited annual report and accounts was considered by East Renfrewshire's Integration Joint Board on 22<sup>nd</sup> June and we plan to take our audited annual report and accounts to East Renfrewshire's Integration Joint Board in November.

#### **Financial modelling for Service delivery**

East Renfrewshire's Integration Joint Board continues to face a number of challenges, risks and uncertainties in the coming years and this is set out in our current Medium-Term Financial Plan for 2022/23 to 2026/27 and our Strategic Plan for 2022/23 to 2024/25. These key strategies also inform our strategic risk register and collectively support medium-term planning and decision making.

The funding gap in future years could range anywhere from £0 to £5.7 million per year, excluding recent inflation implications, any additional savings requirements in future years and any unknown factors. The resulting funding gap will be dependent on the funding settlement for each year. We expect the coming years to be difficult.

The budget for the year 2022/23 was agreed by East Renfrewshire's Integration Joint Board on 16th March 2022 totalling £180.1 million (including set aside of £37.7 million). Despite the investment in health and social care we had cost pressures of just over £14.4 million (including pre-pandemic legacy savings), funding uplifts of £11.3 million and therefore required savings of £3.1 million to close this gap. We were able to identify £0.5 million of immediately achievable savings so the savings challenge for 2022/23 is £2.6 million.

The delivery of recurring savings will be very challenging; the landscape has changed, particularly around demand and complexity, the ability to introduce new charges or increase criteria for care package support. Our reserves strategy, in place pre the pandemic, should see us through the year as we work towards gaining efficiencies from our Recovery and Renewal programme and also by managing, as best we can, the budget we have allowed for to meet increased demand.

Since setting the budget in March the economic pressures continue to build including costs of utilities, fuel, wider inflation including pay, and some supply shortages. Recruitment and retention of staff across the whole Health and Social Care sector is a real risk and adds to the challenge of meeting increased demand for services.

The baseline for activity and demand that we would normally work to and benchmark against no longer exists as it is still too soon to understand the long term impacts of the pandemic; we continue working to reshape our services with many unknowns still to encounter.

## **Section 4. Workforce**

### **Workforce Development**

As at the 31<sup>st</sup> March 2022, East Renfrewshire Health and Social Care Partnership workforce comprised of 1127 (976 WTE) employees consisting of and Council 584 (WTE) and 392 (WTE) from NHS Greater Glasgow and Clyde. As a partnership our workforce are our greatest asset. We want to ensure that those providing invaluable health and care services are happy and motivated; and feel respected and fulfilled in their role for years to come.

The Partnership developed a one year interim Workforce Plan covering the period 2021/22 which has four main sections

- Supporting Staff Physical and Psychological Wellbeing
- Short Term Workforce Drivers (Living with Covid) 12 months
- Medium Term Workforce Drivers 12 – 36 month
- Supporting the workforce through transformational change

In 2020, the total population of East Renfrewshire Health and Social Care Partnership was 96,060. Future projections show that the population will grow and we will have an increasingly ageing population profile. East Renfrewshire also has a projected increase in the school age population as children move into the authority to attend mainstream or specialist schooling. Therefore we anticipate demand for specialist children's services to support children who are neurodiversity, have disabilities or mental health problems.

East Renfrewshire Health and Social Care Partnership ran recruitment campaigns for Care at Home staff in August 2021 and January 2022. These were successful however it only compensated for the reduction in capacity due to Covid absence and restrictions.

During this period the Health and Social Care Partnership redeployed staff from other Care services and trained volunteers from Health and Social Care Partnership and wider Council who do not work within the sector. Ongoing recruitment of staff remains a priority due to increased demand, complexity and growing trends in reduced external provider capacity. This will include recruitment of an additional 30 Home Care Re-enablement Workers and 2 Home Care Organiser posts.

The age profile within social work shows that the majority of main grade social work staff are below the age of 55 years. Due to the younger workforce there is a skills / experience gap as younger employees also tend to be newly qualified. Whilst this improves over time as the workforce develops there is a need to focus future recruitment in attracting more experienced workers.

The recruitment of Mental Health Officers has continued to be a challenge. The job description was revised in line with the changing demands of the role and an advanced practitioner post at a higher grade created to reflect the additional responsibilities the role now carries.

The Health and Social Care Partnership has well established relationships with universities and in supporting students in learning placements. This has continued as part of our recovery and renewal work. We have developed a traineeship programme for care experienced young people.

A Trauma Steering Group has been established to assist with the implementation of the national Trauma training programme and commitment and support has been offered through the Chief Social Work Officer to ensure staff involvement and participation in this area.

## **Conclusion**

As we continue to recover from the Coronavirus (Covid-19) pandemic our social work and social care workforce responded quickly and compassionately to ensure they continue to support and serve our most vulnerable citizens.

As outlined in the report we continue to see increased demand for social work services both in terms of numbers and the complexity of need. For children's services, we continue to see the impact of the pandemic for our children and their families with an even greater impact on children and young people's mental health and emotional wellbeing. Children with additional support needs have also been adversely affected.

As society moves closer to predictable service delivery we continue to experience a level of complexity in what we manage. Adult services has seen demand in this regard in ways previously unprecedented and complex.

I would wish to thank all the Social Work and Social Care workforce who have and continue to work tirelessly for the benefit of the citizens of East Renfrewshire. This drive, dedication and commitment is what delivers the best of services to those most in need and who require it. The workforce aspiration is to continue to deliver high quality standards in their practice is humbling and respected.

My final word of thanks is to Kate Rocks, who left East Renfrewshire Health and Social Care Partnership on 15<sup>th</sup> August 2022. Her leadership, vision, commitment and hard work to improve the lives of vulnerable children and adults within East Renfrewshire is commendable. Her support to the social work and social care workforce was also received with great thanks, appreciation and respect.

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