



Date: 4 August 2023
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TO: MEMBERS OF THE EAST RENFREWSHIRE INTEGRATION JOINT BOARD

Dear Colleague

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

A meeting of the East Renfrewshire Integration Joint Board will be held on **Wednesday 16 August 2023 at 10.00 am.**

Please note this is a virtual meeting.

The agenda of business is attached.

Yours faithfully

Anne-Marie Monaghan

Chair

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**EAST RENFREWSHIRE INTEGRATION JOINT BOARD
WEDNESDAY 16 AUGUST 2023 AT 10.00 am**

VIRTUAL MEETING VIA MICROSOFT TEAMS

AGENDA

- 1. Apologies for absence.**
- 2. Declarations of Interest.**
- 3. Minute of Previous Meeting held 28 June 2023 (copy attached, pages 5 - 12).**
- 4. Matters Arising (copy attached, pages 13 -16).**
- 5. Rolling Action Log (copy attached, pages 17 - 20).**
- 6. East Renfrewshire's Children and Young People's Services Plan 2023-2026 (copy attached, pages 21 - 112).**
- 7. Finance and Policy Implications for Forster Care, Kinship and Adoption (copy attached, pages 113 - 120).**
- 8. Strategic Commissioning Plan (copy attached, pages 121 - 156)**
- 9. Revenue Budget Monitoring Report 2023/24 (copy attached, pages 157 - 176).**
- 10. HSCP Savings Recovery and Renewal Programme (copy attached, pages 177 - 196).**
- 11. Health Checks for Adults with a Learning Disability (copy attached, pages 197 - 204).**
- 12. Joint Inspection of Adult Support and Protection in East Renfrewshire (copy attached, pages 205 - 210).**
- 13. Delayed Discharge Position – Presentation by Lee McLaughlin**
- 14. Calendar of Meetings for 2024 (copy attached, pages 211 - 214).**
- 15. Date of Next Meeting – Wednesday 27 September at 1.00 pm.**

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Minute of virtual meeting of the East Renfrewshire Integration Joint Board held at 1.16pm on 28 June 2023

PRESENT

Anne-Marie Monaghan	NHS Greater Glasgow and Clyde Board (Chair)
Lynsey Allan	Scottish Care
Lesley Bairden	Head of Finance and Resources (Chief Financial Officer)
Councillor Caroline Bamforth	East Renfrewshire Council
Councillor Paul Edlin	East Renfrewshire Council
Councillor Owen O'Donnell	East Renfrewshire Council
Dr Claire Fisher	Clinical Director
Jacqueline Forbes	NHS Greater Glasgow and Clyde Board
Jennifer McKean	Senior Manager, Intensive Services and Justice
Julie Murray	Chief Officer – IJB
Lynne Rankin	Staff Side Representative (ERC)

IN ATTENDANCE

Liona Allison	Assistant Committee Services Officer, East Renfrewshire Council
Claire Coburn	Strategic Services Lead Officer, East Renfrewshire Council
Colin Sweeney	Democratic Services Manager, East Renfrewshire Council
Pamela Gomes	Governance and Compliance Officer
Noleen HarteMcCormick	SDS Implementation Manager
Tom Kelly	Head of Adult Services – Learning Disability and Recovery
Ian Marland	Communications Officer, East Renfrewshire Council
Ian McLean	Accountancy Manager
Margaret Phelps	Strategic Planning, Performance and Commissioning Manager
Steven Reid	Policy, Planning and Performance Manager
Ally Robb	Senior Manager, Community Children's Service
Grace Scanlin	Ernst & Young (External auditor)
Caroline Sinclair	Chief Officer – East Dunbartonshire IJB
Gayle Smart	Senior Manager, Unscheduled Care and Intensive Services
Andrew McCready	NHS Staff Side Representative
Kirstie Ritchie	Senior Communications and Campaigns Officer
Ian McLean	NHS Accountancy Manager
Colin Hutton	Senior Communications Officer
Steven Reid	Senior Policy, Planning and Performance Officer

APOLOGIES FOR ABSENCE

Dianne Foy	NHS Greater Glasgow and Clyde Board
Lee McLaughlin	Head of Adult Services – Communities and Wellbeing
Councillor Katie Pragnell	East Renfrewshire Council (Vice-Chair)
Raymond Prior	Head of Children's Services and Criminal Justice (Chief Social Work Officer)
Lynne Siddiqui	AHP Lead

1. DECLARATIONS OF INTEREST

There were no declarations of interest intimated.

2. MINUTES OF PREVIOUS MEETING

With reference to Revenue Budget 2023-24 (Page 9, Paragraph 2) (Minute No.6 referred), officers responded to a query raised by Councillor Edlin in respect of funding and the establishment of a working group to revisit this.

Officers confirmed that the Board would be asked if any members wished to join the working group once it had been established.

RESOLVED, that the Minutes of the previous meeting, held on 29 March 2023, be approved as a correct record.

3. MATTERS ARISING

The Board considered a report by the Chief Officer, which provided an update on the following matters, which arose from discussions that had taken place at the previous meeting.

a) Joint Inspection of Adult Support and Inspection

Noted that the Care Inspectorate report published on 27 June 2023, be shared with members, once available. A verbal update was provided; and

b) National Transfer Scheme for Unaccompanied Asylum-Seeking Children and the Ukrainian Resettlement Scheme

As noted at the last meeting, a report outlining the implications be shared with East Renfrewshire Cabinet and that this had been provisionally scheduled for September 2023.

RESOLVED, that the report be noted.

4. ROLLING ACTION LOG

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

- i) With regard to Action No.403 (National Transfer Scheme for Unaccompanied Asylum-Seeking Children and the Ukrainian Resettlement Scheme), where enquiries were to be made with the relevant consulates regarding the provision of translation services, it was reported that there was no update at this time.
- ii) With regard to Action No.355 (Age of Criminal Responsibility (Scotland) Act 2019), where arrangements to identify a named establishment as a place of safety, were to be made, it was reported that a number of flats had been looked at in terms of accessibility and suitability.
- iii) With regard to Action No.244 (Financial Framework for the 5-Year Adult Mental Health Services Strategy in GGC), where a progress report was to be submitted in due course, it was reported that the report was awaiting approval and would potentially be submitted in September 2023.

5. LOCAL CHILD POVERTY ACTION REPORT: YEAR 5 (2022/23)

The Board considered the fifth Annual Local Child Poverty Action Report (LCPAR) 2022/23. The report provided members of the Board with an overview of the statutory duty placed on health boards and local authorities to work together to develop, produce and deliver LCPARs and, specifically, which provided a profile of child poverty in East Renfrewshire, including details of both previous and planned actions to tackle the drivers of poverty.

The Board was also being asked to agree to recommend, that the report be published, subject to the prior agreement of NHS Corporate Management Team (due to meet next week) and East Renfrewshire Council (due to meet this evening).

It was reported that whilst there were fewer children in poverty in East Renfrewshire, its area was small and was easier to conduct a targeted approach and Officers wished to take more of a deep dive into areas where there was deprivation.

It was noted that there had been an increase in the number of employers who paid the minimum wage and those integrated back into work.

During discussion, points raised included:

- The importance of this report for the Board and for the Council.
- Disappointment at the increase in child poverty levels and the need to understand this.
- The considerable amount of cross-agency work being undertaken.
- Uncertainty as to whether the headline number was reflecting the efforts being made or the real poverty “pockets” East Renfrewshire had.
- The Board should know the individuals affected and actions should be people-based and more data-centric.
- The “Dressing for Excellence Policy” and affordability.
- How East Renfrewshire residents would earn more than non-residents who worked there.
- Working with local employers re minimum wage accreditation.

Accordingly, it was **RESOLVED** that:

1. The LCPAR: Year 5 2022-23, as required under the Child Poverty Act 2017, be noted; and
2. Subject to its prior approval by the NHS GGC Corporate management Team; the Population Health and Well-being Committee and East Renfrewshire Council, the report recommended for publication.

6. UNAUDITED ANNUAL REPORT AND ACCOUNTS 2022/23

The Board considered a report, which provided an overview of the unaudited annual report and accounts for the Board for the period 1 April 2022 to 31 March 2023. It addressed matters arising from the Performance and Audit Committee in relation to the unaudited annual report and accounts and its decision taken on 26 June 2023 on the remittance of the unaudited Annual Report and Accounts to the Integration Joint Board.

The Board’s Head of Finance and Resources (Chief Financial Officer) said that, this year, the original timetable reinstated to enable PAC and the IJB to receive the unaudited report and accounts in June and the audited report and accounts in September.

She said that the main messages included in the report were:

- Underspend of £0.59 million, caveated that this included significant use of reserves as had been reported to the Board throughout the year.
- The main variances for the year, which were set out in paragraph 17 to the report, with a summary of reserves included in the report and the full detail of the reserves position was set out at Note 8 in the accounts.
- When last reported to the Board in March, a projected potential overspend of just under £0.3 million and the main reasons for reduction in projected costs were set out at paragraph 18 to the report (mainly pay award funding, further turnover and some flexibility within care package costs).
- Level of general reserve remained below the level set in the reserves strategy and had been discussed at length in prior years this (this had also been discussed as part of budget planning and was reflected in the revised Medium-Term Financial Plan.
- Paragraph 29 to the report advised a new financial management code had been published by CIPFA and that the CFO had undertaken an initial review and would report to the next meeting of the Performance and Audit Committee.

Noted that, subject to the Board's approval, the unaudited annual report and accounts be submitted to Ernst and Young by the statutory deadline of 30 June 2023.

During discussion, points raised included:

- Returning of £4.7m to the Scottish Government following Covid-19 despite Covid-19 related problems still existing.
- Was there a Prescribing Working Group?
- Transition to Ernst and Young

In response, in 2021/22, the Board had received significant funding in recognition of the pressures because of Covid-19 but that the level of funding had fallen to £6m now.

Joint funding came via Central and Scottish Government and that this money was ring-fenced for this purpose.

In noting that capacity issues funding had ceased, the Board recognised that local government was able to carry forward Covid-19 funding and that the Council had supported the Board to the sum of £0.75m.

Accordingly, it was **RESOLVED** that:

1. The unaudited annual report and accounts, for submission to Ernst and Young, be agreed;
2. The proposed reserves allocations, be agreed and endorsed;
3. The fact that the annual report and accounts were subject to audit review, be noted;
4. Subject to any recommendations made by the Board, its external auditors or the Performance and Audit Committee, the audited report and accounts be received in September 2023; and
5. The summary overview of financial performance document be presented with the audited accounts in September 2023, be noted.

7. MEDIUM-TERM FINANCIAL PLAN

The Board considered a report, which provided it with a refreshed Medium-Term Financial Plan for the IJB covering the five year period 2023/24 to 2027/28, advised the Board of the medium-term financial outlook as set out in the refreshed Plan, which supported the strategic planning process and provided a financial context to support medium-term plans and decision-making.

It was reported that, whilst the Plan referred to the national position for the first time, the cost pressures could be between £3.4m and £9.0m although there was less certainty looking further ahead.

In recognising that the coming years would most likely be the more difficult ones, it was reported that the Plan (which built upon previous versions) was updated annually but that any issues arising were highlighted in-year

RESOLVED that the revised Medium-Term Financial Plan, be approved and that updates be received, which reflected significant changes in the financial outlook for the IJB.

8. ANNUAL PERFORMANCE REPORT 2022-2023

The Board considered a report, which provided it with the Annual Performance Report for the Health and Social Care Partnership for 2022-23. This was the seventh Annual Performance Report and outlined performance in relation to the delivery of the Strategic Plan 2022-25. The Annual Performance Report was a high level, public facing report and summarised the performance of the HSCP with specific focus on the delivery of services and support as it recovered from the Covid-19 pandemic.

RESOLVED that:

1. The report and its submission to the Scottish Government by the revised deadline of 31 July 2023, be approved; and
2. The Policy, Planning and Performance Team work with the Communications Team to consider a range of media to engage with the public, illustrate performance and publish the Performance Report on the IJB website and through social media.

9. HSCP SAVINGS, RECOVERY AND RENEWAL PROGRAMME

The Board considered a report, which updated it on the HSCP Savings, Recovery and Renewal Programme.

The report updated a number of projects, as detailed at paragraphs 7 to 13 and officers were pleased to advise that since the report was written the requirements' gathering exercise for the case recording replacement system, had been signed off by the project board, and work was ongoing to move to the Invitation to Tender stage.

Appendix 1 to the report gave the detailed overview by project.

The table at paragraph 15 in the report provided a summary of the status of the savings required in the current year. Whilst this was good news, the HSCP had £1.576 million identified as achievable, with a further £3.88 million on track. There was currently £1.729 million at risk of slippage or potential shortfall.

Following publication of the report, a further £300k had converted to "achieved" from "on track".

10
NOT YET ENDORSED AS A CORRECT RECORD

In-year slippage in the Supporting People Framework was assumed and where some restructuring or redesign was required – and the delays reflected the capacity and operational challenges the HSCP was facing.

The HSCP had £1.599 million in its budget savings reserve and £0.272 million in general reserve. That was sufficient, at present to contain the assumed slippage, but also assumed there would be no operational overspends in 2023/24, however the risks of this were mounting.

Appendix 2 provided an overview of the savings detail, with some smaller savings grouped per the previously agreed approach.

Officers confirmed that progress be reported to every meeting of the Board.

During discussion, the following points were raised:

- Concern around national care home negotiations
- Commitment to put clear timelines to ensure much more detailed report to next meeting
- Looking at financial recovery (national issue)

RESOLVED that the report, be noted.

10. SUPPORTING PEOPLE FRAMEWORK IMPLEMENTATION

The Board considered a report, which provided an update on the implementation of the Supporting People Framework (Policy), approved at the Integration Joint Board meeting on 29 March 2023. The framework set out the criteria for providing social care in 2023/24.

RESOLVED, that the Supporting People Framework Implementation Plan and the progress to date of the implementation be noted.

11. MEDICATION ASSISTED TREATMENT STANDARDS UPDATE AND ALCOHOL AND DRUGS PARTNERSHIP ANNUAL REPORTING SURVEY 2022-23

The Board considered a report, which provided an update on the outcome of the national assessment of East Renfrewshire's progress towards the Medication Assisted Treatment (MAT) Standards, a rigorous process that required significant preparation of evidence of implementation. Secondly, the report presented the draft Alcohol and Drugs Partnership Annual Reporting Survey for 2022-23, which had been prepared for submission to the Scottish Government.

It was reported that the Implementing the (MAT) Standards was a key priority for supporting people with harmful opiate use, and one of the key work streams of the National Drugs Mission to reduce and prevent drug related deaths. The Board noted that these were a holistic set of standards. These included rapid access to opiate substitution treatment, on the same day of presentation where possible, as well as improving access to harm reduction, mental health supports, and advocacy services. A summary of the ten Standards appeared at Annexe 1 to the report.

NOT YET ENDORSED AS A CORRECT RECORD

Locally, the MAT implementation process had been driven by a working group (membership included ADRS team management and Medical Officer, Senior Manager Recovery Services, Data Analyst and Lead Planner). The working group met fortnightly during 2022-23 to progress and report on actions and review the evidence gathered to demonstrate implementation.

Noted that the national MAT Standards Implementation Support Team (MIST), hosted within Public Health Scotland, had supported this group throughout the last year. This support gave the opportunity to submit evidence for review prior to submission and to discuss improvement areas.

All Alcohol and Drug Partnership (ADP) areas had now been formally assessed and East Renfrewshire had achieved the following ratings for Standards 1 to 5:

Standard	Definition	East Renfrewshire
1	All people accessing services have the option to start MAT from the same day of presentation	Green
2	All people are supported to make an informed choice on what medication to use for MAT, and the appropriate dose	Green
3	All people at high risk of drug related harm are proactively identified and offered support to commence or continue MAT	Provisional Green
4	All people offered evidence based harm reduction at the point of MAT delivery.	Amber
5	All people will receive support to remain in treatment as long as requested.	Green

Officers said they had been reluctant to bring the report to the Board but that the Scottish Government had required that the Board consider it.

Officers also expressed disappointment at the amber status of Standard 4.

RESOLVED that:

1. The assessments achieved by East Renfrewshire in respect of MAT Standards 1 to 5 above, be noted: and
2. The East Renfrewshire Alcohol and Drugs Partnership Annual Reporting Survey 2022-23 be approved prior to submission to the Scottish Government.

12. DELAYED DISCHARGE POSITION

Gayle Smart, Senior Manager, Unscheduled Care and Intensive Services, delivered a brief presentation on the delayed discharge position and focused upon:

Discharge without delay
 Acute delays
 Lost bed days – acute delays
 Care at home – unmet need
 Next steps

RESOLVED to note the presentation.

13. EAST RENFREWSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP ACCOMMODATION STRATEGY

The Board considered a report, which provided it with a revised Accommodation Strategy covering the period 2023/24 to 2027/28.

The Board recognised that there was little prospect of any significant investment particularly since the Council had not received LPD2 funding.

RESOLVED that the revised Accommodation Strategy, be noted.

14. IJB COMPLAINTS ANNUAL REPORT 2022-2023

The Board was pleased to note that there were no complaints received.

15. DATE OF NEXT MEETING

To note Wednesday 16 August 2023, at 10.00am, as the next meeting of the Integration Joint Board.

CHAIR



Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board
Held on	16 August 2023
Agenda Item	4
Title	Matters Arising
Summary	
<p>The purpose of this paper is to update IJB members on progress regarding matters arising from the discussion which took place at the meeting of 28 June 2023.</p>	
Presented by	Julie Murray, Chief Officer
Action Required	
<p>Integration Joint Board members are asked to note the contents of the report.</p>	

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

16 August 2023

Report by Chief Officer

MATTERS ARISING

PURPOSE OF REPORT

1. To provide the Integration Joint Board with an update on progress regarding matters arising from the discussion that took place at the last IJB meeting.

RECOMMENDATION

2. Integration Joint Board members are asked to note the contents of the report.

REPORT

Local Child Poverty Action Report: Year 5

3. The final [report](#) has now been published and is available online on the Council's Fairer East Ren [webpage](#).

Unaudited Annual Report and Accounts

4. Our unaudited report and accounts have been submitted to our Auditors, Ernst & Young and were made available for inspection on the website between 3 July - 21 July.

Annual Performance Report

5. The final report has been published along with a summary version and accompanying video, available [online](#).

Medication Assisted Treatment Standards Update and Alcohol and Drugs partnership Annual Reporting Survey 2022-23

6. The survey was submitted to Scottish Government on 28 June following IJB approval.

Income Generation Short Life Working Group

7. Councillor Edlin queried why there was no reference to discussion on income generation in the minute of the March meeting, however it noted that this discussion had taken place at an IJB seminar. The short life working group has been established and the first meeting took place on 21 July 2023; an update is provided in the Savings Recovery and Renewal report.

RECOMMENDATIONS

8. Integration Joint Board members are asked to note the contents of the report.

REPORT AUTHOR AND PERSON TO CONTACT

IJB Chief Officer: Julie Murray

27 June 2023

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Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board
Held on	16 August 2023
Agenda Item	5
Title	Rolling Action Log
Summary	
The attached rolling action log details all open actions, and those which have been completed since the last IJB meeting on 28 June 2023.	
Presented by	Julie Murray, Chief Officer
Action Required	
Integration Joint Board members are asked to note progress.	

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ACTION LOG: Integration Joint Board (IJB)

August 2023

Action No	Date	Item No	Item Name	Action	Responsible Officer	Status	Due / Closed	Progress Update /Outcome
412	28-Jun-23	9	Annual Performance Report 2022/23	The Board approved the report and its submission to the Scottish Government by the revised deadline of 31 July 2023.	PPPM	CLOSED	Jul-23	Final report published
411	28-Jun-23	9	Annual Performance Report 2022/23	Work with the Communications Team to consider a range of media to engage with the public, illustrate performance and publish the Performance Report on the website and throughout social media	PPPM	CLOSED	Jul-23	Summary version and accompanying video available online
410	28-Jun-23	12	Medication Assisted Treatment Standards Update and Alcohol and Drugs partnership Annual Reporting Survey 2022-23	East Renfrewshire Alcohol and Drugs Partnership Annual Reporting Survey 2022-23 to be submitted to the Scottish Government.	HAS: LD&R	CLOSED	Jun-23	Submitted to Scottish Government 28.06.2023
403	29-Mar-23	12	National Transfer Scheme for Unaccompanied Asylum-Seeking Children and the Ukrainian Resettlement Scheme	Make enquiries with the relevant consulates regarding the provision of translation services	CSWO	CLOSED	Jul-23	The consulate are unable to provide the provision of translation services as part of the conditions of refugee status is a young person does not have any contact with the authorities of their home country – not only does this mean returning to their home country but it also includes any contact with their embassy or consulate
385	23-Nov-22	11	HSCP Workforce Plan	Arrange for the completion of the actions as set out in the associated Action Plan	CO	OPEN	Sep-23	Update on actions scheduled for IJB meeting September 2023
379	21-Sep-22	6	Annual Performance Report	Consider submitting a report on the use of The Promise funding for early intervention measures	CSWO	OPEN	Sep-23	Added to forward planner - provisionally scheduled for March 2023 - deferred to September 2023
376	21-Sep-22	8	Chief Social Work Officer Annual Report	Arrange for a report on all neurodivergent activity taking place to be added to the rolling action log for presentation at a future meeting.	CSWO	OPEN	Sep-23	Added to forward planner - provisionally scheduled for March 2023 - deferred to September 2023
355	16-Mar-22	11	Age of Criminal Responsibility (Scotland) Act 2019	Make arrangements to identify a named establishment as a place of safety.	CSWO	OPEN	Mar-23	We have access to a child friendly space adapted within Pollok Police Station should we require this. A partner housing association has identified 3 properties which the HSCP visited however were not suitable and we will continue to look at any properties which become available, not only a place of safety but also for other activities. Landlord was unable to identify any property.
244	26-Jun-19	10	Financial Framework for the 5-Year Adult Mental Health Services Strategy in GGC	Submit a progress report in due course.	CFO	OPEN	TBC	Added to forward planer - Timing of progress report will be dependent on system wide programme and agreement of all six HSCPs within Greater Glasgow and Clyde

Abbreviations

CCGC Clinical and Care Governance Committee
 IJB Integration Joint Board
 PAC Performance and Audit Committee

CD Clinical Director
 CO Chief Officer
 CFO Chief Finance Officer
 CN Chief Nurse
 CSWO Chief Social Work Officer
 DSM Democratic Service Manager
 GCO Governance and Compliance Officer

HAHSCL Head of Adult Health and Social Care Localities
 HAS - C&W Head of Adult Services - Communities and Wellbeing
 HAS - LD&R Head of Adult Services - Learning Disability and Recovery
 HRBP HR Business Partner
 LP (RS) Lead Planner (Recovery Services)
 PPPM Policy, Planning & Performance Manager
 SSLO Strategic Services Lead Officer (ERC)

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Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board
Held on	16 August 2023
Agenda Item	6
Title	East Renfrewshire's Children and Young People's Services Plan 2023-2026
Summary	
<p>This report presents "<i>At Our Heart – Next Steps</i>" The East Renfrewshire Approach to Children's Services Planning for the period 2023-2026. The plan will also be submitted to Education Committee on 17 August for noting and full Council on 13 September for approval. After Council approval the plan will be submitted to the Scottish Government.</p>	
Presented by	Raymond Prior, Head of Children's Services and Justice (Chief Social Work Officer)
Action Required	
<p>The Integration Joint Board are asked to:</p> <ul style="list-style-type: none"> • Acknowledge the duties of the Children and Young People Act 2014 as they relate to Part 3 Children's Services Planning, and; • Note the content of the Children and Young People's Services Plan for 2023-2026, prior to submission to full Council for approval. 	
Directions	Implications
<input checked="" type="checkbox"/> No Directions Required <input type="checkbox"/> Directions to East Renfrewshire Council (ERC) <input type="checkbox"/> Directions to NHS Greater Glasgow and Clyde (NHSGGC) <input type="checkbox"/> Directions to both ERC and NHSGGC	<input type="checkbox"/> Finance <input type="checkbox"/> Policy <input type="checkbox"/> Workforce <input type="checkbox"/> Equalities <input type="checkbox"/> Risk <input type="checkbox"/> Legal <input type="checkbox"/> Infrastructure <input type="checkbox"/> Fairer Scotland Duty

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

16 August 2023

Report by Chief Social Work Officer

**EAST RENFREWSHIRE'S CHILDREN AND YOUNG PEOPLE'S
SERVICES PLAN 2023-2026**

PURPOSE OF REPORT

1. This report presents "*At Our Heart – Next Steps*" The East Renfrewshire approach to Children Services Planning for the period 2023-2026. The plan will also be submitted to Education Committee on 17 August for noting and full Council on 13 September for approval. After Council approval the plan will be submitted to the Scottish Government.

RECOMMENDATION

2. The Integration Joint Board are asked to:
 - acknowledge the duties of the Children and Young People Act 2014 as they relate to Part 3 Children's Services Planning, and;
 - note the content of the Children and Young People's Services Plan for 2023-2026, prior to submission to full Council for approval.

BACKGROUND

3. Part 3 of the Children and Young People (Scotland) Act 2014 places children's services planning duties on local authorities and health boards. Section 8(1) of the Act requires every local authority and its relevant health board to jointly prepare a Children's Services Plan for the area of the local authority, in respect of each three-year period. A range of other relevant local and national bodies are expected to be either consulted with, or obliged to participate, at various stages of the development of the plan. In addition the plan must be accompanied by a robust evidence-based joint strategic needs assessment of the current population of the children and young people in its area. On a yearly basis the local authority and relevant health board are required to jointly publish an annual report detailing how the provision of children's services and related services in that area have been provided in accordance with the plan. Statutory guidance to support the preparation of plans was updated and re published in January 2020 and has confirmed that completed plans should be submitted to the Scottish Government after local approval.

CONTEXT

4. Section nine of the Act sets out the strategic aims for a Children's Services Plan. Under these provisions every Children's Services Plan must be prepared with a view to securing the achievement of the following five aims:-

- (a) that "children's services" in the area are provided in the way which -
- (i) best safeguards, supports and promotes the wellbeing of children in the area concerned,
 - (ii) ensures that any action to meet needs is taken at the earliest appropriate time and that, where appropriate, action is taken to prevent needs arising,
 - (iii) is most integrated from the point of view of recipients, and
 - (iv) constitutes the best use of available resources,
- (b) that "related services" in the area are provided in the way which, so far as consistent with the objects and proper delivery of the service concerned, safeguards, supports and promotes the wellbeing of children in the area.
5. In addition key messages from Part 3 revised statutory guidance state that plans should include:
- A focus on primary prevention and early help
 - Targeting the most vulnerable children and families
 - A commitment to reducing child poverty
 - A joined up services approach
 - A commitment to engage communities
 - Further implementation of the Getting it Right for Every Child (GIRFEC REFRESH) approach
 - The Getting it Right for Every Child Wellbeing Indicators as the means to evaluate impact
 - A strategic commissioning approach to planning together
 - Constitute the best use of available resources
6. The statutory guidance states that the Children's Service Plan must align with existing plans or those in development, as well as legislation to include:
- Community Planning Partnership Local Outcome Improvement Plans
 - Local Health Board's Strategic Plan
 - Child Poverty Strategies
 - Early Years Strategy
 - Corporate Parenting Plans
 - Community Learning and Development Plans
 - Early Learning and Childcare Strategy
 - The Community Justice Act
 - Community Empowerment Act
 - Specifically Parts 1, 6, 9, 10, 11, 12, 13, and 18 of the Children & Young Peoples Act 2014

REPORT

7. *"At Our Heart – Next Steps"* The East Renfrewshire Approach to Children's Services Planning 2023-2026 is our plan for children, young people, and families for the next three years. The plan demonstrates our commitment to achieve the best possible outcomes for children and their families during these challenging and uncertain times. Building on our successes with *"At Our Heart"* 2020- 2023 this new plan sets out our vision and priorities

for children, young people, and family services over the next three years. We anticipate the next three years will be a challenging time for all public sector bodies providing services. Tighter financial settlements, ongoing recovery from the Covid-19 pandemic, and the effect of the cost of living crisis on families, will result in increased need and demand. In order to achieve the greatest impact during these difficult times it is clear that creating strong working partnerships will be more important than ever.

8. Since 2002 when we published our first integrated children's services plan we have come a long way towards achieving our shared vision to get it right for children and young people. The new vision for the 2023 - 2026 Plan was created by local children, young people, families, during engagement activities that took place. We believe the vision the children and their families have developed is an inspiring and ambitious one and clearly sets out what they believe to be important to them. This vision is:

“East Renfrewshire’s children should grow up loved, respected and be given every opportunity to fulfil their potential. We want them to be safe, equal and healthy, have someone to trust, have friends, but most of all HOPE”.

9. Over the last six months in line with statutory duties partners have conducted a wide ranging assessment of children and young people's needs stretching back over one year; the content of this work is included in this plan at the separate document Appendix 1. In addition to the needs assessment we compiled a comprehensive report to reflect children and families' feedback which had been received by agencies over the last eighteen months (Appendix 2). The analysis of this combined work has enabled local partners to agree new priorities and success criteria for the plan as outlined on Page seven, and this is what we will be judged against over the duration of the plan.

CONSULTATION AND PARTNERSHIP WORKING

10. Children's Services Planning takes place within the wider context of community planning in East Renfrewshire. As such the production of this plan has over the last twelve months involved a process of extensive collaborative working between children's services partners and related services as well as the important wider engagement that has taken place with children, young people, families/carers, and communities.
11. The Improving Outcomes for Children and Young People Partnership is the principal multi agency group that has responsibility for joint strategic planning and development of services for children, young people, and families in East Renfrewshire. The Partnership oversees the work of the four multi agency thematic planning sub groups in relation to the plan itself and its annual reports. These are – Additional Support Needs Group, Early Years Group, Corporate Parenting Group, and Young People's Group.
12. All children's services and most of the related services are represented on the strategic high level partnership along with the four thematic sub groups. This includes East Renfrewshire Council, the Health and Social Care Partnership, NHS Greater Glasgow & Clyde, Police Scotland, and a range of other agencies including East Renfrewshire Culture and Leisure Trust, the Scottish Children's Reporter Administration, Skills Development Scotland, Voluntary Action East Renfrewshire, and partners in local and national voluntary organisations.

IMPLICATIONS OF THE PROPOSALS

Finance

13. As the children's services plan is a multi-agency plan, costs associated with implementing the commitments detailed will be jointly met through individual departments and services devolved budgets.

Equalities

14. An Equalities, Fairness and Rights Impact Assessment of the new plan will be undertaken and the report will be issued once complete. The findings and recommendations will be adopted by the Improving Outcomes for Children and Young People's Partnership and delegated to the relevant thematic group and or service / agency as appropriate.

DIRECTIONS

15. There are no direction arising as a result of this report.

CONCLUSIONS

16. The purpose of "*At Our Heart – The Next Steps*" The East Renfrewshire Approach to Children's Services Planning 2023-2026 is to set out our vision for East Renfrewshire's children, young people, and their families and demonstrate our commitment to achieve the best possible outcomes for them especially in these challenging and uncertain times. The new plan is framed around our locally agreed approach which includes a new suite of key priorities and success criteria. This approach is rooted firmly in the national Getting it Right for Every Child Wellbeing Framework which continues to underpin all that we do in East Renfrewshire.

RECOMMENDATION

17. The Integration Joint Board are asked to:
 - acknowledge the duties of the Children and Young People Act 2014 as they relate to Part 3 Children's Services Planning, and;
 - note the content of the Children and Young People's Services Plan for 2023-2026, prior to submission to full Council for approval.

REPORT AUTHOR AND PERSON TO CONTACT

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Chief Officer, IJB: Julie Murray

20 July 2023

BACKGROUND PAPERS

CYP Act 2014 <http://www.legislation.gov.uk/asp/2014/8/contents>

Part 3 Statutory Guidance [Children and Young People \(Scotland\) Act 2014: Statutory Guidance on Part 3: Children's Services Planning – Second Edition 2020 \(www.gov.scot\)](http://www.gov.scot)

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“At Our Heart – The Next Steps”

The East Renfrewshire Approach to Children’s Services Planning

East Renfrewshire’s Children and Young People’s Services Plan

2023-2026

Executive Summary

Welcome to ***“At Our Heart – The Next Steps”*** The East Renfrewshire Approach to Children’s Services Planning for 2023-2026.

Building on our successes with *“At Our Heart”* 2020- 2023 this new plan sets out our vision and priorities for children, young people, and family services over the next 3 years. We anticipate the next three years will be a challenging time for all public sector bodies providing services. Tighter financial settlements, ongoing recovery from the Covid-19 pandemic, and the effect of the cost of living crisis on families, will result in increased need and demand. In order to achieve the greatest impact during these difficult times it is clear that creating strong working partnerships will be more important than ever.

All partners in East Renfrewshire are signed up to work together to achieve the vision and objectives detailed in the plan and it is their ongoing participation and support that will help turn the commitments of the plan into a reality for children, young people, their families and carers. Drawing on what children, families, staff, and partner agencies have told us our new plan commits us to continuously improve how we design and deliver our universal, preventative, and targeted services to ensure children get the help they need when they need it. Furthermore this will enable us to ensure that we provide services that are responsive, achieve better outcomes, and create opportunities for children, young people and their families.

As always the production of our plan has involved a process of extensive collaborative working between partners within East Renfrewshire Council, the Health and Social Care Partnership, NHS Greater Glasgow & Clyde, together with a range of other agencies including the Scottish Children’s Reporter Administration, Skills Development Scotland, and partners in local and national third sector organisations. As the plan is an overarching document linking across a wide range of children’s services the strategic Improving Outcomes for Children and Young People’s Partnership will oversee its delivery and will publish progress annually in accordance with statutory duties.

On behalf of the Improving Outcomes for Children and Young People Partnership I would like to thank all partners and stakeholders along with children, young people, and families, for their contribution to the completion of the new East Renfrewshire Children and Young People’s Services Plan for 2023-2026 and their ongoing participation in the implementation and delivery over the years ahead.

Council Leader O’Donnell

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Introduction

“At Our Heart - The Next Steps” The East Renfrewshire Approach to Children’s Services Planning for 2023-2026 is the seventh integrated children’s services plan for children, young people, and families in East Renfrewshire. This plan encompasses the vision that children and families helped us create and represents the Improving Outcomes for Children and Young People long established commitment to achieve better integrated service planning and delivery.

Although our last plan - covering the period 2020-2023 - was published during the height of the Covid-19 pandemic, against the odds we made remarkable progress with implementation across the key priorities that we had identified. This is particularly true of how we responded to the publication of The Promise and also the emerging mental wellbeing needs of the local children and young people population. Emergency legislation passed by the Scottish Parliament during 2020 to temporarily suspend many statutory duties resulted in the publication of children and young people service plans covering shorter timescales than would ordinarily have been the case, leading to less time to achieve key agreed commitments. In addition to delivering our children’s plan our main priority during this extraordinarily difficult time was to respond quickly and divert our resources to identifying and protecting our most vulnerable families especially during the national and local lockdowns, and adapt practice due to the ongoing social distancing restrictions that posed a challenge to providing the type of services children and families needed.

In summer 2022 our considerable efforts to design and deliver the highest quality care and support was acknowledged when we were inspected by a team led by the Care Inspectorate. They observed the following strengths as a consequence of the East Renfrewshire partnership approach:

- Children and young people at risk of harm were benefiting from high-quality assessments, plans and support from a wide range of services.
- Children and young people were listened to and respected.
- The safety and wellbeing of children and young people who were at risk of harm was improving as a result of the caring relationships they had with key members of staff.
- Children and young people at risk of harm and their families were actively participating and influencing service planning, delivery and improvement.
- The partnership was successfully using data and quality assurance information to inform and support decision making, service planning and delivery.

In their assessment, the inspection team found the work of our Improving Outcomes for Children and Young People Partnership to be excellent which means that East Renfrewshire is the first in the country to receive an evaluation of Excellent for this quality indicator. The full report can be accessed on the Care Inspectorate website at [East Renfrewshire joint insp children and young people.pdf \(careinspectorate.com\)](https://www.careinspectorate.com/east-renfrewshire-joint-insp-children-and-young-people.pdf).

Nevertheless we believe that there is much more to be done and as part of the development of **“At Our Heart – The Next Steps” 2023-2026**, the local partnership has undertaken a comprehensive evaluation of our achievements to date along with an analysis of current need and demand. With an outstanding education system, a fully integrated Health and Social Care Partnership, sector leading council services, innovative third sector partners, and recognition by the Care Inspectorate of excellence, we are confident of achieving our ambitious vision that our children and young people have set for us.

“At Our Heart – Next Steps” The East Renfrewshire Approach to Children’s Services Planning 2023-2026

Our Vision, Outcomes and Priorities

The Improving Outcomes for Children and Young People Partnership has agreed **“At Our Heart – Next Steps” The East Renfrewshire Approach to Children’s Services Planning 2023-2026** as set out in the illustration below on page 7. We are immensely proud of our vision which has been adopted from work undertaken with children, young people, and families, and we want to ensure it drives delivery of the new plan over the next three years. As is clear the **Getting it right for every child wellbeing framework** continues to underpin all that we do in East Renfrewshire strategically and operationally, and along with our revised **priorities** and **success criteria measures** will help us judge how well we are doing across the partnership and the impact we are having on the lives of children and young people, and their families.

Over the last six months in line with statutory duties we have conducted a wide ranging assessment of children and young people’s needs stretching back over one year; the content of this work is included in this plan at the separate Appendix 1. In addition to the needs assessment we compiled a comprehensive report to reflect children and families’ feedback which had been received by local agencies over the last eighteen months (Appendix 2). The assessment profile and the service user feedback report was then analysed and discussed by partners during a series of workshops to support the development of the new plan. From this exercise the partnership concluded that our priorities for the following period would focus on prevention and early help, transitions and complex needs, mental wellbeing, our care experienced population, and holistic family support. This is now represented in our approach model on page 7.

Community Planning in East Renfrewshire

Progress on achieving our approach will also contribute towards the delivery of key outcomes in the East Renfrewshire Community Plan and the Scottish Government’s National Performance Framework. The Community Plan was agreed in 2018 and sets out the Community Planning Partnership (CPP) vision for East Renfrewshire for the next ten years. The plan is structured around five outcomes, two of which are closely aligned to the children’s plan. These are: **Early Years and Vulnerable Young People**, and **Learning, life and work**. The Community Plan also includes **“Fairer East Ren”** the Local Outcomes Improvement Plan, which sets out the priorities across the CPP to make the area fairer and with fewer inequalities. A key objective of the plan is to **Reduce the impact of Child Poverty** along with other commitments that are expected to positively affect children and families. Additionally in line with the Christie Commission, East Renfrewshire has taken a **place based approach** to tackle inequalities specific to some geographical communities, and where poorer outcomes are more prevalent. The **locality plans** co-produced with local residents in these areas broadly echo the new children’s plan approach and commitments.

National Performance Framework

Scotland's National Performance Framework (NPF) provides a clear vision of the national outcomes we all work towards to improve Scotland's individual and collective wellbeing. To help achieve its purpose, the framework sets out National Outcomes with the key one for children being: ***We grow up loved, safe, and respected so that we can realise our full potential.*** This national outcome has also informed our local children's plan vision and the wider content of the new plan. Similarly the Scottish Government's Children and Young People's Outcomes Framework, developed to assist with strategic multi agency planning, has supported our decision making in this area.

Our Approach³⁷
East Renfrewshire's Children and Young People's Plan
2023-26

Our Vision
 We want East Renfrewshire's children to grow up loved, respected and given every opportunity to fulfil their potential.
 We want them to be safe, equal and healthy, have someone to trust, have friends, but most of all **HOPE**

- 7 Outcomes**
1. Safe
 2. Healthy
 3. Active
 4. Nurtured
 5. Achieving
 6. Respected/Responsible
 7. Included



How we will measure our success

1. Parents/carers accessing holistic family support indicate improvement in wellbeing (increase)
2. % of 0-2 year olds registered with a dentist (increase)
3. % of children reaching all of the expected developmental milestones by 27-30 month child health review (increase)
4. % of children reaching developmental milestones start P1 (increase)
5. Percentage of primary 1 children at risk of overweight and obesity (decrease)
6. Diversionary activity reduces risk and promotes inclusion
7. % of young carers reporting satisfaction with support services
8. Number of unallocated children with 2 or more IRD's in the last 2 years (decrease)
9. Parent satisfaction level on supports for children with complex additional support needs
10. All young people in transition will have a plan in place by age 14 years
11. Percentage of Looked After Children with more than one placement within the last year (decrease)
12. Attendance rate for Looked After Pupils (Primary & Secondary) (increase)
13. Number of Looked After Young People gaining achievement awards (increase)
14. Average number of insight tariff points for care experienced school leavers
15. Percentage reduction in the number of repeat presentations to GPs for young people referred to the Family Wellbeing Service 6 months post closure (in relation to emotional wellbeing) (decrease)
16. Children accessing Healthier Minds Service report improvements in their mental wellbeing
17. Percentage of children and young people (P5-S6) who agree or strongly agree that their school offers them the opportunity to take part in activities in school beyond the classroom and timetabled day (increase)
18. Percentage of children and young people (P5-S6) who answer that their (physical) health is good or excellent (increase)
19. Learn Well measure
20. Proportion of pupils entering positive destinations (increase)
21. Workforce learning and development opportunities increase knowledge, skills and confidence

Our Priorities

1. Help families and carers give their children the best start in life in a nurturing, safe and stable home environment
2. Protect our most vulnerable children, young people, and families
3. Ensure children and young people with complex needs are supported to overcome barriers to inclusion at home, school, and communities
4. Deliver on our Corporate Parenting responsibilities to our care experienced children and young people by fully implementing The Promise.
5. Respond to the mental and emotional wellbeing, and physical health needs of children and young people
6. Upskilling our children's services workforce
7. Reducing the impact of poverty on children and families

Relational based practice

Listen to children, promote their participation, and uphold rights

A focus on the strengths and assets of families

A trauma informed workforce

Our Vision is underpinned by

Local Context to the Approach

Holistic Whole Family Support

We know that the last 3 years have been challenging for families in a range of different ways. The lockdown periods, school closures, access to services, changes in the way people work and cost of living have all had a significant impact on children and families. Our new plan for 2023-2026 takes account of the lasting impact of these challenges but acknowledges the important role that local services can play in promoting family wellbeing and supporting families to lead safe, happy and healthy lives.

In East Renfrewshire we know that families are generally the best source of care and nurture for their children but from time to time many parents and carers across the authority might need some help. When this happens we want them to be able to access the help they need, where and when they need it, for as long as it is needed, in order to protect and promote their children's wellbeing. Ultimately we want to prevent crisis and keep families together where it is in the best interests of the child. In fact services for families in East Renfrewshire are primarily based on prevention and early help. This includes the universal services of health visiting, early year's settings, and schools. There is also a range of more targeted or specialist support available for those who need it, from health, social work, education and local third sector providers. Our support for families is integrated within our services through the ***Getting it right for every child*** and ***Signs of Safety*** approaches. This means that we focus on strengths and work in partnership with parents and children as we help them to identify and achieve their goals.

The Promise clearly identified the need to significantly upscale family support services and identified whole family support as a priority in the Promise Plan 21-24. Going forward we will be using the ***Supporting Families: A National Self-Assessment Toolkit For Change*** to evaluate our current supports for families to ensure they meet emerging local needs and address any that come to the fore over the next three years. Scottish Government assistance through the ***Whole Family Wellbeing Fund for Holistic Family Support and Families in Recovery*** will provide additional resource to support families with more complex needs as well as those who require early help at preventative stages.

Keeping The Promise and delivering on our Corporate Parenting responsibilities

On 5th February 2020 a promise was made to the infants, children, young people, adults and families who have experience of the care system in Scotland. The Promise and its commitments were clear that by 2030 the following would be delivered:

- ✓ Love will no longer be the casualty of the 'care system,' but the value around which it operates
- ✓ Wherever safe to do so, Scotland will make sure children stay with their families and families will be actively supported to stay together
- ✓ Children, young people, and their families will be listened to, respected, involved and heard in every decision that affects them.

The Scottish Government and the national Promise Team reinforced that this work is “**immediate and urgent work - what can change now must change now**” and that implementation of The Promise must not be delayed. In East Renfrewshire we have made the same commitment to our current looked after children and young people, those who we previously looked after, and for those who will experience care in the future. Even during the Covid-19 pandemic we sought opportunities to drive forward The Promise believing that during this extraordinarily challenging time children and young people in our care needed to be loved, safe, and listened to more than ever.

Over this time local partner agencies have demonstrated a commitment to improving the life chances of our looked after and care experienced children and young people but are aware we have more work to do to enable us to achieve our goal of being the best possible parent we can be in line with The Promise. We all understand that when a child or young person becomes looked after – at home or away from home - the local authority, health board, and a number of other public bodies take on the role of Corporate Parent. Corporate Parenting is the collective responsibility of the council, elected members, employees, and the other key partner agencies, to provide the best possible care and protection for our looked after children. This also means that each specified public body has the statutory responsibility to act for a looked after child in the same way that every parent wants to act. In East Renfrewshire this has meant we want the best for our children, to see them flourish with good health, to be safe and happy, to do well in education and enjoy healthy relationships. Similarly we want them to make the most of the available cultural and leisure opportunities, and to develop towards adulthood fully prepared to lead independent lives. Importantly, we want young people to progress into a positive post school destination, whether this be further or higher education, or employment, and to be financially secure.

We are now over three years into the Promise’s ten year plan with the current plan focusing on the period from 2021 until 2024 which is broadly running parallel with our previous and our new Children’s and Young People’s Services Plans. Our priorities over the next three years are to ensure we deliver on a **Good Childhood** and **Holistic Whole Family Support**. Culture, systems, and practice change will be needed for us to be successful in these areas but with children and families at the centre of service redesign programmes we are confident that we can achieve the high expectations we have set ourselves. This will include working closely with our local Champions Board and our Mini Champs to ensure that their unique experiences shape future provision. Later this year, The Promise Scotland team will embark on the work to develop Plan 25-27 to cover the second three-year phase before Plan 28-30 is laid out to finalise Scotland’s commitment. By which time, the Promise in East Renfrewshire will have been kept.

Mental Health and Wellbeing

For the most part, children and young people will experience good mental health along with the normal challenges and stresses of growing up. They will benefit from positive and helpful support for their wellbeing from their family at home, in early years settings and at school, and they will not require any extra help over and above that from the people they see on a daily basis. There will of course be a proportion of children and young people who will need extra help at some point, some of whom may even require additional or specialist services intervention. This may be because of factors relating to their development or health profile or because of the impact of adverse experiences on them, their family or community.

However the impact of the Covid-19 pandemic has exacerbated the circumstances of many children, young people and families, and we have seen a significant rise in the number of those experiencing challenges with their mental and emotional wellbeing.

Referrals to child and adolescent mental health services have increased by 50% and within this increase analysis highlighted an even higher increase in atypical eating disorders and complex neurodevelopmental conditions.

In response CAMHS staff have strengthened their links with local community services to provide an alternative and a speedier response to support families and reduce the need for specialised input. It is envisaged that the implementation of the single neurodevelopmental pathway within the current mental health structure, in line with national recommendations, will provide timely consistent support to children and young people with neurodevelopmental presentations.

The multi-agency Healthier Minds Service established in 2020, provides mental and emotional wellbeing support for children, young people and their families. The support is identified and aligned through the multi-agency screening hub, which meets weekly and is attended by regular representatives from Educational Psychology, CAMHS, Social Work, RAMH Youth Counselling service, Children 1st and Community Learning & Development. This service works alongside the existing Family Wellbeing Service which links to GP practices.

Improving the mental and emotional wellbeing of children and young people will continue to be one of the highest priorities for East Renfrewshire Council, Education Services and our Health and Social Care Partnership (HSCP) as we go forward, over the next three years. Together all partners in East Renfrewshire will continue to develop the integrated approach to mental and emotional wellbeing support for children, young people and families that will ensure they receive the right care and interventions at the right time and in the right place. More information on our local services can be found on the Healthier Minds Website for children, young people, families and practitioners. The site outlines ways to support mental and emotional wellbeing in a holistic way, providing information and resources that can help at different stages of children and young people's development. <https://blogs.glowscotland.org.uk/er/healthierminds/>

Complex and additional needs

East Renfrewshire children's planning partnership continues to prioritise the wellbeing of children and young people with complex additional support needs. Although in East Renfrewshire just over a quarter of school pupils are recorded as having an additional support need, which is lower than the national average of around a third, a smaller proportion require multi agency care and support during their childhood. The range of needs that children can present with however is increasingly diverse and complex in nature and as a result of this all services have required to adapt and become more creative in how they support families and carers.

As a direct consequence of the pandemic and the social isolation experienced by families caring for children with additional needs, we have seen an increased demand for services across the area and a higher degree of children and young people requiring multi agency assessment

and support. Education, health, social work, and other services are experiencing increased demand for assessments and care planning for children and young people with conditions including neurodiversity/autism, sensory impairments - visual and hearing, physical disability, learning disability, and significant social, emotional and behavioural difficulties.

Children's services are also strengthening links with local adult services providers to build capacity in this area and improve the post school transition planning arrangements for young people as they move on into young adulthood. It is anticipated that this will be an area requiring more focus as the population of young people with additional support needs grow in their development from childhood through adolescence, and into being adults. Developments in relation to the Promise and holistic family support will improve how children and families access information and local resources that help to reduce barriers to inclusion at home, school and in the community.

Keeping children and young people safe - Our commitment to working with children, young people, their families and carers

When a child or young person has been harmed or is at risk of harm, it can be a very difficult time for them and their family/carers. Keeping children at the centre of everything we do is very important to us. The East Renfrewshire Child Protection Committee Improvement Plan 2023-2026 will focus on how we can continue to work with children, young people and their families as well as our partners to ensure that children are kept safe in their families and communities. We recognise adjusting to life after Covid-19 and the lockdown restrictions continues to have an impact on our children, young people and their families. We will continue to work with them and our partners to ensure that they receive the right support at the right time to minimise any risks as they continue to adjust to life following the pandemic.

We will continue to ensure that children, young people and their families are involved in every step of the process and, where we need to do an assessment of their needs and circumstances, that they are part of this. We also want children, young people and their families to be part of meetings so that they can contribute to their plans for keeping them safe. Our ongoing implementation of the Signs of Safety approach allows us to do this in a meaningful way.

Furthermore we also want children, young people and their families to tell us what is working well and what we can do to improve our services. The inspection of joint services for children who are at risk of harm indicated that we do all this very well and we received a grading of excellent. We will continue to build on this good practice. The new National Child Protection Guidance for Scotland was published in 2021 and we are working hard to adapt our local guidance and processes to reflect this national guidance.

Child Poverty and the Cost of Living

The ongoing and cumulative impacts of COVID-19 and the Cost-of-Living Crisis has seen families in East Renfrewshire, like others across Scotland, facing more financial pressures than ever before. Those previously experiencing poverty have seen this worsened and many who were previously 'just about managing' are now finding themselves in poverty. We are fortunate in East Renfrewshire to have one of the lowest levels of child poverty in Scotland - 10.9% compared to 20.8% nationally. Average wages are high for those living in the area, unemployment rates are low and our residents are traditionally less likely to receive social security benefits. However, more recently, we have seen uptake rates for benefits, Scottish Welfare Fund and Money Advice Support. East Renfrewshire's Money Advice and Rights team and our local Citizens Advice Bureau have seen a 33% increase in the number of referrals received. This suggests an increase in the number of families experiencing financial vulnerability.

We have also noted a change in the demographics of the people accessing advice services. There has been a rise in the number of in-work families seeking assistance. There has also been a change to individuals' debt profiles, with personal debt for consumer goods decreasing, while debt for basic household expenditure is increasing. The demand for financial support is still primarily from the most deprived areas, however, there has been a significant increase from the more affluent areas who have not traditionally accessed advice services.

The challenges faced by families who do experience poverty are the same regardless of demographic or location. So, we continue to focus on tackling the drivers of poverty whilst also mitigating the impacts of those who are in poverty.

We recognise the impact of poverty on the health and wellbeing of children and young people and that the damaging effects can have a long-term impact into adulthood. We want all children in East Renfrewshire to experience a stable and secure childhood and succeed. We will continue to tackle child poverty to create a fairer future with all and make people's lives better. East Renfrewshire's Community Planning Partnership is committed to reducing child poverty. Tackling child poverty is at the core of Fairer East Ren's focus to minimise inequalities of outcomes across East Renfrewshire and is in line with the Scottish Government's Fairer Scotland Action Plan taking into account the new duties required under the Child Poverty (Scotland) Act.

Our Local Child Poverty Action Report details our local actions focussing on maximising incomes, reducing costs and improving the wellbeing of families facing poverty. Our Children and Young People's Services Plan 2023-2026 will compliment this work.

Children and Young People's Rights

The UN Convention on the Rights of the Child (UNCRC) is a core international human rights instrument which was adopted by the UN General Assembly in 1989 and ratified by the UK Government in 1991. The UNCRC sets out the human rights of every person under the age of 18 and has 54 articles that cover all aspects of a child's life and set out the civil, political, economic, social and cultural rights that all children everywhere are entitled to. It makes clear how adults and governments must work together to make sure all children can enjoy all their rights.

The Children and Young People (Scotland) Act 2014 further strengthens children's rights and places duties on local authorities, health boards and partner agencies to plan, develop and deliver services in this policy and legal context.

Our new Children's Services Plan 2023-26 has been developed using a rights based approach and directly links to our commitment to promoting and protecting children and young people's rights. In preparation for incorporation of the UNCRC into Scots Law, East Renfrewshire Council, the HSCP along with the wider partnership, established a UNCRC Implementation Group to ensure that all agencies and their staff are supported to consider the implications for how we deliver council services. This group are progressing three main themes linked to participation of children and young people, promotion of rights across all services and publicising children's rights to children and families.

Underpinning this work is a commitment to improving outcomes for all of our children and young people. We respect each child's right to family life and to grow up loved, safe and respected so that they can reach their potential. However we understand our additional responsibility to protect the rights of particular groups of children and young people who experience barriers to success and achievement or whose rights are threatened by abuse or poverty. For those children who need additional support, we work with them to assess their circumstances and make decisions with them and their families too. We seek children's views on a wide range of issues using appropriate and inclusive tools and we routinely consult with them when new policies and services are being developed and reviewed.

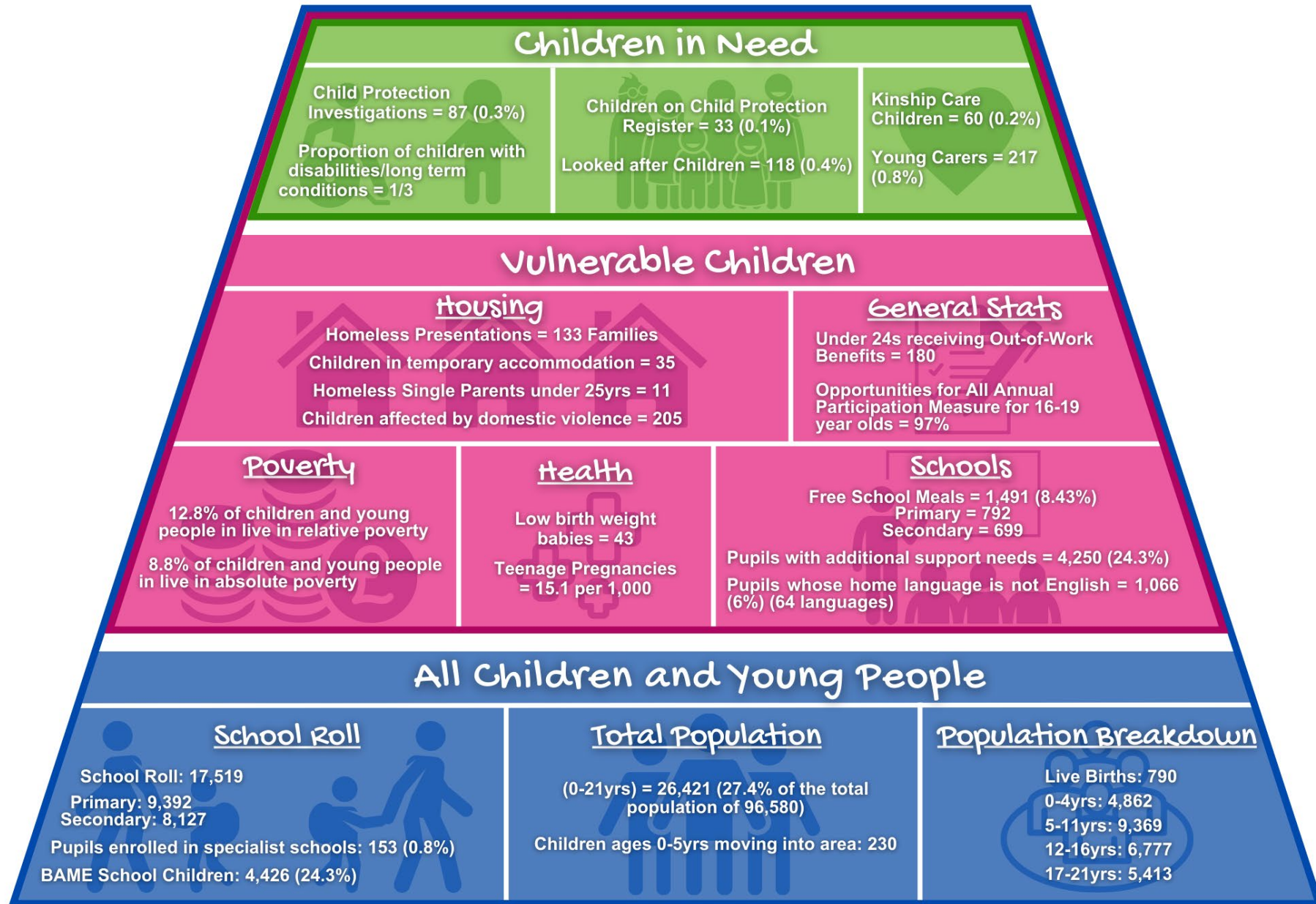
In line with statutory duties a joint report which sets out the progress we have made and the achievements we can build upon over the next three years will be published separate to the Children and Young People's Services Plan 2023-2027.

Creating a Trauma Informed Workforce

Within East Renfrewshire we continue to recognise the impact that adverse and distressing experiences can have on individuals and the importance of services responding in ways that help promote recovery and prevent further re-traumatisation. We continue on our journey of change to develop services that understand these challenges and a workforce that responds in a sensitive and responsive way. The local partnership to drive the implementation of our "Trauma Informed Services" strategy is well established and our partners in transformational change are leading experts in the field. Having recently developed our pool of accredited trainers in line with the National Trauma Training programme, we will now build on the rollout of the programme across the wider workforce. In addition, we will introduce learning opportunities in order to ensure all our staff become aware of the extent of trauma in our communities and respond in ways that are supportive and promote recovery and wellbeing.

The meaningful involvement of people with lived experience of trauma is an essential part of this development and their contribution will be critical to its success. They will work in partnership with our new Trauma Implementation Co-ordinator to raise awareness of the strategy across East Renfrewshire and help us to identify specific services and environments where need for change is greatest. This will help target our efforts to ensure the greatest effect on the systems, cultures and organisations for those who use our services. We will aim to measure the impact of our work against the new national Quality Improvement Framework.

East Renfrewshire's Children's Population at a Glance 2021-22/2022-23



Children's Services Plan – Priorities, Contributions, and Measures

Priority 1: We will help families and carers give their children the best start in life in a nurturing, safe and stable home environment

Our contribution to making this happen:

1. Holistic whole family support will be available across the area to families needing to access it.
2. The national Getting it right for every child programme refresh will be rolled out across the local children's services partnership
3. The Universal Health Visiting Pathway now implemented will be evaluated and impact on families analysed

How we will measure our progress:

- Parents/carers accessing holistic family support indicate improvement in wellbeing (increase)
- % of 0-2 year olds registered with a dentist (increase)
- % of children reaching all of the expected developmental milestones by 27-30 month child health review (increase)
- Children reach developmental milestones start P1 (increase)
- Percentage of primary 1 children at risk of overweight and obesity (decrease)

Priority 2: We will protect our most vulnerable children, young people and families

Our contribution to making this happen:

1. The Signs of Safety approach to keeping children safe will be rolled out across the local children's services partnership
2. Local partners will collaborate with young people to design and deliver diversionary programmes and opportunities that promote inclusion, responsibility, and improve wellbeing.

3. Housing and accommodation support services for young people will be evaluated in partnership with young people using a co-production approach to redesign and commissioning
4. Recovery and mental health services for 16-26 year olds will be evaluated to determine options for the best model of delivery for this age group in transition to adulthood
5. Prepare for the passing of the Children's Care and Justice (Scotland) Bill and new statutory duties that local authorities will be required to adhere to.

How we will measure our progress:

- Diversionary activity reduces risk and promotes inclusion
- % of young carers reporting satisfaction with support services
- Number of unallocated children with 2 or more IRD's in the last 2 years

Priority 3: We will ensure children and young people with complex needs are supported to overcome barriers to inclusion at home, school, and communities

Our contribution to making this happen:

1. Develop opportunities for children and young people with additional support needs to be included in a wide range of community activities and experiences including mainstream and inclusive provision
2. Improve access to inclusive opportunities information to ensure children and their families are aware of what services, programs, and activities are available to them locally
3. Arrangements for young people with complex needs to achieve and sustain a positive transition into young adulthood will be strengthened to ensure the experience is improved and the outcome in line with young people and families expectations
4. Support the local implementation of the NHSGGC Specialist Children's Services Neurodevelopmental Service Specification

How we will measure our progress:

- Parent satisfaction level on supports for children with complex additional support needs

- All young people in transition will have a plan in place by age 14 years

Priority 4: We will deliver on our Corporate Parenting responsibilities to our looked after and care experienced children and young people by fully implementing The Promise

Our contribution to making this happen:

1. Create settled, secure, nurturing and permanent places to live within a family setting for all care experienced children and young people in line with expectations from The Promise Good Childhood
2. Corporate Parents will provide welcoming, inclusive, supportive opportunities for children and young people and encourage them to express their views
3. Support young people to remain in a positive care placement until they are ready to move on and/or good quality accommodation with options to support their needs
4. Care experienced children and young people living outwith the local authority area will be supported with improving their learning experiences and accessing community opportunities
5. Unaccompanied asylum seeking children and young people will be supported by all Corporate Parents to integrate into local communities and access the care and support they need
6. In partnership with children, young people and families develop a Promise Board to promote participation and decision making with service users
7. Track the achievement and attainment of care experienced children and young people to ensure they are making the appropriate progress with their learning and school experience and taking up wider opportunities available to them

How we will measure our progress:

- Percentage of Looked After Children with more than one placement within the last year (decrease)
- Attendance rate for Looked After Pupils (Primary & Secondary) (increase)
- Number of Looked After Young People gaining achievement awards (increase)
- Average number of insight tariff points for care experienced school leavers

Priority 5: We will respond to the mental and emotional wellbeing, and physical health needs of children and young people

Our contribution to making this happen:

1. Improve access to and awareness of the range of mental health supports available in school and the community, to increase uptake and improve wellbeing
2. Promote the Healthier Minds Resource website for children, families and partner agencies to increase knowledge and skills, and enhance support strategies
3. Create learning opportunities and activities that provide accurate information to support young people to make safer and informed lifestyle choices
4. Respond to the needs of pupils with very low school attendance by creating the new Learn Well nurturing learning resource that will cater for their emotional wellbeing needs and ensure education experience is maintained
5. Nurture the interest and talents of children and young people in sports, arts, and leisure to assist improve emotional wellbeing

How we will measure our progress:

- Percentage reduction in the number of repeat presentations to GPs for young people referred to the Family Wellbeing Service 6 months post closure (in relation to emotional wellbeing) (decrease)
- Children accessing Healthier Minds Service report improvements in their mental wellbeing
- Percentage of children and young people (P5-S6) who agree or strongly agree that their school offers them the opportunity to take part in activities in school beyond the classroom and timetabled day (increase)
- Percentage of children and young people (P5-S6) who answer that their (physical) health is good or excellent (increase)
- Learn Well measure TO BE AGREED
- Proportion of pupils entering positive destinations (increase)

Priority 6: We will upskill our children's workforce

Our contribution to making this happen:

1. Roll out the National and Local Trauma Training Programme
2. Develop a skilled workforce who promote mental wellbeing, support healthy relationships, tolerance, equity and inclusion
3. Create new multi-agency workforce training on supporting children and young people with communication and learning difficulties.
4. Enable the workforce to undertake equality impact assessment activity to ensure services are designed and delivered to promote equality and enhance rights in line with legislation and local and national policies

How we will measure our progress:

- Workforce learning and development opportunities increase knowledge, skills and confidence

Priority 7: We will reduce the impact of poverty on children and families

Our contribution to making this happen

1. Children's planning partnership will contribute towards the implementation and delivery of the Fairer ER and Child Poverty Report

What we spend on children and families services in East Renfrewshire

A breakdown of expenditure in relation to children and young people's services is below. It should be noted that whilst Education, HSCP, and SDS, can better demonstrate how much they spend, other services are less able to provide this information comprehensively as their core business is not exclusively targeted children and young people. In view of this they proportioned their budgets in an attempt to illustrate how much of their overall budget is dedicated to services for children and young people.

Expenditure on Children's Services 2023/2024	
East Renfrewshire Council	£s
Education (Core – Recurring)	172,404,000
Education - Covid funding (from reserves – non recurring)	544,200
Community Learning and Development	624,800
Housing	700,000
Environment - Family Firm/Youth Employability Programme/ Parental Employment Support	769,000
East Renfrewshire HSCP	£s
Children and Families (Core – Recurring)	10,459,600
Children and Families – COVID funding (from reserves –non recurring)	311,700
Health Visiting and School Nursing	2,155,700
NHSGGC	£s
Specialist Children's Services	990,100
Speech and Language Services	261,000
Community Planning Partners and Partner Agencies	£s
Culture and Leisure Trust	3,362,100
Skills Development Scotland	1,704,000
Total	£194,286,200

Note: All budgets can change throughout the year as additional funding is confirmed. Also COVID related funding from reserves is unlikely to continue after the 2023-24 financial year.

Evaluating Impact – How we measure and report on success

Evaluating the impact of the plan is a key responsibility of all children's planning partners. To support this task each year through the work of the Improving Outcomes for Children and Young People Partnership (IOCYPP) we will in line with our statutory duty publish an annual performance report to demonstrate progress towards us achieving the actions, outcomes, and targets set out on our plan on a page at page 7. All four of the children's planning groups will work to a delivery plan with clear actions and the co chairs of each group will report to the Improving Outcomes for Children and Young People Partnership on what is being achieved and also any challenges that are being experienced. The latter will scrutinise performance reports and provide support to the children's planning groups to find solutions to any challenges they encounter.

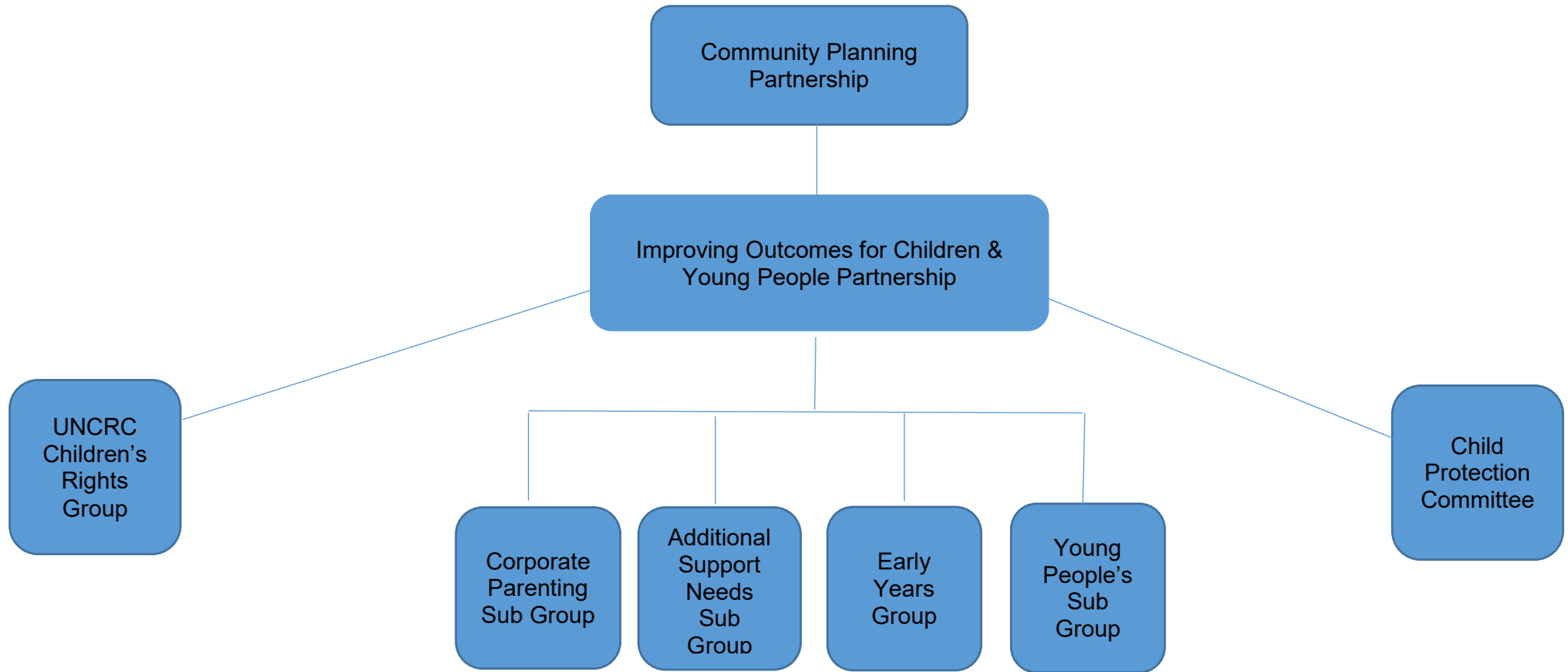
Furthermore a suite of critical indicators has been agreed by the partnership to help us report on how well we are achieving our aims. These indicators reflect local priorities as well as those from the Scottish Government's National Performance Framework. Although we are confident this set of measures will allow us to determine improvement and identify areas of strength we will regularly be engaging with children, families and communities to hear what they think about our progress as ultimately they are the most important source of information on how well we are doing to deliver on the vision they set for us; their experiences and views will be the final arbiter of whether we have got it right or not. Going forward we will be working even harder to ensure our services operate in a way that openly invites feedback and co design, and encourages frequent communication and dialogue with those who are using our services. This is especially important for children and families who are disadvantaged, or experiencing a range of more complex difficulties.

Appendix 1 – Profile of Children and Young People’s Needs in East Renfrewshire (separate document)

Appendix 2 - What children, young people and families have told us (separate document)

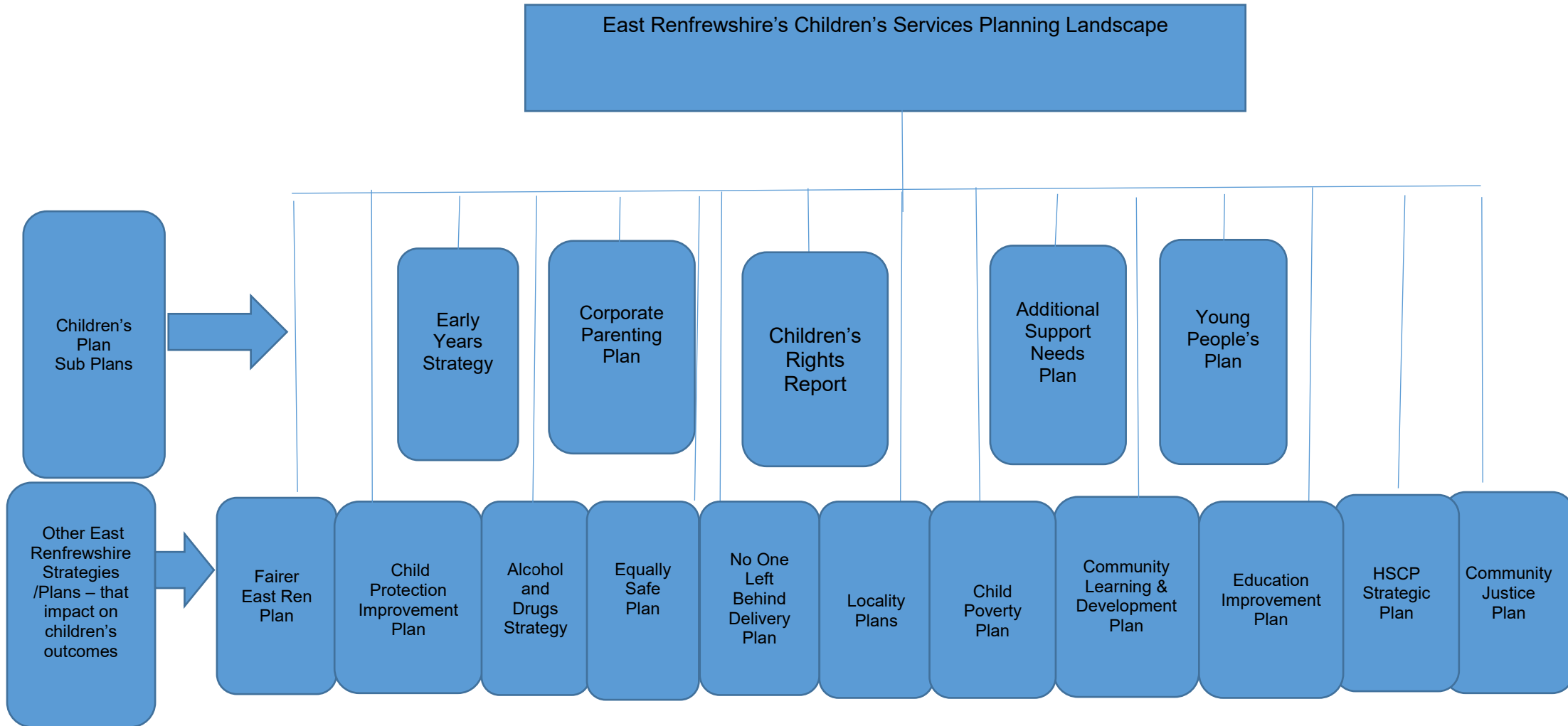
Appendix 3

Working in Partnership – East Renfrewshire’s Improving Outcomes for Children and Young People Partnership



Appendix 4

East Renfrewshire's Children's Services Planning Landscape



Membership of the Improving Outcomes for Children and Young People Partnership

<u>Name</u>	<u>Job Title</u>	<u>Organisation</u>	<u>Email Address</u>
Raymond Prior	Head of Children's Services and Justice, Chief Social Work Officer (Co Chair)	ER HSCP	Raymond.prior@eastrenfrewshire.gov.uk
Siobhan McColgan	Head of Education Services (Equality and Equity) (Co Chair)	ER Education	Siobhan.mccolgan@eastrenfrewshire.gov.uk
Rosamund Rodriguez	Quality Improvement Officer	ERC Education	Rosamund.rodriquez@eastrenfrewshire.gov.uk
Jen McKean	Senior Manager Operations and Community Children's Service	ER HSCP	Jennifer.mckean@eastrenfrewshire.gov.uk
Ruth Gallagher / Alan Campbell	Chief Officer	Voluntary Action East Renfrewshire SCIO	ruth.gallagher@va-er.org.uk
Brian Dunigan	Money Advice & Rights Team Manager	ERC Business Operations and Partnerships	Brian.Dunigan@eastrenfrewshire.gov.uk
Julie Paterson	Locality Reporter Manager North Strathclyde Locality	SCRA	Julie.Paterson@scra.gsi.gov.uk
Nick Smiley	Principal Educational Psychologist	ERC Education	Nick.Smiley@eastrenfrewshire.gov.uk
Julie Breslin	Strategy & Partnership Manager Business Operations and Partnerships	ERC Business Operations and Partnerships	Julie.breslin@eastrenfrewshire.gov.uk
Graeme Gallie	Area Commander	Police Scotland	Graeme.Gallie@scotland.police.uk

Kirsty Gilbert	Service Manager	ER HSCP	Kirsty.Gilbert@eastrenfrewshire.gov.uk
Clare Creighton	Quality Improvement Manager	ERC Education	Clare.creighton@eastrenfrewshire.gov.uk
Julie Fitzpatrick	Chief Nurse	ER HSCP	julie.fitzpatrick@ggc.scot.nhs.uk
Claire Coburn	Strategic Services Senior Lead	ERC Business Operations and Partnerships	Claire.Coburn@eastrenfrewshire.gov.uk
Susan Craynor	CLD Manager, Community Learning and Development	ERC Business Operations and Partnerships	Susan.Craynor@eastrenfrewshire.gov.uk
Suzanne Conlin/Bex Astin	Senior Housing Manager	ERC Environment	Suzanne.conlin@eastrenfrewshire.gov.uk
Michael McKernan	Economic Development Manager	ERC Employability	
Dougie Fraser	CAMHS	ER HSCP	Dougie.Fraser@ggc.scot.nhs.uk
Elaine Byrne	Senior Nurse	ER HSCP	elaine.byrne2@ggc.scot.nhs.uk
Fiona McBride	Assistant Director	Children 1 st	Fiona.McBride@children1st.org.uk
Arlene Cassidy	Children's Services Strategy Manager	ER HSCP	Arlene.Cassidy@eastrenfrewshire.gov.uk
Debbie Lucas	Child Protection Lead Officer	ER HSCP	Debbie.Lucas@eastrenfrewshire.gov.uk
Karyn Shields	Service Manager Intensive Services	ER HSCP	Karyn.Shields@eastrenfrewshire.gov.uk
Suzie Scott	Service Manager	Skills Development Scotland	Suzie.scott@sds.co.uk
Mary Curran	Library Development Officer (Children's Services)	ER Culture and Leisure	Mary.curran@ercultureandleisure.org

Kirstie Rees	Depute Principal Educational Psychologist	ERC Education	Kirstie.Rees@eastrenfrewshire.gov.uk
Ally Robb	Senior Manager Intensive Services & Justice	ER HSCP	Ally.Robb@eastrenfrewshire.gov.uk
Grace Thomson	Service Manager – Children Services	ER HSCP	Grace.thomson@eastrenfrewshire.gov.uk
Tracy Butler	Lead Planner (Recovery Services)	ER HSCP	Tracy.butler@eastrenfrewshire.gov.uk
Gillian Phillips	Health Improvement Lead	ER HSCP	Gillian.phillips@eastrenfrewshire.gov.uk



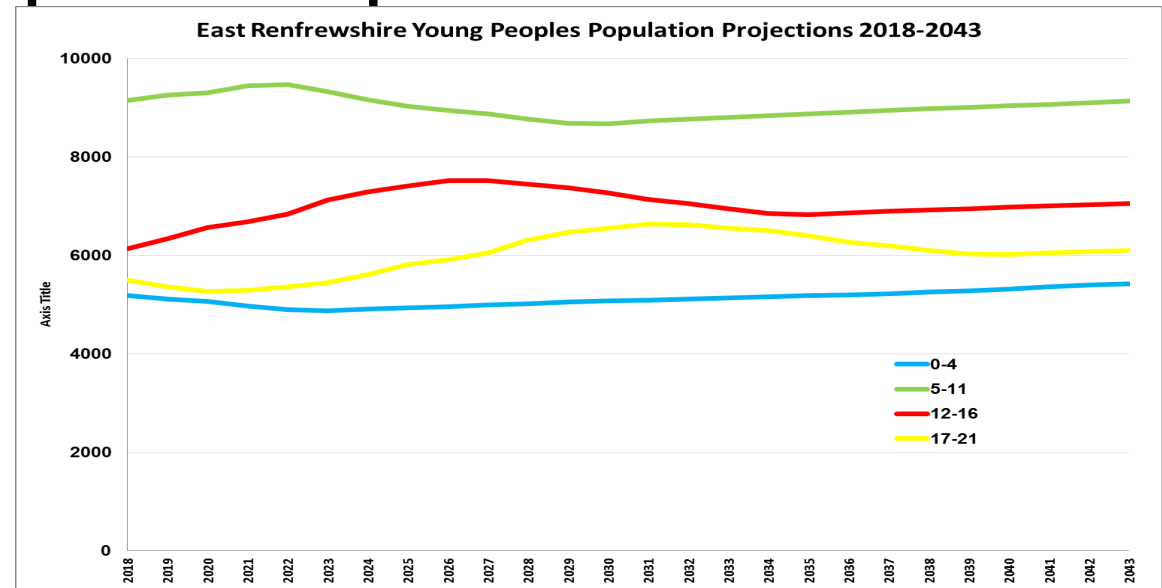
Appendix 1
Profile of Children and Young People's
Needs in East Renfrewshire

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Children and Young People's Population

East Renfrewshire has a population of approximately 96,500 people that is projected to grow to 108,000 by 2043 (2018 based). Some 22% of the population are aged 16 years or under. The total children and young person's population (0-21 years) is currently around 26,000 with live births per year numbering around 800. This equates to a fertility rate of 51 live births per 1,000 women (aged 15-44) and compares favourably with the Scotland rate of 48.4 live births per 1,000 women. There are 19,701 individuals aged between 0 and 15, this is the highest proportion of children in any local authority in Scotland. One in every five people living in East Renfrewshire is a child.

The number of children and young people aged 0-15 has consistently increased over the last 10 years and has increased by nearly 2% since 2018. The picture across East Renfrewshire differs with the communities of Giffnock (-0.9%), Eaglesham (-0.5%), Netherlee and Stamperland (-0.7%) and Clarkston and Williamwood (-1.9%) experiencing a reduction in the number of children and young people. However, all other areas increased the number of children and young people living within them. Projections also show the children and young people cohort continuing to grow over the next 5 years.



Source: National Records of Scotland

From the graph above we can see that approximately 5,000 children are currently under 5 years, 8,600 are between five and eleven, and just over 6,000 fall within the twelve to sixteen age group.

There is an increasing pattern of more people entering East Renfrewshire than leaving. In 2020/21 nearly 600 more children (0-14) migrated into the area than left, further adding to the number of children in the population. These levels of migration were among the highest levels of any local authority. In comparison between 2019 and 2021, East Renfrewshire experienced a 2.2% decrease in the number of births, dropping from 808 in 2019 to 790 in 2021. The number of births in Scotland declined by 4.2% between 2019 and 2021.

Household Composition

East Renfrewshire has a higher than the Scottish average ⁶² percentage of households with married/civil partners and dependent children (21.1%). Married or same-sex couple families (either with or without children) are the most common household type (34%). Lone parent families account for 11% of all households.

Ethnicity

Most people in East Renfrewshire (94%) report their ethnicity as 'White'. The majority of these people belonged to the 'White: Scottish' category (87%). The 'White: other British' was the second largest category at 4.1%. Of the 'White' ethnic group, 2.9% identified as 'non-British White' including 1.5% 'White: Irish', 1.2% 'Other: White' and 0.2% 'White: Polish'.

Minority ethnic groups in East Renfrewshire have grown in size between 2001 and 2011, and generally, lived in more mixed areas in 2011, compared to 2001. The 'Asian' population showed the largest increase and now represents 5% of the total East Renfrewshire population. 'Mixed or multiple' ethnic groups represented 0.4% and 'Other Ethnic' groups 0.3% of the population. The 'African, Caribbean or Black' groups made up 0.1% of the population.

Religion

East Renfrewshire is one of the most ethnically and culturally diverse areas in Scotland, with significant Jewish and Muslim communities.

In the Census of 2011, there was a much higher percentage of people in East Renfrewshire who stated they have a religion (73%) when compared with Scotland as a whole (63%). Six out of ten people said that their religion was 'Christian' (60%). After Christianity, the next largest reported religion is 'Muslim' which represents 3.3% with an increase of 1.2% from 2001. This is followed by 'Jewish' at 2.6% which represents 41% of the 'Jewish' population in Scotland. The other religions combined (including 'Hindu', 'Buddhist', 'Sikh' and 'Other religion') represented a further 1.4%.

Socio-Economic Factors

There are around 3,288 children (14.4%) living in relative poverty, after housing costs, in East Renfrewshire. This is among the lowest in Scotland. However, there is disparity in levels of poverty across the authority; varying from an estimated 5% in Clarkston, Netherlee and Williamwood to 21% in Barrhead, Liboside and Uplawmoor. 11% of households are lone parents, a group at greater risk of poverty. This number is predicted to increase in coming years.

Out-of-Work Households

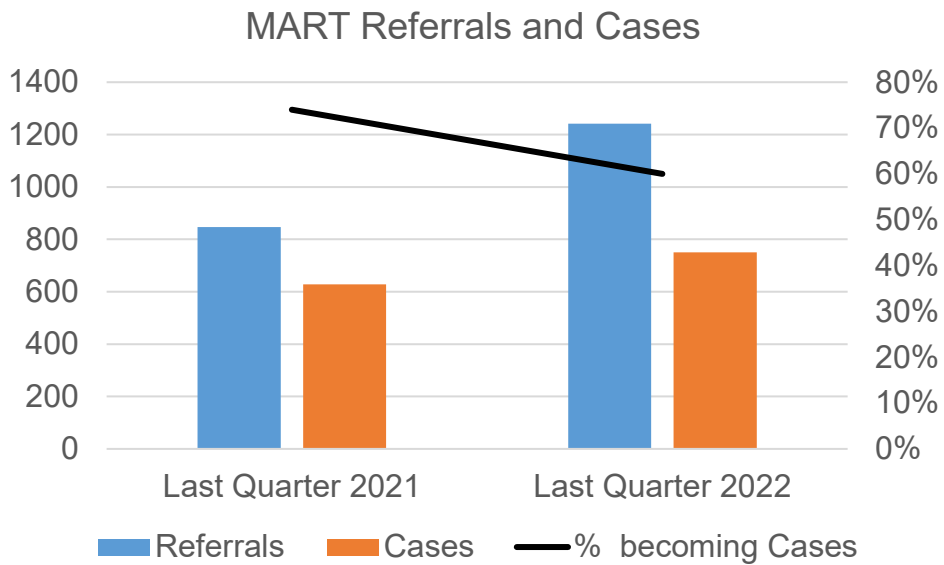
Around 2,070 individuals are claiming out-of-work benefits. This is approximately 4%, which is lower than the Scottish average of 6%.

Free School Meals Entitlements

Another useful indicator of levels of deprivation among families is free school meals entitlement rates. 8% of secondary pupils are registered for Free School Meals, which is lower than the Scottish average of 17%.

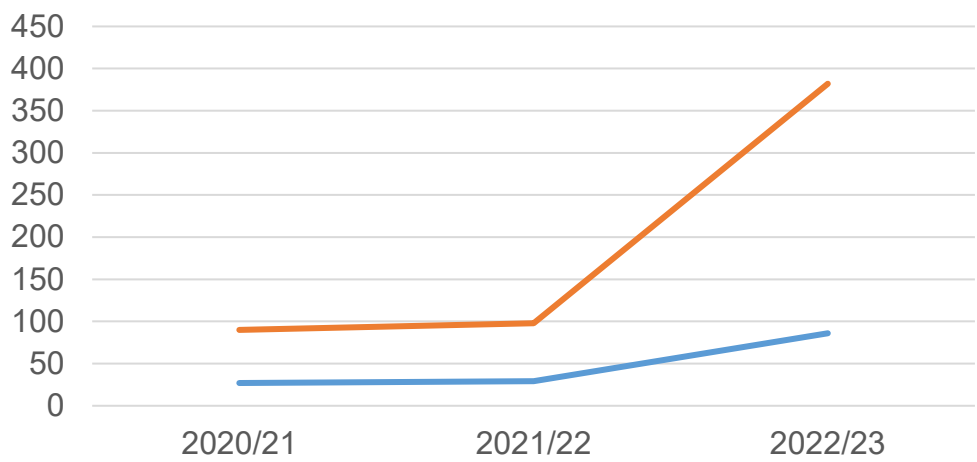
Level of demand for money and benefit advice

Money Advice and Rights Team (MART) receive enquires that are answered via a duty system. People then requiring an intensive service become cases. Enquiries can drop off for a variety of reasons, self-serve, awaiting further information, etc. It is increasingly common that following the initial interview the client cannot be assisted by MART and general advice only is issued. In 2022 this was evident from the number of people contacting in relation to the cost of living crisis who were above the threshold for state assistance. Both MART and Citizens Advice Bureau are seeing an emerging group of clients who are in work, and would have previously been getting by. The amount of people unable to meet essentials is widening and encompassing a new demographic. The number of MART clients in East Renfrewshire's most affluent areas have notably increased in the last year.



Source: East Renfrewshire Money Advice and Rights Team

Referrals directly related to children



Source: East Renfrewshire Money Advice and Rights Team

As at September 2022 there are 1,840 live payments of Scottish Child Payment in East Renfrewshire. This represents a **93%** rise since 2021 and demonstrates an increase of child poverty, as well as greater awareness of support available, and a national change in eligibility criteria.

There has been a huge upturn in referrals to MART directly related to children in 2022/23. Our Health Visiting Team undertook a test of change to increase referrals to MART from our most vulnerable families. MART are currently operating a pilot in 3 Primary Schools (Thornliebank, Cross Arthurlie and Mearns). So far 271 families have been seen and achieved £21,154.56 financial gains. There has been an uptake of 288 National Entitlement Cards since October 2022.

Housing and Accommodation

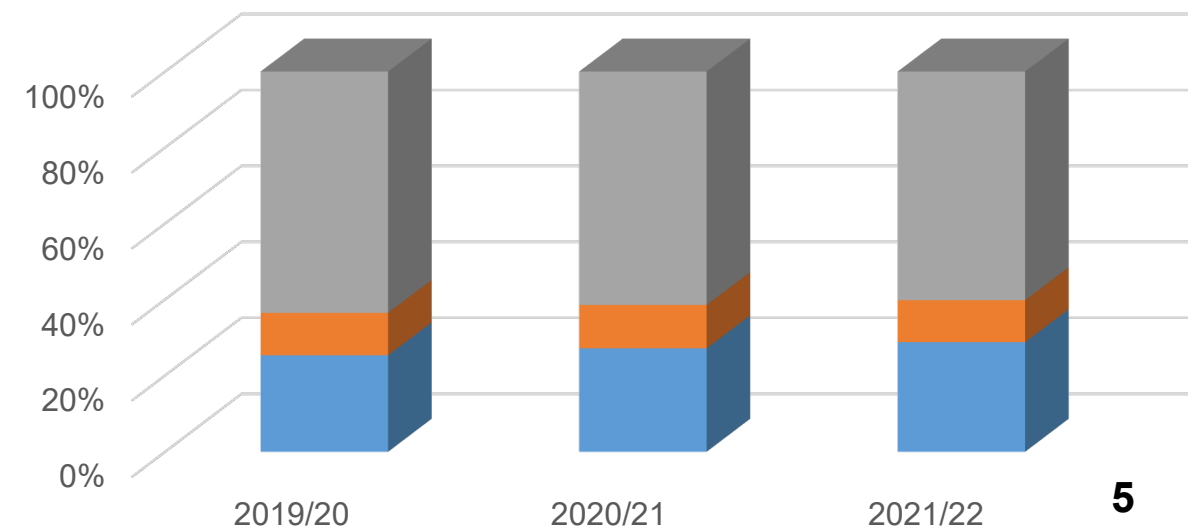
Over the last three years the number of households applying for council housing in East Renfrewshire has increased significantly, including applications from households with children.

	2019/20	2020/21	2021/22
Total Housing Application	4046	4827	4785
Single Parent Applications	1023	1309	1375
Other Households with Children Applications	452	551	529
Other Households	2571	2967	2881

Number of households on ERC housing waiting list by year and type

At the end of 2021/22 households with children made up 40% of all households on East Renfrewshire Council waiting lists. There were 30 young people aged 16 to 17 on the waiting list and a further 200 18-21 year olds, 24 of these with children.

Housing Applications by Household Type

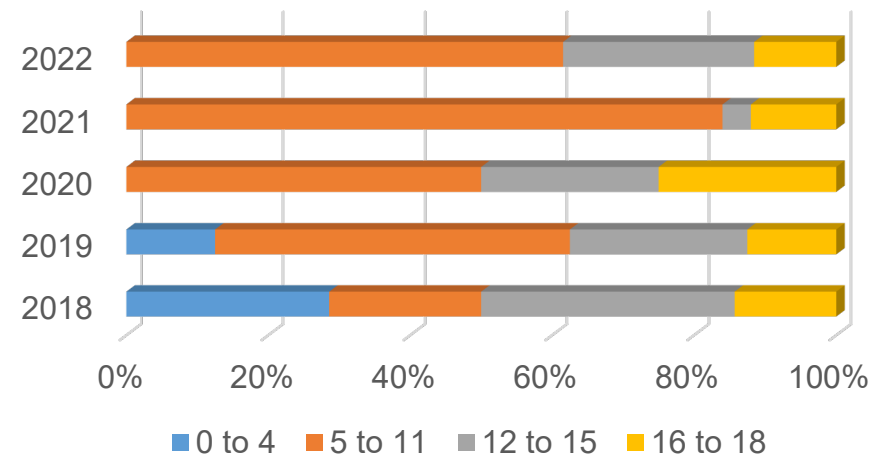


■ Single Parent Households ■ Other Households with Children ■ Other Households
 Source: East Renfrewshire Housing Department

The number of children being assessed as requiring an adaptation to their home to make it suitable for them is increasing year-on-year, from 14 in 2018 to 26 in 2022. Typical housing adaptations include wet floor showers, ramped access or closomats.

The majority of these referrals are for children aged 5 to 11 (almost 60%).

Houses Adapted for Children



Source: East Renfrewshire Housing Department

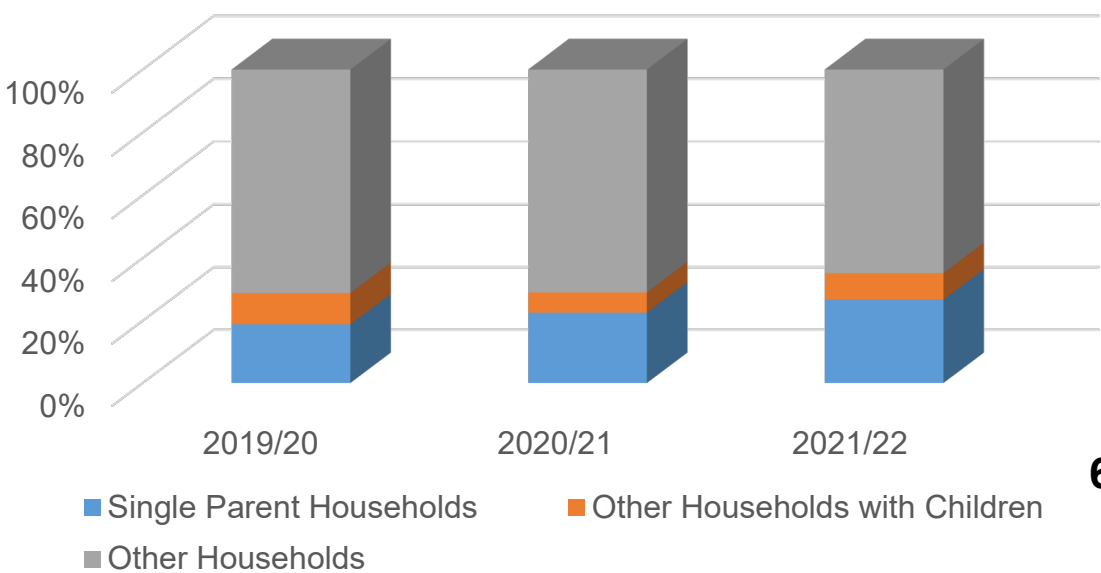
Supporting residents who are homeless, or at risk of losing their home, is a key priority for East Renfrewshire Council's Housing Services. In the current tough economic climate, significant numbers of local people are finding it difficult to sustain their home and are approaching Housing Services for support and assistance.

	2019/20	2020/21	2021/22
Total Homeless Applications	340	372	378
Single Parent Applications	64	84	101
Other Households with Children Applications	34	24	32
Other Households	242	264	245

Number of households presenting as homeless by year and type

In the last 3 years, the number of families with children who have applied to the Council as homeless has increased by 39%.

Homeless Applications by Household Type



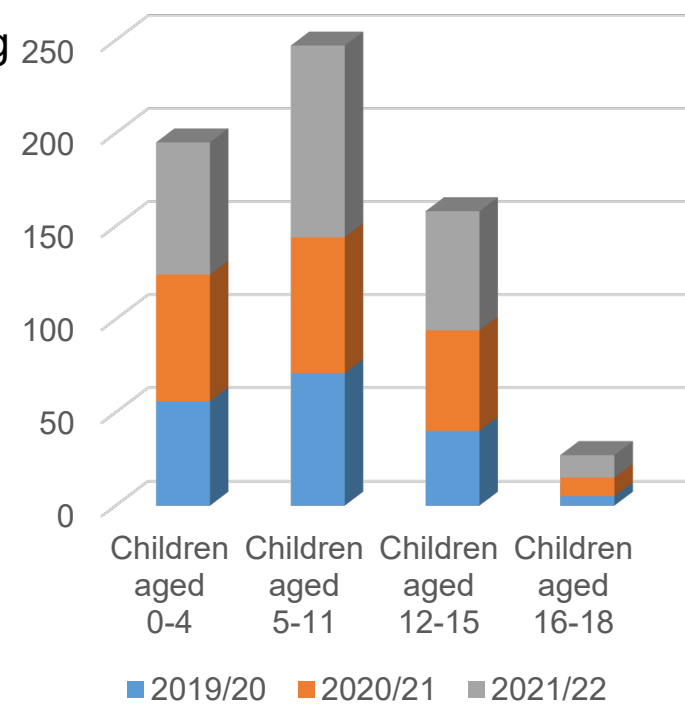
A priority for East Renfrewshire Council is to reduce the length of time households stay in temporary accommodation before moving on to more permanent accommodation. The average length of time households with children have stayed in temporary accommodation has recovered from the increased usage during the COVID-19 pandemic and decreased further.

2019/20	2020/21	2021/22
196 days	227 days	183 days

Average time in temporary accommodation for household with children by year

The overall number of households requiring temporary accommodation has increased over the last 3 years, reflecting the difficulties local residents are facing coming out of the COVID-19 pandemic and through the cost-of-living crisis, as well as the high pressure there is on affordable housing locally.

Households in Temporary Accommodation



Source: East Renfrewshire Housing Department

Education and Learning 67

Attainment in the Broad General Education

East Renfrewshire Council's Education Department has a strong reputation and record of high levels of attainment and sector leading evaluations of pupil experiences from HMIE evaluations. The department is fully committed to securing positive outcomes for all children and young people, in line with our vision statement – '*Everyone Attaining, Everyone Achieving through Excellent Experiences*'. There is a consistent focus on excellence and equity and all educational establishments ensure that efforts and resources are targeted towards those who need support most.

Pupil progress in reading, writing, talking and listening and numeracy through the Broad General Education (P1 to S3) is measured by teacher professional judgement. Evaluations are based on a wide range of evidence which takes account of breadth, challenge and application of learning, using a range of assessments including standardised assessments and on-going observation of learner progress. Teacher professional judgements at the P1, P4, P7 and S3 year stages are gathered each year by the Education Department and are submitted to the Scottish Government. Regretfully, as a consequence of the Covid-19 pandemic, teacher judgements were not collected for the academic year 2019-20.

The tables below provides a summary of the percentage of primary and secondary pupils achieving the expected CfE levels across the four curricular areas. In 2021-22 almost all pupils in P1, P4 and P7 combined, achieved the appropriate Curriculum for Excellence level of attainment in the Broad General Education as measured by teacher professional judgement of progress in reading and talking and listening, with most pupils attaining the expected level in numeracy and writing. The proportions of East Renfrewshire pupils in P1, P4 and P7 combined achieving the expected level in these curricular areas, are significantly higher than the latest published national proportions (2020-21).

Primary Attainment (P1, P4 and P7 Combined)

% Attaining or Exceeding Expected Levels	2017-18	2018-19	2020-21	2021-22
Reading	91.2%	90.7%	90.3%	89.2%
Writing	89.4%	88.4%	87.4%	87.4%
Listening & Talking	94%	94.5%	94.1%	93.2%
Numeracy	90.8%	90.7%	89.9%	89.6%

Secondary Attainment (S3)

% Attaining or Exceeding Expected Levels	2016-17	2017-18	2018-19	2021-22
Reading	77.1%	78.4%	80.9%	82.5%
Writing	71.8%	76.6%	79.7%	82.8%
Listening & Talking	76.9%	80.1%	81.5%	93%
Numeracy	76.2%	78.2%	81.5%	83.5%

*2019-20 data is universally unavailable and 2020-21 data is not available for secondary, due to covid

Source: East Renfrewshire Education Department

The levels of attainment of East Renfrewshire pupils in the Broad General Education has remained consistently high, however as a consequence of the Covid-19 global pandemic ⁶⁸ primary attainment in reading, writing, talking and listening and numeracy has decreased slightly over the last three years.

The Scottish Index of Multiple Deprivation (SIMD) can be used to identify children and young people who live in the most deprived areas in Scotland. Nationally, we compare the performance of key equity groups against overall performance to measure and monitor the poverty related attainment gap.

The tables to the right provide a summary of the percentage of primary and secondary pupils in equity groups.

In primary schools for children residing in deciles 1 & 2, from 2018-19 to 2021-22, overall attainment across the four curricular areas has decreased for all pupils, those entitled to a free school meal and those who reside in decile 1 & 2 areas. However the decrease for those entitled to a free school meal or residing in decile 1 and 2 areas is greater than for all pupils, indicating that the poverty related attainment gap has grown for our most disadvantaged primary aged pupils in P1, P4 and P7 over the last three years. It should be noted that the numbers of those children registered for Free School Meals and/or living in SIMD deciles 1 and 2 represent a small percentage statistically (approximately 6%) of this demographic in East Renfrewshire.

Primary	% Pupils Registered for Free School Meals (FME)			% Pupils living in SIMD deciles 1 and 2 (Q1)		
	2018-19	2020-21	2021-22	2018-19	2020-21	2021-22
Reading	71	74	68	77.8	73	69.5
Writing	64	67	64	72.8	69	64.2
L&T	85	84	64	90.7	83	78.2
Numeracy	74	71	70	80.3	75	68.7
Secondary (S3)	% Pupils Registered for Free School Meals (FME)			% Pupils living in SIMD deciles 1 and 2 (Q1)		
	2017-18	2018-19	2021-22	2017-18	2018-19	2021-22
Reading	63	65	64	62	66.4	66.7
Writing	61	60	63	62	66.4	69.3
L&T	61	64	66	65	73.3	73.3
Numeracy	48	53	51	59	57.8	56

Source: East Renfrewshire Education Department

Secondary attainment (S3) at third and fourth levels in reading, writing, talking and listening has increased over the last three years. However, at third level, from 2018-19 to 2021-22 with the exception of numeracy for pupils living in SIMD 1 and 2, the attainment of disadvantaged secondary pupils increased at a lower rate than the overall cohort. This demonstrates an increase in the poverty related attainment gap for pupils at this level.

Performance in SQA examinations

East Renfrewshire continues to outperform similar authorities and performance is well above the national average.

- 77% of S4 pupils attained 5 or more awards at National 5 or better, with an increase in the proportion of grade A awards at SQA National 5 in S4 from the last examination year in 2019; currently 56%. The presentation rate also increased for this measure compared to the last examination year in 2019.
- Increase in the proportion of learners achieving 8+ National 5 and National 5As in S4 when compared to the last examination year in 2019.
- 47% of S5 pupils attained 5 or more awards at Higher, with an increase in the proportion of grade A awards achieved in the last examination year in 2019 at Higher in S5.
- 69% of S5 pupils attained 3 or more awards at Higher.
- At Advanced Higher, 44% of S6 pupils achieved one or more awards (an increase of 4% since 2019); 22% of learners achieved at least one Advance Higher at grade A.
- Commendably, the proportion of presentations achieving A awards at Advanced Higher in S6 increased from 34% in 2019 to 47% in 2022.
- Comparison of the performance of learners living in SIMD Q1 (most deprived) with those living in SIMD Q5 (least deprived) shows that in 2022 the gap in achievement of:
 - 3 or more National 5 passes at grade C or better, increased by 12 percentage points compared with the last pre-pandemic year (2019). This compares with a national decrease in the gap at this level of 2 percentage points.
 - 3 or more passes at National 5 grade A, decreased by 2 percentage points from 2019. This compares with a national increase in the gap of 2 percentage points.
 - 3 or more passes at Higher Grade C or better decreased by 3 percentage points. This compares with a national increase in the gap of 2 percentage points.
- The gap between the attainment of the most and least deprived pupils has increased when comparing 2022 with the last pre-pandemic year (2019). In 2019 there was a gap of 26 percentage points between the proportion of most disadvantaged and least disadvantaged learners gaining 3 Higher Grade A passes at Higher; this rose to 33 points in 2022, representing an increase of 7 percentage points. Nationally the gap increased by 5 percentage points. Attainment of 3+ grade A passes remained lower for this group nationally at 25%, compared with 33% in ERC.

Attendance and Exclusions

In the primary sector, the attendance rate for 2021-22 was 93.9%. The attendance rate of learners recorded as being entitled to Free School Meals was 89.4%. The attendance rate of learners recorded as living in Quintile 1 (SIMD deciles 1&2) was 89.9%, with the gap in attendance of the most and least deprived groups recorded as 5.2%.

In the secondary sector, the attendance rate for 2021-22 was 91.4%. The attendance of learners recorded as being entitled to Free School Meals was 85.5%. The attendance of learners recorded as living in Quintile 1 (SIMD deciles 1&2) was 87.4%, with the gap in attendance of the most and least deprived groups recorded as 5.1%.

School exclusion rates remain very low within East Renfrewshire. In 2021-22 there were no exclusion incidents in the primary sector. Nationally, the rate of exclusions in the primary sector is 6.4 incidents per 1000 pupils.

There were 41 exclusion incidents in the secondary sector in 2021-22. Consequently the rate of exclusions in the secondary sector was 5.1 incidents per 1000 pupils. The East Renfrewshire authority rate is significantly lower than the national rate of exclusions in the secondary sector at 33 incidents per 1000 pupils.

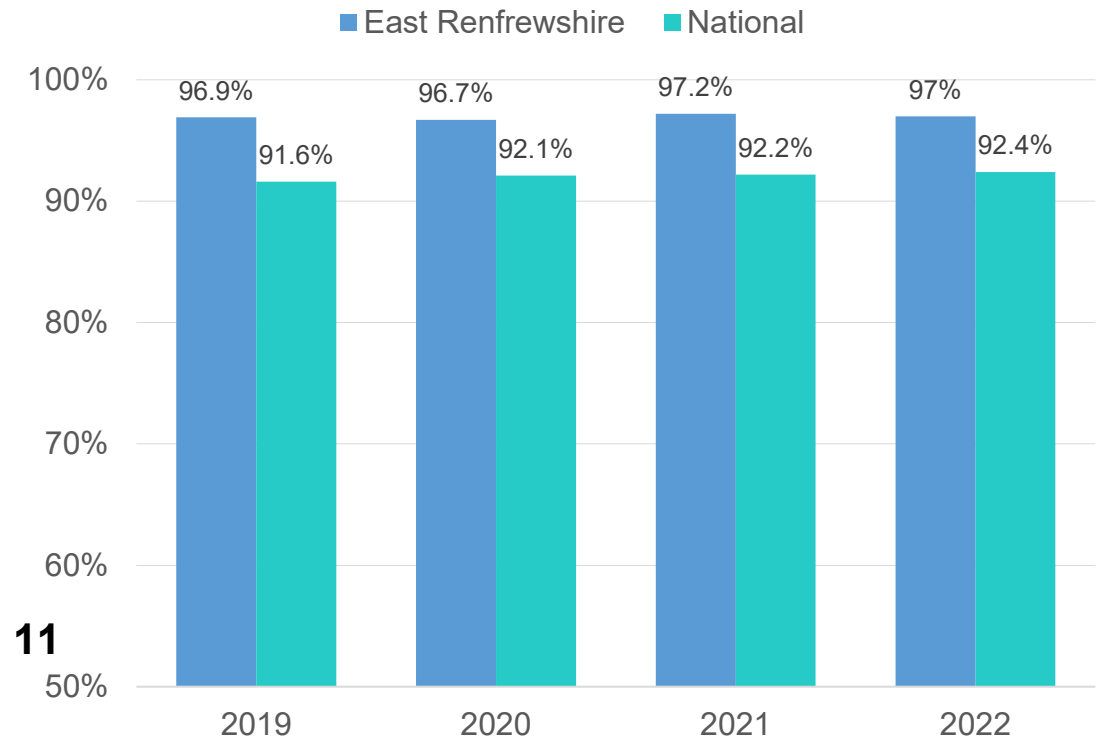
School Leaver Destinations

The Covid-19 pandemic previously impacted on the percentage of leavers in a positive destination (97.4% in 2020-21). In the follow-up survey in April 2022, 95.7% of the 2020-21 leavers were in a positive destination as compared to 93.2% nationally. Additionally, figures recently published show that 98.5% of 2021-22 leavers were in a positive destination as compared to 95.7% nationally. This represented the highest ever proportion of East Renfrewshire leavers moving into a positive destination.

Skills Development Scotland (SDS) and the Scottish Government worked together to develop a measure of participation which allows identification of the participation status of the wider 16-19 year old cohort. As agreed by Scottish Ministers, the Annual Participation Measure (APM) has been adopted in the Scottish Government's National Performance Framework as the measure of young people's participation. In 2022, 97% of ERC 16-19 year olds were participating, well above the national figure of 92.4% with East Renfrewshire having the highest proportion participating nationally.

Our partnership with SDS has ensured that our young people, staff and parents receive the most up to date, relevant labour-market information to support their learner pathways. Staff participated in professional learning to enhance their knowledge in relation to careers information and guidance. We develop and nurture relationships with employers to support learner experiences and broaden learner pathways. A priority of the DYW School Coordinators is to work with employers to allow our young people to demonstrate and apply these skills in different contexts. In 2021-22, there was a return to employer event activities with Employer Brunches for both young people in mainstream and an event for young people from our specialist provision.

Annual Participation Measure 2019-2022: East Renfrewshire



Additional Support for Learning Review

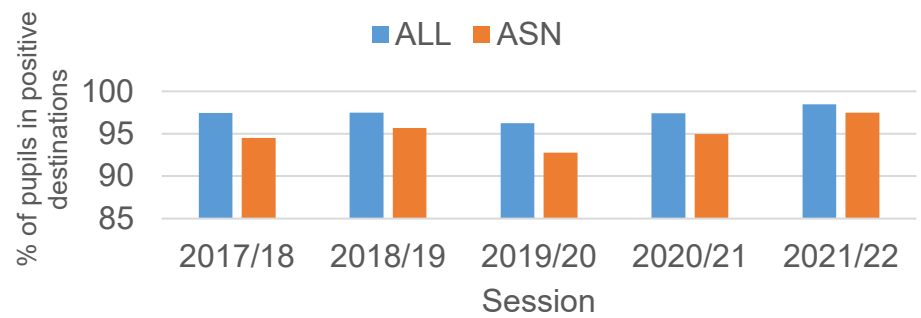
72

At the September 2022 census, 24% of children were recorded with an additional support need (ASN) in our schools and early learning centres (ELC). Right now, it's 5% in ELC, 21.1% in Primary, 28.8% in secondary and an East Renfrewshire Council total of 23.2%. There are a wide range of additional support needs including literacy difficulties/dyslexia, ASD/Social Communication Needs, Social, Emotional and Behavioural Needs and English as an Additional Language Social, Emotional and Behavioural needs is likely to include a large number of individuals whose primary need is in relation to mental and emotional wellbeing.

There has been a significant increase in children requiring input from the Sensory Support Service and new referrals for both Hearing Impairment (HI) and Visual Impairment (VI) are likely to follow this trend of increasing numbers. Currently there are 146 children and young people who are being supported for their HI with 71 receiving support for VI.

In the last 5 years, almost all S4 learners with ASN in East Renfrewshire have achieved SCQF Level 4 Literacy by the end of S4. S4 learners with ASN achieving SCQF Level 5 Literacy by the end of S4 has remained around 73% over the past five years; this has been significantly above the VC over the same period.

Initial Positive Destinations

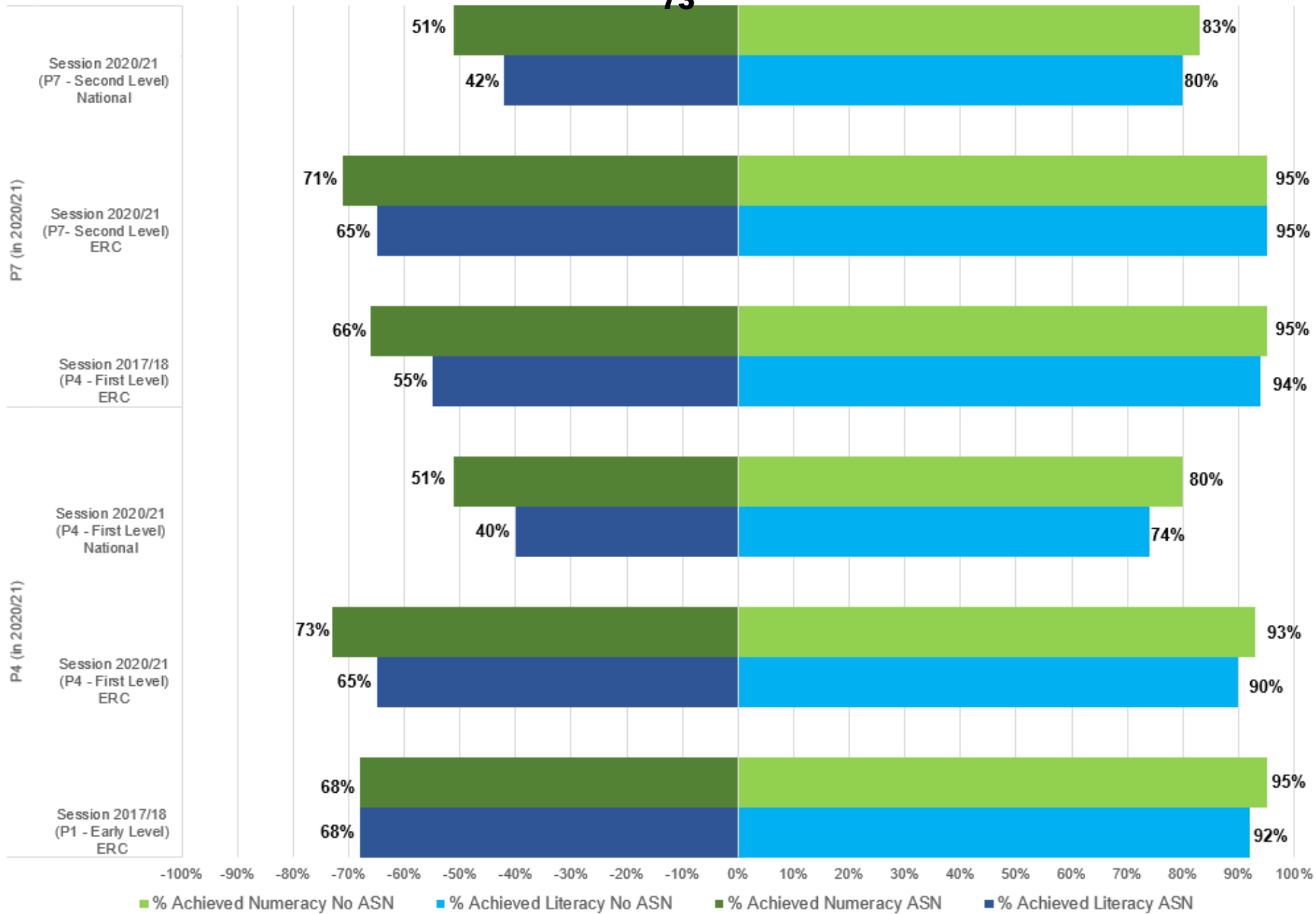


Source: East Renfrewshire Education Department

Almost all young people who are recorded as having an additional support need move on to a positive leaver destination. The majority of parents/carers report that there is a plan in place to support their child and of those who have a plan in place, almost all understand the plan and agree if it reflects their child's needs. Almost all agreed that their views and the views of children were taken into account when the plan was being created.

Achievement of Curriculum for Excellence Level, Additional Support Needs (ASN) Comparison - Achievement

73



Family First

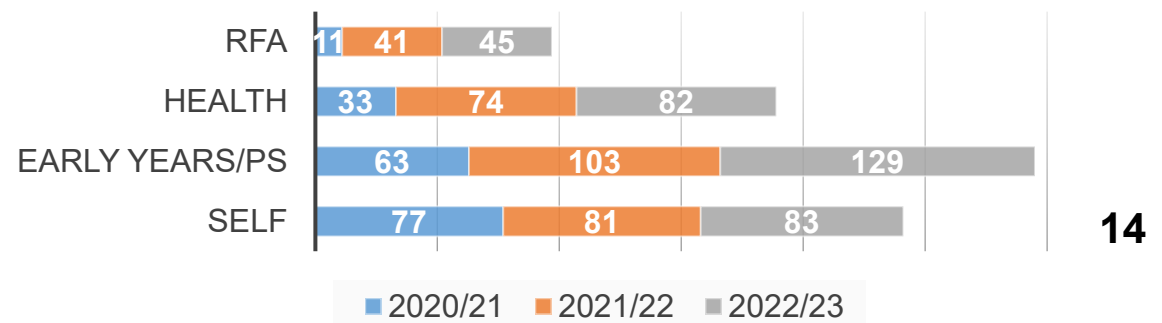
74

The number of notifications to Family First's early intervention practice continues to increase, year-on-year. Notably, in 2021/22 the number of notifications from Black and Minority Ethnic Populations doubled compared to 2020/21.

One of the main sources of notifications to Family First is from residents themselves. This demonstrates the community's increasing awareness of this early intervention team and the confidence in asking for direct help.

Family First have worked closely with the Request for Assistance (RFA) team to gain a greater understanding of the type of referrals made to RFA and identify opportunities for earlier intervention. This led the Family First Team to work in closer partnership with schools and early learning and childcare settings within Barrhead community to encourage more timely notifications. An example of this is involving Family First when attendance issues begin to rise rather than wait until it reaches crisis point. This increase in referrals to Family First direct from schools and ELC settings is illustrated in the graph below.

Main source of referrals

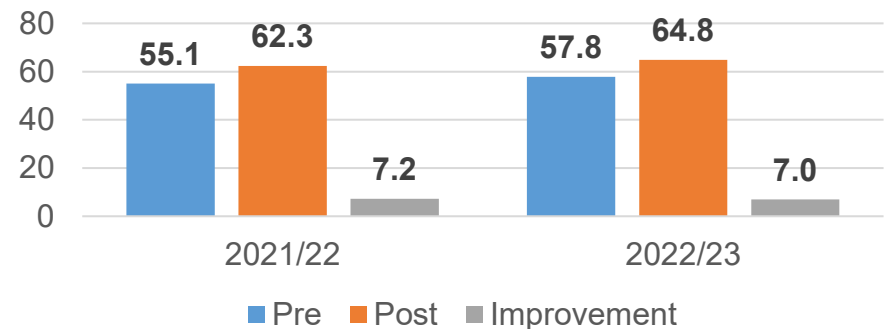


Source: East Renfrewshire Family First

Family Wellbeing Scale

The graph below shows the average pre- and post-support score and the average improvement made within the family unit. The average pre-support score in the graph doesn't fully demonstrate how these high pre scores are in reality, particularly within some of our more vulnerable customers. This is due to the team now using the scale across the wider population. The main impact of change after Family First intervention is verified in key themes within the scale are: a more hopeful attitude to life, a stronger sense of belonging and feel closer to their partner/family.

Family Wellbeing Scale Average Scores

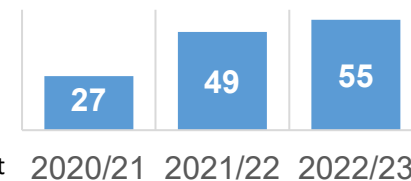


Source: East Renfrewshire Family First

Increase in Demand for ASN Sleep Assessment

The noted increase in demand has predominantly come from parents/carers of children with additional support needs. 30% have of those who engaged with sleep support have received a sleep assessment which is more intense intervention for at least a 3 month period.

Demand for Sleep Support



Source: East Renfrewshire Family First

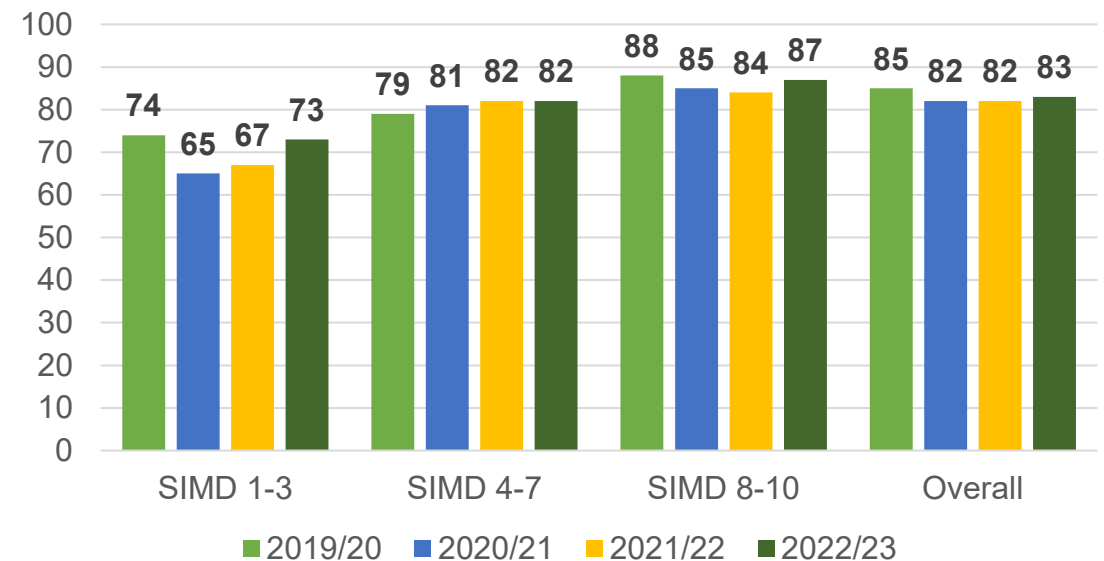
Developmental Milestones

Since 2013-14 data has been gathered on the percentage of children achieving the expected levels of development on entry to primary 1. The following developmental components are assessed: Social, Emotional, Attention, Speech, Expressive Language, Receptive Language, Communication, Gross Motor Skills, Fine Motor Skills and Behaviour. This session 83% of children achieved their developmental milestones, this is an increase of 1% on the previous two years as shown in the chart below.

From 2016-17 to 2019-20, there had been a steady increase in the percentage of children achieving their developmental milestones within the least affluent communities, defined as communities residing in areas with a Scottish Index of Multiple Deprivation (SIMD) deciles values between 1 and 3. From 2021-22 to 2022-23 the performance of children living in the lowest deciles has increased by 6%, it has remained the same for deciles 4-7, and increased by 3% for those living in deciles 8-10.

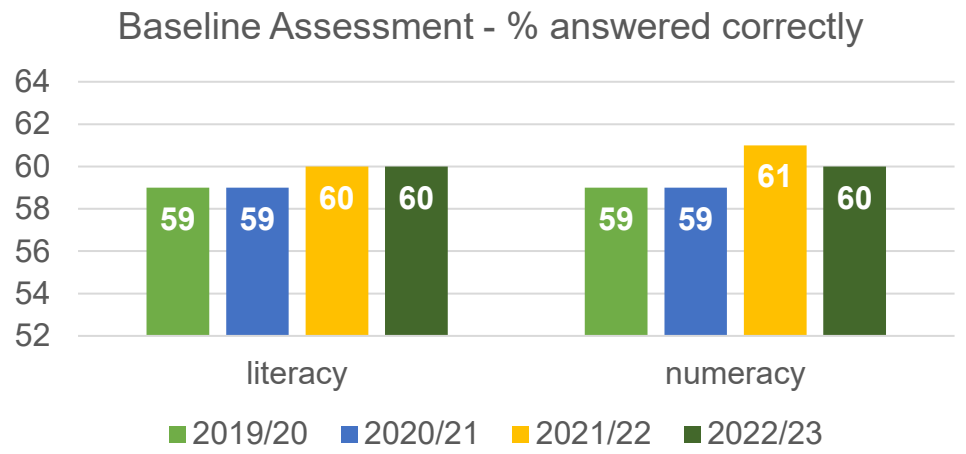
Following the lockdown periods during 2020/2021 there had been a significant reversal in the previous reduction in the gap between the achievement of those from the most affluent, (SIMD 8-10), and least affluent, (SIMD 1-3) decile areas, with the gap reaching 20% in 2020-21, reducing to 17% in 2021/22 and reducing further to 14% in 2022/23. Although performance overall has not returned to pre-pandemic levels, the gap is now 14%, as it was in 2019/20, indicating recovery.

Developmental Milestones: History by SIMD



Source: East Renfrewshire Education Department

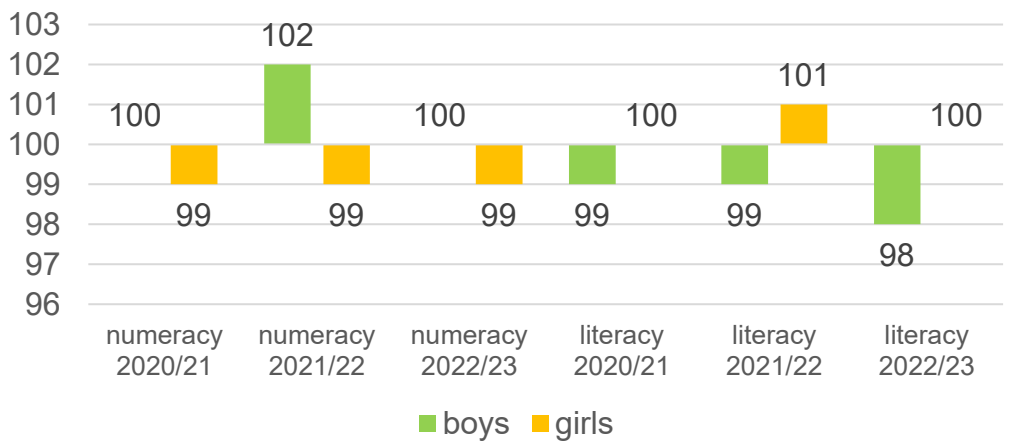
A Baseline Assessment has been in place since 2005-06 to assess children’s attainment in literacy and numeracy on entry to primary one. In contrast to the Developmental Milestones, overall performance in literacy and numeracy remains consistent with previous years, with a slight decrease in numeracy as shown in the chart to the right.



Source: East Renfrewshire Education Department

The standardised scores for literacy and numeracy show a consistent pattern in terms of gender. Over the past three years boys have outperformed girls in numeracy and in literacy girls outperform boys as shown below.

East Renfrewshire by Gender: 2019/20 to 2022/23



Source: East Renfrewshire Education Department

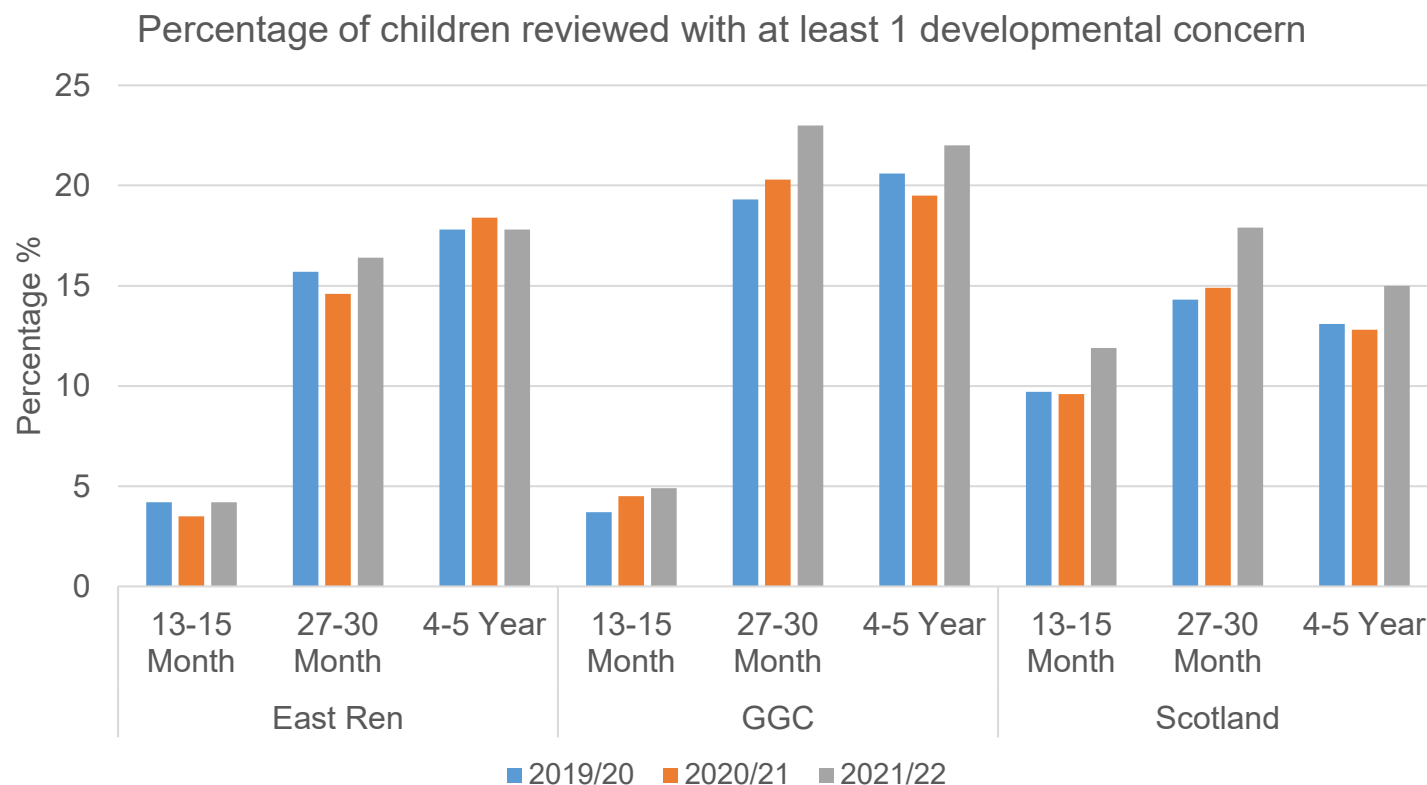
Health Visiting

The evidence based Universal Health Visiting Pathway is a core home visiting programme to be offered to all families. The programme consists of 11 home visits; 8 within the first year of life and 3 Child Health Reviews between 13 months and 4-5 years.

In East Renfrewshire, the universal pathway is now fully implemented. The final addition of an antenatal contact, offered to all pregnant women, has provided an early introduction to health visiting services and the opportunity to develop the therapeutic relationship. In 2022, there have been significant improvements in completion of 4-5 year reviews, in response to this being identified as the review with the lowest coverage. Our data shows that family movement into East Renfrewshire for school, places demand on the service at this final touchpoint.

Early Child Development

In 2021/22, there were increases nationally in the proportion of children with a developmental concern at all three review points. In East Renfrewshire increases were seen in 13-15 month and 27-30 month reviews. There was a slight decrease in the proportion of 4-5 year reviews where one or more developmental concern was reported. This is likely to be as a result of improvements in coverage. Ongoing monitoring of this will be crucial as we develop our understanding of the impact of the pandemic on early years.

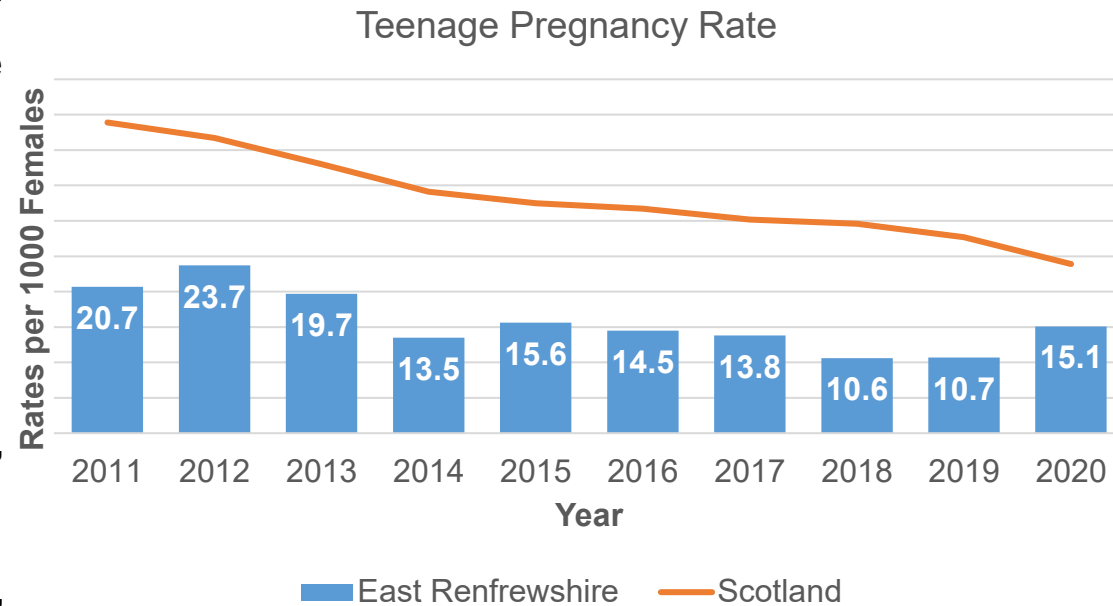


Family Nurse Partnership⁷⁸

The current teenage pregnancy rate in East Renfrewshire is 15.1 per 1,000. This is the second lowest rate in Scotland.

Although there appears to be a pocket increase in 2020, family nurse partnership data shows this to be short term and not the start of a rising trend.

The graph below demonstrates that in East Renfrewshire, the family nurse partnership are reaching those most in need, with green representing the proportion of notifications from the most deprived quintiles (SIMD 1&2), where grey is all notifications.

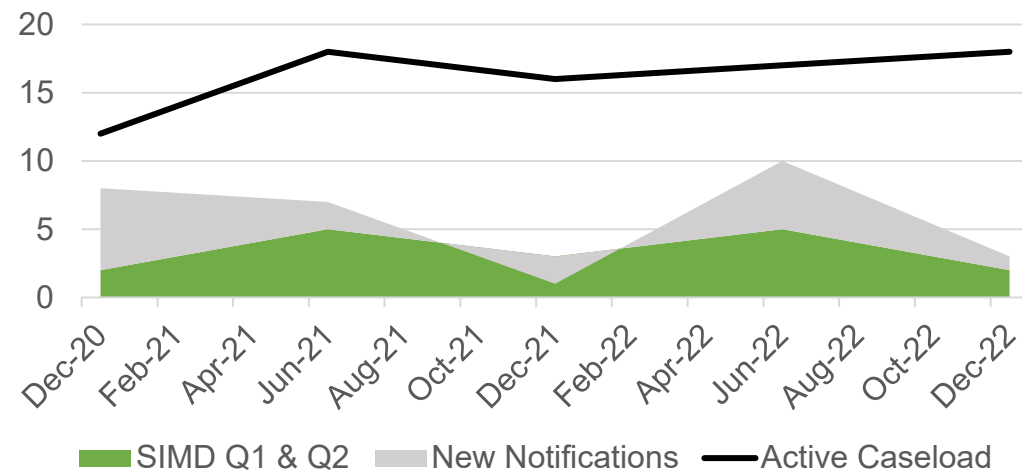


Source: Public Health Scotland Teenage Pregnancies

- In response to the increasingly challenging impact of poverty, FNP staff have received Home Energy training to alleviate fuel poverty implications
- Maintaining and developing partnerships is an ongoing priority- Clients in East Renfrewshire currently benefit from access to an attached FNP Shelter Worker, FNP Employability worker and direct links to Sandyford sexual health service
- Two Seyana press champions from the local FNP team have undertaken training to support clients with administration of Seyana contraceptive injection
- Work is ongoing across the board area in relation to continuous quality improvement around client uptake, enrolment by 16+6 weeks gestation and non-English client uptake

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Family Nurse Partnership Notifications and Caseloads



Source: Family Nurse Partnership Team E

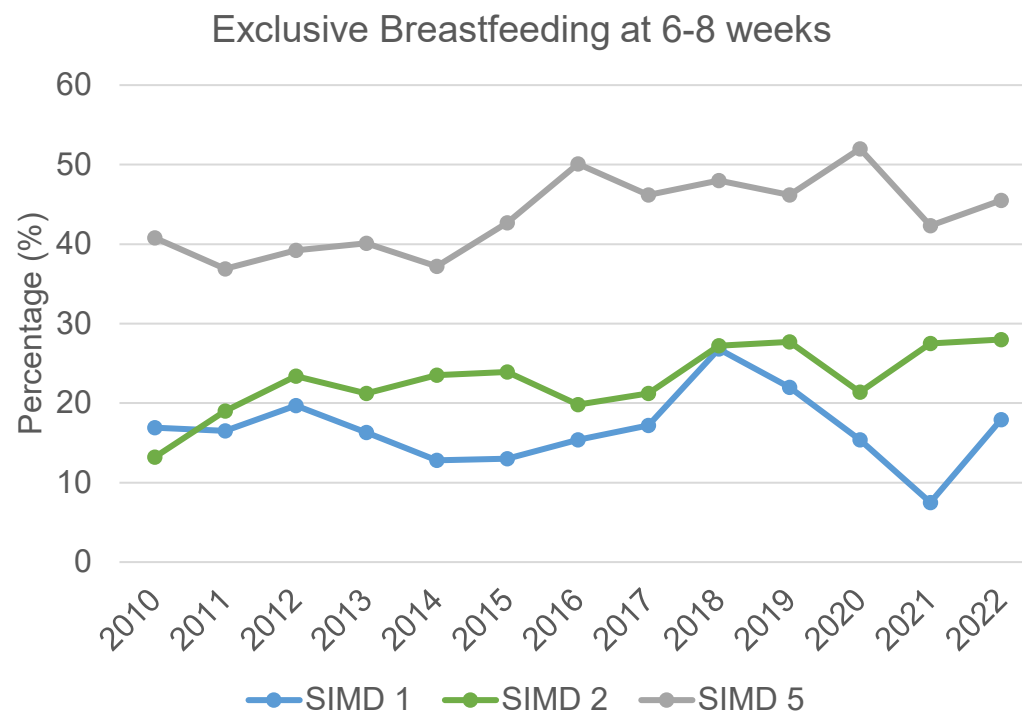
Breastfeeding

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Although there continues to be a difference in breastfeeding rates between women living in our most affluent (SIMD 5) and our most deprived (SIMD 1) areas. The gap has decreased for a second year in a row from 34.7% in 2020/21 to 27.6% in 2021/22. In addition, the overall exclusive breastfeeding rate at 6-8 weeks remains higher than Scotland and GGC averages.

East Renfrewshire continues to achieve one of the highest breastfeeding rates in Scotland, with 73.8% of babies having ever been breastfed (as reported at First Visit).

We have maintained our UNICEF Gold accreditation since it was first awarded in 2018 and were awarded a commendation at our latest accreditation in November 2022.



Source: Public Health Scotland Infant feeding statistics dashboard

Maternal Smoking

	2017/18	2018/19	2019/20	2020/21	2021/22
East Ren	4.6 (39)	5.7 (46)	4.3 (34)	3.2 (24)	4.0 (31)
GGC	11.5 (1,340)	11.7 (1,277)	11.6 (1,274)	10.2 (1,056)	9.0 (957)
Scotland	14.4 (7,363)	14.6 (6,989)	13.8 (6,438)	13.1 (5,831)	11.8 (5,492)

Source: ScotPHO Tobacco use: maternal smoking

The health of a pregnant woman and her baby are closely linked and are influenced by a number of different factors, including maternal smoking. In 2022, 4.0% (31) of women living in East Renfrewshire were recorded as smoking at the time of their antenatal booking appointment compared to 5.7% (46) in 2019. Maternal smoking in pregnancy in women living in East Renfrewshire remains significantly below figures for Scotland and NHS Greater Glasgow and Clyde at 11.8% and 9.0% respectively.

19

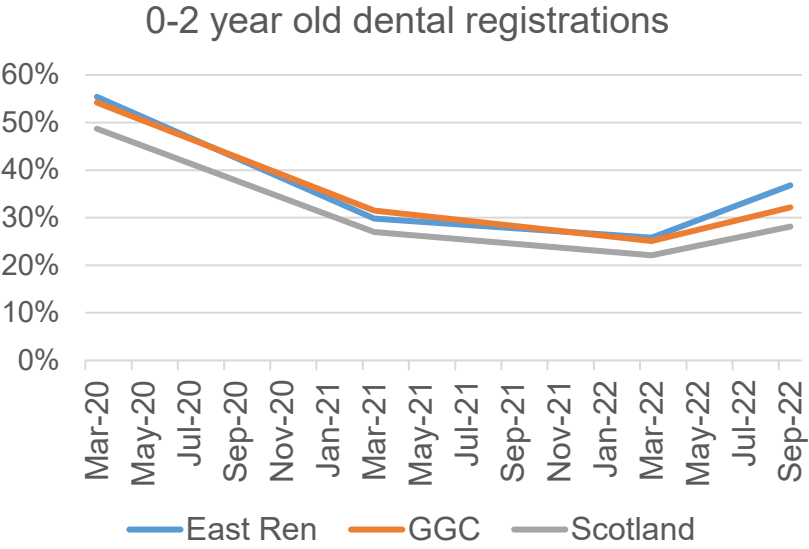
A £220 incentive is available to encourage pregnant women to stop smoking and stay stopped. Currently, uptake is low however raising awareness is a priority over the next few years.

Dental Health

Dental registrations for 0-2 year olds have reduced significantly in all areas; owing to reduced access to dental services during the Pandemic and subsequent restrictions during service recovery.

The latest snapshot, taken on 30th September 2022, illustrates an upturn in registrations as a result of an increased capacity to deliver services. A return to pre-pandemic levels and subsequent improvements remains a priority for the Board and will continue to be monitored in light of recent pressures on access to General Dental Services.

In East Renfrewshire, there are two dental health support workers within the health visiting team and they offer home visits when babies are 3 months of age to support access to dental practice registration.



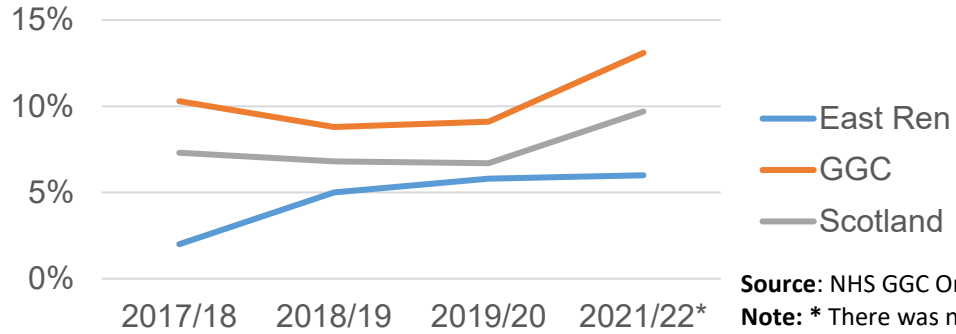
Source: NHS GGC Oral Health Directorate

The **Childsmile** programme reduces inequalities in dental health by supporting access to services, providing education, information and resources for professionals, community and education services:

- 33 out of 37 preschool establishments in East Renfrewshire participate in supervised toothbrushing
- However, fluoride varnish is not currently available in nurseries and schools in East Renfrewshire



Proportion of children inspected needing to see a dentist as soon as possible on account of severe decay or abscess



Source: NHS GGC Oral Health Directorate
Note: * There was no NDIP for 2020/21

- The National Dental Inspection Programme (NDIP) was suspended in March 2020, and resumed in 2021/22, but was limited to a basic inspection of Primary 1 children.
- Data presented above shows there has been an increase in the presence of severe decay or abscess in East Renfrewshire, however we remain well below the GGC and Scotland averages.
- It is expected the full impact of the Pandemic on child dental health will not be understood for several years. Therefore we will continue to monitor the basic NDIP outcomes as well as the detailed data when that becomes available again.

Childhood Obesity

All NHS Boards in Scotland provide a child health programme where children are offered routine reviews at various stages of their life. Height and weight measurements are collected at 27-30 months and again at the Primary 1 review.

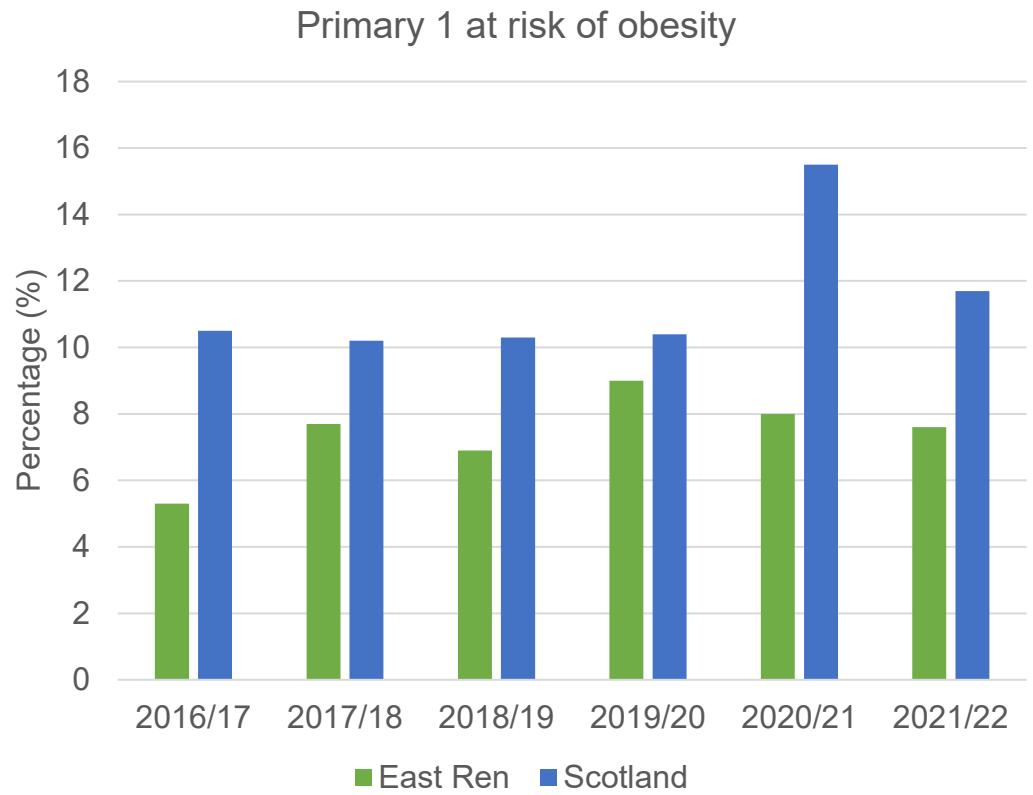
Data from the 27-30 month health checks for 2021-22 have been gathered and analysed by Public Health Scotland. In East Renfrewshire, data validity was the highest of any local authority in Greater Glasgow and Clyde, supporting a high level of confidence that the data is representative of children in this area. The proportion of those at risk of overweight and obesity combined has dropped since pre-pandemic (2018/19) levels. This decrease is largely due to the drop in those at risk of overweight, whilst those at risk of obesity has remained stable. The number at risk of underweight has increased by 7 when comparing before the pandemic to latest data available. Although numbers in East Renfrewshire are small this is something we would like to monitor as it represents a significant change in percentage.

The graph presents the most recent annual statistics on body mass index (BMI) for Primary 1 school children (those aged around 5 years old) published by Public Health Scotland. At risk of obesity is defined as BMI greater than or equal to 95th centile.

East Renfrewshire consistently records a lower percentage of children at risk of obesity than the Scotland wide figure.

The impact of the pandemic is yet to be fully understood, but there is evidence to suggest a disproportionate impact on children living in our most deprived areas.

The HENRY approach has been developed in response to obesity figures and is a practical intervention that delivers **21** key messages to change family lifestyle habits and behaviours.

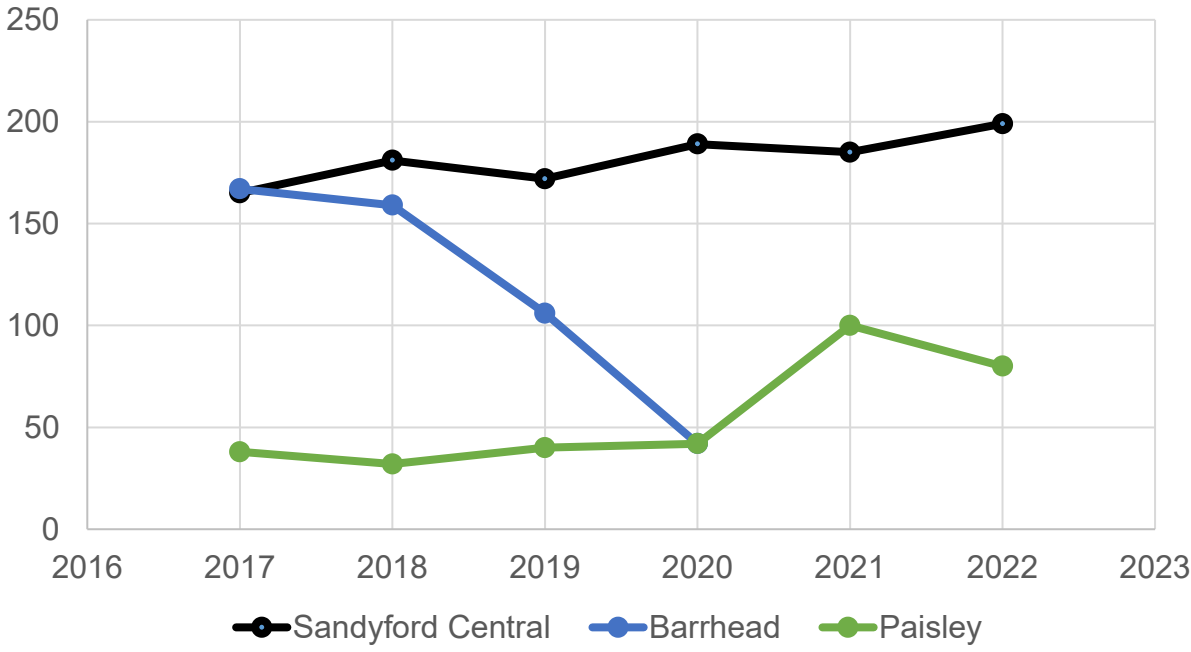


Source: Public Health Scotland Primary 1 Body Mass Index (BMI) statistics Scotland dashboard

Sexual Health

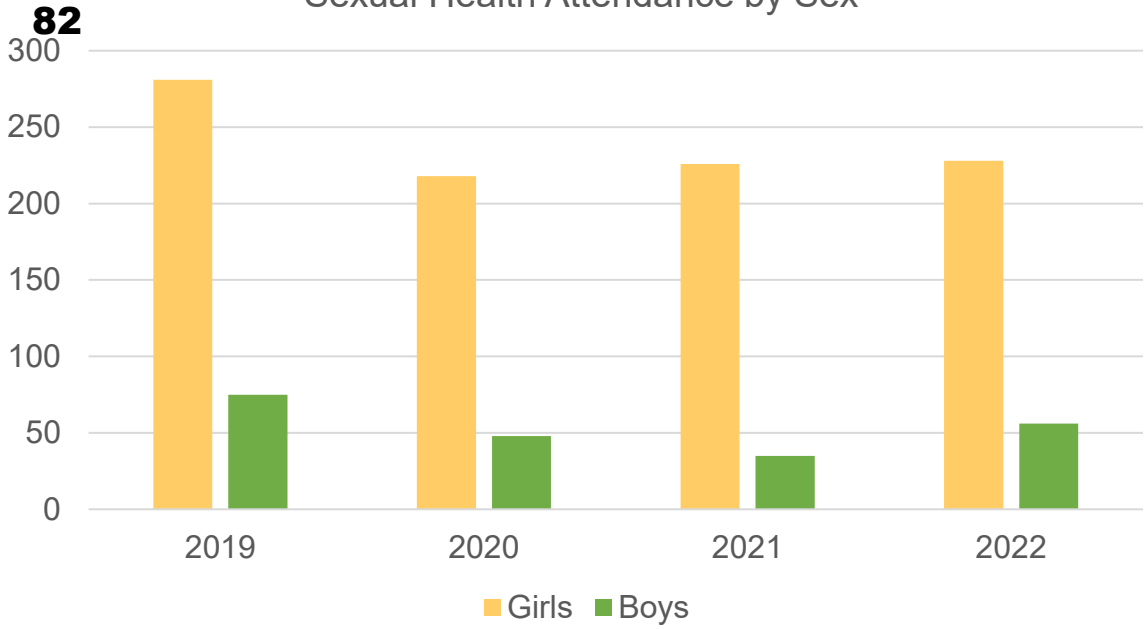
East Renfrewshire has seen a reduction in young people (aged 20 or under) attending sexual health clinics, which is consistent across the board in NHS GGC. This is partially due to COVID-19, but the drop-off in numbers proceeded the pandemic and so this is not the sole factor. It is thought that young people either do not know about sexual health services (despite campaigns to promote the services), or are experiencing barriers to access the services that are in place.

Where East Renfrewshire Young People attend Sexual Health Clinics



Source: NHS GCC Health Improvement (Sexual Health) Team

Sexual Health Attendance by Sex



Source: NHS GCC Health Improvement (Sexual Health) Team

Young people in East Renfrewshire are particularly challenged, in that the Barrhead clinic was closed in 2020, during the COVID-19 pandemic and, as yet has not re-opened. Therefore young people are required to travel to other areas to access services. The opportunity to introduce a new Sandyford outreach clinic for young people in East Renfrewshire is currently being explored.

Services will be promoted locally by our health improvement team in partnership with the community learning and development team by linking with schools and other youth services. Work is already underway to increase access to free condoms, including at local culture and leisure venues. Consideration must also be given to building on recent improvements in boys attending.

Community Learning and Development

Detached Youth Work

Detached work undertaken by ERC Community Learning and Development is a method of youth work where youth workers engage with and support young people on the streets and in other locations where they congregate. Youth workers establish positive relationships with young people and provide them with confidential advice, information and support. Since the pandemic, the data we have gathered has shown that the main priority issues for young people include;

- mental health and wellbeing (exam stress, poor sleep, anxiety)
- education, employment and training
- drugs/alcohol
- sexual health and relationships (friendships, sexual relationships, family relationships, LGBTI)
- crime, youth disorder, anti-social behaviour and its consequences.

Youth work also provides opportunities for sign posting when relevant to organisations/agencies who can provide additional more specialised support including Healthier Minds, Work East Ren and Sandyford etc.

Diversionsary

Due to the increased number of young people gathering in local communities and the lack of opportunities for young people to socialise during COVID-19, there was a rise in both perceived and actual antisocial behaviour. In response to this CLD delivered a programme of activities to divert young people from risk taking and antisocial behaviour, this included the return of youth clubs, school holiday provision and outdoor learning.

Year	Number of contacts made	Number of young people participating in diversionary activity
August 20 – July 21	4822	228 (additional funding through Summer of Fun)
August 21 – July 22	3089	202
August 22 – Feb 23*	1002	210

Source: East Renfrewshire Community Learning and Development Team

Note: *Data available is a partial year as reporting is done on academic years

Safer Choices

Through our engagement with young people involved in ⁸⁴CLD activity and data collected by partners, we continue to encounter a high number of young people participating in risk taking and antisocial behaviours. In response to this, we have proactively developed an early intervention/prevention programme to provide young people with information, skills and support to reduce potential harm and make informed choices around their risk taking behaviour.

The programme is flexible and needs-led and focusses on topics including: Alcohol, drugs, consent and respect, antisocial behaviour and the law, knife crime and smoking/vaping. This can include specialist partner input. 65% of young people involved in the initial pilot programme said their behaviour had changed as a result of the knowledge and understanding the programme has given them. 85% plan to make safer choices.

Learning and achievement

Since 2020 the focus of work with young people was mainly on Health and Wellbeing to support young people to address the impact of the challenges they faced during the pandemic. However during this time, we were still able to support young people to gain a range of accredited awards, recognising their learning and skills development through participation in CLD programmes. Reducing the poverty related attainment gap will remain a key priority for our work with young people in schools and in the community.



Active Schools National Monitoring Information

COVID-19 had a profound effect, with social distancing and restrictions on movement resulting in a complete overhaul of the way many people get active. Throughout the pandemic, the Active Schools Team provided in school support to deliver outdoor group activity for pupils which allowed teachers to focus on the education of pupils throughout this difficult time. The team also partnered with the wider Sports Development Team to deliver school holiday activity camps for key worker children and young people and vulnerable children and young people.

Worryingly, existing inequalities in sport and physical activity participation have been exacerbated by the COVID-19 pandemic. Those from the least affluent households remain the least active and this gap has widened. This problem has increased since COVID-19 emerged and there's a risk of it becoming a longer-term trend if it's not addressed. Active children have higher levels of mental wellbeing and this illustrates the role that sport and physical activity can play in supporting them amid rising levels of loneliness and declining mental health.

COVID-19 had a major effect on our local sports clubs, with some of our clubs still not able to function at the same level pre COVID-19, with many of their coaches and volunteers no longer available to them. Consequently, our engagement with clubs has been greatly reduced, effecting deliverer numbers as well as links with clubs.

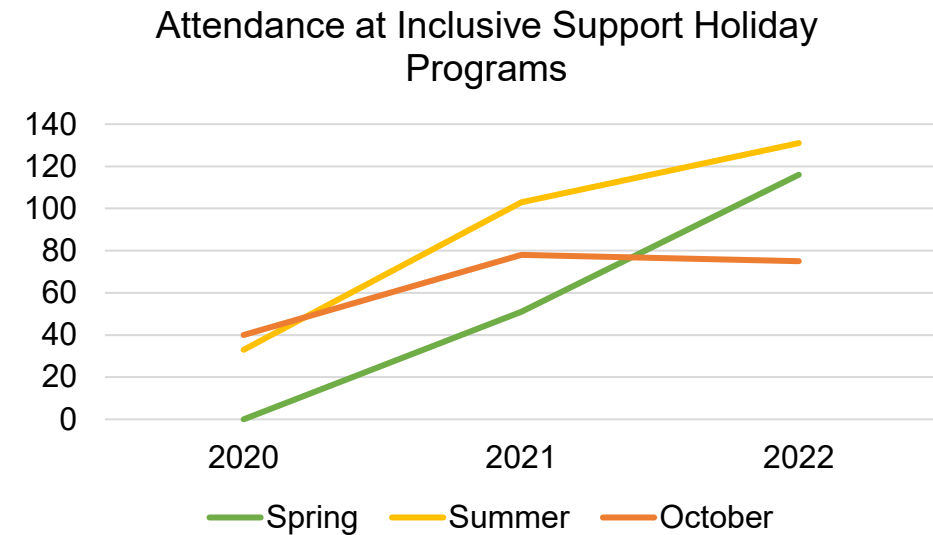
It is hoped that as we all (schools & clubs), look to recover from the pandemic, we will strive to offer more sport and physical activity opportunities for the young people of East Renfrewshire through after school clubs, ERCL sports coaching programmes and local sports club activity. We are undertaking targeted work in the summer school holidays to provide opportunities for children and young people from low income households with free access to activity camps.

	2018-19	2021-22	Decrease due to Pandemic
Distinct Participants	8195	6216	1979
% of school roll	48%	35%	13%
Visits	168,527	107,036	61,491
Deliverers	409	302	107
Clubs linking with schools	44	10	34

Complex Additional Needs

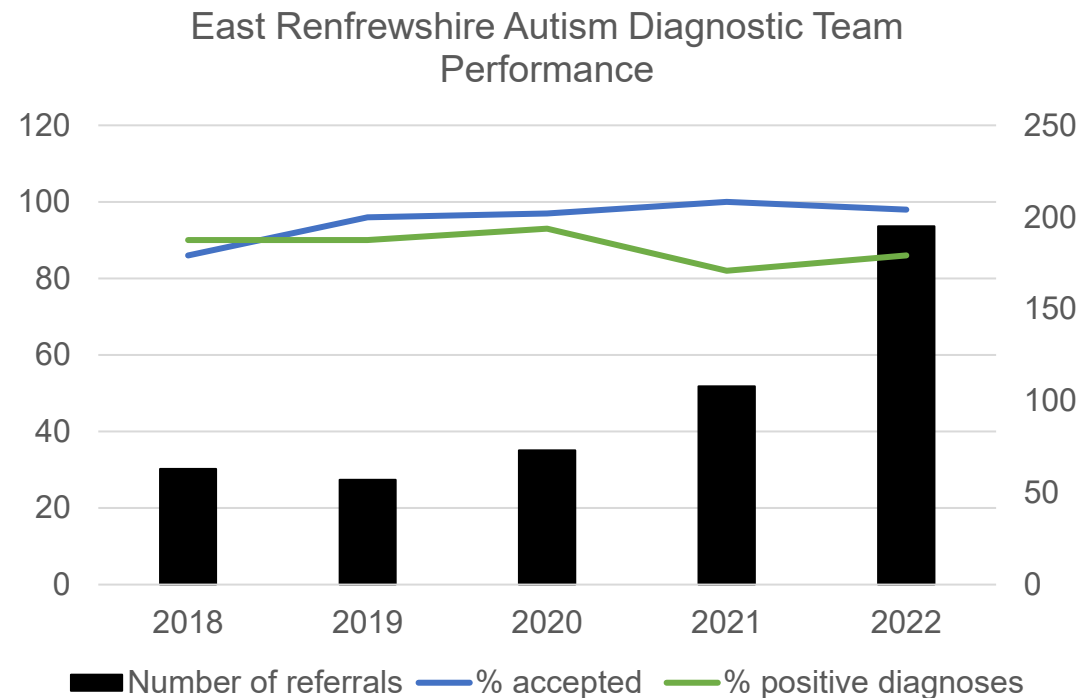
Inclusive Support Holiday Programme

Normal operating arrangements for the service were suspended in response to the COVID-19 pandemic. Charges for the service were suspended and normal provisions were adjusted to allow for targeted supports to be provided for an increased number of children and young people identified by a multi-agency group. The significant increase in numbers may well be reflective of thresholds for children with neurodiversity changing over the pandemic. Looking forward, the impacts remain somewhat unknown.



Source: East Renfrewshire Inclusive Support Service

East Renfrewshire Autism Diagnostic Team



Source: East Renfrewshire Autism Diagnostic Team

Despite a significant increase on referrals over recent years' there has been no reduction in the quality of the referral. Referrals increased by 81% in 2022, compared to 2021.

The wait times for assessment is currently 14 months. Modelling based on current resource will place this at approximately 4yrs 6mths in one year's time if no additional resource is allocated.

Young Carers

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- 240 young carers known to East Renfrewshire Carers Centre
- 134 young carers have received support in the past year
- 25 young carers have completed Young Carer Statement
- 96 young carers care for an adult

Parent Carers

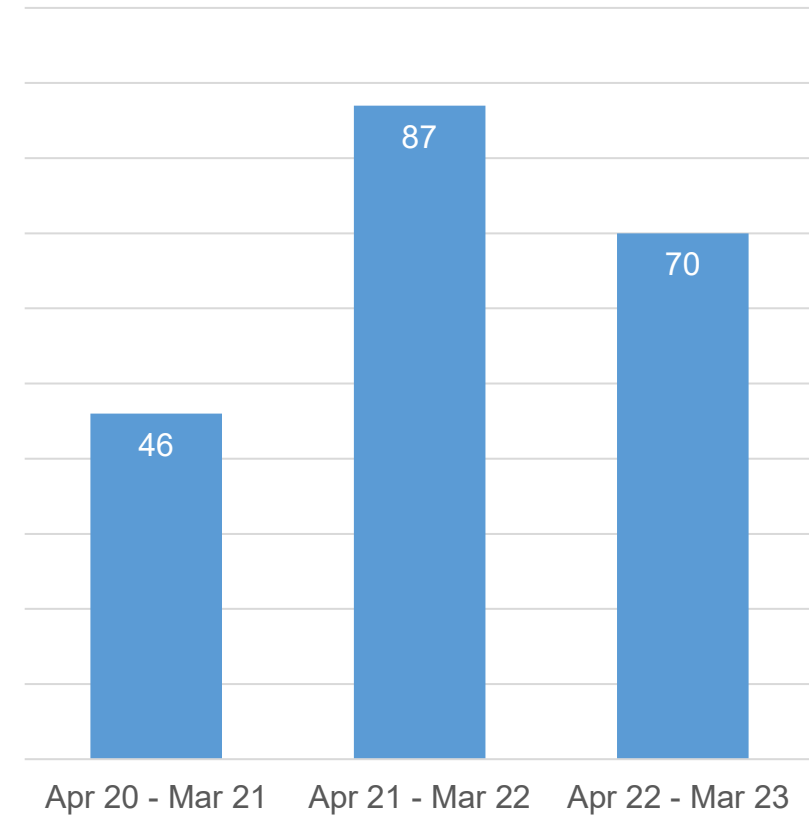
- 546 parent carers for a young person 18 or under

Source: East Renfrewshire Carers Centre

Year	Number of young carer grant payments	Percentage of total payments
2019/20	35	3%
2020/21	50	2%
2021/22	45	2%
2022/23	50	2%

Source: Social Security Scotland statistics

New young carer referrals



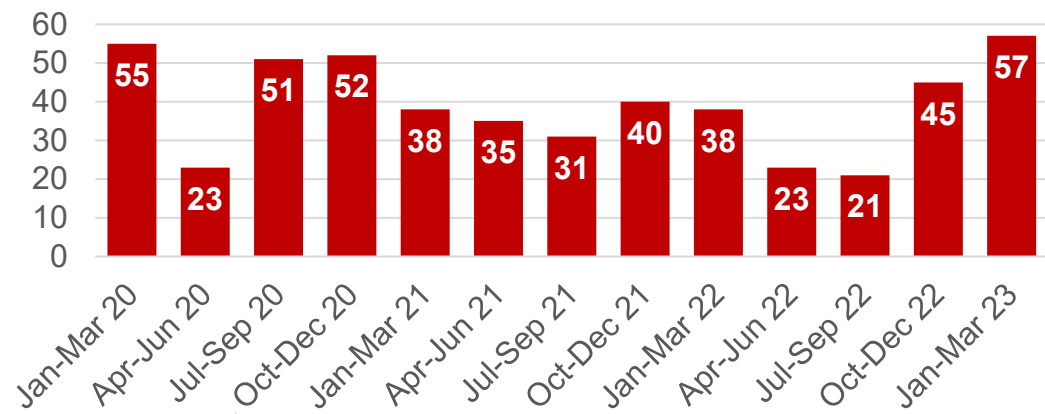
Source: East Renfrewshire Carers Centre

Family Wellbeing Service (ERHSCP partnership with Children 1st)

The service is now available to all 15 GP practice's in East Renfrewshire, with the majority making good use of the connection. Referrals have been impacted by the pandemic and associated restrictions. The number of referrals per quarter has been variable. However, the most recent data, for January to March 2023, showed the number of referrals reach a new peak of 57.

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Family Wellbeing Service Referrals

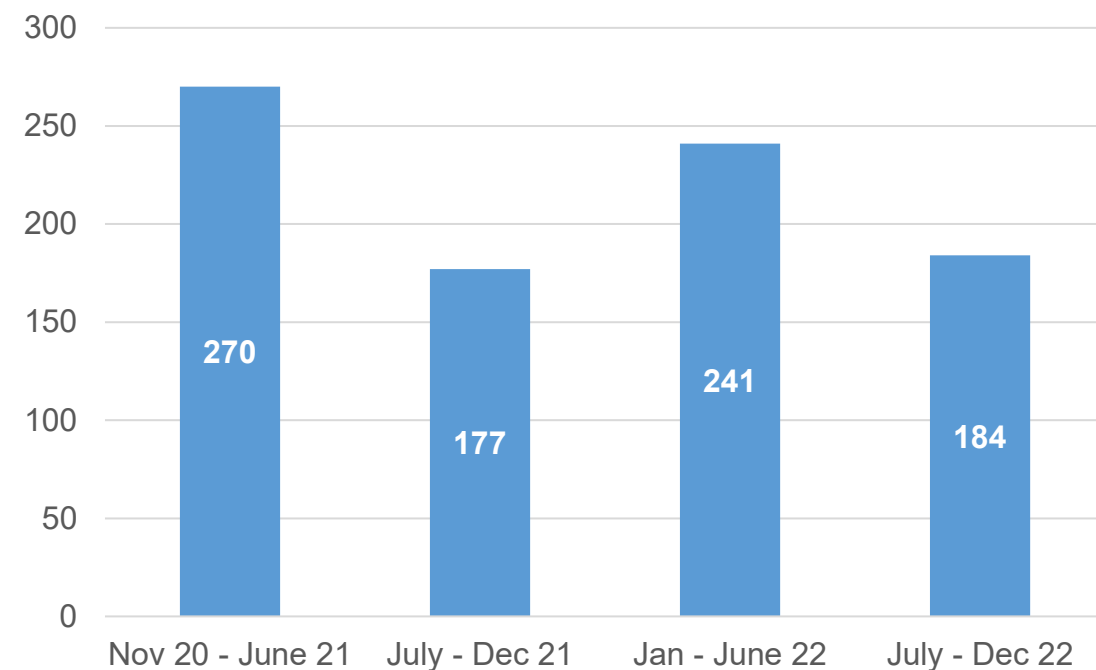


Source: Children 1st

Healthier Minds

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Our Healthier Minds multi-agency Screen Hub coordinates and assesses offers of emotional wellbeing support for children & young people aged 10-18 years olds.



Source: East Renfrewshire Healthier Minds

From July 2021 to June 2022, 4.3% of our high school pupils were referred to the Healthier Minds Screening hub

Date	Referrals to Screening Hub	Onward Referrals to CAMHS
Nov 20 – June 21	42	0
July – Dec 21	23	*
Jan – June 22	11	12
July – Dec 22	23	*
Total	99	18

Source: East Renfrewshire Healthier Minds

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- One-third of referrals are male and just under two-thirds are female, with a small proportion of referrals identifying in another way
- The reasons for referral have remained the same since the service began; anxiety, low mood (including suicidal ideation) and emotional regulation. The number of children and young people referred for self-harm support is increasing
- 29% of the children and young people being referred for emotional wellbeing support have one or more additional support need
- 17% have a neurodevelopmental diagnosis, of these children and young people 13% are diagnosed with autism spectrum condition.
- An additional 6% of children and young people being referred, have ASC related traits without a diagnosis
- 19% of the children and young people referred are from 'at risk' groups*
- 9% of children and young people referred to the hub identify as BAME
- 34 care experienced children and young people have been referred to the screening hub for support, with 7 children and young people being re-referred

**those at higher risk of mental health issues which may include Care Experienced, Young Carers, BAME, Domestic Abuse Concerns, LGBT+ (As suggested in the Scottish Government: Children & Young People Mental Health Community Grant - reporting template)*

Child and Adolescent Mental Health Services

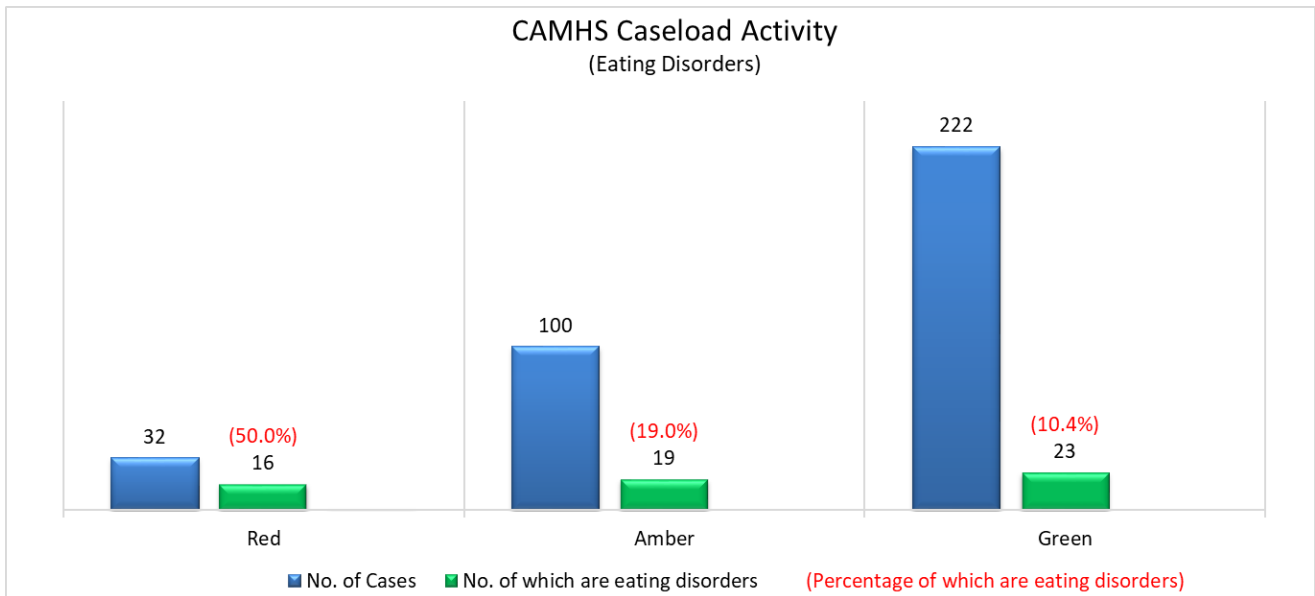
East Renfrewshire mental health demographic is consistent with national trends that highlight a 30% increase in general referrals since the beginning of COVID-19. Whilst increase in urgent referrals have increased this may be a reflection of longer waiting times rather than acute need.

However, we can be certain that there are two major increases in need within East Renfrewshire, other than increase in numbers. First is an increase in numbers and severity of symptoms in children and young people with atypical anorexia and an increase in restrictive eating in children and young people with autism who exhibit restrictive eating patterns.

Second, is the number, severity and complexity of children and young people on the autism spectrum who have a significant co-morbidity. It should be noted that these children and young people whilst requiring a health response always require significant supports from social care and educational service.

East Renfrewshire CAMHS Team received 1,044 referrals from January 2022 to February 2023 and have 340 children and young people awaiting assessment and intervention for the Neurodevelopmental Pathway.

NHS GGC adopted a Red, Amber, Green model that was used throughout the eight CAMHS teams during COVID-19 which has continued. It is important to note that this can change daily dependent on patient need and risk level. The figures up until 28/02/23 can be seen in the table opposite.



Source: Child and Adolescent Mental Health Services (CAMHS)
Note: **29**
 - Red = significantly impaired mental health/life threatening
 - Amber = significant to moderate mental health/potential life threatening
 - Green = Non-life threatening/neurodevelopmental cases

Alcohol, Drugs and Mental Health

The alcohol and drugs recovery service supports people with harmful alcohol/drug use. The Adult Mental Health Team (AMHT) treats people with severe and enduring mental health conditions, such as bipolar disorder, schizophrenia or clinical depression. The Primary Care Mental Health Team (PCMHT) supports people experiencing mild to moderate conditions, including stress, anxiety or depression.

Young People and Mental Health

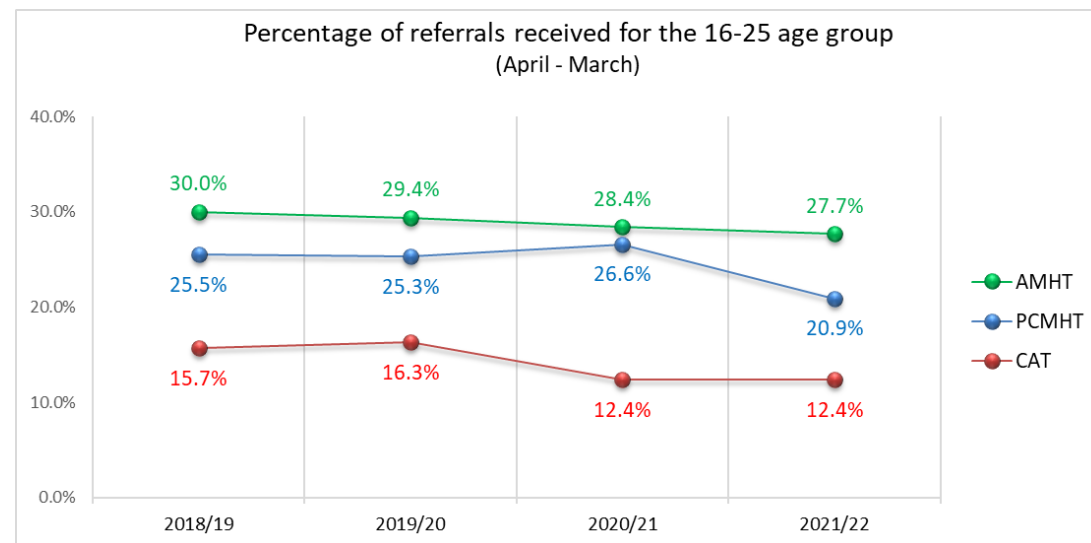
The number of young people aged 16-25 referred to AMHT for more severe and enduring conditions, have stayed at a similar level over the last five years (between

260 and 280 referrals per year). A reduction was observed in 2020/21 (due to the COVID-19 pandemic), though numbers are now returning to pre-coronavirus levels. Within the PCMHT, similarly, referrals for 16-25 dipped during COVID-19. They have increased again in 2021/22, though have not yet returned to pre-coronavirus levels.

Children and Young People and Alcohol and Drugs

Referrals for the 16-25 age group decreased by 39% (61 referrals in 2018/19 to 41 in 2021/22). They are more likely to relate to alcohol and drugs such as cannabis or cocaine rather than opiate drugs. Approximately 6% (n. 26) of the current caseload are aged 16-25, which is lower than the number of referrals received annually, suggesting not all referrals go forward for treatment (they may not meet the level of need treated by the team and may have referred on to other services and supports). The majority of young people currently on the alcohol and drugs team caseload are male (69%) (Source: Drug and Alcohol Information System – DAISy).

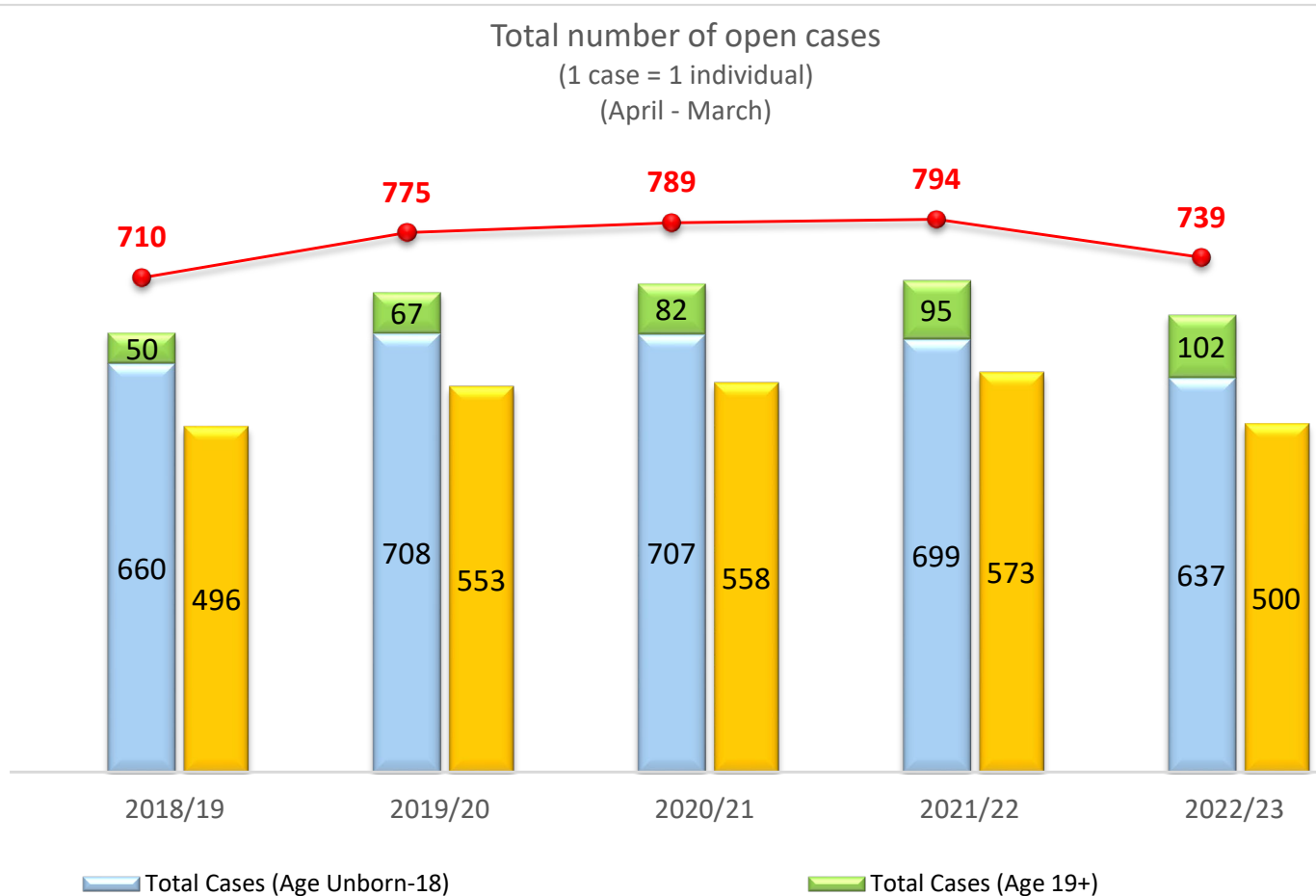
NHS Greater Glasgow and Clyde tracks everyone known to alcohol and drugs teams who present at Accident and Emergency in East Renfrewshire. This shows small numbers (<10) under the age of 20 during 2020 and 2021, and all were male. Data has been extracted from Care First to **estimate** the numbers of dependent children whose responsible adult is engaged with the alcohol and drugs recovery team and as at February 2023 this was **around 70** children aged 0-16. This should be considered as a proxy figure as this is not a mandatory field in the system and the actual number may be higher.



Source: East Renfrewshire HSCP

Children in Need

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Families receiving support from children and families social work on a voluntary basis makes up the majority of the total caseload.

The number of children receiving all types of social work support started to increase during the year before the pandemic and remained understandably high.

The most recent year's figures show a return towards the baseline with 78% of open cases receiving voluntary support.

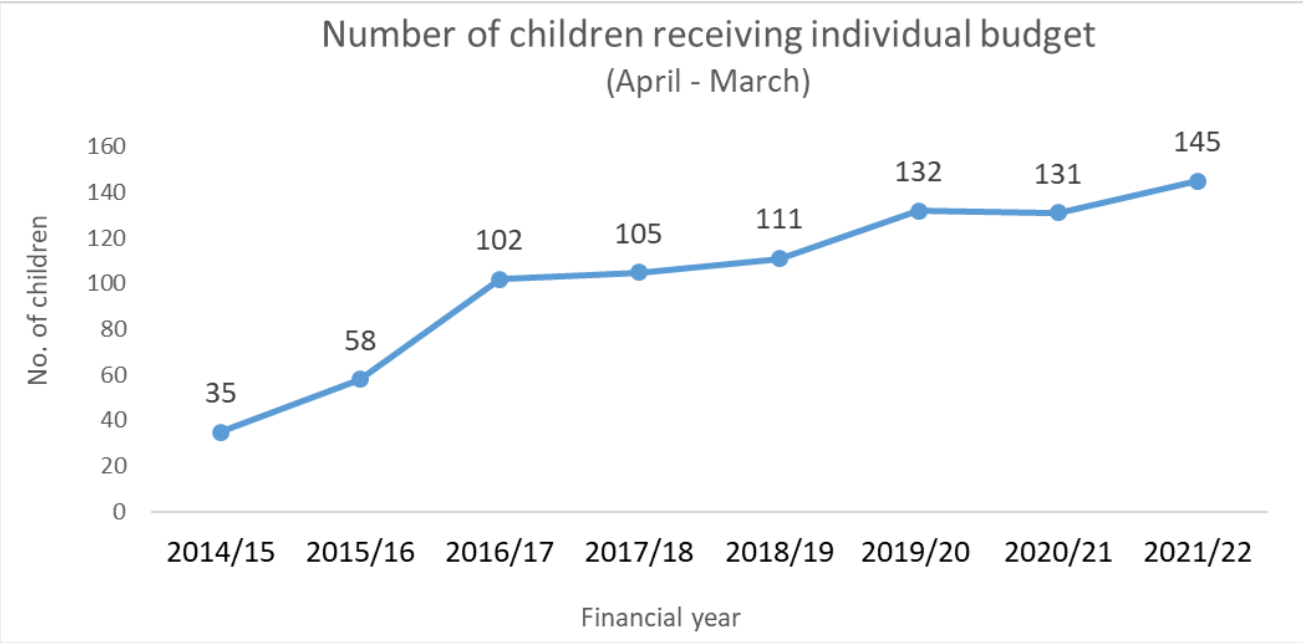
Source: East Renfrewshire HSCP

Note: The chart above represents the total open cases throughout the reporting period (e.g. open as at the start of the reporting period or throughout).

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Self-Directed Support (SDS)

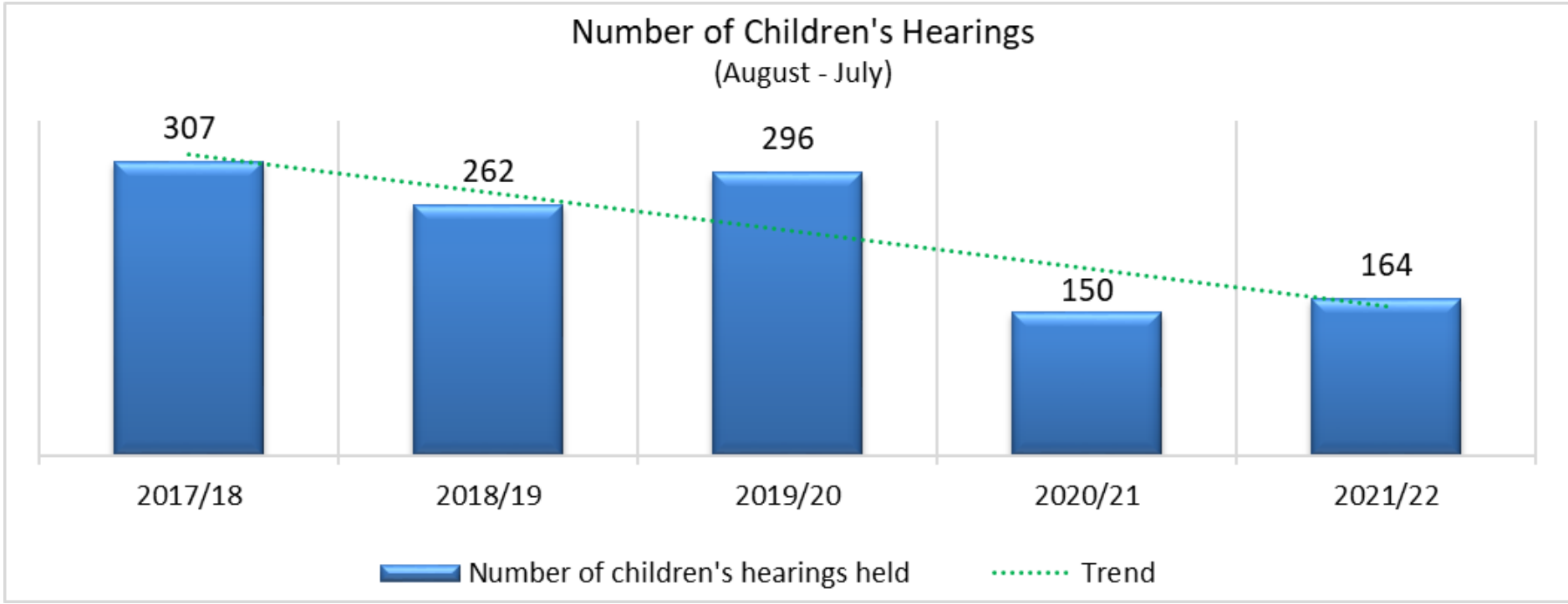
We have adopted the principles of Self-Directed Support (SDS) in partnership with children, their families and other people who are important to them. We recognise that good support planning is reliant on relationship based practice, starting with the family recognising what matters to them, and we are 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.



Source: East Renfrewshire HSCP

The number of children in receipt of an individual budget has quadrupled since 2014/15. In 2021/22, three quarters of children with disabilities 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 1 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.

Scottish Children's Reporter Administration (SCRA)



Source: Scottish Children's Reporter Administration

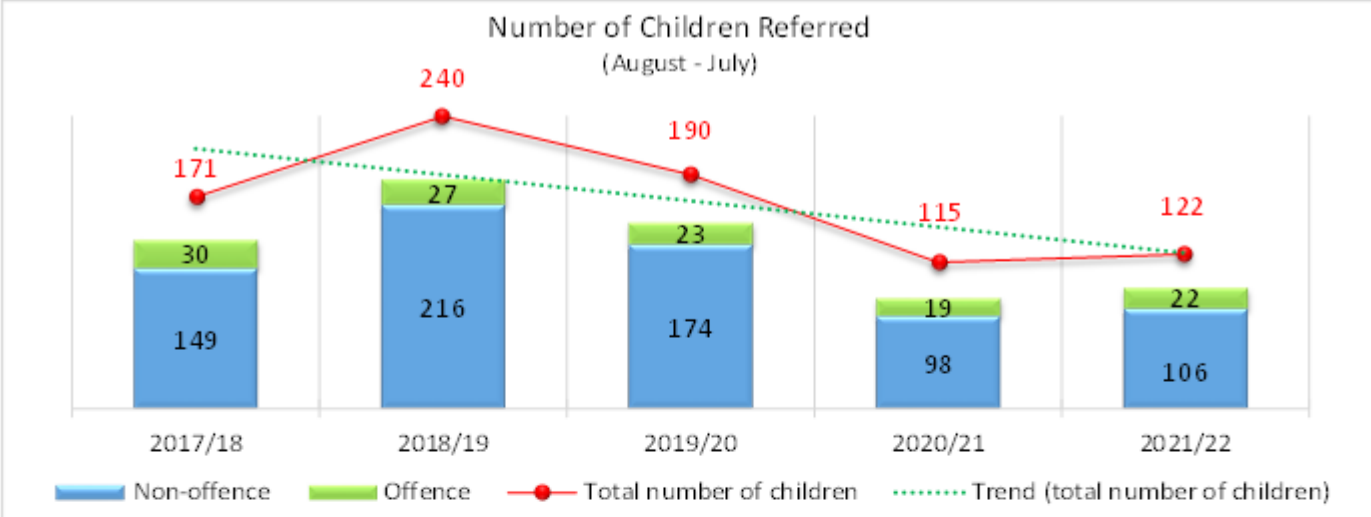
There were 164 Children's Hearings in East Renfrewshire in 2021/22; this is a 9.3% increase when compared to 2020/21 but an overall decrease since 2017/18. The significant decrease in 2020/21 in the number of children's hearings and the number of children referred and referrals received (shown on the next slide) is likely to be due to the COVID-19 lockdowns, at least in part. Referrals to SCRA reduced during this time nationally and emergency legislation allowed SCRA to reduce the number of review and emergency hearings that were required to be held. Figures for 2021/22 show a small increase in both referrals and hearings which is consistent with the loosening of COVID-19 restrictions.

Scottish Children's Reporter Administration (SCRA)

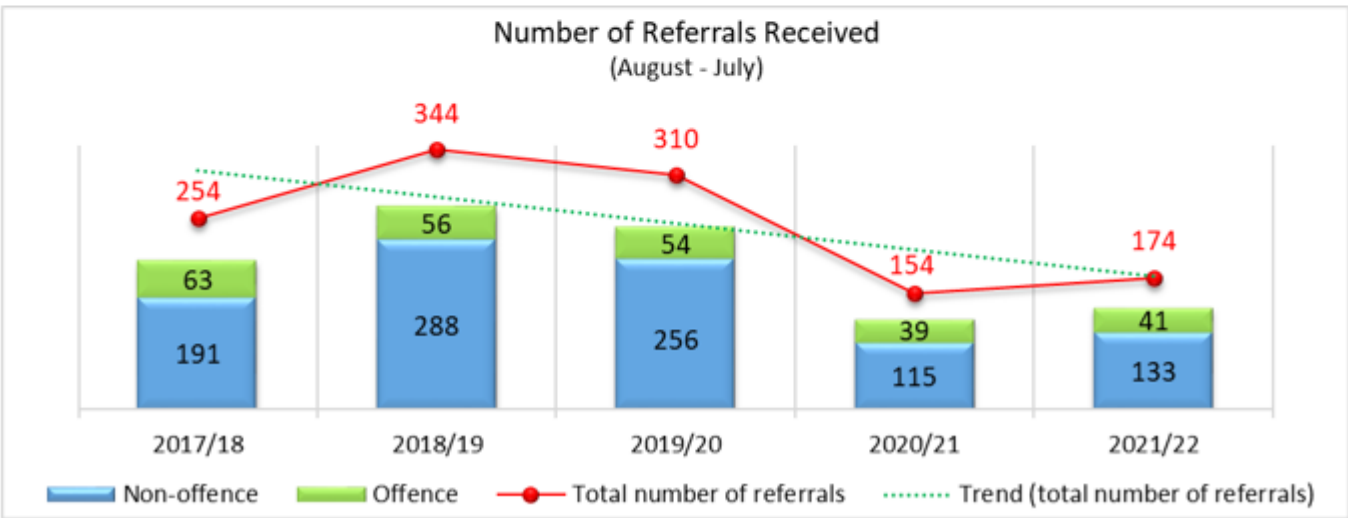
In total, 122 children were referred to SCRA in 2021/22 reflecting a downward trend since 2017/18.

These children were involved in 174 referrals, again this has mirrored the decrease in individual children referred since 2017/18 (254 referrals). Non-offence referrals accounted for some 87% of all children and 76% of all referrals received.

The breakdown of the number of offence and non-offence referrals to the Reporter show that children and young people have overwhelmingly been referred on care and welfare grounds with the most common grounds being "close connection with person who has carried out domestic abuse", followed by "offence".

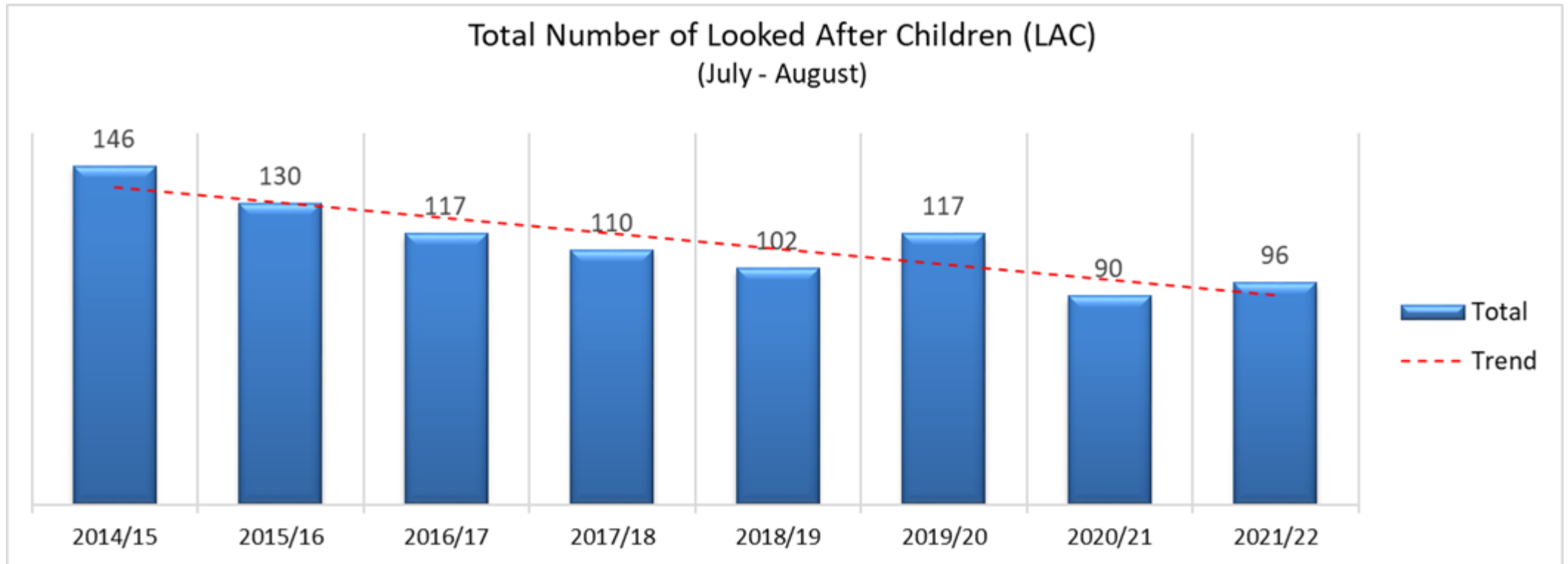


Source: Scottish Children's Reporter Administration
 Note: Children may be referred for both offence and non-offence grounds in a period so may be counted once against each. The total figure counts every child referred to the Reporter during the year once.



Source: Scottish Children's Reporter Administration

Looked After Children and Young People

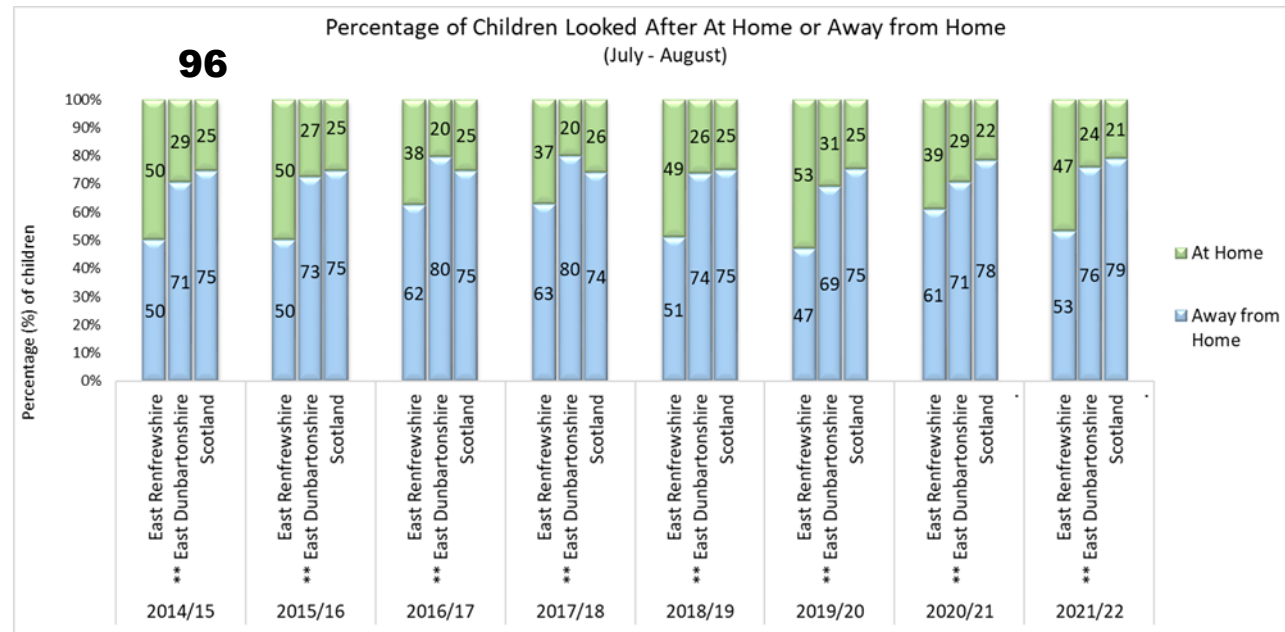


Source: Children's Social Work Statistics, Scottish Government

The long-term trend has seen the number of children and young people who are looked after at the end of the reporting period decrease from 146 in 2014/15 to 96 in 2021/22.

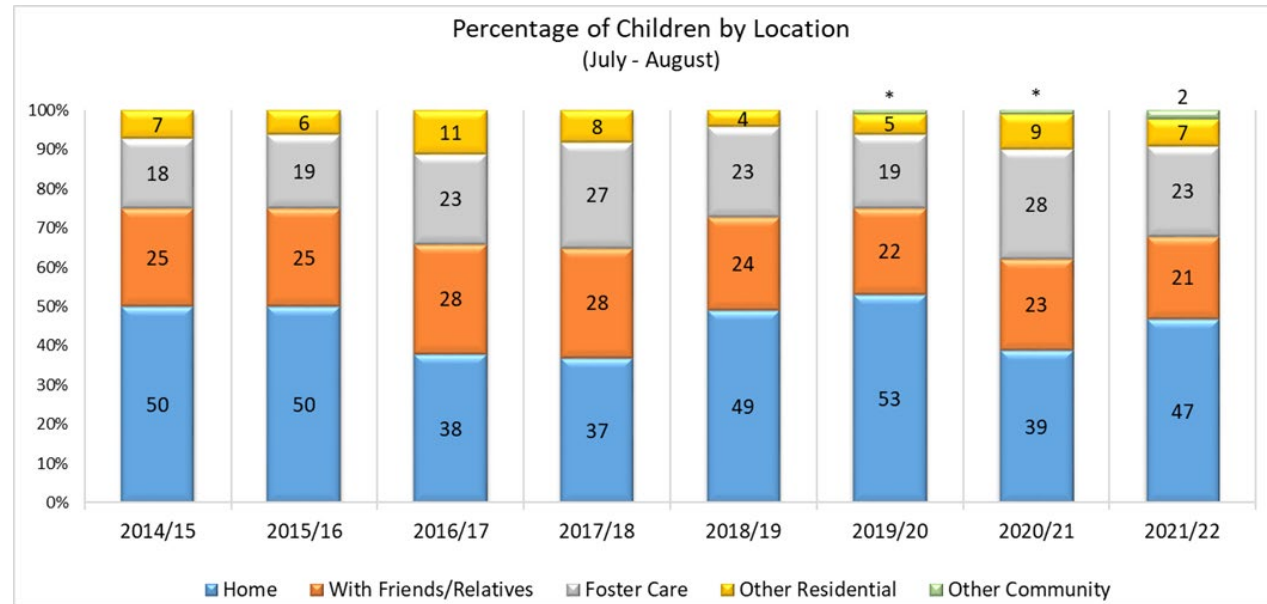
Looked After Children and Young People

The proportion of children looked after at home and away from home has fluctuated over the past seven years. However, in comparison with our nearest comparative authority and the national figure we continue to keep more children at home. The impact of the pandemic is evidenced in the increase of those children who became looked after away from home. These children were predominately those affected by neurodiversity.



Source: Children's Social Work Statistics, Scottish Government

Note: ** Comparative local authority.

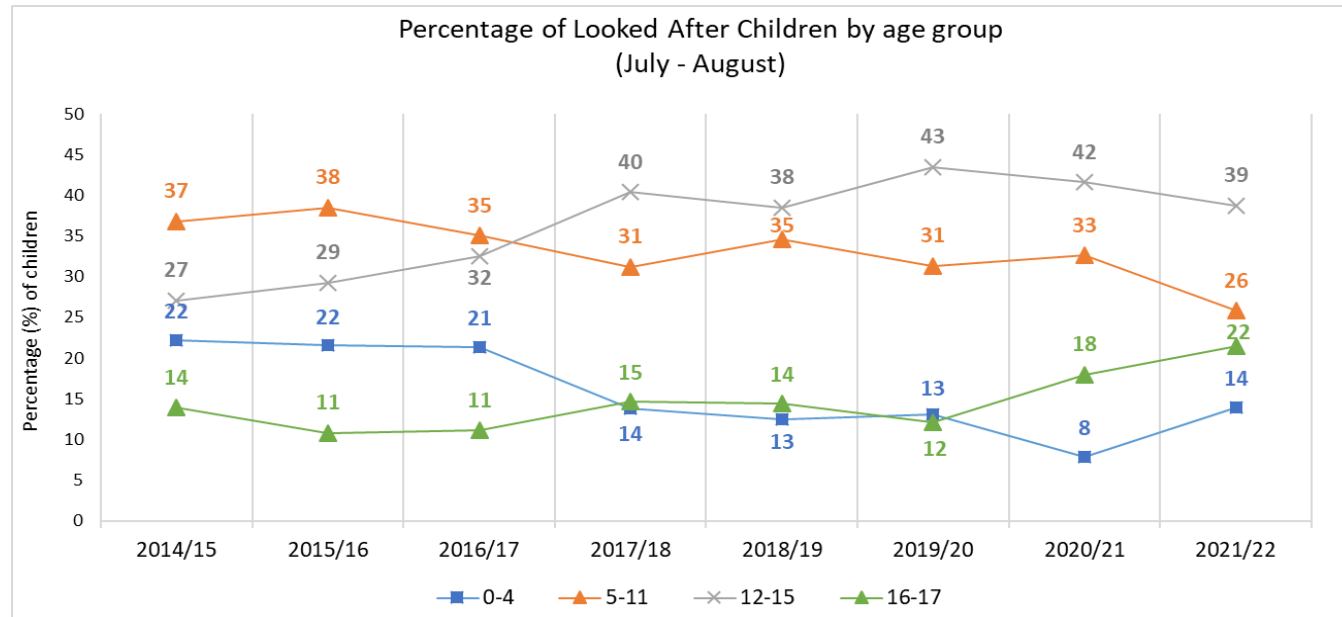


Source: Children's Social Work Statistics, Scottish Government

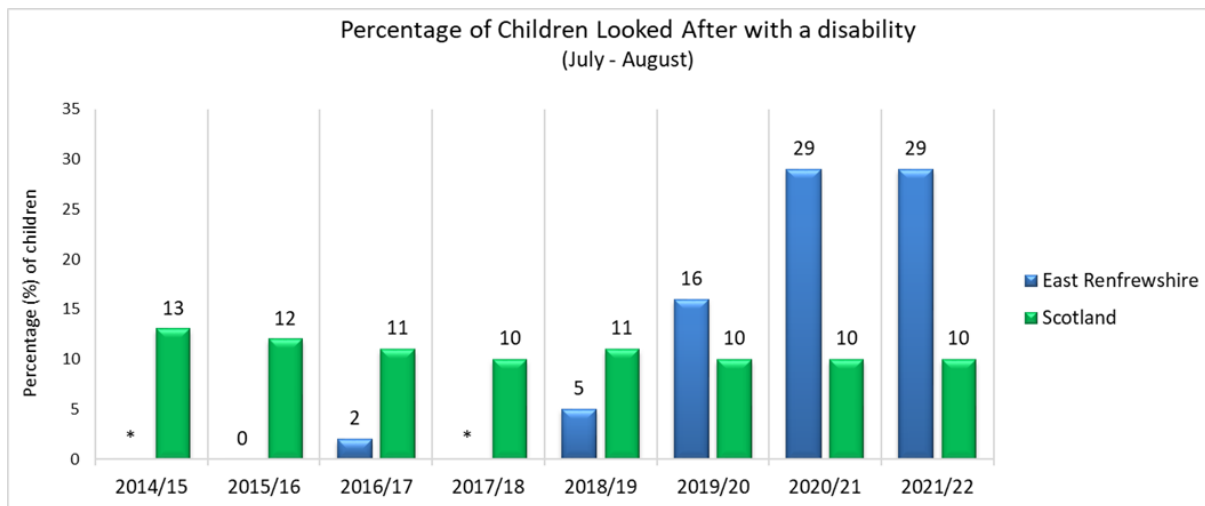
Note: Cells containing * represent small numbers that are suppressed to maintain confidentiality.

Looked After Children and Young People

The 12-15 age group now accounts for 39% of children looked after at the end of the reporting period compared to 27% in 2014-15 and the 0-4 age group has decreased from 22% to 14% over the same period.



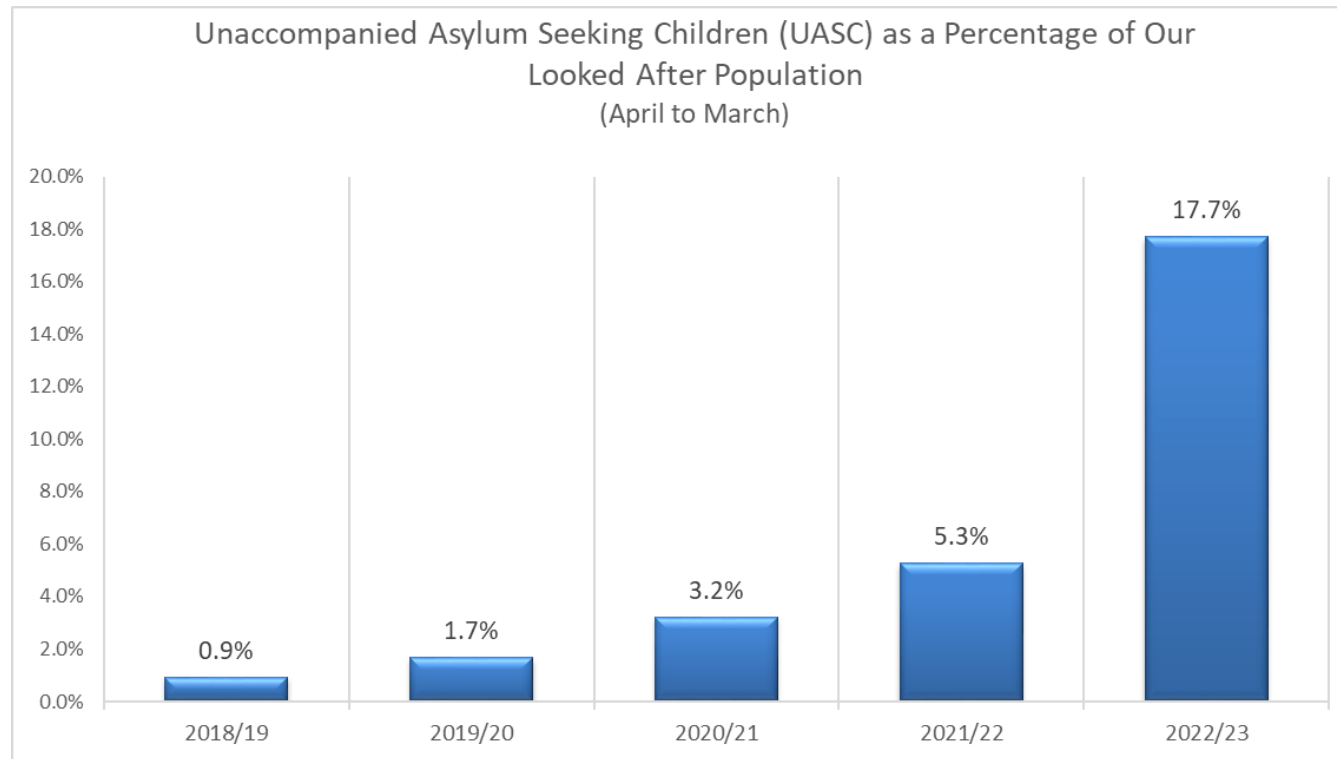
Source: Scottish Government, Children's Social Work Statistics
Note: Percentages refer to ages 0 to 17.



Source: Children's Social Work Statistics, Scottish Government
Note: Cells containing * represent small numbers that are suppressed to maintain confidentiality.

Both nationally and locally there are difficulties with recording information in relation to disability therefore comparisons to national data may be misleading. In East Renfrewshire we have undertaken work to help us understand our looked after children and young people and accurately record disability. The significant increase in 2020/21 and 2021/22 is a result of both improved recording and the impact of the pandemic.

Unaccompanied Asylum Seeking Children and Young People



Source: East Renfrewshire HSCP

Note: Annual percentages are based on the number of looked after children at the end of the reporting period and the cumulative number of UASC since 2018/19.

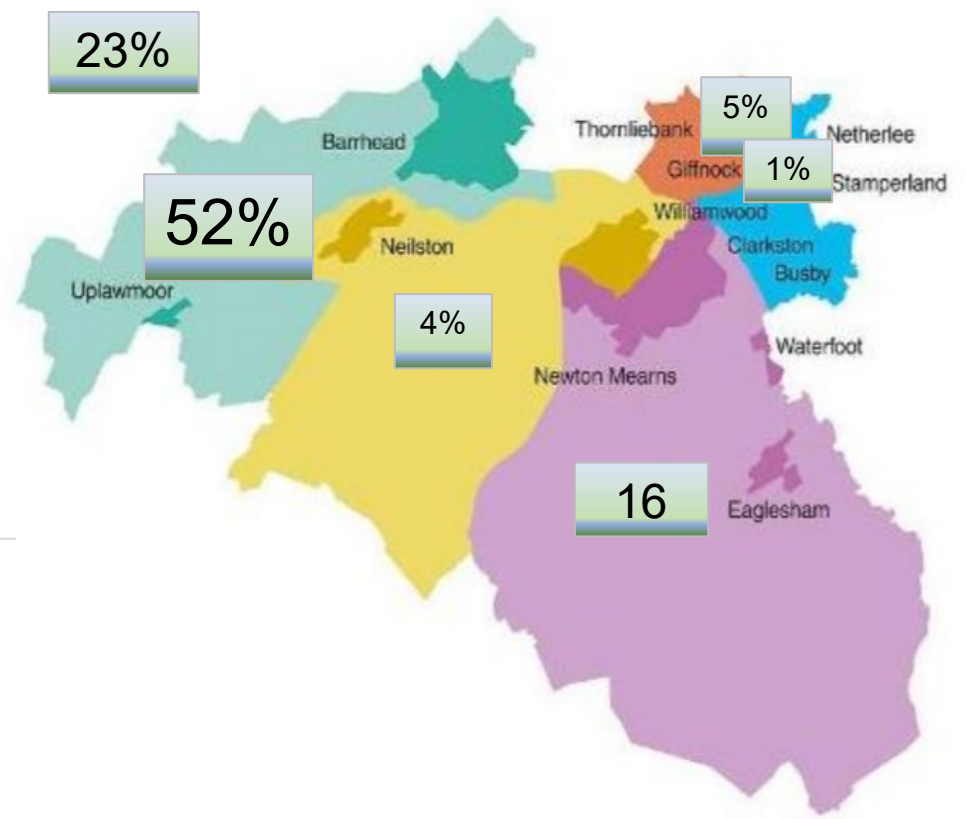
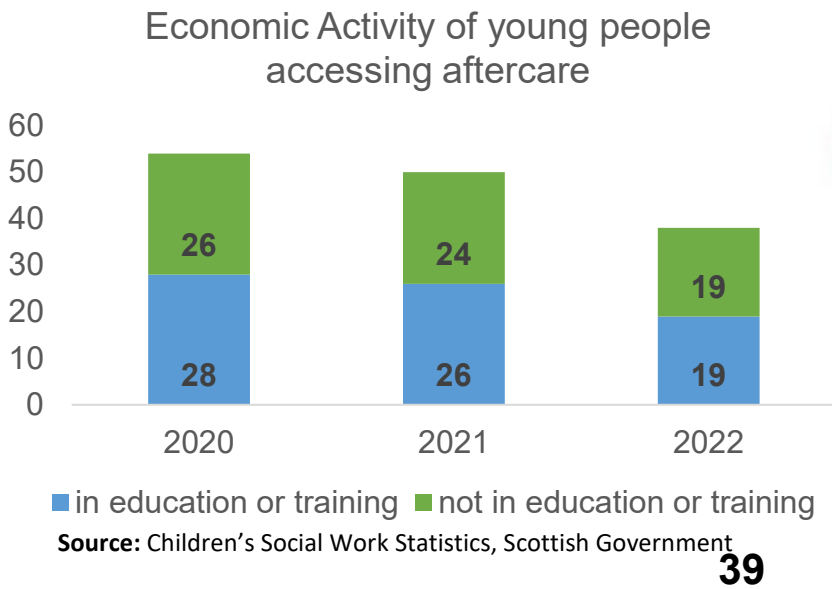
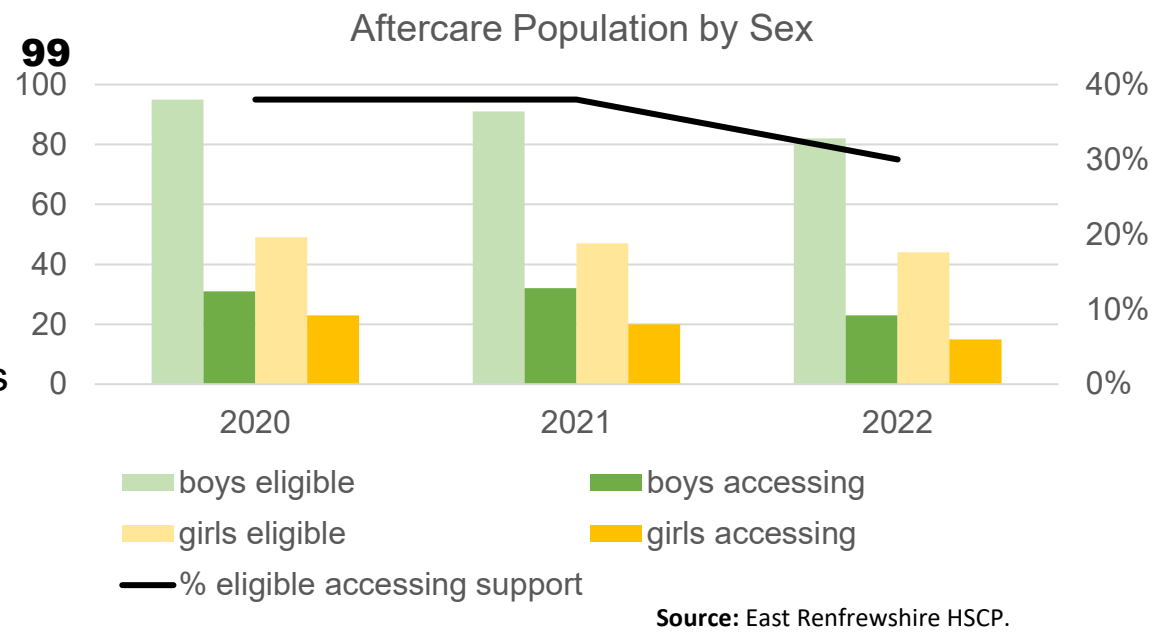
Since the mandate of the National Transfer Scheme in November 2021 the proportion of Unaccompanied Asylum Seeking Children (UASC) in our looked after population has risen significantly and is predicted to continue to increase.

Aftercare

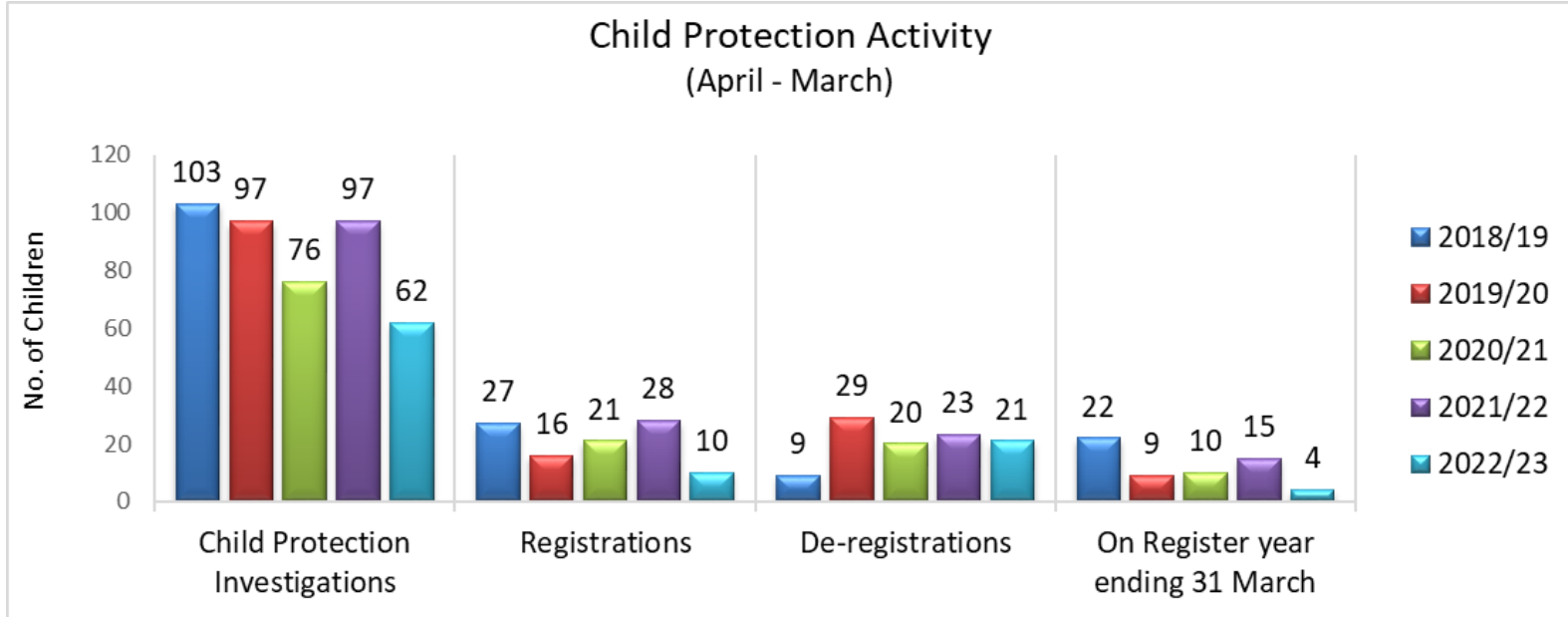
With continued focus on timeous intervention alongside improved confidence in our data, the aftercare population in East Renfrewshire has decreased and we expect it to continue decreasing across the next few years. In the last year we have seen a reduction in the proportion of young people accessing support. This is as a result of the increased support needs of our aftercare population during the pandemic which are now returning to pre-pandemic levels.

As part of work undertaken to improve transitions to adulthood for our care experienced young people, it was identified that more than half of our aftercare population live in the Barrhead area and almost a quarter live outwith East Renfrewshire.

The economic activity of young people accessing aftercare has remained relatively consistent in the snapshot data taken on 31st July each year. This is encouraging given the challenges of the past few years.



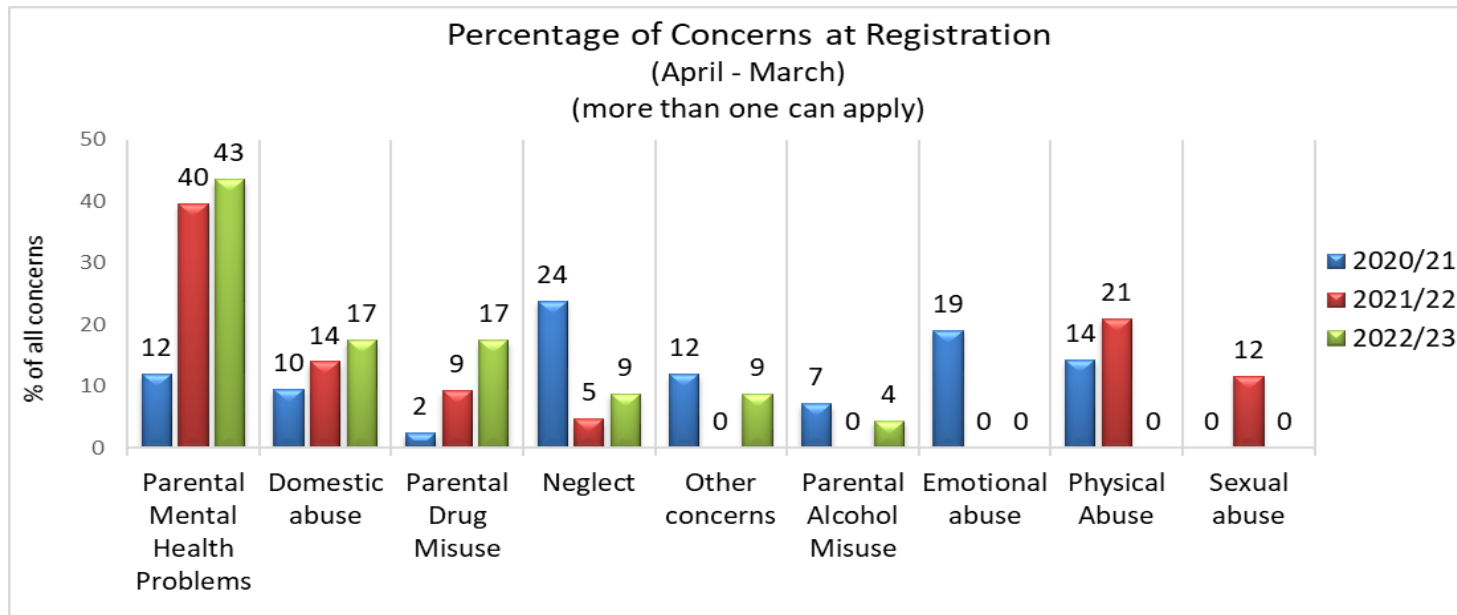
Child Protection



Source: East Renfrewshire HSCP
Note: A child may be counted more than once during the reporting period.

From 2018/19 to 2022/23 the percentage of children who were registered as a result of a Child Protection Investigation decreased from 26% to 16%.

Our total number of children registered in 2022/23 decreased from 2018/19. This decrease could be attributed to the ongoing implementation of the Signs of Safety approach allowing us to work with families in a more strengths based way. The data includes the whole of the COVID-19 pandemic and lockdown which may have had an impact on child protection registrations.



Source: East Renfrewshire HSCP

A child can be placed on the child protection register with more than one concern noted. Parental Mental Health is currently the highest concern at the point of registration followed by Domestic Abuse and Parental Drug Misuse.

Scottish Child Interview Model (SCIM)

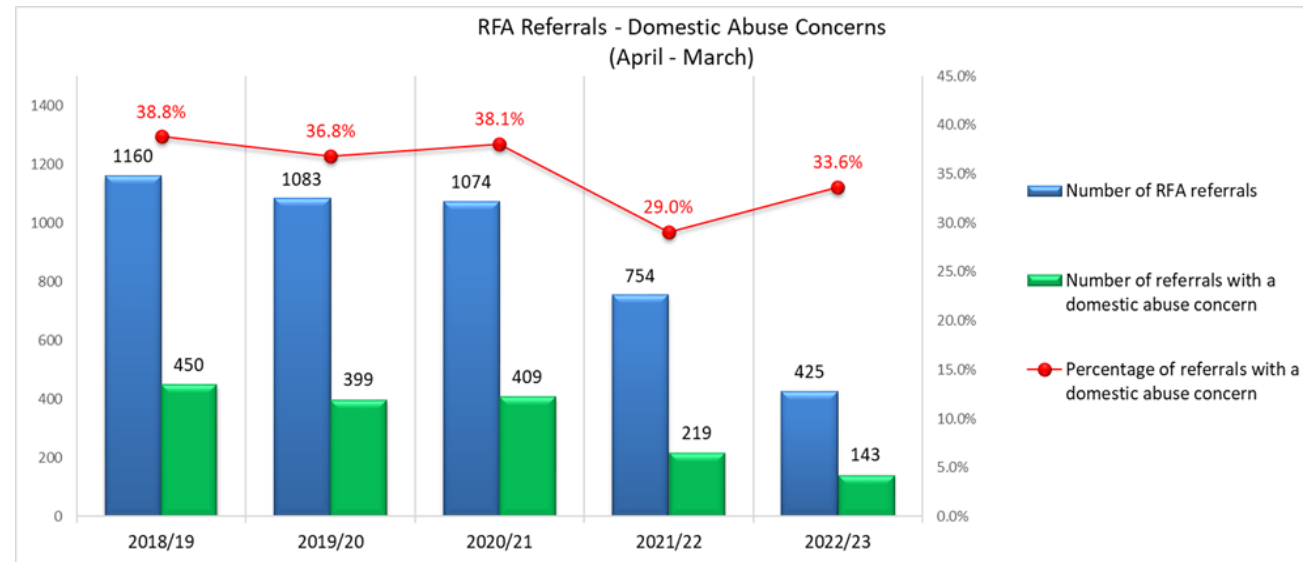
North Strathclyde Partnership which includes East Renfrewshire Council went live on the 10th August 2020. Children and young people are jointly interviewed by a trained social worker and police officer under the new Scottish Child Interview Model. During the first two years of operation 94 children who were referred and reside within East Renfrewshire progressed to a joint investigative interview. The main primary concern across both years were physical abuse/assault, followed by offences under the Sexual Offences Scotland Act 2009 (SOSA), followed by domestic abuse. There were significant increases in year two in respect of these three concerns; 28.5% increase in physical abuse/assault, 77% increase in sexual offences under SOSA and 44% increase in domestic abuse.

Domestic Abuse

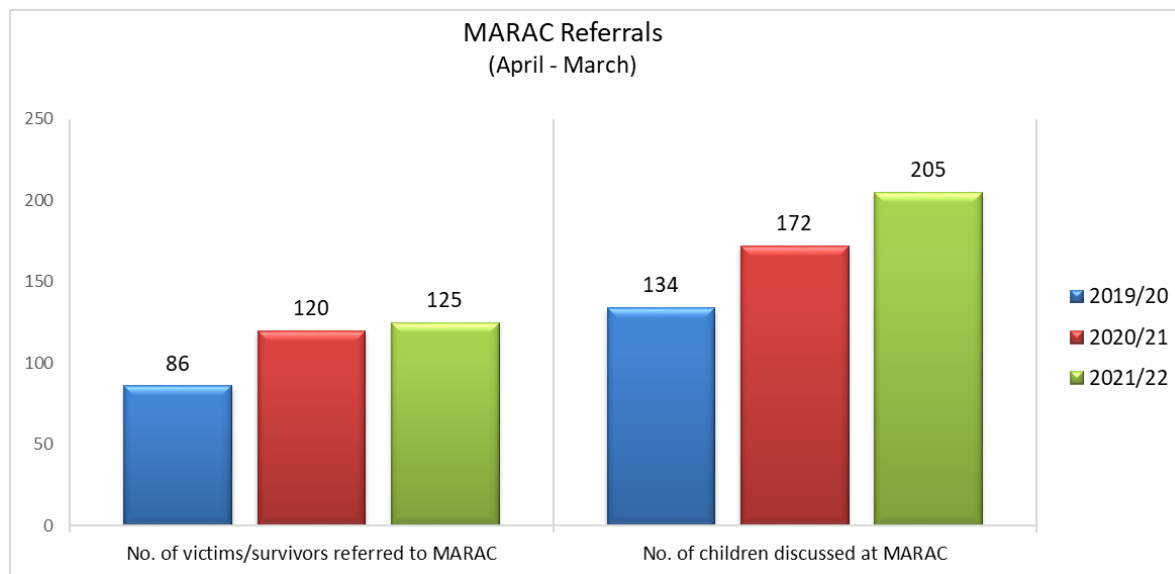
Request for Assistance (RFA)

Domestic abuse remains the main concern for referral to the Request for Assistance Team which screens all new referrals into Children's social work services. Across each of the five years, domestic abuse was noted as a primary or secondary concern for 38.8% of referrals (2018/19), 36.8% (2019/20), 38.1% (2020/21), 29.0% (2021/22) and 33.6% (2022/23). This overall reduction mirrored the reduction in referrals to RFA. The number of domestic abuse enquiries has increased from 130 (2021/22) to 313 (2022/23) an increase of 140.8%.

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Source: East Renfrewshire HSCP



Source: East Renfrewshire HSCP

Multi Agency Risk Assessment Conference (MARAC)

Referrals to MARAC for women and children have increased significantly over the last three years of operation (31% women and 53% for children respectively). This increase reflects that core agencies are more aware of MARAC and the referral process. Police Scotland remained the main referrer, followed by Children and Families Social Work, Women's Aid, ASSIST and then Adult Social Work. Of the 205 children discussed at MARAC in 2021/22, 27% were under the age of 5 years-including Pre-Birth, 43% were aged between 5-12 years, 21% were aged between 13-15 years and 9% were aged between 16-18 years.

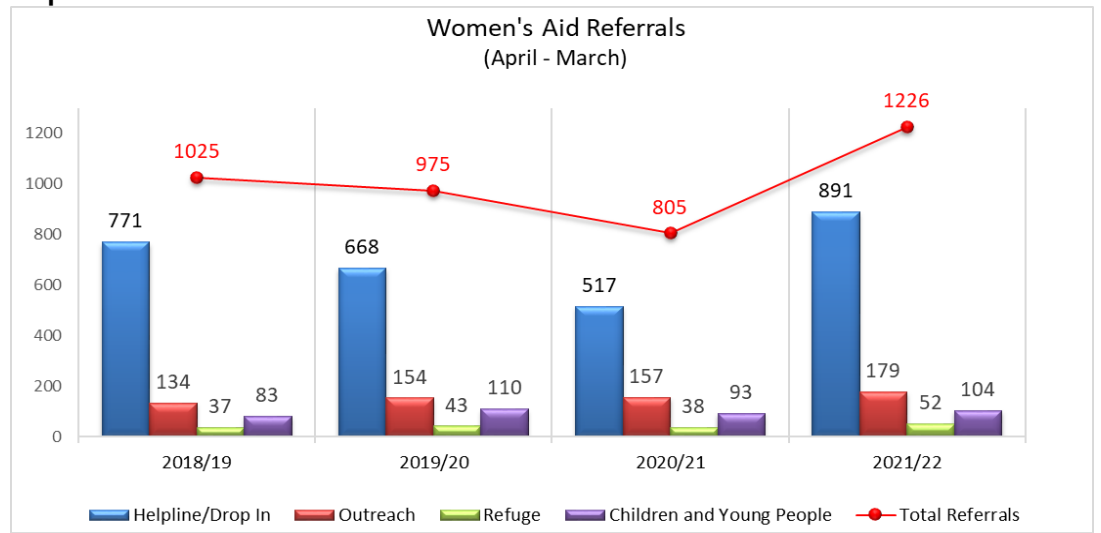
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Women's Aid

The demand for refuge, outreach support, children and young people's support and advice/drop-in has increased significantly over the last four year period 2018/2019 to 2021/2022. Referrals across the Woman's Aid service during this period increased by 15.6% in helpline/drop in, 33.6% increase in outreach, 40.5% increase in refuge, 25% increase in children and young people and 19.6% increase in the total referrals.

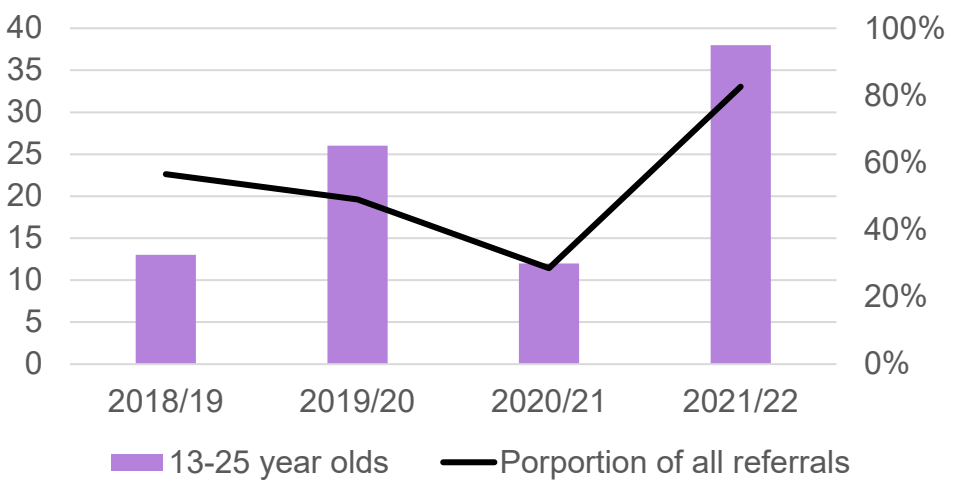
The increase in demand post COVID-19 was particularly significant, Women's Aid supported 1226 women and children across the service compared to 805 during the same period the previous year which represents a 52%. This is an increase of 72% in duty and helpline contacts, 37% increase in refuge and support, 14% increase in outreach and a 12% increase in support for children and young people.

Women's Aid reported an increase in complex trauma, mental health issues, alcohol dependency and child contact issues. The service is supporting children with a range of needs and vulnerabilities including anxiety, self-harm, eating issues, autism and behavioural problems. Waiting times for refuge continue to be an issue for women and children with lack of available temporary accommodation and longer waiting times impacting on refuge availability and turnover.



Source: Women's Aid

Rape Crisis Referrals



Source: Rape Crisis

Rape Crisis

The total referrals to Rape Crisis for 13-25 year olds in respect of rape and sexual assault increased by 192% from 13 to 38 between 2018/19 and 2021/22.

The impact of the pandemic on referrals is seen acutely, with both a drop in the number of referrals and associated decrease in proportion of referrals, specifically from the 13-25 age group. In the year 2021/22 more than 80% of all referrals were from 13-25 year olds.

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Appendix 2

Views and Experiences of the Children and Families of East Renfrewshire

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What you told us we are getting right?

"I liked opening up and talking in an environment that I felt safe in and that I felt like I was actually being listened to"

Healthier Minds Feedback

Viewpoint responses of children known to social work show that:

- 5-7 year olds feel there is an adult at school who will help if they ask (95.5% average score)
- 8-15 year olds feel safe where they live now (96.5% average score)
- Young people aged 16+ have a place to go when they feel unsafe (91% average score)

"The Friday night youth club is better than hanging about the streets, it's fun to be a part of and it's a safe place to go and relax with your friends. It has a good impact on my mental health, I feel more secure in myself, and it helped me get my life on track. They [youth workers] have a laugh with you, help us open up and have someone to talk to. I don't feel judged. Youth workers have time to build relationships with us and they want to hear our opinions. Everyone is treated equally and you feel like you are being treated like an adult." **CLD Youth Work Young Person Feedback**

98% of **family first service user feedback** said they would recommend the service to a friend.

"My family nurse has always listened to anything I've had to say whether that is a small thing or a big thing and has always allowed me to voice my opinion on different things without judgement." **Family Nurse Partnership Service User Feedback**

"Money advice was really helpful, gave good advice and supported me very well, but they could be more involved with care experienced young people"

Pathway Planning Informal Consultation

- "Realised that autism can enhance possibilities"
 - "There is ways of learning to look at it from a different point of view. Ways of coping."
- Cygnets Programme Feedback**

"It's a good wee thing, to understand your children a wee bit better...
...We talk as like a group, we all talk about own experiences and stuff like that...
...Whereas we've learnt to calm down and kinda take a better approach to things will maybe solve it quicker for you."

Intensive Family Support Team Dad's Group Feedback

Pupils recognised that East Renfrewshire's schools are of high quality and that this has a very positive impact on individuals, families and communities across the Council area; their concern was about the long-term impact of some of the potential savings options. They placed a high priority on protecting elements focused on those most in need. There is a strong sense of fairness and desire to protect support for pupils with Additional Support Needs. **Dedicated Budget Panel Event for Secondary school pupils**

Women's Aids confidentiality and support system highlighted as extremely positive experience for service users

Equalities, Participation and Consultation Session

Education is the "Jewel in the Crown" of East Renfrewshire and a significant motivator for people to wish to live in the area **Parent Council Consultation 108 Budget Planning 2023**

Relationships are really important
SAC pupil consultation

"I've had good experiences with Family Firm, they are helpful and kind and they listen to you... Family Firm has been a great deal of help with finding me a job and getting me prepared for it" **Pathway Planning Informal Consultation**

"I am so pleased my son is taking part in this programme. I can't support him with these things and I know he really enjoys it and is trying hard to be more responsible." **CLD Safer Choices Youth Work Parent Feedback**

"He is a different child from when we first referred him to the healthier minds service"
Healthier Minds Feedback

"The happiest part was getting the keys, pretty chuffed when I realised it was all mine." **Housing Consultation**

Almost all parents/carers said they feel their child/young person is treated fairly and with respect **ASL Review**

"I'm involved with Children 1st and they give me a chance to speak and they'll help me. Children 1st would take me out and try and get to know me, what I like and what I don't like. Now I feel like I'm a lot smarter and I've got better life choices now." **Young person feedback to the**

- "Thank you for seeing him so quickly"
 - "I've noticed a big improvement in her ability to manage her emotions"
- "We can't thank you enough, you have been such a support to us. He doesn't trust people easily, and said he felt so supported yesterday" **School Nursing Feedback**

- "Respite allowed them to do things they don't normally get the chance to do. Also met other young carers"
 - "Opened a whole new world to him"
- "He has really enjoyed himself, made some new friends and just come home from the trips feeling a bit lighter" **Carer's Centre Feedback from parents**

"The health visitor provided excellent support and signposted for other services. Always feel that nothing is too much trouble" **Health Visiting Parent Feedback**

95% of all multi-agency staff respondents agree or strongly agree that they are proud of the contribution they are making to improve the well-being of children and young people at risk of harm and their families. **Joint Inspection Staff Survey 2022**

100% of children completing **Who Cares Scotland? End of Task Feedback** felt their voice and choices had been heard.

"Family First has helped me hugely. I have found the service extremely helpful. Having Bilingual Support translate has helped me offload fully and express myself freely. I have been understood and my needs met fully. Having someone to talk to and listen and give advice has meant a lot to me especially with the difficult dilemma I was going through. Having this service available gave me a huge piece of mind." *(Translated by Bilingual Support Worker due to significant language barrier)* **Family First Feedback from English as an Additional Language Family**

What you told us we could do differently?

We don't always want to be referred to a 'specialist service' and instead want class teachers, janitors, peers and the whole school community to feel confident to let us talk about mental health

"Having the same Health Visitor particularly when I had mental health issues" **Health Visiting Parent Feedback**

"I'm more confident because I know that she's [my support worker] always there, she's like a safety net." **Parent Feedback to the joint inspection**

What we need from mental health services **ER Youth Voice and Champions Board Mental Health Working Group**

A relationship based approach to services – connect with peers and adults

"People just need to not be scared to access it and I think it's the whole thought of, they're going to take your kids that needs to be gone and then I think you'll find that more people would reach out and ask for help." **Parent feedback to the joint inspection team**

- "Having more info, other young people to talk to, it was very lonely and scary, I just drifted away from school."
 - "Being listened to and planning, having choices. Talking to people."
 - "It felt like it happened suddenly. It was really fast and I didn't have enough time to get ready."
- Transitions to Adulthood Consultation with Service Users**

Healthier Minds and the School Nursing Service do not meet the needs of older care experienced young people and neither does their GP or Adult Mental Health Service so they have no access to a suitable service

A new approach to dealing with self-harm that is less reactive

Understanding of individual needs, not one size fits all

Barriers experienced by English as an additional language (EAL) families **shared with Family First-**

- Telephone and email support can be intimidating
- Isolation is often greater and so it is harder to find out about supports, services and funding through 'Word of Mouth'
- Many departments are not able to offer translation services and many families make errors due to lack of understanding questions or do not engage, therefore missing out on important information and supports.
- Families with significant language barriers may speak English at a basic level but may not read or write English very well making them hard to reach in relation to promotional materials. These families have communicated that they then feel disappointed that they were not aware of an event at school or a deadline for an appointment.

- A few pupils highlighted the importance of making sure other children and parents understand what it is like for children who have an additional support need
 - A few pupils in mainstream schools said they did not always feel involved in the life of the school and want their school to do more to include them.
- ASL Review**

- "Sufficient support but not the right support."
 - "Everybody else had control over what was happening to me."
- Housing Consultation**

A need for more individual support and more understanding and respect for pupils' circumstances. **SAC pupil consultation**

“There is a lack of basic training for teachers in how to manage children with autism, there needs to be more training for teachers and improve teachers’ communication with children with autism and how they deal with children when there are issues to ensure the child feels safe and secure in school. Educate teachers in the basics of what autism is as it would appear to myself and my child that some teachers have no or very little knowledge of autism. This lack of knowledge stems from senior management to class teachers from personal experience when dealing with issues regarding my child. There should be training on how to care for children when they have a meltdown, to minimise this and not exacerbate it.” **ASL Review Parent/Carer Feedback**

Support Needs of families supported via Parentline

- Education worries
- Emotional wellbeing concerns
- Family relationships
- Challenges supporting someone with a disability
- Domestic violence
- Financial worries
- Physical health and illness
- Relationships with wider network, community and others

“Young people living outwith ERC that are being cared for by the authority are being completely neglected by services”

Pathway Planning Informal Consultation

40% of respondents feel that current provision of after school care meet the childcare needs of their family ‘not at all well’
Consultation on out of school care and holiday provision for children with complex additional support needs

- 110
- “Ask us about the young person we care for”
 - “Ask about all the family members who might need support - transition can be difficult for the whole family”
 - “...use carer knowledge in a positive way. We want to be asked about our young person, be listened to, heard, not dismissed”

Transitions to Adulthood Consultation with Service Users

- “Need better identification [of neurodiversity] in preschool”
- “Service waits for diagnosis too long”
- Cygnet teenager/puberty/adulthood course

Cygnet Programme Feedback

Less than half of the pupils consulted indicated that they enjoyed Out of School Care (47%) and holiday (45%) clubs -
Adapted visual version of the consultation

“Can Family Firm and MART join up more?”
Pathway Planning Informal Consultation

Viewpoint responses of children known to social work show that:

- 5-7 year olds struggle with waking up during the night (54.5% average score)
- 8-15 year olds don’t go to clubs, activities or events in their local area (30.29% average score)
- Young people aged 16 + don’t know how to get emergency help to pay for water, electricity or gas bills (45% average score)

Uniform is the cost that is most challenging for families to meet.
Cost of the School Day Evaluation

There were significant concerns raised about reducing the length of the school week for primary with the impact this would have on attainment and childcare **Public Consultation on Budget Planning 2023**

Ideas for the next 3 years...

Future Healthier Minds sessions on wellbeing, post school transitions, dealing with panic attacks, teenage refusal behaviours, emotion regulation, social anxiety, self-care, online safety, social skills development

Better use of community resource and peer support
“I don’t know why but it’s always other parents who are the most help” - *Transitions to Adulthood Consultation with Service Users*
“More community groups please” - *Service Improvement suggestions from What Matters to You Day*

Individualised Support
“It needs to be about the individual, not just the collective” - *Housing consultation with young people*

Addressing inequalities
Digital inequality in particular - *SAC pupil consultation*

Enhancing feedback loops – improving communication with families

“Instead of relying on social work to make the referral to services... can **services reach out** directly to care experienced young people?”
- *Pathway Planning Informal Consultation*

Raise awareness of support available and the need for wellbeing and trauma recovery support and targeted prevention work in schools, particularly with young men - *Parents Supported by East Renfrewshire Women’s Aid*

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Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board	
Held on	16 August 2023	
Agenda Item	7	
Title	Finance and Policy Implications for Foster Care, Kinship and Adoption	
Summary		
<p>This report advises the Integration Joint Board of the streamlining of the fostering and kinship schemes to better reflect current needs in relation to allowances. It will also present proposed cost of living increases to foster and kinship carers.</p>		
Presented by	Raymond Prior, Head of Children's Services and Justice (Chief Social Work Officer)	
Action Required		
<p>The Integration Joint Board are asked to:</p> <ul style="list-style-type: none"> • Approve the contents of the report; • Recognise the impact of legislative and policy change for the Health and Social Care Partnership and East Renfrewshire Council; • Note and approve the projected financial implications of the revisions to the existing scheme including cost of living increase; • Recognise the impact the changes to rates will have on our ability to minimise the need to seek alternative care provision purchased from external third sector and independent providers. 		
Directions	Implications	
<input checked="" type="checkbox"/> No Directions Required <input type="checkbox"/> Directions to East Renfrewshire Council (ERC) <input type="checkbox"/> Directions to NHS Greater Glasgow and Clyde (NHSGGC) <input type="checkbox"/> Directions to both ERC and NHSGGC	<input checked="" type="checkbox"/> Finance <input type="checkbox"/> Policy <input type="checkbox"/> Workforce <input type="checkbox"/> Equalities <input type="checkbox"/> Risk <input type="checkbox"/> Legal <input type="checkbox"/> Infrastructure <input type="checkbox"/> Fairer Scotland Duty	

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

16 August 2023

Report by Chief Social Work Officer

Finance and Policy Implications for Foster Care, Kinship and Adoption

PURPOSE OF REPORT

1. This report advises the Integration Joint Board of the streamlining of the fostering and kinship schemes to better reflect current needs in relation to allowances. It will also present proposed cost of living increases to foster, kinship and adoptive carers.

RECOMMENDATION

2. The Integration Joint Board are asked to:
 - Approve the contents of the report;
 - Recognise the impact of legislative and policy change for the Health and Social Care Partnership and East Renfrewshire Council;
 - Note and approve the streamlining of rates and the cost of living increase to these new rates and the projected financial implications of the revisions;
 - Recognise the impact the changes to rates will have on our ability to minimise the need to seek alternative care provision purchased from external third sector and independent providers.

BACKGROUND

3. East Renfrewshire has a registered foster care service and since 2017 a registered adult placement service which provides young people who are ceased to be looked after with a supported care placement. Whilst kinship is not regulated as it is family-based care, all formally recognised carers are subject to assessment and approved by the relevant kinship panel.
4. In February 2016, East Renfrewshire Health and Social Care Partnership adopted a local financial parity model for formal kinship and foster care child allowances. Kinship carers receive child allowances equivalent to child allowances within foster care minus any child related benefits. The model has successfully addressed local inequalities between fostering and formal kinship care, ensuring that East Renfrewshire is compliant with human rights law.

5. In January 2020, East Renfrewshire Health and Social Care Partnership introduced revised continuing care rates for young people who cease to be looked after and are accessing continuing care up to the age of 21. In line with the Children and Young People (Scotland) Act 2014, the change maintains parity between fostering and formal kinship care with respect to the child allowance and better supports continuity of care for young people.
6. On 31st March 2023, 96 children and young people in East Renfrewshire were looked after in a range of settings. This constitutes approximately 0.4% of the total children's population in the area and is one of the smallest proportions of looked after children in Scotland.
7. When a child or young person needs to be looked after away from home our aim is to match the child within our own fostering provision. With our detailed knowledge of our carers, we are best placed to match carers to the needs of any children and young people. If we are unable to provide a placement we will then begin an external search of fostering provision through voluntary organisations. At times this can often mean that foster carers may reside outwith the local area, affecting children and young people's ability to maintain links with their family, friends, school and local community. In reviewing our average costs of external fostering placement through Scot Excel Framework this equates to £918 per child per week and our average weekly residential cost is circa £4.5 - £5k.
8. In February 2020, the Independent Care Review published their findings as The Promise to care experienced young people. Within the Promise, there was recognition that "carers must be supported to continue to care for the children they are looking after and that this must include, but not be limited to, financial support".

REPORT

9. The current financial support arrangements for children and young people looked after away from home are based on the original 2016 scheme updated to reflect the annual cost of living increase and continuing care amendments. Fostering and supported carers are supported by a supervising social worker and are subject to annual review. Foster carers do not qualify for any child related benefits. Formal kinship care placements for children and young people are provided by the child's family and are supported by the child's social worker. Financial support is reviewed annually and adjusted to take account of any child related benefits.

April 2023 Fees / Allowance

Kinship/Residence Order/Adoption weekly rates

Age	Child Allowance *
0 – 4 years	£139.41
5 - 11 years	£158.80
12 +	£197.71

**These rates are subject to financial assessment and would be calculated to deduct child related benefit and allowance*

Foster Carer Weekly Rates

Age	Child Allowance	Carer Fee	Total
0 – 4 years	£139.41	£103.71	£243.12
5 - 11 years	£158.80	£206.92	£365.73
12 +	£197.70	£296.59	£494.30
16+ (<i>If placed in foster care 16+</i>)	£240.46	£254.33	£494.80

Continuing Care – Weekly rate

Age	Child Allowance	Carer Fee	Total
18 – 21 (<i>or as early as 16yrs depending on when young person request and continuing care is agreed</i>)	£197.70	£189.05	£386.76

Supported Care – Weekly rate

Age	Child Allowance	Carer Fee	Total
18+ (<i>or as early as 16yrs</i>)	£167.18	£189.05	£356.24

10. Whilst the 2016 scheme has provided both parity and stability in alternative care support, the development of continuing care and the subsequent publication of the Promise prompted a review of our financial support framework.
11. Our original placement rates in 2016 were based on the Fostering Network recommended rates and compared favourably with neighbouring authorities. However, a recent informal benchmarking against neighbouring authorities found that whilst we continued to match or compare favourably in our support for children aged 5+, our financial support for very young children (0 – 4) compares less favourably against neighbouring authority rates.

Proposed Streamline ff Fees/AllowancesKinship/Residence Order/Adoption weekly rates

Age	Child Allowance *
0 - 11 years	£158.80
12 +	£197.71

Foster Carer Weekly Rates

Age	Child Allowance	Carer Fee	Total
0 - 11 years	£158.80	£206.93	£365.73
12 – 18 years	£197.71	£296.60	£494.31

Continuing Care – Weekly rate

Age	Child Allowance	Carer Fee	Total
18 – 21 (<i>or as early as 16yrs depending on when young person request and continuing care is agreed</i>)	£197.70	£189.05	£386.76

Supported Care – Weekly rate

Age	Child Allowance	Carer Fee	Total
18+ (<i>or as early as 16yrs</i>)	£167.18	£189.05	£356.24

12. The proposed changes will streamline the scheme and ensure that financial support for children and young people's placements is sufficient to provide continuing stability. This streamlined approach to fostering fees will allow us to provide foster carers and kinship carers with financial security.
13. These changes to our scheme will make us more equitable, thus enhance our ability to recruit foster carers who wish to provide quality care and support to children. In increasing our in house provided care, we can decrease the need to place children in purchased foster care who are outwith our local area and also reduce the need to seek alternative care provision purchased from external third sector and independent providers.
14. Short-term cost implications from these proposed changes will have a projected rate of increase for new 0 – 11 year old's rate of £122.56 per week within foster care, calculated to £6375.72 per child per year.
15. Short-term cost implications for kinship families is an anticipated increase of annual cost 2023/24 of £3266.31.
16. There are no short-term cost implications for adoption allowance.

Proposed Uplift for 2023/24

17. An annual review of fees and allowances for 2023/2024 has been undertaken and the proposal is for a 5% increase in fees and allowances.

Financial modelling of 5% uplift for 2023/2024 financial year

Child Allowance:

	2022/2023 rates	2023/2024 proposed rates
0 – 11 years	£158.80	£166.74
12+	£197.71	£207.60

Carers Fee:

	2022/2023 rates	2023/2024 Proposed rates
0 – 11 years	£206.93	£217.27
12+	£296.60	£311.43

18. It is expected, depending on the mix of care provided, that the increase in rates would be additional spend of approximately £50k and this can be contained within current budgetary provision for 2023/24.

CONSULTATION AND PARTNERSHIP WORKING

19. There are existing multi-disciplinary authorisation panel arrangements in place to ensure robust decision-making takes place in relation to securing and improving young children and people's futures. Quality assurance is crucial to ensure that arrangements for the assessment / planning and monitoring of placements are in line with legislation and guidance and consider the financial impact for the Council.
20. East Renfrewshire has a strong and proud history in relation to the support and participation of looked after children and young people. Our Children's Champions Board actively engages with looked after children and young people across a range of issues affecting them and a key theme for our young people has been financial support during their looked after placements and beyond.

IMPLICATIONS OF THE PROPOSALS

Finance

21. Alternative care provision purchased from external third sector and independent providers is significantly more costly than the Council and HSCP recruiting and retaining its own carers. A scheme which compares favourably with external providers and other areas not only makes East Renfrewshire services more attractive, but can assist in ensuring that the quality of the care provided to our children and young people is of the standard necessary to improve outcomes and give them the best possible start in life.
22. The proposal strengthens our local kinship and fostering provision minimising the need to seek alternative, costly, external placements for children.

DIRECTIONS

23. There are no Directions as a result of this report.

CONCLUSIONS

26. The proposed changes to streamline the scheme and also ensure that financial support for children and young people's placements is sufficient to provide continuing stability.
27. These changes in finances align us more favourably with other local authorities, allowing us to continue to support all our families providing care to our children. They will also help to maintain our resilience in fostering and adoption, minimising the need to seek alternative care provision purchased from external third sector and independent providers.
28. Within the Promise it is stated "To provide the care that children require, foster carers must be sufficiently financially maintained." Within this new streamlined scheme we are making a commitment to providing carers with financial support. This commitment to providing a quality service to our children through the ongoing financial support of our carers remains a priority to East Renfrewshire Council.

RECOMMENDATION

29. The Integration Joint Board are asked to:
 - Approve the contents of the report;
 - Recognise the impact of legislative and policy change for the Health and Social Care Partnership and East Renfrewshire Council;
 - Note and approve the streamlining of rates and the cost of living increase to these new rates and the projected financial implications of the revisions;
 - Recognise the impact the changes to rates will have on our ability to minimise the need to seek alternative care provision purchased from external third sector and independent providers.

REPORT AUTHOR AND PERSON TO CONTACT

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Chief Officer, IJB: Julie Murray

25 July 2023

BACKGROUND PAPERS

IJB Paper 29.01.2020 – Continuing Care – Finance and Policy Implications for Kinship and Foster Care

[Integration Joint Board Item 10 - 29 January 2020.pdf \(eastrenfrewshire.gov.uk\)](#)

The Promise

<https://www.carereview.scot/wp-content/uploads/2020/02/The-Promise.pdf>



Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board
Held on	16 August 2023
Agenda Item	8
Title	Strategic Commissioning Plan
<p>Summary</p> <p>The purpose of this report is to provide the Integration Joint Board with the final draft Strategic Commissioning Plan for comment and approval.</p>	
Presented by	Margaret Phelps; Senior Manager Planning and Performance and Commissioning Manager
<p>Action Required</p> <p>It is recommended that the Integration Joint Board:</p> <ul style="list-style-type: none"> • note the updates to the draft Strategic Commissioning Plan following the period of engagement between March and June 2023. • comment and approve the final draft Strategic Commissioning Plan on the current and future arrangements in place to commission health and care services with external partners. 	
<p>Directions</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 (NHSGCC)</p> <p><input type="checkbox"/> Directions to both ERC and NHSGCC</p>	<p>Implications</p> <p><input type="checkbox"/> Finance <input type="checkbox"/> Risk</p> <p><input type="checkbox"/> Policy <input type="checkbox"/> Legal</p> <p><input type="checkbox"/> Workforce <input type="checkbox"/> Infrastructure</p> <p><input type="checkbox"/> Equalities <input type="checkbox"/> Fairer Scotland Duty</p>

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

16 August 2023

Report by Chief Officer

STRATEGIC COMMISSIONING PLAN

PURPOSE OF REPORT

1. The purpose of this report is to provide the Integration Joint Board with a revised Strategic Commissioning Plan following a period of engagement. The revised Plan is presented for comment and approval on the current and future arrangements in place to commission health and care services with external partners.

RECOMMENDATION

2. It is recommended that the Integration Joint Board:
 - note the updates to the draft Strategic Commissioning Plan following the period of engagement between May and June 2023.
 - comment and approve the final draft Strategic Commissioning Plan on the current and future arrangements in place to commission health and care services with external partners.

BACKGROUND

3. At the meeting on 29th March 2023, the Performance and Audit Committee received a report on the early proposals for a Strategic Commissioning Plan setting out the current and future arrangements in place to commission health and care services with external partners. The Committee approved the commencement of a period of engagement during May 2023 with the view to a final draft Strategic Commissioning Plan be presented for approval to the Integration Joint Board meeting in June 2023. This engagement programme was extended during June 2023 and the Plan is revised to reflect the feedback and comments received from services, third sector and external partners.
4. This Commissioning Plan has been reviewed to ensure alignment with the Strategic Plan 2022/25 and the work underway in respect of the HSCP, national, and Greater Glasgow and Clyde transformation programmes including; Coming Home Implementation Report, The Promise (Independent care Review) and Primary Care Improvement and the National Care Service. Work is already underway to develop our collaborative commissioning approach for East Renfrewshire bringing partners, services and people who use services and carers together.

REPORT

5. Following approval at the Performance and Audit Committee, a period of engagement was undertaken during May and June 2023. The engagement programme coordinated by the Commissioning and Engagement Teams offered an online survey, one face-to-face events and four online events. The online and in person sessions were designed to:
 - Share our collaborative commissioning approach with partners
 - Reflect on our current demographic context in East Renfrewshire
 - Note the introduction of the Supporting People Framework
 - Consider if we have identified the right priorities
 - Comment on our personal outcomes and human rights approach underpinning the plan
 - Explore areas where we could work collaboratively to share our assets and resources
 - Identify any impacts on equality outcomes

6. A report from each engagement event was produced and shared with participants; this was collated to produce a single report of the feedback received. (Appendix 4). From this collated report, key themes have been identified and where applicable have been included in the revised Plan. Some of the key themes include;
 - Funding and resources are still key challenges
 - Recruitment and retention are a challenge across all sectors
 - Volunteers role could be harnessed in communities
 - Lack of available appropriate housing
 - Asset mapping to understand local asset and reduce duplication
 - More complex care being identified
 - Current priorities could be more visual and smarter
 - Need to manage expectations
 - Communication is important
 - Good co production is happening across ER

7. In addition, the engagement events identified areas where collaboration using shared assets and resources could be developed. Some good examples were identified of partners sharing resources, training and premises. Further collaboration on advice and information, providing shared language with consistent themes across directories and websites. Celebrating the good practice and share good news stories on a central location. Participants also recognised the need to ensure the opinions of people who use services is captured and using our local networks to do this. Prevention was important ,however real concern that in current financial climate this may be impacted. In terms of potential for any impact on equality groups, people with disabilities and carers were the most identified groups. A strong theme of lack of available housing was identified, workshops coordinated by colleagues in Housing services, and including HSCP services and third sector have been taking place to explore options to coordinate access to housing services and to address and identify future needs. Further work will be done to develop the market share split for care at home with the external providers to meet demographic demand and achieve best value.

8. The revised Strategic Commissioning Plan sets out the financial and operational context of the Health and Social Care Partnership and recognises the financial pressures the IJB are facing and the statutory requirement to both set a balanced budget and to operate within the financial envelope available. The introduction of the Supporting People Framework as the approach to managing risk and identifying person centred support is now underway and is reflected in the Plan.

CONSULTATION AND PARTNERSHIP WORKING

9. We are working with a range of partners to ensure our services commissioned directly from external partners are supporting our residents. During 2021/22 this spend totalled £40,799,748.22 across all of our services utilising a number of contractual arrangements. We are reviewing current care packages, and grant funded arrangements to ensure they are delivering and are aligned to the Supporting People Framework.
10. The draft Strategic Commissioning Plan 2023/25 has been revised to reflect the feedback detailed in paragraphs 6 and 7, the Plan identifies key areas to develop market facilitation approach and spend on commissioned services will form an action plan and be monitored and reported as part of the Strategic Plan annual reporting arrangements. The Plan is initially for a two year period to allow for alignment to the three year Strategic Plan and Medium Term Financial Plan. A final Strategic Commissioning Plan is attached for comment and approval.

IMPLICATIONS OF THE PROPOSALS

11. There are no implications arising from this report.

DIRECTIONS

12. There are no directions arising as a result of this report.

CONCLUSION

13. This report recognises the contribution that all partners make to the delivery of health and social care services. It sets out the requirement to work collaboratively across all sectors to create an environment for a diverse, thriving and sustainable market which is focused on meeting needs and achieving outcomes. The Strategic Commissioning Plan is revised following a period of engagement and is presented to the Integration Joint Board for comment and approval. The Plan will be reviewed annually and reported as part of the Strategic Plan reporting arrangements, recognising alignment in the future direction, the demographic demand and pressures, financial context and the role of the third and independent as delivery partners.

RECOMMENDATION

14. It is recommended that the Integration Joint Board:

- note the updates to the draft Strategic Commissioning Plan following the period of engagement between March and June 2023.
- comment and approve the final draft Strategic Commissioning Plan on the current and future arrangements in place to commission health and care services with external partners.

REPORT AUTHOR AND PERSON TO CONTACT

Margaret Phelps; Strategic Planning, Performance and Commissioning Manager

Email: Margaret.phelps@eastrenfrewshire.gov.uk

Mobile: 07393 003817

Chief Officer, IJB: Julie Murray

1 August 2023

BACKGROUND PAPERS

Strategic Plan 2022-25

https://www.eastrenfrewshire.gov.uk/media/7569/HSCP-Strategic-Plan-2022-2025/pdf/East_Renfrewshire_HSCP_-_Strategic_Plan_2022-2025.pdf?m=637847662804030000



East Renfrewshire Health and Social Care Partnership

Strategic Commissioning Plan

August 2023

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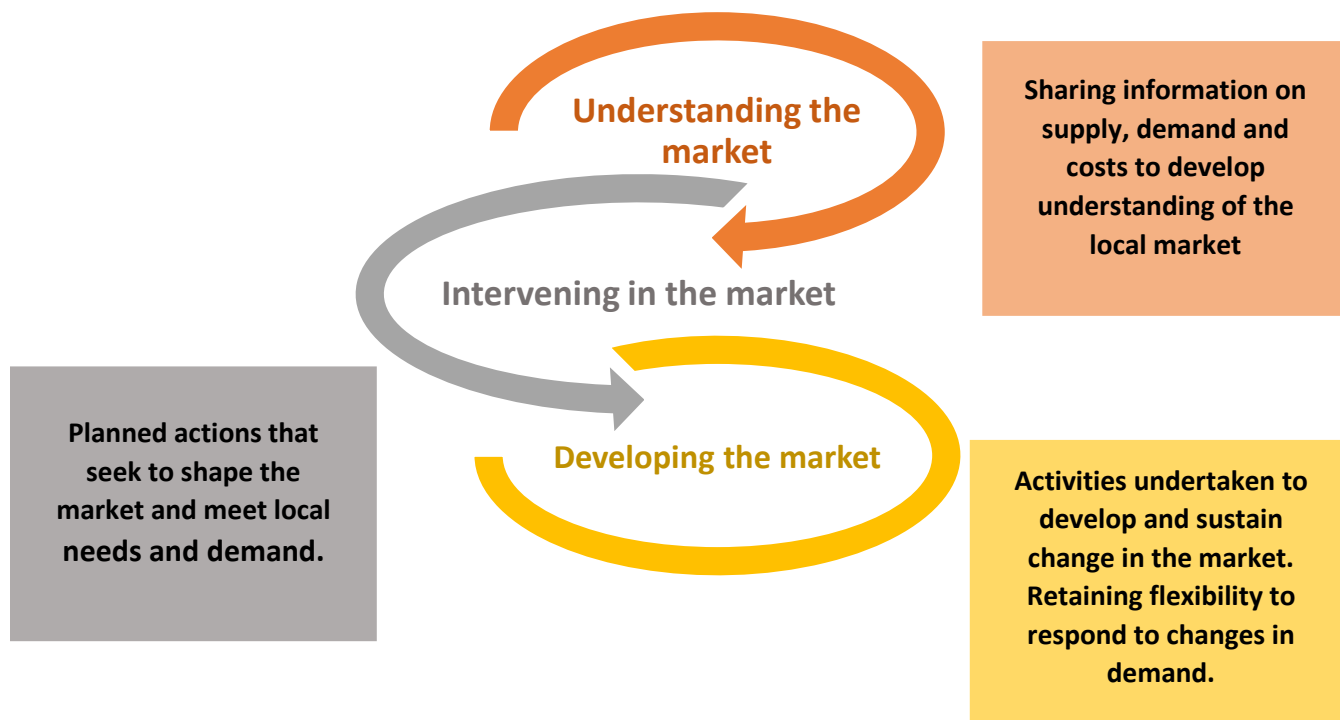
Introduction - our collaborative commissioning partnership approach

East Renfrewshire Health and Social Care Partnership under the direction of East Renfrewshire's Integration Joint Board (IJB), builds on a secure footing of a 16 year commitment to partnership working in East Renfrewshire. Our market facilitation statement represents the current position in our ongoing conversation with people who use service, partner providers who deliver with us, carers and other stakeholders who form part of East Renfrewshire Health and Social Care Partnership (ERHSCP). Our strategic vision is to create opportunities to work together to shape the local health and social care environment to ensure that together we can progress the aims of the HSCP Strategic Plan 2022-2025 and be responsive to the changing needs and aspirations of the people of East Renfrewshire.



We have already published information through our Joint Strategic Needs Assessment and through our performance reports. The Strategic Plan 2022-2025 which sets out the vision and priorities for service change and improvement in East Renfrewshire. This market facilitation statement sets out how we expect to deliver our strategic intentions, working together with partner providers through our commissioning and procurement arrangements.

It is important to ensure residents have choice and control through a variety of providers and creative support options. They must also understand what support is available and be able to make informed choices by having easy access to information about the quality, flexibility, safety and cost of services.



We will seek to do this through a market shaping approach by:

- sharing with current and potential providers the intelligence we have on population trends, the current demand for and costs of care
- future demand and the shape of the social care economy
- sharing our ideas known about how we believe the market needs change over time, in response to changing residents expectations and economic, demographic and legislative context
- identifying opportunities for collaboration to develop and sustain the local social economy
- being clear with providers about how we will intervene in the market, through the investments we make and the encouragement and advice we give, to achieve a balance in the supply and demand for services
- explaining why we need to disinvest in some areas and increase spending in others, giving those organisations who wish to grow and adapt to new circumstances time to do so.

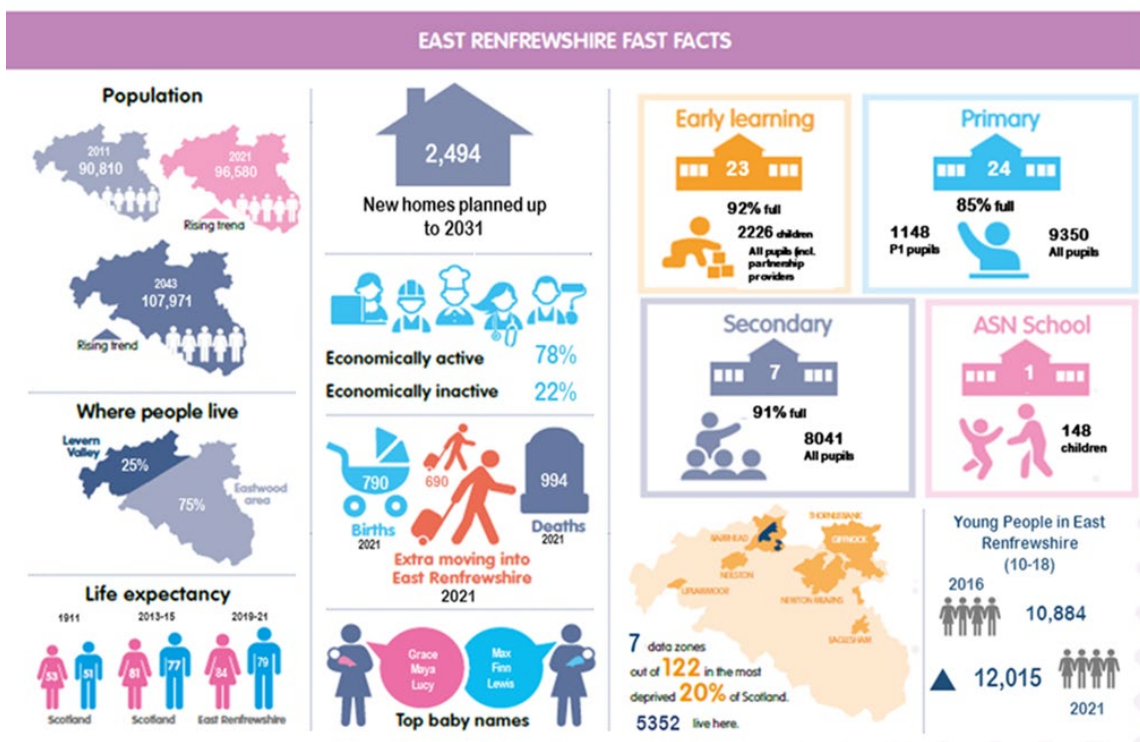
Our Plan will complement and add value to the business planning and development activities of current and potential providers. It sets out how the HSCP is working with all partners in health and social care to maximise use of the available resources.

Demographics and needs assessment

Our Strategic Plan 2022-25 identifies 9 priorities which the HSCP along with our partner providers in the third and independent sectors, provide a range of health and social care services to individuals, families and carers.

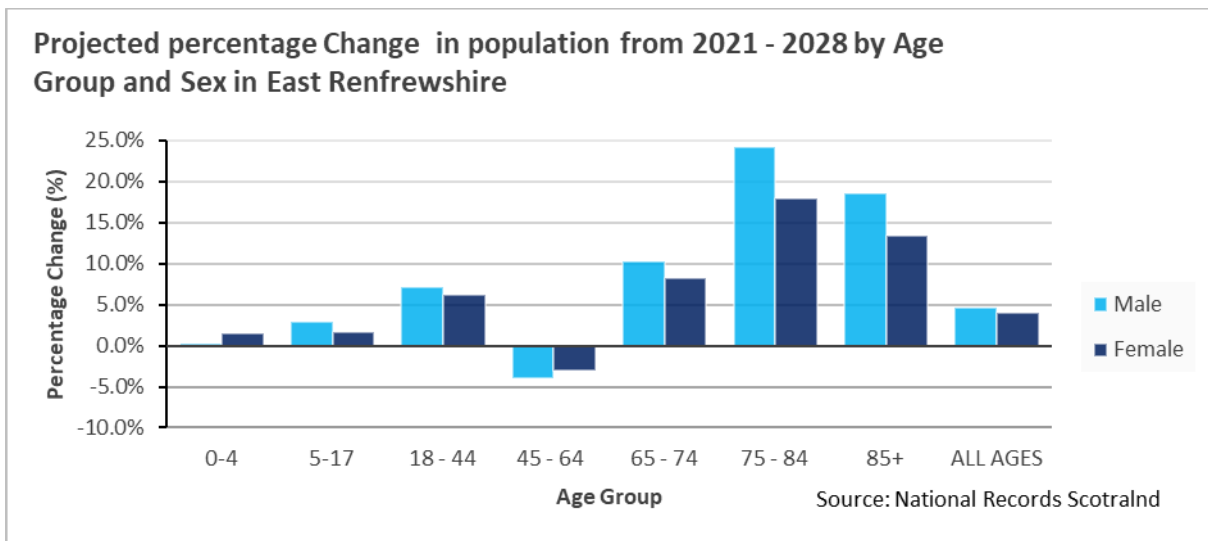
- Working together with children, young people and their families to improve mental and emotional wellbeing;
- Working together with people to maintain their independence at home and in their local community;
- Working together to support mental health and wellbeing;
- Working together to meet people's 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; and,
- Protecting people from harm.

Our Joint Strategic Needs Assessment is available as a supporting document and provides a detailed needs assessment to support the Strategic Plan. A full socio-demographic profile has been developed for East Renfrewshire and covering our two localities (Eastwood and Barrhead) giving information on population, households, deprivation, health profile, life expectancy and use of services.

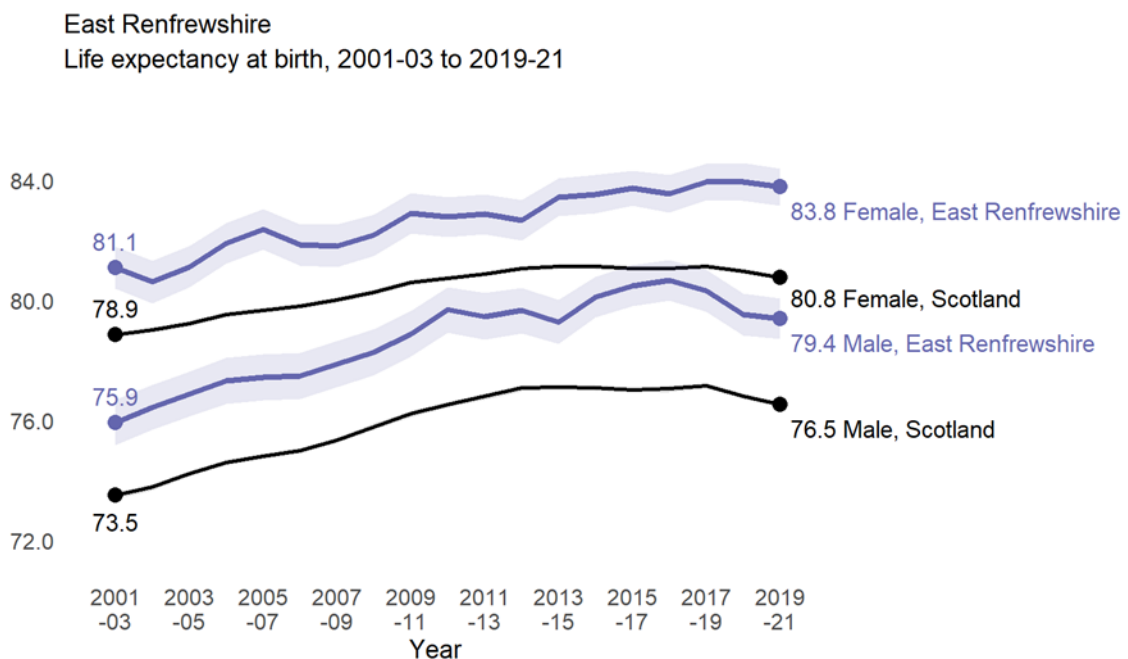


From this detailed analysis we know our population is changing with a corresponding increase in the health and care needs of our residents. Overall, East Renfrewshire’s population is growing with the most significant growth among our younger and older population, who we know to make greater use of universal health services.

The overall projected rise in population is similar to the increase seen in the five years to 2021. The population aged 75 and over is projected to increase at a rate of 18.8%. The 65+ population is projected to increase from 20.6% of the population in 2021 to 22.5% of the population by 2028. The table below provides an overview.

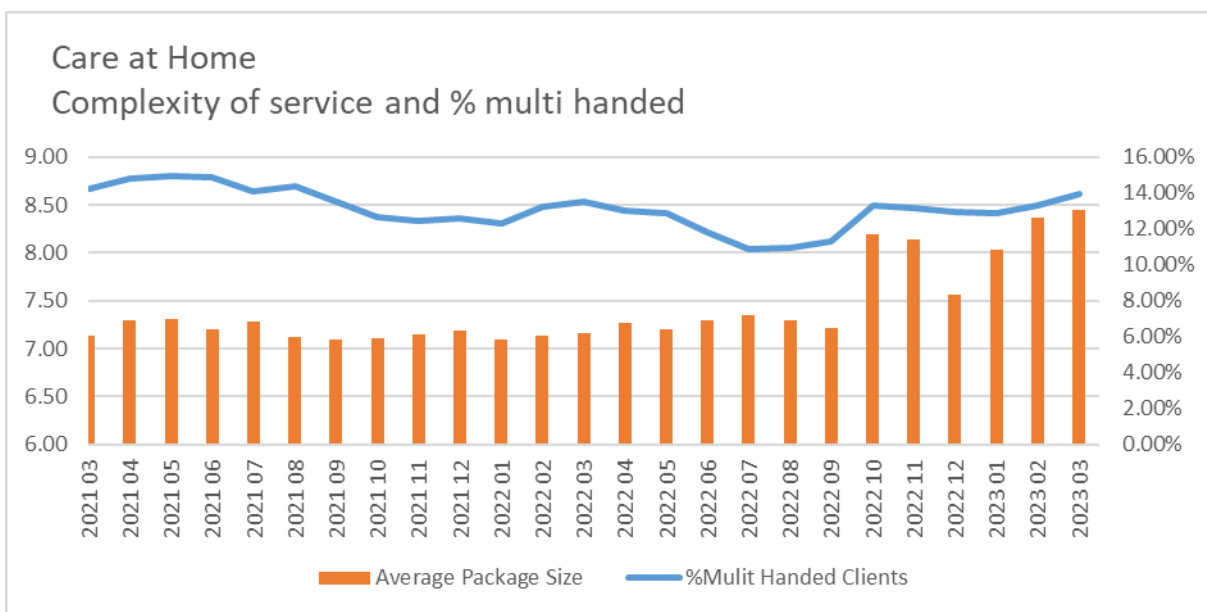


Life expectancy within East Renfrewshire amongst males has grown faster than the national rate with life expectancy for men rising 3.5 years in the last 20 years. This is reflected in the population projection for males in the coming years.



In addition, there has been significant growth in our most elderly population with a 49% increase in the number of residents aged 75 years and over the last decade. The 85+ population is projected to increase by 15% between 2021 and 2028. People over 80 are the greatest users of hospital and community health and social care services.

There has been a shift in the way that people are being cared for with an increasing proportion of people being cared for at home; and a shifting 'balance of care' away from long term care homes placements. With this shift in balance, our care at homes services have seen increased complexity and higher levels of care need. Between March 2020 and March 2023, the average size of care at home packages increased from just over 7 hours to nearly 8.5 hours per week. 14% of our service users now require support from two or more carers; up from 9% in February 2020.



However, there are notable discrepancies seen across the area with some neighbourhoods experiencing significant disadvantage. More than half of East Renfrewshire’s population (53%), and 67% of the Eastwood population live in SIMD datazones that are among the 20% least deprived in Scotland. All of East Renfrewshire’s neighbourhoods that are among the 20% most deprived are concentrated in the Barrhead locality, with a quarter of the population living in these datazones.

In line with this socio-demographic profile, we see differing health outcomes for the populations in our two localities. While life expectancy at birth is above the Scottish average for East Renfrewshire as a whole, it remains below average in the Barrhead locality. Early mortality rates and the prevalence of long-term conditions including cancers are also higher for Barrhead. Data also shows poorer outcomes for the Barrhead locality in relation to the percentage of the population prescribed medication for anxiety, depression and psychosis. Hospital admission related to alcohol and drugs are also higher for Barrhead.

Post-covid impacts are still developing but it is clear that there have been negative consequences for businesses and employment prospects nationally and locally. The evidence clearly links economic disadvantage with poorer physical and mental health outcomes and we have seen the unemployment rate rise in East Renfrewshire. The impact on health inequalities has had a disproportionate impact for disadvantaged communities and specific vulnerable groups. The diminished or interrupted care and support has made disabled people, black and minority ethnic people, older people and children and young people more vulnerable. Mental health and wellbeing has been impacted across all age groups increased social isolation, distress, anxiety, fear of contagion, depression and insomnia in the general population. A number of key groups are at higher risk of adverse mental health outcomes. These include front line staff, women, and people with underlying health conditions, children and young people (up to age 25). Locally, we know that families and people we support have reported worsening mental wellbeing.

Although the HSCP has succeeded in maintaining the vast majority of services throughout the pandemic we have been required to adapt provision and prioritise those in greatest need, particularly during the tightest lockdown restrictions. Some service areas have seen increasing levels of need, frailty and vulnerability among the individuals they are working with where lower level, preventative interventions have been reduced, and increased carer stress.

The pandemic period has seen new ways that people engage with services with greater use of technology and a reduction in face to face contact. Learning from this has allowed services to review delivery approaches to meet the changing expectations of people following the pandemic. We have seen increasingly supportive working relationships between statutory, independent and third sector partners. The experience of the pandemic has reinforced the crucial role of the community and third sectors in delivering essential support to our residents.

Over the course of the pandemic we have seen incredible resilience, commitment and creativity from staff. We have seen innovation and collaboration, between partner organisations and with our communities. This capacity for change and innovation will underpin our activity as we move forward.

Current market context health and social care

Health and social care services are delivered alongside our third and independent support and care providers and partners. Through our service reviews, current market assessment and conversations with providers and engagement with people and communities we have identified key areas we want to address through market shaping that will support the delivery of our Strategic Commissioning Plan 2023 -25.

- Recognising the resilience of staff groups have been impacted by ongoing challenges from the pandemic including recruitment and retention across all sectors.
- Growing demand for care at home services both in relation to care hours and increasing complexity of care is not matched by growth in cross sector capacity.
- Implementation of Supporting People Framework to ensure personalised approach with people in need are supported and resources are maximised.
- An area of increasing need is from children and young people with a neurodevelopmental diagnosis (including autism) or suspected diagnosis.
- Continue to support our care experienced children and young people and to fully implementing the findings of the national Independent Care Review report “The Promise”.
- Our person-centred approaches are committed to increasing choice and control, achieving outcomes and increasing use of Self-directed Supports.
- Services for people with learning disabilities will offer a broader range of opportunities and experiences
- Young people in transition will be supported to maximise independence choice and control
- Build on our collaborative community supports to minimise isolation through approaches such as befriending, peer support and the work of our Kindness Collaborative and Talking Points, linking people to local supports.
- Make best use of technology and health monitoring systems to support independence and self-management.
- Work collaboratively with housing providers to support independent living in our communities and to better understand local needs and future models of housing, technology and support.
- Support mental health and wellbeing interventions delivered through primary care, third sector and community-led activity.
- Work across all sectors to improve hospital discharge and better support for people to transfer from acute care to community supports.
- We will continue to encourage collaboration between support providers for advice, information and support for carers ensuring local provision that best meets carers needs.
- Work with our partners to tackle inequalities and support residents with a number of long term conditions such respiratory illness, cardiovascular disease and obesity to provide physical and psychological health benefits
- Continue to protect adults at risk from harm by strengthening our processes and awareness of Adult Support and Protection with our partners, providers and the public.

Changing needs and demands

Whilst identifying our key areas for future work we recognise the immediate and future challenges for the partnership. Our Strategic Plan reflected the context of the post Covid-19 pandemic and response to immediate pressures. This was marked by both increasing and changing service demand pressures.

All services experienced a higher volume of referrals to adult and child protection; increased CAMHS referrals and increase cases allocated to our children's social work teams; increased referrals to Care at Home services (and capacity pressures on partner providers) and higher levels of frailty and complexity among those accessing adult services.

Demographic pressures remain a very specific challenge for East Renfrewshire as we have an increasing elderly population with a higher life expectancy than the Scottish average and a rise in the number of children with complex needs. Deconditioning and isolation for older people and adults with additional support needs alongside increased demand on carers have been reflected in our referral. Mental health needs of all sectors of the population has been marked with reduced capacity in therapeutic services.

Working with our acute sector to minimise delayed discharges from hospital has increased demand on both our in house and external care at home services as we continue to require more community based provision. This has been further exacerbated with an increase in request from people in the community requiring additional care support.

The cost of drugs prescribed to the population of East Renfrewshire by GPs and other community prescribers is delegated to the IJB. This is a complex and volatile cost base of around £17 million per year with the potential to rise to £19 million in the coming year, without actions to mitigate.

Supporting the care market and our local care providers who deliver alongside the HSCP. The sustainability of the care provider market following Covid-19 is still being felt in relation to staff recruitment, retention and higher cost of living. We continue to work closely with all our partners to work through issues, support where we can and look to develop the best way of working building on our collaborative and ethical commissioning approach. This will build on our work to date, including the move to national contractual frameworks along with the implications from the independent review of adult social care and proposal for a National Care service which may impact on how we commission services.

Our budget projections identify the funding gap in future years could range anywhere from £5m to £10m in 2023/24 and our Medium-Term Financial Plan for 2023/24 to 2027/28 will be refreshed following the setting of our budget for 2023/24.

A Supporting People Framework implementation is underway to ensure that we can provide person centred support to people in greatest need, utilising all supports available and to maximise the resources available to us. Working with individuals, families, partners and third and independent sector to review current and future care needs to ensure we can maximise resources using a risk based approach to assessment of need. A key focus will be on maximising shared resources and assets through a collaborative approach to delivery of health and social care services.

Working with our local partner providers to develop a shared statement of intent setting out agreed principles and approach which are co-designed with wider partners and stakeholders. In addition key themes were identified as areas to progress and opportunities for collaborative working;

- Funding and transparency on budgets
- Communication and information
- Involving providers, partners and people
- Culture change
- Processes and systems
- Staff valuing and rewarding

New opportunities – understanding needs and the local market

East Renfrewshire we have a diverse economy in social care with well-established range of care providers across the public, third and independent sectors. Building on strong foundation of partnership working and a commitment to collaborative approach to commissioning services. This is underpinned by our focus on a personal outcomes approach to enabling people to achieve and live a full life, it is about making a difference.

We will;

- Be outcomes focused with people at the centre of our commissioning approach
- Work with partners to better understand and sustain our local market
- Recognise our shared assets and opportunities within our local communities
- Address challenges e.g. recruitment and retention, cost of living , financial context
- Maximise the use of our collective resources

Future opportunities;

Our collaborative commissioning approach will work with partners and stakeholders to develop opportunities in the following areas;

- Supporting people to live independently – care at home to explore development of a care at home collaborative
- Day opportunities for adults with learning disabilities - work with partners to consider place based approach and range of services available
- Cross sector support for young people in periods of transition from school, home and independent living
- Post diagnostic support for people with dementia diagnosis
- Supported training opportunity for people with additional support needs through Café services in Eastwood and Barrhead HCC
- Near Fatal Overdose development on local services
- Asset mapping to understand local assets and reduce duplication of service
- Collaborative approach to understand use of technology ,current and future housing needs and current allocation routes
- Explore the feasibility and scope for a cross sector Housing Forum for East Renfrewshire
- Collaboration on advice and information, providing shared language with consistent themes across directories and websites.
- Develop the market share split with external partners for care at home to meet demographic demands and achieve best value.

Financial context and Savings Recovery and Renewal

The annual report and accounts for the IJB covers the period 1st April 2022 to 31st March 2023. The budgets and outturns for the operational services (our management accounts) are reported regularly throughout the year to the IJB, with the final position summarised:

Service	Budget	Spend	Variance (Over) / Under	Variance (Over) / Under
	£ Million	£ Million	£ Million	%
Children & Families	14.741	14.281	0.460	3.12%
Older Peoples Services	25.619	24.085	1.534	5.99%
Physical / Sensory Disability	6.309	6.090	0.219	3.47%
Learning Disability – Community	17.902	18.629	(0.727)	(4.06%)
Learning Disability – Inpatients	9.559	9.591	(0.032)	(0.33%)
Augmentative and Alternative Communication	0.265	0.265	-	0.00%
Intensive Services	16.089	16.735	(0.646)	(4.02%)
Mental Health	5.729	5.392	0.337	5.88%
Addictions / Substance Misuse	1.626	1.543	0.083	5.10%
Family Health Services	28.923	28.921	0.002	0.01%
Prescribing	17.098	17.872	(0.774)	(4.53%)
Criminal Justice	0.029	(0.001)	0.030	103.45%
Finance and Resources	1.972	1.868	0.104	5.27%
Net Expenditure Health and Social Care	145.861	145.271	0.590	0.40%
Housing	0.486	0.486	-	-
Set Aside for Large Hospital Services	29.075	29.075	-	-
Total Integration Joint Board	175.422	174.832	0.590	0.40%

The most significant challenges for 2023/24 and beyond include:

- delivering a difficult range savings to ensure financial sustainability, recognising this is at odds with our historic focus on prevention
- managing the real tension between reduced service capacity as a result of savings and maintaining discharge without delay from hospital
- understanding the longer term impacts of Covid-19 on mental and physical health in the longer term
- recruitment and retention of our workforce, particularly in the current cost of living crisis
- managing prescribing demand and costs in partnership with our GPs
- supporting the physical and mental health and wellbeing of our workforce and our wider population, again further impacted by the current cost of living challenges
- meeting increased demand for universal services without funding for growth, including increased population demand and new care homes opening with the area
- we may also need to prepare for the challenges and opportunities that may arise from a national care service

For 2023/24 the cost pressures identified in our budget are of £10.34 million is offset by available funding of £3.28 million leaving a funding gap of £7.06 million. A savings programme is identified to deliver this in full, but we recognise there may be some areas where we will not achieve a full year by 31 March 2024 and this will be supported by the remaining earmarked reserves we hold.

Our Savings, Recovery and Renewal programme will continue to be reported to the IJB on a regular basis and provides detail on progress on savings, project work and service redesign. The prioritisation of care, to support those with the greatest need is required to deliver around 50% of our savings.

The funding gap in 2023/24 is £7.06 million and presents a very significant challenge particularly when taking into account the continued recovery from Covid-19, pay, inflation and capacity challenges.

Contractual Arrangements and Procurement Plan

Scottish Government's Guide to Strategic Commissioning Plan (2015) defines commissioning as; Assessing and forecasting needs, linking investment to agreed outcomes, considering options, planning the nature, range and quality of future services and working in partnership to put these in place. The strategic commissioning cycle was developed to identify the key processes and steps and seeks to outline four key requirements to; plan, do, review and analyse. All 4 areas are interdependent, involve a range of stakeholders and are interdependent. The complexity of the processes have people at the centre where meeting outcomes is the key determinant of the commissioning approach.



The Independent Review of Adult Social Care (Feeley report 2021) set out a challenge; *“We want to see an end to this emphasis on price and competition and to see the establishment of a more collaborative, participative and ethical commissioning framework for*

adult social care services and supports, squarely focused on achieving better outcomes for people using these services.”

This has been central to recent policy and legislation including the National Care Service Bill (2022) and is enshrined in the 8 principles of Ethical Commissioning (Circular SPPN7/2021). These core principles describe a new way of working which will be human rights based, person centred, reflect peoples lived experience, have fair work principles, support climate and circular economy, financial transparency and deliver high quality care.

A recent publication - Commissioning for Outcomes by Care Coalition of Care Providers (CCPS - March 2023) provides a useful definition of outcomes as ‘the difference that is made by services or supports’.

Outcomes can be seen to exist at different levels:

- ❖ Personal: the difference made in an individual’s life.
- ❖ Organisational: the difference a service or organisation makes.
- ❖ Strategic: the overall difference made to a community or population.
- ❖ National: the high-level policy outcomes that all of the above contribute to.

Evaluation Support Scotland describe how the same outcome can be understood differently at different levels :

- Individual: I want to see my friends.
- Organisational: Service users have reduced isolation.
- Commissioning: Those at risk have access to a wider range of social opportunities.
- Strategic: People are able to look after and improve their own health and wellbeing and live in good health for longer.

East Renfrewshire HSCP commission services with procurement arranged through East Renfrewshire Council and NHS Greater Glasgow and Clyde under direction by the Integration Joint Board. The value of the current procurement plan (appendix 1) is in excess of £36m. It is anticipated that the plan and its associated value will grow due to potential new opportunities, annual increases allowed for in many contracts and new national rates agreed in relation to other contracts.

The HSCP works alongside a range of external partners to deliver health and social care services as part of the following contractual arrangements. The contractual arrangements have been revised to ensure greater choice and control for individuals, sustainability for the provider sector and ensure compliance with Scottish Government policy. The report shows spend for purchased care for the 12 months from April 2021 to March 2022.

- ❖ **Care at Home** – £4.237 million total expenditure with £4,019 million through framework providers and £0.218 million off framework.
- ❖ **Care and Support** –£14.854 million total expenditure with £14.125 million through framework providers and £0.729 million off framework.

- ❖ **Nursing and Residential Care Contracts** – the total expenditure for both nursing and residential placements was £12.372 million there are 12 care homes in the area 1 of which is in house.
- ❖ **Quick Quotes** – The value of quick quotes in the reporting period in question was zero. A quick quote value is between £10,000 and £49,999.
- ❖ **Direct Awards** – The HSCP received approval to make 6 direct awards during the reporting period in question, working through the corporate procurement unit and legal services jointly. The awards were in the area of adult services and reflect the specialist nature of the purchasing activity.
- ❖ **Grant Payments** - the HSCP issued 28 grant awards to 20 organisations totalling £2.669 million.
- ❖ **Scotland Excel frameworks**- a number of contracts have been revised with the introduction of the following frameworks;
 - a. Secure Care
 - b. Fostering & Continuing Care Services
 - c. Children’s residential care and education including short breaks
 - d. Agency Workers (Social Care)
 - e. Care and Support

Wherever reasonably practicable services are commissioned using framework providers to arrange care and support. We recognise that there needs to be choice and control for individuals, families and their carers. Exceptions can occur for a range of reasons including provider capacity, requiring recruitment processes to be taken forward; provider contract compliance and other quality of care related matters.

A number of different types of agreements exist within the procurement plan, these include:

- Framework Agreement - an agreement between one or more public bodies and one or more service providers which sets out the terms and conditions under which specific contracts can be entered into throughout the term of the agreement. The National Care Home Contract (NCHC) is a Framework Agreement used by Local Authorities to purchase places in Care Homes in Scotland. The rates paid for these services are negotiated annually between the Local Authorities and Care Home providers. Framework agreements can be both local within a local authority boundary or national agreements across a number of local authorities as in the case of Scotland Excel care and support framework.
- Grant Agreements are payments made by the Partnership to Third Sector Organisations to support their activities.
- Term Contracts are delivered following a full procurement process.

The Commissioning Team in the Partnership are responsible for the development of specifications and will work with stakeholders and HSCP operational services to develop the service specification. The Team work closely with Council Procurement and Legal Teams to ensure contracts are compliant. Contract monitoring arrangements are undertaken by the Team alongside operational staff to ensure commissioned services are aligned to Strategic priorities Partnership.

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PROCUREMENT PLAN 2023/24

Service Description	People	Contract name	Contract End Date	Agreement type	Route
Residential and nursing care home	Older people and adults requiring residential and nursing housing and care	National Care Home Contract	31 st March 2024	National framework Scotland Excel	Tender
Care home capacity to support discharge from hospital or community based are.	Older people	Interim Care Beds	31 st March 2023	Contract	Direct award/block contract
Provision of personal care, housing support and care	Adults and older people	Scotland Excel - Care and support	31 st March 2024	National framework Scotland Excel	Tender
Provision carers support	Adults and young people providing carer support	Carers Services	31 st March 2024	Contract	Tender
Post diagnostic dementia support ,and advice to families	people with dementia diagnosis	Post diagnostic dementia support	31 st March 2024	Contract	Tender
Support to young people to implement of new policy – The Promise	Young people	The Promise implementation	31 st March 2023	Contract	Direct award
Independent advocacy support to individual and families	Adults and older people	Advocacy Services	31 st March 2024	Grant	Direct award
Day care and group activities for older people	Older people	Day Support Services	31 st March 2024		Direct award
Community based care and support, befriending and	People with dementia diagnosis	Day Support Services	31 st March 2024		Direct award

activities for people with dementia diagnosis					
Community based care and support for people with mental health concerns	Adults with mental health support requirements	Advice, guidance, counselling and group support	31 st March 2024	Grant	Direct award
Community link workers support to GP practices	Adults with mental health support requirements	Advice, guidance and advocacy for people with mental health attending GP practices	31 st March 2024	Grant	Direct award
Transport service for people attending medical and GP appointments	Adults and older people	Community Transport service	31 st March 2024	Grant	Direct award
Provision housing support and care	Older people	Care and support to maintain independent living	31 st March 2024	Grant	Direct award
Advice and support to victims of rape and sexual assault	Women	Advice, support and representation service	31 st March 2024	Grant	Direct award
Advice, housing and support to women and children experiencing impact of domestic abuse	Women and children	Advice, support , housing and representation service	31 st March 2024	Grant	Direct award
Provision housing support and care	Older people	Care and support to maintain independent living	31 st March 2024	Grant	Direct award
Provision of support and care	Older people	Day Support Services	31 st March 2024	Grant	Direct award

Community capacity and volunteering opportunities	Communities	Community capacity building , training and volunteering opportunities	31 st March 2024	Grant	Direct award
Community based support ,care and representation	Adults with additional support needs	Advice, guidance and representation service	31 st March 2024	Grant	Direct award
Community based support and group networks	Adults and young people with additional support needs	Provision of community based group support and activities.	30th September 2023	Grant	Direct award
Community based care and support for people with mental health concerns	Young people	Young persons counselling service	31 st March 2024	Grant	Direct award
Independent advocacy and support	Young people	Independent advocacy and representation services	31 st March 2024	Grant	Direct award
Social Care Management Systems	Systems	Extension to existing social care management system	1 st April 2025	Contract	Direct award
Research initiative to identify peer support	Adults	Peer Research	31 st March 2024	Contract	Tender
Provision of community based peer navigators to access services	Adults	Peer Navigators	31 st March 2024	Contract	Tender
Provision of support to address problematic alcohol use.	Adults	Alcohol Brief Interventions	4 th October 2023	Contract	Tender
GP Services to care Home	Older people	GP support to in house care home residents.	27 th May 2023	Contract	Tender

Offer settling at home support following hospital discharge	Adults and older people	Home Safely Project	30 th November 2023	Contract	Direct award
Offer support to children and young people with mental health concerns	Children and young people	Emotional Wellbeing Service	31 st March 2024	Contract	Tender
Provide support to families, children and young people	Families, children and young people.	Family Wellbeing Service	31st March 2024	Contract	Tender
Offer out of hours support to children and young people	Children and young people	Out of hours support	December 2023	Grant	Direct award
To provide support to people at risk of near fatal overdose	Adults and older people	Near Fatal Overdose service	31st March 2024	Contract	Tender

East Renfrewshire Health and Social Care Partnership

Draft Strategic Commissioning Plan Engagement

May - June 2023

This report follows a series of opportunities both in person and online for HSCP/Council staff, Commissioned Provider organisations, and community organisations to feedback on the Draft Commissioning Plan and to consider this in terms of

- Do we agree with the personal outcomes
- Have we identified the right priorities
- What is possible, when we look at our collective assets?

What we did

Each event began with a review of the Collaborative Commissioning journey so far.

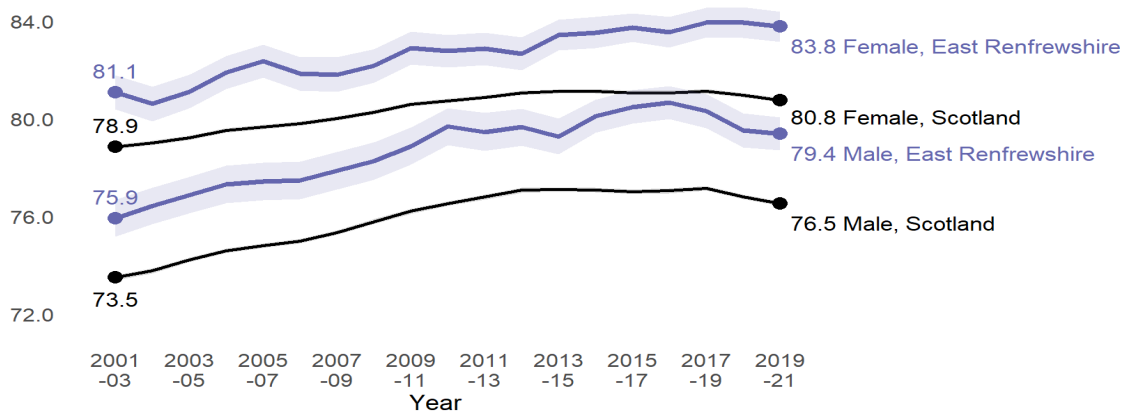


This was followed by providing some population data/ demographics for East Renfrewshire in relation to health indicators and complexity highlighted in the strategy.

Indicators	Data Type	Time Period	Barrhead Locality	Eastwood Locality	East Renfrewshire HSCP	Scotland
Demographics						
Total population	count	2021	24,672	71,908	96,580	5,479,900
Gender ratio male to female	ratio	2021	1:1.1	1:1.08	1:1.09	1:1.05
Population over 65	%	2021	19.5	20.9	20.5	19.6
Population in least deprived SIMD quintile	%	2020	16	66.3	53.4	20
Population in most deprived SIMD quintile	%	2020	24	0	6.1	20

Indicators	Data Type	Time Period	Barrhead Locality	Eastwood Locality	East Renfrewshire HSCP	Scotland
Lifestyle & Risk Factors						
Alcohol-related hospital admissions per 100,000	rate	2020/21	676.7	331.6	418.7	621.3
Alcohol-specific mortality per 100,000	rate	2016 - 2020	22.3	9.4	12.8	20.8
Drug-related hospital admissions per 100,000	rate	2017/18 - 2019/20	194.1	49.2	85.3	221
Bowel screening uptake	%	2018 - 2020	63.1	69.8	68	64.2
Hospital & Community Care						
Emergency admissions per 100,000	rate	2021/22	9,136	7,796	8,138	10,434
Unscheduled bed days per 100,000	rate	2021/22	70,537	71,443	71,211	71,792
A&E attendances per 100,000	rate	2021/22	30,561	23,284	25,143	25,791
Delayed discharges (65+) per 100,000	rate	2021/22	15,479	19,783	18,563	40,774
Potentially Preventable Admissions per 100,000	rate	2021/22	1,273	872	974	1,464

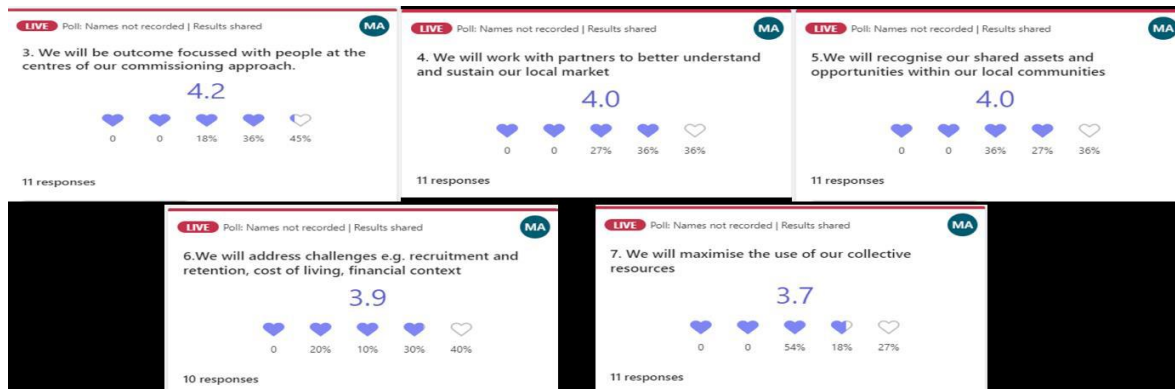
East Renfrewshire
Life expectancy at birth, 2001-03 to 2019-21



Who we reached

We spoke to 38 people in a mixture of 4 online events, one in person event and a Microsoft Form survey (see appendix 1)

What you said about Our Personal outcomes



These findings were more or less replicated across all online events.

General themes from the discussions

<p>First Thoughts</p>	<ul style="list-style-type: none"> • It highlights the complexity • Asset mapping: ER has great resources, but providers might deliver the same services at the same time. Also, there is no central source for community services, how could this be more linked to providers • Where do volunteers fit in? What is their role in the new system? Mobilising communities, harnessing the will within communities that people have to help each other • Still challenges around recruitment • Funding still the biggest challenge • Lack of appropriate housing - particularly for young people -seeing more children with complex support requirements • Seeing more complex individuals versus less experienced/trained staff • Resources taken from preventative/health improvement approaches • The plan perhaps does not emphasise enough the current financial pressures and challenges that will be associated with this
<p>Have we identified the right priorities?</p>	<ul style="list-style-type: none"> • Priorities are fine but they are all pretty vague - how make sure they are tangible? • looks like a list of bullet points all spread out in the document - nothing numbered/prioritised within priorities – everything can't be a priority - bit of a disconnect between what we want to achieve and how to do • Needs to be more visual and smarter -visually lacking - would be easier to follow if more visual - needs to be more readable • Not going to fix everything in next 3 years - Priorities a wish list? • Staffing is the issue needing sorted • Housing – people not getting appropriate housing - how do we change this? • Strategic documents always sound good and positive - need to be realistic about budget cuts, prevention etc.
<p>Our outcomes that underpin the plan</p>	<ul style="list-style-type: none"> • How do we measure outcomes - how do we know when these have been achieved? They are high level priorities – how do we know we are maximising our resources? • Action plan behind strategy - needs continual looking at – make sure we stay on track • Preventative versus resources and budgets - how preventative can we be in present circumstances?

	<ul style="list-style-type: none"> • Manage expectations - how to do this from clients/partners/staff - need that narrative in plain • Relationships happen organically but we are all very busy - if don't have mechanism for prompting etc. that development doesn't continue/happen - so many disparate partners – a challenge to take account of that • East Ren good at working co productively with partners - we rely totally on providers - how best to work with you? - please come along to our provider forums - we want to know • Communication is so important – 4 tests of change for instance - where are we at - who is updating?
<p>Areas we can work together on using our assets and resources</p>	<ul style="list-style-type: none"> • Collaboration on advice and information - Consistency around language we all use - consistent themes across directories and websites • Some happens naturally. Providers work together to enhance funding. How do we capture it? Is there any learning from it? • Housing - very keen to work more collaboratively – planning for emerging needs • Use assets of everyone to develop a shared approach - sharing induction/training opportunities, office space - start of that is making those connections - there is a willingness there. • The document could set out what is in place just now, and what we need to develop in terms of structures/ ways of working e.g. local collaborative framework, innovation • Local market and gaps – need to identify new providers in market
<p>Any additional comments</p>	<ul style="list-style-type: none"> • We need to celebrate more - central point for good news stories...keen to share examples in other authorities too • Care at Home Collaborative...it's about sharing / accessing resources. How can we work together on joint recruitment/ training? What assets do we have to work together? • How to access information. How do we know what's happening and engage with networks but also how do the community do this • Spaces -. We aren't using our office space in same way. Our lease as such- cost more to buy out. What can we do? • Please don't make strategy too long – 10 -12 pages is plenty
<p>Equality Impact outcomes</p>	<ul style="list-style-type: none"> • We have to think more impact positive/negative and include the people who use services • Neighbourhood Networks – know of people with disabilities that would like to give their opinions on this and other things) – arrange to meet and progress this separately • Need to be careful don't lose sight of prevention and early intervention - in among all the demand we still need space for this.

	<ul style="list-style-type: none"> • Fair to say PEN need to engage on the Protected Characteristics more but need to get better at recognising who has the connections and who these people are - how we do it? • Only ticked one box - could impact everyone or no one - no mention about specialisms or specialist support - homelessness substance abuse etc. - plea to recognise specialisms
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Equalities feedback

Lastly we asked...

Thinking about the Equalities Act 2010 and people who have protected characteristics under the Act - Who do you think will/could be impacted by the Draft Strategic Commissioning Plan?

Protected Characteristic	Number	%
Age	15	21
Disability	24	33
Gender Reassignment	5	6
Marriage and Civil Partnerships	3	4
Pregnancy and Maternity	4	5
Race and Ethnicity	7	9
Religion or Belief	7	9
Sex	6	8
Sexual Orientation	3	5
Total	74	100

This was from 26 responses

Next Steps

- Feedback will be reviewed and any substantial changes will be incorporated into the draft Strategic Commissioning Plan.
- The revised Plan will be presented to the Integration Joint Board in August 2023 and reviewed annually in line with the HSCP Strategic Plan
- Opportunities to collaboratively commission with partners in third and independent sector will continue to be progressed

Appendix 1

Lisa Burrett	ERC Housing
Michelle Munro	Partners for Inclusion
Adrian McKill	Neighbourhood Networks
Bryan Dando	Barrhead Housing
Sean Marshall	Hanover Housing
Anna Houston	HRM Homecare
Karen Reid	Beeches
Fiona Lochrin	The Food Train
Amy Hume	Enable Scotland
Gail McKinnon	Aspire
Lynne McWilliams	CSC
Suzette Lewis	HRM Homecare
Brian McKee	Real Life Options
Cara O`Donnell	Michael Tracy Project
Jillian McGrain	ERC Housing
Bex Astin	ERC Housing
Heather Black	Deafblind Scotland
Susanne Convery	Local Area Co-ordination Service
Vicky Attwood	Mearns Kirk Helping hands
Michael Collier	Plus Homecare
Pauline Boyce	Cosgrove care
Julie Breslin	ERC Strategic Services Team
Donna Shields	Cross Reach
Brian Dunigan	ERC MART
Lucy Roberts	ERC Housing
Louise Moth	Scottish Autism
Lynsey Allen	Scottish Care
Christine Cairns	ERC Strategic Services Team
Karen Brown	Partners for Inclusion
Farkhanda Chaudhry	ERC Strategic Services Team
Linda Kemp	Jewish Care
Heather Gray	Cosgrove Care
Sheryl Walker	Neighbourhood Networks
Anonymous x 4	Microsoft Form
Lynn Forest	Children/families SW manager



Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board	
Held on	16 August 2023	
Agenda Item	9	
Title	Revenue Budget Monitoring Report 2023/24; position as at 30 th June 2023	
Summary		
To provide the Integration Joint Board with financial monitoring information in relation to the revenue budget, as part of the agreed financial governance arrangements.		
Presented by	Lesley Bairden, Chief Financial Officer	
Action Required		
The Integration Joint Board is asked to: <ul style="list-style-type: none"> • note the projected outturn for the 2023/24 revenue budget • note that the Chief Officer and her management team are working on actions to mitigate cost pressures in the current year • approve the budget virement as requested 		
Directions	Implications	
<input type="checkbox"/> No Directions Required	<input checked="" type="checkbox"/> Finance	<input checked="" type="checkbox"/> Risk
<input type="checkbox"/> Directions to East Renfrewshire Council (ERC)	<input type="checkbox"/> Policy	<input type="checkbox"/> Legal
<input type="checkbox"/> Directions to NHS Greater Glasgow and Clyde (NHSGGC)	<input type="checkbox"/> Workforce	<input type="checkbox"/> Infrastructure
<input checked="" type="checkbox"/> Directions to both ERC and NHSGGC	<input type="checkbox"/> Equalities	<input type="checkbox"/> Fairer Scotland Duty

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

16 August 2023

Report by Chief Financial Officer

REVENUE BUDGET MONITORING REPORT

PURPOSE OF REPORT

1. To advise the Integration Joint Board of the projected outturn position of the 2023/24 revenue budget. This projection is based on ledger information as at 30th June 2023 and allowing for latest intelligence.

RECOMMENDATIONS

2. The Integration Joint Board is asked to:
 - note the projected outturn for the 2023/24 revenue budget
 - note that the Chief Officer and her management team are working on actions to mitigate cost pressures in the current year
 - approve the budget virement as requested

BACKGROUND

3. This report is part of the regular reporting cycle for ensuring that the HSCP financial governance arrangements are maintained. This is the first report for the financial year 2023/24 and provides the projected outturn for the year based on our latest information recognising we remain in a challenging financial position.
4. The projected outturn shows a projected overspend for the year of £2.64 million, based on current costs; however the Chief Officer and her management team are working on actions to mitigate cost pressures as far as is possible in the current year. This projected position also assumes that the full savings target of £7.06 million will be achieved in year, including a draw from the budget savings, pressures and general reserves.
5. Action plans are being drawn up by each Head of Service and will be reported to the IJB as part of the revenue monitoring reporting as the year progresses. It is hoped that significant inroads will be made into the projected overspend; however it is increasingly likely we will have to consider discussion with partners to seek additional funding to support the service delivery in line with the demand and capacity challenges we continue to experience.
6. The projected costs against budget will continue to be reviewed as the year progresses and action taken where possible to contain the projected overspend, whilst continuing to deliver our significant savings, recovery and renewal programme.

REPORT

7. The consolidated budget for 2023/24 and projected outturn position, shows a possible overspend of £2.64 million against a full year budget of £147.384 million (1.79%) after assumed contributions from reserves. However this is before the impact of action plans being drawn up and therefore and we expect this position will improve as plans are implemented to reduce spend. Progress will be reported to each IJB.
8. The HSCP ongoing costs related to Covid-19 now need to be contained within budget as Scottish Government funding has now ceased, with exception of £2k to support PPE for carers.
9. East Renfrewshire Council has agreed c£0.75 million non-recurring funding to support Covid recovery activity and this is expected to be utilised in full. The detail is included at Appendix 11.
10. The consolidated revenue budget and associated financial direction to our partners is detailed at Appendix 4. This is reported to each Integration Joint Board and reflects in year revisions to our funding contributions and associated directions.
11. The reserves position is set out at Appendix 5 and shows the in-year use of reserves, the committed spend to take forward and also shows that we may be able to un-hypothecate £327k to mitigate current year costs. The IJB will be asked to take a decision on this, if necessary, as the year progresses.
12. The IJB may also be asked to consider recovery planning proposals and associated discussion with our respective partners as the year progresses.
13. The main projected operational variances are set out below and as stated this is the projected position based on known care commitments, vacant posts and other supporting information from our financial systems as at 30th June 2023 and do allow for the latest known information. The projected costs include modest provision for further activity over the remainder of the year including the winter months.
14. **Children & Families and Public Protection £91k overspend;** results from two main factors:
 - The service continues to look after a number of unaccompanied asylum seeker children and there is pressure here with more children requiring support early in the financial year (£33k). This will change during the year depending on the number of children supported and the type of support required and / or available.
 - There is a pressure around residential care costs and fostering and adoption costs (£95k) offset in part by other smaller underspends.
15. **Older Peoples Services £55k underspend;** this is a result of current care commitments and staff turnover within teams:
 - Within residential and nursing care we are underspent by £430k.
 - This is offset by an overspend in localities directly purchased care at home and direct payment commitments of £500k.
 - Within Adult and Community Services we are underspent by £100k mainly from turnover.

16. **Physical & Sensory Disability £482k overspend;** is due to three factors:
- Care package projected costs £240k, reflecting an increase in the number of people supported since the budget was agreed.
 - The budget relating to the equipment contract is held within this service and current projections suggest an overspend of £264k reflecting increased demand for community based support across all care groups.
 - Staffing turnover of £35k gives a small offset against the pressures above
17. **Learning Disability Community Services £62k overspend;** care package costs are projected to overspend (£146k). This is offset in part by staffing vacancies within day services (£39k) and within the Community Autism Team (£50k).
18. When we look at the collective position across the three adult care groups above (in paragraphs 16 to 18 this gives a projected overspend across Barrhead and Eastwood localities of £489k and the locality split is shown as an extract in Appendices 1 to 3 as an alternative presentation of these budgets and projected costs.
19. **Intensive Services £1,076k overspend;** the most significant cost pressures are staffing and purchase of care:
- Within Care at Home we are seeing continued capacity constraints along with increased demand and complexity (both purchased and the in-house service) of £956k
 - Telecare Responders £315k overspend based on staffing and working patterns.
 - Bonnyton House £237k predominately staffing and agency costs to meet staff ratios given current absence levels.
Offset in part by:
 - Staff turnover and vacancies within Day Services and the Home from Hospital team (£451k).
20. As part of the Savings, Recovery and Renewal programme the service redesign will consider staffing and purchased care, with a view to delivering savings as well as containing costs in the current year.
21. **Learning Disability Inpatients £200k overspend;** reflecting the ongoing pressure in the service around increased observation costs as staff ratios must be maintained within the inpatient units. This pressure should be mitigated to some degree on completion of the redesign of the service, however this is dependent on other HSCP timeframes. This budget was reduced to reflect a saving associated with redesign and discussions are ongoing with other HSCPs as the transitional funding reserve is now fully depleted.
22. **Augmentative and Alternative Communication £nil variance;** it is anticipated that spend will remain on budget with the reserve in place available to smooth any developing pressures. The level of reserve requires to be considered given this meets local and national needs.
23. **Recovery Services Mental Health & Addictions £111k underspend;** the variance is mainly around projected turnover within Mental Health Adult Community Services (£100k).
24. **Prescribing £750k overspend:** we still expect significant pressure within this area however as the economic situation improves we hope the costs will be lower than the previous year. Given the time delay in prescribing data it is too early to accurately

predict a year end position, however it is important to note we fully utilised our prescribing reserve in 2022/23. This means a funding source needs to be identified to meet any overspend.

25. We have a local action plan in place and continue to work closely with colleagues at the Health Board analysing and modelling various scenarios, informed by national working groups.
26. **Finance & Resources £145k overspend;** this budget meets a number of HSCP wide costs, including charges for prior year NHS pension costs that will diminish over time. There is very little staff turnover at this stage in the financial causing an early pressure (£155k).
27. **Primary Care Improvement Plan, Alcohol and Drugs (Local Improvement Fund) and Mental Health Action 15;** we still await confirmation from the Scottish Government of our current year allocation for Mental Health Action 15.
28. Appendices 8 to 10 give a summarised position against each funding stream, showing the planned activity against each initiative. The reserves position for Mental Health Action 15 and for Alcohol & Drugs Partnership should become clearer once the Scottish Government confirm final allocation and / or agree use committed reserves.

Other

29. The current projected revenue budget overspend of £2.64 million is the projected overspend before action plans are put in place. There are insufficient reserves to bridge this cost, with a potentially small offset should we be able to un-hypothecate c£327k reserves.
30. We signalled in the 2021/22 budget that funding may not be sufficient to meet the increasing demand for services, recognising the historic level of savings delivered (£8.4 million on social care between 2016/17 and 2019/20) and despite best efforts we may not be able to contain costs in the current financial year.
31. We will take every action where possible to minimise cost pressures in year and are closely monitoring our Savings, Recovery and Renewal programme where progress is reported on all change activity. For ease of reference Appendix 6 in this report also provides a position statement on savings progress. This remains incredibly challenging in the current environment given the capacity constraints and focus on service delivery, recognising the tensions when trying to reduce costs and deliver change and savings.
32. The support cost charge from the council is currently projected to the budget agreed by the IJB and work is required to ensure the activity levels are reduced, based on prior years, to allow us to stay within budget.
33. The IJB is requested to approve the budget virement as detailed at Appendix 7 to allocate savings in line with plans and allocate criminal justice and wellbeing funding.
34. As with every year there are a number of variables such as pay award, inflation, demand, economic volatility, workforce capacity that will all impact on our cost projections and detailed monitoring will continue throughout the year.

IMPLICATIONS OF THE PROPOSALS

Finance

35. The financial implications are detailed in the report.

Risk

36. Delivering services and the savings recovery and renewal programme within existing funding is clearly our most significant risk.

37. There are other risks which could impact on the current and future budget position; including:

- Maintaining capacity to deliver our services
- Achieving all existing savings on a recurring basis
- The ongoing impact of Covid-19 on our partner providers and the care service market
- Prescribing costs and the ability to accurately model and project the position, particularly in the early part of the year
- Observation and Out of Area costs within Specialist Learning Disability Services

DIRECTIONS

38. The running budget reconciliation which forms part of financial directions to our partners is included at Appendix 4.

39. The report reflects a projected overspend of £2.64 million after the expected draw from reserves to support savings delivery. Discussions in relation to recovery and / or support funding may be required during 2023/24.

CONSULTATION AND PARTNERSHIP WORKING

40. The Chief Financial Officer has consulted with our partners.

41. This revenue budget reflects the consolidation of funding from both East Renfrewshire Council and NHS Greater Glasgow and Clyde. The HSCP operates under the Financial Regulations as approved by the Performance and Audit Committee on 18 December 2015 and reviewed March 2020; the latest review of the financial regulations and reserves policy were agreed by the Performance and Audit Committee on 22 September 2022.

CONCLUSIONS

42. Appendix 1 reports a potential projected overspend of £2.640 million for the year to 31 March 2024; however this is the position before mitigating action plans to reduce costs are put in place. Discussions in relation to recovery and / or support funding may be required during 2023/24.

RECOMMENDATIONS

43. The Integration Joint Board is asked to note:
- note the projected outturn for the 2023/24 revenue budget
 - note that the Chief Officer and her management team are working on actions to mitigate cost pressures in the current year
 - approve the budget virement as requested

REPORT AUTHOR

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27 July 2023

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

IJB 01.02.2023 – Revenue Budget Monitoring Report
https://www.eastrenfrewshire.gov.uk/media/8653/IJB-Item-10-1-February-2023/pdf/IJB_Item_10_-_01_February_2023.pdf?m=638097462130700000

IJB 29.03.2023 – Revenue Budget Monitoring Report
https://www.eastrenfrewshire.gov.uk/media/8927/IJB-Item-08-29-March-2023/pdf/IJB_Item_08_-_29_March_2023.pdf?m=638146518613970000

IJB 23.11.2022 – Revenue Budget Monitoring Report
https://www.eastrenfrewshire.gov.uk/media/8434/IJB-Item-08-23-November-2022/pdf/IJB_Item_08_-_23_November_2022.pdf?m=638036934516600000

IJB 10.08.2022 – Revenue Budget Monitoring Report
https://www.eastrenfrewshire.gov.uk/media/7979/IJB-Item-08-10-August-2022/pdf/IJB_Item_08_-_10_August_2022.pdf?m=637946965278870000

IJB 16.03.2022 – Revenue Budget Monitoring Report
https://www.eastrenfrewshire.gov.uk/media/7442/IJB-item-10-16-March-2022/pdf/IJB_item_10_-_16_March_2022.pdf?m=637822661469700000

IJB 26.01.2022 – Revenue Budget Monitoring Report
https://www.eastrenfrewshire.gov.uk/media/7317/IJB-item-06-26-January-2022/pdf/IJB_item_06_-_26_January_2022.pdf?m=637783618121870000

Consolidated Monitoring Report

Projected Outturn Position as at 30th June 2023

Objective Analysis	Full Year			
	Budget £'000	Projected Outturn £'000	Variance (Over) / Under £'000	Variance (Over) / Under %
Public Protection - Children & Families	12,879	12,970	(91)	(0.71%)
Public Protection - Criminal Justice	29	29	-	0.00%
Adult Localities Services				
Older People	23,813	23,758	55	0.23%
Physical & Sensory Disability	5,914	6,396	(482)	(8.15%)
Learning Disability - Community	18,662	18,724	(62)	(0.33%)
Learning Disability - Inpatients	9,063	9,263	(200)	(2.21%)
Augmentative and Alternative Communication	71	71	-	0.00%
Intensive Services	15,326	16,402	(1,076)	(7.02%)
Recovery Services - Mental Health	5,365	5,250	115	2.14%
Recovery Services - Addictions	1,044	1,048	(4)	(0.38%)
Family Health Services	29,406	29,406	-	0.00%
Prescribing	16,841	17,591	(750)	(4.45%)
Finance & Resources	8,971	9,116	(145)	(1.62%)
Net Expenditure	147,384	150,024	(2,640)	(1.79%)
Contribution to / (from) Reserve	-	(2,640)	2,640	-
Net Expenditure	147,384	147,384	-	

Net Contribution To / (From) Reserves

£'000
nil

Additional information - Adult Localities

Objective Analysis	Full Year			
	Budget £'000	Projected Outturn £'000	Variance (Over) / Under £'000	Variance (Over) / Under %
Localities Services - Barrhead	23,892	24,134	(242)	(1.01%)
Localities Services - Eastwood	24,497	24,744	(247)	(1.01%)
Net Expenditure	48,389	48,878	(489)	(1.01%)

Council Monitoring Report

Projected Outturn Position as at 30th June 2023

Subjective Analysis	Full Year			
	Budget £'000	Projected Outturn £'000	Variance (Over) / Under £'000	Variance (Over) / Under %
Employee Costs	28,489	29,594	(1,105)	(3.88%)
Property Costs	976	963	13	1.33%
Supplies & Services	2,637	3,771	(1,134)	(43.00%)
Transport Costs	307	314	(7)	(2.28%)
Third Party Payments	49,933	51,718	(1,785)	(3.57%)
Support Services	2,455	2,455	-	0.00%
Income	(17,757)	(19,805)	2,048	11.53%
Net Expenditure	67,040	69,010	(1,970)	(2.94%)

Contribution to / (from) Reserve	-	(1,970)	1,970	-
Net Expenditure	67,040	67,040	-	-

Objective Analysis	Full Year			
	Budget £'000	Projected Outturn £'000	Variance (Over) / Under £'000	Variance (Over) / Under %
Public Protection - Children & Families	10,460	10,571	(111)	(1.06%)
Public Protection - Criminal Justice	29	29	-	0.00%
Adult Localities Services				
Older People	15,704	15,749	(45)	(0.29%)
Physical & Sensory Disability	5,168	5,650	(482)	(9.33%)
Learning Disability	12,528	12,640	(112)	(0.89%)
Intensive Services	14,232	15,308	(1,076)	(7.56%)
Recovery Services - Mental Health	1,985	1,970	15	0.76%
Recovery Services - Addictions	263	267	(4)	(1.52%)
Finance & Resources	6,671	6,826	(155)	(2.32%)
Net Expenditure	67,040	69,010	(1,970)	(2.94%)

Contribution to / (from) Reserve	-	(1,970)	1,970	-
Net Expenditure	67,040	67,040	-	-

Notes

1. Contribution To Reserves is made up of the following transfer:

	£'000
Net Contribution to / (from) Reserves	nil

2. In addition to the above addition spending from reserves is detailed at Appendix 5

3. Additional information - Adult Localities

Objective Analysis	Full Year			
	Budget £'000	Projected Outturn £'000	Variance (Over) / Under £'000	Variance (Over) / Under %
Localities Services - Barrhead	17,230	17,537	(307)	(1.78%)
Localities Services - Eastwood	16,170	16,502	(332)	(2.05%)
Net Expenditure	33,400	34,039	(639)	(1.91%)

NHS Monitoring Report

Projected Outturn Position as at 30th June 2023

Subjective Analysis	Full Year			
	Full Year Budget	Projected Outturn	Variance (Over) / Under	Variance (Over) / Under
	£'000	£'000	£'000	%
Employee Costs	19,146	19,066	80	0.42%
Non-pay Expenditure	51,126	51,876	(750)	(1.47%)
Resource Transfer/Social Care Fund	12,146	12,146	-	0.00%
Income	(2,074)	(2,074)	-	0.00%
Net Expenditure	80,344	81,014	(670)	(0.83%)

Contribution to / (from) Reserve	-	(670)	670	-
Net Expenditure	80,344	80,344	-	-

Objective Analysis	Full Year			
	Full Year Budget	Projected Outturn	Variance (Over) / Under	Variance (Over) / Under
	£'000	£'000	£'000	%
Childrens Services	2,313	2,293	20	0.86%
Adult Community Services	4,629	4,529	100	2.16%
Learning Disability - Community	1,095	1,045	50	4.57%
Learning Disability - Inpatient	9,063	9,263	(200)	(2.21%)
Augmentative and Alternative Communication	71	71	-	0.00%
Family Health Services	29,406	29,406	-	0.00%
Prescribing	16,841	17,591	(750)	(4.45%)
Recovery Services - Mental Health	2,585	2,485	100	3.87%
Recovery Services - Addictions	220	220	-	0.00%
Finance & Resources	1,975	1,965	10	0.51%
Resource Transfer	12,146	12,146	-	0.00%
Net Expenditure	80,344	81,014	(670)	(0.83%)

Contribution to / (from) Reserve	-	(670)	670	0.00%
Net Expenditure	80,344	80,344	-	0.00%

Notes

1. Resource Transfer allocated at the consolidated level as detailed below:

	£'000
Public Protection - Children & Families	106
Adult Localities Services	
Older People	3,480
Physical & Sensory Disability	746
Learning Disability	5,039
Intensive Services	1,094
Recovery Services - Mental Health	795
Recovery Services - Addictions	561
Finance & Resources	325
	<u>12,146</u>

Localities Resource Transfer - alternative presentation

Localities Services - Barrhead	5,260
Localities Services - Eastwood	4,005

£'000

2. Net Contribution to / (from) Reserves

nil

In addition to the above addition spending from reserves is detailed at Appendix 5

3. Additional information - Adult Localities

Objective Analysis	Full Year			
	Full Year Budget	Projected Outturn	Variance (Over) / Under	Variance (Over) / Under
	£'000	£'000	£'000	%
Localities Services - Barrhead	1,402	1,337	65	4.64%
Localities Services - Eastwood	4,322	4,237	85	1.97%
Net Expenditure	5,724	5,574	150	2.62%

East Renfrewshire HSCP - Revenue Budget Monitoring 2023/24
Budget Reconciliation & Directions

Appendix 4

	NHS £000	ERC £000	IJB £000	Total £000
Funding Sources to the IJB				
1 Revenue Budget Contributions per March 2023 Budget	82,051	67,040		149,091
Funding confirmed in opening budget but not yet received	(1,023)			(1,023)
Criminal Justice Grant Funded Expenditure		616		616
Criminal Justice Grant		(616)		(616)
Prescribing - Apremilast allocation	25			25
Specialist Childrens Services - transfer to East Dunbartonshire	(745)			(745)
Health Visitors - Central Training Allocation	36			36
	80,344	67,040	-	147,384
Funding Outwith Revenue Contribution				
* Housing Aids & Adaptations		438		438
Set Aside Hospital Services Opening Budget	28,430			28,430
Total IJB Resources	108,774	67,478	-	176,252
Directions to Partners				
Revenue Budget	80,344	67,040		147,384
Criminal Justice Grant Funded Expenditure		616		616
Criminal Justice Grant		(616)		(616)
1 Resource Transfer & Recharges	(12,146)	12,146		0
Carers Information	58	(58)		0
	68,256	79,128	-	147,384
* Housing Aids & Adaptations		438		438
Set Aside Hospital Services Budget	28,430			28,430
	96,686	79,566	-	176,252

* includes capital spend

1. Includes social care fund, cross charges and historic resource transfer etc.

Earmarked Reserves	Reserve Brought Fwd from £'000	2023/24 Projected spend £'000	2023/24 Possible Release £'000	Projected balance 31/03/24 £'000	Comment
Scottish Government Funding					
Mental Health - Action 15	118	(54)		172	Based on latest projected costs, however subject to SG revision to allocation
Alcohol & Drugs Partnership	851	531		320	Based on latest projected costs, however subject to SG revision to allocation
Primary Care Improvement Fund	661	335		326	Based on latest projected costs, however subject to SG revision to allocation
GP Premises Fund	181	130		51	
COVID-19	2	2		-	To support Carers PPE
Scottish Government Funding	1,813	944	-	869	
Bridging Finance					
Budget Savings Reserve	1,434	1,434		-	Allocated to meet savings considered at risk
In Year Pressures Reserve	165	165		-	Allocated to meet savings considered at risk
Current Year Projected Overspend	-	-		-	
Prescribing	-	-		-	Reserve depleted in 2022/23
Bridging Finance	1,599	1,599	-	-	
Children & Families					
Health Visitors	82	82		-	To support service to return to budgeted establishment
School Counselling	382	364	18	-	Projected costs for Year 2 of the Family Wellbeing project
Mental Health Recovery Monies	473	473		-	Committed for system wide programme and local care costs
Trauma Informed Practice	100	40		60	Year 2 funding committed for post
Whole Family Wellbeing	466	466		-	
Unaccompanied Asylum Seekers Children	9	9		-	
Children & Families	1,512	1,434	18	60	
Transitional Funding					
Community Living Change Fund	254	254		-	To support redesign programme
Total Transitional Funding	254	254	-	-	
Adult Services					
Mental Health Officer/Community Psychology/Capacity	61		61	-	Potentially release if required
Care Home Oversight Support and Lead Nurse	77		77	-	Potentially release if required
Augmentative & Alternative Communication	104			104	
Addictions - Residential Rehabilitation	37		37	-	Potentially release if required
Learning Disability Health Checks	32	32		-	
Armed Forces Covenant	13	13		-	
Wellbeing	45	45		-	
Dementia Support	109	109		-	
Telecare Fire Safety	18	18		-	
Total Adult Services	496	217	175	104	
Repairs & Renewals					
Repairs, Furniture and Specialist Equipment	100		50	50	Possibly release £50k to offset pressures - limits development opportunities
Repairs & Renewals	100	-	50	50	
Total All Earmarked Reserves	5,774	4,448	243	1,083	
General Reserves					
East Renfrewshire Council	109	100	9	-	Allocated to meet savings considered at risk and possibly release balance
NHSGCC	163	88	75	-	Allocated to meet savings considered at risk and possibly release balance
Total General Reserves	272	188	84	-	
Grand Total All Reserves	6,046	4,636	327	1,083	

East Renfrewshire HSCP - Revenue Budget Monitoring 2023/24
Analysis of Savings Delivery

Appendix 6

Saving	2023/24 Funding Gap £'000	Savings Achieved £'000	Remaining Balance		Comments
			On Track £'000	At Risk £'000	
HSCP Wide Savings					
Review of Commissioned Services	225	82	143	-	On target with a further £1k recurring in 2024/25
Further Funding Expected on Pay Award	261	261	-	-	Awaiting confirmation of funding
Living Wage on Pay element of contracts rate only	148	148	-	-	Agreed as part of budget and adjustment applied
Limit Use of Support Services to contain cost pressures	219	-	219	-	Actions to be confirmed to move towards SLA Capacity concern
Supporting People Framework	3,400	-	2,550	850	New framework in place, action plan in progress - potential risk around timing of saving
Structure Proposals	928	58	533	337	Timing of saving at risk, work ongoing to refine across Childrens and Adults
Allocate Turnover Target 1%	200	200	-	-	All NHS staffing budgets now include turnover target saving
Learning Disabilities					
Sleepover Review	150	132	18	-	Work in progress, overall on target. Additional £8k full year effect in 2024/25
Supported Living	130	87	43	-	Work in progress - direct payments non recurring achieved to date
Intensive Services					
Efficiencies from Care at Home Scheduling System	75	5	-	70	Efficiencies being reviewed with a view to reducing Agency costs/budget
Care at Home Review Phase 2	200	-	-	200	Structure proposals drafted
Review of Vacant posts and Associated running costs	179	90	-	107	Vacant posts deleted, balance at risk of timing delay
Children and Families					
Review of Connor Road funding	60	-	-	60	Ongoing discussions with ERC on future service model
Family Functional Therapy	52	52	-	-	Service discontinued, alternative model in place.
Residential Costs - review of Care options	226	219	7	-	Rediction in one placement
Health Improvement - review of service to rationalise	50	-	-	50	Timing of saving at risk
Trauma Informed Practice	-	50	-	-	Service model in place - vacancy deleted
Finance and Resources					
Review of Structure and Processes	296	296	-	-	All savings identified have been achieved, work continues to identify further savings
Localities					
Rehab Team Mini Restructure	61	-	-	-	Saving no longer achievable - alternatives identified and delivered
Eastwood localities Team - Mini Restructure	53	-	-	-	Saving no longer achievable - alternatives identified and delivered
Review of Vacant posts and associated Running Costs	28	105	18	-	On track vacant posts and running cost efficiencies achieved, further post in October, includes alternative savings for non achievement above
District Nursing - Vacancy Management	50	-	-	50	Timing of saving at risk
New - Tech Enabled Care	-	80	-	-	Development budget given up
Mental Health and Addictions					
Review of Structure and Care Packages	65	65	-	-	Vacant post deleted and care package costs revised
Sub Total	7,056	1,930	3,531	1,724	

East Renfrewshire HSCP - Revenue Budget Monitoring 2023/24
Budget Virement - ERC Contribution Only

Appendix 7

Subjective Analysis	2023/24 Budget Virement					
	Current Ledger	(1)	(2)	(3)	2022/23 Budget	Total Virement
	£'000	£	£	£	£'000	£'000
Employee Costs	28,367			122	28,489	122
Property Costs	975				975	-
Supplies & Services	2,666			(29)	2,637	(29)
Transport Costs	307				307	-
Third Party Payments	49,961			(28)	49,933	(28)
Support Services	2,456				2,456	-
Income	(17,076)	(616)		(65)	(17,757)	(681)
Net Expenditure	67,656	(616)	-	-	67,040	(616)

Objective Analysis	2023/24 Budget Virement					
	Current Ledger	(1)	(2)	(3)	2022/23 Budget	Total Virement
	£'000	£	£	£	£'000	£'000
Public Protection - Children & Families	10,460				10,460	-
Public Protection - Criminal Justice	645	(616)			29	(616)
Adult Health - Localities Services						
Older People	15,609		44	51	15,704	95
Physical & Sensory Disability	5,219			(51)	5,168	(51)
Learning Disability	12,528				12,528	-
Adult Health - Intensive Services	14,232				14,232	-
Recovery Services - Mental Health	1,985				1,985	-
Recovery Services - Addictions	263				263	-
Finance & Resources	6,715		(44)		6,671	(44)
Net Expenditure	67,656	(616)	-	-	67,040	(616)

Note:

- 1 Allocation of Ring Fenced Grant Funding for Criminal Justice
- 2 Wellbeing and Carers budgets moved to Localities to reflect management of services
- 3 Allocation of savings between services

East Renfrewshire HSCP - Revenue Budget Monitoring 2023/24
Primary Care Improvement Plan

Appendix 8

Service	Planned Programme Costs	Projected Programme Costs	Projected Variance
	£'000	£'000	£'000
Pharmacy Support	1,132	900	232
Advanced Nurse Practitioners - Urgent Care	196	173	23
Advanced Practice Physiotherapists	213	180	33
Community Mental Health Link Workers	85	85	-
Community Healthcare Assistants / Treatment Room *	490	423	67
Vaccine Transformation Programme	1,106	1,106	-
Programme Support / CQL / Pharmacy First	154	154	-
Total Cost	3,376	3,021	355
Funded by:			
In Year Funding (2023/24 tbc - based on prior year allocation)		2,686	
Reserve - Opening Balance		661	
Total Funding		3,347	
Funding Required		326	

NB Vaccine Transformation costs to be confirmed at Board level

Service	Planned Programme Costs	Projected Programme Costs	Projected Variance
	£'000	£'000	£'000
Staff costs - Board wide including Nursing, Psychology and Occupational Therapy	250	169	81
Programme Support	32	29	3
Staff Costs East Ren HSCP including Psychology, CAMHS and Occupational Therapy	256	207	49
Other - Peer Support Delivery Service	47	47	-
Total Cost	585	452	133
Funded by:			
In Year Funding (2023/24 tbc - based on prior year allocation)		506	
Reserve - Opening Balance		118	
Total Funding		624	
Potential reserve at year end based on current projection		172	

NB Plans to utilise existing reserve being developed - subject to any SG conditions, most prudent assumption until confirmed

East Renfrewshire HSCP - Revenue Budget Monitoring 2023/24
Alcohol & Drugs Partnership

Appendix 10

Service	Planned Programme Costs	Projected Programme Costs	Projected Variance
	£'000	£'000	£'000
Additional Peer support and Staffing Provision	270	263	7
Additional National Mission uplift	175	175	-
Residential Rehab	80	80	-
MAT Standards	173	169	4
Whole family Approach framework	56	50	6
Lived and Living Experience	24	24	-
Taskforce Response Fund	84	84	-
Alcohol Brief Interventions	25	25	-
Early Intervention - Youth Outreach	25	19	6
Whole Family Support Activity	45	45	-
Recovery Hub	500	400	100
Total Cost	1,457	1,334	123
Funded by:			
In Year Funding (2023/24 tbc - based on prior year allocation)		803	
Reserve - Opening Balance		851	
Total Funding		1,654	
Potential reserve at year end based on current projection		320	

NB Plans to utilise existing reserve being developed
Future monitoring will be expanded to include all funding streams

East Renfrewshire HSCP - Revenue Budget Monitoring 2023/24
ERC Funded Covid Reserves Activity

Appendix 11

Initiative	2023/24 Funding £'000	Comments
Development of Talking Points	48	Post expected to be recruited and in place by mid August
Recovery Café spaces in health centres	10	Expect to use full allocation by 31 March 2024 across Eastwood and Barrhead localities
HSCP winter staff to cover frontline service continuity	250	Expect to use full allocation by 31 March 2024 to support winter pressures
Go-bags for Domestic Abuse Survivors	2	In place
Support to Fostering households	11	Payments to support being made
HSCP staff wellbeing programme - extension	24	Programme in place to March 2024
Justice Social Work - reducing backlog of Unpaid Work Hours	5	In place
Justice Social Work - materials for Unpaid Work Service to increase output	4	In place
Carers Support	80	Post expected to be recruited by mid August to support development of options for respite
Housing Support for young people	43	Recruitment of post in progress
Mental Health Support for Children	50	Recruitment of post in progress and training sourced
Healthier Minds Hub - Children & Young People's Mental & Emotional Wellbeing	74	Recruitment of posts in progress
Recovery support for Domestic Abuse Survivors	37	Recruitment of post in progress
Additional Support Needs - transition to adulthood	91	Recruitment of posts in progress
Young people affected by drugs and alcohol	43	Recruitment of post in progress
	772	
In addition to the above:		
Social Work support to vulnerable families at Christmas	10	Agreed in principle, decision to be formalised later in year

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Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board	
Held on	16 August 2023	
Agenda Item	10	
Title	HSCP Savings, Recovery and Renewal Programme	
Summary		
The purpose of this report is to update the Integration Joint Board on the HSCP Savings, Recovery and Renewal Programme.		
Presented by	Lesley Bairden, Head of Finance & Resources (Chief Financial Officer)	
Action Required		
Members of the Integration Joint Board are asked to note and comment on the progress of the HSCP Savings, Recovery and Renewal Programme		
Directions	Implications	
<input checked="" type="checkbox"/> No Directions Required	<input checked="" type="checkbox"/> Finance	<input type="checkbox"/> Risk
<input type="checkbox"/> Directions to East Renfrewshire Council (ERC)	<input type="checkbox"/> Policy	<input type="checkbox"/> Legal
<input type="checkbox"/> Directions to NHS Greater Glasgow and Clyde (NHSGGC)	<input type="checkbox"/> Workforce	<input type="checkbox"/> Infrastructure
<input type="checkbox"/> Directions to both ERC and NHSGGC	<input type="checkbox"/> Equalities	<input type="checkbox"/> Fairer Scotland Duty

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

16 August 2023

Report by Chief Officer

HSCP SAVINGS, RECOVERY AND RENEWAL PROGRAMME

PURPOSE OF REPORT

1. The purpose of this report is to update the Integration Joint Board on the HSCP Savings, Recovery and Renewal Programme.

RECOMMENDATION

2. It is recommended that the Integration Joint Board note and comment on the progress of the HSCP Savings, Recovery and Renewal Programme.

BACKGROUND

3. The Savings, Recovery and Renewal programme provides information to the IJB across three levels:
 - Strategic: projects that cover HSCP wide activity
 - Service: projects specific to one area/service
 - Operational Deliveries: activities at a service level not related to significant change.

REPORT

4. Since the last report to the IJB in June the programme has continued to progress. Appendix 1 provides a detailed update on individual projects. By exception the updates in the interim period are detailed below.
5. **Supporting People Framework** – The system changes to fully embed the framework will be implemented during August. This includes individual budget calculator which has been revised to align with the key areas of the framework. The revision of the calculator was previously a standalone work stream and has been transferred to this programme due to the interdependencies with the framework. Ongoing monitoring will identify the impacts of the care packages and the numbers of people supported.
6. A dedicated team have been identified to focus on reviews. Briefings to outline the approach took place week commencing 17th July, with specific training in relation to Care at Home reviews underway.
7. **Case Recording Replacement System project** – The Invitation to Tender (ITT) has been published on the Scotland Excel framework with a closing date of 29th August 2023. Work is underway to establish the Tender Evaluation Panel with a view to appointing a preferred supplier by the end of October 2023. Preparatory work in relation to data management/migration continues.
8. **Care at Home Review Phase 2** - due to significant capacity issues over the winter period the Care at Home Review Phase 2 project was delayed. The project has now recommenced with fortnightly Project Board meetings scheduled. The status of the

project remains red, this will be reviewed once the new timescales and project plans are in place. The project board meetings will monitor the progress against the savings target and will adjust the phasing of the savings accordingly.

9. **Total Mobile Closure Report** - The IT implementation of the new system is now complete. It was agreed to transfer the benefits realisation/monitoring element of the project to the wider Care at Home review project. To date benefits of £5k have been realised through a reduction in the cost of messaging frontline staff.
10. **Income Generation** - a short life working group has been established to consider income generation opportunities for the HSCP. The group is looking at non care related income and this includes: accommodation, charging for overheads, charging for training to other organisations, charging for equipment along with a benchmarking exercise to look at any other options as well as the level of charges. The intention is to bring proposals to the IJB in September as part of the scheduled charging for services report.
11. **Financial Implications** - the savings target for 2023/24 is £7.056 million and Appendix 2 provides a breakdown of the detail showing progress by saving. As previously agreed a broad de-minimus of £50k has been used so that smaller savings are amalgamated.
12. The appendix can be summarised:

Savings Progress	£ million	%
Achieved to date	1.930	27%
On track to be achieved	3.531	50%
At risk of slippage / shortfall	1.729	24%
Total	7.185	

13. If all of the savings above were delivered in full in the current year this would total £7.185 million and would be a modest over recovery against target of £0.129 million.
14. However if the all the at risk savings of £1.729 million were not achieved in the current year this will need to be met from reserves; the current reserves balance to support delivery of savings is £1.599 million, with a further general reserve of £0.272 million.
15. This would mean there would be very little, if any, useable reserve reserves to meet operational costs above budget. The current year position and associated risk is included in the revenue monitoring report at agenda item 9.

CONSULTATION AND PARTNERSHIP WORKING

16. Representation from staff, those who use our services, staffside representatives and partner providers will continue to be invited onto projects as appropriate.

IMPLICATIONS OF THE PROPOSALS

Finance

17. The 2023/24 savings targets and associated progress will be reported to future meetings as part of this programme.

Equalities

18. We will undertake Equality, Fairness and Rights Impact Assessments where required.

Risk

19. There is a significant financial risk should the full savings not be achieved on a recurring basis by 31 March 2024. There remains a capacity challenge to support change and savings delivery, particularly the Supporting People Framework, while maintaining operational service delivery and associated demands.

Workforce

20. There are no specific workforce issues arising as result of this paper and savings relating to staffing are discussed through our HR Sub-Group, Joint Staff Forum and other appropriate governance.
21. There are no legal, policy or infrastructure implications arising as a result of this paper.

DIRECTIONS

22. There are no directions arising from this report.

CONCLUSIONS

23. The Savings, Recovery and Renewal Programme is continuing to progress and will be reported to each meeting of the IJB.

RECOMMENDATIONS

24. It is recommended that the Integration Joint Board note and comment on the progress of the HSCP Savings, Recovery and Renewal Programme

REPORT AUTHOR AND PERSON TO CONTACT

Lesley Bairden, Head of Finance & Resources (Chief Financial Officer)

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Chief Officer, IJB: Julie Murray

25 July 2023

BACKGROUND PAPERS

IJB Paper: 28 June 2023 – Item 10 Savings, Recovery and Renewal Programme

[IJB_Item_10_-_28_June_2023.pdf \(eastrenfrewshire.gov.uk\)](#)

IJB Paper: 29 March 2023 – Item 13 Savings, Recovery and Renewal Programme

https://www.eastrenfrewshire.gov.uk/media/8932/IJB-Item-13-29-March-2023/pdf/IJB_Item_13_-_29_March_2023.pdf?m=638146518637030000

IJB Paper: 22 November 2022– Item 09. Recovery and Renewal Programme

https://www.eastrenfrewshire.gov.uk/media/8435/IJB-Item-09-23-November-2022/pdf/IJB_Item_09_-_23_November_2022.pdf?m=638036934520900000

IJB Paper: 21 September 2022 – Item 11. Recovery and Renewal Programme

https://www.eastrenfrewshire.gov.uk/media/8153/IJB-Item-11-21-September-2022/pdf/IJB_Item_11_-_21_September_2022.pdf?m=637983202030030000

IJB Paper: 10 August 2022 – Item 9. HSCP Recovery and Renewal Programme

https://www.eastrenfrewshire.gov.uk/media/7987/IJB-Item-09-10-August-2022/pdf/IJB_Item_09_-_10_August_2022.pdf?m=63794953647000000

IJB Paper: 22 Jun 2022– Item 10. Recovery and Renewal Programme
https://www.eastrenfrewshire.gov.uk/media/7756/IJB-Item-10-22-June-2022/pdf/IJB_Item_10_-_22_June_2022.pdf?m=637904674834270000

IJB Paper: 24 Nov 2021 – Item 10. Recovery and Renewal Programme
https://www.eastrenfrewshire.gov.uk/media/7146/IJB-Item-10-24-November-2021/pdf/IJB_Item_10_-_24_November_2021.pdf?m=637727671012970000

IJB Paper: 22 Sep 2021 - Item 10. Recovery and Renewal Programme
https://www.eastrenfrewshire.gov.uk/media/5991/IJB-Item-10-22-September-2021/pdf/IJB_Item_10_-_22_September_2021.pdf?m=637668671028500000

IJB Paper: 23 Jun 2021 – Item 10. Recovery & Renewal Paper, June 2021
https://www.eastrenfrewshire.gov.uk/media/5721/IJB-Item-10-23-June-2021/pdf/IJB_Item_10_-_23_June_2021.pdf?m=637590085619970000

IJB Presentation: 12 May 2021 Item 6. Recovery and Transformation Programme

Appendix 1 - Project Timelines and Summaries as at 16 August 2023

LIVE PROJECTS				
Project	Project Owner	Project Start Date	Project End Date	RAG Status
L1: Reflections and Learning from working during the pandemic	Lesley Bairden/Lee McLaughlin/Tom Kelly and Raymond Prior	August 2021	November 2022	RED
L2: Learning Disability Development	Tom Kelly	August 2022	March 2024	GREEN
L3: Case Recording System (CareFirst) Replacement	Lesley Bairden	April 2022	October 2024	GREEN
L4: Information Governance and Data Cleansing	Raymond Prior	October 2022	July 2024	GREEN
L5: Review of Commissioned Services	Margaret Phelps	November 2022	July 2023	GREEN
L6: Care at Home Review Phase 2	Julie Murray	July 2023	December 2023	RED
L7: Supporting People Framework	Tom Kelly, Lee McLaughlin, Raymond Prior	April 2023	March 2024	GREEN

PLANNED PROJECTS				
Project	Project owner	Expected Project Start Date	Project End Date	RAG Status
P1: Pre-Payment Cards	Lesley Bairden	August 2023	January 2024	

FUTURE PROJECTS				
Project	Project owner	Expected Project Start Date	Project End Date	RAG Status
F1: Review of Telephony Systems	Lesley Bairden	August 2023	March 2024	

RECENTLY CLOSED/TRANSFERRED PROJECTS				
Project	Project Owner	Project Start Date	Project End Date	Comments
C2: Individual Budget Calculator / REG Review	Lee McLaughlin/Lesley Bairden	March 2023	July 2023	TRANSFER: Agreement from Savings, Recovery and Renewal Board to transfer the project including the associated tasks and savings to the Supporting People Framework project.
C3: Care at Home Scheduling System Replacement	Gayle Smart	May 2022	June 2023	CLOSURE: Agreement from Savings, Recovery and Renewal Board to formally close the implementation phase of this project. Monitoring of benefits delivery for the remainder of the programme will be transferred to the Care at Home Review programme. To date the project has delivered savings of £5k through a reduction in messaging to frontline staff.

LIVE PROJECTS SUMMARY

Project Title	L1 - Reflections and Learning from working during the pandemic
Project Owner	Mairi-Clare Armstrong
Purpose - what do we want to achieve	<ul style="list-style-type: none"> To capture lessons learned over the pandemic period from the required changes to working practices across the HSCP due to the necessity to facilitate home-working, social distancing impact in relation to contact with patients and those who use our services; and the impact of communicating to a remote workforce during a time of significant change. To disseminate which of these changes created a positive impact, and how these may be incorporated into general working practices post-pandemic.
Expected Outcomes – Non financial	<ul style="list-style-type: none"> The creation of a clear and detailed illustration of lessons learned for consideration as to how the experiences of the last two and a half years can provide the foundation for accelerating the pace of change in the Recovery and Renewal Programme across all projects. The establishment of a clear framework by which all existing and emerging projects can refer to when scoping potential improvements and efficiencies related to the project, and ensure that these proven advances are embedded into project thinking where appropriate. Assist in future achievement of efficiencies in projects within the Savings, Recovery and Renewal Programme Engaging and collaborating with the workforce to design services for the future
Expected Outcomes – financial	<ul style="list-style-type: none"> There are no expected financial outcomes as a result of this project.
Current Update	<ul style="list-style-type: none"> Session planned with SMT in June to discuss learnings did not go ahead due to focus on Supporting People Framework along with operational pressures Report/presentation to be discussed with SMT by October 2023
Next Steps	<ul style="list-style-type: none"> Following above workshop, submit lessons learned and closure report to first Recovery and Renewal Board in 2023.
RAG Status	RED
Timeline	August 2021 to June 2023

Project Title	L2 – Learning Disability Development
Project Owner	Tom Kelly
Purpose - what do we want to achieve	<ul style="list-style-type: none"> • To undertake an extensive review of our current approach to supporting those who use our Learning Disability support services and introduce a modern integrated service that puts the needs of those who use our services at the heart of what we do, whilst identifying viable and sustainable options for creating efficiencies in service provision. • The project will encompass a review of the overnight support service ('sleepovers'), facilitating a fresh assessment of overall support needs, and looking at ways of utilising modern technology to provide personalised support alternatives, introducing less intrusive and more efficient methods of meeting assessed need and managing more successful and fulfilling outcomes. • The project will also build upon the work carried out in relation to Phase 1 of the remobilisation of day opportunities following the enforced COVID-19 service suspension of these services. The review will provide the opportunity to assess how the reintroduction of both building based and outreach services can be individualised, and provide a better fit with a modernised integrated Learning Disability support service.
Expected Outcomes – Non financial	<ul style="list-style-type: none"> • Ensuring those that who use our learning disability service are supported and encouraged to thrive with enhanced day opportunities • The creation of a modern, integrated and efficient support service
Expected Outcomes – financial	<p>Indicative savings are:</p> <ul style="list-style-type: none"> • 2022/23: £200k (not achieved) • 2023/24: £300k (£132k achieved to date) • 2024/25: £100k (£8k additional full year effect)
Current Update	<ul style="list-style-type: none"> • Project has strong crossover aims with Commissioning Services Project. Ongoing monitoring to ensure there is no duplicate recording of savings • All LD reviews carried out under SPF will be controlled and reported under the Learning Disability Development project
Next Steps	<ul style="list-style-type: none"> • Reviews will continue to be undertaken • Training continues for Community Pathways Team for SSSC registrations • Ongoing liaison with SOL regarding monitoring and future use
RAG Status	GREEN
Timeline	18 August 2022 – 16 December 2024

Project Title	L3 - Case Recording System Replacement
Project Owner	Lesley Bairden
Purpose - what do we want to achieve	<ul style="list-style-type: none"> • The HSCP Case Management solution is the mechanism by which HSCP staff record and capture information relating to those who use our services. • To procure and implement a new comprehensive case management solution for the recording and management of service user information and case recording within all aspects of Social Work managed by the HSCP
Expected Outcomes – Non financial	<ul style="list-style-type: none"> • A system that can be accessed and updated from anywhere on any device • Lean and person centred recording processes • Data as an asset- using data available to drive future service improvement
Expected Outcomes – financial	<p>Indicative savings are:</p> <ul style="list-style-type: none"> • 2024/25: £75k • 2025/26: £75k
Current Update	<ul style="list-style-type: none"> • Existing contract with OLM Systems formally agreed and signed-off for interim period covering April 2023 to March 2025. • Invitation to Tender (ITT) will published on Scotland Excel framework, closing date 29 August 2023 – Project Team currently responding to suppliers’ requests for clarification • Data Management work-stream on target – mandatory CHI number tracking live at 31 July – this will assist in the elimination of duplicate data. • Process Mapping work-stream now moved on to ‘to-be’ processes
Next Steps	<ul style="list-style-type: none"> • Receive suppliers’ bids. • Appoint Tender Evaluation Panel – target appointing preferred supplier by 31 October 2023 • ‘To-be’ processes to commenced to ensure best possible environment for implementation with preferred supplier.
RAG	GREEN
Timeline	20 April 2022 – 31 October 2024

Project Title	L4: Information Governance and Data Cleansing
Project Owner	Raymond Prior
Purpose - what do we want to achieve	<ul style="list-style-type: none"> • Implement a robust approach to information governance across the HSCP ensuring statutory duties are met • Embed good information governance practices into business as usual activity • Ensure staff have the training and information to manage associated risk accordingly • Fully prepared for a transition to a new case recording system and online collaboration tools such as One Drive.
Expected Outcomes – Non financial	<ul style="list-style-type: none"> • HSCP has a defined approach to information governance • HSCP processes are reviewed to ensure information governance requirements are adhered to • Reduced risks of data breaches and potential Information Commissioner fines
Expected Outcomes – financial	<ul style="list-style-type: none"> • There are no expected financial outcomes as a result of this project.
Current Update	<ul style="list-style-type: none"> • Phase 1 (physical files and records) review continues • Where appropriate files transferred to Williamwood archive or Thornliebank Depot store • Indexing and logging of file location has been completed • Focus moving forward will be on scanned files on disc and floppy discs • Revised end date for project agreed by Project Board
Next Steps	<ul style="list-style-type: none"> • Complete Thornliebank physical files review • Commence Phase 2 review work (electronic files) <ul style="list-style-type: none"> • Organise electronic records • Saving files on I-Drive • Home Care Diaries Archives Review • Review files at St. Andrew's House. Archives not due for deletion will be moved to Thornliebank • Relevant staff to be identified to undertake Information Asset Register (IAR) Training • Electronic file review and sampling in progress. • Action plan for electronic files to be agreed at next project team meeting.
RAG	GREEN
Timelines	16 November 2022 – 31 October 2024

Project Title	L5: Review of Commissioned Services
Project Owner	Margaret Phelps
Purpose - what do we want to achieve	<ul style="list-style-type: none"> To review a number of arrangements to ensure we are maximising all framework and contractual opportunities
Expected Outcomes – Non financial	<ul style="list-style-type: none"> Resilience in local partnership working
Expected Outcomes – financial	<p>An indicative saving of:</p> <ul style="list-style-type: none"> 2022/23 - £75k (achieved) 2023/24 - £225k (£82k achieved to date) 2024/25 – £500k (£1k additional full year effect achieved)
Current Update	<ul style="list-style-type: none"> Continue to monitor project in line with Supporting People Framework (SPF) Agreement that reviews will be carried out under SPF, project will focus on review of grant funding
Next Steps	<ul style="list-style-type: none"> Refocus existing work streams in light of Supporting People Framework
RAG	GREEN
Timelines	November 2022 – March 2025

Project Title	L6: Care at Home Review Phase 2
Project Owner	Julie Murray
Purpose - what do we want to achieve	<ul style="list-style-type: none"> Structure redesign Defined offering to the external market place An operating model that is effective and efficient Care at Home and Telecare services aligned and cross service opportunities maximised
Expected Outcomes – Non financial	<ul style="list-style-type: none"> A sustainable, resource and cost efficient operating model
Expected Outcomes – financial	<p>Indicative savings are:</p> <ul style="list-style-type: none"> 2022/23 - £100k (not achieved) 2023/24 - £200k 2024/25 - £200k
Current Update	<ul style="list-style-type: none"> Project brief approved at the Recovery and Renewal Board on 16th November 2022. Project was delayed due to competing services pressures, now formally restarted Project team identified and in the process of being finalised Fortnightly Project Board meetings scheduled to monitor progress and push forward targeted outcomes and benefits realisation.
Next Steps	<ul style="list-style-type: none"> Progress work-streams as noted above and accelerate the pace of benefits delivery.
RAG	RED
Timeline	July 2023 to December 2023

Project Title	L7 – Supporting People Framework
Project Owner	Tom Kelly, Lee McLaughlin, Raymond Prior
Purpose - what do we want to achieve	<ul style="list-style-type: none"> • To adopt a formalised eligibility criteria for social care in response to the highly challenging current financial position facing the HSCP • To carry out reviews of care packages across all services to identify savings and efficiencies where possible
Expected Outcomes – Non financial	<ul style="list-style-type: none"> • Streamlined and uniformed approach to assessment and service provision based on need.
Expected Outcomes – financial	<ul style="list-style-type: none"> • 2023/24 - £3.4m
Current Update	<ul style="list-style-type: none"> • Project Board and Project Team established • Toolbox Talks complete and guidance issued to all staff • Case reviews have commenced with staff identified to support this • Practice support sessions in place for staff involved in reviews • Specific sessions set up to support Care at Home reviews • Reporting work commenced with service areas and finance staff
Next Steps	<ul style="list-style-type: none"> • New assessment paperwork and updated individual budget calculator paperwork going live in August • Fortnightly update to SMT on progress, risks and issues
RAG	GREEN
Timeline	April 2023 to March 2024

PLANNED PROJECTS

Project Title	P1- Pre-Paid Cards
Project Owner	Lesley Bairden
Purpose - what do we want to achieve	<ul style="list-style-type: none"> • Explore the technology and governance required to introduce new functionality and processes for payment disbursement. • The improved mechanism would be utilised for various purposes such as crisis grants, imprest accounts and petty cash. • Reduce cash handling by staff where appropriate to do so.
Expected Outcomes – Non financial	<ul style="list-style-type: none"> • More efficient process for issuing money for example to Foster Carers to buy necessary items for an emergency placement • Potential reduction in business support time managing and overseeing petty cash and imprest accounts • A more resilient process for issuing money in an emergency situation
Expected Outcomes – financial	<ul style="list-style-type: none"> • Potential financial savings are unknown at this stage
Current Update	<ul style="list-style-type: none"> • Project mandate approved at Recovery and Renewal Board 8th March 2023. • Currently in contact service providers in this market. • Further information to be gathered on pricing • Project brief is being finalised along with recommendations •
Next Steps	<ul style="list-style-type: none"> • Submit Project Brief to August SR&R Board
Timelines	August 2023 – March 2024

FUTURE PROJECTS

Project Title	F1 – Review of Telephony Systems
Project Owner	Lesley Bairden
Purpose - what do we want to achieve	<ul style="list-style-type: none"> • Delivery of a unified telephony system that supports and enhances service delivery • A telephony system that supports hybrid working and future technological developments • Access to telephony and communications data reports
Expected Outcomes – Non financial	<ul style="list-style-type: none"> • A modern, flexible telephony and communications system • Technology that support hybrid working and enables further integration across health and social care • A solution that enables HSCP to provide a better experience for those who contact the partnership • Access to data which enabling HSCP to understand telephony data, demands and trends that can be used to influence future service redesign
Expected Outcomes – financial	<ul style="list-style-type: none"> • Potential savings not known at this stage
Next Steps	<ul style="list-style-type: none"> • Commence fact-finding work on existing telephony architecture • Development of project brief documentation
Timelines	August 2023 – November 2023

CLOSED/TRANSFERRED PROJECTS

Project Title	C2 - Care at Home Scheduling System Replacement
Project Owner	Gayle Smart
Purpose - what do we want to achieve	<ul style="list-style-type: none"> To deliver a new, digital and modernised Care at Home Scheduling system to replace the existing CM2000 system
Expected Outcomes – Non financial	<ul style="list-style-type: none"> The implementation of a new scheduling system, fully compatible with recently introduced hand held devices to Care at Home staff in the field. The new system will allow increased functionality and improved scheduling and reporting Lean and efficient processes to schedule and realign care at home visits
Expected Outcomes – financial	<p>Indicative savings are:</p> <ul style="list-style-type: none"> 2022/23: £25k (not achieved) 2023/24: £75k (£5k achieved to date)
Current Update	<ul style="list-style-type: none"> IT project tasks now complete and product handed over to Service BAU. Benefits monitoring will be carried out as part of the Care at Home Review project Project Closure and Lessons Learned reports approved by Savings, Recovery and Renewal Programme Board in July 2023.
Next Steps	<ul style="list-style-type: none"> No further action project now closed.
RAG Status	COMPLETE – TECHNICAL ASPECT CLOSED AND EFFICIENCY TARGET TRANSFERRED TO CARE AT HOME REVIEW
/ Timeline	11 th May 2022 – 31 May 2023

Project Title	C3: Individual Budget Calculator / REG Review
Project Owner	Lee McLaughlin/Lesley Bairden
Purpose - what do we want to achieve	<ul style="list-style-type: none"> • Review the existing approach to the individual budget calculator after a period of operation both pre-Covid and during the pandemic response • Reflect user experience and revised legislation expected Autumn 2022 • Align with any new ways of working • Parameters will be linked to IJB decision on contribution element • Develop REG approach and appropriate challenge and link to any criteria revision • Inform finance module requirements of new case recording system
Expected Outcomes – Non financial	<ul style="list-style-type: none"> • Equitable calculator that maximises individuals own assets and supports • Maximise independence and flexibility within legislation • Continue to build on relationships with SDS and Carers Forums • Promote ownership of own budget
Expected Outcomes – financial	<p>An indicative saving of:</p> <ul style="list-style-type: none"> • 2023/24: £200k – Saving transferred to Supporting People Framework Project
Current Update	<ul style="list-style-type: none"> • There is significant overlap between the individual budget calculator project and the Supporting People framework • In order to ensure cohesion across the projects the Individual Budget calculator project (objectives and associated savings) has been transferred to the Supporting People Framework project • A closure report to transfer the project was approved by the Savings, Recovery and Renewal Board in July • The bandings of the individual budget calculator have been adjusted to align to the key areas of the supporting people framework • The changes made will have an immediate financial impact
Next Steps	<ul style="list-style-type: none"> • Future actions will be captured under the SPF project
RAG	TRANSFERRED TO SUPPORTING PEOPLE PROJECT
Timelines	January 2023 – August 2023

Analysis of Savings Delivery

Saving	2023/24 Funding Gap £'000	Savings Achieved £'000	Remaining Balance		Comments
			On Track £'000	At Risk £'000	
HSCP Wide Savings					
Review of Commissioned Services	225	82	143	-	On target with a further £1k recurring in 2024/25
Further Funding Expected on Pay Award	261	261	-	-	Awaiting confirmation of funding
Living Wage on Pay element of contracts rate only	148	148	-	-	Agreed as part of budget and adjustment applied
Limit Use of Support Services to contain cost pressures	219	-	219	-	Actions to be confirmed to move towards SLA Capacity concern
Supporting People Framework	3,400	-	2,550	850	New framework in place, action plan in progress - potential risk around timing of saving
Structure Proposals	928	58	533	337	Timing of saving at risk, work ongoing to refine across Childrens and Adults
Allocate Turnover Target 1%	200	200	-	-	All NHS staffing budgets now include turnover target saving
Learning Disabilities					
Sleepover Review	150	132	18	-	Work in progress, overall on target. Additional £8k full year effect in 2024/25
Supported Living	130	87	43	-	Work in progress - direct payments non recurring achieved to date
Intensive Services					
Efficiencies from Care at Home Scheduling System	75	5	-	70	Efficiencies being reviewed with a view to reducing Agency costs/budget
Care at Home Review Phase 2	200	-	-	200	Structure proposals drafted
Review of Vacant posts and Associated running costs	179	90	-	107	Vacant posts deleted, balance at risk of timing delay
Children and Families					
Review of Connor Road funding	60	-	-	60	Ongoing discussions with ERC on future service model
Family Functional Therapy	52	52	-	-	Service discontinued, alternative model in place.
Residential Costs - review of Care options	226	219	7	-	Rediction in one placement
Health Improvement - review of service to rationalise	50	-	-	50	Timing of saving at risk
Trauma Informed Practice	-	50	-	-	Service model in place - vacancy deleted
Finance and Resources					
Review of Structure and Processes	296	296	-	-	All savings identified have been achieved, work continues to identify further savings
Localities					
Rehab Team Mini Restructure	61	-	-	-	Saving no longer achievable - alternatives identified and delivered
Eastwood localities Team - Mini Restructure	53	-	-	-	Saving no longer achievable - alternatives identified and delivered
Review of Vacant posts and associated Running Costs	28	105	18	-	On track vacant posts and running cost efficiencies achieved, further post in October, includes alternative savings for non achievement above
District Nursing - Vacancy Management	50	-	-	50	Timing of saving at risk
New - Tech Enabled Care	-	80	-	-	Development budget given up
Mental Health and Addictions					
Review of Structure and Care Packages	65	65	-	-	Vacant post deleted and care package costs revised
Sub Total	7,056	1,930	3,531	1,724	
		27%	50%	24%	

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Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board
Held on	16 August 2023
Agenda Item	11
Title	Health Checks for Adults with a Learning Disability
<p>Summary</p> <p>In December 2022 the Scottish Government issued Directions to Health Boards for them to deliver annual health checks to adults with a learning disability aged sixteen and over and adults who identify as having a learning disability. Following a period of engagement with government officials, earlier Directions were revoked and new Directions issued in January 2023 along with funding confirmation.</p> <p>This report outlines the delivery model and approach we intend to take across NHS Greater Glasgow and Clyde (GGC). East Renfrewshire HSCP will host the service on behalf of NHS GGC and our five fellow partnerships.</p>	
Presented by	Julie Fitzpatrick, Interim Chief Nurse
<p>Action Required</p> <p>The Integration Joint Board is asked to: -</p> <ul style="list-style-type: none"> • Note the intended delivery model • Note East Renfrewshire's leadership, management and strategic oversight role in delivering health checks to adults with a learning disability across NHS GGC. • Note the progress made to date in devising an action and implementation plan via a steering group to deliver a workable operational model. 	
<p>Directions</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>Implications</p> <p><input checked="" type="checkbox"/> Finance <input checked="" type="checkbox"/> Risk</p> <p><input type="checkbox"/> Policy <input type="checkbox"/> Legal</p> <p><input checked="" type="checkbox"/> Workforce <input type="checkbox"/> Infrastructure</p> <p><input type="checkbox"/> Equalities <input checked="" type="checkbox"/> Fairer Scotland Duty</p>

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

16 August 2023

Report by Chief Officer

Health Checks for Adults with a Learning Disability

PURPOSE OF REPORT

1. The purpose of this report is to provide IJB members with an overview of national Directions with respect of health checks for adults with a learning disability and, the progress so far in creating an operational model to deliver health checks to all adults with a learning disability and anyone who identifies as having a learning disability across NHS GGC. The report also outlines East Renfrewshire's leadership, operational and planning role in the delivery of the service.

RECOMMENDATION

2. The Integration Joint Board is asked to:
 - Note the intended delivery model
 - Note the leadership, management and strategic oversight role East Renfrewshire have in delivering health checks to adults with a learning disability across NHS GGC.
 - Note the progress made to date in devising and implementing an action plan via a steering group to deliver a workable operational model.

BACKGROUND

3. In December 2022 the Scottish Government issued a Direction to all Scottish Health Boards stipulating that they must offer annual health checks to adults (sixteen plus) who have a learning disability or identify as having a learning disability. There was a further Direction provided in May 2022 informing of the financial allocation for this work to each Health Board. The funding amounts to £2million for Scotland. For NHS Greater Glasgow and Clyde HSCPs this totals £444k for 22/23 divided by the NRAC formula and distributed to all six HSCPs. The Scottish Government have stated that health checks must be offered to everyone eligible by 31st March 2024, whilst accepting that a phased approach will be required. The health checks must be delivered by registered nurses or medical staff and the Scottish Government has provided a twenty-page assessment for the health checks with a pre-assessment questionnaire to be sent to people in advance of a health check appointment.
4. Initially Scottish Government requested that Primary Care should be responsible for the delivery of health checks via a Local Enhanced Service (LES) However, this had not been agreed at a national level with primary care and after discussion with the Deputy Medical Director for Primary Care it was evident that GP practices did not have the capacity to deliver this service as envisaged.

5. The delivery of health checks to all adults across Scotland on an annual basis within the available resource will be challenging. East Renfrewshire, via our Chief Officer and Head of Service for Learning Disability and Recovery have been actively involved with other NHS Boards / HSCPs and government officials in illustrating the challenges. As a result of these discussions an agreement has been reached with government that alternative models could be developed and funded using the resources available. Alongside this a national Implementation Group has been created to support all areas in taking forward delivery.
6. An alternative operational model was proposed by East Renfrewshire HSCP and agreed by chief officers in NHS GGC. It was also agreed that East Renfrewshire HSCP would provide leadership and host a team to deliver health checks across NHS GGC.

REPORT

7. East Renfrewshire have assumed responsibility on behalf of all partnerships to lead on the development of a model to deliver health checks to adults with a learning disability and anyone who identifies as having a learning disability living in NHS GGC. In order to progress this work, a steering group with expertise and experience in learning disability practice has been created with strategic oversight from the Head of Service, Learning Disability and Recovery. The steering group has membership including Interim Chief Nurse, Service Manager for Learning Disability Community Services, Head of Health Information, Clinical Director for Learning Disability Services, Equality and Diversity Manager, the Deputy Medical Director for Primary Care and Public Health, 'The Life I Want' group who have lived experience and provide advocacy provision are working closely with us to support the development and provide expertise in ensuring our processes are fully accessible.
8. The local steering group will oversee the planning and implementation of health checks with an aim of having a fully functional service in place and commencing health checks prior to March 2024.
9. The steering group has regular meetings scheduled on a six weekly basis and the Interim Chief Nurse has constructed an action log to identify areas of work which will be regularly added to and updated with progress. The subsections of the action plan include steering group members, staffing required, patient registers, communication and co-production, performance and KPIs.
10. East Renfrewshire have consulted and shared the detail of our proposed model with the Scottish Government and other Chief Officers across Scotland. The Head of Service has joined a Scottish wide implementation group and he will be able to feedback and inform the steering group of any further Scottish Government updates. It will also allow NHS GGC to update on local activity and progress.
11. Members of the steering group have been providing updates to all six HSCPs at a variety of meetings and by email.
12. The Scottish government has provided a financial allocation for 22/23 consisting of £444k. Our modelling illustrates this is insufficient to provide an annual health check to all adults

with LD however, we have agreed with government that we will move forward and will report progress via monitoring and the implementation group.

13. The steering group will therefore look to develop a priority list to ensure people who would benefit most from a health check will be contacted and offered a health check first.
14. The recruitment of staff for the health check team has commenced. The Scottish Government stated that the health checks must be delivered by registered nurses or medical staff. We have therefore begun to recruit nursing staff with a skill mix of band 7, band 6 and band 5 registered nurses (7 wte). Through the newly Qualified Nurse Central Recruitment Process, we have already been able to secure five band 5 nurses, who will start in September/October 2023, and have organised for band 6 and 7 to progress to recruitment. We will also look to recruit to an administrative support post. We will require GP sessions for review of Health Check outcomes and advice on any follow up actions. The service will be operationally managed by the Learning Disability Service Manager.
15. The service will be set up and operationally managed with strategic oversight by East Renfrewshire HSCP on behalf of all HSCPs. The service manager will report to clinical and care governance structures with reports to all HSCPs about activity and overall performance and progress.
16. As noted above the service model will not be able to deliver health checks to every eligible adult on an annual basis. This is related to the funding allocation and the population size in NHS GGC, combined with the time it will take to offer and undertake health checks. However, the service when operational, will prioritise individuals who will most benefit from a health check and who are most at risk of poor health outcomes without intervention.
17. The ability to deliver health checks is reliant on having an effective data base register in place with details of all eligible people with learning disabilities. Work is being progressed to understand how a single register can be created and how this can be best achieved from current systems, but there is a high possibility this will be a complex process.
18. The service will have a focus on adults with a learning disability who are known to be vulnerable to suffering inequalities and poor health. A key aim of delivering health checks is to prevent people having poor health outcomes. The health check team will capture data to make sure all efforts are in place to support individuals from all backgrounds and ages to take up the offer and benefit of a health check
19. There is Scottish Government policy on the Health Check assessment to be utilised, we will follow this, and develop local systems and processes for effective delivery of health checks.
20. NHS GGC has significant and long experience in delivering health checks for people with learning disability, being the first board in Scotland to develop a specific service. The service was retired with the creation of the new GP contract and whilst we awaited further plans.

CONSULTATION AND PARTNERSHIP WORKING

21. We are working closely with Government and all other HSCPs

IMPLICATIONS OF THE PROPOSALS

Finance

22. As part of our hosting role East Renfrewshire will manage the totality of the resources allocated to the Greater Glasgow and Clyde HSCPs.

Workforce

23. Recruitment for the health check team is underway as noted above.

Risk

24. The funding allocation means the service model will not be able to deliver health checks to every eligible adult on an annual basis. We will prioritise individuals who will most benefit from a health check and who are most at risk of poor health outcomes without intervention. We do not believe this increases or presents risk to people with a learning disability.

Equalities and Fairer Scotland Duty

25. The delivery of health checks will include considerations of how to actively reduce any inequalities caused by socio economic disadvantage.

26. There are no infrastructure, policy or legal implications.

DIRECTIONS

27. The Integration Joint Board will implement the Direction from the Scottish Government to deliver this programme on behalf of NHS Greater Glasgow and Clyde.

CONCLUSIONS

28. East Renfrewshire HSCP are continuing to make progress with the development of a health check delivery model that will operate across all NHS GGC. The service will be managed and located within East Renfrewshire. The service is expected to be operational in October 2023. A steering group has been formed which will monitor, track and report on progress.

RECOMMENDATIONS

29. The Integration Joint Board is asked to:

- Note the intended delivery model
- Note the leadership, management and strategic oversight role East Renfrewshire have in delivering health checks to adults with a learning disability across NHS GGC.
- Note the progress made to date in devising and implementing an action plan via a steering group to deliver a workable operational model.

REPORT AUTHOR AND PERSON TO CONTACT

Tom Kelly, Head of Adult Services, Mental Health and Recovery
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Julie Fitzpatrick, Interim Chief Nurse
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Chief Officer, IJB: Julie Murray

27 July 2023

BACKGROUND PAPERS

None

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Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board
Held on	16 August 2023
Agenda Item	12
Title	Joint Inspection of Adult Support and Protection in East Renfrewshire
<p>Summary</p> <p>This report and supporting presentation provides the Integration Joint Board with a summary of the findings from the recent Joint Inspection of Adult Support and Protection in East Renfrewshire.</p>	
Presented by	Lee McLaughlin, Head of Adult Services: Communities and Wellbeing
<p>Action Required</p> <p>The Integration Joint Board is asked to note the very positive report and presentation by Lee McLaughlin.</p>	
<p>Directions</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>Implications</p> <p><input type="checkbox"/> Finance <input type="checkbox"/> Risk</p> <p><input type="checkbox"/> Policy <input type="checkbox"/> Legal</p> <p><input type="checkbox"/> Workforce <input type="checkbox"/> Infrastructure</p> <p><input type="checkbox"/> Equalities <input type="checkbox"/> Fairer Scotland Duty</p>

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

16 August 2023

Report by Chief Officer

**JOINT INSPECTION OF
ADULT SUPPORT AND PROTECTION IN EAST RENFREWSHIRE**

PURPOSE OF REPORT

1. The purpose of this report is to present the findings from the recent Joint Inspection of Adult Support and Protection in East Renfrewshire.

RECOMMENDATION

2. The Integration Joint Board is asked to note the report and presentation by Lee McLaughlin.

BACKGROUND

3. The joint inspection of Adult Support and Protection in East Renfrewshire took place between January and June 2023, by the Care Inspectorate in collaboration with Healthcare Improvement Scotland and His Majesty's Inspectorate of Constabulary in Scotland.
4. The inspection methodology included the scrutiny of our performance using a range of key approaches:
 - position statement and supporting evidence submitted by the HSCP
 - HSCP and partner staff survey
 - 2 focus groups; one for frontline practitioners and one for strategic leaders
 - Scrutiny of records of adults at risk of harm over a two year period; January 2021 to January 2023.
5. The Care Inspectorate acknowledged the unprecedented and ongoing challenge of service recovery as a result of the Covid-19 pandemic throughout this time and noted their appreciation for the partnership's co-operation and onsite support during the joint inspection.
6. The final inspection report was published on 27 June 2023 and has been circulated to IJB members with a brief verbal update provided at the IJB on 28 June 2023. This report and presentation provides a more comprehensive update to IJB on key findings and areas for improvement.

REPORT

7. The inspection described services overall as strong and effective which have led to positive outcomes for people because of timely, person-centred, and efficient adult support and protection interventions.
8. Inspectors praised the overall quality and effectiveness of core adult support and protection processes and noting that key processes were very effective and demonstrated major strengths. The inspection also commended our strategic leadership noting strong, integrated and cohesive leadership which supported positive experiences and outcomes for adults at risk of harm. The inspection recommended that the strategic leadership of the Adult Protection Committee could be further strengthened by more involvement of people with lived experience of adult support and protection.
9. The inspection noted a summary of strengths as detailed below:
 - Adults at risk of harm experienced improvements in their circumstances because of timely, person-centred, and efficient adult support and protection interventions.
 - The overall quality and effectiveness of core adult support and protection processes was a key strength for the partnership.
 - Initial inquiries and investigations were highly effective and always determined the correct outcome for adults at risk of harm.
 - Oversight of key processes supported staff and ensured consistent robust decision making for adults at risk of harm.
 - Strategic leadership for adult support and protection was enthusiastic and focused. This supported targeted and meaningful improvements.
 - The adult protection committee offered strong leadership for adult support and protection and offered effective oversight for the delivery of key processes.
 - Strategic leaders promoted a culture of learning and continuous improvement which supported the development of adult support and protection services for adults at risk of harm.
 - Health was a strong adult support and protection partner. Health services delivered innovative, early and effective interventions for adults at risk of harm.
10. The inspection noted four key areas for improvement as detailed below:
 - The partnership should improve the quality of chronologies to ensure they are comprehensive, and inclusive of relevant life events and analysis.
 - The involvement of adults at risk of harm and their unpaid carers at a strategic level should be a priority for the partnership.
 - Strategic leaders should establish multi-agency quality assurance and self-evaluation of adult support and protection practice including a multi-agency approach to audit of records
 - Strategic leaders should build on the existing foundations to ensure the full involvement of all key partners in relevant aspects of adult support and protection practice going forward.

CONSULTATION AND PARTNERSHIP WORKING

11. The inspection commended out continuous improvement approach and the strong integrated partnership approach locally noting health colleagues as a strong partner and an integral part of ASP locally. The inspection specifically noted our Care Home Liaison Nurses, our Pharmacy Team and our dedicated ASP business support team as models of good practice.

IMPLICATIONS OF THE PROPOSALS

12. There are no implications as a result of this report.

DIRECTIONS

13. There are no directions arising from this report.

CONCLUSIONS

14. The findings give assurance to the IJB that a very high standard of service and care is being provided to people who most need our support and are most at risk of harm.
15. East Renfrewshire HSCP fully take on board the recommendations for improvements and we have produced an updated improvement plan to address the priority areas identified in the report.
16. The Care Inspectorate, through its link inspector, Healthcare Improvement Scotland and His Majesty's Inspection of Constabulary in Scotland will monitor progress implementing this plan.

REPORT AUTHOR AND PERSON TO CONTACT

Lee McLaughlin, Head of Adult Services: Communities and Wellbeing
lee.mclaghlin@eastrenfrewshire.gov.uk

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

Joint Inspection of Adult Support and Protection in East Renfrewshire – June 2023
<https://www.careinspectorate.com/images/documents/7173/East%20Renfrewshire%20adult%20support%20and%20protection%20report.pdf>

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Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board	
Held on	16 August 2023	
Agenda Item	14	
Title	CALENDAR OF MEETINGS 2024	
<p>Summary:</p> <p>Proposed meetings dates for the Board for 2024.</p>		
Presented by	Colin Sweeney, Democratic Services Manager, East Renfrewshire Council	
<p>Action required:</p> <p>That the Integration Joint Board approves the proposed meeting dates for 2024.</p>		
<p>Directions</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>Implications</p> <p><input type="checkbox"/> Finance <input type="checkbox"/> Risk</p> <p><input type="checkbox"/> Policy <input type="checkbox"/> Legal</p> <p><input type="checkbox"/> Workforce <input type="checkbox"/> Infrastructure</p> <p><input type="checkbox"/> Equalities <input type="checkbox"/> Fairer Scotland Duty</p>	

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

16 August 2022

Report by Chief Officer

CALENDAR OF MEETINGS 2024

PURPOSE OF REPORT

1. To seek approval of proposed meetings dates for the Board for 2024.

RECOMMENDATION

2. That the Integration Joint Board approves the proposed meeting dates.

REPORT

3. In order to assist Board members in programming their diaries the proposed meeting dates for 2024 are now submitted for consideration.
4. It is proposed that meetings of the IJB be held on the following dates.

Wednesday 31 January
Wednesday 27 March
Wednesday 26 June (draft accounts)
Wednesday 14 August
Wednesday 25 September (including annual accounts)
Wednesday 20 November

Meetings held at 10 am with the exception of the Meetings in June and September, which will take place at 1pm. This is to accommodate those members of the IJB who also serve on Glasgow IJB, which has already scheduled meetings for 10am on those two days.

5. It is proposed that for the near future, meetings continue to take place virtually using the Teams platform. To enable real time public access to meetings, agendas will include details of how members of the public can obtain the meeting link.
6. Members of the Performance and Audit Committee to be consulted regarding the timing of meetings of that committee. Depending on the outcome of that consultation, the timing of meetings of the Board may require further change.

FINANCE AND EFFICIENCY

7. There are no financial implications arising from this report.

CONSULTATION AND PARTNERSHIP WORKING

8. The dates suggested take into account the meetings calendar for East Renfrewshire Council. As a number of the NHS non-Executive members of the IJB also sit on the Glasgow IJB a copy of the proposed dates were sent to the Clerk to the Glasgow IJB to minimise meeting clashes. This has resulted in the amendment to the times of the meetings in June and September.

IMPLICATIONS OF THE REPORT

9. There are no implications in respect of staffing, property, legal IT, equalities or sustainability arising from this report.

CONCLUSIONS

10. Confirmed meeting dates will help Board members to more efficiently manage their diaries and ensure that they are able to maximise attendance at Board meetings.

RECOMMENDATION

11. That the Integration Joint Board approves the proposed meeting dates.

REPORT AUTHOR AND PERSON TO CONTACT

Name: Colin Sweeney, Democratic Services Manager, East Renfrewshire
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BACKGROUND PAPERS - NONE