



Council Offices, Almada Street
Hamilton, ML3 0AA

Tuesday, 12 January 2021

Dear Councillor

Social Work Resources Committee

The Members listed below are requested to attend a meeting of the above Committee to be held as follows:-

Date: Wednesday, 20 January 2021
Time: 10:00
Venue: By Microsoft Teams,

The business to be considered at the meeting is listed overleaf.

Yours sincerely

Cleland Sneddon
Chief Executive

Members

John Bradley (Chair), Maureen Chalmers (Depute Chair), Walter Brogan, Robert Brown, Archie Buchanan, Janine Calikes, Graeme Campbell, Andy Carmichael, Margaret Cowie, Maureen Devlin, Mary Donnelly, Allan Falconer, Eric Holford, Mark Horsham, Katy Loudon, Joe Lowe, Hugh Macdonald, Catherine McClymont, Colin McGavigan, Jim McGuigan, Lynne Nailon, Richard Nelson, Carol Nugent, John Ross, Margaret B Walker, David Watson

Substitutes

Alex Allison, Gerry Convery, Margaret Cooper, Isobel Dorman, Fiona Dryburgh, Geri Gray, Graeme Horne, Ann Le Blond, Martin Lennon, Richard Lockhart, Eileen Logan, Davie McLachlan, Jared Wark, Josh Wilson

BUSINESS

- 1 **Declaration of Interests**
- 2 **Minutes of Previous Meeting** 5 - 12
Minutes of the meeting of the Social Work Resources Committee held on 28 October 2020 submitted for approval as a correct record. (Copy attached)

Monitoring Item(s)

- 3 **Social Work Resources - Revenue Budget Monitoring 2020/2021** 13 - 22
Joint report dated 4 December 2020 by the Executive Director (Finance and Corporate Resources) and the Director, Health and Social Care. (Copy attached)
- 4 **Social Work Resources - Capital Budget Monitoring 2020/2021** 23 - 26
Joint report dated 21 December 2020 by the Executive Director (Finance and Corporate Resources) and the Director, Health and Social Care. (Copy attached)
- 5 **Social Work Resources – Workforce Monitoring – September and October 2020** 27 - 34
Joint report dated 8 December 2020 by the Executive Director (Finance and Corporate Resources) and the Director, Health and Social Care. (Copy attached)
- 6 **Social Work Resource Plan Quarter 2 Progress Report 2020/2021** 35 - 62
Report dated 7 December 2020 by the Director, Health and Social Care. (Copy attached)

Item(s) for Decision

- 7 **Infant Mental Health/Continuing Care - Additional Resources** 63 - 66
Joint report dated 29 December 2020 by the Director, Health and Social Care and the Executive Director (Finance and Corporate Resources). (Copy attached)
- 8 **Resourcing for Inclusion as Prevention and Justice Social Work Resources** 67 - 72
Joint report dated 16 November 2020 by the Director, Health and Social Care and the Executive Director (Finance and Corporate Resources). (Copy attached)
- 9 **Remuneration for the Independent Chairs of the Fostering and Adoption Panel, Child Protection Committee and Adult Protection Committee** 73 - 76
Report dated 24 November 2020 by the Director, Health and Social Care. (Copy attached)

Item(s) for Noting

- 10 **Independent Care Review's Findings and the Promise of Transformational Change** 77 - 80
Report dated 13 November 2020 by the Director, Health and Social Care. (Copy attached)

11 Lanarkshire Advocacy Plan/Advocacy Services Tender	81 - 108
Report dated 11 December 2020 by the Director, Health and Social Care. (Copy attached)	
12 Update of the Social Work Resources Risk Register and Risk Control Plan	109 - 132
Report dated 11 December 2020 by the Director, Health and Social Care. (Copy attached)	
13 Transformation and Service Improvement Programme	133 - 140
Report dated 18 December 2020 by the Director, Health and Social Care. (Copy attached)	
14 Children (Equal Protection from Assault) (Scotland) Act 2019: Implemented 7 November 2020	141 - 146
Report dated 24 November 2020 by the Director, Health and Social Care. (Copy attached)	
15 Position Statement on Prostitution	147 - 152
Report dated 9 December 2020 by the Director, Health and Social Care. (Copy attached)	
16 Proposed National Framework for Self-Directed Support	153 - 156
Report dated 21 December 2020 by the Director, Health and Social Care. (Copy attached)	
17 Chief Social Work Officer Annual Report 2019/2020	157 - 200
Report dated 24 November 2020 by the Director, Health and Social Care. (Copy attached)	

Urgent Business

- 18 Urgent Business**
Any other items of business which the Chair decides are urgent.

For further information, please contact:-

Clerk Name: Tracy Slater

Clerk Telephone: 01698 454719

Clerk Email: tracy.slater@southlanarkshire.gov.uk

SOCIAL WORK RESOURCES COMMITTEE

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Minutes of meeting held via Microsoft Teams and in Committee Room 1, Council Offices, Almada Street, Hamilton on 28 October 2020

Chair:

Councillor John Bradley

Councillors Present:

Councillor Walter Brogan, Councillor Robert Brown, Councillor Archie Buchanan, Councillor Janine Calikes, Councillor Graeme Campbell, Councillor Andy Carmichael, Councillor Maureen Chalmers, Councillor Margaret Cowie, Councillor Maureen Devlin, Councillor Mary Donnelly, Councillor Allan Falconer, Councillor Geri Gray (*substitute for Councillor Jim McGuigan*), Councillor Eric Holford, Councillor Mark Horsham, Councillor Katy Loudon, Councillor Hugh Macdonald, Councillor Catherine McClymont, Councillor Colin McGavigan, Councillor Lynne Nailon, Councillor Richard Nelson, Councillor Carol Nugent, Councillor Margaret B Walker

Councillors' Apologies:

Councillor Joe Lowe, Councillor Jim McGuigan, Councillor John Ross, Councillor David Watson

Attending:

Finance and Corporate Resources

M M Cairns, Legal Services Manager; H Goodwin, Finance Manager; M Milne, HR Business Partner; A Norris, Administration Assistant; L O'Hagan, Finance Manager (Strategy); S Somerville, Administration Manager; H Tennant, Administration Officer; A Thompson, Public Relations Officer

Health and Social Care/Social Work Resources

V de Souza, Director; I Beattie, Head of Health and Social Care (Hamilton and Clydesdale); M Kane, Service Development Manager; M Hayward, Head of Health and Social Care (East Kilbride and Cambuslang and Rutherglen); L Purdie, Head of Children and Justice Services

1 Declaration of Interests

No interests were declared.

2 Minutes of Previous Meeting

The minutes of the meeting of the Social Work Resources Committee held on 19 August 2020 were submitted for approval as a correct record.

The Committee decided: that the minutes be approved as a correct record.

3 Social Work Resources – Revenue Budget Monitoring 2020/2021

A joint report dated 24 September 2020 by the Executive Director (Finance and Corporate Resources) and the Director, Health and Social Care was submitted comparing actual expenditure at 14 August 2020 against budgeted expenditure for 2020/2021 for Social Work Resources, together with a forecast of the position for the year to 31 March 2021.

At 14 August 2020, there was an overspend position of £0.332 million against the phased budget. The financial forecast to 31 March 2021 was a breakeven position. Continued additional costs incurred in relation to COVID-19, totalling £7.211 million, were detailed separately in Appendix B to the report, together with income received from the Scottish Government.

The Resource had also experienced a reduction in income of £0.524 million from services not provided as a result of COVID-19, as detailed in Appendix D to the report. To date, total additional costs to the Council as a result of COVID-19 were £7.735 million, with £2.976 million received from the Scottish Government and notification of a further £2.488 million which was still awaited.

Additional COVID-19 related expenditure for Children and Families Service of £0.223 million, which would not be funded by the Scottish Government Mobilisation Plan, was provided in Appendix B to the report.

Details were provided in appendices B to F on budget virements in respect of Social Work Resources to realign budgets.

Officers responded to members' questions in relation to various aspects of the report.

The Committee decided:

- (1) that the overspend position on Social Work Resources' revenue budget, as detailed in Appendix A to the report, be noted;
- (2) that the forecast to 31 March 2021 of a breakeven position be noted; and
- (3) that the budget virements, as detailed in the appendices to the report, be approved.

[Reference: Minutes of 19 August 2020 (Paragraph 4)]

4 Social Work Resources – Capital Budget Monitoring 2020/2021

A joint report dated 8 October 2020 by the Executive Director (Finance and Corporate Resources) and Director, Health and Social Care was submitted advising of progress on the Social Work Resources' capital programme for 2020/2021 and summarising the expenditure position at 19 June 2020.

Delivery of the capital programme had been affected by lockdown due to COVID-19. A revised 2020/2021 General Services Capital Programme, focused on deliverability, had been presented to the Executive Committee on 23 September 2020. The revised programme for Social Work Resources of £0.844 million had been confirmed. Details on the financial position were provided in Appendix A to the report.

The Committee decided: that the Social Work Resources' capital programme of £0.844 million, and expenditure to date of £0.057 million, be noted.

[Reference: Minutes of the Executive Committee of 23 September 2020 (Paragraph 4)]

5 Social Work Resources – Workforce Monitoring – July and August 2020

A joint report dated 23 September 2020 by the Executive Director (Finance and Corporate Resources) and Director, Health and Social Care was submitted on the following employee information for Social Work Resources for the period July and August 2020:-

- ◆ attendance statistics
- ◆ occupational health statistics
- ◆ accident/incident statistics
- ◆ disciplinary hearings, grievances and Dignity at Work cases

- ♦ analysis of leavers
- ♦ staffing watch as at 13 June 2020

The effect of COVID-19 was evident in the workforce monitoring data. Increased absence data had been related to positive test results and self-isolation. Additional capacity would be sought from other areas to cover any gaps.

Officers responded to members' questions in relation to various aspects of the report. The HR Business Partner also undertook to circulate more detailed information to members, particularly in view of the impact of COVID.

The Committee decided: that the report be noted.

[Reference: Minutes of 19 August 2020 (Paragraph 7)]

6 Review of Drug Treatment and Testing Order Service and Staffing

A joint report dated 24 September 2020 by the Director, Health and Social Care and Executive Director (Finance and Corporate Resources) was submitted on:-

- ♦ the review of the Drug Treatment and Testing Order (DTTO) Service delivery within Justice Services
- ♦ a proposal to increase the DTTO Service establishment in response to increased workload during the past 2 years

South Lanarkshire Council had hosted the pan-Lanarkshire DTTO Service until the review group recommended that North and South Lanarkshire deliver separate DTTO services. Separation had led to a reduction in the budget and staffing complement in the DTTO service in South Lanarkshire, however, the number of DTTOs had remained the same despite the service only being offered to residents from the South Lanarkshire Council area.

A Service review had been carried out in 2020 which identified that:-

- ♦ the revised health and social work staffing complement did not offer sufficient cover to meet the demand for DTTOs, leading to risks of not meeting statutory requirements
- ♦ the staffing complement did not offer the capacity to cover for absence due to annual leave, training or for other reasons

Interim arrangements were implemented to allow the service to continue to meet its statutory function. The recommended operating model to realign with the Community Addiction Recovery Service (CAREs) required the following permanent establishment changes:-

- ♦ increase the number of FTE posts from 0.5 to 0.6 of Team Leader on Grade 3, Level 8, SCP 79-80 (£41,772 to £42,411)
- ♦ increase the number of FTE posts from 1.5 to 2 of Social Worker on Grade 3, Level 2-4, SCP 63-74 (£32,994 to £38,799)
- ♦ increase the number of FTE posts from 1.5 to 2 of Substance Misuse Worker on Grade 2, Level 2-4, SCP 39-57 (£23,139 to £30,147)
- ♦ maintain 0.5 FTE post of Administration Assistant on Grade 2, Level 1, SCP 34-35 (£21,497 to £21,862)
- ♦ decrease the number of FTE posts from 1.5 to 1 of Clerical Assistant on Grade 1, Level 1 – 4, SCP 20-31 (£17,519 to £20,630)

The additional staffing costs in relation to the proposal would be funded by a reconfiguration of the existing service model.

Officers responded to members' questions in relation to various aspects of the report.

The Committee decided: that, following a review of the Drug Treatment and Testing Order service, the revised preferred operating model and addition to the establishment, as detailed in the report, be approved.

[Reference: Minutes of 15 November 2017 (Paragraph 7)]

7 Emergency Receiving Centre – Additional Funding

A joint report dated 20 October 2020 by the Executive Director (Finance and Corporate Resources) and Director, Health and Social Care was submitted on:-

- ◆ Scottish Government funding which had become available to support the NHS Lanarkshire Emergency Receiving Centre
- ◆ the proposed establishment of 1FTE Operations Manager post to complement the Social Work Hospital Team

In August 2020, the Committee approved the revised structure for a Hospital Discharge Team. A pilot, which introduced input from a Social Work Operations Manager at the Emergency Receiving Centre to provide advice and signposting, showed a further reduction in attendance at Accident and Emergency could be achieved. It was, therefore, proposed that a post of Operations Manager be established on a permanent basis on Grade 4, Level 2-5, SCP 82-88, £43,651 to £47,775.

Funding for this role was anticipated to come from recurring Scottish Government funding of approximately £60,000. In the event that non-recurring funding was confirmed, or if no funding was received, an alternative funding solution would be agreed with the Health and Social Care Partnership in consultation with NHS Lanarkshire and the Integration Joint Board

The Committee decided:

- (1) that the contents of the report be noted; and
- (2) that the proposal to establish a 1 FTE Operations Manager post on a permanent basis, as detailed in section 5, be approved.

[Reference: Minutes of 19 August 2020 (Paragraph 9)]

8 Meeting our Corporate Parenting Responsibilities and South Lanarkshire Council Revised Strategy

A report dated 20 September 2020 by the Director, Health and Social Care was submitted providing an update on the review of the Corporate Parenting Strategy governance structure and highlighting the importance of the Committee's Corporate Parenting Responsibilities.

An evaluation of South Lanarkshire's current Corporate Parenting Strategy and Plan 2018 to 2020 had been undertaken by the Corporate Parenting Strategy Group. The evaluation considered the future priorities based on a joint strategic needs assessment. The review outcome would directly inform the Corporate Parenting Strategy and Plan 2020 to 2022.

The evaluation had highlighted the need to review the governance and sub-structures that supported the Strategy to bring the Champions Board into the existing structure. In addition, the recent Children's Inspection had highlighted the need for stronger governance in the Corporate Parenting Improvement Agenda.

The report provided details of the proposed new governance structure, which included the creation of an Executive Corporate Parenting Board and encompassed the Champions Board.

Officers responded to members' questions in relation to various aspects of the report.

The Committee decided:

- (1) that the Committee's responsibilities and continued engagement in relation to the Corporate Parenting agenda for the Council's care experienced young people be noted; and
- (2) that the revised corporate parenting structure and governance be noted.

9 Adult Support and Protection Progress Update

A report dated 2 October 2020 by the Director, Health and Social Care was submitted providing an update on preparations for the forthcoming inspection of Adult Support and Protection (ASP).

A joint inspection of ASP, involving 6 adult protection partnerships, was carried out in 2017/2018 for scrutiny and assurance that ASP was being undertaken across Scotland.

In February 2020, the Care Inspectorate announced a 2-year inspection programme and published details of Phase 1 due to take place between April 2020 and March 2021. South Lanarkshire Health and Social Care Partnership (SLHSCP) had been included in the first phase of the programme. Whilst COVID-19 had delayed the inspection, the Care Inspectorate had resumed preparations for the inspection in August 2020.

For Lanarkshire, the inspection would cover Police Q Division, with North and South Lanarkshire HSCPs inspected alongside NHS Lanarkshire (NHS). Each Partnership would be inspected independently, with separate reports on findings for each Partnership area.

Preparations for the inspection had begun, including the creation of a multi-agency subgroup, a multi-agency case file audit and social work case file audit. A Fieldwork Manager had been identified to lead the further evaluation of ASP cases.

ASP training had continued to be delivered throughout the pandemic, both online and classroom based.

The Committee decided: that the report be noted.

10 National Review of Adult Social Care

A report dated 2 October 2020 by the Director, Health and Social Care was submitted on the Independent Review of Adult Social Care in Scotland.

The Scottish Government's Programme for Government 2020/2021 included the commitment to undertake an Independent Review of Adult Social Care. The Review would examine how Adult Social Care could be reformed to deliver a national approach to care and support services, including consideration of a National Care Service. The review would take a human rights-based approach and focus on the views of those with lived experience of adult social care.

The outcome of the Review would be reported in January 2021 and was likely to have a significant impact on how adult social care services were commissioned, organised, procured and delivered. A further report would be brought to the Committee once the Review had reported its recommendations.

Details of the areas which the Review would make recommendations on were provided at paragraph 4.3 of the report. The Review would also consider what was required to achieve the highest standard of support for the independence and wellbeing of people who used Adult Social Care Services.

Officers responded to members' questions in relation to various aspects of the report.

The Chair and Director agreed to arrange a members' awareness session on the Review.

The Committee decided: that the report be noted.

Councillor Nailon joined the meeting during this item of business

11 Care at Home Service

A report dated 13 October 2020 by the Director, Health and Social Care was submitted on the outcome of the recent Care Inspectorate inspection within Hamilton Home Care Service.

In January 2020, the Council had imposed a voluntary moratorium on the Care at Home Service within both Hamilton and Rutherglen following concerns highlighted in inspections carried out by the Care Inspectorate and placed a suspension on new referrals to the Service.

In December 2019, the Hamilton Service had been issued with a formal Improvement Notice that required improvements to be undertaken. The Hamilton Service had been subject to inspection in the week beginning 5 October 2020.

A new management team had developed and led an improvement action plan to bring about positive change within the Service.

Following a rigorous inspection process, the Service had received exceptionally positive feedback. Inspectors highlighted the considerable progress achieved and assessed the Service as having met all the requirements of the Improvement Notice and had, therefore, subsequently agreed to the lifting of the Notice.

Inspectors had taken the unusual decision to regrade the Service and subsequently awarded it the following grades:-

♦ Care at Support	3
♦ Leadership and Management	3
♦ Staffing	2

The voluntary moratorium previously in place in the Rutherglen Home Care Service had been lifted on 31 August 2020. It would be the intention to employ a similar staged approach to supporting new services within the Hamilton Service in order to lift the moratorium.

Officers responded to members' questions in relation to various aspects of the report

The Committee decided: that the report be noted.

Councillor Nelson left the meeting after this item of business

12 Winter Plan 2020/2021

A report dated 1 October 2020 by the Director, Health and Social Care was submitted providing details of the Winter Plan arrangements.

The report provided details of the main components of the Winter Plan associated with COVID-19, including the flu vaccination programme, the COVID Hub and Assessment Centre, and contingencies for staffing and adverse weather.

Information on plans related to Primary Care Out of Hours/NHS 24 and the acute hospital service were provided in the report. Detailed plans for the Health and Social Care Partnerships in North and South Lanarkshire had been prepared and a communication plan would be developed for both staff and the public.

Officers responded to members' questions in relation to various aspects of the report

The Committee decided:

- (1) that the winter planning arrangements to maintain services be noted; and
- (2) that work to finalise the plan, share it with respective bodies and submit to the Scottish Government be noted.

13 Notification of Contracts Awarded

A report dated 1 October 2020 by the Director, Health and Social Care was submitted on contracts awarded by Social Work Resources in the period 1 April to 30 September 2020.

In terms of Standing Order Nos 21.8 and 22.5 of the Standing Orders on Contracts, Resources were required to notify the relevant Committee of contracts awarded in excess of £50,000. Details of the contracts awarded by Social Work Resources were provided in the appendix to the report. The Service Development Manager advised of a typographical error in the appendix in that the Salvation Army contracts had been included but related to Housing and Technical Resources.

The Committee decided: that the report be noted.

14 Urgent Business

There were no items of urgent business.

Report

3

Report to:	Social Work Resources Committee
Date of Meeting:	20 January 2021
Report by:	Executive Director (Finance and Corporate Resources) Director, Health and Social Care

Subject:	Social Work Resources - Revenue Budget Monitoring 2020/2021
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ provide information on the actual expenditure measured against the revenue budget for the period 1 April 2020 to 6 November for Social Work Resources
- ◆ provide a forecast for the year to 31 March 2021

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

- (1) the breakeven position on the Social Work Resources revenue budget, as detailed in Appendix A of the report, and the forecast to 31 March 2021 of breakeven, be noted: and
- (2) that the proposed budget virements be approved.

3. Background

- 3.1. This is the third revenue budget monitoring report presented to the Social Work Resources Committee for the financial year 2020/2021.
- 3.2. The report details the financial position for Social Work Resources in Appendix A, and then details the individual services, along with variance explanations, in Appendices B to F.

4. Employee Implications

4.1. None

5. Financial Implications

- 5.1. As at 6 November 2020, there is an overspend position of (£0.359m) against the phased budget. The financial forecast for the revenue budget to 31 March 2021 is breakeven.
- 5.2. The Council continues to incur expenditure in relation to COVID-19 and in order to separate these costs from the Council's normal activities, a COVID-19 Service has been included within Social Work Resources (Appendix B).

- 5.3. The COVID-19 spend included in the services devolved to the Integrated Joint Board (IJB) is being included in the Mobilisation Plan which the Scottish Government is using to allocate funds to the Health and Social Care Partnership. The additional cost includes expenditure on beds to facilitate discharge from hospital, expenditure on support for carers, PPE equipment and also staff overtime. These additional costs and income from the Scottish Government are included in Appendix B and total £11.952m.
- 5.4. In addition to extra costs, Social Work Resources has lost income from services which are not being provided during the emergency and non-achievement of proposed savings. This totals £0.844m at period 8 and is included at Appendix D.
- 5.5. Taking the two figures together gives additional cost to the Council of £12.796m.
- 5.6. The Social Care Mobilisation monies received to date have been fully spent. As at 6 November 2020, the Council has received £5.464m. A further £7.329m would be required to meet the spend of £12.739m incurred to that point. Councils have been told that all reasonable costs will be reimbursed.
- 5.7. There is a continued assumption that this year's additional costs of COVID-19 faced by services devolved to the IJB will be funded through the Mobilisation plan, therefore will be fully funded and, therefore, there is no account taken of this pressure in the figures. However, there is the real possibility that through actions taken now, there are legacy costs into future years (such as increased care home placements or use of external Home Care providers). Alongside the Health and Social Care Partnership, the Council will require to consider impact of any legacy overspends within the parameters of the current budget.
- 5.8. Appendix B also includes additional COVID related expenditure for Children and Families Services (£0.359m), which will not be funded by the Scottish Government via the Mobilisation Plan, as these services are not delegated to the IJB. It is hoped that these additional costs will be reimbursed via an alternative Scottish Government funding allocation.
- 5.9. Within the Children and Families Service, despite investment in the Service to cover pressures, we have seen financial pressures relating to Children and Families. The main reason is additional external residential placements made in the early part of the year. The overspend at period 8 is £0.151m and work is ongoing with the Service on actions to reduce this overspend further.
- 5.10. Within the Adults and Older People Service, in addition to the pressures being experienced in Children and Families, the Resource is also seeing pressures in relation to increasing costs within the Home Care service. Work has been ongoing to identify actions to manage this pressure. As at 6 November, the pressure faced is estimated at £0.8m, which has reduced from the £1.7m estimated earlier in the year, however, there may be further demands and pressures experienced over the winter period. Such costs will be included in the mobilisation plan, if they are not funded from the Winter Planning funding provided by the Scottish Government. There have been discussions with the IJB Chief Financial Officer on the recovery plan.
- 5.11. Virements are proposed to realign budgets. These movements have been detailed in the appendices to this report, as appropriate.

6. Climate Change, Sustainability and Environmental Implications

- 6.1. There are no implications for climate change, sustainability or the environment in terms of the information contained in this report.

7. Other Implications

- 7.1. The main risk associated with the Council's Revenue Budget is that there is an overspend. The risk is managed through four weekly Budget Monitoring Meetings at which any variance is analysed. In addition, the probable outturn exercise ensures early warning for corrective action to be taken where appropriate.
- 7.2. There are no implications for sustainability in terms of the information contained in this report.

8. Equality Impact Assessment and Consultation Arrangements

- 8.1. This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy and, therefore, no impact assessment is required.
- 8.2. There was also no requirement to undertake any consultation in terms of the information contained in this report.

Paul Manning

Executive Director (Finance and Corporate Resources)

Val de Souza

Director, Health and Social Care

4 December 2020

Link(s) to Council Values/Ambitions/Objectives

- ◆ Accountable, Effective, Efficient and Transparent

Previous References

- ◆ None

List of Background Papers

- ◆ Financial Ledger and budget monitoring results to 6 November 2020

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

Hazel Goodwin, Finance Manager

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E-mail: Hazel.Goodwin@southlanarkshire.gov.uk

SOUTH LANARKSHIRE COUNCIL

Revenue Budget Monitoring Report

Social Work Resources Committee: Period Ended 6 November (No.8)

Social Work Resources Summary

	Annual Budget	Forecast for Year	Annual Forecast Variance	Budget Proportion 6/11/20	Actual 6/11/20	Variance 6/11/20		% Variance 6/11/20	Note
	£000	£000	£004	£000	£000	£000			
<u>Budget Category</u>									
Employee Costs	91,408	91,408	0	52,717	55,044	(2,327)	Over	-4.4%	
Property Costs	2,655	2,655	0	1,654	1,842	(188)	Over	-11.4%	
Supplies & Services	5,796	5,796	0	3,310	4,126	(816)	Over	-24.7%	
Transport & Plant	4,341	4,341	0	3,210	3,149	61	Under	1.9%	
Administration Costs	1,675	1,675	0	764	769	(5)	Over	-0.7%	
Payments to Other Bodies	20,877	20,877	0	11,655	11,886	(231)	Over	-2.0%	
Payments to Contractors	105,621	105,621	0	54,098	63,340	(9,242)	Over	-17.1%	
Transfer Payments	3,105	3,105	0	1,869	1,905	(36)	Over	-1.9%	
Financing Charges	335	335	0	246	259	(13)	Over	-5.3%	
Total Controllable Exp.	235,813	235,813	0	129,523	142,320	(12,797)	Over	-9.9%	
Total Controllable Inc.	(63,402)	(63,402)	0	(20,060)	(32,498)	12,438	over recovered	-62.0%	
Net Controllable Exp.	172,411	172,411	0	109,463	109,822	(359)	Over	-0.3%	

Variance Explanations

Variance explanations are shown in Appendices B -F.

Budget Virements

Budget virements are shown in Appendices B-F.

SOUTH LANARKSHIRE COUNCIL

Revenue Budget Monitoring Report

Social Work Resources Committee: Period Ended 6 November (No.8)

Covid-19

Budget Category	Annual Budget	Forecast for Year	Annual Forecast Variance	Budget Proportion 6/11/20	Actual 6/11/20	Variance 6/11/20		% Variance 6/11/20	Note
	£000	£000	£000	£000	£000	£000			
Employee Costs	0	0	0	0	2,444	(2,444)	Over	n/a	1
Property Costs	0	0	0	0	172	(172)	Over	n/a	2
Supplies & Services	0	0	0	0	1,022	(1,022)	Over	n/a	3
Transport & Plant	0	0	0	0	68	(68)	Over	n/a	
Administration Costs	0	0	0	0	29	(29)	Over	n/a	
Payments to Other Bodies	0	0	0	0	306	(306)	Over	n/a	4
Payments to Contractors	0	0	0	0	8,141	(8,141)	Over	n/a	5
Transfer Payments	0	0	0	0	128	(128)	Over	n/a	
Financing Charges	0	0	0	0	1	(1)	Over	n/a	
Total Controllable Exp.	0	0	0	0	12,311	(12,311)	Over	n/a	6
Total Controllable Inc.	0	0	0	0	(11,952)	11,952	Over recovered	n/a	
Net Controllable Exp.	0	0	0	0	359	(359)	Over	n/a	

Variance Explanations**1 Employee Costs**

These costs relate to the response to COVID-19 to maintain existing service delivery and to support hospital discharge.

2 Property Costs

These costs related to expenditure on hygiene and cleaning products in response to COVID-19.

3 Supplies & Services

These costs relate to the additional requirement for PPE in responding to COVID-19

4 Payments to Other Bodies

This expenditure relates to payments to Voluntary Action South Lanarkshire to provide additional support during COVID-19.

5 Payment to Contractors

This expenditure relates to the response to COVID-19 to provide capacity in the system, payments to external providers in respect of sustainability, the Social Care Support Fund and additional costs incurred on PPE and infection and prevention control measures.

6 Income

This over recovery of income is currently offsetting the expenditure incurred in response to COVID-19.

Budget Virements

SOUTH LANARKSHIRE COUNCIL

Revenue Budget Monitoring Report

Social Work Resources Committee: Period Ended 6 November 2020 (No.8)

Children and Families Services

Budget Category	Annual Budget	Forecast for Year	Annual Forecast Variance	Budget Proportion 6/11/20	Actual 6/11/20	Variance 6/11/20		% Variance 6/11/20	Note
	£000	£000	£000	£000	£000	£000			
Employee Costs	16,451	16,451	0	9,553	9,565	(12)	Over	-0.1%	a,b
Property Costs	333	333	0	272	280	(8)	Over	-2.9%	
Supplies & Services	731	731	0	398	382	16	Under	4.0%	a,b
Transport & Plant	624	624	0	268	153	115	Under	42.9%	1
Administration Costs	297	297	0	181	143	38	under	21.0%	
Payments to Other Bodies	9,336	9,336	0	5,661	5,561	100	Under	1.8%	2,a,b
Payments to Contractors	5,863	5,863	0	3,176	3,883	(707)	Over	-22.3%	3
Transfer Payments	3,091	3,091	0	1,862	1,767	95	Under	5.1%	4,a
Financing Charges	19	19	0	14	22	(8)	Over	-57.1%	
Total Controllable Exp.	36,745	36,745	0	21,385	21,756	(371)	Over	-1.7%	
Total Controllable Inc.	(1,137)	(1,137)	0	(466)	(686)	220	over recovered	-47.2%	5,a
Net Controllable Exp.	35,608	35,608	0	20,919	21,070	(151)	Over	-0.7%	

Variance Explanations**1. Transport and Plant**

This underspend has arisen as a result of a reduction in service required and level of payment to providers.

2. Payment to Other Bodies

This underspend relates to services not being delivered due to COVID and as a result of the incorporation of new funding for mental health and wellbeing offset in part by an overspend in fostering related services.

3. Payment to Contractors

This overspend is a result of the increased requirement for children's residential school and secure placements.

4. Transfer Payments

This underspend is based on the current cost of service and it is anticipated that the budget will be required in full by 31 March 21.

5. Income

This is in relation to the recovery of costs from the Home Office for services provided to unaccompanied asylum-seeking children in South Lanarkshire children's care facilities.

Budget Virements

- a Incorporation of Scottish Attainment Funding 20/21 Net Effect £0, Employee Costs £0.170m, Supplies and services £0.129m, Payment to Other Bodies £0.290m, Transfer Payments £0.003m, Income (£0.592m).
- b Budget realignment to reflect Young Carers Service Net Effect £0, Payment to Other Bodies £0.200m, Employee Costs (£0.119m), Supplies and Services (£0.081m).

SOUTH LANARKSHIRE COUNCIL

Revenue Budget Monitoring Report

Social Work Resources Committee: Period Ended 6 November 2020 (No.8)

Adults and Older People Services

Budget Category	Annual Budget	Forecast for Year	Annual Forecast Variance	Budget Proportion 6/11/20	Actual 6/11/20	Variance 6/11/20		% Variance 6/11/20	Note
	£000	£000	£000	£000	£000	£000			
Employee Costs	61,592	61,592	0	35,445	35,449	(4)	Over	0.0%	
Property Costs	1,718	1,718	0	1,040	1,059	(19)	Over	-1.8%	
Supplies & Services	4,493	4,493	0	2,622	2,428	194	Under	7.4%	1
Transport & Plant	3,346	3,346	0	2,663	2,709	(46)	Over	-1.7%	
Administration Costs	412	412	0	246	285	(39)	over	-15.9%	
Payments to Other Bodies	11,001	11,001	0	5,578	5,562	16	Under	0.3%	
Payments to Contractors	99,685	99,685	0	50,872	51,266	(394)	Over	-0.8%	2
Transfer Payments	7	7	0	4	3	1	Under	25.0%	
Financing Charges	42	42	0	29	32	(3)	Over	-10.3%	
Total Controllable Exp.	182,296	182,296	0	98,499	98,793	(294)	over	-0.3%	
Total Controllable Inc.	(55,043)	(55,043)	0	(15,751)	(16,013)	262	over recovered	-1.7%	3
Net Controllable Exp.	127,253	127,253	0	82,748	82,780	(32)	Over	0.0%	

Variance Explanations**1. Supplies & Services**

The underspend is attributable to a reduction in adaptations and catering and supplies for day care services, both impacted by COVID. The underspend is offset in part by an overspend on the license costs associated with the new home care scheduling system. Additionally, within catering there has been a delay in implementing the 2020-21 savings and the cost of not achieving this savings is offset by COVID-19 funding from the Scottish Government.

2. Payment to Contractors

The overspend relates to additional home care hours called on to the external market as a result of an increase in demand.

3. Income

This over recovery relates to the expected mobilisation funding in relation to non-achievement of savings as a result of the response to COVID-19.

Budget Virements

- a. Incorporation of Distress Briefing Intervention funding for 20/21 and response to COVID, Net Effect £0, Payment to Other Bodies £0.242m, Income (£0.242m).

SOUTH LANARKSHIRE COUNCIL

Revenue Budget Monitoring Report

Social Work Resources Committee: Period Ended 6 November 2020 (No.8)

Performance and Support Services

	Annual Budget	Forecast for Year	Annual Forecast Variance	Budget Proportion 6/11/20	Actual 6/11/20	Variance 6/11/20		% Variance 6/11/20	Note
	£000	£000	£000	£000	£000	£000			
<u>Budget Category</u>									
Employee Costs	6,866	6,866	0	3,994	3,923	71	under	1.8%	1.
Property Costs	527	527	0	284	275	9	Under	3.2%	
Supplies & Services	435	435	0	233	234	(1)	Over	-0.4%	
Transport & Plant	251	251	0	212	167	45	under	21.2%	
Administration Costs	426	426	0	278	245	33	Under	11.9%	
Payments to Other Bodies	35	35	0	4	6	(2)	over	-50.0%	
Payments to Contractors	0	0	0	0	0	0	-	n/a	
Transfer Payments	0	0	0	0	7	(7)	over	n/a	
Financing Charges	262	262	0	194	187	7	Under	3.6%	
Total Controllable Exp.	8,802	8,802	0	5,199	5,044	155	Under	3.0%	
Total Controllable Inc.	(759)	(759)	0	(180)	(184)	4	Over	-2.2%	
Net Controllable Exp.	8,043	8,043	0	5,019	4,860	159	under	3.2%	

Variance Explanations

1. The underspend in employee costs mainly relates to a reduction in physiotherapy sessions for employees as a result of COVID and a small number of vacancies.

SOUTH LANARKSHIRE COUNCIL

Revenue Budget Monitoring Report

Social Work Resources Committee: Period Ended 6 November 2020 (No.8)

Justice Services

	Annual Budget	Forecast for Year	Annual Forecast Variance	Budget Proportion 6/11/20	Actual 6/11/20	Variance 6/11/20		% Variance 6/11/20	Note
	£000	£000	£000	£000	£000	£004			
<u>Budget Category</u>									
Employee Costs	6,499	6,499	0	3,725	3,663	62	Under	1.7%	1
Property Costs	77	77	0	58	56	2	Under	3.4%	
Supplies & Services	137	137	0	57	60	(3)	Over	-5.3%	
Transport & Plant	120	120	0	67	52	15	Under	22.4%	
Administration Costs	540	540	0	59	67	(8)	Over	-13.6%	
Payments to Other Bodies	505	505	0	412	451	(39)	Over	-9.5%	
Payments to Contractors	73	73	0	50	50	0	-	0.0%	
Transfer Payments	7	7	0	3	0	3	Under	100.0%	
Financing Charges	12	12	0	9	17	(8)	Over	-88.9%	
Total Controllable Exp.	7,970	7,970	0	4,440	4,416	24	Under	0.5%	
Total Controllable Inc.	(6,463)	(6,463)	0	(3,663)	(3,663)	0	-	0.0%	
Net Controllable Exp.	1,507	1,507	0	777	753	24	Under	3.1%	

Variance Explanations**1. Employee Costs**

The underspend is as a result of vacancies which are actively being recruited.

Budget Virements

Report

4

Report to: **Social Work Resources Committee**
 Date of Meeting: **20 January 2021**
 Report by: **Executive Director (Finance and Corporate Resources)
 Director, Health and Social Care**

Subject: **Social Work Resources - Capital Budget Monitoring
 2020/2021**

1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ provide information on the progress of the capital programme for Social Work Resources for the period 1 April 2020 to 6 November 2020

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

- (1) that the Social Work Resources capital programme of £0.844 million, and expenditure to date of £0.077 million, be noted.

3. Background

- 3.1. This is the third capital monitoring report presented to the Social Work Resources Committee for the financial year 2020/2021. Further reports will follow throughout the year.
- 3.2. The budget reflects the revised programme for the year (Executive Committee, 23 September 2020). It also includes budget adjustments presented to the Executive Committee thereafter, up to and including its meeting on 16 December 2020. For Social Work Resources there has been no change since the last report to this Committee.
- 3.3. The report details the financial position for Social Work Resources in Appendix A.

4. Employee Implications

4.1. There are no employee implications as a result of this report.

5. Financial Implications

5.1. The revised capital programme for Social Work Resources for 2020/2021 is £0.844 million. Spend to 6 November 2020 amounts to £0.077 million.

6. Climate Change, Sustainability and Environmental Implications

6.1. There are no implications for climate change, sustainability or the environment in terms of the information contained in this report.

7. Other Implications

- 7.1. The main risk associated with the Council's Capital Programme is that there is an overspend. The risk has been assessed as low given the detailed project management plans prepared and monitored for each project. The risk of overspend is managed through four weekly Investment Management Meetings.

8. Equality Impact Assessment and Consultation Arrangements

- 8.1. This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy and therefore no impact assessment is required.
- 8.2. There was also no requirement to undertake any consultation in terms of the information contained in this report.

Paul Manning

Executive Director (Finance and Corporate Resources)

Val de Souza

Director, Health and Social Care

21 December 2020

Link(s) to Council Values/Ambitions/Objectives

- Accountable, Effective, Efficient and Transparent

Previous References

- Executive Committee, 23 September 2020

List of Background Papers

- Financial ledger to 6 November 2020

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

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South Lanarkshire Council
Capital Expenditure 2020-2021
Social Work Resources Programme
For Period 1 April 2020 – 6 November 2020

<u>Social Work Resources</u>	Base Budget £000	Budget Adjustments £000	Slippage £000	Total Budget £000	Actual Expenditure £000
Social Work - Care Facilities	744	0	0	744	77
Social Work - Other	100	0	0	100	0
TOTAL	844	0	0	844	77

Report

Report to: **Social Work Resources Committee**
 Date of Meeting: **20 January 2021**
 Report by: **Executive Director (Finance and Corporate Resources)
 Director, Health and Social Care**

Subject: **Social Work Resources – Workforce Monitoring –
 September and October 2020**

1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ provide employment information for September to October 2020 relating to Social Work Resources

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

(1) that the following employment information for September and October 2020 relating to Social Work Resources be noted:-

- ◆ attendance statistics
- ◆ occupational health
- ◆ accident/incident statistics
- ◆ discipline, grievance and Dignity at Work cases
- ◆ analysis of leavers and exit interviews
- ◆ Staffing Watch as at 14 September 2020

3. Background

3.1. As part of the Council's performance management arrangements, regular workforce monitoring reports are submitted to Committee. This report for Social Work Resources provides information on the position for September and October 2020.

4. Monitoring Statistics

4.1. Attendance Statistics (Appendix 1)

Information on absence statistics is analysed for the month of October 2020 for Social Work Resources.

The Resource absence figure for October 2020 was 6.7%, which represents an increase of 0.6% when compared to the previous month and is 1.9% higher than the Council-wide figure. Compared to October 2019, the Resource absence figure has increased by 0.5%.

Based on the absence figures at October 2020 and annual trends, the projected annual average absence for the Resource for 2020/2021 is 6.4%, compared to a Council-wide average figure of 4.4%.

For the financial year 2020/2021, the projected average days lost per employee equates to 12.7 days, compared with the overall figure for the Council of 8.1 days per employee.

Managers follow the procedures outlined in the Maximising Attendance Policy to support employees to remain at work, or to return to work after a sickness absence. There are comprehensive employee supports in place and additionally, Personnel Services work in close partnership with line managers and Resource Management Teams on a case management basis to ensure that appropriate actions are taken.

The attendance information contained in this report includes absences as a result of Covid-19, and employees are being supported through this difficult time to maintain attendance levels where they can. At the time of this report, the Council overall absence level was 6.3% with 1.7% of this relating to Covid-19 for sickness and special leave.

4.2. Occupational Health (Appendix 2)

In terms of referrals to occupational health, which include medical examinations and physiotherapy, 229 referrals were made this period, a decrease of 72 when compared with the same period last year.

4.3. Accident/Incident Statistics (Appendix 2)

There were 18 accidents/incidents recorded within the Resource this period, an increase of 6 when compared to the same period last year.

4.4. Discipline, Grievance and Dignity at Work (Appendix 2)

There were 5 disciplinary hearings held within the Resource this period, which is a decrease of 3 when compared with the same period last year. There was 1 grievance raised within the Resource this period, which is an increase of 1 when compared with the same period last year. There was 1 Dignity at Work complaint raised within the Resource this period, which is an increase of 1 when compared with the same period last year.

4.5. Analysis of Leavers (Appendix 2)

There were 20 leavers in the Resource this period who were eligible for an exit interview, a decrease of 11 when compared with the same period last year. Exit interviews were held with 20% of employees, compared with 26% for the same period last year.

4.6. When processing an employee termination, managers are asked to identify whether they intend to replace the employee who had left the Council. If they indicate that they do not intend to replace the employee, they are asked to select from four options:

- ◆ plan to hold for savings
- ◆ fill on a fixed term basis pending savings
- ◆ transfer budget to another post
- ◆ end of fixed term contract

4.7. Appendix 2a provides a breakdown of vacant posts and whether these are being replaced or held for savings. In the period September to October 2020, 51 (38.45 FTE) employees in total left employment and managers indicated that 48 (35.95 FTE) posts are being filled. Of the remaining 3 posts, 2 (1.5 FTE) were due to the end of fixed term contracts and 1 (1.0 FTE) is being held pending a service review.

5. Staffing Watch

- 5.1. There has been a decrease of 11 in the number of employees in post from 13 June 2020 to 14 September 2020.

6 Employee Implications

- 6.1. There are no implications for employees arising from the information presented in this report.

7. Financial Implications

- 7.1. All financial implications are accommodated within existing budgets.

8. Climate Change, Sustainability and Environmental Implications

- 8.1. There are no Climate Change, Sustainability and Environmental Implications arising from the information presented in this report.

9. Other Implications

- 9.1. There are no implications for sustainability or risk in terms of the information contained within this report.

10. Equality Impact Assessment and Consultation Arrangements

- 10.1. This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy and, therefore, no impact assessment is required.
- 10.2. There was no requirement to undertake any consultation in terms of the information contained in this report.

Paul Manning

Executive Director (Finance and Corporate Resources)

Val de Souza

Director, Health and Social Care

8 December 2020

Link(s) to Council Values/Ambitions/Objectives

- ◆ Accountable, effective, efficient and transparent
- ◆ Fair, open and sustainable
- ◆ Ambitious, self aware and improving
- ◆ Excellent employer
- ◆ Focused on people and their needs
- ◆ Working with and respecting others

Previous References

- ◆ Social Work Resources – 28 October 2020

List of Background Papers

- ◆ Monitoring information provided by Finance and Corporate Resources

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

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ABSENCE TRENDS - 2018/2019, 2019/2020 & 2020/2021
Social Work Resources

APT&C				Manual Workers				Resource Total				Council Wide							
	2018 / 2019	2019 / 2020	2020 / 2021		2018 / 2019	2019 / 2020	2020 / 2021		2018 / 2019	2019 / 2020	2020 / 2021		2018 / 2019	2019 / 2020	2020 / 2021				
April	5.3	5.0	5.5	April	6.2	6.9	10.2	April	5.6	5.6	7.1	April	4.1	4.0	4.4				
May	5.1	5.6	4.4	May	6.2	7.7	8.1	May	5.4	6.3	5.7	May	4.2	4.4	3.1				
June	5.2	5.8	3.9	June	6.3	6.9	7.6	June	5.6	6.2	5.2	June	4.3	4.4	2.7				
July	5.2	5.1	3.7	July	6.4	7.7	6.3	July	5.6	5.9	4.6	July	3.4	3.4	2.3				
August	5.0	5.9	4.4	August	5.9	6.7	6.7	August	5.3	6.2	5.2	August	3.6	3.7	3.1				
September	5.0	6.2	5.4	September	6.1	6.8	7.5	September	5.4	6.4	6.1	September	4.4	4.5	4.2				
October	5.7	6.1	5.9	October	5.6	6.5	8.2	October	5.6	6.2	6.7	October	4.4	4.6	4.8				
November	5.4	6.8		November	5.3	6.8		November	5.4	6.8		November	5.1	5.5					
December	5.1	6.9		December	6.9	8.7		December	5.7	7.5		December	4.8	5.7					
January	5.2	6.2		January	8.4	9.5		January	6.2	7.3		January	4.9	5.3					
February	5.5	6.8		February	8.5	8.8		February	6.5	7.5		February	5.2	5.6					
March	5.4	6.8		March	6.5	8.5		March	5.8	7.4		March	4.9	6.2					
Annual Average	5.3	6.1	5.6	Annual Average	6.5	7.6	8.1	Annual Average	5.7	6.6	6.4	Annual Average	4.4	4.8	4.4				
Average Apr-Oct	5.2	5.7	4.7	Average Apr-Oct	6.1	7.0	7.8	Average Apr-Oct	5.5	6.1	5.8	Average Apr-Oct	4.1	4.1	3.5				
No of Employees at 31 October 2020				1822	No of Employees at 31 October 2020				1122	No of Employees at 31 October 2020				2944	No of Employees at 31 October 2020				15834

For the financial year 2020/21, the projected average days lost per employee equates to 12.7 days.

SOCIAL WORK RESOURCES

	Sep-Oct 2019	Sep-Oct 2020
MEDICAL EXAMINATIONS		
Number of Employees Attending	116	74
EMPLOYEE COUNSELLING SERVICE		
Total Number of Referrals	13	16
PHYSIOTHERAPY SERVICE		
Total Number of Referrals	107	71
REFERRALS TO EMPLOYEE SUPPORT OFFICER	60	64
REFERRALS TO COGNITIVE BEHAVIOUR THERAPY	5	4
TOTAL	301	229

CAUSE OF ACCIDENTS/INCIDENTS	Sep-Oct 2019	Sep-Oct 2020
Over 7 day absences	1	1
Minor	0	6
Violent Incident: Physical****	7	7
Violent Incident: Verbal*****	4	4
Total Accidents/Incidents	12	18

*A Specified Injury is any fracture (other than to the fingers, thumbs or toes), amputation, loss of sight, serious burns, crushing injury, scalping, loss of consciousness caused by asphyxiation/ head injury, a chemical or hot metal burn to the eye or penetrating injury as defined by the HSE.

**Over 3 day / over 7day absence is an injury sustained outwith specified injury category that results in a period of absence of absence as defined by the HSE.

***Near Miss - Any unexpected, unplanned occurrence (except Dangerous Occurrences) that does not lead to injury of persons, damage to property, plant or equipment but may have done so in different circumstance.

****Physical violent incidents are included in the "Specified" figures, where applicable, to provide the "Total Specified" figures.

****Physical violent incidents and ***** Verbal Violent Incidents are included in the "Over 3-day or Over 7-day" figures, where applicable, to provide the "Total Over 3-day or Over 7-day" figures.

****Physical Violent Incidents and ***** Verbal Violent Incidents are included in the "Minor" figures, where applicable, to provide the "Total Minor" figures.

RECORD OF DISCIPLINARY HEARINGS	Sep-Oct 2019	Sep-Oct 2020
Total Number of Hearings	8	5
Total Number of Appeals	0	1

Time Taken to Convene Hearing Sep - Oct 2020

0-3 Weeks
3

4-6 Weeks
1

Over 6 Weeks
1

RECORD OF GRIEVANCE HEARINGS	Sep-Oct 2019	Sep-Oct 2020
Number of Grievances	0	1
Still in Progress	0	1

RECORD OF DIGNITY AT WORK	Sep-Oct 2019	Sep-Oct 2020
Number of Incidents	0	1
Still in Process	0	1

ANALYSIS OF REASONS FOR LEAVING	Sep-Oct 2019	Sep-Oct 2020
Career Advancement	3	0
Travelling Difficulties	1	1
Further Education	2	0
Childcare/caring responsibilities	1	0
Other	1	3
Number of Exit Interviews conducted	8	4

Total Number of Leavers Eligible for Exit Interview	31	20
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Percentage of interviews conducted	26%	20%
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	Sept - Oct 2020		Reconciliation figure		Cumulative total	
			Apr - Aug 2020			
	FTE*	H/C**	FTE	H/C	FTE	H/C
Terminations/Leavers	38.45	51	65.15	86	103.60	137
Being replaced	35.95	48	63.65	84	99.60	132
Filled on fixed term basis	0.00	0	0.00	0	0.00	0
Plan to transfer this budget to another post	0.00	0	0.50	1	0.50	1
End of fixed term contract	1.50	2	1.00	1	2.50	3
Held pending service Review	1.00	1	0.00	0	1.00	1
Plan to remove for savings	0.00	0	0.00	0	0.00	0

* Full time equivalent

** Head count/number of employees

**JOINT STAFFING WATCH RETURN
SOCIAL WORK RESOURCES**

1. As at 14 September 2020

Total Number of Employees				
MALE		FEMALE		TOTAL
F/T	P/T	F/T	P/T	
206	208	991	1396	2801

*Full - Time Equivalent No of Employees

Salary Bands

Director	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6	Fixed SCP	Teacher	TOTAL
1.00	1294.96	522.16	564.03	25.00	24.00	2.00	0.00	0.00	2433.15

1. As at 13 June 2020

Total Number of Employees				
MALE		FEMALE		TOTAL
F/T	P/T	F/T	P/T	
209	212	985	1406	2812

*Full - Time Equivalent No of Employees

Salary Bands

Director	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6	Fixed SCP	Teacher	TOTAL
1.00	1306.05	533.04	550.32	24.40	24.00	2.00	0.00	0.00	2440.81

Report

6

Report to:	Social Work Resources Committee
Date of Meeting:	20 January 2021
Report by:	Director, Health and Social Care

Subject:	Social Work Resource Plan: Quarter 2 Progress Report 2020/2021
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ provide the Social Work Resource Plan Quarter 2 Progress Report 2020/2021, for the period 1 April 2020 to 30 September 2020

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

- (1) that that the Social Work Resource Plan Quarter 2 Progress Report 2020/2021 as summarised in paragraph 5.2. and attached as Appendix 2 of this report, be noted;
- (2) that the key achievements made by the Resource to date, as detailed in paragraph 5.3. of this report, be noted;
- (3) that the areas for improvement and associated management actions as detailed in paragraph 5.4. of this report, be noted; and
- (4) that the additional scrutiny of reporting the updated status of those measures identified as 'report later' at Quarter 4 2019/2020, as summarised in paragraph 5.5. and detailed at Appendix 3 of this report, be noted.

3. Background

- 3.1. The Social Work Resource Plan 2020/2021 was approved by this Committee on 19 August 2020 and sets out the objectives and actions to be managed and delivered by the Resource for the financial year 2020/2021.
- 3.2. The Resource Plan follows the agreed corporate structure and style. The Plan is a key element of the Council's performance management arrangements and provides details of the context within which the Resource operates and establishes actions and measures for the year ahead based on the Priorities set out in the Council Plan Connect 2017-2022.
- 3.3. As Elected Members are aware, due to the COVID-19 Pandemic, the Council was forced to suspend or reduce a number of services that could not be continued in full due to government advice, including adhering to physical distancing requirements for residents and for staff. The Council was also obliged to redirect resources so that it could deliver vital new services and supports for individuals, communities and businesses. There has been an inevitable impact on performance in some areas.

4. Resource Objectives 2020/2021

- 4.1. The Resource has established a number of objectives to support the delivery of the Connect Priorities in 2020/2021. These are detailed at Appendix 1.

5. Quarter 2 Progress Report 2020/2021

- 5.1. Progress against all Resource Plan measures is contained in the Quarter 2 Progress Report 2020/2021, attached as Appendix 2. This report has been produced from the Council's performance management reporting system IMPROVe, and uses a traffic light format with the following definitions to give a status report on each measure:

Status	Definition
Blue	Project complete
Green	The timescale or target has been met as per expectations
Amber	There has been minor slippage against timescale or minor shortfall against target
Red	There has been major slippage against timescale or major shortfall against target
Report later	The information is not yet available to allow us to say whether the target has been reached or not. This will be reported when available
Contextual	Included for 'information only', to set performance information in context

- 5.2. Measures which are classified as 'red' are considered in detail at section 5.4. of this report. To ensure adequate scrutiny of performance across all Resources, the Council's Performance and Review Scrutiny Forum may consider 'red' and/or 'amber' measures at a future meeting.

- 5.2.1. The overall summary of progress to date is as follows and performance should be considered in the context of the impact of responding to COVID:

Status	Measures			
	Statistical	Project	Total	%
Blue	0	0	0	0%
Green	11	21	32	88%
Amber	0	0	0	0%
Red	2	0	2	6%
Report later/Contextual	1	1	2	6%
Totals	14	22	36	100 %

- 5.3. Key achievements for 2020-21, to date, are noted below:

Connect Priority	Ensure communities are safe, strong and sustainable
Resource Objective	Achievement
Progress the Community Justice Outcome Improvement Plan	The Unpaid Work Service has adapted their group work programmes to ensure the service can continue in the face of the current social distancing

	restrictions in place. Services are being run virtually or in smaller groups where possible.
Provide access to timely support and interventions for people/groups who are disadvantaged	To date 282 out of 296 (95%) of drug and/or alcohol clients who were referred for treatments and/or psychosocial intervention started treatments within three weeks of being referred.
Safely and effectively manage and support those who have committed offences to help them reintegrate into the community and realise their potential for the benefits of all	To date 379 out of 385 (98%) of Criminal Justice Social Work reports requested were submitted to the court by the due date.

Connect Priority	Promote sustainable and inclusive economic growth and tackle disadvantage
Resource Objective	Achievement
Tackling poverty and deprivation	The Money Matters Advice Service has continued to deliver support to service users; to date 1,214 new cases have been awarded benefits, backdated benefits, and/or assisted with debt.
Strengthen engagement with service users and carers	Our Participation and Involvement Strategy 2020-2023 has been published and is now available online.

Connect Priority	Get it right for children and young people
Resource Objective	Achievement
Care and protect vulnerable children and young people	<p>The Young Carer's Service has adapted ways of working and continued service delivery throughout the Pandemic, staff have used a range of methods to keep in touch with young carers and their families.</p> <p>To date three children have been made subject to a Compulsory Supervision Order, and all children (100%) were seen within the 15-day timescales.</p> <p>In addition, to date of the 123 reports submitted to the Scottish Children's Reporter Administration, 112 (91%) were submitted within the 20-day timescale which is a marked improvement from 2019/20.</p>

Connect Priority	Improve health, care and wellbeing
Resource Objective	Achievement
Deliver better Health and Social Care outcomes for all	The resource continues to monitor the impact of the eligibility criteria through feedback from service users and analysis of complaints received. To date, no complaints have been made in regard to the eligibility criteria.

Promote, choice, control and flexibility in Social Care	<p>To date 209 new carers were supported by dedicated Welfare Rights Officers via the Money Matters Advice Service.</p> <p>Lanarkshire Carers Centre commenced operation of our Adult Carers Support Services Contract from the start of Quarter 2. During the Pandemic they have continued to support carers by phone and on digital platforms.</p>
Care and protect vulnerable adults	<p>To date of the 133 local authority Welfare Guardianship visits due, 127 (95%) were held within timescales.</p> <p>In addition, of the 1296 private Welfare Guardianship visits due to date, 1,188 (92%) were held within timescales.</p>

- 5.3.1. In addition to working towards these Priorities, we recognise that the Council will continually aim to improve and ensure effective and efficient use of resources, and that business will be conducted with integrity and transparency and will operate to the highest standards. In order to monitor and report progress against these values, Resource objectives have also been identified under the heading Delivering the Plan and achieving Best Value.

Delivering the Plan and achieving Best Value	
Resource Objective	Achievement
Develop improvement activity and promote scrutiny	<p>All statutory returns to the Scottish Government due to date were submitted within requested timescales.</p> <p>Of the six children's residential houses, 5 achieved 'very good', and 1 'good' in their latest inspection reports. The Fostering and Adoption Services, and Supported Carers all received 'very good'. Of our six Lifestyles Centres, 1 was 'excellent', 5 'good', with our Care and Support Service also recorded as 'good'.</p>

- 5.4. Areas for improvement
Measures that have been classified as 'red' (major slippage against timescale or shortfall against target) are noted below, together with the reason why, and the management action now being taken, where applicable.

Connect Priority	Ensure communities are safe, strong and sustainable	
Resource Objective	Safely and effectively manage and support those who have committed offences to help them reintegrate into the community and realise their potential for the benefits of all	
Measure	Comments/Progress	Action by Manager (where applicable)
75% of offenders on CPO unpaid work requirement are seen within five working days by their case manager	To date 54% (30 out of 56) of unpaid work inductions were held within the five-day timescale following commencement of a CPO.	The Unpaid Work Service could not operate for a period of time as a result of the Pandemic and some inductions could not take place within timescales.
75% of people starting their placement within	To date 39% of unpaid work placements started within the	The Unpaid Work Service could not operate for a

Connect Priority	Ensure communities are safe, strong and sustainable	
Resource Objective	Safely and effectively manage and support those who have committed offences to help them reintegrate into the community and realise their potential for the benefits of all	
Measure	Comments/Progress	Action by Manager (where applicable)
seven days of a CPO unpaid work	seven-day timescale. To date 56 Unpaid Work Orders have commenced and 45 have now started a placement albeit out with timescale.	period of time as a result of the Pandemic and therefore some placements could not start within timescales.

5.5. **Report later**

- 5.5.1 Measures in the quarterly progress report which are not red, amber or green can be assigned a status of 'report later' or 'contextual'. Of the six measures identified in those categories at Quarter 4 2019/2020, four are Local Government Benchmarking Framework indicators, for which the 2019/2020 results will not be published until February 2021. Progress on many of the measures was adversely affected by the COVID crisis. The updated status and explanatory narrative relating to the remaining six 'report later' measures is detailed at Appendix 3.

6. **Employee Implications**

- 6.1. The objectives noted within the Resource Plan will inform the Service Action Plans, where applicable, and in turn the Performance Appraisal process for individual employees.

7. **Financial Implications**

- 7.1. The objectives within the Resource Plan are reflected in the respective annual Resource Revenue and Capital budgets and, longer term, within the framework of the Council's approved Financial Strategy.

8. **Climate Change, Sustainability and Environmental Implications**

- 8.1. There are no Climate Change or environmental implications as a result of this report.
- 8.2. The Resource Plan takes into account Resource responsibilities in relation to sustainable development and climate change.

9. **Other Implications**

- 9.1. The Community Plan 2017-27 was agreed at the Community Planning Partnership Board on 11 October 2017. A significant element of the delivery of the outcomes in the Community Plan will come through the achievement of the actions contained within Connect.
- 9.2. Resource Plan actions are assessed as part of the Resource's risk management arrangements and relevant issues have been added to the Resource Risk Register.

10. **Equality Impact Assessment and Consultation Arrangements**

- 10.1. Many of the actions detailed within the Resource Plan reflect ongoing strategies and policies which will be or have been the subject of consultation and equality impact assessment.

Val de Souza
Director, Health and Social Care

7 December 2020

Link(s) to Council Values/Objectives

- ◆ The Resource Plan has been structured upon the Vision, Values and Priorities in the Council Plan Connect 2017-22

Previous References

- ◆ Social Work Resources Quarter 2 Progress Report 2019-20: 11 December 2019
- ◆ Social Work Resources Plan 2020-21 – approved by Social Work Resources Committee on 19 August 2020

List of Background Papers

- ◆ Council Plan Connect 2017-22 – endorsed by the Executive Committee on 8 November 2017 and approved by the full Council on 6 December 2017: mid-term review of Connect endorsed by the Executive Committee 24 June 2020
- ◆ Social Work Resources Plan 2020-21 – approved by Social Work Resources Committee on 19 August 2020

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

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E-mail: colette.brown@southlanarkshire.gov.uk

Social Work Resource Objectives 2020-21

Connect Priority	Resource Objectives
Ensure communities are safe, strong and sustainable	<ul style="list-style-type: none"> • Embed sustainable development strategy across Social Work Resources • Progress the Community Justice Outcome Improvement Plan • Provide access to timely support and interventions for people/groups who are disadvantaged • Safely and effectively manage and support those who have committed offences to help them reintegrate into the community and realise their potential for the benefits of all
Promote sustainable and inclusive economic growth and tackle disadvantage	<ul style="list-style-type: none"> • Tackling poverty and deprivation • Strengthen engagement with service users and carers
Get it right for children and young people	<ul style="list-style-type: none"> • Care and protect vulnerable children and young people
Improve health, care and wellbeing	<ul style="list-style-type: none"> • Deliver better health and social care outcomes for all • Promote good mental health and wellbeing • Promote, choice, control and flexibility in social care • Care and protect vulnerable adults
Delivering the Plan and achieving Best Value	Resource Objectives <ul style="list-style-type: none"> • Deliver and communicate the Council Plan and ensure high standards of governance • Develop improvement activity and promote scrutiny • Improve the skills, flexibility and capacity of the workforce • Promote equality and the well-being of staff

Social Work Resources

improve

Resource Plan

Performance Report 2020-21

Quarter 2 : April 2020 - September 2020

(This represents the cumulative position to September 2020)

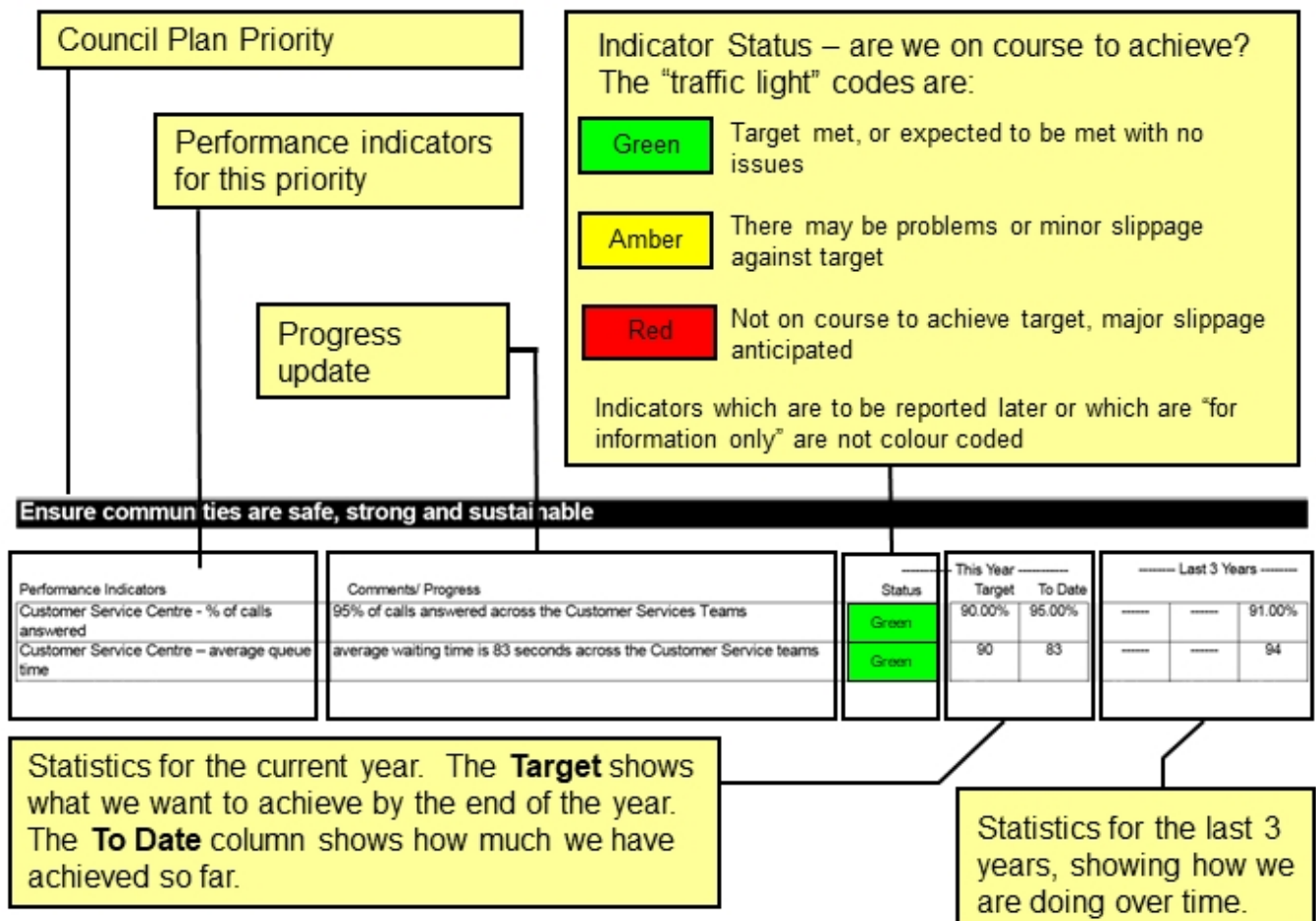


Summary - number of measures green, amber and red under each Council Plan Priority / Theme

Council Priority/ Theme	Green	Amber	Red	Report later / Contextual	Total
Ensure communities are safe, strong and sustainable	3		2	1	6
Get it right for children and young people	3				3
Improve health, care and wellbeing	5				5
<i>Promote sustainable and inclusive economic growth and tackle disadvantage</i>					
<i>Delivering the plan and achieving best value</i>					
Total	11	0	2	1	14

Guide to the Performance Indicators report

Each of the performance indicators is shown in the following pages of this report. The graphic below explains how the report is laid out and what information is presented.



Ensure communities are safe, strong and sustainable**Embed sustainable development strategy across Social Work Resources**

Performance Indicators	Comments/ Progress	----- This Year -----			----- Last 3 Years -----		
		Status	Target	To Date	2017/18	2018/19	2019/20
Measure the number of recycled items through the joint store (Equipu) and monitor the impact on efficiency.	Unable to report at Q2 as the figures from Equipu for August/September have not yet been released as their reporting period lags behind ours.	Report Later	-----	-----	2,220	2,530	2,450

Progress the Community Justice Outcome Improvement Plan

Performance Indicators	Comments/ Progress	----- This Year -----			----- Last 3 Years -----		
		Status	Target	To Date	2017/18	2018/19	2019/20
98% of clients are first seen within 2 working days of a DTTO commencing	In Quarter 2, 1 Drug Testing and Treatment Order commenced and the service user was seen within timescales. To date, there have been 2 orders imposed both have been seen within 2 working days of the DTTO commencing.	Green	90.0%	100.0%	100.0%	93.0%	100.0%

Provide access to timely support and interventions for people/groups who are disadvantaged

Performance Indicators	Comments/ Progress	----- This Year -----			----- Last 3 Years -----		
		Status	Target	To Date	2017/18	2018/19	2019/20
90% of drug/alcohol clients start treatment/psychosocial intervention within 3 weeks of referral	In Quarter 2 96% (168 out of 175) clients started treatment within 3 weeks of referral. To date 95% (282 out of 296) have started treatment.	Green	-----	95%	94%	93%	94%

Safely and effectively manage and support those who have committed offences to help them reintegrate into the community and realise their potential for the benefits of all

Performance Indicators	Comments/ Progress	----- This Year -----			----- Last 3 Years -----		
		Status	Target	To Date	2017/18	2018/19	2019/20
75% of offenders on CPO unpaid work requirement are seen within 5 working days by their case manager	In Quarter 2 56% (29 out of 52) of offenders had their induction within 5 working days. To date 54% (30 out of 56) have had their induction within the timescale. The reduction in offenders being inducted within timescale is due to Covid as the unpaid work service could not run in quarter 1 therefore creating a back log. This will be monitored by management.	Red	-----	54.0%	78.0%	80.0%	77.0%

Ensure communities are safe, strong and sustainable

Safely and effectively manage and support those who have committed offences to help them reintegrate into the community and realise their potential for the benefits of all

Performance Indicators	Comments/ Progress	----- This Year -----			----- Last 3 Years -----		
		Status	Target	To Date	2017/18	2018/19	2019/20
75% of people starting their placement within 7 days of a CPO unpaid work	In Quarter 2 42% (22 out of 52) people started their placement within 7 days. As the Unpaid Work Service could not run and there have been reduced capacity on placements. To date 39% of placements started within 7 days. There have been 56 unpaid work orders commenced to date and 45 of those have now started a placement albeit out with timescale.	Red	-----	39.0%	81.0%	77.0%	77.0%
95% of Criminal Justice Social Work reports submitted to Court by the due date	In Quarter 2 there have been 98% (282 out of 287) reports submitted to the court by the due date. To date there have been 379 out of 385 reports submitted to the court by the due date.	Green	-----	98.0%	99.0%	99.0%	98.0%

Get it right for children and young people

Care and protect vulnerable children and young people

Performance Indicators	Comments/ Progress	----- This Year -----			----- Last 3 Years -----		
		Status	Target	To Date	2017/18	2018/19	2019/20
Monitor the number of investigations undertaken (level of child protection activity)	In quarter 2, 185 out of 194 CP referrals proceeded to investigation. 60 Of these were in relation to emotional abuse, 66 in relation to neglect, 35 physical abuse and 13 sexual abuse. 9 pre-birth risk assessments were undertaken and 2 were outcomes of multi agency discussions re ongoing concerns.	Green	-----	417	754	690	685
75% of children seen by a supervising officer within 15 days	In Quarter 2, no children were made subject to a Compulsory Supervision Order. To date 100% of children have been seen within 15 days following the hearing date.	Green	-----	100.0%	100.0%	93.0%	90.0%
75% of reports submitted to the Children's Reporter within 20 days	In quarter 2, 92% (72 out of 78) reports were submitted to the Scottish Children's Reporters Administration within the 20 day timescale. This evidences further improvement for this measure following close monitoring by the management team.	Green	-----	91.0%	75.0%	79.0%	71.0%

Improve health, care and wellbeing**Care and protect vulnerable adults**

Performance Indicators	Comments/ Progress	----- This Year -----			----- Last 3 Years -----		
		Status	Target	To Date	2017/18	2018/19	2019/20
Number of people receiving intensive (10 hrs+) home care as a proportion of all care at home provided	As at 30 September 2020, 3,699 people were in receipt of Care at Home services, of this 1,827 (or 49%) were in receipt of 10 hours or more of support.	Green	-----	49%	0%	0%	29%
Number of hours provided for intensive (10 hrs+) home care as a proportion of all care at home provided	At the end of Quarter 2, 48,110 hours of Care at Home services per week is being delivered, of this 38,369 hours(or 80%) were attached to care packages of 10 hours or more of support.	Green	-----	80%	0%	0%	53%
90% of statutory supervising officer visits completed within timescale for local authority welfare guardianship orders	To date there was a total of 133 local authority welfare guardianship visits due with 95% (127) being completed on time. During 1 July 2019 - 30 September 2019 (Quarter 2) there were 78 visits due with 74 (95%) completed within timescale.	Green	90%	95%	94%	98%	93%
90% of statutory supervising officer visits completed within timescale for private welfare guardianship orders	To date there was a total of 1296 private welfare guardianship visits due with 92% (1188) being completed on time. During 1 July 2019 - 30 September 2019 (Quarter 2) there were 667 visits due with 610 (91%) completed within timescale.	Green	90%	92%	91%	93%	86%

Promote choice, control and flexibility in social care

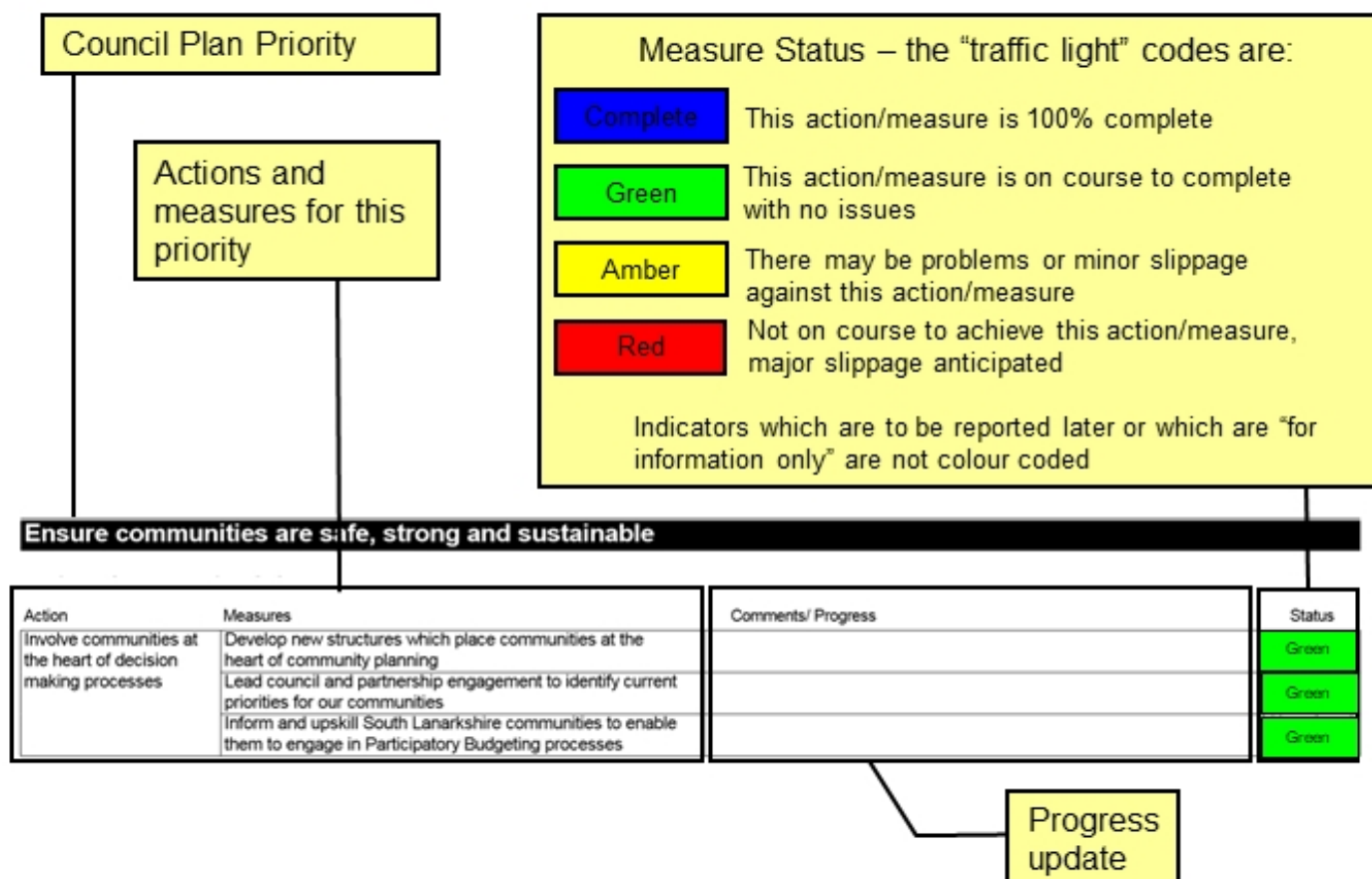
Performance Indicators	Comments/ Progress	----- This Year -----			----- Last 3 Years -----		
		Status	Target	To Date	2017/18	2018/19	2019/20
Report on the number of carers supported by dedicated Welfare Rights Officers and amount of benefits awarded	During the second quarter of 20/21, outcomes for carers, supported by dedicated Welfare Rights officers were: Number of new cases: 141 Weekly benefits: £16,584 Backdated benefits: £195,929 Annual benefits: £1,058,297	Green	-----	209	962	1,057	1,080

Summary - number of measures complete, green, amber and red under each Council Plan Priority / Theme

Council Priority/ Theme	Complete	Green	Amber	Red	Report later	Total
Ensure communities are safe, strong and sustainable		2				2
Get it right for children and young people		3				3
Improve health, care and wellbeing		8			1	9
Promote sustainable and inclusive economic growth and tackle disadvantage		2				2
Delivering the plan and achieving best value		6				6
Total	0	21	0	0	1	22

Guide to the Performance Measures report

Each of the performance measures is shown in the following pages of this report. The graphic below explains how the report is laid out and what information is presented.



Ensure communities are safe, strong and sustainable**Progress the Community Justice Outcome Improvement Plan**

Action	Measures	Comments/ Progress	Status
Embed the national model for Community Justice in Scotland in South Lanarkshire Justice Services	Provide update reports to the Community Justice Partnership and the Safer South Lanarkshire Board	A range of services began to return albeit in a reduced and altered way. Unpaid Work Business returned in July and is continuing to offer placements to service users using social distancing. There is a significant backlog in hours and courts have resumed leading to an increased demand for court reports and community payback orders. Group work programmes are being adapted to run virtually where possible and/or on a 2:1 basis in other situations. Justice Social Work are continuing to triage casework and carry out public protection meetings as required.	Green

Safely and effectively manage and support those who have committed offences to help them reintegrate into the community and realise their potential for the benefits of all

Action	Measures	Comments/ Progress	Status
Improve management of all offenders including high risk offenders	Produce MAPPA annual report and present to the Community Justice Partnership	The annual report has been undertaken and will be presented to the Community Justice Partnership.	Green

Get it right for children and young people**Care and protect vulnerable children and young people**

Action	Measures	Comments/ Progress	Status
Implement the Corporate Parenting Strategy and Action Plan	Report the number of looked after children by placement type in order to compare home and community placements on a 6 monthly basis	At the end of Quarter 2, there were a total of 788 looked after children. The balance of care being 712 (90%) in a Community setting and 76 (10%) in a residential setting. This is in line with the Scottish average. Within this split is a wide range of placement types and options, aimed at ensuring that all our children and young people are cared for in a setting appropriate to their needs. There has been a further increase of 29 children since end of Q4 last year.	Green
Work in partnership to resource carers appropriately in their caring role	Monitor the implementation of the Carers (Scotland) Act 2016 as it relates to young carers	The young carers service has adapted ways of working and continued service delivery throughout the pandemic, staff have used a range of methods to keep in touch with young carers and their families. Staff continue to deliver statements and reviews and take forward deliverable actions from the child plan.	Green
	Monitor the current commissioned carer support services, information and engagement services in respect of young carers will be remodelled	Strong links have been established between the AFC co-ordinator, Child and Family Operational Development Team Leader and Young Carer social worker. There remains to be regular contact between Action for Children (AFC) and Social Work Resources. AFC have successfully recruited a team and training is ongoing.	Green

Improve health, care and wellbeing**Care and protect vulnerable adults**

Action	Measures	Comments/ Progress	Status
As a result of multi-agency inspections, continue to improve outcome for people to live in their own homes and communities for as long as possible	Continue to deliver robust action plans which may arise as a result of inspection activity across the Resource	A detailed action plan has been agreed with the Care Inspectorate in relation to the Children's Services Inspection and will be monitoring by the Getting it right for South Lanarkshire's Children Strategy Group (GIRSLC). A report was presented to the GIRSLC Partnership Board in relation to the inspection 1 September 2020.	Green

Improve health, care and wellbeing**Care and protect vulnerable adults**

Action	Measures	Comments/ Progress	Status
Monitor vulnerable adults referrals/activity	Monitor and report on the level of adult support and protection inquiries, investigations and protection plans for adults under 65	In Quarter 2 the Resource worked with a number of service users aged under 65 as a result of Adult Support and Protection (ASP) issues. There were 289 ASP inquiries, with 111 investigations started in the period and 9 protection plan being progressed.	Green
	Monitor and report on the level of adult support and protection inquiries, investigations and protection plans for adults aged 65+	In Quarter 2 the Resource worked with a number of service users aged over 65 as a result of Adult Support and Protection (ASP) issues. There were 531 ASP inquiries, with 192 investigations started in the period and 2 protection plan being progressed.	Green

Deliver better health and social care outcomes for all

Action	Measures	Comments/ Progress	Status
Continue to monitor the impact of eligibility criteria/prioritisation for service users and carers on a six monthly basis	Roll out and monitor the impact of eligibility criteria/prioritisation for service users and carers on a six monthly basis	The Resource continues to monitor the impact of the criteria through analysis of complaints. No complaints specific to eligibility criteria received in Q2.	Green

Improve health, care and wellbeing**Deliver better health and social care outcomes for all**

Action	Measures	Comments/ Progress	Status
Implement the actions detailed within the Health and Social Care Delivery Plan	Report on progress against trajectories for the 6 areas identified in the Health and Social Care Delivery Plan: Emergency Admissions; Unscheduled Care Bed Days; Accident and Emergency Attendances; Delayed Discharge Bed Days; End of Life Care; Balance of Care	Information on the 6 areas of the Health and Social Care Delivery Plan are monitored monthly and formally reported on a quarterly basis to the Integrated Joint Board, Performance Audit and Finance Sub Committee and Social Work Committee. Data for July – September not yet available.	Report Later
Support the implementation of the IJB Directions which focus on the shifting the balance of care	Provide progress reports to the IJB in relation to the Directions	<p>The Strategic Commissioning Plan (SCP) and the issue of Directions to the Health Board and the Local Authority for the financial year 2020/2021 was approved on 30 March 2020.</p> <p>As indicated in previous quarter the IJB acknowledged the potential impact of the Covid-19 pandemic on each partner's ability to implement the strategic commissioning intentions and the Directions as originally planned. Progress to date in respect of the implementation of the 2020/2021 Directions is attached reflects the position at 9 September 2020.</p> <p>Of the 35 Directions issued, progress to date is summarised as follows: 4 on hold, not possible to progress during this period 22 progressing but change in outcomes and/or delay expected 3 progressing as originally planned 6 directions completed</p>	Green

Improve health, care and wellbeing**Deliver better health and social care outcomes for all**

Action	Measures	Comments/ Progress	Status
Extend the range and choice of day opportunities for older people	Develop and modernise day care services for older people which supports personal outcomes	The day service review work recommenced in August and will now incorporate learning gained during the Covid-19 period. The Scottish Government has now published extensive guidance on the safe re-opening of day services, and recovery planning to enable building based services to re-establish is ongoing. The intention is to produce the review report during the third quarter which will enable evidence based options appraisal and redesign modelling of day services to support personal outcomes.	Green

Improve health, care and wellbeing**Deliver better health and social care outcomes for all**

Action	Measures	Comments/ Progress	Status
Implement Government Strategies relating to mental health, additional support needs, physical, sensory and learning disability	Provide updates on national strategies, e.g. See Hear, Mental Health	<p>Meetings of the See Hear Strategic Working Group during Spring/Summer had to be cancelled due to the Covid 19 pandemic. However, Microsoft Teams meetings have now been arranged for the rest of this year and progress continues to be made in relation to the See Hear Framework implementation.</p> <p>For people living with sight loss, sight loss and complex needs and for people who are supporting someone living with sight loss and complex needs, a link to the new podcast series 'Chats about apps', which is available on RNIB Older people podcasts series page, was added to the Knowledge Hub for the group members to access and share.</p> <p>Information on the impact of the pandemic on people with a sensory impairment, and guidance/advice for health and social care staff in Scotland on communication for people with sensory loss during the COVID-19 pandemic, was issued via the Knowledge Hub and shared with the group for dissemination to all relevant staff throughout the Partnership.</p> <p>Work is underway with children's services planning leads in North and South Lanarkshire to embed delivery of the children and young people's elements of the Mental Health and Wellbeing Strategy into Children's Services Partnership structures to ensure that these incorporate paediatrics, specialist CAMHS and neurodevelopmental pathway to support system-wide planning.</p> <p>The national Children and Young People's Mental Health & Wellbeing Programme Board has provided a CAMHS service spec and a framework for community mental health and wellbeing supports and services for children and young people from 5-24 years. Both of these are challenging for local services for various reasons:</p> <ul style="list-style-type: none"> • A significant change to the current CAMHS model is required to meet the national service specification. Plans have been submitted to SG outlining how we will implement this. • The Community Framework is aimed at those who need a lower level of support and, while we completely support the aspiration, the challenge of implementing the different types and levels of services and supports to meet the needs of children and young people across a 	Green

Improve health, care and wellbeing**Deliver better health and social care outcomes for all**

Action	Measures	Comments/ Progress	Status
		<p>19 year age range cannot be underestimated.</p> <p>The revised school nursing pathway includes mental health and wellbeing as one of the priority areas, but we require to resource all the elements of the pathway. Currently school nurses have to prioritise child protection and looked after children health reviews.</p> <p>In light of the publication of these national documents and delivery plans, we need to ensure that we are taking a coordinated approach to planning with Children's Services Partnerships in North and South Lanarkshire. As a first step in North Lanarkshire, a service mapping exercise was undertaken to identify any gaps in service provision and inform the development of the Community Support Framework.</p> <p>In relation to Specialist Services:</p> <ul style="list-style-type: none"> • A proposal has been agreed to consolidate contracted hospital-based complex clinical mental health care beds onto a single site. This will support new opportunities for multi-disciplinary team-based working and a range of services provided that will benefit the patients. • A review of adult rehabilitation and recovery is underway to develop a business case for a new, community-focused model of rehabilitation and recovery services. • An interim operational management structure for South Lanarkshire Community Mental Health Teams is in place to enable the transfer of the management, accountability and strategic leadership of community mental health services to South Lanarkshire HSCP from the current hosted arrangements with Health and Social Care North Lanarkshire. • Progress is being made towards the establishment of a multi-disciplinary Community Perinatal Mental Health Service. • The Scottish Government has granted funding to NHS Lanarkshire for an Interim Infant Mental Health Service Lead, Parent-Infant Therapist, and delivery of infant mental health training; a Service Lead is in place and an Infant Mental Health Service Development Group established; and a proposal is being developed for submission to the national Perinatal & Infant Mental Health Programme for funding a multi-disciplinary infant mental health service. <p>Next steps -</p> <p>Over the summer the following steps will support restarting</p>	

Improve health, care and wellbeing**Deliver better health and social care outcomes for all**

Action	Measures	Comments/ Progress	Status
		<p>implementation of the strategy:</p> <ul style="list-style-type: none"> • Review our Communications and Engagement Strategy to ensure stakeholder involvement in the design and delivery of services. • Fully define cross-cutting workstreams and develop 3-year delivery plans. • Map the implementation plan onto National Mental Health Strategy actions. <p>Ensuring that, in developing delivery plans, the high level intentions of the Strategy are incorporated in relation to trauma-informed practice, good mental health for all, reducing health inequalities and take a rights-based approach to addressing mental health stigma and discrimination as a key principle throughout all workstreams within the Strategy.</p>	

Promote choice, control and flexibility in social care

Action	Measures	Comments/ Progress	Status
Work in partnership to support carers to continue in their caring role	Monitor and report on the remodelled commissioned carer support, information and engagement services	Lanarkshire Carer Centre commenced operation of our Adults Carers Support Services Contract from the start of this quarter. During Covid they have continued to support carers by phone and on digital platforms. There Quarter 1 report for 20/21 details that 197 new carers identified this quarter, from a total of 4895 South Lanarkshire Carers, of which 975 are accessing services from the Centre.	Green

Promote sustainable and inclusive economic growth and tackle disadvantage**Strengthen engagement with service users and carers**

Action	Measures	Comments/ Progress	Status
Continue to support the culture where consultation and participation is part of the planning, development and delivery of all our services	Monitor and report on the Participation and Involvement Strategy	The Participation and Involvement Strategy 2020 - 23 is available as a published document and on line.	Green

Tackling poverty and deprivation

Action	Measures	Comments/ Progress	Status
Contribute to the tackling poverty agenda	Provide detail of the income generated (benefit awards/back dated benefits/debt advice) for clients of the Money Matters Advice Service on a quarterly basis	<p>During the second quarter of 20/10, outcomes for people supported by the local Money Matters teams were:</p> <p>Number of new cases: 839 Weekly benefits: £85,044 Backdated benefits: £1,004,762 Annual benefits: £5,427,050 New debt dealt with: £864,467 *Number of people provided with advice where issue was resolved at the initial contact: 2839 *this is additional to the number of new cases</p>	Green

Delivering the plan and achieving best value**Deliver and communicate the Council Plan and ensure high standards of governance**

Action	Measures	Comments/ Progress	Status
Ensure high standards of governance are being exercised	Risk register is regularly reviewed, agreed and updated through the Performance and Continuous Improvement Groups and Social Work Governance Group	All individual risk scorecards have been reviewed for the 21 top risk identified by the Resource. The annual risk report will be presented to the Senior Management Team 22 September for final sign off.	Green
Ensure monitoring, compliance and control of externally purchased services	Ongoing monitoring of the quality of care provided by externally purchased services	As outlined in Quarter 1 the Care Inspectorate are undertaking inspection in relation to Covid legislation and focusing on: Key question 7: How good is our care and support during the COVID-19 pandemic? 7.1 People's health and wellbeing are supported and safeguarded during the COVID-19 pandemic 7.2 Infection control practices support a safe environment for both people experiencing care and staff 7.3 Staffing arrangements are responsive to the changing needs of people experiencing care During this Quarter 2 period 5 South Lanarkshire Care Homes have been inspected, one good, and all other Adequate, follow up visits are planned as part of ongoing monitoring. Of the twenty-one Supported Living Providers, 1 is adequate, 2, excellent and the remainder good/very good.	Green
Produce annual Chief Social Work Officer Report	Chief Social Work Officer Report is produced and forwarded to Scottish Chief Social Work Officer by September 2020	The draft 2019/2020 CSWO report has been prepared.	Green

Delivering the plan and achieving best value**Develop improvement activity and promote scrutiny**

Action	Measures	Comments/ Progress	Status
Implement effective Best Value management arrangements to ensure continuous improvement and efficient and effective service delivery	Ensure that Scottish Government Performance Reports are submitted within timescale: LAAC; Child Protection; Justice Services; Mental Health; Learning Disability; Homecare and Respite	All returns due have been submitted within timescales.	Green
Ensure registered care services are compliant with health and social care standards	Report on annual care inspectorate evaluations of our 42 registered services	<p>Some building based services have been operating on a outreach basis as part of our response to COVID.</p> <p>South Lanarkshire's 6 children's care homes report: 5 very good, and 1 good.</p> <p>Fostering and Adoption Services, and Supported Carers all Very Good.</p> <p>Of our 6 Lifestyles Centres: 1 excellent, 5 good, with our Care and Support Service also recorded as good.</p>	Green

Improve the skills, flexibility and capacity of the workforce

Action	Measures	Comments/ Progress	Status
Contribute to a fair, healthy and sustainable food system	Contribute to the development of the Council's Food Strategy which will encompass social, health, economic and environmental concerns related to food	Becoming a Good Food Council is part of the council's priorities. To advance this objective, the council has developed its first food strategy; Good Food Strategy 2020-2025. The strategy provides a framework for actions to move towards healthier, fairer and more sustainable food systems in the council's area and to make sure that food plays a positive role in everyone's lives.	Green

'Report later' measures

– update of Social Work Resource Plan 2019-20 Quarter 4 Progress Report

Measure	Comments at Quarter 4 2019-20	Updated status at Q2 2020-21	Updated comments
By 1 April 2020 current commissioned carer support services, information and engagement services in respect of young carers will be remodelled	The contract for our Young Carer Support Service has been awarded to Action for Children, who already provide a similar service in a neighbouring local authority. Early engagement with the service provider has been hampered with the current COVID 19 situation. A letter has been drafted to the provider with an estimated service start date of early July.		Strong links have been established between the Action for Children co-ordinator, Child and Family Operational Development Team Leader and Young Carer social worker. There remains to be regular contact between Action for Children (AFC) and Social Work Resources. AFC have successfully recruited a team and training is ongoing.
Continue to reduce vehicle emissions in 2019-20 against the baseline of 2014-15	Due to the current COVID 19 pandemic and staff working from home and other locations, pulling the usual statistical data together has not been possible. Social Work managers continue to monitor the level of mileage undertaken by employees.		Vehicle emissions for 2019/20 increased by 4.23% across Social Work which is short of the 10% reduction target. However, to date in 2020/21 Social Work have exceeded the 10% target with a 23.1% reduction in vehicle emissions.

The 'Report later' status of the following LGBF indicators remains the same. As already reported the data will be published in 2021.

Local Government Benchmarking (LGBF) Indicators	Comment
Maintain performance of the LGBF: Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life (SW4b) in line with national average	These are Local Government Benchmarking Framework (LGBF) indicators. The LGBF results for 2019-20 are due to be published by the Improvement Service in February 2021.
Maintain performance of the LGBF: Percentage of adults supported at home who agree that they are supported to live as independently as possible (SW4c)	
Maintain performance of the LGBF: Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided (SW4d)	
Maintain performance of the LGBF: Percentage of carers who feel supported to continue in their caring roles (SW4e)	

(Data/Information correct as at 11 November 2020)

Report

7

Report to:	Social Work Resources Committee
Date of Meeting:	20 January 2021
Report by:	Director, Health and Social Care Executive Director (Finance and Corporate Resources)

Subject:	Infant Mental Health/Continuing Care - Additional Resources
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ♦ provide the Committee with an update on a Scottish Government Initiative to provide additional funding to develop a specialist Infant Mental Health Service and to provide an update on creating capacity to support wrap around community based accommodation for care leavers

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

- (1) that the content of the report be noted;
- (2) that the creation of 1 Full-time Equivalent (FTE) Social Worker post (fixed term), as detailed in section 5.1, be approved; and
- (3) that the creation of a 1 FTE Team Leader post, as detailed in section 5.1, within the Family Placement Team dedicated to overseeing the development of supported carer's service, be approved.

3. Background

3.1. Mental Health Services for Infants

3.1.1. The Scottish Government (SG), through the SG Mental Health Strategy 2017-27 and the national Perinatal and Infant Mental Health Programme, is providing funding to all NHS Boards with a requirement from 1 April 2020 to develop a specialist Infant Mental Health Service for infants (birth to 3rd birthday) with a designated lead for Infant Mental Health.

3.1.2. A proposal was submitted to the SG by NHS Lanarkshire (NHSL) for the establishment of a multi-disciplinary team across Lanarkshire. Posts of Project Manager and Nursing staff, who will be employed by NHSL; and two Social Worker posts, one each for North and South Lanarkshire were submitted as part of the proposal.

3.1.3. The purpose of the Social Worker posts are to support and promote multi agency working in relation to NHSL Infant Mental Health Team work with infants with severe/complex mental health difficulties and their families; and provide a direct link between the NHSL Infant Mental Health Team work with infants and their families, and the local authority Social Worker or locality Social Work Team.

- 3.2. Increasing Continuing Care Options for Care Leavers
- 3.2.1. The Children and Young People (Scotland) Act 2014 brought about significant changes to the support for older young people preparing to transition from care. The legislative framework expanded the duties of local authorities to young people giving young people the right to remain in the care placement up to 21 years of age (continuing care). This has resulted in a higher percentage of young people staying in their care placements until they are 21 years. This has created significant cost pressures as we try and meet current and future demand to meet the needs of this group of young people.
- 3.2.2. A high number of our care leavers are not ready to live independently but no longer wish to remain in fostering or residential care. These young people are unable to move on from care placements as there is currently not a specific resource within South Lanarkshire that provides wrap around supportive care community based accommodation.

4. Current Position

- 4.1. Mental Health Services for Infants
- 4.1.1. In recognition of the existing clinical provision for infants, and Infant Mental Health training, consultation and supervision already being provided by NHS Lanarkshire, the Scottish Government has granted funding to NHSL for 'early adopter' status.
- 4.1.2. Funding has been approved from October 2020 and will be reviewed at the end of March in 2023. In light of the impact of Covid-19, it is recognised there is some delay in the project commencing. The funding allows for the establishment of a multi-agency team, which will include a Social Worker post for South Lanarkshire residents.
- 4.2. Increasing Continuing Care Options for Care Leavers
- 4.2.1. As part of the continuing care strategy, there is a requirement to increase capacity, to offer young people an option of supported carers. At present there is a small resource of 4 FTE supported carers. Capacity within the team is maximised and limited due to the size of the team, commitment to recruitment, assessment, training and support to growing the Foster Care population across South Lanarkshire. In addition, the team have consumed the new support responsibilities for Kinship Care development across South Lanarkshire. We know from our analysis that we have ten young people who are ready to move out of formal residential/foster care into supported carers placements.
- 4.2.2. The SG have issued reoccurring funding of £15m between all local authorities' in relation to the development of new and enhanced community mental health and wellbeing services for 5-24-year olds, their families and carers. South Lanarkshire has received part year funding of £210k for 2020/21. This additional funding is being provided to enable the roll out of new and enhanced supports and services. A Team Leader post will be created, dedicated to enhance the Supported Carers service for care leavers. The impact of transitions on young care leavers cannot be underestimated. This is a time of significant vulnerability which can impact on their mental health and wellbeing. Offering supported care placements with wrap around support is a priority for the service therefore the creation of the Team Leader post within the Family Placement Team will enable the Service to have a specific focus on recruitment, assessment and retainment of the supported carers.

5. Employee Implications

- 5.1. Employee implications are detailed below and the proposal is to create 1 FTE Social Worker post (fixed term 3 years) and 1 FTE Team Leader post.

Post	No of posts	Grade	SCP range	Hourly rate	Annual salary	Gross cost	Total cost
Social Worker	1	G3 L4	72-74	£20.61	£37,611	£49,007	£49,007
				- £21.25	- £38,779	- £50,529	- £50,529
Team Leader	1	G3 L8	79-80	£22.89	£41,772	£54,429	£54,429
				- £23.24	- £42,411	- £55,261	- £55,261

6. Financial Implications

- 6.1. The costs for the Social Worker post fixed for 3 years will be met from the Mental Health Strategy funding provided to NHSL and the Team Leader post cost will be met from the reoccurring Mental Health and Wellbeing funding.

7. Climate Change, Sustainability and Environmental Implications

- 7.1. There are no implications for climate change associated with this report.
- 7.2. There are no sustainable development implications associated with this report.
- 7.3. There are no environment Implications associated with this report.

8. Other Implications

- 8.1. There are no additional risk implications associated with this report.
- 8.2. There are no sustainable development issues associated with this report.
- 8.3. There are no other issues associated with this report.

9. Equality Impact Assessment and Consultation Arrangements

- 9.1. This report does not introduce a new policy, function, or strategy, or recommend a change to existing policy, function or strategy and, therefore, no impact assessment is required.
- 9.2. Consultation has taken place with the Trade Unions regarding this report.

Val de Souza
Director, Health and Social Care

Paul Manning
Executive Director (Finance and Corporate Resources)

29 December 2020

Link(s) to Council Values/Ambitions/Objectives

- ◆ Protect vulnerable children, young people and adults
- ◆ Deliver better health and social care outcomes for all
- ◆ Focused on people and their needs

Previous References

◆ none

List of Background Papers

◆ none

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

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Report

8

Report to:	Social Work Resources Committee
Date of Meeting:	20 January 2021
Report by:	Director, Health and Social Care Executive Director (Finance and Corporate Resources)

Subject:	Resourcing for Inclusion as Prevention and Justice Social Work Resources
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1. Purpose of Report

1.1. The purpose of the report is to: -

- ◆ Update the Committee on the Community Lottery Funded Initiative, Inclusion as Prevention (IAP) which is in phase three of the delivery plan and intends to carry out a test of change with FAS, the Intensive Family Support Service for under 12's. The test of change requires the creation of 1 Full-time Equivalent (FTE) temporary Family Support Worker post for the period of 12 months
- ◆ Request a temporary increase in the FAS establishment to enable a test of change to be carried out
- ◆ Request that the temporary 0.5 FTE Team Leader Post in Unpaid Work Services (UPW) is made permanent

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s): -

- (1) that the content of the report be noted;
- (2) that the proposed increase in staffing arrangements within the FAS, as detailed in Section 5, be approved; and
- (3) that the proposed permanent increase of 0.5 FTE Team Leader within the UPW service on a permanent basis, as detailed in Section 5, be approved.

3. Background

3.1. Inclusion as Prevention

3.1.1. South Lanarkshire Council successfully secured £800k funding from the Early Action System Change (EASC) Fund of the Community Lottery for a 5-year project (2019-2024) named Inclusion as Prevention (IAP). The successful funding bid was presented to the Social Work Committee in 2018 which endorsed the proposal and agreed to South Lanarkshire Council becoming the lead partner for this project. The committee recognised that the approach proposed would offer the council valuable learning on the potential future shape and commissioning of services.

- 3.1.2. IAP is a partnership between South Lanarkshire Council, the Centre for Youth and Criminal Justice (CYCJ), Dartington Service Design Lab and Action for Children. The aim of the project is to redesign services WITH children, young people and their families. The project aims to test and demonstrate what better outcomes could come about for people when we include them in how services affecting their lives are delivered. Research from the CYCJ indicates that targeted interventions at the right time can reduce the number of young people escalating into the justice system in the longer term.
- 3.1.3. Since the project was established, extensive research and evaluation with people from the local community and practitioners working across the South Lanarkshire System has taken place. The IAP team heard from families and staff that there was a need for throughcare support for vulnerable families approaching the end of intervention work offered by the FAS intensive family support service. Families felt that this worker would help to reinforce learning that had taken place during their initial intervention offered from FAS. The IAP core steering group (AFC, Dartington, CYCJ, SLC) endorsed a proposal to develop a test of change with FAS, for children between the ages of 5 and 12 years.
- 3.1.4. The GIRFEC Partnership Board on discussing the FAS test of change in 2020, recognised that the tests would inform, support, challenge and dovetail with wider system change activities around, for example, corporate parenting and reinventing and re-energising relations with the local community around the rights of children. This project offers the chance to model our desired approach from engaging the wider community into shaping local authority provision, ensuring equality and equity in the voices being heard in the development of services.
- 3.1.5. IAP, therefore, proposes to test the introduction of dovetailed support for families being referred to FAS. It is proposed that an additional family support worker would work alongside families for a period of up to 6 months beyond the initial FAS intervention. The additional worker would offer support and help broker relationships with universal services to reinforce learning undertaken at an earlier point and sustain connectivity and citizenship for children and their families.

3.2. Justice Services-Unpaid Work

- 3.2.1. The Scottish Government vision for Community Justice is reflected in the current South Lanarkshire Community Justice Improvement Plan of which the key aims are: to prevent and reduce further offending by addressing its underlying causes; and safely and effectively manage and support those who have committed offences to help them reintegrate into the community and realise their potential for the benefit of all citizens.
- 3.2.2. Unpaid Work is one of nine requirements that can make up a Community Payback Order imposed on individuals by means of a community- based sentence. Unpaid Work offers repatriation to society for misconduct and opportunities for rehabilitation through skills training and positive social activity. Up to 30% of these orders can be made up of “other activity which involves for example gaining education or employability skills and/or addressing substance misuse issues”.
- 3.2.3. The Unpaid Work Service is comprised of 20 FTE Supervisors, 14 FTE Social Work Assistants, 3.5 FTE Placement Coordinators and 2 FTE and 0.5 FTE temporary Team Leader posts. The Supervisors are responsible for taking service users to and from community-based work placements and ensuring work is competently completed. They also hold workshops for woodwork and joinery and oversee the

community laundry and bread making classes. The Social Work Assistants can facilitate “other activity” arrangements, undertake casework, and communicate with Social Workers and the courts regarding the progress with completion of orders involving the submission of progress, completion, and breach reports. The Coordinators directly oversee the Supervisors and coordinate information requests from the community for unpaid work. The Team Leaders oversee the entire service, directly supervising the Coordinators and Social Work Assistants and ensuring compliance with health and safety requirements, allocation, and oversight of statutory orders.

4. Current Position

4.1. Inclusion as Prevention

- 4.1.1. FAS currently have support workers who work with families for a period of up to 12 months. As they exit the FAS service, the intensity of support they require is not always available to them. This gap in service provision creates risks in sustaining the changes they require to make to prevent a relapse in the behaviours leading to families being in crisis in the first place. The Delivery Plan for IAP was endorsed by the Big Lottery and granted time limited funding to deliver tests of change as part of the early action system change process.
- 4.1.2. The funding will allow for the establishment of a temporary Family Support Worker to be attached to FAS to support the provision of continuous support to families exiting the project.

4.2. Justice Services-Unpaid Work

- 4.2.1 The current team leader complement within justice services is 2.0 FTE Team Leaders and an additional 0.5 FTE temporary Team Leader post due to end in March 2021. The temporary post was created in August, to deal with additional workload and the impact of COVID. Due to the extent of the backlog of unpaid work hours from the pandemic and the impact of the presumption against short term sentences (PASS) leading to an increase in unpaid work, the level of additional hours will not diminish. Converting this post to a permanent post will enable the service to meet the additional workload requirements in the service, as detailed below, and cover for periods of absence and training.
- 4.2.2. The Covid-19 pandemic has required Team Leaders to ensure that all aspects of staff and service user safety and compliance with Scottish Government recommendations were taken account of and adhered to. Responding to the pandemic has affected all areas of service delivery and procedures have required constant review. Team leaders have adapted to these regular changes on an ongoing basis to ensure service user and staff safety whilst continuing to provide a statutory service. To add to this the backlog in hours generated over recent months due to the closure of the courts, unpaid work service and social distancing requirements has led to team leaders undertaking additional efforts to identify new and imaginative work placements where at all possible.
- 4.2.3. The current permanent 2 FTE, Team Leader complement within Justice Services does not have the capacity to manage such additional responsibilities whilst maintaining the quality of service delivery and providing effective risk management response of the service as detailed at 8.1.

5. Employee Implications

- 5.1. Employee implications are detailed below, and the proposal is to create 1 FTE Family Support Worker post for a temporary period of 12 months.

Post (Social Work)	Existing Number of Posts (FTE)	Proposed Number of Posts (FTE)	Grade	SCP Range	Hourly Rate	Annual Salary	Gross Cost inc on costs 30.3%
Family Support Worker	0	1	Grade 2 Level 1-4	34 - 57	£11.78 - £16.52	£21,497 - £30,147	£28,011 - £39,281
Additional Costs							£28,011 - £39,281

- 5.2. Employee implications are detailed below, and the proposal is to convert the 0.5 FTE temporary Team Leader to a permanent post.

Post (Social Work)	Existing Number of Posts (FTE)	Proposed Number of Posts (FTE)	Grade	SCP Range	Hourly Rate	Annual Salary	Gross Cost inc on costs 30.3%
Team Leader	0	0.5	Grade 3 Level 8	79 – 80	£22.89 - £23.24	£41,772 - £42,411	£54,429 - £55,262
Additional Costs							£27,214 - £27,630

6. Financial Implications

- 6.1. The costs of the temporary 1 FTE (FAS – Intensive Family Support Service) Family Support Worker will be met from the Community Lottery Fund.
- 6.2. The costs for the 0.5 FTE Team Leader post will be met from recurring funding from the Section 27 grant.

7. Climate Change, Sustainability and Environmental Implications

- 7.1. There are no implications for climate change associated with this report.
- 7.2. There are no sustainable development implications associated with this report.
- 7.3. There are no environmental implications associated with this report.

8. Other Implications

- 8.1. There is a risk of not providing adequate contingency cover and sufficient management support to ensure robust public protection arrangements are in place if the posts are not approved.
- 8.2. There are no other issues associated with this report.

9. Equality Impact Assessment and Consultation Arrangements

- 9.1. This report does not introduce a new policy, function, or strategy, or recommend a change to an existing policy, function, or strategy and, therefore, no impact assessment is required.
- 9.2. Consultation has taken place with the Trade Unions regarding the recommendations contained within this report.

Val de Souza

Director, Health and Social Care

Paul Manning

Executive Director (Finance and Corporate Resources)

16 November 2020

Link(s) to Council Values/Ambitions/Objectives

- ◆ focused on people and their needs
- ◆ working with and respecting others
- ◆ accountable, effective, efficient, and transparent
- ◆ ambitious, self-aware, and improving

Previous References

- ◆ Staffing in Justice, Social Work Resources, Social Work Resources Committee, 19 August 2020

List of Background Papers

- ◆ Inclusion as Prevention Delivery Plan

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact: -

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Report

9

Report to:	Social Work Resources Committee
Date of Meeting:	20 January 2021
Report by:	Director, Health and Social Care

Subject:	Remuneration for the Independent Chairs of the Fostering and Adoption Panel, Child Protection Committee and Adult Protection Committee
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ♦ seek authorisation to increase the remuneration paid to the Independent Chairs of the Fostering and Adoption Panel and Child Protection and Adult Protection Committees from £300 per day to £350 per day

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

- (1) that the increase in remuneration paid to the Independent Chairs of the Fostering and Adoption Panel and Child Protection and Adult Protection Committees from £300 per day to £350 per day be approved.

3. Background

- 3.1. South Lanarkshire Council engages the use of Independent Chairs in relation to the Fostering and Adoption Panel and Child Protection and Adult Protection Committees. This is considered to be good practice and is, therefore, common in Fostering and Adoption Services and Protection Committees.
- 3.2. The use of Independent Chairs provides an essential impartial perspective that ensures that the functions of the panels are carried out rigorously. The panel and the Independent Chair has an essential quality assurance role in monitoring activity.
- 3.3. Independent Chairs are recruited through external advertisement. They are selected through an interview process and references and statutory checks are undertaken. They are given fixed term contracts and are appraised on an annual basis. They are not employed by the Council and invoice individually for the work they undertake.
- 3.4. Currently, Independent Chairs in South Lanarkshire are remunerated at a rate of £300 per day. They are also compensated for reasonable expenses, including parking costs.
- 3.5. The rates of remuneration have not been increased since 2015. The proposed uplift to £350 is based on the composite price index, prices at July 2020 were 9.2% higher than average prices since 2015 and a benchmarking exercise with other local authorities.

- 3.6. Benchmarking has shown that the remuneration paid in South Lanarkshire has fallen behind that paid elsewhere for fostering and adoption panel chairs. Of the sample six local authorities contacted, 5 paid £350 per day or more.

Local Authority	Remuneration per day
South Lanarkshire	£300
Clackmannanshire	£350
Argyll and Bute	£350
West Lothian	£350
Borders	£400
East Lothian	£300
Mid Lothian	£40 per hour

4. Practice Implications

- 4.1. Having experienced and capable Panel Chairs in place has a positive impact on employees who present to panel as well as carers and applicants who attend. This can promote professional and accountable practice within our authority.

5. Employee Implications

- 5.1. The Independent Chairs are not employed by South Lanarkshire Council. The table below shows the current number of Independent Chairs and related Committees and Panels

Post: Independent Chair	No of posts	Remuneration per day
Fostering and Adoption Panels	2	£350
Child Protection Committee	1	£350
Adult Protection Committee	1	£350

6. Financial Implications

- 6.1. This cost will be met from the Family Placement budget and the respective Committee budgets for the Chair. There is capacity within the existing budget for this. The effective chairing of panels, particularly in relation to agreeing children's permanence plans, may reduce legal costs encountered by our authority by ensuring thorough examination of plans before legal routes are agreed.

7. Climate Change, Sustainability and Environmental Implications

- 7.1. There are no implications for climate change, sustainability and environmental implications in terms of the information contained in this report.

8. Other Implications

- 8.1. There are no risk implications associated with this report.
- 8.2. There are no sustainable development issues associated with this report.
- 8.3. There are no other issues associated with this report.

9. Equality Impact Assessment and Consultation Arrangements

- 9.1. This report does not introduce a new policy function or strategy, nor does it recommend a change to existing policy, function or strategy, therefore, no impact assessment is required

9.2. There is no requirement for consultation in respect of this report.

Val de Souza
Director, Health and Social Care

24 November 2020

Link(s) to Council Values/Ambitions/Objectives

- ◆ Protect vulnerable children, young people and adults

Previous References

- Social Work Resources Committee of 11 November 2015

List of Background Papers

- none

Contact for Further Information

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Report

10

Report to: **Social Work Resources Committee**
Date of Meeting: **20 January 2021**
Report by: **Director, Health and Social Care**

Subject: **Independent Care Review's Findings and the Promise of Transformational Change**

1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ provide brief overview of the work of the Independent Care Review
- ◆ update Social Work Resources Committee on findings contained within the Promise and what we are doing across South Lanarkshire to support the vision of the Promise

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

- (1) that the content of the report is noted; and
- (2) that Social Work Resources continue to support any future national and local implementation of the Promise arising from the Independent Care Review.

3. Background

- 3.1. The Scottish Government launched a root and branch review of the care system in 2017 to look at the underpinning legislation, practices, culture and ethos. The aim of the Independent Care Review was to identify and deliver lasting change in Scotland's care system and leave a legacy that will transform the wellbeing of infants, children and young people.
- 3.2. The Independent Care Review reached its final stage at the end of February 2020. The review produced seven key reports: The Promise; the Plan; The Money and Follow the Money; the Rules and finally The Thank You.
- 3.3. The Promise provides an overall vision of what the new approach should be. It reports that the 'care system' is currently a "complex, fragmented, multi-purpose and multifaceted entity" underpinned by 44 pieces of legislation, 19 pieces of secondary legislation and three international conventions and straddles six out of nine Scottish policy areas. As a result, it says, this is not a "care system" but a labyrinth of legislation, policy and practice which does not reflect the needs of Scotland's children, makes "cohesive operation impossible" and "creates disconnects into which children, young adults and their families can fall".
- 3.4. The "Promise" promotes the foundations of voice; family; care; people and scaffolding being at the heart of how Scotland thinks, plans and priorities for its children and families. It outlines a number of areas where organisations and institutions must "radically rethink" their underlying purpose and operating structures,

including the Children's Hearings system, foster care, residential care, secure care, children in the youth justice system, keeping children with their families where it is safe to do so, and continue to support models of Kinship Care and above all value the importance of relationships. The report outlines that Government must, therefore, create a clear legislative, environment that supports families to stay together and protects and allows relationships to flourish across the system.

4. Next Steps

- 4.1. The Plan briefly outlines that in order for The Promise to be realised, implementation of change would take up to 10 years. There will be one plan which will lay out the sequencing of change in alignment with national and local priorities. An independent oversight body/implementation team is currently being established. The National Oversight Group will establish a fit of purpose governance structure to ensure accountability from those responsible for making the change with a report being submitted annually to the Scottish Parliament. The Implementation Team have been in a process of engagement with organisations across Scotland and this process will directly form the basis of the Plan.
- 4.2. South Lanarkshire Council (SLC) Social Work Resources (SWR) has been engaged with the Independent Care Review team throughout the last three years. We agreed to be a host authority for a deprivation mapping exercise and maintained representation with various work streams (Edges of Care) and facilitated visits between the review team to showcase areas of good practice across South Lanarkshire.
- 4.3. We have recently met with a member of the implementation team to discuss opportunities and challenges with aligning the vision of the Promise into our Children's Services Plan and Corporate Parenting Plan. Our revised Corporate Parenting governance and structure and newly incorporated Champions Board will act as our strategic drivers in supporting the change which is aligned with the Promise.
- 4.4. Children and Justice SWR are currently undergoing a system wide change project with the emphasis on building capacity to support children and young people to remain within their families by developing an enhanced and co-ordinated family support model. This includes developments in widening the support offer to Kinship Carers both financially and emotionally.
- 4.5. We are currently engaged with key partners to strengthen our offer of support and accommodation pathways to care experienced young people post 16 and above in line with the vision of the Promise, co-designing with our care experienced young people a model of support and accommodation that meets young people's needs.
- 4.6. Children and Justice Social Work have started a process of "decluttering" Social Work processes to create the right conditions for our workforce to be able to practice in a relationship based/trauma informed manner and have a vision of promoting a culture that values the centrality of relationships between the workforce and children and their families.

5. Employee Implications

- 5.1. There are no employee implications associated with this report.

6. Financial Implications

- 6.1. There will be financial implications in relation to delivering Transformational Change over the period of The Plan, it has been recognised that there will need to be significant initial investment. The exact financial implications will be more explicit on completion of The Plan.

7. Climate Change, Sustainability and Environmental Implications

- 7.1. There are no implications for climate change, sustainability and environmental implications in terms of the information contained in this report.

8. Other Implications

- 8.1. There are no risk implications associated with this report.
- 8.2. There are no sustainable development issues associated with this report.
- 8.3. There are no other issues associated with this report.

9. Equality Impact Assessment and Consultation Arrangements

- 9.1. This report does not introduce a new policy function or strategy, nor does it recommend a change to existing policy, function or strategy, therefore, no impact assessment is required

Val de Souza
Director, Health and Social Care

13 November 2020

Link(s) to Council Values/Ambitions/Objectives

- ◆ Get it right for children and young people
- ◆ Deliver better health social care outcomes for all
- ◆ Focused on people and their needs

Previous References

- ◆ none

List of Background Papers

- ◆ none

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

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Report

11

Report to:	Social Work Resources Committee
Date of Meeting:	20 January 2021
Report by:	Director, Health and Social Care

Subject:	Lanarkshire Advocacy Plan/Advocacy Services Tender
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ present the Lanarkshire Advocacy Plan drafted by both North and South Health and Social Care Partnerships as part of the requirements set out in “Independent Advocacy – Guide for Commissioners” (2013)
- ◆ provide an update on current advocacy contractual arrangements and proposed next steps to develop an advocacy tender specification

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

- (1) that the content of the report, and the Pan-Lanarkshire Advocacy Plan be noted; and
- (2) it is noted that existing contracts will be rolled on for a further year whilst an advocacy tender specification is developed.

3. Background

- 3.1. Independent Advocacy Support people to have their voices heard and their rights and interests protected. It is a positive force in influencing social change, with a person centred focus and human rights framework. The importance and benefits of independent advocacy are now widely recognised and woven into the fabric of Health and Social Care provision in Scotland.
- 3.2. The legal and strategic context in which Advocacy operates can be rooted in the following legislation and policy guidelines:
 - ◆ Mental Health (Care and Treatment) (Scotland) Act 2003
 - ◆ The Patients’ Rights (Scotland) Act 2011
 - ◆ Independent Advocacy – Guide for Commissioners 2013
 - ◆ The Right to Advocacy – Mental Welfare Report 2018
- 3.3. Independent Advocacy – A Guide for Commissioners was first published by the Scottish Executive in 2001, it defined advocacy as:
“Advocacy is about standing up for and sticking with a person or a group, taking their side, helping them to get their point across. Advocacy adds weight to people’s views, concerns, rights and aspirations.”

- 3.4. The above guide was refreshed in 2013, the subsequent revision and publication by the Scottish Independent Advocacy Alliance (SIAA). The guidance sought to clarify commissioners' statutory responsibilities under the Mental Health (Care and Treatment (Scotland) Act. The Scottish Government's expectation set out in the guide was that local strategic plans should be developed.
- 3.5. The Lanarkshire Advocacy Plan has been evolving since 2004, when initial plans just followed the funding resources, but now in a more inclusive plan, setting out what is happening in each Health and Social Care Partnership (HSCP), and the future plans for Advocacy Services.
- 3.6. Advocacy services fall under the delegated functions outlined in the South Lanarkshire Integration Scheme. Consequently, a similar report to this will be presented to the next Integration Joint Board meeting to sign off the strategy and propose a direction with regards to the future strategic direction of advocacy services.

4. Current Position

- 4.1. The current Plan has been developed in partnership with North Lanarkshire Health and Social Care Partnership (NLHSCP), South Lanarkshire Health and Social Care Partnership (SLHSCP), Lanarkshire Advocacy Planning Group, Lanarkshire Advocacy Network, and the service users and carers who have engaged with Advocacy Services.
- 4.2. The current Plan is structured as follows: Forward, Introduction, What is Independent Advocacy and Why do we Need it?, Different Types of Advocacy, Voice of Service Users/Carers, Advocacy Planning, Achievements from Last Advocacy Plan 2016-20, Objectives of the Advocacy Plan 2020-2025, Conclusion, Appendices: Financial Framework, Action Plan, Relevant Resources, Advocacy Providers, Agencies Involved and Consultation. (Appendix 1)
- 4.3. Within SLHSCP, we have the following Advocacy Providers funded as outlined in the table below:

The Advocacy Breakdown for South Lanarkshire is as follows:

Project	Service	SLC	NHSL	Alcohol and Drugs Partnership	Total to Provider
		£	£	£	
Who Cares Scotland	C&F	117,600.			117,600.
TAP	OP	48,620.	19,000.		67,620.
TAP	MH	91,830.	23,000.	25,000.	139,830.
Speak Out	LD	112,600.	25,000.		137,600.
People First	LD	62,912.			62,912.
Totals		433,562.	67,000.	25,000.	525,562.

- 4.4. There are existing contracts in place with The Advocacy Project (TAP) and Speak Out, both of which are due to expire in March 2021. The intention would be to roll these forward for a further year, whilst developing an advocacy framework and have new services in place by April 2022. No formal contract is in place with People First Scotland, and there is potential to review this arrangement, and include peer advocacy as part of a new commissioned advocacy service.

- 4.5. There are further potential efficiencies in looking to have one provider for children's advocacy and one provider for adult advocacy. We are also aware that the Children's Hearing System in South Lanarkshire has recently introduced Advocacy for Children, funded by the Scottish Government, the Provider in the South partnership is an organisation called Partners in Advocacy.

5. Employee Implications

- 5.1. Staff from both HSCPs have been working together to develop this Advocacy Plan.
- 5.2. Dedicated staff time will be required to progress a future tender for Advocacy Services. A small steering group has been established and meeting schedule in place.

6. Financial Implications

- 6.1. The current financial resource linked to Advocacy are outlined at 4.3. above. Some of these funding elements are renewed annually, such as Patients' Rights and Alcohol and Drugs Partnership funding and there is no guarantee these elements will be included in a future tender.
- 6.2. Every two years The European Commission reviews and updates the Official Journal of The European Union (OJEU) procurement thresholds, based upon currency fluctuations. As the UK currently remains within the EU, until a Brexit deal is completed, all UK public sector procurement will be carried out in-line with the new OJEU procurement threshold.
- 6.3. The new OJEU procurement thresholds were applied from 1 January 2020. The current threshold for Social and other special services is £663,540. The estimated annual value of any Advocacy Tender will be in excess of £500.00 and, therefore, a tendering exercise will require to be undertaken.

7. Climate Change, Sustainability and Environmental Implications

- 7.1. There are no implications for Climate Change, sustainability and the natural environment in terms of the content of this report

8. Other Implications

- 8.1. The pan-Lanarkshire Advocacy Plan reduces any risks to individuals requiring advocacy support and contributes to our legislative responsibility.
- 8.2. Extending current contractual arrangements will enable us to sustain services whilst planning to commission new Advocacy provision for 2022.
- 8.3. Other issues associated with this report are linked to the funding of services from a range of partners, and the transitional arrangements between advocacy for children and advocacy for adults and older people. These issues will be addressed as part of commissioning new Advocacy Services.
- 8.4. Clear pathways are also required to be developed to firmly link Advocacy to both our Adult and Child Protection Committees and ASP and CP activity to ensure advocacy is offered and accepted.

9. Equality Impact Assessment and Consultation Arrangements

- 9.1. This report does not introduce a new policy, function or strategy or recommend a change to existing policy, function or strategy and, therefore, no impact assessment is required.
- 9.2. A consultation exercise was undertaken as part of the development of the Advocacy Plan, across both North and South HSCPs, with staff, advocacy partners, and advocacy service users. Across both Partnerships there were 60 responses to the staff survey, 40 responses to the Partner (service users) survey, and 19 responses from advocacy workers.

Val de Souza
Director, Health and Social Care

11 December 2020

Link(s) to Council Values/Ambitions/Objectives

- ◆ Improve health, care and wellbeing

Previous References

- ◆ none

List of Background Papers

- ◆ Lanarkshire Advocacy Plan 2020/2025

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

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Lanarkshire Advocacy Plan 2020-2025

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Appendices:

- A. Financial Framework
- B. Action Plan
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- E. Agencies involved and Consultation

1. Foreword

Welcome to our third Independent Advocacy Plan, a partnership plan between North and South Lanarkshire Councils, North and South Health and Social Care Partnerships, NHS Lanarkshire and our Advocacy Providers.

This plan sets the context in which Independent Advocacy operates and maintains links to the legislative backdrop. At the time of drafting this plan the **Mental Health Act in Scotland** was under review, and the Commission has just published its response to the Independent Review of Scottish Mental Health Law consultation. The Commission has a statutory duty to monitor the use of the Act, and a duty to provide advice on the use of the Act. We will welcome the findings of the Review and ensure they are reflected in our independent advocacy action plan.

The plan has also taken cognisance of the work undertaken by the Mental Welfare Commission (A Right to Advocacy 2018) and ensures that the recommendations from the MWC report have been addressed.

The respective Health and Social Care Partnerships recognises the important role advocacy plays in helping to safeguard people who may be at risk of being treated unfairly as a result of individual, social, and environmental circumstances that make them vulnerable, and sees this evident within the plan.

We know Advocacy helps ensure people's rights are not infringed and makes it easier for them to exercise those rights. Of course, we all have the right to be involved in decisions about our care and treatment and for most of us this will not be an issue as we know we can effectively convey our views. However, even the most confident among us may find ourselves in a situation at some point in our lives where we need support to ensure our voice is heard and our views are taken into account in decisions or actions that affect our lives.

Advocacy should therefore be available to anyone who needs it. Advocacy should provide an environment in which people can confidently raise issues knowing that it is as free from conflicts of interest as it can be.

The plan reflects on our achievements since the last plan 2016-20 and seeks to set objectives for the 2020-25 plan.

This plan has also been developed at a time when the challenge of financial constraints, has been significantly dominated by the challenges of delivery of services during the COVID-19 pandemic, we commend our Independent Advocacy Providers for stepping up and continuing to support the most vulnerable, at a time they most need support. The pandemic has challenged us all in the way we work and will continue to evolve how we work and interact going forward.

There are useful resources for commissioners of Advocacy Services to reflect on, and potential opportunity to look at the delivery of Advocacy across Lanarkshire, some sharing of experiences is already well underway through the Lanarkshire Advocacy Network, with local independent Advocacy Providers supporting each other.

We hope you find the Lanarkshire Independent Advocacy Plan of interest and ensure we all maintain people's human rights.

Ross McGuffie – Director of Health and Social Care North Lanarkshire

Val de Souza – Director of Health and Social Care South Lanarkshire

2. Introduction

Independent advocacy supports people to have their voices heard and their rights and interests protected. Independent advocacy is a positive force in influencing social change, with the work and ethos of advocacy underpinned by a person-focused and human rights framework. The importance and benefits of independent advocacy are now widely recognised and woven into the fabric of health and social care provision in Scotland.

The Legal and Strategic context in which Advocacy operates can be rooted in the list of legislation and policy guidance outlined below.

The Mental Health (Care and Treatment) (Scotland) Act 2003 imposed a duty on local authorities and health boards to collaborate to ensure the availability of independent advocacy services in their area. The Act gave everyone with mental illness, learning disability, dementia and related conditions the right to access independent advocacy support.

The Mental Health (Scotland) Act 2015 builds on the rights in the 2003 Act to independent advocacy support, by requiring health boards and local authorities to tell the Mental Welfare Commission how they have ensured access to services up to now and how they plan to do so in the future.

The Patient Rights (Scotland) Act 2011 provides that it is the right of every patient that the health care received is patient-focused, which means that the provision of health care takes into account the patient's needs. The Act also provides that the health care received has regard to the importance of providing the optimum benefit to the patient's health and wellbeing, allows for patient participation in decisions about their healthcare and provides appropriate information and support to allow them to do so. The Act allows for the provision of a Patient Advice and Support Service, which includes directing people to representation and advocacy services.

NHS Scotland transfer of **responsibility for prisoner's health care** to local NHS Boards November 2011.

Independent Advocacy – A Guide for Commissioners (2013) revised Guidance aims to capture the many developments since the publication of the original Guide to Commissioners in 2001 by the then Scottish Executive Health Department and the subsequent revision and publication by the Scottish Independent Advocacy Alliance (SIAA) in 2010. Importantly, it seeks to clarify Commissioners statutory responsibilities under the Mental Health (Care & Treatment) (Scotland) Act 2003. The Scottish Government's expectation set out in Independent Advocacy: Guide for Commissioners, published in December 2013, is that local strategic advocacy plans should be developed.

The Mental Welfare Commission undertook a detailed national survey, and published a report (2018) on their findings: **"The Right to Advocacy"** A review of how local authorities and NHS Boards are discharging their responsibilities under the Mental Health (Care and Treatment) Act 2003". The Right to Advocacy report made a number of recommendations which the Lanarkshire Advocacy Planning Group have incorporated into their local planning arrangements.

Scottish Independent Advocacy Alliance – Independent Advocacy, Principles Standards and Code of Best Practice 2019

At the time of drafting this plan the **Mental Health Act in Scotland was under review**, and the Commission has just published its response to the Independent Review of Scottish Mental Health Law consultation. The Commission has a statutory duty to monitor the use of the Act, and a duty to provide advice on the use of the Act. This response is informed by the Commission's own

experience of meeting those duties and responsibilities. It is also informed by people with mental illness and relatives/carers who have shared their experiences with the Commission.

Key points from the Commission's response to the consultation include:

- Scotland's health and social care systems are substantially different from those that were in place in 2003 when the current Mental Health Act was passed by parliament. The new Act needs to take account of these changes.
- People are more likely to be treated in the community, rather than in hospital, and the resources, support and care available in the community, should be reviewed. We raise specific points in our response for those who are detained under the Act and also for those who are not detained but may need specific care such as children and young people, people with a diagnosis of personality disorder and perinatal mental health services.
- The number of people being detained under the current Act rises every year. In order to make the right decisions for the future the review needs to analyse at an early stage, why this is happening.
- The lengths of time people are detained and the safeguards in place when they are detained, should be examined. We find that many detentions run for the maximum length of time allowed by the law and those lengths of time have not changed for decades. We believe they could be shortened.
- The review should take account of developments in international law to ensure we can learn from other nations and should incorporate the UN Convention on the Rights of People with Disabilities.

While reviewing the Act is vital, it will only be effective if mental health services are adequately resourced. We ask that resources are considered at all key stages of the review.

From a lived experience and relative/carer's perspective, issues include:

- The current Act is clear about professionals' roles, and detained patients' rights; it provides safeguards and guidelines. However, it does not work for everyone who has mental health issues but who is not subject to the law; those people do not have the protections the Act offers.
- Resources are scarce. The lack of community support often leaves families trying to support the individual with limited knowledge and resources of their own.
- Children and Adolescent Mental Health Services (CAMHS) are stretched to the limit. While much work is being done in education services related to mental health and wellbeing, the systems for supporting a young person with a serious mental illness are unwieldy and inefficient, if present at all.
- GPs sometimes struggle to get help for individuals with mental health issues often because of the lack of resources available to community mental health teams. Better communication between primary and secondary care and more seamless access to assessment would greatly improve the management of these individuals in the community.
- This legislation is complex.

The Lanarkshire Advocacy Planning Group, made up of representative from NHS Lanarkshire, North and South Lanarkshire Councils, North and South Health and Social Care Partnerships are committed to advocacy as we believe that it:

- Provides a safeguard for vulnerable people
- Supports people to have their voice heard
- Helps people to understand and to claim their rights
- Addresses discrimination and unfair treatment

- Helps people to understand and to have a real say in decisions that affect their lives
- Helps people to build capacity and confidence to advocate for themselves.
- Supports people to have a real say in decisions that affect their lives
- Is of benefit to all, including the people who use advocacy services, commissioners, service providers and other professionals.

DRAFT

3. What is independent advocacy and why do we need it?

Independent advocacy is about helping people to have a stronger voice and as much control over their lives as possible. An independent advocate may speak on behalf of people who are unable to do so for themselves. The 'Independent Advocacy - A Guide for Commissioners', Scottish Executive (2001) defines advocacy as follows:

"Advocacy is about standing up for and sticking with a person or a group, taking their side, helping them to get their point across."

Advocacy adds weight to people's views, concerns, rights and aspirations."

Key features of effective advocacy include: independence from services; empowerment; providing people who access support with a voice; supporting people who access support to achieve active citizenship, challenging inequality, promoting social justice, and supporting people who access support to challenge inequity and unfairness. Advocacy is about equity, social inclusion, participation and human rights. All values that resonate for people who lack capacity and who are often more vulnerable than other members of our communities.

It is also important to distinguish that advocacy is not:

- Making decisions for someone
- Mediation
- Counselling
- Befriending
- Care and support work
- Telling or advising someone what they should or should not do
- Solving all of someone's problems for them
- Acting in a way which benefits other people more than the advocacy partner
- Agreeing with everything a person says and doing anything a person asks you to do

We know that health, social care workers and families will often act as advocates for individuals and acknowledge that this support can be very valuable. However, there is potential for conflicts of interest to arise within these relationships and for some it can be difficult to remain objective and independent.

Independent advocacy providers operate independently of other service providers. This independence removes any potential conflict of interest. We believe that this approach has positive outcomes for both for people who use services and for those who provide and commission services:

- For service users - independent advocacy helps them to express their views and wishes, to access information, to make informed choices and to have control over their lives. It can also assist them gain in confidence and self-esteem.
- For those who provide services - independent advocacy can influence service development and improvement; it can also lead to better decisions being made about the services people receive and to the delivery of better outcomes.
- For those who commission services (for example, current members of the Lanarkshire Advocacy Planning Group), independent advocacy can provide valuable information and

help planners to maintain their focus on the most vulnerable and those who are most at risk.

4. Different types of advocacy

There are many forms of advocacy, all of which have benefits to different people at varying stages of their lives. The following are brief descriptions of the most common types of advocacy used across Lanarkshire.

Independent/professional advocacy is the most common form of advocacy in Lanarkshire and is based upon a partnership approach between a paid advocate and a person who needs their support. An advocate provides information, support, and when necessary, representation. The aim of an advocate is to ensure that a person is enabled to express their views and choices and to ensure that those who have the power to influence or to effect change, listen to them. The partnership, dependent upon the presenting issues, can be short or longer term.

Collective (or group) advocacy is where a group of people with similar experiences meet together to put forward shared views. Collective advocacy builds personal skills and confidence and supports individuals to represent issues of common concern.

Citizen advocacy encourages ordinary citizens to become more involved with the welfare of those in their community who are at risk of marginalisation. Citizen advocacy brings an individual together with an advocate on a long-term, personal, one-to-one basis. The advocate stands alongside their partner to defend their rights and to support them to pursue their interests. Citizen advocates are usually partnered with only one person and are unpaid. The partnership is normally supported, but not influenced by an independent advocacy organisation.

Peer advocacy is about individuals who share significant life experiences or a shared experience of service provision. Peer advocates draw upon their own experiences to understand and empathise with their advocacy partner or members of collective advocacy groups.

Non-instructed advocacy happens when an individual lacks the capacity to express their views or instruct an advocate. The non-instructed advocate seeks to uphold the person's rights; ensure fair and equal treatment and access to services; and make certain that decisions are taken with due consideration for all relevant factors which must include the person's unique preferences and perspectives. The Scottish Independent Advocacy Alliance has developed guidance for these situations and which all advocacy providers in Lanarkshire follow.

Self-advocacy is about people speaking out for themselves, thereby gaining confidence and/or regaining control over their lives. It can involve people working in a group and often self-advocates become peer and/or citizen advocates.

5. The Voice of Service Users/Carers, Advocacy Partners:

Listed below are some examples in case studies and quotes from the range of advocacy providers across Lanarkshire, all names have been removed to ensure anonymity.

Advocacy Plan Case Study (COVID-19 related)

An advocacy partner (AP) and recovering alcoholic who we have supported historically got in touch with the service when his AA meetings were cancelled. His interpretation of this was that he would start using alcohol again. This came from a family member telling him that if he ever stopped going to the meetings, he would turn to alcohol again. For a person affected by Learning Disability this was taken literally.

He contacted our worker and told him that this was going to happen, the worker reassured him that there could be other support available. The advocate contacted the local AA group and a mentor system was put in place for someone to call AP daily and offer text communication for him when he felt he needed support and reassurance.

"I need to trust the people. Because you have to believe your advocate is not working with the council who are trying to push things through and doesn't listen to you basically. My advocacy worker isn't frightened to ask awkward questions for me. He's brilliant!"

The introduction of the pilot scheme to deliver Carers Advocacy in South Lanarkshire from summer 2018 has been welcomed by the carer's community. Having that independent support there and having someone there to listen and empathise with their situation has been a huge help, resulting in carer's gaining self-confidence, awareness of how situations work and feeling more informed regarding their options.

Carer's – "Delighted this service was there for me and that I kept my leaflet, thinking I will be alright". "I can relax now knowing that I am not on my own anymore".

"I was crumbling. This woman next to me, this advocate, she didn't come in and take over where I was flagging or say 'Wait a minute, Andrew needs a minute to answer the previous question before you ask another question.', I got none of that and I said 'Can we stop and I come back?' and they said 'If you stop then we have to go through the whole thing again and it will not only affect the mobility component but the care component. She didn't stand up for me"

"Tried to get an advocate – was on a waiting list for 9 months – a waste of time trying"

"Since the introduction of Enquiry Response, we have eradicated a lengthy waiting list. People seeking support are assessed as a priority now get immediate help with their issue. This might be attending a tribunal, meeting with social work, attending a case conference, or avoiding homelessness. Many other people are provided with information packs, signposted to other support services or get one off support. This has led to no service waiting time for the last 2 years as everyone gets help right away".

What difference did having an advocate make to you?

- *“Good to have someone to listen during an extremely stressful time.”*
- *“Nothing”*
- *“It let me tell the people who were looking after me what I needed.”*
- *“The advocacy has helped me with solving my problems and figuring out my plans for the future.”*
- *“No-it was support at a tribunal and there was no change”*
- *“My advocacy worker supported me and gave me confidence to deal with the problems I had.”*
- *“An extra voice at a tribunal.”*
- *“I made the meeting.”*
- *“It was much easier to have meetings with my SW with advocacy support to make sure my views were better represented, and I felt less anxious. I was able to achieve a successful outcome with this support.”*
- *“N/A no help given/received due to powers out of my control but I'm still a vulnerable person. Thank you”*
- *“Was good to have that support and help for advice & guidance.”*

The Clan: Collective Advocacy

Collective advocacy is most often accessed by adults with learning disabilities and is available across Lanarkshire. A recent entrant to the advocacy landscape in Lanarkshire is the Clan, a collective advocacy group based in North Lanarkshire. Already they have made quite an impact; been invited to meet the First Minister in the Scottish parliament; lobbied successfully to have road safety measures put in place at a notorious stretch of road; and met with local MSP's to discuss the lives and life opportunities for people with learning disabilities. For members of the Clan, their involvement has increased their confidence, enhanced their personal and communication skills and importantly, reinforced the substance and value of their lived experiences.

6. Advocacy Planning

In 2010, the Scottish Government imposed a duty that compelled all Health Boards to produce a regular plan to map out the advocacy services currently funded within their area. Responsibility for production lies with the Lanarkshire Advocacy Planning Group which includes representatives from NHS Lanarkshire, and from both North and South Lanarkshire Councils and Health and Social Care Partnerships. Moving into the next phase of the advocacy planning process, the Lanarkshire Advocacy Planning Group will invite representatives from local advocacy organisations to join the group.

Investment in independent advocacy has increased across Lanarkshire since the first Lanarkshire Advocacy Plan in 2004, which was a basic list of Advocacy Provision across Lanarkshire. Plans have been refined over the years.

The introduction of the Mental Health (Care and Treatment) Act (Scotland) in 2003 conferred statutory rights for some people to have advocacy services. Since then, the value and importance of advocacy services is threaded through all social care legislation, including the Adult Support and Protection (Scotland) Act 2007, Social Care (Self-directed Support) (Scotland) Act 2013, Carers (Scotland) Act 2016. From 2020, advocacy will be made available to all children and young people who are subject to the Children's Hearing processes.

This plan should have been influenced by stakeholder events, which were planned to take place in June 2020, but cancelled due to the world-wide outbreak of COVID-19. In order to write this plan and ensuring that we took into consideration the views of other stakeholders, we have relied upon anecdotal information and analysis of monitoring information from advocacy providers, outcome of commissioning activity and a paper consultation with key stakeholders.

We considered feedback from a stakeholder event which was held in February 2020. People who had used advocacy reported that it had a significant impact upon their quality of their life. Some said that it prevented them from having crises or deepening need and were grateful for being able to access advocacy services.

People were also particularly positive about the way that advocates work with them holistically, working alongside them to tackle multiple issues and challenges over time and providing continuity of support within social and benefit systems that are increasingly fragmented and specialised.

We also looked at:

- outcomes achieved by current services
- new legislative priorities
- identified unmet need
- carers advocacy
- prisoner advocacy

Furthermore, when planning for Advocacy we need to ensure that the Principles and Standards adopted nationally are adhered to.

Independent advocacy is loyal to the people it supports and stands by their views and wishes.

Standards:

- ☐ Independent advocacy follows the agenda of the people supported regardless of the views, interests and agendas of others.
- ☐ Independent advocacy must be able to evidence and demonstrate its structural, financial and psychological independence from others.
- ☐ Independent advocacy provides no other services, has no other interests, ties or links other than the delivery, promotion, support and defence of independent advocacy.

Independent advocacy ensures people's voices are listened to and their views are taken into account.

Standards:

- ☐ Independent advocacy recognises and safeguards everyone's right to be heard.
- ☐ Independent advocacy reduces the barriers people face in having their voice heard because of communication, or capacity, or the political, social, economic and personal interests of others.

Independent advocacy stands up to injustice, discrimination and disempowerment.

Standards:

- ☐ Independent advocacy recognises power imbalances or barriers people face and takes steps to address these.
- ☐ Independent advocacy enables people to have more agency, greater control and influence.
- ☐ Independent advocacy challenges discrimination and promotes equality and human rights.

The Lanarkshire Advocacy Planning Group (LAPG) will commit to engaging with and developing outcomes in partnership with service providers and service users. Outcomes and performance indicators will be agreed and measured across Lanarkshire on a consistent basis. We believe that robust monitoring and evaluation will improve the quality of the services provided and drive up standards by promoting greater accountability.

The LAPG will work to address all the current themes identified within its Action Plan and develop the plan for the life span of this current Advocacy Plan.

We will continue to make sure service users, their carers and others are able to contribute to the ongoing development and commissioning of advocacy services. We will work closely with advocacy providers through the Lanarkshire Independent Advocacy Network in order to help us do this.

We will be undertaking a consultation exercise in the form of surveys to gauge views as to how we are providing advocacy and its impact. No face to face engagement with service users and carers,

advocacy partners, advocacy providers and relevant staff can currently be undertaken with COVID-19 restrictions.

The findings of our surveys will be used to inform the LAPG Action Plan.

7. What has been achieved since the publication of the previous plan?

North Lanarkshire

In 2018, North Lanarkshire Council Health and Social Care Partnership, alongside colleagues from NHS Lanarkshire, put out to competitive tender the provision of advocacy services. The age banded, rather than condition specific commissioning model was retained, as it was found that this approach worked well, referral processes were clear, and increasing numbers of people accessed advocacy each year. People who use or have used advocacy services were fully involved within the commissioning process.

The newly tendered services are:

- Equals Advocacy Partnership for adults aged 65 and over
- The North Lanarkshire Advocacy Project for adults aged 18-65
- Who Cares? Scotland for children and young people

The importance of advocacy being available during the transition from child to adult and from adult to older adult services was recognised in the tender process. Advocacy services were commissioned with an expectation that they would be flexible to accommodate those within transitional phases of their lives. This delivery model is expected to promote continuity and to best meet the needs of people using advocacy services.

In addition to the three core services, Shelter (Housing Advocacy Service) is a small but valued service, providing third party advice on complex housing issues to advocacy providers, and when necessary, one-to-one professional advocacy. The local worker also participates on, and provides guidance to, local housing forums.

The partnership introduced a standard monitoring framework which the three providers use to record levels of demand, types of demand and what differences their work is making to the lives of individuals.

A small amount of additional funds, made available by the North Lanarkshire Alcohol and Drug Partnership, have been allocated to Equals Advocacy Partnership and to the North Lanarkshire Advocacy Project to support their work with people affected by substance misuse, a group identified that would benefit from advocacy input in the previous advocacy plan.

Providers have also been encouraged to identify opportunities for funding beyond NHS Lanarkshire and the NLHSCP and all have successfully augmented their core services by attracting additional funds.

Monitoring returns from our providers evidence the hundreds of individuals who have benefited from Advocacy.

South Lanarkshire

South Lanarkshire Council, in partnership with NHS Lanarkshire, reviewed advocacy arrangements in terms of a potential tender of services in 2016-17. This exercise resulted in a negotiated tendering arrangement with two of our then incumbent Independent Advocacy Providers.

From the 1st April 2016, advocacy for older people and people with mental health issues has been provided by The Advocacy Project (TAP). Advocacy for people with learning disabilities is provided by Speak Out Advocacy Services. Both arrangements were for three years with the option for a further year's extension.

Those extensions will expire in 2021 and it is South Lanarkshire Health and Social Care Partnership's intention to commission a new independent Advocacy service for adults in 2020/21.

Collective Advocacy has been provided in the South Health and Social Care Partnership by People First Scotland, collective advocacy was not considered as part of the 2016 negotiated arrangement however, will be in our planning for Advocacy in 2020.

Advocacy for Adults with physical disabilities/communication difficulties was also added to the Service with Speak Out Advocacy. This arrangement has been on a year to year basis benefiting from funding sources from Patients' Rights and has filled a previously identified gap in service. This will also be brought into our Advocacy Planning in 2020.

With the introduction of the Carers Act on 1 April 2018, pilot funding was provided to both adult incumbent providers to explore the benefits for carers advocacy. Since then the Health and Social Care Partnership has tendered our carers services and will now have one provider supporting all our Carers for Adult Carers and one for Young Carers activity. Good relationships have been established with our Advocacy and Carer organisations.

A small amount of additional funds, made available by the South Lanarkshire Alcohol and Drug Partnership, have been allocated to The Advocacy Project (TAP), to support their work with people affected by substance misuse, a group identified that would benefit from advocacy input in the previous advocacy plan. This funding is aligned to the 2020 financial year and further consideration will be required for its inclusion in future tendering arrangements.

Who Cares? Scotland are the current incumbent of our Children and Young Peoples Services. We have focussed their advocacy support on children and young people who we accommodate in our in-house services or in other residential placements. Combining our children and young people's advocacy with our adults advocacy in one tender in potentially two lots will form part of our planning going forward.

An advocacy pathway for staff has also been developed and will be refreshed as our service delivery model is refreshed.

Advocacy continues to be instrumental in assisting service users understand the complex principles and arrangements associated with the introduction and implementation of Self-directed Support. An SDS snakes and ladders game has been replicated into a portable board game version and is used in our Lifestyle Centres with a range of service users.

During the lifespan of this 2020-2025 year plan, South Lanarkshire Health and Social Care Partnership will develop a Sourcing Strategy for the future of Independent Advocacy Services for Adults and Children and Young People with the intention of having refreshed services in place in 2021-22.

Monitoring returns from our providers evidence the hundreds of individuals who have benefited from Advocacy.

Across Lanarkshire

The Lanarkshire Independent Advocacy Network is supported by all of the advocacy providers across Lanarkshire. Representatives from both councils fully support activity and are non-voting members of the group. Advocacy services are well respected across Lanarkshire, are viewed as key partners and are active participants within a range of key council and NHS forums.

Both local authorities advocacy representatives continue to communicate in their efforts to drive forward Independent Advocacy and ensuring the voice of service users is reflected across all our service areas.

8. What are the objectives of the Lanarkshire Advocacy Plan 2020 - 2025?

The principal objective of this plan is to ensure that advocacy continues to be sustained and where possible developed across Lanarkshire in a strategic, collaborative and co-ordinated manner. It is impossible to accurately predict who may require advocacy services in the future as it is possible that many people would benefit from input in certain situations and circumstances. What we do know through analysis of current provision is that the demand for services has risen each year since the publication of the first Lanarkshire Advocacy Plan in 2010. There is no evidence to suggest that this trend will differ or the curve flatten over the duration of the 2020-25 Plan.

In view of these difficulties, a limitation of this Plan is that there may be an unmet need for advocacy that is not identified and perhaps an epidemiological approach to mapping potential future demand will be necessary.

As such, local advocacy provision supports statutory requirements as well as providing support to meet the needs of people requiring advocacy within particular identified communities, such as older people. It is acknowledged that advocacy often presents in a cross-cutting manner across communities and needs, for example older people with mental health problems, who may also require support for their physical health, and may also be a carer.

Anyone who has a mental disorder as defined by the Mental Health (Care and Treatment) (Scotland) Act 2003 or who is covered under the Adult Support and Protection (Scotland) Act 2007 already has a right of access to independent advocacy.

Our priority groups for provision are:

- People affected by learning disability
- Personality disorder
- People affected by mental ill health
- Children and Young People who are subject to legislative procedures including Child Protection
- People affected by brain injury/physical disability and have a communication support need

North Lanarkshire Council recently commissioned a scoping exercise and consultation event to ascertain the demand for a carers advocacy service. Not surprisingly, this confirmed the importance of, and the need for advocacy for all carers.

South Lanarkshire Health and Social Care Partnership had allocated some Carers Act funding to our incumbent advocacy providers to pilot carers advocacy. This had a positive impact on carers however also highlighted the role of our existing Carers Supports Services, all of which have been recommissioned. Carers Advocacy will be kept under review by the Health and Social Care Partnership, as our new Carers Services bed in.

Through analysis of statistical information and discussion with advocacy providers about unmet need, we acknowledge that there are a number of other groups of people that would benefit from the provision of independent advocacy. Amongst whom are:

- Black and ethnic minority communities
- People with sensory impairments (we will link this with the national See Hear Strategy, and our local responses)
- Hospital-based advocacy services

NHS Lanarkshire, North Lanarkshire Council and South Lanarkshire Council and our respective Health and Social Care Partnerships are committed to considering provision of services which are culturally sensitive and accessible to everyone in Lanarkshire who needs them.

We are aware that further work is required to ensure that appropriate support is available to all and to ensure equity of provision.

We acknowledged the benefit that hospital-based advocacy services would provide. To help support access for people in hospital, we will ensure that closer collaboration between community-based advocacy services and the Patients Advice and Support Services [PASS] are strengthened.

This plan should also dovetail with the respective Health and Social Care Commissioning Plans for both the North Health and Social Care Partnership and South Health and Social Care Partnership, and also the Lanarkshire wide Mental Health Strategy.

9. Conclusion

There are strong partnership links between the Lanarkshire Advocacy Planning Group, the Lanarkshire Independent Advocacy Network, Health and Social Care Partnerships, North and South Lanarkshire Council, NHS Lanarkshire and provider staff. These partnerships provide a sound base from which to undertake the work outlined in our Action Plan.

All recognise that we are facing unprecedented financial challenges amidst circumstances never experienced by any. Notwithstanding, all of the key stakeholders are committed to addressing the actions, challenges and sustaining the provision of advocacy services across Lanarkshire.

The Advocacy Breakdown for South Lanarkshire is as follows:

Project	Service	SLC	NHSL	NLC Alcohol and Drug Partnership	Total to Provider
Who Cares? Scotland	C & F	£117,600	£	£	£117,600
TAP	OP	£48,620	£19,000	£	£67,620
TAP	MH	£91,830	£23,000	£25,000	£139,830
Speak Out	LD	£112,600	£25,000	£	£137,600
People First	LD	£62,912	£	£	£62,912
Totals		£433,562	£67,000	£25,000	£525,562

The Advocacy Breakdown for North Lanarkshire is as follows:

Project	Service	SLC	NHSL	NLC Alcohol and Drug Partnership	Total to Provider
Who Cares?Scotland	C & F	£241,000	£	£	£241,000
Equal Say	Adults	£214,189	£55,974	£25,000	£295,163
Equals Advocacy	Older Adults	£86,994	£77,343	£15,000	£179,337
Shelter	Adults	£20,298	£	£	£20,298
Advocacy Network		£1,213	£	£	£1,213
Totals		£563,694	£133,317	£40,000	£737,011

Total Lanarkshire wide investment **£1,262,57**

1. FINANCIAL FRAMEWORK			
No	Action	Responsibility	Timescale
1.1	Financial framework for advocacy services 2020-25 to be reviewed in relation to NHSL historic allocation across Health and Care Partnership, and potential to align Lanarkshire wide.	Commissioning partners Lanarkshire Advocacy Planning Group LAPG)	October 2020
1.2	Maintain oversight of any additional resource that can be targeted directly to advocacy service (e.g. growth in dementia)	Commissioning partners Lanarkshire Advocacy Planning Group LAPG	March 2021
1.3	Explore external sources of advocacy funding	Commissioning partners Advocacy providers	
2. ADVOCACY DEVELOPMENT – COMMISSIONING INTENTIONS			
No	Action	Responsibility	Timescale
2.1	South Lanarkshire Health and Social Care Partnership will develop a Sourcing Strategy for Advocacy Services.	South Lanarkshire Health and Social Care Partnership	1 April 2021
2.2	North Lanarkshire Health and Social Care Partnership to review future commissioning intentions	North Lanarkshire Health and Social Care Partnership	1 April 2021
2.3	All partners consider pan-Lanarkshire Tender for Advocacy Services.	Commissioning partners Lanarkshire Advocacy Planning Group LAPG Health and Care Partnerships	October 2020
3. COMMUNICATION AND ADVOCACY AWARENESS TRAINING			
No	Action	Responsibility	Timescales
3.1	Develop publicly accessible Advocacy Information in a range of formats. (Advocacy Commissioning partners Lanarkshire Advocacy Planning Group LAPG Health and Care Partnerships Advocacy Providers pathway)	Commissioning partners Lanarkshire Advocacy Planning Group LAPG Health and Care Partnerships Advocacy Providers	October 2020
3.2	All partner and provider websites to be reviewed and updated and ensure information on respective Third Sector interface (VanI/VasLan) up to date.	Commissioning partners Lanarkshire Advocacy Planning Group LAPG Health and Care Partnerships Advocacy Providers	October 2020

3.3	Annual Awareness raising event (potential to launch plan??)	Commissioning partners Lanarkshire Advocacy Planning Group LAPG Health and Care Partnerships Advocacy Providers	October 2020
4. ROLE OF LANARKSHIRE ADVOCACY PLANNING GROUP (LAPG)			
No	Action	Responsibility	Timescales
4.1	Develop role of LAPG, explore wider membership and links to Advocacy Providers.	Commissioning partners Lanarkshire Independent Advocacy Network	March 2021
4.2	Maintain links with national developments, and local network Provider organisations.	Commissioning partners Lanarkshire Advocacy Planning Group LAPG Health and Care Partnerships Advocacy Providers	March 2021
4.3	Develop Strategic Needs Assessment for condition specific groups (mental health/learning disability/communication difficulty)	Lanarkshire Advocacy Planning Group LAPG Health and Care Partnerships	March 2022
4.4	Ensure any gaps in Advocacy Service delivery are identified and solutions sought to provide cover.	Lanarkshire Advocacy Planning Group LAPG Health and Care Partnerships	March 2022
5. Recommendations from MWC			
No	Action	Responsibility	Timescales
5.1	Ensure Advocacy Plan reflects findings of Mental Welfare commission Survey.	Lanarkshire Advocacy Planning Group LAPG Health and Care Partnerships	March 2022
6. Collation of Monitoring Activity and Service users voice Lanarkshire wide			
No	Action	Responsibility	Timescales
6.1	Develop and Collate annual statistically return for Lanarkshire wide services	Commissioning partners Lanarkshire Independent Advocacy Network	March 2021
6.2	Undertake bi-annual survey of service users, advocacy providers, staff regarding the impact of advocacy Lanarkshire wide	Commissioning partners Lanarkshire Independent Advocacy Network	September 2020

Appendix C

Relevant Resources

Independent Advocacy – A guide for commissioners

<https://www.gov.scot/publications/independent-advocacy-guide-commissioners/pages/8/>

The Right to Advocacy – Mental Welfare Commission Report

https://www.mwcscot.org.uk/sites/default/files/2019-06/the_right_to_advocacy_march_2018.pdf

SIAA Independent Advocacy – Principles, Standards and Code of Best Practice (2019)

<https://www.siaa.org.uk/publications/principles-standards-code-of-best-practice/>

SIAA independent Advocacy – Toolkit for demonstrating impact of Independent Advocacy (2019)

https://www.siaa.org.uk/wp-content/uploads/2019/12/SIAA_Measuring_Impact_Toolkit.pdf

DRAFT

Appendix D

Independent Advocacy Providers in North Lanarkshire

North Lanarkshire

Adults aged 65 and over
Equals Advocacy Partnership
Tel: 01698 327772
admin@equalsadvocacy.org.uk

Adults aged 18-64:
The North Lanarkshire Advocacy Project
01698 358245
sam@equalsay.org

Children and young people:
Who Cares? Scotland
01698 657 877
Enquiries@whocaresscotland.org

Shelter Housing Advocacy:
0344 515 2363
samuel_thomas@shelter.org.uk

South Lanarkshire

Older People 65+
The Advocacy Project
0141 420 0961
enquiry@theadvocacyproject.org.uk

Adults with mental ill health issues:
The Advocacy Project
0141 420 0961
enquiry@theadvocacyproject.org.uk

Children and young people:
Who Cares? Scotland
0141 226 4441
Enquiries@whocaresscotland.org

Adults with Learning Disability/Communication impairment
Speak Out Advocacy Project
01698 283228
info@speak-out.org.uk

Collective advocacy for adults with learning disabilities
People First Scotland:
jimquigleyp1st@aol.co.uk

Appendix E

Participation and Engagement Agencies and Survey

Equals Advocacy Partnership
NHS Lanarkshire
North Lanarkshire Health and Social Care Partnership
North Lanarkshire Advocacy Project [Equal Say]
North Lanarkshire Carers Together
People First
Lanarkshire Carers Centre
Shelter Scotland
South Lanarkshire Health and Social Care Partnership
Speak Out Advocacy Project
The Advocacy Project
Who Cares? Scotland
Covey Befriending
Take Control
PAMIS

A consultation exercise was undertaken (July – September 2020) as part of the development of the Advocacy Plan, across both North and South HSCPs, with staff, advocacy partners, and advocacy service users. Across both Partnerships there were 60 responses to the staff survey, 40 responses to the Partner (service users) survey, and 19 responses from advocacy workers.

If you need this information in another language or format, please contact us to discuss how we can best meet your needs.

Phone: 0303 123 1015

Email: equalities@southlanarkshire.gov.uk

Report

12

Report to:	Social Work Resources Committee
Date of Meeting:	20 January 2021
Report by:	Director, Health and Social Care

Subject:	Update of the Social Work Risk Register and Risk Control Plan
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ present an update on the Risk Register and Risk Control Actions for Social Work Resources

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

- (1) that the contents of the Resource Risk Register are noted; and
- (2) that it be noted that the outstanding Risk Control Actions will be progressed by relevant officers.

3. Background

- 3.1. The Council's Risk Management Strategy, which was reviewed in April 2020, promotes consideration of risk in service delivery, planning and decision making processes. The strategy requires Resources to record and review risks and control actions regularly. Social Work Resources (SWR) follow the guidance in developing, monitoring and updating the Risk Register on an ongoing basis.
- 3.2. The purpose of the Register is to ensure that the Resource is fully aware of its top risks; that these risks are prioritised; and that controls are in place to eliminate or minimise the impact of the risks.
- 3.3. The Resource scores the risks in accordance with the Council scoring mechanism, based on likelihood and impact. This results in risks being scored between one and twenty five (low – very high).
- 3.4. Risks are scored on their inherent score (risk if we do nothing) and their residual risk (risk after applying controls).
- 3.5. The last update of the SWR Risk Register was reported to the Social Work Resources Committee on 1 December 2019.
- 3.6. The Council's top Risk Register and Risk Control Plan has been reviewed. This work was completed in August 2020.

- 3.7. The Central Risk Management Team annually review Resource compliance with the Risk Management Strategy. The outcome of the 2019/20 review identified that SWR achieved 100% per cent compliance, scoring 42 out of a possible 42.
- 4. Resource Risk Management**
- 4.1. Each Resource has a Resource Risk Management Group which has responsibility for the promotion and management of risk.
- 4.2. The SWR Risk Management Group continues to meet on a quarterly basis.
- 4.3. The work of the group over the last year has focused on the review and update of the Resource Risk Register, and ensuring that the Register reflected the Council Plan and individual Service Plans.
- 5. Risk Register**
- 5.1. Work has been completed by the Resource Risk Group to finalise the review of the Resource Risk Register. The update gave consideration to risks at a Service level, as well as strategic Council risks.
- 5.2. The Resource Risk Register will be monitored on an ongoing basis to allow new risks to be added and for the control measures and scores of the existing risks to be reviewed in light of new information.
- 5.3. Risks can result from internal or external influences, with examples being the impact of projected funding cuts or legislative changes or the impact of internal service changes.
- 5.4. The development process for the Resource Plan requires a risk assessment process to be undertaken, as appropriate, resulting in some actions within the Resource Plan having a corresponding risk identified within the Risk Register.
- 5.5. The main changes to the register are summarised below:
- ◆ Care Inspection grades in our Home Care Services is now a standalone risk and elevated as a Corporate risk
 - ◆ a new risk for the COVID-19 implications has been introduced
 - ◆ some risks have been re-scored as part of COVID-19 implications
 - ◆ Self Directed Support (SDS) is no longer a high risk, but classified as medium
- 5.6. All risks have been rescored in-line with the revised 5x5 risk scoring matrix. The scoring matrix was changed from a 3x3 matrix, following a review of the Council's Risk Management Strategy at the start of the year. The revised 5x5 scoring matrix and definitions for likelihood and impact is shown at Appendix 1.
- 5.7. Risks scored 15 to 25 are considered to be very high risks and risks scored 8 to 12 are considered to be high risks. Very high and high risks are monitored closely. The top risks identified for the Resource, that is those that are residually scored as being very high and high, are attached at Appendix 2.
- 5.8. A clear link has now been made to the Council's top risks. Top risk rankings and Resource specific risk implications are noted within the appendix.
- 5.9. Risks evaluated residually as being medium or low risk will be monitored to ensure that they continue to be adequately managed.

5.10. The Committee is asked to note the contents of the Resource Risk Register.

6. Insurance Hotspots

6.1. As part of the work that is currently being undertaken in connection with the ongoing Insurance Fund Review, the Council's insurers were approached and asked to carry out an analysis of our claims experience for the last five years for Public Liability, Employers' Liability, motor and property claims, with a view to identifying areas where a number of similar types of claim or high value claims were originating, through claims leakage reports.

6.2. The first stage of the analysis has been completed, and insurers have now been asked to provide their opinion on mitigating measures that can be implemented by the Council to prevent future reoccurrence of the identified insurance hotspot areas. The outcome of this hotspots review will be reported as part of the Insurance Fund Review recommendations.

7. Scope and Appetite for Risk

7.1. South Lanarkshire Council (SLC) aims to be risk embracing, that is it will accept a tolerable level of risk in seeking service efficiencies and in agreeing control measures.

7.2. The level of risk facing the Council is measured both before (inherent risk) and after (residual risk) consideration of controls. The Council should never carry a high residual risk exposure as this would indicate instability but a low residual risk exposure should also be avoided as this indicates lack of innovation.

7.3. SLC's ideal risk exposure should be consistent with an acceptable tolerance of:

- ◆ no more than 10% of residual risks at a very high level
- ◆ no more than 15% of residual risks at a high level
- ◆ around 50% to 60% of residual risks at a medium level
- ◆ no more than 30% of residual risks at a low level

7.4. Table One below shows the top risks heat map, that is, it details the total number of risks for each individual risk score. Table Two below notes the overall risk profile for the top risks.

Table One – Top Risks Heat Map

Likelihood	5 Almost Certain					
	4 Likely				2	2
	3 Possible			6	5	1
	2 Unlikely				1	
	1 Rare					
		1 Negligible	2 Minor	3 Moderate	4 Major	5 Catastrophic
Impact						

Table Two –Top Risks Risk Profile

Risk Category	Risk Rating	Number of risks	Percentage of risks
1	Very high	5	24
2	High	12	57
3	Medium	4	19
4	Low	0	0

- 7.5. Despite the fact that the profile noted in Table Two is out with the ideal universal risk exposure defined by the Risk Management Strategy, this risk exposure is reasonable as these are the highest level risks currently being faced by the Council, a number of the top risks scores have increased significantly this year as a result of the effects of COVID-19.
- 7.6. SWR control measures are in place. Where further control measures are required, these are included within the Resource Risk Control Plan.
- 7.7. A direct comparison of risk scores for this year compared to last year is not possible, given the change in the scoring matrix, along with the addition of a new very high risk rating.

8. Control Actions

- 8.1. One hundred per cent (2/2) of Risk Control actions due to be completed during 2019/2020 were completed on time against an overall Resource target of 90%.
- 8.2. Details of the completion of Risk Control actions during 2019/20 are contained in Table Three below.

Table Three

	2019/2020
Total number of actions due	2
Completed on time	2
Completed late	0
Due to be completed at a later date	0

- 8.3. Progress with completion of Resource Risk Control Actions is monitored on a monthly basis by the Central Risk Management Team. This is also reviewed by the Resource Risk Group.
 - 8.4. A further eight Risk Control actions have been identified for completion during 2020/2021. The Senior Management Team (SMT) is asked to note that these actions to mitigate risks will be progressed by the relevant officers. Details of the actions are noted within the Risk Control Plan at Appendix 2.
- ## **9. Major projects, partnerships or change**
- 9.1. Within SWR, 12 partnerships have been identified. Two of these is considered to be high risk, Health and Social Care Integration, and MAPPA Public Protection. Of the remaining partnerships, six have been assessed as being medium risk and four low risk.
 - 9.2. Appropriate risk management arrangements are in place for the high level partnerships.

10. Next Steps

- 10.1. The Resource Risk Management Group will continue to meet on a quarterly basis. The Risk Register will be reviewed on an ongoing basis by the group to ensure that risks remain valid for the appropriate service areas and to identify new areas of risk that affect the Resource. An update report will be provided to Committee on an annual basis.

11. Employee Implications

- 11.1. Time will be required by the Resource Risk Management Group in the management of the Resource Risk Register and Risk Control Plan.

12. Financial Implications

- 12.1. During the year, if any new initiatives are identified which would help mitigate any particular risk faced by the Resource, some financial assistance may be available from the Risk Management Fund. This is managed through a bid being submitted and assessed against set criteria.
- 12.2. During the current financial year, the Resource made successful risk management bids for the following initiatives:
- ♦ Autism Resources Co-ordination Hub (ARCH) – Reid Street Hamilton (Bin Security)

13. Climate Change, Sustainability and Environmental Implications

- 13.1. There are no Climate Change implications associated with this report.
- 13.2. There are no sustainability implications associated with this report.
- 13.3. There are no environmental implications associated with this report.

14. Other Implications

- 14.1. Failure to demonstrate that risk is actively considered and managed cannot only lead to avoidable financial loss but could also affect delivery of services and could affect the Resources' reputation.
- 14.2. There are no implications for sustainability in terms of the information contained in this report.

15. Equality Impact Assessment and Consultation Arrangements

- 15.1. This report does not introduce a new policy, function or strategy or recommend a change to existing policy, function or strategy and therefore, no impact assessment is required.

Val de Souza

Director, Health and Social Care

11 December 2020

Link(s) to Council Values/Ambitions/Objectives

- ♦ Accountable, effective, efficient and transparent

Previous References

- ◆ Social Work Resources Committee of 11 December 2019

List of Background Papers

- ◆ none

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

Bernie Perrie, Planning and Performance Manager
Ext: 3749 (Phone: 01698 453749)
Email: bernie.perrie@southlanarkshire.gov.uk

2020 Risk Scoring Matrix and Likelihood and Impact Definitions

Likelihood

Score	1	2	3	4	5
Description	Rare	Unlikely	Possible	Likely	Almost certain
Likelihood of occurrence	1 in 10 years	1 in 3 years	1 in 2 years	Annually	Monthly
Probability of occurrence	The event may occur in certain circumstances	The event could occur	The event may occur	The event will probably occur	The event is expected to occur or occurs regularly

Impact

	Reputation	Financial	Service delivery/ Time to recover	Compliance	Safety
1 Negligible	Public concern restricted to local complaints	<£50,000 per annum	No impact to service quality; limited disruption to operations.	No external interest	Minor injury – no lost time
2 Minor	Minor adverse local/public/media attention and complaints	£50,000-£250,000 per annum	Minor impact to service quality; minor service standards are not met; short term	Very minor attention from legislative/regulatory body	Minor injury – resulting in lost time
3 Moderate	Adverse national media Public attention	£250,000 to £500,000 per annum	Significant fall in service quality; major partnership relationships strained; serious disruption in service standards	Short-term attention from legislative/regulatory body	Major injury or ill health resulting in lost time
4 Major	Serious negative national or regional	£500,000 to £1million per annum	Major impact to service delivery; multiple	Medium-term attention from legislative/regulatory body	Fatality; Or injuries to several people

	Reputation	Financial	Service delivery/ Time to recover	Compliance	Safety
	criticism		service standards are not met; long term disruption to operations; multiple partnerships affected		
5 Catastrophic	Prolonged international, regional and national condemnation	>£1million per annum	Catastrophic fail in service quality and key service standards are not met; long term catastrophic interruption to operations; several major partnerships are affected	National impact with rapid intervention of legislative/ regulatory body	Multiple fatalities; Or injuries to large number of people

The assessments for impact and likelihood combine to provide an overall inherent risk score on the scale of between 1 and 25, using the Council's recognised risk matrix.

Risk matrix

Likelihood	5 Almost Certain	5	10	15	20	25
	4 Likely	4	8	12	16	20
	3 Possible	3	6	9	12	15
	2 Unlikely	2	4	6	8	10
	1 Rare	1	2	3	4	5
		1 Negligible	2 Minor	3 Moderate	4 Major	5 Catastrophic
		Impact				

The risk score is calculated as follows:

Likelihood score x Impact score = Risk Score

Social Work Resources Risk Register (as at 25 November 2020)
Extract of risks with residual score category of Very High and High

Risk Category	Risk	Inherent score	Sample of Controls	Residual score
1 Very High (15-25)	<p>1. The Council does not provide an adequate response to the pandemic; maintaining critical services; delivering emergency response commitments as a Category One Responder; and protecting wellbeing of employees and service users as far as reasonably practicable. Responding to the pandemic will impact on everything else the Council does</p> <ul style="list-style-type: none"> ♦ Lack of PPE ♦ Clarity/timing of Government guidance ♦ Workforce absences/shortage (particularly for critical and support services) ♦ Ineffective Communications to employee and service users ♦ Lack of mobile IT devices <p>Top Council Risk</p>	25	<ul style="list-style-type: none"> ♦ Roll out of MS Teams throughout the Council ♦ IT – Increased numbers of agile workers, increased number of laptops/tablets ♦ Priority 1 Services identified and maintained ♦ Specific H&SCP Covid-19 Risk Register in place ♦ PPE - Newberry Rooney Centre established as centralised hub. Orders of masks etc. being received. Security measures in place. ♦ Arrangements in place to distribute PPE to all agencies (public and private care) ♦ Arrangements in place to distribute PPE to all agencies (public and private care) ♦ Benefits advice issued via internet ♦ Reopening of 2 care homes to assist in intermediate needs – faster hospital discharges ♦ Recovery Plans in place ♦ Continued working from home arrangements ♦ Safe systems of working adopted ♦ All Council offices regular cleaning regime ♦ All workplace appropriate social distance signage in place ♦ Partnership risk registers in place ♦ All Core service continued to operate ♦ All core staff remained in work ♦ Remote working arrangements in place 	16

Risk Category	Risk	Inherent score	Sample of Controls	Residual score
1 Very High (15-25)	<p>2. Failure to evidence sufficient progress against Care Inspectorate requirements (Care at Home Service)</p> <ul style="list-style-type: none"> ♦ Lack of evidence to show improvement and not meeting requirements specified in last inspection report <p>Top Council Risk</p>	25	<p>To address this risk and to respond to the Care Inspectorate Improvement Notice, a transformation and improvement programme is underway to address in the short term the specific requirements and also take forward medium and longer term actions to remodel the entire service and improve governance arrangements, with actions being progressed in respect of training, recruitment, employee support, service delivery and communications.</p> <ul style="list-style-type: none"> ♦ Head of Health and Social Care and Nurse Director co chair a group tasked with remodelling service to achieve a positive outcome. Group meets fortnightly. ♦ Transfer Blantyre and Larkhall service users to East Kilbride And Clydesdale localities respectively ♦ Ongoing regular meetings with Care Inspectorate ♦ Multi layered approach to providing evidence involving staff from a number of disciplines ♦ Elected Members briefed on issues and consequences ♦ External "Critical Friend" identified to review service and provide a report with recommendations ♦ Additional funding to support capacity in service ♦ Project Governance Co-ordinator recruitment underway ♦ Voluntary moratorium (VM) lifted in Rutherglen area 31/8/2020 ♦ Voluntary moratorium (VM) lifted in the Hamilton area 16/11/2020 ♦ Care at Home transformation board established ♦ Workplan in place ♦ Workstream groups established (10 groups) ♦ Care Inspectorate to revisit/reinspect ♦ Continued dialogue with Care Inspectorate 	16

Risk Category	Risk	Inherent score	Sample of Controls	Residual score
1 Very High (15-25)	3. Failure to prepare for the analogue to digital switchover <ul style="list-style-type: none"> There are currently approximately 9,000 community alarm users in South Lanarkshire The Council's Alarms Receiving Centre (ARC) is based at Pollock Avenue, Hamilton and is not digitally equipped 	25	<ul style="list-style-type: none"> Senior management team representation on ICT programme Board Workstream dedicated to digital switchover Capital programme funding agreed to support test of change South Lanarkshire Health and Social Care Partnership agreed to part fund a post within IT to map out the issues and way forward Ofcom have been predicting that telecommunications providers will stop supporting the public switched telephone network (PSTN) and Integrated Services Digital Network by 2025 Linked to the Care at Home Improvement Board workstream activity Dedicated officer supporting this agenda 	15
1 Very High (15-25)	4. Reduction in Council funding resulting in difficulties in achieving savings and maintaining frontline services. <ul style="list-style-type: none"> Money Matters mitigating implications of the welfare reform agenda. Failure to achieve Resource savings targets Failure to collect care and grant income Service demand arising from Covid Delivery of statutory services Top Council Risk	25	<ul style="list-style-type: none"> Money Matters service continues to income maximise Active participation in the Efficiency agenda Annual budget meetings Service reviews and redesign Assessment and care arrangements and income maximisation opportunities Review grants to voluntary organisations Review service user and carer prioritisation in terms of accessing service and support Support carers in their caring role Target resources on those with critical/substantial needs Work in partnership with voluntary organisations to provide early intervention and preventative supports. Service Reviews including IT solutions to deliver service models Reassess 'waiving of charges' SDS in relation to carers Adults Carer Support Plans 	20

Risk Category	Risk	Inherent score	Sample of Controls	Residual score
			<ul style="list-style-type: none"> ◆ Procurement of Carers Services, Care at Home and Support Services to those with Learning disabilities ◆ Introduction of Eligibility Criteria ◆ Front line service delivery – Staff working beyond 48 hour week WTD ◆ Consideration of Peripatetic team to reduce overtime costs ◆ The European Working Time Directive (WTD) will cease to apply to the United Kingdom at the end of the current transition period (31 December 2020). However, the UK's Working Time Regulations which implement the EU Working Time Directive will continue to apply unless and until they changed by UK law. 	
1 Very High (15-25)	5. The Council is significantly affected by the impact of the UK leaving the European Union <ul style="list-style-type: none"> ◆ There will be a shortage of highly skilled workers in certain professions which currently rely on migrant workers – for example education and healthcare ◆ There will be a shortage of entry level workers, including those with lower skills, those who gain their qualifications largely through work based training, and those in less highly-paid sectors 	25	<ul style="list-style-type: none"> ◆ The Council's Economic Development Service provides support to businesses within the South Lanarkshire area ◆ Advice published by the Government and other economic development agencies shared via partners and business networks ◆ Financial Strategy addresses potential changes in funding ◆ There is potentially new EU funding that the Council could apply for in the period 2019-2023 totalling £6.5m (ESF Employability Phase 2 bid). This is currently on hold with the SG. ◆ The HM Treasury has provided assurances around the current EU funded programme for all projects with a signed agreement in place prior to the UK leaving the EU ◆ Various reports to Executive Committee highlights implications for Council Services ◆ Report presented to the CMT on "Brexit and the Implications for the Council's European Funded Projects" 	20

Risk Category	Risk	Inherent score	Sample of Controls	Residual score
	Top Council Risk		<ul style="list-style-type: none"> ◆ UK and Scottish Government Reasonable Worst Case Scenario Planning Assessments in planning updates to CMT ◆ Brief guide for businesses which signposts the support and guidance that is available and to consider the six areas under which Brexit may affect their business has been published ◆ Risk workshop held with the Community Planning Partnership (CPP) to examine the potential implications for partners and to identify areas where a joined up approach to Brexit planning can be developed ◆ Officers have attended various seminars ◆ Project management structures in place, with lead officers identified ◆ Resource risk registers reflect Brexit risks ◆ Brexit Statement in the Annual Accounts ◆ Limited impact on Social Work Care Services ◆ Potential impact on sourcing NHS medication/drugs 	

Risk Category	Risk	Inherent score	Sample of Controls	Residual score
	<p>6 Failure to fulfil emergency response commitments befitting Council's status as Category One (emergency) responder</p> <ul style="list-style-type: none"> ♦ Business continuity arrangements are not complete or robust ♦ Social Work responsible for a number of building based services from care homes for the older people, care homes for children and young people, day care services for adults and older people ♦ The resource employs over a thousand homecare staff to support very vulnerable people in various urban and rural settings ♦ The resource utilised the SWIS plus client index system which required IT support <p>Top Council Risk</p>	25	<ul style="list-style-type: none"> ♦ Named responsible person identified in each service area ♦ Officers identified for Major Incident Support Team Lanarkshire ♦ Emergency planning arrangements are in place with all social work establishments ♦ Clear processes for Fire Inspection and property maintenance audit are in place in all establishments ♦ Pandemic/health and contingency plans are in place ♦ Emergency Social Work Services out of hours service provided ♦ Client index system regularly backed up ♦ Contract monitoring undertaken with external service providers. ♦ Member of the West of Scotland Resilience partnership – caring for people sub group 	12

Risk Category	Risk	Inherent score	Sample of Controls	Residual score
2 High (8-12)	7. Potential liability arising from claims of historic abuse <ul style="list-style-type: none"> ◆ Perceived failure on the authority and predecessor authority to fulfil its obligations in relation to looked after children ◆ Potential disclosures to the inquiry which result in the Council as the successor authority being liable ◆ Claims for compensation ◆ Damage to the reputation of the Council ◆ Potential periods of the inquiry uninsured ◆ Current Public consultation (November 2019) inviting views on aspect of the design of the redress scheme, and how those responsible could make a financial contribution. Top Council Risk	16	<ul style="list-style-type: none"> ◆ Cross Council Steering Group established ◆ Review of historical records pertaining to current Section 21 notices completed ◆ Timescales met for Section 21 notices received ◆ Level of insurance cover exists in relation to predecessor authorities. ◆ Redress for Survivors (Historical Child Abuse in Care) (Scotland) Bill published, payment levels for survivors who meet the eligibility for the scheme: Level 1, £20,000; Level 2 £40,000; Level 3 £80,000 	12
2 High (8-12)	8. Information Governance not subject to adequate controls <ul style="list-style-type: none"> ◆ Ineffective records management practices could lead to data breaches ◆ Poor information recording within Client index systems ◆ Systems not geared towards 	16	<ul style="list-style-type: none"> ◆ Regular audits of case file activity undertaken ◆ Data sharing protocols are in place with partners to ensure appropriate sharing of information about service users ◆ Electronic Documents Records Management System (EDRMS) is embedded in case file practice in all localities ◆ Resource preparing for Corporate file structure Objective ◆ SWiSplus training team dedicated to training staff in use of client index system 	12

Risk Category	Risk	Inherent score	Sample of Controls	Residual score
	sharing relevant information across partners ♦ Impact of GDPR Top Council Risk		♦ Contract monitoring in place with external providers ensuring their data protection obligation followed ♦ Annual audit checklists ♦ Information Governance Board GDPR action plan ♦ Regular updates on guidance circulated (use of Zoom/MS Meetings)	
2 High (8-12)	9 Fraud, theft, organised crime and cyber-attacks ♦ Employee fraud/theft ♦ Resource employs over 3000 staff ♦ Procurement processes fail to identify suppliers with links to serious organised crime ♦ Breach in internet security Top Council Risk	16	♦ Code of conduct for all Social Work Staff ♦ Scottish Social Services Council accreditation ♦ Disciplinary procedures in place ♦ Core clauses in standard model contract with external providers ♦ Contract monitoring arrangements in place ♦ IT systems in place to combat breaches ♦ Inventories in place for equipment	12

Risk Category	Risk	Inherent score	Sample of Controls	Residual score
2 High (8-12)	<p>10. The Council fails to evidence delivery of actions necessary to achieve the objectives set out in the IJB Strategic Commissioning Plan</p> <ul style="list-style-type: none"> ◆ Implications for children and justice services ◆ Governance and accountability arrangements ◆ Locality Planning models ◆ Locality Service delivery models ◆ Budgets and finance ◆ Reputation <p>Top Council Risk</p>	16	<ul style="list-style-type: none"> ◆ Chief Officer and Senior Management Team in post ◆ Committee structure in place ◆ Reports presented to CMT and Executive Committee ◆ Integration Board links to the Community Planning Partnership SLC representation on the Integration Board ◆ Chief Officer representation on Group ◆ SOLAR Guidance ◆ Strategic Commissioning Plan 2019-22 approved ◆ IJB Directions issued to Council and NHS Board annually ◆ National Audit Activity ◆ Locality Management Teams approved by the Senior Management Team ◆ SMT Work plan re the transformation/change agenda ◆ Chief Officers Network facilitated by the Scottish Government ◆ Code of Corporate Governance ◆ Performance reporting framework ◆ Tripartite Joint Chief Executive meetings ◆ Chief Officer 1-2-1 meetings with Chief Executives ◆ New Carer Representative identified 	12
2 High (8-12)	<p>11. Failure to achieve the outcomes of the Community Plan</p> <ul style="list-style-type: none"> ◆ Failure to deliver on the Community Planning Partnership priorities. ◆ Health and Social Care Partnership ◆ Getting It Right for South Lanarkshire Children's Partnership 	20	<ul style="list-style-type: none"> ◆ Key performance measures identified ◆ Structure reporting streams with individual partnerships ◆ Clear terms of reference for partnership groups and sub groups ◆ Clear action plans and progress plans. ◆ Health and Social Care Partnership is a stand-alone identified risk ◆ Review number of performance measures across range of partnership activity ◆ Review underway of the CPP and associated Partnership Improvement Plans (PIP's) 	8

Risk Category	Risk	Inherent score	Sample of Controls	Residual score
	<ul style="list-style-type: none"> ♦ Corporate Parenting Strategy ♦ Community Justice Partnership ♦ Competing demands from range of partnerships <p>Top Council Risk</p>			
2 High (8-12)	<p>12. Failure in multi-agency public protection procedures that result in harm to vulnerable children and adults.</p> <ul style="list-style-type: none"> ♦ Child Protection ♦ Adult Protection ♦ Prevent (Terrorism or Extremism) ♦ Gender based Violence ♦ COVID impacts on people living in Scottish Index of Multiple Deprivation (SIMD) Areas. <p>Top Council Risk</p>	16	<ul style="list-style-type: none"> ♦ Public Protection Chief Officers Group ♦ Multi-agency child protection committee in place ♦ Multi-agency adult protection committee in place ♦ Multi-agency procedures adopted to provide guidance to staff ♦ Multi- agency MAPPA arrangements in place ♦ Significant case review protocol in place ♦ Data sharing agreements in place to support alert messaging and sharing key information ♦ Multi-agency Prevent case discussions take place ♦ Training to raise awareness – Learn on line modules/ material in schools, Prevent is part of the curriculum ♦ Existing partnership working with Police Scotland and other organisations (Community Planning Partnership) ♦ Internal Prevent Group ♦ Internal Contest Serious Organised Crime Group ♦ Contemporary guidance for PREVENT provided to staff ♦ Wider public health and environment COVID impacts addressing 	9
2 High (8-12)	<p>13. Death or injury to employees, service users or member of the public</p> <ul style="list-style-type: none"> ♦ Failure to implement child protection processes ♦ Failure to implement adult 	16	<ul style="list-style-type: none"> ♦ Child and Adult Protection policy and procedures and governance procedures in place to guide all staff ♦ All Social Work establishments use the Corporate Occupational Health and Safety Management System. This includes developing and carrying out appropriate risk assessment and sharing information with employees and 	9

Risk Category	Risk	Inherent score	Sample of Controls	Residual score
	<p>protection processes</p> <ul style="list-style-type: none"> ◆ Failure to meet statutory legislative duties and responsibilities through legislation and other regulatory bodies, such as Scottish Social Services Council (SSSC) to ensure that it provides services that meet the needs of local people. This includes protection of vulnerable children, young people and adults ◆ Assessment and Care Management arrangements in respect of risks and needs and use of chronologies <p>Top Council Risk</p>		<p>service users</p> <ul style="list-style-type: none"> ◆ Protection of Vulnerable Groups (PVG) checks are carried out for all individuals who have contact with service users including staff, foster carers, and paid carers ◆ A range of telecare and assistive technology provides a means of monitoring children, young people and adults who may be at risk from a range of different types of harm ◆ Front line managers can access daily management information reports from our SWiSplus client index and the IMPROVe performance monitoring system ◆ Workforce regulated by Scottish Social Services Council ◆ Safe systems of work 	
2 High (8-12)	<p>14. Procurement practice and management of contracts</p> <ul style="list-style-type: none"> ◆ Centralised procurement function reducing capacity and knowledge of health and social care requirements ◆ Inadequate monitoring of contracts for social care and quality assurance of service delivery ◆ Failure to deliver statutory duties, that is, protect vulnerable children, young 	16	<ul style="list-style-type: none"> ◆ Liaison with central procurement ◆ Governance arrangements in place ◆ Standard model contracts in place ◆ Monitor Care Inspectorate reports on purchased services ◆ Deficiency in care meetings in place for poor grading of care providers ◆ Review of grants to voluntary organisations ◆ Provider liaison meetings ◆ Potential to establish quality assurance team 	9

Risk Category	Risk	Inherent score	Sample of Controls	Residual score
	<p>people and adults if social care contract not in place</p> <ul style="list-style-type: none"> ◆ Failure to recognise that procurement of care and support services is a complex ◆ Principles of choice and control <p>Top Council Risk</p>			
2 High (8-12)	<p>15. Failure to meet sustainable development and climate change objectives</p> <ul style="list-style-type: none"> ◆ The public sector have a duty to reduce carbon emissions, adapt to a changing climate and act sustainably as a result of the Climate Change (Scotland) Act 2009 ◆ Scottish Government expectation that the public sector lead by example and fully embed environmental sustainability and climate change action into day to day activities and council service delivery <p>Top Council Risk</p>	16	<ul style="list-style-type: none"> ◆ Sustainable development is embedded in the Resource Plan and Council Plan ◆ Sustainable development measures monitored through IMPROVE ◆ Strategic Environmental Assessment undertaken for plans and policies ◆ Resource energy champion ◆ Recycling of equipment (stair lifts) ◆ Energy efficiency in relation to new build programmes and maximise the energy efficiency of all Social Work Operational properties ◆ Reduce use of plastics across the Resource ◆ More flexible and agile working 	9
2 High (8-12)	<p>16. IT development and functionality does not meet service requirements</p> <ul style="list-style-type: none"> ◆ Restrictions on legacy systems (SWIS plus) 	16	<ul style="list-style-type: none"> ◆ Strategic review of Social Work IT System ◆ IT Programme Board in place ◆ Resource Plan 2018/19 ◆ IT Infrastructure Sub Group in place for IJB ◆ As part of digital strategy, council has commenced a move 	9

Risk Category	Risk	Inherent score	Sample of Controls	Residual score
	<ul style="list-style-type: none"> ♦ The ability to respond effectively to demand for service may prove difficult in the future ♦ Inability to respond to new statutory requirements ♦ Difficulty in partnership working leading to delays in service provision from inability to share assessments through IT platforms ♦ Impact of shift from analogue to digital in telecare/alert alarms. ♦ Lack of IT resource to support strategic developments <p>Top Council Risk</p>		<p>to the Cloud, which will include the introduction of Office 365</p> <ul style="list-style-type: none"> ♦ Outline business case prepared for the replacement of SWIS plus ♦ SMT report outing Standard IT profiles for each category of staff 	
2 High (8-12)	<p>17. Lack of capacity and skills to provide and meet increased service demands</p> <ul style="list-style-type: none"> ♦ Impact of cross cutting services reviews ♦ Delivery of person centred care ♦ Home Care workforce to support increased older people demographic growth ♦ Ageing workforce ♦ Mixed economy of care ♦ Scottish Social Services Registration (SSSC) requirements for Managers within Children's homes. 	16	<ul style="list-style-type: none"> ♦ Learning and development Board identifies and monitors training and support required ♦ Social Work Governance Board in place with LDB reports tabled ♦ Social Services in Scotland – a shared vision and strategy 2015/2020 review current approaches to social care workforce planning and assess whether there is a case for a national workforce planning tool ♦ Council Workforce plan ♦ Resource Workforce plan ♦ Registration requirements for care at home and housing support services ♦ Development of Care Academy alongside third sector organisations. ♦ Supervision policy audit undertaken and templates 	9

Risk Category	Risk	Inherent score	Sample of Controls	Residual score
	<ul style="list-style-type: none"> ♦ Scottish Living Wage ♦ Registration requirements ♦ Lack of suitably qualified potential recruits in general work force ♦ Hamilton Care at Home Inspection report Top Council Risk		updated. <ul style="list-style-type: none"> ♦ Inspection Action Plans ♦ Working time Directives ♦ Learn of Line Mandatory Courses ♦ Plans to scope the use of digital platforms to deliver training ♦ Consideration of peripatetic teams 	

Category	Number of Risks	Percentage
Very High	5	24%
High	12	57%
Medium	4	19%
Low	0	0
Total	21	100%

Social Work Resources Risk Actions 2020

Risk Actions 2020/2021 (Additional control measures required to mitigate the risk)			
	Action	Responsible person	Target completion date
1.	Continue to monitor impact of Eligibility/Prioritisation Criteria	Head of Service	March 2021
2.	Review funding to Voluntary organisations linked to the Carers Strategy (RCC/EK Dementia Carers/Lanarkshire Links/Take Control/PAMIS)	Head of Service	March 2021
3.	Continue to review Day Opportunities for both Adults and Older People Services	Head of Service	March 2021
4.	Resource undertake Privacy Impact Assessment on new procurement activity	Head of Service	March 2021
5.	Resource Leads reviewing non contract spend and expired contracts	Head of Service	March 2021
6.	Plan for replacement SWiSplus client index system	Head of Service	September 2021
7.	Monitor the changes in the Home Care Workforce reorganisation	Head of Service	March 2021
8.	Continue to implement (COVID-19) Recovery Plan in-line with National Guidance	Head of Service	October 2021
9.	Develop improvement plan following Joint Inspection of Children's Services 2019	Head of Service	August 2020

Report

13

Report to:	Social Work Resources Committee
Date of Meeting:	20 January 2021
Report by:	Director, Health and Social Care

Subject:	Transformation and Service Improvement Programme
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ provide an update of progress of the Transformation and Service Improvement Programme in relation to the following services and the impact the Coronavirus (COVID-19) has had on these services
 - ◆ South Lanarkshire's Care Facilities Modernisation Programme
 - ◆ Care and Support Service Review
 - ◆ Mental Health Strategy
 - ◆ Care at Home Services Improvement Programme
 - ◆ Adult and Older People Day Services Review

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

(1) that the content of this report be noted.

3. Background

- 3.1. As part of South Lanarkshire Council's (SLC's) commitment to improve later life for adults and older people and to meet the future needs and wishes of the people, a programme of Transformation and Service Improvement is being undertaken by the Health and Social Care Partnership (HSCP). This work supports the delivery of the Integrated Joint Board's (IJB) Strategic Commissioning Plan (SCP) and continues to strengthen many of our community-based supports.
- 3.2. Coronavirus (COVID-19) has impacted most severely on people who are older or have weakened immune systems and who are typical of the people using Council services. The response process has slowed the progress of the Transformation Programme as resources have been redeployed and services suspended. The work streams affected are the Care Facilities Modernisation Programme; the evidence-based review of Adult and Older People Day Services; Care at Home Improvement Programme; Care and Support Review and Mental Health Services.
- 3.3. In summary, work has resumed, the services incorporate all learning from the pandemic situation and continue to apply this in future months. The services are in a different place from when the Transitions Programme commenced and now need to take account of the risks that COVID-19 has posed and how services can be future proofed to best meet these risks.

4. Current Position

4.1. Care Facilities Programme

- 4.1.1. The work on the Care Facilities Programme came to a natural pause due to the impact of the global pandemic, this allowed us to prioritise services and focus on achieving a level of service provision across the Partnership during the pandemic.
- 4.1.2. Work is now underway on Phase 1 of the Blantyre Facility development, with the contractors commencing on site on 30 November. The contract was awarded after a second tendering exercise was undertaken through the Council's procurement process. The contractor awarded is Cruden Construction.
 - ◆ it is anticipated that the development will take 18 months, giving a projected completion date in the Summer of 2022
- 4.1.3. An extensive public relations exercise is underway to ensure that neighbours of the site including the school are aware of the work that will be undertaken with a recent press release being issued keeping MSPs, elected members, stakeholders and the public abreast of developments. There will be ongoing newsletters published by the contractor as the development progresses which will be circulated to the neighbours. This information will also be distributed to the IJB and elected members to keep them informed.
- 4.1.4. It is evident the intermediate care model delivered as part of the Covid response work within the recommissioned McWhirter House, was successful. This reaffirmed the earlier work that delivering a similar model within a new custom-built facility should achieve similar and potentially better results.
- 4.1.5. This intermediate care model has now transferred in the medium term to the top floor of Canderavon House where there is a capacity to accommodate this until the Blantyre facility is open, in which case it will transfer to the new Hub in the long term.
- 4.1.6. All services are in a different place than when the care facilities programme started, and the redesign group consider it important to pause reflect and take stock of the impact of and learning from the pandemic situation. All services now need to take account of the risks that COVID-19 poses and how services can future proof to meet these risks. In terms of service redesign and modelling, the service delivery model continues to evolve and there are significant voids in residential and nursing home care. By necessity there is a requirement to be more innovative to meet further changes needs and the current pandemic situation. There is now a need to review the modernisation programme and allocation of resources in this changing and challenging operational environment. A further paper will be presented to Social Work Resources Committee detailing these options at the next Committee meeting.
- 4.2. Care and Support Service Review
 - 4.2.1. The review of the Care and Support Service, a Housing support service for Adults with a Learning Disability is concluding. The review identified a number key themes and includes an options appraisal to determine next steps for the service. As part of the review process an updated Service Specification with defined eligibility criteria is being developed by the Resource. The early findings from the review which will inform the final recommendations were detailed within a report prepared for the Social Work Resources Committee on 2 October 2019 and the Integrated Joint Board (IJB) on 3 December 2019. Due to the Covid pandemic, progress of the review has been slower than anticipated.

- 4.2.2. A key issue is that several service users do not have the legal powers in place under the Adults with Incapacity Act which are required to progress care plans and promote their welfare. This is being addressed alongside the individual care reviews which are progressing. There is potentially a lengthy timeline to conclude this legal process, due to the COVID impact on the Court System.
- 4.2.3. It is recognised that the implementation of the outcomes of the service review and service redesign will require continuing engagement with service users and carers along with key stakeholders across the HSCP, the Council, staff, and trade unions.
- 4.3. Mental Health
- 4.3.1. The vision for Mental Health Services in Lanarkshire is to develop an integrated model that will:
- ◆ put the person at the centre of decisions about their treatment and care
 - ◆ give patients greater understanding and confidence to manage their own condition
 - ◆ enable people to take control of their life and have their voice heard
 - ◆ be supported by education and group programmes
 - ◆ harness the range of third sector and community assets
 - ◆ promote anticipatory care planning
 - ◆ make greater use of technology
 - ◆ prevent or delay the need to use more intensive services
- 4.3.2. In response to this a proposal to integrate South Lanarkshire Community Mental Health Services, including the transition of the locality psychological therapy teams was approved at South Lanarkshire Integrated Joint Board in February 2019. These services will transition from their current hosted arrangement in North Lanarkshire HSCP in collaboration with North Lanarkshire Mental Health Service.
- 4.3.3. The transfer of the operational management of South Lanarkshire Community Mental Health services to South Lanarkshire HSCP is a priority. The management and strategic leadership of these services within South Lanarkshire HSCP is essential to supporting achievement of:
- ◆ the Mental Health and Wellbeing Outcomes within the Strategic Commissioning plan
 - ◆ South Lanarkshire Good Mental Health for All Action Plan
 - ◆ Suicide Prevention plan
 - ◆ Lanarkshire Mental Health and Wellbeing Strategy to be taken forward within South Lanarkshire
- 4.3.4. In order to manage this transition, a phased approach is proposed to achieve a whole system model for mental health that is embedded within the locality model for South Lanarkshire. It is anticipated that the transfer and integration of community mental health services, coupled with the work relating to implementation of the Lanarkshire Mental Health and Wellbeing Strategy will enable a community mental health service framework to be developed. This will identify the core business of the services and key deliverables which will enable the integrated teams to become embedded within and operationally managed in the localities by 2022.
- ◆ **Phase 1: 2019 - 2020:** An interim central operational management structure for Community-based Mental Health Services in South Lanarkshire was developed by the joint Community Mental Health Team (CMHT) Integration Strategic Implementation group. This management structure for Community Mental Health and Addictions Services in South Lanarkshire was implemented in August 2020,

and will progress the implementation plan to enable the transfer of Adult and Older Adults CMHT's to South HSCP by the end of March 2021, put back from December 2020 due to the current pandemic restrictions. Performance, staff clinical and financial governance arrangements for the CMHT's have been agreed and will be implemented at the point of transfer to South Lanarkshire HSCP. A scoping exercise is also underway to consider and review potential service models for an integrated Health and Social Work CMHT.

4.4. Care at Home Service

4.4.1. Care at Home services continue to operate as normal, delivering essential services to some of the most vulnerable service users in our communities. As expected, staff absence has mirrored the Covid transmission rates in the community, in addition to typical absence levels. There have been spikes in COVID related absence, but they have fallen and remained stable at the time of writing. This position continues to be monitored closely and while there has been no need to implement them, the service has appropriate contingency plans in place should they be required.

4.4.2. External providers also have appropriate contingency plans in place should they be required. However, there has been a general improvement in staff absence within external agencies over recent weeks.

4.4.3 Care Inspectorate Inspections

Inspections have recently taken place within both the Hamilton and Rutherglen services. This represents the first inspections since the Care Inspectorate highlighted concerns about the services in late 2019.

4.4.4 The Care Inspectorate conducted an inspection of the Service in October 2020. Inspectors highlighted considerable progress within the Service in Hamilton and the Improvement Notice that was in place has now been formally lifted.

4.4.5 The level of progress led Inspectors to take the positive but unusual decision to regrade the Service and have subsequently awarded the Service the following grades:

♦ Care at Support	3
♦ Leadership and Management	3
♦ Staffing	2

4.4.6 As a result of progress, and through discussions with the Care Inspectorate, the voluntary moratorium that was previously in place was lifted from 16 November 2020. New services are being resumed in a managed way that will seek to increase services over time. The Care at Home Management Teams will also continue to work closely with the Care Inspectorate in the development and monitoring of services going forward.

4.4.7 Following discussions with the Care Inspectorate, the voluntary moratorium that was previously in place with the Rutherglen Home Care Service was lifted on 31 August 2020. An inspection of the service commenced on 17 November 2020.

4.4.8 Again, Inspectors highlighted the significant progress that had been made within the service and using the new inspection methodology, regraded the service as follows:

♦ How well do we support people's wellbeing?	4
♦ How good is our Leadership?	4
♦ How good is our Staff Team?	4
♦ How good is our care planned ?	3

- 4.4.9 There remains much to do within the improvement journey of both services. However, the inspections represent significant progress. The scale and pace of work undertaken by staff within both services cannot be underestimated and the outcome is testament to their hard work and dedication.
- 4.4.10 A new electronic scheduling system has been procured within the Service. This will bring significant improvements to the Service in relation to communication with staff, more effective and efficient scheduling and improved recording of information. A Project Implementation Team has now been established and preparations are currently taking place to support the piloting of the system with a small group of staff in the Bothwell/Uddingston area early in 2021. A wider roll out to all locality areas is scheduled to take place throughout 2021.
- 4.4.11 As part of the implementation of the scheduling system, Home Carers will be issued with new mobile devices. The introduction of new devices will also see Home Carers receiving access to organisational email and Microsoft Teams providing the service with significant improvements in the way it communicates with staff and staff with each other.
- 4.4.12 Plans are currently being developed in partnership with The Scottish Government and NHS Lanarkshire to support a programme of COVID testing for frontline staff within the Care at Home sector. While yet to be finalised, it is anticipated that this will commence in January 2021. Plans are also being developed to support the implementation of a COVID vaccination programme. This is anticipated to commence in February/March of 2021.
- 4.4.13 Improvement activity within the Service has increased as Lockdown restrictions have eased. A Care at Home Improvement Board has recently been established to oversee developments within the Service and this is complemented by a number of work streams that have responsibility for taking forward the redesign of the Service.
- 4.5. Adult and Older People Day Service Review
- 4.5.1. Work continues to conclude the Adult and Older People Day Service Review and it will be considered at a future meeting of the Integrated Joint Board (IJB) in the context of the IJB's Strategic Commissioning requirements. The Review is informed by activities including
- ♦ consideration of strategic drivers including Self Directed Support Legislation, demographics and national policy
 - ♦ an analysis of the current service model
 - ♦ data analysis
 - ♦ property and transport review
 - ♦ consideration of service user demographics, dependency levels and needs
 - ♦ feedback from all stakeholders through consultation and engagement
 - ♦ feedback on the interim outreach model
 - ♦ a review of publications and practice from other organisations both nationally and internationally
- 4.5.2. In summary the findings indicate a need to have a clear focus on organising social care supports around each individual, having flexible care and support that will enable people to achieve their personal outcomes. A focus is required on individual

strengths and assets rather than problems or needs addressed in groups which the current service model is more focussed on.

- 4.5.3. Options for redesign are currently being worked up which build on the strengths and assets of the current model whilst considering opportunities to remodel elements of the service to provide the flexible supports carers are seeking and to take account of the personalisation outcomes the SDS legislation supports and expects. Proposed developments would be designed on a locality basis. The detailed review report and options will be the subject of a future report for the IJB and Social Work Committee in the early part of 2021. Options for redesign will be the subject of stakeholder consultation in the next phase of the engagement process. The eventual model must be founded on the principles of SDS and offer choice, control, and flexibility to adapt to the changing needs of the user population over time.
- 4.5.4. Around a third of the available Day Services care staff workforce remain deployed in other parts of the Resource such as Residential Care Homes, and Care and Support Services. This position remains under review since it is recognised that other areas of the Resource's work are under considerable strain due to the increase in COVID-19 amongst both users of services and staff. In particular, the increase in staff having to self-isolate as instructed by Test and Protect has placed demands on all areas of the work.
- 4.5.5. Whilst the majority of Day Service buildings remain closed due to the COVID situation, the four management and administrative Hubs remain open (Harry Smith, Murray Owen, Harry Heaney and Newberry Rooney) to support the delivery of day service Outreach, support employees and undertake weekly risk assessment and reviews for all registered services users. Each of these Hubs also function as a locality base for the storage, provision and management of Personal Protection Equipment (PPE) for staff.
- 4.5.6. Scottish Government Guidance for the Safe Re-opening of Building Based Day Services remains that decisions to re-open services should be made at a local level involving the local authority, health protection and the Care Inspectorate where required and under the authority of the Director of Public Health. The risks from contracting COVID-19 for service users of adult and older people's day services are substantial. Older people attending day services are typically aged over 80 with underlying health conditions and 65% have a diagnosis of Alzheimer's or dementia. Similarly, the learning disability population has a heightened risk particularly, where individuals are living with Downs Syndrome. A large cohort of day centre users have a cognitive impairment which would contribute to significant challenges in maintaining the strict physical distancing and infection prevention and control measures that are required to maintain the safety and wellbeing of those in attendance. At this stage, it has been agreed that the immediate risk to re-open day service buildings for adult and older people could not be sufficiently mitigated and these should remain closed for the delivery of support to service users whilst the outreach service will continue. It is intended that building based services will largely remain closed until at least March 2021, when this will be reviewed.
- 4.5.7. A pilot is currently in place within two of the Hubs (Harry Smith and Murray Owen) to enable the learning disability physiotherapy service to hold clinics enabling those individuals with multiple complex needs to access individual appointments. Hubs have also been supporting delivery of the flu vaccination programme.

- 4.5.8. At this stage, it has been agreed that the immediate risk to re-open Day Service buildings for adult and older people could not be sufficiently mitigated and these should remain closed for the delivery of support to service users whilst the Outreach Service will continue. It is intended that building based services will largely remain closed until at least March 2021.

5. Employee Implications

- 5.1. There are no direct employee implications associated with this report. However, the work streams referred to involve service redesign intended to reshape services and have associated workforce issues. The work streams will continue to be the subject of consultation with the trade unions. Personnel and Finance services are also represented on the Review Groups.

6. Financial Implications

- 6.1. There are no direct financial implications associated with this report. The transformation and improvement work streams are intended to support the HSCP to deliver the IJB's Strategic Commissioning Plan within the available resources and in accordance with the Financial Plan.
- 6.2. There is a significant element of financial risk associated with the ongoing response and consequences of the COVID Pandemic. The Chief Finance Officer has identified costs to be set against the Mobilisation Plan for the Scottish Government. However, there remains a risk that COVID will impact adversely upon the financial position and, consequently, the Transformation and Improvement Programme.

7. Climate Change, Sustainability and Environmental Implications

- 7.1. There are no implications for Climate Change in terms of the information contained in this report.
- 7.2. There are no implications for sustainability in terms of the information contained in this report.
- 7.3. There are no implications for the environment in terms of the information contained in this report.

8. Other Implications

- 8.1. At this moment, the risk implications associated with this report are being monitored through a COVID-19 Risk Report.
- 8.2. This work has strategic fit with other transformational change work streams currently being progressed, for example, primary care transformation.

9. Equality Impact Assessment and Consultation Arrangements

- 9.1. A full equality impact assessment will be developed in conjunction with the future strategy for Residential Care Homes.
- 9.2. There has been significant consultation and engagement with stakeholders as outlined throughout the report. This will continue to be intrinsic to this programme of work.

Val de Souza
Director, Health and Social Care

18 December 2020

Link(s) to Council Values/Ambitions/Objectives

- ◆ Improve Later Life
- ◆ Deliver better Health and Social Care for all

Previous References

- ◆ none

List of Background Papers

- ◆ none

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

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Report

14

Report to:	Social Work Resources Committee
Date of Meeting:	20 January 2021
Report by:	Director, Health and Social Care

Subject:	Children (Equal Protection from Assault) (Scotland) Act 2019: Implemented 7 November 2020
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ advise the Committee of the implementation of the Children (Equal Protection from Assault) (Scotland) Act 2019 which came into force on 7 November 2020

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

- (1) that the contents of the report be noted.

3. Background

- 3.1. In 2015 the report, Equally Protected? provided a review of the evidence commissioned by NSPCC Scotland, Children 1st, Barnardo's Scotland and the Children and Young People's Commissioner Scotland, that highlighted the negative consequences of physical punishment, including increased levels of aggression and antisocial behaviour from children and a strong detrimental effect on children's emotional and mental health.
- 3.2. On 3 October 2019, the Children (Equal Protection from Assault) (Scotland) Act 2019 was passed by the Scottish Parliament, meaning children in Scotland now have the same protections against assault as adults.
- 3.3. While Scots law protects adults from all forms of physical violence, the Criminal Justice (Scotland) Act 2003 had provided a defence of justifiable assault of a child, which could be exercised where it was claimed a violent act against a child was for the purpose of physical punishment, often referred to as the use of reasonable physical chastisement. The application of justifiable assault threshold was often challenging for professionals and was seen as counterintuitive to the values and principles of children's human rights.
- 3.4. The Children (Equal Protection from Assault) (Scotland) Act 2019 has now legislated for the removal of any such statutory defences from Scots Law. The passing of this Bill by members was a positive step forward for children's rights in Scotland. Children now have the same right as adults not to be assaulted and Scotland is the first country in the UK to pass such legislation. The impact of similar legislation in other countries has been positive and these countries have usually seen a decrease in the use of physical violence against children and an increase in child wellbeing.

- 3.5. On 7 November 2020 the Children (Equal Protection from Assault) (Scotland) Act 2019 became the law in Scotland.

4. National Implementation of Equal Protection

- 4.1. Despite the impact and uncertainty of the COVID-19 pandemic the Scottish Government decided not to delay the implementation plan and the legislation became law in November 2020 as anticipated. There have been questions raised about the timing of law and the readiness of parents and children's services to fully understand its implications. South Lanarkshire Child Protection Committee (CPC) has worked to ensure information for children, young people, adults and professionals was widely shared ahead of implementation.
- 4.2. The Scottish Government Expert Reference Group on Equal Protection has four key implementation tasks, Public Awareness Raising, Information to Organisations, Guidance and Training for Practitioners and Data & Monitoring. A positive parenting digital marketing campaign was scheduled to be launched in October 2020 with a number of press releases and news campaigns close to the Bill becoming Law. These have been significantly delayed with some information reaching local authorities at close of business on 5 November 2020.
- 4.3. CPCs received some information from the Scottish Government on 6 October 2020 for local use including leaflets and posters. Further information from the Scottish Government can be viewed here [Physical Punishment and Discipline of Children - How the Law is changing!](#)

5. Role of Partner Agencies

- 5.1. Evidence demonstrates that hitting children damages their health and wellbeing and that violence does not work as a strategy for improving a child's behaviour. The changes in law should not require any fundamental change in practice for children's services given the implementation of Getting it Right for Every Child (GIRFEC). However, we need to appreciate the introduction of the new law takes place at a point where parents may be facing huge COVID-19 pressures, the impact of economic hardship and the possibility of further lockdown restrictions. Education and Health Services have a crucial role in first point of contact discussions and observations with children and their parents.
- 5.2. In some circumstances, having made an assessment, Police Scotland may refer the incident to its Public Protection Unit for further investigation and possible notification to the Crown Office and Procurator Fiscal Service/Scottish Children's Reporter Administration.
- 5.3. Responding to Concerns: If, and when agencies hear or see a parent physically assaulting a child (referred to in the Scottish Government information leaflet for parents and carers as including smacking, skelping, spanking and slapping) the first response should be to engage with the parent or carer in a participative manner to explore what were the factors, pressures or cultural ideals were that resulted in the incident taking place and to offer advice and alternative approaches as appropriate. As part of that conversation, staff must give a clear message that physically hitting/assaulting a child is against the law. The priority should be to de-escalate conflict to help the parents avoid repeating their behaviour and to improve the relationship they have with their child. A Child's right to be heard must always be upheld.

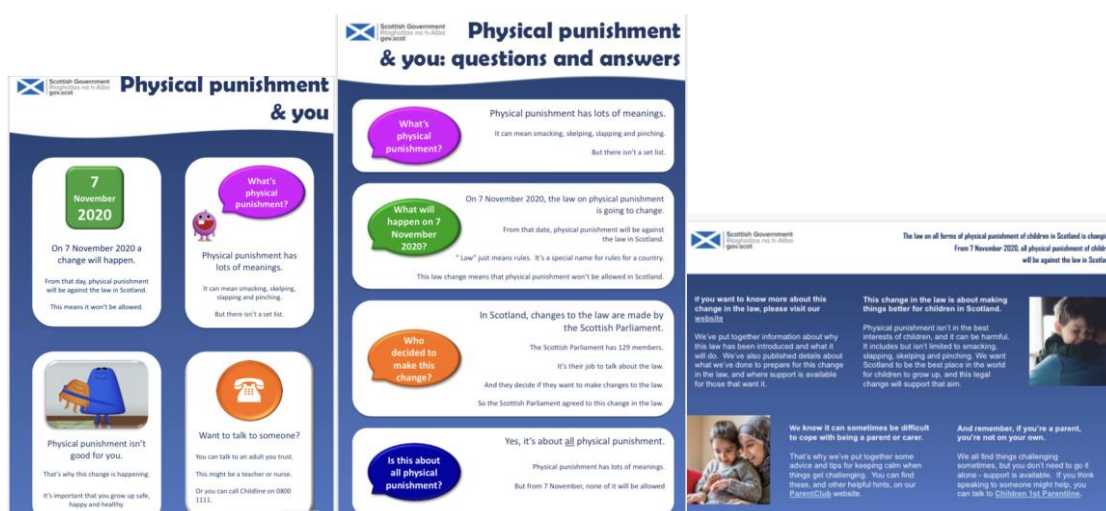
- 5.4. We have added key information to our website here: Equal Protection Information for Families about changes to the Law.

6. Child Protection

- 6.1. Child Protection refers to the processes involved in the consideration, assessment and planning of further required action where there are concerns that a child may be at risk of harm. Child Protection procedures will apply when Police, Social Work, Health and in some cases Education, determine that a child may have been abused or is at risk of significant harm. Services must refer to their Child Protection procedures for more information in the first instance.
- 6.2. Frontline practitioners/staff will be supported by managers from their service to confidently apply professional judgement when considering whether to raise a notification of concern to either Police Scotland or Children and Families Social Work. In all cases of risk of significant harm or significant harm having taken place, Child Protection procedures will apply as appropriate.

7. Conclusion

- 7.1. The implementation of the Children (Equal Protection from Assault) (Scotland) Act 2019 for children and young people into law will offer children in Scotland the same human rights and lawful protection from violence that adults are currently afforded. Just as it is unlawful to hit an adult, it is welcomed that it will no longer be lawful for parents or carers to hit a child. This is more than a ban on smacking as reported widely in the media.
- 7.2. While the change in legislation for children is fully welcomed and embraced, the timing of it during the current COVID-19 pandemic may cause challenges for children's services initial response to concerns.
- 7.3. Further practitioner guidance/training/briefings will be required to be developed across services with a recommended shared responsibility to preparing key information for the workforce ahead of enforcement. Work has started locally but can only be made available once the associated Scottish Government guidance is published. The short time scale has been acknowledged by the Government.
- 7.4. National Awareness Raising campaigns are expected imminently. Materials include the graphics as shown;



8. Implications

- 8.1. Evidence demonstrates that hitting children damages their health and wellbeing and that violence does not work as a strategy for improving a child's behaviour. The changes in law should not require any fundamental change in practice for children's services given the implementation of GIRFEC. Importantly, Education and Health Services will ordinarily be the first point of contact and subsequent discussions with children and their parents. There is also an uncertainty over how effective the information and marketing strategy will be both in the actual advertised Government message and how well parents will become aware of a change in the law. Additional support to manage change may be required.
- 8.2. If Partner agencies are not clear of their role to engage parents in a participatory manner to discuss the context of their behaviour in the first instance and maintain thresholds of Child Protection, Children and Family Social Work Services could receive a higher number of referrals, bringing children and families into the attention of services that would not ordinarily be known.

9. Employee Implications

- 9.1. There are no employee implications associated with this report.

10. Financial Implications

- 10.1. Campaigns and public information is being funded by Scottish Government. Training costs will be met by the SLCPC. Individual services will make necessary changes and meet costs. Partners contribute as requested in relation to specific tasks applying to the work of SLCPC.

11. Climate Change, Sustainability and Environmental Implications

- 11.1. There are no implications for climate change, sustainability and environmental implications in terms of the information contained in this report.

12. Other Implications

- 12.1. There are no risk implications associated with this report.
- 12.2. There are no sustainable development issues associated with this report.
- 12.3. There are no other issues associated with this report.

13. Equality Impact Assessment and Consultation Arrangements

- 13.1. This report does not introduce a new policy function or strategy, nor does it recommend a change to existing policy, function or strategy, therefore, no impact assessment is required
- 13.2. There is no requirement for consultation in respect of this report.

Val de Souza

Director, Health and Social Care

24 November 2020

Link(s) to Council Values/Ambitions/Objectives

- ◆ focused on people and their needs
- ◆ working with and respecting others
- ◆ Deliver better health and social care outcomes for all

Previous References

- none

List of Background Papers

- none

Contact for Further Information

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Report

15

Report to:	Social Work Resources Committee
Date of Meeting:	20 January 2021
Report by:	Director, Health and Social Care

Subject:	Position Statement on Prostitution
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ask the Social Work Committee to note that the Scottish Government recognises the risk to victims of domestic abuse, exploitation and prostitution
- support the collaborative work of the South Lanarkshire Gender-Based Violence Partnership in the development of the Position Statement on Prostitution
- support the Gender-Based Violence Partnership raise the profile of South Lanarkshire's position on prostitution

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

- (1) to adopt the position as stated in the attached Position Statement on Prostitution that supports the national agenda; and
- (2) to support the public launch of Lanarkshire's Position Statement on Prostitution.

3. Background – Gender-Based Violence & Equally Safe

3.1. Gender based violence (often referred to as Gender-Based abuse or violence against women and girls) is an umbrella term that encompasses a spectrum of abuse experienced mostly by women and girls and perpetrated mainly by men. This spectrum of abuse includes:

- Physical, sexual, and psychological abuse including domestic abuse and rape.
- Sexual harassment and stalking.
- Commercial sexual exploitation, including prostitution, pornography, and trafficking.
- Harmful practices, including so called 'honour' based violence, forced marriage and female genital mutilation.

3.2 Tackling Gender-Based violence remains a key priority within Scotland. Equally Safe: Scotland's strategy for preventing and eradicating violence against women and girls sets out a clear vision of: 'a strong and flourishing Scotland, where all individuals are equally safe and respected, and where women and girls live free from all forms of violence and abuse – and the attitudes that help perpetuate it.'

3.3 South Lanarkshire's Gender-Based violence partnership is the mechanism to deliver on Equally Safe at a local, strategic level. The partnership is committed to working collaboratively with key partners in the public, private and third sector to prevent and eradicate all forms of violence against women and girls in South Lanarkshire. The partnership recognises that no agency alone has the resources, skills or reach to

achieve the aims of Equally Safe. It is only by working between agencies, across all areas of life, that we will successfully achieve the vision and aims of Equally Safe.

4. Position Statement on Prostitution

4.1. The European Parliament passed a resolution in 2014 which recognised that prostitution, forced prostitution and sexual exploitation are gendered issues, and violations of human dignity and human rights. Under the UN Convention on the Elimination of Discrimination against Women, the UK has agreed to take appropriate measures to "suppress all forms of traffic in women and exploitation of prostitution of women". We must act upon these international obligations which recognise that sexual exploitation is completely unacceptable and inexcusable in 21st century Scotland.

4.2 Terminology

This report and the Position Statement adopt a working definition which is focused on the sale and purchase of sex rather than sex-related activities (such as lap-dancing, pornography etc.). Terminology in this area is contested; however, the Scottish Government continues to use the term 'prostitution' in a variety of contexts and reports. While 'sex work' is used by some academics and support organisations, the sale of sex is subject to dispute as a form of employment. The contested nature of words is significant, and the report is premised on an acknowledgement that it is not possible to find a 'neutral' language on this subject. As such it was felt most appropriate to follow the Scottish Government's lead on the use of the term "prostitution" throughout this report and the Position Statement itself.

4.2 South Lanarkshire's Gender-Based Violence Partnership in partnership with NHS Lanarkshire and North Lanarkshire's Violence Against Women Working Group have developed the attached Position Statement on prostitution as part of South Lanarkshire's Gender-Based Violence Strategy and Action plan which was approved by the Gender-Based Violence Partnership and Chief Officers Group in November 2019.

4.3 Priority One of the strategy states: South Lanarkshire embraces equality and mutual respect and rejects all forms of Violence Against Women & Girls.

4.4 Noted outcomes to meet this priority target are:

- Outcome 1.1: People in South Lanarkshire have increased understanding of all forms of Gender-Based Violence (causes, consequences, and appropriate responses)
- Outcome 1.2: Tolerance of Gender-Based Violence in South Lanarkshire is reduced and people are likely to recognise and challenge it.

4.5 The development of the position statement on prostitution has been identified as a key action to meet these outcomes as it sends a clear message to the workforce and wider public that prostitution is a form of violence against women and should not be tolerated.

4.6 By introducing this position statement, it is anticipated that Lanarkshire will be at the forefront of taking this stance publicly.

4.7 Lanarkshire's position Statement on Prostitution was approved by the Gender Based Violence Partnership in June 2020 and Chief Officers Group in November 2020.

5. Employee Implications

5.1. There are no employee implications associated with this report.

6. Financial Implications

6.1. There are no financial implications associated with this report.

7. Climate Change, Sustainability and Environmental Implications

7.1. There are no climate change, sustainability or environmental implications associated with this report.

8. Other Implications

8.1. There are no risk, sustainable development or other issues associated with this report.

9. Equality Impact Assessment and Consultation Arrangements

9.1. South Lanarkshire Gender-Based Violence Partnership contributed to the National Consultation [Equally Safe Consultation- Challenging Men's Demand for Prostitution](#) that concluded in December 2020.

Val de Souza

Director, Health and Social Care

7 December 2020

Link(s) to Council Values/Objectives

- ◆ focused on people and their needs
- ◆ working with and respecting others

Previous References

None

List of Background Papers

None

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

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Position Statement on Prostitution – January 2020

Overview

1. This position statement outlines North Lanarkshire Council, South Lanarkshire Council, NHS Lanarkshire, Lanarkshire Rape Crisis Centre, Monklands Women's Aid, Motherwell and District Women's Aid and North Lanarkshire Women's Aid and South Lanarkshire and East Renfrewshire's Women's Aid and ASSIST's position on prostitution as a form of commercial sexual exploitation, informed by evidence gathered on international approaches to addressing prostitution.

1.

2. Although it can be difficult to determine the extent of prostitution across Lanarkshire, a simple internet search will identify the number of women exchanging or selling sex on any given day.

3.

Background

4. *Equally Safe*¹, Scotland's national strategy for preventing and eradicating all forms of violence against women and girls, defines prostitution as a form of violence against women and the National Violence Against Women and Girls Network has adopted a position that advocates a challenging demand approach.

5.

6. In 2016 Europol released a report on trafficking in human beings that clearly states that prostitution is a risk sector for trafficking and that countries where prostitution has been legalised face a higher grade of exploitation. The demand question and how best to address it is also analysed in the European Commission Study on the gender dimension of trafficking in human beings published in 2016.

7.

8. The main international approaches to address prostitution are:

- ◆ Legislation
- ◆ Decriminalisation
- ◆ Challenging demand

9.

10. There is little difference with regard to legalisation and decriminalisation – they are both sides of the same coin with the pervading view that prostitution is work and should be treated as such. This approach lobbies for legalising the buying and selling of sex (on or off street) and licensing brothels to enable owners, and governments, to profit from those selling sex.

11.

12. Unlike legalisation and decriminalisation, a challenging demand approach does not see prostitution as work but instead views it as a form of violence against women.

13.

14. The challenging demand approach decriminalises and supports those exploited through commercial sexual exploitation (mainly women) and criminalises the buyer of sex (mainly men).

15.

16. Countries which have adopted this approach to date include: Sweden, Norway, Iceland, Finland, Israel, Northern Ireland, Canada, South Korea and India.

17.

18. Aligned with the aims of *Equally Safe*, the challenging demand approach advocates that addressing demand is fundamental to reducing violence against women and children and promoting gender equality.

19.

¹ Equally Safe Scotland's Strategy for preventing and eradicating violence against women and girls

20. It recognises the inherent imbalance in power between men and women in society, which in turn is mirrored and reinforced through commercial sexual exploitation.
- 21.
22. Challenging demand aims to prevent and reduce levels of gender-based violence as well as change cultural attitudes that perpetuate such abuse.
- 23.
24. In contrast to the legalisation and decriminalisation models, the challenging demand approach advocates decriminalising *solely* those selling sex and criminalising *solely* those buying sex.
- 25.
26. The challenging demand approach is formally supported by the European Union and Council of Europe.
- 27.
28. Moreover, challenging demand has proven to be the only approach that successfully reduces the prevalence of prostitution and trafficking that is, evidence from countries where the purchase of sex is criminalised shows a shift in public attitudes, a decline in the numbers of men buying sex and a reduced market for traffickers.
- 29.
30. In 2010 the Swedish government conducted an official evaluation of the Swedish law which criminalised the purchase of sex, the challenging demand approach, and its effects. These were:
 - ◆ street prostitution has decreased
 - ◆ the law has had a deterrent effect on prospective buyers of sexual services, reducing demand
 - ◆ the law has deterred trafficking as criminals have not sought to establish organised trafficking networks so readily in Sweden
 - ◆ the number of foreign women in prostitution has increased but not to the extent noticed in neighbouring countries
 - ◆ exit strategies and alternatives have been developed
 - ◆ there has been a significant change of attitude and mind-set in society
 - ◆ adoption of the law has been a pioneering model for other countries

Our Position

31. Partner agencies (detailed in Section 1) adopt a position aligned to that of national policy, which seeks to challenge demand.
- 32.
33. Partner agencies (detailed in Section 1) support the establishment of a legislative framework in Scotland that is founded on addressing the causes of commercial sexual exploitation, including prostitution that is, gender inequality and the demand from men to buy sexual access to women.
- 34.
35. Given this, we advocate measures to:
 - ◆ Decriminalise those selling sex.
 - ◆ Provide support and exiting services for those exploited through prostitution.
 - ◆ Criminalise the buyers of sex in all settings (on, off street and online).
- 36.
37. ***Self-determination over one's body is essential in self-care and healthcare alongside sexual and reproductive rights. Total control over one's own body in a patriarchal system where men still hold the balance of power is still not a total reality. Prostitution is at the centre of this power imbalance. Political factors in other countries have a knock-on effect globally; instability, conflict, corruption, weakened rule of law and poor governance exasperate difficult economic situations, especially for women.***²

² Prostitution Policy in Sweden – Challenging Demand (2019)

Report

16

Report to:	Social Work Resources Committee
Date of Meeting:	20 January 2021
Report by:	Director, Health and Social Care

Subject:	Proposed National Framework for Self-Directed Support
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ♦ advise of the response to Social Work Scotland's Proposed National Framework for Self-directed Support (SDS)

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

- (1) that the Committee note the content of this report.

3. Background

- 3.1. Social Work Scotland's Self-Directed Support (SDS) Project Team has been engaged in widespread consultation with key national and local stakeholders in 2020 including local authorities, national partner organisations and supported people in the development of a national SDS framework. The framework will provide a set of co-produced standards, helpful resources and action statements, building on the Change Map, to assist local authorities in further implementation of SDS.
- 3.2. As part of the consultation process, the SDS Project Team met with the Care Inspectorate and discussed local authorities who had good tools, documentation and processes in place in relation to assessment/care planning/reviews and resource release/allocation which also take an outcomes focussed approach.
- 3.3. The Care Inspectorate nominated South Lanarkshire Council (SLC) to be part of the consultation as they highlighted that we were doing well in these areas. A meeting was arranged for the SDS Project Team to meet with our SDS Team on 24 September, to discuss and share good practice, systems and tools and reflect on the appropriateness and relevance of the draft standards, and what would be required to implement them. After discussion, copies of the assessment, support plan and review tools were shared with them to provide further detail and improve their understanding.
- 3.4. The SDS Project Team reported that 17 local authorities contributed their comments and that the consensus general was that the standards are timely, inspiring and supportive.

4. Underlying Assumptions

4.1. There are three underlying assumptions within the proposed framework which underpin the Change Map and the standards, as well as being supported by the national and local authority stakeholders involved in the SDS project. They set a national direction of travel for SDS, based on current evidenced best practice.

4.2. Assumption 1

4.2.1. Assessment and the identification of resources is all part of the same process, and should not start with a budget but with the 'good conversation'.

4.2.2. This is a fundamental part of our guidance and assessment and care management procedures, where staff are encouraged and supported through our tools, to have a 'good conversation', where the supported person and carer provide their own views throughout the assessment process. A budget is only derived once the asset and strengths-based approach to the assessment is concluded. The statutory principles of the SDS Act, namely, participation, dignity, collaboration, informed choice and involvement are entrenched in our practice and processes.

4.3. Assumption 2

4.3.1. Community supports offer early help and support to people.

4.3.2. Community support models offer a universal approach where everyone is welcome to have a 'good conversation'. Our staff are well informed of local supports and offer early help and advice to anyone who needs it, especially those individuals who do not meet eligibility criteria for social care supports. Such community based early intervention has been shown to support people to maintain their wellbeing and remain independent, to reduce loneliness and to increase their knowledge of technological supports and adaptations.

4.4. Assumption 3

4.4.1. All Social Care processes need to be designed to meet the values and principles of SDS.

4.4.2. Our SDS Team have worked collaboratively with IT colleagues and have redesigned and improved systems and processes to support SDS, developing IT systems that enable effective recording, flexible person-led commissioning, and personal budgeting. These include assessment, outcome focussed support planning, review, finance, contracts, procurement and commissioning systems and processing.

4.4.3 Support Plan and Review module Training Programme was delivered from the 11 November 2019 until 13 January 2020, 16 courses and 162 front line staff attended.

5. The Standards

5.1. The Standards have been written for local authorities, outlining a direction of travel for effective implementation of SDS. They have been designed to be helpful, be measurable, provide more accountability to people who want more choice and control over their Social Care, provide the basis for a self-evaluation framework for local authorities.

5.2. The SDS Project Team have also opened up a 'Call for Comment' (closes 8 January 2021), which is primarily targeted at capturing opinions on the draft SDS Standards from the practitioners who would be expected to implement them. They also welcome comments from supported people and their carers to help inform the details

around what staff and leaders need to do to help them achieve full choice and control over their supports. They will then look to develop action statements that sit behind the standards, outlining what good SDS practice is. The 'Call for Comment' is being circulated to all councils, carers, supported people and third sector, for their feedback and opinions.

- 5.3. Each of the draft Standards are already fully implemented in our authority, all of which can be evidenced through good practice, case recording, the Social Work IT system, relevant procedures and frameworks and accessible public information.
- 5.4. Our robust IT system has been developed to capture the ethos of SDS and the need for a 'good conversation', through the assessment, support planning and review process. This has also improved our ability to react and be flexible and creative with personal budgets and individuals' support plans, especially during the current Pandemic.
- 5.5. Our fieldwork staff are also enabled to exercise professional autonomy and can set personal budgets within delegated parameters.
- 5.6. The SDS Standards will ensure consistent and best practice and provide the structure and framework for future developments and service improvements and enhancements. The Standards will form part of a wider framework, designed to assist local authorities with the next steps in their implementation journeys.
- 5.7. The SDS Project Team have also highlighted that the project findings correlate with the scope of the Independent Social Care Review and the commitments of The Promise.

6. Employee Implications

- 6.1. There are no employee implications associated with this report.

7. Financial Implications

- 7.1. There are no financial implications associated with this report.

8. Climate Change, Sustainability and Environmental Implications

- 8.1. There are no implications for Climate Change in terms of the information contained in this report.
- 8.2. There are no implications for sustainability in terms of the information contained in this report.
- 8.3. There are no implications for the environment in terms of the information contained in this report.

9. Other Implications

- 9.1. The national standards will ensure the ethos of SDS is embedded in practice with parameters to influence the implementation journey and full compliance with SDS legislation.
- 9.2. There are no sustainable development issues associated with this report.
- 9.3. There are no other issues associated with this report.

10. Equality Impact Assessment and Consultation Arrangements

- 10.1. There is no requirement to carry out an impact assessment in terms of the proposals contained within this report.

Val de Souza

Director, Health and Social Care

21 December 2020

Link(s) to Council Values/Ambitions/Objectives

- ◆ Improve health, care and wellbeing
- ◆ Deliver better health and social care outcomes for all
- ◆ Protect vulnerable children, young people and adults

Previous References

- ◆ none

List of Background Papers

- ◆ Social Work Scotland's Proposed National Framework for Self-directed Support
[Proposed-National-Framework-for-SDS.pdf \(socialworkscotland.org\)](https://www.socialworkscotland.org/Proposed-National-Framework-for-SDS.pdf)

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

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Report

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Report to:	Social Work Resources Committee
Date of Meeting:	20 January 2021
Report by:	Director, Health and Social Care

Subject:	Chief Social Work Officer Annual Report 2019/2020
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ♦ outline the content of the Chief Social Work Officer Annual Report 2019/2020

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

- (1) that the Chief Social Work Officer Annual Report 2019/2020 be noted.

3. Background

- 3.1. There is a statutory requirement for all local authorities to appoint a professionally qualified Chief Social Work Officer (CSWO). He/she must be registered with the Scottish Social Services Council (SSSC). The role of the CSWO is to provide professional advice and guidance to local authorities, elected members and officers in the provision of Social Work Services, whether commissioned or directly provided. The CSWO has a responsibility for overall performance improvement and the identification and management of corporate risk insofar as these relate to Social Work Services.
- 3.2. The CSWO is required to prepare an Annual Report of activity to the Chief Social Work Advisor for Scotland. The report follows a standardised reporting framework and timeframe to ensure key issues are highlighted and to aid learning and the sharing of information nationally. A summary report is also published annually by the Scottish Government.

4. CSWO Report

- 4.1. The report is split into five sections, a copy of which is attached as an appendix, and a brief summary of highlights from each section is outlined below:
- 4.2. Introduction
- 4.2.1. Introduces the purpose of the report and contextualises the role of the CSWO.
- 4.3. CSWO's Summary of Performance
- 4.3.1. Key challenges, developments and improvements during the year - this section provides the national context in which Social Work Services are being delivered and details the key legislation and strategies which currently frame that delivery.

The details of the CSWO's priorities for the service are confirmed as:

- ◆ Public Protection for Children and Adults
- ◆ Multi-agency Public Protection Arrangements
- ◆ Integration Joint Board (IJB) and development meetings for Health and Social Care Integration
- ◆ Social Work Governance Group/Clinical Governance Group
- ◆ Care Facilities Improvement Plans
- ◆ Health and Care Standards
- ◆ Data Protection, GDPR
- ◆ Procurement of Social Care Services
- ◆ Eligibility Criteria/Prioritisation
- ◆ Self-Directed Support (SDS)
- ◆ the implementation of the Community Justice model
- ◆ the requirements of the Children and Young Peoples Act 2014
- ◆ the implementation of the Carers (Scotland) Act 2016
- ◆ announced and unannounced inspections
- ◆ developing and supporting our profession and workforce

4.3.2. A brief narrative is provided on the progress of these priorities which highlights key developments and achievements. Examples include the Structured Sentencing Court for Young People pilot (SSCYP) which has undergone evaluation by both the University of the West of Scotland and Community Justice (Scotland). Evaluation reflects that over 84% of young people attending the SSCYP at Hamilton Sheriff Court complied with the requirements of their six month Structured Deferred Sentence and were admonished at the end of this. All the young people reported greater citizenship and as such were more employable at the end of the intervention. The success of this initiative has seen the establishment of this team as a core team within Justice Services.

4.4. Partnership Working – Governance and Accountability Arrangements

4.4.1. This section details the vision, values and objectives of South Lanarkshire Council (SLC) and how these link to the work of Social Work Resources (SWR). It includes an overview of the role and responsibilities of the CSWO and the systems, structures and reporting arrangements which assure the quality of Social Work Services. Responsibilities are outlined in relation to the IJB, Children's Services, Public Protection, Community Planning and in relation to the corporate responsibilities of the Council.

4.4.2. Partnership working forms the foundation of SWR approach to supporting and protecting vulnerable adults and children. Significant work has been undertaken to develop a consistent and meaningful approach to service user and carer participation and involvement within Social Work and this is a key responsibility of the CSWO. The report highlights the Resource's Participation and Involvement Strategy built upon the principles of citizen leadership and provides examples of the range of methods used to engage with service users and carers. The consultation which was undertaken with carers in relation to the development of the Carers Strategy 2019 to 2022 provides an example.

4.5. Delivery of Statutory functions

4.5.1. The CSWO is active in overseeing the quality of services and is responsible for ensuring that social work staff are appropriately trained and supported to carry out their professional and statutory duties. This is undertaken in a number of ways

including; regular meetings between the CSWO and Senior Managers to discuss performance and other operational issues; fulfilling corporate governance requirements through the annual Internal Statement of Assurance and overall Governance Assessment Framework with the agreement of the Chair of the Social Work Committee.

4.5.2 All Social Work staff working with service users are bound by a professional Code of Conduct which is governed by the SSSC. South Lanarkshire's Council's Code of Conduct for Social Work staff has drawn on this framework; all staff, regardless of qualification agree to adhere to specific professional codes that guide their practice Social Services Delivery Landscape. Within this section, the macro environment is outlined together with an overview of the services delivered in 2019/2020.

4.6. Joint Inspection of Children's Services 2019

4.6.1. The Children Services Partnership within South Lanarkshire was inspected by the Care Inspectorate in 2019 with on-site visits in late October and early December. The Care Inspectorate's recently reviewed and updated methodology enabled self-evaluation and inspection activity to focus on Children in Need of Care and Protection. The Care Inspectors undertook case file reading of core records from Police Scotland, Health, Education and Social Work in respect of 45 Child Protection cases, with Social Work - Lead Professional records read for the remainder of 64 Corporate Parenting cases.

4.6.2. As part of their focus on engagement there were a series of surveys issued by the Care Inspectorate to scope stakeholder's experiences including:

- ◆ a survey distributed to staff working with children and young people in need of care and protection and which 91% of the staff team responded to
- ◆ a children and young people's survey
- ◆ a parents survey

4.6.3. The Inspection Team were also offered 52 different opportunities to engage directly with children, young people and parents/carers which allowed them to understand the impact of our services/intervention on their lives. In addition, the Inspectors met with front line workers, front line managers and senior officers across the Children's Service's Partnership (including Elected Members) - entailing over 350 staff engaging directly with the Inspection Team.

The Inspectors posed five inspection specific questions:

1. how good is the Partnership at recognising and responding when children and young people need protection?
2. how good is the Partnership at helping children and young people who have experienced abuse and neglect stay safe, healthy and well and recover from their experiences?
3. how good is the Partnership at maximising the wellbeing of children and young people who are looked after?
4. how good is the Partnership at enabling care experienced young people to succeed in their transition to adulthood?
5. how good is collaborative leadership?

4.6.4. Their Inspection Report was subsequently published on 16 June 2020 - [JICS South Lanarkshire](#). The Care Inspectorate recognised the significant good work that is being done in South Lanarkshire whilst noting that work already begun in corporate parenting and for care leavers requires further time to come to fruition.

The Care Inspectorate in its conclusion reported that: The Care Inspectorate and its scrutiny partners are confident that South Lanarkshire Community Planning Partnership has the capacity to continue to improve and to address the points for action highlighted in this report.

4.7. Care Inspectorate Homecare

4.7.1. The Care Inspectorate conducted inspections on our Homecare Services with the result that two areas (Hamilton and Rutherglen/Cambuslang) received poor inspections and an Improvement Notice for the Hamilton Service. This caused the Partnership to self-impose temporary moratoriums on the two localities. The period of moratorium gave time to evaluate what was working well and what needed to be improved while still ensuring that all people who required a homecare service and all staff were still supported to the highest possible standard. We continued to work closely with the Care Inspectorate and our staff to make improvements.

4.7.2. Hamilton Update October 2020 - Following reinspection and reflecting the work and commitment of staff, the Improvement Notice has been lifted for Hamilton and the care Inspectorate have regraded the service to:

Quality Care and Support – Grade 3

Quality of Staff – Grade 2

Quality of management and Leadership – Grade 3

4.7.3 Rutherglen Update November 2020 – Since the CSWO Report was submitted the Care Inspectorate have also reinspected the Rutherglen service and the Care Inspectorate have reported their assurance in the running of the service and have also regraded to service. The verbal feedback to date has been that the grades will move to 4's across the board. The final report is yet to be published however the progress has been recognised in relation to the improvements in this service.

4.8. COVID-19 Implications for services

4.8.1. Through the initial period of 2020, the Resource responded to the Global Pandemic, ensuring that essential services could be delivered safely. SWR continues to address emerging challenges presented by COVID 19. All working arrangements which are in place to deliver services during this public health crisis will be reviewed on an ongoing basis as we begin to recover.

4.8.2. Our priority is to ensure effective delivery of critical services to protect vulnerable children, young people and adults in our communities, complying with statutory legislation.

4.8.3. The introduction of agile working and the use of key IT solutions such as Microsoft Teams and Near Me have been invaluable to service delivery and to the recovery process.

4.8.4. The exponential rise in the use of IT has also provided a safe and effective method of continuing assessment and treatment where physical contact has not been essential. It has been of particular value where families have been able to be included in care discussions remotely. Many services are actively redesigning previous care pathways to include video consultations as a standard where possible.

- 4.8.5. Services have continued to be delivered to those assessed as most at risk with our focus on public protection. Adult Support and Protection and Child Protection Case Conferences and key meetings have been arranged virtually together with face to face contact where necessary.
- 4.8.6. Illustrated are some of the challenges that require strategic and operational responses including the projected rise in older people's population and the health of South Lanarkshire's residents (being below the Scottish average as a whole). Against this backdrop, the demand for Social Care Services continues to be high.
- 4.8.7. Also detailed is SWR role in service provision including, in addition to in-house services, commissioned and contracted services provided by the Independent, Voluntary and Private Sector.
- 4.8.8. Also detailed are some of the financial pressures that SWR has managed over 2019/2020 and the Resources' risks as highlighted in the Resource Risk Register.
- 4.9. Service Quality and Performance including delivery of statutory functions
- 4.9.1. Service performance and monitoring are intrinsic to the CSWO's role. The CSWO is active in overseeing the quality of services and is responsible for ensuring that staff are appropriately supported to carry out their professional duties.
- 4.9.2. This section highlights the range of performance measures for which the CSWO has responsibility, for example, taking forward recommendations from inspection reports, Care Inspectorate evaluations, quarterly reporting through the Council's IMPROVe system and case file audit activity.
- 4.9.3. The CSWO is also responsible for the delivery of statutory functions and the range of this responsibility is also included, for example risk management, Guardianship Orders and effective governance arrangements for the management of Adult Support and Protection and Child Protection.
- 4.10. Workforce
- 4.10.1. Social Services is a diverse sector in terms of job roles, career pathways and service structures. The CSWO has a key leadership role in relation to workforce planning and development, from both a local authority and partnership perspective.
- 4.10.2. This section details the CSWO responsibility and activity in ensuring that SWR staff and that of external providers adhere to the standards of conduct and practice within the sector and are equipped to support service users.
- 4.11. Performance, Data and Trends
- 4.11.1. Some additional information laid out in charts and tables have been incorporated into this 2019/2020 Chief Social Work Officer Report to give an understanding of trends over time across a range of service areas.

5. Employee Implications

- 5.1. There are no employee implications associated with this report.

6. Financial Implications

- 6.1. There are no financial implications associated with this report.

7. Climate Change, Sustainability and Environmental Implications

- 7.1. There are no implications for climate change associated with this report.
- 7.2. There are no sustainable development issues associated with this report.
- 7.3. There are no environment Implications associated with this report.

8. Other Implications

- 8.1. There are no risks associated with this report.
- 8.2. There are no sustainable development issues associated with this report.
- 8.3. There are no other issues associated with this report.

9. Equality Impact Assessment and Consultation Arrangements

- 9.1. This report does not introduce a new policy, function or strategy, or recommend a change to existing policy, function or strategy and, therefore, no impact assessment is required.
- 9.2. There is no requirement for consultation in respect of this report.

Val de Souza

Director, Health and Social Care

20 November 2020

Link(s) to Council Values/Ambitions/Objectives

- ◆ Improve later life
- ◆ Deliver better Health and Social Care outcomes for all

Previous References

- ◆ Social Work Resources Committee 11 December 2019

List of Background Papers

- ◆ Annual Report – Chief Social Work Officer, South Lanarkshire Council 2019/2020

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

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Annual Report
CSWO Report
South Lanarkshire Council
2019/20

	South Lanarkshire CSWO Report 2019/20	
Section	Title	Page Numbers
	Introduction	
1.	Governance and Accountability Overview of governance arrangements Role of CSWO	
2.	Service Quality and Performance Overview of how services are performing – Children, Adults and Criminal Justice Ability to deliver statutory functions and Key risks to delivery	
3.	Resources Financial Pressures Financial modelling for service delivery	
4.	Workforce Workforce Planning – staffing and recruitment issues Workforce development	
5.	Covid-19 Early indications of impact on workforce and services Key priorities for recovery	
	Appendixes 1. Care Inspectorate – Inspection Reports 2. Performance Data and Trends	

Introduction

The aim of South Lanarkshire [Social Work Resources](#) is to promote social welfare and provide effective assessment, care and support to meet the needs of vulnerable people in South Lanarkshire. We are committed to providing responsive and accessible services with defined standards for service provision and to supporting local people to maximise their potential, maintain their independence and improve outcomes.

The requirement for every local authority to appoint a professionally qualified Chief Social Work Officer (CSWO) who must be registered with the Scottish Social Services Council (SSSC) is contained within Section 3 of the Social Work (Scotland) Act 1968. The role of the CSWO is to provide professional advice and guidance to local authorities, Elected Members and Officers in the provision of commissioned and directly provided Social Work Services. The CSWO also has responsibility for overall performance improvement and the identification and management of corporate risks, insofar as these relate to Social Work Services.

The CSWO is also required to prepare an annual report of activity to the Chief Social Work Advisor for Scotland. A summary report is also published annually by the Scottish Government to aid learning and the sharing of information nationally.

All local councils have a duty under the Social Work Scotland Act 1968 to assess a person's community care needs and where appropriate, to arrange any services they may require. South Lanarkshire Social Work Resources, in partnership with community planning partners, voluntary organisations and independent providers, offer a range of services designed to enable, support, improve and protect the health and social care of those using our services. Assessments are modelled on the co-produced assessment directed by our Self Directed Support assessment tools, offering individuals choice and control over their personal outcomes.

SDS is Scotland's mainstream approach to social care. The Social Care (Self-directed Support) Scotland Act 2014 aims to put the person at the centre of the support planning process enabling them and their carers and families to make informed choices about their social care support they require and how it is delivered. It gives the individual better control of their care through 4 funding options.

In addition to assessment, Social Work Resources commission a wide range of local private, not for profit and voluntary sector providers together with a range of specialist services from out with the South Lanarkshire area. There are 40 independent care homes for older people, 13 care homes for adults with a range of support needs and a small number of children's care homes in the council area. Additionally, we have a range of Care at Home, Day Care and Supported Living providers operating across our localities. Throughout 2019/20 Social Work Resources activities included:

- providing assessment, specialist assessment and support
- providing targeted services for vulnerable children, young people, adults and their carers
- providing care at home
- day, respite and residential support services
- supervision and monitoring in the protection of vulnerable children and adults and wider public protection services

- working with those subjects to requirements within justice and mental health legislation

As CSWO for South Lanarkshire I will continue to progress our priorities of:

- Public Protection for Children and Adults
- Multi-agency Public Protection Arrangements
- Integrated Joint Board and development meetings for Health and Social Care Integration
- Social Work Governance Group/Clinical Governance Group
- Care Facilities Improvement Plans
- Health and Care Standards
- Data Protection, GDPR
- Procurement of Social Care Services
- Eligibility Criteria/Prioritisation
- Self-Directed Support (SDS)
- Community Justice
- Children and Young Peoples Legislation
- Carers (Scotland) Legislation
- Care Inspectorate announced and unannounced inspections and follow up Improvement Action Plans
- Developing and supporting our profession and workforce

This report gives a background to the work and activity for financial year 2019 – 2020 however with the pandemic impacting on services early 2020 reference is also made at the end of the report to the impact this has had since March 2020.

The ongoing development of Social Work Services and our achievements rely on the continued commitment of our staff and partners, both within the council and the local community. The support and commitment of the Council's Elected Members across all parties, who have been advocates for the service, is also recognised. I would like to thank everyone for their efforts during 2019-20 and I look forward to working together during the year ahead.

Liam Purdie
Chief Social Work Officer
28 August 2020

1. Governance and Accountability Arrangements

1.1 Community Planning Partnership

1.1.1 South Lanarkshire Council is part of the South Lanarkshire Community Planning Partnership (CPP) and the Partnership Board has a key role in progressing Community Planning in this area.

Board partners include

- NHS Lanarkshire
- Police Scotland
- Scottish Enterprise
- Scottish Fire and Rescue Service
- Scottish Government
- Skills Development Scotland
- Strathclyde Partnership for Transport
- University of the West of Scotland
- VASLan (Community and Voluntary Sectors)

The agreed vision for Community Planning in South Lanarkshire is:

"To improve the quality of life for all in South Lanarkshire by ensuring equal access to opportunities and to services that meet people's needs".



1.2 South Lanarkshire Council

- 1.2.1 There are 64 Council Members representing the 20 multi-member wards across South Lanarkshire. The current composition of the Council is:

Scottish Labour Party	Scottish National Party	Conservative /Unionist	Scottish Liberal Democrats Party	Independent	Independent Group
17	25	12	3	1	6

- 1.2.2 The Council's Vision to **“improve the quality of life of everyone in South Lanarkshire”** remains at the heart of the Council Plan and along with our Values, influences everything that we do. Our five Ambitions circle, shown below, links our Vision and Values to our 11 Objectives and to work in our wider communities and with public partners.
- 1.2.3 The wheel diagram below is designed to show how our six core Values, five Ambitions and 11 Objectives interact with one another. For example, giving our children the best start in life has links to wellbeing, opportunities for early learning and consequent improvements in achievement and attainment and the option to develop skills for learning, life and work.



- 1.2.4. Social Work Resources is one of five Council Resources, the others being: Community and Enterprise Resources; Finance and Corporate Resources; Education Resources and Housing and Technical Resources. All Resources work together in support of the Council Plan - [Connect 2017-22](#).

Each Resource prepares an annual Resource Plan which details the work, achievements and ongoing performance activity. Here is the link to [Social Work Resource Plan 2019-20](#)

1.3 Social Work Resources

- 1.3.1. The principal role and purpose of the Social Work Service is contained within the Social Work (Scotland) Act 1968, which gives local authorities the responsibility of “promoting social welfare”. The Social Work Service has a statutory duty to provide care and protection to the most vulnerable people across South Lanarkshire. A consequence of this is that many of our service users do not engage with us on a voluntary basis.
- 1.3.2 Social Work Committee deals with the majority of the business relevant to the CSWO role as well as maintaining strong links to other key member groups including relevant audit, scrutiny, equality, and member officer working groups. The Committee consists of twenty six elected members.
- 1.3.3 The CSWO provides professional advice directly to the Chief Executive of South Lanarkshire Council on statutory service delivery and on matters relating to the profession and the CSWO role is understood and valued within the council and partnership. This professional advice and guidance also extends to local elected members, officers within other Resources of the Council and to senior staff within partner agencies. There is a clear line of accountability including support and challenge that is understood by the Council Leader, the Chief Executive and the five Directors of the Corporate Management Team.
- 1.3.4 The CSWO is a member of a number of influential decision-making forums through which they have a significant leadership role in shaping the overall strategic direction of services. Key forums which the CSWO attends and influences include:



1.3.5 The CSWO holds the position of the Head of Children and Justice Services, is a member of the Senior Management Team (SMT) and a standing member of the Integration Joint Board (IJB). The Board has eight voting members, four of whom are elected Council Members and four NHS Lanarkshire Board non-executive members. In addition, the Board has representation from the third sector, independent sector, service user and carers and the trade union. Child and Family and Justice Social Work Services are not currently included in the South Lanarkshire Integration scheme and lie outside the Health and Social Care Partnership. A Performance and Audit Sub-Group assists with the governance and accountability arrangements of the Board. The key areas of work which are led by the IJB relate to:

- ◆ the approval and implementation of the strategic commissioning plan
- ◆ the establishment of locality planning
- ◆ governance and accountability arrangements
- ◆ the production of an annual performance report

1.4 Health and Social Care Partnership (H&SCP)

- 1.4.1 Within the South Lanarkshire Health and Care Partnership, the Director, Health and Social Care has the additional role of the Executive Director Social Work Resources. They cannot hold the office of CSWO.
- 1.4.2 Within South Lanarkshire locality planning areas develop local profiles and identify local priorities which in turn shape commissioning intentions and the next iteration of the Strategic Commissioning Plan.
- 1.4.3 There is recognised governance and decision-making arrangements in place to support the development, design and implementation of health and social care services in line with the ambitions outlined in the Strategic Commissioning Plan. Below is the structure chart that the Health and Social Care Partnership operate within.

Social Work Resources/Health and Social Care Organisational Structure

Director of Health and Social Care

Head of Health and Social Care x 2

2193 Staff
(Whole Time Equivalent)

Each Head of Service is responsible for delivering social work services for adult and older people in 2 localities including:

- Care and protection of vulnerable adults and children
- Assessment
- Physical disability and Learning disability
- Mental Health Services
- Drug & Alcohol Services
- Carers support services
- Care home services
- Care at home services
- Health improvement services
- Day services
- Respite services
- Occupational therapy services
- Reablement services – equipment and telecare/health
- Commissioning of services
- Integrated Community Support Team
- Palliative care
- Primary care

Chief Financial Officer

The Chief Financial Officer is responsible for monitoring and regulating the financial performance of the resources available to the Integration Joint Board. This post covers North and South Lanarkshire IJBs

Head of Commissioning and Performance

244 Staff
(Whole Time Equivalent)

Commissioning of Services

- Strategic planning
- Performance Management
- Property and assets
- Information Technology
- Communication
- Complaints
- Money Matters
- Health Improvement
- Winter Planning

Nurse Director

Community Nursing : 406 staff

Children's Services : 159 staff

Specialist and hosted services: 134 staff

Associate Nurse Directors

- Health Visiting
- Community Nursing
- Hosted Services (Palliative Care, Health and Homeless, Out of Hours, Primary Care Improvement Plan)

Medical Director

Associate Medical Director and 4 locality lead GPs

Primary Care Improvement Team (5TE) – Pan Lanarkshire

Professional input and liaison for Primary Care services, all GP practices, Community Pharmacies, Opticians Dentists pan Lanarkshire

Head of Children and Justice Services / CSWO

536 Staff
(Full time Equivalent)

- Care and protection of children and young people
- Assessment
- Children's Houses
- Fostering and Adoption Services
- Corporate Parenting
- Getting It Right For Every Child
- Family support
- Throughcare and Aftercare
- Youth Justice
- Learning disability
- Counselling
- Working with offenders
- Community Payback
- Restorative justice
- Multi Agency Public Protection Arrangements (MAPPA)
- Court services
- Drug Testing and Treatment Orders (DTTO)
- Substance misuse services
- Gender based violence
- Justice Throughcare

2 Service Quality and Performance

2.1 Service

2.1.1. Integration of Health and Social Care Services

In line with the statutory requirements of the Public Bodies (Joint Working) (Scotland) Act 2014, the IJB's second **Strategic Commissioning Plan 2019-2022** (SCP) was approved in March 2019. The plan provides a direction of travel which responds to:

- Public and key stakeholder consultation and engagement activity
- Strategic needs profiling of the population of South Lanarkshire
- Delivery of the 9 National Health and Wellbeing Outcomes
- Strategic aspiration of the Scottish Government to shift the balance of care through the provision of services which are designed and delivered in the person's home and community

Social Work Resources continues to play a key role in operationally delivering a number of the 13 strategic priorities identified within the plan and supporting the most vulnerable people who may be at risk of harm.

Engagement with service users and the community is strong and within the SLHSCP there is a Building and Celebrating Communities (BCC) programme which involves working with communities to identify what they can do for themselves and where they need health and social care to be involved. This helps drive forward the partnership's vision "Working together to improve health and wellbeing in the community – with the community." It is about improving people's experience of health and social care. It is also about helping people living in their communities to live well, to know how to enhance their health and wellbeing and for communities to recognise their strengths, their dependencies and interdependencies.

Health and Social Care Forum

Commissioned by the SLHSCP, the South Lanarkshire Health and Social Care Forum provides a key route for community participation and engagement. The forum is an independent group of community volunteers who work to engage health service and social care users, carers and communities in improving local health and social care services. They support wider public involvement in planning and decision-making about local health and social care services, and keep local people informed about the range and location of services. It has four local forums in line with locality areas.

Investing to Modernise Care Facilities

South Lanarkshire Council have invested 18M from the Capital Programme to modernise the current delivery model of residential care. This model of care will enhance our ability to meet changing care needs and respond to what people have told us, particularly in light of significant population change over the last 20 years. This approach to care offers the people of South Lanarkshire more choices and options to be maintained at home and in the community.

Planning permission was granted in December 2019 for a new care facility to be built with four distinct elements including:

- 20 transitional care apartments for adults and older people. Transitional care offers short term support with the objective of allowing people to return home following a period of ill health or crisis. Transitional care can also be preventative, preventing hospital admission.
- A Centre of Excellence specialising in training and development of health and social care staff. Although unique to the proposed Hamilton/Blantyre facility, this will support all localities.
- A community-facing hub featuring: a café; demonstration site showcasing our Telehealth technology and how that can improve lives; guidance and support for unpaid carers; linkage and signposting into a raft of community-based voluntary and third sector support
- 20 technology enabled homes for adults and older people designed and equipped with technology to support older people requiring a higher level of support and those with complex disabilities to live independently in a family home rather than moving to residential care

Coronavirus (COVID-19) which impacted significantly on the elderly and vulnerable population of South Lanarkshire affected the site start date as the Partnership refocused its resources on key activities, supporting the community during this time. However, work is now well underway, and it is anticipated that the new development will be completed in the summer of 2022.

Eligibility/Prioritisation Framework – in line with national guidance, The Eligibility/Prioritisation Framework was implemented on 1 April 2019 and allows the most vulnerable to be prioritised through an equitable allocation of resources which stratifies four levels of needs and risks (Low, Moderate, Substantial and Critical).

2.1.2. Carers (Scotland) Act 2016

The Carers Act Programme Board has been replaced with the Carers Partnership Group from early in 2019. This group is now taking forward the four priorities identified in our Carers Strategy 2020/2022:

- Priority 1 - carers are identified, involved and valued
- Priority 2 - carers have choice and control, allowing them to balance their own life with their caring role
- Priority 3 - carers can access the right support and services at the right time
- Priority 4 - carers have a positive experience of being a carer

Publication of a short breaks statement, Carers local eligibility criteria and information resources are all complete and publicly available.

New services have also been commissioned in order to support both adult and young carers. The respective providers are Lanarkshire Carers Centre (Adult Carers) and Action for Children (Young Carers).

Further work required to develop specific parts of the Carers Scotland Act in relation to hospital discharge will be taken forward in collaboration with our new providers.

2.1.3. Fair, healthy and sustainable food system

Social Work Resources has a key role to play in the implementation of the Food Strategy with the provision of support to people so that they can look after and improve their own health and wellbeing in particular in later life. The Resource will also contribute to the objective of reduction of food insecurity and poverty with the provision

of services and support to vulnerable children, young people and adults who could be facing this type of challenge. More specifically, the provision of Good Food in Care Homes for older people and children and in Day Care Centres will directly contribute to the objectives of the Food Strategy.

2.1.4. Mental Health Services (Mental Health (Scotland) Act 2015)

It has taken just under a year to develop our strategy, 'Getting It Right for Every Person' (GIRFEP) A Mental Health and Wellbeing Strategy for Lanarkshire (2019-2024). This is a shared vision developed by Health and Social Care North Lanarkshire (H&SCNL), NHS Lanarkshire (NHSL), South Lanarkshire Health and Social Care Partnership (SLH&SCP), members of the public, third sector organisations, and staff groups.

The five-year strategy for all age groups is informed by the identified needs of the population, service users, people with lived experience and by a range of national policies and strategies to reflect the needs of people living in Lanarkshire. This inclusive approach to developing and implementing the strategy will ensure Lanarkshire becomes a place that champions and promotes good mental health for all.

As GIRFEP is implemented, people in Lanarkshire will see changes and improvements to the way they access mental health support and services, new ways of working, observe new staff roles, an end to mental health stigma and discrimination, and accelerated prevention and early intervention.

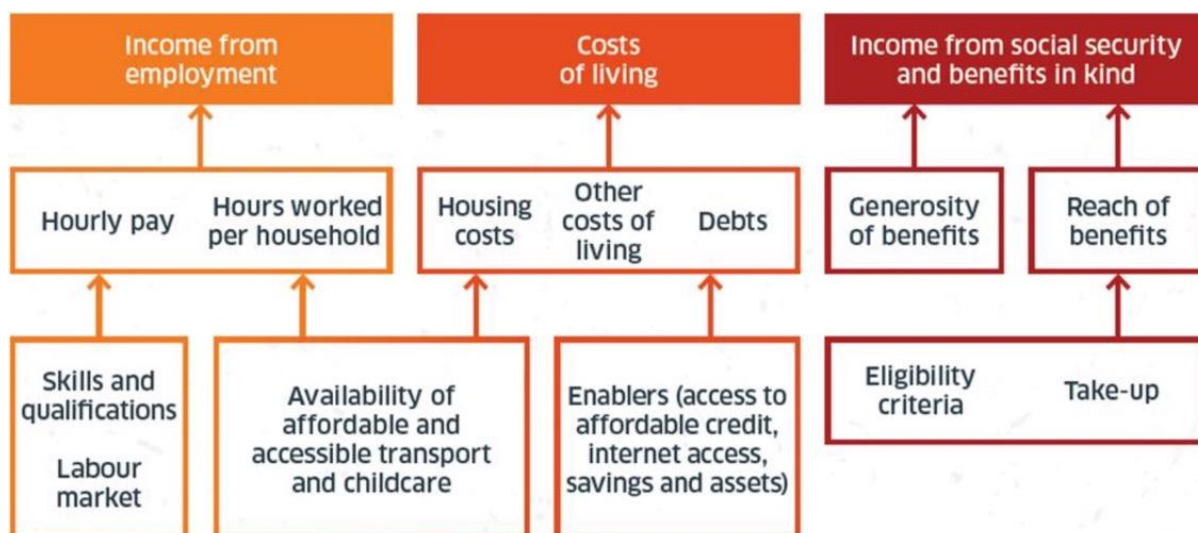
2.1.5. Child Poverty Act 2017

The Child Poverty (Scotland) Bill was introduced in the Scottish Parliament on 9 February 2017 with Royal Assent on 18 December 2017. It sets out child poverty targets and places a duty on Scottish Ministers to ensure that those targets are met by March 2030. Interim targets are to be met in the financial year beginning 1 April 2023.

The Act details the definition of: relative, absolute, combined low income and material deprivation, and persistent poverty. It also places a duty on local authorities and health boards to report annually on activity to contribute to reducing child poverty.

A Child Poverty Action Report Working Group is driving forward work around the Child Poverty Action Report. The group have agreed the following drivers of child poverty as the organisers of the planned report as outlined in the national Tackling Child Poverty Delivery Plan:

- Income from Social Security and benefits in kind
- Income from employment and
- Costs of Living



The Child Poverty Action Plan includes indicators relevant to the Children's Services Plan e.g.

- Children (under 20) in Low Income Families
- Uptake of funded and early learning and childcare entitlement
- Percentage of school leavers into positive destinations
- Free School Meals (FSM) applications

2.1.6. Youth Justice – Whole Systems Approach

South Lanarkshire Council have committed to reinvigorating and extending the Whole System Approach where possible. Scottish Government funding has been used to recruit a temporary Whole System Approach (WSA) Coordinator who will support improvements in all areas of introducing a Whole System Approach.

Structured Sentencing Court for Young People (SSCYP)

The Structured Sentencing Court Pilot has now ended. The final evaluation from the University of the West of Scotland in July 2019 found 84% of young people completed a Structured Deferred Sentence (SDS), which compares well against 77% for deferred sentencing and 40% for community payback orders for under 18s. The re-offending rates were low with 91% of the cohort not re-offending in South Lanarkshire during their engagement with the pilot indicating improved outcomes for young people and highlighting the potential that a community-based disposal such as SDS can have.

The success of the (SSCYP) has led to a decision being reached by the court and social work services to sustain this initiative for young people aged 16-21 years.

Extension of Court Support and Bail Supervision

Justice services have set up a steering group to develop court support and explore strategies to extend the use of Bail supervision. One area being worked on is the child's plan for young people under the age of 18 years. The Child's plan will be informed by the Centre for Youth and Criminal Justice (CYCJ) good practice guide and will be made available to the court to offer information about suitability for bail supervision and a plan that can be put in place. The service will be particularly aware of young people who have been formerly looked after and will ensure connections are made with their throughcare support team.

The plan also involves improving connections with other housing and support agencies to enhance meaningful connections for young people appearing from custody.

2.1.7 Day Care

The annual day care for older people service user survey was undertaken anonymously. This was issued in paper format to all service users and was also available electronically. Advocacy support was offered help to individuals who needed assistance to complete the survey. The survey was completed by 170 day care service users and focused on: communication and support planning, day care staff and the overall day care service.

- 92% of service users rated their support plans as excellent, very good or good
- 97% of service users said they were confident staff are aware of their health and wellbeing needs
- 96% of service users said their personal care needs were met in a respectful and dignified manner
- 92% of service users said the transport was excellent, very good or good
- 99% of service users said the care workers are excellent, very good or good

2.1.8 Mind of My Own

Mind of My Own became live in South Lanarkshire on 4 February 2019. It is a web application that gives young people an instant and convenient way to express their views, wishes and feelings and provides social workers, following training, with a smart way to record them. As a communication tool it guides conversation and helps to gather a young person's views. Once completed it is turned into a pdf statement of which can be shared with workers. It can be used for meetings, reviews, to share good news and resolve problems. A total of 429 Mind of My Own statements were received from children and young people from February 2019 to February 2020 and children and young people have used the range of scenarios available to them, to inform staff about all areas of their lives.

2.1.9 Champions Board

Champions Boards support young people who are care experienced to work alongside those who make decisions about the care system, with the aim of ensuring that services are tailored and responsive to their needs. By building relationships with their corporate parents' young people are empowered to set the agenda, learn leadership skills and advocate on behalf of their peers.

The Champion's Board implementation group undertook a very successful 'soft' launch on 10th December 2019. Over 70 participants including young people, parents and carers, elected members and staff from South Lanarkshire Council and representatives from Health, Education and the Third Sector attended. They came together to listen to presentations from Falkirk Champions Board, local services and care experienced young people. Those attending were encouraged to complete statements of 'what matters to me' or pledges of future support. Students from South Lanarkshire College provided a photographic record of the evening. The feedback from this event will inform the future development of the Board.

2.1.10 Telecare and Video Conferencing

Telecare can offer many digital solutions which can enable people to remain in their own homes as safe and independent as possible. The aim is to ensure all

assessments of care and support needs will consider the option of technology which could improve the quality of life for an individual. For example: the ability to choose when to turn on/off lights, receive prompts or reminders and reassure family that help can be summoned quickly if someone is at risk can support their own lifestyle choices.

South Lanarkshire Integrated Joint Board Website

South Lanarkshire Health and Social Care Partnership has a new user-friendly website. It was set up to provide the public, professionals and partners with a wealth of information, news and essential links.

The website which includes various films, exemplifies how the HSCP are supporting people across South Lanarkshire and how they are being empowered and supported to make a real difference to their own lives.

There is information on how to get involved in shaping local health and social care services via South Lanarkshire Health and Social Care Forum and detail on the services run by the partnership.

The website links to partner organisations, and how to get in touch, as well as all relevant papers and documents relating to the South Lanarkshire Integration Joint Board.

www.slhscp.org.uk

Home Care Staff app

The Home Care Service is a vital service amid increasing demands as people live longer lives. Technology is playing a vital role in the delivery of the frontline service through the rollout of the Home Care app to all Home Care staff, whilst continuing to ensure our approach is very person-centred.

The smartphone app now sets out personalised schedules at workers fingertips and they can be updated instantly and as required. The app sets out the day's workload – it tells home care staff who they have got to see, what time they have got to see them and sets out what tasks the home carer needs to carry out. It also provides real-time updates on the home carer's working day to central offices, including if there is any issues or challenges with any service users that creates a delay in the schedule.

Digital Platform to Health and Social Care Services - A working group has been established with regards to take forward a customer facing platform to allow access and information to a range of supports and assistance.

2.1.11 See Hear – (Sensory Impairment Framework for Scotland)

See Hear is the National Sensory Impairment Strategy for Scotland, the first of its kind in the UK (covering 2014-2024). It is a rights-based approach with equality of provision, support and access to services at its core. The framework has seven key recommendations, which aim to improve the lives of children and adults with a sensory impairment in Scotland.

A strategic action plan is being taken forward via a multi-agency working group (with sub-groups progressing areas of work). Basic sensory checks guidance is being issued to all localities to help inform local care planning. Deaf and sight loss awareness training modules have been developed and are now available via online learning modules for all staff. Audiology awareness and hearing aid care and

maintenance training has been developed and has already been rolled out to over 3,000 staff in SLC care homes and acute hospital wards.

2.1.12 Joint Inspection of Children's Services 2019

The Children Services Partnership within South Lanarkshire was inspected by the Care Inspectorate in 2019 with on-site visits in late October and early December. The Care Inspectorate's recently reviewed and updated methodology enabled self-evaluation and inspection activity to focus on Children in Need of Care and Protection.

The Care Inspectors undertook case file reading of core records from Police Scotland, Health, Education and Social Work in respect of 45 Child Protection cases, with Social Work - Lead Professional records read for the remainder of 64 Corporate Parenting cases.

As part of their focus on engagement there were a series of surveys issued by the Care Inspectorate to scope stakeholder's experiences including:

- ◆ a survey distributed to staff working with children and young people in need of care and protection and which 91% of the staff team responded to
- ◆ a children and young people's survey
- ◆ a parent survey

The Inspection Team were also offered 52 different opportunities to engage directly with children, young people and parents/carers which allowed them to understand the impact of our services/intervention on their lives. In addition, the Inspectors met with front line workers, front line managers and senior officers across the Children's Service's Partnership (including Elected Members) - entailing over 350 staff engaging directly with the Inspection Team.

The Inspectors posed five inspection specific questions:

1. how good is the Partnership at recognising and responding when children and young people need protection?
2. how good is the Partnership at helping children and young people who have experienced abuse and neglect stay safe, healthy and well and recover from their experiences?
3. how good is the Partnership at maximising the wellbeing of children and young people who are looked after?
4. how good is the Partnership at enabling care experienced young people to succeed in their transition to adulthood?
5. how good is collaborative leadership?

Their Inspection Report was subsequently published on 16 June 2020. [JICS South Lanarkshire](#)

The Care Inspectorate recognised the significant good work that is being done in South Lanarkshire whilst noting that work already begun in corporate parenting and for care leavers requires further time to come to fruition.

The Care Inspectorate in its conclusion reported that: The Care Inspectorate and its scrutiny partners are confident that South Lanarkshire Community Planning Partnership has the capacity to continue to improve and to address the points for action highlighted in this report.

2.2 Service Activity

2.2.1 Adult and Older People Services

Adult and Older People Services work with other Council Resources as well as partners in health, the voluntary and independent sector. Adult care staff work in local Social Work offices, in joint community based teams, in day support centres, local communities and in people's own homes. Staff fulfil duties under the law and the Mental Health (Care and Treatment)(Scotland) Act 2003 and Adults With Incapacity (Scotland) Act 2000 play an important role in guiding how some services are delivered.

Older people services provide support in different ways. Assessment and care management services based in local offices assess the care needs of service users and their carers and help plan services to meet those needs. Care at home services and day care services provide a range of support designed to help people remain as independent as possible within the community.

Care home care is available for individuals who need support in such a setting on a short or long term basis. Social Work also fund a wide range of commissioned services provided by the independent, voluntary and private sector.

Adult and Older People's services carried out a range of activity throughout 2019-20 examples of which include

- Working with 2,436 people to promote independence as part of the Supporting Your Independence approach
- Providing 14,199 items of equipment to people to enable them to stay at home
- At any time, supporting up to 2,200 older people in long term care placements
- Our Adult Support and Protection activity showing increased demand this year, for adults under 65 we supported 939 inquiries which lead to 394 investigations and for adults 65+ we supported 1953 inquiries leading to 925 investigations
- For local authority welfare guardianship orders, visits being maintained at a good level over the course of the year at 93% within timescale
- For private welfare guardianship orders, demand remained high; however due to unprecedented times with the COVID-19 outbreak and social distancing measures during the final quarter of 2020, the number of visits completed within timescales was 86%
- supporting 1,085 people with a learning disability to live in their own communities
- Working with 5,405 adults with a physical disability who were referred to the physical disability teams
- Working with 788 individuals with a mental health problem who were referred to Community Mental Health Teams

2.2.2 Children and Justice Services

Children and Justice Services work to provide family support to promote the welfare and development of children, young people and their families. Children's services provide support and care for children, young people and their families so that, wherever possible, young people can remain with their own families in their own communities.

Social Work Resources has a duty to protect children. Whilst this is a shared responsibility with other agencies and the community, Social Work has particular responsibility to investigate allegations of child abuse. These responsibilities are carried out in the framework of jointly agreed child protection procedures.

Justice staff work within the context of a Community Safety and Social Inclusion Policy to provide services that enable people to participate effectively in response to the problems and consequences of crime. Justice offers a wide range of services in courts, local offices and specialised teams to people referred by the courts, prisons and other agencies. Staff work with offenders to reduce their criminal behaviour and promote community safety. This is done by helping prisoners resettle following a period in prison, addressing responsibility for offending, providing programmes that offer realistic alternatives and raising awareness about how offending affects victims

Children and Justice services carried out a range of activity throughout 2019-20 examples of which include

- Protected children through 540 child protection investigations. On 31 July 2019, there were 118 children on the Child Protection Register
- Prepared 473 reports for children who were supported through the Children's Hearing system
- As of 31 July 2019, 725 children were looked after by the council. Of these children: 438 or 60% were looked after at home; (256 of these with friends and relatives); 214 or 30% were looked after by foster carers/prospective adopters. 73 or 10% children were in residential and/or secure school accommodation.
- Supported 972 people to complete a Community Payback order, including providing the opportunity for personal development or learning opportunities
- 571 individuals were supported by substance misuse services, following a referral for alcohol or drug misuse
- Prepared 1,489 reports for the Courts

2.2.3 Performance and Support Services

Performance and Support Services support the work of all other services within Social Work Resources and embraces a range of business support functions and links with: IT; Procurement; Finance; Personnel; Workforce Planning; Corporate Governance; Information Governance; and Asset Management. Administration Services providing effective administration and communication support to all the service areas across the Resource. Money Matters Advice Service offers benefits and money advice. A dedicated team of staff provides a range of services and support in the areas of performance reporting and statutory planning, inspection, regulation, risk management which involves the provision of a range of information which meets the following resource planning requirements, Scottish Government returns and statutory performance indicators; information to support planning, for example demographic profiles and trends, management information requests as required by services and business needs.

2.2.4 Activity across all service areas included

- During the past year Money Matters Advice Service has helped residents of South Lanarkshire to claim over £33.2 million in benefits and over £4.7 million in backdated payments. As well as this, Money Advisors have helped people to deal with over £8.6 million debt
- Support to 4,011 carers through our two carers' organisations (Lanarkshire Carers Centre and South Lanarkshire Carers Network) in 2019-20

2.3 Delivery of Statutory functions

- 2.3.1. The CSWO is active in overseeing the quality of services and is responsible for ensuring that social work staff are appropriately trained and supported to carry out their professional and statutory duties. This is undertaken in a number of ways

including; regular meetings between the CSWO and Senior Managers to discuss performance and other operational issues; fulfilling corporate governance requirements through the annual Internal Statement of Assurance and overall Governance Assessment Framework with the agreement of the Chair of the Social Work Committee.

- 2.3.2. All Social Work staff working with service users are bound by a professional Code of Conduct which is governed by the Scottish Social Services Council (SSSC). South Lanarkshire's Council's Code of Conduct for Social Work staff has drawn on this framework; all staff, regardless of qualification agree to adhere to specific professional codes that guide their practice.
- 2.4.3 SDS: a co-produced assessment is operational across Adult and Older People's Services and the Child's Plan meets the statutory requirements of SDS. A Carers' Support Plan and Young Carers Statement are in operation.
- 2.3.4. The Mental Health Officer Award is funded on an ongoing basis to enable the council to meet legislative obligations under the Adults with Incapacity (Scotland) Act and the Mental Health (Care and Treatment) (Scotland) Act. A Staff Development Officer for Mental Health Services who is a Mental Health Officer provides support to meet the learning and development requirements within this service.
- 2.3.5 The CSWO has a role in ensuring Significant Case Reviews and Significant Incident Reviews take place as required. Significant Case Reviews (SCR) are published on South Lanarkshire Council's Adult Protection Committee or Child Protection Committee's website. Learning from SCRs is crucial for staff across the Resource. Actions are agreed and taken forward as a partnership as a result of reports published.
- 2.3.6. Analysis and management of information relating to Guardianship Orders; complex balance of need, risk and civil liberties in accordance with professional standards, for example in relation to Adult Support and Protection and Child Protection guidelines; and decisions relating to the need to place children in secure accommodation and the review of such placements all fall to the CSWO.
- 2.3.7 The CSWO actively promotes continuous improvement and evidence-informed practice, including the development of person-centred services that are focussed on the needs of the service-user. The CSWO also oversees the quality of practice learning experiences for Social Work students and effective workplace assessment arrangements in accordance with the SSSC Code of Practice. South Lanarkshire is a member of Learning Network West and cohorts of students are provided with placements annually across the Social Work Service. Each placement is supported by a Practice Teacher identified from the South Lanarkshire Social Work Services workforce.
- 2.3.8. The CSWO has responsibility to respond to Care Inspectorate reports and findings from local and national activity, addressing the requirements of internal and external audit and reporting on progress against outcomes and follow-up actions from this activity. This includes discussion with the Chair of Social Work Committee.
- 2.3.9 The CSWO is represented on Social Work Scotland (SWS). SWS is the professional leadership body for the Social Work and Social Care professions. It is a membership organisation which represents Social Workers and other professionals who lead and support social work across all sectors. Membership is included from NHS, local authorities, third and independent sectors. SWS effectively do two things: (1)

influence and advice on the development of policy and legislation; (2) support the development of the Social Work and Social Care professions.

2.4. Performance monitoring

- 2.4.1. Service quality, performance management and reporting are intrinsic parts of the duties of the CSWO. Social Work Resources utilise a quarterly performance and monitoring system which allows services within the Resource to assess performance against key Council and Social Work Resources objectives. Performance information is then used to inform the annual Social Work Resource Plan 2019 - 20 highlighting areas of progress and approaches to continuous improvement. The Resource Plan also identifies those areas of action where performance requires to be measured for example, Adult Support and Protection, AWI, Child Protection.
- 2.4.2 A quarterly performance management meeting takes place in-line with the reporting timescales of the quarterly report. Examples of performance activity, which are discussed include findings from case file audit activity, self-evaluation and the greatest Social Work risks and financial performance.
- 2.4.3 The performance scorecard within the Resource Plan has a number of measures which relate to the Council Plan. These are formally reported to the Council's Executive Committee twice a year. Any measures which have amber or red progress status are discussed within the Council's Scrutiny Forum and a Head of Service Manager from the Social Work Resources Management Team is required to attend and explain the performance and potential improvement activity.
- 2.4.4 The performance management system (IMPROVe) supports frontline Managers with real time management information. This system allows Managers to look at detailed caseload or timescale information for aspects of service such as guardianship visits and reviews and the supervision of children under statutory requirements. In addition, the system allows the higher-level performance measures within the Resource Plan to be tracked and measured daily. This enhances performance management capacity and knowledge across the service, allowing for corrective action to be taken instantly.
- 2.4.5 Performance Data
Some key performance trend data is recorded at Appendix 2 that supports some examples of the areas of work identified above.
- 2.4.6 In common with other Council Resources an Internal Statement of Assurance is produced annually covering general good governance, internal controls, information governance and systems of governance and control.
- 2.4.7 Accounts Commission
As part of their statutory responsibilities the Accounts Commission audit public performance reporting arrangements each year to provide continuity and support progress of the Local Government Benchmarking Framework (LGBF). Social Work Resources reports a range of information to demonstrate that it is securing Best Value in providing services.
- 2.4.8 Care Inspectorate
The Care Inspectorate continue to regulate and inspect our 42 registered care services which include: eight care homes for older people; thirteen Day Centres for older people; six care homes for children and young people; three Child and Family Services (Fostering, Adoption and Supported Carers); six Adult Lifestyles Centres;

two Adult Community Support Services and four Home Care Services. During 2019/20, nineteen inspections took place. The details of the Social Work Registered Care Service inspection summary is included in Appendix 1.

2.4.9 Gold Status as an Investor in People.

South Lanarkshire Council has achieved Gold Status as an 'Investor in People'.

2.4.10 Carer Positive Employer

South Lanarkshire Council has been recognised as a Carer Positive Employer at the Engaged Level. The carer positive award is presented to employers in Scotland who have a working environment where carers are valued and supported.

2.4.11 Customer Service Excellence (CSE)

The CSE standard aims to make a tangible difference to service users by encouraging provider organisations to focus on their individual needs and preferences. The Award assesses services in the areas of customer insight; culture of the organisation; information and access; delivery and timeliness and quality of service against a set standard. In addition to meeting the standard, services can be awarded "compliance plus" status which demonstrate that services exceed the standards set and are examples of National Best Practice. Social Work services for Older Peoples Residential and Day Care and Adult Mental Health Services are fully compliant in all areas of the standard and have collectively achieved the higher standard of compliance plus in 55 criteria.

Customer Service Excellence Service Area	Compliant Plus 2019/20
Adult Mental Health Services	10
Older Peoples Day Care Services	23
Older Peoples Residential Care	22

2.5 Key Challenges to Service Delivery

2.5.1 South Lanarkshire has a significant deprivation issue, the publication of the latest Scottish Index of Multiple Deprivation (SIMD) statistics highlights persistent levels of deprivation within a number of South Lanarkshire communities

2.5.2 An increasing ageing population. By 2036, 27% of the population will be aged 65 or over and this is most pronounced in the 75+ age group with numbers in all other age groups falling over the next 18 years. The largest fall in both absolute and percentage terms will be amongst those aged 50 to 64. Aligned to this is that the healthy life expectancy for people in South Lanarkshire is lower than that of the Scottish average and people will spend a higher proportion of their lives in poor health impacting on the demand for services.

2.5.3 The social care workforce is also ageing requiring us to look at how we plan for the future to ensure we have the skilled workforce we need to deliver our services.

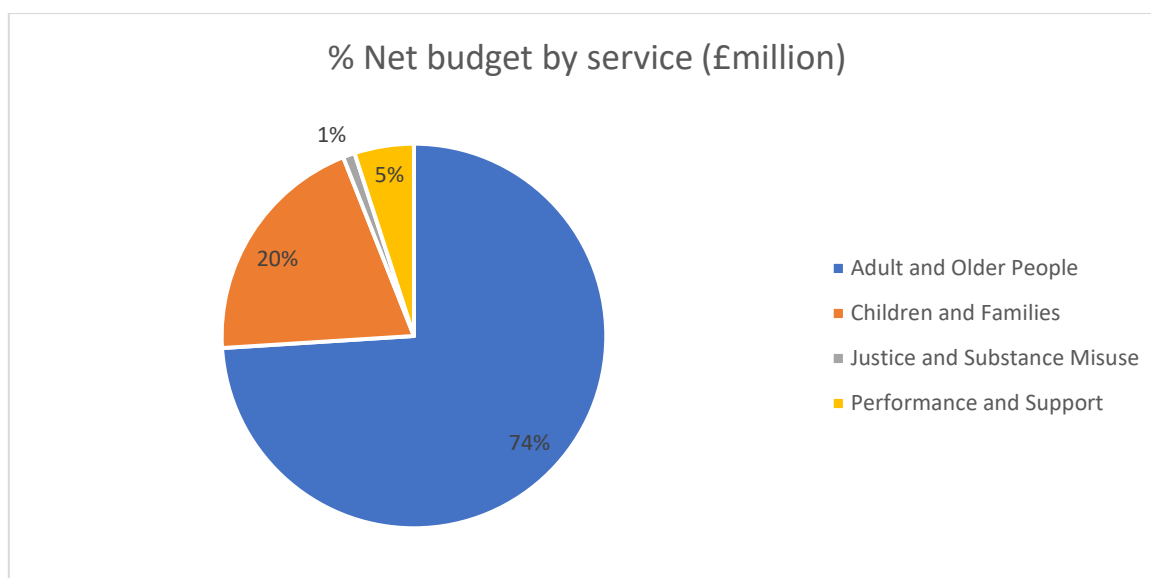
2.5.4 There has been a 32% rise in the number of children looked after over the last 3 years

- 2.5.5 There has been a 14% rise in the last 3 years in the number of people on guardianship orders with the consequential impact of a 15% increase in the number of statutory visits to be undertaken
- 2.5.6 Adult support and protection activity has increased over last three years with an 80% increase in the number of adult protection plans being agreed to support vulnerable adults.
- 2.5.7 Dementia prevalence rates that were 8 per 1,000 of the population in 2012/13 are projected to increase to 9.7 per 1,000 of the population for 2020/21
- 2.5.8 The pressures on acute hospital services resulting from accident and emergency admissions require continued support from social care to ensure safe discharge home.
- 2.5.9 An increase in the numbers of people supported in their communities with long term conditions places a significant pressure on the provision of social care services. For example, the number of people living with depression or anxiety is projected to grow from 224 to 281 per 1,000 of the population in 2020/21
- 2.5.10 It is likely that the Covid-19 pandemic will accentuate existing health inequalities in the South Lanarkshire community and introduce additional pressures to service delivery
- 2.5.11 The Care Inspectorate conducted inspections on our Homecare services with the result that two areas (Hamilton and Rutherglen/Cambuslang) received Improvement Notices. This caused the Partnership to self-impose temporary moratoriums on the two localities. The period of moratorium gave time to evaluate what was working well and what needed to be improved while ensuring that all people who required a homecare service and all staff were still supported to the highest possible standard. We continued to work closely with the Care Inspectorate and our staff to make improvements. The Head of Health and Social Care and Nurse Director co-chaired a group tasked with remodelling the care at home service and a care at home transformation group was established. During 2020-2021, we will take forward key areas for improvement as included in our action plan for 2020-2021.

Section 3 Resources.

3.1. Finance

- 3.1.1. Social Work Resources had a net revenue budget of £160,708 million for 2019/20 which was allocated as follows:



3.1.2. There are a number of financial challenges which Social Work Resources continue to manage including:

- ◆ the financial impact of demographic growth and an ageing population
- ◆ the increasing numbers of people supported in their community with long term health conditions
- ◆ an increase in Adult Support and Protection activity
- ◆ an increase in the number of children looked after
- ◆ service user and carer expectations
- ◆ the Council's requirement to achieve ongoing savings.
- ◆ the impact of the Covid-19 pandemic

3.2. Risk

3.2.1. Risk management is a key duty for Social Work Resources, both in a service wide and individual service-user and carer context. From a service perspective, the Council's Risk Management Strategy promotes consideration of risk in service delivery, planning and decision-making processes.

3.2.2. Social Work Resources follows the Council's guidance in developing, monitoring and updating the Resource Risk Register on an ongoing basis. The 2020/21 top service risks identified for the Resource are detailed below and these are reviewed and monitored on a regular basis. In the coming year Social work Resources will take forward all reasonable necessary actions, where appropriate, to mitigate or reduce the Resource's exposure to these risks.

Risk Description	
1.	Failure in multi-agency public protection procedures that result in harm to vulnerable children and adults.
2.	Failure to evidence delivery of actions necessary to achieve the objectives set out in the IJB Strategic Commissioning Plan

3.	Reduction in Council funding resulting in difficulties in achieving savings and maintaining frontline services
4.	Potential liability arising from claims of historic abuse
5.	Information Management not subject to adequate control
6.	Failure to evidence sufficient progress against Care Inspectorate requirements for the Care at Home Service
7.	Failure to prepare for the analogue to digital switchover
8.	Lack of capacity and skills to provide and meet increased service demands

- 3.2.3. The Resource continues to review and reshape how it operates and where it can find efficiency and innovation. It has developed a dashboard that comprises a range of performance information and a range of statistical data that assists focus on the strategic needs of the most vulnerable population we are required to support.

4. Workforce

- 4.1 The CSWO has a key planning and leadership role in relation to workforce planning and development, both from a local authority and partnership perspective. Whilst Social Services is a diverse sector in terms of job roles, career pathways and service structures, what unifies the sector is a common set of shared values and ethics which underpins the principles of those that work in the sector.
- 4.2 Ethical awareness, professional integrity, respect for human rights and a commitment to promoting social justice are at the core of social service practice. The life changing and challenging work undertaken cannot be underestimated. This essential work is underpinned by core values. These values focus on understanding each individual in the context of family and community, supporting participation and building on the strengths of the individual and their communities to promote enablement.
- 4.3 There are also standards of conduct and practice which Social Services workers and employees must follow. It is the CSWO responsibility to ensure their staff and those of external providers adhere to these standards and are equipped to support service users.
- 4.4 Planning
- 4.4.1 The CSWO supports possible successors through the CSWO Award offered by Glasgow Caledonian University
- 4.4.2 Prepare the Resource for delivering the transformation agenda for care facilities, adult and older people's day services and care at home services
- 4.4.3 A significant number of staff are projected to reach retirement age over the next ten years and this together with high turnover of staff in residential and care and support services and an ongoing requirement to retain and increase numbers of Mental Health Officers presents particular challenge which is addressed through our Workforce Plan 2017-2020.

4.5 Development

- 4.5.1 Health and Social Care Integration work continues and locality planning groups are established that will report into the Integrated Joint Board and inform local priorities.
- 4.5.2 The Workforce Planning and Learning Development Board has a strategic overview of the learning and development activity that takes place within the resource and ensures there is openness and transparency in relation to how training is organised and accessed by staff. The development of a social work resource Learning and Development Plan is instrumental to this and makes a contribution to supporting a learning culture.
- 4.5.3 Learning and development requirements of individual staff members are identified through supervision and reflected in Annual Performance and Development Review (PDR). Additional training requirements are identified through the Learning and Development Team for Social Work Resources.
- 4.5.4 Social Work Resources supports evidence informed practice and in developing its research culture funds a number of post-graduate courses to support staff with their learning and development.
- 4.5.5 The ongoing development of the Dementia Strategy: a pathway has been developed, which details the level of input/training required for each sector of the workforce from 'Informed' through to 'Expert'. The programme includes colleagues from other Council Resources and Health colleagues.
- 4.5.6 There is a range of Frontline manager training and leadership training, which includes elements such as emotional intelligence, self-awareness and key processes.
- 4.5.7 A Management Induction and Development Programme is available to all social work staff who are either first time managers or who are looking to be promoted to a management post making use of the SSSC Step into Leadership Course.
- 4.5.8 Registration of all staff within Social Work Resources within the timescales set out by the SSSC. Where staff have conditional registrations and the achievement of appropriate qualifications is required, support is provided.
- 4.5.9 All newly qualified social workers meet with the relevant Staff Development Officer for a learning and development/Post Registration Training and Learning (PRTL) induction meeting to draw attention to the relevant learning and development pathway for their post, how to access training and ensure they understand their responsibilities in relation to post registration training and learning requirements. The support that is available in relation to the PRTL is also explained.
- 4.5.10 The Adult and Older People's service provide mentors to Newly Qualified Social Workers for the first few months to help them as they settle into post.
- 4.5.11 In Children and Families teams newly qualified social workers, together with all other social workers, attend Practice Development Sessions which take place each month. This time gives social workers the space to learn and reflect on practice.
- 4.5.12 Within the Mental Health Officer (MHO) service learning and development pathways are in place for Managers, Social Workers/Mental Health Officers and Social Work Assistants. Pathways identify face to face and learn online training recommended for

each job role, indicate any essential training requirements and the relevant external qualifications available. There are mentoring arrangements in place for newly qualified MHOs who receive mentoring by an experienced MHO for 6 months or longer, if required, post qualification.

- 4.5.13 A recruitment strategy is ongoing involving the Staff Development Officer for Mental Health identifying Social Workers interested in completing the MHO Award and providing advice, guidance, support, opportunities to shadow MHOs and to spend time in a Community Mental Health Team, prior to making an application.
- 4.5.14 The Social Care workforce is one of the largest employment groups in South Lanarkshire with approximately 3000 employees working to provide a range of support within our communities. Excellent social services require a confident, dedicated and skilled workforce which is valued by employers, service users and the public.
- 4.5.15 Everyone in the workforce needs to feel valued and to be motivated to improve their contribution and be innovative in their practice. The CSWO needs to ensure workers have the right skills, knowledge, values and behaviours to provide high quality services. Retaining experienced staff in front line practice is crucial to delivering excellent Social Services.

5. Covid-19

5.1 Implications for services

- 5.1.1 Through the initial period of 2020/21, the Council responded to the Global Pandemic, ensuring that essential services could be delivered safely. Social Work Resources continues to address emerging challenges presented by COVID 19. All working arrangements which are in place to deliver services during this public health crisis will be reviewed on an ongoing basis as we begin to recover.
- 5.1.2 Our priority is to ensure effective delivery of critical services to protect vulnerable children, young people and adults in our communities, complying with statutory legislation.
- 5.1.3 The introduction of agile working and the use of key IT solutions such as Microsoft Teams and Near Me have been invaluable to service delivery and to the recovery process.
- 5.1.4 The exponential rise in the use of IT has also provided a safe and effective method of continuing assessment and treatment where physical contact has not been essential. It has been of particular value where families have been able to be included in care discussions remotely. Many services are actively re designing previous care pathways to include video consultations as a standard where possible.
- 5.1.5 Services have continued to be delivered to those assessed as most at risk with our focus on public protection. Adult support and protection and child protection case conferences and key meetings have been arranged virtually together with face to face contact where necessary.

- 5.1.6 Care at home services (including the introduction of a community meals service), residential childcare services and residential older people' care continue to be delivered.
- 5.1.7 A PPE hub is established and distributes equipment to staff internally and to externally commissioned services as well as to carers.
- 5.1.8 Other services have continued to be delivered with minimal cover arrangements to reduce footfall, or through agile means such as money matters advice, administration services, strategy, planning and performance, children, justice, court services and adult and older people assessment and care management.
- 5.1.9 Staff from across South Lanarkshire Council Resources have provided essential support to Social Work in response to the challenges of the Covid 19 pandemic.

South Lanarkshire Leisure and Culture employees have provided help in care home settings, becoming involved in a range of work including domestic and care activities. Their skills have been utilised to support resident's wellbeing by, for example, befriending individuals and small groups or adapting simple, sports-based activities to ensure the widest access. In addition, their links with anchor community groups have supported the delivery of social welfare to the most vulnerable in our society, providing assistance with food parcels and prescription collection/delivery.

Housing and Technical Resources colleagues have been integral to the development of the Personal Protective Equipment (PPE) Hub, providing the logistics for the delivery of PPE to internal and external care providers for the Health and Social Care Partnership. As Covid-19 guidelines have changed the Hub has expanded to also include distribution to Corporate and Education Resources.

5.2 **Implications for Workforce**

- 5.2.1 The issue of IT equipment and links to communication software have provided the opportunity for home/agile working at an unprecedented level. The incidence of employees working from home long term (over 28 days) has increased from 26 in March 2020 to 823 by late August 2020.
- 5.2.2 Social Work Resources staff have also been affected by Covid -19 and there were 231 long term self-isolations (over 28 days) across the Resource from the beginning of lock down until August 20.
- 5.2.3 Of Adult and Older Peoples services Home Care has been most affected by self isolation with over half of all staff self-isolations being required by Home Care staff. Within Children and Justice services the majority of staff self-isolating are employed within Children's Residential Units
- 5.2.4 Covid -19 has had a significant effect on staff sickness levels showing a 2.8% reduction from March 2020 to July 2020. This was replicated across all Service areas within Social Work and is evident particularly in those areas where employees have the ability to work from home. Short Term absence, which was falling, has fluctuated over the same period. Long term absence, however, has continued to decrease from March to July. However as a council Social Work Resources are reporting the highest absence figures which is a reflection of the work that has been

sustained over the period as well as a reflection of the profile of the workforce in relation to those over 55 years of age. The demands put on residential services and Care at Home staff who have continued to work through challenging times throughout. Covid related matters in relation to attendance and absence will continue to be a challenge particularly over a winter period.

5.3 Key priorities for recovery

- 5.3.1 The challenges facing local government in Scotland and government internationally will continue whilst we are still in the midst of the Covid – 19 pandemic. However, even with the on-going pandemic, financial constraints, the council continues to do everything in its power to protect and maintain vital services, keep people safe, save lives, and protect our National Health Services.
- 5.3.2 Delivery models have been reorganised in order to adhere to social distancing, to reduce the footfall in offices while at the same time supporting our most vulnerable people. The Resource is progressing the recovery of key services.
- 5.3.3 The model of delivery for day care for older people has been adapted from Centre based to an outreach service on an interim basis to ensure continuity of care. This will be reviewed as part of the overall service review.
- 5.3.4 Planning is in place for Family Centres to begin to provide contact for families
- 5.3.5 The unpaid work service has begun to resume and build capacity
- 5.3.6 Further detail of Social Work Resources priorities for recovery are contained in the [Covid-19 Recovery Plan](#)

Appendix 1 Care Inspectorate – Inspection Reports

The Care Inspectorate published guidance “A quality framework for care homes for older people”. The guidance states that from 2018, on an incremental basis, it will roll out a revised methodology for inspecting care and support services starting with care homes for older people. The changes will build on approaches that have been introduced in the past three years: an emphasis on experiences and outcomes for people, proportionate approaches in services that perform well, shorter inspection reports, and a focus on supporting improvement in quality.

The new framework has 5 key questions which can be evaluated at inspection compared to the 4 key quality themes that were previously used. As not all care homes for older people have been inspected under the new framework we have included both gradings carried out under the previous inspection methodology and those under the new framework.

- The grades match up as below (new evaluation/old quality theme):
- How well do we support people’s wellbeing? / Care and Support
- How well is our care and support planned? / Care and Support
- How good is our setting? / Environment
- How good is our staff team? / Staffing
- How good is our leadership? / Management and Leadership

The Health and Social Care Standards are now reflected in the quality improvement frameworks for the following range of services inspected:

- Services for children and young people in need of care and protection
- Strategic commissioning of services for adults by Health and Social Care Partnerships
- The implementation of self-directed support
- Adult support and protection
- Justice social work services

The Care Inspectorate regulates the performance, inspection, and public reporting of the Care Services registered with them. Social Work Resources manage 42 registered services. During 2019-2020 there were 19 Inspections completed by the Care Inspectorate across 4 differing service areas as outlined in the table below. One registered service was inspected twice in one year.

Whilst registered council services have generally performed well with care Inspectorate grades in 2019/20 we had 2 registered services that received poor grades. Hamilton/Blantyre Homecare and Rutherglen Homecare.

In December 2019 the Care Inspectorate issued an Improvement Notice on the registered service with Hamilton/Blantyre. The Rutherglen service were also graded unsatisfactory. In response the council in consultation with the care Inspectorate implemented a voluntary moratorium in these two areas. This resulted in no new referrals from the community and hospital discharges to these resources. This was to allow time to respond to the care Inspectorate concerns about skills knowledge and capacity of the current leadership and staff within these services.

With regards to the Improvement Notice within Hamilton/Blantyre, increased management capacity and additional training and staffing was committed to this resource. A wider service redesign is also taking place across all Homecare services. The Care Inspectorate were due to come back in to inspect these services in April 2020 and subsequently September 2020.

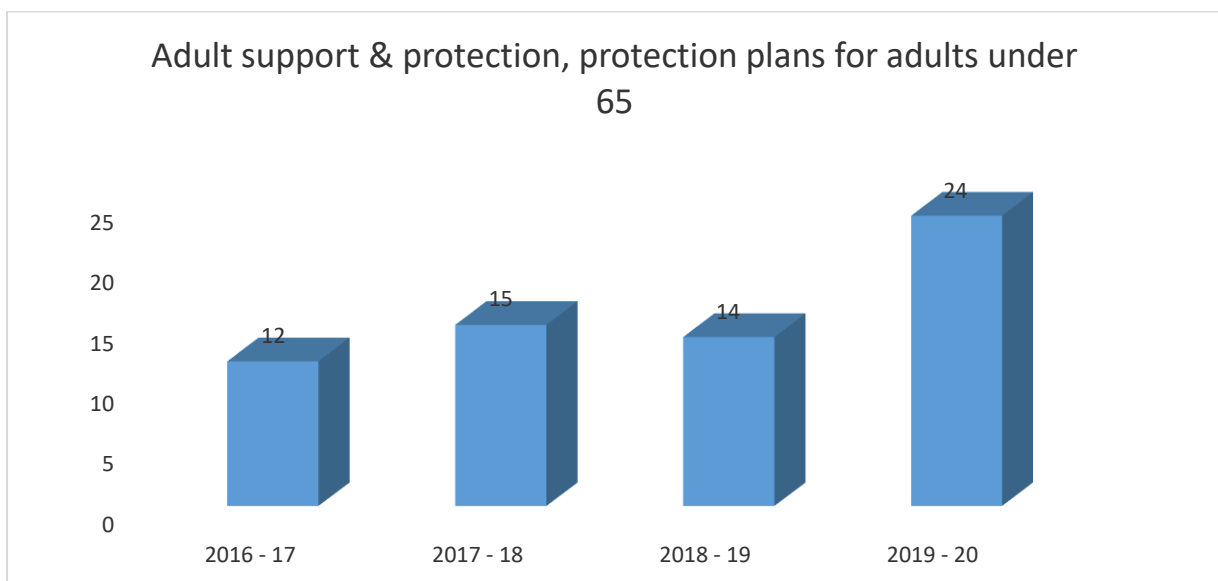
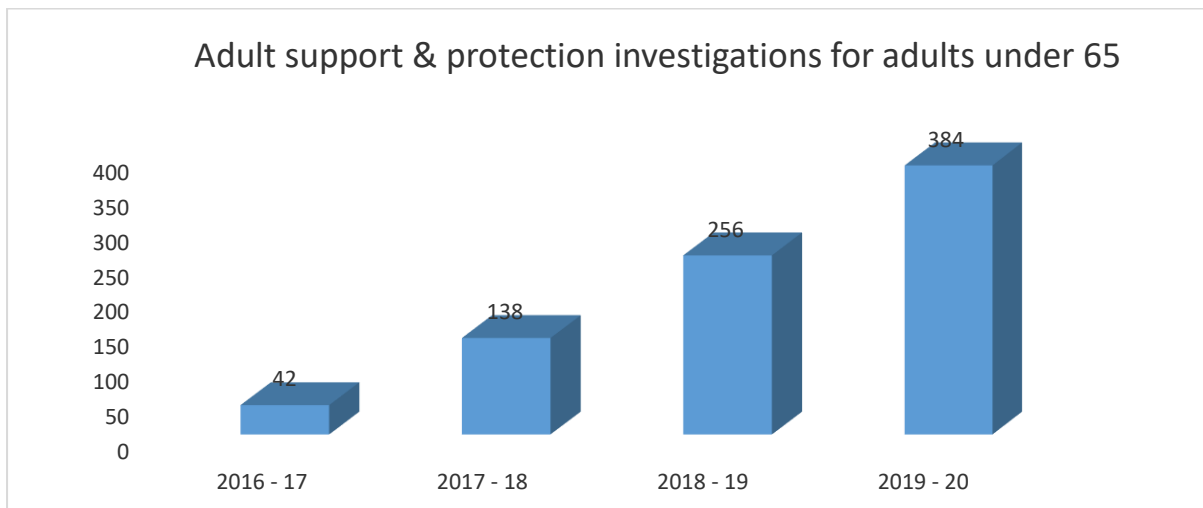
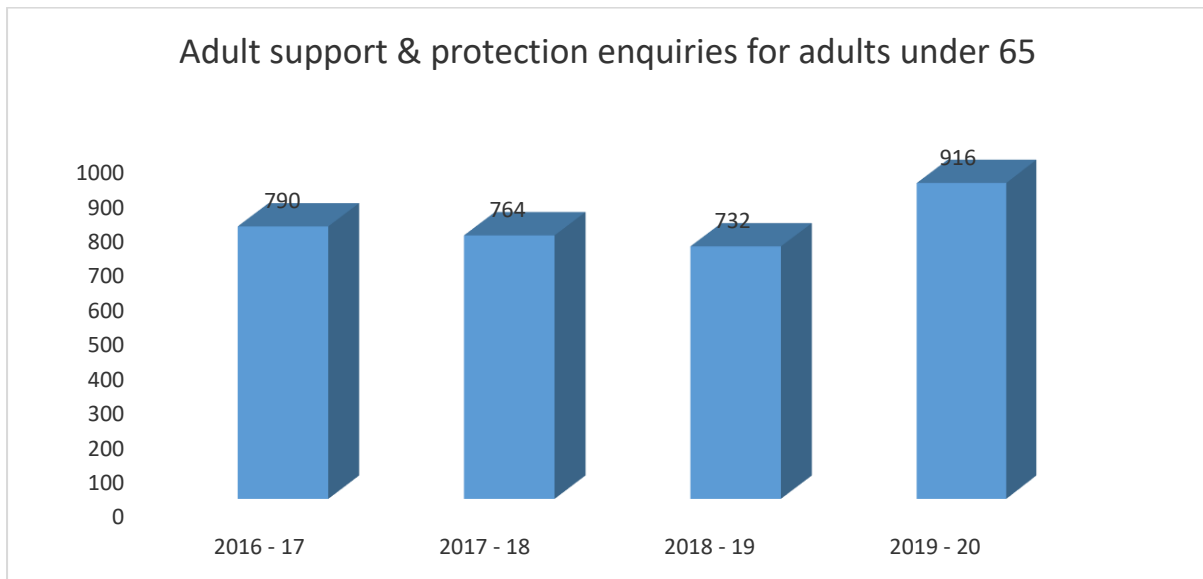
However due to the pandemic the care Inspectorate have had to review their inspection programme. There have however been ongoing regular liaison with the Care Inspectorate through out, so they are kept apprised of the developments in these services. The Improvement Notice was subsequently extended to 30 September 2020 and the care Inspectorate advised they would be undertaking an inspection from October onwards.

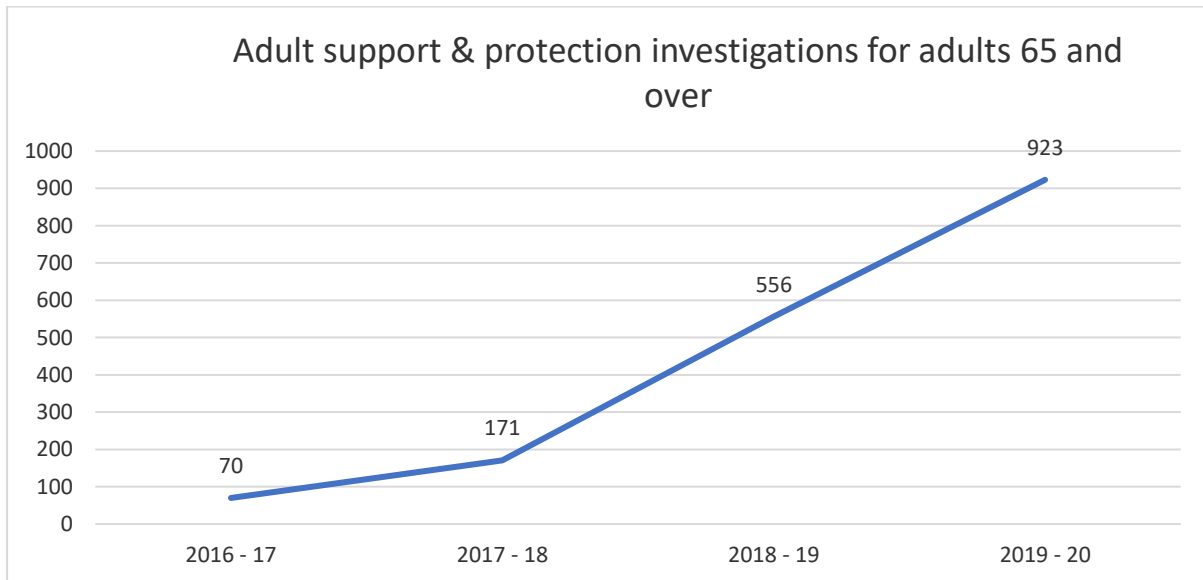
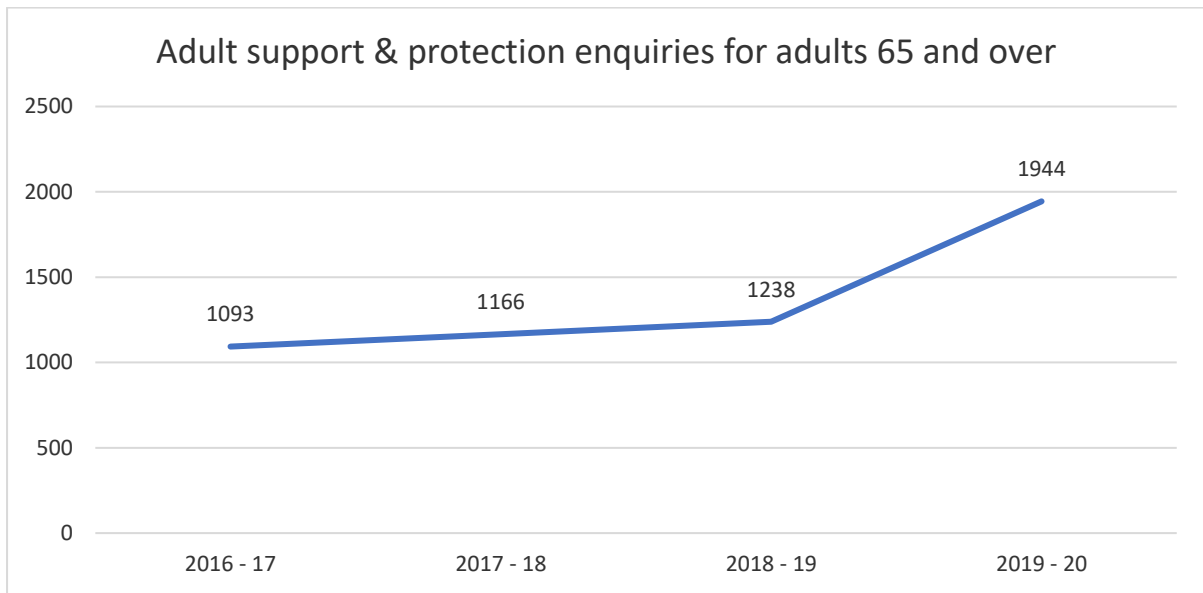
			Care & Support Planned	Setting	Staffing	Leadership	People's Wellbeing
	Care Service	Latest Inspections	Care/Support	Envir	Staff	Man/Lead	
1	Canderavon House	15/08/2019	4	4	5	4	5
2	David Walker Gardens	19/11/2019	5	NA	NA	NA	5
3	Dewar House	05/12/2019	3	NA	NA	NA	3
4	McClymont House	09/01/2020	5	NA	NA	NA	5
5	McKillop Gardens	28/01/2020	5	NA	NA	NA	5
6	Meldrum Gardens	01/11/2019	4	5	3	5	4
7	Harry Heaney Centre	10/05/2019	5	NA	5	NA	NA
8	McClymont RC	05/08/2019	5	NA	5	NA	NA
9	Nisbet Centre	18/06/2019	5	NA	5	NA	NA
10	St Andrews	24/07/2019	4	NA	NA	NA	5
11	East Kilbride	24/01/2020	4	NA	5	5	NA
12	Hamilton / Blantyre	04/12/2019	1	NA	1	1	NA
13	Rutherglen	11/10/2019	1	NA	2	1	NA
14	Care & Support North	16/11/2018	5	NA	NA	5	NA
15	Bardykes Road	02/05/2019	5	5	NA	NA	NA
16	Hillhouse Road	03/07/2019	5	NA	NA	NA	5
17	Hunters Crescent	17/05/2019	5	5	NA	NA	NA
18	Station Road	12/02/2020	5	NA	NA	NA	5

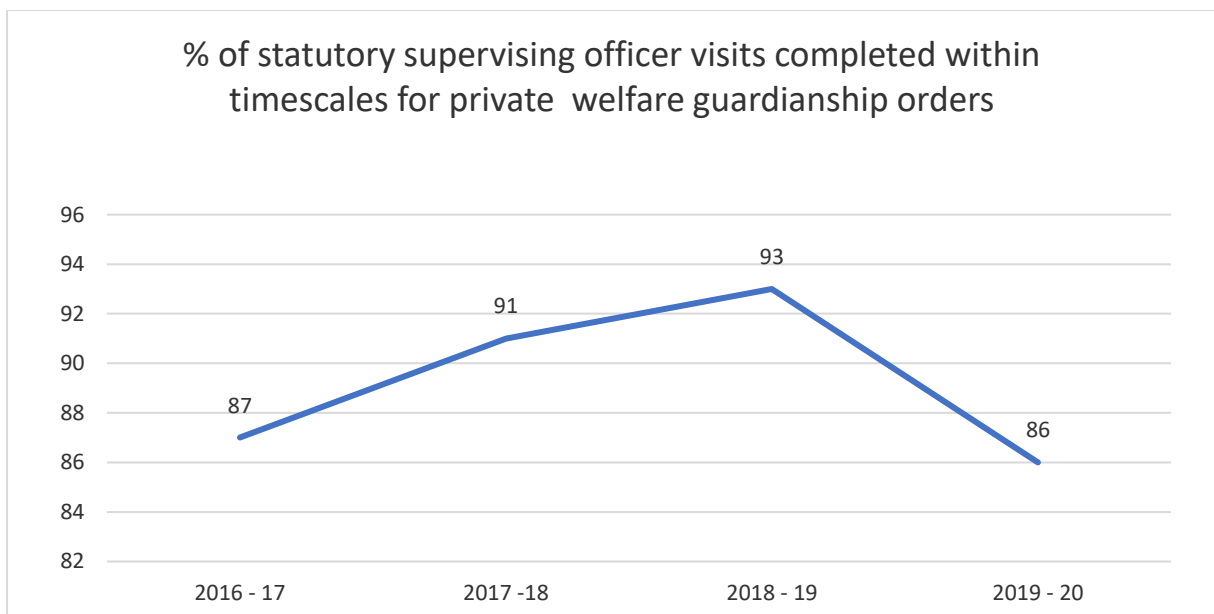
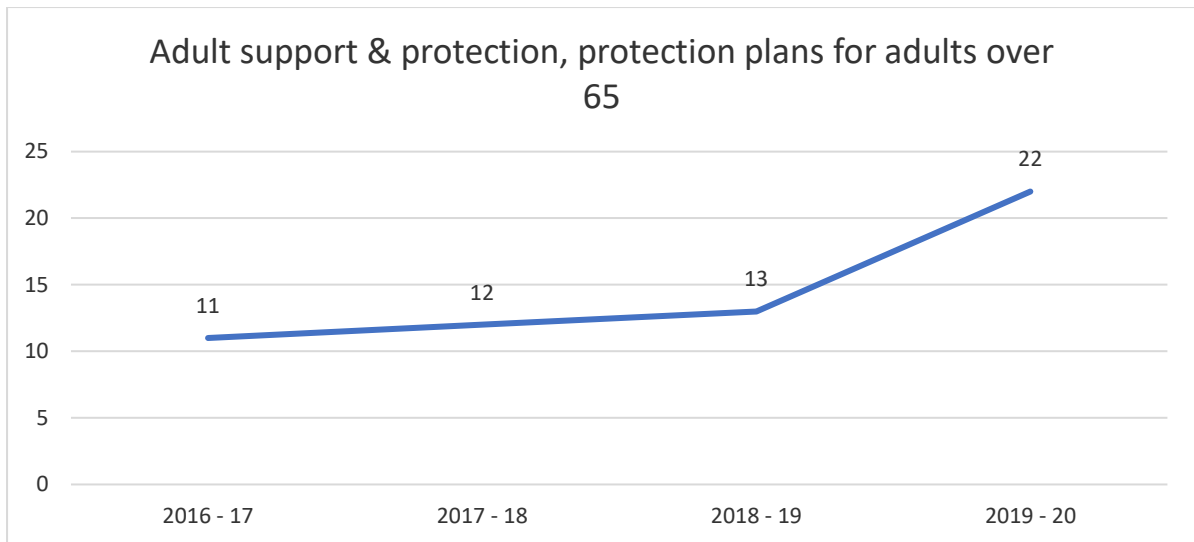
Grades guide:

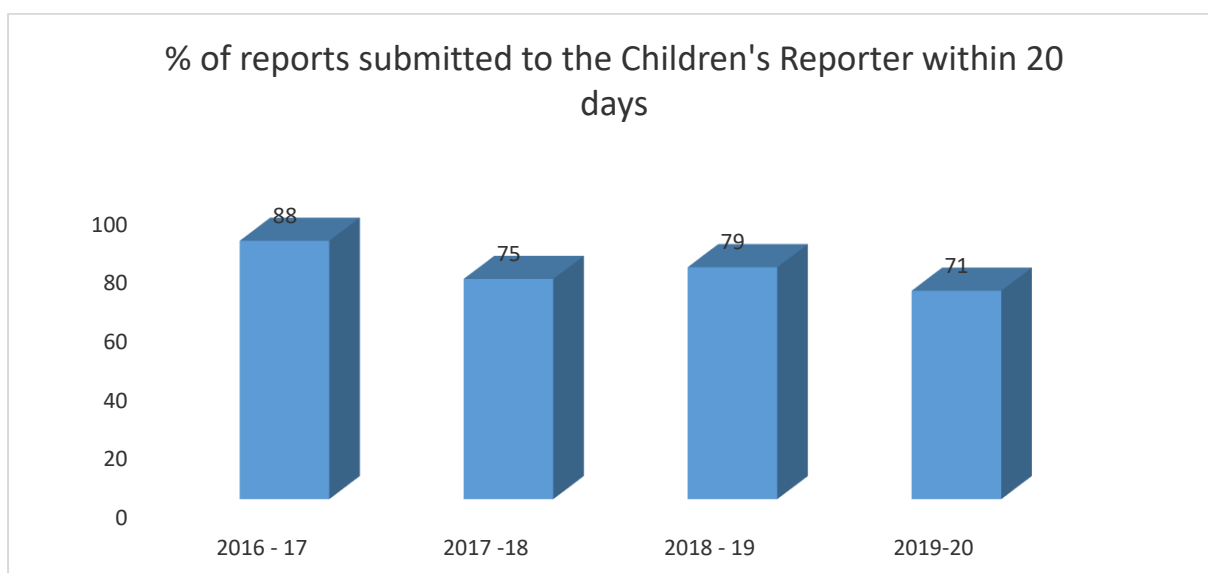
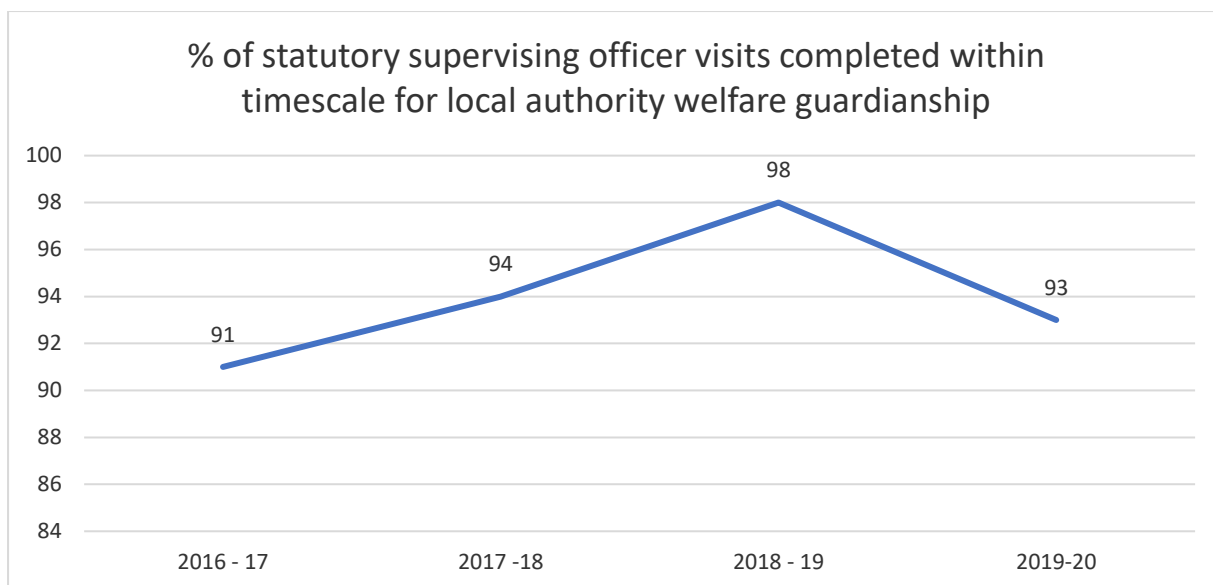
1 Unsatisfactory
2 Weak
3 Adequate
4 Good
5 Very Good
6 Excellent

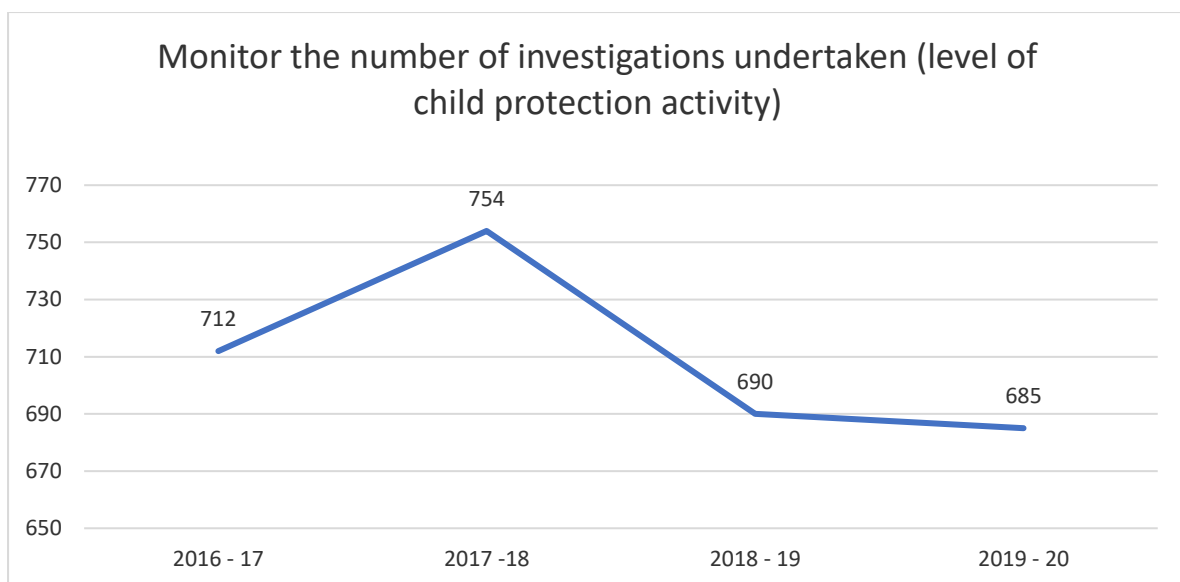
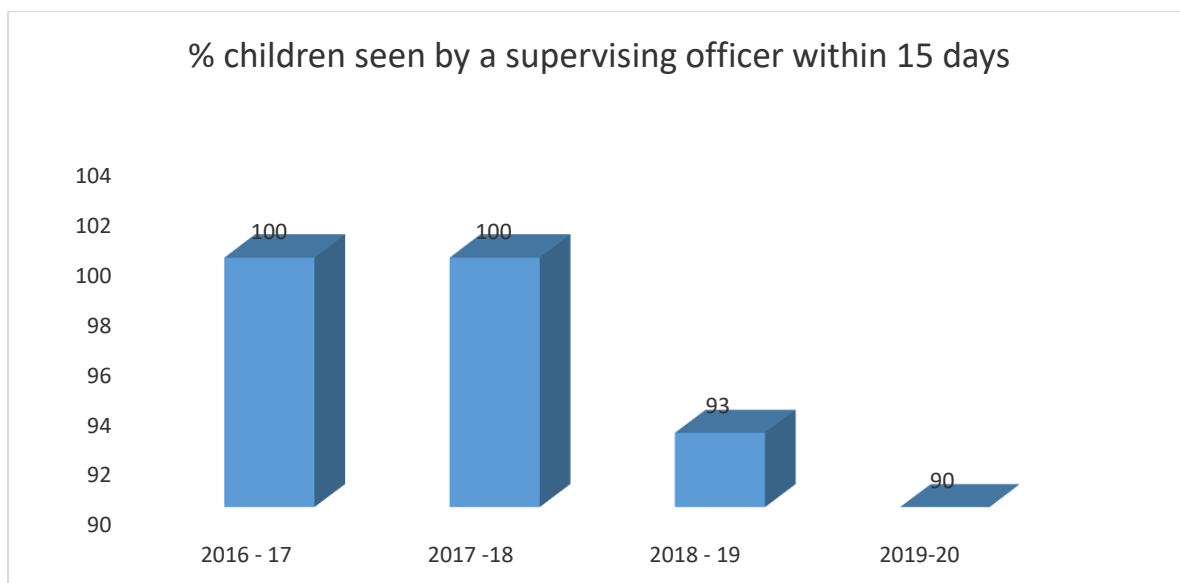
Appendix 2 Performance Data and Trends

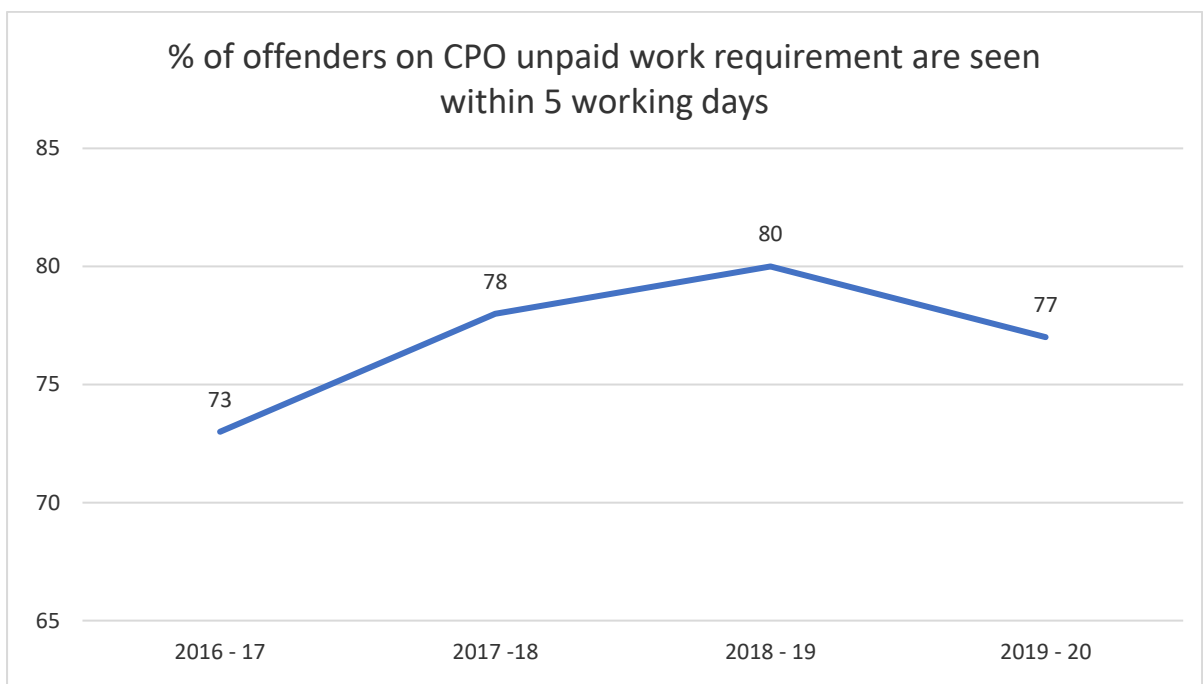
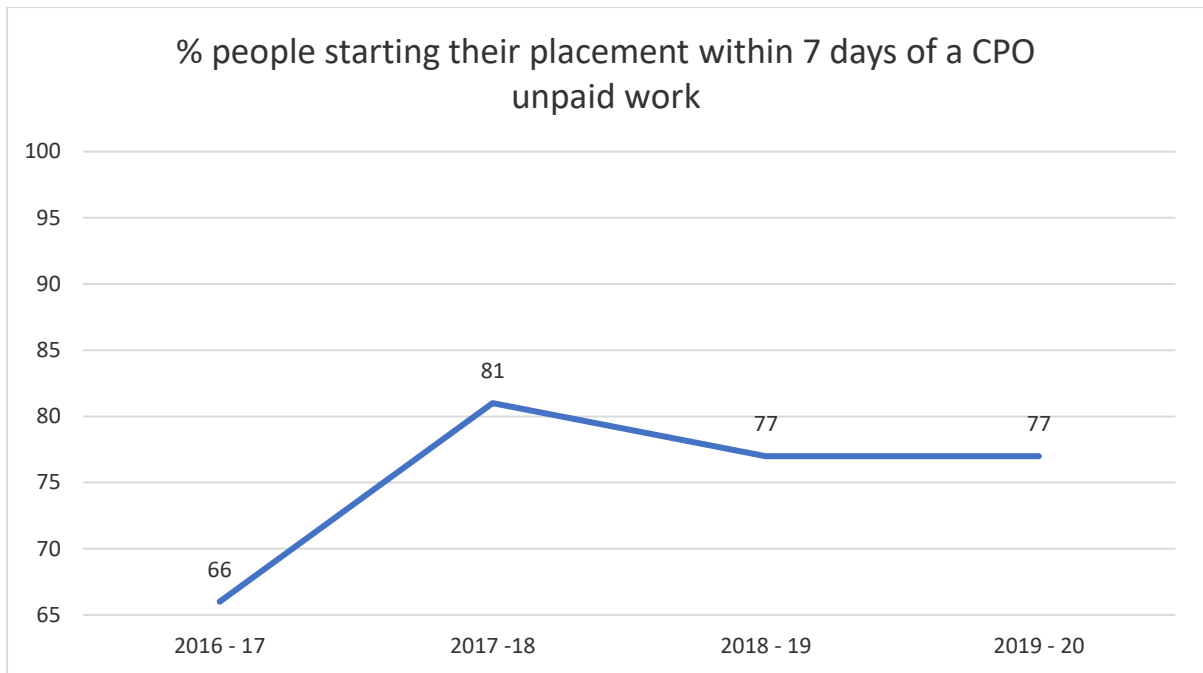


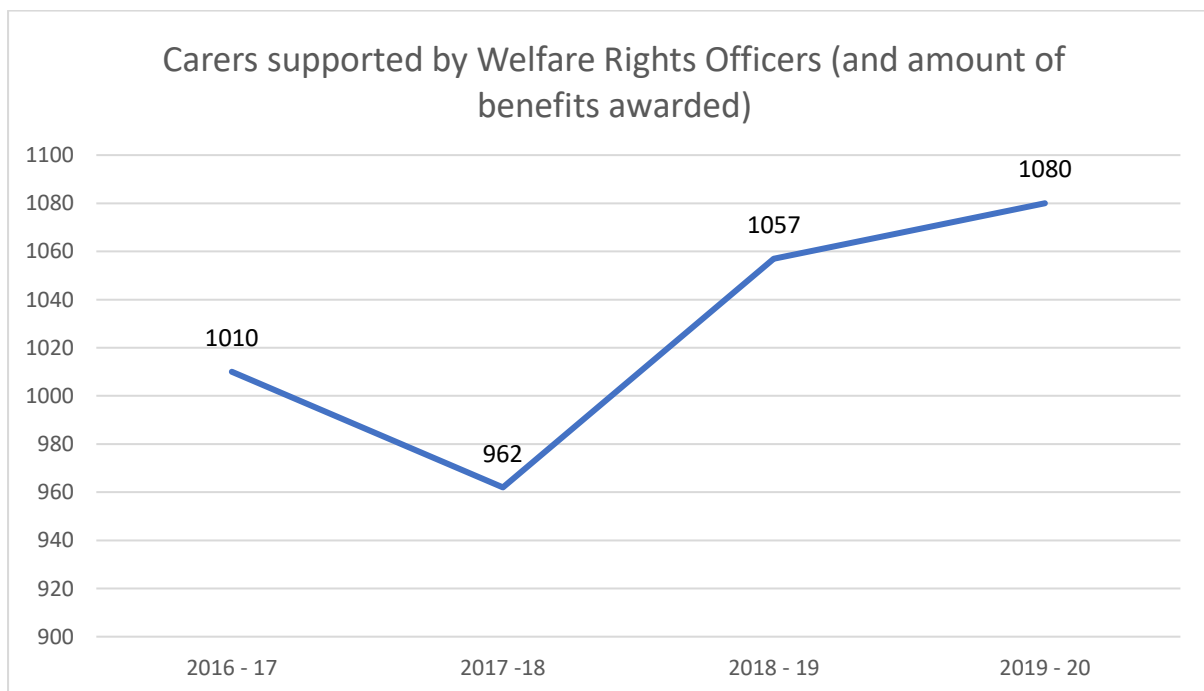
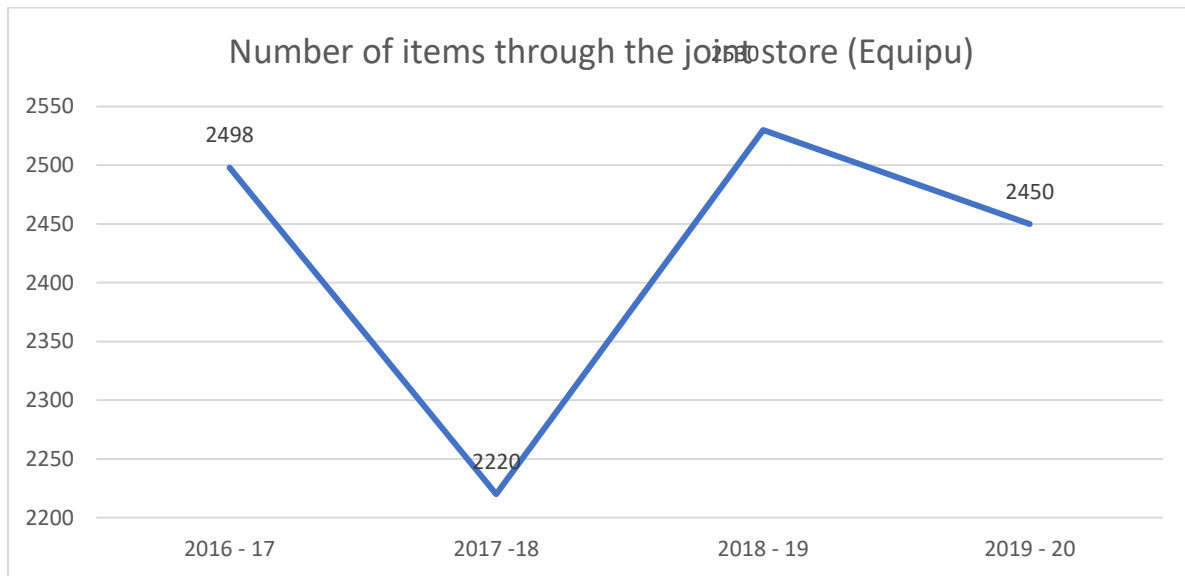












In total for 19-20, the outcomes for carers, supported by dedicated Welfare Rights officers were:

Weekly benefits: £106,837

Backdated benefits: £920,109

Annual benefits: £6,475,633