



Council Offices, Almada Street  
Hamilton, ML3 0AA

Thursday, 22 October 2020

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, 28 October 2020  
**Time:** 10:00  
**Venue:** By Microsoft Teams and Committee Room 1,

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,

### **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 the Previous Meeting** 5 - 16  
Minutes of meeting of the Social Work Resources Committee held on 19 August 2020 submitted for approval as a correct record. (Copy attached)

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### Monitoring Item(s)

- 3 **Social Work Resources - Revenue Budget Monitoring Report 2020/2021** 17 - 26  
Joint report dated 24 September 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** 27 - 30  
Joint report dated 8 October 2020 by the Executive Director (Finance and Corporate Resources) and the Director, Health and Social Care. (Copy attached)
- 5 **Social Work Resources – Workforce Monitoring – July to August 2020** 31 - 38  
Joint report dated 23 September 2020 by the Executive Director (Finance and Corporate Resources) and the Director, Health and Social Care. (Copy attached)

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### Item(s) for Decision

- 6 **Review of Drug Treatment and Testing Order Service** 39 - 44  
Joint report dated 24 September 2020 by the Executive Director (Finance and Corporate Resources) and the Director, Health and Social Care. (Copy attached)
- 7 **Emergency Receiving Centre - Additional Funding**  
Joint report by the Director, Health and Social Care and Executive Director (Finance and Corporate Resources) (Copy to follow)

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### Item(s) for Noting

- 8 **Meeting our Corporate Parenting Responsibilities and South Lanarkshire Council Revised Strategy** 45 - 48  
Report dated 20 September 2020 by the Director, Health and Social Care. (Copy attached)
- 9 **Adult Support and Protection Progress Update** 49 - 54  
Report dated 2 October 2020 by the Director, Health and Social Care. (Copy attached)
- 10 **National Review of Adult Social Care** 55 - 58  
Report dated 2 October 2020 by the Director, Health and Social Care. (Copy attached)
- 11 **Care at Home Services** 59 - 62  
Report dated 13 October 2020 by the Director, Health and Social Care. (Copy attached)

- 12 Winter Plan 2020-2021** 63 - 70  
Report dated 1 October 2020 by the Director, Health and Social Care (Copy attached)
- 13 Notification of Contracts Awarded** 71 - 74  
Report dated 1 October 2020 by the Director, Health and Social Care. (Copy attached)

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**Urgent Business**

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

***For further information, please contact:-***

Clerk Name: Hilary Tennant

Clerk Telephone: 01698 454185

Clerk Email: [hilary.tennant@southlanarkshire.gov.uk](mailto:hilary.tennant@southlanarkshire.gov.uk)



## SOCIAL WORK RESOURCES COMMITTEE

2

Minutes of meeting held via Microsoft Teams and in Committee Room 1, Council Offices, Almada Street, Hamilton on 19 August 2020

### Chair:

Councillor John Bradley

### Councillors Present:

Councillor Walter Brogan, Councillor Robert Brown, Councillor Archie Buchanan, Councillor Janine Calikes, Councillor Graeme Campbell, Councillor Maureen Chalmers (Depute), Councillor Gerry Convery (*substitute for Councillor Andy Carmichael*), Councillor Margaret Cowie, Councillor Maureen Devlin, Councillor Mary Donnelly, Councillor Allan Falconer, Councillor Mark Horsham, Councillor Eric Holford (*substitute for Councillor Colin McGavigan*), Councillor Graeme Horne (*substitute for Councillor Jim McGuigan*), Councillor Joe Lowe, Councillor Hugh Macdonald, Councillor Catherine McClymont, Councillor Lynne Nailon, Councillor Carol Nugent, Councillor Margaret B Walker, Councillor Jared Wark.

### Councillors' Apologies:

Councillor Jackie Burns, Councillor Katy Loudon, Councillor Richard Nelson.

### Attending:

#### Finance and Corporate Resources

H Goodwin, Finance Manager; G McCann, Head of Administration and Legal Services; M Milne, HR Business Partner; A Norris, Administration Assistant; L O'Hagan, Finance Manager (Strategy); S Somerville, Administration Manager; H Tennant, Administration Officer

#### Health and Social Care/Social Work Resources

V de Souza, Director; I Beattie, Head of Health and Social Care (Hamilton and Clydesdale); C Cunningham, Head of Commissioning and Performance; 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

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### 1 Declaration of Interests

No interests were declared.

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### 2 Previous Meeting

<b>The Committee decided:</b>	that the delegated decisions taken by the Chief Executive, in consultation with Group Leaders, on items of business relating to the previous Social Work Resources agenda of 20 May 2020, be noted as a correct record.
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### 3 Social Work Resources – Revenue Budget Monitoring 2019/2020

A joint report dated 14 July 2020 by the Executive Director (Finance and Corporate Resources) and Director, Health and Social Care was submitted comparing actual expenditure at 31 March 2020 against budgeted expenditure for 2019/2020 for Social Work Resources.

As at 31 March 2020, there was an overspend of £1.855 million on Social Work Resources' revenue budget. The overspend was lower than the anticipated £2.239 million and was due to pressures within Children and Family Services in relation to residential school placements, fostering placements and Kinship Care payments.

The Adult and Older People Services' budget had experienced pressures in respect of employee costs, equipment and adaptations and the demand for direct payments. Those overspends had been partially offset by underspends in Performance and Support and Justice Services due to employee turnover and vacancies.

The improved position included transfers of £0.350 million from the Integration Joint Board, as reported to Executive Committee.

Expenditure incurred by Social Work Resources in relation to COVID-19 was detailed in Appendix B to the report. Funding from the Scottish Government Mobilisation Plan would cover the additional expenditure in relation to Adult and Older People Social Care, totalling £0.325 million.

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

**The Committee decided:**

- (1) that the overspend on Social Work Resources' revenue budget of £1.855 million, as detailed in Appendix A to the report, be noted; and
- (2) that the budget virements, as detailed in the appendices to the report, be approved.

*[Reference: Minutes of 20 May 2020 (Paragraph 3)]*

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#### **4 Social Work Resources – Revenue Budget Monitoring 2020/2021**

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A joint report dated 14 July 2020 by the Executive Director (Finance and Corporate Resources) and the Director, Health and Social Care was submitted comparing actual expenditure at 19 June 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.

As at 19 June 2020, there was a breakeven position against the phased budget. Continued additional costs incurred in relation to COVID-19 were detailed separately in Appendix B to the report, together with income received from the Scottish Government.

The Resource had experienced a reduction in income of £0.313 million from services not provided as a result of COVID-19, as detailed in Appendix D to the report.

To date, the additional costs to the Council were £3.027 million, with £2.9 million received from the Scottish Government. Details were provided on budget virements in respect of Social Work Resources to realign budgets.

The Director undertook to provide further details of the funding provided to 'Other Bodies'.

Officers confirmed that appropriate background checks had been undertaken for all volunteers.

**The Committee decided:**

- (1) that the breakeven 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.

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## 5 Social Work Resources – Capital Budget Monitoring 2019/2020

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A joint report dated 30 July 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 2019/2020 and summarising the expenditure position as at 31 March 2020.

The closure of construction sites in March 2020 due to COVID-19 had impacted on capital spending and had resulted in reduced planned works and an underspend of £2.166 million. Funding would be carried forward into the next financial year.

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

**The Committee decided:** that the Social Work Resources' capital programme of £2.729 million, and expenditure for the year of £0.563 million, be noted.

*[Reference: Minutes of 20 May 2020 (Paragraph 4)]*

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## 6 Social Work Resources – Capital Budget Monitoring 2020/2021

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A joint report dated 30 July 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.

The impact of COVID-19 continued to affect progress on planned capital projects. This would continue to be monitored.

**The Committee decided:** that the Social Work Resources' capital programme of £5.817 million, and expenditure to date of £0.008 million, be noted.

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## 7 Social Work Resources – Workforce Monitoring – April to June 2020

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A joint report dated 14 July 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 April to June 2020:-

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

The effect of COVID-19 was evident in the workforce monitoring data with some services initially disrupted. However, this situation had now stabilised.

Officers advised that the Resource had followed Scottish Government guidance in relation to providing testing for staff, implementation of additional cleaning measures and the provision of equipment.

The Director highlighted the excellent co-operation of care homes in redesigning their service delivery to ensure the safety of their residents and staff during this extremely challenging period.

**The Committee decided:** that the report be noted.

*[Reference: Minutes of 20 May 2020 (Paragraph 5)]*

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## **8 Social Work Resource Plan 2020/2021**

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A report dated 31 July 2020 by the Director, Health and Social Care was submitted on the Social Work Resource Plan 2020/2021.

Details were provided on the Resource Plan for 2020/2021, attached as Appendix 1 to the report, which outlined the:-

- ◆ key areas of focus for the year ahead
- ◆ objectives and outcomes
- ◆ measures and actions
- ◆ resourcing of the Plan
- ◆ organisational structure of the Resource

In line with the Council's performance management arrangements, a mid-year progress report on actions identified in the 2020/2021 Resource Plan would be submitted to a future meeting of the Committee.

**The Committee recommended to the Executive Committee:** that the Social Work Resource Plan for 2020/2021 be approved and uploaded to the Council's website.

*Councillor Buchanan left the meeting during consideration of this item of business*

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## **9 Care Management Improvement – Hospital Discharge Team**

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A joint report dated 28 July 2020 by the Executive Director (Finance and Corporate Resources) and Director, Health and Social Care was submitted on proposals to establish a hospital-based discharge team.

Until 2016, a hospital based Social Work team had been in place, at which time the team moved into a community-based setting. However, hospital related demand continued to rise, and, in practice, little benefit had accrued from dispersing the service to the locality teams.

Following consultation and benchmarking, it was proposed that a revised hospital team be established and that the following full time equivalent (FTE) posts be added to the Social Work Resources staffing establishment:-

- ◆ 1 FTE Field Work Manager on Grade 5, Level 1, SCP 96-97 (£53,780 to £54,601)
- ◆ 2 FTE Team Leaders on Grade 3, Level 8, SCP 79-80 (£44,159 to £44,834)
- ◆ 3 FTE Social Work Assistants on Grade 2, Level 4, SCP 55-57 (£29,253 to £30,147)
- ◆ 1 FTE Clerical Assistant on Grade 1, Level 3, SCP 25-27 (£18,869 to £19,417)

Those posts would complement the current staffing establishment of 9 FTE Social Workers, 1 FTE Mental Health Officer and 1 FTE Social Work Assistant to create a Social Work Hospital Discharge Function. This would ensure the Council had sufficient supervision, resources, skills mix and expertise to support the quality assurance and governance to facilitate discharge planning.



The costs associated with the above proposals would be met from temporary funding to support the Care at Home Services. Future reports to Committee would consider the financial sustainability of the remodelled service.

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

**The Committee decided:** that the proposal to re-establish a Hospital Discharge Team, as detailed in the report, be approved.

*[Reference: Minutes of 4 March 2020 (Paragraph 9)]*

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## **10 Staffing in Justice Services, Social Work Resources**

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A joint report dated 9 July 2020 by the Executive Director (Finance and Corporate Resources) and Director, Health and Social Care was submitted on the introduction and expansion of 3 areas of service delivery within Justice Services.

The Scottish Government vision for Community Justice, reflected in the current South Lanarkshire Community Justice Improvement Plan, aimed to prevent and reduce further offending by addressing underlying causes, and safely and effectively managing and supporting those who had committed offences to help them reintegrate into the community.

Since 2018, Justice Services had successfully extended Justice Throughcare provision for:-

- ◆ individuals leaving custody
- ◆ young people involved in the criminal justice system
- ◆ families affected by domestic abuse

The Unpaid Work Service had continued to adapt to new pressures since being reviewed in 2017.

Development and improvements within those 3 areas had strengthened interventions, improved outcomes for service users across the Justice Social Work Service and promoted the Safer South Lanarkshire agenda.

Information was provided on the following 3 areas of service delivery:-

- ◆ Structured Deferred Sentencing Initiative
- ◆ Caledonian System
- ◆ Justice Throughcare

The introduction and expansion of those areas of service delivery had significantly added to the role and responsibilities of the Operations Managers, and the need for additional Team Leader posts had been identified.

It was proposed that the current 2 full time equivalent (FTE) Family Support Workers from the LINK project be realigned to the Structured Deferred Sentencing Team.

The increased service provision required an overall establishment increase, and it was proposed that the following posts be added to Justice Services:-

- ◆ 1.5 FTE permanent Team Leader posts on Grade 3, Level 8, SCP 79-80 (£41,772 to £42,411)
- ◆ 1 FTE permanent Operations Manager post on Grade 4, Level 2, SCP 82-88 (£43,652 to £47,776)

- ◆ 0.5 FTE temporary Team Leader until 31 March 2021 on Grade 3, Level 8, SCP 79-80 (£41,772 to £42,411)

The costs associated with the above proposals would be met from existing budgets.

Officers responded to members' questions in relation to the Structured Deferred Sentencing Initiative.

**The Committee decided:**

- (1) that the report be noted; and
- (2) that the staffing proposals, as detailed in the report, be approved.

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## **11 South Lanarkshire Council Stairlift Provision**

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A report dated 28 July 2020 by the Executive Director (Finance and Corporate Resources) and Director, Health and Social Care was submitted on the key factors resulting in the high level of stairlift provision within South Lanarkshire.

The Council provided stairlifts and through-floor lifts to people with all levels of assessed risk and need following a dedicated assessment by the Council's Occupational Therapy (OT) Services. This had created a higher level of stairlift provision compared with many other local authorities in Scotland.

Details of stairlift provision, housing availability, and rehousing options were provided in Appendices 1 to 3 to the report. Information on the different types of lifts in place was provided in Appendix 4 to the report.

Stairlifts, maintenance, repairs and replacements were procured through a partnership arrangement with other local authorities and were funded by Social Work Resources.

The creation of a stairlift policy to develop local guidance and protocols, would allow for assessment decisions in relation to stairlift provision to be more equitable, fair and transparent.

The secondment of 1 full time equivalent (FTE) Occupational Therapy Team Leader post would be required to implement the policy. The cost associated with this post would be met from existing budgets.

Officers responded to members' questions in relation to: -

- ◆ the introduction of charging for equipment
- ◆ financial assessment of service users to gauge financial capacity to contribute
- ◆ the likelihood that a policy could contribute to stairlifts not being installed
- ◆ concern that the report should be considered as a budgetary item

Following further discussion, it was proposed that consideration of the report be deferred to allow for additional information to be obtained.

**The Committee decided:** that consideration of the report be deferred to a future meeting of the Committee.

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## **12 Occupational Therapy Professional Governance Structures, South Health and Social Care Partnership**

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A report dated 28 July 2020 by the Director, Health and Social Care was submitted on a proposal to revise the occupational therapy governance framework across the South Health and Social Care Partnership (HSCP).

Occupational Therapy (OT) was part of the Allied Health Professions job family and was regulated by the Health and Care Professions Council (HCPC). Occupational Therapists within South Lanarkshire were employed by either NHS Lanarkshire (NHSL) or the Council and were managed within South Lanarkshire Health and Social Care Partnership (SLHSCP).

There was currently no single professional governance and assurance structure for Council OT staff, and recent collaborations had highlighted a variance in professional and clinical governance and practice.

It was proposed that an Occupational Therapy Governance framework be developed to ensure compliance with the Royal College of Occupational Therapists Professional Standards of Practice, and the Health and Care Professions Council Standards of Proficiency. The proposed framework would not change staff terms and conditions of employment.

The proposed framework related solely to professional governance and would not impact on clinical practice. Details of the benefits of a South HSCP OT Professional Governance framework were provided in the report.

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

**The Committee decided:** that the proposal to develop a South Health and Social Care Partnership Occupational Therapy Professional Governance framework be approved, prior to wider consultation.

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## **13 Social Work Resource Plan Quarter 4 Progress Report 2019/2020**

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A report dated 31 July 2020 by the Director, Health and Social Care was submitted on the Social Work Resource Plan for 2019/2020. Details were provided on progress made at the end of Quarter 4, covering the period 1 April 2019 to 31 March 2020, in implementing the priority projects identified in the Resource Plan.

In line with the Council's performance management arrangements, a mid-year progress report on actions identified in the 2019/2020 Resource Plan would be submitted to a future meeting of the Committee.

The Quarter 4 Progress Report 2019/2020, attached as Appendix 1 to the report, provided details of progress against all performance measures and included the significant impact of COVID-19, which had impacted on progress towards meeting performance targets in some areas.

Performance measures were classified as red/amber/green (RAG), and an analysis of changes to the status of those measures between Quarter 2 and Quarter 4 was provided in Appendix 2 to the report.

Officers responded to members' questions in relation to the Care Inspectorate's Notice of Improvement, and the moratorium currently in place in relation to care home admissions in Rutherglen and Hamilton. Officers advised that the Care Inspectorate had allowed an extension to the Notice of Improvement and that the moratorium would remain in place until the Care Inspectorate had undertaken a further assessment. The Resource continued to make progress to address the issues raised.

**The Committee decided:**

- (1) that the Quarter 4 Progress Report 2019/2020, as detailed within the report and attached at Appendix 1 to the report, be noted;
- (2) that the key achievements by the Resource during 2019/2020, as detailed in the report, be noted;
- (3) that the areas for improvements and the management actions, as detailed in the report, be noted; and
- (4) that the additional scrutiny of changes in RAG status of measures between Quarter 2 and Quarter 4, as summarised in the report and as detailed in Appendix 2 to the report, be noted.

*[Reference: Minutes of 7 August 2019 (Paragraph 8)]*

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**14 Children in Need of Care and Protection – Inspection Outcome - Evaluation**

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A report dated 16 June 2020 by the Director, Health and Social Care was submitted providing an update on the Joint Inspection of Services for Children in Need of Care and Protection in South Lanarkshire.

Following on from the introduction of the Children and Young People (Scotland) Act 2014 and subsequent Child Protection Improvement Programme and National Care Review, the Care Inspectorate had reviewed and updated its inspection methodology. In the revised model, self-evaluation and inspection would both be used to actively focus on Children in Need of Care and Protection.

The Care Inspectorate methodology for the Joint Inspection of Services for Children in Need of Care and Protection posed 5 inspection specific questions of Children's Services Partnerships which were detailed in the report.

Those self-evaluation questions were posed in conjunction with a series of quality indicators that were subject to inspection by the Care Inspectorate.

The Community Planning Partnership was notified by the Care Inspectorate on 6 August 2019 that it would receive a joint inspection. The inspection took place in the weeks beginning 28 October and 2 December 2019, respectively.

Staff briefings were delivered to over 500 staff and a series of surveys were put to staff, children and young people and parents. The Care Inspectorate also undertook a number of case file readings in terms of child protection and corporate parenting cases.

Based on the inspection, the Partnership had received 'Good' evaluations in respect of leadership and meeting the needs of stakeholders. It had received 'Adequate' in the areas of impact on children and young people and improvements in the safety, wellbeing and life chances of vulnerable children and young people.

The "Adequate" evaluations predominantly related to the Corporate Parenting agenda. Actions recommended in the Improvement Report included actively engaging with care experienced children and young people through the establishment of a Champions Board and the testimony of care leavers of services and supports available to them when leaving care.

The Care Inspectorate concluded in its report that it was confident that the South Lanarkshire Partnership had the capacity to continue to improve on and address the points for action highlighted in its report, and several examples of good practice were highlighted.

The Partnership would actively engage with the Care Inspectorate Link Inspector on the improvement plan, which would be overseen by the Children's Services Strategy Group and reported to the Getting it Right for South Lanarkshire Children's Partnership Board.

Further information on the actions to be taken in respect of the improvement plan would be submitted to future meetings of the Social Work and Education Resources Committees.

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

**The Committee decided:** that the report on the outcome of the Joint Inspection of Services for Children in Need of Care and Protection be noted.

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## **15 COVID 19 – Health and Social Care Partnership Recovery Composite Report**

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A report dated 27 July 2020 by the Director, Health and Social Care was submitted providing an overview of the Health and Social Care Partnership Recovery Plans.

The Council's Recovery Plan, approved by the Executive Committee on 24 June 2020, encompassed Social Work Resources. A similar recovery plan was underway within the NHS.

The Health and Social Care Partnership (HSCP) had responded to the challenges and opportunities in a context of maintaining an integrated approach to strategic planning and operational delivery.

The HSCP maintained its position at the forefront of the response to coronavirus. Key services, such as primary care, public protection, social care, and community nursing services, had continued throughout the response period. Restrictions necessitated some re-prioritisation of services and adjustment in approach. Reduced staff availability had led to operational delivery being supported through the redeployment of HSCP staff, redeployment of staff from other Council Resources and NHS bank staff.

Non-urgent routine activities had been suspended or reduced for several months, Day Services had been suspended with alternative supports put in place for higher risk situations and non-residential charging arrangements had also been suspended for many service users.

The pandemic response had accelerated the adoption of agile working, technology-based interventions and methods of communication. The recovery phase would seek to consolidate and develop those models.

The initial phase of the recovery programme had concentrated on planning for statutory and core activities to be re-introduced. Recovery would require effective collaboration, with input from clinical and operational perspectives, together with Services such as Estates, IT, Transport, Personnel, Organisational Development and Finance.

The recovery process had commenced in accordance with the principles set out in the Recovery Report presented to the Executive Committee. Significant adjustment and remodelling would be required to take account of ongoing financial costs and risks and the opportunities of agile working.

HSCP Managers had worked with the trade unions and professional leads to re-establish services and keep people safe. Measures included additional signage, distance markers, installation of hand sanitisers, screens at reception points and distribution of Personal Protective Equipment. Public footfall into buildings remained at a minimum.

Work had begun to increase the momentum of the Transformation and Improvement Programme, to address the new challenges and capitalise on the opportunities and learning derived from the COVID-19 response.

Both the Council and NHS Lanarkshire had established governance arrangements to oversee the Recovery Programme. The HSCP's Recovery Programme was likely to move quickly and would require frequent and rapid adjustments as the COVID-19 situation evolved and restrictions were reviewed.

It was anticipated that the Integration Joint Board would require to review its Strategic Commissioning Plan and its Directions to the Council to take into consideration COVID-19 and the future challenges.

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

**The Committee decided:** that the report on the Health and Social Care Partnership's Recovery Plans be noted.

*[Reference: Minutes of the Executive Committee of 24 June 2020 (Paragraph 9)]*

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## 16 Care Homes – Change in Guidance

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A report dated 27 July 2020 by the Director, Health and Social Care was submitted on the change in guidance in respect of Care Homes.

Details were provided on:-

- ◆ the announcement by the Scottish Government of new requirements with regard to enhanced professional clinical and care oversight of care homes
- ◆ the current position and supportive engagements around care homes within South Lanarkshire
- ◆ the publication by the Scottish Government of Visiting Guidance for Adult Care Homes in Scotland
- ◆ commencement of unannounced inspections by the Care Inspectorate and fortnightly reporting of this programme to the Scottish Government
- ◆ the announcement by the Scottish Government of required medical practitioner reporting of COVID, or suspected COVID-related, death of care home residents and investigation by the COVID Death Investigations Team

On 17 May 2020, the Scottish Government issued correspondence to Chief Executives, Medical and Public Health Directors and Chief/Lead Officers setting out new arrangements to be implemented to ensure appropriate clinical and care professionals took direct responsibility for clinical support for each care home in their Board area. Nurse and Medical Directors were required to take direct responsibility for the clinical support required for each Care Home in their NHS Board area, in collaboration with Directors of Public Health.

It introduced a requirement for all Health Boards to establish a Care Home Clinical and Care Professional Oversight (CHCCPO) team, comprised of the following professional roles:

- ◆ NHS Director of Public Health
- ◆ Executive Nurse lead

- ◆ Medical Director
- ◆ Chief Social Work Officer
- ◆ Health and Social Care Partnership Chief Officer

From 18 May, the CHCCPO had assumed its responsibilities, including daily discussion, reviewing each care home in its area. Joint inspection visits would also be undertaken. Weekly testing arrangements for all Care Home staff were in place. Testing information reports were submitted weekly to the Scottish Government.

Within South Lanarkshire, there were 7 Council and 41 independent sector registered care homes. Extensive work activities included:-

- ◆ review and update of Care Home Business Continuity Plans
- ◆ weekly care home teleconferences
- ◆ increased engagement and contact with locality staff and the Care Home Liaison Team
- ◆ support for management with issues such as infection outbreaks, Personal Protective Equipment availability
- ◆ signposting and engagement around staff health and wellbeing support

On 25 June 2020, the Scottish Government published Visiting Guidance for Adult Care Homes in Scotland. This set out a 4-stage approach to the re-introduction of visiting. From 3 July 2020, care home residents would be able to receive an outdoor visit from a nominated visitor if the Care Home had been COVID-19 free for 28 days.

The Health Protection Team and the Clinical and Care Oversight group had responsibility to support Care Homes to ensure risk assessments and a revised visiting policy were in place prior to seeking approval for visiting to re-commence from Public Health.

The Care Inspectorate had commenced a programme of unannounced inspections to care homes. More recent inspections would be graded against the revised care home quality assurance framework.

From 21 May 2020, medical practitioners were required to report deaths, or presumed deaths, of residents within care homes due to COVID-19 to the Procurator Fiscal. Reporting would also be required for staff where there were reasonable grounds to suspect that they might have contracted the virus in the course of their employment or occupation.

The Crown Office and Procurator Fiscal Service (COPFS) had established a dedicated COVID-19 Death Investigation Team (CDIT), working closely with Police Scotland to obtain the information required to identify and investigate those deaths.

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

The Director highlighted that the report presented the current position and that officers had now moved forward to plan for usual winter challenges, taking cognisance that COVID-19 would still be in circulation. Business continuity planning and service re-design were underway.

#### **The Committee decided:**

- (1) that the change in guidance and support monitoring arrangements in respect of Care Homes be noted; and
- (2) that the lead remits of the Council and Health and Social Care Partnership, including incorporation of the Chief Social Work Officer in oversight arrangements of Care Homes, be noted.

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**17 Urgent Business**

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There were no items of urgent business.



# Report

3

Report to:	<b>Social Work Resources Committee</b>
Date of Meeting:	<b>28 October 2020</b>
Report by:	<b>Executive Director (Finance and Corporate Resources) Director, Health and Social Care</b>

Subject:	<b>Revenue Budget Monitoring 2020/2021 - Social Work Resources</b>
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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 to 14 August 2020 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 overspend of £0.332m 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 second 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 on 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 14 August 2020, there is an overspend position of £0.332m 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 are being included in the Mobilisation Plan which the Scottish Government are 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 Scottish Government are included in Appendix B and total £7.211m.

- 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 £0.524m at period 5 and is included at Appendix D.
- 5.5. Taking the two figures together gives additional cost to the Council of £7.735m.
- 5.6 The Social Care Mobilisation monies received to date have been fully spent. As at 14 August 2020, the Council has received £2.976m and notification of a further £2.488m, bringing total confirmed funding to £5.464m. A further £2.271m would be required to meet the spend of £7.735m 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 (£0.223m), 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 5 is £0.203m 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 are starting to also see pressures in relation to increasing costs within the Home Care service. Work is ongoing to identify actions to manage this pressure, therefore no account has been taken in these figures regarding this pressure. As at 14 August, the pressure faced is estimated at £1.7m, however actions are identified to reduce this going forwards.
- 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 climate change, sustainability and environmental implications 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**

24 September 2020

## **Link(s) to Council Values/Objectives**

♦ Accountable, Effective, Efficient and Transparent

## **Previous References**

♦ None

## **List of Background Papers**

♦ Financial Ledger and budget monitoring results to 14 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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## SOUTH LANARKSHIRE COUNCIL

## Revenue Budget Monitoring Report

Social Work Resources Committee: Period Ended 14 August (No.5)

## Social Work Resources Summary

	Annual Budget	Forecast for Year	Annual Forecast Variance	Budget Proportion 14/8/20	Actual 14/8/20	Variance 14/8/20		% Variance 14/8/20	Note
	£000	£000	£004	£000	£000	£000			
<b><u>Budget Category</u></b>									
Employee Costs	91,214	91,214	0	31,835	33,445	(1,610)	Over	-5.1%	
Property Costs	2,649	2,649	0	907	997	(90)	Over	-9.9%	
Supplies & Services	5,798	5,798	0	1,388	2,749	(1,361)	Over	-98.1%	
Transport & Plant	4,339	4,339	0	3,070	2,987	83	Under	2.7%	
Administration Costs	1,643	1,643	0	417	416	1	Under	0.2%	
Payments to Other Bodies	20,157	20,157	0	6,697	6,880	(183)	Over	-2.7%	
Payments to Contractors	105,631	105,631	0	27,564	32,400	(4,836)	Over	-17.5%	
Transfer Payments	3,111	3,111	0	1,197	1,107	90	Under	7.5%	
Financing Charges	263	263	0	133	148	(15)	Over	-11.3%	
<b>Total Controllable Exp.</b>	234,805	234,805	0	73,208	81,129	(7,921)	Over	-10.8%	
<b>Total Controllable Inc.</b>	(62,394)	(62,394)	0	(10,752)	(18,341)	7,589	over recovered	-70.6%	
<b>Net Controllable Exp.</b>	172,411	172,411	0	62,456	62,788	(332)	Over	-0.5%	

**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 14 August (No.5)

## Covid-19

<b>Budget Category</b>	<b>Annual Budget</b>	<b>Forecast for Year</b>	<b>Annual Forecast Variance</b>	<b>Budget Proportion 14/8/20</b>	<b>Actual 14/8/20</b>	<b>Variance 14/8/20</b>		<b>% Variance 14/8/20</b>	<b>Note</b>
	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>			
Employee Costs	0	0	0	0	1,637	(1,637)	Over	n/a	1
Property Costs	0	0	0	0	114	(114)	Over	n/a	2
Supplies & Services	0	0	0	0	1,294	(1,294)	Over	n/a	3
Transport & Plant	0	0	0	0	6	(6)	Over	n/a	
Administration Costs	0	0	0	0	18	(18)	Over	n/a	
Payments to Other Bodies	0	0	0	0	174	(174)	Over	n/a	4
Payments to Contractors	0	0	0	0	4,185	(4,185)	Over	n/a	5
Transfer Payments	0	0	0	0	5	(5)	Over	n/a	
Financing Charges	0	0	0	0	1	(1)	Over	n/a	
<b>Total Controllable Exp.</b>	0	0	0	0	7,434	(7,434)	Over	n/a	6
<b>Total Controllable Inc.</b>	0	0	0	0	(7,211)	7,211	Over recovered	n/a	
<b>Net Controllable Exp.</b>	0	0	0	0	223	(223)	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 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 to Carers during COVID-19.

**5 Payment to Contractors**

This expenditure relates to the response to COVID-19 to create capacity in hospitals.

**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 14 August 2020 (No.5)

## Children and Families Services

	Annual Budget	Forecast for Year	Annual Forecast Variance	Budget Proportion 14/08/20	Actual 14/08/20	Variance 14/08/20		% Variance 14/08/20	Note
	£000	£000	£000	£000	£000	£000			
<b><u>Budget Category</u></b>									
Employee Costs	16,346	16,346	0	5,825	5,778	47	Under	0.8%	
Property Costs	330	330	0	95	96	(1)	Over	-1.1%	
Supplies & Services	675	675	0	206	203	3	Under	1.5%	
Transport & Plant	624	624	0	169	134	35	Under	20.7%	
Administration Costs	288	288	0	107	93	14	under	13.1%	
Payments to Other Bodies	8,785	8,785	0	3,385	3,418	(33)	Over	-1.0%	
Payments to Contractors	5,865	5,865	0	1,826	2,319	(493)	Over	-27.0%	1
Transfer Payments	3,097	3,097	0	1,193	1,096	97	Under	8.1%	2
Financing Charges	17	17	0	8	16	(8)	Over	-100%	
<b>Total Controllable Exp.</b>	36,027	36,027	0	12,814	13,153	(339)	Over	-2.6%	
<b>Total Controllable Inc.</b>	(417)	(417)	0	(106)	(242)	136	over recovered	-128.3%	3
<b>Net Controllable Exp.</b>	35,610	35,610	0	12,708	12,911	(203)	Over	-1.6%	

**Variance Explanations****1. Payment to Contractors**

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

**2. 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.

**3. 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 Fund Carry Forward Net Effect £0, Employee Costs (£0.102m), Payment to Private Contractors £0102m.

## SOUTH LANARKSHIRE COUNCIL

## Revenue Budget Monitoring Report

## Social Work Resources Committee: Period Ended 14 August 2020 (No.5)

## Adults and Older People Services

<b>Budget Category</b>	<b>Annual Budget</b>	<b>Forecast for Year</b>	<b>Annual Forecast Variance</b>	<b>Budget Proportion 14/08/20</b>	<b>Actual 14/08/20</b>	<b>Variance 14/08/20</b>		<b>% Variance 14/08/20</b>	<b>Note</b>
	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>			
Employee Costs	61,559	61,559	0	21,363	21,437	(74)	Over	-0.3%	1
Property Costs	1,640	1,640	0	592	568	24	under	4.1%	
Supplies & Services	4,572	4,572	0	996	1069	(73)	over	-7.3%	2
Transport & Plant	3,344	3,344	0	2,664	2,647	17	Under	0.6%	
Administration Costs	412	412	0	152	159	(7)	over	-4.6%	
Payments to Other Bodies	10,793	10,793	0	3,191	3,162	29	Under	0.9%	
Payments to Contractors	99,688	99,688	0	25,714	25,872	(158)	Over	-0.6%	
Transfer Payments	7	7	0	2	2	0	-	0.0%	
Financing Charges	35	35	0	23	23	0	under	0.0%	
<b>Total Controllable Exp.</b>	182,050	182,050	0	54,697	54,939	(242)	over	-0.4%	
<b>Total Controllable Inc.</b>	(54,799)	(54,799)	0	(8,426)	(8,668)	242	over recovered	-2.9%	3
<b>Net Controllable Exp.</b>	127,251	127,251	0	46,271	46,271	0		0.0%	

**Variance Explanations****1. Employee Costs**

The overspend is as a result of additional posts to meet the requirements within Home Care and also as a result of Home Care recruitment for future vacancies to maintain staffing levels.

**2. Supplies & Services**

This overspend relates to the license costs associated with the new home care scheduling system. Additionally, within catering as a result of COVID-19 there has been a delay in implementing 2020-21 savings. The cost of not achieving this savings is offset by COVID-19 funding from the Scottish Government.

**3. Income**

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

**Budget Virements**

## SOUTH LANARKSHIRE COUNCIL

## Revenue Budget Monitoring Report

Social Work Resources Committee: Period Ended 14 August 2020 (No.5)

## Performance and Support Services

	Annual Budget	Forecast for Year	Annual Forecast Variance	Budget Proportion 14/8/20	Actual 14/8/20	Variance 14/8/20		% Variance 14/8/20	Note
	£000	£000	£000	£000	£000	£000			
<b><u>Budget Category</u></b>									
Employee Costs	6,835	6,835	0	2,405	2,396	9	under	0.4%	
Property Costs	602	602	0	188	184	4	Under	2.1%	
Supplies & Services	435	435	0	151	147	4	under	2.6%	
Transport & Plant	251	251	0	199	163	36	under	18.1%	
Administration Costs	426	426	0	122	109	13	Under	10.7%	
Payments to Other Bodies	35	35	0	2	6	(4)	over	(200.0%)	
Payments to Contractors	0	0	0	0	0	0	-	n/a	
Transfer Payments	0	0	0	0	4	(4)	over	n/a	
Financing Charges	200	200	0	97	97	0	-	0.0%	
<b>Total Controllable Exp.</b>	8,784	8,784	0	3,164	3,106	58	Under	1.8%	
<b>Total Controllable Inc.</b>	(740)	(740)	0	(95)	(95)	0		0.0%	
<b>Net Controllable Exp.</b>	8,044	8,044	0	3,069	3,011	58	under	1.9%	

**Variance Explanations**



## SOUTH LANARKSHIRE COUNCIL

## Revenue Budget Monitoring Report

Social Work Resources Committee: Period Ended 14 August 2020 (No.5)

## Justice Services

<b>Budget Category</b>	<b>Annual Budget</b>	<b>Forecast for Year</b>	<b>Annual Forecast Variance</b>	<b>Budget Proportion 14/8/20</b>	<b>Actual 14/8/20</b>	<b>Variance 14/8/20</b>		<b>% Variance 14/8/20</b>	<b>Note</b>
	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£004</b>			
Employee Costs	6,474	6,474	0	2,242	2,197	45	Under	2.0%	1
Property Costs	77	77	0	32	35	(3)	Over	-9.4%	
Supplies & Services	116	116	0	35	36	(1)	Over	-2.9%	
Transport & Plant	120	120	0	37	37	1	Under	2.6%	
Administration Costs	517	517	0	36	37	(1)	Over	-2.8%	
Payments to Other Bodies	544	544	0	119	120	(1)	Over	-0.8%	a
Payments to Contractors	78	78	0	24	24	0	-	n/a	
Transfer Payments	7	7	0	2	0	2	Under	100.0%	
Financing Charges	11	11	0	5	11	(6)	Over	-120.0%	
<b>Total Controllable Exp.</b>	<b>7,944</b>	<b>7,944</b>	<b>0</b>	<b>2,533</b>	<b>2,497</b>	<b>36</b>	<b>Under</b>	<b>1.4%</b>	
<b>Total Controllable Inc.</b>	<b>(6,438)</b>	<b>(6,438)</b>	<b>0</b>	<b>(2,125)</b>	<b>(2,125)</b>	<b>0</b>	<b>-</b>	<b>0.0%</b>	<b>a</b>
<b>Net Controllable Exp.</b>	<b>1,506</b>	<b>1,506</b>	<b>0</b>	<b>408</b>	<b>372</b>	<b>36</b>	<b>Under</b>	<b>8.8%</b>	

Variance Explanations

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

Budget Virements

a. Correction of incorporation of funding for Caledonian Project Net Effect £0: Payment to Other Bodies £0.149m, Income (£0.149m).



# Report

4

Report to: **Social Work Resources Committee**  
 Date of Meeting: **28 October 2020**  
 Report by: **Executive Director (Finance and Corporate Resources)  
 Director (Health and Social Care)**

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

## 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 14 August 2020.

## 2. Recommendation(s)

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

- (1) that the Social Work Resources capital programme of £0.844 million, and expenditure to date of £0.057 million, be noted.

## 3. Background

3.1. This is the second 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. As noted in the last report to the Committee on 19 August 2020, the budget for Social Work Resources for financial year 2020/2021, including carry forward, was £5.817 million. It was also noted that progress in the delivery of this new year programme had been affected by the lockdown due to COVID-19 along with the ongoing requirements of social distancing.

3.3. As a result, a revised 2020/2021 General Services Capital Programme was presented to the Executive Committee on 23 September 2020. The focus of the paper was the level of project deliverability which could be achieved in the current year. The revised programme for Social Work Resources is therefore £0.844 million.

3.4. 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. As detailed in Section 3.3., the total revised capital programme for Social Work Resources for 2020/2021 is £0.844 million. Anticipated spend to date was £0.057 million, and £0.057 million has been spent to 14 August 2020. This represents a breakeven position.

## **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)**

8 October 2020

### **Link(s) to Council Values/Ambitions/Objectives**

- Accountable, Effective, Efficient and Transparent

### **Previous References**

- Social Work Resources Committee, 19 August 2020
- Executive Committee, 23 September 2020

### **List of Background Papers**

- Financial ledger to 14 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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**South Lanarkshire Council**  
**Capital Expenditure 2020-2021**  
**Social Work Resources Programme**  
**For Period 1 April 2020 – 14 August 2020**

<b><u>Social Work Resources</u></b>	Base Budget £000	Budget Adjustments £000	Slippage £000	Total Budget £000	Budget to Date £000	Actual Expenditure £000
Social Work - Care Facilities	744	0	0	744	57	57
Social Work - Other	100	0	0	100	0	0
<b>TOTAL</b>	<b>844</b>	<b>0</b>	<b>0</b>	<b>844</b>	<b>57</b>	<b>57</b>



# Report

Report to: **Social Work Resources Committee**  
 Date of Meeting: **28 October 2020**  
 Report by: **Executive Director (Finance and Corporate Resources)  
 Director, Health and Social Care**

Subject: **Social Work Resources – Workforce Monitoring – July to August 2020**

## 1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ provide employment information for July to August 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 July to August 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 13 June 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 July to August 2020.

## 4. Monitoring Statistics

### 4.1. Attendance Statistics (Appendix 1)

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

The Resource absence figure for August 2020 was 5.2%, which represents an increase of 0.6% when compared to the previous month and is 2.1% higher than the Council-wide figure. Compared to August 2019, the Resource absence figure has decreased by 1.0%.

Based on the absence figures at August 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 12.1 days, compared with the overall figure for the Council of 7.0 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.

**4.2. Occupational Health (Appendix 2)**

In terms of referrals to occupational health, which include medical examinations and physiotherapy, 209 referrals were made this period, a decrease of 119 when compared with the same period last year.

**4.3. Accident/Incident Statistics (Appendix 2)**

There were 53 accidents/incidents recorded within the Resource this period, an increase of 31 when compared to the same period last year.

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

There were 3 disciplinary hearings held within the Resource this period, which is a decrease of 4 when compared with the same period last year. There were 5 grievance hearings within the Resource this period, which is an increase of 2 when compared with the same period last year. There was 1 Dignity at Work complaint raised within the Resource this period, which remains unchanged when compared with the same period last year.

**4.5. Analysis of Leavers (Appendix 2)**

There were 14 leavers in the Resource this period who were eligible for an exit interview, a decrease of 10 when compared with the same period last year. Exit interviews were held with 36% of employees, compared with 8% 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 July to August 2020, 40 (30.40 FTE) employees in total left employment and managers indicated that 38 (28.90 FTE) posts are being filled. Of the remaining 2 posts, 1 (1.0 FTE) was due to the end of a fixed term contract and one (0.50 FTE) will see its budget transferred to another post.**



## **5. Staffing Watch**

- 5.1. There has been an increase of 25 in the number of employees in post from 14 March 2020 to 13 June 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)**

23 September 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 – 19 August 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		September	6.1	6.8		September	5.4	6.4		September	4.4	4.5		
October	5.7	6.1		October	5.6	6.5		October	5.6	6.2		October	4.4	4.6		
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	7.9	Annual Average	5.7	6.6	6.4	Annual Average	4.4	4.8	4.4	
Average Apr-Aug	5.2	5.5	4.4	Average Apr-Aug	6.2	7.2	7.8	Average Apr-Aug	5.5	6.0	5.6	Average Apr-Aug	3.9	4.0	3.1	
No of Employees at 31 August 2020			1825	No of Employees at 31 August 2020			1131	No of Employees at 31 August 2020			2956	No of Employees at 31 August 2020			16075	

For the financial year 2020/21, the projected average days lost per employee equates to 12.1 days.

## SOCIAL WORK RESOURCES

	Jul-Aug 2019	Jul-Aug 2020
<b>MEDICAL EXAMINATIONS</b>		
Number of Employees Attending	115	89
<b>EMPLOYEE COUNSELLING SERVICE</b>		
Total Number of Referrals	15	9
<b>PHYSIOTHERAPY SERVICE</b>		
Total Number of Referrals	107	59
<b>REFERRALS TO EMPLOYEE SUPPORT OFFICER</b>		
	85	48
<b>REFERRALS TO COGNITIVE BEHAVIOUR THERAPY</b>		
	6	4
<b>TOTAL</b>	<b>328</b>	<b>209</b>

CAUSE OF ACCIDENTS/INCIDENTS	Jul-Aug 2019	Jul-Aug 2020
Over 7 day absences	2	2
Over 3 day absences**	1	1
Minor	5	6
Near Miss	1	0
Violent Incident: Physical****	4	39
Violent Incident: Verbal*****	9	5
<b>Total Accidents/Incidents</b>	<b>22</b>	<b>53</b>

\*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	Jul-Aug 2017	Jul-Aug 2018
Total Number of Hearings	7	3

## Time Taken to Convene Hearing Jul - Aug 2020

0-3 Weeks	4-6 Weeks	Over 6 Weeks
1	0	2

RECORD OF GRIEVANCE HEARINGS	Jul-Aug 2019	Jul-Aug 2020
Number of Grievances	3	5
Number Resolved at Stage 2	1	0
Still in Progress	2	5

RECORD OF DIGNITY AT WORK	Jul-Aug 2019	Jul-Aug 2020
Number of Incidents	1	1
Number Resolved at Formal Stage	1	0
Still in Process	0	1

ANALYSIS OF REASONS FOR LEAVING	Jul-Aug 2019	Jul-Aug 2020
Career Advancement	0	1
Poor Relationship with Manager/Colleagues	0	1
Travelling Difficulties	0	1
Dissatisfaction With Terms and Conditions	0	1
Other	2	1
<b>Number of Exit Interviews conducted</b>	<b>2</b>	<b>5</b>

<b>Total Number of Leavers Eligible for Exit Interview</b>	<b>24</b>	<b>14</b>
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<b>Percentage of interviews conducted</b>	<b>8%</b>	<b>36%</b>
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	July - August 2020		Reconciliation figure		Cumulative total	
			Apr 2020 - June 2020			
	FTE*	H/C**	FTE	H/C	FTE	H/C
Terminations/Leavers	30.40	40	34.76	46	65.16	86
Being replaced	28.90	38	34.76	46	63.66	84
Held pending savings	0.00	0	0.00	0	0.00	0
Filled on fixed term basis	0.00	0	0.00	0	0.00	0
Budget transfer to other post	0.50	1	0.00	0	0.50	1
End of fixed term contract	1.00	1	0.00	0	1.00	1
No reason provided	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 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

**1. As at 14 March 2020**

Total Number of Employees									
MALE		FEMALE		TOTAL					
F/T	P/T	F/T	P/T						
216	191	971	1409	2787					
*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	1290.00	518.26	554.01	23.00	25.00	2.00	0.00	0.00	2413.27



# Report

6

Report to: **Social Work Resources Committee**  
 Date of Meeting: **28 October 2020**  
 Report by: **Director, Health and Social Care**  
**Executive Director, Finance and Corporate Resources**

Subject: **Review of Drug Treatment and Testing Order Service and staffing**

## 1. Purpose of Report

1.1. The purpose of the report is to: -

- ♦ provide an update on the review of the Drug Treatment and Testing Order (DTTO) Service delivery within Justice Services;
- ♦ request an increase in the DTTO establishment in response to increased workload during the past two years.

## 2. Recommendation(s)

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

- (1) that the content of the report be noted; and
- (2) to approve the revised preferred operating model and the addition to the establishment recommended at section 8 of the report, this will increase the establishment by a permanent 0.6 FTE.

## 3. Background

- 3.1 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 South Lanarkshire Council (SLC) are committed to improving the quality of available interventions in Justice Services for all service users, including the provision of intensive and responsive drug treatment and testing in the community to individuals who are placed on DTTO by a court.
- 3.3 Drug Treatment and Testing Orders (DTTO) were introduced by the Crime and Disorder Act 1998 across Scotland and are a criminal justice community-based court disposal. The DTTO is a community-based approach focussing on drug treatment as the primary means of reducing offending behaviour, rather than the standard offence focused approach of a Community Payback Order (CPO).
- 3.4 DTTOs are granted by the Sheriff if a service-user's substance misuse issues are significantly causal to their offending. Orders can range from six months to three years and are utilised if the service-user is at risk of receiving a custodial sentence.

The goal is to support the service-user to address substance misuse issues and engage in treatment which will also reduce involvement in future offending behaviour. Social Workers in the DTTO service carry out multi-disciplinary assessments of suitability for the order which are submitted to the court. They also carry out oral fluid testing and attend court with service users on a 4 weekly basis to account for progress with the order. During the period of the pandemic, and for infection control reasons, oral fluid testing has been suspended.

- 3.5 The Drug Treatment and Testing Order (DTTO) Service is available to all residents of South Lanarkshire Council and is based in High Patrick Street, Hamilton, with an outreach clinic in Lanark.
- 3.6 South Lanarkshire Council hosted the pan-Lanarkshire DTTO service from April 2004. In response to the new Community Justice arrangements, the DTTO was reviewed in 2017 along with all Pan Lanarkshire services. The review group recommended that the DTTO separate and that North and South Lanarkshire deliver separate DTTO services. At the time of the review it was anticipated that as the service was solely servicing South Lanarkshire residents, there would be a reduction in the volume of DTTOs imposed. The separation also led to a reduction in the budget and staffing compliment to cover the DTTO service in South Lanarkshire.
- 3.7 A reduced staffing structure was approved by the Social Work Resources Committee on 6 December 2017 and is outlined in table 8.1. In addition, the nursing (1 FTE Band 6 nurse) and general practitioner (GP) cover (2 GP sessions) were provided by health and paid for separately.
- 3.8 The service has continued to provide intensive supports to individuals subject to DTTO imposed by Hamilton, Lanark, and Glasgow Sheriff and High Courts.
- 3.9 The volume of DTTOs is significantly greater than was projected at the time of the Pan Lanarkshire review and redesign in 2017. The number of DTTOs has remained very similar despite the service only being offered to residents from South Lanarkshire Council.

#### **4. Identified Service Risks**

- 4.1 Due to concerns related to managing the ongoing volume of DTTOS, a Service Review was carried out in 2020. The review identified that:
  - ◆ the revised health and social work staffing compliment did not offer sufficient cover to meet the demand for DTTO's, leading to risks of not meeting statutory requirements.
  - ◆ The staffing compliment did not offer the capacity to cover for absence due to annual leave, training or for other reasons.

#### **5. Interim Arrangements**

- 5.1 The significant issues identified by the review demanded that without delay interim arrangements required to be implemented to mitigate the risks to ensure the DTTO Service continued to meet its statutory function. Temporary arrangements were agreed with the Community Addiction Recovery Service (CaRES) to offer contingency nursing and GP cover where possible. This was supplemented by additional social work tasks being taken on by the Team leader and Operations Manager. The interim arrangements are not sustainable in the medium to longer term.



## **6. Service Review**

- 6.1 A review group was established, led by the Head of Children and Justice Services, and consisted of the Justice Manager, Operations Manager, CARES Service Manager and Operations Manager, G.P and DTTO Team Leader and Clinical Director. The review group developed a Terms of Reference (TOR) (Appendix 2) underpinning the development of an options appraisal. In the process of the review the group benchmarked with other local authorities to help inform an options appraisal for the future delivery of the service. Benchmarking highlighted that in areas without a specialised DTTO service, there was a decline in DTTO uptake, poorer outcomes for service-users, and a loss in credibility of DTTOs being an alternative to custodial sentences.

## **7. Recommended Operating Model**

- 7.1 To enhance the staffing establishment as outlined in table 8.1 at Section 8. Additional staffing cover would mitigate the current service risks outlined in section 4.1. Specifically, it would ensure the statutory requirements are met, and also offer contingency cover as a result of absence.
- 7.2 Realigning of the nursing component of the DTTO to the SLC Community Addiction Recovery Service (CAREs) and streamlining the GP cover to 1 session will ensure there is the capacity for contingency nursing and medical cover as required due to absence. It will also improve opportunities for access to psychological and psychiatric services. Locality based delivery of health interventions will reduce travelling time and costs for service users and create efficiencies.
- 7.3 To ensure there is a single point of contact, and strong working relationships are maintained with the court and service users, High Patrick Street will remain as the central base for DTTO Team Leader, Social Workers and Substance Misuse Workers. The central base ensures that strong communication and oversight of the quality of DTTO initial and review court reports is maintained. The team, whilst centrally based, will also continue to liaise closely with health colleagues.

## **8. Employee Implications**

- 8.1 The increased service provision has led to a requirement for an establishment increase. The Employee implications are detailed below and would be on a permanent basis.

<b>Post (Social Work)</b>	<b>Existing Number of Posts (FTE)</b>	<b>Proposed Number of Posts (FTE)</b>	<b>Grade</b>	<b>SCP Range</b>	<b>Hourly Rate</b>	<b>Annual Salary</b>	<b>Gross Cost inc on costs 30.3%</b>
Team Leader	0.5	0.6	Grade 3 Level 8	79 – 80	£22.89 - £23.24	£41,772 - £42,411	£32,657 - £33,157
Social Worker	1.5	2	Grade 3 Level 2 - 4	63 - 74	£18.08 - £21.25	£32,994 - £38,779	£85,982 - £101,058
Substance Misuse Worker	1.5	2	Grade 2 Level 2-4	39 - 57	£12.68 - £16.52	£23,139 - £30,147	£60,300 - £78,563
Admin Assistant	0.5	0.5	Grade 2 Level 1	34 - 35	£11.78 - £11.98	£21,497 - £21,862	£28,011 - £28,487
Clerical Assistant	1.5	1.0	Grade 1 Level 1-4	20 - 31	£9.60 - £11.29	£17,519 - £20,630	£22,827 - £26,846
Total Costs	5.5	6.1					£215,774 - £253,868
Total Additional Costs							£30,600 - £37,009

## **9. Financial Implications**

- 9.1 The costs of the additional staffing will be between £30,600 and £37,009 and will be funded by a reconfiguration of the existing service model as outlined at section 7.

## **10. Climate Change, Sustainability and Environmental Implications**

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

## **11. Other Implications**

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

## **12. Equality Impact Assessment and Consultation Arrangements**

- 12.1. 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.
- 12.2. Consultation has taken place with the Trade Unions in regard to the recommendations contained within this report.

**Val de Souza**  
**Director, Health and Social Care**

**Paul Manning**  
**Executive Director (Finance and Corporate Resources)**

24 September 2020

**Link(s) to Council Values/Objectives**

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

**Previous References**

- ◆ none

**List of Background Papers**

- ◆ DTTO Review paper

**Contact for Further Information**

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

Diane Dobbie, Service Manager (Children and Justice)

Ext: 3952 (Phone: 01698 453952)

Email: [diane.dobbie@southlanarkshire.gov.uk](mailto:diane.dobbie@southlanarkshire.gov.uk)



# Report

Report to:	<b>Social Work Committee</b>
Date of Meeting:	<b>28 October 2020</b>
Report by:	<b>Director, Health and Social Care</b>

Subject:	<b>Meeting our Corporate Parenting Responsibilities &amp; South Lanarkshire Council Revised Strategy</b>
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## 1. Purpose of Report

1.1. The purpose of the report is to:-

- ♦ provide the Committee with an update of the review of the corporate parenting strategy governance structure.
- ♦ highlight the importance of the Committee's Corporate Parenting Responsibilities.

## 2. Recommendation(s)

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

- (1) the Committee's responsibilities, and continued engagement in relation to Corporate Parenting agenda for our Care Experience young people, be noted
- (2) the revised corporate parenting structure and governance be noted.

## 3. Background

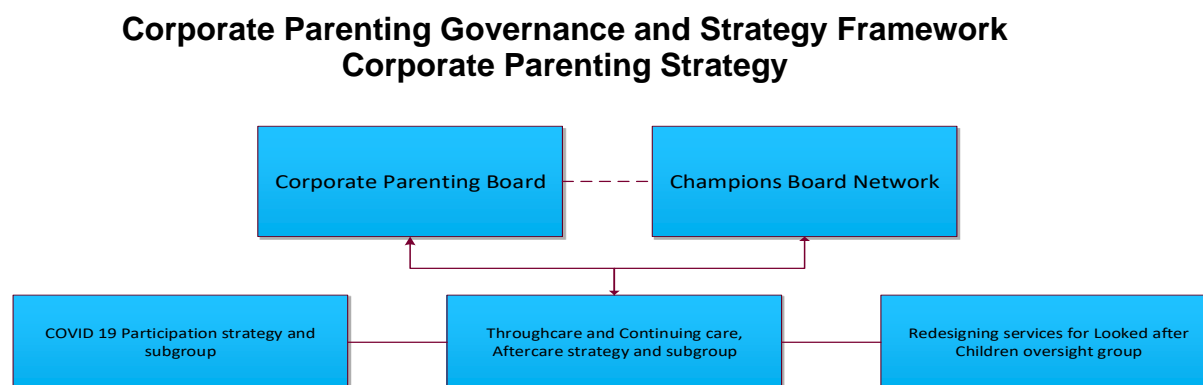
- 3.1. Part 9 of the Children and Young People (Scotland) Act 2014 outlines a range of legislative duties for corporate parents across Scotland. These duties aim to ensure the attention and resources of corporate parents are focused on the task of safeguarding and promoting the wellbeing of Scotland's looked after children and care leavers. When a child becomes looked after the Council and key partners become the **Corporate Parent**. Put simply, the term '**Corporate Parent**' means the collective responsibility of the Council, elected members, employees, and partner agencies, for providing the best possible care and safeguarding for the children who are looked after by us. A good corporate parent will want the best outcomes for their looked after children, accept responsibility for them, and make their needs a priority
- 3.2. South Lanarkshire's Corporate Parenting Strategy and Plan has a 2-year cycle, the current plan (2018-2020) progress is currently being evaluated by the corporate parenting strategy group.
- 3.3. In November 2019 as part of the evaluation process, the Corporate Parenting Strategy Group started a process of review of what the future priorities should be, based on utilising our joint strategic needs assessment. This process will directly inform our 2020-2022 corporate parenting strategy and plan. The most recent joint Children's Inspection highlighted that our Corporate Parenting Strategic Group and Board did not evidence the same degree of strategic scrutiny and oversight in

relation to their Corporate Parenting responsibilities across all care groups as evidenced for child protection

- 3.4 The evaluative process highlighted that, due to the maturity of the Corporate Parenting agenda, and its significance in legalisation, we needed to undertake a review of the governance and sub-structures that support this strategy, taking account of connecting our Champions Board approach into the existing structures. In addition, our recent Children's Inspection highlighted the need for greater degree of governance in relation to our Corporate Parenting improvement agenda.

#### 4. Next Steps

- 4.1 Agreed Revised Corporate Parenting governance and structure is detailed below:-



- 4.2. The proposal creates an Executive Corporate Parenting Board (representative of Senior Chief Officers across CPP) and locates the South Lanarkshire's Champions Board approach within the current structure. The strategy subgroups, which sit underneath this governance structure, would be aligned to the priority improvement areas in South Lanarkshire. The priority areas are based on improvement areas from the Inspection evaluation, including survey from young people, Champions Board pledges, and vision of the independent care review.
- 4.3. The Corporate Parenting Strategy Group have been developing a Champions Board approach, co-designed with our network of care experienced young people, supported by Who Cares? Scotland who we have commissioned to support its development. This approach will create forums and unique space for care experience young people to meet with key decision makers, service leads and elected members to influence and be a part of design and delivery of services which directly affects them.
- 4.4. South Lanarkshire launched its Champions Board approach in an evening event on the 10 December 2019. This provided an opportunity for a number of our care experienced young people to present their Champions Board approach to key partners who have corporate parenting responsibilities, and provided a benchmark on how to take the approach forward in the future.

## **5. Employee Implications**

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

## **6. Financial Implications**

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

## **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 other implications associated with the content of 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 or procedure and there is no requirement to undertake an equality impact assessment.
- 9.2. Consultation and engagement with children and young people will be undertaken as outlined at 4.4 and 4.5 above.

**Val de Souza,**  
**Director, Health and Social Care**

20 September 2020

## **Link(s) to Council Values/Objectives**

- ◆ protect vulnerable children, young people and adults
- ◆ get it right for children and young people
- ◆ support our communities by tackling disadvantage and deprivation and supporting aspiration

## **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:- Aine McCrae, Service Manager, Child and Family Services

Ext: 3943 (Phone: 01698 453943)

Email: [Aine.McCrea@southlanarkshire.gov.uk](mailto:Aine.McCrea@southlanarkshire.gov.uk)





# Report

9

Report to:	<b>Social Work Resources Committee</b>
Date of Meeting:	<b>28 October 2020</b>
Report by:	<b>Director, Health and Social Care</b>

Subject:	<b>Adult Support and Protection Progress Update</b>
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## 1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ inform of the impending inspection of Adult Support and Protection
- ◆ provide a progress update on preparation for the Adult Support and Protection inspection to date

## 2. Recommendation(s)

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

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

## 3. Background

- 3.1. The Scottish Government published a three-year Improvement Plan on Adult Support and Protection (ASP) in October 2019 to complement and strengthen local ASP activity.
- 3.2. A joint inspection of ASP, involving six adult protection partnerships, was carried out in 2017/18 in terms of scrutiny and assurance that ASP is being undertaken across Scotland. Building on this inspection, the Care Inspectorate outlined a programme to further examine ASP across the remaining 26 partnership areas.
- 3.3. The Care Inspectorate announced a two-year inspection programme in February this year and published details of Phase 1, which would take place from April 2020 to March 2021. South Lanarkshire Health and Social Care Partnership (SLHSCP) has been included in the first phase of the programme. Whilst COVID-19 has impacted on the timetable, the Care Inspectorate has indicated that preparations for the resumption of inspection activity started in August 2020.
- 3.4. With the rise of community transmission of COVID-19, continued restrictions and associated winter pressures, the Chief Officers Group has written to the Care Inspectorate to request the timing of any forthcoming inspection be delayed at least until May 2021, thus enabling the Health and Social Care Partnership (HSCP) to fully engage in the inspection process. As a key partner in ASP, the focus for NHS Lanarkshire (NHSL) from September will be on delivering the flu vaccination programme, by appointment, to over 300,000 individuals across Lanarkshire, this includes:
- ◆ children aged 2 to 5 years (must be age 2 or above on 1 September 2020 and not yet in school)
  - ◆ everyone aged under 65 at risk

- ◆ everyone aged 65 and over (by 31 March 2021)
  - ◆ household members of people who are shielding
  - ◆ 55 to 64 years (who are not otherwise eligible, if vaccine supplies allow later in the programme)
- 3.5. Due to restrictions, drop-in facilities are not available this year and appointments will be held within large community vaccination sites. Community nurses will provide vaccination to those unable to leave their home and a vaccination programme has been established for school aged children and the Health and Social Care workforce.
  - 3.6. Whilst under the ASP legislation, Social Work Resources has the lead responsibility for Adult Protection, Health, Police and other agencies to work together to prevent and respond to situations where someone is being harmed. During the period 2019/20, Social Work responded to 2,863 ASP inquiries and carried out 1,308 ASP investigations. In addition, 2,567 welfare guardianship visits were carried out by Social Work staff to support adults with incapacity and 286 Mental Health Orders were granted.
  - 3.7. In preparation for inspection, a multi-agency inspection sub-group has been established with representatives from each of the partner agencies, including the ASP Committee and representatives from the third sector and Education.
  - 3.8. This group will support the Partnership to plan and prepare for inspection, gather evidence on behalf of the Partnership and prepare the Partnership's position statement for presentation to the inspection team. It will also take a key role in sharing information on the inspection across the Partnership through the delivery of management and staff briefings.
  - 3.9. Social Work, as lead agency in ASP, has created an internal inspection sub-group to support the work of the multi-agency group. A Fieldwork Manager from Adult and Older People's Services will chair the group and other members will include a Team Leader from each locality, an Operations Manager from Justice, on a part-time basis, and support from Planning and Performance.
  - 3.10. The group will develop a programme of self-evaluation and audit activity to build upon the work already undertaken by the South Lanarkshire Adult Protection Committee (SLAPC). They will evaluate key processes in ASP cases, including the sharing of information across the Partnership, and assess their effectiveness in identifying and managing risk.
  - 3.11. The findings from the evaluations will be reported to the SLAPC and the adult protection workforce within Social Work to ensure there is shared learning across each locality and plans for improvement can be progressed. This self-evaluation activity will result in better services and improved outcomes for adults.

#### **4. Inspection methodology**

- 4.1. The inspections are planned around the 13 Police Scotland Divisional Hubs. This means in practice that the inspection team will carry out two or more partnership inspections over the same timeframe. Within Lanarkshire, the inspection will cover Police Q Division and both North and South HSCP will be inspected at the same time alongside NHSL. The partnerships will be inspected independently and the reports on findings will be separate for each Partnership area.

- 4.2. The Inspectors, who will all have appropriate levels of experience and expertise in ASP, will represent various scrutiny bodies including the Care Inspectorate, Her Majesty's Inspectorate of Constabulary in Scotland (HMICS) and Healthcare Improvement Scotland.
- 4.3. The focus of the inspection will be on two key quality illustrations: Key Processes and Leadership and Governance. It will assess how good our policies, procedures, and practice are in relation to ASP, our collaborative working across the Partnership, and the effectiveness of the Partnership at securing the sustained safety, protection and support of adults at risk of harm. In relation to leadership and governance, inspectors will measure the impact of leaders within the Partnership at creating a supportive and collaborative approach to ASP.

## **5. Preparation for Inspection**

### **5.1. Multi-agency Sub-Group**

- 5.1.1. An inspection sub-group meets fortnightly with representatives from Social Work, NHSL, Police Scotland, Education, Independent and Voluntary sector and the SLAPC Lead Officer, to drive the inspection agenda forward. This group reports to the SLAPC on activity and progress.

- 5.1.2. An action plan has been developed by the Inspection Sub-Group to prioritise work across the multi-agency partners in preparation for inspection, including a communication framework, the gathering of evidence from all partners and the development of a position statement.

- 5.1.3. The Group is currently identifying resources across each partnership agency to progress this work.

### **5.2. Multi-Agency Case File Audit**

- 5.2.1. SLAPC arranged a multi-agency case file audit during July 2020, with case file readers from Social Work, NHS and Police assessing the quality of ASP key processes across the Partnership. The findings are currently being analysed and will be presented to the next meeting of the SLAPC.

- 5.2.2. Twenty cases were selected that represented individuals supported through ASP with some living independently and others living within a care home setting. The cases dated from 01 June 2018 to 01 June 2020, reflecting the two-year timespan of the inspection methodology, and included pre and post COVID-19 activity.

- 5.2.3. The Care Inspectorate has issued an inspection augmentation paper which will enable joint inspection partners to specifically consider the impact of the Covid-19 emergency, and the associated restricted period on adults at risk of harm. This will enable them to determine how Adult Protection Partnerships have managed the considerable challenges posed by the COVID-19 emergency and help them assess the partnerships' compliance with the Scottish Government's COVID-19 additional guidance for ASP.

### **5.3. Social Work Case File Audit**

- 5.3.1. An evaluation was completed by local Social Work managers within the HSCP during May 2020, with 16 Social Work case files audited. The purpose of this audit was to evaluate key processes in ASP cases and to assess their effectiveness in identifying and managing risk.

- 5.3.2. The outcome of the audit indicated good collaborative working through the referral activity from partners and the sharing of effective and appropriate information. However, there were areas of development highlighted in relation to risk primarily relating to strengthening the depth and consistency of the case record across agencies in areas including:
- ◆ detailing the risk assessment process
  - ◆ clarify that all dealings with the adult at risk of harm had adequately addressed any potential barriers
  - ◆ evidencing that the views of the adult at risk had been considered
  - ◆ whether advocacy support was considered
- 5.3.3. In response to these findings, the HSCP has nominated a Fieldwork Manager to lead a Social Work team, consisting of Team Leaders from each locality, to further evaluate ASP cases during the last two years and ensure that an improvement plan, based on the findings of this audit and earlier evaluations, is implemented. This group will develop a more rigorous system of quality assurance which will include regular reporting to the Social Work Governance forum chaired by the Chief Social Work Officer.
- 5.3.4. Governance arrangements have been put in place to monitor the progress of the actions with two weekly reporting to the Head of Health and Social Care Services and quarterly reporting to the Social Work Governance Group and the Adult Protection Committee.
- 5.4. ASP Training
- 5.4.1. At the beginning of the year, SLAPC supported a comprehensive training programme involving Social Work Managers and Team Leaders in preparation for inspection. Due to the impact of COVID-19, elements of this programme and the wider ASP training programme have now been transferred to Learn-on-Line for multi-agency partners.
- 5.4.2 SLAPC has continued to deliver ASP training throughout the Pandemic both online and classroom based. A comparison of the period 23 March to 31 July for 2019 and 2020 highlights the significant increase of ASP training courses attended at ASP Level 2 and Level 3, Practical Application of ASP, Assessment of Risk and Need and Chronologies. This also reflects increased training activity for Care at Home staff.

	2019	2020
ASP Classroom Training	132	426
ASP Learn on Line Training	107	433

## **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 climate change, sustainability and environmental implications in terms of the information contained in this report.

## **9. Other Implications**

- 9.1. There are no risk implications associated with this report.
- 9.2. There are no sustainable development implications associated with this report.

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

- 10.1. There is no requirement to undertake an equality impact assessment regarding the content of this report.

**Val de Souza**  
**Director, Health and Social Care**

2 October 2020

### **Link(s) to Council Values/Objectives**

- ◆ improve later life
- ◆ deliver better health and social care outcomes for all
- ◆ improve health, care and wellbeing
- ◆ make communities safer, stronger and sustainable

### **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

10

Report to:	<b>Social Work Resources Committee</b>
Date of Meeting:	<b>28 October 2020</b>
Report by:	<b>Director, Health and Social Care</b>

Subject:	<b>National Review of Adult Social Care</b>
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## 1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ advise the Social Work Resources Committee of the Scottish Government's announcement on 1 September 2020 of the Independent Review of Adult Social Care in Scotland

## 2. Recommendation(s)

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

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

## 3. Background

- 3.1. Each year the Scottish Government sets out the actions it will take in the coming year at the beginning of September known as the "Programme for Government." This includes the legislative programme for the next parliamentary year to drive forward change across all levels of society.
- 3.2. This year's publication entitled 'Protecting Scotland, Renewing Scotland' is set against the backdrop of the COVID-19 Pandemic. The Pandemic has only further highlighted the inequalities that pervade across society. If anything, it has magnified the level of disadvantage faced by those with the least, particularly from a health, social and economic perspective.
- 3.3. One of the actions highlighted within the Scottish Government's programme is to undertake an Independent Review of Adult Social Care. The Review will examine how Adult Social Care can most effectively be reformed to deliver a national approach to care and support services. The Review will include consideration of a National Care Service.
- 3.4. Adult Social Care comprises a wide array of services and non-clinical support in a range of settings, involving care homes, Care at Home, Day Services, and community support for people with a range of needs.

## 4. National review of adult care services

- 4.1. The Review will be chaired by Derek Feeley, a former Scottish Government Director General for Health and Social Care and Chief Executive of NHS Scotland. An advisory panel will support the work of the Review which will report in January 2021.

- 4.2. The aim of the Review is to recommend improvements to Adult Social Care in Scotland, in terms of the outcomes achieved by and with people who use services, their carers and families, and the experience of people who work in Adult Social Care. The Review will take a human-rights based approach with a focus on the views of those with lived experience, about what needs to change to make real and lasting improvements.
- 4.3. The Review will consider and make recommendations on:
- ◆ the needs, rights and preferences of people who use services, their carers and families
  - ◆ the experience of people who work in Social Care, including their employment arrangements, opportunities for training and progression, and relationships with other professions across Health and Social Care
  - ◆ arrangements for funding, governance, ownership, administration and delivery of Social Care Services
  - ◆ arrangements for meaningfully involving users in the assessment of need and in co-design and co-production (including Self-Directed Support)
  - ◆ Social Care and Health Care service models and their interaction with other services, such as Housing, Education and employment
  - ◆ regulation, scrutiny, quality assessment and quality improvement capacity and capability
  - ◆ the role of local communities in providing capacity and assets to support people to live as well and as independently as possible and to enjoy the same facilities, universal services and opportunities as other citizens
  - ◆ the role and contribution of local and system level leadership
  - ◆ future policy developments that should be a focus for the Scottish Government and any recommendations regarding the legislation that currently underpins Social Care provision and regulation
  - ◆ opportunities to redesign the overall system of Social Care to improve people's experience of care
- 4.4. The Review will also consider what is required to achieve the highest standard of support for the independence and wellbeing of people who use Adult Social Care Services. This will include:
- ◆ how decision-making, participation, independent living and control can be maximised by people using Adult Social Care Services
  - ◆ people's experiences of Adult Social Care support and outcomes achieved
  - ◆ how individuals' Social Care "needs" are assessed by Social Work, Social Care and Health professionals
  - ◆ the overall quality, and sustainability of current Social Care Services and supports
  - ◆ the need to develop a skilled, purposeful and sustainable Adult Social Care workforce
  - ◆ the effectiveness of the statutory environment within which adult social care is commissioned, procured and delivered

## **5. Current position**

- 5.1. Before the Independent Review reports in January 2021, a new stakeholder group is looking at the approach to Social Care recovery and remobilisation and will provide input to the Health and Social Care Mobilisation and Recovery Group. It will have oversight of the support and reform of Social Care Services in the immediate term.



- 5.2. Immediate improvements will be taken forward on setting standards for Adult Social Care assessments and allocation of resources so that people accessing support are fully involved in decision making and experience greater consistency and transparency. There will be a review of care services definitions thus enabling Social Care support services and workers to be more flexible and responsive to people's needs, to work more autonomously, and to work with others across professions. This will involve working with Integration Authorities and Local Authorities to ensure planning and purchasing of Social Care support is focused on flexible and person-centred support.
- 5.3. As part of the Review, a number of meetings with different stakeholders are being organised in order to collate information from as many sources as possible. Some of the focus of these will be on what is working well, what could be improved and what requires to be changed.
- 5.4. While the Review does not report until January 2021 with its recommendations, it is likely to have significant impact on how Adult Social Care Services are commissioned, organised, procured and delivered in the future. This may extend to impact upon strategic commissioning led through Health and Social Care integration arrangements across Scotland.
- 5.5. A further report will be brought to the Social Work Resources Committee to provide an update when the Review reports with its recommendations.
- 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, sustainability, or the environment in terms of the information contained in this report.
- 9. Other Implications**
- 9.1. No other implications are noted at this stage.
- 10. Equality Impact Assessment and Consultation Arrangements**
- 10.1. This report does not introduce a new policy, plan or strategy.

**Val de Souza**  
**Director, Health and Social Care**

2 October 2020

**Link(s) to Council Values/Objectives**

- ◆ focused on people and their needs
- ◆ improve health and wellbeing
- ◆ support our communities by tackling disadvantage and deprivation and supporting aspiration
- ◆ 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

**11**

Report to:	<b>Social Work Resources Committee</b>
Date of Meeting:	<b>28 October 2020</b>
Report by:	<b>Director, Health and Social Care</b>

Subject:	<b>Care at Home Services</b>
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## **1. Purpose of Report**

1.1. The purpose of the report is to:-

- ◆ update Social Work Resources Committee on the outcome of the recent Care Inspectorate inspection within Hamilton Home Care Service

## **2. Recommendation(s)**

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

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

## **3. Background**

- 3.1. Members will recall that the South Lanarkshire Council (SLC) imposed a voluntary moratorium on the Care at Home Service within both Hamilton and Rutherglen in January 2020. This moratorium was introduced following concerns that had been highlighted in inspections carried out by the regulatory body, the Care Inspectorate, and placed a suspension on new referrals to the Service.
- 3.2. The Care Inspectorate has been concerned about Hamilton Care at Home Service for some time, resulting in Improvement Requirements in their Inspection Reports. In December 2019, the Hamilton Service was issued with a formal Improvement Notice that required improvements to be undertaken. The original notice, for a period of eight weeks, was extended to the end of May, and then subsequently extended until 30 September 2020, as a result of the outbreak of the Pandemic.
- 3.3. The Service embarked on a significant programme of work following the last inspection to address the improvements required. This has been wide ranging and has involved the recruitment of a new management team which has developed and led an improvement action plan aimed at bringing about positive change within the Service.
- 3.4. The Care Inspectorate had largely suspended its programme of Care at Home inspections during the Pandemic to enable it to focus on supporting services and the continued inspection of care homes in-line with temporary legislation. This legislation expired on 30 September 2020 and Hamilton service was subject to inspection in the week beginning 5 October 2020.

## **4. Outcome of Inspection**

- 4.1. Following a rigorous inspection process, the Service has received exceptionally positive feedback. Inspectors highlighted the considerable progress that had been achieved by the Service and assessed the Service as having met all the

requirements of the Improvement Notice, and have subsequently agreed to the lifting of the notice.

- 4.2. Inspectors were so impressed with the progress made that they took the 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

- 4.3. There remains much to do within the services improvement journey. However, the inspection represents substantial progress and clearly evidences that the Service is moving in the right direction, and that it is delivering services that meet the needs of service users while ensuring safety and wellbeing. The scale and pace of work undertaken by staff within the Hamilton Home Care Service cannot be underestimated and the outcome is testament to their hard work and dedication.
- 4.4. Discussions are now taking place to explore the potential timeline for the lifting of the voluntary moratorium which has been in place, and it is hoped that this can be agreed in the near future.
- 4.5. The voluntary moratorium that was previously in place with the Rutherglen Home Care Service was lifted on 31 August 2020, and there has been a staged approach to supporting new services since that date. It would be the intention to employ a similar approach within the Hamilton service.

## **5. Employee Implications**

- 5.1. There are no employee implications within this report.

## **6. Financial Implications**

- 6.1. There are no financial implications within this report.

## **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 within this report.
- 8.2. There are no sustainable development issues within this report.
- 8.3. There are no other issues within 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 (Equality Impact Assessment).

**Val de Souza**  
**Director, Health and Social Care**

13 October 2020

**Link(s) to Council Values/Objectives**

♦ none

**Previous References**

♦ none

**List of Background Papers**

♦ none

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# Report

**12**

Report to:	<b>Social Work Resources Committee</b>
Date of Meeting:	<b>28 October, 2020</b>
Report by:	<b>Director, Health and Social Care</b>

Subject:	<b>Winter Plan 2020-2021</b>
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## **1. Purpose of Report**

1.1. The purpose of the report is to:-

- ◆ advise the Social Work Committee of the planning arrangements being put in place to ensure services are prepared for the coming winter months.

## **2. Recommendation(s)**

2.1. The Social Work Committee is asked to note the following recommendation(s):-

- (1) that the planning arrangements being put in place to ensure services are prepared for the coming winter months be noted;
- (2) that the continued work in finalising the plan, which will be shared with respective bodies and submitted to Scottish Government by 31 October 2020, be noted.

## **3. Background**

3.1. A winter planning group is established with involvement of acute services; North and South Lanarkshire Health and Social Care Partnerships (HSCPs); NHS Resilience Officer; SALUS (Occupational Health, Safety and Return to Work Service); NHSL Infection Control; North and South Lanarkshire Council Resilience Officers; Scottish Ambulance Service and NHS24. The communications team is also represented on the group to ensure consistent and organised communication plans with all other parts of the public sector in the lead up to winter.

3.2. Scottish Government requested evidence of the work ongoing in planning for winter 2020/21 as part of the report back on mobilisation plans by 31 July 2020. Feedback from Scottish Government was subsequently received on 31 August 2020 to confirm they were satisfied with the preparations to date and recognition of the work required to ensure all due consideration was being given to COVID-19 as part of the overall planning process.

3.3. Main Components of Winter Planning Associated with COVID-19

3.3.1 Flu Vaccine Programme – Public

It has been estimated that approximately 300k people across Lanarkshire will be eligible for a flu vaccine in 2020. Work has been undertaken to assess the time and associated staffing required to undertake this number of vaccines as well as the physical accommodation requirements to undertake same. Early discussions have been had with GP colleagues to assess how they/their staff may be able to assist in same and the respective implications. Similarly, a range of staff from other

disciplines, sectors are being asked to assist with this process. Councils are also helping in the identification of suitable accommodation.

### 3.3.2 Flu Vaccine Programme – Health and Social Care Staff

Approximately 8,000 social care staff from both Council and independent and voluntary sectors in Lanarkshire will be eligible for a flu vaccine. SALUS – the NHSL Occupational Health Service – will co-ordinate this, alongside the NHS staff vaccine flu campaign, working with staff and representatives of all sectors. Planning is well underway in this regard and again, councils are assisting in the identification of accommodation.

### 3.3.3 COVID Hub and Assessment Centre (Re-designing Unscheduled Care)

It is not known at this stage the exact make up of what COVID (or respiratory /unplanned urgent care) Hubs and assessment centres will be asked to manage. This will require further work at national, regional and local level and will also be dependent on some of the agreements with other Boards, for example, NHS 24. Whilst the detail is not known at this stage, early work has commenced in discussion with GPs/other clinical staff to understand what the service might look like and how maintaining 'red and green' flows for COVID/non COVID patients will be maintained throughout the winter period. This will require more detailed staff/workforce planning recognising that some of the staff who were able to assist in the first phase of COVID may not be able to assist in the same way in any second phase.

### 3.3.4 Urgent Care Flow Hub

There will also be an extended Emergency Receiving Centre model to support NHS24 to be able to manage people who would previously have gone straight to A&E to be seen in an unplanned way to come through the Urgent Care Flow Hub (ERC) in a planned way.

### 3.3.5 GP and Pharmacy Opening

Depending on what is agreed in relation to the COVID Hub and Assessment Centre above there may be the need to consider GP and pharmacy opening over the four day public holiday period. If this is to happen, it is likely that the proposed additional opening day would be on Monday 28 December 2020 and Monday 4 January 2021.

### 3.3.6 Planning for Winter and COVID (Preparing for a Challenging Winter – Academy of Medical Sciences)

The Winter Planning group has received the paper from the Academy of Medical Sciences (AMS) and has been using this to model a number of eventualities and associated planning of mitigating actions as part of the winter plan for 2020/21.

### 3.3.7 Planning for Additional Deaths

The resilience planning officers of North and South Lanarkshire are working alongside local undertakers to ensure there is sufficient 'pace' of funeral services – both burials and cremations – to support the eventuality of a significant excess of deaths over the winter period. The additional mortuary capacity identified for COVID is still in place and will continue to be available over the winter period.

### 3.3.8 Staffing

All departments are planning to ensure sufficient staffing to respond to the potential needs over the period, again borrowing on some of the eventualities laid out in the AMS paper described at 3.3.6 above.



### 3.3.9 Surge/Bed Capacity

Additional surge capacity identified for management of COVID is again being made available/retained as part of the planning for winter surge. A key component of the planning going forward is the modelling work being undertaken by a range of agencies in predicting inpatient/ITU/other capacity requirements depending on the numbers of patients and length of time associated with a second wave of COVID. This is in addition to any additional winter deaths. In this respect, it is envisaged that a good take up of flu vaccine across all relevant individuals will assist in reducing incidence of flu in the community and associated strain in hospital/ITU beds.

### 3.3.10 Adverse Weather

A series of mitigating measures are in place to assist in managing adverse weather and these have been refined over many years of winter planning.

### 3.3.11 Overall Resilience Planning

A review of the plan will be undertaken by the NHSL/NLC/SLC resilience planners to give objective opinion as to the range and extent of the mitigating factors introduced to reduce the impact of winter on the overall system.

- 3.4. This is an evolving plan and the associated risk/preparedness check list will be updated on a regular basis throughout the winter planning period. Any significant variation and or increased risk will be reported to the Corporate Management Team (CMT) of NHSL as well as the respective HSCP Senior Management Teams.

- ◆ reducing attendances
- ◆ managing/avoiding admission
- ◆ reducing length of stay
- ◆ focus on flow through acute care
- ◆ workforce

- 3.5. Detailed plans have been prepared for each of the Acute Hospital Sites, the Acute Access Directorate, and North and South HSCPs. It should be noted these are dynamic documents which are revised/updated to reflect staff availability, emerging issues etc. and are considered for any cross-cutting issues at the Winter Planning Group.

## 4. **Primary Care Out of Hours/NHS24**

- 4.1. A number of measures have been put in place to increase capacity and ensure that patients are seen and treated by the most appropriate service, in the most appropriate environment. Tests of successful initiatives undertaken in support of 'transforming urgent care' to support greater numbers of paediatric and mental health patients being seen out-with a hospital environment will be enhanced over the peak winter period.
- 4.2. A number of Advanced Nurse Practitioners (ANP) have also been appointed over the last year and these staff will also support provision of service across the period. Similarly, pharmacy staff will also augment the service over the peak winter period.
- 4.3. Notwithstanding the foregoing, the current Out of Hours (OOH) Service has been under significant pressure throughout the year with there being a need to move to contingency arrangements on a number of occasions. Work is ongoing in seeking to further enhance the number of ANPs and Pharmacists who are able to assist in staffing the OOH Service as well as seeking to recruit new GPs to also join the service. However, there may be occasions through the peak winter period where the

service would need to move to a contingency arrangement whereby the service will operate from a single site.

## **5. Acute Hospital Service**

- 5.1. The detail contained within Acute Services' plans has been informed by lessons learnt from past experience as well as the national guidance.
- 5.2. The three site plans also reflect the actions referred to above with particular reference to the wider involvement of HSCPs. This seeks to ensure 'joined up' approaches to a range of initiatives where optimum impact will be gained by ensuring shared action planning.
- 5.3. The plans also describe a range of initiatives aimed at maximising senior decision making at the front door; services to support early diagnosis and discharge; and wider coverage over weekends to ensure seven day flow. This will include additional AHP staffing to support assessment across the hospitals and, where possible, discharge/referral to alternative community supports.
- 5.4. It is anticipated that this will result in
  - ◆ an increase of 50% in the people signposted from A&E to more appropriate alternative services
  - ◆ an increase of 10% in the numbers of patients discharged over weekends
  - ◆ a reduction of 10% in the numbers of bed days lost associated with delayed discharge
  - ◆ an increase of 5% in the number of pre-noon discharges
- 5.5. All of the above is of assistance in 'pushing the curve' to the left, that is, earlier decision making in the patient journey; earlier understanding of patient need/access to services to support discharge and earlier time of day of discharge.
- 5.6. Significant work has also been undertaken in assessing the balance between elective and unscheduled care over the peak winter period with an increase in day cases being factored into the period post first two weeks in January. Clinically urgent and cancer patients will also continue to receive services during the peak period.
- 5.7. Staff in acute services are currently seeking to confirm all rota coverage arrangements over the peak winter periods and this will feature as part of the ongoing monitoring of risk throughout the winter period.
- 5.8. As part of this year's Access Directorate's plan, as well as the normal range of additional laboratory services to assist manage winter pressure, it is anticipated that there will be a significant increase in availability of Near Patient Testing for both COVID-19 and flu.

## **6. Vulnerable Patients**

- 6.1. There is increasing data available which would assist in identifying those patients who could be anticipated to arrive at OOH services, A&E departments or call 999 ambulances. Work has been begun to identify these patients and to ensure where possible, there is a shared care plan available to relevant areas.

## **7. Health and Social Care Partnerships**

- 7.1. Detailed plans have also been prepared for North and South HSCPs. These identify the additional capacity that will be available both in the community and to support acute sites as a result of the additional investment which has taken place in

community based services to avoid admissions and also to expedite safe discharge and thereby reduce the number of beds occupied by delayed patients.

7.2. Close working arrangements with the respective Discharge Hubs in each of the three DGHs will be a constant feature as part of the winter plan.

7.3. The South Lanarkshire HSCP is taking forward several workstreams that will support the winter plan:

7.3.1. Hospital Social Work Team

As approved at the preceding Social Work Committee, work to complete the recruitment to additional posts and to re-embed Social Work within the main hospital sites is progressing well and is expected to be fully operational before the peak of the winter period. This staffing resource will dovetail with current work to ensure the whole system is working to the patient's planned date of discharge to improve the early identification and discharge planning of patients who require social care supports.

7.3.2. Intermediate Care

At Canderavon, the capacity has been increased and intermediate care methodology has been refreshed to take account of the learning from delivering interim placements and ensuring flow at the temporary care facility that has now closed. Work is as underway to consider the how the Council's other care homes could also safely offer short -term placements.

7.3.3. Care homes

There are substantial liaison arrangements with the Care Home sector intended to support this sector over the pandemic. There are currently relatively high numbers of vacancies which should ensure capacity over Winter. However, the requirements for testing; isolation and restricted visits are influencing families decision making and impacting on ease of access to care homes. Officers are working with providers and their representative to maintain effect operational arrangements which support patient flow.

7.3.4. Care at Home

Access to care packages is critical to ensuring prompt discharge. The sector has responded positively throughout the pandemic period however, it is constantly operating up to and beyond the upper end of workforce and financial capacity. Work in ongoing to maintain throughput by effective screening, care management and efficient deployment of resources. Ongoing engagement with framework providers to address winter peaks in demand is also underway.

7.3.5. Assessment Capacity

As with previous winters, the Field Work and Care at Home teams will use winter planning funding to provide additional workforce cover at weekends and public holidays to support patient flow.

7.4. Similarly, there are plans to increase community nursing support to seek to provide more anticipatory care and/or assist in providing alternative care provision than traditional hospital based care.

**8. Scottish Ambulance Service/Council Transport Services**

8.1. The Scottish Ambulance Service has indicated their preparedness to respond to requests for additional ambulance transport provided advance notification is given of the nature and extent of that additional demand. It is intended to again utilise the Predictive Data Analysis Tool to predict demand implications for the Scottish

Ambulance Service. The Scottish Ambulance Service has also confirmed they will be able to provide dedicated discharge vehicle to support the three DGH sites. Moreover, plans have been established to give access to additional weekend support via the 'renal service' patient transport.

- 8.2. Action is also being taken to identify patients that for clinical reasons must attend hospital for treatment. An example of this would be a renal patient. Contingency plans have been prepared to respond to any difficulties experienced by those patients in travelling to hospital during the winter period. This will involve close liaison between the Scottish Ambulance Service and the respective Roads Departments of North and South Lanarkshire Councils.
- 8.3. Both Councils, as well as NHSL PSSD, have also established additional 4 x 4 capacity to assist in inclement weather conditions.

## **9. Communication Plan**

- 9.1. A Communication Plan is in development which will be directed at both staff, across all agencies, and the public. This will be undertaken in consultation with NHS24, national communications and Councils. A regional winter communications group is being established to pull resources and share best practice and messages.
- 9.2. This will build upon last year's award winning 'Meet the Expert' campaign which seeks to promote the range of services which people can access/self-present to without the need to attend their GP and/or A&E.
- 9.3. Information for the public on early preparedness for winter will be available and displayed in A&E departments, as well as wider circulation to the general public in the form of social media and coverage in national campaigns. This will also involve films being shown in the respective waiting areas/other public areas. Specific reference will be given to flu vaccine and management of Norovirus and the respective advice for patients, visitors and the public alike.
- 9.4. There is also a communication folder for managers and staff across agencies to ensure all are aware of the respective contacts, cover arrangements and how to access support.
- 9.5. There will be a dedicated page available on the NHS Lanarkshire website along with links to the web sites of North and South Lanarkshire Councils.

## **10. Reporting Arrangements**

- 10.1. All performance reports continue to be provided to the Performance and Audit Sub-Committee and the national integration measures are also reported at a national level.
- 10.2. Specifically for winter, there is an agreed escalation protocol which will be invoked dependent upon a range of indicators which 'gauge the pressure in the system' across acute and community services. This is similarly supported by national reporting arrangements.

## **11. Employee Implications**

- 11.1. Whilst each part of the plan recognises the need for additional staffing where appropriate, there is a recognition that for many areas, securing these staff will be problematic given the existing pressures in the system/difficulties in recruiting some designations/grades of staff. In many cases, staff required to implement new initiatives will mean staff been taken away from other areas - potentially without the

ability to backfill. This is also against a background of vacancy levels across the three main operational directorates.

11.1.1. In addition to this, work is in hand to identify all staff, both clinical and non-clinical, who could be asked to assist clinical areas in times of extremis. This will allow for the necessary 'induction' of such staff such that they are able to assist at relatively short notice.

11.2. Similarly, the communication to all staff in relation to the Adverse Weather Policy highlights that they are all considered essential and, as such, make every reasonable effort to get to their workplace in times of adverse weather.

## **12. Financial Implications**

12.1. The financial implications are currently being assessed.

12.2. The NHS Lanarkshire Director of Finance and the Chief Finance Officer are working together to ensure that between national monies provided, and those available from other sources, all can be brought to bear to ensure all agreed mitigating actions are available to local managers to assist in managing demand over the winter period.

## **13. Climate Change, Sustainability and Environmental Implications**

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

## **14. Other Implications**

14.1. Filling of staffing rotas over the peak winter period to cover each of the main areas highlighted above has been identified as a high risk.

14.2. Risk assessments have also been undertaken across each of the main areas. Winter planning testing is also going to be undertaken in a number of ways. Key among these will be the annual Winter Breach multi agency event designed to promote joint emergency preparedness and knowledge of organisational roles, responsibilities and capabilities to support individuals and communities across Lanarkshire in a time of emergency. Planning for this is currently underway, recognising the need this year for a remote/Teams basis for the event.

## **15. Equality Impact Assessment and Consultation Arrangements**

15.1. This does not introduce a new policy or strategy therefore no equality impact assessment was required.

15.2. The winter plan has been developed in full consultation with all relevant stakeholders and the Scottish Government.

## **16. Directions**

16.1.

<b>Direction to:</b>	
1. No Direction required	<input checked="" type="checkbox"/>
2. South Lanarkshire Council	<input type="checkbox"/>
3. NHS Lanarkshire	<input type="checkbox"/>
4. South Lanarkshire Council and NHS Lanarkshire	<input type="checkbox"/>

**Val de Souza**  
**Director, Health and Social Care**

1 October 2020

**Link(s) to National Health and Wellbeing Outcomes**

People are able to look after and improve their own health and wellbeing and live in good health for longer	<input checked="" type="checkbox"/>
People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonable practicable, independently and at home or in a homely setting in their community	<input checked="" type="checkbox"/>
People who use Health and Social Care Services have positive experiences of those services, and have their dignity respected	<input checked="" type="checkbox"/>
Health and Social Care Services are centred on helping to maintain or improve the quality of life of people who use those services	<input checked="" type="checkbox"/>
Health and Social Care Services contribute to reducing health inequalities	<input checked="" type="checkbox"/>
People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing	<input checked="" type="checkbox"/>
People who use Health and Social Care Services are safe from harm	<input checked="" type="checkbox"/>
People who work in Health and Social Care Services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide	<input checked="" type="checkbox"/>
Resources are used effectively and efficiently in the provision of Health and Social Care Services	<input checked="" type="checkbox"/>

**Previous References**

- ◆ reports to the IJB in 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:-

Craig Cunningham, Head of Commissioning and Performance

Ext: 3704 (Phone: 01698 453704)

Email: [craig.cunningham@lanarkshire.scot.nhs.uk](mailto:craig.cunningham@lanarkshire.scot.nhs.uk)

# Report

13

Report to:	<b>Social Work Resources Committee</b>
Date of Meeting:	<b>28 October 2020</b>
Report by:	<b>Director of Health and Social Care</b>

Subject:	<b>Notification of Contracts Awarded</b>
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## 1. Purpose of Report

1.1. The purpose of the report is to:-

- ♦ provide notification in line with Standing Orders on Contracts of contracts awarded by Social Work Resources during 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 the details of the contracts awarded be noted.

## 3. Background

3.1. It is a requirement of Clauses 21.8 and 22.5 of the Standing Orders on Contracts that details of the acceptance of all tenders above £50,000 be reported retrospectively to the relevant Committee for noting, other than those under Clause 21.3 where the award is not the lowest in a price only tender, or costs exceed the approved financial provision. In these instances, a report is submitted to the appropriate Committee and subsequent authority to award is granted by that Committee.

## 4. Contract Awards

4.1. Contracts awarded for the period 1 April to 30 September 2020, on the basis of lowest offer and/or most economically advantageous offer submitted, are detailed in Appendix 1.

## 5. Employee Implications

5.1. Contract management, including performance appraisal, will be undertaken by both Social Work Resources and the Procurement Service.

## 6. Financial Implications

6.1. Appropriate budgetary provision is available for each of the contracts awarded.

## 7. Climate Change, Sustainability and Environmental Implications

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

## 8. Other Implications

8.1. There are no direct risks or implications in terms of the information contained in this report.

## **9. Equality Impact Assessment and Consultation Arrangements**

- 9.1. This report does not introduce a new policy, function or strategy nor recommend a change to an existing policy, function or strategy and therefore, no impact assessment is required.
- 9.2. There is also no requirement to undertake any consultation in terms of the information contained in this report.

**Val de Souza**  
**Director of Health and Social Care**

1 October 2020

### **Link(s) to Council Values/Ambitions/Objectives**

- ◆ Accountable, Effective, Efficient and Transparent

### **List of Background Papers**

- ◆ Standing Orders on Contracts

### **Contact for Further Information**

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

Emma Smith, Corporate Procurement and Transactions Manager

Ext: 5329 (Tel: 01698 455329)

E-mail: [emma.smith@southlanarkshire.gov.uk](mailto:emma.smith@southlanarkshire.gov.uk)



## Social Work Resources

Contracts Awarded by Social Work Resources over £50,000 in value (or awarded under Standing Order 9)

Name of Successful Tenderer / Provider	Value of Contract Awarded	Date of Award	Brief Description	Period of Contract
SLC/PS/SW/20/003 Bunzl Greenham	£700,000	09/04/2020	Covid 19 Response PPE Supplies	09/04/2020 to 08/04/2021
SLC/PS/SW/20/008 The Salvation Army	£60,000	15/05/2020	Negotiation of Additional Services due to Covid 19	01/04/2020 to 31/03/2021
SLC/PS/SW/19/012 Who Cares? Scotland	£82,000	03/06/2020	Champions Board Development Worker	01/07/2019 to 31/06/2021
SLC/PSS/W/18/009 Christine Clelland Consultant	£75,250	04/06/2020	Care at Home review	01/07/2019 to 30/09/2020
SLC/PS/SW/20/009 The Salvation Army	£500,000	11/06/2020	Negotiation of Additional Services due to Covid 19	09/06/2020 to 08/12/2020
SLC/PS/SW/16/016 The Salvation Army	£420,000	15/06/2020	Homeless Accommodation	31/03/2020 to 12/01/2021
SLC/PS/SW/16/015 Care at Home Framework – Various	£22,758,918	24/08/20	Non- Contractual Extension for Framework providers	01/04/2021 to 30/06/2022
SLC/PS/SW/20/011 121 Care at Home	£5,396,544	13/07/2020	Care at Home Negotiated Contract Clydesdale and East Kilbride – Contract provision for non-Framework providers	01/07/2020 to 30/02/2021
SLC/PS/SW/20/012 All New Beginnings				
SLC/PS/SW/20/013 Home Instead				
SLC/PS/SW/20/014 Enhanced Living Support Services				
SLC/PS/SW/20/015 Ion Care				
SLC/PS/SW/20/016 Love@care				

