





Date: 17 September 2024

e-mail: barry.tudhope@eastrenfrewshire.gov.uk

Tel: 0141 577 3023

TO: MEMBERS OF THE EAST RENFREWSHIRE INTEGRATION JOINT BOARD

Dear Colleague

EAST RENFREWSHIRE INTEGRATION JOINT BOARD (IJB)

You are requested to attend a meeting of the East Renfrewshire Integration Joint Board which will be held on **Wednesday 25 September 2024 at 2.30 p.m.**

Please note this is a virtual meeting via Microsoft Teams.

The agenda of business is attached.

Yours faithfully

Councillor Katie Pragnell

Councillor Katie Pragnell
Chair, East Renfrewshire Integration Joint Board

Enc.

ACCESSING THE IJB MEETING AND ALTERNATIVE FORMATS OF MEETING PAPERS

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD Wednesday 25 September at 2.30 p.m. VIRTUAL MEETING VIA MICROSOFT TEAMS

AGENDA

- 1. Apologies for absence.
- 2. Declarations of Interest.
- 3. Minutes of Previous Meeting held on 14 August 2024 (copy attached, pages 5-16).
- **4.** Matters Arising (copy attached, pages 17 18).
- **5.** Rolling Action Log (copy attached, pages 19 20).
- **6.** Local Child Poverty Action Report: Year 6 (2023/24) (copy attached, pages 21 58).
- 7. Chief Social Work Officer's Annual Report 2023/24 (copy attached, pages 59 100).
- **8.** Audited Annual Report and Accounts (copy attached, pages 101 198).
- 9. Revenue Budget Monitoring Report (copy to follow).
- 10. HSCP Recovery and Renewal Programme (copy to follow).
- 11. Charging for Services 204/25 and beyond (copy attached, pages 199 204).
- 12. Presentation: Delayed Discharge Position
- **13. HSCP Strategic Plan Update** (copy attached, pages 205 210).

- **14. HSCP iMatter 2024** (copy attached, pages 211 216).
- 15. East Renfrewshire Health and Wellbeing Survey and NHS GCC Director of Public Health Working to Stem the Tide Report (copy attached, pages 217 224).
- 16. Annual Strategic Risk Register (copy to follow).
- **17. IJB Complaints Annual Report 2023/24** (copy attached, pages 225 228).
- **18. Membership of Performance and Audit Committee** (copy attached, pages 229 232).
- **19.** Calendar of Meetings 2025 (copy attached, pages 233 236).









Minute of Meeting of the East Renfrewshire Integration Joint Board held on Wednesday 14 August 2024 at 10:00 a.m. in Civic Room 2, East Renfrewshire Council Offices, 211 Main Street, Barrhead, G78 1SY.

PRESENT

Councillor Katie Pragnell (Chair)

Mehvish Ashraf, NHS Great Glasgow & Clyde Board

Lesley Bairden, Chief Financial Officer (Integration Joint Board)

Councillor Caroline Bamforth, East Renfrewshire Council *

Martin Cawley, NHS Greater Glasgow & Clyde Board

Cath Cooney, NHS Greater Glasgow & Clyde Board

Councillor Paul Edlin, East Renfrewshire Council

Dr Claire Fisher, Clinical Director*

Dianne Foy, NHS Greater Glasgow & Clyde Board *

Anne Marie Kennedy, Third Sector Representative

Andrew McCready, Staff Representative (NHS)

Geoff Mohamed, Carers Representative *

Julie Murray, Chief Officer (Integration Joint Board)

Councillor Owen O'Donnell, East Renfrewshire Council

Raymond Prior, Head of Children's Services and Justice (Chief Social Work Officer)

CHAIR

Councillor Katie Pragnell

IN ATTENDANCE

Lesleyann Burns, Assistant Democratic Services Officer, East Renfrewshire Council Ruth Gallagher, Chief Executive, Voluntary Action East Renfrewshire.

Pamela Gomes, Governance and Compliance Officer, East Renfrewshire HSCP *

Noleen McCormick-Heart, Self-Directed Support Implementation Manger, East Renfrewshire HSCP

Anne McMillan, Primary Care Transformation Manager, East Renfrewshire HSCP Lee McLaughlin, Head of Adult Services: Wellbeing & Communities, East Renfrewshire HSCP

Craig Menzies, Barrhead Locality Manager, East Renfrewshire HSCP

Adam Orr, Service Manager, East Renfrewshire HSCP

Kirsty Ritchie, Senior Communications and Campaigns Officer, East Renfrewshire Council

Barry Tudhope, Democratic Services Manager, East Renfrewshire Council

(*) indicates remote attendance

1. OPENING REMARKS

- 1.1. The Chair welcomed everyone to the meeting of the Integration Joint Board and introduced Martin Cawley and Cath Cooney, who had been appointed by NHS Greater Glasgow and Clyde as Voting Members of Board. The new Board Members shared brief introductions, along with insights into their prior work experience.
- 1.2 The Chair also reminded the Board that Mehvish Ashraf would now be responsible for Chairing the Integration Joint Board Performance and Audit Committee.
- 1.3 The Integration Joint Board extended a warm welcome to the new Board members and noted the appointment of Mehvish Ashraf as the Chair of the Performance and Audit Committee.

2. APOLOGIES FOR ABSENCE

2.1 There were no apologies for absence.

3. DECLARATIONS OF INTEREST

3.1 There were no declarations of interest intimated.

4. MINUTE OF PREVIOUS MEETING: 26 JUNE 2024

4.1 The Minute of the Meeting of the Integration Joint Board held on 26 June 2024 was approved subject to an amendment to the spelling of Geoff Mohamed's surname.

5. MATTERS ARISING

5.1 The Chief Officer confirmed that there were no matters arising from the meeting of the Integration Joint Board held on 26 June 2024.

6. ROLLING ACTION LOG

- 6.1 The Integration Joint Board considered a report from the Chief Officer detailing all ongoing actions and those that had been completed since the previous meeting of the Integration Joint Board on 26 June 2024.
- 6.2. The Chief Officer highlighted that payment of revised fees for Foster Care, Kinship and Adoption, initially set for mid-August 2024, had now been postponed until mid-September 2024.
- 6.3 The Chief Officer also informed the Board that a summary version of the East Renfrewshire Adult Carers Strategy 2024 2027 had been created, a link to which would be provided to Board Members when the document was published.
- 6.4 The Integration Joint Board agreed to note the report.

7. MINUTE OF PERFORMANCE AND AUDIT COMMITTEE: 26 JUNE 2024

7.1 The Integration Joint Board agreed to note the Minute of the Meeting of the Integration Joint Board Performance and Audit Committee held on 26 June 2024.

8. PRESENTATION: ADULT SERVICES FRONT DOOR AND PROFESSIONAL PEER REVIEW GROUP

- 8.1 The Integration Joint Board received a presentation on the Initial Contact Team (a Front Door) and the Peer Professional Review Group (PPRG).
- 8.1 The Integration Joint Board received a presentation on the Initial Contact Team (a Front Door) and the Peer Professional Review Group (PPRG).

- 8.2 The Initial Contact Team (ICT), comprising social work, occupational therapy and third sector professionals, serves as the front door for adult support. Its primary roles included providing social work and Occupational Therapy (OT) support, aiding individuals with appropriate adaptations, and signposting to relevant services based on needs. The team employed the Signs of Safety and Good Conversation models to assess individual circumstances and foster a supportive environment.
- 8.3 Referrals to the Team were received via SCI Gateway, telephone, email, and professional referral or self-referral. Each referral received was screened by Business Support and Duty Workers, the Team involved in this first contact having had appropriate training and access to professional support.
- 8.4 The Team Manager screened each referral and made a decision within one working day of receiving the referral on the appropriate action to be taken. It was the responsibility of the Team Manger to decide how the referral should be progressed, applying the Supporting People Framework. Current trend date shows that 85% of all referrals to the front door are now redirected to community supports. IJB noted that this is positive in terms of the outcome for individuals but also for the HSCP in terms of cost avoidance and building a sustainable model.
- 8.5 Currently, the ICT included a Team Manager, an Advanced Practitioner, four Social Workers, and two Social Work Assistants, though they faced staffing challenges due to a vacant position. High demand required two Social Workers to be on duty daily to handle calls and visits, while referrals were managed through a thorough screening process.
- 8.6 The OT Team, led by a Team Manager and consisting of two Occupational Therapists and five OT Assistants, addressed requests for aids and adaptations to help individuals remain in the community. They performed various assessments, including functional and palliative care assessments.
- 8.7 The Service had developed over the last two years, but it was acknowledged that the Health and Social Care Partnership was evolving. As the service sought to improve and navigate ongoing pressures with capacity and demand, issues to be looked at included:-
 - Renaming the team to Initial Response Team, rather than Initial Contact Team, to better reflect its role;
 - Enhancing data capture to better illustrate the Team's activities;
 - Increasing throughput of cases for assessment by the recruitment of a Social Work Assistant to help improve protected time for staff; and
 - Building resilience within the ICT in light of recent changes to Talking Points.
- 8.8 The Supporting People Framework promoted a strengths and assets-based approach to assessment and care management, using a Strengths-Based Case Management approach.
- 8.9 This approach combined a focus on individuals' strengths with three other principles:-
 - Promoting the use of informal supportive networks;
 - Proactively facilitating access to the community for the support people needed to live a good life; and
 - Emphasising the relationship between the client and case manager.
- 8.10 It could help to prepare for the Resource Enablement Group, showing that all other options had been explored and applied to the person's overall assessment. It allowed high standards of service delivery to be maintained by informing, building networks, supporting a strengths and assets based approach and delivering a consistent, equitable and fair service to the people who were supported.

- 8.11 Working with the Supporting People Framework (SPF), it allowed professionals to be consistent in their practice. For both the panel and the professionals using PPRG, it expanded learning, bringing it to life. It supported a broader view across all discipline areas of health and social care, really knowing the people who were supported and what they were experiencing.
- 8.12 It also supported professionals to identify gaps within the community of resources, organisations, networks and assets available and where more or less of these were needed. It was considered challenging to shift resources to those areas that needed it most, when what was available was not known. PPRG supported this monitoring and the impact of people supported using the SPF.
- 8.13 The national Self Directed Support (SDS) Guidance highlighted 'Involvement and Coproduction', with there being commitment to building on the skills of people. A human rights based approach was taken to social care delivery, one of the key principles of this being participation. People who used services had unique insights into their successes and failures. Using this knowledge and working together meant services could be delivered that truly met the needs of the people using them.
- 8.14 PPRG allowed services to follow the four principles of Involvement and Co-production-Review, Do, Analyse and Plan, leading to the co-production of services through public social partnership. Bringing the panel of experts from across the partnerships within the community together brought this to life and supported good practice.
- 8.15 This also supported the Social Work profession to be creative with their professional assessment. The PPRG did not look to query the professional assessment, but supports the worker by providing opportunity for creativity, doing things differently and creative listening. It was known that our teams in the HSCP had good discussions as part of their team meetings and this did not replace this.
- 8.16 This was a different forum with a varied panel of partners, both internal and external. The Social Worker was responsible for taking the advice, direction, sign posting, ideas etc. away from PPRG and informing their assessment and using the information to support the individual.
- 8.17 It was known that this supported time for social workers allowing them to explore options in one space. It put into practice 'what good looked like' within the standards of SDS and the SDS national guidance.
- 8.18 The Board were provided with examples of Case Studies supported by the PPRG and it was highlighted that feedback from staff on the PPRG was exceptionally positive.
- 8.19 Board Members sought, and were provided with, clarification on how the Supporting People Framework assisted practitioners in decision-making. The Chief Officer reported that a session for East Renfrewshire Elected Members regarding the Supporting People Framework was scheduled for September. Additionally, Board Members expressed their encouragement upon hearing various case studies and staff feedback.
- 8.20 The Integration Joint Board unanimously agreed to acknowledge the presentation.

9. HEALTH AND CARE EXPERIENCE SURVEY – ACCESS TO PRIMARY CARE RESULTS

- 9.1 The Integration Joint Board considered a report by the Clinical Director on feedback from East Renfrewshire residents through the Scottish Health and Care Experience (HACE) survey 2024, specifically in relation to primary care.
- 9.2 It was noted that the return rate in East Renfrewshire exceeded the national average, with respondents rating their experience as either more positive or comparable to that of 2022. Key findings for East Renfrewshire included:-
 - 75% of respondents rated the overall care provided by their GP practice positively:
 - 75% expressed satisfaction with the opening hours of their GP practice;
 - The return rate surpassed the national average, with 75% of respondents indicating happiness with their experience;
 - 93% of respondents understood the information they received:
 - 90% felt they were listened to during their consultations; and
 - 89% believed they were treated with dignity and respect.
- 9.3 The Clinical Director also pointed out some negative responses:-
 - Only 68% of respondents reported being able to make an appointment with their doctor three or more days in advance; and
 - Only 45% felt they could arrange to see a Mental Health Practitioner at their practice.
- 9.4 Board Members inquired about the availability of data on exclusions, specifically regarding East Renfrewshire residents who were not served by local services. The Chief Officer confirmed that there were more individuals registered with East Renfrewshire practices than actually resided in the area, and future reports could include some analysis on this.
- 9.5 Additionally, Board Members asked whether data was available at a practice level. It was confirmed that a link to the performance dashboard was included in the report, and future reports could, where feasible, provide a breakdown by clusters.
- 9.6 The Chief Officer assured the Board that further investigation would be conducted to understand why 45% of respondents felt they were unable to arrange appointments with Mental Health Practitioners at their practices.
- 9.7 The Clinical Director indicated that demand for GP services had increased significantly in recent years, with most practices reporting a busier environment than before the pandemic. GPs and the newly established multidisciplinary practice teams would continue to explore innovative approaches to care delivery in order to address these challenges.
- 9.8 The Integration Joint Board agreed:-
 - (a) to note the report; and
 - (b) that where possible, future reports should include a breakdown of GP clusters.

10. PRIMARY CARE IMPROVEMENT PLAN COMMUNITY TREATMENT AND CARE SERVICE: BLOODS AND GO

- 10.1 The Integration Joint Board considered a report by the Clinical Director providing an overview of the newly developed 'Bloods and Go' phlebotomy service as part of the East Renfrewshire Primary Care Implementation Plan, Community Treatment and Care service.
- 10.2 The service operated on a drop-in clinic model, eliminating the need for a booking or appointment system. It also allowed patients to receive blood tests on the same day and leave immediately. The 'Bloods and Go' service focused solely on phlebotomy, with no other clinical interventions provided.
- 10.3 This service was available at the Eastwood and Barrhead Health and Care Centres, utilising repurposed consultation spaces at both. The service catered for individuals aged 16 and over from all 15 GP practices, operating Monday to Friday from 8:30 a.m. to 4:30 p.m.
- 10.4 The 'Bloods and Go' service had been piloted in both Centres with several GP practices during the first two weeks of June 2024 before being fully implemented across all 15 GP practices. To date, the service had successfully served over 2,000 patients across both Health and Care Centres, feedback from patients, staff and GPs having been positive.
- 10.5 Board members enquired whether the new service had affected the standard phlebotomy service. It was confirmed that the standard service dealt with mainly hospital sites, with the 'Bloods and Go' service being a completely separate one.
- 10.6 Additionally, Board members expressed their congratulations to the staff involved in the development of the 'Blood and Go' service.
- 10.7 The Integration Joint Board agreed to note the report.

11. ALCOHOL AND DRUG PARTNERSHIP (ADP) MEDICATION ASSESSMENT TREATMENT STANDARDS

- 11.1 The Integration Joint Board considered a report by the Chief Officer providing an update on the recent national assessment of East Renfrewshire's progress concerning the Medication Assisted Treatment (MAT) Standards.
- 11.2 The Chief Officer indicated that all Alcohol and Drug Partnership areas had been formally evaluated, with East Renfrewshire achieving green ratings for Standards 1 to 5 and provisional green ratings for Standards 6 to 10.
- 11.3 Feedback from service users and staff had been overwhelmingly positive. Continued efforts would focus on promoting the service and reducing associated stigma.
- 11.4 The Integration Joint Board agreed to note the report.

12. AUDIT SCOTLAND REPORT: INTEGRATION JOINT BOARDS FINANCE AND PERFORMANCE 2024

- 12.1 The Integration Joint Board considered a report by the Chief Financial Officer, which provided an overview of and highlighted key messages from the Accounts Commission report published by Audit Scotland on 25 July 2024, concerning the finances and performance of Integration Joint Boards.
- 12.2 The Chief Financial Officer informed the Board that the contents of the report would not come as a surprise, as many of the issues and challenges reflected local discussions. She emphasised that community health and social care were facing unprecedented pressures and financial uncertainty, with rising unmet need.
- 12.3 She indicated for context, that the report was based on financial data from the 2022/23 financial year, looking forward to 2023/24. Given the Board's financial recovery position in 2023/24, the Board benchmarked in a worse position, albeit a number of Integration Joint Boards nationwide were engaged in recovery discussions.
- 12.4 The report outlined seven key messages, beginning at Paragraph 8, accompanied by a brief indicator of the local position. Key message 3 addressed workforce pressures and capacity challenges across the sector, including impacts of the COVID pandemic, the cost of living and the United Kingdom's withdrawal from the European Union.
- 12.5 Key message 5 highlighted financial challenges and the report also detailed where the IJB was referenced in 3 exhibits in the Auditor's report. Exhibit 5 illustrated that, during 2022/23, the IJB had a modest general reserve, ranking fifth from the bottom when comparing all reserves as a proportion of the net cost of services. The Chief Financial Officer highlighted that the IJB had used a significant portion of reserves throughout 2022/23, and depleted the remainder as part of the financial recovery efforts.
- 12.6 It was reported that one of the most concerning findings in the report indicated that the projected funding gap across the country had nearly tripled for 2023/24, with financial sustainability risk identified in the vast majority of IJBs.
- 12.7 The Chief Financial Officer highlighted that the report presented five recommendations starting from paragraph 21, with her initial thoughts noted after each. While these recommendations were not new for the IJB, setting a balanced budget was increasingly challenging.
- 12.8 Although the report primarily focused on IJBs, it was considered crucial that all bodies collaborated to address the significant and complex challenges facing primary and community health and social care, with IJBs alone being unable to resolve the sector's crisis.
- 12.9 The next version of this annual report would be produced jointly with the Auditor General for Scotland, would adopt a whole system approach, and would make recommendations to the Scottish Government, local councils, NHS boards, and IJBs as appropriate.
- 12.10 Councillor Edlin requested that the Board formally minute their concerns regarding funding pressures, and the Chair highlighted that she had already communicated these concerns in a letter to the Cabinet Secretary for Health and Social Care in May 2024. Board Members also expressed disappointment that the Auditor's report had been published during the political recess period.

- 12.11 The Integration Joint Board agreed to:
 - (a) note the contents of the report; and
 - (b) note that the Auditor's report would also be considered by East Renfrewshire Council's Audit and Scrutiny Committee in due course.

13. REVENUE BUDGET MOTORING REPORT

- 13.1 The Integration Joint Board considered a report by the Chief Financial Officer on financial monitoring information in relation to the revenue budget, as part of the agreed financial governance arrangements.
- 13.2 The Chief Financial Officer highlighted that this was the regular monitoring report for the Integration Joint Board, and the first report of the current financial year.
- 13.3 She highlighted that the financial position at the end of the year indicated an overspend of £1.241 million, equivalent to 0.76% of the total budget.
- 13.4 The table at paragraph 4 of the report outlined the reasons for this overspend:-
 - A projected shortfall of £2.713 million against savings plans;
 - A pension gain of £2.067 million; and
 - Operational pressures amounting to £0.595 million.
- 13.5 Additionally, the table detailed the overspend in relation to partner contributions, showing that the projected overspend for NHS-funded activities was primarily driven by prescribing pressures, from a combination of savings still to be found and the continued increase in prescribing volumes.
- 13.6 The Chief Financial Officer confirmed that work with the NHSGGC Central Prescribing Team was ongoing to identify further savings opportunities in this area.
- 13.7 The Health and Social Care Partnership was actively exploring system-wide or shared service options with other Health and Social Care Partnerships to get NHS costs within budget. The required savings directly correlated with pressures in prescribing costs.
- 13.8 In terms of social work and social care funded activity, the Chief Financial Officer reported a projected underspend of £0.692 million after offsetting the expected savings shortfalls and operational pressures.
- 13.9 The table in paragraph 8 reminded IJB members that a savings target of £7.892 million was set against the social care budget, despite there being an initial requirement of £5.913 million savings to balance the pressures as part of the budget.
- 13.10 The rationale for the planned over-recovery was twofold:-
 - To ensure sufficient recurring savings by 2026/27, to allow for the impact of when the non-recurring pension gain ended; and
 - To maintain flexibility in managing any in-year shortfalls or changes to savings within the budget.
- 13.11 The £1.187 million shortfall in savings, detailed in paragraph 12, mainly related to care at home, with £0.5 million stemming from Care at Home reviews. The supporting people framework was a vital component of the savings program.

- 13.12 As of 13 August 2024, the latest position indicated that, for all care groups, 676 reviews had been completed, representing 44.7% of the total, with £1.605 million in savings achieved, representing 40.1% of the total £4 million target. Within the completed reviews, 64 care packages with reductions had yet to be reflected in the savings figures.
- 13.13 The Chief Financial Officer confirmed that work continued on the savings programme. There would be additional capacity from August as a result of the invest-to-save funding provided by the Council to support review capacity, transition planning and income generation. This £700k funding would fund these initiatives along with additional HR and recruitment support over a 24 month period.
- 13.14 The Chief Financial Officer highlighted that detailed progress on all savings initiatives was provided at Appendix 6 of the report.
- 13.15 Furthermore, there was an anticipated full-year effect of approximately £0.4 million from all savings achieved thus far in 2025/26. As usual, the operational position by service was presented, with explanations provided for the main variances.
- 13.16 The Chief Financial Officer confirmed that the HSCP remained committed to exploring every opportunity to reduce costs, particularly within NHS-funded activity, to balance pressures come year end.
- 13.17 Board members inquired about the policies and guidelines related to prescribing and de-prescribing. The Chief Officer and Clinical Director confirmed that guidance was provided to GPs regarding these practices, and that this would continue.
- 13.18 Additionally, the Chief Officer advised that discussions had been ongoing with the Prescribing Director at NHS, and that training sessions concerning prescribing and deprescribing guidance were being organised by NHSGGC.
- 13.19 It was highlighted that the information presented in Appendix 6 of the report was difficult to read. The Chief Financial Officer confirmed that this would be reviewed for future reports.
- 13.20 The Integration Board agreed to:-
 - (a) note the projected outturn for the 2024/25 revenue budget;
 - (b) note that the Chief Officer and her management team continued to work on actions to deliver savings and mitigate cost pressures in the current year;
 - (c) approve the budget virements requested within the report; and
 - (d) note that the Chief Financial Officer would review the style/layout of Appendix 6 (Savings Progress) for future reports.

14. CHARGING FOR SERVICES 2024/25 AND BEYOND

- 14.1 The Integration Joint Board considered a report from the Chief Financial Officer regarding Charging for Services for the financial year 2024/25 and beyond.
- 14.2 The Chief Financial Officer reported that Board Members had engaged in a thorough discussion on this report during a seminar held on 29 May, where the findings of the Income Generation Short Life Working Group had been presented.

- 14.3 The purpose of the report was to provide an update from this Working Group, propose increases to the charges for community alarms and Bonnyton House, and lay the groundwork for a forthcoming report to be presented to the Board in September, which would outline the proposed implementation of charging for non-residential care services.
- 14.4 The Integration Joint Board had expressed reluctance, but agreed to the proposed inyear increase and the implementation of non-residential charges from 2025/26. However, the timeline had been revised due to the UK General Election. To ensure transparent governance, this report was being presented again, now with a revised timescale for the in-year increases.
- 14.5 The background and rationale had been extensively discussed and was detailed in the report, along with updates from the Working Group. Further detail on the proposed increases in charges for existing services and the introduction of new charges would be provided in September 2024, with the Working Group meeting again soon to review options.
- 14.6 For the 2024/25 financial year, the benchmark information for community alarms, as indicated in paragraph 31 of the report, showed that the current charge of £3.25 per week was the second-lowest. The proposed charge, effective from 1 January 2025, would increase this to £4.90 per week, generating an estimated £48k in income this year, rising to £193k in a full year.
- 14.7 It was anticipated that there would be cost implications to consider regarding the analogue-to-digital switchover, with updates to be provided in September regarding proposed charges for 2025/26.
- 14.8 For Bonnyton House, the proposed weekly charge would rise to £960 from the current charge of £913, which was expected to yield approximately £6k this year, increasing to around £26k in a full year. The benchmarking for Bonnyton was more complex, but the data presented in paragraph 36 of the report indicated that the charges were roughly in the mid-range.
- 14.9 It was acknowledged that the current charge for Bonnyton did not fully cover the cost of the service, and various options were being explored for future years. All charges were determined based on the ability to pay and required approval from the Council under existing legislation. A draft report for the Council's Cabinet was appended to the report for information.

The Integration Joint Board agreed to:-

- (a) note the progress on the implementation of charging for non-residential care;
- (b) note the draft report to East Renfrewshire Council's Cabinet for 5 September 2024 that proposed increases to existing charges for Community Alarms and for Bonnyton House, in accordance with the recommendations of the IGSLWG, effective from 1 January 2025;
- (c) increase charges for Community Alarms to £4.90 per week, increased from £3.25;
- (d) increase charges for Bonnyton House to £960 per week, increased from £912.80; and
- (e) receive a detailed report in September 2024 confirming the proposed approach for 2025/26.

15. PRESENTATION: DELAYED DISCHARGE POSITION

- 15.1 The Integration Joint Board received a presentation from the Head of Adult Services: Communities and Wellbeing on delayed discharges.
- 15.2 It was highlighted that the East Renfrewshire Health and Social Care Partnership was ranked fourth nationally for delayed discharges per 100,000 population, and third within NHS Greater Glasgow and Clyde.
- 15.3 A slight increase had been observed in the four-week average for Adults with Incapacity (AWI), which had emerged as the predominant delay code for the Health and Social Care Partnership. Despite this increase in the four-week average of AWI delays, there had been an overall reduction in AWI delays for the East Renfrewshire Health and Social Care Partnership. As of 13 August 2024, 85% of discharges were completed without delays.
- 15.4 The Chief Officer informed the Board that discussions were ongoing with the Cabinet Secretary for Health and Social Care and Councillor Kelly, the Health and Social Care spokesperson from the Convention of Scottish Local Authorities (COSLA), regarding delayed discharges.
- 15.5 Board members inquired whether there was a seasonal effect influencing delayed discharges. Officers confirmed that while a seasonal effect existed, the current delays were primarily related to AWI legislation.
- 15.6 The Integration Joint Board agreed to note the presentation and to receive a further update at the next meeting.

16. DATE OF NEXT MEETING.

16.1 It was noted that the next meeting of the Integration Joint Board would be held on Wednesday 25 September 2024 at 2.30 p.m., the venue for which was to be confirmed.



AGENDA ITEM No. 4







Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board
Held on	25 September 2024
Agenda Item	4
Title	Matters Arising

Summary

The purpose of this paper is to update Integration Joint Board members on progress regarding matters arising from the discussion which took place at the IJB meeting on 14 August 2024.

Presented by	Julie Murray, Chief Officer

Action Required

Integration Joint Board members are asked to note the report.

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

25 September 2024

Report by Chief Officer

MATTERS ARISING

PURPOSE OF REPORT

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

RECOMMENDATION

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

REPORT

Audit Scotland Report: IJBs Finance and Performance

3. The report will be considered by the Council's Audit and Scrutiny Committee on 26 September 2024.

Charging for Services 2024/25 and beyond

4. The report agreed by the IJB in August will be presented at Cabinet on 3 October 2024.

RECOMMENDATIONS

5. Integration Joint Board members are asked to note the report.

REPORT AUTHOR AND PERSON TO CONTACT

IJB Chief Officer: Julie Murray

Julie.Murray@eastrenfrewshire.gov.uk

9 September 2024







Meeting of East Renfrewshire Health and Social Care Partnership Held on	Integration Joint Board 25 September 2024
Agenda Item	5
Title	Rolling Action Log

Summary

The attached rolling action log details all open actions, and those which have been completed since the last IJB meeting held on 14 August 2024.

Presented by	Julie Murray, Chief Officer
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Action Required

Integration Joint Board members are asked to note progress.

ACTION LOG: Integration Joint Board (IJB) September 2024

Action No	<u>Date</u>	<u>Item Name</u>	Action	Responsible Officer	<u>Status</u>	Due / Closed	Progress Update /Outcome
449	16-Aug-24		Amendment to be made to the spelling of Geoff Mohamed's name.	GCO/DSM	CLOSED	Aug-24	Minute amended
448	16-Aug-24	IIIRs Finance and Performance	Report to be shared with East Renfrewshire Council's Audit and Scrutiny Committee for consideration	СО	CLOSED	Sep-24	The report has been shared with Committee services and will be shared with Audit and Scrutiny Committee on 26.09.24
447	16-Aug-24		Review the style/layout of Appendix 6 (Savings Progress) for future reports.	CFO	CLOSED	Sep-24	Reviewed and updated
446	16-Aug-24	13. Charging for Services 2024/14 and beyond	Proposal for changes to in-year charges to be submitted to Council Cabinet meeting and update on 2025/26 proposal to be provided to September IJB	CFO	CLOSED	Sep-24	Report will be presented at Cabinet on 03.10.24 Charging for 2025/26 services included on IJB Agenda (25.09.24)
441	26-Jun-24	12. Foster Care, Kinship and Adoption Fees	Arrangements to be made for the payment of revised fees	CSWO	CLOSED	Aug-24	Backdated payments have been calculated and verified. Payments are expected to be made by mid September.
437		Prevention Strategy and	Update on action plan, including timescales to be presented to a future IJB meeting.	HAS-LDR	CLOSED	Sep-74	The updated action plan was been shared with members of the IJB via email (16.09.24)
435	27-Mar-24		Look at the range of gambling associated support currently in place in East Renfrewshire and provide an update to IJB	HAS-LDR	CLOSED	Sen-74	An update was shared with IJB members via email (16.09.24)
433	31-Jan-24	10. East Renfrewshire Adult Carers Strategy 2024-2027	Easy read summary version of the strategy to be developed	HAS-C&W	OPEN	Jun-24	A summary version has been produced and a video is also being developed for the website.
418	27-Sep-23	Governance Annual Report	Consideration to be given to amending format of future Clinical and Care Governance Annual reports to include index and executive summary	CD	OPEN	Sep-24	This will be included in future reports. The next report is due to be presented in November 2024

Abbreviations

CCC	GC Clinical and Care Governance Committee	CD	Clinical Director		HAS - C&W	Head of Adult Services - Communities and Wellbeing
IJB	Integration Joint Board	CO	Chief Officer		HAS - LD&R	Head of Adult Services - Learning Disability and Recovery
PA	C Performance and Audit Committee	CFO	Chief Financial Officer		HRBP	HR Business Partner
		CN	Chief Nurse		LP (RS)	Lead Planner (Recovery Services)
		CSWO	Chief Social Work Officer		PPPM	Policy, Planning & Performance Manager
		DSM	Democratic Service Manager		SPPCM	Strategic Planning, Performance and Commissioning Manager
				_		







Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board				
Held on	25 Sept	otember 2024			
Agenda Item	6				
Title	Local C (2023/2	hild Poverty Action R 4)	Report: Year 6		
Summary					
This report provides members of the Integration Joint Board with an overview of the statutory duty placed on health boards and local authorities to work together to develop, produce and deliver Local Child Poverty Action Reports (LCPARs). This is the sixth annual LCPAR which provides a profile of child poverty in East Renfrewshire plus details of both previous and planned actions to tackle the drivers of poverty.					
Presented by	Julie Mu	urray, Chief Officer			
Presented by Action Required	Julie Mu	urray, Chief Officer			
•	on Report	t: Year 6 as required to NHS Greater Glas			
Action Required The Integration Joint Board is asked to: • note the Local Child Poverty Action Poverty Act 2017 • approve the report for publication	on Report	t: Year 6 as required to NHS Greater Glas			
Action Required The Integration Joint Board is asked to: • note the Local Child Poverty Action Poverty Act 2017 • approve the report for publication Population Health and Wellbeing	on Report	t: Year 6 as required to NHS Greater Glas ee approval			
Action Required The Integration Joint Board is asked to: note the Local Child Poverty Action Poverty Act 2017 approve the report for publication Population Health and Wellbeing Directions	on Report	t: Year 6 as required to NHS Greater Glas ee approval Implications	gow and Clyde		
Action Required The Integration Joint Board is asked to: • note the Local Child Poverty Action Poverty Act 2017 • approve the report for publication Population Health and Wellbeing Directions No Directions Required	on Report , subject Committe	t: Year 6 as required to NHS Greater Glas ee approval Implications Finance	gow and Clyde		

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

25 September 2024

Report by Chief Officer

LOCAL CHILD POVERTY ACTION REPORT: YEAR 6

PURPOSE OF REPORT

1. The purpose of this report is to present the annual East Renfrewshire Local Child Poverty Action Report required by the Child Poverty Scotland Act 2017.

RECOMMENDATION

- 2. The Integration Joint Board is asked to:-
 - note the Local Child Poverty Action Report as required under the Child Poverty Act 2017
 - approve the report for publication, subject to NHS Greater Glasgow and Clyde Population Health and Wellbeing Committee approval.

BACKGROUND

- 3. Tackling child poverty is a key priority for Scottish Government and East Renfrewshire Council. The Child Poverty (Scotland) Act 2017 sets out ambitious targets for the Scottish Government to significantly reduce child poverty by 2030 and the new First Minister has pledged to go beyond this and eradicate child poverty completely. Addressing child poverty requires efforts from both national and local government.
- 4. Scottish Government published a three-year Child Poverty Action Plan "Best Start, Bright Futures" which sets out the approaches being taken at a national level.
- 5. Each local authority, along with their health board, is required to publish an annual Local Child Poverty Action Report (LCPAR) which describes the approaches being taken at a local level. This is the sixth annual report for East Renfrewshire and it is produced in partnership with NHS Greater Glasgow and Clyde.
- 6. The LCPAR guidance has been adapted recently to allow for multi-year action planning, with annual progress updates. This is a welcome change which helps reduce some of the administrative pressures of reporting and acknowledges that action taken may not demonstrate impact within a 12-month timescale.
- 7. This report highlights the areas of progress between April 2023 and March 2024, and provides details of the intended action planned over the next three years, and the relevant indicators which will be used to measure progress. This is summarised below.

23

REPORT

- 8. East Renfrewshire is the local authority with both the highest proportion of children and the lowest rates of child poverty in Scotland. The most recent data shows 3,247 (14%) children living in low-income households, which is very slight decrease on the previous data (3,288 / 14.4%). However, there is still work to do to reach the national target of 10% by 2030.
- 9. Scottish Government sets out the three 'drivers of poverty'; income from employment, income from social security and costs of living. These all impact the financial circumstances of the household, and therefore the actions to address these should tackle and prevent poverty. The LCPAR is required to report on local action taken under each of these drivers. In addition, we recognise the importance of taking action to mitigate the impacts experienced by those children and young people living in poverty, therefore the East Renfrewshire LCPAR reports on progress in this area also.

Income from employment

- 10. There has been positive progress to increase parental income from employment. We have worked to create better local employment opportunities for parents and carers, including promoting Fair Work First, Employer Recruitment Incentives and Real Living Wage Accreditation. We also promote Family Friendly working initiatives in ERC and NHS Greater Glasgow and Clyde and provide financial wellbeing support to our employees. Work East Ren has delivered a Parental Employment Support (PES) programme which has supported over 100 parents with a range of successful outcomes. The Local Employability Partnership has established two subgroups; the Parental Employability Group and the Lived Experience Panel. These groups will influence how we provide employability support for parents and carers going forward.
- 11. Future short-term actions to increase income from employment will include further support to in-work parents, the provision of funded work placements within ERC, and ongoing work with local businesses to help them become employers of choice for local parents and carers. In the medium term, we will aim to create community hub spaces to offer holistic support services, as well as address disability (for parents and their children) as a barrier to employment. It should be noted that many of these planned activities are dependent on grant funding from the Scottish Government, which is single-year allocation and often not confirmed until some months into the financial year. We remain committed to supporting families but must acknowledge the challenges this creates in taking delivering quality employability supports in a sustained manner.

Income from social security

12. There have been many successes in achieving increased income from social security. All parents and carers receiving employability services have been offered financial inclusion support to manage any potential adverse impacts of them changing employment status. The Money Advice and Rights Team (MART) and Citizens Advice Bureau (CAB) have supported families to manage over £2 million worth of debt and also secured over £2 million worth of benefits including Scottish Child Payment, Child Disability Payment and Child Benefit. MART provides a dedicated in-school officer in 4 primary schools, attended P1 induction days in another 6 schools and delivered money awareness sessions in 4 secondary schools. Staff in health settings are increasingly referring families to money

- advice services; this includes health visitors, specialist maternity services and the children's hospital.
- 13. Future short-term actions to increase income from income maximisation and social security will include working with frontline staff to ensure they are aware of supports available to families and are able to refer to them. This will ensure we maintain the existing referral sources as well as identify potential new sources. In addition, we will deliver a communications campaign to make families across East Renfrewshire aware of any potential entitlements. In the medium term, we will use new and emerging data sources (see para 19) to identify and predict the profile of need and target resources to meet these needs. There is an increasing demand for both MART and CAB support, and by raising awareness we predict this will continue to grow. However, there is no additional budgetary resource available to respond to this therefore we will need to consider how to redistribute and prioritise existing resource.

Cost of living

- 14. There have been some key areas of progress in relation to reducing costs of living. Many families have faced increased fuel costs over recent years and we have responded by offering the support of a temporary Energy Advisor, applying for fuel grants to pay off direct debit debt, and providing fuel vouchers to household on pre-payment meters. This support reached more than 200 families. We have addressed increased housing costs by increasing the supply of affordable homes, providing short-term rent relief and funding emergency homeless accommodation. There have been positive initiatives to reduce the cost of the school day including breakfast carts, uniform recycling schemes and subsidised extra-curricular activities. We have also developed an Emergency Formula Pathway to ensure access to infant formula for parents and carers facing food insecurity.
- 15. It should be noted that many of these initiatives were funded through Covid Reserves, which is no longer available. Whilst we have looked to strengthen pathways and sustainable approaches, some of these supports have and will come to an end. We remain committed to providing all possible support to families, but we must acknowledge the reality of budget constraints across the public sector.
- 16. Looking ahead, short-term actions to reduce the costs of living for families will include delivering the Thrive Under 5 programme to tackle food insecurity for households with 0–5-year-old children and working with head teachers to ensure a rigorous approach to reducing the cost of the school day. We will also speak to social housing tenants to better understand their needs and any financial barriers they experience around housing. In the medium term, we will develop and deliver poverty training to increase awareness of 'hidden poverty' and empower staff to signpost and refer families to support services. We will also take a multi-service approach to reduce the number of children who have significantly low attendance or reduced timetables, with the understanding of the impact non-school-attendance can have on household financial circumstances. Finally, use lived experience feedback to ensure social housing provision across the authority is fit for purpose in terms of affordability and the reduction of fuel poverty.

Mitigating the impact of poverty

17. In addition to tackling the drivers of poverty, we have made progress in supporting the children and young people in, or at risk of, poverty. We increased our fostering, adoption

and kinship fees and allowances by 5%; and supported young people in care to increase their savings and improve their financial literacy through the Share Foundation's Stepladder of Achievement programme. We provided activities such as laser tag, water sports and graffiti art, and daytrips to Heads of Ayr Farm, Blackpool and Edinburgh Fringe. We also provided bags of food and selection boxes and also organised a Christmas party for eligible children and young people.

Improved understanding

- 18. With such a small number of children living in poverty in East Renfrewshire, it is crucial that we are able to delve deeper and really understand the needs of these children and their families. We also need to be aware of households who are financially vulnerable and at risk of poverty, at the earliest opportunity in order to provide preventative and early intervention support, with a 'no wrong door' approach. With this in mind, we have committed to an additional area of future action to improve understanding of the circumstances of families in, or at risk of, poverty.
- 19. We have recently worked with the Digital Office to explore ways to bring together internal ERC datasets to identify potentially vulnerable households. We have developed a prototype which allows us to gather geographical and profile information about households, which could then be used to target appropriate supports to families. In May, Cabinet committed some of the Council's Investment in the Future budget to continue work in this area and develop a working data matching tool.

CONSULTATION AND PARTNERSHIP WORKING

20. The Child Poverty Oversight Group includes colleagues and partners from East Renfrewshire Council, HSCP, NHS Greater Glasgow and Clyde, ER Citizens Advice Bureau, Police Scotland, Barrhead Housing Association and Voluntary Action East Renfrewshire.

IMPLICATIONS OF THE PROPOSALS

<u>Finance</u>

- 21. There is no specific budget associated with this report. Some of the planned activities referenced in the report will require budget, which comes from a mix of Scottish Government funding and existing budgets within East Renfrewshire Council and NHS Greater Glasgow and Clyde. Some of these budget allocations are still subject to confirmation and grant allocation.
- 22. As highlighted, there are a number of activities which were delivered through temporary funding which is no longer available, therefore these supports will not be available in future.

Equalities

23. The integral aim of the LCPAR is to reduce inequality amongst families in East Renfrewshire.

DIRECTIONS

24. There are no directions arising from this report.

CONCLUSIONS

25. This report details the actions taken during 2023-2024 to support families in, or at risk of, poverty and, where possible, the impact which these actions have had. The report also sets out the planned approach to continued action going forward, including responding to new and emerging need.

RECOMMENDATIONS

- 26. The Integration Joint Board is asked to:-
 - a) note the Local Child Poverty Action Report as required under the Child Poverty Act 2017
 - approve the report for publication, subject to NHS Greater Glasgow and Clyde Population Health and Wellbeing Committee approval

REPORT AUTHOR AND PERSON TO CONTACT

Julie Murray, Chief Officer, East Renfrewshire HSCP Julie.Murray@eastrenfrewshire.gov.uk

Louise Pringle, Director of Business, Operations and Partnerships, East Renfrewshire Council Louise.Pringle@eastrenfrewshire.gov.uk

Claire Coburn, Strategic Services Lead Officer Claire.Coburn@eastrenfrewshire.gov.uk

Chief Officer, IJB: Julie Murray

6 September 2024

BACKGROUND PAPERS

Best Start, Bright Futures: Scottish Government tackling child poverty plan 2022-2026 https://www.gov.scot/publications/best-start-bright-futures-tackling-child-poverty-delivery-plan-2022-26/pages/3/

East Renfrewshire LCPAR: Year 5

https://www.eastrenfrewshire.gov.uk/media/9326/Local-Child-Poverty-Action-Report-2022-to-2023/pdf/Local Child Poverty Action Report 2022 - 2023.pdf?m=1689324728900







East Renfrewshire Local Child Poverty Action Report (Year 6)

Progress updates 2023 – 2024 Approach to tackling child poverty 2024 – 2027 2 28

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Introduction from our Community Planning Partnership Chair

I am pleased to share with you the sixth Local Child Poverty Action Report for East Renfrewshire. This report highlights our achievements over the past year and outlines our plans for tackling child poverty in the coming years.

East Renfrewshire is a unique and special place to grow up, and has the highest proportion of children and young people in Scotland. Children, young people, and their families, have always been at the heart of everything we do.

Protecting children and young people from poverty is crucial in allowing them to flourish. Poverty affects every aspect of a child's life, including their education, health, nutrition, social and emotional well-being, living conditions and aspirations. However, it is essential to recognise that poverty impacts the entire family. To effectively address poverty, we must work with the whole family, supporting parents and caregivers to improve their financial circumstances and helping children and young people cope with the challenges of poverty.

This report showcases several key successes from the past year, a year where we have seen an increased demand for financial support, including from working families and those in traditionally more affluent areas. To address this, we are enhancing our data analysis and ensuring we listen to and respond to the needs of local families. This approach will guide our actions to tackle the root causes of poverty and ensure our efforts are effective.

This plan outlines our commitments to addressing child and family poverty over the next three years and aligns with our long-term vision for East Renfrewshire. To make this vision a reality, we will build on our current strengths working with our partners and become even stronger and more collaborative to deliver a better and brighter future for all children and young people.

Councillor Owen O'Donnell
Chair of Community Planning Partnership

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Background

Child poverty in East Renfrewshire, while generally lower compared to many other areas in Scotland, still exists and is a significant concern. Despite our area's relative affluence, there are pockets of deprivation and families facing financial hardship. In some parts of the authority, including Barrhead and Neilston, more than 1 in 3 children are in low-income families. This is higher than the Scottish average.

However, it's essential to recognise that even in affluent areas, there are families and children living in poverty. Some families struggle to make ends meet due to low wages, underemployment or high essential costs of living. In particular, the costs of housing in East Renfrewshire is comparably high.

In areas like East Renfrewshire, child poverty may not always be visible. Families experiencing financial difficulties may be less visible due to the stigma associated with poverty or a desire to maintain appearances. This "hidden poverty" can make it challenging to identify and address the needs of vulnerable children and families.

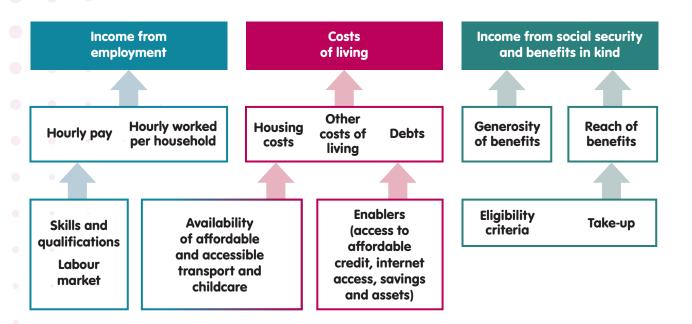
The Scottish Government has taken steps to address child poverty through its Child Poverty Act, which sets ambitious targets for reducing child poverty by 2030. Strategies include increasing income support for low-income families, improving access to affordable housing, enhancing childcare provision, and promoting inclusive economic growth.



It is essential to recognise that even in affluent areas, there are families and children living in poverty



East Renfrewshire Community Planning Partners work together to focus on local action to tackle the three drivers of poverty; increased income from employment, increased income from social security and reduced cost of living.



We also work to mitigate the impact of poverty on those families who experience it. NHS Greater Glasgow and Clyde is a key partner in this work and had three key priorities; their role as a provider, role as an employer and role as an Anchor organisation. These efforts aim to reduce the prevalence of child poverty and improve the well-being of vulnerable children and families in the area. Child poverty is also one of the priorities within our new Children's Services Plan "At Our Heart - The Next Steps".

Child poverty remains a significant issue that requires attention and concerted efforts at both a national and local level to address effectively. In East Renfrewshire we want all our children and young people to flourish and this can only be achieved by lifting families out of poverty.

This report provides an overview of progress over the past year (April 2023 – March 2024). It also sets out our short and medium term plans to tackle child and family poverty in East Renfrewshire.





East Renfrewshire's Children and Young People's Services Plan 2023-2026 THE RIGHT TO A HOME ###



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Profile of poverty

East Renfrewshire has the highest proportion of children in any local authority in Scotland and this is increasing

- One in five (19.701) are aged up to 16 years
- There were 745 babies born in 2022
- 514 young people moved into the area in 2022

Child poverty in East Renfrewshire is the lowest in Scotland

- 3,247 children (14%) are estimated to live in low-income households (after housing costs)
- 2,591 children (11%) live in low-income households (before housing costs)

Child poverty estimates vary across the authority

- At least 1 in 3 children are in low-income families in some parts of Barrhead and Neilston
- At least 1 in 4 children are in low-income families in some parts of Mearns and Thornliebank

Children living in a lone parent household are more likely to experience poverty

• Of the 2,591 children living in relative low-income households (before housing costs), 1,361 (53%) are in a lone parent household

Employment does not prevent child poverty

• Of the 2,591 children living in relative low-income households (before housing costs), 71% live in a household where are least one adult is working.



2023-24 Progress Summary

EMPLOYMENT



Increase in Living Wage Employers



Unemployment levels remain low



Number of 16-19-year-olds in work, training or employment remains high

Key successes in 2023/24

- Promoted Employment Recruitment incentives and encouraged Real Living Wage accreditation with local employers
- Established a Parental Employability Working Group and a Lived Experience Panel
- Provided direct employability support to parents including job searching, application forms, interview skills, confidence building, training and upskilling

SOCIAL SECURITY



The number of primary pupils receiving Free School Meals due to low-income remains low



Increase in number of families accessing financial advice

Key successes in 2023/24

- Offered financial inclusion support to all parents receiving employability services
- Supported families to manage over £2 million worth of debt
- Secured over £2 million of social security awards for families
- Developed new approaches to data insights to monitor and predict areas of need

COST OF LIVING



Uptake of funded Early Learning and Childcare remains high

Key successes in 2023/24

- Supported over 200 families with their fuel costs
- Increased the supply of affordable homes, provided short-term rent relief and funded emergency homeless accommodation
- Provided further initiatives to reduce the cost of the school day including breakfast carts, uniform recycling schemes and subsidised extracurricular activities
- Developed an Emergency Formula Pathway

Progress Updates 2023-2024

Critical indicators

Indicator	Measure and source	Previous data		Current data
Children living in poverty	Percentage of children living in poverty (after housing costs) in East Renfrewshire: End Child Poverty	12.8% 3,064 children (20/21)	14.4% 3,288 children (21/22)	14.0% 3,247 children (22/23)
Real Living Wage employers in East Renfrewshire	Number of real Living Wage accredited employers: Living Wage Scotland	23 (2021)	34 (2022)	39 (2023)
Working age unemployment level	Percentage of economically inactive residents who want a job: NOMIS	27.6% (2021)	20.5% (2022)	20.4% (2023)
Children and young people participation level	Percentage of 16-19 year olds participating in learning, training or employment: SDS Annual Participation Measure Report	97.2% (2021)	97% (2022)	97.7% (2023)
Free School Meal uptake at primary level for by low-income purposes	Number of children who access FSM payment during holiday period (Christmas) as proportion of school roll: Local data	9.3% 874 pupils (Dec 2021)	8.4% 792 pupils (Dec 2022)	8.1% 761 pupils (Dec 2023)
Access to financial wellbeing advice	Number of families accessing MART financial wellbeing advice: Local data	1,232 (21/22)	1,521 (22/23)	1,728 (23/24)
Uptake of funded early learning and childcare entitlement	Percentage of 3 & 4 year olds registered for funded early learning and childcare: Scottish Government Schools Statistics	100% (2021)	100%	101% (2023)

Income from employment

We said	We did
Encouraging more businesses to become Real Living Wage accredited	Through our Local Employability Partnership and other networks, we continued to raise awareness of the Fair Work First agenda. When promoting Employment Recruitment Incentives, all employers were encouraged to pay the Real Living Wage and supported to become accredited if required. In East Renfrewshire there are currently 39 RLW registered employers .
Increasing support for in-work parents to remain active in	This year Work East Ren has supported 34 in-work parents . This included continued employability support via our Core Parental Employment Support Programme, key worker support and access to a Money Advice and Rights adviser.
the workplace, train and gain progression	 10 parents moved into a role that increased their earnings or saved them travel costs 3 parents achieved a recognised qualification to help improve their labour market position 5 parents sustained a volunteer programme to gain further experience to allow them to reach job opportunities 8 in-work parents are still engaging with Work East Ren the remaining parents are no longer receiving support
	We have recruited a Parental Employability Child Poverty Officer and established a Parental Employability Working Group made up of 15 key local stakeholders, including a mix of public and third sector partners within employability, who are working towards supporting the Child Poverty Action Plan. The working group will deliver on the key actions over the next three years including work with local employers and with local parents and carers.
•	Both East Renfrewshire Council and NHS Greater Glasgow and Clyde continue to support their own employees to remain active in the workplace, train and gain progression. NHSGGC has continued to offer Apprenticeships and Academy Programmes; deliver careers programmes and align career pathways to workforce planning. Both employers offer and promote family friendly working practices and offer financial wellbeing support to staff , including a 'Staff Money Worries' campaign and poverty awareness sessions for managers delivered.



All employers were encouraged to pay the Real Living Wage

36 We said We did **CASE STUDY: Impactful Parents** Impactful Parents was a creative employability programme aimed at unemployed parents from Barrhead and surrounding areas. It was designed as a fun, nontraditional employability programme, with an emphasis on using visual arts to improve health and wellbeing and performance/ drama skills to build confidence and develop communication skills. Ultimately, the aim was for participants to progress to positive destinations by the time the project ended, and to provide a range of interventions to equip them with the skills to do so. Running in two blocks, from Sep-Dec 2023 and Jan-Mar 2024, the programme supported 15 parents. Of these parents: • 2 moved into employment • 1 moved onto volunteering

- 1 re-engaged with education
- 10 gained a qualification

Many of the participants were at the very early stages of their journey on the employability pipeline and a great deal of foundation work had to be done to prepare them for having the confidence and self-belief to research and apply for job opportunities. Parents reported lots of positive 'soft outcomes' including:

- Increased confidence
- Increased employability skills
- · More socially connected
- Improved mental health

"Initially I just hoped this project would help me with my employability and give me some structure. Now, after working with the tutors, it's given me a different hope for the future for what my employment can look like." (Danielle)



"Having something to look forward to and being part of a routine has improved my mental health." (Shadia)

We said	We did
Design and inputs to employability programmes via Participatory Budgeting	We have established an Employability Lived Experience Panel to shape and inform the services we deliver. This panel includes a number of parents and carers who share their experiences of managing employment as a parent. This Panel met for the first time in January 2024 and they will support action planning for 2024 -2027 and beyond.
Delivery of new Parental Transition Fund and Best Start, Bright Futures programme	We have continued to provide employability support via our Core Parental Employment Support (PES) Programme. During 23/24, we provided support to 127 parents . Support included help with job searching, application forms, interview skills, confidence building, assistance with funding for training and upskilling.
	By engaging with the PES Programme, 48 parents increased their household income and 8 parents entered education or training . The programme is continuing to support 32 parents and the remaining 39 are no longer receiving regular support however can return to the service at any time should they choose to re-engage.
	The PES Programme also worked closely with a range of third sector partners to provide targeted provision for parents with health issues, young parents, disabled parents, parents in recovery and our economically inactive parents. SAMH worked with 17 parents in recovery and with mental health issues and 7 of the groups took part in organised volunteering opportunities. Through the Impact Arts programme we reached a number of economically inactive parents due to their connections with local tenants and their reach within the
	community. Our partnership with Enable Works meant that we supported 8 parents with a disability or have a child with a disability and this work is ongoing. The partnership also supported parents with soft skills by building confidence through a number of wellbeing workshops including arts and crafts, sport and volunteering projects such as community gardens & planters for local play parks were crucial in building soft skills, in order to progress their employability skills. The programmes included wider support from partner agencies including Flexibility Works, who helped improve the parents understanding of local fairer working practices and their rights.



The PES programme provided support to 127 parents





8 parents entered education or training

Income from social security

We said	We did
All parents involved with employability programmes are offered financial inclusion support	The Money Advice and Rights Team (MART) have a Financial Inclusion Officer to assist Work EastRen clients with their financial position and options. MART have supported 45 clients within the employability pipeline, providing advice to ensure that employment is sustainable and generating £51,000 in social security income .
Improved knowledge of financial wellbeing among school aged residents, parents, carers and staff	East Renfrewshire Citizens Advice Bureau (ERCAB) continue to hold outreaches across the authority to maximise the clients helped. Though the 'Money Talks' project, CAB completed Financial Statement with clients to help save on outgoings and check they getting all the benefits they are entitled to. ERCAB dealt with £1,710,079.24 in debt in the 2023/24 period. MART assisted 83 families with debts solutions creating savings of £225,000 .
	MART offer a dedicated in-school support in four of our primary schools. This support has provided advice and assistance to 275 families and generated over £215,000 in financial gain . It has also supported 229 children to access National Entitlement Cards , 4 families to access a Blue Badge and 1 pupil to access discretionary free school meals. By offering this support in-school, the service removes any stigma around engaging with advice services and allows strong relationships and trust to be built over time.
	In addition, MART have attended P1 induction days in a further 6 primary schools, delivered Money Awareness sessions in 4 high schools, and attended a number of parents evenings across the authority.
•	MART now have an officer working alongside Adult Learning to deliver the UK Government's Multiply Programme . Classes are being delivered to parents that focus on the cost of living, budgeting, benefits, and debt issues. 48 parents are now attending .
	Amongst health visitors, there is an improved understanding of circumstances of families in or at risk of poverty . At team and supervision meetings, health visitors have reflected on the impact of hidden poverty and their own development of skill in approaching this.
	CASE STUDY
	During an antenatal home visit, the Health Visitor identified that Suzie* might be vulnerable. Suzie was care experienced and also having a high risk pregnancy. The Health Visitor sensitively discussed the financial impact of welcoming a baby and the benefits of a referral to Money Advice and Rights Service (MART) for income maximisation. This referral resulted in Suzie receiving the Best Start grant and a review of her financial circumstances. This early intervention work had a positive impact upon Suzie by allowing her to practically prepare for motherhood and alleviate some of the financial burden. *not real name

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We said

Improved parental access to benefits and income maximisation information and advice, including new referral pathways

We did

Within a year, ERCAB has helped clients receive a total of £1,125,111.25 in social security awards for children.

MART secured social security awards for children of £908,269. This includes securing numerous child related benefits:

Summary	Financial Gains		
Benefit	MART	САВ	
Tax Credits	£21,860.00	£16,440.00	
Best Start Grant	£7,419.50	£707.25	
Child Benefit	£19,801.60	£28,148.40	
Child Disability Payment	£727,326.00	£1,026,964.60	
Education Maintenance Allowance	£8,400.00	N/A	
Free School Meals/Clothing Grant	£34,361.90	£2,401.00	
Scottish Child Payment	£89,100.90	£50,450.00	

During the Food Insecurity Pilot that ERCAB were involved in, **864 children were provided with a £25 cash voucher for food purposes**. CAB received a large amount of referrals from partners for the Food Insecurity Pilot. This has opened up referral pathways for other services offered including Fuel help, money advice and benefit services.

All families who access HSCP Children and Families Services, including Request For Assistance, are **signposted to MART to ensure their income is maximised** especially for families where ill health, addiction, and disability is a feature.

We **improved access to Clothing Grants and Free School Meals** by running drop-ins during summer 2023, supporting those who needed face to face support to complete applications and receive support. We also established links between local charity **'Back to School Bank' and schools' sustainable uniform schemes** to support families to access.

Following a Short Life working group to improve Health Visiting referrals to money advice last year, it has now easier for HVs to make direct referrals to MART. During 2023-24, **71 referrals made were from the 'priority groups'** (lone parent, household with a disability, child under 1, minority ethnic household, parent/guardian under 25, and large families), providing a **financial gain of £10,582**.

Since April 2023 there has been a reduction in available HV resource which means there could be an adverse impact on the opportunity to signpost and support families accessing MART financial wellbeing advice.

The Blossom Maternity Service in Glasgow supports pregnant women who have **multiple vulnerabilities including single parents, those with a disability and those from ethnic minority backgrounds**. Many who attend this service have low level literacy skills and/or English is not their first language, which makes managing their money and financial literacy an additional challenge. Often IT skills are also low making claiming universal credit more difficult. All pregnant women who attend Blossom are offered the Money & Debt Advocacy Service, Money Matters. During 2023-24, 7 clients from East Renfrewshire were supported through this service, with an **average financial gain of £7,059**.

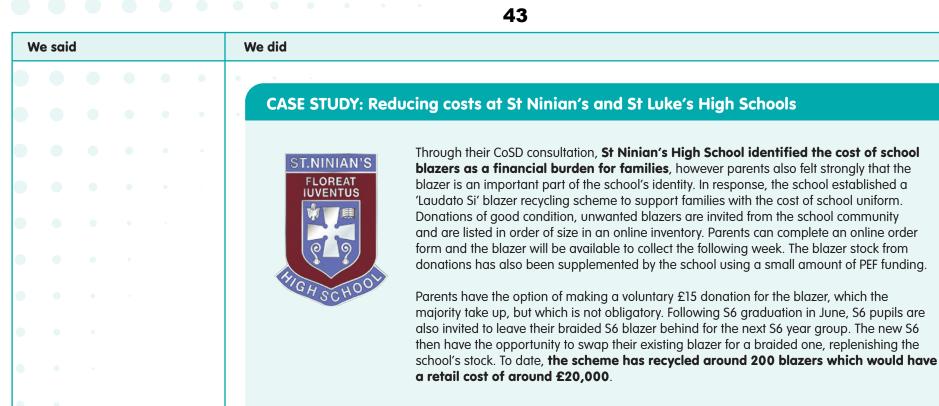
We said	We did
	NHSGGC Money Matters service supports any families who have a child as an inpatient or who attend the hospital as an outpatient. The service works closely with families who often experience major life changing circumstances due to their child's lifelong or life limiting medical condition. These parents often become carers and they are faced with increasing and additional costs of caring for a child with additional needs. In 2023/24, there were 2 clients from East Renfrewshire with an average client gain of £10,531. These high gains were mainly due to child disability payments and levels of debt managed.
Enhanced use of data to provide insights and interactivity	We continue to work in partnership with Smart Data Foundry to develop the Cost of Living Dashboard . This project uses banking data to identify 'financial wellbeing indicators' such as overdraft use, income from benefits and living beyond means. The tool then cross-matches this with 'contextual data' including receipt of free school meals, family size and disability in the household. Using this tool, we are able to monitor changes in financial wellbeing in 'real time' and pinpoint areas where household finances aren't stretching far enough.
	We have been developing a data matching tool, using a service design approach . This tool aims to match East Renfrewshire Council internal datasets to allow us to identify households who may be financially vulnerable, and may benefit from MART services. This project is part of the national Data and Digital Office Service Design Challenge in partnership with Snook. East Renfrewshire was only one of 2 councils to be successful in obtaining this support and training. The Council has committed further temporary funding to develop this work further and implement new approaches in 2024/25.



Costs of living

We said	We did	
Reducing energy costs for vulnerable families	MART had a temporary Energy Advisor for the 23-24 financial year which focused on utility arrears and maintaining energy supplies to homes. The project assisted 212 residents and created £52,000 in revenue via energy grants . MART have a partnership with the fuel bank foundation and are able to secure fuel vouchers for residents with immediate need. Barrhead Housing Association (BHA) made £37,500 of payments to support 95 tenants with fuel debt . These payments were made to either the tenant (if they had a pre-payment meter) or direct to the energy provider. In additions, BHA made 52 applications to the Energy Hardship Fund and distributed £15,092 of fuel vouchers to tenants. The also worked in partnership with Citizen's Advice Bureau to provide an energy advisor one day a week. This resulted in 78 referrals being made . East Renfrewshire Citizens Advice Bureau have supported a client financial gain of £119,591.45 for energy. £73,747.70 of this was debt which was written off by obtaining grants. The remaining £45,843.75 has been issued to clients on direct debit meters and fuel vouchers for clients who are on pre-payment meters.	
Increasing provision of affordable housing options to vulnerable groups	There has been an increased supply of affordable homes during 2023-24 with support of the Scottish Government and housing developers such as Taylor Wimpey. This includes 55 new build social rented homes (10 Council homes at Malletsheugh Newton Mearns; 20 by Link Housing Association at Cherrybank, Newton Mearns; and 25 by Barrhead Housing Association at Springfield Road, Barrhead). A further 7 new homes discounted for sale by Taylor Wimpey were delivered at Maidenhill, and 7 second hand homes acquired by the Council and Barrhead Housing Association. This is above the target of 45 average per year set for 2023-24.	
	East Renfrewshire Council's Housing Service used £50,000 of temporary funding to provide rent relief on a short-term basis to 36 vulnerable tenants. These tenants included lone parents, domestic abuse victims, care experienced young people and families just over the income threshold for benefits but experiencing real poverty due to the cost-of-living crisis. This supported them to sustain their tenancies and prevent homelessness, whilst providing time for them to work with advice services.	
	A further £100,000 of temporary funding was used to support the provision of emergency homeless accommodation . We have this year seen an unprecedented increase in demand for emergency temporary accommodation with 396 households placed (130% increase on previous year), 52 of which were households with dependent children who spent an average of 10.5 days in emergency accommodation before being moved to alternative accommodation.	
	We are working in partnership with Aberlour to improve the housing and accommodation support needs of care experienced young people. Following lived experience feedback, we have been working to examine support for independent living, redesign supported accommodation and aftercare/outreach offers with an overall aim to improve young people's transition experiences and minimise the risk of homelessness which is higher among care experienced and vulnerable young people. The process is now near completion and a series of improvement recommendations have been made. These will inform future action planning.	

We said	We did
	ER Housing Services and the Health and Social Care Partnership have worked jointly to identify a number of properties dedicated to the prevention of homelessness for Care Experienced Young People through effective transitional housing . The purpose of this accommodation is to reduce the number of Care Experienced Young People becoming homeless. 14 properties have been established , the majority of which have been used to accommodate unaccompanied asylum seeking children to date. These properties were developed in response to the recommendations from care experienced young people as part of the 'A Good Childhood - Collaborative Approach to Service Design' report from June 2023.
	In December 2023, we updated and improved our Discretionary Housing Payments (DHP) Policy to ensure all those entitled to DHPs can access them.
	Citizens Advice Bureau has focussed on using preventative measures to avoid homelessness, and have dealt with a combined total of £303,171.78 for arrears in both mortgaged and rented properties. This has allowed clients to continue living in their homes, therefore preventing homelessness for families. CAB has worked with families to address the root causes of their arrears, and provided financial education and budgeting advice.
Reducing costs to families of school attendance and participation	East Renfrewshire Council Education Department launched its Social Justice Framework and Strategy in March 2023. This includes specific anti-poverty guidance for schools and centres including guidance on reducing the cost of the school day. Baseline data on Cost of the School Day audits and poverty-aware training was gathered. Overall 56% of schools and centres have now undertaken Cost of the School Day (CoSD) audits with stakeholders. 38% of schools and centres report that more than half of practitioners have undertaken professional learning on poverty-aware practice . This data is being used to support and challenge schools and centres to continue to improve poverty awareness amongst practitioners and further reduce the cost of participation in education.
	Following a thematic review of the use of Pupil Equity Fund (PEF) in April 2023, a number of next steps were identified to improve the targeted use of PEF to support learners in poverty. Establishments have been supported and challenged throughout the session to take these forward through high quality, finely targeted PEF plans. Alongside a wide range of learning interventions, PEF is being used to support cost-reducing initiatives such as breakfast carts, uniform recycling schemes and subsidised extra-curricular activities . These interventions reduce the cost to families of school attendance while also promoting wellbeing, dignity and equity for children and young people affected by poverty.
	Where families have no recourse to public funds, school staff and health visitors have supported them to access free school uniforms from local charity the Back to School Bank .



At St Luke's High School, a partnership with Fareshare is supporting families through the delivery of unused, good quality food that parents can collect weekly from the school. The partnership with Fareshare is also supporting 'Help Out Trolleys' where pupils can collect breakfast items and provides extra fresh produce for health and food technology lessons.

One innovative aspect supported by the Fareshare partnership is the family Cook School. This family learning activity brings **pupils and parents together to cook a meal**. As well as the benefits of learning new culinary skills and spending recreational time together with their young people, families also take home a free healthy meal for the evening.

We said	We did
Continuing to reduce costs to families of Early Learning and Childcare	• 1140 hours of funded Early Learning & Childcare continues to be provided to all eligible children who apply for it from the term after their 3rd birthday until they commence school, including eligible two-year-olds. East Renfrewshire Council continues to collaborate with a range of partners including; Health Visitors, Family First, Money Advice and Rights Team and the Department of Work and Pensions (DWP) to ensure that families are aware of their entitlement. Systems are now in place which enable the Education Department to proactively contact families who have recently become eligible through related DWP criteria and encourage them to apply for a nursery place. In addition to providing Early Learning and Childcare for eligible and vulnerable two-year-olds, where there is capacity to do so we continue to support other working families who are not eligible, with the offer to purchase nursery places at a reasonable hourly rate.
	Over 1,500 3 and 4 year olds attend Early Learning and Childcare in East Renfrewshire and are offered a healthy snack, drinks and a meal provided during their funded sessions. Almost all children access this free food entitlement, although there are some families who prefer to send in a packed lunch. All parents who access this free provision will benefit from a reduction in food bill costs for a free meal and snack up to 5 days a week.
Reducing costs to families of the pregnancy pathway	East Renfrewshire has developed an Emergency Formula Pathway in place to support families in emergency financial crisis. This pathway is part of the wider agenda to support food insecurity and builds on cash first principles with the Health Visiting service referring to MART for Asda supermarket vouchers to support families.
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Mitigating the impact of poverty

In addition to tackling the three drivers of poverty, across the partnership we have taken action to support those families who are living in poverty and mitigate the impact. These activities are underpinned by GIRFEC, The Promise and our local Children's Plan "At Our Heart – The Next Steps."

In 2023/24, we **increased our fostering, adoption and kinship fees and allowances by 5%** to reflect increases in the cost of living for our carers. This allows us to provide foster carers, kinship carers, and adoptive parents with financial security, and stability for the children and young people in their care.

During Spring and Summer 2023, we delivered a range of **Participation Programmes** which were designed based on feedback from low-income families. The programme targeted:

- Care experienced children and young people
- · Children on the child protection register
- Children allocated within children and families social work service with complex additional support needs on the edges of the care system

We engaged with 194 children and young people, with on average 40 attending each week. Activities included day trips to Heads of Ayr Farm Park, Edinburgh Zoo, Cinema, M&D theme park, plus further trips to local parks and nature walks. Through the Youth Intensive Support Service, 30 young people were engaged in a number of activities including laser tag, water-sports, and hill climbing. Within our Aftercare group, we supported a group of 10 young people on a trip to Blackpool. This group also enjoyed a day out to the Edinburgh Fringe Festival. We also provided activities for a group of young people who are not engaging in school due to emotional wellbeing issues. These included graffiti art and hip hop. All of the participants come from vulnerable low-income families who would not have been able to afford to pay for the activities offered.



Children and young people from low income families participated in trips and activities

We continue to provide the **For Your Entertainment Programme (FYE)** which offers care experienced children and young people with free leisure access in partnership with East Renfrewshire Culture and Leisure Trust. The FYE scheme gives access to leisure facilities, arts classes, theatre, and swimming. In 2023/24 **a total of 218 children, young people, and parents** used the scheme and feedback indicates that their participation in the activities has improved physical and emotional wellbeing and brought families together to have fun.

We participated in the **Share Foundation's Stepladder of Achievement programme** to increase the savings of young people living in care and to improve their financial literacy. This was a one-off UK government initiative linked to Junior ISAs for care leavers. **75% of our eligible young people were registered and £14,200 was generated** for the ten young people who completed the online modules. This scheme was aimed at a small population of care leavers and although logistically highly complex for staff, we drew all of our workforce resource together from social workers, youth workers, and the Family Firm employability officer.

Each looked after and care experienced child under 5 years of age (to their 5th birthday) receives an age-appropriate classic book each month from the Dollywood Imagination Library Foundation. Most of the small children will, by the time they graduate from the scheme, have their own library of over 60 classic books. In 2023 a total of **257 free books were received by 24 young children**.

The Brighter Future Barrhead Programme has been delivered to tackle poverty and inequality in our most deprived communities through a coordinated partner and community-led approach. Barrhead Housing Association (BHA) has been the lead delivery and managing partner and 11 community partners have been involved including Dunterlie Food Share; Dunterlie Parent Support; Back to School Bank East Renfrewshire; and East Renfrewshire ASN Parent Action Group. The programme has included:

- 428 individual participants/ beneficiaries, 325 of whom are already evidencing improved life changes / quality of life because of the projects
- 43 Volunteers contributing 3,555 Volunteer hours
- 81 exercise classes
- 48 Arts & Crafts sessions
- 46 Food Waste Cooking workshops
- 45 digital engagement sessions
- 112 personal development sessions for children and young people
- 50 children with brand new school uniforms
- 43 Food Share sessions issuing 30 bags of food each week



During Winter 2023, BHA distributed **600 bags of food**, donated **£1,000 to Nelly Boxes Christmas Gift Appeal**, distributed **800 selection boxes** and organised a **Christmas party for 80 young people**.

Approach to tackling family poverty: 2024 - 2027

In order to address family poverty in East Renfrewshire over the next three years, we have 4 key areas of focus:

1. Improved understanding of the circumstances of families in, or at risk of, poverty

East Renfrewshire has the highest proportion of children in any local authority in Scotland and this is increasing. We are fortunate to have the lowest rate of child poverty in Scotland, with an estimated 3,247 children (after housing costs), or 2,591 (before housing costs).

Our commitment to children and young people is fundamental to everything we do in East Renfrewshire. With such a small number of children living in poverty, it is crucial that we are able to delve deeper and really understand the needs of these children and their families. We also need to be aware of households who are financially vulnerable and at risk of poverty, at the earliest opportunity in order to provide preventative and early intervention support, with a 'no wrong door' approach. The Council has committed additional funds in 2024/25 for development and implementation.

We aim to achieve this improved understanding by:

- Enhancing use of data to better understand more the profile of families in poverty, and those at risk of poverty
- Listening to the voices of families experiencing poverty and using these to shape services delivered
- Creating a more 'joined up approach' to ensure families receive coordinated support from all relevant services, with 'no wrong door'

2. Enhanced gains for families from income maximisation and social security

Households in East Renfrewshire are less likely to receive income through social security than other parts of Scotland. Only around two thirds are in receipt of child benefit and the percentage of children receiving Free School Meals and Education Maintenance Allowance is lower than other parts of Scotland. For some, this may be because household income makes them ineligible for support. However for others, this could be a lack of awareness and/or a need for support to apply. Estimates suggest that around one in four East Renfrewshire households eligible for Scottish Child Payment are not taking it up. We need to work to ensure all households are supported in a dignified way to receive their full entitlements and have their household income maximised, where they wish to do so.

We aim to achieve these enhanced gains by:

- Increasing poverty awareness of frontline staff working with families
- Increasing accessibility of money advice and rights support



3. Improved income from employment for parents

Employment alone does not prevent poverty. Almost three quarters of the children living in poverty in East Renfrewshire are in a household with at least one adult in employment. We need to focus not only on getting parents and carers into employment, but also supporting them to progress whilst in work. The Parental Employability Support programme will support both unemployed and in-work parents.

Median earnings for those living in our area are higher than average, however median earnings for those working here are lower than average. Therefore we need to consider the local availability of well-paid, family-friendly employment opportunities.

We also recognise the importance of transport and childcare as levers to employment. Whilst these are not specific to the area of child poverty, we will work to ensure these are influenced through a child poverty lens.

We aim to achieve this improved income by:

• Increasing into work support for unemployed parents and support to in-work parents to progress in the workplace

4. Reduced costs of living

The essential costs of living, including food and fuel, are increasing throughout the country. In East Renfrewshire, we recognise that our housing costs are particularly high. The average property price in East Renfrewshire is around £100,000 higher than the Scottish average; and the private rental price for a 4 bed property is around £500 higher per month. Our Council Tax levels are in line with the Scottish average, however around three out of four properties in East Renfrewshire are in bands D-H which is almost double the Scottish average.

While recognising that many of the costs of living for families are outwith our influence, we acknowledge areas for influence across the Community Planning Partnership including the cost of the school day, social housing and community food supports.

We aim to achieve this reduced cost of living by:

 Applying a child poverty and children's rights lens when developing strategies, policies and developing budget proposals which apply to children and families

The driver diagram on the following page provides an overview of this approach. Detailed action plans for each of these four areas, including how we will measure progress, can be found in Appendix 1. These have been informed by the profile of the area, details of which can be found in Appendix 2.



Population Outcome The Outcome we want is . . . All children in East Renfrewshire experience a stable and secure childhood and succeed **Critical Indicators**

Intermediate Outcome

We will know we are making good steps along the way when . .

Child poverty

is reduced

Our Contribution

So what we need to achieve is . . .

Improved understanding

of the circumstances of

families in, or at risk of,

poverty

Critical Activities

Ву . . .

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Enhancing use of data to better understand more the profile of families in poverty, and those at risk of poverty

Listening to the voices of families experiencing poverty and using these to shape services delivered

Creating a more 'joined up approach' to ensure families receive coordinated support from all relevant services

- Number of in-work parents in PES programme
- Percentage increased household income for in-work parents
- Number of PES parents receiving training and/or qualification
- Number of PES parents moving into employment or self-employment
- Number of parents with a disability in the household accessing employability support
- Number of PES parents supported into volunteering
- Number of MART and CAB clients from priority groups
- Financial gains for child related benefits
- Families accessing financial wellbeing advice
- Volume of debt being managed for households with children
- Number of Money Matters referrals from maternity services
- Percentage of schools who have undertaken a CoSD audit
- Percentage of families presenting as homeless or seeking housing options due to finances
- Percentage of families on housing waiting lists for financial reasons
- Percentage of social housing meeting Net Zero targets

Improved income from employment for parents Increasing into work support for unemployed parents and support to in-work parents to progress in the workplace e.g. through Parental Employability Programme

Enhanced gains for families from income maximisation and social security

Increasing poverty awareness of frontline staff working with families

Increasing accessibility of money advice and rights support

Reduced costs of living

Applying a child poverty and children's rights lens when developing strategies, policies and developing budget proposals which apply to children and families

Action Plans and Progress Measures: 2024 - 2027

Improved understanding of the circumstances of families in, or at risk of, poverty

	Action	Details	Partners
Short term 2024-25	Piloting the new data matching tool	Test with live data and iteration as required to ensure it is fit for purpose. Begin using the tool to inform MART service delivery (subject to funding)	ERC Money Advice and Rights Team, ERC Scottish Welfare Fund, ERC Data Team, ERC Strategic Services
• • •	Enriching and utilising the Cost of Living Dashboard	Enhance the number of banking records and local data within the dashboard to create richer data set. Use the dashboard to inform ongoing interventions to reach new households	ERC Strategic Services Team; ERC Project Management Team; Smart Data Foundry
Medium term	Expanding the data matching tool	Build on the pilot, consider what additional service data should be included to provide an enhanced profile of customers. Work with the Improvement Service to explore options around sharing personal data as part of the SAVVI project (subject to funding)	ERC Money Advice and Rights Team; ERC service managers; ERC Data Team; ERC Strategic Services; Improvement Service
	Listening to the voices of families in poverty	Gather lived experience feedback from parents and carers, and use this to inform how services are delivered	Local Employability Partnership Lived Experience Group; NHSGGC; Family First

How we will measure progress:

- Qualitative feedback on development of data matching tool
- Qualitative feedback on use of data to inform interventions and/or service delivery
- Qualitative feedback on how lived experience shapes interventions and/or service delivery

Improved income from employment for parents

	Action	Details	Partners
Short term 2024-25	Focus on in-work parents on low income and maximising income	Increase outreach & support to in-work parents to extend the reach of employability services Continuation of workforce employability activity to ensure both NHS GGC and ERC offer well-paid, family-friendly employment opportunities	Work EastRen PES Team; MART; Child Poverty Oversight; Local Employability Partnership (LEP); Lived Experience Panel (Employability); Local Employers; Business Gateway (BG); Economic Development (ED); Third Sector Partners; NHS GGC; ERC HR
• • •	Funded work placements in Early Years and Education	Provide funded placements within ERC for parents to allow the opportunity to earn and learn in a secure environment, and with a view to longer-term sustained employment	Work EastRen PES Team; MART; Education & Early Learning Centres & Partnership (Operational & Strategic) (LEP)
•	Employment Recruitment Incentives aimed at low income parents	Reduce any potential barriers faced by local businesses to recruit more parents	Work EastRen PES Team; MART; Third Sector; Economic Development, Business Gateway, Partnership (Operational & Strategic) (LEP East Renfrewshire Chamber of Commerce & 3 Business Improvement Districts
	Advocating Real Living Wage to local employers through Fair Work First Framework	Through grant funding including Employment Recruitment Incentives	Work EastRen PES Team; MART; Third Sector; Economic Development Partnership (Operational & Strategic) (LEP, Business Gateway
Medium term	Establishing community hub pilots for parents offering holistic support which meets local needs and is accessible	Working in partnership with agencies to provide regular drop in sessions aimed at parents through schools, nurseries or other key agencies across East Renfrewshire (subject to funding)	Work EastRen PES Team; Money Advice & Rights; Child Poverty Partnership; Partnership (Operational & Strategic) (LEP; Third Sector Partners; Education & Early Learning Centres

	Action	Details	Partners
Medium term	Addressing health / disability as a barrier to employment	Deliver specialised employability provision to parents with disabilities and/or health conditions with a focus on supported employment NHS Greater Glasgow and Clyde will develop a plan focussed on children with a disability	Work EastRen PES Team; Money Advice & Rights; Child Poverty Partnership; Partnership (Operational & Strategic) (LEP; Third Sector Partners; NHS GGC

How we will measure progress:

Indicator	Data source	Baseline 2023/24	Target
Number of in-work parents engaging with PES programme	Advice Pro – Work East Ren MIS	38	50
Percentage increased household income for in-work parents	Advice Pro – Work East Ren MIS	20% increased household income	35% increased household income
Number of PES parents receiving training and/or qualification	Advice Pro – Work East Ren MIS	18	25
Number of PES parents moving into employment or self-employment	Advice Pro – Work East Ren MIS	41	41
Number of parents with a disability in the household accessing employability support	Advice Pro – Work East Ren MIS	8	20
Number of PES parents supported into volunteering	Advice Pro – Work East Ren MIS	24	30

	Action	Details	Partners
Short term 2024-25	Maintaining existing referral sources	Continued outreach work, MART workers embedded in schools and ongoing links with services including HSCP, Carers Centre, Work EastRen, health visitors and maternity services (including specialised services such as Blossom)	Money Advice and Rights Team (MART), ER Citizens Advice Bureau (CAB), NHSGGC
	Establishing awareness of services and poverty among new groups of potential referral sources	Deliver combined poverty awareness / 'know our service' training across ERC services and partner organisations	Money Advice and Rights Team (MART), ER Citizens Advice Bureau (CAB), Work East Ren
	Making the public aware of potential entitlement	Develop a communications plan aimed at both partners and public to raise awareness of entitlement. This will include a schedule of video and social media promotions.	Money Advice and Rights Team (MART), ER Citizens Advice Bureau (CAB), Communications Team
Medium term	Using data matching tool to identify and anticipate areas of need	Targeting resources, including outreach and marketing, based on data findings	Money Advice and Rights Team (MART), ER Citizens Advice Bureau (CAB), Communications Team

How we will measure progress:

Indicato		Data source	Baseline 2023/24	Target
Number (of MART and CAB clients from priority groups	MART and CAB databases	MART: 2,599 CAB: 2,863	Aim to increase
Total fina	ncial gains for child related benefits	MART and CAB databases	MART: £908,269 CAB: £1,117,286	Aim to increase
Number	of families accessing financial wellbeing advice	MART database	MART: 1,728	Aim to increase
Total volu	me of debt being managed for households with children	MART and CAB databases	MART: £908,269 CAB: £1,710,079	Aim to increase
Number (of referrals to Money Matters from maternity services	Number of pregnant women referred to Money Matters; NHSGGC database	5	Aim to increase

Reduced costs of living

	Action	Details	Partners
Short term 2024-25	Delivering Thrive Under 5 programme	Tackle food insecurity amongst 0 – 5-year-olds by helping families maximise their income and provide practical approaches to support healthy weight in the early years	HSCP, Voluntary Action East Ren, ER Culture and Leisure Trust, NHSGGC
• • • •	Enhancing approach to Cost of the School Day	Work with Head Teachers to ensure a rigorous approach to Cost of the School Day	ERC Education Department
• •	Improving understanding of needs of families in social housing	Speaking to tenants to better understand any financial barriers they face around housing	ERC Housing Team, Barrhead Housing Association
Medium term	Increasing poverty awareness training to school staff	Deliver anti-poverty training to staff from early years, primary and secondary school with a focus on increasing awareness of 'hidden poverty' and empower education staff to signpost and refer families to support services	ERC Education Department, MART, CAB, ERC Strategic Services
•	Reducing the number of children who have significantly low attendance or reduced timetables	Adopt a multi-agency approach to supporting children and young people not attending school through working with schools and partners to support inclusive environments and practice in all settings and schools	ERC Education Department, HSCP, Children1st and CLD
	Addressing the housing and accommodation needs based on lived experience feedback	Build upon understanding of financial barriers faced by tenants, consider systematic change to address these and ensure social housing provision across the authority is fit for purpose in terms of affordability and the reduction of fuel poverty	ERC Housing Team, Barrhead Housing Association

How we will measure progress:

Indicator	Data source	Baseline 2023/24	Target
Percentage of schools who have undertaken a CoSD audit	ERC Education records	56%	Aim to increase
Percentage of families presenting as homeless or seeking housing options due to financial reasons	ERC Housing homelessness and housing options data – ERC	Not yet available – establish 2024/25	Aim to decrease
Percentage of families on housing waiting lists citing financial reasons	Housing waiting lists – ERC and BHA	Not yet available – establish 2024/25	Aim to decrease
Percentage of social housing properties meeting the Social Housing Net Zero target	Implementation date yet to be set, following consultation process	Not yet available -	Aim to increase

Conclusion

We recognise the need to look to the long term for reductions in rates of child poverty. The actions described in this report all culminate in long-term, sector-wide shifts to join up services, think carefully about the drivers of poverty and aim to ensure everything we deliver is underpinned by poverty considerations.

The efforts made in addressing child poverty over the past year are positive and reflect East Renfrewshire's collective commitment to creating a better future for all children. However, it's evident that to truly make a lasting impact, we must refine our approach to be more targeted and responsive to the diverse needs of families.

Moving forward, it's imperative that we prioritise our interventions, ensuring that resources reach the families who need them most, at the right time. We need to base our efforts around evidence of what works, taking into account the lived experience of families affected.

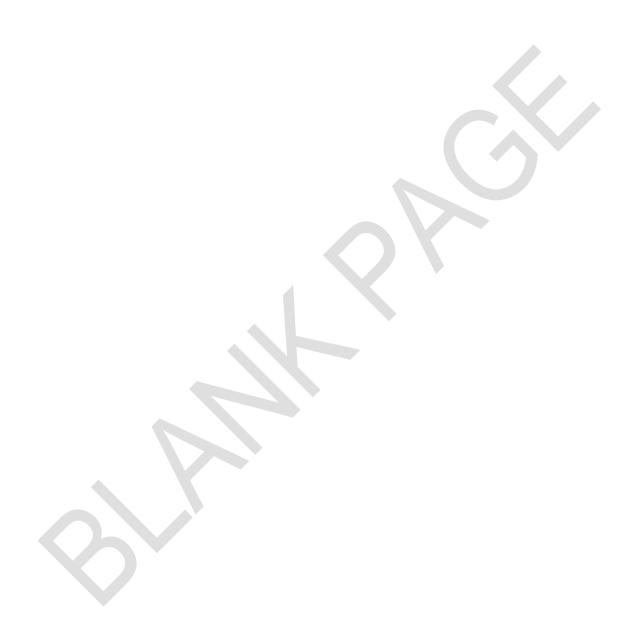
This demands a nuanced understanding of the multifaceted factors contributing to child and family poverty and a tailored response that addresses these factors comprehensively. By adopting a more targeted approach, we can better allocate resources, strengthen support systems, and empower families to break the cycle of poverty.

We have committed one-off funding to support us to both tackle poverty and to mitigate the impacts of it. To tackle poverty, we will invest in our approach to data; to identify families in need and provide coordinated support. To mitigate the impacts, we will invest in early years interventions to support readiness to learn.

Ultimately, our goal is not just to alleviate child poverty, but to eradicate it entirely. By staying focused, adaptive, and responsive to the evolving needs of families, we can work towards a future where every child has the opportunity to thrive, regardless of their circumstances.







AGENDA ITEM No. 7







Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board			
Held on	25 September 2024			
Agenda Item	7			
Title	Chief Social Work Officer's Annual Report 2023/24			
Summary This report provides an overview of the professional activity for social work within East Renfrewshire for 2023/24 through the delivery of the statutory functions and responsibilities held by the Chief Social Work Officer.				
Presented by	Raymond Prior, Head of Children's Services and Justice (Chief Social Worker Officer)			
Action Required The Integration Joint Board is asked is asked to consider the contents of the report and approve its submission to Council.				
approve its submission to Counc	•			

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

25 September 2024

Report by Chief Social Work Officer

Chief Social Work Officer's Annual Report 2023/24

PURPOSE OF REPORT

1. This report presents to members the Chief Social Work Officer's Annual Report for 2023/24. The report is attached at Appendix 1.

RECOMMENDATIONS

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

BACKGROUND

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

CONSULTATION AND PARTNERSHIP WORKING

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

IMPLICATIONS OF THE PROPOSALS

Finance

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

CONCLUSIONS

- 8. This report provides an overview of the professional activity for social work and social care within East Renfrewshire for 2023/24 through the delivery of the statutory functions and responsibilities held by the Chief Social Work Officer.
- 9. The report highlights the high standard of work undertaken across the reporting period but recognises there continues to be a number of significant challenges and risks facing social work and social care within East Renfrewshire, financial instability and uncertainty being core pressures. We are unable to meet these challenges without the continued commitment and dedication of our social work and social care staff.
- 10. The experience of many in our communities continues to be challenging with added complications and pressures. This has involved responding to higher demands for support and increased complexity in continued unpredictable times.
- 11. At the heart of the social work profession lies a commitment to enabling and supporting vulnerable individuals to make positive, sustainable changes to their lives to achieve the best outcomes for them, their families and communities as a whole.

RECOMMENDATIONS

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

REPORT AUTHOR

Raymond Prior, Chief Social Work Officer Head of Children's Services and Justice raymond.prior@eastrenfrewshire.gov.uk 0141 451 0748

Chief Officer, IJB: Julie Murray

6 September 2024

BACKGROUND PAPERS

Chief Social Work Officer Annual Report 2022-23 https://eastrenfrewshire.gov.uk/media/9530/IJB-Item-10-27-September-2023/pdf/IJB-Item-10-27-September-2023.pdf?m=1694776722760

Chief Social Work Officer Annual Report 2021-22 https://www.eastrenfrewshire.gov.uk/media/8187/IJB-ltem-08-21-September-2022/pdf/IJB_ltem_08_-21_September_2022.pdf?m=637987721807770000







EAST RENFREWSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP

CHIEF SOCIAL WORK OFFICER'S ANNUAL REPORT

1 April 2023 - 31 March 2024



Contents

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Introduction – Reflection on the Past Year

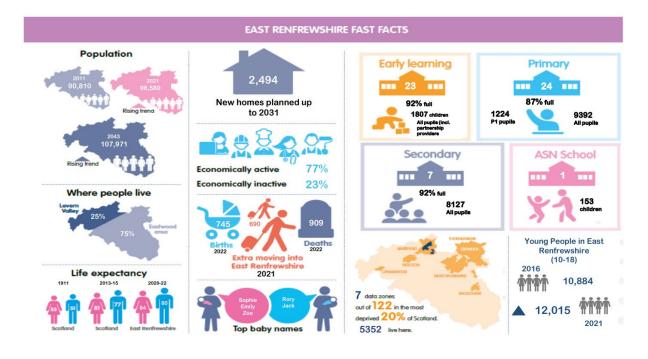
The role of social work professionals is to support, care for and protect children and adults across the whole of the life course and to enhance wellbeing and improve their outcomes. Our staff crucially assess, respond to and manage risk and play a key role in managing public protection.

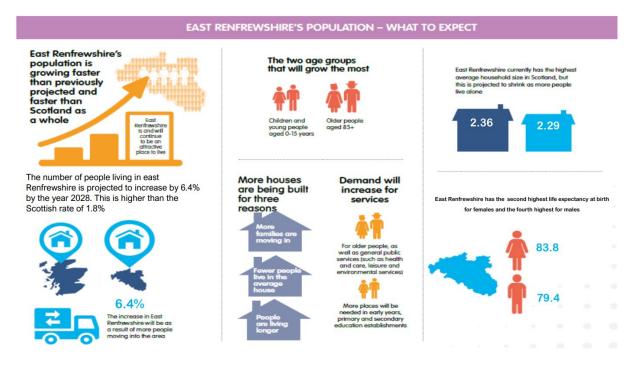
Our workforce in East Renfrewshire continue to support our residents and we are fortunate to have staff that are stable, passionate and committed. It is important however, to consider the context in which services operate. We are both nationally and locally living in difficult times. The stress and strain of the Covid-19 pandemic is still evident in individuals and communities as is the ongoing cost of living crisis. Public services such as local authorities and Health and Social Care Partnerships face increased demand and complexity with reduced resource and finances.

East Renfrewshire's Health and Social Care Partnership has faced the most difficult year since its inception. Our financial situation and requirement to make substantial savings led to a voluntary redundancy scheme. Many posts and roles have been removed from our structure. Another significant first was the introduction of the Supporting People Framework to assess need. In April 2023 only those with moderate, substantial or critical need would receive support. Given the depth of savings required, by November 2023 this was changed to only substantial or critical need would be met. I offer these examples to provide an understanding of the climate and pressure our workforce operates in.

As Chief Social Work Officer I am immensely proud of our staff and I hope this report provides a helpful insight into their work over the past year. We are committed to continue to provide the best service we can to our residents and to do so with trust, kindness, compassion and understanding.

East Renfrewshire Population Facts





Section 1: Governance, Accountability and Statutory Functions

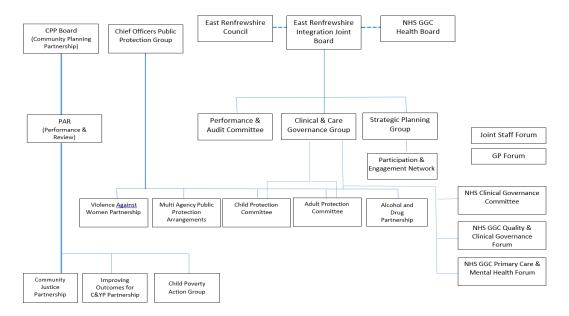
East Renfrewshire Health and Social Care Partnership (HSCP) was established in 2015 under the direction of East Renfrewshire's Integration Joint Board (IJB) and it has built on the Community Health and Care Partnership (CHCP), which NHS Greater Glasgow and Clyde and East Renfrewshire Council established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

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

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

This Chief Social Work Officer report reflects the ninth year of the move to a Health and Social Care Partnership and whilst it outlines the key statutory social work functions, it also explains how they are delivered within the spirit of the Public Bodies (Joint Working) (Scotland) Act 2014 legislation. The Chief Social Work Officer provides the Health and Social Care Partnership and East Renfrewshire Council with professional advice, leadership and oversight of all social work and social care functions. The Chief Social Work Officer is responsible for the scrutiny and quality assurance of all public protection services in East Renfrewshire and reports to the Chief Executive for East Renfrewshire Council in his role. East Renfrewshire Council's Chief Executive chairs the Chief Officer Public Protection Group. The group meets twice a year and the Chief Social Work Officer acts as their professional advisor.

The chart below shows the governance, relationships and links with partners.



Our Strategic Vision and Priorities



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

Strategic Planning and Commissioning

Our strategic plan is the third iteration since our initial plan in 2015. The plan was developed in consultation with stakeholders and East Renfrewshire residents, despite the continuing challenges we faced from the pandemic. This included a highly participative engagement process coproduced with wider partners through our Participation and Engagement Network and a comprehensive strategic needs assessment. The consultation found that people were supportive of our strategic priorities and the key areas of focus set out in the plan. Many people emphasised the crucial importance of partnership and collaborative working and there was a focus on ensuring the necessary support is in place for our staff and for local unpaid carers.

Our headline planning priorities build on those set out in our previous strategic plans. We extended our priority for mental health to include mental health and wellbeing across our communities. We changed the emphasis of our priorities relating to health inequalities and primary and community-based healthcare and we introduced a new strategic priority focusing on the crucial role of the workforce across the partnership. For the 2022-25 plan, we also added a distinct priority focusing on protecting people from harm, reflecting the cross-cutting and multi-agency nature of this activity.

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

Annual Performance Report

Our <u>Annual Performance Report 2023-24</u> has given us an opportunity to demonstrate how we have delivered on our vision and commitments over 2023/24. It provides information about the progress we are making towards delivering our strategic

priorities and achieving the national outcomes for children, the national health and wellbeing outcomes and criminal justice outcomes.

Clinical and Care Governance Group

The Clinical and Care Governance Group focuses on governance, risk management, continuous improvement, inspection activity, learning, service and workforce development, service user feedback and complaints. It continues to provide regular scrutiny on the areas requiring development and improvement to the Integration Joint Board.

Section 2: Service Quality and Performance

2.1 Children's Services

Early Identification and Intervention

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

From 1 April 2023 to 31 March 2024, the Request for Assistance team completed a total of 2,560 enquiries, a 47% increase from the previous year and 351 initial assessments, a decrease of 21% than previously. Of these 351 initial assessments, 24% required targeted intervention, highlighting ongoing and increased complexities evident in our communities post pandemic.

Children 1st Family Group Decision Making

The Children 1st Family Group Decision Making (FGDM) service is based alongside our Request for Assistance team in an effort to increase and improve families' access to early help and reduce unnecessary social work involvement. The FGDM Coordinator supports families' to formulate their own plan to improve family functioning negating the need for more formal supports.

There was a total of 57 families supported by the Family Group Decision Making Service during this reporting period. Twenty families were already being supported by the team moving into this period, 37 new families were introduced, and 35 families moved on.

Children and Young People's Mental and Emotional Wellbeing

East Renfrewshire has recognised the extent of mental health concerns among the children and young people's population. In response to this a multi-stakeholder Healthier Minds Service aligned to school communities, continues to identify and ensure delivery of mental wellbeing support to promote children and families' recovery. This Healthier Minds service works alongside our existing Children 1st Family Wellbeing Service to support children and families in need. With reduced resource in this reporting period, Children 1st Family Wellbeing Service received 121 referrals with 75% of families showing improvement.

Healthier Minds Team

The Healthier Minds service is East Renfrewshire's framework for supporting and nurturing the mental health and wellbeing of children, young people and families. It is also a resource for staff across the children services partnership.

The Healthier Minds hub has representatives from Child and Adolescent Mental Health Services (CAMHS), Social Work, Recovery Across Mental Health (RAMH), Youth Counselling, Educational Psychology, Community Learning & Development and the

Children 1st Family Wellbeing Service. Hub members meet weekly to consider referrals and the needs of the child or young person to determine the route for provision of the optimal support.

The three key elements of the service are:

- 1. Strategic mapping and support to maximise school community capacity to be trauma responsive.
- 2. Provision of direct services to children and families to build on strengths.
- 3. Emotional and mental wellbeing and strengthening of the existing school counselling model.

Within this reporting period 385 children & young people have been referred to the Healthier Mind service, with 21% diagnosed with Autistic Spectrum Condition (ASC) / Attention Deficit Hyperactivity Disorder (ADHD) at point of referral (with a further proportion who are awaiting diagnosis or displaying neuro-divergent traits).

In this reporting period we have also seen:

- Increased level of distress reflected in the main reasons for referral: Anxiety / stress, suicidal ideation, emotional regulation & trauma (top four reasons for referral).
- Significant proportion of referrals are higher that Tier 2 in complexity and need.
- 97% of children and young people supported by Healthier Minds Team report improved mental and emotional wellbeing.
- All parents who completed the post support evaluation noted they would recommend the service to others.
- 15 sessions were delivered with 164 multi-disciplinary staff exploring topics such as Emotional Based School Absence; Supporting Boys with their Emotional Wellbeing; Supporting Self-Harm; Social Media and Emotional Wellbeing; Relational Practice; Neurodiversity, Masking and Emotional Wellbeing.
- A cohort of eighteen staff across Education and Health and Social Care Partnership completed the Cross Reach Counselling skills course to support their work with children and young people.

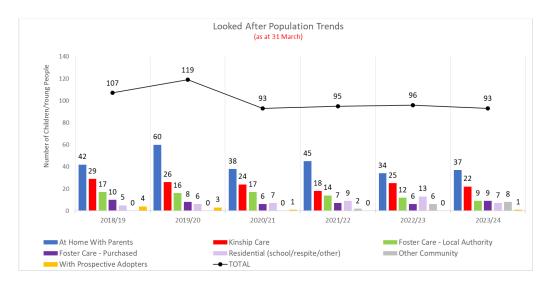
<u>East Renfrewshire's Looked after Children and Young People's Population - A Profile of our Children</u>

On 31 March 2024, 93 children and young people in East Renfrewshire were looked after in a range of settings. This constitutes approximately 0.4% of the total children's population of the area and remains one of the smallest proportions in Scotland. This aligns with our continued commitment to The Promise and keeping families together

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wherever we can. The gender balance has been consistent in recent years with 58% boys and 42% girls. The number of children looked after away from home has decreased. This decrease has been maintained in spite of the challenges posed by our commitment to the National Transfer Scheme and support offered to unaccompanied asylum seeking children. It should also be noted that East Renfrewshire has not placed a child in secure care in this period or for the preceding eight years.

In this year, the average amount of time children were looked after at home increased from seventeen months in 2018/19 to nineteen months in 2023/24.



Intensive Family Support Team

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

Between April 2023 and March 2024, 45 children received support from the Intensive Family Support Service. The majority of children supported (46%) were in 0-4 age group. The team provide a high level of support to families across seven days with an ethos of upholding the aims of The Promise to keep families together wherever possible and provide the right support at the right time for as long as families need it.

The creation of a health visitor post in our Intensive Family Support team has afforded the opportunity to provide health advice, support and guidance to families we work with when they need it and as often as they need it covering topics such as home safety, sleep routines, nutrition, bonding and attachment. It allows a health visiting service to parents, who would ordinarily not have benefited from this. This includes mothers, whose babies are not in their care, but who have lots of supervised time with their children. The health support ensures parents are given the advice they need from an experienced health professional. This means we can strive to keep families

together where it is safe to do so, recognising the importance of getting it right in the critical early stages of life.

Health visiting advice and guidance has also been given to fathers who do not have full-time care of their children, but are actively involved and want to be the best parent they can be. The impact of the health visitor being integrated into the intensive family support team is hugely beneficial and welcomed by parents.

Youth Intensive Support Service

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

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

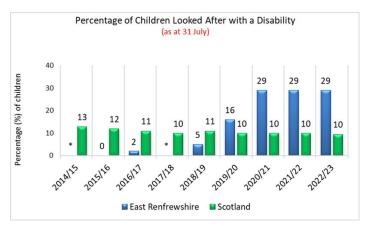
- To reduce the number of young people looked after and accommodated and at risk of hospitalisation and custody.
- To reduce the impact of historical trauma and abuse for young people.
- To ensure that the transition into adulthood achieves better long term outcomes.

In 2023/24 a total of 156 young people received support from Youth Intensive Support Service and the most common age group was fourteen to twenty. 62.2% of young people were male however, this gender split is affected by the National Transfer Scheme's unaccompanied asylum seeking children arrivals who have been exclusively male. In the reporting period 32% of children and young people supported by the Youth Intensive Support Service are currently looked after and 13% also received additional commissioned support reflecting complexity of presentation and need for holistic wrap around support.

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Children with Disabilities

Of note is that 29% of looked after children in East Renfrewshire have a known disability. East Renfrewshire has fully adopted the principles of self-directed support in partnership with children, their families and other people who are important to them.



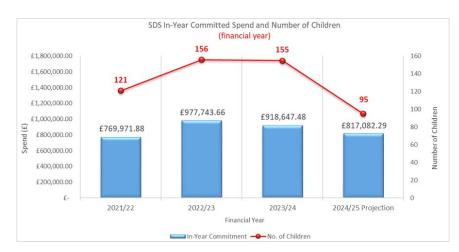
Note: * represents numbers that are supressed to maintain confidentiality **Source:** Children's Social Work Statistics, Scottish Government

With the introduction of our Supporting People Framework all our assessments are discussed and agreed by a multi-agency consultation group. This ensures that families and the child's plan are fully considered and support is targeted to the right families. We continue to manage a high level of children with complex needs that require to be looked after away from home. This population increased during the years of Covid19 and have not returned to post pandemic numbers. One factor which has contributed to this trend significantly are the reduced options and resources for suitable respite support in the area.

In 2023/24 and in line with the implementation of the Health and Social Care Partnership's Supporting People Framework, community children's services focused on transforming and redesigning how we review, assess and plan for children with a disability. This included joint work between adult and children's services focusing on preparing and assessing for young people's transition. The work focused on ensuring that children's plans and any decision in relation to budgets were outcomes led which offered parity and flexibility for those in receipt of self-directed support budgets. The team worked closely with partners and other agencies across the Health and Social Care Partnership to fully embed our Supporting People Framework within children's services.

In the reporting period we undertook reviews for all children's plans where families are in receipt of a self-directed support payment. We recognised that there has been an increase in the use of both self-directed support and the request for support from children and families social work services during the recovery from the Covid19 pandemic. In order to support this increasing demand and offer families the best possible service delivery we have realigned some of our social work supports to ensure fair, equitable provision for all our children and their families. This includes a newly developed service based within community children services who will help support future reviews of self-directed support packages and children's individual plans. We will do this in partnership with carers, multi-agency partners and most importantly the child.

The number of children in receipt of an individual budget has decreased by 31% after applying the Supporting People Framework. All children with a support package were reviewed in 2023/24 under this new approach. The service still faces substantial pressure and it is anticipated that this will continue be an area of significant demand over the years. We continue to work closely with the transition service and adults teams to support with transition planning given the more complex needs presenting. This includes early mapping with education colleagues, timely reviews and transition support from age 14.



Champions Board, Group Work and Participation

We continue to support our Champions Board group, Mini Champs and wider participation groups within East Renfrewshire to ensure that relationships and the voice of children is at the heart of what we do. There is engagement with children, young people, families and communities, with the following successes:

- Young People have attended both the Scottish Throughcare and Aftercare Forum, (STAF) conference and STAF summit, ensuring their contribution to national discussions around implementation of The Promise.
- The East Renfrewshire Champions Board met with The Promise Scotland as part of the 100 Days of Listening phase of the 'Moving On' Change Programme. Young people were able to share their experience, views and insights around moving on from care.
- Our young people, in partnership with Articulate Cultural Trust, were involved in designing, creating and launching a gable end mural on Strathclyde University to represent and raise awareness of Care Experience.
- As part of a wider summer participation programme, young people engaged in 'Track', a project where they created music and artwork as a way of exploring their identity and expressing their views.
- A relaunch of East Renfrewshire Champions Board took place for new Elected Members, Corporate Parents and Young People. Young Champions

delivered a presentation around the importance of relationships, being listened to and the success of co-production in East Renfrewshire.

- The Champions Board, Mini Champs, Parents and Carers came together to create a short film to share their views on involvement in the Children's Hearing System. This work, in collaboration with CELCIS will be used as a training resource and to inform practice.
- Young people have worked alongside the Scottish Youth Film Foundation to create a film sharing their experiences of being a young person in their local community, exploring issues of stigma, prejudice and identity. This will be used as part of a wider awareness raising campaign as part of East Renfrewshire's implementation of The Promise.
- Children and Young People celebrated their care experience through attending Who Cares? Scotland events such as Time to Shine and the Love Rally alongside their Corporate Parents. During Care Experience Week, a movie night was held at the local theatre for Children, Young People and their families and carers. Elected Members and Corporate Parents joined in on the celebrations for Care Experience Week.
- The Champions Board worked alongside Aberlour Child Care Trust to share their experiences of transitioning to independent living. Members of the Champions Board sat on the "A Good Childhood Board" with Social Work, Aberlour, and Housing to provide feedback on their involvement and guide the progress of the joint Housing / Health and Social Care Partnership care experienced young person housing protocol.
- The Mini Champs has continued to meet fortnightly to support care identity in a fun, nurturing way.
- Our Aftercare group continues to meet on a monthly basis, offering support, peer interaction and a sense of belonging.

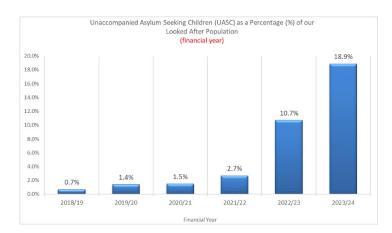
Unaccompanied Asylum Seeking Children

The Youth Intensive Support Service is the main support service for these unaccompanied children in East Renfrewshire. A total of thirty Unaccompanied Asylum Seeking Children (UASC) have been accommodated in East Renfrewshire since the start of the National Transfer Scheme in November 2021.



Note: Chart includes data up to 10/07/2024.

Since the implementation of the mandated National Transfer Scheme in November 2021 the proportion of Unaccompanied Asylum Seeking Children in our looked after population in East Renfrewshire has risen significantly and is predicted to continue to increase. As young people get older this change is reflected in our aftercare population, currently 9.2% of our aftercare population are unaccompanied asylum seeking children. This group of young people can present with particular and prevalent trauma experiences and are often isolated. Our staff require skilled, compassionate and empathic approaches in supporting this group. The ethnic background of our separated children comprises 11% Afghanis, 6% Albanian, 26% Iranian, 23% Sudanese, 20% Syrian and 14% Vietnamese.



Fostering, Adoption and Supported Care

The Fostering, Adoption and Supported Care Team have continued to provide support, guidance and training to all our carers, ensuring that our fostering families provide safe and stable care which meets the needs of children and young people who require to be cared for away from home.

Fostering

Our fostering households have remained consistent with fourteen approved households offering children and young people emergency, short breaks, interim and permanent foster care. We have continued to focus on recruitment of foster carers after our last campaign's success. To build upon our success we will undertake more targeted recruitment opportunities related to different fostering approvals, highlighting the need for short break fostering to support children in their families' care.

Continuing Care

In 2023/24, our foster carers provided adult placements to young people ceasing to be looked after, which has allowed them to maintain their relationships and have ongoing consistency and support from their carers. Our carers have shown true commitment to supporting our young people into adulthood and in providing this consistency of support and care is helping to improve outcomes for our young people.

Supported Care

In 2023/24, we have foster carers who also have approval to provide supported care. Our supported care service is an adult placement service that can provide short breaks or interim placements for young people up to their 26th birthday. This remains an important service to our young adults who have been previously looked after and who are receiving aftercare support from children's services.

<u>Adoption</u>

We have continued to offer our quarterly support group to adopters, any adoptive parents residing within East Renfrewshire or those that have been matched with East Renfrewshire children. These allow parents to meet up, provide support to each other and hear from guest speakers or have focused input.

Our work with Siblings

The team has been committed to keeping children connected with their siblings who are living apart through adoption or fostering. We have developed our family connection service through establishing and supporting both birth families and adoptive families by writing letters, arranging and supporting in person meet ups between brothers and sisters.

The team recognise the importance of developing and supporting relationships between adoptees, adoptive families and birth families. Letters can play an integral role in helping children to develop their sense of identity, understand their multiple family membership and can help children create a coherent understanding of life history. The team are skilled in providing support, time, and guidance to all family members in creating connections.

We are proud of supporting reunification of siblings who have been separated through adoption; this has been a heartfelt experience for our team and the families we support. Through developing these relationships with adoptive and birth families, we have supported post-adoption links progressing from letters to meeting in person. We have had positive feedback from adoptive and birth families for the support we have provided to them.

We have continued to receive enquiries from prospective adopters and the team are undertaking adoption preparation groups, to progress with these enquiries.

Inclusive Support Service

The Inclusive Support Service is comprised of holiday provision during spring, summer and October school holidays and out of school activity clubs. The service provides a range of targeted support for children and young people aged 5 – 18 years. All of the children and young people who access the service have either complex health or behavioural support needs with a significant number having limited verbal communication.

During 2023/24 East Renfrewshire Inclusive Support Team in consultation with Social Work and partners in Education and Health worked to provide targeted support for our

most vulnerable children and young people. The team organised and delivered targeted support at spring, summer and October holiday provision for over 65 children and young people with complex support needs. Parent feedback highlights holiday provision continues to provide essential respite for families and offers social opportunities for children.

Staff from within Inclusive Support have been crucial to the delivery of aspects of individualised care plans for some highly complex young people and this is an area of need we continue to build on. Our staff continue to provide the nurturing care and support rated as excellent by The Care Inspectorate.

We currently have 238 children registered with the service, and in 2023/24 we have supported young people to engage in a variety of out of school activities such as football, drama, forest school outdoor club, beauty club and cooking. Clubs support young people to learn, and practice life skills and socialise with peers fostering friendships as well as have fun. Activities are provided over three evenings a week and Saturdays. This work is carried out in conjunction with both SupERkids a parent led charity and East Renfrewshire Culture and Leisure Trust.

Children and Young People's Rights

During 2023/24 we have been preparing for the United Nations Convention on the Rights of the Child (Incorporation) Scotland Act 2024; specifically to promote its passing by the Scottish Parliament and what impact it will have on children and families services within East Renfrewshire. During the last year the priority has been to ensure the Health and Social Care Partnership participates in the Council's review of the existing formal complaints process to ensure that child friendly procedures compliant with United Nations Convention on the Rights of the Child (UNCRC) are in place and that these are now promoted by staff locally. In addition staff have engaged with the national statutory guidance consultation and taken feedback from young people in relation to the proposed contents. Implementation of the Act's duties already cuts across our Children's Plan delivery, The Promise and GIRFEC (Getting it Right for Every Child) implementation, and our engagement with our local partners. However we await the statutory guidance to help our mapping and will engage children and young people in this activity.

The Promise Ten Year Plan, Corporate Parenting, and Whole Family Wellbeing Delivery.

We are now over four years into the Promise's ten year plan with the 2021 – 2024 phase now complete and the new national Promise Plan for 2024-2030 published in June 2024. Chair of The Promise, Fiona Duncan, wrote to local authorities and Health and Social Care Partnerships during 2023 requesting a progress update on implementation, as well as plans going forward over the next period. East Renfrewshire responded to this request providing a comprehensive report on our position.

In order to ensure we meet our obligations as outlined in The Promise we recognise the importance of involving those with lived experience in creating services that meet the needs of families and their children. These proposals devised and negotiated over 2023/24 will take shape over the coming year and progress with Promise implementation will be reported to Council and Integration Joint Board through the Children's Plan annual review process.

To support the delivery of the Promise we have used our Scottish Government Whole Family Wellbeing Grant to enhance universal early response services as well as those with a more targeted focus, this is in line with our original analysis of the needs of families that was undertaken in 2022/23. Over 100 additional families received enhanced support in 2023/24 as a consequence of the funding specifically:

- families with babies and toddlers at risk of being received into care,
- children and young people with significant needs around neuro diversity,
- minority ethnic families,
- children and young people with complex disability,
- women and children experiencing domestic violence.

<u>Tackling Loneliness Together Project – Enhanced support to minority ethnic families</u>

To decrease loneliness among minority ethnic families, Family First, our universal child and family service within the Health and Social Care Partnership, has been working in partnership with communities to create a peer support and parent-led network. Since this new approach has been established numbers accessing the service have significantly increased seeking support for a wide range of issues including housing, money advice, domestic violence, employability, and parenting support. In 2023/24 referrals from minority ethnic families were just under a third of all referrals in comparison to previous years, this is over a 25% increase. In addition isolation and loneliness are high among the different communities often due to language and cultural barriers and this impacts parental mental wellbeing and how families can support their children.

The model is now fully embedded and will continue long term in order that all communities can feel confident in asking for help.

Children's Services Planning

The East Renfrewshire Children's Services Plan 2023-2024 entered its first year of delivery. The local partnership group the Improving Outcomes for Children and Young People Partnership has worked together to implement across the agreed priorities that were agreed by Council and Integration Joint Board. The partnership continues to be effective, strong and responsive to seeking solutions to complex areas within the children and young people's policy landscape. Developments on progress with full implementation of the plan are due to be reported locally and nationally.

2.2 Adult Social Work and Social Care

Assessment and Review Activity

The Supporting People Framework, introduced in April 2023, implemented a universal approach to classifying risk, introducing criteria based upon research and practice that informs our decision making. The framework is a tool to support practice and inform professional judgment, making our decision more justifiable and fairer.

Across Scotland all Health and Social Care Partnerships are experiencing unprecedented financial pressures. In East Renfrewshire we must make significant savings in order to continue providing essential services to our community. In order to achieve these savings we have prioritised social care resources to ensure that we support the people with the most significant needs and that we meet our legal duties in managing risk and harm.

The Supporting People Framework initially set out that social care will be provided when needs and risks are assessed to be in the moderate to critical category. In November 2023 this was refined to substantial and critical need only. A new assessment template was developed based on the strengths and assets based approach of the Supporting People Framework.

Information was shared with the wider community through a public website and in person information sessions. Self-assessment options were explored to strengthen this offer to the community. Alternative approaches involving signposting to Voluntary Action East Renfrewshire and Talking Points network were identified as a more effective delivery method.

In order to implement the Supporting People Framework fairly, a programme of reviews of existing packages of support was commenced. Resources were targeted to identify and prioritise reviews.

To support workers and managers during the assessment and review process, we introduced the Peer Professional Review Group (PPRG). The Peer Professional Review Group is a space for the professional's carrying out an assessment to explore further options, deliberate over complexities, areas of risk management using the skills, expertise and knowledge of their partners. Discussions at the Peer Professional Review Group draw on a range of experience and expertise of the panel to help develop or re-shape care and support plans, taking an asset and strengths-based approach to identifying supports.

Care Home Assurance

We have continued to undertake annual care home assurance visits which further enhanced good working relationships with the care home providers and the partnership.

Our Care Home and Provider Services liaison meetings have facilitated a responsive approach to our partners commissioned to deliver care and support to individuals in our care homes and the community.

Initial Contact Team

The Initial Contact Team was launched in May 2019, as the single point of access for all new queries and referrals related to Adult Health and Social Care. The team was set up to respond to the growing demand and complexity of health and social care support needs across East Renfrewshire, and follows a "right person, right support, right time" delivery model.

The year 2023/24 has continued to see huge demand pressures upon the service, with particular challenges being the increase in duty referrals through the winter period, the increase in demand for equipment and adaptations, and the implementation of the Supporting People Framework.

Learning Disability Community Team

Transitions

The transition team provides support, advice and guidance to our young people with additional supports who are transitioning to adult services. The team meet with education colleagues and families to ensure that the young person has the appropriate supports in place whist they are transitioning from children services to adult services.

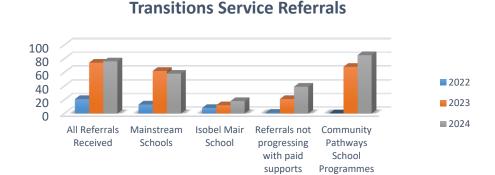
The service works closely with all key partners to coordinate referrals for independent living skill development opportunities and is working to project future needs in partnership with Health and Social Care Partnership commissioning and to develop a robust range of supports for young people to move successfully into young adulthood.

The team try to ensure that the transition is a positive experience for the young person and their family.

Supporting transitions – some key achievements 2023-24

- The Transitions Hub has developed a shared working space for multi-agency and partnership working focussed on transitions. This promotes collaboration and utilisation of third sector and community resources with a focus on developing networks and independence.
- The development of transitions specific resource allocation process that highlights positive collaboration between children and adult services and ensures consistency of eligibility criteria application.
- Child and Adolescent Mental Health Service (CAMHS) work in partnership with the Health and Social Care Partnership Transitions Team and Children and Families Services, to ensure young people who will require adult community mental health services have a seamless transition from one service to another. This multi-agency and multi-disciplinary approach is evolving and key agencies are being identified to participate in the model including third sector. Young people on the CAMHS waiting list have been prioritised if they are 16/17 years of age to ensure the right support and

treatment is in place prior to them accessing adult services. This is particularly important for those on the Neurodevelopmental Pathway who may require ongoing medication and monitoring.



Community Pathways

The service uses community-based spaces throughout East Renfrewshire. It offers day opportunities and community outreach support to people with learning disabilities, learning difficulties and neuro-divergent people in East Renfrewshire. The service offers transitions support for younger people moving towards adulthood and provides support with independent living skills, skills for work and volunteering opportunities.

People who attend the service have an individualised support plan, which may involve building based services, outreach support as well as a wide variety of projects, workshops and activities.

Feedback for the transitions work has been extremely positive from young people and their families.

The service has a long history of partnership working with a variety of local partners and this includes volunteering opportunities and traineeships for individuals and subsequent support to access employability programmes.

The learning disability registered service had an unannounced inspection in March 2024 with inspectors grading the service as very good for 'How well do we support people's wellbeing' and 'How good is our leadership'.

The report credits the service for demonstrating a person-centred approach for people with a wide range of different needs. It noted a wide range of interesting activities for people to choose from with an enthusiastic and well-trained staff team. Inspectors observed staff speaking to people kindly and with patience. Support for personal care was provided discreetly, ensuring people were treated with dignity. They found that each person had a personalised timetable of activities, presented in an accessible format and reported the service works well with other professionals and support providers.

The service was described as well managed by a very approachable management team. This was supported by comments from staff, people and their families. A culture of reflection and continual improvement meant people were supported by a service that worked hard to ensure high-quality support based on current guidance and good practice.

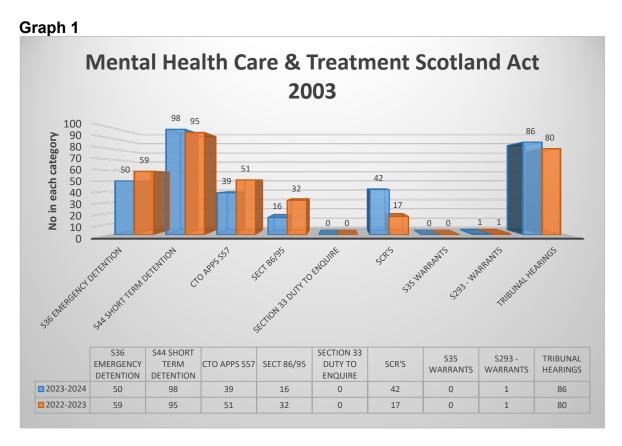
Inspectors found the service should involve people using service more in evaluation and planning, which has been taken forward as an improvement.

2.3 Mental Health

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

The East Renfrewshire Mental Health Officer service sits under the umbrella of Mental Health Recovery and Learning Disability services within the Health and Social Care Partnership. Operational management for the service is overseen by the service manager, senior manager and Head of Services with the ultimate responsibility for the statutory duties sitting with the Chief Social Work Officer. Mental Health Officers work closely with all partners across East Renfrewshire and the Greater Glasgow and Clyde NHS board area.

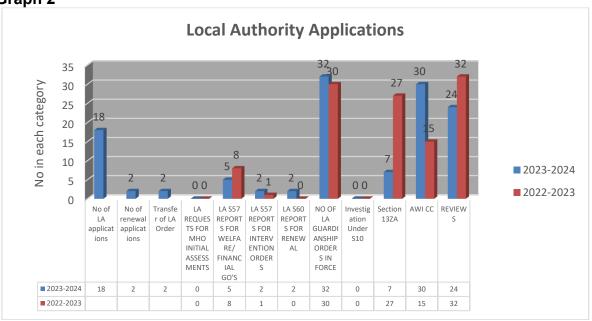
Activity generated by the Mental Health (Care & Treatment) (Scotland) Act 2003 has remained consistent although there was a noticeable reduction in the number of Compulsory Treatment Order (CTO) applications made. (Graph 1) However, in contrast the number of Mental Health Tribunals continue to rise which is likely a reflection of the number of Short Term Detention appeals and interim Compulsory Treatment Orders being granted.



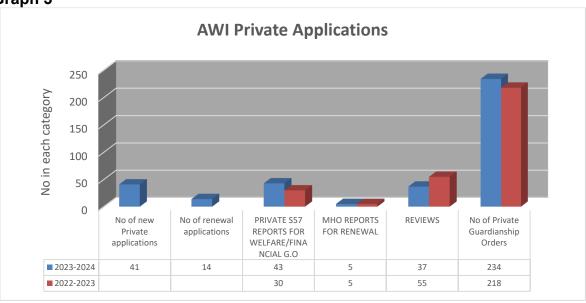
With regard to the activity generated under Adults with Incapacity legislation (Graph 2), one of the main pressures on the service this year has been the increase in adults not meeting the criteria for 13za to facilitate hospital discharge. This was particularly prevalent towards the end of the year with the impact of this being a 100% increase in

the necessity for an Adults with Incapacity Case Conference to progress legal authority to discharge and implement the support plan.





Graph 3



Figures from Graph 3 indicate that the demand for Mental Health Officers reports to accompany private applications for Welfare and Financial Guardianship remain consistent. The supervision of private guardians remains a challenge due to the ever increasing amount of guardians to be supervised which currently sits at 234 (an increase of 16 from last year).





Another area in which activity has increased is within our forensic case load. Numbers however remain relatively low with only seven individuals subject to orders under the Criminal Procedures (Scotland) Act 1995.

Sourcing support for individuals with complex mental health difficulties remains a challenge. There are limited resources within the East Renfrewshire area and we frequently find it necessary to look elsewhere for the level of specialism required. This is further complicated by the current national crisis within housing and the impact this has on safe hospital discharge planning for vulnerable individuals. Over the last year we have looked to develop our connection with our colleagues in housing to ensure that they are a key component of discharge planning and risk management.

2.4 Criminal Justice

Community Payback Orders (CPO)

During 2023/24, the Justice Social Work team have developed in a number of key areas. 89% Community Payback Orders (CPOs) completed within court timescale, this notably increased from 83% the previous year.

We have sought to develop the progress made within the previous year with regards our Unpaid Work Service. We continue to draw upon our bespoke workshops to deliver the Unpaid Work service to our local community. We have worked hard to ensure our premises enable service users to develop new skills. Throughout this, service users have been supported to complete some 7,721 hours of Unpaid Work during 2023/24 to the direct benefit of the community.

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

The Justice Service continues to deliver Moving Forward Making Changes programme. This enables us to provide individuals who meet the criteria for this programme access to specialised interventions. Work has progressed at the national level on the revision of Moving Forward Making Changes to Moving Forward 2 Change (MF2C). Justice Social Work continue to be involved at the national level in contributions surrounding the upcoming implementation of the revised programme and are on course to implement this programme by January 2025.

Court Services

We continue to work closely with our partners in Renfrewshire to ensure delivery of Electronic Monitoring Bail. We launched our Bail Supervision Service on 19th February 2024 in conjunction with Paisley Sheriff Court, completing a combined 38 assessments during 2023/24. This has enabled us to deliver robust alternatives to custodial remand.

Employability

We continue to work jointly with our partners in Work East Ren in facilitating a shared Community Justice Employability Worker post. This post has allowed considerable progress to be made in the lives of service users accessing the service in increasing their employability profiles. Since this post commenced, there has been 181% increase registrations, 57% increase in employability outcome and 100% achieving a positive employability or training outcome.

Service / Staff Development

The Justice Service have sought to continue training have completed a range of training. Staff continue to access appropriate risk assessment training including Structured Assessment of Protective Factors (SAPROF), Stable and Acute 2007

(SA07) refresher training and the Spousal Assault Risk Assessment version 3 (SARA V3), alongside new staff undertaking training in Safe and Together. The Justice Service have further participated in enhancing knowledge of working with those experiencing dementia and acquired specialised training in supporting those who have experienced Non-Fatal Strangulation.

The Justice Service continue to engage with our colleagues within the Community Justice Partnership. We have ensured all Multi Agency Public Protection Arrangements (MAPPA) meetings are held in line with statutory responsibilities. Further, we continue to contribute to East Renfrewshire's British Sign Language Plan 2018-2024.

We have undertaken a joint venture with the Children and Families Intensive Family Support Team. Through support by the Justice Service for funding of Spousal Assault Risk Assessment training and Trauma-Focussed Cognitive Behavioural Therapy training, we have commenced a pilot focusing on four key areas: joint risk assessment in selected complex domestic abuse cases; preventative trauma-informed group work for male perpetrators of domestic abuse; supporting children and young people and young parents who have experienced trauma; and group-work with females convicted of offending. The identified outcomes are to provide support both to victims and perpetrators of offences to improve outcomes and in turn enhance community wellbeing.

The Justice Service remains committed to supporting the community in addressing domestically-aggravated offending and the associated consequences of said behaviours. We have continued to ensure 100% attendance at scheduled Multi Agency Risk Assessment Conferences (MARAC). Following on from the success of having secured a number of 'go-bags' for victims of domestic abuse (eighteen in total) in the previous year, we have secured a further 24 bags and remain in in active consultation with a number of partners to ensure a wide reach of these bags for woman fleeing domestic violence.

2.5 Public Protection

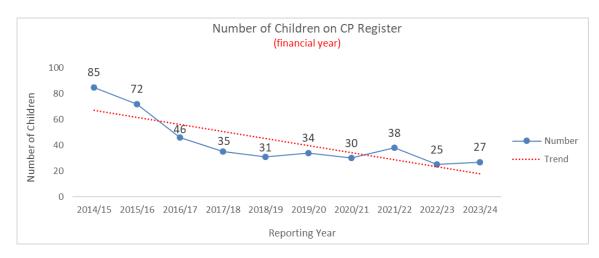
Child Protection, Quality Assurance and Continuous Improvement

The number of children on East Renfrewshire's Child Protection Register was 27 in 2023/24, this is an increase of 8% on the previous year.

In addition to robust management and audit activity, we continue to benchmark against comparator authorities to ensure that the rate of registration activity is proportionate and necessary.

Child Protection Registrations

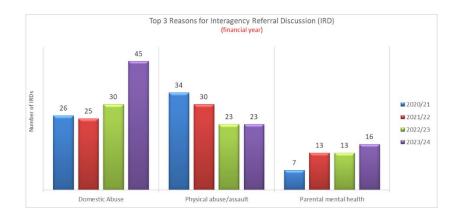
The graph below highlights the number of children subject to child protection registrations from 2014/15 until 2023/24.



Interagency Referral Discussions

During the period April 2023 - March 2024, we have undertaken 152 Interagency Referral Discussions (IRDs) (between social work, police, health and where appropriate education services) in respect of 242 children (some children may have had more than one interagency referral discussions in the reporting period). This is an increase of 31% of Interagency Referral Discussions and an increase of 42% of children on the previous year.

There was a 48% increase in referrals to our Request for Assistance team which may account for the increase in the number of Interagency Referral Discussions taking place.



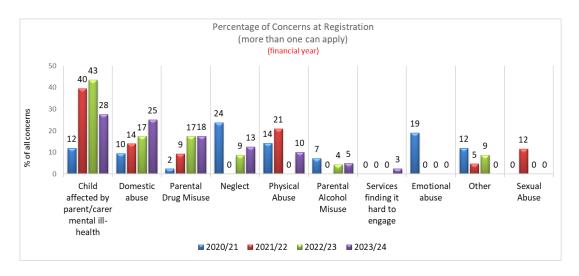
The most common reasons for initiating an Interagency Referral Discussion during 2023/24 are shown in the chart above. The highest reason for an Interagency Referral Discussion in the reporting period was domestic abuse. There has been a small increase in Interagency Referral Discussions for parental mental health and no change in physical abuse/assault.

Of the 242 children and young people subject to Interagency Referral Discussions, 29% were subject to a child protection investigation. Of these children and young people 52% went on to have an initial or pre-birth child protection planning meeting, with 67% of them having their names placed on the child protection register. This is an increase on the previous year figure of 45%.

This equates to approximately 10% of all the children and young people who were subject to an Initial Referral Discussion, which is close to the 6% from the previous year.

Concerns Identified at Registration

A child can be placed on the child protection register with more than one concern noted. Child Affected by Parent / Carer Mental III-Health is currently the highest concern at the point of registration followed by domestic abuse and parental drug misuse.



Interagency Referral Discussion Audits

A quarterly programme of Interagency Referral Discussion (IRD) audit continues to be an ongoing exercise of our continuous improvement programme for child protection, allowing us to maintain an overview of the initial decision making in child protection processes. We have moved to biannual audits across the academic year.

In line with our commitments towards continual improvement an Interagency Referral Discussion Audit Report was produced in March 2024 covering the period between January – June 2023. Within this period we audited nineteen Interagency Referral Discussion's which was 30.65% of the total audits.

The audits findings included confirmation that we have a joined up approach to the Interagency Referral Discussion process. In addition to this the increased contribution of our colleagues in education being consistently part of the discussion increased the depth of quality.

The North Strathclyde Child Interview Team / Barnahaus

East Renfrewshire are part of the North Strathclyde Child Interview Team; this is a partnership with East Dunbartonshire, East Renfrewshire, Inverclyde, Renfrewshire, Police Scotland, Scottish Children Reporter's Administration, NHS Greater Glasgow & Clyde and Children 1st. Joint investigative interviews (JII) under the Scottish Child Interview Model went live on the 10 August 2020. Children and young people in East Renfrewshire are now interviewed and supported by Police and Social Work who are highly skilled, utilising proven techniques to achieve best evidence. In addition, the child / young person and their non-abusing care giver will have access to trauma informed support and advice throughout their journey from initial disclosure to court proceedings or when the family feel support is no longer required. This is delivered by Children 1st recovery and participation workers who provide the child / young person and their families an opportunity to express their views, needs and concerns.

Over this reporting period, East Renfrewshire made 32 referrals to the child interview team, where 94% progressed to a joint investigative interview. An overall disclosure rate of 96% was recorded against these interviews, which is an increase in comparison to last reporting period. An offence under the Sexual Offences (Scotland) Act 2009 was the primary reason for referral for children and young people who reside in East Renfrewshire (50%), followed by Physical Assault (28%) and thereafter Domestic Abuse (25%). Caution is required here as given the relatively small numbers more detailed breakdown of information here could result in victims becoming identifiable. Of note is that in the main the victims were offended against, or witness to actions regarding adult males. Assurance is given in how seriously any offences against a child are taken and that partners are committed to investigating concerns, managing risk, supporting victims for trauma support and recovery and importantly assisting them in their journey to achieve justice.

The Bairns' Hoose had its official launch in August 2023 and the first joint investigative interview took place in September 2023. Over a six month period, 63% interviews have taken place from referrals across the North Strathclyde Partnership within an environment that provides a safe, child friendly, age appropriate setting where children and young people can have the opportunity to view the space which provides a virtual

link to Court, giving some reassurance that they will not require to step into an environment where they could face their perpetrator. The feedback provided by families that have utilised this house has been extremely positive.

Our Response to Domestic Abuse

Domestic Abuse continues to be the predominant cause for concern in referrals to our children services and features as one of the most significant factors within child protection interagency discussions. Of the 351 referrals made to the Request for Assistance team, 32.8% domestic abuse concerns were reported and 30% child protection interagency referral discussions (IRD's) noted domestic abuse as a significant factor. The number of children where domestic abuse was noted as a significant factor increased by 49% in 2023/24.

There were 41 adults referred to East Renfrewshire Adult Support and Protection where Domestic Abuse was highlighted as a concern during the reporting period. This represents a 64% increase from previous year 2022-23 (25 individuals). Eighteen Adult Support & Protection enquiries investigations were completed with 50% referred to Multi Agency Risk Assessment Conferences (MARAC). In fifteen cases multiple forms of coercive control were reported and 72 reports of coercive control identified with monitoring and controlling the victims daily activities most common.

Through our multi-agency approach we work collaboratively to deliver a significant range of actions to ensure an effective and sustainable approach to preventing, reducing and responding effectively to domestic abuse and all forms of violence against women and girls. This includes the implementation of Routine Sensitive Enquiry, Multi Agency Risk Assessment Conference and Safe and Together practice to ensure a perpetrator pattern based, child centred, survivor strengths approach to working with domestic abuse. We continue to strengthen the capacity of our services and action across the whole system to address the long-term effects of trauma and abuse experienced by women, children and young people.

We worked collaboratively with our partners in Rape Crisis Glasgow and Clyde to launch a new sexual violence outreach support service in East Renfrewshire for women and girls (age 13+). This is an important addition to the specialist support available for women and girls who have experienced rape, sexual assault or sexual abuse.

As part of our work to protect people from harm and abuse, we have established and continue to support a Multi-Agency Risk Assessment Conference (MARAC) in East Renfrewshire for high-risk domestic abuse victims.

In 2023/24 we continued to see an increase in support required as a result of domestic abuse with 155 victims and 260 children discussed at Multi Agency Risk Assessment Conferences. This is an increase of 15.6% and 33% respectively in cases discussed compared to the previous year. 21.32% of victims did not have children and this is important as women without children were not previously visible in the domestic abuse pathway and this demonstrates continued increase in awareness and risk assessment across the range of services and improved pathway response.

Multi Agency Risk Assessment Conferences referrals from all statutory services nationally continue to be low overall and may suggest that unless a victim in Scotland reports domestic abuse to the Police or seeks out support from a specialist domestic abuse service, they are unlikely to be referred to their local Multi Agency Risk Assessment Conferences. This is not the case locally as East Renfrewshire demonstrates a higher proportion of referrals from children and families and wider statutory services with 33% locally compared to 10% nationally and therefore we are able to capture families that might not be known to another service.

We continue to work together with East Renfrewshire Women's Aid Service to provide direct support for women and children who have experienced domestic abuse. Following a significant increase in calls to the helpline and drop-in following the pandemic the service is now seeing a move back towards levels experienced prepandemic. During the period, East Renfrewshire Women's Aid Service supported 1059 women and children across the three core services and helpline in 2023/24, a reduction of 2.5% from the previous year.

Women's Aid further launched a new Children Experiencing Domestic Abuse Recovery (CEDAR) Programme. This is a twelve week group work programme for women and children to support their recovery from domestic abuse.

Women supported by the service recently met with the Promise lead planner to discuss their experiences of seeking support and how services could be improved. Women gave positive feedback about their experiences of Women's Aid and described their experiences of being supported as employees and feedback on family-oriented support such as health visiting, education and after school care.

Training and Capacity Building

Domestic Abuse, Risk Assessment, Multi Agency Risk Assessment Conferences and Safe and Together training continues to be delivered in addition to the provision of bespoke sessions for key partners. Over the course of the last year 181 staff were trained across a range of disciplines including Adult Services, Children & Families, Mental Health, Alcohol and Drugs, Housing, Education, Care at Home, Community Learning and Development and Health Visiting.

Additionally domestic abuse training sessions were delivered to the council Human Resources (HR) and managers to support the implementation of the new policy for HR and managers. Bespoke training was delivered to all community pharmacies across East Renfrewshire and a further 25 participants took up the offer to attend and observe a Multi-Agency Risk Assessment Conference. Workers are further supported out with training with specialist domestic abuse advice as required.

East Renfrewshire participated in the national campaign 16 Days of Action to end violence against women and girls by developing a specific local programme of key messaging and campaign activity delivered throughout the 16 days and concluded the campaign by launching our new Domestic Abuse Policy and Revised Guidance for employees.

Adult Support and Protection

East Renfrewshire operates a dedicated Adult Support and Protection team, which acts as a single point of contact for all Adult Support and Protection and adult welfare concern referrals. The dedicated Adult Support and Protection team has greatly strengthened and streamlined our approach to screening and triaging adult protection referrals and application of the three-point test.

Adult Support and Protection activity has continued to increase over this period, in keeping with the trend identified since the implementation of the 2007 Act. In the reporting period there has been a total of 1107 inquiries undertaken by Council Officers of which 228 progressed to investigation. The 228 Adult Support and Protection investigations, represents a 33% increase from the previous reporting period.

In order to support consistent thresholds, robust decision making and management oversight, all inquiries (100%) have been reviewed and approved by the Adult Support and Protection Team Manager and Duty Manager in line with our local Adult Support and Protection local operating procedure.

Adults who experience problems arising from infirmity due to age were the highest common client group to be subject to Adult Support and Protection investigation, accounting for 25% of all investigations. Institutional harm was the most common harm experienced by adults, accounting for 22% of the recorded harms. This was significantly increased from the previous reporting period due to the Large Scale Investigation (LSI) conducted during this period.

The Large Scale Investigation was conducted in relation to a privately operated care home in the 2023/24 period. This was a significant undertaking with ten Council Officers, supported by a range of professionals across the Health and Social Care Partnership undertaking 59 Adult Support and Protection Inquiries and Investigations for all of the residents, both East Renfrewshire Council residents and placing authority residents.

Joint Adult Support and Protection Inspection

The Adult Protection Committee received notification of a joint Adult Support and Protection inspection on 30 January 2023. The Inspection took place over the following four months, and focussed on 'Key Processes' and 'Strategic Leadership'. The Inspection Report was published on 27 June 2023.

The Joint Inspection report was complimentary of our strategic leadership, recognising our commitment to supporting adults at risk of harm and developing a culture of learning and continuous improvement, which supported the development of adult support and protection services.

We welcome the external scrutiny and feedback that the joint inspection brought and benefited from the experience of working with the joint inspection team through the inspection process. We have continued to provide flexible and adaptable training opportunities to support staff, partners and providers, developing a strong partnership approach. These courses are provided both as a part of our Public Protection Development Programme, but also as bespoke session for partners and providers to support their improvement.

ASP Training, Learning and Development

In this period we improved and delivered our rolling programme of Adult Support and Protection training as part of the Public Protection Development Programme 2023/24. This programme set out a multi-levelled structure of training, developed to support staff at all levels of knowledge and involvement to identify the right training for their role.

The suite of training materials drew on learning from our previous Large Scale Investigation and supporting organisations to improve their practice. This has provided a range of introductory and more detailed training events that focused on supporting improved practice.

Section 3. Resources

Financial Performance 2023/24

This was a very challenging year for the Health and Social Care Partnership as we worked to balance meeting the demand for services within the allocated budget. We needed to deliver just over £7 million of savings as part of our plans to balance our budget and we were not able to do this. We used £1.9 million reserves as planned to support us to redesign how we deliver services and we achieved £2.7 million of savings during the year. This meant we had a £2.5 million shortfall against planned savings and when this shortfall is combined with the additional cost pressures from delivering services we ended the year with a deficit of £4.7 million.

This meant during the financial year 2023/24 we moved to a financial recovery position and had a number of discussions with both of our partners; East Renfrewshire Council and NHS Greater Glasgow and Clyde. Both partners have provided additional funding, on a non-recurring basis, for 2023/24 to eliminate this deficit. The savings shortfall and service pressure have been addressed by the Integration Joint Board in the budget set for 2024/25.

Future Challenges

The Integration Joint Board continues to face a number of challenges, risks and uncertainties in the coming years and this is set out in our current Medium-Term Financial Plan (MTFP) for 2024/25 to 2028/29 and our Strategic Plan for 2022/23 to 2024/25. These key strategies also inform our strategic risk register and collectively support medium-term planning and decision making.

The Integration Joint Board operates in a complex environment with requirements to ensure statutory obligations, legislative and policy requirements, performance targets and governance and reporting criteria are met whilst ensuring the operational oversight of the delivery of health and care services.

UK and Scottish Government legislation and policies and how they are funded can have implications on the Integration Joint Board and how and where we use our funding over time.

The most significant challenges for 2024/25 and beyond include:

- Delivering savings to ensure financial sustainability, ensuring sufficient flexibility to allow for slippage, shortfalls or changes.
- Recognising the tension between delivering a level of savings that will allow the Integration Joint Board to start to rebuild reserves and protecting service delivery.
- Managing reduced service capacity as a result of savings and maintaining discharge without delay from hospital and other key indicators.

- Delivering on our Recovery & Renewal programme for areas of change, including the implementation of a new case recording system.
- Understanding the longer term impacts of Covid-19 on mental and physical health.
- Recruitment and retention of our workforce, particularly in the current cost of living crisis.
- Managing prescribing demand and costs in partnership with our GPs.
- Supporting the physical and mental health and wellbeing of our workforce and our wider population, again further impacted by the current cost of living challenges.
- Meeting increased demand for universal services without funding for growth, including increased population demand and new care homes opening with the area.
- We may also need to prepare for the challenges and opportunities that may arise from a national care service.

The Integration Joint Board agreed its budget for the financial year 2024/25 on 27th March 2024 recognising the significant challenges brought forward from 2023/24 as well as new demand and cost pressures for 2024/25.

Whilst the scale of this challenge is significant to East Renfrewshire, particularly as one the smaller Health and Social Care Partnerships this is not unique; the national position across all public sector services shows a challenging financial outlook.

Demographic pressures remain a very specific challenge for East Renfrewshire as we have an increasing elderly population with a higher life expectancy than the Scottish average and a rise in the number of children with complex needs resulting in an increase in demand for services.

The future challenges detailed above and our associated response include the main areas of risk that the Integration Joint Board is facing. The uncertainty of the current economic climate, the longer term impact of Covid-19 on our population, the capacity for East Renfrewshire Health and Social Care Partnership and its partners to meet continued demand and complexity whilst delivering such challenging savings remain significant risks.

Section 4. Workforce and Looking Forward

Training, Learning and Development

Learning and Development remains a priority for the workforce and the service has continued to deliver a wide range of training in spite of the considerable financial and resource pressures. Temporary funding was secured to deliver the National Transforming Trauma Programme (NTTP).

Following the appointment of a Trauma Lead, the Trauma Training programme was further developed with the launch of a Level 2 Skilled Training. The roll out of the Level 3 programme has expanded to include relevant partners across the council and Health and Social Care Partnership and there has been significant evidence of shared learning.

Consistent with the aims of the Promise, our employability advisers from our Care Experienced and Resettled Employability programmes took part in Level 2 Trauma Informed training with the aim of ensuring that all front line practitioners and managers are able to deliver services through a trauma informed lens.

A review of our Signs of Safety training programme was undertaken to identify areas in need of refresh. These included subjects such as the harm matrix and safety planning, timelines and network meetings and a programme of training has been delivered that will be fully evaluated once complete. Signs of Safety continues to be our established practice model with all new members of social work staff undertaking training.

A large scale training programme was undertaken in relation to the newly launched Supporting People Framework and work is ongoing to embed the learning. This is a new framework and there has been extensive support put in place to support front line staff and managers given the scale and speed that delivery entails.

Training was also delivered on Unaccompanied Children and Young people from *Just Right Scotland*. This was in recognition of the challenges facing teams, in particular our family placement services. This was delivered to a cross section of staff, including partners across the council.

A comprehensive foster care training programme was launched and a trainer approved to deliver the accredited Promoting Positive Behaviour (PBB) training programme to foster carers. This was also in response of the increasing complexity of children and young people being placed with our carers.

In January 2024 East Renfrewshire was awarded funding to become a pilot site to support the implementation of the Newly Qualified Social Worker Supported Year programme. The service has begun to scope need, review our induction programme and begin work on the development of a Learning Hub that will support post-registration continuous professional learning (CPL). This will enable us to build on existing strengths, work with established practice forums and our Advanced Practitioner group to ensure a sustainable approach in the longer term.

An annual review of learning needs was undertaken by our learning and development service consisting of consultation with managers and staff that formed the basis of our annual multiagency public protection training programme. Identified gaps were in relation to separated children, permanency and court skills and work is underway to deliver further training on Age of Criminal Responsibility legislation (ACR) as well as the new National Guidance on Child Protection. Our public protection programme has continued to provide essential training to support both internal staff and external organisations to improve their practice and effectively manage risk. In addition to routine courses in risk assessment and management, a flexible approach has been adopted to include bespoke sessions for providers as need demands.

Our Registered Care at Home service underwent an inspection in January 2024 in which our induction programme was commended. The need for ongoing refresher training was highlighted as well as specific management training in areas such as auditing and this is in the process of being addressed.

The partnership was also the subject of a strategic Adult Support and Protection inspection in 2023, which included scrutiny of our learning and development programme. The inspection commented on the "culture of learning and continuous improvement" that was evident. Most staff reported in the staff survey that they had access to appropriate and effective training.

Looking Forward

As Chief Social Work Officer I am committed to the ongoing professional development and training for all our staff and to build on our quality improvements.

We are committed to keeping The Promise in East Renfrewshire and to this end we will seek approval of the Council and Integration Joint Board to establish an East Renfrewshire Promise Board which will be a completely new way of working in partnership with children and families who have used East Renfrewshire Council and Health and Social Care Partnership services. We will also implement a three tier Promise Workforce Learning Programme to support the Promise Keepers, their workforce and all Corporate Parents to understand purpose and intent.

We will work alongside partners to ensure that the voices of children are listened to and respected in line with the United Nations Convention on the Rights of the Child (UNCRC) and will also remain committed to reducing poverty and inequality in our communities.

Participation and involvement and importantly, analysis of what those who use our services tell us, will remain an utmost priority.

Conclusion

This report highlights and summarises the statutory duties and activities across the social work workforce in East Renfrewshire. It reflects, what I believe as Chief Social Work Officer, the high quality standard of our profession in the fields of children and families, justice and adult social work. Our residents and communities rightly expect quality services when they require them and I am heartened that our workforce show ongoing commitment in delivering this.

In the past year we have witnessed considerable challenge and demand requiring us to make savings and efficiencies, redesign and reduce our workforce and pivot resource to ensure ongoing viability and stability. This will continue to be a challenge in the forthcoming year and it will therefore be important to work within financial parameters whilst highlighting areas of potential or actual risk that could impact on the provision of social work and social care services.

I would like to personally thank all our staff for their kindness, commitment, drive and professionalism in their delivery of support. I can attest that many go far and beyond normal duties of what would be expected to support our residents and keep them safe. This is particularly appreciated for managing this in an uncertain, challenging and complex space. Their values, actions and support continue to make me proud to represent them as East Renfrewshire's Chief Social Work Officer.







• •			
Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board		
Held on	25 September 2024		
Agenda Item	8		
Title	Audited Annual Report and Accounts 2023/24		
Summary			
This report provides an overview of the au Joint Board (IJB) covering the period 1 Ap	udited annual report and accounts for the Integration pril 2023 to 31 March 2024.		
 any matters arising from the Performance and Audit Committee 	nmittee will advise the Integration Joint Board of:- formance and Audit Committee in relation to the ats ittee's decision taken 25 September 2024 on the Report and Accounts to the Integration Joint Board.		
Presented by	Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)		
Action Required			
 Audit Committee. Authorise the Chair, Chief Officer an annual report and accounts on beha 	and accounts as remitted from the Performance and and Chief Financial Officer to accept and sign the alf of the IJB for submission to Audit Scotland.		
Directions	Implications		
No Directions Required	⊠ Finance □ Risk		
☐ Directions to East Renfrewshire Council (ERC)	☐ Policy ☐ Legal		
☐ Directions to NHS Greater Glasgow and Clyde (NH	SGGC) Workforce Infrastructure		
☐ Directions to both ERC and NHSGGC	☐ Equalities ☐ Fairer Scotland Duty		

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

25 SEPTEMBER 2024

Report by Chief Financial Officer

AUDITED ANNUAL ACCOUNTS 2023/24

PURPOSE OF REPORT

- 1. The purpose of this report is to provide an overview of the audited annual report and accounts for the Integration Joint Board (IJB) covering the period 1 April 2023 to 31 March 2024 and outline the legislative requirements and key stages.
- 2. The Chair of the Performance and Audit Committee will advise the IJB of any matters arising from this committee.

RECOMMENDATION

- 3. The Integration Joint Board is requested to:
 - a. Approve the audited annual report and accounts as remitted from the Performance and Audit Committee.
 - b. Authorise the Chair, Chief Officer and Chief Financial Officer to accept and sign the annual report and accounts on behalf of the IJB for submission to Audit Scotland.
 - c. Note and comment on the summary overview of financial performance document for 2023/24 prior to publication on the IJB website.

BACKGROUND

- 4. The Public Bodies (Joint Working)(Scotland) Act 2014 was passed by the Scottish Parliament on 25 February 2014 and received Royal Assent in April 2014. This established the framework for the integration of Health and Social Care in Scotland.
- 5. The IJB is a legal entity in its own right, created by Parliamentary Order, following Ministerial approval of the Integration Scheme. NHS Greater Glasgow and Clyde (NHSGGC) and East Renfrewshire Council have delegated functions to the IJB which has the responsibility for strategic planning, resourcing and ensuring delivery of all integrated services.
- 6. The IJB is specified in legislation as a 'section 106' body under the terms of the Local Government Scotland Act 1973 and as such is expected to prepare annual accounts in compliance with the Code of Practice on Accounting for Local Authorities in the United Kingdom.

REPORT

- 7. The audited annual report and accounts for the IJB has been prepared in accordance with appropriate legislation and guidance.
- 8. The annual report and accounts of the IJB is included at Appendix 1 and, subject to Performance and Audit Committee and Integration Joint Board approval, will be signed via the Ernst & Young agreed electronic process. The signing requirements are:

Management Commentary	Chair of the IJB, Chief Officer, Chief Financial Officer	
Statement of Responsibilities	Chair of the IJB, Chief Financial Officer	
Annual Governance Statement	Chair of the IJB, Chief Officer	
Remuneration Report	Chair of the IJB, Chief Officer	
Balance Sheet	Chief Financial Officer	
Acknowledgements	Chair of the IJB, Chief Officer, Chief Financial Officer	

- 9. It is a statutory requirement that the Chief Financial Officer (being the proper officer) provide Ernst & Young with a letter of representation (ISA580) along with the annual report and accounts. This is included at Appendix 2.
- 10. The Chief Internal Auditor's Annual Report and the Draft Ernst & Young Annual Report confirm the Annual Report and Accounts for 2023/24 are unqualified, unmodified, meet legislative requirements, address best value and appropriate governance is in place.
- 11. The Chair of the Performance and Audit Committee will advise the IJB on the key points from this committee and associated presentation of audit findings.
- 12. The key messages from Ernst & Young are rated as Red, Amber or Green and are summarised:

Key Messages		RAG
Financial Statements	The draft financial statements and supporting working papers were of a good quality. During the course of the audit, we identified no audit differences. Minor presentational amendments were made to the financial statements during the course of the audit. Overall, we were satisfied that the Annual Governance Statement, reflects the requirements of CIPFA's updated Delivering Good Governance Framework.	Green
Going Concern	In accordance with the CIPFA Code of Practice on Local Government Accounting, the IJB prepares its financial statements on a going concern basis unless informed by the Scottish Government of the intention for dissolution without transfer of services or function to another entity. Under auditing standard ISA 570, we are required to undertake greater challenge of management's assessment of going concern, including testing of the adequacy of the supporting evidence	Green

	we obtained. The IJB has concluded that there are no material uncertainties around its going concern status, however it has disclosed the nature of significant financial risks within the going concern period. The Integration Scheme sets out the responsibilities of the IJB's partners, East Renfrewshire Council and NHS Greater Glasgow and Clyde, in the event that the IJB has insufficient general reserves to respond to additional financial pressures. During 2023/24 both provided additional resources to the IJB to respond to financial recovery measures. [We have no matters to report in respect of our work around going concern or the conclusions reached by the Board.]	
Financial Management	The IJB recognised that the 2023/24 budget presented its most significant challenge to date. As a result of significant cost pressures, the IJB was required to identify savings of over £7 million to set a balanced budget in March 2023 and planned to use £1.9 million of reserve balances.	Amber
	The IJB delivered £2.7 million (39%) of the targeted savings and as a result entered financial recovery planning during the year. Additional contributions were received from both of the IJBs partners. Management and members of the IJB recognise that it underestimated the impact and timeframe of the changes required to implement the Supporting People Framework.	
Financial Sustainability	In line with the IJB's financial planning expectations, the Board's reserve balances continued to fall significantly in 2023/24 to an unsustainable level. The IJB's General Reserve at 31 March 2024 has now been depleted in full.	Red
	The IJB estimates that the cumulative budget pressure in the period 2025/26 to 2028/29 may in the range £16.5 -£29.2 million. A savings requirement of £11.9 million has been set in the 2024/25 budget but delivery is currently off target, which would result in an additional recurring pressure in future years	
Vision, Leadership and Governance	Governance arrangements are established and worked well throughout 2023/24. The Annual Governance Statement was consistent with both the governance framework, key findings from relevant audit activity and management's assessment of its own compliance with the CIPFA Good Governance framework. The IJB's partners made progress to update the Integration Scheme, including a consultation with key stakeholders. The Integration Scheme is expected to be approved by Scottish Ministers later in 2024.	Green

Use of Resources	The IJB has a well-developed approach in place to monitor and report on key areas of performance and was able to demonstrate key areas of improvement in 2023/24. Overall performance remains mixed, and the IJB continues to highlight significant and ongoing financial risks within its risk registers that may undermine the delivery of the Strategic Plan.	Green
Best Value	The IJB's performance management and financial reporting arrangements allow the Board to demonstrate the delivery of Best Value. The Annual Performance Report describes the key achievements and areas for improvement against the priorities within the Strategic Plan 2022-25.	N/A
	The financial outlook for the IJB has continued to weaken. General reserves have been exhausted and remaining earmarked reserves have fallen to unsustainable levels. As a result of being unable to deliver planned savings in year, the IJB commenced a financial recovery exercise to bridge in-year budget gaps with its partners.	
	In our view, the IJB's performance management and financial reporting arrangements allow the Board to demonstrate the achievement of Best Value. There is, however, an imminent risk that the savings required in 2025/26 will not be delivered, placing additional pressure on partners for financial support.	

- 13. Within the Financial Statements there are no changes or adjustments. Ernst & Young identified one presentational change that has been made within the remuneration report, following technical audit advice; this is classed as a presentational change.
- 14. The red RAG status of Financial Sustainability is no surprise and mirrors our own Strategic Risk Register. This was also red in the previous financial year, recognising the ongoing financial challenge to the IJB. The national report on IJBs finance and performance taken to the IJB in August reflects our local position is in line with the rest of the country.
- 15. The amber RAG status for Financial Management is new to 2023/24 (previously green) and is a result of the non-delivery of our Supporting People Framework savings during 2023/24 and subsequent move to financial recovery.
- 16. The wording of the going concern note under accounting policy 1.3 has been expanded to reflect the extent of our current challenges.

17. The action plan included at Appendix E of the Ernst & Young Annual report (extract below) details the one recommendation resulting from the audit along with our response.

No.	Findings and / or risk	Recommendation / grading	Management response / Implementation timeframe
1.	Financially sustainable planning	The IJB must develop a realistic and sustainable financial plan that balances the risk associated with savings and supports the rebuilding of reserves in the medium term. Grade 1	Response: The budget agreed for 2024/25 included an over-
	The IJB's General Reserves were exhausted during 2023/24 and earmarked reserves have fallen to an unsustainable position. The scale of the financial volatility facing the IJB, including, prescribing and pay inflation, and the difficulty of delivering savings due to the complexity of service user requirements mean that adequate general reserves are essential to manage the level of risk.		for 2024/25 included an over- recovery target for savings to allow for forward planning including rebuilding of reserves. The tension between delivering savings and building reserves, particularly in the current climate is recognised. Responsible officer: Chief Financial Officer Implementation date: 31 March 2025
	There is a risk that financial recovery measures will be necessary in 2024/25 to deliver financial balance.		

- 18. As with usual custom and practice there have been some minor wording changes within the report to enhance clarity and / or ease of reading, none of which are significant.
- 19. The main messages from the annual report and accounts remain:
- 20. This was a very challenging year for the HSCP as we worked to balance meeting the demand for services within the allocated budget. We needed to deliver just over £7 million of savings as part of our plans to balance our budget and we were not able to do this. We used £1.9 million reserves as planned to support us to redesign how we deliver services and we achieved £2.7 million of savings during the year. This meant we had a £2.5 million shortfall against planned savings and when this shortfall is combined with the additional cost pressures from delivering services we ended the year with a deficit of £4.7 million.
- 21. This meant during the financial year 2023/24 we moved to a financial recovery position and had a number of discussions with both of our partners; East Renfrewshire Council and NHS Greater Glasgow and Clyde. Both partners have provided additional funding, on a non-recurring basis, for 2023/24 to eliminate this deficit:
 - East Renfrewshire Council provided an additional £2.6 million
 - NHS Greater Glasgow and Clyde provided an additional £2.1 million

- 22. The main operational challenges that led to the increased cost pressures were meeting demand for Care at Home, the cost of special observations within the Learning Disabilities In-Patients service which we host on behalf of all six HSCPs within Greater Glasgow and Clyde and the costs of prescribing through our GP practices.
- 23. The main area we fell short on delivering planned savings was from our Supporting People Framework. This framework is based on eligibility criteria and was put in place early in the financial year to support reviews of the level of care we provide as we knew we would have to stop providing lower levels of need. We underestimated the impact and timeframe for the culture and practice changes required to implement such significant change alongside managing the expectations of the individuals and families we support.
- 24. The operational overspend, before the additional funding from both partners is applied, is £4.752 million (2.99% of budget) and is marginally better than the last reported position taken to the IJB which showed £5.361 million of an overspend. The main variances to the budget were:
 - £2.499 million overspend within Intensive Services from Care at Home cost pressures combined with unachieved savings
 - £2.462 million overspend in prescribing resulting from both increased volume and costs
 - £1.371 million overspend in the Learning Disability In-Patients service resulted from the level of additional staffing for special observations and managing the patient dynamics
 - £0.788 million underspend in Children and Families was mainly from vacancy management and maximising available reserves
 - The remaining overspends were primarily not achieving savings and the underspends were from vacancy management and release of reserves
- 25. The financial reporting throughout the year provided detailed reporting. The main reasons for the reduction in projected costs of £0.609 million since last reported to the IJB in March were:
 - £0.451 million reduced care costs in community learning disability, partly due to provider capacity limitations
 - £0.196 million additional income to support unaccompanied asylum seekers
 - £0.324 million increase in prescribing costs, partly as costs had been omitted from the national system so £0.254 million "new costs" at month 12
- 26. Our reserves decreased significantly during the year, in line with reporting and the use of all available reserves to mitigate costs as part of the financial recovery process.

	£ Million	£ Million
Reserves at 31 March 2023		6.046
Planned use of existing reserves during the year	(4.526)	
Funds added to reserves during the year	0.344	
Net decrease in reserves during the year		(4.182)
Reserves at 31 March 2024		1.864

- 27. Within ring-fenced reserves we used £1.113 million per the Scottish Government funding mechanisms for PCIP, Mental Health Acton 15 and Alcohol and Drugs where we needed to use our uncommitted balance prior to drawing any in year funding. We also added £0.100 million received for Distress Intervention Seed funding.
- 28. Our Alcohol and Drugs Partnership reserve balance reflects the finding agreed with the Scottish Government to support the development of a Recovery Hub.Our earmarked reserves are put in place to support specific activity such as; phase in of savings, support projects, provide transitional or bridging funding for service redesign etc. and to smooth impact of demand and timing of spend across multiple years. As part of the financial recovery process we released and used available funds to support cost pressures. We used £3.141 million in total, the vast majority of which was on a planned basis.
- 29. We also used the £0.272 million general reserve as part of cost mitigation during 2023/24. The IJB recognises that this means it is not compliant with its Reserves Policy which advocates a 2% of budget should be the level of reserves held. There is a tension between making additional savings to start to build reserves whilst maintaining service delivery. The IJB recognises the need to start to build reserves in the medium to longer-term as part of building back from financial recovery.
- 30. The full detail of our reserves is included in Note 8 of the unaudited annual report and accounts

CONSULTATION AND PARTNERSHIP WORKING

31. The Chief Financial Officer has consulted with partner colleagues during the annual process to ensure consistency and transparency across all.

IMPLICATIONS OF THE PROPOSAL

32. Financial implications are detailed in the report above.

DIRECTIONS

33. There is no requirement to issue directions.

CONCLUSIONS

- 34. The preparation of the unaudited annual report and accounts for the IJB meets all legislative requirements. There has been no material movement to the projected outturn last reported to the IJB. There are no significant governance issues.
- 35. Following the audit of the annual report and accounts the easy read overview is now included at Appendix 3.

RECOMMENDATIONS

- 36. The Integration Joint Board is requested to:
 - a) Approve the audited annual report and accounts as remitted from the Performance and Audit Committee.
 - b) Authorise the Chair, Chief Officer and Chief Financial Officer to accept and sign the annual report and accounts on behalf of the IJB for submission to Audit Scotland.
 - c) Note and comment on the summary overview of financial performance document for 2023/24 prior to publication on the IJB website.

REPORT AUTHOR AND PERSON TO CONTACT

Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)
Lesley.Bairden@eastrenfrewshire.gov.uk
0141 451 0746

12 September 2024

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

IJB 26.06.2024 - Unaudited Annual Report and Accounts 2023/24 https://www.eastrenfrewshire.gov.uk/media/10462/IJB-Item-08-26-June-2024/pdf/IJB_Item_08-26_June_2024.pdf?m=1718808793110

Annual Report and Accounts 2022/23

https://www.eastrenfrewshire.gov.uk/media/9535/IJB-Item-06-27-September-2023/pdf/IJB Item 06 - 27 September 2023.pdf?m=1695053243790

Annual Report and Accounts 2021/22

https://www.eastrenfrewshire.gov.uk/media/8433/IJB-Item-07-23-November-2022/pdf/IJB_Item_07_23_November_2022.pdf?m=638036934513030000

Annual Report and Accounts 2020/21

PAC Paper: 18-03-2020 - Review of Integration Joint Board Financial Regulations and Reserves Policy

The relevant legislation is The Public Bodies (Joint Working)(Scotland) Act 2014, Local Government Scotland Act 1973







East Renfrewshire Integration Joint Board for the Health and Social Care Partnership

Audited Annual Report And Accounts 2023/24

Covering the period 1st April 2023 to 31st March 2024

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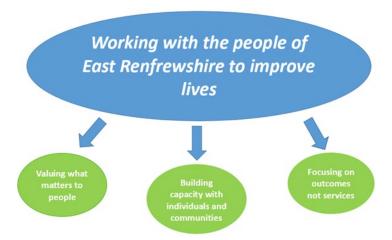
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Management Commentary

Introduction

East Renfrewshire Integration Joint Board (IJB), was legally established on 27th June 2015 and has the strategic responsibility for planning and delivery of health and social care services for the residents of East Renfrewshire. The vision, values, priorities and outcomes we aim to achieve through working together with the people of East Renfrewshire to improve lives are set out in our HSCP 3 Year Strategic Plan for 2022/25. Our strategic vision is:



The IJB is responsible for planning, commissioning and delivery of services for children and adults from both of our partners, East Renfrewshire Council and NHS Greater Glasgow and Clyde, and also have the planning responsibility for our population's use of large hospital based services along with housing aids and adaptations. The Integration Scheme provides a detailed breakdown of all the services the IJB is responsible for. The delivery of services is through the Health and Social Care Partnership (HSCP).

This annual report gives the key messages for the IJB for the financial year ended 31st March 2024 and includes performance highlights and challenges along with the financial statements for 2023/24. The report also looks forward at the challenges the IJB is facing for 2024/25 and beyond as we endeavour to meet the needs and demands of our population.

The management commentary in this report discusses our;

- Strategic Planning
- Key Messages and Operational Highlights and Challenges
- Performance Achievement and Challenges
- Financial Performance
- Future Challenges
- Conclusion

Strategic Planning

The East Renfrewshire HSCP Strategic Planning Group (SPG) has responsibility for the development of our Strategic Plan and supports ongoing review of the plan and provides oversight of the delivery of our strategic priorities. The SPG is a local forum for discussion on emerging themes and key initiatives in health and social care. The SPG is a multi-agency group made up of HSCP officers, IJB voting members, statutory stakeholders (e.g. housing colleagues), third and independent sector representatives, GPs, people who use our services and unpaid carers.

East Renfrewshire covers an area of 174 square kilometres and borders the City of Glasgow, East Ayrshire, North Ayrshire, Renfrewshire and South Lanarkshire.

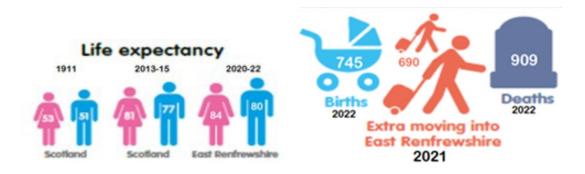
We have two localities; Eastwood and Barrhead. This best reflects hospital flows with the Eastwood Locality linking to the South Glasgow hospitals and the Barrhead Locality to the Royal Alexandra Hospital in Paisley. Our management and service structure is designed around our localities and we continue to develop planning and reporting at a locality level.

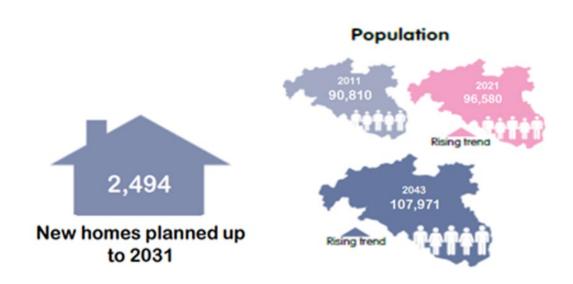


Our population continues to grow and reached 97,160 in 2022¹. Geographically 75% of the population live in the Eastwood area (Busby, Clarkston and Williamwood, Eaglesham and Waterfoot, Giffnock, Netherlee and Stamperland, Newton Mearns and Thornliebank) and 25% live in the Barrhead area (Barrhead, Neilston and Uplawmoor).

¹ *Source 2022 Mid-Year Estimates, National Records of Scotland

East Renfrewshire has an ageing population and by 2043 almost one quarter will be aged 65 or over. In the last decade we have seen a 26% increase in the number of residents aged 85 years and over.





All of these changes will add pressures to the services that we provide.

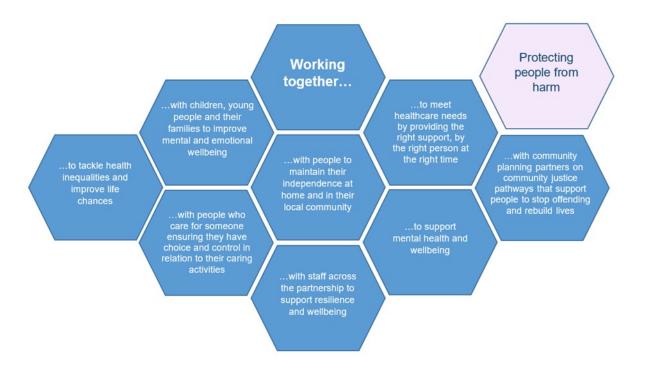
Strategic Plan 2022/25

Our current Strategic Plan covers the 3 year period 2022-2025 and sets out the shared ambitions and strategic priorities of our partnership; and how we will focus our activity to deliver high quality health and social care to the people of East Renfrewshire. This document and our Annual Performance Report demonstrate how we have supported delivery of our strategic priorities.

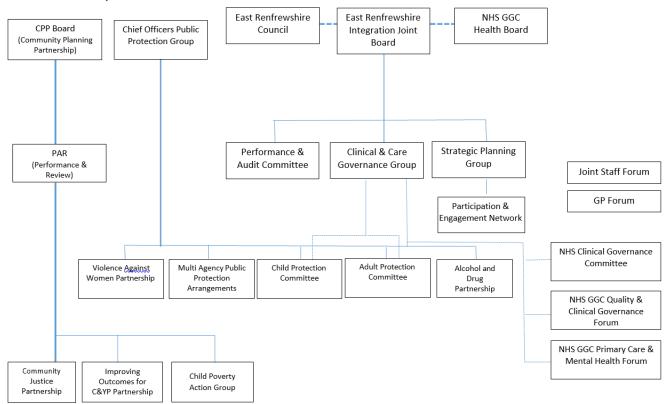
Our Strategic Plan "on a page":

The context for	our Strateg	ic Plan inc	cludes												
East Renfrewsh		Our reco			The Ind	of Adu	ult	Nati	onal le	gisla	ition, p	olicie	s and str	eing Outcomes s and strategies	
demographics a patterns of nee				Social Care a National Care Service					Local plans, strategies and improvement/change programmes				change		
Our vision is Our touchstones are															
Working together with the people of East Renfrewshire to improve lives				•	 Valuing what matters to people Building capacity with individuals and communities Focusing on outcomes, not services 					ies					
Our strategic pi	riorities are	Working	g togethe	er											
with children, young people and their families to improve mental and emotional wellbeing	with people tototo meet maintain their support people's			the by	with people who ca for someo ensurir they ar able to exercis choice control	ne ng re se and	pathways tackle health support resilience and improve life chances offending and rebuild lives			across the partnership to support resilience and					
and Protecti	ng people f	rom harm													
Our strategic ei	nablers are														
Workforce and organisational development	F	edium-tern nancial an trategic lanning	d et	ollaborativ thical ommissior	Eng		municat agement		t		Data intelli	and igenc	e		al technology Infrastructure
We will deliver	this strateg	y through s	supportir	ng plans a	nd progra	ammes	s, includ	ing							
HSCP Delivery and Improvement Plans	Commission and Market shaping Plant	t- ter	nancial	ER HSC Workford Plan	ce Glas Clyd ER0	rovem	and Re	ast enfrews hildren oung eople's ervices	and	Car	nfrews	hire	Public Protecti Improve Plans		ER HSCP Participation & Engagemen t Strategy

We continue to strengthen our supportive relationships with independent and third sector partners, recognising the increased levels of participation in our communities and informal support within our localities. In our Commissioning Strategy, revised during the year, we also recognise that we need to extend beyond traditional health and social care services to a long term wider partnership with our local people, carers, volunteers, community organisations, providers and community planners. Our collaborative commissioning model supports how we will work.



The IJB continues to build on the long standing delivery of integrated health and care services within East Renfrewshire and the continued and valued partnership working with our community, the third, voluntary and independent sectors, facilitating the successful operation of the Health and Social Care Partnership (HSCP). The chart below shows the governance, relationships and links with partners which form the IJB business environment.



Key Messages, Operational Highlights and Challenges

This was a very challenging year for the HSCP as we worked to balance meeting the demand for services within the allocated budget. We needed to deliver £7.1 million savings as part of our plans to balance our budget and we were not able to do this and ended the year with a shortfall of £2.5 million against this target.

We used £1.9 million reserves on a planned basis to support us to redesign how we deliver services and achieved £2.7 million of savings during the year.

In addition to this savings shortfall we also had cost pressures from delivering services of £2.2 million. This was after all actions were taken to reduce costs and all available reserve funding applied.

This meant we ended the year with an operational deficit of £4.7 million.

This meant during the financial year 2023/24 we moved to a financial recovery position and had a number of discussions with both of our partners; East Renfrewshire Council and NHS Greater Glasgow and Clyde. Both partners have provided additional funding, on a non-recurring basis, for 2023/24 to eliminate this deficit:

- East Renfrewshire Council provided an additional £2.6 million
- NHS Greater Glasgow and Clyde provided an additional £2.1 million

The main operational challenges that led to the increased cost pressures were meeting demand for Care at Home, the cost of special observations within the Learning Disabilities In-Patients service which we host on behalf of all six HSCPs within Greater Glasgow and Clyde and the costs of prescribing through our GP practices.

The main area we fell short on delivering planned savings was from our Supporting People Framework. This framework is based on eligibility criteria and was put in place early in the financial year to support reviews of the level of care we provide; we knew we would have to stop providing lower levels of need. We underestimated the impact and timeframe for the culture and practice changes required to implement such significant change alongside managing the expectations of the individuals and families we support.

Critical Risk

•Indicates that there are <u>significant</u> risks to an individual's independent living or health and wellbeing likely to call for the *immediate* or *imminent* provision of social care services (high priority).

Substantial Risk

•Indicates that there are <u>major</u> risks to an individual's independent living or health and well-being likely to call for the *immediate* or *imminent* provision of social care services (high priority).

Moderate Risk

•Indicates that there are <u>some</u> risks to an individual's independent living or health and wellbeing. These may call for the provision of some social care services managed and prioritised on an ongoing basis or they may simply be manageable over the *foreseeable future* without service provision, with appropriate arrangements for review.

Low Risk

•Indicates that there may be some quality-of-life issues, but low risks to an individual's independent living or health and wellbeing with very limited, if any, requirement for the provision of social care services. There may be some need for alternative support or advice and appropriate arrangements for review over the *foreseeable future* or *longer term*.

As the year progressed it became clear that our approach was not delivering the level of cost reductions and savings needed and a formal financial recovery process was invoked at the November 2023 meeting of the Integration Joint Board.

Part of this process was to ensure that all possible earmarked and general reserves were released towards reducing the deficit, however this alone was insufficient and the difficult decision was taken by the IJB to move to delivering only substantial and critical levels of care. This means the IJB is in breach of its reserves policy, however the actions to mitigate cost pressures and the savings shortfall outweigh this, in the short-term.

Detailed discussions took place with both partners and culminated in additional funding, on a one-off basis, for 2023/24 to fund the deficit of £4.7 million. The IJB received an additional £2.1m from NHS Greater Glasgow and Clyde and £2.6 million from East Renfrewshire Council.

The savings shortfall and service pressure have been addressed by the IJB in the budget set for 2024/25, with more detail in the Future Challenges section of this report. Whilst our financial challenges have been at the forefront for the majority of the year it is important to recognise the invaluable work that continues across the HSCP to ensure we continue to support the people of East Renfrewshire.

Our Annual Performance Report for 2023/24 provides a detailed overview and demonstrates how the HSCP delivered our key priorities during the year. The commentary included in this

report provides an overview of some of the highlights and challenges we faced across the range of services we provide. All of our services support delivery of one or more of our strategic priorities.

Children and Families

Our children's services have continued to see increasing demand and increasing levels of complexity including children with diagnosed neurodevelopmental disorders and a high prevalence of families in crisis. Despite an increase in the number of child protection referrals we continue to ensure the multi-agency safeguarding process and plans are in place.

Our Healthier Minds team saw 385 children and young people referred, with 21% diagnosed with autistic spectrum condition / attention deficit hyperactivity disorder at point of referral. We are seeing an increased level of distress reflected in the main reasons for referral with the top 4 reasons: anxiety/stress, suicidal ideation, emotional regulation & trauma. 97% of the children and young people supported report improved mental and emotional wellbeing, up from 93% in the previous year.

The number of unaccompanied asylum seeking children continues to rise and make up almost a fifth of our looked after population. This rise is also being mirrored in out aftercare population too. The majority of young people have yet to have their asylum claim resolved so the statutory duties remain with the local authority.

We continue to support young people with complex needs as they transition from one life stage to another. We have seen an increase in the numbers of young people being referred for transitions assessment, planning and support, with numbers forecast to continue increasing in future years. A new HSCP Transitions Team has been created to support improvement in this activity. This team works between ERC Education, HSCP Children and Families Services, and HSCP Adult Services. The focus is to provide an improved transition from children's services to adult services for young people with very complex needs.

During 2023/24, East Renfrewshire Women's Aid service reported significant change and improvement in safety and wellbeing outcomes for women who have experienced domestic abuse, 100 reviews were completed with 93% of women assessed reporting overall improvement in their outcomes (up from 90% in 2022/23, and above our target of 85%) indicating the positive impact of support. Women's Aid continue to provide emotional and practical support to women, children and young people with 1,059 women and children supported across the three core services. This compared to 1,086 during the same period last year, so a 2.5% reduction.

Supporting People at Home

We continued to support people to live independently and well at home, despite additional demand pressures due to more people seeking support at home. We are also seeing increased levels of frailty and complexity; 80.4% of adults supported at home agreed that they are supported to live as independently as possible with 89% reporting 'living where you/as you want to live'. 91% of adults supported at home reported that their 'living where

you/as you want to live' needs were being met (up from 89% in 2022/23, and ahead of our 90% target). In East Renfrewshire, 96.8% of local people aged 65+ live in housing rather than a care home or hospital – meeting our target and better than the Scottish average. The demand for supporting people at home is a significant factor in the financial challenges faced by the HSCP.

During the year our Initial Contact Team supported 86% of people with advice, resources, signposting and / or referral to our third sector and community groups. This meant that only 14% of people joined the waiting list for assessment. This is an improvement from 16% for the same period in 2022/23.

The Talking Points partnership continues to provide an excellent resource sharing referrals across the East Renfrewshire. There were 552 contacts throughout 2023/24, with the main areas of support including befriending, isolation and loneliness, carer support and requests for local groups and activities.

To further strengthen the development of the model, additional funding was received from East Renfrewshire Council to employ a post for a fixed time period; this will help to build resilience within this service model and respond to the changing needs associated with the Supporting People Framework.

In partnership with Voluntary Action East Ren (VAER) the HSCP has supported the delivery of the Home Safely project which links with the HSCP Home from Hospital and Intermediate Care Teams. Home Safely provides short term support (6-8 weeks) for isolated residents to re-connect with their communities after a stay in hospital. This project aims to support vulnerable residents to feel more supported and to settle home following discharge from a hospital or care setting. The intention is that residents are more connected to social activities. It is also an intention that support services, with HSCP staff are more connected to community activities. During 2023/24 we saw:

- 37 Referrals
- 22 Residents matched with volunteers. Participants now attending activities within their local area

Supporting People with Learning Disabilities

During 2023/24 our Learning Disability Team underwent an unannounced inspection by the Care Inspectorate. The Inspection recognised the service as being 'Very Good' for both Leadership and Health and Wellbeing indicators.

During the year we also saw the transformation of the former Learning Disability Day Services buildings into Community Hubs in partnership with VAER. This approach supports developing resources and activities available to all. In order to enable a shift from Day Services to Day Opportunities to provide person-centred and outcome-focussed support in a variety of forms, the service was successfully registered as a dispersed service, a subcategory of Care at Home.

Specialist Learning Disability Services

The service hosts three in-patient wards on behalf of all 6 HSCPs within Greater Glasgow and Clyde. This was a particularly challenging year managing an unplanned decant from one ward for a short period due to repairs, combined with a very high level of staffing across all three wards required given the particular patient mix and dynamics throughout the year.

The pilot year for health checks for people with a Learning Disability (a Scottish Government policy) was successfully completed with 76% of referrals coming via GPs. Of the 262 people referred 212 took up the offer of a health check and 81% resulted in onward referrals for a range of conditions and treatment.

The Community Living Change Fund continues and is aligned to NHSGGC ambitions to redesign services for people with complex needs including learning disabilities and autism, and for people who have enduring mental health problems. East Renfrewshire continues to lead and support fellow HSCPs with the priorities aligned to this fund. Whilst this non-recurring funding is time limited our local programme of work to redesign both inpatient and community services will continue.

Protecting and Supporting Adults at Risk of Harm

Adult Support and Protection activity has continued to rise with a 10% increase in inquiries from the previous year and the associated number of investigations increased by 25% (having increased by 33% in the previous year). During the year a Large Scale Investigation (LSI) was conducted in relation to a privately operated care home.

Whilst this was challenging on many fronts the overall feedback was that the HSCP process was supportive and promoted collaborative working. This helped to ensure all recommendations made were fully completed. The Care Home Management team advised that they found the LSI to be a very beneficial and supportive process. They said that they had never experienced this from any other authority, and felt previous experiences of LSI were punitive rather than supportive.

Care at Home

We have continued to experience demand pressure on our Care at Home service with increased referrals and demand outstripping supply at points during the year. This has meant that we had to buy services at a higher rate than that we would normally pay adding to our cost pressures. There was an unannounced inspection by the Care Inspectorate in January 2024, where the service was evaluated as adequate.

Performance for our reablement service improved in 2023/24 with 64% of people having their care need reduced following a period of reablement (up from 48% in 2022/23). However, although performance has improved, service user numbers reduced during the period due to staff absence in the service and also greater complexity of people being referred.

We continue to work to maintain a positive balance of care. We have managed to support 63% of people aged 65+ with intensive care needs (> 10 hours) to receive care at home, this is down slightly from 64% in 2022/23 but remains ahead of target.

We are not seeing a reduction in the complexity of people being supported, leading to an increase in the number of people requiring 2 to 1 levels of support, against a backdrop of recruitment challenges, both within the HSCP and by our partners. We continue to work hard to get people out of hospital as soon as possible, without delay.

Reducing Unplanned Hospital Care

During the year we have continued to implement, review and further develop the unscheduled care pathways aligned to the NHS Greater Glasgow and Clyde Falls and Frailty Programme.

This work focusses on identification, assessment and management of frailty in the community, and facilitation of early discharge from hospital, and is supported by the Home First Response Frailty service alongside the Community Rehabilitation Team. The Integrated Community Falls pathway in partnership with Scottish Ambulance Service (SAS) has seen steady monthly referral numbers for individuals who have fallen at home, but following assessment do not need to be taken, by the Scottish Ambulance Service to hospital.

There have been excellent patient outcomes for those reviewed by HSCP and supported in their home environment. Additional pathways for all care homes within the HSCP have been implemented through the Care Homes Falls pathway and Call Before You Convey model, increasing care home access to advanced clinical decision making and minimising conveyance to hospital where appropriate. Future care planning through the extension of anticipatory care plans both for individuals in their own homes and in care homes has been an ongoing focus for the partnership to ensure individuals and their carers have recorded and shared what matters most if there are changes in their life, health or care.

The partnership has continued to perform well, both within the health board area and in comparison across Scotland, in supporting people fit for discharge from hospital to return home or to a homely setting without delay.

Discharges with delay averaged seven delays for 2023/24, down from eight for 2022/23 but this is still high for East Renfrewshire as historically this averaged three or four before the pandemic. Adult bed days lost to delayed discharge increased slightly to 4,821, up slightly from 4,652 for 2022/23.

This is being driven in part by some people staying in hospital longer than they may need to because of complex needs where it may take time to source the right level of community based care and accommodation and sometimes by the legislative timescales required for adults with incapacity. Our Hospital to Home team work to deliver timely and appropriate discharges from hospital. Our performance for delays remains among the best in Scotland. We continue to support the hospital discharge efforts by promoting the use of intermediate care beds where a care at home package cannot be put in place straight away.

Unplanned hospital attendances and admissions are stable (having increased slightly and remaining within target) and have not returned to pre-pandemic levels. We continue to perform ahead of target for the rate of emergency readmissions.

Supporting People Experiencing Mental III-Health and Supporting Recovery from Addiction

We continue to experience a high level of demand within our recovery services (Alcohol and Drug Recovery Service (ADRS), Adult Mental Health Team, Primary Care Mental Health Team, and Older Adult Team).

Within Psychological Therapies we are still seeing high referral rates, with 78.3% of people seen within the 18 week target, so short by 12%. This service has had very significant recruitment challenges. Our Primary Care Mental Health Team are seeing all people starting any required treatment within the 18 week target time. Despite the demand and capacity challenges we saw that our rate of hospital admissions for mental health remained low at 1.2 admissions per 1,000 population.

For those accessing recovery-focused alcohol and drug treatment, 93% of people started treatment within 3 weeks of their referral date during 2023/24. We have seen a 122% increase in blood bourne virus testing in patients who are receiving Medication Assisted Treatment and 99% of whom have now been tested, with the other 1% declining to participate. Specific training has been provided to both health and social work staff on how to reduce transmission through safer practices and provide support.

We take a holistic approach to promoting mental health and wellbeing including promoting physical activity linked to mental wellbeing and work in partnership with Voluntary Action East Ren, funded by Paths 4 All and NHSGGC. This includes community health walks, strength and balance classes, healthier minds sessions and alcohol brief interventions and counselling sessions.

Through our Alcohol and Drugs Partnership (ADP) we continue to deliver the priorities in the East Renfrewshire Alcohol and Drugs Strategy. During 2023/24, significant progress was made in a range of areas including:

- Developing a business case for investing ADP reserves in the design and implementation of a Community Recovery Hub
- Work is now progressing on the recovery hub initiative. Draft building plans developed and discussed with members of the recovery community and local partners
- Community steering group in the process of being established, with three engagement meetings held and a site visit to the potential hub premises
- A range of activities to ensure that service user experiences shape services including interviews and focus groups to gather feedback on implementation of the Medication Assisted Treatment Standards conversation cafes to inform the development of occupational therapy within the Alcohol and Drug Recovery Service (ADRS)
- ADRS and children and families social work collaborated on a whole family support
 programme for family members of all ages affected by alcohol/drug harms. Aspects of
 the programme include group work with young people, family inclusive events,

- development of a play therapy programme and an outdoor learning programme for children and young people
- 22 staff from across the alcohol and drugs partnership participated in Community Reinforcement and Family Training (CRAFT) which will build capacity and enhance professional practice in supporting families affected by alcohol and drugs

Glasgow Council on Alcohol (GCA) have been commissioned to deliver Alcohol Brief Interventions (ABIs), alcohol counselling sessions and training on the delivery of ABIs to staff across the HSCP and partners. 568 ABIs have been delivered to date (target 419) along with 379 alcohol counselling sessions. These interventions have taken place in leisure centres, libraries, Voluntary Action market places, community centres and food banks. Staff training on ABIs was delivered during the year.

Unpaid Carers

Working with East Renfrewshire Carers Centre, we have continued to ensure that carers have had access to guidance and support throughout the year. We refreshed our Carers Strategy for the period 2024 to 2026 and will continue to work with our Carers Collective to progress and monitor progress of the key activities that will deliver positive outcomes for carers.

We know that carers have been adversely impacted by cost of living challenges and the partnership between the Centre and East Renfrewshire Citizens Advice Bureau ensured that carers were supported with grant funding as well as wider support covering practical and emotional needs.

Community Justice

The provision of Community Payback Orders (CPOs) was significantly impacted by the pandemic. However, the proportion of CPOs completed within court timescales has continued to improve steadily and was 89% for 2023/24, up from 83% in 2022/23 and ahead of target (80%).

We continue to support people with convictions into employment and volunteering. A new justice employability programme, Moving Forward 2 Change (MF2C), began in June 2023, resulting in a 181% increase in participants. 57% of participants achieved positive employability and volunteering outcomes, down from 64% in 2022/23. Although missing our target of 60% all other participants on the programme demonstrated a positive training or educational outcome.

The HSCP delivers accredited programmes aimed at reducing reoffending. The criminal justice service uses appropriate risk assessment tools to identify need and reduce the risk of further offending and all staff access accredited risk assessment tool training. Justice Social Workers have undertaken training in the Throughcare Assessment Release Licence (TARL) process which will strengthen collaborative risk assessments between community-based and prison-based Social Work. All Justice staff are now trained in this approach.

New staff have accessed Trauma Informed Practice training as it has become available. All Justice Social Work Staff have now completed their Level 3 Trauma training. This has been

complemented by all staff undertaking a range of training including cognitive behavioural therapy work.

The HSCP works to deliver a whole systems approach to diverting both young people and women from custody. The Justice Social Work Service continue to provide assessments and interventions within the Diversion from Prosecution scheme. Staff continue to utilise Justice Social Work Reports to explore all available community-based options where appropriate.

Staff Resilience and Wellbeing

Our staff across the HSCP continue to deliver services with incredible resilience, commitment and creativity. This ongoing dedication has allowed us to work through a difficult year including the impact on a reducing workforce as we try to manage our financial pressures.

Covid-19 and Flu Vaccination Programme

The HSCP continued to deliver vaccinations to care home residents and staff, as well as housebound patients within East Renfrewshire as part of the winter and booster vaccination programmes. The HSCP again supported the vaccination clinics run by Greater Glasgow and Clyde with weekend clinics were held at Barrhead and Eastwood Health and Care Centres.

Climate Change

Whilst the IJB completed the required Public Sector Compliance Report with Climate Change Duties 2022, the information was minimal as the IJB itself does not hold assets or directly deliver services. These are delegated to either the health board or the local authority. Therefore the accountability and responsibility for climate change governance and delivery sits with our partner organisations, with the HSCP supporting such delivery.

Other Support and Service Impacts

Our nationally hosted service, the Scottish Centre of Technology for the Communication Impaired (STCTI) has continued to support individuals across 12 health boards in Scotland making full use of remote and virtual communication.

Our hosted Autism service is still seeing very high demand for assessment and diagnosis with a 200% increase since 2020. This has meant significant capacity challenges and as the service was required to focus on diagnosis this diminishes capacity to support people after a diagnosis.

Our partner East Renfrewshire Council provided £0.853 million non-recurring support in 2023/24 for the HSCP to deliver a number of initiatives related to Covid-19 recovery:

- Increasing our Talking points capacity to support the development of more community groups
- Extend the warm spaces and community cafe initiatives in our Health & Care centres
- Additional staffing cover to help meet pressures over the winter months
- Wellbeing and recovery support along with "go bags" to support domestic abuse survivors
- Financial support for foster carers, recognising the cost of living challenges

- Support to extend the staff and our partners wellbeing programme within the HSCP
- Provide additional materials to support community justice work
- Provide additional wellbeing support for vulnerable individuals, particularly those with additional support needs
- Housing and mental health support for our young people
- Funding to work with older children as they transition into adult services
- Support work for young people affected by drugs and alcohol

Key Risks and Uncertainties

The IJB regularly reviews its Strategic Risk Register over the course of each year; there are currently 12 risks rated red, amber or green (RAG) depending on the likelihood and severity of the impact. This is one less risk than in 2022/23 as Failures within an IT System is no longer considered a strategic risk.

The trend shows whether the risk has increased, decreased or is unchanged, from the previous year. The table below summarises those risks and shows the RAG rating of each after mitigating actions to minimise impact.

Area of Risk	RAG	Trend
Death or significant harm to a vulnerable individual		-
Scottish Child Abuse Inquiry		
Child, Adult and Multi-Agency Public Protection Arrangements		-
Financial Sustainability		
Failure of a provider		
Access to Primary Care		
Increase in Older Population		
Workforce Planning and Change		
Increase in children & adults with additional support needs		
In-House Care at Home Service		
Business Continuity, Covid-19 & Recovery		
Analogue to Digital Switchover		

The link to our strategic risk register is included at the end of this document. The full risk register provides details of all the risks above and shows the risk rating pre and post mitigating actions.

The one red risk post mitigating actions is Financial Sustainability. This has been a red risk for a number of years for the HSCP given the pre and post pandemic savings required to deliver a balanced budget, managing demographic and demand pressures, managing the complexity and volatility of prescribing costs, the continued impact of Covid-19 and the ongoing economic factors including cost of living pressures. This culminated in a financial recovery process in 2023/24. The IJB members are fully aware of the challenges and risks we are facing and this is regularly discussed at meetings and seminars.

In addition to our Strategic Risk Register, each service area holds an operational risk register and business continuity plan. In addition to the risks shown above there are also a number of

uncertainties facing the IJB and these are identified in the future challenges section within this report.

2023/24 Strategic Performance - Achievements and Challenges

Our Annual Performance Report demonstrates how we review our performance for 2023/24 against local and national performance indicators and against the commitments within our Strategic Plan. We take a quarterly update report to the Performance and Audit Committee of the IJB throughout the year. The information below provides and overview of the areas where we have performed particularly well and those areas where we need to focus improvement. The data shows that despite the severe pressures the partnership is facing we have continued to support our most vulnerable residents and have performed well against many of our outcome-focused performance indicators.

The extract below shows the headline indicators we look at each year to assess our performance. The RAG status and trend arrows are explained below. Intended performance direction is given in the description of each indicator.

Key to performance status								
Green	Performance is at or better than the target							
Amber	Performance is close (approximately 5% variance) to target							
Red	Performance is far from the target (over 5%)							
Grey	No current performance information or target to measure against							

Direction of travel*							
Performance is IMPROVING							
	Performance is MAINTAINED						
•	Performance is WORSENING						

^{*}For consistency, trend arrows always point upwards where there is improved performance or downwards where there is worsening performance including where our aim is to decrease the value (e.g. if we successfully reduce a value the arrow will point upwards).

Where We Have Performed Well

to improve me	ntal wellk 2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year
Percentage of children with child protection plans assessed as having an increase in their scaled level of safety at three monthly review periods. (Aim to increase)	100%	100%	100%	84%	87.5%	n/a	n/a	
% Looked After Children with more than one placement within the last year (Aug- Jul). (LGBF) (Aim to decrease)	n/a	Data only	14.4%	20.8%	20%	18.8%	24.5%	•
Balance of Care for looked after children: % of children being looked after in the Community (LGBF) (Aim to increase)	n/a	Data only	92.2%	92.7%	91.1%	94.9%	98.0%	•

We have seen continuing strong performance on supporting our care experienced children (no children experiencing three or more placements); and positive outcomes for child protection cases (100% with increased levels of safety). We saw a slight decline in the proportion of children looked after in the community. However, at 92% our balance of care is very positive, comparing with a national average of 89% of children being looked after in the community.

Strategic Priority 2 - Working together with people to maintain their independence at
home and in their local community

Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year
Percentage of people aged 65+ who live in housing rather than a care home or hospital (MSG) (Aim to increase)	n/a	97%	97%	97%	97%	97%	95.9%	
People reporting 'living where you/as you want to live' needs met (%) (Aim to increase)	91%	90%	89%	89%	91%	88%	92%	•
Percentage of those whose care need has reduced following re- ablement (Aim to increase)	63.9%	60%	48%	60%	31%	67	68	•

We continue to support people to maintain their independence at home. 97% of people aged 65+ live in housing rather than a care home or hospital. 63% of people aged 65+ with intensive care needs (i.e. requiring 10 hours or more of support per week) are receiving care at home (ahead of our target). Our outcome measure shows that 91% of people are living where and as they want to live, reflecting our commitment to supporting independence. The percentage of people with reduced care needs following re-ablement / rehabilitation increased significantly during the year to 64% (from 48% in 2022/23).

Strategic Priori	ty 3 - Wo	rking tog	ether to s	upport n	nental he	alth and	well-bein	g
Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year
Mental health hospital admissions (age standardised rate per 1,000 population) (Aim to decrease)	n/a	2.3	1.2	1.2	1.4	1.6	1.5	•
Achieve agreed number of screenings using the setting-	568	419	173	0	5	33	93	•

Strategic Priori	ty 3 - Wo	rking tog	ether to s	support n	nental he	ealth and	well-bein	g
Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year
appropriate screening tool and appropriate alcohol brief intervention, in line with SIGN 74 guidelines. (Aim to increase)								
Percentage of people with alcohol and/or drug problems accessing recovery-focused treatment within three weeks. (Aim to increase)	93%	90%	96%	95%	95%	89%	95%	•

The latest data shows that the rate of mental health hospital admissions remains low in East Renfrewshire. During 2023/24 we saw continuing positive performance for drug and alcohol service waiting times with 93% accessing treatment within 3 weeks. We have been delivering increasing numbers of alcohol brief interventions (ABIs) – 568 up from 173 the previous year.

Strategic Prior	rity 4 - Wo	orking to	gether to	meet pe	ople's he	ealthcare	needs	
Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year
No. of A & E Attendances (adults) (Aim to decrease) (MSG data)	17,824*	18,335	17,356	16,877	13,677	20,159	20,234	•
Number of Emergency Admissions: Adults (Aim to decrease) (MSG data)	6,973*	7,130	6,692	7,894	7,281	7,538	7,264	•
Emergency readmissions to hospital within 28 days of discharge (rate per 1,000 discharges) (Aim	73*	100	69	77	98	78	79	•

Strategic Priority 4 - Working together to meet people's healthcare needs										
Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year		
to decrease) NI- 14										

^{*}Full year data not available for 2023/24. Figure relates to 12 months Jan-Dec 2023.

In East Renfrewshire, unplanned hospital attendances and admissions are stable (having increased slightly and remaining within target) and have not returned to pre-pandemic levels. We continue to perform ahead of target for the rate of emergency readmissions.

	Strategic Priority 5 - Working together with people who care for someone ensuring they are able to exercise choice and control in relation to their caring activities										
Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year			
People reporting 'quality of life for carers' needs fully met (%) (Aim to increase)	84.5%	80%	80%	92%	91%	92%	78%	•			

We continue to support our unpaid carers in partnership with local support organisations. Our satisfaction measure on 'quality of life' for carers declined in 2022/23 reflecting the pressures of the pandemic period. In 2023/24, performance improved to 85% (up from 80%). Through our new Carers Strategy we are focused on ensuring that carers have access to the guidance and support they need.

Strategic Priority 6 - Working together with our partners to support people to stop offending									
Indicator	2023/24	2022/23	Current Target	2021/22	2020/21	2019/20	2018/19	Trend from previous year	
Community Payback Orders - Percentage of unpaid work placement completions within Court timescale. (Aim to increase)	89%	80%	83%	81%	75%	71%	84%		

The provision of Community Payback Orders (CPOs) was significantly impacted by the pandemic. However, the proportion of CPOs completed within court timescales has continued to improve steadily; now at 89% (up from 83%) and ahead of our target.

Strategic Priority 7 - Working together with individuals and communities to tackle health inequalities									
Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year	
Premature mortality rate per 100,000 persons aged under 75. (European age- standardised mortality rate) (Aim to decrease) NI-11	n/a	Data Only	264	333	334	295	308		

As a partnership we are focused on tackling health inequalities and improving life chances for our residents. The premature mortality rate has dropped significantly and East Renfrewshire now has the lowest rate in Scotland.

Strategic Pri	Strategic Priority 9 - Protecting people from harm											
Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year				
% Change in women's domestic abuse outcomes (Aim to increase)	93%	85%	90%	87%	84%	79%	64%	•				

During 2023/24, we continued to improve personal outcomes for women and families affected by domestic abuse. Improved outcomes were at 93%, up from 90% in 2022/23.

Where Our Performance Needs to Improve

Strategic Priority 1 - Working together with children, young people and their families to improve mental wellbeing									
Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year	
Percentage of children and young people subject to child protection who have been offered	65%	100%	61%	62%	63%	n/a	n/a	•	

Strategic Priority 1 - Working together with children, young people and their families to improve mental wellbeing										
Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year		
advocacy. (Aim to increase)										
% Child Protection Re-Registrations within 18 months (LGBF) (Aim to decrease)	n/a	Data only	12.5%	0	0	15.8%	7.7%	•		

In line with our Signs of Safety approach and ongoing commitment to the UN Convention on the Rights of the Child, we expect all children involved with a statutory assessment to be offered advocacy support. Our reporting mechanism for this measure has recently been improved to ensure our figures highlight accurately the offer of advocacy or reasons why declined. We expect performance to improve for this measure next year.

The figure for re-registrations has increased from 0% for the previous reporting year (21/22). This is due to a very small number of children (2 (siblings) out of 16 CP cases = 12.5%) being re-registered within an 18 month period. Performance on this measure tends to fluctuate for East Renfrewshire due to the impact of a small number of cases.

Strategic Priority 2 - Working together with people to maintain their independence at home and in their local community										
Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year		
Number of people self-directing their care through receiving direct payments and other forms of self-directed support. (Aim to increase)	548	600	488	458	551	575	514	•		

We continue to work to maximise choice and control for the people we support and saw an increase in update of SDS in the 2023/24 but continued to miss our target. Due to the pressures facing the HSCP we are focusing our resources on people with higher levels of need and expect to see reduced number of people able to access SDS Options 1 and 2.

Strategic Priori	ty 3 - Wo	rking tog	ether to s	support n	nental he	ealth and	well-bein	g
Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year
Percentage of people waiting no longer than 18 weeks for access to psychological therapies (Aim to increase)	84%	90%	75%	76%	74%	65%	54%	•
% of service users moving from drug treatment to recovery service (Aim to increase)	4%	10%	5%	9%	6%	16%	22%	•

Performance on waiting times for psychological therapies improved during the year and we are moving towards the national target of 90%. Over the course of 2023/24, 416 individuals started Psychological Therapy within mental health services. The longest wait over the course of this year was 30 weeks. All services have had unforeseen staffing absences and vacancies, contributing to limited appointments being available and leading to waiting times increasing. Nevertheless, our teams have been working to minimise any decline in performance.

The proportion of people moving through treatment to recovery services decreased to 4% during the year (from 5%). Supporting people to progress through treatment into recovery continues to be a key priority however this can be influenced by a number of factors such as individuals experiencing crisis or ill health.

Strategic Prior	Strategic Priority 4 - Working together to meet people's healthcare needs									
Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year		
Acute Bed Days Lost to Delayed Discharge (Aged 18+ including Adults with Incapacity) (Aim to decrease) (MSG data)	4,821*	1,893	4,625	4,546	2,342	1,788	2,284	•		

^{*}Full year data not available for 2023/24. Figure relates to 12 months Jan-Dec 2023.

As a result of the continuing pressures on the social care sector and particularly our care at home service during the year, we saw a higher than usual average number of delayed discharges and the number of hospital bed days lost to delayed discharge as a result of the

continuing pressures on the social care sector and particularly our care at home service. Increased pressures on care at home services through higher demand and staff capacity issues, and higher levels of frailty and complexity among people returning to the community from hospital impacted performance on delays. However, we continue to be one of the best performing partnerships for minimising delays in Scotland.

Strategic Priority 6 - Working together with our partners to support people to stop offending									
Indicator	2023/24	2022/23	Current Target	2021/22	2020/21	2019/20	2018/19	Trend from previous year	
% Positive employability and volunteering outcomes for people with convictions. (Aim to increase)	57%	60%	67%	56.5%	66%	65%	55%	•	

We continue to support people with convictions into employment and volunteering. A new justice employability programme began in June 2023, resulting in a 181% increase in participants. Although employment/volunteering outcomes dropped from 64% to 57% all other participants took up training/education opportunities.

Strategic Priority 7 - Working together with individuals and communities to tackle health inequalities									
Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year	
Breastfeeding at 6-8 weeks most deprived SIMD data zones (Aim to increase)	n/a	25%	19.2%	17.9%	7.5%	15.4%	22.9	•	

Although we remain below our target, breastfeeding rates in our most disadvantaged neighbourhoods have increased to 19.2% (22/23); up from 17.9% in 21/22 and 7.5% in 20/21. The drop-off rate between first visit and 6-8 weeks is very low. The gap in breastfeeding rates between the most affluent (SIMD 5) and the most deprived (SIMD 1) areas, has decreased for the third year in a row from 36.6% in 2019/20 to 25.7% in 2022/23.

Organisationa	Organisational measures									
Indicator	2023/24	Current Target	2022/23	2021/22	2020/21	2019/20	2018/19	Trend from previous year		
Percentage of days lost to sickness absence for HSCP NHS staff (Aim to decrease)	8.3%	4.0%	7.5%	6.9%	5.5%	7.3%	6.8%	•		
Sickness absence days per employee - HSCP (LA staff) (Aim to decrease)	19.5	17.5	20.3	14.7	13.6	19.1	16.4	•		

Sickness absence remains an area of focus for the partnership. Although absence has increased amongst NHS staff, we have seen an improvement in absence for Council staff groups during 2023/24. This can be attributed to the increased support measures implemented within Care at Home including Absence Panels and increasing the level of resource to support.

Financial Performance

Funding 2023/24

The net total health and social care funding from our partners during the financial year 2023/24 was £189.470 million to meet the cost of the services we provided. In addition to this, as part of the financial recovery process we received additional non-recurring funding; £2.657 million from East Renfrewshire Council and £2.095 million from NHS Greater Glasgow and Clyde to fund the deficit for the year.

	£ Million
NHS Greater Glasgow and Clyde Primary Care	90.484
NHS Greater Glasgow and Clyde Large Hospital Services	30.194
East Renfrewshire Council Social Care	68.343
East Renfrewshire Council Housing Aids and Adaptations	0.449
Net Funding per agreed budgets	189.470
Additional Funding from NHSGGC (budget)	2.095
Additional Funding from East Renfrewshire Council (income)	2.657
Total All Funding from Partners	194.222

The Comprehensive Income and Expenditure Statement (CIES) (page 57) shows the IJB gross income as £220.555 million, as that statement shows service income, grant funding and resource transfer which are included within the net funding from our partners in the table above. The purpose of the CIES presentation is to show the gross cost of the services we provide.

The legislation requires the IJB and Health Board to put in place arrangements to support the set aside budget requirements for unscheduled care (for large hospital services). The Greater Glasgow and Clyde wide Unscheduled Care Commissioning Plan continues to evolve and the latest plan and financial framework was last presented to the IJB in November 2022.

Resource Transfer shows NHS Greater Glasgow and Clyde specific funding for historic bed closures and is used to purchase care packages and community-based services. The historic Social Care Fund which was allocated by the Scottish Government to IJBs, via the NHS funding stream, to meet specific costs such as living wage and other fair work practices and adult demographic pressures is included within resource transfer.

Financial Performance 2023/24

The annual report and accounts for the IJB covers the period 1st April 2023 to 31st March 2024. The budgets and outturns for the operational services (our management accounts) are reported regularly throughout the year to the IJB, with the final position summarised:

Service	Unaudited Budget	Spend	Variance (Over) / Under	(Over) / Under
	£ Million	£ Million		%
Children & Families	13.777	12.989	0.788	5.72%
Older Peoples Services	27.544	27.764	(0.220)	(0.80%)
Physical / Sensory Disability	6.234	6.348	(0.114)	(1.83%)
Learning Disability – Community	19.248	19.687	(0.439)	(2.28%)
Learning Disability – Inpatients	9.959	11.330	(1.371)	(13.77%)
Augmentative and Alternative Communication	0.295	0.219	0.076	25.76%
Intensive Services	15.788	18.287	(2.499)	(15.83%)
Mental Health	6.274	5.733	0.541	8.62%
Addictions / Substance Misuse	2.417	2.155	0.262	10.84%
Family Health Services	30.411	30.475	(0.064)	(0.21%)
Prescribing	17.318	19.780	(2.462)	(14.22%)
Criminal Justice	0.074	0.086	(0.012)	(16.22%)
Finance and Resources	9.488	8.726	0.762	8.03%
Net Expenditure Health and Social Care	158.827	163.579	(4.752)	(2.99%)
Housing	0.449	0.449	-	-
Set Aside for Large Hospital Services	30.194	30.194	-	-
Total Integration Joint Board	189.470	194.222	(4.752)	(2.99%)
Additional Funding from NHSGGC	2.095	_	2.095	-
Additional Funding from ERC	-	(2.657)	2.657	-
Total Integration Joint Board	191.565	191.565	-	-

The operational overspend, before the additional funding from both partners is applied, is £4.752 million (2.99%) and is marginally better than the last reported position taken to the IJB which was £5.361 million of an overspend. The main variances to the budget were:

- £2.499 million overspend within Intensive Services from Care at Home cost pressures combined with unachieved savings
- £2.462 million overspend in prescribing resulting from both increased volume and costs
- £1.371 million overspend in the Learning Disability In-Patients service resulted from the level of additional staffing for special observations and managing the patient dynamics
- £0.788 million underspend in Children and Families was mainly from vacancy management and maximising available reserves
- The remaining overspends were primarily from savings shortfalls and the underspends were from vacancy management and release of reserves

Detailed reporting is taken to each meeting of the IJB throughout the year and in the latter months of 2023/24 frequent discussions took place with both partners as part of the financial recovery process.

The set aside budget is shown as nil variance as this currently is not a cash budget to the HSCP and the annual amount reported is agreed each year with NHS Greater Glasgow and Clyde. The actual expenditure share for 2023/24 was identified as £30.194 million and is £1.590 million less than our notional budget, however there is nil cash impact. This notional underspend is net of increased costs in relation to older people, offset by less than our notional share of acute, emergency and respiratory medical services. As outlined earlier, work is ongoing to agree the mechanism for bringing the set aside budget into an operational stage and this includes ensuring a balanced budget will be achieved.

A number of services are hosted by the other IJBs who partner NHS Greater Glasgow and Clyde and our use of hosted services is detailed at Note 4 (Page 67). The hosted services are accounted for on a principal basis, as detailed at Note 11 (Page 75).

The information above reflects our management accounts reporting throughout 2023/24 whilst the CIES (Page 57) presents the financial information in the required statutory reporting format; the movement between these of £0.570 million is a result of the management accounting treatment of reserves:

Reconciliation of CIES to Operational Underspend	£ Million	£ Million
IJB operational underspend on service delivery *		0.000
Reserves planned use during the year	(4.526)	
Reserves added during the year	0.344	
Net movement between management accounts and CIES		(4.182)
IJB CIES overspend		(4.182)

^{*} Inclusive of financial recovery funding from partners

Reserves

We used £4.526 million of reserves in year and we also added £0.344 million into earmarked reserves. The year on year movement in reserves is set out in detail at Note 8 (Page 73) and is summarised:

	£ Million	£ Million
Reserves at 31 March 2023		6.046
Planned use of existing reserves during the year	(4.526)	
Funds added to reserves during the year	0.344	
Net decrease in reserves during the year		(4.182)
Reserves at 31 March 2024		1.864

The purpose, use and categorisation of IJB reserves is supported by a Reserves Policy and Financial Regulations, both of which were reviewed in September 2023.

The reserves of the IJB fall into three types:

- Ring-fenced: the funding is earmarked and can only be used for that specific purpose
- Earmarked: the funding has been allocated for a specific purpose
- General: this can be used for any purpose

As part of the financial recovery process for 2023/24 The IJB used all possible reserves available to mitigate cost pressures. This means the only reserves being taken into 2024/25 are for specific funding initiatives set by the Scottish Government or where funding is committed within an existing project.

Ring-Fenced Reserves

The spend in year was £1.113 million on existing initiatives and £0.1 million was added towards the end of the year for new Drug Intervention funding. The funding to support the development of a Recovery Hub at £0.489 million is the material element of the £0.8 million balance taken to 2024/25.

Earmarked Reserves

Our earmarked reserves are in place to support a number of projects and included bridging finance to support the delivery of savings. We used £3.141 million during the year and will take £1.064 million into 2024/25. This balance supports commitments already in place and the three main areas are supporting the whole family wellbeing project, trauma informed practice and the learning disability community living change fund. There are no bridging finance reserves remaining for 2024/25.

General Reserves

Our general reserve is now nil as we used the £0.272 million we held as part of the financial recovery process. The IJB recognises that this means it is not compliant with its Reserves Policy which advocates a 2% of budget should be the level of reserves held.

The use of reserves was reported to the IJB within our routine revenue reporting and during 2023/24 and this included the decision to un-hypothecate every reserve possible to mitigate cost pressures.

Future Challenges

The IJB continues to face a number of challenges, risks and uncertainties in the coming years and this is set out in our current Medium-Term Financial Plan (MTFP) for 2024/25 to 2028/29 and our Strategic Plan for 2022/23 to 2024/25. These key strategies also inform our strategic risk register and collectively support medium-term planning and decision making.

The IJB operates in a complex environment with requirements to ensure statutory obligations, legislative and policy requirements, performance targets and governance and

reporting criteria are met whilst ensuring the operational oversight of the delivery of health and care services.

UK and Scottish Government legislation and policies and how they are funded can have implications on the IJB and how we use our funding over time.

The most significant challenges for 2024/25 and beyond include:

- delivering savings to ensure financial sustainability, ensuring sufficient flexibility to allow for slippage, shortfalls or changes
- recognising the tension between delivering a level of savings that will allow the IJB to start to rebuild reserves and protecting service delivery
- managing reduced service capacity as a result of savings and maintaining discharge without delay from hospital and other key indicators
- delivering on our Recovery & Renewal programme for areas of change, including the implementation of a new case recording system
- understanding the longer term impacts of Covid-19 on mental and physical health
- recruitment and retention of our workforce, particularly in the current cost of living crisis
- managing prescribing demand and costs in partnership with our GPs
- supporting the physical and mental health and wellbeing of our workforce and our wider population, again further impacted by the current cost of living challenges
- meeting increased demand for universal services without funding for growth, including increased population demand and new care homes opening within the area
- we may also need to prepare for the challenges and opportunities that may arise from a national care service

The IJB agreed its budget for the financial year 2024/25 on 27th March 2024 recognising the significant challenges brought forward from 2023/24 as well as new demand and cost pressures for 2024/25.

Those cost pressures are £17.023 million and are offset in part by available funding of £7.206 million; leaving a funding gap of £9.817 million. A savings programme is in place, with a target of £11.796 million; this is to ensure we deliver a minimum level of savings to close the funding gap and ideally achieve more savings than required in year. We know that £2.316 million of the funding that offsets the cost pressures in 2024/25 is non-recurring for the next two years so we are planning ahead to ensure we have sufficient recurring savings come 2026/27. We do not have reserves to offset any shortfall in 2024/25.

Revenue Budget	ERC	NHS	Total
	£m	£m	£m
1. Cost Pressures			
Pay	1.043		1.043
Inflation & Living Wage	4.736		4.736
Demographic & Demand	1.997		1.997
Legacy Savings	3.843		3.843
Service Pressures	1.500	0.600	2.100
Prescribing		3.304	3.304
-	13.119	3.904	17.023
2. Funding available towards pressures			
Recurring	4.894		4.894
Non-Recurring	2.312		2.312
	7.206	0	7.206
Unfunded Cost Pressures	5.913	3.904	9.817
Proposals to Close the Funding Gap			
Savings complete	0.871	0	0.871
Savings prioritised 1 to 4	7.021	1.889	8.91
Redesign proposals in development		2.015	2.015
	7.892	3.904	11.796

Pay award funding to be confirmed; every 1% equates to c£0.2m

Savings progress will continue to be reported to the IJB within the routine financial reporting and the Supporting People Framework is the most significant saving at c£4 million.

The budget report sets out the detail behind each of the cost pressures and it is important to note that these include contractual and policy requirements that must be met. The full detail of all savings is included in this report

Whilst the scale of this challenge is significant to East Renfrewshire, particularly as one the smaller HSCPs this is not unique; the national position across all public sector services shows a challenging financial outlook.

The 2023/24 budget overspend was mitigated by additional non-recurring funding from both our partners; this will not be an option in 2024/25.

Looking forward to 2025/26 and beyond in any one year the modelled cost pressure could range from £3.5 million to £8.6 million depending on the combination of factors.

It also needs to be recognised that these scenarios show the potential level of cost pressure and do not make any allowance for any funding that may offset any future cost. For example in prior years the Scottish Government has provided funding for some pay and non-pay cost pressures.

Given the current levels of uncertainty it is not possible to assume anything beyond a flat cash approach at this time.

The assumptions are also predicated on full and recurring delivery of the 2024/25 savings.

Demographic pressures remain a very specific challenge for East Renfrewshire as we have an increasing elderly population with a higher life expectancy than the Scottish average and a rise in the number of children with complex needs resulting in an increase in demand for services.

Economic challenges are significant as we are seeing little recovery in the global economy and although inflation is on a downward trend, particularly with utilities, although this is a slow decline. The biggest risk remains to the IJB remains the cost volatility in prescribed drugs with inflation remaining a significant factor (around 8% in 2023/24).

The cost of pay inflation is still comparatively high and although inflation across a range of goods and services (CPI) is falling, this dropped to 4% in December 2023, this is still well above the UK target of 2%.

Our population and households are not impacted equally by the cost of living crisis and we know those with lower income are disproportionately affected.

We have successfully operated integrated services for around 20 years so we have faced a number of challenges and opportunities over the years, including delivering significant levels of savings; this means that we need to take very difficult decisions and look at radical options for change.

Prescribing will not only rise in line with population increases but is also subject to many other factors. This area is so volatile it is difficult to accurately predict however system wide work is in place across NHS Greater Glasgow and Clyde to support the delivery of a range of actions to mitigate some of the cost pressures we are seeing

Maintaining Discharge without Delay performance is a key issue for us. In order to achieve the target we continue to require more community based provision and this is dependent on availability of care. The medium-term aspiration remains that the costs of increased community services will be met by shifting the balance of care from hospital services. The work to agree a funding mechanism to achieve this remains ongoing with NHS Greater Glasgow and Clyde and its partner IJBs through an Unscheduled Care Commissioning Plan.

The longer term impact on the on the sustainability of our partner care provider market in the post Covid-19 pandemic and current economic climate remains a significant issue. Our Strategic Commissioning plan sets out the detail on how we will work with our partners in the third and independent sectors in the coming years. The way we commission services may be impacted by the creation of a national care service. There is an increasing tension between cost expectations from care providers including those on national procurement frameworks and contracts and the funding, or more specifically the lack of that IJBs have to meet any additional increases

We plan to deal with these challenges in the following ways:

- Delivery of the required savings for 2024/25 with a deliberate intention to work to over-recover where possible to allow us to build back from financial recovery. Delivery of the Supporting People Framework savings programme is the most significant element of the programme
- Further develop full savings options for 2025/26 and beyond; this will include development of charging options for non-residential care and support
- Our Recovery and Renewal Programme continues and will focus on key projects to support the HSCP with major areas of change as well as short life projects to support delivery of benefits; this includes implementation of a new case recording IT system
- We will update our Medium-Term Financial Plan on a regular basis reflecting assumptions and projections as issues become clearer; this will also inform planning for our 2025/26 budget
- We will continue to monitor the impacts of Covid-19, economic and inflationary factors along with operational issues through our financial and performance monitoring to allow us to take swift action where needed, respond flexibly to immediate situations and to inform longer term planning
- We will review our Strategic Improvement Plan that was agreed by the IJB in January 2020 which set out the combined actions / areas for improvement from the Joint Strategic Inspection of the IJB in 2019 and from the Ministerial Strategic Group self-evaluation and the findings from the Audit Scotland Report: Health and Social Care Integration, also 2019. This work was paused during the pandemic and will be incorporated if and where required to current plans
- We will complete the review of our Integration Scheme; work has progressed during 2023/24 and this should be finalised in 2024/25 with partners
- We routinely report our performance to the IJB with further scrutiny from our Performance and Audit Committee and our Clinical and Care Governance Group, including follow up from any inspections. The service user and carer representation on the IJB and its governance structures is drawn from Your Voice which includes representatives from community care groups, representatives from our localities and representatives from equality organisations including disability and faith groups. This partnership working is a key element to mitigating the impacts of the Supporting People Framework
- Workforce planning will continue to support identification of our current and future requirements. Recruitment and retention of staff is key to all service delivery and we have mitigated as far as possible by minimising the use of temporary posts and developing our workforce and organisational learning and development plans. We are refreshing our 3year workforce plan. This will also include any implications from the Health and Care Staffing (Scotland) Act 2019
- We will continue with the redesign of the Learning Disability Inpatient bed model and progress the programme of health checks for people with a learning disability, following a successful pilot year

- Governance Code; we have robust governance arrangements supported by a Governance Code
- The IJB continues to operate in a challenging environment and our financial, risk and performance reporting continue to be a key focus of each IJB agenda

The future challenges detailed above and our associated response include the main areas of risk that the IJB is facing. The uncertainty of the current economic climate, the longer term impact of Covid-19 on our population, the capacity for the HSCP and its partners to meet continued demand and complexity whilst delivering such challenging savings remain significant risks.

Conclusion

East Renfrewshire Integration Joint Board is well placed in terms of its maturity to address the coming challenges, building on many years of delivering integrated health and social care services and continuing to lead on developing new and innovative models of service delivery. However maintaining financial sustainability whilst meeting the needs of our population is increasingly challenging.

The level of uncertainty over the medium to long term on funding, the long term pandemic impact on our population and the associated demand for services, with very difficult shorter-term financial challenges give a difficult outlook however we continue to plan ahead and prepare for a range of scenarios.

Katie Pragnell Chair Integration Joint Board

25th September 2024

Julie Murray
Chief Officer

Integration Joint Board 25th September 2024

Lesley Bairden ACMA CGMA Chief Financial Officer Integration Joint Board

25th September 2024

Statement of Responsibilities

Responsibilities of the Integration Joint Board

The IJB is required to:

- Make arrangements for the proper administration of its financial affairs and to ensure that one
 of its officers has the responsibility for the administration of those affairs (section 95 of the
 Local Government (Scotland) Act 1973). In East Renfrewshire IJB, the proper officer is the
 Chief Financial Officer.
- Manage its affairs to secure economic, efficient and effective use of resources and safeguard its assets.
- Ensure the annual accounts are prepared in accordance with legislation (The Local Authority Accounts (Scotland) Regulations 2014), and so far as is compatible with that legislation, in accordance with proper accounting practices (section 12 of the Local Government in Scotland Act 2003) and (Coronavirus (Scotland) Act 2020).
- Approve the annual accounts for signature.

I confirm that the audited Annual Accounts will be presented on 25th September 2024 for approval.

Katie Pragnell
Chair
Integration Joint Board 25th September 2024

Responsibilities of the Chief Financial Officer

The Chief Financial Officer is responsible for the preparation of the IJB's annual accounts in accordance with proper practices as required by legislation and as set out in the CIPFA/LASAAC Code of Practice on Local Authority Accounting in the United Kingdom (the Accounting Code).

In preparing these annual accounts, the Chief Financial Officer has:

- Selected appropriate accounting policies and applied them consistently.
- Made judgements and estimates that are reasonable.
- Complied with the legislation.
- Complied with the Local Authority Accounting Code (in so far as it is compatible with the legislation).

The Chief Financial Officer has also:

- Kept proper accounting records that were up-to-date.
- Taken reasonable steps for the prevention and detection of fraud and other irregularities.

I certify that the financial statements give a true and fair view of the financial position of East Renfrewshire Integration Joint Board as at 31st March 2024 and the transactions for the IJB for the period covering 1st April 2023 to 31st March 2024.

Lesley Bairden ACMA CGMA
Chief Financial Officer
Integration Joint Board 25th September 2024

Remuneration Report

Introduction

The Local Authority Accounts (Scotland) Regulations 2014 (SSI No. 2014/200) requires local authorities and IJBs in Scotland to prepare a Remuneration Report as part of the annual statutory accounts.

The IJB does not directly employ any staff in its own right. All staff are employed through either East Renfrewshire Council or NHS Greater Glasgow and Clyde. The report contains information on the IJB's Chief Officer's remuneration together with any taxable expenses relating to voting members claimed in the year. The remuneration of senior officers is determined by the contractual arrangements of East Renfrewshire Council and NHS Greater Glasgow and Clyde.

For 2023/24 no taxable expenses were claimed by members of the IJB.

The board members are entitled to payment for travel and subsistence expenses relating to approved duties. Payment of voting board members' allowances is the responsibility of the member's individual partnership body. Non-voting members of the IJB are entitled to the payment of travel expenses.

The IJB does not provide any additional remuneration to the Chair, Vice Chair or any other board members relating to their role on the IJB.

The information in the tables below is subject to external audit. The explanatory text in the Remuneration Report is reviewed by external auditors to ensure that it is consistent with the financial statements:

Integration Joint Board

The voting members of the IJB were appointed through nomination by East Renfrewshire Council and NHS Greater Glasgow and Clyde.

Senior Officers

The Chief Officer is appointed by the IJB in consultation with East Renfrewshire Council and NHS Greater Glasgow and Clyde. The Chief Officer is employed by East Renfrewshire Council and is funded equally between East Renfrewshire Council and NHS Greater Glasgow and Clyde.

The total remuneration received by the Chief Officer in 2023/24 amounted to £128,143 in respect of all duties undertaken during the financial year. The Chief Financial Officer total remuneration for the same financial year was £98,089.

Total 2022/23	Senior Officer	Salary, Fees and Allowances	Taxable Expenses	Total 2023/24
£		£	£	£
120,811	Julie Murray, Chief Officer	128,143	-	128,143
92,805	Lesley Bairden, Chief Financial Officer	98,089	-	98,089
213,616		226,232	-	226,232

Voting Board Members 2023/24		Total Taxable IJB Related Expenses
Anne-Marie Monaghan (Chair)	NHS Greater Glasgow & Clyde	-
Councillor Katie Pragnell (Vice Chair)	East Renfrewshire Council	-
Mehvish Ashraf	NHS Greater Glasgow & Clyde	-
Councillor Caroline Bamforth	East Renfrewshire Council	-
Councillor Paul Edlin	East Renfrewshire Council	-
Jacqueline Forbes	NHS Greater Glasgow & Clyde	-
Diane Foy	NHS Greater Glasgow & Clyde	-
Councillor Owen O'Donnell	East Renfrewshire Council	-

The equivalent cost in 2022/23 was nil for all IJB members.

The current Chair of the IJB, Anne-Marie Monaghan, will reach the end of her term in office at the end of June 2024 and the current Vice Chair, Katie Pragnell will take on the Chair. Mehvish Ashraf will take on the role of Vice Chair. Jacqueline Forbes will also reach the end of her term in office at the end of June 2024.

The Pension entitlement for the Chief Officer for the year to 31st March 2024 is shown in the table below, together with the contribution made by the employing body to this pension during the year.

	In Year Pensio	n Contribution	Accrued Pension Benefits		Benefits
Senior Officer	For Year to	For Year to		As at	Difference From
	31 March 2023	31 March 2024		31 March 2024	31 March 2023
	£	£		£'000	£'000
Julie Murray, Chief Officer	23,316 24,721	Pension	65	11	
Julie Multay, Chief Officer	23,310	24,721	Lump Sum	72	9
Lesley Bairden, Chief Financial	17,848	18,923	Pension	16	2
Officer	17,040	10,923	Lump Sum	-	-
Total	41 164	12 611	Pension	81	13
Total	41,164	43,644	Lump Sum	72	9

The Chief Financial Officer joined the pension scheme on appointment in August 2015 and under the terms of the scheme no lump sum benefit has been identified.

For the senior officers' pension benefits the statutory liability for any future contributions to be made rests with the relevant employing partner organisation. On this basis there is no pension liability reflected on the IJB balance sheet for the Chief Officer, Chief Financial Officer, or any other officers.

However, the IJB has responsibility for funding the employer's contributions for the current year for the officer time spent on fulfilling the responsibilities of their role on the IJB. The table above shows the IJB's funding during 2023/24 to support officers' pension benefits. The table also shows the total value of accrued pension benefits which may include benefits earned from a previous employment and from each officers' own contributions.

General Disclosure by Pay Bands

The regulations require the Remuneration Report to provide information on the number of persons whose remuneration was £50,000 or above. This information is provided in bands of £5,000.

Number of Employees 31 March 2023	Remuneration Band	Number of Employees 31 March 2024
-	£80,000 - £84,999	-
-	£85,000 - £89,999	-
1	£90,000 - £94,999	-
-	£95,000 - £104,999	1
-	£105,000 - £109,999	-
-	£110,000 - £114,999	-
-	£115,000 - £119,999	-
1	£120,000 - £124,999	-
_	£125,000 - £129,999	1

Katie Pragnell Chair

Integration Joint Board 25th September 2024

Julie Murray Chief Officer

Integration Joint Board 25th September 2024

Annual Governance Statement

Introduction

The Annual Governance Statement explains the IJB's governance arrangements and reports on the effectiveness of the IJB's system of internal control. This is in line with the Code of Corporate Governance and meets the requirements of the 'Code of Practice for Local Authority Accounting in the UK: A Statement of Recommended Practice', in relation to the Statement on the System of Internal Financial Control. This should ensure:

- A focus on the assessment of how well the governance framework is working and what actions are being taken.
- The importance of the role and responsibilities of partners in supporting IJB good governance is adequately reflected.

Scope of Responsibility

The IJB is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for and used economically, efficiently and effectively. To ensure best value the IJB commits to continuous quality improvement in performance across all areas of activity.

To meet this responsibility the IJB continues to operate the governance arrangements first put in place during 2015/16, including the system of internal control. This is intended to manage risk to a reasonable level but cannot eliminate the risk of failure to achieve policies, aims and objectives and can therefore only provide reasonable, but not absolute assurance of effectiveness.

In discharging these responsibilities, the Chief Officer has a reliance on East Renfrewshire Council and NHS Greater Glasgow and Clyde systems of internal control that support compliance with both organisations' policies and promotes achievement of each organisations' aims and objectives, as well as those of the IJB.

The Purpose of the Governance Framework

The governance framework comprises the systems and processes and culture and values by which the IJB is directed and controlled and the activities through which it accounts to, engages with, and leads the community. It enables the IJB to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate, cost-effective services.

The system of internal control is a significant part of that framework and is designed to manage risk to a reasonable level. The system of internal control is based on an ongoing

process designed to identify and prioritise the risks to the achievement of the IJB's policies, aims and objectives, to evaluate the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively and economically.

We have robust governance arrangements in place and have consolidated these into a Governance Code.

The Governance Framework

The main features of the governance framework in place during 2023/24 are summarised below:

- The IJB, comprising all IJB Board members, is the key decision-making body
- The scope, authority, governance and remit of the IJB is set out in constitutional documents including the Integration Scheme, Board terms of reference, scheme of administration and financial regulations and as reflected in our Code of Governance
- The Performance and Audit Committee and Clinical and Care Governance Group provide further levels of scrutiny for the IJB
- The IJB's purpose and vision is outlined in the IJB Strategic Plan which sets out how we
 will deliver the national health and wellbeing outcomes. This is underpinned by an
 annual implementation plan and performance indicators. Regular progress reports on
 the delivery of the Strategic Plan are provided to the Performance and Audit Committee
 and the IJB
- The IJB has adopted a 'Code of Conduct' for all of its Board Members and employees. A register of interests is in place for all Board members and senior officers
- The Performance and Audit Committee routinely review the Strategic Risk Register.
- The IJB has in place a continuous development programme with an ongoing series of seminars covering a wide range of topics and issues
- The IJB has two localities Eastwood and Barrhead, aligned with hospital use and includes three clusters of GP practices. Each Locality has a dedicated Locality Manager

We continued to hold our IJB meetings on a video conferencing platform and agreed with our chair and vice chair a prioritised agenda for each meeting. We held all meetings as planned during 2023/24. We held four IJB seminars during the year focussing on prescribing, carers and planning for the budget for 2024/25.

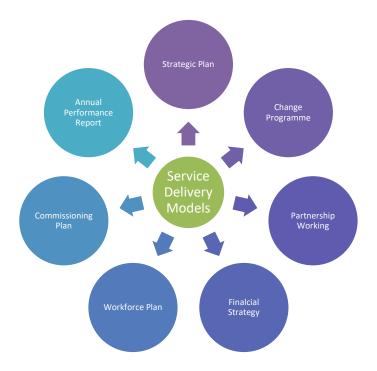
We used our daily and weekly huddle during the year as needed to allow our senior managers to meet in the morning to assess the situation, prioritise workloads and support service delivery, in periods of capacity challenge and any events such as bad weather. This continues to provide an informal support network which has been invaluable.

Weekly huddles are also in place to support the delivery of the Supporting People Framework saving.

The action plan from the self-assessment of the CIPFA Financial Management Code, reported to the Performance & Audit Committee in June 2023 has been reviewed with no additional actions.

Best Value

The IJB has a duty of Best Value and this includes ensuring continuous improvement in performance, while maintaining an appropriate balance between the quality of those services provided by the HSCP and the cost of doing so. We need to consider factors such as the economy, efficiency, effectiveness and equal opportunities. The IJB ensures this happens through its vision and leadership and this is supported and delivered by:



The System of Internal Financial Control

The system of internal financial control is based on a framework of regular management information, financial regulations, administrative procedures (including segregation of duties), management supervision, and a system of delegation and accountability. Development and maintenance of these systems is undertaken by East Renfrewshire Council and NHS Greater Glasgow and Clyde as part of the operational delivery of the HSCP. In particular, these systems include:

- Financial regulations and codes of financial practice
- Comprehensive budgeting systems
- Regular reviews of periodic and annual financial reports that indicate financial performance against the forecasts
- Setting targets to measure financial and other performance
- · Clearly defined capital expenditure guidelines
- Formal project management disciplines
- The IJB's financial management arrangements complies with the governance requirements of the CIPFA statement: 'The Role of the Chief Financial Officer in Local Government (2016)' and the CIPFA Financial Management Code

With regard to the entries taken from East Renfrewshire Council and NHS Greater Glasgow and Clyde accounts, the IJB is not aware of any weaknesses within their internal control systems and has placed reliance on the individual Statements of Internal Financial Control where appropriate.

Review of Adequacy and Effectiveness

The IJB has responsibility for conducting, at least annually, a review of the effectiveness of its governance framework including the system of internal control. The review of the effectiveness of the framework is informed by the work of the Senior Management Team who have responsibility for development and maintenance of the governance environment, the annual report by the Chief Internal Auditor and reports from Audit Scotland and other review agencies.

The Chief Internal Auditor reports directly to the IJB Performance and Audit Committee on all audit matters, with the right of access to the Chief Officer, Chief Financial Officer and Chair of the Performance and Audit Committee on any matter. In accordance with the principles of the code of corporate governance, regular reports were made to the IJB's Performance and Audit Committee during 2023/24. A member of East Renfrewshire Council's Audit and Scrutiny Committee is co-opted to the IJB Performance and Audit Committee to promote transparency.

The IJB's Performance & Audit Committee operates in accordance with CIPFA's Audit Committee Principles in Local Authorities in Scotland and Audit Committees: Practical Guidance for Local Authorities.

The Internal Audit function has independent responsibility for examining, evaluating and reporting on the adequacy of internal control. The IJB's internal audit arrangements comply with the governance requirements of the CIPFA statement: 'The Role of the Head of Internal Audit in Public Organisations (2019).

During 2023/24 the service operated in accordance with relevant professional audit standards and the Public Sector Internal Audit Standards. The Chief Internal Auditor's opinion as reported to the Audit Committee, confirmed: It is my opinion based on the information available and assurances provided, that reasonable assurance can be placed on the framework of governance, risk management and internal controls which operated in the East Renfrewshire Integration Joint Board in the year to 31 March 2024. The IJB has produced a Governance Statement which concurs with this conclusion.

We have a formal Code of Governance and the sections in the code and our level of compliance can be summarised as detailed below:

Code Section	Level of Compliance
Integration Scheme	Full
Local Governance Arrangements & Delegation of Functions	Full
Local Operational Delivery Arrangements	Full
Performance and Audit	Full
Clinical and Care Governance	Full
Chief Officer	Full
Workforce	Full
Finance	Full
Participation and Engagement	Full
Information Sharing and Data Handling	Full
Complaints/ Dispute Resolution Mechanism	Full
Claims Handling, Liability & Indemnity	Full
Risk Management	Full

Governance Issues during 2023/24

Whilst all operational and transactional governance issues are considered within our partner's governance frameworks, the IJB Performance and Audit Committee also take an overview on all actions resulting from both internal and external audit reports, covering all live actions whether pre or post 31st March 2024.

Regular reports on audit recommendations and associated actions are presented to and considered by the Performance and Audit Committee of the IJB. The IJB will also receive direct reports where appropriate.

Significant Governance Issues

The move to financial recovery during 2023/24 was a significant issue and the IJB took the decision in November 2023 to increase the eligibility threshold for care to substantial and critical only as part of measures to reduce costs and mitigate the shortfall in the Supporting People Framework saving. The recovery process included a series of discussions with both partners and the Chief Officer and Chief Financial Officer. This culminated in additional non-recurring funding; East Renfrewshire Council provided an additional £2.6 million and NHS Greater Glasgow and Clyde provided an additional £2.1 million.

We will continue to work closely with both partners during 2024/25, recognising that further additional funding is not a viable option.

Operational Governance

The Performance and Audit Committee received an update report to each committee that identified progress on open recommendations as well as any new audit activity and associated response (for both IJB specific and for HSCP operational). The table below summarises the number of recommendations and the status for each audit.

	Recommendations			
Audit Report	Total for HSCP	Considered implemented by HSCP (awaiting verification)	Total open	
Follow-up of HSCP Audits	8	0	8	
Emergency Payments	10	10	0	
Thornliebank Resource Centre	13	13	0	
Debtors	1	1	0	
Self Directed Support – Direct Payments	3	0	3	
Ordering and Certification	4	4	0	
Follow up of Business Operations and Partnerships	2	1	1	
Payroll	8	8	0	
TOTAL	49	37	12	

In March 2023 we reported to the IJB on Equality and Human Rights Mainstreaming Report along with an Interim Review of outcomes for the year. This outlined: the ways in which equalities considerations are part of the structures, behaviours and culture of our partnership; how we carry out our duties and promote equality; and how this is helping us improve as a partnership. The report also set out an interim update on progress towards the partnership's six equalities outcomes for the following two years until 2025.

The Civil Contingencies Act 2004 (CCA), is supplemented by the Contingency Planning (Scotland) Regulations 2005 and "Preparing Scotland" Guidance identifies IJBs as Category 1 responders to an emergency:

- an event or situation which threatens serious damage to human welfare
- an event or situation which threatens serious damage to the environment
- war, or terrorism, which threatens serious damage to the security of the UK

During 2023/24 the IJB did not need to act in this capacity.

Action Plan

The table below shows the progress made during 2023/24 against the actions that we identified in our 2022/23 annual report and accounts.

Action	Progress
Deliver the Savings, Recovery and Renewal programme with progress reported to every meeting of the IJB.	The programme was reported to every IJB throughout the year. The significant shortfall on savings achieved, particularly supporting people contributed to the move to financial recovery. All cost pressures and legacy savings from 2023/24 are included in the budget agreed for 2024/25. Status: Ongoing as this is a multi-year
	programme
2. Maintain the Medium Term Financial Plan and use this to inform the 2024/25 budget planning and beyond.	The latest refresh of the Medium Term Financial Plan will be presented to the IJB in June 2024.
	Status: Closed
3. Ensuring financial sustainability is a key priority in 2023/24 through IJB reporting, discussion with board members, our funding partners and other stakeholders.	Financial sustainability remains a risk and financial reporting will be taken to the IJB throughout 2024/25. We will also remain engaged in detailed financial discussions with both partners during the year.
	Status: Ongoing as this is a multi-year issue
4. Continue to work to implement the Unscheduled Care Commissioning Plan in partnership with the other HSCPs across Greater Glasgow and Clyde.	This is part of an NHSGGC wide programme and will continue to be implemented, The last update to the IJB was in November 2022.
	Status: Ongoing as this is a multi-year issue
5. Our Integration Scheme will be refreshed in line with appropriate guidance and the current timetable across NHSGGC is to complete for submission to the Scottish Government by the current financial year.	Our integration scheme consultation period ended in January 2024 and is expected to go to our partner bodies during 2024. Status: Ongoing expect to close during 2024/25
6. We will continue to monitor the financial	This was reported to the IJB through our regular
impact of Covid where we can to inform local reporting and decision making. We will also report on the £0.750 million provided by ERC to support Covid recovery in 2023/24.	financial reporting and with ERC. Status: Ongoing as this is a multi-year issue
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7. Take our latest Commissioning Plan to 2025 to the IJB in August 2023 along with an implementation timeline.	The Strategic Commissioning Plan was agreed by the Integration Joint Board on 16 th August 2023. Status: Closed
8. We will recommence review of our Strategic Action Plan, paused during the response to the pandemic and continue to develop of performance reporting. 9. We will continue to place equality and fairness at the heart of our planning processes and over the next two years we will work to	We need to review this plan to ensure all relevant actions have been progressed / incorporated into other plans / superseded. Status: Ongoing expect to close 2024/25 We established Equalities Outcomes for the HSCP in 2023. We will report on progress against these in 2025. We have developed our
further progress our agreed equalities outcomes and will review these ahead of our next scheduled report in 2025.	process for undertaking Equality, Fairness and Rights Impact Assessment (EFRIA) with support to staff completing assessments through the Planning and Performance Team and Planning Leads within service areas. We continue to participate ERC Equalities forums and in the national HSCP Equality Peer Support Network. Status: Ongoing expect to close 2024/25
10. We will implement the recommendations resulting from the Adult Joint Inspection report, published in June 2023 including: improving the quality of chronologies; greater involvement of adults at risk of harm and their unpaid carers at a strategic level; enhanced multi-agency quality assurance practices; and, building on existing practice to ensure the full involvement of all key partners in relevant aspects of ASP practice	An Improvement plan was developed through the Adult Protection Committee (APC) and submitted to the care inspectorate. This improvement plan includes the area of improvement identified by the inspection and the multiagency improvements and aspirations of the APC. This plan includes short and long term improvements which will be delivered through the work of the sub-committees and will run until March 2025.
going forward.	Work on the plan has progressed well with many action completed or in progress at this time. Some areas have been delayed to keep step with national developments.
	There has been ongoing support from the Lead Officer and the Practice Policy and Improvement manager to support the chairs of subcommittees in progressing actions within the Improvement Plan to meet the required scrutiny of the Adult Protection Committee.
	Status: Ongoing expect to close 2024/25

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Conclusion and Opinion on Assurance

It is our opinion that reasonable assurance can be placed upon the adequacy and effectiveness of the IJB system of governance.

We consider the internal control environment provides reasonable and objective assurance that any significant risks impacting on our principle objectives will be identified and actions taken to avoid or mitigate their impact.

Systems are in place to regularly review and improve the internal control environment.

Katie Pragnell
Chair
Integration Joint Board

25th September 2024

Julie Murray
Chief Officer
Integration Joint Board

25th September 2024

Independent auditor's report to the members of East Renfrewshire Integration Joint Board and the Accounts Commission

Reporting on the audit of the financial statements

Opinion on financial statements

We certify that we have audited the financial statements in the annual accounts of East Renfrewshire Integration Joint Board (the 'Integration Joint Board') for the year ended 31 March 2024 under Part VII of the Local Government (Scotland) Act 1973. The financial statements comprise the Comprehensive Income and Expenditure Statement, Movement in Reserves Statement, Balance Sheet and notes to the financial statements, including material accounting policy information. The financial reporting framework that has been applied in their preparation is applicable law and UK adopted international accounting standards, as interpreted and adapted by the Code of Practice on Local Authority Accounting in the United Kingdom 2023/24 (the 2023/24 Code).

In our opinion the accompanying financial statements:

- give a true and fair view of the state of affairs of the Integration Joint Board as at 31 March 2024 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with UK adopted international accounting standards, as interpreted and adapted by the 2023/24 Code; and
- have been prepared in accordance with the requirements of the Local Government (Scotland) Act 1973, The Local Authority Accounts (Scotland) Regulations 2014, and the Local Government in Scotland Act 2003.

Basis for opinion

We conducted our audit in accordance with applicable law and International Standards on Auditing (UK) (ISAs (UK)), as required by the Code of Audit Practice approved by the Accounts Commission for Scotland. Our responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of our report. We were appointed by the Accounts Commission on 14 December 2022. Our period of appointment is five years, covering 2022/23 to 2026/27. We are independent of the Integration Joint Board in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. Non-audit services prohibited by the Ethical Standard were not provided to the Integration Joint Board. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern basis of accounting

We have concluded that the use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Integration Joint Board's ability to continue to adopt the going concern basis of accounting for the period to 31 March 2026.

These conclusions are not intended to, nor do they, provide assurance on the Integration Joint Board's current or future financial sustainability. However, we report on the Integration Joint Board's arrangements for financial sustainability in a separate Annual Audit Report available from the <u>Audit Scotland website</u>.

Risks of material misstatement

We report in our Annual Audit Report the most significant assessed risks of material misstatement that we identified and our judgements thereon.

Responsibilities of the Chief Financial Officer and Performance and Audit Committee for the financial statements

As explained more fully in the Statement of Responsibilities, the Chief Financial Officer is responsible for the preparation of financial statements that give a true and fair view in accordance with the financial reporting framework, and for such internal control as the Chief Financial Officer determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Chief Financial Officer is responsible for assessing the Integration Joint Board's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless there is an intention to discontinue the Integration Joint Board's operations.

The Performance and Audit Committee is responsible for overseeing the financial reporting process.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities outlined

above to detect material misstatements in respect of irregularities, including fraud. Procedures include:

- using our understanding of the local government sector to identify that the Local Government (Scotland) Act 1973, The Local Authority Accounts (Scotland) Regulations 2014, and the Local Government in Scotland Act 2003 are significant in the context of the Integration Joint Board:
- inquiring of the Chief Financial Officer as to other laws or regulations that may be expected to have a fundamental effect on the operations of the Integration Joint Board;
- inquiring of the Chief Financial Officer concerning the Integration
 Joint Board's policies and procedures regarding compliance with the
 applicable legal and regulatory framework;
- discussions among our audit team on the susceptibility of the financial statements to material misstatement, including how fraud might occur; and
- considering whether the audit team collectively has the appropriate competence and capabilities to identify or recognise non-compliance with laws and regulations.

The extent to which our procedures are capable of detecting irregularities, including fraud, is affected by the inherent difficulty in detecting irregularities, the effectiveness of the Integration Joint Board's controls, and the nature, timing and extent of the audit procedures performed.

Irregularities that result from fraud are inherently more difficult to detect than irregularities that result from error as fraud may involve collusion, intentional omissions, misrepresentations, or the override of internal control. The capability of the audit to detect fraud and other irregularities depends on factors such as the skilfulness of the perpetrator, the frequency and extent of manipulation, the degree of collusion involved, the relative size of individual amounts manipulated, and the seniority of those individuals involved.

A further description of the auditor's responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Reporting on other requirements

Opinion prescribed by the Accounts Commission on the audited parts of the Remuneration Report

We have audited the parts of the Remuneration Report described as audited. In our opinion, the audited parts of the Remuneration Report have been properly prepared in accordance with The Local Authority Accounts (Scotland) Regulations 2014.

Other information

The Chief Financial Officer is responsible for the other information in the annual accounts. The other information comprises the Management Commentary, Annual Governance Statement, Statement of Responsibilities and the unaudited part of the Remuneration Report.

Our responsibility is to read all the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon except on the Management Commentary and Annual Governance Statement to the extent explicitly stated in the following opinions prescribed by the Accounts Commission.

Opinions prescribed by the Accounts Commission on the Management Commentary and Annual Governance Statement

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Management Commentary for the financial year for which the financial statements are prepared is consistent with the financial statements and that report has been prepared in accordance with statutory guidance issued under the Local Government in Scotland Act 2003; and
- the information given in the Annual Governance Statement for the financial year for which the financial statements are prepared is consistent with the financial statements and that report has been prepared in accordance with the Delivering Good Governance in Local Government: Framework (2016).

Matters on which we are required to report by exception
We are required by the Accounts Commission to report to you if, in our opinion:

- adequate accounting records have not been kept; or
- the financial statements and the audited part of the Remuneration Report are not in agreement with the accounting records; or
- we have not received all the information and explanations we require for our audit.

We have nothing to report in respect of these matters.

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Conclusions on wider scope responsibilities

In addition to our responsibilities for the annual accounts, our conclusions on the wider scope responsibilities specified in the Code of Audit Practice, including those in respect of Best Value, are set out in our Annual Audit Report.

Use of our report

This report is made solely to the parties to whom it is addressed in accordance with Part VII of the Local Government (Scotland) Act 1973 and for no other purpose. In accordance with paragraph 108 of the Code of Audit Practice, we do not undertake to have responsibilities to members or officers, in their individual capacities, or to third parties.

[Signature]

Rob Jones (for and on behalf of Ernst & Young LLP) 5 George Square Glasgow G2 1DY 25 September 2024

The Financial Statements

The (Surplus) or Deficit on the Income and Expenditure Statement shows the income received from and expenditure directed back to East Renfrewshire Council and NHS Greater Glasgow and Clyde for the delivery of services.

Comprehensive Income and Expenditure Statement for the year ended 31st March 2024

	0000/00					0000101	
0	2022/23	NI-4			0	2023/24	NI - 4
Gross	Gross	Net	Obligation Applicate		Gross	Gross	Net
Expenditure	Income	Expenditure	Objective Analysis N	ote	Expenditure	Income	Expenditure
£000	£000	£000			£000	£000	£000
18,264	3,850	14,414	Children and Families		16,309	3,183	13,126
28,325	943	27,382	Older People's Services		34,000	2,250	31,750
7,576	774	6,802	Physical/Sensory Disability		8,163	1,078	7,085
24,325	915	23,410	Learning Disability – Community		26,239	1,573	24,666
10,770	1,179	9,591	Learning Disability – Inpatients		12,216	886	11,330
460	195	265	Augmentative & Alternative Communicatio	n	384	165	219
21,328	3,443	17,885	Intensive Services		22,677	3,070	19,607
6,499	349	6,150	Mental Health		7,100	576	6,524
3,295	533	2,762	Addictions / Substance Misuse		3,647	948	2,699
29,862	941	28,921	Family Health Services		31,588	1,114	30,474
17,873	1	17,872	Prescribing		19,780	1	19,779
913	915	(2)	Criminal Justice		989	903	86
19,417	17,678	1,739	Management and Admin		10,743	5,035	5,708
243	-	243	Corporate Services		259	-	259
189,150	31,716	157,434	Cost of Services Managed by ER IJB		194,094	20,782	173,312
			Set Aside for delegated services				
29,075	-	29,075	provided in large hospitals		30,194		30,194
486	-	486	Aids and Adaptations		449		449
218,711	31,716	186,995	Total Cost of Services to ER IJB		224,737	20,782	203,955
,	,	•			•	,	,
			Toyotion and Non Charific Creat				
-	172,289	172,289	Taxation and Non Specific Grant Income	3	-	199,773	199,773
			IIICOIIIC				
			(Surplus) or Deficit on Provision of				
218,711	204,005	14,706	Services		224,737	220,555	4,182
			33.1.333				

Movement in Reserves Statement

This statement shows the movement in the financial year on the reserve held by the IJB, analysed into 'usable reserves' (i.e. those that can be applied to fund expenditure) and 'non usable reserves'. The (Surplus) or Deficit on the Provision of Services reflects the true cost of providing services, more details of which are shown in the Comprehensive Income and Expenditure Statement.

2022/23 £000	Movement in Reserves	2023/24 £000
(20,752) 14,706	Balance brought forward Total Comprehensive Income & Expenditure	
14,706	(Surplus) or Deficit on the Provision of Services	4,182
(6,046)	Balance as at 31st March Carried Forward	(1,864)

The reserves above are all useable.

Balance Sheet As at 31st March 2024

The Balance Sheet as at 31st March 2024 is a snapshot of the value at that reporting date of the assets and liabilities recognised by the IJB. The net assets of the IJB (assets less liabilities) are matched by the reserves held by the IJB.

31 st March 2023 £000	Balance Sheet	Notes	31 st March 2024 £000
9,901	Current Assets		2,145
9,901	Short Term Debtors	7	2,145
3,855	Current Liabilities		281
3,855	Short Term Creditors	7	281
6,046	Net Assets - Reserves	8	1,864

The Statement of Accounts present a true and fair view of the financial position of the IJB as at 31st March 2024 and its income and expenditure for the year then ended.

The audited annual report and accounts will be submitted for approval and issue by the IJB on 25th September 2024.

Lesley Bairden ACMA CGMA Chief Financial Officer Integration Joint Board

25th September 2024

Notes to the Financial Statements

1. Accounting Policies

1.1 General Principles

The Statement of Accounts summarises the IJB's transactions for the 2023/24 reporting period and its position as at 31st March 2024.

The East Renfrewshire IJB is formed under the terms of the Public Bodies (Joint Working) (Scotland) Act 2014 and is a joint venture between East Renfrewshire Council and NHS Greater Glasgow and Clyde.

IJBs are specified as Section 106 bodies under the Local Government (Scotland) Act 1973 and as such are required to prepare their financial statements in compliance with the Code of Practice on Local Authority Accounting in the United Kingdom 2023/24 supported by International Finance Reporting Standards (IFRS).

1.2 Accruals of Income and Expenditure

Activity is accounted for in the year it takes place not simply when cash payments are made or received. In particular:

All known specific and material sums payable to the IJB have been brought into account.

Where revenue and expenditure have been recognised but cash has not been received or paid, a debtor or creditor for the relevant amount is recorded in the Balance Sheet.

1.3 Going Concern

The accounts are prepared on a going concern basis, which assumes that the IJB will continue in operational existence for the foreseeable future.

The IJB Financial Statements for 2023/24 have been prepared on a going concern basis. The IJB was established under the requirements of the Public Bodies (Joint Working) (Scotland) Act 2014 and is a Section 106 body as defined in the Local Government (Scotland) Act 1973. In accordance with the CIPFA Code of Practice on Local Authority Accounting in the United Kingdom 2023/24, the IJB is required to prepare its Financial Statements on a going concern basis unless informed by the relevant national body of the intention of dissolution without transfer of services or function to another entity. The Annual Accounts are prepared on the assumption that the IJB will continue in operational existence for the foreseeable future and specifically to the end of the going concern period, 31 March 2026.

We outline within our commentary that 2023/24 was a very challenging year for the IJB. In the Financial Performance section of the commentary (page 28) this shows at 1 April 2023, we started the year with reserves of £6.046 million. As a result of planned and unplanned

movements, £4.526 million of reserves were used in year, with £0.344 million added into earmarked reserves for specific purposes. Our General Reserves balances were fully used during the year.

However, the IJB's budget contribution from and direction to partners has been confirmed for 2024/25, and a Medium-Term Financial Plan has been prepared covering the period 2024/25 to 2028/29. The cumulative pressure identified in the Medium-Term Financial Plan ranges from £16.5 to £29.2 million depending on scenarios and not allowing for any additional funding that may offset this. The Integration Scheme outlines the actions required in the event of an overspend which includes the implementation of a recovery plan to recover the overspend and allows for additional contributions from partners. The IJB considers there are no material uncertainties around its going concern status.

1.4 Accounting Convention

The accounting convention adopted in the Statement of Accounts is an historic cost basis.

1.5 Funding

East Renfrewshire IJB receives contributions from its funding partners, namely East Renfrewshire Council and NHS Greater Glasgow and Clyde to fund its services. Expenditure is incurred as the IJB commissions specified health and social care services from the funding partners for the benefit of the population of East Renfrewshire and across the Greater Glasgow and Clyde area for those services delivered under hosting arrangements. The Augmentative and Alternative Communication service also provides a specialist national service, funded by service level agreement.

1.6 Reserves

Reserves are created by appropriate amounts from the Statement of Income and Expenditure in the Movement in Reserves Statement.

Reserves have been created in order to finance expenditure in relation to specific projects. When expenditure to be financed from a reserve is incurred it will be charged to the appropriate service in that year and will be funded by an appropriation back to the Comprehensive Income and Expenditure Statement in the Movement in Reserves Statement.

A general reserve has also been established as part of the financial strategy of the East Renfrewshire IJB in order to better manage the risk of any future unanticipated events that may materially impact on the financial position of the IJB.

1.7 Events after the Balance Sheet Date

Events after the Balance Sheet date are those events, both favourable and unfavourable, that occur between the end of the reporting period and the date when the Annual Accounts are authorised.

Where events take place before the date of authorisation and provide information about conditions existing as at 31st March 2024 the figures in the financial statements and notes have been adjusted in all material aspects to reflect the impact of this information.

Events taking place after the date when the Accounts were authorised are not reflected in the financial statement or notes.

1.8 Related Party Transactions

As partners of East Renfrewshire IJB both East Renfrewshire Council and NHS Greater Glasgow and Clyde are related parties and material transactions with those bodies are disclosed in Note 5 (Page 69) in accordance with the requirements of International Accounting Standard 24.

Related parties also include organisations that we may have no transactions with, but who can still exert significant influence over our financial and operating policy decisions. The Scottish Government is such a related party of the IJB as it can exert significant influence through legislation and funding of the IJB's partner bodies, and therefore can indirectly influence the financial and operating policy decisions of the IJB.

1.9 Provisions, Contingent Assets and Liabilities

Provisions are made where an event has taken place that gives the IJB a legal or constructive obligation that probably requires settlement by a transfer of economic benefits or service potential and a reliable estimate can be made of the amount of the obligation.

Provisions are charged as an expense to the appropriate service line in the Statement of Income and Expenditure in the year that the IJB becomes aware of the obligation and measured at the best estimate at the Balance Sheet date of the expenditure required to settle the obligation, taking into account relevant risks and uncertainties.

When payments are eventually made they are charged to the provision held in the Balance Sheet. Estimated settlements are reviewed at the end of each financial year. Where it becomes less probable that a transfer of economic benefits will be required (or a lower settlement than anticipated is made) the provision is reversed and credited back to the relevant service.

A contingent asset or liability arises where an event has taken place that gives the IJB a possible obligation or benefit whose existence will only be confirmed by the occurrence or otherwise of uncertain future events not wholly within the control of the IJB. Contingent assets or liabilities also arise in circumstances where a provision would otherwise be made but, either it is not probable

that an outflow of resources will be required or the amount of the obligation cannot be measured reliably.

Contingent assets and liabilities are not recognised in the Balance Sheet but are disclosed in a note to the Accounts where they are deemed material.

1.10 Indemnity Insurance

The IJB has indemnity insurance for costs relating primarily to potential claim liabilities regarding Board member and officer responsibilities. NHS Greater Glasgow and Clyde and East Renfrewshire Council have responsibility for claims in respect of the services they are statutorily responsible for and that they provide.

Unlike NHS Boards the IJB does not have any 'shared risk' exposure from participation in CNORIS. The IJB participation in the CNORIS scheme is therefore similar to normal insurance arrangements.

In the event that known claims were identified they would be assessed as to the value and probability of settlement. Where material the overall expected value of any such known claims, taking probability of settlement into consideration, would be provided for in the IJB's Balance Sheet. No such claims were identified as at 31st March 2024.

Similarly, the likelihood of receipt of an insurance settlement to cover any claims would be separately assessed, and where material, they would be presented as either a debtor or disclosed as a contingent asset. No such receipts were identified as at 31st March 2024.

1.11 Corresponding Amounts

These Financial Statements cover the period 1st April 2023 to 31st March 2024, with corresponding full year amounts for 2022/23.

1.12 VAT

The IJB is not a taxable person and does not charge or recover VAT on its functions.

The VAT treatment of expenditure and income within the Accounts depends upon which of the partners is providing the service as these bodies are treated differently for VAT purposes.

The services provided by the Chief Officer to the IJB are outside the scope of VAT as they are undertaken under a specific legal regime.

1.13 Post - Employment Benefits - Pension Costs

The accounting requirements for pension costs in respect of Post - Employment Benefits under IAS19 and FRS17 are reflected in the accounts of East Renfrewshire Council and NHS Greater Glasgow and Clyde as the respective employers of current and former staff members. The IJB does not directly employ any members of staff in its own right and accordingly has accrued no liability in regards to post employment pension benefits.

1.14 Prior Period Restatement

When items of income and expenditure are material, their nature and amount is disclosed separately, either on the face of the CIES or in the notes to the Accounts, depending on how significant the items are to the understanding of the IJB's financial performance.

Prior period adjustments may arise as a result of a change in accounting policy, a change in accounting treatment or to correct a material error. Changes are made by adjusting the opening balances and comparative amounts for the prior period which then allows for a consistent year on year comparison.

2. Expenditure and Income Analysis by Nature

There are no statutory or presentational adjustments which affect the IJB's application of funding received from partner organisations. The movement in the IJB balance sheet is therefore solely due to the transactions shown in the Comprehensive Income and Expenditure Statement. Consequently an Expenditure and Funding Analysis is not provided in these accounts.

2022/23 £000	Expenditure and Income Analysis by Nature	
,	Partners funding contribution and non-specific grant income Fees and charges and other service income	(199,773) (20,782)
(204,005)	Total Funding	(220,555)
985 401 9,890 71,347 2,304 17,717 29,940 29,075 213	Employee Costs Premises Costs Transport Costs Supplies & Services Third Party Payments Support Costs Prescribing Family Health Service Acute Hospital Services Corporate Costs	58,578 1,031 391 9,958 70,701 2,257 19,780 31,588 30,194 226
	External Audit Fee Cost of Services	33 224,737

3. Taxation and Non Specific Grant Income

	2022/23 £000	Taxation and Non Specific Grant Income	2023/24 £000
	109,533	East Renfrewshire Council NHS Greater Glasgow and Clyde Resource Transfer	64,612 122,772 12,389
	172,289	Partners Funding Contribution & Non Specific Grant Income	199,773

The funding contribution from NHS Greater Glasgow and Clyde includes East Renfrewshire's use of set aside for delegated services provided in large hospitals (£30.194 million in 2023/24 and £29.075 million in 2022/23). These services are provided by the NHS, which retains responsibility for managing the costs of providing the service; the IJB however, has responsibility for the consumption of and level of demand placed on these services.

4. Hosted Services - Learning Disability Inpatients & Augmentative and Alternative Communication

As detailed at Note 11 the IJB has considered the basis of the preparation of the 2023/24 accounts for Learning Disability In-Patient Services and Augmentative & Alternative Communication (AAC) services hosted by the East Renfrewshire IJB for other IJBs within the NHS Greater Glasgow & Clyde Area.

The IJB is considered to be acting as a 'principal' and the 2023/24 financial statements have been prepared on this basis with the full costs of such services being reflected in the 2023/24 financial statements. The cost of the hosted service provided to other IJBs as well as that consumed by East Renfrewshire for the Learning Disability Inpatients and Augmentative and Alternative Communication is detailed in the following tables.

2022/23 £000	Learning Disability In-Patient Servies Hosted by East Renfrewshire IJB	2023/24 £000
6,872 1,834 521 291	Glasgow Renfrewshire Inverclyde West Dunbartonshire East Dunbartonshire	9,010 1,370 97 658 -
9,518 73	Learning Disability In-Patients Services Provided to other IJBs East Renfrewshire	11,135 195
9,591	Total Learning Disability In-Patient Services	11,330

2022/23 £000	Augmentative and Alternative Communication (AAC) Hosted by East Renfrewshire IJB	2023/24 £000
124	Glasgow	93
27	Renfrewshire	55
32	Inverclyde	10
5	West Dunbartonshire	6
27	East Dunbartonshire	23
215	AAC Services Provided to other IJBs	187
50	East Renfrewshire	32
265	Total AAC Services	219

Likewise, other IJBs act as the principal for a number of other hosted services on behalf of the East Renfrewshire IJB, as detailed below; such costs are reflected in the financial statements of the host IJB.

2022/23 £000	Services Prvided to East Renfrewshire IJB by Other IJBs within NHSGGC	2023/24 £000
476	Physiotherapy	556
50	Retinal Screening	68
788	Podiatry	520
306	Primary Care Support	318
419	Continence	457
631	Sexual Health	603
1,183	Mental Health	1,597
978	Oral Health	899
374	Addictions	479
232	Prison Health Care	223
156	Health Care in Police Custody	185
4,032	Psychiatry	5,197
n/a	Specialist Childrens Services*	3,344
9,625	Net Expenditure on Services Provided	14,446

^{*}Hosted by East Dunbartonshire IJB from 1 April 2023

5. Related Party Transactions

The following financial transactions were made with East Renfrewshire Council and NHS Greater Glasgow and Clyde relating to integrated health and social care functions during 2023/24. The nature of the partnership means that the IJB may influence, and be influenced by its partners.

2022/23 £000	Income – Payments for Integrated Functions	2023/24 £000
121,759	NHS Greater Glasgow and Clyde	128,119
82,246	East Renfrewshire Council	92,436
204,005	Total	220,555

2022/23 £000	Expenditure – Payments for Delivery of Integrated Functions	2023/24 £000
121,759	NHS Greater Glasgow and Clyde	128,119
96,952	East Renfrewshire Council	96,618
218,711	Total	224,737

2022/23 £000	Closing Reserve Balance (held within ERC on behalf of IJB)	2023/24 £000
-	NHS Greater Glasgow and Clyde	-
6,046	East Renfrewshire Council	1,864
6,046	Total	1,864

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Within the closing balance of £1.864 million the debtors balance relating to NHS Greater Glasgow and Clyde is £0.258 million and the creditors balance is £0.281 million.

Related parties also include organisations that we may have no transactions with, but who can still exert significant influence over our financial and operating policy decisions.

The Scottish Government is such a related party of the IJB as it can exert significant influence through legislation and funding of the IJB's partner bodies, and therefore can indirectly influence the financial and operating policy decisions of the IJB.

The value of transactions directly with the Scottish Government in 2022/23 and 2023/24 was nil.

6. Corporate Expenditure

2022/23 £000	Corporate Expenditure	2023/24 £000
213 30	Staff Costs Audit Fee	226 33
243	Total	259

The cost associated with running the IJB has been met in full by East Renfrewshire Council and NHS Greater Glasgow and Clyde reflecting the continuation of the arrangement for the previous Community Health and Care Partnership.

The costs charged to the IJB in respect of non-voting members include the Chief Officer and Chief Financial Officer. Details of the remuneration for post holders are provided in the Remuneration Report.

The costs of other key management staff who advise the IJB, such as the Chief Social Work Officer and the Chief Nurse are reflected within operational budgets. Those costs above reflect only the IJB statutory posts.

NHS Greater Glasgow and Clyde did not charge for any support services provided in the year ended 31st March 2024.

The support services provided through East Renfrewshire Council are included within the funding provided to the IJB as set out in the Scheme of Integration and the charge is included for 2023/24.

Fees payable to Ernst & Young in respect of external audit services undertaken in accordance with Audit Scotland's Code of Audit Practice for 2023/24 amounted to £33,360 (this was £29,867 in 2022/23). Ernst & Young did not provide any non-audit services during 2023/24.

VAT is not included in the costs identified.

7. Short Term Debtors and Creditors

2022/23 £000	Short Term Debtors	2023/24 £000
- 9,901	NHS Greater Glasgow and Clyde East Renfrewshire Council	- 2,145
9,901	Total	2,145

2022/23 £000	Short Term Creditors	2023/24 £000
3,855 -	NHS Greater Glasgow and Clyde East Renfrewshire Council	281 -
3,855	Total	281

8. Reserves

As at 31st March 2024 the IJB holds earmarked reserves in order to fund expenditure in respect of specific projects. In addition a general reserve is normally held to allow us to meet any unforeseen or unanticipated events that may impact on the IJB, however this was fully depleted as part of the financial recovery process.

Reserves are a normal part of the financial strategy of the IJB in order to better manage the costs and risks across financial years and work is required to rebuild reserves in the longer term.

The reserves of the IJB fall into three types:

- Ring-fenced: the funding is earmarked and can only be used for that specific purpose
- Earmarked: the funding has been allocated for a specific purpose
- General: this can be used for any purpose

The year on year movement in reserves is summarised:

Summary	£ Million	£ Million
Reserves as at 31 March 2023		6.046
Planned use of existing reserves during the year	(4.526)	
Funds added to reserves during the year	0.344	
Net increase in reserves during the year		(4.182)
Reserves as at 31 March 2024		1.864

For the £1.864 million balance of reserves we are taking forward into 2024/25 we expect to use or fully commit c£1.4 million earmarked reserves during 2024/25:

- £0.3m is ring-fenced SG funding for Primary Care, ADP, MH Action 15
- £1.1m is committed in year for earmarked activity, mainly within Childrens and Learning Disability services

We will also use some of the £0.5m ring-fenced SG funding for the Recovery Hub building, the timing of the spend is to be confirmed, however all funding will be fully committed.

The table on the following page provides the detailed movement across all reserves between 2022/23 and 2023/24.

2022/23 £000	Reserves	Used £000	Added £000	Transfers In / (Out) £000	2023/24 £000
851 661 181	Mental Health Action 15 Alcohol & Drugs Partnership Primary Care Improvement GP Premises Fund COVID Allocations (Carers PPE) Distress Brief Intervention Seed Funding	362 570 181	100		118 489 91 0 2 100
1,813	Total Ring-Fenced Reserves	1,113	100	0	800
165	Budget Savings Phasing In Year Pressures Total Bridging Finance	1,434 165 1,599	0	0	0 0 0
382 473 100 466 9	Health Visitors Counselling in Schools Children and Adolescent Mental Health Services Trauma Informed Practice Whole Family Wellbeing Unaccompanied Asylum Seekers Children Children & Families	82 382 473 9 946	195 195	0	0 0 0 100 661 0 761
37 61 77 104 32 13 45 109 18	Learning Disability Community Living Change Addictions Residential Rehabilitation Mental Health Officer/Community Psychology/Capacity Care Home Oversight Support Augmentative & Alternative Communication Learning Disability Health Checks Armed Forces Covenant Wellbeing Dementia Funding Telecare Fire Safety Cancer Screening Inequalities Adult Services	100 37 61 77 104 13 45 109	21 28 49	0	154 0 0 0 0 53 0 0 18 28 253
100	Renewals & Repairs Fund	50		0	50
3,961	Total Earmarked Reserves	3,141	244	0	1,064
272	Total General Reserves	272	0	0	0
6,046	Total All Reserves	4,526	344	0	1,864

9. Contingent Assets and Liabilities

There are no contingent assets or liabilities as at 31st March 2024.

10. New standards issued but not yet adopted

The Code requires the disclosure of information relating to the impact of an accounting change that will be required by a new standard that has been issued but not yet adopted. This applies to the adoption of the following new or amended standards within the 2024/25 Code:

- Amendments to IAS1 Classification of Liabilities as Current or Non-Current Assets
- Amendments to IAS1 Non-Current Liabilities with Covenants

The Code requires implementation of these new standards from 1 April 2024 therefore there is no impact on the 2023/24 annual accounts.

These new or amended standards are not expected to have a significant impact on the Annual Accounts.

11. Critical Judgements

In applying the accounting policies set out above, the IJB has had to make a critical judgement relating to complex transactions in respect of Learning Disability Inpatients Services and Augmentative & Alternative Communication services hosted within the East Renfrewshire IJB for other IJB's within the NHS Greater Glasgow & Clyde area.

Within NHS Greater Glasgow & Clyde each IJB has operational responsibility for services which it hosts on behalf of other IJB's. In delivering these services the IJB has primary responsibility for the provision of services and bears the risk and reward associated with this service delivery in terms of demand and the financial resources required. As such the IJB is considered to be acting as 'principal' and the full costs should be reflected within the financial statements for the services which it hosts. This is the basis on which the 2023/24 accounts have been prepared.

There were no judgements required which involved uncertainty about future events.

12. Estimation Uncertainty

There are no estimations included within the 2023/24 accounts.

13. Post Balance Sheet Events

The final annual report and accounts will be presented for approval on 25th September 2024.

There have been no adjusting events (events which provide evidence of conditions that existed at the balance sheet date) and no such adjusting events have been reflected in the financial statements or notes. Likewise there have been no non – adjusting events, which are indicative of conditions after the balance sheet date, and accordingly the financial statements have not been adjusted for any such post balance sheet events.

14. Prior Period Restatement

There are no restatements included in the unaudited accounts.

Where to find more information

In This Document

The requirements governing the format and content of the IJB annual accounts follows guidance issued by the Integrated Resources Advisory Group and by The Local Authority (Scotland) Accounts Advisory Committee (LASAAC). The linked documents on this page do not fall within the remit of the audited accounts which ends at Note 14.

On Our Website

Further information on the Accounts can be obtained on the <u>website</u> or from East Renfrewshire HSCP, Eastwood Health and Care Centre, Drumby Crescent, Clarkston, G76 7HN.

Useful Links

Strategic Plan - full plan and summary

Medium Term Financial Plan

Integration Scheme

Annual Performance Report

Strategic Risk Register

It should be noted that the links above relate to the latest published versions of each document at the point of completion of this report and there may be later versions available on our website.

Acknowledgement

I wish to record my thanks to staff within the HSCP for their co-operation in producing the audited Annual Report and Accounts in accordance with the prescribed timescale. In particular the support of the Accountancy and Policy & Performance staff within the partnership are gratefully acknowledged.

Katie Pragnell
Chair
Integration Joint Board

25th September 2024

Julie Murray
Chief Officer
Integration Joint Board

25th September 2024

Lesley Bairden ACMA CGMA Chief Financial Officer Integration Joint Board

25th September 2024







East Renfrewshire Health and Social Care Partnership Eastwood Health and Care Centre, Drumby Crescent, Clarkston, G76 7HN

Phone: 0141 451 0749 Date: 25 September 2024

Rob Jones
Partner
Ernst & Young
5 George Square
Glasgow
G2 1DY

Dear Rob

This letter of representations is provided in connection with your audit of the financial statements of East Renfrewshire Integration Joint Board ("the IJB") for the year ended 31 March 2024. We recognise that obtaining representations from us concerning the information contained in this letter is a significant procedure in enabling you to form an opinion as to whether the financial statements give a true and fair view of the state of affairs of the IJB as at 31 March 2024 and the income and expenditure of the IJB for the year then ended in accordance with UK adopted international accounts standards, as interpreted and adapted by the Code of Practice on Local Authority Accounting in the United Kingdom 2023/24 and the Local Government (Scotland) Act 1973, the Local Authority Accounts (Scotland) Regulations 2014, and the Local Government in Scotland Act 2003.

We understand that the purpose of your audit of our financial statements is to express an opinion thereon and that your audit was conducted in accordance with International Standards on Auditing (UK), which involves an examination of the accounting system, internal control and related data to the extent you considered necessary in the circumstances, and is not designed to identify - nor necessarily be expected to disclose - all fraud, shortages, errors and other irregularities, should any exist.

Accordingly, we make the following representations, which are true to the best of our knowledge and belief, having made such inquiries as we considered necessary for the purpose of appropriately informing ourselves:

A. Financial Statements and Financial Records

1. We have fulfilled our responsibilities, under the relevant statutory authorities, for the preparation of the financial statements in accordance with UK adopted internation accounting standards as interpreted and adapted by the Code of Practice on Local Authority Accounting in the United Kingdom 2023/24 and the requirements of the Local Government (Scotland) Act 1973, the Local Authority Accounts (Scotland) Regulations 2014, and the Local Government in Scotland Act 2003.¹

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¹ ISA (UK) 580.10

- 2. We acknowledge, as members of management of the IJB, our responsibility for the fair presentation of the financial statements. We believe the financial statements referred to above give a true and fair view of the financial position, financial performance (or results of operations) and cash flows of the IJB in accordance with the Code of Practice on Local Authority Accounting in the United Kingdom 2023/24, and are free of material misstatements, including omissions. We have approved the financial statements.
- 3. The significant accounting policies adopted in the preparation of the financial statements are appropriately described in the financial statements.
- 4. As members of management of the IJB, we believe that the IJB has a system of internal controls adequate to enable the preparation of accurate financial statements in accordance with the Code of Practice on Local Authority Accounting in the United Kingdom 2023/24, that are free from material misstatement, whether due to fraud or error. ²

There are no unadjusted audit differences identified during the current audit and pertaining to the latest period presented.

5. We confirm the IJB does not have securities (debt or equity) listed on a recognised exchange.

B. Non-compliance with law and regulations, including fraud

- We acknowledge that we are responsible to determine that the IJB's activities are conducted in accordance with laws and regulations and that we are responsible to identify and address any non-compliance with applicable laws and regulations, including fraud.
- 2. We acknowledge that we are responsible for the design, implementation and maintenance of a system of internal control to prevent and detect fraud and that we believe we have appropriately fulfilled those responsibilities.³
- 3. We have disclosed to you the results of our assessment of the risk that the financial statements may be materially misstated as a result of fraud. 4
- 4. We have no knowledge of any identified or suspected non-compliance with laws or regulations, including fraud that may have affected the IJB (regardless of the source or form and including without limitation, any allegations by "whistleblowers"), including non-compliance matters:
 - involving financial improprieties;
 - related to laws and regulations that have a direct effect on the determination of material amounts and disclosures in the IJB's financial statements;
 - related to laws and regulations that have an indirect effect on amounts and disclosures in the financial statements, but compliance with which may be fundamental to the operations of the IJB's activities, its ability to continue to operate, or to avoid material penalties;

² ISA (UK) 210.6(b)(ii)

³ ISA (UK) 240.40(a) (Revised May 2021)

⁴ ISA (UK) 240.39(b)

- involving management, or employees who have significant roles in internal controls, or others; or
- in relation to any allegations of fraud, suspected fraud or other noncompliance with laws and regulations communicated by employees, former employees, analysts, regulators or others.⁵

C. Information Provided and Completeness of Information and Transactions

- 1. We have provided you with:
 - Access to all information of which we are aware that is relevant to the preparation of the financial statements such as records, documentation and other matters;
 - Additional information that you have requested from us for the purpose of the audit; and
 - Unrestricted access to persons within the entity from whom you determined it necessary to obtain audit evidence.⁶
- 2. All material transactions have been recorded in the accounting records and are reflected in the financial statements.⁷
- 3. We have made available to you all minutes of the meetings of the IJB and Performance and Audit Committee (or summaries of actions of recent meetings for which minutes have not yet been prepared) held through the 1 April 2023 to the most recent meeting on the following date: 25 September 2024.
- 4. We confirm the completeness of information provided regarding the identification of related parties. We have disclosed to you the identity of the IJB's related parties and all related party relationships and transactions of which we are aware, including sales, purchases, loans, transfers of assets, liabilities and services, leasing arrangements, guarantees, non-monetary transactions and transactions for no consideration for the period ended, as well as related balances due to or from such parties at the year end. These transactions have been appropriately accounted for and disclosed in the financial statements.⁸
- 5. We believe that the methods, significant assumptions and the data we used in making accounting estimates and related disclosures are appropriate and consistently applied to achieve recognition, measurement and disclosure that is in accordance with the Code of Practice on Local Authority Accounting in the United Kingdom 2023/24.
- 6. We have disclosed to you, and the IJB has complied with, all aspects of contractual agreements that could have a material effect on the financial statements in the event of non-compliance, including all covenants, conditions or other requirements of all outstanding debt.
- 7. From 27 September 2023 through the date of this letter we have disclosed to you, to the extent that we are aware, any (1) unauthorized access to our information

⁵ ISA (UK) 240.39(c),(d), and ISA (UK) 250A.16

⁶ ISA (UK) 580.11(a), ISA (UK) 210.6(b)(iii)

⁷ ISA (UK) 580.11(b)

⁸ ISA (UK) 550.26

⁹ ISA (UK) 540.37 (Revised)

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technology systems that either occurred or to the best of our knowledge is reasonably likely to have occurred based on our investigation, including of reports submitted to us by third parties (including regulatory agencies, law enforcement agencies and security consultants), to the extent that such unauthorised access to our information technology systems is reasonably likely to have a material impact to the financial statements, in each case or in the aggregate, and (2) ransomware attacks when we paid or are contemplating paying a ransom, regardless of the amount

D. Liabilities and Contingencies

- 1. All liabilities and contingencies, including those associated with guarantees, whether written or oral, have been disclosed to you and are appropriately reflected in the financial statements.
- 2. We have informed you of all outstanding and possible litigation and claims, whether or not they have been discussed with legal counsel. 10
- 3. We have recorded and/or disclosed, as appropriate, all liabilities related to litigation and claims, both actual and contingent, and have disclosed in Note 9 to the financial statements all guarantees that we have given to third parties.¹¹

E. Going Concern

 Note 1 to the financial statements discloses all the matters of which we are aware that are relevant to the IJB's ability to continue as a going concern, including significant conditions and events, our plans for future action, and the feasibility of those plans.

F. Subsequent Events

1. There have been no events subsequent to period end which require adjustment of or disclosure in the financial statements or notes thereto. 12

G. Other information ¹³

- 1. We acknowledge our responsibility for the preparation of the other information. The other information comprises Management Commentary, Statement of Responsibilities, Remuneration Report and Annual Governance Statement.
- 2. We confirm that the content contained within the other information is consistent with the financial statements.

H. Climate-related matters

 We confirm that to the best of our knowledge all information that is relevant to the recognition, measurement, presentation and disclosure of climate-related matters has been considered, including the impact resulting from the commitments made by the IJB, and reflected in the financial statements.

¹⁰ ISA (UK) 501.12

¹¹ ISA (UK) 501.12

¹² ISA (UK) 560.9

¹³ Other information is financial and non-financial information (other than the financial statements and the auditor's report thereon) included in an entity's annual report.

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2. The key assumptions used in preparing the financial statements are, to the extent allowable under the requirements of the Code of Practice on Local Authority Accounting in the United Kingdom 2023/24, aligned with the statements we have made in the other information or other public communications made by us.

I. Reserves

1.	We have properly recorded or disclosed in the financial statements the useable and unusable reserves.
Yo	urs faithfully,
	sley Bairden nief Financial Officer)

Mehvish Ashraf (Chair of the Performance and Audit Committee)







East Renfrewshire Health and Social Care Partnership Integration Joint Board

Summary Financial Overview 2023/24

Covering the period 1st April 2022 to 31st March 2023

Introduction

This report provides a summary of the financial position for East Renfrewshire Integration Joint Board (IJB) for the financial year 1 April 2023 to 31 March 2024.

The Annual Report and Accounts for 2023/24 provides a detailed report and full version of the accounts and can be found on our website at [web address will be added following approval of IJB accounts].

This was a very challenging year for the HSCP as we worked to balance meeting the demand for services within the allocated budget. We needed to deliver £7.1 million savings as part of our plans to balance our budget and we were not able to do this and ended the year with a shortfall of £2.5 million against this target.

We used £1.9 million reserves on a planned basis to support us to redesign how we deliver services and achieved £2.7 million of savings during the year.

In addition to this savings shortfall we also had cost pressures from delivering services of £2.2 million. This was after all actions were taken to reduce costs and all available reserve funding applied.

This meant we ended the year with an operational deficit of £4.7 million.

This meant during the financial year 2023/24 we moved to a financial recovery position and had a number of discussions with both of our partners; East Renfrewshire Council and NHS Greater Glasgow and Clyde. Both partners have provided additional funding, on a non-recurring basis, for 2023/24 to eliminate this deficit:

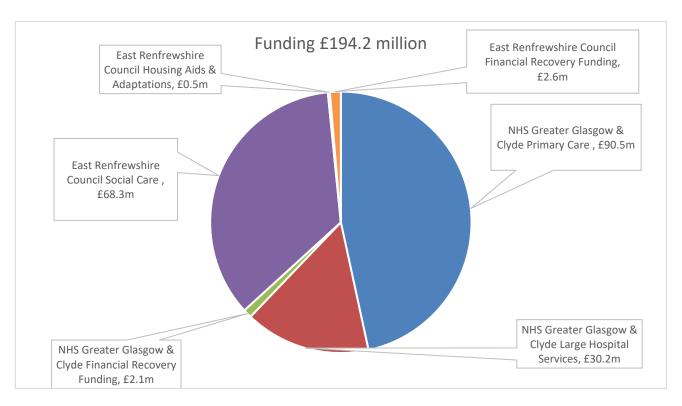
- East Renfrewshire Council provided an additional £2.6 million
- NHS Greater Glasgow and Clyde provided an additional £2.1 million

The main operational challenges that led to the increased cost pressures were meeting demand for Care at Home, the cost of special observations within the Learning Disabilities In-Patients service which we host on behalf of all six HSCPs within Greater Glasgow and Clyde and the costs of prescribing through our GP practices.

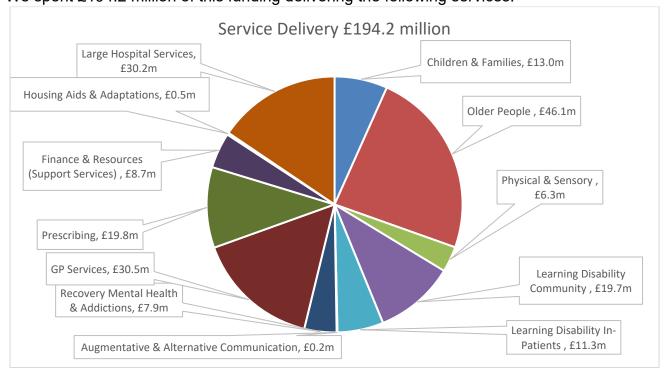
The main area we fell short on delivering planned savings was from our Supporting People Framework. This framework is based on eligibility criteria and was put in place early in the financial year to support reviews of the level of care we provide; we knew we would have to stop providing lower levels of need. We underestimated the impact and timeframe for the culture and practice changes required to implement such significant change alongside managing the expectations of the individuals and families we support.

Financial Performance

The IJB receives the vast majority of its funding from our two key partners East Renfrewshire Council and NHS Greater Glasgow and Clyde and this was £189.5 million from agreed funding as part of the budget for the year and a further £4.7 million additional funding during the year as part of financial recovery funding. This gave a total of £194.2 million for the year.



We spent £194.2 million of this funding delivering the following services:



As part of our financial recovery process we had to use all reserves available to us to reduce our costs during the year. This means we have very limited reserves for 2024/25 and these are for specific activities only.

Despite the financial challenges the partnership performed well during the year and continued to meet the statutory demand for services and provide support to residents of East Renfrewshire.

Planning Ahead for 2024/25 and Beyond

The IJB continues to face a number of challenges, risks and uncertainties in the coming years and this is set out in our current Medium-Term Financial Plan for 2024/25 to 2028/29 and our Strategic Plan for 2022/23 to 2024/25. These key strategies also inform our strategic risk register and collectively support medium-term planning and decision making.

The IJB operates in a complex environment with requirements to ensure statutory obligations, legislative and policy requirements, performance targets and governance and reporting criteria are met whilst ensuring the operational oversight of the delivery of health and care services.

UK and Scottish Government legislation and policies and how they are funded can have implications on the IJB and how we use our funding over time.

The most significant challenges for 2024/25 and beyond include:

- delivering savings to ensure financial sustainability, ensuring sufficient flexibility to allow for slippage, shortfalls or changes
- recognising the tension between delivering a level of savings that will allow the IJB to start to rebuild reserves and protecting service delivery
- managing reduced service capacity as a result of savings and maintaining discharge without delay from hospital and other key indicators
- delivering on our Recovery & Renewal programme for areas of change, including the implementation of a new case recording system
- understanding the longer term impacts of Covid-19 on mental and physical health
- recruitment and retention of our workforce, particularly in the current cost of living crisis
- managing prescribing demand and costs in partnership with our GPs
- supporting the physical and mental health and wellbeing of our workforce and our wider population, again further impacted by the current cost of living challenges
- meeting increased demand for universal services without funding for growth, including increased population demand and new care homes opening within the area
- we may also need to prepare for the challenges and opportunities that may arise from a national care service

The IJB agreed its budget for the financial year 2024/25 on 27th March 2024 recognising the significant challenges brought forward from 2023/24 as well as new demand and cost pressures for 2024/25.

The funding gap in the budget the IJB agreed for 2024/25 is £9.8 million. A savings programme is in place, with a target of £11.8 million; this is to ensure we deliver a minimum level of savings to close the funding gap and ideally achieve more savings than required in year.

The biggest savings target for the year is the Supporting People Framework at £4 million.

East Renfrewshire IJB is not alone in facing unprecedented cost pressures. The national position across all public sector services shows a challenging financial outlook.







Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board					
Held on	25 September 2024					
Agenda Item	11					
Title	Charging for Services 2024/25 and beyond					
Summary To provide the Integration Joint Board (IJB) with an update from the Income Generation Short Life Working Group (IGSLWG) and the proposed approach to extending the scope for charging for non-residential services. This will consider the potential impact to income						
charging for non-residential services. This will consider the potential impact to income during 2024/25 and beyond, including in year increases for some existing charges.						
Presented by	Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)					
Action Required The Integration Joint Board is asked to: • note the update on the implementation of charging for non-residential care, • note the previously agreed report to ERC Cabinet will be considered on 3 October 2024; this proposes increases to existing charges for Community Alarms and for Bonnyton House, effective from 1 January 2025, • note and comment on the proposed next steps for October with a focus on communication and engagement in preparation for 2025/26, • agree to receive the 2025/26 proposed charging report for ERC Cabinet at a seminar in late October / early November.						
 agree to receive the 2025/26 propose 	preparation for 2025/26,					

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

25 September 2024

Report by Chief Financial Officer

Charging for Non-Residential Care

PURPOSE OF REPORT

1. To provide the Integration Joint Board with an update on the recommendations from the Income Generation Short Life Working Group (IGSLWG) to confirm the previously agreed report to ERC Cabinet proposing an increase to existing charges for Community Alarms and for Bonnyton House along with preparation for implementing new charges for 2025/26.

RECOMMENDATIONS

- 2. The Integration Joint Board is asked to:
 - note the update on the implementation of charging for non-residential care,
 - note the previously agreed report to ERC Cabinet will be considered on 3 October 2024; this proposes increases to existing charges for Community Alarms and for Bonnyton House, effective from 1 January 2025,
 - note and comment on the proposed next steps for October with a focus on communication and engagement in preparation for 2025/26,
 - agree to receive the 2025/26 proposed charging report for ERC Cabinet at a seminar in late October / early November.

BACKGROUND

- 3. The Income Generation Short Life Working Group (IGSLWG) was set up to explore the implementation of wider charging for non-residential care.
- 4. Members of the IJB will recall the report to the August IJB that agreed increases to existing charges this year:
 - Community Alarms to £4.90 per week, increased from £3.25
 - Bonnyton House to £960 per week, increased from £912.80
- 5. This proposal will be considered by ERC Cabinet on 3 October 2024 with an implementation date of 1 January 2025.
- 6. Within the existing legislation, the Council has the statutory duty to set charges. ERC Cabinet will consider the proposal for inflation, any cost recovery increases and any new charges at the end of November.
- 7. All charges are linked to the ability to pay and this is confirmed through financial assessment. There is a risk that some people may choose not to engage in this process and potentially pay the full cost of care, or withdraw from engagement with the HSCP. Given the East Renfrewshire population dynamic some people may opt to engage in private arrangements entirely.

8. All charging proposals are supported by our charging policy. This aligns with the "COSLA NATIONAL STRATEGY & GUIDANCE; Charges Applying to Social Care Support for people at home 2024/2025 guidance" which provides a recognised framework.

REPORT

- 9. The focus of this report is on the next steps between now and the end of October as we prepare to set out the proposed charges for 2025/26, with particular focus on the introduction of charges for non-residential care.
- 10. Our engagement timetable and supporting communication information is being refined. The following summary shows the key activity for October:
 - Arrange a series of engagement events, both in person and on-line, across both localities and invite all stakeholders
 - Work with the Council's Money Advice and Rights Team and agree engagement / signposting input
 - Send letters to all peoples impacted by in-year increases pending ERC Cabinet decision on 3 October
 - Reflect engagement feedback in the Frequently Asked Questions document that has been drafted
 - Reflect engagement feedback in the Equalities, Fairness and Rights Impact Assessment that has been drafted
 - Work with Council debtors team to assess workload impacts
 - Revise our charging policy as required
 - Prepare a draft report for the IJB to consider at a seminar towards the end of October / early November with subsequent remit to ERC Cabinet for decision at the end of November
 - Thereafter communicate with all individuals impacted
 - The IGSLWG will also consider any changes to existing charges proposed for 2025/26
 - Continue to review process and procedures for existing and new charges as part
 of the implementation of the finance module with the MOSAIC system
- 11. The engagement with those we support and other key stakeholders will set out the reason for introducing the new charges; what it could mean to individuals, how the ability to pay will be assessed and the supports we can offer within the HSCP and from our partner organisations.
- 12. We need to identify the range of charges we will set to support charging such as an hourly rate for support and expect this to be c£20 to £25 per hour.
- 13. The ability to pay the identified charge is then linked to a financial assessment which looks at all income the person has, allows for a range of deductions recognising the costs of living incurred, identifies a "disposable amount" left over and then applies a taper to that disposable amount. A taper is used to determine the percentage of the disposable income the person should keep and the percentage that should go towards paying for their care. The IGSLWG has agreed this should be set at 60%.
- 14. This will allow a calculation that will show the maximum amount someone would pay towards the cost of their care. It is important that we identify an appropriate cap a level which should not be exceeded to ensure that those with the most complex needs, whose cost of care is normally higher, are not disproportionally disadvantaged.

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15. There will also be certain circumstances where it is not appropriate to charge for a service and the Charging Policy for the IJB sets this out.

CONSULTATION AND PARTNERSHIP WORKING

- 16. The Chief Financial Officer has consulted with our partners and will continue to work in partnership with colleagues to develop and implement the expansion of non-residential charging, recognising this was agreed as part of the budget process for 2024/25 and preparing for 2025/26.
- 17. The consultation and engagement activity throughout October will allow us to set out the rationale for the introduction of new charges with a wide range of stakeholders and most importantly, those directly impacted by this change.

IMPLICATIONS OF THE PROPOSALS

Finance

- 18. The likely income level from non-residential charging will continue to be assessed and included in the November report to the IJB and ERC Cabinet.
- 19. Consideration needs to be given to the treatment of bad debt and any non-payment for services provided. Under the current arrangements the Chief Officer and Chief Financial Officer have the delegated authority to write off bad debt, although to date this has not been required at any material level.

Risk

- 20. If charging for non-residential services is not implemented then additional savings will be required to meet the targets required in 2024/25 and beyond.
- 21. There will be cumulative impacts on individuals as a result of implementing charging on top of other changes to care packages.
- 22. We may see a retraction from use of or engagement with statutory services.
- 23. There may be conflicts with Scottish Government policy intentions.
- 24. Managing the expectations of the people we support and their families may result in reputational damage.

Workforce

- 25. There will be additional work involved relating to setting up and operating the processes for charging for services. This will need to be considered alongside the system and process changes resulting from the implementation of a new case recording system (MOSAIC) and associated finance module. The council is supporting the IJB with "invest to save" funding for a post to support the implementation of non-residential charging for a 12 month period.
- 26. It is hoped that some of the new work may be contained through the introduction of new processes for existing workflows. As we work towards implementation of the Mosaic system this will become clearer.

27. We need to assess the impact to other Council services and in particular the Money Advice and Rights Team (MART) and Debtors teams.

Equalities

- 28. We will complete an equalities, fairness and rights impact assessment relating to the charging proposals following engagement with key stakeholders.
- 29. Engagement and communication needs to be mindful of multiple impacts on any group or individual following Supporting People reviews and / or other service changes.

DIRECTIONS

30. There are no specific directions at this time.

CONCLUSIONS

31. The IGSLWG has identified two in-year increases for 2024/25, to be considered by ERC Cabinet on 3 October 2024. The IJB will receive a further report in November that will set out the impacts and implementation process for non-residential charging for 2025/26 along with the associated report to be considered by ERC Cabinet for setting all charges for 2025/26.

RECOMMENDATIONS

- 32. The Integration Joint Board is asked to:
 - note the update on the implementation of charging for non-residential care,
 - note the previously agreed report to ERC Cabinet will be considered on 3 October 2024; this proposes increases to existing charges for Community Alarms and for Bonnyton House, effective from 1 January 2025,
 - note and comment on the proposed next steps for October with a focus on communication and engagement in preparation for 2025/26,
 - agree to receive the 2025/26 proposed charging report for ERC Cabinet at a seminar in late October / early November.

REPORT AUTHOR

Lesley Bairden, Head of Finance and Resources (Chief Financial Officer) lesley.bairden@eastrenfrewshire.gov.uk 0141 451 0746

16 September 2024

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

IJB 16.08.2024 – Charging for Services 2024/25 and beyond https://www.eastrenfrewshire.gov.uk/media/10593/IJB-ltem-13-14-August-2024.pdf?m=1722614081173



AGENDA ITEM No. 13







Meeting of East Renfrewshire Health and Social Care Partnership	Integration J	oint Board	
Held on	25 Septemb	er 2024	
Agenda Item	13		
Title	HSCP Strate	egic Plan Update	
Summary			
This report provides members with for 2025-28.	an update on	the development of	the HSCP Strategic Plan
Presented by	Steven Reid Policy, Planr	ning and Performand	e Manager
Presented by Action Required			e Manager
<u> </u>	Policy, Planr	ning and Performand	
Action Required Integration Joint Board members a	Policy, Planr	ning and Performand	
Action Required Integration Joint Board members a	Policy, Planr	ning and Performand	
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Action Required Integration Joint Board members a report. Directions	Policy, Planr	ning and Performand ote and comment on	the contents of the
Action Required Integration Joint Board members a report. Directions No Directions Required	Policy, Planr	ing and Performand ote and comment on Implications ☐ Finance	the contents of the ☐ Risk
Action Required Integration Joint Board members a report. Directions No Directions Required Directions to East Renfrewshire Council (East Renfrewshire C	Policy, Planr	ing and Performance Implications	the contents of the

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

25 SEPTEMBER 2024

Report by Chief Officer

HSCP STRATEGIC PLAN UPDATE

PURPOSE OF REPORT

1. The purpose of the report is to provide members with an update on the development of the revised HSCP Strategic Plan for 2025-28.

RECOMMENDATIONS

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

BACKGROUND

- 3. The Public Bodies (Joint Working) (Scotland) Act 2014 places a duty on integration authorities to create a strategic plan for the integrated functions that they control. The strategic plan should draw upon the 'commissioning' process. Commissioning is the term used for all the activities involved in assessing and forecasting needs. It links investment to agreed outcomes, considering options, planning the nature, range and quality of future services and working in partnership to put these in place.
- 4. Integration authorities are required to review their strategic plan at least every three years, and may carry out additional reviews from time to time. In carrying out a review of the strategic plan, integration authorities must consider:
 - the national health and wellbeing outcomes;
 - the integration delivery principles;
 - the views of the Strategic Planning Group.
- 5. There should be a clear recording and measurement framework so that there is an ongoing process to assess whether aims are being achieved.
- 6. The current East Renfrewshire HSCP Strategic Plan was approved by the IJB on 16 March 2022 and covers the period 2022/23 to 2024/25. As such, a revision of the plan is required with a refreshed Strategic Plan to be established for 2025/28.
- 7. The revised plan will build on, and be a further development of our existing vision and priorities. It will also recognise the changed circumstances for the HSCP since the last plan was developed, and be open and realistic about the constraints the HSCP is working in. It will articulate the broad partnership approach we are taking with third and independent sectors partners and our communities to meet the full range of needs in East Renfrewshire.

REPORT

- 8. Our approach to evidence gathering and engagement work for the new plan has been discussed and agreed with the Strategic Planning Group who have responsibility for directing the development of the revised plan.
- 9. We are clear that in reviewing the Strategic Plan, we are not starting with a 'blank page' but building on core elements of our existing plan. Given recent resource changes in the HSCP Planning and Performance team and wider capacity issues across the partnership, it is our intention to take a lighter-touch approach to the engagement work for the review of the plan. This approach is in line with the other partnerships in Greater Glasgow and Clyde that are required to update their plans this year.

Existing local plans and recent (or planned) engagement activity to inform the revised strategic plan

10. To avoid duplication and streamline the process we intend to incorporate the learning (and agreed priorities) from recent local planning and engagement activity into our revised (overarching) Strategic Plan. There are also a number of pieces of local engagement activity currently underway that will inform elements of our new Strategic Plan. Examples of these include:

Ongoing/planned local engagement work

- Local engagement for GGC Mental Health strategy
- Health and Wellbeing Survey engagement on results
- Carers Short-break statement
- East Renfrewshire Dementia Strategy
- Revised HSCP Workforce Plan

Recently developed local plans

- At Our Heart East Renfrewshire Children and Young People's Services Plan 2023-2026
- Supporting People Framework
- Medium Term Financial Plan
- East Renfrewshire Alcohol and Drugs Plan 2024-27
- East Renfrewshire Suicide Prevention Plan
- HSCP Participation and Engagement Strategy
- GGC Advocacy Strategy
- HSCP Strategic Commissioning Plan
- East Renfrewshire Community Plan A Place to Grow
- 11. The Strategic Plan document will incorporate priorities set out in subsidiary local plans such as our Commissioning Plan and Workforce Plan. The Strategic Plan will be made available online with links to these subsidiary plans in full.
- 12. We will ensure that the Strategic Plan aligns with all relevant GGC and national planning priorities.

Additional engagement for the Strategic Plan review

- 13. As well as tapping into planned engagement activity, we will undertake engagement activity focused specifically on the Strategic Plan. We propose to deliver three engagement events two in-person events in each locality and one ('mop-up') event online and we will broaden our reach through survey work. We will also hold a workshop event with the Strategic Planning Group (SPG):
 - In-person stakeholder events (Eastwood and Barrhead localities) gathering views on priorities and areas for focus.
 - Teams event gathering views on priorities and areas for focus.
 - Online survey gathering views and experiences of: service users and residents, partners and staff.
 - SPG workshop to discuss findings from engagement and emerging draft plan (31st October).

Drafting and consulting on the plan

- 14. A draft Strategic Plan (for consultation) will be presented at the IJB meeting on 20th November 2024. We will undertake a full public / stakeholder consultation on the draft through the following methods:
 - Promotion of the draft with a short questionnaire to our prescribed consultees.
 - Promotion of the draft/questionnaire through HSCP website, social media, ERC Have Your Say page, staff bulletins.
 - Promotion and discussion of draft at Big Lunch events in December 2024.
- 15. Feedback from the consultation exercise will be fed into the subsequent draft of the Strategic Plan. The draft will be discussed at the Strategic Planning Group in February 2025 and the draft final Strategic Plan will be presented to the IJB for approval in March 2025.

CONSULTATION AND PARTNERSHIP WORKING

- 16. The HSCP Strategic Planning Group was consulted on the approach to reviewing our Strategic Plan at their meetings in June and August 2024.
- 17. Planned engagement activity for the review is outlined in the main report above. The engagement activity will be supported by our local multi-agency Participation and Engagement Network involving a wide range of local stakeholders.

IMPLICATIONS OF THE PROPOSALS

<u>Finance</u>

18. There are no financial implications from the Strategic Plan review process. Engagement activity will be undertaken within existing resources.

Workforce

19. No wider staffing implications. HSCP staff with planning responsibilities will be involved in the revision of the Strategic Plan.

Legal

20. Timely revision of the Strategic Plan is a statutory requirement of the Integration Joint Board.

Equalities

- 21. Reflecting the Integration planning and delivery principles, the revision of the Strategic Plan will:
 - Take account of the particular needs of different service-users.
 - Take account of the particular needs of service-users in different parts of the area in which the service is being provided.
 - Take account of the particular characteristics and circumstances of different service-users.
- 22. An equality impact assessment is being completed to support the Strategic Plan and will be published alongside the final plan.
- 23. There are no legal, risk, policy or infrastructure implications.

CONCLUSIONS

- 24. The updated Strategic Plan for 2025/28 will be the fourth iteration of our strategy since the establishment of the HSCP. The partnership is facing significant resource constraints and we will take a streamlined and proportionate approach to the development of the plan, building on recent planning/engagement activity.
- 25. The Strategic Plan will reflect the high-level aims and ambitions for the HSCP and will outline the approaches we will take as a wider partnership to meet the health and care needs of people in East Renfrewshire.

RECOMMENDATION

26. Integration Joint Board members are asked to note and comment on the contents of the report.

REPORT AUTHOR AND PERSON TO CONTACT

Steven Reid, Policy, Planning and Performance Manager steven.reid@eastrenfrewshire.gov.uk 0141 451 0749

September 2024

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

East Renfrewshire HSCP Strategic Plan 2022-25, IJB Paper, 16 March 2022 eastrenfrewshire.gov.uk/media/7440/IJB-item-06-16-March-2022/pdf/IJB item 06 - 16 March 2022.pdf?m=1646923405760



AGENDA ITEM No. 14





Meeting of East Renfrewshire Health and Social Care Partnership	Integration Jo	ntegration Joint Board				
Held on	25 Septembe	er 2024				
Agenda Item	14					
Title	HSCP iMatte	r 2024				
Summary This report outlines the results of the Health and Social Care Partnership 2024 iMatter survey.						
Presented by Julie Murray, Chief Officer						
Action required The Integration Joint Board is asked to: • note the areas the HSCP have achieved positive feedback from staff • note the actions required for improvement • consider participation in HSCP Bulletin communications to raise awareness of IJB members and their roles.						
Directions No Directions Required □ Directions to East Renfrewshire Council (□ Directions to NHS Greater Glasgow and (□ Directions to both ERC and NHSGGC	,	Implications Finance Policy Workforce Equalities	☐ Risk ☐ Legal ☐ Infrastructure ☐ Fairer Scotland Duty			

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

25 September 2024

Report by Chief Officer

EAST RENFREWSHIRE HSCP IMATTER 2024

PURPOSE OF REPORT

1. The purpose of this report is to outline the results of the Health and Social Care Partnership 2024 iMatter survey.

RECOMMENDATION

- 2. The Integration Joint Board is asked to:
 - Note the areas the HSCP have achieved positive feedback from staff.
 - Note the actions required for improvement.
 - Consider participation in HSCP Bulletin communications to raise awareness of IJB members and their roles.

BACKGROUND

- 3. The iMatter questionnaire, and importantly the collaborative action planning discussions that follow, provide a platform to share thoughts on staff experiences at work, and drive forward activity where there are opportunities for improvement.
- 4. The iMatter questionnaire is launched in 3 cohorts, with East Renfrewshire HSCP in the third cohort.
- 5. Our iMatter survey opened on 28th May 2024 with 1037 staff across 76 teams receiving the survey via email or SMS text message. This is the first year the HSCP has been completely digital in our distribution of the questionnaire.
- 6. The results of the survey are split into percentages of responses and also by Employee Engagement Indicator (EEI) scores.
- 7. The Employee Engagement Index is not a percentage. It is presented as a composite score against an EEI maximum value of 100. The EEI is generated from 28 questions relating to staff engagement. Responses are based on a six point Likert scale where: 'Strongly Agree' = 6

'Agree' = 5

'Slightly Agree' = 4

'Slightly Disagree' = 3

'Disagree' = 2

'Strongly Disagree' = 1

REPORT

- 8. The 2024 survey reported an increased response rate for East Renfrewshire HSCP. We achieved a 65% response rate compared to 57% in 2023.
- 9. Our Employee Engagement Index (EEI) score was slightly lower at 78 compared to 80 last year. In comparison with the other HSCPs our engagement is good.

Directorate	Response Rate %	EEI Score
East Dunbartonshire HSCP	69%	81
East Renfrewshire HSCP	65%	78
Inverclyde HSCP	58%	79
Renfrewshire HSCP	57%	75
Glasgow HSCP	55%	77
Total NHS GGC	53%	75

- 10. Linking our scores with the 5 Staff Governance Strands we scored highest for questions related to staff being "well informed" and "being treated fairly and consistently, with dignity and respect, in an environment where diversity is valued".
- 11. Our lowest scores were for questions relating to "being involved in decisions".
- 12. These results are in keeping with results from previous years.



13. Our top 5 performing questions were:

iMatter Questions	Staff Experience Employee Engagement		Average Response			
	Components	2021	2022	2023	2024	
My direct line manager is sufficiently approachable	Visible & Consistent Leadership	90	87	91	90	
I feel my direct line manager cares about my health and well-being	Assessing risk & monitoring work stress and workload	88	85	89	88	
I have confidence and trust in my direct line manager	Confidence & trust in management	88	85	89	88	
I am clear about my duties and responsibilities	Role Clarity	87	87	87	88	
I would recommend my team as a good one to be a part of	Additional Question	87	84	88	87	
My team works well together	Effective team working	85	83	87	86	

14. Our lowest 5 performing questions were:

iMatter Questions	Staff Experience Employee Engagement		Average Response			
	Components	2021	2022	2023	2024	
I feel involved in decisions relating to my job	Empowered to Influence	72	71	75	72	
I am confident performance is managed well within my organisation	Performance management	66	66	69	66	
I have confidence and trust in Board members who are responsible for my organisation	Confidence & trust in management	65	63	66	62	
I feel sufficiently involved in decisions relating to my organisation	Partnership Working	59	59	60	58	
I feel that board members who are responsible for my organisation are sufficiently visible	Visible & Consistent Leadership	60	58	60	58	

Action Planning

- 15. This final stage in the iMatter process is the most important. It involves teams meeting to discuss the results of their team report, celebrating their successes and agreeing actions to make improvements where necessary.
- 16. This year we achieved an 88% Action Planning completion rate compared to 96% in 2023. This may be attributed to the fact that the action planning period was during the summer.
- 17. We are also required to create an HSCP wide Action Plan. The Senior Management Team agreed the following Action Plan.

What we do well

We have a culture with supportive line managers who care about staff wellbeing

Areas for Improvement	Desired Outcome	Actions	Responsible for the Action and target completion date – who and when?
Involved in decisions relating to my job/team	Improved staff engagement	Ensure staff involvement through team meetings/121/KSF/Quality Conversations when change is required	Team Managers 31/12/2024
Confidence my ideas are listened to and acted upon	Evidence ideas are recorded and actioned	Team iMatter Action Plan to be agreed by whole team and mid year review to evidence progress recorded	Team Managers 28/02/2025
Adequate time to support learning and development	Dedicated time given to support learning and development	All staff allowed time to complete Stat/Man training. Agreed learning and development through KSF/ Quality Conversation with time to complete	All 31/07/2025
Visibility of SMT/DMT	Improve visibility and awareness of SMT/DMT managers	Regular visits to team meetings from SMT/DMT. Monthly Who's Who communication in HSCP Staff Bulletin	SMT/DMT 31/07/2025

18. Last year we ran a series of articles in the HSCP Newsletter about our IJB members to increase knowledge and awareness of the roles within the IJB. We would welcome the opportunity to continue working with IJB members to increase knowledge and awareness of roles and responsibilities and the opportunity to introduce new members on our Board.

CONSULTATION AND PARTNERSHIP WORKING

- 19. Consultation within each team during action planning ensures a collaborative approach to developing their agreed action plan and facilitates ownership for improvements.
- 20. The HSCP wide Action Plan is agreed by the Senior Management Team and presented at Joint Staff Forum for staffside input and agreement.

IMPLICATIONS OF THE PROPOSALS

21. There are no implications arising from this report.

DIRECTIONS

22. There are no directions required.

CONCLUSIONS

- 23. East Renfrewshire HSCP is committed to achieving a better working environment for all and iMatter provides the opportunity to work with those staff and teams to achieve this. We have traditionally performed well in our iMatter reports, however there are always further improvements that can be made.
- 24. This year our action planning rate dropped slightly, although still an excellent achievement. The drop could be attributed to the time of year as the summer holiday period coincided with preparing the action plans.
- 25. Overall, we had a very positive report and will focus on the areas of improvement detailed in the HSCP Action Plan.

RECOMMENDATIONS

- 26. The Integration Joint Board is asked to:
 - note the areas the HSCP have achieved positive feedback from staff
 - note the actions required for improvement
 - consider participation in HSCP Bulletin communications to raise awareness of IJB members and their roles.

REPORT AUTHOR AND PERSON TO CONTACT

Catriona Reid, HR Manager Catriona.Reid4@nhs.scot

4 September 2024

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

None







Meeting of East Renfrewshire Health and Social Care Partnership				
Held on 25 September 2024				
Agenda Item 15				
Title East Renfrewshire Health and Wellbeing Su and NHS GGC Director of Public Health Wo Together to Stem the Tide Report				
Summary				
This report provides the Integration Joint Board with an overview of the East Renfrewshire Health and Wellbeing Survey and the Director of Public Health Working Together to Stem the Tide report.				
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the Tide report. The findings from the Health and Wellbeing Survey have informed the calls to action Director of Public Health Working Together to Stem the Tide report. Both reports prov opportunity to galvanise and mobilise partners around a shared understanding of the health priorities for our communities. Gillian Phillips, Health Improvement Lead, E Renfrewshire HSCP	ide an public			
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25 September 2024

Report by Chief Officer

EAST RENFREWSHIRE HEALTH AND WELLBEING SURVEY AND NHS GGC DIRECTOR OF PUBLIC HEALTH WORKING TOGETHER TO STEM THE TIDE REPORT

PURPOSE OF REPORT

 The purpose of this report is to provide the Integration Joint Board with an overview of the findings from the East Renfrewshire Health and Wellbeing Survey and the Director of Public Health Working Together to Stem the Tide report

RECOMMENDATION

2. The Integration Joint Board is asked to note the report.

BACKGROUND

- 3. The NHS GGC Director of Public Health (DPH) Working Together to Stem the Tide report sets out the public health challenges, recognising the impact of the Covid-19 pandemic and general reduction in standards of living as a result of increased cost of living. This is an opportunity to use the analysis and calls to action within the Director of Public Health report within planning structures to capitalise on available opportunities to improve health.
- 4. Data within the NHS Greater Glasgow and Clyde's 2022/23 Adult Health and Wellbeing (HWB) Survey Report for East Renfrewshire can be reviewed to get insight on local impact.
- 5. Funding for the East Renfrewshire 2022/23 Health and Wellbeing Survey was provided via Public Health Directorate, NHS GGC.
- 6. The aim of the survey is to:
 - to provide intelligence to inform Board wide planning e.g. Public Health priorities, Health and Social Care Partnerships and local Community Planning Partnerships;
 - to explore the different experience of health and wellbeing in our most deprived communities compared to other areas;
 - to provide intelligence on the impact of the COVID pandemic on health behaviours; health and illness; social health; social capital; financial wellbeing;
 - to provide information that would be useful for monitoring health improvement intervention
- 7. The survey provides information on health trends and analysis by different population groups to inform planning within East Renfrewshire and NHS Greater Glasgow and Clyde and highlights areas where we need to work with partners and local communities to improve health.

- 8. As the interviews were conducted in 2022/23, it is the first Health and Wellbeing survey conducted post-Covid and provides intelligence on the impact of the pandemic for our community. We know that, alongside the pandemic, austerity has also had a more disproportionate negative impact on some of our residents. 1058 East Renfrewshire residents participated in the survey and shared their experiences.
- 9. The report provides an opportunity to galvanise and mobilise partners around a shared understanding of the public health priorities for our communities.
- 10. The Health and Wellbeing Survey is the fourth survey in East Renfrewshire since the inception in 1999 and the biggest single source of data about current health behaviours and perceptions of health and wellbeing across our population enabling us to consider public health issues at a locality and thematic level.
 - The survey provides valuable information on the self-perceived health and wellbeing
 of our residents, their health behaviours, social health, social capital and financial
 wellbeing
 - Flexible tool for monitoring the HWB of the population
 - Fourth report produced for East Renfrewshire since the survey expanded across the wider Health Board area in 2008.
 - Cross sectional a 'snapshot in time'
 - Same Methodology Random Stratified sample
 - Representative of the HSCP population and sub-areas to allow the exploration area, age, sex and deprivation
 - o Large sample which has grown significantly over time
 - Includes core set of questions with new questions introduced to reflect local priorities and changing national targets

REPORT

11. A summary of the themes from the survey are:

Health & Illness

- Three in ten adults in East Renfrewshire had a long-term limiting condition or illness
- Just under half of all adults were receiving treatment for at least one condition
- 20% of adults had a WEMWBS score indicating depression, rising to more than 1 in 3 (35%) of those in the most deprived areas
- Four in three (76%) of adults said they felt their mouth and teeth were in good health
- Overall 50% of respondents said at least one of the health and wellbeing indicators had deteriorated due to the COVID pandemic
 - o 35% Quality of Life
 - o 32% Mental / Emotional Wellbeing
 - 26% Physical Wellbeing
- Those in the most deprived areas had poorer self-perceived health and wellbeing indicators
- East Renfrewshire fared poorer than East Dunbartonshire for health and wellbeing indicators including views of general health, mental/emotional wellbeing, feeling in control of decisions and quality of life

Health Behaviours

- One in twelve (8%) of adults were smokers. Those in the most deprived area were much more likely to smoke.
- 14% were exposed to second hand smoke. Exposure to second hand smoke was highest among adults aged under 35.
- The use of e-cigarette was most common among young adults and those in the most deprived areas.
- Men were twice as likely as women to have an AUDIT score which indicated alcoholrelated risk.
- More than two in five (44%) met the target of consuming five or more portions of fruit and vegetables per day.
- 76% met the target of 150 minutes of physical activity per day.
- Those in the most deprived areas had poorer indicators for smoking, exposure to smoke, use of e-cigarettes, binge drinking, consuming fruit/vegetables and meeting the target for physical activity.
- Compared to NHSGGC, those in East Renfrewshire were:
 - o more likely to drink alcohol
 - o (among those who drank) more likely to binge

Social Health

- One in seven adults felt isolated from family and friends.
- Just under one in five adults felt lonely at least some of the time in the previous two weeks
- Men were more likely than women to feel safe using local public transport or walking alone in their area.
- Those in the most deprived areas were less likely to feel safe using local public transport or walking alone in their area.
- One in four adults had caring responsibilities.
- Compared to NHSGGC, those in East Renfrewshire were:
 - o less likely to feel isolated from family/friends
 - o less likely to feel lonely
 - o more likely to feel they belonged to their local area
 - o more likely to feel that local people can influence local decisions
 - o less likely to be the victim of crime
 - o more likely to feel safe using local public transport or walking alone in their area
 - o less likely to experience discrimination.

Financial Wellbeing

- One in twenty received all household income from benefits.
- Three in ten (29%) said they had difficulty meeting the cost of food and/or energy (at least occasionally), rising to 53% of those in the most deprived areas.
- Overall, 10% of respondents said it would be a problem to find £35, 30% said it would be a problem to find £165 and 65% said it would be a problem to find £1,600.
- Just over a third (36%) reported indicators of difficulties affording energy, rising to 56% of those in the most deprived areas.

- Overall 2% reported experience of **either** going hungry or not eating for a whole day, indicative of the most severe forms of food insecurity.
- One in ten spent money on gambling (excluding lottery).
- Those in the most deprived areas had poorer indicators of financial wellbeing.

Social Capital

- Overall, 82% had a positive view of reciprocity and 88% were positive about trust.
- Three in ten people volunteered (formally or informally).
- Overall, 12% of people had engaged in social activism.
- Three in ten belonged to any social clubs, associations, church group or similar.
- Over a range of indicators of social capital, those in the most deprived areas had less positive findings.
- Compared to NHSGGC, those in East Renfrewshire were:
 - o more likely to have positive views of reciprocity and trust
 - o more likely to value local friendships
 - o more likely to have a positive view of social support
 - o more likely to volunteer formally
 - more likely to belong to clubs/associations/groups
- 12. Comparisons are also made with the findings for the NHSGGC area as a whole (N=10,030) and East Dunbartonshire (N=1,088). East Dunbartonshire was selected as the comparable HSCP area with similar demographics to East Renfrewshire (N=1,058).
- 13. Within East Renfrewshire, those from more deprived areas have worse outcomes. These indicators can be a useful guide for areas for improvement.

Indicators where East Renfrewshire compared less favorably to East Dunbartonshire

- less likely to have a positive view of their general health
- less likely to have a positive view of their mental/emotional wellbeing
- less likely to definitely feel in control of the decisions affecting their life
- less likely to have a positive view of their quality of life
- (among those who drank alcohol) more likely to binge drink
- less likely to participate in strength/balance activities
- less likely to engage in social activism
- more likely to have difficulty meeting the cost of food or energy
- more likely to say it would be a problem to find unexpected sums of £35, £165 or £1.600
- · more likely to report experiences indicating difficulty affording energy

Indicators where East Renfrewshire compared less favorably to NHS GGC

- more likely to report negative effects of COVID on wellbeing
- more likely to drink alcohol
- (among those who drank) more likely to binge
- less likely to participate in strength/balance activities

- 14. The findings from the Health and Wellbeing S have been used to shape the updated East Renfrewshire Alcohol and Drugs strategy. In response to these findings training opportunities with local partners have been developed e.g.
 - The Alcohol and Drugs Partnership funded Community Reinforcement and Family Training (CRAFT) with places offered across East Renfrewshire to any organisations with staff and volunteers supporting family members (of all ages) affected by a loved ones alcohol and drug use.
 - Alcohol Focus Scotland have delivered a Children Harmed By Alcohol Training session for East Renfrewshire staff.
 - Bet You Can Help' Now sessions offered across East Renfrewshire. Sessions are designed to increase knowledge, and understanding of gambling harms and the appropriate levels of support available.

CONSULTATION AND PARTNERSHIP WORKING

- 15. The Health and Wellbeing Survey (HWBS) is a partnership with Public Health Directorate, NHS GGC and East Renfrewshire HSCP.
- 16. HSCP staff helped design the survey via a HWBS Oversight Group and the HWBS report reviewed and amended by HSCP staff before going to publish. Fieldwork and data entry were performed by BMG on behalf of NHS GGC and analysis and reporting performed by Traci Leven Research.
- 17. Community Planning Partners have sourced the report data for development of East Renfrewshire: A Place to Grow Strategic Vision. A local working group has been established to work with wider East Renfrewshire partners to develop a communication and dissemination plan. To support community engagement and help mobilise community action, we will develop digital information/reels that help to:
 - **Inform**: Share and create understanding of post-pandemic health challenge and specific needs
 - **Involve:** Create wide dialogue to address the challenge, including individual's role in self-care and accessing healthcare in the virtual world
 - **Innovate:** Building on examples of best practice, jointly create solutions that answer the reality of the post pandemic era

IMPLICATIONS OF THE PROPOSALS

Workforce

- 18. Understanding local demographics and public health is everyone's business. Both internal and external can be involved in empowering patients to improve self-care. The two Health Improvement leads are championing this data and the opportunities to deliver the Public Health Director calls to action. These opportunities to develop staff awareness and knowledge are being driven via Children & Families Sub Groups, Costs of Living group and wider community partners.
- 19. There are no legal, finance, risk, equalities, policy or infrastructure.

DIRECTIONS

20. There are no directions arising from this report.

CONCLUSIONS

- 21. The areas highlighted as areas East Renfrewshire performed less favourably provides evidence and opportunity to respond to the Director of Public Health calls to action including:
 - Ensuring the best start to life
 - Boosting mental health & wellbeing
 - · Concerted action to reduce alcohol harm
 - · Enabling healthy weight
 - Building on a trauma informed response
 - Broadening access to digital health
 - Strengthening communities and places

RECOMMENDATIONS

22. The Integration Joint Board is asked to note the report.

REPORT AUTHOR AND PERSON TO CONTACT

Gillian Phillips, Health Improvement Lead <u>qillian.phillips@eastrenfrewshire.gov.uk</u>

Chief Officer, IJB: Julie Murray

13 September 2024

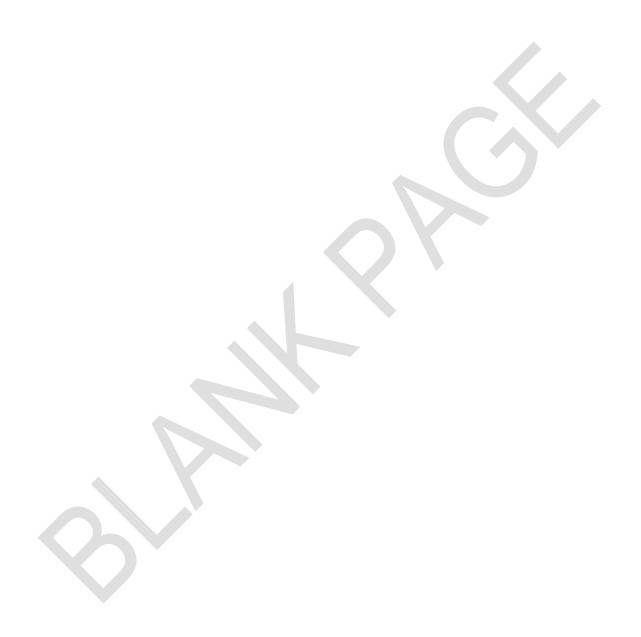
BACKGROUND PAPERS

https://www.nhsggc.scot/your-health/public-health/director-of-public-health-report-2024/

NHS Greater Glasgow and Clyde 2022/23 adult health and wellbeing survey: East Renfrewshire report

https://www.stor.scot.nhs.uk/handle/11289/580387

Turning the tide through prevention: Public Health Strategy 2018-28 https://www.stor.scot.nhs.uk/handle/11289/579831









Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board				
Held on	25 Sept	25 September 2024			
Agenda Item	17				
Title	IJB Cor	JB Complaints Annual Report 2023/24			
Summary					
This is the Integration Joint Board's Annual Complaints Report for 2023/24. This is a mandatory reporting requirement set out by the Scottish Public Services Ombudsman.					
During 2023/24 there were no complaints received in relation to the IJB however it is stipulated that organisations must publish an annual complaints performance report even in the case of a nil return.					
	Looloy	Pairdon Haad of Fin	ance and Descurees		
Presented by	Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)				
Action Required					
The Integration Joint Board is asked to note the report.					
Directions		Implications			
No Directions Required ■		Finance	Risk		
☑ No Directions Required☑ Directions to East Renfrewshire Council (ERC)	NIO CO	☐ Finance	 ☐ Legal		
No Directions Required ■	HSGGC)	Finance			

25 September 2024

Report by Chief Officer

IJB COMPLAINTS - ANNUAL REPORT 2023/24

PURPOSE OF REPORT

1. This report forms the Integration Joint Board's Annual Complaints Report for 2022/23. This is a mandatory reporting requirement set out by the Scottish Public Services Ombudsman.

RECOMMENDATION

2. The Integration Joint Board are asked to note the report.

BACKGROUND

- 3. The Scottish Public Services Ombudsman Act 2002 (as amended) provides the legislative basis for the Scottish Public Services Ombudsman (SPSO) to publish the Model Complaints Handling Procedures (MCHP) for bodies under the SPSO's jurisdiction
- The MCHP says all organisations (even in the case of low complaint numbers or nil return)
 must
 - report at least quarterly to their Senior Management on the KPIs and analysis of the trends and outcomes of complaints
 - publish on a quarterly basis information on complaints outcomes and actions taken to improve services, and
 - publish an annual complaints performance report on their website in line with Part 4 of the MCHP. There is no requirement for organisations to report their data to SPSO.
- In May 2021, we made a commitment that should the Integration Joint Board receive any complaints, these would be reported to the Board at the next scheduled meeting. To date we have not received any IJB complaints.

REPORT

6. During 1 April 2023 – 31 March 2024 no complaints were made in relation to the Integration Joint Board.

CONSULTATION AND PARTNERSHIP WORKING

7. The SPSO's Improvement, Standards and Engagement team is available to work with public service providers to improve standards of complaints handling.

IMPLICATIONS OF THE PROPOSALS

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

DIRECTIONS

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

CONCLUSIONS

10. East Renfrewshire Integration Joint Board will continue to publish <u>quarterly reports</u> on the website and present an annual report to the integration Joint Board in line with the mandatory reporting requirements set out by the SPSO ahead of the reporting deadline of October each year.

RECOMMENDATIONS

11. The Integration Joint Board are asked to note the report.

REPORT AUTHOR AND PERSON TO CONTACT

Lesley Bairden, Head of Finance and Resources Lesley.Bairden@eastrenfrewshire.gov.uk

Pamela Gomes, Governance and Compliance Officer pamela.gomes@eastrenfrewshire.gov.uk

4 September 2024

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

IJB Quarterly Complaints Reports

https://www.eastrenfrewshire.gov.uk/icm/mediaaccess.cfm?file=pdf/j/1/IJB Quarterly Complaints 2021-22 - 23-24.pdf

IJB Paper – IJB Annual Complaints Report 2022/23

https://www.eastrenfrewshire.gov.uk/media/9241/IJB-Item-09-28-June-2023/pdf/IJB_Item_09 - 28_June_2023.pdf?m=1686917466570

IJB Paper – May 2021

https://www.eastrenfrewshire.gov.uk/media/4980/IJB-Item-12-12-May-2021/pdf/IJB_Item_12_-_12_May_2021.pdf?m=637558874880700000

SPSO Model Complaints Handling Procedures

https://www.spso.org.uk/the-model-complaints-handling-procedures

SPSO Key Performance Indicators for Model Complaints Handling Procedures https://www.spso.org.uk/sites/spso/files/csa/SPSOKPIsMCHP.pdf









Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board				
Held on	25 September 2024				
Agenda Item	18				
Title	Membership of the Performance and Audit Committee.				
Summary					
To seek approval of the appointment of an NHS Voting Member on the East Renfrewshire Integration Joint Board to serve temporarily on the Performance and Audit Committee.					
Presented by	Barry Tudhope, Democratic Services Manager				
Action Required					
The Integration Joint Board is asked to approve the appointment of an NHS Voting member on the Integration Joint Board to serve on the Performance and Audit Committee on a temporary basis.					
Directions		Implications			
No Directions Required		Finance	Risk		
Directions to East Renfrewshire Council (ERC)	110000	Policy	Legal		
Directions to NHS Greater Glasgow and Clyde (N	HSGGC)	Workforce	☐ Infrastructure		
☐ Directions to both ERC and NHSGGC		☐ Equalities	☐ Fairer Scotland Duty		

25 September 2024

Report by Chief Officer

Membership of the Performance and Audit Committee

PURPOSE OF REPORT

1. This report recommends the temporary appointment of a NHS Voting Member on the East Renfrewshire Integration Joint Board to serve on the Performance and Audit Committee.

RECOMMENDATION

2. That the Integration Joint Board approves the appointment of an NHS Voting member on the Integration Joint Board to sit on the Performance and Audit Committee on a temporary basis

REPORT

- 1. The Performance and Audit Committee is as a formal sub-committee of the Integration Joint Board, convening four times annually for 1.5 hours prior to the Integration Joint Board meetings scheduled for March, June, September, and November.
- 2. The committee consists of four voting members: two representatives from the Health Board and two from the Council, along with an additional two members selected from the broader membership of the Integration Joint Board.
- 3. At the Integration Joint Board meeting held on 26 June 2024, Board was advised that Mehvish Ashraf, as the NHS Lead Member, will assume the role of Chair of the Performance and Audit Committee starting in September 2024.
- 4. The other NHS Member appointed to the Performance and Audit Committee has advised that they will temporarily be unavailable for meetings.
- 5. Consequently, the Integration Joint Board is requested to approve the appointment of an NHS Voting Member of the Integration Joint Board, to fill the temporary vacant position on the Performance and Audit Committee until the return of the other NHS representative, at which point the committee membership will be reassessed.

CONSULTATION AND PARTNERSHIP WORKING

6. The Chief Officer, Chief Financial Officer, and NHS representatives on the Integration Joint Board have been consulted regarding this report.

IMPLICATIONS OF THE PROPOSALS

7. Failure to appoint a second NHS Voting Member may result in an imbalance within the Performance and Audit Committee, and would contradict established best practices observed in other Integration Joint Boards throughout Scotland.

DIRECTIONS

8. There are no directions arising from this report.

CONCLUSIONS

9. The appointment of a second NHS Voting Member to the Performance and Audit Committee is regarded as best practice, and it will allow for balanced discussion and debate at future meetings.

RECOMMENDATIONS

10. The Integration Joint Board is requested approve the appointment of an NHS Voting member on the Integration Joint Board to sit on the Performance and Audit Committee on a temporary basis.

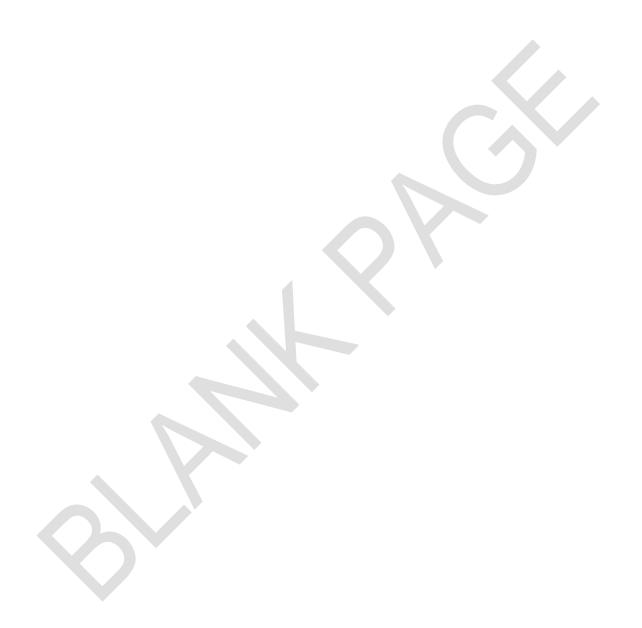
REPORT AUTHOR AND PERSON TO CONTACT

Barry Tudhope, Democratic Services Manager barry.tudhope@eastrenfrewshire.gov.uk
0141 588 3033

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

Minute of IJB: 26 June 2024 – Item 15: Integration Joint Board and Performance and Audit Committee Membership.









Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board				
Held on	25 Sep	25 September 2024			
Agenda Item	19				
Title	2025 C	alendar of Meetings			
Summary					
To seek approval for proposed meeting	dates for	2025			
	T				
Presented by	Barry Tudhope, Democratic Services Manager				
Action Required					
The Integration Joint Board is asked to approve the proposed 2025 meeting dates for IJB and Performance and Audit Committee and decided on the format of these meetings.					
Directions		Implications			
		Finance	Risk		
☐ Directions to East Renfrewshire Council (ERC)		Policy	Legal		
☐ Directions to NHS Greater Glasgow and Clyde (NHSGGC)		☐ Workforce	☐ Infrastructure		
☐ Directions to both ERC and NHSGGC		☐ Equalities	☐ Fairer Scotland Duty		

25 September 2024

Report by Chief Officer

<u>2025 Calendar of Meetings for the</u> <u>Integration Joint Board and Performance and Audit Committee</u>

PURPOSE OF REPORT

1. This report sets out proposed 2025 meeting dates for both the Integration Joint Board and Performance and Audit Committee.

RECOMMENDATION

- 2. The Integration Joint Board is requested to:
 - a) approve the proposed meeting dates for 2025;
 - b) agree the format of future meetings; and
 - c) consider recording meetings and publishing these on the Council's YouTube channel, allowing local residents to view them at their convenience.

REPORT

Meeting Dates

- 3. It is proposed that meetings of the IJB be held on the following dates:
 - Wednesday 29th January 2025 at 10:00
 - Wednesday 26th March 2025 at 10:30
 - Wednesday 25th June 2025 at 14:30
 - Wednesday 13th August 2025 at 10:00
 - Wednesday 24th September 2025 at 14:00
 - Wednesday 19 November 2025 at 10:30
- 4. Meetings in June and September will take place in the afternoon to accommodate those members of the IJB who also serve on Glasgow IJB, which also has scheduled meetings for 10.30am on those two days.
- 5. It is further proposed that meetings of the Performance and Audit Committee be held on the same dates as the IJB, in the months of March, June, September and November with the subsequent meetings of the IJB meeting 90 minutes later on these dates.
 - Wednesday 26th March 2025 at 09:00
 - Wednesday 25th June 2025 at 13:00
 - Wednesday 24th September 2025 at 13:00
 - Wednesday 19 November 2025 at 09:00

Format of Meetings

6. The Integration Joint Board and the Performance and Audit Committee have recently shifted from exclusively online meetings on Microsoft Teams to a hybrid format. Consequently, the Integration Joint Board is request to discuss and agree the format of future meetings.

Recording Meetings

- 7. Previously, the Integration Joint Board and the Performance and Audit Committee decided against recording their meetings. However, a local resident has now requested that the IJB reconsider this decision.
- 8. A copy of the resident's correspondence has been shared with IJB members, with their consent.
- 9. Currently, meetings of East Renfrewshire Council and its committees are recorded (with the permission of attendees), published, and made accessible on the Council's YouTube Channel and should the IJB agree to record meetings a similar process would be put in place.
- 10. The Integration Joint Board is requested to engage in discussion and reach a consensus regarding their stance on the recording and publication of their meetings.

CONSULTATION AND PARTNERSHIP WORKING

11. The dates suggested take into account the meetings calendar of meetings for East Renfrewshire Council as well as the Glasgow Integration Joint Board.

IMPLICATIONS OF THE PROPOSALS

12. There are no implications arising from this report.

DIRECTIONS

13. There are no directions arising from this report.

CONCLUSIONS

14. Once the dates have been approved, calendar invites will be issued to Board members to aid them in managing their diaries and ensure that they are able to maximise attendance at Board meetings.

RECOMMENDATIONS

- 15. The Integration Joint Board is requested to:
 - a) approve the proposed meeting dates for 2025;
 - b) agree the format of future meetings; and
 - c) consider recording meetings and publishing these on the Council's YouTube channel, allowing local residents to view them at their convenience.

REPORT AUTHOR AND PERSON TO CONTACT

Barry Tudhope, Democratic Services Manager barry.tudhope@eastrenfrewshire.gov.uk
0141 588 3033

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

None