

EAST RENFREWSHIRE COUNCIL**28 October 2020****Report by Chief Social Work Officer****CHIEF SOCIAL WORK OFFICER ANNUAL REPORT 2019/20****PURPOSE OF REPORT**

1. The report presented to elected members is the Chief Social Work Officer Annual Report for 2019/20. The report is attached at Appendix 1.

RECOMMENDATIONS

2. The Council is asked to comment and approve the content of the Chief Social Work Officer Annual Report attached as Appendix 1 for submission to the Office of The Chief Social Work Advisor, Scottish Government.

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. This report has been presented to the Integration Joint Board on 23rd September 2020.
4. This year, given the workload implications caused by the COVID-19 pandemic, the template outline the current pressures being experienced across the service. We will use the completed reports to prepare an overview later in the year
5. The report provides a narrative of statutory social work and social care activity. It describes:
 - Governance and Accountability arrangements
 - Service Quality and Performance
 - Resources
 - Workforce
 - COVID-19
6. Performance data and analysis is set throughout the report and reflects the operational delivery of services for childrens services, criminal justice, mental health and adult services including social care.

CONSULTATION AND PARTNERSHIP WORKING

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

IMPLICATIONS OF THE PROPOSALS

Finance

8. 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 HSCP.

CONCLUSIONS

9. This report provides an overview of the professional activity for social work and social care within East Renfrewshire for 2019/20 through the delivery of the statutory functions and responsibilities held by the Chief Social Work Officer.
10. We have many examples of success to celebrate and build on:
 - An enhanced Family Wellbeing Service achieving positive outcomes for children and young people's emotional wellbeing.
 - Multi-agency approach to Signs of Safety.
 - Reducing the number of children and young people looked after away from home and strengthening the voice of families in our processes.
 - Enhanced participation and engagement of looked after young people, ensuring their voices are heard and greater understanding of care experience.
 - In adult social work and social care the number of adults reporting their outcomes are met remains high and carer's quality of life is improved.
 - Improvement in timescales for Adult Protection inquiries.
 - Overall the strength of multi-agency working in East Renfrewshire, across children and families, criminal justice and adult services.
 - Piloting the Joint investigative interviews course, contributing to the ultimate ambition of protecting children and reducing the need for children to give evidence in court
11. There continues to be a number of significant challenges and risks facing social work and social care within East Renfrewshire including:
 - Rising incidences of domestic abuse which we are responding to through multi agency work, Safe and Together and the implementation of MARAC.
 - Implementation of learning from the Care Review in all aspects of our work with looked after children and young people.
 - The impact of COVID-19.
 - Recovery, particularly as we have seen a rise in mental health, emotional distress and for older people physical frailty and dependency.
 - The continuing challenging financial climate and the uncertainty for all public services.
 - The increasing expectations and demands from the public and stakeholders.
 - The increasing cost of supporting vulnerable people.
 - The management of increased service demand at a time of diminishing resources and workforce capacity.
12. The landscape for all Health & Social Care Services will change over the coming years as a consequence of COVID-19 and statutory social work and social care will be required to adapt to ensure we support the recovery, rising demand and renewal associated with protecting and caring for our most vulnerable citizens and all those who are at risk in our communities.

13. 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

14. The Council is asked to comment and approve the content of the Chief Social Work Officer Annual Report attached as Appendix 1 for submission to the Office of The Chief Social Work Advisor, Scottish Government.

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BACKGROUND PAPERS

Chief Social Work Officer Annual Report 2018-19

KEY WORDS

A report presenting an overview of the Chief Social Work Officer role in 2019-20

CSWO; adoption; fostering; protection; guardianship; statutory; governance; social work

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**EAST RENFREWSHIRE
HEALTH AND SOCIAL CARE
PARTNERSHIP**

**CHIEF SOCIAL WORK OFFICER
ANNUAL REPORT**

2019 – 2020

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Introduction – Reflection on the Past Year

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

This report provides a summary of the activities and progress of statutory services and the commitment of our staff in supporting our residents and improving outcomes.

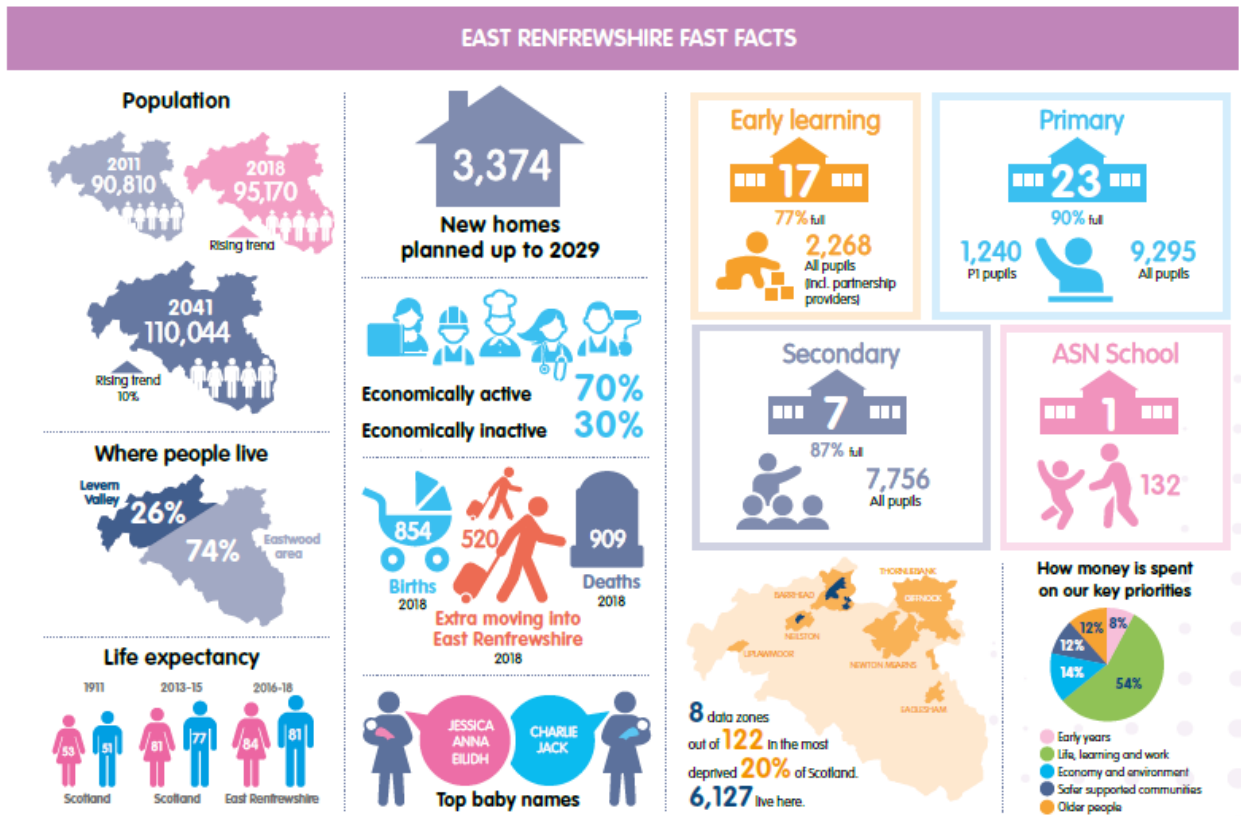
We have many examples of success to celebrate and build on:

- An enhanced Family Wellbeing Service achieving positive outcomes for children and young people's emotional wellbeing
- Multi-agency approach to Signs of Safety
- Reducing the number of children and young people looked after away from home and strengthening the voice of families in our processes
- Enhanced participation and engagement of looked after young people, ensuring their voices are heard and a greater understanding of care experience.
- In adult social work and social care the number of adults reporting their outcomes are met remains high and carer's quality of life is improved
- Improvement in timescales for Adult Protection inquiries
- Overall the strength of multi-agency working in East Renfrewshire, across children and families, criminal justice and adult services.
- Piloting the Joint Investigative Interviews course, contributing to the ultimate ambition of protecting children and reducing the need for children to give evidence in court

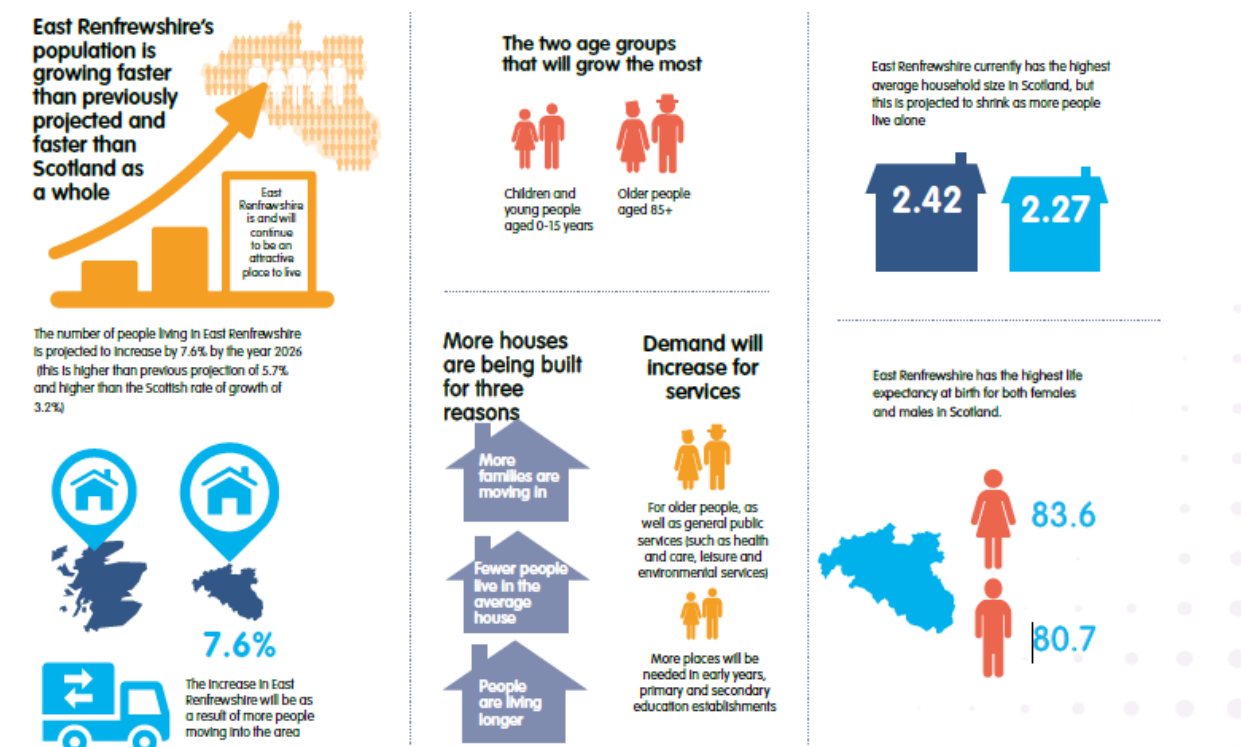
We also know what our most significant challenges are and are making progress in tackling these:

- Rising incidences of domestic abuse which we are responding to through multi agency work, Safe and Together and the implementation of Multi Agency Risk Assessment Conferences
- Implementation of learning from the Care Review in all aspects of our work with looked after children and young people.
- The impact of COVID-19 and the challenge of recovery, particularly as we have seen a rise in mental health, emotional distress and for older people, increased physical frailty and dependency.

East Renfrewshire Population Facts



EAST RENFREWSHIRE'S POPULATION – WHAT TO EXPECT



Section 1: Governance and Accountability

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

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

During the last 14 years our integrated health and social care management and staff teams have developed strong relationships with many different partner organisations. Our scale and continuity of approach have enabled these relationships to flourish. We have a history of co-production with our third sector partners and we are willing to test new and innovative approaches.

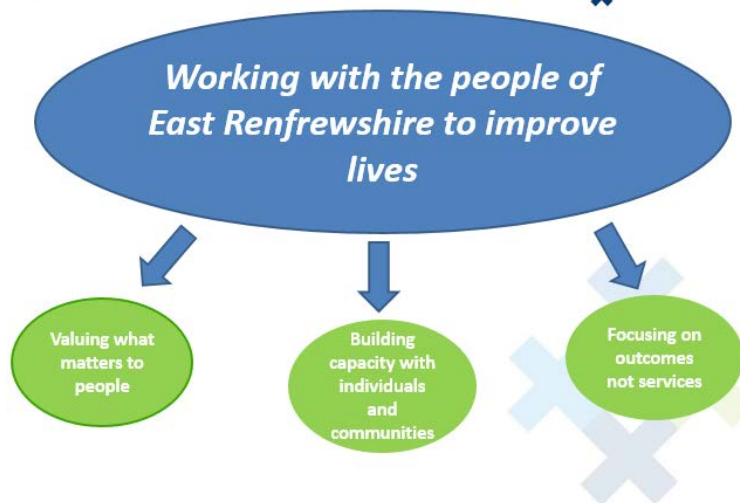
East Renfrewshire Health and Social Care Partnership is one of six partnerships operating within the NHS Greater Glasgow and Clyde Health Board area. We work very closely with our fellow partnerships to share good practice and to develop more consistent approaches.

This Chief Social Work Officer report reflects the fifth 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 HSCP, Council with professional advice, leadership and oversight of all social work and social care functions. She reports to the Chief Executive for East Renfrewshire Council in her role. The Chief Executive chairs the Chief Officer Public Protection Group and the Chief Social Worker is responsible for the scrutiny and quality assurance of all public protection services in East Renfrewshire. This also includes Violence against Women and Girls. The group is chaired by East Renfrewshire Council's Chief Executive and meets bi-annually and the Chief Social Work Officer acts as their professional advisor. The use of driver diagrams and logic modelling supports the scrutiny of public protection processes, outputs and outcomes. The Chief Officer Public Protection Group met regularly throughout lockdown and will continue to do so through recovery.

Our Strategic Vision and Priorities

East Renfrewshire has been integrating health, social work and care services for 14 years. From the outset of the Community Health and Care Partnership we have focused firmly on outcomes for the people of East Renfrewshire that improve health and wellbeing and reduce inequalities. Under the direction of East Renfrewshire's Integration Joint Board, our Health and Social Care Partnership builds on this secure foundation. Throughout our integration journey, we have developed strong relationships with many different partner organisations. Our longevity as an integrated partnership strives to improve outcomes for the citizens of East Renfrewshire.

Our Vision



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.

Our Strategic Plan

The strategic plan for 2018 - 2021 sets out seven strategic priorities where we need to make significant change or investment during the course of the plan. These are:

- Working together with **children, young people and their families** to improve mental wellbeing.
- Working together with our community planning partners on new **community justice** pathways that support people to prevent and reduce offending and rebuild lives.
- Working together with our communities that experience shorter life expectancy and **poorer health** to improve their wellbeing.
- Working together with people to maintain their **independence at home** and in their local community.
- Working together with people who experience **mental ill-health** to support them on their journey to recovery.
- Working together with our colleagues in primary and acute care to care for people to reduce **unplanned admissions** to hospital.
- Working together with **people who care for someone** ensuring they are able to exercise choice and control in relation to their caring activities.

Annual Performance Report

Our Annual Performance Report 2019-20 has given us an opportunity to demonstrate how we have delivered on our vision and commitments over 2019/20. It provides information about the progress we are making towards achieving the national outcomes for children, the national health and wellbeing outcomes, and criminal justice outcomes.

Clinical and Care Governance Group

In order to exercise its governance role in relation to the delivery of effective social work and social care services, the Clinical and Care Governance Group focuses on governance, risk

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

Section 2: Service Quality and Performance

2.1 Children's Services

Early Identification and Intervention

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

The team is staffed by experienced social workers, an experienced health visitor and also benefits from the expertise of our third sector partner Children 1st, who consider referrals under Section 12 of the Children and Young People (Scotland) Act 2014 for Family Group Decision Making (FGDM).

From 1 April 2019 to 31 March 2020, the Request for Assistance team completed a total of 1,138 initial assessments, with 20% requiring targeted intervention. These figures are consistent with the previous year's activity.

Family Group Decision Making

As part of our early intervention approach and reducing the need for statutory service involvement with families, the Family Group Decision Making Service is provided by our third sector partner Children 1st. This offers an opportunity for families to work together with professionals at an early stage on planning and decision making to meet their children's needs. Following a review of the service to ensure it is making the greatest impact, the service has received 22 referrals, with 8 families progressing, preventing the need for statutory social work involvement.

Family Wellbeing Service

As a consequence of the significant new funding stream from Robertson Trust and East Renfrewshire Health and Social Care Partnership the new enhanced service began on 1 June 2019, expanding its reach to include all GP Practices. This has been very successful with almost all practices beginning to refer children and young people.

The service is funded to accept a minimum of 178 referrals per year but has exceeded this figure significantly already. Promotion of the service with GPs and strengthening the links with partner agencies is ongoing. A new set of measures and outcomes has been developed for the service and this is being reported through existing Health and Social Care Partnership and Robertson Trust structures. Early evaluation of the programme is indicating a significant improvement in the emotional wellbeing of the children and young people referred with fewer repeat presentations to GPs with distress.

Signs of Safety - Our Approach

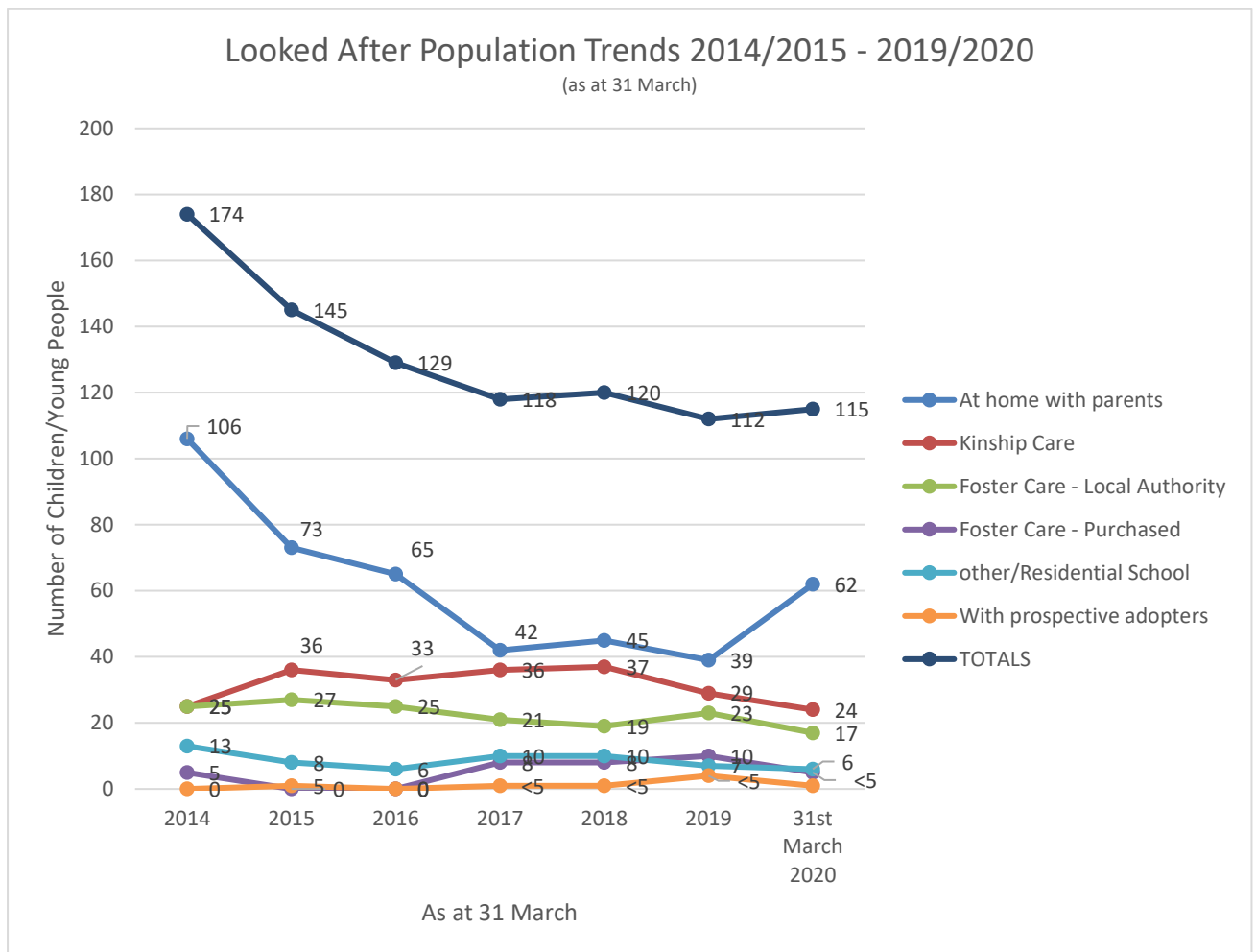
Over 2019/20 we have continued the implementation of the Signs of Safety model, led by the Chief Social Work Officer and the Head of Education Services (Equality and Equity). The model supports practice improvement, with a particular focus on developing relational interventions with children, young people, their families and carers in order to reduce risk and improve children's wellbeing.

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

- Continued commitment from the Multi Agency Implementation Team.
- The development of a multi-agency practice lead network, which meets quarterly with a clear focus on direct practice improvements.
- Continued workforce training provided at different levels, advanced and generic for all staff groups including education, health, police and adult services.
- The implementation and application of revised processes and documentation which complement the model for Child Protection, Looked After Children, Scottish Children’s Reporter Administration (SCRA) and Children with Additional Needs.
- The application of the model in our Child Protection Case Conferences to ensure they are solution orientated, strengths based and risk focused.

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

On 31 March 2020, 115 children and young people in East Renfrewshire were looked after in a range of settings. This constitutes approximately 0.5% of the total children’s population of the area and remains one of the smallest proportions in Scotland. 66 of the children were boys (57%) and 49 were girls (43%). We have continued to consolidate the Permanence and Care Excellence (PACE) Programme, working to improve outcomes for children by securing permanent destinations for them. The numbers of children who are looked after has remained consistent over the past four years.



The numbers of children in each of the respective placement categories has shown some subtle changes as a result of the PACE Programme. For example, several children have been secured on kinship care orders and are therefore no longer looked after and there were five adoption orders granted in 2019-2020.

Although this year has seen an increase in the number of children looked after at home, there has been a consistent reduction in the length of time children are looked after for, particularly for children who are 12 and under. At March 2016, the average period a child was looked after for was 19 months and this has reduced to 15 months at March 2020.

Further analysis of our reduction in children who are looked after at home has shown that during the period 1 April 2019 – 31 March 2020, 23% of Compulsory Supervision Orders for children and young people at home with parents were terminated. A further 23% remain open on a voluntary basis to the Youth Intensive Support Service and 54% to Children and Families, again on a voluntary basis.

Key Successes

- The length of time children and young people are looked after at home has decreased.
- The number of children looked after away from home has decreased.
- Implementation of Signs of Safety approach has strengthened the voice of the family network in looked after reviews and permanence planning.
- Improvement work in multi-agency contribution to Scottish Children's Reporter Administration to support effective decision making.

Key Challenges/Priorities

- Implementation of learning from the Care Review in all aspects of our work with looked after children and young people.
- To keep a continued focus on attainment of our looked after children.
- To continue to make effective permanence decisions within children's timescales.
- To develop our work in relation to decision making about siblings who are looked after.

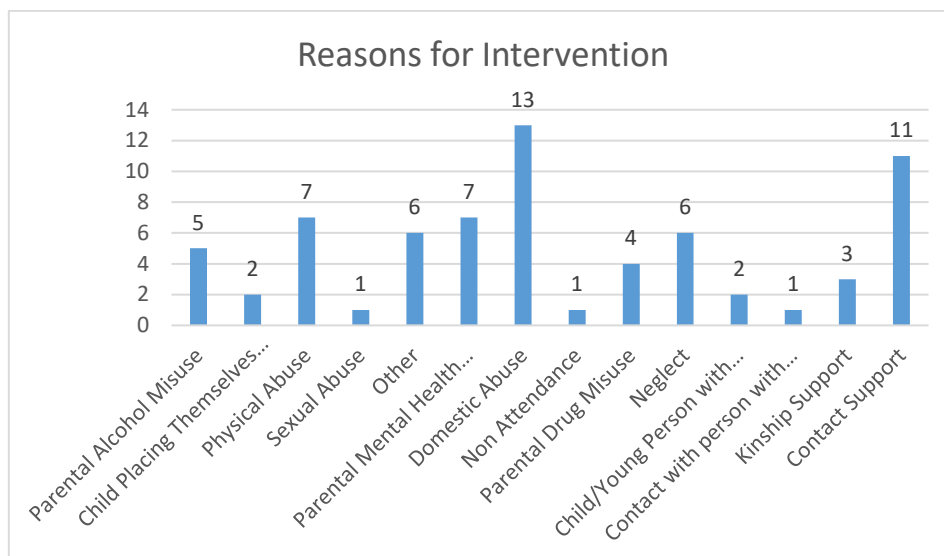
Intensive Family Support Team

The Intensive Family Support Service works alongside families who present with more complex needs and where it has been identified that extra support would be helpful. The service when required works across the week, including evenings and weekends and on an individual and/or group basis. The team operates a trauma sensitive and strengths based model to improve the safety and wellbeing of children.

Examples of support in 2019/20 include:

- Parenting capacity assessments to support permanence decision making.
- Intensive parenting support to contribute to child protection assessments and reducing risk.
- Attachment focused work to strengthen relationships and understanding within families.
- Intensive support to build on the identified strengths of families to help them manage family life including building routines; managing boundaries; understanding and addressing the health and development needs of children and the needs of parents.
- Intensive parenting and relationships support to help parents and children recover and support rehabilitation.

Between April 2019 to March 2020, 69 children received support from the Intensive Family Support Service, with children from all single year age groups from 0 to 13+. Domestic abuse is the most common reason for intervention, as shown in the chart below, and this is a consistent characteristic within our report.



The children and young people allocated to the team are as a result of a variety of legislative reasons however the majority (61%) of children fall under Welfare of Child in Need legislation. It should also be noted that six children were also on the East Renfrewshire Child Protection Register

Youth Intensive Support Service

The Youth Intensive Support Service was established during 2015 as the lead service for all looked after young people aged 12 years of age and over and for young people eligible for Continuing Care and After Care, recognising that more intensive interventions are required to improve their recovery from trauma, neglect and abuse.

The team delivers the statutory duties within the Children and Young People's (Scotland) Act 2014, to support young people eligible for continuing care up to the age of 21 and for after care up to the age of 26. For young people subject to the Children (Scotland) Act 1995, Section 22, who are at risk of being accommodated and or custody, intensive services provides direct interventions alongside their community social work colleagues and third sector.

The Youth Intensive Support Service and Intensive Family Support works closely with and alongside East Renfrewshire's Child and Adolescent Mental Health Services (CAMHS). The service has the following shared aims across social work and health services:

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

Of the 150 young people allocated to the Youth Intensive Support Service as at 31 March 2020:

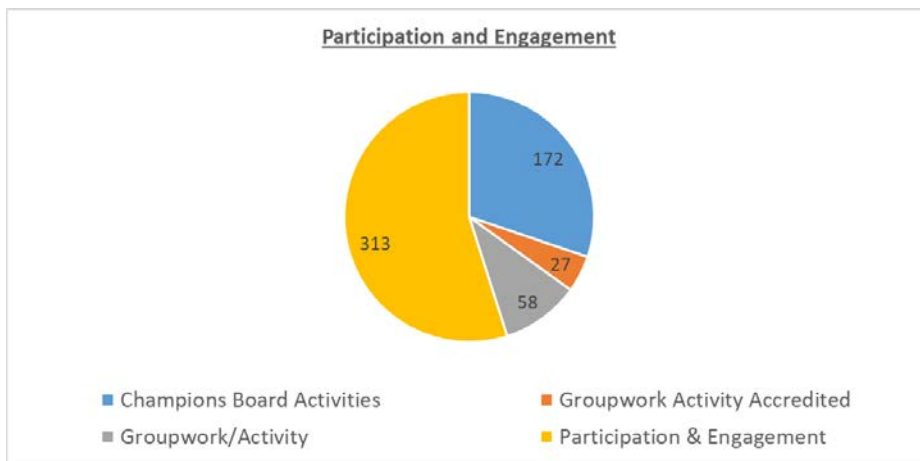
- 54% were receiving intensive support services.
- 23% were subject to Compulsory Measures of Supervision.
- 25% were care experienced young people in receipt of Continuing or After Care support.

- 86% of care experienced young people in receipt of Continuing or After Care support were supported through the Family Firm scheme.

In the period 2019-2020, the Youth Intensive Support Service gained two Advanced Practitioner posts. The Champions Board Co-ordinator co-ordinates, plans and delivers participation and engagement activities for care experienced young people known to the local authority whilst our Continuing and Aftercare Advance Practitioner focuses on support and provision to this distinct group of young people.

Champions Board, Group Work and Participation

Throughout 2019/20, we have continued to engage with our children, young people, families and communities. Between April 2019 and March 2020 there were 520 opportunities for children and young people to take part in participation and engagement, 27 of these have led to an accredited award. These opportunities were taken up by 87 children and young people from all age groups across the children and families teams. This is shown in the table below.



The 14-19 age group are most likely to participate but we are seeing increased engagement by the 7-12 age group which demonstrates the continued efforts of the community team to encourage involvement of all ages.

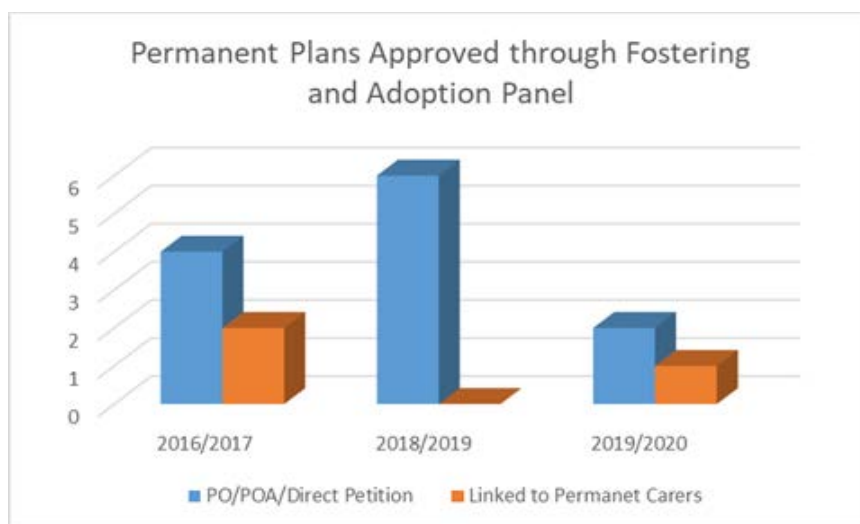
Our dedicated Champions Board Advanced Practitioner Post co-ordinates Champions Board activity. The Champions Board has continued to raise awareness about what it is like to be care experienced, helping corporate parents understand the impact services have had on their lives and what needs to be done to ensure that there is positive change. They have worked closely with the Care Review Participation Team, been involved in consultation and have created a video around their views given around 'STOP:GO' about what needs to change within the care system. Involvement in the Care Review has allowed young people to see that the Champions Board is part of a wider agenda. Young people have attended Care Review Road Shows, 1000 Voices events, and attended as a group to give their views on the 'stories' which were to be published within the Care Review reports.

This year an e-learning module on Corporate Parenting has been developed by our young people. Training is now available for Corporate Parents on East Renfrewshire Council training calendar.

Fostering, Adoption and Supported Care

In 2019/20, the service took forward new management arrangements and formalised the embedding of the service within the Intensive Support structure. A key focus has been the continuation of the improvement work identified within the previous independent review to strengthen the service framework and enhance the support and care for children and young people.

Our adoption assessments have remained relatively static as a result of the success of the Permanence and Care Excellence Programme in securing children's futures, reducing to two assessments in 2019-20.



Over the reporting period, the team have supported nine adoptive placements, seven of which are currently matched with children and two await a suitable match.

Foster carers continue to benefit from one to one support via their allocated supervising social worker as well as regular training and a two monthly foster carer support group which is well attended.

The service also provides direct support to families affected by adoption, including providing post-adoption support for all those affected. Working in this area can be challenging and there is a legislative duty to provide post-adoption support following the granting of an Adoption Order. The service also provides a counselling role to birth families who have themselves been adopted, as well as the siblings of adoptive families. During 2019/20, the service has:

- Continued to provide a quarterly adoption support group which is well attended.
- Provided targeted intervention and letter box contact support to a number of birth families, supporting 25 indirect contacts.
- Provided support to a small number of families who have been affected by adoption issues in the form of origin counselling and access to file requests.
- Offered birth parents ongoing support through piloting a fortnightly birth parent support group named by parents as 'Help us Heal'.

Registered Services Inspection

The three registered services, fostering, adoption and adult (supported care) placement were inspected in October 2019 and all services received Grade 5 (very good) for the areas inspected with a number of areas commended:

- The strengthened collaborative and relationship based approach by aligning registered services within our Intensive Services structure.
- The commitment from staff especially the partnership working across health, social work and education to ensure we are providing the best possible care to our children and young people.
- The way children, their families and foster households were empowered to contribute to decision making and feel listened to.

Fostering Service

Date	Type	Grading's	
11 October 2019	Announced (Short Notice)	Care and support Staffing Management & Leadership	5 – Very good 5 – Very good Not Assessed
8 November 2016	Announced (Short Notice)	Care and support Environment Staffing Management & Leadership	5 – Very good Not Assessed Not Assessed 5 – Very good
19 February 2015	Announced (Short Notice)	Care and support Environment Staffing Management & Leadership	5 – Very Good Not Assessed 5 – Very good 5 – Very good

Adoption Service

Date	Type	Grading's	
11 October 2019	Announced (Short Notice)	Care and support Staffing Management & Leadership	5 – Very good 5 – Very good Not Assessed
2 November 2016	Announced (Short Notice)	Care and support Environment Staffing Management & Leadership	5 – Very good Not Assessed Not Assessed 5 – Very good
19 February 2015	Unannounced	Care and support Environment Staffing Management & Leadership	4 – Good Not Assessed 4 – Good 4 – Good

Adult Placement

Date	Type	Grading's	
25 October 2019	Announced (Short Notice)	Care and support Environment Staffing Management & Leadership	5 – Very good Not Assessed 5 – Very good 5 – Very good

Below are some qualitative highlights from our [Fostering Service](#), [Adoption Service](#), [Adult Placements](#) inspection report.

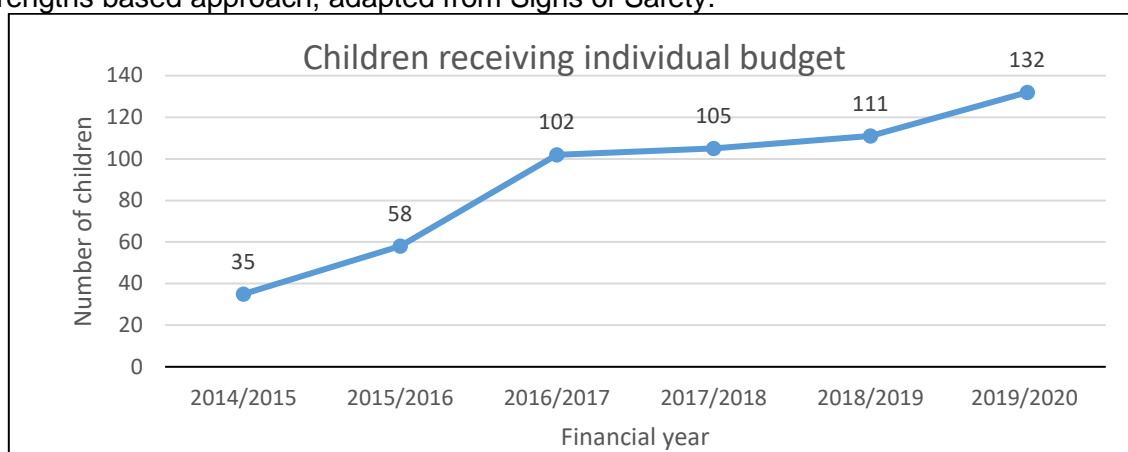
The team were highly motivated to ensure that best practice in relation to through-care, after care and continuing care, would be adopted in this relatively new dedicated service. (Adult placement supported care inspection)

The newly introduced 'Signs of Safety' strengths based, relational approach had transformed the service. The use of the 'Three houses' tool enabled younger children to verbalise fears and worries, hopes and aspirations was outstanding, as was the use of independent advocacy and intensive support services. (Fostering inspection)

A foster carer told us, "I feel I am part of decision making now and really listened to, it's not a case where I raise a worry and it's filed away somewhere, but something is actually done and it's addressed. It's all out in the open, it's a brilliant new way of working." (Adoption inspection)

Children with Disabilities

We have fully adopted the principles of self-directed support in partnership with children, their families and other people who are important to them. We recognise that good support planning is reliant on relationship based practice, starting with the family recognising what matters to them, and we are embedding this way of working throughout children's services. Given that 34% of children known to social work teams have a disability, we have undertaken a review of our assessment and planning and have implemented Signs of Wellbeing, a strengths based approach, adapted from Signs of Safety.



The number of children in receipt of an individual budget has quadrupled since 2014 as shown in the chart above. In 2019/20, three quarters of children with disabilities allocated to social workers were in receipt of an individual budget. This will continue to be an area of significant growth and budgetary pressure. Expenditure has increased from just over £200,000 in 2014/15 to £480,000 in 2019/20 and is likely to continue to rise overall, although the average budget award for a child / young person has decreased by 11.5% in the last year.

It is anticipated that this will continue to be an area of significant demand over the years, considering the migration of families who have children with disabilities into the local authority area. Further analysis will be needed to consider the required financial investment moving forward.

This impact is noted at the transition stage with a doubling of numbers of young people presented at Transition Resource Allocation Group from 11 in 2017-18 to 21 in 2018-19. 19 young people were considered in 2019/2020. It is predicted that this number will level out in the next five years but this figure continues to be impacted upon by families moving into the area.

Key Successes

- All staff have been trained in Signs of Wellbeing assessment approach.
- Children's Services processes for Resource Allocation have been brought in line with Adult Services.
- Advanced Practitioner for Transitions post has been created.
- Joint working between Children's and Adults services on Transitions pathway and successful joint Transitions event held for young people and their families.

Challenges / Priorities

- Delivery of training on Children's Services assessment, planning and resource allocation for all staff (delayed due to COVID-19).
- Development of a third sector market place for service provision for disabled children, young people and their families as there is a recognition that this is limited in East Renfrewshire.
- Partnership working with Education and Adult Services to develop a new transitions pathway which starts when young people are 14 years old or earlier.

Programmes for Parents

As there is a significant population of children with additional needs in East Renfrewshire our families requested more availability of parenting programmes. Two that are noteworthy are:

- Mellow Ability for families with children with complex needs is jointly delivered by Educational Psychology and Health and Social Care Partnership Children and Families. Two rounds of the full programme were delivered in 2018/19 with a third one having commenced. Evaluations of the programme indicate high parental satisfaction and there is now scope for parents who are trained to subsequently co-deliver the materials and establish peer/parent groups to support sustainability.
- Cygnet Parenting Programme for parents of children with an autism diagnosis has become a very successful programme with high attendance and completion rates. Families are now offered a place on the programme within six months of their child's diagnosis.

Corporate Parenting in East Renfrewshire

East Renfrewshire benefits from a very committed partnership of Corporate Parents who own their responsibilities and the legal duties that underpin these. The Corporate Parenting Planning Group comprises local Corporate Parent partners and a number of the national ones too. Our first Corporate Parenting Plan for the years 2016-2019 was successfully delivered and local partners have now agreed a new plan for 2020-2023. In 2019 the plan's achievements included the following:

- Fully embedded the principles and aims of the Permanence and Care Excellence Programme within Health and Social Care Partnership Children and Families Services with tests of change and improvement methodology used to target specific areas of challenge.
- Kinship Care Panel fully operational and directed by new local Kinship Care Procedures and Terms of Reference.
- Development of a Raising Attainment programme in partnership with Children 1st and funded by the Scottish Government Attainment Challenge Fund for care experienced children.
- New Education Policy for Care Experienced Pupils agreed and implementation commenced through joint working between East Renfrewshire Council Education and the Health and Social Care Partnership.
- Established a Mini Champs group to promote engagement and participation of the 8 – 12 year old age group, giving younger children an opportunity to be heard and feed into the older age group Champions Board.
- Launch of new "For Your Entertainment" culture, sport, and leisure initiative with East Renfrewshire Culture and Leisure Trust, for looked after children, young people and their families.
- Working in partnership with care experienced children and young people on the STOP:GO framework to determine the improvements that need to be made locally.

The new Corporate Parenting Plan for 2020 – 2023 intends to be even more ambitious as it focuses on how we will deliver on the recommendations of the Independent Care Review Report which was published in February 2020.

East Renfrewshire’s Children’s and Young People’s Plan 2017 – 2020

The Children and Young People’s Plan for 2017 – 2020 has reflected East Renfrewshire’s long established commitment to achieve better integrated service planning and delivery for children, young people and families.

The plan has demonstrated the range of integrated work being undertaken across universal, specialist, and targeted services, and highlights the role played by statutory and public bodies along with that of third sector partners. In the last year of the plan, considerable progress was made with delivery on agreed actions across the wellbeing indicators. Two areas of high need that have been identified by services include: mental and emotional wellbeing of children and young people; and support for families with a child or children with additional needs.

As the Independent Care Review report recommendations will require all local authorities to consider their existing universal and intensive family support models, this important area of work now features in the new East Renfrewshire Children’s Services Plan for 2020 – 2023.

The Rights of Children

Part 1 of the Children and Young People (Scotland) Act 2014 places a duty on local authorities and other public bodies to report on the steps they have taken to “*secure better, or further effect of*”, the United Nations Convention of the Rights of the Child requirements. Health and Social Care Partnership Children’s Services undertook a comprehensive assessment of policies and practices in 2019 to enable us to gauge progress and determine gaps in the realisation of the articles of the convention. A similar exercise has been undertaken in Education and other Council services, and in line with the statutory duty, a joint report is currently being compiled that will demonstrate the contribution being made locally. This activity will ensure that children and young people’s rights are respected, protected, enabled and fulfilled.

The Health and Social Care Partnership children’s rights audit exercise focused on the following areas:

- Kinship Care
- Child Protection
- Disability
- Health Visiting and School Nursing
- Inclusive Play and Leisure
- Speech and Language Therapy

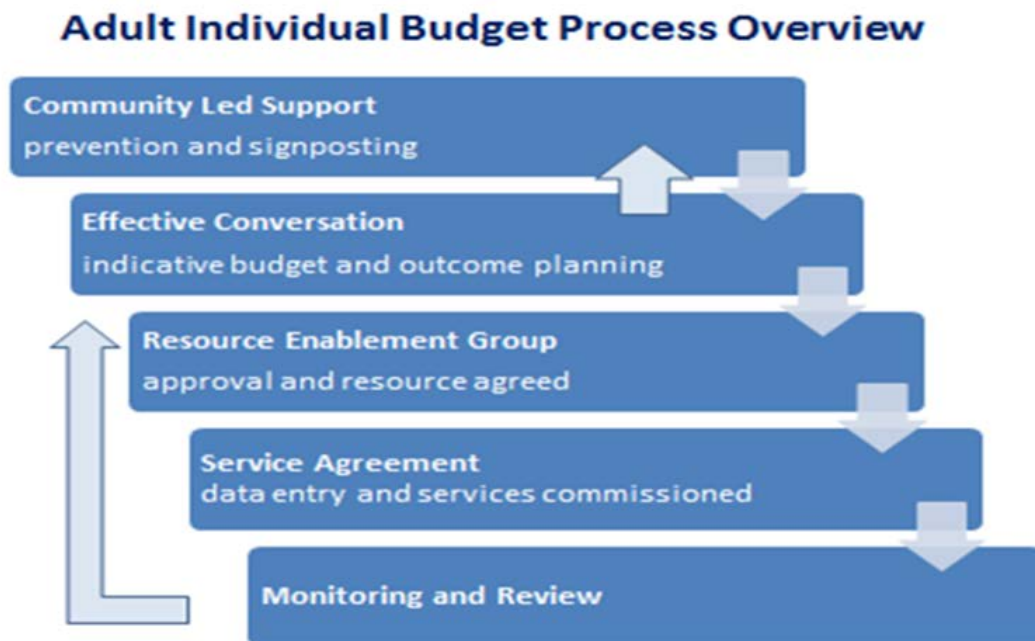
An audit of procedures and practices in these areas was carried out by managers and staff and the findings and recommendations of these evaluations are being considered. Improvements agreed will feature in the new Children’s Services Plan 2020-2023 along with those of the other Council services who underwent a similar process. As this is the first time children’s rights audits have been undertaken we have learned a lot about how we can make changes to the process over the next period. In particular we are keen to involve children and their families in leading in some areas and we are considering different approaches for how we can do this in a genuine and open way.

2.2 Adult Social Work and Social Care

Adults with Incapacity

Self-Directed Support

East Renfrewshire's Integration Joint Board approved a new approach to calculating adult Individual Budgets under Self Directed Support legislation alongside associated systems and processes.



Practice guidance was reviewed and updated that provides direction on the new individual budget process including how to work creatively with people to make the best use of their budget to meet their outcomes. From the launch of the guidance in December 2019 to the end of March 2020, the Resource Enablement Groups in Barrhead Locality considered 55 individual budgets and plans, and Eastwood Locality considered 70 individual budgets and plans.

Carers (Scotland) Act 2016

Over 2019/20, support to carers has been delivered in collaboration with our local Carers Centre. Carers Centre staff have been trained in outcome-focused, asset-based planning and Good Conversations, and have completed 56 Adult Carer Support Plans (ACSP) with carers since January 2019. Of these, using the eligibility framework, 14 carers were identified as having a substantial or critical need for support and referred for further social work intervention. A significant improvement in the percentage of carers reporting that their quality of life needs are being met (from 79% to 92%) has been observed. Further training for Health & Social Care Partnership staff planned during 2020 has been impacted by COVID. Adult Carer Support Plans, processes and pathways will be reviewed by Health & Social Care Partnership and other relevant stakeholders during 2020/21, incorporating any learning from our joint pandemic response.

Assessment and Review Activity

Over 2019/20 there has been significant work undertaken to improve the quality of social work practice within East Renfrewshire. This work has been progressed by the Head of Adult Health & Social Care Localities with the support of the Chief Social Work Officer. There is still much to do but early indications are promising in our improvement journey.

Taking Point measures are used by social workers to capture people's experience and outcomes following assessment and intervention by Adult Locality Teams. Whilst there was a marginal decline (1 - 2%) in most measures, the number of people reporting their outcomes as having been met remains high.

Talking Points Measure	2019-20	2018-19
People reporting 'being as well/staying as well as you can' needs met (%)	85	87
People reporting 'being as well/staying as well as you can' needs met (%)	91	90
People reporting 'feeling safe' needs met (%)	92	93
People reporting 'seeing people' needs met (%)	92	93
People reporting 'living where you/as you want to live' needs met (%)	88	92
People reporting 'being respected' needs met (%)	98	99
People reporting 'quality of life for carers' needs fully met (%)	92	78

In-house Care at Home Service

Following on from an unannounced inspection in February 2019 by the Care Inspectorate, it was identified that significant improvements were required within our in-house Care at Home service. These improvements were across nine key areas, including care planning and review of support packages, staff supervision, training and management of medication. A further interim inspection in September 2019 noted that the service has made significant progress across all identified improvement areas although further work was required to fully meet the requirements.

In order to support some key areas of required improvement the service embarked on a wide scale and successful recruitment campaign which resulted in the appointment of an additional 52 staff. The service has developed a robust suite of data and reporting systems which supports the management of service delivery and effective overview of performance across all improvement areas. The most recent survey of service users showed that 71% agreed or strongly agreed that the staff who delivered their care had enough time to do so and 95.6% stated that we regularly arrive on time for visits.

Health and Social Care Partnership senior officers continue to report to the Council's Chief Executive on progress of the in-house Care at Home service on improvement activity.

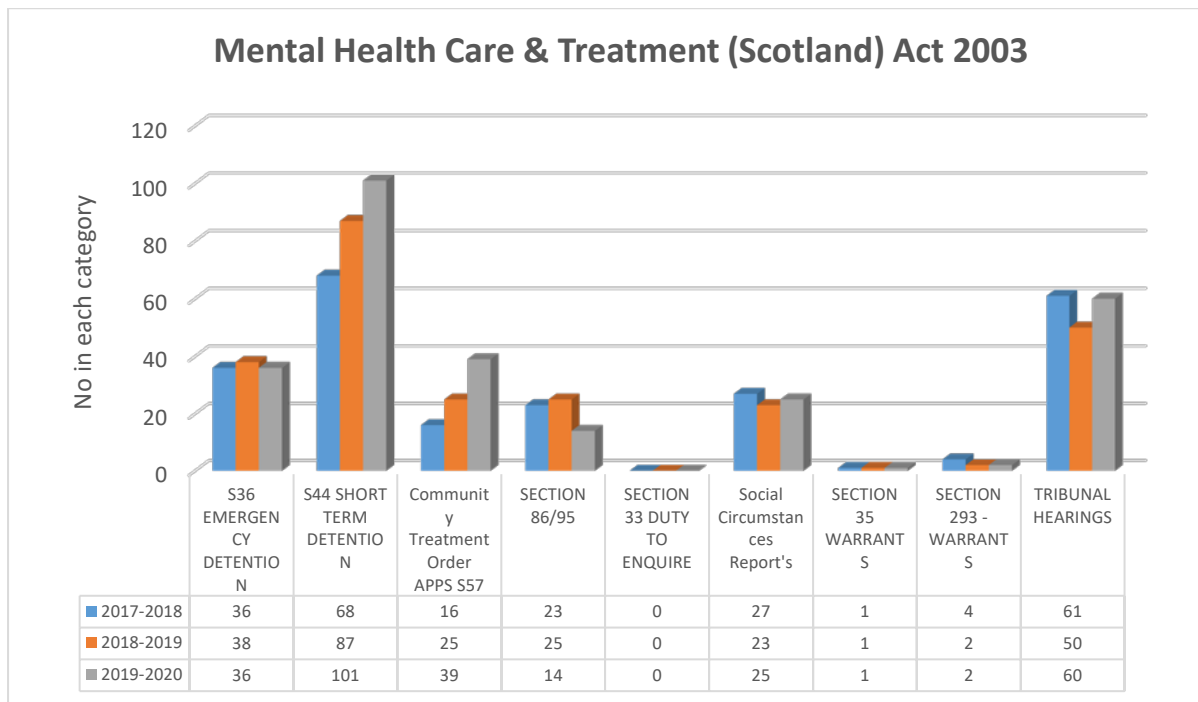
Telecare Services

The in-house telecare service has around 3000 service users and has performed well over the past 12 months. The management team were delighted with the outcome of the most recent Technology Enabled Care (TEC) Services Association audit, which resulted in the service having no requirements or improvement areas identified.

2.3 Mental Health

The Mental Health Officer service continues to discharge its functions under the Mental Health (Care and Treatment) (Scotland) Act 2013, Mental Health (Scotland) Act 2015, and Adults with Incapacity (Scotland) Act 2000, on behalf of the Local Authority as delegated to the Health and Social Care Partnership.

The Mental Health (Care and Treatment) (Scotland) Act 2003, and Adults with Incapacity (Scotland) Act 2000 continues to present challenges and pressures on the service, resulting in an increased demand for Mental Health Officer services over the past few years, new legislative responsibilities and workforce pressures. The graphs below highlight statutory activity relating to sections of both Acts in comparison with the previous year's figures. The majority of Mental Health Officers activity in 2019/20 related to short term detentions and tribunal hearings, with a particular increase in short term detentions over the last three years.



Mental Health Officers work closely with our professionals to improve the quality of experience of people who are in receipt of supports. Examples include the provision of:

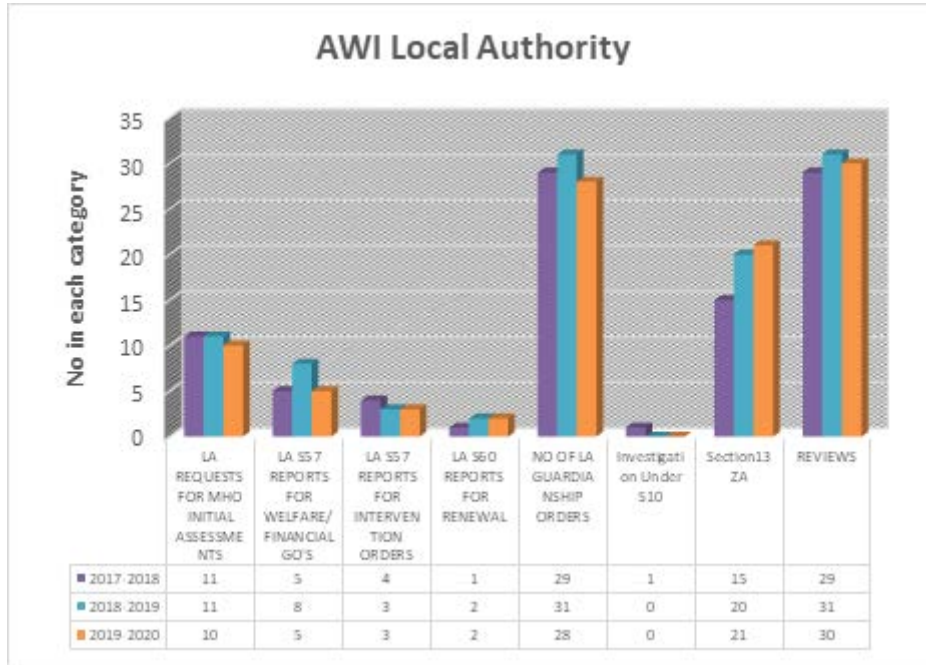
- Community-based services, not including those delivered in partnership with third sector providers and crisis intervention team
- Self-directed support
- Advocacy; and support for Advanced Statements; identification of Named Persons;
- Children and Young People who experience mental health; and
- Support for Carers

The Chief Social Work Officer is responsible for the governance and management of local authority Guardianship Orders.

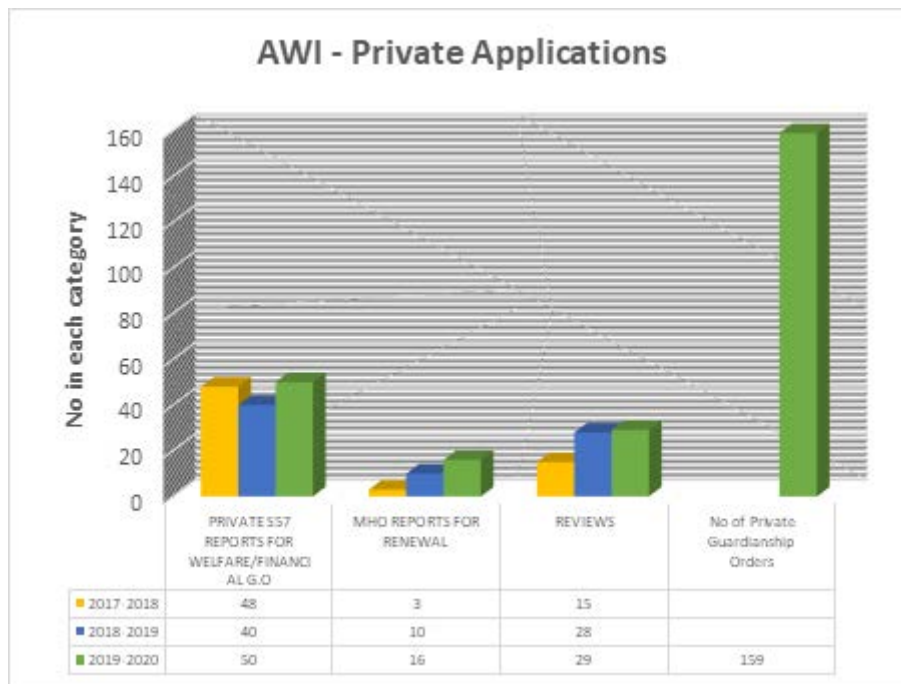
The graph below shows:

- The number of initial assessments for Guardianship Orders remains much the same as the previous year.

- An increase in the number of Section 13za meetings requiring attendance of Mental Health Officers - necessary to ensure that the rights, will and choices of the adult are upheld and that there is no deprivation of liberty.
- Private Welfare and / or Financial Guardianship referrals have generally remained the same from previous years.



Supervision of private welfare guardians continues to present a major challenge to the Authority given the increasing numbers of guardians to be supervised, currently 170, with many of these orders having two or three guardians. There has been an increase in the number of complex cases where more intensive supervision of the guardian(s) is required.



Mental Health Officers support both Local Authority and Private Applications for Welfare and/or Financial Guardianships that support individuals with fluctuating capacity or inability to consent due to diminished mental capacity and / or longstanding cognitive decline.

Although the data for the years preceding 2019/20 is not available it is reported that the use of Private Guardianships continues to grow and that family members in East Renfrewshire are taking on this responsibility as opposed to the local authority.

Referral for mentally disordered offenders remain low.

Over 2019/20 the Chief Social Work Officer commissioned a review of statutory social work activity for mental health officers based on the National Standards. The review concluded that the team were only in part meeting these standards and an improvement plan has been put in place which will be overseen by the Chief Social Work Officer in 2020/21. As a consequence of the review the operational delivery model will be subject to redesign over 2020/21 and will reflect the all necessary improvements to fully met national standards.

Moving forward, the challenge will be to recruit Mental Health Officers to ensure that there will be sufficient numbers of qualified social work professionals available to fulfil duties and functions under both Acts. The age demographic, nationally, of this workforce is also a significant pressure and will compound our longer term ability to fulfil statutory duties.

The Adult Protection Unit at the Scottish Government called for a bid for all local authorities to the Mental Health Officers development grant scheme. This is one of the key commitments of the 2017-2027 National Mental Health Strategy. It aims to support local authorities in identifying a shortfall in their Mental Health Officers numbers to train additional officers between 2020 and 2023. Unfortunately we were unsuccessful in our bid in 2019/20 but intend to reapply in 2020/21.

2.4 Criminal Justice

During 2019/2020, East Renfrewshire criminal justice service experienced a minimal increase in Community Payback Orders and a slight reduction in Criminal Justice Social Work Report requests, indicating that we have not yet experienced an impact from the introduction of the recent presumption against short sentences legislation. In contrast, there was a significant increase in workload in respect of those people being released from custody who were subject to statutory supervision. This was an increase we identified early and planned our services accordingly, with additional social work recruitment to the team.

Referrals from the Crown Office and Prosecution Service (COPFS) have further reduced. We continue to have regular meetings with this service through the local community justice forum.

	Number 2019-20	Number 2018-2019	Change (n)	Change %
Criminal Justice Social Work Reports	226	241	-15	-6.22%
Community Payback Orders	105	103	+2	+1.94%
Community Service Orders	0	0		
Through-care (released prisoners)	11	5	+6	+120%
Drug Treatment & Testing Order	0	0		
Fiscal Work Order	2	8	-6	-75%
Diversion	10	26	-16	-61%

In 2019/2020, 9057 unpaid work hours were successfully completed. This is approximately a 15% reduction in the number of hours completed in the previous year, although we note the significant disruption of COVID-19 in March 2020.

Key Successes

- Strong partnership working evident in the early planning of support for offenders being released from prison. Our criminal justice and housing services are working closely together to ensure short stay accommodation is identified for individuals prior to release and support then provided to access a permanent tenancy.
- During 2019/20, we continued to deliver a multi-agency programme of offender-focused trauma training. Led by the criminal justice service and delivered to a multi-agency group of professionals (including housing, alcohol and drug services, employability and adult learning), this has supported the multi-agency delivery of interventions with those who hold convictions and have experienced trauma.
- Several people with convictions were part of an employment training programme called Strive during the summer of 2019. This resulted in a number of positive outcomes for people who accessed this course, including employment. We have continued in 2019/2020 with a strong focus on our “No Barriers” project, which provides support with literacy and numeracy.
- East Renfrewshire audits of Multi Agency Public Protection Arrangements (MAPPA) have confirmed robust management arrangements are in place.
- In 2019/2020, the criminal justice team began to facilitate the local delivery of the nationally accredited sex offender treatment programme, Moving Forward Making Changes (MFMC). Three social workers are now trained to deliver the programme, with our Advanced Practitioner being supported to undertake the treatment management role to ensure accredited standards can be met.

- During this year we have enhanced our unpaid work service by ensuring that tasks are meaningful to communities and provide learning opportunities for service users, including improving the environment and supporting charitable and voluntary organisations. Workshop premises have also been secured to expand opportunities of unpaid work.

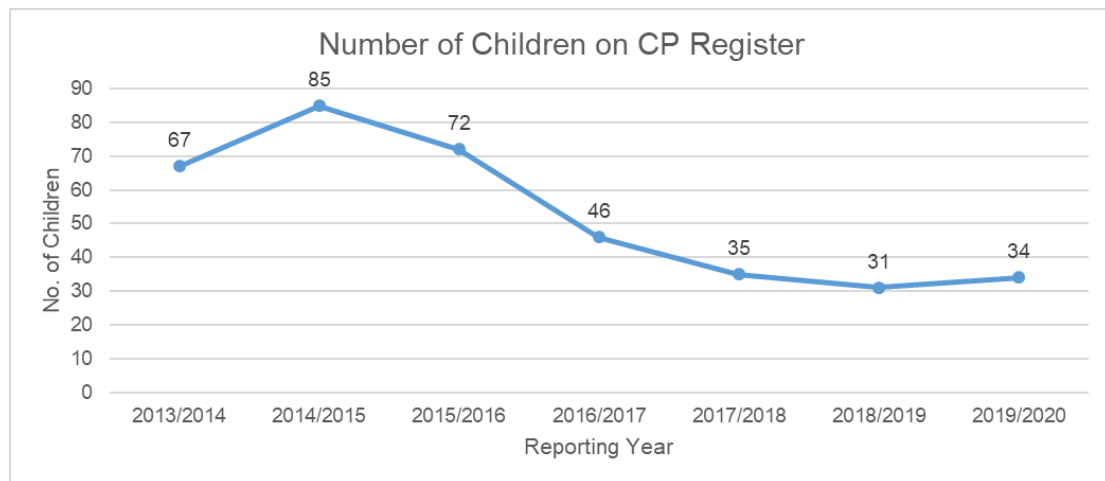
2.5 Public Protection

We continue to carry out and enhance our public protection duties around children and adults.

Child Protection, Quality Assurance and Continuous Improvement

The number of children on East Renfrewshire's Child Protection Register was 34 in 2019/20. This is an increase of three on the previous year. Although we had experienced decreases in previous years higher than the national average, our registration rate appears to be stabilising at around 30 to 35 children each 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

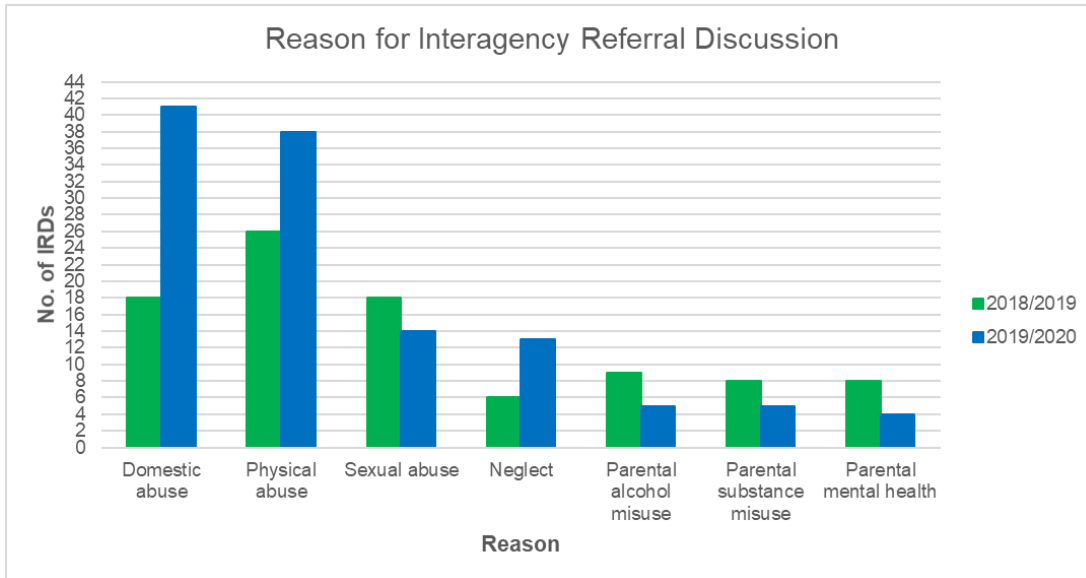


Interagency Referral Discussions

During the period April 2019 – March 2020, we have undertaken 126 Interagency Referral Discussions (between social work, police, health and where appropriate education services) in respect of 209 children.

The most common reasons for initiating an Interagency Referral Discussion during 2019/2020 are shown in the chart below. There has been a significant increase in Interagency Referral Discussions relating to domestic abuse which could be due to the increased awareness raising across the authority of the Multi Agency Risk Assessment Conference (MARAC) process. The associated Risk Assessment and Safe and Together training is also building confidence in the workforce in recognising and understanding the signs and impact of domestic abuse.

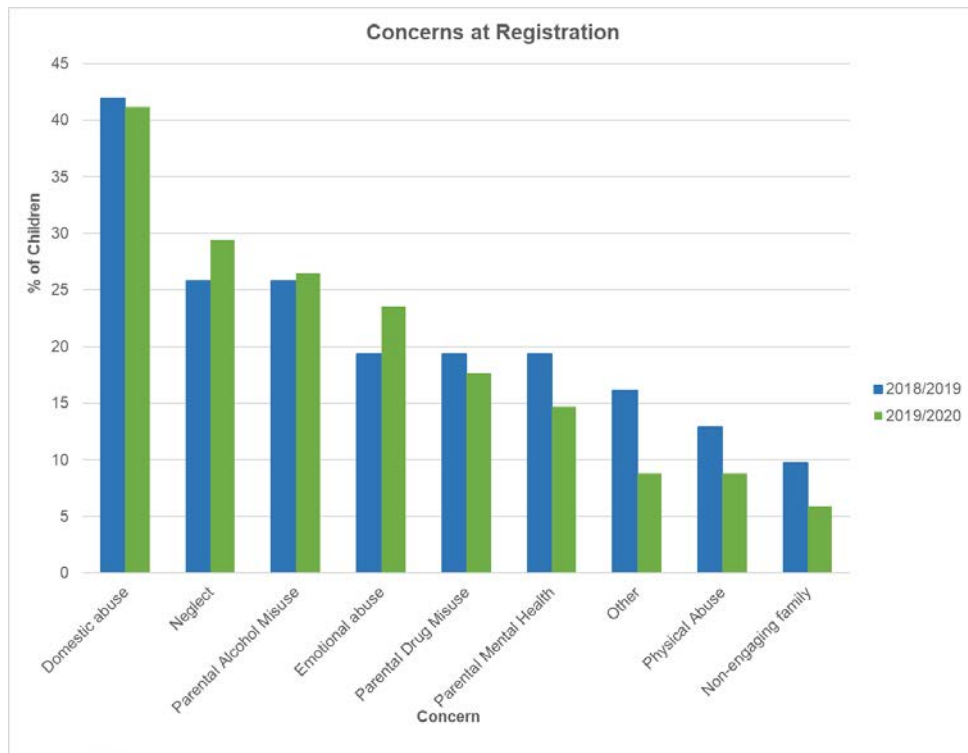
There was an increase in concerns of neglect and decrease in referrals relating to parental alcohol/substance misuse and mental health respectively.



Of the 209 children and young people subject to Interagency Referral Discussions, just less than half were subject to a child protection investigation. 20% went on to have an initial or pre-birth child protection case conference. Of the 20% of children and young people who were subject to an initial / pre-birth child protection case conference, 38% were registered. This equates to approximately 8% of all the children and young people who were subject to an Initial Referral Discussion.

Concerns Identified at Registration

The proportion of children who were registered for domestic abuse and parental alcohol misuse remained the same as the previous year, while the proportion of children who were registered for neglect and emotional abuse increased.



Quality Assurance Activity

Interagency Referral Discussion Audits

A quarterly programme of Interagency Referral Discussion audit is now an established part of our continuous improvement programme for Child Protection, allowing us to maintain an overview of the initial decision making in child protection processes. Since March 2020, this has been impacted significantly by the COVID-19 pandemic. Moving forward it is our intention to undertake retrospective work from April 2020.

The findings of the audits are discussed by the Child Protection Committee Continuous Improvement Subgroup and presented to the Child Protection Committee. The feedback is shared with frontline practitioners to support development of practice. Any appropriate areas for improvement will be taken forward as part of the new Scottish Interview Model for joint investigative interviews.

Prior to March 2020, the audits have reported significant strengths in our practice:

- 100% of the children subject to child protection investigation met the threshold for child protection.
- Initial Referral Discussion was assessed as good or above in identifying, analysing and making a decision for children about the risk of significant harm in over 90% of families.
- Planning to reduce risk to children was assessed as good or above in 97% of families.
- Early analysis suggests that changes to our discussion paperwork have improved the quality of recording around key decisions such as the requirement for medical examination.

Joint Investigative Interview Audits

Throughout 2019, we have reviewed quarterly the quality of our Joint Investigative Interviews (JII), with the audit team comprising of Police (G Division), Social Work, Health, Educational Psychology, Scottish Children's Reporter Administration and Speech and Language Therapy. The multi-agency audit team brings considerable skills and knowledge that is assisting us to improve the quality of the experience for children.

The audit programme is providing us with clear evidence of improvement in this area, and that our systems are supporting relational based practice. The audits identified:

- Clear evidence of good practice across the interviews audited, reflecting the individual commitment of the interviewers and their natural abilities with children / young people.
- That the manner and approach of the lead interviewers was sensitive to the child's age and ability across all interviews.
- That Lead Interviewers were child friendly, their tone was soft and they were able to relax the child in almost all interviews.
- That rapport was attempted and of good quality across the interviews.

As we move forward in piloting the Scottish Child Interview Model, a new process of evaluation, replacing the existing quarterly audit, will be in place to support the North Strathclyde Pilot. This will include:

- Introduction of a standard Quality Assurance Tool.
- Monthly Joint Investigative Interviews Multi Agency Audits.
- Feedback from Scottish Children's Reporter Administration / Crown Office and Prosecution Service on all Joint Investigative Interviews that are submitted for evidence.

- The collation of feedback from children and families.
- A formal system of peer evaluation and interviewer reflections.
- A process to capture longer term outcomes for children within the child protection system.

Joint Investigative Interviews Pilot

Police Scotland and Social Work Scotland, supported by the East Renfrewshire Chief Social Work Officer, have worked in partnership with the Scottish Government to take forward the recommendations of the [Evidence and Procedure Review](#) to improve the quality and consistency of Joint Investigative Interviews of children. A project team comprising police officers and social workers with experience of conducting and managing Joint Investigative Interviews was established in November 2017.

The aim of the training is to create the conditions for securing best evidence from child victims and witnesses, and for interviews to be of a sufficiently high standard to be used as Evidence in Chief or hearsay evidence. Reforms to interview practice make a significant contribution to the ultimate ambition of removing the need for children to give evidence in court. These improvements aim to reduce the potential for further traumatisation of child victims and witnesses and to support them to continue their journey to recovery.

East Renfrewshire is one of the first areas nationally to pilot and implement the learning from the new Joint Investigative Interviews course, which aims to design a truly child-centred, trauma-responsive approach to Interviews with the best interests of children at the centre based on European Promise quality standards.

Together with a Children 1st rights and participation support worker we have brought together a fully trained specialist JII Cadre (police and social work) and will be able to ensure that:

- The JII cadre will have advanced knowledge, skills and competencies and the required experience of forensic interviews to create the conditions for producing the best quality evidence and ensure the protection of the child. This partnership will be a national best practice model based on shared resources and learning. This will provide risk sharing arrangements across authorities, ensuring that the quality of the interventions, interviews and investigations are not compromised and are consistent in improving the experiences for children and their families who are subject to child protection processes.
- A fundamental principle of the partnership is to build trauma informed recovery into the process from the point of disclosure for children. Children 1st have considerable national expertise in delivering whole family trauma recovery.

Having successfully completed the course, our Cadre members are now equipped to apply the model to practice. A co-located Joint Investigative Interview Team, supported by a team coordinator, will be in place across the partnership and 2020/21 will see the application of the model in practice. This, together with our partnership arrangements with Children 1st, will see our vision of a truly child-centred, trauma-responsive approach to child interviews become a reality.

Multi-agency Child Protection Case File Audit

This audit takes place every two years, with the most recent audit taking place in November 2019. The report was shared with the Child Protection Committee, highlighting strengths of practice and areas for development. The Child Protection Committee Continuous Improvement Subgroup will be taking forward an Improvement / Business Plan for 2020-2023 based on the audit findings as well as other core child protection business. However, it should

be noted that the Improvement / Business Plan will also be focussing on recovery due to the impact of the lockdown restrictions on our highly valued children and their families.

Key successes

In response to the increases we have seen around domestic abuse and neglect:

- We are delivering a robust training programme on Safe and Together which focuses on our approach to supporting families affected by domestic abuse.
- Our Multi Agency Risk Assessment Conference (MARAC) is now well established with very good multi-agency representation.
- We have delivered a new multi-agency training on Understanding Neglect in Child Protection. This has been well evaluated and will be part of our ongoing child protection training programme.

We have continued with the implementation of our Signs of Safety strengths based and relational approach, having completed the second year of a five year implementation plan. Both practitioners and families continue to respond positively to this shift in practice. As we move forward, we are working on an adapted programme of support / training for practitioners in line with COVID-19 restrictions.

Our biggest challenge – Domestic Abuse

Domestic abuse continues to be one of the most common reasons for referral to children's social work services. Over the course of this year there were a total of 443 referrals and 385 children affected by domestic abuse. This included 375 domestic abuse police concern reports - a 14% increase on the same period last year. It is evident that a significant number of these children were exposed to domestic abuse on more than one occasion.

Domestic abuse is one of the most common features of all Interagency Referral Discussions held in East Renfrewshire. Of the 180 Interagency Referral Discussions held within this reporting period, 31% of these listed domestic abuse as a significant factor, while 41% of all child protection registrations identified domestic abuse as a primary or secondary risk factor.

Multi-Agency Risk Assessment Conference (MARAC) in East Renfrewshire

Multi-Agency Risk Assessment Conferences are recognised nationally as best practice for addressing cases of domestic abuse that are categorised as high risk. Over the course of this year we successfully implemented Multi-Agency Risk Assessment Conference in East Renfrewshire. In the first year of operation, 86 high risk victims and 135 children were referred to Multi-Agency Risk Assessment Conference.

Of these figures:

- 35 victims were recorded as having a disability
- ten victims were from BAME communities
- no cases were identified as from the LGBT community
- 78% of children referred were under the age of 12 years
- 26% under the age of five years (Includes Pre-Birth referrals) and;
- Six young people referred between the ages of 16 and 18 years.

A total of 469 actions have been agreed via Multi-Agency Risk Assessment Conference in this reporting period. It is significant that a quarter of all cases referred had no children in the household. Women without children were not previously visible in the domestic abuse pathway and this demonstrates increased awareness, risk assessment and improved pathway response for domestic abuse across both adult and childrens services.

Safe Lives carried out an independent observation of the East Renfrewshire Multi Agency Risk Assessment Conference in February 2020. This was our twelfth conference since going live in March 2019. The observation report and findings were very positive highlighting a range of strengths in best practice, procedure and strategic oversight. This reflects the commitment by all agencies to share information to keep victims of domestic abuse and their children safe and improve outcomes.

Multi-Agency Risk Assessment Conference and Risk Assessment Training

Domestic Abuse Awareness and Multi-Agency Risk Assessment Conference Briefings are now delivered in house by the Domestic Abuse Co-ordinator in partnership with Women's Aid / Health Visiting and School Nursing colleagues. Over ten dedicated risk assessment briefings have been facilitated across this reporting period, taking in delegates from the following: Housing, Social Work, Community Addictions Team, Adult Mental Health Team, Psychological Services, Education and Family First.

The Multi-Agency Risk Assessment Conference and Risk Assessment Training Course has evaluated extremely well and high demand for the course has resulted in a waiting list.

A review of the training opportunities offered has identified training needs across the authority with specific courses being developed for Home Care and Telecare Staff. There is a keen commitment to meeting the training demands across the authority and planning to accommodate COVID-19 restrictions is now underway.

Safe and Together

The Safe and Together Model provides improved safety planning for children and adults and improves the assessment and management of perpetrators. Multi agency training has been delivered to key staff across addictions, children and families, adult services, mental health, primary care, housing, education, children's hearing panel members and the third sector.

The East Renfrewshire Safe and Together Champions have been invited to speak and deliver a practice workshop at the first international European Safe and Together Conference. Training is planned to recommence in the second half of 2020/21 via virtual / blended delivery to accommodate COVID restrictions.

Adult Protection

Adult Support and Protection Inquiries

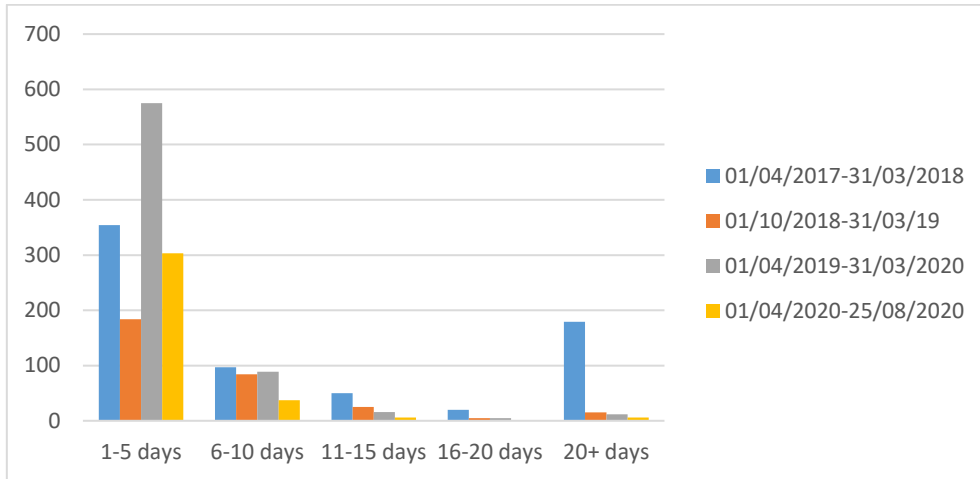
Over the last year, there has been a total of 697 inquiries undertaken by Council Officers (Adult Social Workers) of which 191 progressed to investigations. Over 2018/19, there were 624 inquiries carried out and 224 investigations carried out. This year shows an increase in inquiries but a reduction in investigations.

Of those inquiries carried out during 2019-20, 24% were received from third sector organisations delivering care and support to people in their own homes. This is an increase on previous years. For some years, we have been concerned about the under reporting of harm in people's own homes and are reassured that the identification of harm by providers is improving.

Police Scotland continues to be the main referrer for Adults at Risk. These referrals have generated 23% of all inquiries and we have seen a slight reduction in terms of our care home in this year (20%).

Due to improvements in our recording and reporting, a detailed comparison of the period 31/03/2018 to 30/09/2018 is not available. However to assist comparison and oversight, the period from 01/04/2020 to 25/08/2020 has been provided.

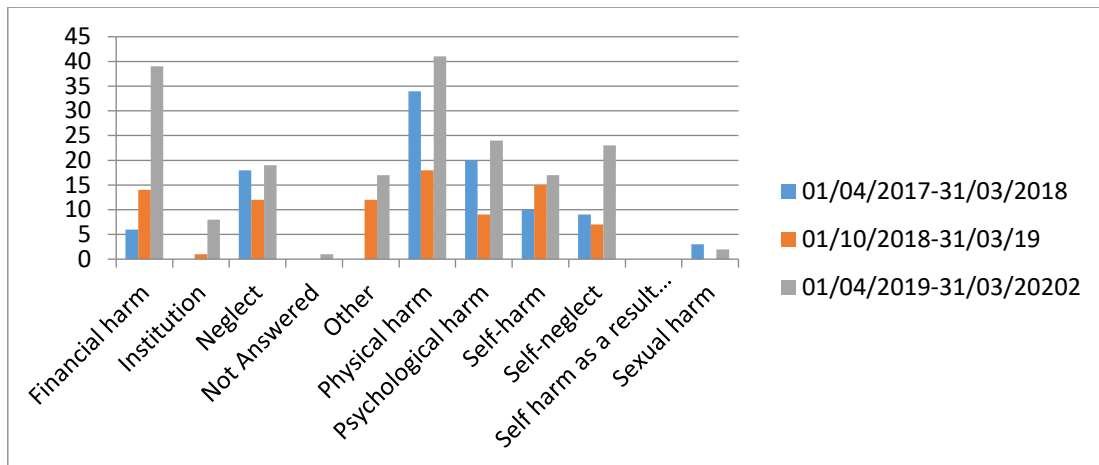
The table below gives an overview of our improvement in completing adult support and protection inquiries since April 2017. This year, 82.5% of all inquiries were completed within the five day standard timescale and we are seeing increased compliance with the timescale in comparison to the same period in 2018/19.



Adult Protection Investigations

For the period 2019/20 there were 191 Adult Support and Protection investigations that involved 175 individuals. The conversion rate from inquiry to investigations is 27% and is lower than in previous years. (36% in 2018/19 and 34% in 2017-18). Over 2020/21 we will be quality assuring this process, to gain a greater understanding of the decrease in conversion from inquiry to investigation in the context of an 11% increase in inquiries.

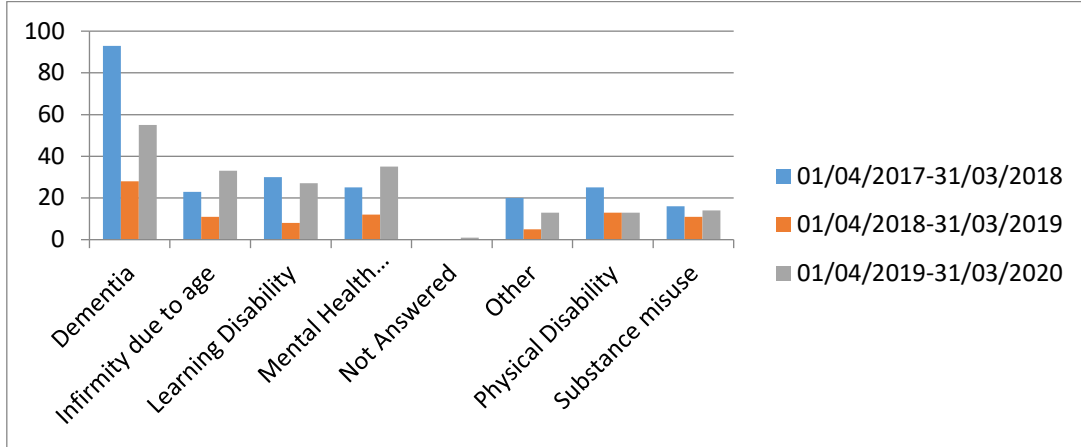
Type of Harm



During 2019/20, our recording showed that Physical Harm was reported to be the most common type of harm (21%). The second highest type of harm was Financial Harm (20%), which has also increased from 12% in the previous year. This is reflective of the national experience and will be an area for future development. Work is underway through the Adult Protection Committee to develop relationships and joint training with Trading Standards around scam prevention.

From October 2018, we have achieved more accurate reporting of principal and secondary types of harm and this has continued in 2019/20.

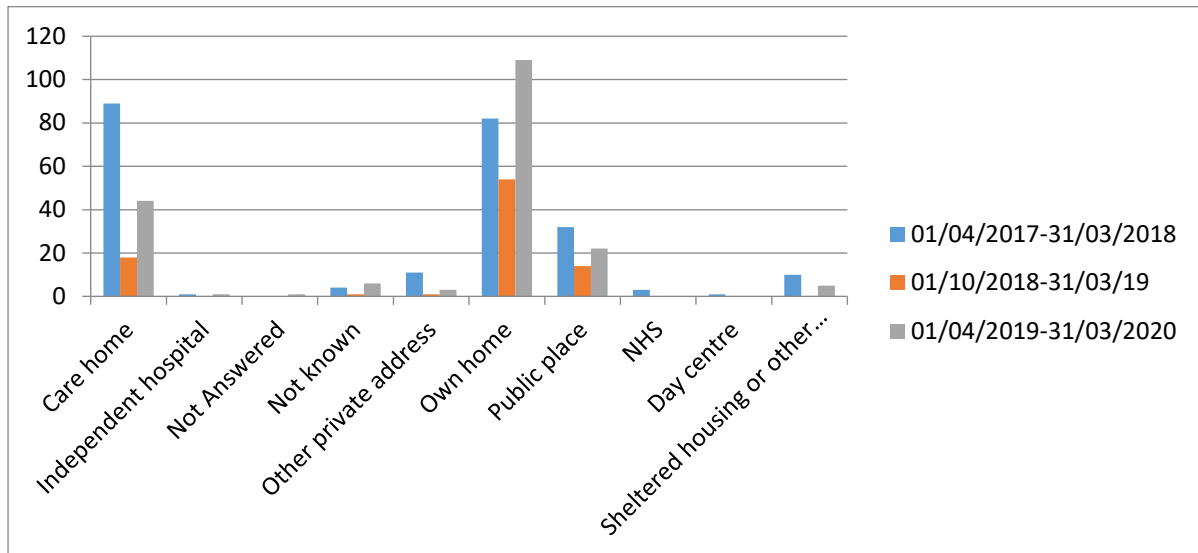
Key Characteristics



The adults most affected are those with dementia, who make up 29% of all investigations. The prevalence of adults who have dementia requires further examination over 2020/21.

Those with mental health problems constituted 18% of investigations and infirmity in old age featured as 17%. It is evident there has been an increase in those presenting with mental health problems with a 13% increase in the last year. Mental health and mental distress has been a key feature moving out of lockdown and this has been incorporated into the recovery plan for adult services.

Location of harm – Adult Support and Protection Investigation



The primary location of harm in 2019/20 in 57% of investigations was within the adult’s home. This is an 8% increase from 2018/19.

Adult Support and Protection Improvement Activity

Over 2019/20 the Chief Social Work Officer reviewed and implemented new professional governance arrangements and this has resulted in an improvement in the accuracy of our data

in Adult Support and Protection. In addition she has implemented enhanced senior management oversight and decision making within Adult Support and Protection. For example all Initial and Review Case Conferences are now chaired by a Senior Social Work Manager with escalation processes built in to the Head of Service. This provides professional reassurance to the Chief Social Work Officer about the implementation of Adult Support and Protection within East Renfrewshire Health & Social Care Partnership.

There has been no significant Large Scale Investigation (LSI) activity within 2019-20.

Whilst we have made great progress there is still much to do and this is supported with a very detailed improvement plan.

The performance of the service has continued to be reported to the Adult Protection Committee, supported by a Quarterly Reporting Format that identifies referral rates from agencies, patterns of harm and analysis of key performance indicators. Targets have been set to ensure that we are responding timeously in our interventions to keep adults at risk of harm safe.

The Adult Protection Committee and its sub-committees have made progress with the Improvement Plan for the service in 2019-20. This has improved multi-agency cooperation in Adult Support and Protection activity and focused partners on the development and improvement of multi-agency working. The progress that has been made in this area greatly assisted us to manage the impact of the lockdown on our most vulnerable adult citizens.

Section 3. Resources

In 2019/20 we ended the financial year with an overspend of £0.14 million against a budget of £154 million (including set aside) which we funded, as planned from our reserves. We expected to use reserves to balance our budget in 2019/20 as we recognised we would not achieve all savings required within that financial year due to lead in times and some capacity constraints to deliver our change plan and associated savings.

The impact of COVID-19 in the closing weeks of 2019/20 had minimal impact to our operational budgets and the main variances to the 2019/20 budget were:

- Children's Services £0.56 million underspend from staffing, purchased care costs, including residential care, fostering and adoption.
- Older Peoples and Intensive Services ended the year with a collective overspend of £0.87 million from care package costs for residential and care at home costs, reflecting the continued impacts of population growth in older people and the demand for services. We are addressing our care at home costs as an element within an action plan and redesign of this service.
- In addition to the two key areas above we had underspends from a number of services from staff turnover during the year, reflecting the general trends of recruitment and retention issues within the health and social care sector.

Our unaudited [annual report and accounts](#) was considered by East Renfrewshire's Integration Joint Board on 24 June and we plan to take our audited annual report and accounts to East Renfrewshire's Integration Joint Board in September (capacity permitting).

Financial Modelling for Service Delivery

The Health & Social Care Partnership 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 2019/20 to 2023/24](#) which supports our strategic planning process and provides a financial context to support medium-term planning and decision making.

The plan, agreed pre-COVID, sets out potential cost pressures of circa £5.1 to £5.7 million per year for the five year period 2019/20 to 2023/24. The resulting funding gap will be dependent on the funding settlement for each year and the impacts of scenarios are shown.

The 2020/21 budget settlement fell within the poor settlement range of scenario planning assumptions with cost pressures of just over £6 million and subsequent required savings of £2.4 million after all funding uplifts.

The budget of £158 million (including set aside) agreed on [18th March 2020](#) set out how we will achieve the £2.4 million savings to balance our budget. We identified £0.8 million from specific budget areas and we will need to prioritise care package costs to meet the remaining balance of £1.6 million savings. As we had previously signalled, this will mean an impact on our frontline services and care packages.

Section 4. Workforce

Workforce Development

Developing our workforce is at the heart of all of our improvement and over 2019/20 there has been considerable focused activity with adult services. The adaptability of the children's social work practice models to an adult social work context has been scoped out and the implementation of new ways of working will continue to commence over 2020/21. However the focus of this year's activity was the need to strengthen professional practice on core skills for example, chronologies, investigative interviewing, standards for recording and reflective supervision.

We have continued to explore our ability to be trauma informed and responsive. Mental health and emotional wellbeing, in particular moving to recovery, has been a significant feature of our training calendar. Our second multiagency public protection conference in November 2019 focused on this too.

We are currently exploring how we implement our workforce development plans as part of our COVID-19 recovery process. In addition our internal quality assurance activity has shown there is a need to ensure more robust management oversight in relation to practice and this will be a dominant feature going forward. Lastly, we will need to ensure our workforce is best equipped to respond to the impact of the trauma associated with the pandemic, both on themselves and others. In order to do this, we will endeavour to source the most up to date resources and to make them available to our staff as and when they require them.

East Renfrewshire Health & Social Care Partnership published a workforce plan for 2016-18. A Health & Social Care Partnership working group was established, consisting of managers from across the Health & Social Care Partnership in March 2019 in to review the previous action plan and develop a new workforce plan in line with impending guidance from the Scottish Government. The group had oversight of both the Directorate Management Team and the Health & Social Care Partnership's Strategic Planning Group. The plan would include reviewing the workforce across the Health & Social Care Partnership including that of primary care and private and voluntary providers. The Scottish Government published final guidance in December 2019 setting out the requirement for all Health & Social Care Partnership's to publish a three year workforce plan from March 2021. As such, the workforce group, developed an interim workforce action plan to cover the period 019-2021, taking direction from the 2018-2021 Strategic Plan.

As Chief Social Work Officer, I lead Health & Social Care Partnership commitment to developing the social work and social care workforce and a number of social work assistants have indicated a desire to become qualified social workers and two members of staff have been supported to undertake the course during 2020.

Section 5. COVID-19: Early indication of impact on workforce and services

COVID-19 will no doubt be recognised as having the greatest impact on our people and communities in our lifetime. Social Work and Social Care services across the Health & Social Care Partnership rose to the challenge to ensure that our most vulnerable people were supported and kept safe throughout the pandemic.

This section of the report details the key impacts, successes and themes for recovery planning across Social Work services. Statutory social work services are not delivered in isolation and the fact that we have strong partnership arrangements, whether through our integration of services, or joint delivery with Education, will serve us well in our recovery.

Chief Officer's Public Protection Group

Early in the Covid-19 outbreak, the East Renfrewshire Chief Officer's Public Protection Group commenced regular meetings to review and consider public protection risks identified by services and the actions in place to mitigate these risks. The multi-agency representation at Chief Officer's Public Protection Group emphasises the importance of partnership working and sharing information across agencies. The risks identified greatly informed service recovery plans.

Children's Services

Our engagement with families during this period has highlighted the following key impacts that must be a focus of our recovery plans:

- A significant impact on children with disabilities and their families, particularly on their mental health, due to the isolation and lack of respite during lockdown conditions.
- Impact on children and young people's physical and mental health.
- Support for children and young people to re-integrate into nursery, school and community life.
- Impact of limited or no support for children, young people and families during lockdown.
- Supporting children, young people and families who have been displaced to re-unite.
- Impact of parental anxieties, mental health, harmful alcohol and/or substance use on children and young people.
- Impact of bereavement during this challenging time.
- Impact of financial hardship/poverty due to job losses.
- Anticipated increase in referrals across Children's Services.

Key Successes during COVID

- Working closely with education, looked after children were quickly prioritised into school hubs.
- Contact between children and their families continued virtually and is now direct where possible.
- Reviews taking place virtually and directly where possible. Technology and support provided to allow children and families to fully participate.
- Innovative recruitment of foster carers to meet needs of children who have become looked after.
- High levels of engagement with our Aftercare population has remained consistent, averaging 96%.
- Continuation of intensive services required by our young people e.g. physical support to young people to change placements during crisis periods and accommodating young people who required temporary respite because of the lockdown conditions.

- Use of Inclusive Family Support staff to support the hub at Isobel Mair school which allowed more children and young people with disabilities to attend and be supported by staff that they know and trust.
- Use of Self Directed Support Option 1 to promote children and young people's safety and wellbeing through provision of equipment for a variety of purposes (technology, fencing, sports equipment and many other examples).

The following have been identified as key priorities for children and families social work recovery:

- Ongoing joint / partnership working to ensure that children, young people and families continue to receive the support they need when they need it.
- Joint / partnership working to meet the anticipated increase of referrals as lockdown eases.
- Children, young people and families' views and participation needs to be ensured, including access to advocacy support.
- Increase in number of children looked after and displaced during COVID.
- Anticipated longer term effects are potential increases in mental health referrals for both children and parents as the pandemic eases and impacts such as loss of income on family stress become evident
- Continued flexibility in relation to the use of technology and face-to-face meetings to support ongoing service delivery whilst maintaining social distancing.
- Ensuring there are appropriate carers to meet the needs of children and young people who have become looked after.
- There has been an impact on third sector providers and Personal Assistant services. As the marketplace in East Renfrewshire is limited this could have longer term implications for families trying to access appropriate support.

Adult Services including Mental Health

Key impacts:

- Since 15 March 2020 a total of 801 individuals received services either for the first time or at an increased level during this period.
- Adults over 65 years of age, living in their own home were the largest recipient of new or increased support during this period, accounting for 45% (367 individuals).
- Care and support services in the community have required to be reduced or suspended, however only where there has been agreement with people and / or families that it is safe to do so.

Key Successes:

- Guidance to support the implementation of the Coronavirus Scotland Act 2020 resulted in partial assessment of needs to ensure people requiring support would receive this more quickly.
- Where support has required to be stepped down, a range of alternatives including the third / community sector, technology enabled care and ongoing telephone support have been utilised.

Key Priorities for Recovery

- There will be a need moving out of lockdown to review the support that was put in place to ensure that it is based on current risk and need.
- As lockdown measures have been easing, people and their families who had their service suspended are now looking for support to be reinstated. We are currently seeing a rise in the complexity of people's needs due to an increases in their frailty during lockdown, increase in isolation and loneliness and a reduction in mental wellbeing.

Adult Protection

Key impacts:

- From the onset of the COVID-19 pandemic the rate of referrals reduced by 50% and this is consistent with the national picture. Since moving out of lockdown we have received a marked increase, which is slightly higher than the corresponding period in 2019.

Key successes:

- In response to the pandemic a Care at Home operational hub was rapidly established within the Kirkton Centre, including the effective management and distribution of PPE for frontline staff, supported by collaborative working across Health & Social Care Partnership, East Renfrewshire Council and the use of volunteers.
- All aspects of the Telecare service provision were maintained throughout.
- Staff absence levels were lower than anticipated and service delivery was maintained, supported by realignment of staff from suspended day service operations.
- Extremely positive feedback from service users and their families.

Key priorities for recovery:

- In preparation for the anticipated rising demand and complexity in adult protection concerns, a dedicated temporary adult protection team has been established at the request of the Chief Social Work Officer. New procedures have been developed by the Chief Social Work Officer for the Initial Contact Team and the impact of these will be reviewed in the autumn in preparation for the winter.

Criminal Justice

Key impacts:

- Significant disruption to carrying out unpaid work
- Whilst contact was prioritised throughout for high risk and vulnerable individuals, social distancing measures affected the service's ability to progress rehabilitation.

Key successes:

- Individuals subject to Multi Agency Public Protection Arrangements continued to have a robust risk management plan in place.
- Virtual arrangements were put in place for Multi Agency Public Protection Arrangements Level 1 review meetings.
- Early release of prisoners subject to short term sentences was managed successfully through early planning and joint working between services in East Renfrewshire and robust information sharing between local services and the Scottish Prison Service.

Key Priorities for Recovery:

- Whilst the Scottish Government has extended the time for completion of unpaid work orders, there will be increased pressure in relation to the significant number of outstanding hours.

Conclusion

Given the rapidly evolving nature of the COVID pandemic and that Social Work and Social Care had no blueprint to manage the impact they responded quickly and compassionately to ensure they just did the right thing for our most vulnerable citizens. The mobilisation of the workforce was underpinned by the core values and ethics of the profession and this was quite evident throughout the lockdown in keeping people safe.

As outlined in the report we have seen a rise in public protection activity across the partnership, increasing domestic abuse incidents, child and adult protection inquiries and notification of concern and mental and emotional distress.

For children's services, the impact of the lockdown was significant for children and their families across the spectrum and there was a significant increase in the number of children that required to be removed from their families.

Moving out of lockdown the level of complexity we are managing, particularly in Adult Services, is again unprecedented. For carers we are seeing them struggling to support many of their loved ones and as a consequence there is new demand into the service where there has been longstanding capacity issues. For service users the complexity of the concerns are around self-harm, self-neglect, mental health and increases in frailty and dependency for older people with rising demand in physical needs. There are significant issues for the workforce due to the additional demands on the service moving into recovery and this will require to be urgently addressed over the forthcoming months.

Finally I would wish to thank all the Social Work and Social Care workforce and would wish to commend their ability to be responsive, nimble, creative and, most importantly, resilient. They have been exceptional and we have learned so much about their strengths and the fact that they kept most vulnerable citizens safe, both physically and emotionally, throughout lockdown. We must shine a light on the significant contribution that they played as essential workers throughout this challenging period and as their professional leader I would just like to say thank you.

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