

Date: 11 June 2021
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TO: MEMBERS OF THE EAST RENFREWSHIRE INTEGRATION JOINT BOARD

Dear Colleague

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

A meeting of the East Renfrewshire Integration Joint Board will be held on **Wednesday 23 June 2021 at 2.30 pm or if later at the conclusion of the meeting of the Performance and Audit Committee**. Please note the change in the time of the meeting.

Please note this is a virtual meeting.

The agenda of business is attached.

Yours faithfully

Councillor Caroline Bamforth

Chair

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**EAST RENFREWSHIRE INTEGRATION JOINT BOARD
WEDNESDAY 23 JUNE AT 2.30 pm**

VIRTUAL MEETING VIA MICROSOFT TEAMS

AGENDA

- 1. Apologies for absence.**
- 2. Declarations of Interest.**
- 3. Draft Minute of meeting held on 12 May 2021 (copy attached, pages 5 - 12).**
- 4. Matters Arising (copy attached, pages 13 - 16).**
- 5. Rolling Action Log (copy attached, pages 17 - 20).**
- 6. Local Child Poverty Action Report – Year 3 (copy attached, pages 21 - 76).**
- 7. Unaudited Annual Report and Accounts (copy to follow).**
- 8. Medium-Term Financial Plan (copy to follow).**
- 9. 2020-21 End-Year Performance Update and Postponement of Annual Performance Report (copy attached, pages 77 - 116).**
- 10. HSCP Recovery and Renewal Programme Update (copy attached, pages 117 - 122).**
- 11. Inclusion of Integration Joint Boards as Category 1 Responders under the Civil Contingencies Act 2004 (copy attached, pages 123 - 130).**
- 12. Calendar of Meetings 2022 (copy attached, pages 131 - 134).**
- 13. Date of Next Meeting: Wednesday 22 September at 10.30 am.**

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**Minute of virtual meeting of the
East Renfrewshire Integration Joint Board
held at 10.00 am on 12 May 2021**

PRESENT

Councillor Caroline Bamforth	East Renfrewshire Council (Chair)
Lesley Bairden	Head of Finance and Resources (Chief Financial Officer)
Dr Claire Fisher	Clinical Director
Jacqueline Forbes	NHS Greater Glasgow and Clyde Board
Anne Marie Kennedy	Third Sector representative
Councillor Alan Lafferty	East Renfrewshire Council
Dr Deirdre McCormick	Chief Nurse
Andrew McCready	Staff Side representative (NHS)
Geoff Mohamed	Carers' representative
Heather Molloy	Scottish Care representative
Anne-Marie Monaghan	NHS Greater Glasgow and Clyde Board (Vice-Chair)
Julie Murray	Chief Officer – HSCP
Lynne Rankin	Staff Side representative (ERC)
Kate Rocks	Head of Public Protection and Children's Services (Chief Social Work Officer)
Flavia Tudoreanu	NHS Greater Glasgow and Clyde Board

IN ATTENDANCE

Liona Allison	Assistant Committee Services Officer, East Renfrewshire Council
Jim Anderson	Project Manager
Mairi-Claire Armstrong	Governance and Systems Manager
Eamonn Daly	Democratic Services Manager, East Renfrewshire Council
Morven Fraser	Audit Scotland
Pamela Gomes	Governance and Compliance Officer
Lee McLaughlin	Head of Recovery and Intensive Services
Candy Millard	Head of Adult Health and Social Care Localities
Steven Reid	Policy, Planning and Performance Manager

APOLOGIES FOR ABSENCE

Dr Angela Campbell	Consultant Physician in Medicine for the Elderly
Councillor Tony Buchanan	East Renfrewshire Council
Amina Khan	NHS Greater Glasgow and Clyde Board
Councillor Jim Swift	East Renfrewshire Council

DECLARATIONS OF INTEREST

1. There were no declarations of interest intimated.

MINUTE OF PREVIOUS MEETING

2. The Board considered and approved the Minute of the meeting held on 17 March 2021, subject to the following amendment to Item 10, Paragraph 10:-

“Ms Forbes having welcomed the report, Ms Monaghan referred to the consideration by the Board of the Alcohol and Drugs Plan in September 2020 when she had expressed her disappointment at the lack of service user involvement in the preparation of Plan. She suggested that the consultation mechanisms used in the review of the Peer Support Service were a model of good practice which it was hoped would be reflected on in the development of future iterations of the Alcohol and Drugs Plan.”

MATTERS ARISING

3. The Board considered a report by the Chief Officer providing an update on matters arising from discussions that had taken place at the previous meeting.

Having heard the Chief Officer confirm that the final version of the workforce plan would be submitted to a future meeting, the Board noted the report.

ROLLING ACTION LOG

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

RECOVERY AND TRANSFORMATION PROGRAMME

5. The Board received a presentation on the ongoing work within the HSCP to reshape future service delivery.

The Chief Officer introduced Mairi-Clare Armstrong, Governance and Systems Manager and Jim Anderson, Project Manager, who were leading the change programme.

The aims and objectives of the programme having been explained, details were provided of the programme's governance arrangements. It was noted that programme oversight sat with the Recovery and Renewal Project Board comprising the HSCP's senior management team, which in turn fed into the IJB.

It was explained that the various projects that formed part of the overall programme had been divided into 4 categories, these being; Recovery; Individuals' Experiences; Wellbeing; and Business Systems and Processes. Details of the various projects under the thematic headings were summarised.

Thereafter in response to questions about governance arrangements and the language used to describe service users, it was explained that there were no lay members on the project board but that service users would participate through the various separate project groups. It would also be possible to review the language and phraseology used. It was further confirmed that a lot of reflection and learning from past experiences was already taking place, and would

inform and influence the direction of travel. In addition the Chief Officer highlighted that some of the review work underway across the whole NHSGGC area would also help to inform developments at a local level.

Responding to comments regarding the use of Your Voice as a consultative forum, the Head of Recovery and Intensive Services indicated that as part of her role attending meetings of Your Voice she would be happy to act as a link and to gather views that could be fed into the programme.

Ms Molloy having reminded the Board of the need for the third and independent sectors to be involved in the programme the Head of Finance and Resources assured the Board that partnership working and lived experience were key components of the programme. The Chief Officer also highlighted the potential impact of the Review of Adult Social Care, but that notwithstanding, it had been considered vital to progress the programme and deal with any review implications as and when they arose.

Details of current project status were then provided in addition to which information on future projects was also given. Based on the feedback provided at the meeting, further refinement would take place, and it was noted that written progress reports would be submitted to future meetings of the Board.

Responding to further questions, the arrangements put in place to ensure the sustainability of any changes were explained. This would include ensuring early engagement and involvement in change by both service users and providers, and support for managers to deliver change.

In conclusion the Head of Finance and Resources referred to the previously introduced Fit for the Future Change Programme and how many of the lessons learned from that programme were being applied in the current review.

The Board noted the presentation.

HSCP RESPONSE TO COVID-19

6. Under reference to the Minute of the previous meeting (Item 11 refers), the Board considered a report by the Chief Officer providing an update on current service delivery in relation to the ongoing COVID-19 pandemic.

Details of the ongoing vaccination programme, the support being provided to care homes, and the introduction of an activity programme for children and young people were outlined, it being noted that the latest figure for vaccinations by the housebound vaccination team had risen to 891 from the 770 noted in the report.

The Chief Officer referred in particular to the amount of time the senior management team had spent visiting care homes and that reviews of all East Renfrewshire residents in care homes were now being carried out regardless of whether or not the person stayed in a home in the East Renfrewshire area.

In addition the Head of Recovery and Intensive Services explained that the focus of the care home visits had been about providing both assurance and also support, in response to which Ms Molloy reported that the support provided by the HSCP had been really welcomed by care home staff, particularly that it was being provided by senior members of the HSCP management team.

Having heard the Head of Public Protection and Children's Services comment further on the enrichment programme and that the intention was to integrate much of the activity around disabled children, the Board noted the report.

REVENUE BUDGET MONITORING REPORT

7. Under reference to the Minute of the previous meeting (Item 5 refers) the Board considered a report by the Chief Financial Officer providing details of the projected outturn position of the 2020/21 revenue budget as at 28 February 2021, and seeking approval of a series of budget virements resulting from the allocation of new funding, and reallocation of savings from a summary to a detailed level across service areas.

As in previous updates, the report explained that HSCP costs related to COVID-19 activity were reported to the Scottish Government via NHS Greater Glasgow and Clyde, as health boards were the leads on this reporting. Detailed estimated and actual costs across a number of categories were provided including; staffing additional hours and absence cover for both the HSCP and partner providers, sustainability of partner providers, PPE (personal protective equipment) and other equipment, unachievable savings and prescribing impacts.

It was noted that current COVID-19 related expenditure assumptions were just over £9.4 million. These costs were reviewed monthly, with cost projections being continually revised as the service responded to the pandemic. The current estimated costs were included in the overall financial position with the bottom line being a nil impact as the current planning assumption remained that all costs would be fully funded by the Scottish Government. The sustainability costs supporting the social care market were supported nationally by an agreed set of principles, and it was noted that since the last meeting it had been confirmed that this support had been further extended from March to June 2021.

The report explained that current projected local mobilisation plan costs were £9.432 million. FHS (Family Health Services) costs of £0.332 million were being met by NHSGGC leaving current local costs of £9.1 million. Total mobilisation funding confirmed and received to date was £12.260 million leaving a potential balance of £3.160 million to be carried forward. It was clarified that the increase in projected costs of £0.105 million related mainly to sustainability costs.

Thereafter it was reported that against a full year budget of £142.9 million there was a projected operational underspend of £0.672 million. This was a reduction in projected costs of £0.440 million since the previous report, with the reduction being due mainly to reduced nursing, residential care and staffing cost projections.

Details of the main projected operational variances as well as ongoing financial risks were set out.

The Board:-

- (a) note the 2020/21 projected outturn;
- (b) noted the increase in earmarked reserves; and
- (c) approved the requested budget virements.

PRIMARY CARE IMPROVEMENT PLAN – YEAR 3

8. The Board considered a report by the Chief Officer providing details of progress and achievements to date for Year 3 of the 2018-2021 Primary Care Improvement Plan (PCIP).

Having explained the background to the development of PCIPs in the context of the new Scottish General Medical Services (GMS) Contract published in 2018, the report explained

how COVID-19 had adversely impacted the implementation of many of the actions contained in the plan, with staff across a variety of disciplines being diverted to deal with the challenge of the pandemic .

It was further reported that in December 2020 the Scottish Government had issued a '*Joint Letter - GMS Contract Update for 2021/22 and beyond*' to emphasise the continuing commitment to the 2018 GMS Contract in Scotland and to reconfirm the invested commitment into general practice and primary care. It acknowledged what had been achieved over the preceding two and a half years but recognised there was still some way to go.

In order to continue the development of NHS Board-employed Multi-Disciplinary Teams (MDTs) and the transfer of responsibility for services from practices to Health and Social Care Partnerships they jointly agreed revised approaches, extensions to some timescales and possible transitional arrangements for the Memorandum of Understanding (MOU) to remain committed to the Contract. The MOU established a national agreement between the British Medical Association, Scottish Government, Integration Authorities and NHS Boards to implement the 2018 Contract, which outlined the funding available and agreed the principles of service redesign. A new MOU had been expected in March 2021.

Thereafter the report set out details of progress in the delivery of the MOU commitments in Year 3 of the PCIP, it being noted that there continued to be significant progress across the MOU priority areas in East Renfrewshire, particularly in Pharmacotherapy, the Vaccination Transformation Programme, and Community Treatment and Care services, with examples being provided. However, the allocation and availability of workforce required to implement the priority areas of Urgent Care and Advance Professionals meant that progress towards implementation in these areas had been slower.

The report also set out the financial position, it being noted that there was an underspend of £0.877million over the life of the plan. Scottish Government had confirmed that all funding had now been allocated to the HSCP meaning that the IJB would hold the full underspend amount in its reserves for future use. Indicative figures for 2021/22 showed a modest underspend of £0.025 million against a budget of £2.419 million.

The report concluded by explaining that whilst many of the aspirations outlined in the PCIP had been achieved through collaborative working between the HSCP, local GPs and the NHSGGC Primary Care Programme Board, further direction from Scottish Government following the joint letter in December 2020 was awaited. Work towards full implementation of the original plan would continue by embedding the outlying staffing during the pandemic and beyond, with the main focus on the shift of demand from GP services.

Dr Fisher, Clinical Director was then heard further on the report, and in response to questions confirmed that the updated Memorandum of Understanding was still awaited.

The Board noted the progress and achievements to date of the East Renfrewshire Primary Care Improvement Plan (2018–2021).

HSCP INTERIM EQUALITIES OUTCOMES 2021-22

9. The Board considered a report by the Chief Officer seeking approval of a set of 6 interim equalities outcomes for the HSCP covering the period 2021-22.

Having referred to the public sector equality duty obligations placed on the HSCP by the Equality Act 2010, the report explained that the HSCP was required to develop and publish equalities outcomes every 4 years that would enable it to better meet its obligations.

In line with the agreed approach to strategic planning as recovery from the pandemic continued, a set of interim equality outcomes had been developed for 2021-22. These were a cross-cutting subset to the priorities set out in other plans for 2021-22 including the Interim HSCP Strategic Plan and Interim Workforce Plan. The content and background evidence for these plans was considered in the development of the equalities outcomes as well as the findings from the research and engagement activity carried out by East Renfrewshire Council and NHS Greater Glasgow and Clyde. The equalities outcomes would be reviewed as evidence was gathered through further engagement work for the next HSCP Strategic Plan.

The report then set out details of the development work that had taken place in the production of the outcomes, which had culminated in the production of a detailed research report setting out the key workshop findings and secondary research in relation to each of the protected characteristic groups. Highlighted issues and proposed responses of particular relevance to the HSCP were listed.

From this work, 6 interim outcomes had been identified with them being set out in the report.

Referring to the report, Ms Forbes noted that the gender pay gap in the Council was above the national average and asked what steps were being taken to address this.

In reply it was explained that there was work ongoing across the Council, in addition to which the question of the gender pay gap was being considered as part of the HSCP's workforce planning. Details of the position relative to the HSCP could be provided at the next meeting.

The Board approved the interim HSCP equality outcomes for 2021-22.

HSCP MANAGEMENT REVIEW – ADULT AND RECOVERY SERVICES

10. The Board considered a report by the Chief Officer providing an update on the proposed changes in relation to the management review of adult services within the HSCP.

By way of background, the report provided details of the current senior management structure of the HSCP, also referring to the imminent retirements of both the Head of Adult Health and Social Care Localities on 30 June 2021 and the Senior Manager – Recovery Services on 1 August.

Following these retirement announcements, a review of the management structure had been carried out, and in order to ensure continuity and stability within the HSCP, changes to the structure and the remits of 2 Heads of Service posts were proposed.

Details of the current and proposed remits and the benefits to be accrued by the changes were set out in addition to which it was explained that it was also proposed to integrate the General Manager, Specialist Learning Disability Services into the wider Head of Service structure.

Furthermore, it was explained that in order to increase management capacity as service demand increased additional changes within the management structures below Head of Service were planned, with the details being set out.

In response to questions the Chief Officer confirmed that if the temporary nursing post was retained the proposals would be cost neutral with a slight saving if the post was discontinued.

The Board noted the proposed changes.

REVISED IJB COMPLAINTS HANDLING PROCEDURE

11. The Board considered a report by the Chief Officer providing an overview of the revised model complaints handling procedure for dealing with IJB complaints.

The report explained that the Scottish Public Services Ombudsman had published Model Complaints Handling Procedures for all those bodies under its jurisdiction and had advised that these should be adopted for complaints relating to the actions and processes of Integration Joint Boards. It was noted that the aim of the SPSO was to implement a standardised and consistent process for individuals to follow making it simpler to complain, ensuring confidence in complaints handling, and encouraging public authorities to learn and make improvements from complaints. Consequently the SPSO had been clear that local discretion to make changes to the standard process should be minimal.

Having referred to the background to the current procedure, the report explained that much of the existing procedure remained unchanged with details of the main changes and the new processes to be followed being set out.

Thereafter the report explained the local processes that would be used in relation to dealing with any IJB related complaints, as well as providing information on the new arrangements for HSCPs handling of complaints about social work services. It was noted that there would no longer be a standalone social work complaints handling procedure, with HSCP staff dealing with complaints about social work services using the Council's complaints handling procedure.

The Board noted the report.

DATE OF NEXT MEETING.

12. It was noted that the next meeting of the Integration Joint Board would be held on Wednesday 23 June 2021 at 2.30 pm.

CHAIR

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Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board
Held on	23 June 2021
Agenda Item	4
Title	Matters Arising and Rolling Action Log
Summary	
<p>The purpose of this paper is to update IJB members on progress regarding matters arising from the discussion which took place at the meeting of 12 May 2021.</p>	
Presented by	Julie Murray, Chief Officer
Action Required	
<p>Integration Joint Board members are asked to note the contents of the report.</p>	

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

23 June 2021

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 IJB meeting.

RECOMMENDATION

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

REPORT

IJB Complaints Handling Procedure

3. We have yet to receive feedback from the Scottish Public Services Ombudsman on our internal procedure for complaints handling. The SPSO have however shared draft guidance on the key performance indicators (KPIs) to be reported against in line with the Complaints Handling Procedure. There are five mandatory KPIs which all organisations should report against in their annual complaints performance report. Should we ever receive complaints regarding the Integration Joint Board we will report on the mandatory key performance indicators which are:-

- Learning from complaints
- The total number of complaints received
- The number and percentage of complaints at each stage which were closed in full¹ within the set timescales of five and 20 working days
- The average time in working days for a full response to complaints at each stage
- The outcome of complaints at each stage

RECOMMENDATIONS

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

REPORT AUTHOR AND PERSON TO CONTACT

Julie Murray, Chief Officer
Julie.Murray@eastrenfrewshire.gov.uk

June 2021

¹ This is where a full response has been given to customer / resolution has been reached – and includes those complaints where action is still to be taken once complaint is closed.

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Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board
Held on	23 June 2021
Agenda Item	5
Title	Rolling Action Log
Summary	
The attached rolling action log details all open actions, and those which have been completed since the last IJB meeting on 12 May 2021.	
Presented by	Julie Murray, Chief Officer
Action Required	
Integration Joint Board members are asked to note progress.	

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ACTION LOG: Integration Joint Board (IJB)

June 2021

Action No	Date	Item No	Item Name	Action	Responsible Officer	Status	Due / Closed	Progress Update /Outcome
327	12-May-21	4	Matters Arising	Submit a final version of the workforce plan to a future meeting		OPEN	Aug-21	Awaiting feedback from Scottish Government
326	12-May-21	5	Recovery and Transformation Programme	Make arrangements for copies to be circulated to members of the IJB	GCO	CLOSED	May-21	Circulated to Members
325	12-May-21	8	Revenue Budget Monitoring	The Board noted the projected outturn for 2021 and agreed the approach to the proposed in-year addition to reserves; noted the increase in earmarked reserves and approved the requested virements, and the appropriate budgetary arrangements should now be made.	CFO	CLOSED	May-21	
324	12-May-21	10	HSCP Interim Equalities Outcomes 2021-22	The Board approved the interim equalities outcomes and arrangements should be made for their introduction/implementation	PPPM	CLOSED	May-21	
323	12-May-21	11	HSCP Management Review – Adult and Recovery Services	Continue to implement the new arrangements	CO	CLOSED	May-21	
322	12-May-21	12	Revised IJB Complaints Handling Procedure	The new procedure was noted and arrangements should be made for it to be implemented	CFO	CLOSED	May-21	Customer facing CHP available online
313	17-Mar-21	11	East Renfrewshire Peer Support Service Mental Health and Addictions – Test of Change	Submit a copy of the final evaluation report to a future meeting of the Board	SMRS	OPEN	Aug-21	Added to forward planner - provisionally scheduled for August IJB meeting
297	23-Sep-20	10	East Renfrewshire Alcohol and Drugs Plan 2020-23	Submit a report to a future meeting on the impact of the plan and potential changes following engagement with people with lived experience.	LP (RS)	OPEN	Aug-21	Deferred from May to August 2021 to allow a more comprehensive update. The ADP has begun a piece of work with The Advocacy Project to identify, engage and support individuals to have meaningful involvement and influence in the work of the ADP. It is proposed to report on this work at the August meeting. The IJB received a report in March on peer support, covering mental health and addictions, and how lived experience was reflected in this work.
287	24-Jun-20	11	Draft Unscheduled Care Strategic Commissioning Plan	The Board approved the draft plan and noted further work underway to finalise the plan, including the planned engagement process. Make arrangements to finalise the plan as outlined and submit a final version to a future meeting.	HAHSL	OPEN	Nov-21	Provisionally scheduled for November IJB however deferred as final plan not yet available - Progress on the final plan has been delayed due to current pressures
282	29-Jan-20	4	Minute of meeting of IJB of 27 November 2019.	Provide information to a future meeting on levels of CAMHS access compared to other IJBs.	CO	OPEN	TBA	Deferred due to Covid-19
279	29-Jan-20	5	Rolling Action Log - Individual Budget Update	In the paper to be submitted to a future meeting in respect of Individual Budget Update (242) take account of the technical developments being introduced such as new technical substitutes for sleepovers, which will impact on individual budgets.	HAHSL	OPEN	TBA	March IJB paper on Implementation of Budget Calculator and SDS available online . Report on Overnight Support scheduled for April'20 has been deferred to due to Covid-19
271	27/11/2019	9	Care at Home Improvement and Redesign Programme	Continue to submit progress reports to each meeting until further notice.	CO	OPEN	ONGOING	Next update deferred from June 2021 to August 2021
263	25/09/2019	8	Chief Social Work Officer's Annual Report	Submit a report to a future meeting on how the use of data in Children's Services has led to service improvements.	CSWO	OPEN	TBA	Deferred to due to Covid-19.
244	26/06/2019	10	Financial Framework for the 5-Year Adult Mental Health Services Strategy in GGC	Submit a progress report in due course.	CFO	OPEN	TBA	Added to forward planer - Timing of progress report will be dependent on system wide programme and agreement of all six HSCPs within Greater Glasgow and Clyde

Abbreviations

CCGC Clinical and Care Governance Committee
IJB Integration Joint Board

BSM Business Support Manager
CD Clinical Director

DSM Democratic Service Manager
CCO Governance and Compliance Officer

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PAC
Integration Joint Board
Performance and Audit Committee

CD
CO
CFO
CN
CSWO
Clinical Director
Chief Officer
Chief Finance Officer
Chief Nurse
Chief Social Work Officer

GCO
HAHSL
PPPM
SMRS
LP (RS)
Governance and Compliance Officer
Head of Adult Health and Social Care Localities
Policy, Planning & Performance Manager
Senior Manager, Recovery Services
Lead Planner (Recovery Services)



Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board	
Held on	23 June 2021	
Agenda Item	6	
Title	Local Child Poverty Action Report: Year 3	
Summary		
<p>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 third 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.</p>		
Presented by	Julie Murray, Chief Officer	
Action Required		
<p>The Integration Joint Board is asked to approve and publish the Local Child Poverty Action Report to meet the requirements of the Child Poverty Act 2017.</p>		
Directions	Implications	
<input type="checkbox"/> No Directions Required	<input type="checkbox"/> Finance	<input type="checkbox"/> Risk
<input type="checkbox"/> Directions to East Renfrewshire Council (ERC)	<input type="checkbox"/> Policy	<input type="checkbox"/> Legal
<input type="checkbox"/> Directions to NHS Greater Glasgow and Clyde (NHSGGC)	<input type="checkbox"/> Workforce	<input type="checkbox"/> Infrastructure
<input checked="" type="checkbox"/> Directions to both ERC and NHSGGC	<input checked="" type="checkbox"/> Equalities	<input checked="" type="checkbox"/> Fairer Scotland Duty

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

23 June 2021

Report by Chief Officer

LOCAL CHILD POVERTY ACTION REPORT

PURPOSE OF REPORT

1. The purpose of this report is to present the third East Renfrewshire Local Child Poverty Action Report required under the Child Poverty (Scotland) Act 2017.

RECOMMENDATION

2. The Integration Joint Board is asked to approve and publish the Child Poverty Action Report to meet the requirements of the Child Poverty (Scotland) Act 2017.

BACKGROUND

3. The Child Poverty (Scotland) Act 2017 sets out ambitious targets for the Scottish Government to significantly reduce child poverty in Scotland by 2030. The Act also places a duty on health boards and local authorities to work together to develop, produce and deliver Local Child Poverty Action Reports (LCPARs). The reports are expected to represent a 'step change' in action to address child poverty locally, both describing the current excellent work underway in many areas and outlining plans for new and innovative efforts to tackle child poverty.
4. Tackling child poverty is a goal which is shared by both spheres of government; it cannot be solved by national or local government alone. This report should offer an opportunity to deliver a real focus in our approach to tackling child poverty. This focus will help identify more effective ways of working - for example to reflect on local governance arrangements, to build and strengthen local partnerships, utilise available data and evidence to identify and drive solutions and to involve communities in planning and delivering sustainable responses.
5. The LCPAR is produced in partnership with the health board and have agreed high level approaches which apply across all 6 NHS GGC local authorities. Where specific board level activity or actions are relevant to East Renfrewshire, this is referenced.

REPORT

6. The Council and its community planning partners are committed to addressing the issue of child poverty in East Renfrewshire. It is seen as integral to achieving the vision set out in our Community Plan to create an "attractive thriving place to grow up, work, visit, raise a family and enjoy later life". In relation to early years and vulnerable young people, we want to ensure "all children in East Renfrewshire experience a stable and secure childhood and succeed". The Community Plan contains our Local Outcome Improvement Plan priorities which focus on reducing inequality across groups and communities in East Renfrewshire.

7. The Children's Services Plan "At Our Heart" is one of the main delivery vehicles for the achievement of the children and young people's outcomes within the Local Outcome Improvement Plan. This includes a focus on reducing inequalities and the impact of them on children and families especially those residing in our more deprived communities.
8. In order to meet the requirements under the legislation, the local authority and health boards are required to jointly demonstrate the actions being taken to address the drivers of poverty. These are identified by the Scottish Government as;
 - Increased income from employment
 - Increased income from social security and benefits in kind
 - Reduced cost of living for families
9. There are some key success noted in the report:
 - The launch of the new Scottish Government Parental Employability Support Fund (PESF) programme providing support for parents who face barriers to progressing their careers. This programme has supported parents to gain qualifications, have success in employment and increase in income.
 - Adapted and increased money advice and welfare support services to manage the additional demand. Staff in the Money Advice and Rights Team, Citizens' Advice Bureau and Corporate and Acute contracted agencies quickly adapted to online and telephone support to ensure families gained crucial help in a turbulent time.
 - The extensive free and low-cost food provision to families throughout the pandemic, including 1,300 weekly free school meal deliveries, around 4,000 household food parcels home delivered, provision of over £4,000 of supermarket vouchers, provision of various shopping services and establishing a new Food Larder Network.
 - Increased digital access to low income families with over 1,500 devices issues to those in need through both national and local provision.
 - Provision of School Hub places for all vulnerable children, including those experiencing poverty, throughout the school closure periods.
10. There are some key areas for future action, including new demands as a result of Covid-19. These include:
 - Improving availability, access to and uptake of good quality in-work support programmes
 - Improved parental access to benefits and income maximisation information and advice, including new referral pathways
 - Reducing energy costs for vulnerable families
 - Reducing cost to families of school attendance and participation
11. It is important to acknowledge that at the time of producing this report, the situation with the Covid-19 pandemic is still fluctuating and we cannot measure the full scale of the impact which this has had and will have on child poverty. Our action planning for 2021-2022 therefore is subject to change and development. Similarly, many of the actions taken during 2020-2021 were reactive measures which we did not anticipate or document in the previous LCPAR.

CONSULTATION AND PARTNERSHIP WORKING

12. The Child Poverty Oversight Group has responsibility for driving the actions and has identified a lead for each of the three areas recognised as the drivers of poverty. Context and evidence of actions which impact on one or more of these drivers was gathered from a range of partners from across the CPP as well as with colleagues at NHS Greater Glasgow and Clyde.

IMPLICATIONS OF THE PROPOSALS

Finance

13. There has been no specific monetary resource allocated to this plan; all current action is delivered within existing, mainstream budgets

Equalities

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

Fairer Scotland Duty

15. The integral aim of the LCPAR is to reduce socio-economic inequality amongst families in East Renfrewshire.

DIRECTIONS

16. This is primarily a progress and performance update, therefore there are no particular implications in terms of staffing, property, legal, IT, equalities or sustainability

CONCLUSIONS

17. This report details the actions taken during 2020-2021 to support families in, or at risk of poverty and the intended 2021-2022 actions. However we recognise that there will be challenging times ahead and Covid-19 is likely to have an impact on profile of poverty, including child poverty, in future. Poverty should be considered within all Covid-19 recovery and renewal planning and actions taken will be reflected in the next annual Local Child Poverty Action Report.

RECOMMENDATIONS

The Integration Joint Board is recommended to approve and publish the Local Child Poverty Action Report to meet the requirements of the Child Poverty (Scotland) Act 2017.

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May 2021

BACKGROUND PAPERS

[Local Child Poverty Action Report 2019-2020](#)

[East Renfrewshire Community Plan](#)

EAST RENFREWSHIRE LOCAL CHILD
POVERTY ACTION REPORT:
2020-2021
(YEAR 3)

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Introduction

The last year has been like no other we have experienced. COVID-19 has had an impact on all of our lives and families across the country have seen change in their circumstances as a result of the pandemic. Home learning and blended learning, reduced childcare options, parental furlough and job losses, increased digital demand have all created new and additional challenges for families and we cannot underestimate this. Those families who were experiencing poverty before COVID-19 are likely to have seen this intensified over the past year. In addition, many families who were 'just about managing' may have fallen into poverty due to their changing circumstances.

Whilst East Renfrewshire has one of the lowest levels of child poverty in Scotland, it is estimated there are still around 3,000 of our children and young people living in low income families; that is 16% of all children and young people living in the area.

We want all children in East Renfrewshire to experience a stable and secure childhood and succeed. In order to do this we need to tackle the root causes of poverty and reduce the impact of poverty, and this is more pertinent than ever at this time.

The Community Planning Partnership plays a key role in tackling poverty; with partner organisations working together to identify need and take actions. In the response to the pandemic, we have seen the strength of partnership working and this strength is also reflected in our actions to tackle poverty.

The purpose of this report is to outline the actions which have taken place over the past year to tackle the drivers of poverty, with an understanding that many of these have been crisis-response, reactive activities. The report also presents a picture of activities planned over the next year and beyond. These are shaped by lived experience and data we have at this time but we recognise that this will continue to grow and develop over time and as we recover and renew.

Signed Tony Buchanan, CPP Chair

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Context

The Scottish Government's first Child Poverty Delivery Plan 2018-22, [*Every Child, Every Chance*](#), was produced in response to the Child Poverty (Scotland) Act 2017. The Act places a duty on local authorities and health boards to work together to report annually on what we are doing to tackle child poverty with a sharp focus on the three key drivers of poverty:

- Income from employment
- Income from social security and benefits in kind
- Costs of living

Income from employment includes bringing better jobs to the area, encouraging the payment of the Living Wage across the local area, providing in-work support and offering employment support programmes.

Income from social security includes maximising uptake of benefits, automating systems where possible to maximise access to benefit, and improving access to information and advice about benefits.

Reduced costs of living includes increasing availability of affordable housing, providing advice on how to minimise costs for energy and food, working to reduce the cost of the school day, supporting childcare provision and exploring cost effective transport opportunities.

The national delivery plan also identifies a number of priority groups where there is strong evidence that the risk of poverty is higher, specifically:

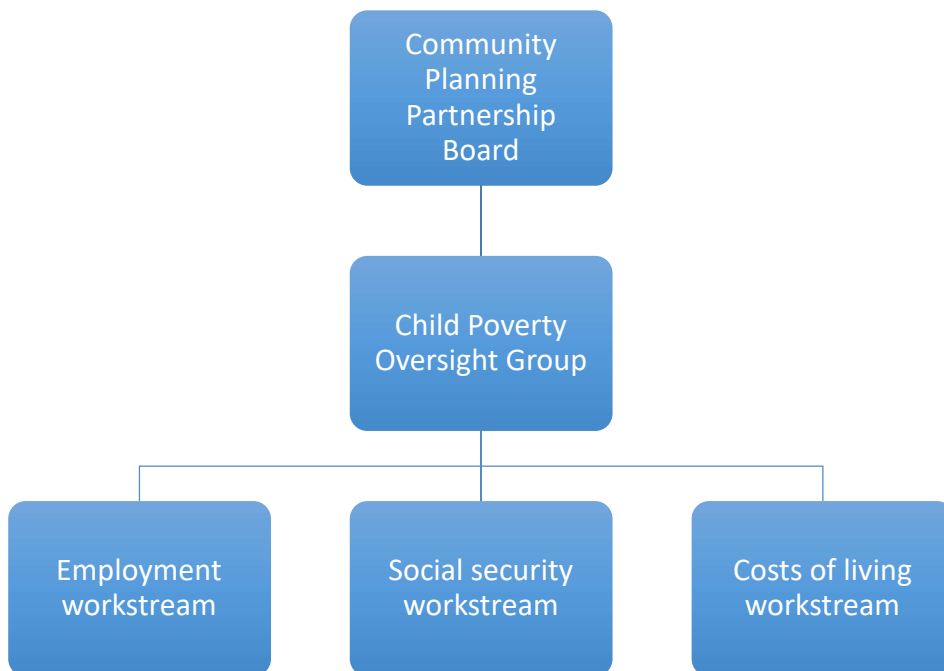
- Lone parents
- Families where a member of the household is disabled
- Families with 3 or more children
- Minority ethnic families
- Families where the youngest child is under 1
- Mothers aged under 25

Where possible, actions to tackle the drivers of poverty should give particular consideration to these priority groups.

In East Renfrewshire, we continue to be committed to addressing the issue of child poverty. It is seen as integral to achieving the vision set out in our Community Plan to create an “attractive thriving place to grow up, work, visit, raise a family and enjoy later life”. The Community Plan contains our Local Outcome Improvement Plan priorities which are focused on reducing inequality across groups and communities in East Renfrewshire. Our locality planning approach also seeks to reduce the inequalities in outcomes between deprived communities and the rest of East Renfrewshire; this is more relevant now than ever given our renewed focus on recovery of our services and building back better and fairer.

Governance

The Community Planning Partnership is responsible overall for the Local Child Poverty Action Report and is supported by a Child Poverty Oversight Group. The oversight group has responsibility for creating a strategic environment which cultivates step-change in relation to tackling child poverty. The oversight group is jointly chaired by the council's Deputy Chief Executive and the Health and Social Care Partnership Chief Officer, and includes senior representatives from Education, HSCP, Employability, Money Advice, Environment Services, the Third Sector Interface and the Health Board. The oversight group includes three Workstream Leads who each manage a workstream group aligned to the each of the drivers of poverty. The workstream groups develop and deliver on critical activities to encourage step-change and identify critical indicators to measure progress.



Lived Experience

As in previous years, we have collected and used lived experience feedback to understand need and direct our actions to tackle poverty. The pandemic has meant that feedback has been collected somewhat differently this year as we have not had the same opportunities for face-to-face engagement. This year, we have gathered lived experience feedback through relevant frontline workers, parental feedback through schools, adult learning evaluations and a number of online surveys.

We held focus groups and interviews with frontline workers including employees from the Money Advice and Rights Team and the Citizens Advice Bureau, who have worked with residents throughout the COVID-19 pandemic. These are the staff who are working with residents in poverty on a regular

basis and are able to provide real insight into the issues and concerns that families have experienced over the last year.

The Education Department and individual schools worked directly with parents throughout the pandemic around home-learning, access to Hub places and all other issues relating to the welfare of pupils. Throughout this, parental feedback has been included and reported to the Education Committee. Where this feedback is relevant to poverty, we have used it to shape our actions and have included it in this report.

East Renfrewshire Council have conducted a number of online surveys with the wider community, including a Citizen's Panel survey and an Equality survey. Findings included some poverty-related issues which, again has helped inform action and planning and has been included in this report where relevant.

The Impacts of the COVID-19 Pandemic

COVID-19 has clearly had a significant impact on our residents and staff over this past year, including the poverty-related work.

Much of the activity during 2020/2021 has been focussed on crisis response and emergency need. The result of this is twofold; firstly, there are activities included in this report which were not identified in our previous report as future actions, and secondly, there are actions which were planned but have subsequently been delayed due to resources being redeployed or reprioritised.

The pandemic has also changed the profile of need in terms of poverty. Those who were previously experiencing poverty are likely to have felt this become more entrenched and many of those who were previously 'just about managing' have been pushed into poverty. This continues to be a precarious balance for many who are on furlough, have a different working pattern or a reduced support network. It is likely that this situation will continue to change over the forthcoming year and beyond.

All three drivers of poverty have been impacted by COVID-19;

- Employment opportunities have been limited as particular businesses or whole sectors have closed or offered a reduced service. Many parents have found themselves working from home and/or with reduced childcare options to allow them to attend work.
- Demand on Social Security has increased nationwide and many parents have found themselves applying for support for the first time. This has brought challenges for the applicants in navigating new systems, and the providers in managing the increased demand.
- Changes in routine and circumstances has seen increase costs to many families for household essentials including food, fuel and digital access.

In addition, there has been an impact on the mental health and wellbeing of parents and families. Many families report increased stress and anxiety as well as feelings of loneliness and isolation as a result of lockdown measures.

Measures of progress

Whilst the overall level of child poverty will continue to provide a high level view of the profile of the area, we intend to monitor progress at a local level through a number of critical indicators relating to the three drivers of poverty. These are as follows:

Indicator	Measure and source	Previous data	Current data	Comments
OVERALL				
Children living in poverty	% age of children living in poverty (after housing costs) in East Renfrewshire: End Child Poverty 2019	16%	16%	The overall level of child poverty in East Renfrewshire remains steady from last year however the data-delay means that these figures relate to pre-pandemic.
INCOME FROM EMPLOYMENT				
Real Living Wage employers in East Renfrewshire	Number of real Living Wage accredited employers: Living Wage Scotland 2021	11	16	This is mixed picture in terms of progress to increase income from employment; Children and young people participation levels remain high which is positive. The number of Real Living Wage accredited employers has increased which is a great success, particularly during such a difficult year for employers. However, there has been a significant rise in the unemployment level. This reflects the picture nationally.
Working age unemployment level	%age of economically inactive residents who want a job: NOMIS Jan-Dec 2020	18.1%	24.7%	
Children and young people participation level	%age of 16-19 year olds participating in learning, training or employment: SDS Annual Participation Measure Report 2019	96.9%	96.7%	
INCOME FROM SOCIAL SECURITY AND INCOME MAXIMISATION				
Free School Meal uptake at Primary School	%age uptake of free school meals at primary school (P1-P7): School healthy living survey 2020	87.9%	87.7%	The uptake of free school meals has remained steady, but we have seen an increase in demand on financial wellbeing advice. This is due to many changing circumstances as a result of COVID-19 and reflects the national picture.
Access to financial wellbeing advice	Number of families accessing MART financial wellbeing advice: Local data	997	1318	
COSTS OF LIVING				
Fuel poverty	Fuel poverty: Scottish House Condition Survey	16%	13%	The uptake of early learning and childcare remains high and the level of fuel poverty remains low, which is positive. However, the data-delay means that the fuel poverty figure is pre-pandemic so it could be expected this this might increase in future.
Uptake of funded early learning and childcare entitlement	%age of 3 & 4 year olds registered for funded early learning and childcare Dec 2020: Scottish Government Schools Statistics	93%	95%	

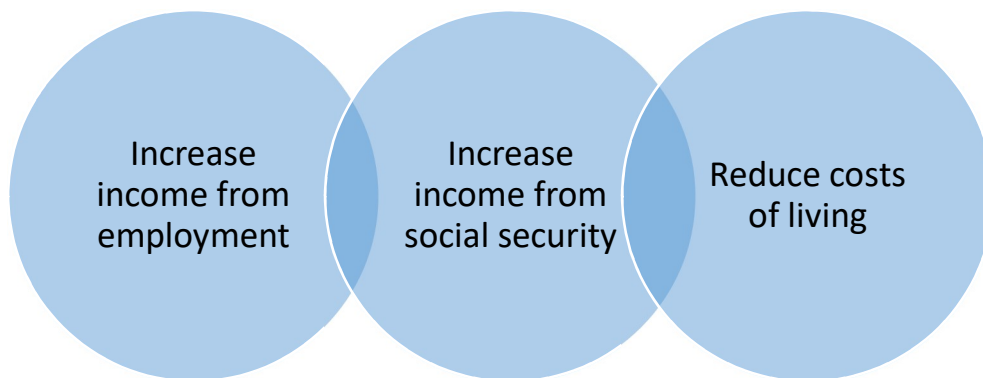
The format of our report

This report starts with a profile of East Renfrewshire highlighting key data which has been used to shape the plan.

We have organised the core of our report into three chapters looking at each of the three key poverty drivers:

- Income from employment
- Income from social security
- Costs of living

For each we have outlined our progress and achievements in 2020-21 including case studies where relevant to evidence the real impacts for families. We then present our plans for further action over the year ahead (2021-22).



PROFILE OF EAST RENFREWSHIRE

OVERALL

East Renfrewshire has a population over

95,500



and this is continually growing and is expected to grow at an average rate of around 600 people a year until 2028

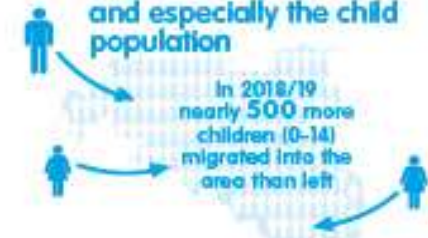
East Renfrewshire has the highest proportion of children in any local authority in Scotland with

19,525 individuals aged between 0 and 15 years



One in every five people living in east Renfrewshire is a child.

Migration has a large impact on the population of East Renfrewshire and especially the child population



In 2018/19 nearly 500 more children (0-14) migrated into the area than left

The proportion of children living in poverty in East Renfrewshire is the (joint) lowest in Scotland



There are around 3,000 children living in poverty in east Renfrewshire, which amounts to 16% of our children

There are fewer young mothers in East Renfrewshire than the Scottish average



7% of all births in east Renfrewshire were to mothers under the age of 25, compared to 17% in Scotland

The number of lone parent households is predicted to increase in the coming years



There are around 2,400 lone parent households in east Ren currently

It is projected that 6% of households will be lone parents by 2026.

EMPLOYMENT

Those **LIVING** in East Renfrewshire receive the **HIGHEST** average weekly pay in Scotland ▲

The average weekly full time pay is



£815

and the average weekly part time pay is £257

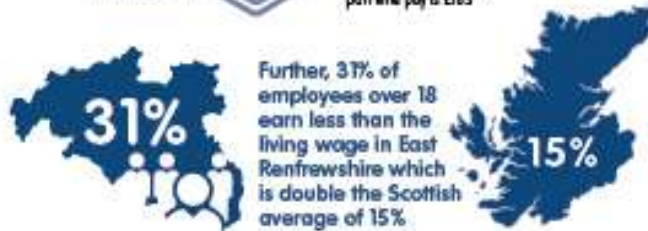
However, those **WORKING** in East Renfrewshire receive the **LOWEST** average weekly pay in Scotland ▼

The average weekly full time pay is



£487

and the average weekly part time pay is £165



14.3% of households in East Renfrewshire are 'workless' meaning there is no individual over the age of 16 in the household who is employed

Over a third of children in East Renfrewshire come from 'mixed households'

This means a household contains at least one person aged 16 to 64, where at least one person aged 16 and over is in employment and at least one other is either unemployed or inactive



East Renfrewshire remains a generally economically active local authority. However, over the past year we have seen a rise in unemployment, like the rest of the country

77%

of residents of working age are economically active



1,600

There are 1,600 working age people who are unemployed which is an increase of approximately 400 people compared to the previous year

SOCIAL SECURITY/BENEFITS



East Renfrewshire residents are less likely than the Scottish average to receive income from social security and benefits



Nearly 2070 individuals are claiming for out-of-work benefits

This is approximately 4% which is lower than the Scottish average of 6%. 410 of these claimants were between the ages of 16 and 34

7% of all primary pupils from P4 to P7 are registered for free school meals



7% of secondary pupils are registered for free school meals



There are 15,425 children in families that are registered for child benefit, which equates to 79% of all children in East Renfrewshire

This is among the lowest proportion when compared to other Scottish local authorities



430 young people receive an Education Maintenance Allowance



East Renfrewshire has a £100 school uniform grant

COSTS OF LIVING



The costs of living in East Renfrewshire are higher than average, particularly in relation to housing costs

The average weekly local authority rent is

£76.86



The average property price in East Renfrewshire in 2021 has increased by 11.5% since early 2020 to £250,935



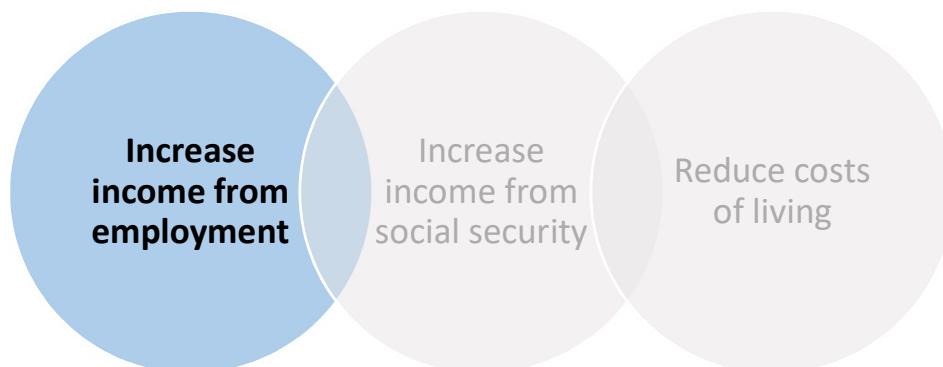
Nearly three quarters of East Renfrewshire's houses are classified as being Council Tax band D or above, compared to the Scottish average of 41%

On average art, drama and sports activities, cost

£45.50
for a three month class



Chapter 1: Income from employment



Workstream

The East Renfrewshire Local Employability Partnership (LEP) is leading on this workstream and includes representatives from East Renfrewshire Council's Work EastRen team, Skills Development Scotland, Education including Adult Learning, Scottish Enterprise, Mental Health services, Department for Work and Pensions, Money Advice and Rights Team and East Renfrewshire Chamber of Commerce.

Lived experience feedback

Employment related issues were a key topic during our engagement and frontline staff identified several issues that have been preventing parents either from gaining employment, or securing better quality jobs that prevent them from experiencing in-work poverty.

Impact on benefit entitlement. One of the most common barriers for parents who want to progress or change their careers is the effect that this could have on their income from social security and different entitlements such as free school meals. Frontline staff noted that many of their clients are apprehensive to retrain and better their careers as they are worried they will be financially worse off overall.

Cost and availability of childcare. Frontline staff noted that the biggest restraint parents have when trying to increase their income from employment is the availability of affordable childcare. Many parents struggle to work before their child is entitled to a funded early years and childcare place (3 years or eligible 2 year olds) due to the cost or the opening hours of facilities. Parents have also expressed worry about the cost of travelling not only to and from work, but also to childcare too. This is a make-or-break factor for parents deciding to apply for a job or take on more hours at work to increase their income.

Access to appropriate information. Many parents had a lack of information or had misinformation about changing employment. Many did not know how to go about retraining to improve their employment prospects and others worried about the costs associated with this. Frontline staff said

that while many of the clients they support are self-sufficient and have clear goals, they require assistance in understanding the benefits and process of looking to improve their employment income. Also, lack of confidence using technology makes it harder for people to apply for jobs/do training/apply for further education, meaning the poverty cycle continues.

The Impact of Coronavirus. Coronavirus has had a huge impact on employment income for parents, including some losing their jobs and many being placed on furlough for long periods of time. Frontline staff said that this has led to a significant increase in the number of families claiming in-employment benefits and looking for additional funding assistance.

Lockdown restrictions have meant that parents who have been seeking to change careers into more sustainable and financially viable roles have not been able to gain the experience that they need to be considered for these jobs. For example, voluntary work experience placements have not been able to go ahead, leading parents to be remain in low-income jobs or unemployed.

Frontline staff the Money Advice and Rights Team noted that the lack of engagement with families due to lockdown has been challenging. Staff have not been able to physically go out into communities and speak to parents therefore services are not reaching everyone who could benefit from their help. This lack of engagement has reduced the opportunity for early intervention for those facing financial concerns and increased the instance of families requiring support when their issues become severe or critical. Staff

Action taken

During 2020/2021 the Community Planning Partners across East Renfrewshire have taken action to increase income from employment. This includes;

East Renfrewshire Council utilising it's position as employer and procurer

East Renfrewshire Council achieved Real Living Wage Accreditation in November 2020. We also reviewed our procurement process and have now added a Fair Work & Living Wage question into our evaluations to ensure that contract bidders are aware of this issue and consider these areas.

We have encouraged companies to provide opportunities to low-income families by having increased Community Benefits points available for those helping people from priority backgrounds. We have included Community Benefit clauses which are now evaluated in all appropriate tender exercises and procedure reviews to now include a Community Wish List.

At a Health Board level, NHS Greater Glasgow and Clyde procurement team are following the 'Once for All Scotland' procurement approach which includes a new national procurement portal for community benefits. There has been engagement with Public Health Scotland and NHSGGC Procurement to explore how national developments can support a local aim to enable more appropriate community benefits.

Encouraging more local businesses to become Real Living Wage accredited

East Renfrewshire Council, East Renfrewshire Culture and Leisure Trust and NHS Greater Glasgow and Clyde have all become accredited Real Living Wage employers during 2020-2021.

ERC's Economic Development team, Business Gateway East Renfrewshire and local employability partners continued to work collaboratively to encourage employers to adopt Fair Work practices and become Real Living Wage accredited by launching a 'Get Ready for Living Wage Week' in October 2020. We have seen an increase in the number of RLW accredited employers locally in the past year; from 11 to 16.

Case Study: Real Living Wage Employer

Elmwood Nursery is a privately owned nursery in Newton Mearns and was established in 2002 by new mother Denise Bunis. Since then, Elmwood has expanded over two floors, gained an additional building and now cares for 87 children from a wide variety of backgrounds. In 2018, Denise sold her business to an Icelandic nursery group with a focus on democracy, creativity and gender equality and began the journey to become a Living Wage Employer.

Elmwood Nursery became a Real Living Wage employer in September 2020 because they wanted to increase payment to all staff. By paying all 30 of their staff the RLW, Elmwood can increase staff retention and motivation in work. Therefore the staff get to know the children more in-depth and can care for them on a more personalised level. This will help to improve the mental stimulation and wellbeing of the children.

Staff no longer have to worry about their wages and can instead focus on caring for the children in their care. By paying the RLW, Elmwood Nursery is improving parents' income from employment and preventing in-work poverty for multiple families in East Renfrewshire. They said they found the application process "simple and straightforward" and said they "recognise the benefit it has had for all staff".

Our Business Development grant application requires organisations to demonstrate how they have adopted Fair Work Practices. Work EastRen have also adopted a Fair Work strategy by not advertising or putting clients forward for any zero-hour contracts, as well as working closely with clients to access RLW jobs.

The Department for Work and Pensions have launched their Kickstart programme, which was for the purpose of RLW accreditation, meaning that all directly employed staff aged 18+ should be paid at least the Real Living Wage, regardless if part of their wage is funded through employability schemes.

NHSGGC procurement team conducted an extensive exercise and found 11 contractors are not paying the real living wage (spend of £1.196m) and 12 companies assumed not paying the real living wage (spend of £622k). A process is being put in place to encourage payment of real living wage.

Increased support for parents to remain active in the workplace, train and gain progression

Work EastRen and MART teams launched the new Scottish Government Parental Employability Support Fund (PESF) programme, providing support for parents who face barriers to progressing their careers. This support includes help to gain a qualification; improving skills or work experience; money advice and motivational support. Eligible parents are also supported to access free early learning and childcare places.

A full time PESF Employability Officer has been recruited and is focusing on promoting and providing this programme to parents in priority groups. In addition a part time support officer has been

employed in MART to assist parents with financial wellbeing, debt and Social Security. In partnership with DWP, Skills Development Scotland and the Third Sector interface, the council has developed a model which will address all barriers to career progression including lack of skills, experience, health support, money advice and access to childcare.

Between September 2020 and March 2021, there were 19 registrations on the PESF programme. Of these:

- 3 parents have gained qualifications
- 3 have had successful employment outcomes
- 7 have had an increase in income, either from employment or benefit check

Case Study: Parental Employability Support

The Problem

Sophie approached the Parental Employability Support advisor looking to change careers and improve her income from employment. She is a single parent with a daughter who has additional support needs. She had always worked in retail or hospitality, but the hours weren't suitable for the needs of her daughter and she had always dreamed of working in care. However, she had been charged with minor assault for a mistake she made 10 years ago, when she was only 16. Sophie always thought this would prevent her from achieving her goal to become a care worker.

The Solution

The team spoke with Sophie and got a better understanding of her experience and overall goals for employment. They supported and paid for her to get a PVG check, a requirement for care workers. Although her assault charge was flagged up on the application, it stated that this would not prevent her from working with vulnerable people and she would be able to achieve her dream. The PES advisor helped to source voluntary work experience in a care home for Sophie, which led to her being offered a full-time, paid position.

The Impact

With the advisor and programmes support, Sophie now has the steady and fulfilling career she always wanted. She gets to spend more time with her daughter and her improved income now means they can do more activities together as a family. The team has made her feel confident in seeking employment and she no longer has the anxiety of her past mistakes preventing her from bettering her career.

Adult Learning Services also supported 23 parents to gain SQA accredited qualifications working in partnership with Clyde College and West College Scotland, helping them towards their employability goals. Courses included; ESOL, IT, Early Years & Childcare and Wellbeing.

Case Studies: Adult Learning Services

One parent, recently made redundant, needed to learn new IT skills to be able to apply for promotion in a new job. He has now completed several online IT courses and was really pleased at how fast he progressed and became more confident.

Another parent, who first contacted our service to start to look at career/job opportunities, has recently started work part-time as well as taking the first steps into learning bookkeeping by doing a free introductory course with the Open University.

Improved availability, access to and uptake of good quality in-work support programmes

The Local Employability Partnership (LEP) regularly review what employability services are being delivered within East Renfrewshire to identify gaps, avoid duplication, meet resident needs and secure funding.

One recent example is Scottish Youth Guarantee programme which was announced by the Scottish Government in September 2021. The focus of the Government is moving young people into good jobs at a time when they are most vulnerable in a tough labour market that has seen impacts to the sectors most likely to employ young people (such as tourism, hospitality, retail and leisure). The programme aims to ensure no young person is left behind; every young person aged between 16 and 24 will be guaranteed an opportunity at university or college, an apprenticeship programme, employment including work experience, or participating in a formal volunteering programme.

The LEP put out a call for project proposals to all employability partners in East Renfrewshire. As well as meeting the programme criteria, the Partnership were also keen to help identify any gaps in provision within the area. One of the projects funded was via IncludeMe2 who are now providing much needed employability support to those young people with additional support needs. The project provides a range of individual, small group approaches, to help develop the skills, confidence, awareness and understanding to reach a positive destination in the young person's employment journey.

We continue to deliver the Scottish Government's No One Left Behind programme. The programme covers a wide range of support to those residents aged 16+ years with a focus on employed and unemployed parents; parents with disabilities; pre-employment support for young parents; pre-employment support for parents accessing funded Early Learning and Childcare and support for 16–26-year-olds via the Scottish Youth Guarantee programme. Since September 2020 the Parental Employability Support Fund programme has worked with 22 parents: 3 have secured full-time employment; 1 has employment outcomes; 1 has had an increase in their hourly rate; 4 have gained work related qualifications; 2 have undertaken volunteering placements. Other clients are working towards things such as SVQ's, applying for teacher training and setting up own their own businesses.

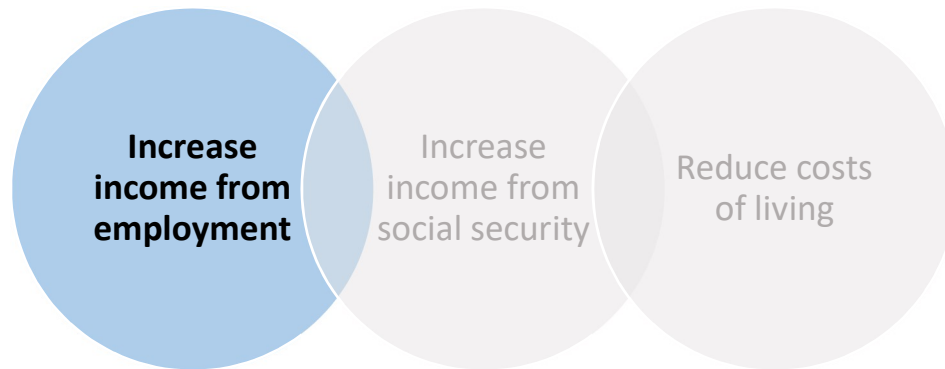
Most clients have also accessed Money Advice and Rights support and have gained financially with either change to their benefits, budgeting or receiving grants they didn't know they were eligible for.

Partners have developed a new pathway for 16–24-year-olds via the Scottish Youth Guarantee programme in 2020-21, which will see specialist provision being delivered in the area for this age group including: additional support needs; care experienced young people; creation of 15 MAs; into work schemes.

NHSGGC has provided modern apprenticeship programmes and employability outreach programmes to schools and colleges, with a target group including young parents. Data relating to uptake and successes of these is not yet available but will be included in future reports.

The NHS GGC Widening Access to Employment Strategy Academy implementation model changed due to the pandemic. The Academy go live date was delayed to October 2020, the programme was amended to delivery to online activity only and placement activity was withdrawn. The November 2020 programme ran similarly. In terms of child poverty, the number of parents accessing employability programmes going on to sustained employment will be measured now starting 2021.

Future Actions 2021-2022



These actions are as accurate as possible at the time of writing. However, it is important to remember that actions will be subject to review as community planning partners further establish their recovery and renewal plans and once the impact of COVID-19 on the economy, jobs and income is more fully understood and priorities ahead are reshaped.

<p>Change required: Encouraging more local businesses to become real Living Wage accredited</p>	<p>What we will do: Establish the East Renfrewshire Living Wage Action Group to encourage and support new and existing employers, including NHS GGC, to work towards real Living Wage accreditation. Lead: Local Employability Partnership Resources: Within existing resources Target Groups: Low income families</p>	<p>How we will measure progress:</p> <ul style="list-style-type: none"> • Increased number of accredited real Living Wage employers. • Increased number of local employers working towards real Living Wage accreditation.
<p>Change required: Increased support for in-work parents to remain active in the workplace, train and gain progression</p>	<p>What we will do: Implement the East Renfrewshire local model of the Parental Employability Support programme Lead: Work East Ren and delivered in partnership with Money Advice and Education Department. Resources: £66,000 PES per annum plus £26,000 PES Boost. To support: 1 FTE Employability Officer and 0.5 FTE Money Advice Officer, dedicated vocational training budget Target Groups: Lone parents, person with a disability, 3+ children, ethnic minorities, youngest child <1, parents aged <25</p>	<p>How we will measure progress:</p> <ul style="list-style-type: none"> • Number of participants achieving qualification, increasing skills • Number of participants achieving an increase in income • Number of employed participants gaining new employment or self-employment • Number of participants sustaining employment or self-employment

		13/26/52 weeks after new employment start date
Change required: Improved availability, access to and uptake of good quality in-work support programmes being delivered in East Renfrewshire	<p>What we will do: Promotion of in-work support programmes to low income families particular those ‘hardest to reach’, through a range of engagement methods.</p> <p>Lead: Local Employability Partnership</p> <p>Resources: Within existing resources</p> <p>Target Groups: Women, lone parents, person with a disability, 3+ children, ethnic minorities, youngest child <1, parents aged <25</p>	<p>How we will measure progress:</p> <ul style="list-style-type: none"> • Increased engagement with hardest to reach

As part of Fairer East Ren (our Local Improvement Outcome Plan), we have a specific plan to ensure residents have the right skills, learning opportunities and confidence to secure and sustain work.

Chapter 2: Income from Social Security

Workstream

The East Renfrewshire Social Security working group is leading on this workstream. This is a partnership group with representatives from the council Revenues and Benefits department, the Money Advice and Rights Team, Department for Work and Pensions/Job Centre Plus, adult learning, Social Security Scotland Agency, the council's housing team, Citizens Advice Bureau and a local Housing Association.

Lived experience

Our engagement with frontline staff was crucial in identifying the challenges and changes families have faced in the last year in terms of social security support.

Change in demographic. A change in the profile of parents starting to claim social security benefits was one of the most recurring issues staff talked about. Due to lockdown and businesses being forced to close (either temporarily or permanently) staff all recognised that parents who started claiming benefits in the last year were often more self-sufficient and required less assistance than those who typically began to claim in years before.

Parents who were business owners looking for assistance were a particular demographic group that required support in accessing the correct grants and benefits. Although these parents often had savings, for many these ran out quickly and as the pandemic continued, they started to rely on income from social security more. Staff therefore recognised that this lockdown was a catalyst for poverty for those who were 'just getting by' before.

Anxiety of parents was also a big issue, in terms of worrying about what is going to happen when the extra government assistance, which is in place due COVID-19, is no longer available. Staff were also anxious about this and were worried about their capacity or ability to be able to deal with this likely increase in demand of support. The staff we engaged with all believed that income from social security would not be a key issue until later on in 2021, when government assistance decreases and job losses are likely to increase.

Action taken

During 2020/2021 the Community Planning Partners across East Renfrewshire have taken action to increase income from social security, including;

All parents involved in the Parental Employability Support Fund are supported to calculate and understand any impacts on benefit entitlement

Since September 2020, 17 parents on the Parental Employability Support programme were assisted by the Money Advice and Rights Team PESF support officer. All of these clients gained crucial advice which has helped them all maximise their income both from employment and also Social Security. MART's partnership work with organisations also resulted in an additional £4,000 of Social Security payments being gained for families through their establishment of an extensive referral network.

Case Study: Parental Employability Support- Money Advice

The Problem

As a full time employed single mother Sally has always been able to juggle responsibilities and keep on top of things. In the midst of the pandemic and during young Kai's terrible two's, Sally decided it was time to go part-time to make balancing everything a bit easier. However, she began to worry about how that would affect her benefits, also Sally's boss threatened that she might need to go full time again soon.

The Solution

Sally joined the PES program aiming to keep her up-to-speed about her employment options and financial situation. Money advisor Steven helped Sally complete a full benefit calculation to ensure she was on the correct benefits and he explained how various career decisions would affect these benefits ranging from not working, right up to full time. Steven and Sally spoke almost every week for 6 weeks making sure Sally fully understood her options and dealing with any bumps in the road including one month where Sally's benefits were less than normal.

In addition to reassuring Sally and making sure she had the information required to make lasting change, Steven and the team provided additional support. Due to the difficulties Sally faced through COVID-19 related issues they made sure she had the opportunity to really bounce back. One way they managed to do this was to engage with the government and manage an application to an energy bill relief fund. Sally was awarded £121 off her energy bills, enough to ensure there was one less thing to worry about while Sally takes her next steps forward with Kai.

The Impact

Sally is now working with the employability side of the project to move into a new career with all the knowledge, understanding and support she might need during the transition. Sally said that the support had meant that she is now better able to focus at work now that she now had a better understanding of options available. Sally also felt that she and Kai had a more positive work/life balance, reduced stress and most importantly, able to spend more quality time together.

Feedback

Sally said, "Brilliant service! Just a quick message to say I noticed the gas/electric payment went through to my [energy companies] account fine. Thank you SO much for applying for that for me, it has helped very much".

Improved parental access to benefits and income maximisation information and advice

Benefits and income maximisation information and advice has been well-publicised through a variety of partner websites and social media posts throughout the year. In addition, the details of the Money Advice Team have been shared via schools to all parents on several separate occasions throughout past year and hard copy leaflets were added to food parcels delivered as part of the Free School Meal provision and from the Humanitarian Food Hub to support low-income households. In response to the increased demand for benefits advice from first-time claimants, the Money Advice and Rights Team produced a 'Benefits Quick Guide' and shared this to parents via schools.

During 2020-21, the Money Advice and Rights Team saw an increase in all the priority groups seeking advice from the service, except from larger families. There was a 35% increase in families with a child under 1 in the household a 17% increase in lone parent families and a 400% increase in parents/guardians 25 and under seeking advice from the service.

Overall, MART's services saw a 6% increase in enquiries. 1,318 of enquiries were from families with children and much of the year's provision was via food vouchers, advice and information and access to services. This means these families have gained crucial help in a turbulent time, with MART playing a key role not only in immediate relief, but also long-term recovery by helping these families maximise their income from social security.

COVID-19 significantly impacted on the work of the NHS Greater Glasgow and Clyde's Corporate and Acute services. As the pandemic hit, staff worked quickly with contracted money advice services to ensure face to face services changed to phone and online appointments systems with a communications plan accompanying this. The provision of emergency food packages for those in need being discharged from hospital was extended, which included maternity settings (data available June 2021). Corporate and Acute leads collated on issues requiring potential regional and national escalation (e.g. evictions for pregnant women and families with a small child / new baby). A template on issues emerging across NHSGGC (e.g. emergency food provision) was shared on the national child poverty knowledge hub.

Whilst this data is not available at an East Renfrewshire level, across the NHS Greater Glasgow and Clyde area, during 2020-2021 it is estimated 19,300 NHSGGC patients were referred to money advice services with a financial gain of £56million. 62% were parents, 38% of all referrals are BAME patients community (portion asylum seekers and refugees), 62% with a disability and 83% from SIMD one and two. Of this overall financial gain;

- £6.4 million was gained for clients in community NHS children and families services (3,954 referrals)
- £1.6 million was gained for children's hospital clients (329 referrals)
- £6.7 million was gained for long term conditions settings (3,151 referrals, a large proportion who are parents)
- £2.3 million from the primary care embedded money advice service (496 referrals (55% - female; 83% White Scottish; 12% only working full time; total 25% parents with 12% being lone parents).
- £2.7 million was gained for the Special Needs In Pregnancy Service (187 referrals)
- £182,322 was gained for the neonatal support fund (932 applications)
- 305 emergency food packages were given out on discharge from hospital

Improved poverty awareness and use of referral processes within frontline staff

During the pandemic the focus was on poverty awareness for frontline staff in Early Years Services, community nurses, midwives and health visitors. The Money Advice and Rights Team provided 'tool box talks' to groups, established referral networks and provided guides and materials to support anti-poverty work.

Bespoke training has been developed and delivered to staff in Housing Services and Customer First. Further specialist training courses have been delivered to key NHS teams and wider partners. These courses include:

- General Poverty Awareness
- Benefits for Younger People
- Benefits for Working Age

We cannot provide details of impact in terms of financial gain at this stage but hope to see this in future reports.

NHS Greater Glasgow and Clyde developed a training programme for midwives in antenatal clinics and maternity centres. This was intended to be delivered face-to-face but once the pandemic hit, East Renfrewshire piloted this as virtual training. Training was provided to the midwives and Family Nurse Partnership staff. At this time it is too early to measure what impact this has had.

An NHSGGC review of Best Start grant uptake showed underutilisation. Quality improvement work is planned for 2021/2022 to ensure financial inclusion/routine enquiry within Maternity and Health Visiting pathways.

Information sources for early year's staff have been developed including a staff Facebook page, implemented in December 2020. New national materials for the early years' workforce were distributed, with corporate communication teams joining Social Security Scotland, Department of Work and Pensions and Scottish Government poverty / child poverty communications work. All information was shared on the staff Facebook page alongside video testimonials from a range of corporate staff, service managers and frontline staff.

Increased financial wellbeing support capacity to meet anticipated increased resident demand following the COVID-19 pandemic

The Money Advice and Rights Team faced an increase in social security enquiries relating to COVID-19 and recruited temporary additional staff to manage this. This resulted in the team handling 4,089 enquiries and generating more than £5m of income for local residents.

Case Study: Newly Self-Employed Hardship Fund

The Problem

Evie is a self-employed hairdresser who has been unable to work throughout the pandemic, resulting in a loss of income for her. She is also heavily pregnant and lives at home with her partner full time. Evie had contacted Citizen's Advice looking for assistance with a benefit check to find out if there was any entitlement to make a claim for anything. A benefit check was completed but unfortunately due to her partner's earnings from work they had no benefit entitlement.

The Solution

Evie was assisted with looking at any business grants that she may have had any entitlement to and was advised of the "*Newly Self-Employed Hardship Fund*". CAB found that she would be entitled to make a claim for this so Evie applied and received a **£4,000** payment. Evie was also advised that she would be able to make a claim for maternity allowance once she was further along into her pregnancy and that CAB would be able to assist with this application. Further to this the client was advised that once she had her baby we would complete a further benefit check as she may have further benefit entitlement at this point.

The Impact

Evie was very grateful for the support received and would be in contact in the future once further along in her pregnancy for further support. She said she felt comfortable seeking advice from CAB and appreciated their expertise and friendly service. She can now relax and enjoy her pregnancy without the financial worry and knows she has people she can turn to.

Provision of national social security supports

The UK and Scottish Governments provided a number of hardship grants to families, including:

- An additional £20 per week to Universal Credit client. In East Renfrewshire, this related to around 1,860 residents.
- Hardship payments for children eligible for Free School Meals. These payments were issued at Christmas 2020 and Spring 2021 and were £100 per child on each occasion. These payments were made for approximately 2,000 children each time.
- 94 people were paid from the Scottish Government's Newly Self-Employed Hardship Fund totalling £188,000.

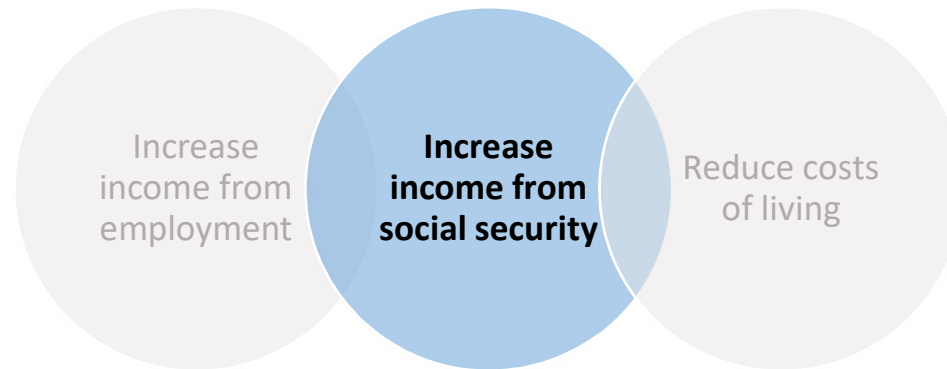
In addition, we reviewed our Scottish Welfare Funding processing and granted applications deemed 'medium priority' (previously only high priority applications were processed).

Provision of new, local financial security supports

As part of the local humanitarian response to the pandemic, there were a number of short-term social security supports established. These included;

- 'Topping-up' the national Family Hardship Christmas payment by £25 for all eligible pupils in receipt of a Free School Meal, and also extending this to an additional 400 pupils in receipt of Clothing Grants but not FSMs.
- Provision of shopping vouchers for households in financial need. During 2020/2021 we provided over £4,000 of vouchers to 28 families.
- A discretionary fund was established to provide one-off payments of up to £250 to residents who had financial support needs as a result of COVID-19 but were not eligible for alternative funds such as the Scottish Welfare Fund. Between December 2020 and March 2021, approximately £22,000 was paid to around 100 families.
- Children and Families Social Workers were provided with funding to support the 100 most vulnerable families they work with. They had an average of £300 per family to spend at their discretion depending on the needs of the household. These spends included provision of items such as garden furniture and accessories, bike, trikes and play items. Also sports items and materials, such as footballs, goalposts, punching bags and boxing gloves, to help reduce stress and isolation.
- Additional funding to established community organisations facing increased demand such as the Back to School Bank and Dunterlie and Thornliebank Food Shares.

Future Actions 2021-2022



These actions are as accurate as possible at the time of writing. However, it is important to remember that actions will be subject to review as community planning partners further establish their recovery and renewal plans and once the impact of COVID-19 is more fully understood and priorities ahead are reshaped. Maximising income from benefits and entitlement will be key to mitigate impacts of anticipated rises in unemployment and under employment.

<p>Change required: All parents involved in the PACE employability programme are offered financial inclusion support</p>	<p>What we will do: Employ a 1 year temporary Income Maximisation Officer to support all PACE clients Lead: Money Advice and Rights Team Resources: c.£30,000 for 1 Grade 7 post Target Groups: recently redundant, people on furlough and those facing redundancy</p>	<p>How we will measure progress:</p> <ul style="list-style-type: none"> • Number of clients accessing services • Number of clients having a positive outcome • Verified financial gain
<p>Change required: Improved knowledge of financial wellbeing within school leavers</p>	<p>What we will do: Deliver the UK Government's financial inclusion plan Lead: Education Department / Money Advice and Rights Team Resources: within existing resources Target Groups: school pupils</p>	<p>How we will measure progress:</p> <ul style="list-style-type: none"> • Number of participants • Feedback from events

	<p>What we will do: Provide bespoke training on employability, positive options and financial well-being to school pupils Lead: Money Advice and Rights Team / Education Department / Street League Resources: within existing resources Target Groups: older school pupils</p>	<p>How we will measure progress</p> <ul style="list-style-type: none"> • Number of training attendees • Feedback from training • Number of pupils with a positive destination following training
<p>Change required: Improved parental access to benefits and income maximisation information and advice, including new referral pathways</p>	<p>What we will do: Provide debt and benefit advice in local communities through a Community Hub. Lead: ERC Money Advice, Social Security Scotland, Citizen’s Advice and Neilston Development Trust. Resources: Staff from each agency Target Groups: Low income families living in and around Neilston</p>	<p>How we will measure progress:</p> <ul style="list-style-type: none"> • Number of families seeking assistance • Number of clients having a positive outcome • Verified financial gain
	<p>What we will do: Develop a GP referral pathway to money advice services Lead: ERC Money Advice and Rights Team Resources: within existing resources Target Groups: all priority groups</p>	<p>How we will measure progress:</p> <ul style="list-style-type: none"> • Number of GP referrals • Number of clients having a positive outcome • Verified financial gain
	<p>What we will do: Produce digital resources aimed at residents more able to self-serve. ‘How to guides’ will be added to the Internet page along with links and descriptions to other services. Lead: MART, CAB and Barrhead Housing Association Resources: within existing resources Target Groups: all priority groups, particularly new social security claimants</p>	<p>How we will measure progress:</p> <ul style="list-style-type: none"> • Page ‘hits’ • Social media post ‘reach’

	<p>What we will do: Financial Assessments/Income maximisation for all foster and adoption families in East Renfrewshire Council</p> <p>Lead: Health and Social Care Partnership / Money Advice and Rights Team</p> <p>Resources: within existing resources</p> <p>Target Groups: Care experienced families</p>	<p>How we will measure progress:</p> <ul style="list-style-type: none"> • Number of clients accessing the service • Verified financial gains
	<p>What we will do: Provide non English speakers with access to volunteer interpretation services for assistance in claiming Social Security</p> <p>Lead: Voluntary Action East Renfrewshire / Money Advice and Rights Team</p> <p>Resources: within existing resources</p> <p>Target Groups: non-English-speaking residents, residents with English as a second language</p>	<p>How we will measure progress:</p> <ul style="list-style-type: none"> • Number of clients accessing the service • Client feedback • Verified financial gain

Chapter 3: Costs of Living

Workstream

The Costs of Living group was newly formed to support this identified area of need as there was no existing 'natural home' for it. The group membership includes several East Renfrewshire Council departments including Economic Development, Housing Services, Education Department and Early Years Services. The group also includes members from partner organisations including Citizens' Advice Bureau, Home Energy Scotland and Citrus Energy.

Lived experience feedback

The ever-increasing cost of living due to the COVID-19 pandemic was at the forefront of our engagement with frontline workers. They described the difficulties faced by parents as a result of families having to spend more time in the house due to; home-schooling, homeworking and the stay-at-home instructions ordered by the government.

The cost of food was the main concern surrounding the increased cost of living due to the coronavirus pandemic. As families were spending more time in the house, they found that they were eating a lot more and grocery bills became a financial stress for parents. Frontline staff said that they dealt with a higher volume of parents seeking support to cover food costs. Many people engaged in the Equalities Survey identified food poverty as a symptom and result of the cost of living within East Renfrewshire. They all spoke about the reliance families in poverty may have on food banks or food larders.

Fuel costs for parents were also a vital issue raised. The frontline staff we engaged with noted that fuel poverty was one of the most common issues they had to find solutions for and felt that parents were extra anxious and strained over the winter lockdown and home-schooling during this time.

The cost of summer is another topic which is currently causing a lot of parents' stress and financial anxiety, according to our lived experience engagement. Children being off school and the activities that come with this is a strain on many families every year, but last year as most facilities were still closed or restricted this took the burden off parents who struggle with this financial ask. However, this year, staff have found that parents are feeling additional pressure to be able to give their children an active and fun summer, due to facilities being closed for so long.

The cost for community activities, in particular for children in poverty, was highly discussed in the Equalities Survey. Respondents spoke of parents in poverty who struggle to pay for cultural activities such as football or dancing due to the costs in East Renfrewshire, which affects children's development and experiences. This pressure is further heightened by many households' income reducing since March last year and the increasing cost of living they're experiencing (as previously discussed).

Digital Poverty. Due to home-schooling, the highest cost of the school day in the last year has been ensuring children have suitable devices and broadband so that they can continue to participate in their education to the best of their abilities. Several respondents in the Equalities Survey recognised the unfair disadvantage poverty places young people at within education. In particular, digital inclusion was a key intersecting theme, with multiple respondents noting that families in poverty lack the access to devices/broadband, meaning that children's online education can suffer as a consequence.

Action taken

During 2020/2021 the Community Planning Partners across East Renfrewshire have taken action to reduce the costs of living, including;

Increasing the availability of affordable housing to vulnerable families

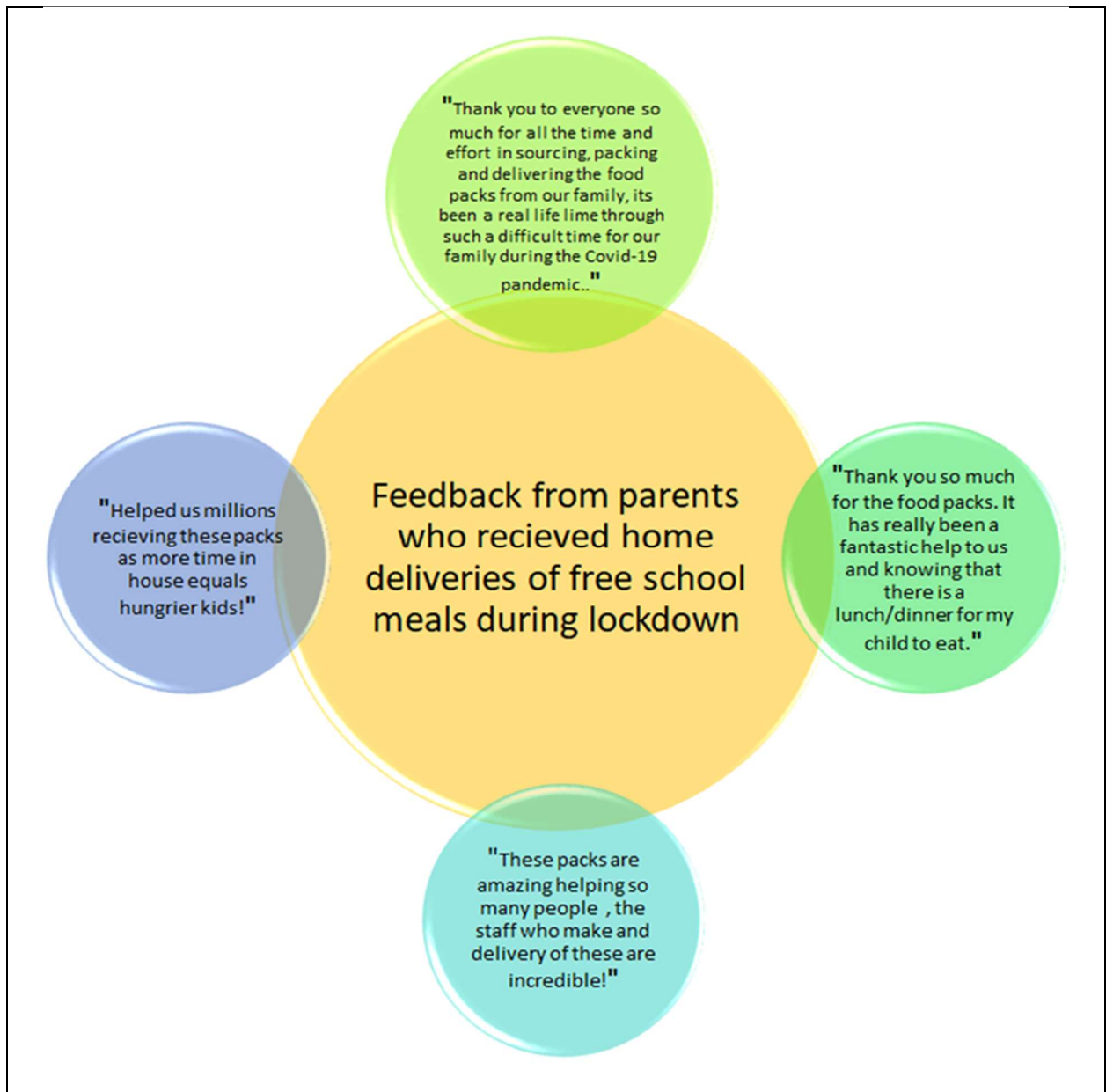
East Renfrewshire Council's Housing Department is undertaking an ambitious new build programme in 2018-2024, which aims to build 362 new units overall in Barrhead, Newton Mearns, Maidenhill and Malletsheugh. To date, 45 units have been completed and 23 of these are aimed specifically at families with a further 206 family homes to be developed. The Housing Department will continue to target the affordable housing to particular vulnerable individuals or groups.

Increasing the support and advice surrounding food poverty

Throughout the pandemic East Renfrewshire Community Planning and third sector partners have worked extensively on the provision of free and low-cost food, including, but not limited to:

- Establishing a Food Hub to deliver weekly food parcels to those in financial need, distributing around 4,000 food parcels over a six-month period involving around 50 staff and volunteers
- Delivering approximately 1,300 weekly free school meal food parcels to all entitled pupils throughout lockdown and school holidays.
- Providing supermarket vouchers to households in need through MART and Citizens' Advice Bureau.
- Delivering emergency food parcels to homes via ERC Community Wardens
- Providing a volunteer run shopping service through the Community Hub
- Delivering hot meals through a number of third sector organisations
- Supporting 2 Food Shares to re-open when restrictions allowed
- Supporting the establishment of a Food Larder Network with 3 active larders at this time
- Creating a Food Dignity Network including connections with community growing spaces & gardens for community wealth building

These provisions supported families during times of crisis and are now working to develop a sustainable, community-led approach to tackling food poverty.



Reducing the impact of fuel poverty for vulnerable families by providing support and advice

Fuel poverty is something which has become an ever-increasing issue as a result of COVID-19, as families are spending more time in the house due to the closure of schools or have had their income reduced as a result of furlough/redundancies.

At a Health Board level, NHS Greater Glasgow and Clyde has seen a major increase in staff using our fuel poverty and staff money worries programme (320% increase since last year, 781 staff used this service so far in 2020/21).

Barrhead Housing Association worked in partnership with Citizen's Advice Bureau to provide emergency fuel payments to tenants in need. Between May 2020 and March 2021, almost £20,000 was distributed to 257 East Renfrewshire residents who were struggling with fuel debt or costs.

Many residents were supported by the national supports provided by Home Energy Scotland. However, we identified there would be a gap in national provision between April 2021 and August 2021, so in March East Renfrewshire Council Humanitarian Group worked in partnership with Citizen's Advice Bureau to establish a local provision of emergency payments. The impact of this initiative will be included in next year's report.

In addition, NHS Greater Glasgow and Clyde has provided energy clinics offering online or telephone appointments to staff to access fuel support advice. This had a 320% increase in usage compared to last year, with 1060 staff using the service during 2020-2021.

Reducing the cost of the school day

School Equalities Coordinators participated in a training event on child poverty in March 2021. The event focused on sharing practice, building greater understanding of strategies to reduce costs and re-evaluating the local context following the pandemic. A follow-up session in May 2021 will develop approaches to auditing the cost of the school day and using Pupil Equity Funding to reduce costs.

Many partners are making increased referrals to the East Renfrewshire Back to School Bank. The Back to School Bank provides children, in situations of poverty and hardship, with a brand-new school uniform, gym kit, school bag, stationery. The children remain anonymous and the school bank operates on a referral system with local support agencies, schools and third sector organisations. The Back to School Bank has seen an increase in demand over the past year and in recognition of this, East Renfrewshire Humanitarian Group have allocated funds from the Scottish Government's Supporting People Funding. This funding provided 50 uniforms including the additional items required for increased outdoor learning and changes of clothes due to COVID-19.

Reducing the cost of digital access

We have issued over 1,500 devices to families in financial need and these have been supported with connectivity where required. Through the Scottish Government Connecting Scotland programme we have issued devices to around 400 families through community links and a further 600 to families through schools. In March 2021, the Education Department provided an additional 700 devices to pupils in recognition of the additional pressures on larger families during home learning, and these devices were allocated based on equity related factors.

Adult Learning Services have also trained a team of Digital Champions who support families to get online and gain confidence using the devices to support their children's learning, their own learning journey including completion of accredited courses, attending college courses and searching and applying for work. Many of the parents that we are supporting also require support to improve their own literacy and numeracy skills.

In addition, as part of their annual 'Digital Refresh' programme, the Education Department have invested heavily in Promethean interactive panel devices and laptop and desktop PCs, ensuring that our schools have access to a wide range of devices that are up to date and fit for purpose. Through a multi-agency approach and a focus on equity and excellence, schools have been able to quickly identify which pupils require digital support and provide this efficiently, so that young people are not digitally excluded and can continue to receive the highest possible standard of education.

Case Study: Schools and Digital Poverty

Barrhead Cluster

All schools gathered information regarding level of need (devices/Mifi) through phone calls or online form with initial focus on families who required devices during last period of remote learning and vulnerable families. Schools have built upon the practice that evolved from March-June 2020 and staff confidence and capacity has increased. Digital leaders/ICT Coordinators in each school have delivered a programme of CLPL on aspects such as Google Meet, Loom, Screencastify and Google Classroom and produced associated support materials. ICT coordinators/Digital leaders in all schools are providing a high level of ongoing support for families

Woodfarm Cluster

Schools used a range information to identify pupils who had no access or limited access to digital devices, and families continue to be consulted periodically to ensure that all learners continue to have the necessary technology and other practical equipment to engage. Learning from the experiences of the first school closure, all schools continued with contingency planning and developed detailed remote learning policies during August to December 2020. This included consultation with parents, learners and staff.

St Luke's Cluster

There has been a strong focus on equity and excellence with all settings and schools identifying quickly pupils who required access to digital devices and Mifi to support their online learning. Systems were put in place to allow families to borrow devices such as Chromebooks and laptops to enable them to participate along with their peers. Where digital accessibility has remained a challenge, pupils have been invited into the hub to re-engage with their learning. The digital capacity and confidence of staff is good and improving at a significant pace.

Increasing the provision of affordable childcare

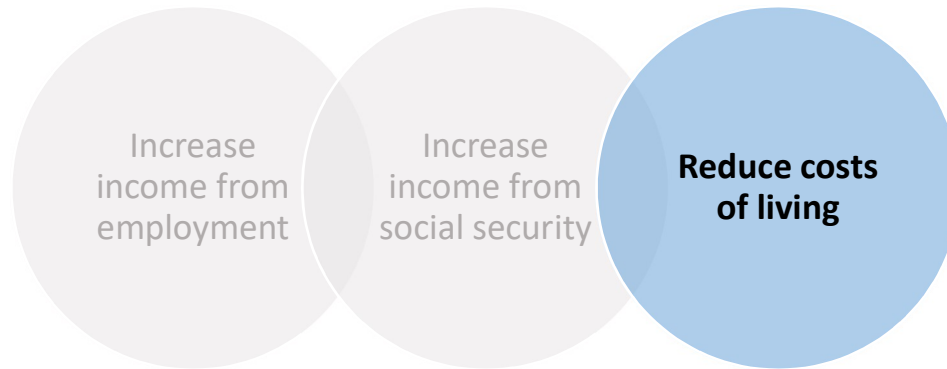
Pandemic restrictions meant that the Scottish Government removed the legislative requirement to deliver 1140 hours of funded Early Learning and Childcare from August 2020. However, East Renfrewshire Council were mindful that families would have been depending on the offer of 1140 hours from August 2020 both in terms of childcare needs and reducing family expenses. It was recognised that during this period of unexpected financial stress and concern for many families, it was crucially important to enable them to plan ahead with knowledge of how their early learning and childcare needs would be met and without additional financial concerns. As such the decision was made to implement 1140 hours from August 2020 as planned, but with reduced flexibility and without the provision of lunches.

In a recent consultation families reported that the new hours suited their work and family life, relieving financial pressures and reducing the amount of time grandparents were being asked to provide childcare.

In addition to 3 and 4 year olds, all eligible two year olds were also offered 1140 hours of ELC from August 2020. 120 families have benefitted from this provision, an increase of 63% on the previous year. As well as providing Early Learning and Childcare for eligible and vulnerable 2 year olds, where there was capacity to do so we were also able to support working families with the offer to purchase nursery places at a considerably reduced cost, compared to commercial provision. A further 122 children and families in this age group benefitted from this service, including keyworkers who required the provision during the lockdown period in January 2021.

The cost of childcare in LA ELC settings continues to be the lowest in Scotland at £2.25 per hour.

Future Actions 2021-22



<p>Change required: Reduced energy costs for vulnerable families</p>	<p>What we will do: Employ a fuel poverty officer to develop advice and guides to support those struggling to manage the costs of their household fuel Lead: East Renfrewshire Council Resources: £35,000 Target Groups: Workless households, low income households, lone parents</p>	<p>How we will measure progress:</p> <ul style="list-style-type: none"> • Number of people receiving energy advice • Increase in the number of people with affordable household fuel costs
<p>Change required: Increased provision of affordable housing options to vulnerable groups</p>	<p>What we will do: Work with local Housing Associations to consider their allocation policy in line with the priority groups Lead: Housing Department and local Housing Associations Resources: Within existing resources Target Groups: Low income families</p>	<p>How we will measure progress:</p> <ul style="list-style-type: none"> • Increase in the number of vulnerable families accessing affordable housing provision

<p>Change required: Reduced cost to families of school attendance and participation</p>	<p>What we will do: Develop a Social Justice Strategy with a focus on resources, equity, participation, diversity and rights. This will incorporate our approaches to Pupil Equity Funding, Cost of the School Day and Closing the Poverty Related Attainment Gap. Reporting will include a requirement to report on impact of interventions to reduce CoSD</p> <p>Lead: Education Department</p> <p>Resources: School PEF awards</p> <p>Target Groups: Families in receipt of Free School Meals, other groups of children and young people identified by schools as experiencing poverty-related inequality</p>	<p>How we will measure progress:</p> <ul style="list-style-type: none"> • % school PEF Plans and Reports detailing planned interventions and positive impact on reducing the cost to families of attendance and participation in school • Outcomes of Cost of the School Day audits across the authority area will be evaluated and used to plan next steps
	<p>What we will do: Work with equalities coordinators on CoSD including discussion on the clothing grant, Dressing for Excellence Policy and increased national provision of Free School Meals to P4 and P5 pupils</p> <p>Lead: Education Department</p> <p>Resources: School PEF awards</p> <p>Target Groups: Families in receipt of Free School Meals, other groups of children and young people identified by schools as experiencing poverty-related inequality</p>	<p>How we will measure progress</p> <ul style="list-style-type: none"> • Clothing grant allocation revised (and amended if required) • Renewed Dressing for Excellence Policy
<p>Change required: Reduced cost to families of Early Learning and Childcare</p>	<p>What we will do: Provide a hot meal for all eligible children attending an Early Learning and Childcare setting in East Renfrewshire, irrespective of their attendance pattern</p> <p>Lead: Education Department</p> <p>Resources: Within existing resources</p> <p>Target Groups: Children aged 2, 3, 4 and 5 attending Early Learning and Childcare settings as part of their funded entitlement</p>	<p>How we will measure progress</p> <ul style="list-style-type: none"> • Increase in the number of children and families accessing free food entitlement • Reduced food bill costs to families of children attending nursery
<p>Change required: Reduced cost to families of the pregnancy pathway</p>	<p>What we will do: Work in partnership to look at how the cost of attending services during family can be reduced and how families can be supported to reduced costs of purchasing items for a new baby from the learning within this report.</p> <p>Lead: NHS GGC</p> <p>Resources: Within existing resources</p> <p>Target groups: Children <1, other groups</p>	<p>How we will measure progress:</p> <ul style="list-style-type: none"> • Reduced costs to families during pregnancy

Child poverty mitigating actions

It should be noted that this report outlines the changes to tackle the three drivers of poverty and therefore reduce the level of child poverty in East Renfrewshire. In addition to this, we recognise the importance of additional actions to mitigate the impact of child poverty. The wider Children's Services planning landscape includes a range of such actions, including under the Children and Young People's Plan 2020-2023 which includes a priority to increase social and economic opportunities.

Provision of Learning Hubs during school closure periods

Throughout school closure periods, we have provided School Hub places for vulnerable children, including those experiencing poverty. During the initial school closure period between March and August 2020, seven learning hubs were established for vulnerable children and children of key workers. From March to June 2020 the number of children and young people attending the learning hubs increased from just over 300 to nearly 700 with the number of vulnerable children attending increasing from 24 to 228.

When schools closed in December 2020 the Education Department took the decision to offer hub provision in each ELC setting and school. This decision was based on the previous self-evaluation and attendance data in June when numbers of vulnerable children attending hub provision significantly increased when the provision was in their own setting. The number of children attending hubs increased to on average 1511 children and young people attending with over 600 vulnerable children attending. These placements ensured that children had a structure and routine to their day, were able to access fresh, hot meals and had educational support.

"Despite the school being in lockdown the pupils themselves have asked to attend the HUB as they seek the stability of school and a safe place to work." Teacher

Health, wellbeing and resilience supports

Over the past year, Health and Social Care staff have maintained regular contact with families experiencing poverty to support their health, wellbeing and resilience. This has included phone calls and home visits for vulnerable families, allocation of Educational Hub places for those in need and emotional and wellbeing support for both children and parents.

Adult Learning Services ran an English as a Second Language (ESOL) for Parents course which included delivering family play packs, supporting children with learning and working in partnership with Family First. We provided an online ESOL for Parents course on a weekly basis and set up an ESOL for Parents Hub to share information and offer support. Within this provision, 33 parents were supported to engage and improve their English language using online learning, WhatsApp groups and distance learning options. We created our own videos for the Syrian Refugee parents to offer ideas of games to make and play with children. We offered ways to keep children motivated and provided links to websites, You Tube videos, and the BBC school programmes.

Case Study: Digital support

Referred by Family First, one parent was isolated and struggling to support her 11yr old with homework. Initially, I supported over the phone with numeracy learning. However, after we had applied for a Chromebook, through the Connecting Scotland initiative, I set the device up and helped the mum to create her first ever email address. It was then possible to send attachments with worksheets and learning links. It has been a big learning curve for mum to learn from scratch how to use the Chromebook. However, she is now sending and responding to emails, opening attachments and has taken part in her first online learning experience for National Numeracy Day on Microsoft Teams.

We are planning a 'Summer of Play' for 2021 as a response to the impact of COVID-19 and how it has compounded issues of health, wellbeing and resilience. This will address inequities in access to activities and support. The Summer of Play programme aims to provide support for those children and young people who may otherwise struggle to access such experiences during the holidays.

In addition to providing activities and support for children and young people, it will address the impact COVID-19 has had on levels of poverty by reducing the cost of living through the provision of free childcare during the sessions and address holiday hunger through the provision of a healthy lunch.

Conclusion

East Renfrewshire Community Planning Partnership has continued to keep a strong focus on child poverty and our role in both prevention and mitigation actions. We have engaged with those with lived experience of poverty, both directly and through frontline staff feedback, to inform and drive the required step-change in our area. Further, we have sought to increase the level and quality of data we collect to best identify the priority target groups.

As previously acknowledged, planning of any future actions at this point is challenging under the current climate. We still cannot be sure what the longer-term impacts of the pandemic will be and how the profile of poverty in East Renfrewshire might change. As a CPP, we will continue to monitor data and listen to lived experience feedback and use this to shape our decision making, actions and resources.

Child Poverty will remain a priority in East Renfrewshire and we will continue to monitor and drive step-change to response the immediate, medium and longer term needs of families in our area.

Annex 1: Full profile of East Renfrewshire

Our analysis of the available datasets identifies the scale of child poverty in East Renfrewshire, compared to the benchmarking authorities, and Scotland as a whole. The data profile looks at differences in East Renfrewshire communities. We would expect this profile to change as we see more data becomes available in relation to the impact of COVID-19, particularly around the ‘four harms’.

General

East Renfrewshire has a proportionately large population of children living in the area and a proportionately low level of child poverty in comparison to the national average.

East Renfrewshire has the highest proportion of children in any local authority in Scotland. And this is expected to grow

East Renfrewshire has a population over 95,500¹ and this is continually growing and is expected to grow at an average rate of around 600 people a year until 2028². Based upon National Records of Scotland (NRS) figures, this increase will be proportionally, the fourth largest of any local authority in Scotland.

There are 19,525 individuals aged between 0 and 15, this is the highest proportion of children in any local authority in Scotland. One in every five people living in East Renfrewshire is a child.

Migration has a large impact on the population of East Renfrewshire and especially the child population. In 2018/19 nearly 500 more children (0-14) migrated into the area than left³, further adding to the number of children in the population. These levels of migration were the highest levels of any local authority.

The proportion of children living in poverty in East Renfrewshire is the (joint) lowest in Scotland.

There are around 3,000 children living poverty within East Renfrewshire. This amounts to 16% of children living in East Renfrewshire⁴. This is lower than the Scottish average and comparable with East Renfrewshire’s family group in the Local Government Benchmarking Framework⁵

Child poverty rates are higher in some ward areas than others

In Barrhead, Liboside and Uplawmoor Ward has the highest rate of child poverty; whilst Clarkston, Netherlee and Williamwood Ward has the lowest. Poverty rates are very much influenced by housing costs therefore the overall rates are reported as poverty level ‘after housing costs’. Housing data is not available at this level therefore the measures at ward level are ‘before housing costs’ therefore they are not comparable with the overall measures and we should assume the true levels of poverty

¹ ONS mid-year population estimates 2019

² NRS 2018-based Population Projections by Council Area in Scotland

³ NRS Total Migration to or from Scotland

⁴ End Child Poverty 2019

⁵ These are local authorities that have similar characteristics, having similar levels of relative deprivation and affluence. These authorities are paired together for comparison over areas such as children, social work and housing.

are higher than those reported. With that caveat in mind, the before housing cost child poverty levels by ward are as follows:

Barrhead, Liboside and Uplawmoor	21%
Newton Mearns North and Neilston	12%
Giffnock and Thornliebank	9%
Newton Mearns South and Eaglesham	8%
Clarkston, Netherlee and Williamwood	5%

There are fewer young mothers in East Renfrewshire than the Scottish average

There were 59 children born in 2018 to mothers who were under the age of 25, this accounted for 7% of all births in East Renfrewshire. This was the lowest rate amongst the LGBF group authorities, along with being lower than the Scottish Average of 17%⁶

The number of lone parent households is predicted to increase in the coming years

Within East Renfrewshire there are over 11,650 households with children. Around 2,400 of these are lone parent households, a priority group highlighted by the Child Poverty Act as being at greater risk of poverty. It is projected that lone parent households will make up a greater proportion of the households in East Renfrewshire by 2026 growing to 6%⁷, which is higher than the average Scottish increase.

Income from employment

Generally, residents of East Renfrewshire are economically active, with low unemployment rates and low proportion of workless households.

East Renfrewshire remains a generally economically active local authority. However, over the past year we have seen a rise in unemployment, like the rest of the country.

There are around 57,000 individuals in East Renfrewshire of working age and 77% of these individuals are economically active. Black and Minority Ethnic groups are less likely to be economically active than East Renfrewshire as a whole, at 73%, however both are lower than the Scottish rate of 78%⁸.

There are 1,600 people who are unemployed who are of working age which is an increase of approximately 400 people compared to the previous year. However, this remains the lowest rate of the LGBF groups.

14.3% of households in East Renfrewshire are 'workless' meaning there is no individual over the age of 16 in the household who is employed. There is no reliable data available to identify how many of these households have children living in them, however the Scottish figure is 11.1%⁹ and it is assumed that the rate in East Renfrewshire is significantly lower than the Scottish average.

⁶ NRS Vital Events – Births

⁷ NRS Household projections for Scotland, 2018-2028

⁸ ONS Annual Population Survey 2020

⁹ ONS Annual Population Survey 2020

Over a third of children in East Renfrewshire come from mixed households (where a household contains at least one person aged 16 to 64, where at least one person aged 16 and over is in employment and at least one other is either unemployed or inactive), the second highest rate in Scotland¹⁰. Local knowledge suggests this could be due to a common family dynamic of one high-earner parent and one stay-at-home parent, however there is no data available to evidence this. This type of household could be particularly vulnerable to poverty should their circumstances change, for example a relationship breakdown or loss of employment which many may have experienced in the past year.

East Renfrewshire residents receive the highest average weekly full time pay in Scotland. However, residents are unlikely to be employed locally as those working in East Renfrewshire have the lowest weekly pay in the benchmarking group, with many workers earning less than the living wage.

The average weekly full time pay of residents in East Renfrewshire is £815, the highest in Scotland, and the average part time pay for residents is £257, which is also the highest in Scotland. However, we recognise that these residents are not employed locally as compared to the other LGBF groups, East Renfrewshire ranks as having the lowest weekly pay for both full time and part time workers. The average weekly pay for those working within the authority for full time workers is £487 and for part time workers is £165.¹¹ Further, 31% of employees over 18 earn less than the living wage in East Renfrewshire, this is the lowest rate against the LGBF local authorities and is more than double the Scottish average of 15.2%¹².

There are 3,300 individuals in East Renfrewshire who have no formal qualifications, this translates to 5.7% of the working age population. This is lower than the Scottish average of 8.0% and is the ninth lowest rate in Scotland¹³.

Income from social security and benefits in kind

East Renfrewshire residents are less likely than the Scottish average to receive income from social security and benefits.

There are 2,096 children in low income families within East Renfrewshire. Of these, 880 children are in families where there is a lone parent¹⁴. Nearly 2070 individuals are claiming for out-of-work benefits, this rate in East Renfrewshire (4%) is lower than the Scottish average of 6%¹⁵ and 410 of these claimants were between the ages of 16 and 24. Overall, there are 15,425 children in families that are registered for child benefit, which equates to 79% of all children in East Renfrewshire however this is among the lowest proportion when compared to other Scottish local authorities¹⁶.

¹⁰ ONS Annual Population Survey 2020

¹¹ ONS Annual Survey of Hours and Earnings 2020

¹² Annual Survey of Hours and Earnings Scotland, 2020

¹³ ONS Annual Population Survey 2020

¹⁴ DWP Households Below Average Income, 2019

¹⁵ ONS Claimant Count April 2021

¹⁶ HMRC Child Benefit Statistics, 2020

Within East Renfrewshire 7.4% of all primary pupils from P4 to P7 were registered for free school meals, this increased from 6.9% in 2019 and is lower than the Scottish average of 21.3%. In secondary schools 7.4% of pupils are registered for free school meals, which is, again, lower than the Scottish average of 17%, however this figure has been rising every year since 2018 when 6.2% of pupils were receiving free school meals¹⁷.

East Renfrewshire has a £100 school uniform grant which parents/carers can apply for. We have an automated system to issue this grant each subsequent year without having to reapply. In East Renfrewshire 430 young people receive an Education Maintenance Allowances, across Scotland over 31,000 receive an EMA¹⁸.

Costs of living

The costs of living in East Renfrewshire are higher than average, particularly in relation to housing costs. Average house prices, average local authority rent and average council tax paid are all comparatively high.

The average property price in East Renfrewshire in 2021 has increased by 11.5% since early 2020 to rise to £250,935. This average is the second highest of Scotland's local authorities behind only the City of Edinburgh, with the average house price there being £280,940¹⁹. The average weekly local authority rent for a property in East Renfrewshire is £76.86, which is the 7th highest weekly rent for a Scottish local authority²⁰. This average is affected by the proportion of larger properties within the housing stock in the area. Anecdotally, we are aware of a high private rental market across the authority, with associated high weekly costs. However, there is no data available at a local level to evidence this as private rent statistics are broken down into Broad Rental Market Areas, with East Renfrewshire being part of Greater Glasgow.

Overall, East Renfrewshire had the 12th lowest rates for council tax across Scotland across all bandings, however nearly three quarters (73.7%) of East Renfrewshire's houses are classified as being band D or above, the highest proportion in Scotland, with the Scottish average being 41.2%. The average amount of council tax that is paid in East Renfrewshire is £1,573, the highest price paid in Scotland²¹.

There are a wide range of activities available to children in East Renfrewshire. On average art, drama and sports activities, run by East Renfrewshire Culture & Leisure, cost £45.50 for a three month class and there are classes that are paid for on arrival, which cost between £3.15 and £5²². On average there is a 30% discount in these prices for concessions. There are also a wide range of more expensive privately run activities, and we believe this to be a thriving market, however there is no available data to evidence this.

¹⁷ Scottish Government Pupils Census 2020

¹⁸ Scottish Government, Education Maintenance Allowances 2018

¹⁹ UK House Price Index Scotland, January 2021

²⁰ Housing Revenue Account Statistics 2019-2020

²¹ Council Tax by Band 2019-20, Scottish Government

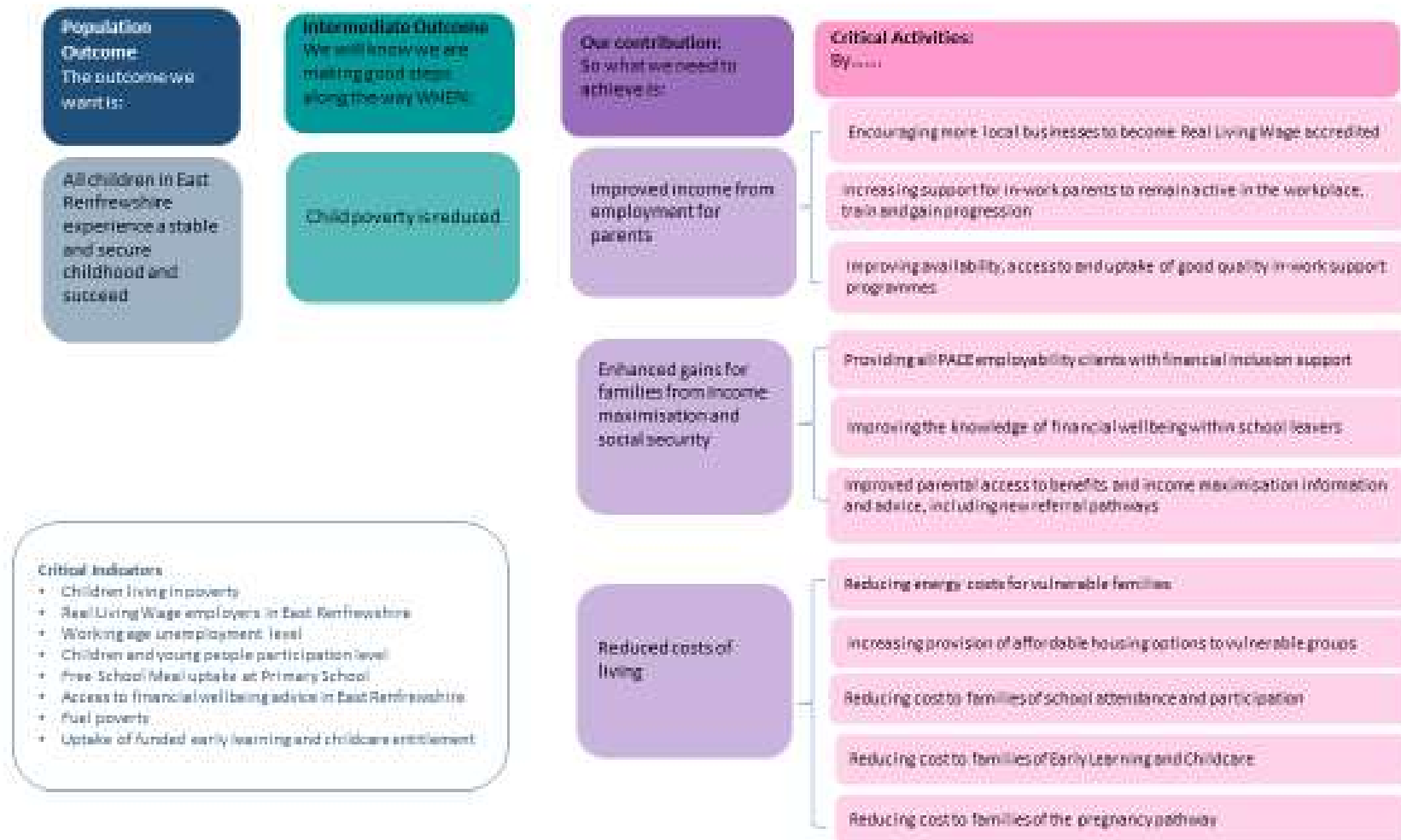
²² East Renfrewshire Culture and Leisure

The Active Schools programme delivered over 7,200 activity sessions in the 2018/19 academic year involving 8,200 individual children in East Renfrewshire²³. The number of sessions and the number of participants has increased compared to those observed in the previous three academic years.

²³ Local Authority Active Schools data 2018-2019.

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Annex 2: Future Actions 2021-2022



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Annex 3: Agreed long term objectives for NHSGGC and associated local authorities

NHSGGC and the 6 associated Local Authorities have agreed the following high level approaches:

1. Role as an employer

- Increase family friendly working approaches
- Attaining and maintaining Living Wage Employer Accreditation
- Parents as a priority group for interventions with staff who have money and debt worries
- Parents as a priority group in our Employment and Health approach
- Parents as a priority group for recruitment initiatives
- Child poverty a feature, as appropriate of Learning and Education programmes
- Child poverty outcomes in community benefit clauses

2. Role as a service provider (Children and Families Settings)

- Ensure every opportunity is used to maximise income and reduce outgoings
- Develop innovative co-location models (e.g. with Social Security Services Scotland, Department of Work and Pensions)
- Ensure engagement with people with lived experience of child poverty to inform planning and review
- Analysis, where possible, of reach of interventions by Child Poverty Act priority groups (i.e. children of lone and/or young parents, children with disabilities and/or children of parents with a disability and black and minority ethnic children and also kinship carers)

3. Role as a partner

- Leadership on child poverty at Community Planning Partnership Boards
- Influencing, from local and regional perspectives, key national partners (e.g. SSS, DWP, Health Scotland)
- Influencing, from a child poverty perspective, housing policy
- Influencing, from a child poverty perspective, transport policy

In addition, NHSGGC will -

- Ensure child poverty is comprehensively addressed in the Children and Families Universal Pathway
- Develop child poverty, as appropriate, as a 'golden thread' in Acute health improvement programmes
- Provide public health data for use in Acute and CPP areas

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EAST RENFREWSHIRE
HEALTH AND SOCIAL CARE
PARTNERSHIP



Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board
Held on	23 June 2021
Agenda Item	9
Title	2020-21 End Year Performance Update and postponement of Annual Performance Report
<p>Summary</p> <p>Following emergency legislation in response to the Covid-19 outbreak, public authorities were granted the temporary power to delay publication of statutory reports where this would interfere with our coronavirus response. In March 2021, recognising the continuing pressures from the pandemic, the Scottish Government moved legislation to extend the Coronavirus Scotland Act (2020) through to the 30th September 2020. This means that IJBs are able to extend the date of publication of Annual Performance Reports through to November, using the same mechanisms as the previous year. Given the volume of work and requirement for input to the review from partners and services, it has been decided that we will postpone publication of our Annual Performance Report to August 2021.</p> <p>This paper provides an update on the End Year performance data for 2020-21 and a summary of key performance trends for consideration. The performance measures were developed to monitor progress in the delivery of the strategic priorities set out in the HSCP Strategic Plan 2018-2021. 2020-21 is the final year of the current strategic plan.</p>	
Presented by	Steven Reid Policy, Planning and Performance Manager
<p>Action Required</p> <p>The Integration Joint Board is asked to:</p> <ul style="list-style-type: none"> • note that the publication date for the HSCP Annual Performance Report 2020-21 has been postponed from 31 July 2021 to 31 August 2021; and • note and comment on the End-Year Performance Update for 2020-21. 	
<p>Directions</p> <p><input checked="" type="checkbox"/> No Directions Required</p> <p><input type="checkbox"/> Directions to East Renfrewshire Council (ERC)</p> <p><input type="checkbox"/> Directions to NHS Greater Glasgow and Clyde (NHSGGC)</p> <p><input type="checkbox"/> Directions to both ERC and NHSGGC</p>	<p>Implications</p> <p><input type="checkbox"/> Finance</p> <p><input type="checkbox"/> Policy</p> <p><input type="checkbox"/> Workforce</p> <p><input type="checkbox"/> Equalities</p> <p><input type="checkbox"/> Risk</p> <p><input type="checkbox"/> Legal</p> <p><input type="checkbox"/> Infrastructure</p> <p><input type="checkbox"/> Fairer Scotland Duty</p>

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

23 JUNE 2021

Report by Chief Officer

**2020-21 END YEAR PERFORMANCE UPDATE
AND POSTPONEMENT OF ANNUAL PERFORMANCE REPORT**

PURPOSE OF REPORT

1. The purpose of this report is to notify the Integration Joint Board of the decision to postpone publication of our Annual Performance Report for 2020-21 and provide a summary update of key performance for 2020-21.

RECOMMENDATION

2. The Integration Joint Board is asked to:
 - a) note that the publication date for the HSCP Annual Performance Report 2020-21 has been postponed from 31 July 2021 to 31 August 2021; and
 - b) note and comment on the End-Year Performance Update for 2020-21.

BACKGROUND

3. The Public Bodies (Joint Working) (Scotland) Act 2014 requires Integration Joint Boards to publish an Annual Performance Report, setting out an assessment of performance in planning and carrying out those functions for which they are responsible. The 2014 Act requires publication of the report within 4 months of the end of the financial year being reported on, therefore by 31 July each year.
4. In recognition of the exceptional requirements being placed on public bodies as they responded to the Covid-19 outbreak, the Coronavirus (Scotland) Act 2020 made a number of temporary changes to statutory reporting and publication requirements (as well as Freedom of Information requests). This gave public authorities the temporary power to postpone publishing reports if they are of the view that continuing with report preparation would impede their ability to take effective action in response to the coronavirus pandemic.
5. In March 2021, recognising the continuing pressures from the pandemic, the Scottish Government moved legislation to extend the Coronavirus Scotland Act (2020) through to the 30th September 2020. This means that IJBs are able to extend the date of publication of Annual Performance Reviews through to November 2021, using the same mechanisms as the previous year, which are laid out in the [Coronavirus Scotland Act \(2020\), Schedule 6, Part 3](#).
6. Given the volume of work required for a full review of performance and activity during 2020-21, and specifically the requirement for input to the review from partners and services, it has been decided that we will postpone publication of our Annual Performance Review to August 2021. As an interim measure we provide the IJB with a full performance data report and summary of key performance trends below.

REPORT

7. The Chief Officer has agreed to delay the publication date for the Annual Performance Report until 31 August in exercise of the power granted to public authorities under the Coronavirus (Scotland) Act 2020 to do so. The staff who would have been involved in the preparation of the report have been heavily engaged in supporting the Covid-19 pandemic response.
8. A draft of the report will be presented to the Integration Joint Board at its next meeting on 11 August for approval. Subject to approval, the report will be published on our website by 31 August and promoted through media channels. We will post a public notification of the rescheduling of the report on our website before the original publication date of 31 July. This approach is in line with most other IJBs in Scotland.
9. The attached report contains data updates and commentary relating to the performance measures set out under the strategic priorities in the HSCP Strategic Plan 2018-2021:
 - Mental wellbeing is improved among children, young people and families in need.
 - People are supported to stop offending and rebuild their lives through new community justice pathways.
 - Wellbeing is improved in our communities that experience shorter life expectancy and poorer health.
 - People are supported to maintain their independence at home and in their local community.
 - People who experience mental ill-health are supported on their journey to recovery.
 - Unplanned admissions to hospital are reduced.
 - People who care for someone are able to exercise choice and control in relation to their caring activities.
10. The final section of the data report contains a number of organisational indicators relating to our staff and customers. The report presents each indicator with a RAG status in relation to the target for the reporting period (where a target is set), along with trend arrows, charts and commentary on performance. Key performance messages are summarised below.

Performance impact during Covid-19 pandemic

11. 2020-21 has seen the HSCP face the unprecedented challenge of the Covid-19 pandemic. During the crisis, staff across the HSCP have responded with incredible resilience, commitment and creativity. Within a very short space of time teams have established and adapted to new ways of working and have continued to maintain and deliver safe and effective services to our residents. Our strong local partnerships have responded with great innovation and greater collaborative working with and in support of our local communities. During the pandemic we established and ran a local Community Assessment Centre for people with respiratory problems. We successfully distributed high volumes of essential PPE supplies and have delivered an enhanced flu vaccination programme and Covid-19 vaccination programme. We have developed and coordinated many services and supports to care homes, who have been caring for some of our most vulnerable residents.
12. To support the wider wellbeing needs of our residents we worked in partnership to support the development of the Community Hub which has supported residents to access information and signposted to local community supports as well as establishing new shopping and prescription delivery service. It also responded to the growing need

for social contact by those who were reporting feeling isolated, especially those who were shielding. With our colleagues in education we set up the Healthier Minds service to respond to the mental wellbeing of our children and young people.

13. Our Covid-19 response activity has happened in addition to our planned operational priorities. Much of the performance data for 2020-21 reflects the direct impact of the pandemic on operational activity and changed behaviours among the population during lockdowns and the pandemic period more generally.

Supporting children and families

14. Our children's services have maintained high rates of contact with children during the pandemic (Childs Plan contacts – av. 72%/week; Child Protection – av. 100%/week; throughcare/aftercare – av. 90%/week), and have successfully managed to support the highest number of looked after children in school (57%). Teams are seeing increasing complexity particularly for children with diagnosed neurodevelopmental disorders and a higher prevalence of families in crisis leading to more of these children coming under child protection and an associated increase in numbers coming into care. Headline performance data includes:

- % starting CAMHS treatment within 18 weeks – 61% down from 78%
- Care experienced children – positive performance on permanence – 1 child with 3+ placements
- 95% of care experienced children supported in community – Ranked 3rd best in Scotland (Local Government Benchmarking Framework (LGBF))
- Child protection - 88% child protection cases with increased safety
- Reduced % of children subject to child protection offered advocacy – 66%

Supporting people through criminal justice pathways

15. Despite the significant impact of the pandemic which saw unpaid work suspended on 23rd March 2020, the Community Payback Team completed 2,417 hours of activity equating to £21,535 of unpaid work which directly benefited the local community. Through creative use of “other activity homeworking pack” the team helped reduce the number of outstanding hours and ensured some people completed orders within timescales. Whilst there has been an overall reduction in referrals for employability support, positive employment outcomes have been maintained at 65%. Strong support for women and families affected by domestic abuse continued throughout the pandemic. Headline performance data for the Criminal Justice service includes:

- Percentage of unpaid work placement completions within Court timescale – 75% up from 71% (although significant reduction in Community Payback Orders - 44 compared to 205 previous year)
- Positive Employability outcomes for people with convictions – overall reduction in referrals but positive outcomes maintained - 66% previous year 65%
- 92% of people reported that their order had helped address their offending - 8% reduction
- Domestic abuse outcomes for women - 114 reviews completed with 84% of women assessed noting improvement in progress (5.5% improvement on previous year).

Supporting people to maintain their independence at home

16. Whilst we had to close our day services during the pandemic, our learning disability staff worked with provider partners to develop outreach and wrap around support for individual and their families and our older people's Kirkton service staff were redeployed to support care at home supports. Care at home has seen additional pressures due to a desire from more people to be supported at home and more complex discharges. Our rehabilitation teams have experienced increased pressures in the absence of a number of specialist rehabilitation services and earlier discharges from hospital (average of 40–50 referral per week in 2019/early 2020; now 70-80 per week over past 10 months). The increased frailty and complexity of people referred to our services has seen a decrease in the percentage of people whose care need has reduced following re-ablement. Headline performance data includes:

- Number of people self-directing their care through receiving direct payments and other forms of self-directed support – 556 up 7% from 518 in 19/20
- % of people 'living where you/as you want to live' needs met (%) – 91% up from 88%.
- % whose care need has reduced following re-ablement – 31% down from 67% (reflecting increased frailty, complexity of hospital discharge, pressure on service)

Supporting people experiencing mental ill-health and supporting recovery from addiction

17. During 2020-21 our teams were dealing with a significant increase in demand across mental health and addiction services due to increases in complexity, and we expect this to increase going forward. With the aid of technology teams have been able to offer people ongoing support throughout pandemic, and access to treatment has been maintained. We established a peer research programme in alcohol and drugs settings that will enhance the influence of people with lived experience on service delivery and design and piloted a Buvidal clinic (a new, long-acting opiate substitution treatment and alternative to methadone and other substitutes). Mental health services have delivered a mental health and wellbeing remobilisation programme with the third sector including a recovery college pilot, staff capacity building around bereavement, mental health and suicide prevention, and wellbeing support to carers. Headline performance data for mental health and recovery includes:

- % waiting no longer than 18 weeks for access to psychological therapies – 74% up from 65% in 19/20
- % accessing alcohol/drug recovery treatment within 3 weeks – 95% up from 89%
- % moving from treatment to recovery – 6% down from 14% due to focus on maintaining stability for service users and reduction in staffing in recovery team due to vacancies which are now being filled
- No significant increase in mental health acute admissions during pandemic – latest age standardised rate is 1.6 per 1,000 population. Psychiatric admissions (adult and older people) was 175 in 20/21 - up slightly from 169 for 19/20.

Reducing unplanned hospital care

18. Patterns of accident and emergency and unplanned hospital admissions were significantly altered by the pandemic. During 2020-21 the HSCP has worked with other partnership and acute services in the Glasgow area to develop new services and pathways that will continue as we move into recovery. Our hospital to home team worked throughout the pandemic using virtual technology to undertake assessments

and communicate with patients, relatives and ward staff. Overall bed days lost to delayed discharge are up 30% from 19/20, however the majority of these are due to delays in moving adults with incapacity, which has been impacted by court delays. Our performance for standard delays remains one of the best in Scotland. Headline performance data includes:

- Adult bed days lost to delayed discharge – 2,342 – up from 1,788 in 2019/20
- Adult A&E attendances – 13,677 – down 32% from 20,159
- Adult Emergency admissions – 6,518 – down 13.5% from 7,532

Supporting unpaid carers

19. Throughout 2020/21 we have maintained our positive partnership working with the ER Carers, ensuring carers had access to required guidance and PPE. Check-in calls to carers were introduced by ER Carers and carers were offered support to set up and manage a peer support Facebook Group. The Mental Health Carers group also continued to run virtually. We have worked with the Care Collective to refresh our carer's strategy. East Renfrewshire's Short Breaks Statement has been updated to ensure all advice and information is accurate and includes the development of creative, Covid-safe online breaks that meet the outcomes of the carer and the cared-for person. Headline performance data includes:

- 91% of unpaid carers reporting 'quality of life for carers' needs fully met (154 respondents) – similar to 19/20 result (92%)

Organisational performance

20. The way staff have been working has changed significantly during the pandemic with home working becoming the norm for large groups of employees. There have been shifts in patterns of sickness absence. We have also seen weakening performance on some operational processes such as complaints handling and invoice processing with staff focused on pandemic response and many staff members being redeployed into other work areas. Headline performance data includes:

- Sickness absence days per employee (ERC staff) – 13.6 days down from 19.1 days in 19/20.
- Percentage of days lost to sickness absence for NHS staff – 5.5% down from 7.3%
- Percentage of HSCP complaints responded to within timescale – NHS – 50% down from 56%; ERC – 65% down from 72%
- Payment of invoices within timescale – 69% down from 74%

CONSULTATION AND PARTNERSHIP WORKING

21. The Planning and Performance Team have engaged with officers across HSCP service areas as well as NHS Greater Glasgow and Clyde, Public Health Scotland and local partners to establish a full suite of performance data and commentaries for 2020-21.

IMPLICATIONS OF THE PROPOSALS

22. Operational implications arising from the performance data are routinely assessed by services and through our planning processes.

DIRECTIONS

23. There are no directions arising from this report.

CONCLUSION

24. Significant work has been undertaken to establish a comprehensive performance report for 2020-21. The data shows that despite the significant challenges of the Covid-19 pandemic we have continued to support our most vulnerable residents and have performed well against many of our outcome-focused performance indicators. We have seen some service areas more directly impacted by restrictions and areas where patterns of demand have shifted significantly during the reporting period. Through our recovery and renewal planning and the development of our next strategic plan we will ensure that our priorities and approaches meet the changing needs of our population. We will complete and publish our Annual Performance Report for 2020-21, building on the performance data and highlighting the experiences of services, partners and residents during the past year.

RECOMMENDATION

25. The Integration Joint Board is asked to:

- a) note that the publication date for the HSCP Annual Performance Report 2020-21 has been postponed from 31 July 2021 to 31 August 2021; and
- b) note and comment on the End-Year Performance Update for 2020-21.

REPORT AUTHOR AND PERSON TO CONTACT

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Chief Officer, IJB: Julie Murray

4 June 2021

HSCP Strategic Plan Performance Report 2020-21



Report Author: I Smith / S Reid
Generated on: May 2021

Key:

Green	performance is at or better than the target
Amber	Performance is close (approx 5% variance) to target
Red	Performance is far from the target (over 5%)


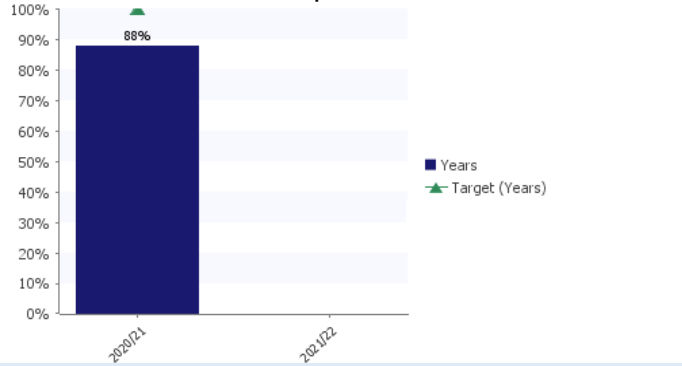

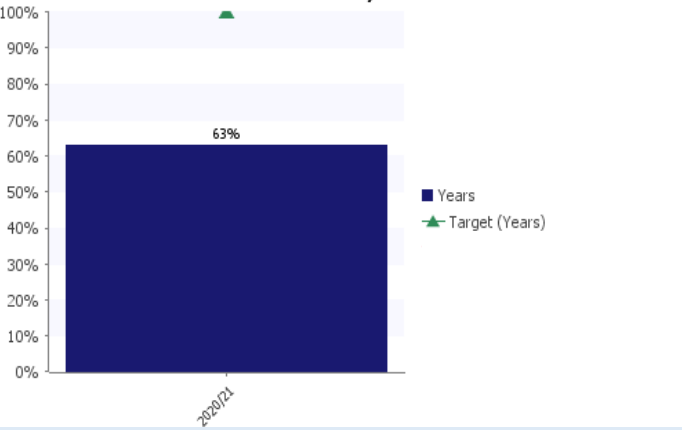
Trend arrows point upwards where there is **improved** performance (inc. where we aim to decrease the value).

East Renfrewshire Outcome Delivery Plan indicators highlighted in blue

1 - Mental wellbeing is improved among children, young people and families in need																											
Indicator	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend chart	Latest Note																				
DECREASE - Percentage of children looked after away from home who experience 3 or more placement moves	2020/21	1.2%	11.0%	Green	↓	<p>SOA09PI - 004.1 Percentage of children looked after away from home who experience 3 or more placement moves (REDUCE)</p> <table border="1"> <caption>SOA09PI - 004.1 Data</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>2017/18</td><td>19.0%</td></tr> <tr><td>2018/19</td><td>8.3%</td></tr> <tr><td>2019/20</td><td>5.1%</td></tr> <tr><td>2020/21</td><td>1.2%</td></tr> </tbody> </table>	Year	Percentage	2017/18	19.0%	2018/19	8.3%	2019/20	5.1%	2020/21	1.2%	One child had 3 or more placement moves in the reporting year (86 children looked after between 01.04.20 and 31.03.21).										
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DECREASE -Child & Adolescent Mental Health - longest wait in weeks at month end	2020/21	35	18	Red	↓	<p>CHCP-CSP-CAMHS Child & Adolescent Mental Health - longest wait in weeks at month end (REDUCE)</p> <table border="1"> <caption>CHCP-CSP-CAMHS Data</caption> <thead> <tr> <th>Year</th> <th>Longest Wait (Weeks)</th> </tr> </thead> <tbody> <tr><td>2013/14</td><td>15</td></tr> <tr><td>2014/15</td><td>18</td></tr> <tr><td>2015/16</td><td>16</td></tr> <tr><td>2016/17</td><td>31</td></tr> <tr><td>2017/18</td><td>35</td></tr> <tr><td>2018/19</td><td>34</td></tr> <tr><td>2019/20</td><td>33</td></tr> <tr><td>2020/21</td><td>35</td></tr> <tr><td>2021/22</td><td>35</td></tr> </tbody> </table>	Year	Longest Wait (Weeks)	2013/14	15	2014/15	18	2015/16	16	2016/17	31	2017/18	35	2018/19	34	2019/20	33	2020/21	35	2021/22	35	Data is average monthly longest wait. Compares to 33 in 2019/20. Performance has been impacted by the Covid pandemic.
Year	Longest Wait (Weeks)																										
2013/14	15																										
2014/15	18																										
2015/16	16																										
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2021/22	35																										

Indicator	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend chart	Latest Note																								
<p>INCREASE - Children and young people starting treatment for specialist Child and Adolescent Mental Health Services within 18 weeks of referral</p>	2020/21	61%	90%	Red	↓	<p>HSCP-SP18-CAMHS Children and young people commencing treatment for specialist CAMHS within 18 weeks of referral (INCREASE)</p> <table border="1"> <caption>HSCP-SP18-CAMHS Data</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr> <td>2018/19</td> <td>74%</td> <td>90%</td> </tr> <tr> <td>2019/20</td> <td>78%</td> <td>90%</td> </tr> <tr> <td>2020/21</td> <td>61%</td> <td>90%</td> </tr> <tr> <td>2021/22</td> <td>90%</td> <td>90%</td> </tr> </tbody> </table>	Year	Value (%)	Target (%)	2018/19	74%	90%	2019/20	78%	90%	2020/21	61%	90%	2021/22	90%	90%	<p>Average weekly data 2020/21. Performance has deteriorated against last year's figure (78%) this is thought to be due to the effects of the continuing Covid pandemic.</p>									
Year	Value (%)	Target (%)																													
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2019/20	78%	90%																													
2020/21	61%	90%																													
2021/22	90%	90%																													
<p>INCREASE - Accommodated children will wait no longer than 6 months for a Looked After Review meeting to make a permanence recommendation</p>	2020/21	74%	80%	Amber	↓	<p>CP-1618-LACREV2 Looked After Children away from home will have a LAC Review</p> <table border="1"> <caption>CP-1618-LACREV2 Data</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr> <td>2017/18</td> <td>100%</td> <td>80%</td> </tr> <tr> <td>2018/19</td> <td>83%</td> <td>80%</td> </tr> <tr> <td>2019/20</td> <td>94%</td> <td>80%</td> </tr> <tr> <td>2020/21</td> <td>74%</td> <td>80%</td> </tr> <tr> <td>2021/22</td> <td>94%</td> <td>80%</td> </tr> </tbody> </table>	Year	Value (%)	Target (%)	2017/18	100%	80%	2018/19	83%	80%	2019/20	94%	80%	2020/21	74%	80%	2021/22	94%	80%	<p>Of the 19 children who are looked after in this period, 14 have waited no longer than 6 months for a Looked After review to make a permanence recommendation. This is lower than the aim of 80% however COVID -19 restrictions had an impact on the ability to carry out assessments in relation to permanence with children and families within timescales.</p>						
Year	Value (%)	Target (%)																													
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2018/19	83%	80%																													
2019/20	94%	80%																													
2020/21	74%	80%																													
2021/22	94%	80%																													
<p>INCREASE - Balance of Care for looked after children: % of children being looked after in the Community (LGBF)</p>	2019/20	94.9%		Data Only	↓	<p>SCHN09 Balance of Care for looked after children: % of children being looked after in the Community (INCREASE)</p> <table border="1"> <caption>SCHN09 Data</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> </tr> </thead> <tbody> <tr> <td>2010/11</td> <td>95.5%</td> </tr> <tr> <td>2011/12</td> <td>92.0%</td> </tr> <tr> <td>2012/13</td> <td>94.7%</td> </tr> <tr> <td>2013/14</td> <td>92.6%</td> </tr> <tr> <td>2014/15</td> <td>94.5%</td> </tr> <tr> <td>2015/16</td> <td>95.4%</td> </tr> <tr> <td>2016/17</td> <td>91.5%</td> </tr> <tr> <td>2017/18</td> <td>93.6%</td> </tr> <tr> <td>2018/19</td> <td>94.9%</td> </tr> <tr> <td>2019/20</td> <td>94.9%</td> </tr> <tr> <td>2020/21</td> <td>94.9%</td> </tr> </tbody> </table>	Year	Value (%)	2010/11	95.5%	2011/12	92.0%	2012/13	94.7%	2013/14	92.6%	2014/15	94.5%	2015/16	95.4%	2016/17	91.5%	2017/18	93.6%	2018/19	94.9%	2019/20	94.9%	2020/21	94.9%	<p>East Renfrewshire has for the past three years been in the top 5 ranking for keeping children within their community. For this period we are significantly above the national average and our family group averages for the proportion of children who are looked after in a community rather than a residential setting.</p>
Year	Value (%)																														
2010/11	95.5%																														
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Indicator	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend chart	Latest Note																				
DECREASE - % Child Protection Re-Registrations within 18 months (LGBF)	2019/20	15.8%		Data Only	↓	<p>SCHN22(TEMP) % Child Protection Re-Registrations within 18 months (REDUCE)</p> <table border="1"> <caption>SCHN22(TEMP) % Child Protection Re-Registrations within 18 months (REDUCE)</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> </tr> </thead> <tbody> <tr><td>2012/13</td><td>12%</td></tr> <tr><td>2013/14</td><td>12%</td></tr> <tr><td>2014/15</td><td>20%</td></tr> <tr><td>2015/16</td><td>17%</td></tr> <tr><td>2016/17</td><td>8.8%</td></tr> <tr><td>2017/18</td><td>0%</td></tr> <tr><td>2018/19</td><td>7.7%</td></tr> <tr><td>2019/20</td><td>15.8%</td></tr> </tbody> </table>	Year	Value (%)	2012/13	12%	2013/14	12%	2014/15	20%	2015/16	17%	2016/17	8.8%	2017/18	0%	2018/19	7.7%	2019/20	15.8%	<p>Child protection re-registrations are higher than the previous year and also above the Scottish average. The increase from 18/19 – 19/20 is as a result of larger sibling groups being re-registered. Overall low figures locally mean that small numbers can appear as bigger variations and so the increase is not in fact statistically significant.</p>		
Year	Value (%)																										
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2019/20	15.8%																										
DECREASE - % Looked After Children with more than one placement within the last year (Aug-Jul). (LGBF)	2019/20	18.8%		Data Only	↑	<p>SCHN23(TEMP) % Looked After Children with more than one placement within the last year (REDUCE)</p> <table border="1"> <caption>SCHN23(TEMP) % Looked After Children with more than one placement within the last year (REDUCE)</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> </tr> </thead> <tbody> <tr><td>2011/12</td><td>5.17</td></tr> <tr><td>2012/13</td><td>10.7</td></tr> <tr><td>2013/14</td><td>7.43</td></tr> <tr><td>2014/15</td><td>21.23</td></tr> <tr><td>2015/16</td><td>21.54</td></tr> <tr><td>2016/17</td><td>19.66</td></tr> <tr><td>2017/18</td><td>23.5</td></tr> <tr><td>2018/19</td><td>23.5</td></tr> <tr><td>2019/20</td><td>18.8</td></tr> </tbody> </table>	Year	Value (%)	2011/12	5.17	2012/13	10.7	2013/14	7.43	2014/15	21.23	2015/16	21.54	2016/17	19.66	2017/18	23.5	2018/19	23.5	2019/20	18.8	<p>Our performance has improved on this indicator. Although the figure for placement moves is higher than the national average it is lower than the family group average. The context in this respect is important to understand. Given the small numbers of looked after children in East Renfrewshire sibling groups who move make a significant effect on our overall percentage. One placement move can also represent a rehabilitation home and move to adoptive parents therefore there are placement moves which are positive moves for a child which increase security and stability.</p>
Year	Value (%)																										
2011/12	5.17																										
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Indicator	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend chart	Latest Note						
<p>INCREASE - Percentage of children with child protection plans assessed as having an increase in their scaled level of safety at three monthly review periods</p>	<p>2020/21</p>	<p>88%</p>	<p>100%</p>	<p>Red</p>		<p>HSCP-SoS-01 Percentage of children with child protection plans assessed by the multi-agency team as having an increase in their scaled level of safety at three monthly review periods</p>  <table border="1"> <caption>HSCP-SoS-01 Data</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr> <td>2020/21</td> <td>88%</td> <td>100%</td> </tr> </tbody> </table>	Year	Value (%)	Target (%)	2020/21	88%	100%	<p>Average annual outturn based on Qtrs 3 and 4 data only. Review Case Conferences mainly saw an increase in the safety of the child, however for one the risk increased and the child was accommodated.</p>
Year	Value (%)	Target (%)											
2020/21	88%	100%											
<p>INCREASE - Percentage of children subject to child protection who have been offered advocacy</p>	<p>Q2 2020/21</p>	<p>63%</p>	<p>100%</p>	<p>Red</p>		<p>HSCP-ADV-01 Percentage of children subject to child protection who have been offered advocacy</p>  <table border="1"> <caption>HSCP-ADV-01 Data</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr> <td>2020/21</td> <td>63%</td> <td>100%</td> </tr> </tbody> </table>	Year	Value (%)	Target (%)	2020/21	63%	100%	<p>The Covid pandemic and lockdown has impacted on our ability to engage with children and young people in the way we would under pre-lockdown conditions. Therefore conversations about advocacy can be more challenging. What we are seeing overall is that there is a more consistent offer of advocacy to children subject to child protection and this is an overall improvement in practice.</p>
Year	Value (%)	Target (%)											
2020/21	63%	100%											

2 - People are supported to stop offending and rebuild their lives through new community justice pathways																																	
Indicator	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																										
INCREASE - Community Payback Orders - Percentage of unpaid work placement completions within Court timescale.	2020/21	75%	80%	Amber	↑	<p>CJOIP-PI-6a Community Payback Orders - Percentage of unpaid work placement completions within Court timescales (INCREASE)</p> <table border="1"> <caption>CJOIP-PI-6a Community Payback Orders - Percentage of unpaid work placement completions within Court timescales (INCREASE)</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>2009/10</td><td>93%</td></tr> <tr><td>2010/11</td><td>83%</td></tr> <tr><td>2011/12</td><td>90%</td></tr> <tr><td>2012/13</td><td>85%</td></tr> <tr><td>2013/14</td><td>75%</td></tr> <tr><td>2014/15</td><td>96%</td></tr> <tr><td>2015/16</td><td>92%</td></tr> <tr><td>2016/17</td><td>84%</td></tr> <tr><td>2017/18</td><td>71%</td></tr> <tr><td>2018/19</td><td>75%</td></tr> <tr><td>2019/20</td><td>75%</td></tr> <tr><td>2020/21</td><td>75%</td></tr> </tbody> </table>	Year	Percentage	2009/10	93%	2010/11	83%	2011/12	90%	2012/13	85%	2013/14	75%	2014/15	96%	2015/16	92%	2016/17	84%	2017/18	71%	2018/19	75%	2019/20	75%	2020/21	75%	There was significant disruption to CPO activity as a result of Covid-19, with a much lower number completed within the year. 44 Community Payback Orders were completed compared to 205 in the previous year (a 79% reduction).
Year	Percentage																																
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INCREASE - % of service users moving from treatment to recovery service.	2020/21	6%	10%	Red	↓	<p>HSCP-ADP-12 % of service users moving from drug treatment to recovery service</p> <table border="1"> <caption>HSCP-ADP-12 % of service users moving from drug treatment to recovery service</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>2011/12</td><td>17%</td></tr> <tr><td>2012/13</td><td>10%</td></tr> <tr><td>2013/14</td><td>12%</td></tr> <tr><td>2014/15</td><td>7%</td></tr> <tr><td>2015/16</td><td>13%</td></tr> <tr><td>2016/17</td><td>9%</td></tr> <tr><td>2017/18</td><td>12%</td></tr> <tr><td>2018/19</td><td>22%</td></tr> <tr><td>2019/20</td><td>14%</td></tr> <tr><td>2020/21</td><td>6%</td></tr> <tr><td>2021/22</td><td>10%</td></tr> <tr><td>2022/23</td><td>10%</td></tr> </tbody> </table>	Year	Percentage	2011/12	17%	2012/13	10%	2013/14	12%	2014/15	7%	2015/16	13%	2016/17	9%	2017/18	12%	2018/19	22%	2019/20	14%	2020/21	6%	2021/22	10%	2022/23	10%	<p>19 service users moved from treatment to recovery.</p> <p>Team had 351 referral for 1 April 20 - 31 March 21 which equates to 6%</p>
Year	Percentage																																
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Indicator	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																											
INCREASE - Criminal Justice Feedback Survey - Did your Order help you look at how to stop offending?	2020/21	92%	100%	Amber	↓	<p>CJOIP-PI-1 Did your Community Payback Order help you look at how to stop offending?</p> <table border="1"> <caption>CJOIP-PI-1 Data</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr><td>2015/16</td><td>95%</td><td>100%</td></tr> <tr><td>2016/17</td><td>100%</td><td>100%</td></tr> <tr><td>2017/18</td><td>100%</td><td>100%</td></tr> <tr><td>2018/19</td><td>100%</td><td>100%</td></tr> <tr><td>2019/20</td><td>100%</td><td>100%</td></tr> <tr><td>2020/21</td><td>92%</td><td>100%</td></tr> <tr><td>2021/22</td><td>-</td><td>100%</td></tr> </tbody> </table>	Year	Value (%)	Target (%)	2015/16	95%	100%	2016/17	100%	100%	2017/18	100%	100%	2018/19	100%	100%	2019/20	100%	100%	2020/21	92%	100%	2021/22	-	100%	<p>Due to the Covid-19 pandemic, unpaid work was suspended on 23rd March 2020. As a result, just 44 Community Payback Orders were completed compared to 205 in the previous year (a 79% reduction). 13 survey forms were returned for those completing CPOs in 2020/21 with a 92% positive response.</p>			
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INCREASE - % Change in women's domestic abuse outcomes	2020/21	84%	70%	Green	↑	<p>CJOIP-PI-5 % Change in women's domestic abuse outcomes</p> <table border="1"> <caption>CJOIP-PI-5 Data</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr><td>2015/16</td><td>87%</td><td>70%</td></tr> <tr><td>2016/17</td><td>66%</td><td>70%</td></tr> <tr><td>2017/18</td><td>65%</td><td>70%</td></tr> <tr><td>2018/19</td><td>64%</td><td>70%</td></tr> <tr><td>2019/20</td><td>79%</td><td>70%</td></tr> <tr><td>2020/21</td><td>84%</td><td>70%</td></tr> <tr><td>2021/22</td><td>-</td><td>70%</td></tr> <tr><td>2022/23</td><td>-</td><td>70%</td></tr> </tbody> </table>	Year	Value (%)	Target (%)	2015/16	87%	70%	2016/17	66%	70%	2017/18	65%	70%	2018/19	64%	70%	2019/20	79%	70%	2020/21	84%	70%	2021/22	-	70%	2022/23	-	70%	<p>From April 2020 – March 2021, East Renfrewshire Women's Aid service reported significant change and improvement for women across all reported outcomes 114 reviews were completed with 84% of women assessed noting improvement in progress in their outcomes overall. Reduction in risk is reflected in the significant increases in the areas of safety with 89% improvement, health & wellbeing 80%, and empowerment and self-esteem 80%.</p>
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INCREASE - % Positive employability and volunteering outcomes for people with convictions.	2019/20	65%	60.0%	Green	↑	<p>CJOIP-PI-7 % Positive employability and volunteering outcomes for people with convictions (INCREASE)</p> <table border="1"> <caption>CJOIP-PI-7 Data</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr><td>2017/18</td><td>-</td><td>60%</td></tr> <tr><td>2018/19</td><td>55.0%</td><td>60%</td></tr> <tr><td>2019/20</td><td>65.0%</td><td>60%</td></tr> <tr><td>2020/21</td><td>-</td><td>60%</td></tr> </tbody> </table>	Year	Value (%)	Target (%)	2017/18	-	60%	2018/19	55.0%	60%	2019/20	65.0%	60%	2020/21	-	60%	<p>In 2019/20 Justice Services referred 27 people to a range of employability support services. Work East Ren reported 17 new registrations for people with convictions. 10 young people subject to a CPOs were registered with the Family Firm service. A total of 35 people demonstrated a positive employability outcome. Latest data at May 2021.</p>												
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2020/21	-	60%																																

Indicator	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																								
<p>INCREASE - Achieve agreed number of screenings using the setting-appropriate screening tool and appropriate alcohol brief intervention, in line with SIGN 74 guidelines.</p>	2020/21	5	419	Red	↓	<p>HSCP-ADP02bi Alcohol brief interventions - Brief interventions delivered</p> <table border="1"> <caption>HSCP-ADP02bi Alcohol brief interventions - Brief interventions delivered</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>538</td></tr> <tr><td>2011/12</td><td>469</td></tr> <tr><td>2012/13</td><td>460</td></tr> <tr><td>2013/14</td><td>306</td></tr> <tr><td>2014/15</td><td>579</td></tr> <tr><td>2015/16</td><td>1268</td></tr> <tr><td>2016/17</td><td>468</td></tr> <tr><td>2017/18</td><td>331</td></tr> <tr><td>2018/19</td><td>93</td></tr> <tr><td>2019/20</td><td>33</td></tr> <tr><td>2020/21</td><td>5</td></tr> </tbody> </table>	Year	Value	2010/11	538	2011/12	469	2012/13	460	2013/14	306	2014/15	579	2015/16	1268	2016/17	468	2017/18	331	2018/19	93	2019/20	33	2020/21	5	<p>The delivery of Alcohol Brief Interventions has been greatly affected by the Covid pandemic and no HSCPs in the Greater Glasgow and Clyde Health Board area have met targets. Although the number of ABIs carried out in East Renfrewshire (5 up to end of Q3) is very low there were 415 ABI screenings conducted in primary care settings.</p>
Year	Value																														
2010/11	538																														
2011/12	469																														
2012/13	460																														
2013/14	306																														
2014/15	579																														
2015/16	1268																														
2016/17	468																														
2017/18	331																														
2018/19	93																														
2019/20	33																														
2020/21	5																														
<p>INCREASE - Percentage of people with alcohol and/or drug problems accessing recovery-focused treatment within three weeks.</p>	2020/21	95.0%	90.0%	Green	↑	<p>HSCP-ADP-05 Clients will wait no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery.</p> <table border="1"> <caption>HSCP-ADP-05 Clients will wait no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery.</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>64.0%</td></tr> <tr><td>2011/12</td><td>84.0%</td></tr> <tr><td>2012/13</td><td>88.0%</td></tr> <tr><td>2013/14</td><td>92.0%</td></tr> <tr><td>2014/15</td><td>96.0%</td></tr> <tr><td>2015/16</td><td>95.0%</td></tr> <tr><td>2016/17</td><td>95.0%</td></tr> <tr><td>2017/18</td><td>95.0%</td></tr> <tr><td>2018/19</td><td>95.0%</td></tr> <tr><td>2019/20</td><td>95.0%</td></tr> <tr><td>2020/21</td><td>95.0%</td></tr> </tbody> </table>	Year	Value	2010/11	64.0%	2011/12	84.0%	2012/13	88.0%	2013/14	92.0%	2014/15	96.0%	2015/16	95.0%	2016/17	95.0%	2017/18	95.0%	2018/19	95.0%	2019/20	95.0%	2020/21	95.0%	<p>Performance has improved steadily over the course of the pandemic from 64% in Q1 to 95% at the end of Q4. At the start of the year the service was affected by staff absences and the ongoing impact of Covid restrictions on service delivery. By Q2 effective arrangements for assessment and beginning treatment were well embedded.</p>
Year	Value																														
2010/11	64.0%																														
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2019/20	95.0%																														
2020/21	95.0%																														

Indicator	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note														
INCREASE - People agreed to be at risk of harm and requiring a protection plan have one in place	2020/21	100%	100%	Green	■	<p>OD8-HSCP-PROPLAN People agreed to be at risk of harm and requiring a protection plan have one in place</p> <table border="1"> <caption>OD8-HSCP-PROPLAN Data</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> </tr> </thead> <tbody> <tr><td>2016/17</td><td>100</td></tr> <tr><td>2017/18</td><td>100</td></tr> <tr><td>2018/19</td><td>100</td></tr> <tr><td>2019/20</td><td>100</td></tr> <tr><td>2020/21</td><td>100</td></tr> <tr><td>2021/22</td><td>100</td></tr> </tbody> </table>	Year	Value (%)	2016/17	100	2017/18	100	2018/19	100	2019/20	100	2020/21	100	2021/22	100	All residents identified as at risk of harm by the HSCP have a bespoke protection plan in place.
Year	Value (%)																				
2016/17	100																				
2017/18	100																				
2018/19	100																				
2019/20	100																				
2020/21	100																				
2021/22	100																				

3 - Wellbeing is improved in our communities that experience shorter life expectancy and poorer health

Indicator	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Notes & History Latest Note																																		
INCREASE - Male life expectancy at birth in 15 per cent most deprived communities	2018/19	74.7	71.7	Green	↑	<p>SOA09PI - 005.1E Male life expectancy at birth in 15 per cent most deprived communities (INCREASE)</p> <table border="1"> <caption>SOA09PI - 005.1E Data</caption> <thead> <tr> <th>Year</th> <th>Value (Years)</th> </tr> </thead> <tbody> <tr><td>2004/05</td><td>71.7</td></tr> <tr><td>2005/06</td><td>71.7</td></tr> <tr><td>2006/07</td><td>71.7</td></tr> <tr><td>2007/08</td><td>71.7</td></tr> <tr><td>2008/09</td><td>71.7</td></tr> <tr><td>2009/10</td><td>71.7</td></tr> <tr><td>2010/11</td><td>71.7</td></tr> <tr><td>2011/12</td><td>71.7</td></tr> <tr><td>2012/13</td><td>71.7</td></tr> <tr><td>2013/14</td><td>71.7</td></tr> <tr><td>2014/15</td><td>71.7</td></tr> <tr><td>2015/16</td><td>71.7</td></tr> <tr><td>2016/17</td><td>73.9</td></tr> <tr><td>2017/18</td><td>73.9</td></tr> <tr><td>2018/19</td><td>74.7</td></tr> <tr><td>2019/20</td><td>74.7</td></tr> </tbody> </table>	Year	Value (Years)	2004/05	71.7	2005/06	71.7	2006/07	71.7	2007/08	71.7	2008/09	71.7	2009/10	71.7	2010/11	71.7	2011/12	71.7	2012/13	71.7	2013/14	71.7	2014/15	71.7	2015/16	71.7	2016/17	73.9	2017/18	73.9	2018/19	74.7	2019/20	74.7	The most recent NRS figure for male life expectancy at birth in SIMD 1 areas of East Renfrewshire was 74.7 years (up from 73.9 years in 2017/18) compared to 84 years in SIMD 5 areas (Published by NRS Dec 2019). For the whole male population estimated life expectancy at birth was 80.3 years, 2017-19. Over the period between 2001-03 and 2017-19, male life expectancy at birth in East Renfrewshire has risen by 5.8%. This is the 8th highest percentage change out of all 32 council areas in Scotland and this is higher than the percentage change for Scotland overall (+5.0%). (Source: National Records of Scotland, Dec 2020)
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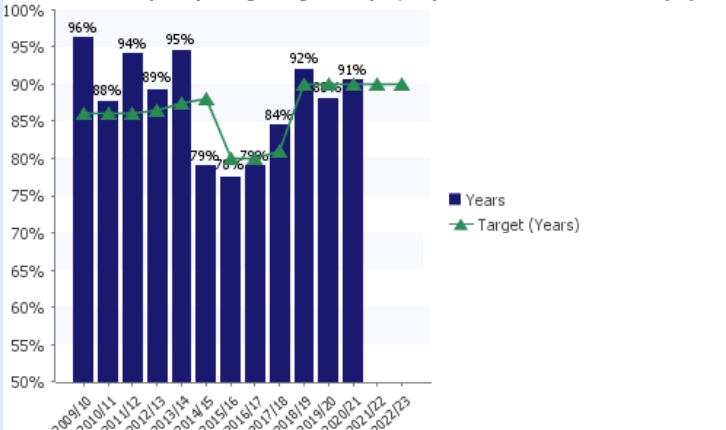

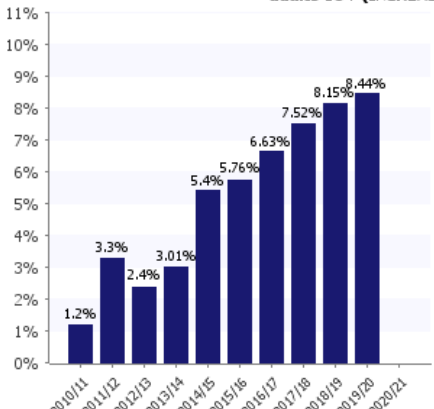
Indicator	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Notes & History Latest Note																																		
<p>INCREASE - Female life expectancy at birth in 15 per cent most deprived communities</p>	<p>2018/19</p>	<p>79.8</p>	<p>78.1</p>	<p>Green</p>		<p>SOA09PI - 005.1F Female life expectancy at birth in 15 per cent most deprived communities (INCREASE)</p>  <table border="1"> <caption>Female life expectancy at birth in 15 per cent most deprived communities (Years)</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2004/05</td><td>77.7</td></tr> <tr><td>2005/06</td><td>78.5</td></tr> <tr><td>2006/07</td><td>78.4</td></tr> <tr><td>2007/08</td><td>78.8</td></tr> <tr><td>2008/09</td><td>78.8</td></tr> <tr><td>2009/10</td><td>78.8</td></tr> <tr><td>2010/11</td><td>78.8</td></tr> <tr><td>2011/12</td><td>78.8</td></tr> <tr><td>2012/13</td><td>78.8</td></tr> <tr><td>2013/14</td><td>78.8</td></tr> <tr><td>2014/15</td><td>79.2</td></tr> <tr><td>2015/16</td><td>79.2</td></tr> <tr><td>2016/17</td><td>79.2</td></tr> <tr><td>2017/18</td><td>79.2</td></tr> <tr><td>2018/19</td><td>79.2</td></tr> <tr><td>2019/20</td><td>79.8</td></tr> </tbody> </table>	Year	Value	2004/05	77.7	2005/06	78.5	2006/07	78.4	2007/08	78.8	2008/09	78.8	2009/10	78.8	2010/11	78.8	2011/12	78.8	2012/13	78.8	2013/14	78.8	2014/15	79.2	2015/16	79.2	2016/17	79.2	2017/18	79.2	2018/19	79.2	2019/20	79.8	<p>The most recent NRS figure for female life expectancy at birth in SIMD 1 areas of East Renfrewshire was 79.8 years (up from 79.2 years in 2017/18) compared to 85.4 years in SIMD 5 areas (Published by NRS Dec 2019). For the whole female population estimated life expectancy at birth was 84 years, 2017-19. Over the period between 2001-03 and 2017-19, female life expectancy at birth in East Renfrewshire has risen by 3.5%. This is the 7th highest percentage change out of all 32 council areas in Scotland and this is higher than the percentage change for Scotland overall (+2.9%). (Source: National Records of Scotland, December 2020)</p>
Year	Value																																								
2004/05	77.7																																								
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2006/07	78.4																																								
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2016/17	79.2																																								
2017/18	79.2																																								
2018/19	79.2																																								
2019/20	79.8																																								
<p>INCREASE - The number of smokers in our most deprived areas (SIMD1) supported to successfully stop smoking at 12 weeks post quit date'</p>	<p>Q1-Q3 2020/21</p>	<p>15</p>	<p>9</p>	<p>Green</p>		<p>OD2CHCP5-0201 The number of smokers in our most deprived areas (SIMD1) supported to successfully stop smoking at 12 weeks post quit date' (INCREASE)</p>  <table border="1"> <caption>The number of smokers supported to successfully stop smoking at 12 weeks post quit date (Years)</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2006/07</td><td>0</td></tr> <tr><td>2007/08</td><td>0</td></tr> <tr><td>2008/09</td><td>0</td></tr> <tr><td>2009/10</td><td>0</td></tr> <tr><td>2010/11</td><td>0</td></tr> <tr><td>2011/12</td><td>0</td></tr> <tr><td>2012/13</td><td>0</td></tr> <tr><td>2013/14</td><td>0</td></tr> <tr><td>2014/15</td><td>0</td></tr> <tr><td>2015/16</td><td>20</td></tr> <tr><td>2016/17</td><td>27</td></tr> <tr><td>2017/18</td><td>20</td></tr> <tr><td>2018/19</td><td>6</td></tr> <tr><td>2019/20</td><td>22</td></tr> <tr><td>2020/21</td><td>15</td></tr> </tbody> </table>	Year	Value	2006/07	0	2007/08	0	2008/09	0	2009/10	0	2010/11	0	2011/12	0	2012/13	0	2013/14	0	2014/15	0	2015/16	20	2016/17	27	2017/18	20	2018/19	6	2019/20	22	2020/21	15	<p>Latest data to Q3 20/21. This measure captures quits at three months and is reported 12 weeks in arrears. Annual target is 12 quits – exceeded in first three quarters of the year.</p>		
Year	Value																																								
2006/07	0																																								
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Indicator	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Notes & History Latest Note																												
<p>INCREASE - Breastfeeding at 6-8 weeks most deprived SIMD data zones</p>	<p>2019/20</p>	<p>15.4%</p>	<p>25%</p>	<p>Red</p>	<p>↓</p>	<p>OD2CHCP4-0201d Breastfeeding at 6-8 weeks most deprived SIMD data zones (INCREASE)</p> <table border="1"> <caption>Breastfeeding at 6-8 weeks most deprived SIMD data zones</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> </tr> </thead> <tbody> <tr><td>2007/08</td><td>5.4%</td></tr> <tr><td>2008/09</td><td>19.3%</td></tr> <tr><td>2009/10</td><td>16.9%</td></tr> <tr><td>2010/11</td><td>16.5%</td></tr> <tr><td>2011/12</td><td>19.7%</td></tr> <tr><td>2012/13</td><td>16.3%</td></tr> <tr><td>2013/14</td><td>12.8%</td></tr> <tr><td>2014/15</td><td>13%</td></tr> <tr><td>2015/16</td><td>15.4%</td></tr> <tr><td>2016/17</td><td>17.2%</td></tr> <tr><td>2017/18</td><td>22.9%</td></tr> <tr><td>2018/19</td><td>22.9%</td></tr> <tr><td>2019/20</td><td>15.4%</td></tr> </tbody> </table>	Year	Value (%)	2007/08	5.4%	2008/09	19.3%	2009/10	16.9%	2010/11	16.5%	2011/12	19.7%	2012/13	16.3%	2013/14	12.8%	2014/15	13%	2015/16	15.4%	2016/17	17.2%	2017/18	22.9%	2018/19	22.9%	2019/20	15.4%	<p>15.4% of infants living in our most deprived areas (SIMD 1) were exclusively breastfed at the 6-8 week child health review (review completed between 1st April 2019 and 31st March 2020). This compares to 20.9% for NHS GGC and 19.1% Scotland wide during the same reporting period. There is a discernible variation in the breast feeding rates from 2018- 2019 and there may be further variations over the past year during COVID. Children & Family Team are aware of this and continue to prioritise and fully support all breast feeding mothers with a focus on those living within SIMD 1 & 2. The antenatal pathway within the Universal Pathway commences in July 2021 with home visits commencing late August. This will enable early discussions with pregnant women particularly around infant feeding which we hope will lead to an increase in interest in breast feeding particularly in SIMD 1 & 2.</p>
Year	Value (%)																																		
2007/08	5.4%																																		
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2019/20	15.4%																																		
<p>DECREASE - Health and Social Care Integration - Core Suite of Indicators NI-11: Premature mortality rate per 100,000 persons aged under 75. (European age-standardised mortality rate)</p>	<p>2019/20</p>	<p>295</p>	<p>Data Only</p>	<p>↑</p>	<p>HSCP-NI-11 Premature mortality rate per 100,000 persons under 75 (REDUCE)</p> <table border="1"> <caption>Premature mortality rate per 100,000 persons under 75</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2009/10</td><td>345</td></tr> <tr><td>2010/11</td><td>350</td></tr> <tr><td>2011/12</td><td>310</td></tr> <tr><td>2012/13</td><td>351</td></tr> <tr><td>2013/14</td><td>364</td></tr> <tr><td>2014/15</td><td>297</td></tr> <tr><td>2015/16</td><td>297</td></tr> <tr><td>2016/17</td><td>301</td></tr> <tr><td>2017/18</td><td>308</td></tr> <tr><td>2018/19</td><td>308</td></tr> <tr><td>2019/20</td><td>295</td></tr> </tbody> </table>	Year	Value	2009/10	345	2010/11	350	2011/12	310	2012/13	351	2013/14	364	2014/15	297	2015/16	297	2016/17	301	2017/18	308	2018/19	308	2019/20	295	<p>This is an improvement on the 2018 figure (308). In comparison Scotland rate in 2019 was 426 per 100,000. (Source: Public Health Scotland, March 2021)</p>					
Year	Value																																		
2009/10	345																																		
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4 - People are supported to maintain their independence at home and in their local community.

Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																																																						
<p>INCREASE - Number of people self-directing their care through receiving direct payments and other forms of self-directed support.</p>	2020/21	556	600	Amber	↑	<p>CHCP HCC051 Number of people self directing their care through receiving direct payments and other forms of self-directed support (INCREASE)</p> <table border="1"> <caption>CHCP HCC051 Data</caption> <thead> <tr> <th>Year</th> <th>Value</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>2006/07</td><td>0</td><td>0</td></tr> <tr><td>2007/08</td><td>0</td><td>0</td></tr> <tr><td>2008/09</td><td>0</td><td>0</td></tr> <tr><td>2009/10</td><td>0</td><td>0</td></tr> <tr><td>2010/11</td><td>0</td><td>0</td></tr> <tr><td>2011/12</td><td>0</td><td>0</td></tr> <tr><td>2012/13</td><td>0</td><td>0</td></tr> <tr><td>2013/14</td><td>0</td><td>0</td></tr> <tr><td>2014/15</td><td>0</td><td>0</td></tr> <tr><td>2015/16</td><td>442</td><td>442</td></tr> <tr><td>2016/17</td><td>491</td><td>491</td></tr> <tr><td>2017/18</td><td>514</td><td>514</td></tr> <tr><td>2018/19</td><td>518</td><td>518</td></tr> <tr><td>2019/20</td><td>556</td><td>556</td></tr> <tr><td>2020/21</td><td>556</td><td>600</td></tr> <tr><td>2021/22</td><td>556</td><td>600</td></tr> </tbody> </table>	Year	Value	Target	2006/07	0	0	2007/08	0	0	2008/09	0	0	2009/10	0	0	2010/11	0	0	2011/12	0	0	2012/13	0	0	2013/14	0	0	2014/15	0	0	2015/16	442	442	2016/17	491	491	2017/18	514	514	2018/19	518	518	2019/20	556	556	2020/21	556	600	2021/22	556	600	<p>Data calculated from preliminary Social Care Quarterly returns show a total of 556 people were in receipt of SDS 1 and 2 Option payments at end year 2020/21. A further 724 people were covered under SDS Option 3. Note figures are not exclusive and do not equal total clients (1,165) in receipt of SDS (i.e. a client may have SDS 1,2 and/or SDS 3 packages as part of their overall care).</p>			
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<p>INCREASE - Percentage of those whose care need has reduced following re-ablement</p>	2020/21	31%	60%	Red	↓	<p>OD2CHCP6-0102 Percentage of those whose care need has reduced following re-ablement</p> <table border="1"> <caption>OD2CHCP6-0102 Data</caption> <thead> <tr> <th>Year</th> <th>Value</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>2006/07</td><td>0%</td><td>0%</td></tr> <tr><td>2007/08</td><td>0%</td><td>0%</td></tr> <tr><td>2008/09</td><td>0%</td><td>0%</td></tr> <tr><td>2009/10</td><td>0%</td><td>0%</td></tr> <tr><td>2010/11</td><td>0%</td><td>0%</td></tr> <tr><td>2011/12</td><td>86.6%</td><td>86.6%</td></tr> <tr><td>2012/13</td><td>91.5%</td><td>91.5%</td></tr> <tr><td>2013/14</td><td>90.5%</td><td>90.5%</td></tr> <tr><td>2014/15</td><td>70.5%</td><td>70.5%</td></tr> <tr><td>2015/16</td><td>64.4%</td><td>64.4%</td></tr> <tr><td>2016/17</td><td>61.5%</td><td>61.5%</td></tr> <tr><td>2017/18</td><td>68%</td><td>68%</td></tr> <tr><td>2018/19</td><td>67%</td><td>67%</td></tr> <tr><td>2019/20</td><td>67%</td><td>67%</td></tr> <tr><td>2020/21</td><td>31%</td><td>60%</td></tr> <tr><td>2021/22</td><td>31%</td><td>60%</td></tr> <tr><td>2022/23</td><td>31%</td><td>60%</td></tr> </tbody> </table>	Year	Value	Target	2006/07	0%	0%	2007/08	0%	0%	2008/09	0%	0%	2009/10	0%	0%	2010/11	0%	0%	2011/12	86.6%	86.6%	2012/13	91.5%	91.5%	2013/14	90.5%	90.5%	2014/15	70.5%	70.5%	2015/16	64.4%	64.4%	2016/17	61.5%	61.5%	2017/18	68%	68%	2018/19	67%	67%	2019/20	67%	67%	2020/21	31%	60%	2021/22	31%	60%	2022/23	31%	60%	<p>Of the 237 reablement discharges, 73 were discharged with a reduced or no service in 2020/21. Additionally 22 people were re-admitted to hospital and a further 19 died or were transferred out of the authority. Performance in this regard has significantly decreased on the 2019/20 (67%) outturn. This is the result of increased levels of frailty and greater complexity at the point of hospital discharge during the pandemic and additional resource pressures on the service.</p>
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Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																																						
<p>INCREASE - Percentage of people aged 65+ who live in housing rather than a care home or hospital</p>	2019/20	99%	97%	Green	↑	<p>HSCP-MSG-Home Percentage of people aged 65+ who live in housing rather than a care home or hospital</p> <table border="1"> <caption>HSCP-MSG-Home Percentage of people aged 65+ who live in housing rather than a care home or hospital</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>2005/06</td><td>96%</td></tr> <tr><td>2006/07</td><td>96%</td></tr> <tr><td>2007/08</td><td>96%</td></tr> <tr><td>2008/09</td><td>96%</td></tr> <tr><td>2009/10</td><td>96%</td></tr> <tr><td>2010/11</td><td>97%</td></tr> <tr><td>2011/12</td><td>97%</td></tr> <tr><td>2012/13</td><td>97%</td></tr> <tr><td>2013/14</td><td>97%</td></tr> <tr><td>2014/15</td><td>97%</td></tr> <tr><td>2015/16</td><td>97%</td></tr> <tr><td>2016/17</td><td>97%</td></tr> <tr><td>2017/18</td><td>97%</td></tr> <tr><td>2018/19</td><td>97%</td></tr> <tr><td>2019/20</td><td>99%</td></tr> <tr><td>2020/21</td><td>97%</td></tr> <tr><td>2021/22</td><td>97%</td></tr> <tr><td>2022/23</td><td>97%</td></tr> </tbody> </table>	Year	Percentage	2005/06	96%	2006/07	96%	2007/08	96%	2008/09	96%	2009/10	96%	2010/11	97%	2011/12	97%	2012/13	97%	2013/14	97%	2014/15	97%	2015/16	97%	2016/17	97%	2017/18	97%	2018/19	97%	2019/20	99%	2020/21	97%	2021/22	97%	2022/23	97%	<p>Latest data released March 2021. Indicator is still under development by Scottish Government and may change in future. Due to different configurations of services, figures for the hospital/hospice categories may not be comparable across partnership areas. Figure comprises 98.1% of people living unsupported at home, with a further 1.1% being supported to live at home.</p>
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2021/22	97%																																												
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<p>INCREASE - The number of adults (18+) receiving personal care at home or direct payments for personal care, as a percentage of the total number of adults needing care. (NI-18)</p>	2019/20	57%	62%	Amber	↓	<p>HSCP-NI-18 Percentage of adults with intensive care needs receiving care at home</p> <table border="1"> <caption>HSCP-NI-18 Percentage of adults with intensive care needs receiving care at home</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>72%</td></tr> <tr><td>2011/12</td><td>64%</td></tr> <tr><td>2012/13</td><td>64%</td></tr> <tr><td>2013/14</td><td>61%</td></tr> <tr><td>2014/15</td><td>61%</td></tr> <tr><td>2015/16</td><td>58%</td></tr> <tr><td>2016/17</td><td>63%</td></tr> <tr><td>2017/18</td><td>64%</td></tr> <tr><td>2018/19</td><td>64%</td></tr> <tr><td>2019/20</td><td>57%</td></tr> <tr><td>2020/21</td><td>62%</td></tr> <tr><td>2021/22</td><td>63%</td></tr> <tr><td>2022/23</td><td>64%</td></tr> </tbody> </table>	Year	Percentage	2010/11	72%	2011/12	64%	2012/13	64%	2013/14	61%	2014/15	61%	2015/16	58%	2016/17	63%	2017/18	64%	2018/19	64%	2019/20	57%	2020/21	62%	2021/22	63%	2022/23	64%	<p>Data relates to all adults receiving personal care at home against care home residents and those receiving continuing care in acute settings. A change in reporting for 2019/20 meant that reported care home residents increased impacting on performance for this indicator. We have also been delivering on our policy to prioritise support to our most vulnerable residents and reducing the number of clients with small care packages. In the reporting period we continued to work to minimise ongoing support needs for individuals, employing additional OT resource to strengthen our reablement approach. We continue to improve our internal data and closely monitor patterns of demand for care at home. Data published March 2021 (Source: Public Health Scotland).</p>										
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<p>INCREASE - People reporting 'living where you/as you want to live' needs met (%)</p>	<p>2020/21</p>	<p>91%</p>	<p>90%</p>	<p>Green</p>		<p>HSCP-TP-5 People reporting 'living where you/as you want to live' needs met (%)</p>  <table border="1"> <caption>HSCP-TP-5 People reporting 'living where you/as you want to live' needs met (%)</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> </tr> </thead> <tbody> <tr><td>2009/10</td><td>96%</td></tr> <tr><td>2010/11</td><td>88%</td></tr> <tr><td>2011/12</td><td>94%</td></tr> <tr><td>2012/13</td><td>89%</td></tr> <tr><td>2013/14</td><td>95%</td></tr> <tr><td>2014/15</td><td>79%</td></tr> <tr><td>2015/16</td><td>76%</td></tr> <tr><td>2016/17</td><td>79%</td></tr> <tr><td>2017/18</td><td>84%</td></tr> <tr><td>2018/19</td><td>92%</td></tr> <tr><td>2019/20</td><td>88%</td></tr> <tr><td>2020/21</td><td>91%</td></tr> <tr><td>2021/22</td><td>91%</td></tr> <tr><td>2022/23</td><td>91%</td></tr> </tbody> </table>	Year	Value (%)	2009/10	96%	2010/11	88%	2011/12	94%	2012/13	89%	2013/14	95%	2014/15	79%	2015/16	76%	2016/17	79%	2017/18	84%	2018/19	92%	2019/20	88%	2020/21	91%	2021/22	91%	2022/23	91%	<p>In 2020/21 of the 663 valid responses 601 reported their needs met. This year's figure is up on 2019/20 (88%)</p>
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<p>INCREASE - Direct payments spend on adults 18+ as a % of total social work spend on adults 18+ (LGBF)</p>	<p>2019/20</p>	<p>8.44%</p>	<p>Data Only</p>	<p>Data Only</p>		<p>SW02 Self Directed Support spend on adults 18+ as a % of total social work spend on adults 18+ (INCREASE)</p>  <table border="1"> <caption>SW02 Self Directed Support spend on adults 18+ as a % of total social work spend on adults 18+ (INCREASE)</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>1.2%</td></tr> <tr><td>2011/12</td><td>3.3%</td></tr> <tr><td>2012/13</td><td>2.4%</td></tr> <tr><td>2013/14</td><td>3.01%</td></tr> <tr><td>2014/15</td><td>5.4%</td></tr> <tr><td>2015/16</td><td>5.76%</td></tr> <tr><td>2016/17</td><td>6.63%</td></tr> <tr><td>2017/18</td><td>7.52%</td></tr> <tr><td>2018/19</td><td>8.15%</td></tr> <tr><td>2019/20</td><td>8.44%</td></tr> <tr><td>2020/21</td><td>8.44%</td></tr> </tbody> </table>	Year	Value (%)	2010/11	1.2%	2011/12	3.3%	2012/13	2.4%	2013/14	3.01%	2014/15	5.4%	2015/16	5.76%	2016/17	6.63%	2017/18	7.52%	2018/19	8.15%	2019/20	8.44%	2020/21	8.44%	<p>We continue to perform well on this measure. % spend on SDS continued to improve (8.44% up from 8.15% for 18/19) and we remain among the best performing partnerships in Scotland (ranked 6th).</p>						
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<p>INCREASE - Percentage of people aged 65+ with intensive needs (plus 10 hours) receiving care at home. (LGBF)</p>	2019/20	57.6%	62.0%	Amber	↑	<p>SW03a % of people aged 65 or over with long term care needs receiving personal care at home (LGBF)</p> <table border="1"> <caption>SW03a % of people aged 65 or over with long term care needs receiving personal care at home (LGBF)</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>2009/10</td><td>50.7%</td></tr> <tr><td>2010/11</td><td>60.4%</td></tr> <tr><td>2011/12</td><td>61.0%</td></tr> <tr><td>2012/13</td><td>59.7%</td></tr> <tr><td>2013/14</td><td>59.7%</td></tr> <tr><td>2014/15</td><td>59.7%</td></tr> <tr><td>2015/16</td><td>60.0%</td></tr> <tr><td>2016/17</td><td>61.1%</td></tr> <tr><td>2017/18</td><td>60.0%</td></tr> <tr><td>2018/19</td><td>60.0%</td></tr> <tr><td>2019/20</td><td>57.6%</td></tr> <tr><td>2020/21</td><td>61.1%</td></tr> <tr><td>2021/22</td><td>63.0%</td></tr> <tr><td>2022/23</td><td>61.1%</td></tr> </tbody> </table>	Year	Percentage	2009/10	50.7%	2010/11	60.4%	2011/12	61.0%	2012/13	59.7%	2013/14	59.7%	2014/15	59.7%	2015/16	60.0%	2016/17	61.1%	2017/18	60.0%	2018/19	60.0%	2019/20	57.6%	2020/21	61.1%	2021/22	63.0%	2022/23	61.1%	<p>The LGBF data shows that our performance has improved slightly compared with the previous year (57.4%). The provision of quality care at home to support people to live independently and well in their own homes remains a key priority for the partnership and ongoing improvement of our care at home services continues.</p>
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5 - People who experience mental ill-health are supported on their journey to recovery


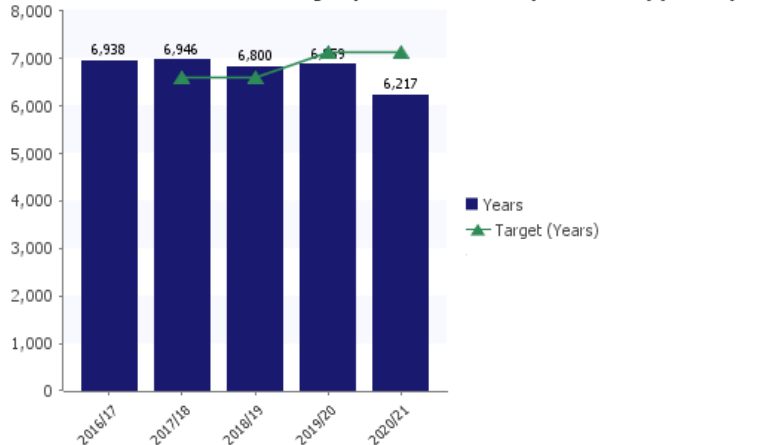
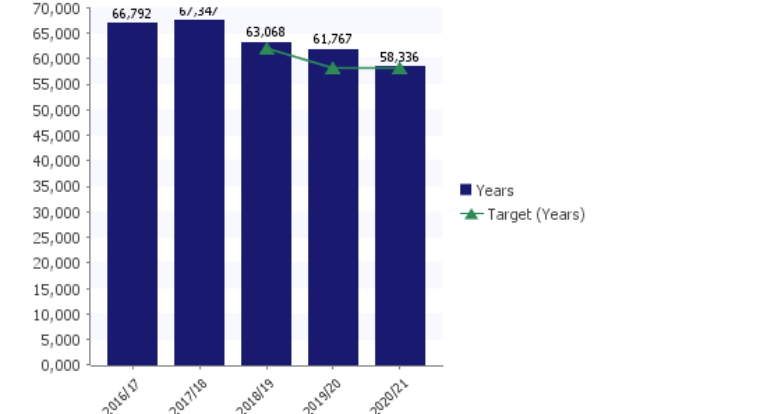
Indicator	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																																		
DECREASE - Mental health hospital admissions (age standardised rate per 1,000 population)	2019/20	1.6	2.3	Green	↑	<p>SOA09PI - 006.2 Mental health hospital admissions (age standardised rate per 1,000 population) (REDUCE)</p> <table border="1"> <caption>Mental health hospital admissions (age standardised rate per 1,000 population)</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2004/05</td><td>3.1</td></tr> <tr><td>2005/06</td><td>3.2</td></tr> <tr><td>2006/07</td><td>3.1</td></tr> <tr><td>2007/08</td><td>3.1</td></tr> <tr><td>2008/09</td><td>2.4</td></tr> <tr><td>2009/10</td><td>1.8</td></tr> <tr><td>2010/11</td><td>2.9</td></tr> <tr><td>2011/12</td><td>2.5</td></tr> <tr><td>2012/13</td><td>2.4</td></tr> <tr><td>2013/14</td><td>2.9</td></tr> <tr><td>2014/15</td><td>2.6</td></tr> <tr><td>2015/16</td><td>3.1</td></tr> <tr><td>2016/17</td><td>1.5</td></tr> <tr><td>2017/18</td><td>1.5</td></tr> <tr><td>2018/19</td><td>1.5</td></tr> <tr><td>2019/20</td><td>1.6</td></tr> </tbody> </table>	Year	Value	2004/05	3.1	2005/06	3.2	2006/07	3.1	2007/08	3.1	2008/09	2.4	2009/10	1.8	2010/11	2.9	2011/12	2.5	2012/13	2.4	2013/14	2.9	2014/15	2.6	2015/16	3.1	2016/17	1.5	2017/18	1.5	2018/19	1.5	2019/20	1.6	<p>Latest data for 2019/20 for non-psychiatric admissions (the combined rate for psychiatric and non-psychiatric admissions is 2.9 per 1,000) this is up slightly on 2018/19 (1.5 per 1,000). In comparison East Dunbartonshire's rate was 1.7 per 1,000. Across NHS GGC the main diagnosis for admissions in the period were mental & behavioural disorders due to psychoactive substance use. (Source: Public Health Scotland November 2020)</p>
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INCREASE - Percentage of people waiting no longer than 18 weeks for access to psychological therapies	2020/21	74%	90%	Red	↑	<p>HSCP-LDP1718 Psychological therapies - Percentage of people waiting no longer than 18 weeks for access (INCREASE)</p> <table border="1"> <caption>Percentage of people waiting no longer than 18 weeks for access to psychological therapies</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>77%</td></tr> <tr><td>2011/12</td><td>70%</td></tr> <tr><td>2012/13</td><td>58%</td></tr> <tr><td>2013/14</td><td>91%</td></tr> <tr><td>2014/15</td><td>96%</td></tr> <tr><td>2015/16</td><td>56%</td></tr> <tr><td>2016/17</td><td>80%</td></tr> <tr><td>2017/18</td><td>55%</td></tr> <tr><td>2018/19</td><td>65%</td></tr> <tr><td>2019/20</td><td>74%</td></tr> </tbody> </table>	Year	Value	2010/11	77%	2011/12	70%	2012/13	58%	2013/14	91%	2014/15	96%	2015/16	56%	2016/17	80%	2017/18	55%	2018/19	65%	2019/20	74%	<p>Average of weekly data 2020/21. The proportion of people accessing psychological therapies within the 18 week target; whilst still below target (90%) has improved significantly on 2019/20 (65%).</p>												
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6 - *Unplanned admissions to hospital are reduced*

Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																																	
DECREASE - people (18+) waiting more than 3 days to be discharged from hospital into a more appropriate care setting (excluding Code 9/AWI) (NHSGGC Acute data only)	2020/21	2	0	Amber	↓	<p>HSCP-GGC-DD3 Delayed discharge (NHSGGC data): people (18+) waiting more than 3 days to be discharged from hospital into a more appropriate care setting (excluding Code 9/AWI) (REDUCE)</p> <table border="1"> <caption>HSCP-GGC-DD3 Delayed discharge (NHSGGC data)</caption> <thead> <tr> <th>Year</th> <th>Value</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>2012/13</td><td>0</td><td>0</td></tr> <tr><td>2013/14</td><td>0</td><td>0</td></tr> <tr><td>2014/15</td><td>0</td><td>0</td></tr> <tr><td>2015/16</td><td>0</td><td>0</td></tr> <tr><td>2016/17</td><td>0</td><td>0</td></tr> <tr><td>2017/18</td><td>4</td><td>0</td></tr> <tr><td>2018/19</td><td>4</td><td>0</td></tr> <tr><td>2019/20</td><td>2</td><td>0</td></tr> <tr><td>2020/21</td><td>2</td><td>0</td></tr> <tr><td>2021/22</td><td>0</td><td>0</td></tr> </tbody> </table>	Year	Value	Target	2012/13	0	0	2013/14	0	0	2014/15	0	0	2015/16	0	0	2016/17	0	0	2017/18	4	0	2018/19	4	0	2019/20	2	0	2020/21	2	0	2021/22	0	0	Data is Quarterly average to week ending 22 March 2021. Although above target (0) we continue to perform relatively well on delayed discharges from hospital; ranging from 1 to 2 each Qtr this year. (Figure differs between NHSGGC and ISD data (7) due to omission of Code 9 cases in former)
Year	Value	Target																																						
2012/13	0	0																																						
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2016/17	0	0																																						
2017/18	4	0																																						
2018/19	4	0																																						
2019/20	2	0																																						
2020/21	2	0																																						
2021/22	0	0																																						
DECREASE - people (18+) waiting more than 3 days to be discharged from hospital into a more appropriate care setting including AWI (ISD data)	2020/21	7	0	Red	↑	<p>HSCP-HWB0-DD3 Delayed discharges (ISD data): Adults waiting more than 3 days to be discharged from hospital into a more appropriate care setting (REDUCE)</p> <table border="1"> <caption>HSCP-HWB0-DD3 Delayed discharges (ISD data)</caption> <thead> <tr> <th>Year</th> <th>Value</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>2012/13</td><td>0</td><td>0</td></tr> <tr><td>2013/14</td><td>0</td><td>0</td></tr> <tr><td>2014/15</td><td>0</td><td>0</td></tr> <tr><td>2015/16</td><td>0</td><td>0</td></tr> <tr><td>2016/17</td><td>5</td><td>0</td></tr> <tr><td>2017/18</td><td>5</td><td>0</td></tr> <tr><td>2018/19</td><td>6</td><td>0</td></tr> <tr><td>2019/20</td><td>5</td><td>0</td></tr> <tr><td>2020/21</td><td>7</td><td>0</td></tr> <tr><td>2021/22</td><td>0</td><td>0</td></tr> </tbody> </table>	Year	Value	Target	2012/13	0	0	2013/14	0	0	2014/15	0	0	2015/16	0	0	2016/17	5	0	2017/18	5	0	2018/19	6	0	2019/20	5	0	2020/21	7	0	2021/22	0	0	Figure relates to the annual monthly average. It has risen from 5 in 2019/20 though this can be attributed to the additional difficulties in discharging people from hospital during the Covid-19 pandemic combined with increasing numbers of Adults with Incapacity. Latest data at May 2021 (ISD)
Year	Value	Target																																						
2012/13	0	0																																						
2013/14	0	0																																						
2014/15	0	0																																						
2015/16	0	0																																						
2016/17	5	0																																						
2017/18	5	0																																						
2018/19	6	0																																						
2019/20	5	0																																						
2020/21	7	0																																						
2021/22	0	0																																						


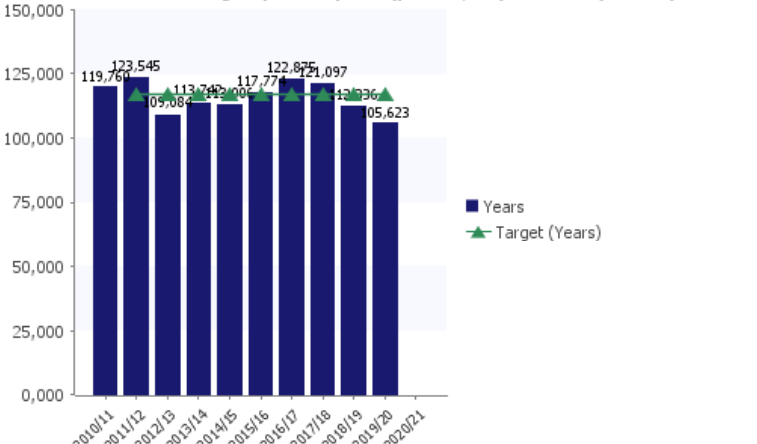


Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																										
DECREASE - Delayed discharges adult bed days lost to delayed discharge (ISD)	2020/21	2,342	1,893	Red	↓	<p>HSCP-DD-Beddays Delayed discharges adult bed days lost to delayed discharge (REDUCE)</p> <table border="1"> <caption>HSCP-DD-Beddays Delayed discharges adult bed days lost to delayed discharge (REDUCE)</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2009/10</td><td>4,842</td></tr> <tr><td>2010/11</td><td>364</td></tr> <tr><td>2011/12</td><td></td></tr> <tr><td>2012/13</td><td></td></tr> <tr><td>2013/14</td><td></td></tr> <tr><td>2014/15</td><td>3,844</td></tr> <tr><td>2015/16</td><td>2,366</td></tr> <tr><td>2016/17</td><td>2,704</td></tr> <tr><td>2017/18</td><td></td></tr> <tr><td>2018/19</td><td>2,206</td></tr> <tr><td>2019/20</td><td>1,788</td></tr> <tr><td>2020/21</td><td>2,342</td></tr> </tbody> </table>	Year	Value	2009/10	4,842	2010/11	364	2011/12		2012/13		2013/14		2014/15	3,844	2015/16	2,366	2016/17	2,704	2017/18		2018/19	2,206	2019/20	1,788	2020/21	2,342	There has a significant increase in bed days lost to Delayed Discharge this year up from 1,788 in 2019/20. This can be attributed to the additional difficulties in discharging people from hospital during the Covid-19 pandemic. Latest data at May 2021 (ISD)
Year	Value																																
2009/10	4,842																																
2010/11	364																																
2011/12																																	
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2018/19	2,206																																
2019/20	1,788																																
2020/21	2,342																																
DECREASE - No. of A & E Attendances (NHSGGC data)	2020/21	9,854	18,332	Green	↑	<p>HSCP-GGC-A&E No. of A & E Attendances (NHSGGC data) (REDUCE)</p> <table border="1"> <caption>HSCP-GGC-A&E No. of A & E Attendances (NHSGGC data) (REDUCE)</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2014/15</td><td>28,546</td></tr> <tr><td>2015/16</td><td>25,300</td></tr> <tr><td>2016/17</td><td></td></tr> <tr><td>2017/18</td><td>12,587</td></tr> <tr><td>2018/19</td><td>12,943</td></tr> <tr><td>2019/20</td><td>12,748</td></tr> <tr><td>2020/21</td><td>9,854</td></tr> </tbody> </table>	Year	Value	2014/15	28,546	2015/16	25,300	2016/17		2017/18	12,587	2018/19	12,943	2019/20	12,748	2020/21	9,854	Data from NHSGGC monthly dashboard. A&E attendances have remained low during the pandemic period but have risen as lockdown restrictions have eased.										
Year	Value																																
2014/15	28,546																																
2015/16	25,300																																
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2017/18	12,587																																
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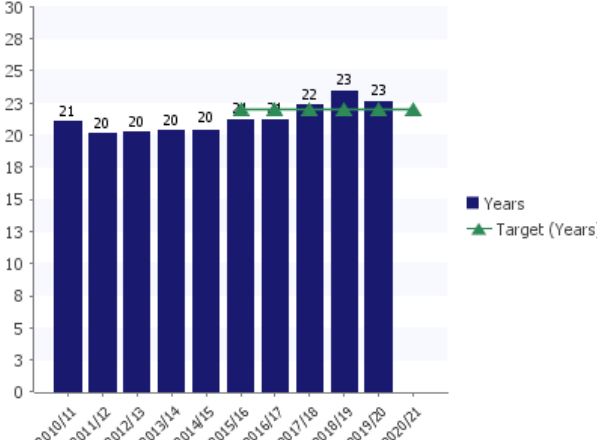
Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																		
DECREASE - A & E Attendances from Care Homes (NHSGGC data)	2020/21	236	400	Green	↑	<p>HSCP-GGC-CHA&E A & E Attendances from Care Homes (NHSGGC data) (REDUCE)</p> <table border="1"> <caption>HSCP-GGC-CHA&E A & E Attendances from Care Homes (NHSGGC data)</caption> <thead> <tr> <th>Year</th> <th>Attendances</th> <th>Target</th> </tr> </thead> <tbody> <tr> <td>2017/18</td> <td>541</td> <td>-</td> </tr> <tr> <td>2018/19</td> <td>430</td> <td>-</td> </tr> <tr> <td>2019/20</td> <td>394</td> <td>-</td> </tr> <tr> <td>2020/21</td> <td>236</td> <td>400</td> </tr> </tbody> </table>	Year	Attendances	Target	2017/18	541	-	2018/19	430	-	2019/20	394	-	2020/21	236	400	A&E attendances from Care Homes were low over 2020-21 with fluctuation month-on-month.			
Year	Attendances	Target																							
2017/18	541	-																							
2018/19	430	-																							
2019/20	394	-																							
2020/21	236	400																							
DECREASE - Emergency Admissions from Care Homes (NHSGGC data)	2020/21	154	240	Green	↑	<p>HSCP-GGC-CEmerg Emergency Admissions from Care Homes (NHSGGC data) (REDUCE)</p> <table border="1"> <caption>HSCP-GGC-CEmerg Emergency Admissions from Care Homes (NHSGGC data)</caption> <thead> <tr> <th>Year</th> <th>Admissions</th> <th>Target</th> </tr> </thead> <tbody> <tr> <td>2016/17</td> <td>166</td> <td>-</td> </tr> <tr> <td>2017/18</td> <td>338</td> <td>-</td> </tr> <tr> <td>2018/19</td> <td>261</td> <td>-</td> </tr> <tr> <td>2019/20</td> <td>233</td> <td>-</td> </tr> <tr> <td>2020/21</td> <td>154</td> <td>240</td> </tr> </tbody> </table>	Year	Admissions	Target	2016/17	166	-	2017/18	338	-	2018/19	261	-	2019/20	233	-	2020/21	154	240	Hospital admissions from care homes were lower than expected during the pandemic period.
Year	Admissions	Target																							
2016/17	166	-																							
2017/18	338	-																							
2018/19	261	-																							
2019/20	233	-																							
2020/21	154	240																							

Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note														
<p>DECREASE - Number of Emergency Admissions: Adults (NHSGGC data)</p>	<p>2020/21</p>	<p>6,217</p>	<p>7,124</p>	<p>Green</p>		<p>HSCP-GGC-EmerAd Number of Emergency Admissions: Adults (NHSGGC data) (REDUCE)</p>  <table border="1"> <caption>HSCP-GGC-EmerAd Number of Emergency Admissions: Adults (NHSGGC data)</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2016/17</td> <td>6,938</td> </tr> <tr> <td>2017/18</td> <td>6,946</td> </tr> <tr> <td>2018/19</td> <td>6,800</td> </tr> <tr> <td>2019/20</td> <td>6,805</td> </tr> <tr> <td>2020/21</td> <td>6,217</td> </tr> <tr> <td>Target (Years)</td> <td>7,124</td> </tr> </tbody> </table>	Year	Value	2016/17	6,938	2017/18	6,946	2018/19	6,800	2019/20	6,805	2020/21	6,217	Target (Years)	7,124	<p>Hospital admissions were lower during the pandemic period but rose when lockdown restrictions were reduced.</p>
Year	Value																				
2016/17	6,938																				
2017/18	6,946																				
2018/19	6,800																				
2019/20	6,805																				
2020/21	6,217																				
Target (Years)	7,124																				
<p>DECREASE - Occupied Bed Days (Adult – non-elective) (NHSGGC data)</p>	<p>2020/21</p>	<p>58,336</p>	<p>58,220</p>	<p>Green</p>		<p>HSCP-GGC-OBD Occupied Bed Days (Adult – non-elective) (REDUCE)</p>  <table border="1"> <caption>HSCP-GGC-OBD Occupied Bed Days (Adult – non-elective)</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2016/17</td> <td>66,792</td> </tr> <tr> <td>2017/18</td> <td>67,347</td> </tr> <tr> <td>2018/19</td> <td>63,068</td> </tr> <tr> <td>2019/20</td> <td>61,767</td> </tr> <tr> <td>2020/21</td> <td>58,336</td> </tr> <tr> <td>Target (Years)</td> <td>58,220</td> </tr> </tbody> </table>	Year	Value	2016/17	66,792	2017/18	67,347	2018/19	63,068	2019/20	61,767	2020/21	58,336	Target (Years)	58,220	<p>We have seen steady decline in non-elective bed days each year since 2017/18. Reduced bed days reflects the reduced use of hospitals during the pandemic.</p>
Year	Value																				
2016/17	66,792																				
2017/18	67,347																				
2018/19	63,068																				
2019/20	61,767																				
2020/21	58,336																				
Target (Years)	58,220																				

Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																
DECREASE - No. of A & E Attendances - All	2020/21	17,798	25,300	Green	↑	<p>HSCP-MSG-A&E No. of A & E Attendances - All</p> <table border="1"> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2019/20</td><td>28,546</td></tr> <tr><td>2020/21</td><td>25,300</td></tr> <tr><td>2021/22</td><td>25,812</td></tr> <tr><td>2022/23</td><td>26,993</td></tr> <tr><td>2023/24</td><td>27,850</td></tr> <tr><td>2024/25</td><td>27,644</td></tr> <tr><td>2025/26</td><td>17,798</td></tr> </tbody> </table>	Year	Value	2019/20	28,546	2020/21	25,300	2021/22	25,812	2022/23	26,993	2023/24	27,850	2024/25	27,644	2025/26	17,798	<p>Latest data released June 2021, data corrected back to April 2020. (Source: MSG Scottish Govt, June 2021)</p>
Year	Value																						
2019/20	28,546																						
2020/21	25,300																						
2021/22	25,812																						
2022/23	26,993																						
2023/24	27,850																						
2024/25	27,644																						
2025/26	17,798																						
DECREASE - No. of A & E Attendances – Adults	2020/21	13,677	18,332	Green	↑	<p>HSCP-MSG-A&E-Ad No. of A & E Attendances - Adults</p> <table border="1"> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2019/20</td><td>18,332</td></tr> <tr><td>2020/21</td><td>18,747</td></tr> <tr><td>2021/22</td><td>19,342</td></tr> <tr><td>2022/23</td><td>20,212</td></tr> <tr><td>2023/24</td><td>20,159</td></tr> <tr><td>2024/25</td><td>13,677</td></tr> </tbody> </table>	Year	Value	2019/20	18,332	2020/21	18,747	2021/22	19,342	2022/23	20,212	2023/24	20,159	2024/25	13,677	<p>Data to March 2021, historical data amended back to April 2019. This year's outturn is a significant fall on previous 2019/20 (20,159) due to the effects of the Covid pandemic. (Source: MSG Scottish Govt, June 2021)</p>		
Year	Value																						
2019/20	18,332																						
2020/21	18,747																						
2021/22	19,342																						
2022/23	20,212																						
2023/24	20,159																						
2024/25	13,677																						

Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																					
<p>DECREASE - Number of Emergency Admissions: Adults (18+)</p>	<p>2020/21</p>	<p>6,518</p>	<p>7,124</p>	<p>Green</p>	<p>↑</p>	<table border="1"> <caption>HSCP-MSG-EmerAd Number of Emergency Admissions: Adults</caption> <thead> <tr> <th>Year</th> <th>Number of Admissions</th> </tr> </thead> <tbody> <tr><td>2014/15</td><td>8,765</td></tr> <tr><td>2015/16</td><td>9,112</td></tr> <tr><td>2016/17</td><td>9,185</td></tr> <tr><td>2017/18</td><td>8,329</td></tr> <tr><td>2018/19</td><td>8,136</td></tr> <tr><td>2019/20</td><td>7,532</td></tr> <tr><td>2020/21</td><td>6,518</td></tr> </tbody> </table>	Year	Number of Admissions	2014/15	8,765	2015/16	9,112	2016/17	9,185	2017/18	8,329	2018/19	8,136	2019/20	7,532	2020/21	6,518	<p>Interim data Jan - Mar 2021, released June 2021. Monthly data corrected back to April 2020. (Source: MSG Scottish Govt, June 2021)</p>					
Year	Number of Admissions																											
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2020/21	6,518																											
<p>DECREASE - Emergency admission rate (per 100,000 population) for adults. (NI-12)</p>	<p>Q3 2020/21</p>	<p>2,106</p>	<p>Data Only</p>	<p>↓</p>	<table border="1"> <caption>HSCP-NI-12 Emergency admission rate (per 100,000 population) for adults (REDUCE)</caption> <thead> <tr> <th>Year</th> <th>Admission Rate (per 100,000)</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>9,682</td></tr> <tr><td>2011/12</td><td>10,521</td></tr> <tr><td>2012/13</td><td>10,676</td></tr> <tr><td>2013/14</td><td>10,491</td></tr> <tr><td>2014/15</td><td>10,729</td></tr> <tr><td>2015/16</td><td>11,401</td></tr> <tr><td>2016/17</td><td>11,425</td></tr> <tr><td>2017/18</td><td>10,497</td></tr> <tr><td>2018/19</td><td>10,340</td></tr> <tr><td>2019/20</td><td>10,438</td></tr> </tbody> </table>	Year	Admission Rate (per 100,000)	2010/11	9,682	2011/12	10,521	2012/13	10,676	2013/14	10,491	2014/15	10,729	2015/16	11,401	2016/17	11,425	2017/18	10,497	2018/19	10,340	2019/20	10,438	<p>Interim data March 2021 (Source: Public Health Scotland)</p>
Year	Admission Rate (per 100,000)																											
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Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																								
<p>DECREASE - Emergency bed day rate (per 100,000) for adults. (NI-13)</p>	<p>Q3 2020/21</p>	<p>20,557</p>	<p>29,000</p>	<p>Green</p>		<p>HSCP-NI-13 Emergency bed day rate (per 100,000) for adults (REDUCE)</p>  <table border="1"> <caption>HSCP-NI-13 Emergency bed day rate (per 100,000) for adults</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>119,760</td></tr> <tr><td>2011/12</td><td>123,545</td></tr> <tr><td>2012/13</td><td>109,082</td></tr> <tr><td>2013/14</td><td>113,242</td></tr> <tr><td>2014/15</td><td>117,771</td></tr> <tr><td>2015/16</td><td>122,875</td></tr> <tr><td>2016/17</td><td>121,097</td></tr> <tr><td>2017/18</td><td>118,336</td></tr> <tr><td>2018/19</td><td>115,623</td></tr> <tr><td>2019/20</td><td>105,623</td></tr> <tr><td>2020/21</td><td>20,557</td></tr> </tbody> </table>	Year	Value	2010/11	119,760	2011/12	123,545	2012/13	109,082	2013/14	113,242	2014/15	117,771	2015/16	122,875	2016/17	121,097	2017/18	118,336	2018/19	115,623	2019/20	105,623	2020/21	20,557	<p>Interim data at March 2021 (Source: Public Health Scotland)</p>
Year	Value																														
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2018/19	115,623																														
2019/20	105,623																														
2020/21	20,557																														
<p>DECREASE - Number of re-admissions to an acute hospital within 28 days of discharge per 1,000 admissions. (N1-14)</p>	<p>Q3 2020/21</p>	<p>78</p>	<p>100</p>	<p>Green</p>		<p>HSCP-NI-14 Re-admission to hospital within 28 days (per 1,000 population) (REDUCE)</p>  <table border="1"> <caption>HSCP-NI-14 Re-admission to hospital within 28 days (per 1,000 population)</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>71</td></tr> <tr><td>2011/12</td><td>76</td></tr> <tr><td>2012/13</td><td>78</td></tr> <tr><td>2013/14</td><td>74</td></tr> <tr><td>2014/15</td><td>76</td></tr> <tr><td>2015/16</td><td>79</td></tr> <tr><td>2016/17</td><td>82</td></tr> <tr><td>2017/18</td><td>79</td></tr> <tr><td>2018/19</td><td>79</td></tr> <tr><td>2019/20</td><td>76</td></tr> <tr><td>2020/21</td><td>78</td></tr> </tbody> </table>	Year	Value	2010/11	71	2011/12	76	2012/13	78	2013/14	74	2014/15	76	2015/16	79	2016/17	82	2017/18	79	2018/19	79	2019/20	76	2020/21	78	<p>Interim data at March 2021 (Source: Public Health Scotland). No national target established to date, local target of 100 re-admissions per 1,000 established in June 2019 (based on historic national average).</p>
Year	Value																														
2010/11	71																														
2011/12	76																														
2012/13	78																														
2013/14	74																														
2014/15	76																														
2015/16	79																														
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2017/18	79																														
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2019/20	76																														
2020/21	78																														

Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																								
<p>INCREASE - Proportion of last 6 months of life spent at home or in a community setting. (NI-15)</p>	<p>Q3 2020/21</p>	<p>91%</p>	<p>86%</p>	<p>Green</p>		<p>HSCP-NI-15 Proportion of last 6 months of life spent at home or in a community setting (INCREASE)</p>  <table border="1"> <caption>HSCP-NI-15 Data</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>82%</td></tr> <tr><td>2011/12</td><td>84%</td></tr> <tr><td>2012/13</td><td>84%</td></tr> <tr><td>2013/14</td><td>85%</td></tr> <tr><td>2014/15</td><td>84%</td></tr> <tr><td>2015/16</td><td>86%</td></tr> <tr><td>2016/17</td><td>86%</td></tr> <tr><td>2017/18</td><td>85%</td></tr> <tr><td>2018/19</td><td>86%</td></tr> <tr><td>2019/20</td><td>89%</td></tr> <tr><td>2020/21</td><td>91%</td></tr> </tbody> </table>	Year	Value (%)	2010/11	82%	2011/12	84%	2012/13	84%	2013/14	85%	2014/15	84%	2015/16	86%	2016/17	86%	2017/18	85%	2018/19	86%	2019/20	89%	2020/21	91%	<p>Interim data at March 2021 (Source: Public Health Scotland).</p>
Year	Value (%)																														
2010/11	82%																														
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2019/20	89%																														
2020/21	91%																														
<p>DECREASE - Rate per 1,000 population of falls that occur in the population (aged 65 plus) who were admitted as an emergency to hospital. (NI-16)</p>	<p>Q3 2020/21</p>	<p>5.8</p>	<p>5.5</p>	<p>Amber</p>		<p>HSCP-NI-16 Falls rate per 1,000 population aged 65+ (REDUCE)</p>  <table border="1"> <caption>HSCP-NI-16 Data</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>21</td></tr> <tr><td>2011/12</td><td>20</td></tr> <tr><td>2012/13</td><td>20</td></tr> <tr><td>2013/14</td><td>20</td></tr> <tr><td>2014/15</td><td>20</td></tr> <tr><td>2015/16</td><td>22</td></tr> <tr><td>2016/17</td><td>22</td></tr> <tr><td>2017/18</td><td>22</td></tr> <tr><td>2018/19</td><td>23</td></tr> <tr><td>2019/20</td><td>23</td></tr> <tr><td>2020/21</td><td>5.8</td></tr> </tbody> </table>	Year	Value	2010/11	21	2011/12	20	2012/13	20	2013/14	20	2014/15	20	2015/16	22	2016/17	22	2017/18	22	2018/19	23	2019/20	23	2020/21	5.8	<p>Interim data March 2021 (Source: Public Health Scotland)</p>
Year	Value																														
2010/11	21																														
2011/12	20																														
2012/13	20																														
2013/14	20																														
2014/15	20																														
2015/16	22																														
2016/17	22																														
2017/18	22																														
2018/19	23																														
2019/20	23																														
2020/21	5.8																														

Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																				
DECREASE - The number of bed days due to delay discharge that have been recorded for people aged 75+ resident within the Local Authority area, per 1,000 population in the area. (NI-19)	Q3 2020/21	62		Data Only	↓	<p>HSCP-NI-19 Number of days people aged 75+ spend in hospital when they are ready to be discharged, per 1,000 population (REDUCE)</p> <table border="1"> <caption>HSCP-NI-19 Data</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr><td>2012/13</td><td>656</td></tr> <tr><td>2013/14</td><td>344</td></tr> <tr><td>2014/15</td><td>213</td></tr> <tr><td>2015/16</td><td>209</td></tr> <tr><td>2016/17</td><td>228</td></tr> <tr><td>2017/18</td><td>117</td></tr> <tr><td>2018/19</td><td>170</td></tr> <tr><td>2019/20</td><td>156</td></tr> <tr><td>2020/21</td><td>62</td></tr> </tbody> </table>	Year	Value	2012/13	656	2013/14	344	2014/15	213	2015/16	209	2016/17	228	2017/18	117	2018/19	170	2019/20	156	2020/21	62	Interim figure at March 2021 (Source: Public Health Scotland)
Year	Value																										
2012/13	656																										
2013/14	344																										
2014/15	213																										
2015/16	209																										
2016/17	228																										
2017/18	117																										
2018/19	170																										
2019/20	156																										
2020/21	62																										

7 - People who care for someone are able to exercise choice and control in relation to their caring activities



Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																														
INCREASE - People reporting 'quality of life for carers' needs fully met (%)	2020/21	91%	73%	Green	↓	<p>HSCP-TP-7 People reporting 'quality of life for carers' needs fully met (%) (INCREASE)</p> <table border="1"> <caption>HSCP-TP-7 Data</caption> <thead> <tr> <th>Year</th> <th>Value (%)</th> </tr> </thead> <tbody> <tr><td>2009/10</td><td>82%</td></tr> <tr><td>2010/11</td><td>67%</td></tr> <tr><td>2011/12</td><td>69%</td></tr> <tr><td>2012/13</td><td>69%</td></tr> <tr><td>2013/14</td><td>71%</td></tr> <tr><td>2014/15</td><td>75%</td></tr> <tr><td>2015/16</td><td>70%</td></tr> <tr><td>2016/17</td><td>70%</td></tr> <tr><td>2017/18</td><td>72%</td></tr> <tr><td>2018/19</td><td>78%</td></tr> <tr><td>2019/20</td><td>92%</td></tr> <tr><td>2020/21</td><td>91%</td></tr> <tr><td>2021/22</td><td>92%</td></tr> <tr><td>2022/23</td><td>92%</td></tr> </tbody> </table>	Year	Value (%)	2009/10	82%	2010/11	67%	2011/12	69%	2012/13	69%	2013/14	71%	2014/15	75%	2015/16	70%	2016/17	70%	2017/18	72%	2018/19	78%	2019/20	92%	2020/21	91%	2021/22	92%	2022/23	92%	In 2020/21 of the 154 valid responses 141 reported their needs met. This year's figure is similar to 2019/20 (92%)
Year	Value (%)																																				
2009/10	82%																																				
2010/11	67%																																				
2011/12	69%																																				
2012/13	69%																																				
2013/14	71%																																				
2014/15	75%																																				
2015/16	70%																																				
2016/17	70%																																				
2017/18	72%																																				
2018/19	78%																																				
2019/20	92%																																				
2020/21	91%																																				
2021/22	92%																																				
2022/23	92%																																				

8 - Organisational outcomes


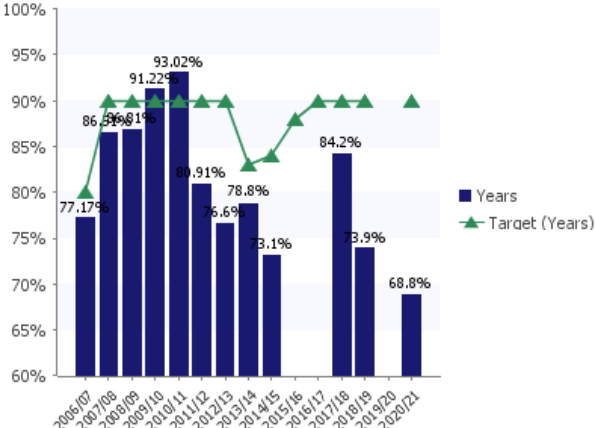


8.1 Our customers

Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note										
DECREASE - Average time in working days to respond to complaints at stage one (HSCP)	2020/21	9.9	5	Red	↓	<p>SP5004aHSCP The average time in working days to respond to complaints at stage one (HSCP) (REDUCE)</p> <table border="1"> <caption>SP5004aHSCP Data</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2017/18</td> <td>8.1</td> </tr> <tr> <td>2018/19</td> <td>4.6</td> </tr> <tr> <td>2019/20</td> <td>5.4</td> </tr> <tr> <td>2020/21</td> <td>9.9</td> </tr> </tbody> </table>	Year	Value	2017/18	8.1	2018/19	4.6	2019/20	5.4	2020/21	9.9	Relates to 72 complaints, data is provisional. Performance affected by focus on pandemic response.
Year	Value																
2017/18	8.1																
2018/19	4.6																
2019/20	5.4																
2020/21	9.9																
DECREASE - Average time in working days to respond to complaints at investigation (stage 2 and esc combined) (HSCP)	2020/21	37.4	20	Red	↓	<p>SP5004dHSCP The average time in working days to respond to complaints at investigation (stage 2 and esc combined) (HSCP) (REDUCE)</p> <table border="1"> <caption>SP5004dHSCP Data</caption> <thead> <tr> <th>Year</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>2017/18</td> <td>20</td> </tr> <tr> <td>2018/19</td> <td>25.7</td> </tr> <tr> <td>2019/20</td> <td>22.2</td> </tr> <tr> <td>2020/21</td> <td>37.4</td> </tr> </tbody> </table>	Year	Value	2017/18	20	2018/19	25.7	2019/20	22.2	2020/21	37.4	Relates to 27 complaints, data is provisional. Performance affected by focus on pandemic response.
Year	Value																
2017/18	20																
2018/19	25.7																
2019/20	22.2																
2020/21	37.4																

Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																								
<p>INCREASE - Percentage of HSCP (NHS) complaints received and responded to within timescale (5 working days Frontline, 20 days Investigation)</p>	2020/21	100%	70%	Green	↑	<p>HSCP Qual 01 Percentage of HSCP (NHS) complaints received and responded to within timescale (INCREASE)</p> <table border="1"> <caption>HSCP Qual 01 Performance Data</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>70%</td></tr> <tr><td>2011/12</td><td>80%</td></tr> <tr><td>2012/13</td><td>100%</td></tr> <tr><td>2013/14</td><td>84%</td></tr> <tr><td>2014/15</td><td>70%</td></tr> <tr><td>2015/16</td><td>100%</td></tr> <tr><td>2016/17</td><td>63%</td></tr> <tr><td>2017/18</td><td>100%</td></tr> <tr><td>2018/19</td><td>68%</td></tr> <tr><td>2019/20</td><td>56%</td></tr> <tr><td>2020/21</td><td>100%</td></tr> </tbody> </table>	Year	Percentage	2010/11	70%	2011/12	80%	2012/13	100%	2013/14	84%	2014/15	70%	2015/16	100%	2016/17	63%	2017/18	100%	2018/19	68%	2019/20	56%	2020/21	100%	<p>Of the 13 NHS complaints received in 2020/21 all were responded to within target timescales. 5 were categorised as frontline and 8 were dealt with as investigations. This was a significant achievement despite the pressures on staff during the Covid-19 pandemic.</p>
Year	Percentage																														
2010/11	70%																														
2011/12	80%																														
2012/13	100%																														
2013/14	84%																														
2014/15	70%																														
2015/16	100%																														
2016/17	63%																														
2017/18	100%																														
2018/19	68%																														
2019/20	56%																														
2020/21	100%																														
<p>INCREASE - Percentage of HSCP (local authority) complaints received and responded to within timescale (5 working days Frontline; 20 days Investigation)</p>	2020/21	65%	100%	Red	↓	<p>HSCP Qual 02 Percentage of HSCP (local authority) complaints received and responded to within timescale (INCREASE)</p> <table border="1"> <caption>HSCP Qual 02 Performance Data</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>100%</td></tr> <tr><td>2011/12</td><td>79%</td></tr> <tr><td>2012/13</td><td>69%</td></tr> <tr><td>2013/14</td><td>83%</td></tr> <tr><td>2014/15</td><td>60%</td></tr> <tr><td>2015/16</td><td>77%</td></tr> <tr><td>2016/17</td><td>68%</td></tr> <tr><td>2017/18</td><td>81%</td></tr> <tr><td>2018/19</td><td>72%</td></tr> <tr><td>2019/20</td><td>72%</td></tr> <tr><td>2020/21</td><td>65%</td></tr> </tbody> </table>	Year	Percentage	2010/11	100%	2011/12	79%	2012/13	69%	2013/14	83%	2014/15	60%	2015/16	77%	2016/17	68%	2017/18	81%	2018/19	72%	2019/20	72%	2020/21	65%	<p>There were 94 local authority complaints in 2020/21. Of the 69 frontline complaints, 47 (67%) were responded to within timescale. Of 25 investigations, 15 (60%) were responded to on time. This is a decline in performance from the previous year reflecting staff pressures during the Covid-19 pandemic.</p>
Year	Percentage																														
2010/11	100%																														
2011/12	79%																														
2012/13	69%																														
2013/14	83%																														
2014/15	60%																														
2015/16	77%																														
2016/17	68%																														
2017/18	81%																														
2018/19	72%																														
2019/20	72%																														
2020/21	65%																														

Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																
<p>INCREASE - Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections. (NI-17)</p>	2019/20	84%		Data Only		<p>HSCP-NI-17 Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections (INCREASE)</p> <table border="1"> <caption>HSCP-NI-17 Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections</caption> <thead> <tr> <th>Year</th> <th>Proportion (%)</th> </tr> </thead> <tbody> <tr> <td>2014/15</td> <td>88%</td> </tr> <tr> <td>2015/16</td> <td>86%</td> </tr> <tr> <td>2016/17</td> <td>88%</td> </tr> <tr> <td>2017/18</td> <td>88%</td> </tr> <tr> <td>2018/19</td> <td>84%</td> </tr> <tr> <td>2019/20</td> <td>84%</td> </tr> <tr> <td>2020/21</td> <td>84%</td> </tr> </tbody> </table>	Year	Proportion (%)	2014/15	88%	2015/16	86%	2016/17	88%	2017/18	88%	2018/19	84%	2019/20	84%	2020/21	84%	<p>This is the same as last year, in comparison the Scotland figure was 81.8%. Data at March 2021 (Source: Care Inspectorate). Note this indicator is still at the developmental stage.</p>
Year	Proportion (%)																						
2014/15	88%																						
2015/16	86%																						
2016/17	88%																						
2017/18	88%																						
2018/19	84%																						
2019/20	84%																						
2020/21	84%																						
<p>DECREASE - The total number of complaints received - HSCP</p>	2020/21	95		Data Only		<p>SPS0001HSCP The total number of complaints received (HSCP) (REDUCE)</p> <table border="1"> <caption>SPS0001HSCP The total number of complaints received (HSCP)</caption> <thead> <tr> <th>Year</th> <th>Total Number of Complaints</th> </tr> </thead> <tbody> <tr> <td>2017/18</td> <td>68</td> </tr> <tr> <td>2018/19</td> <td>0</td> </tr> <tr> <td>2019/20</td> <td>168</td> </tr> <tr> <td>2020/21</td> <td>95</td> </tr> </tbody> </table>	Year	Total Number of Complaints	2017/18	68	2018/19	0	2019/20	168	2020/21	95	<p>0.99 per 1,000 population. Data is provisional. The number of complaints received decreased significantly during the pandemic (down from 168 in 2019/20).</p>						
Year	Total Number of Complaints																						
2017/18	68																						
2018/19	0																						
2019/20	168																						
2020/21	95																						


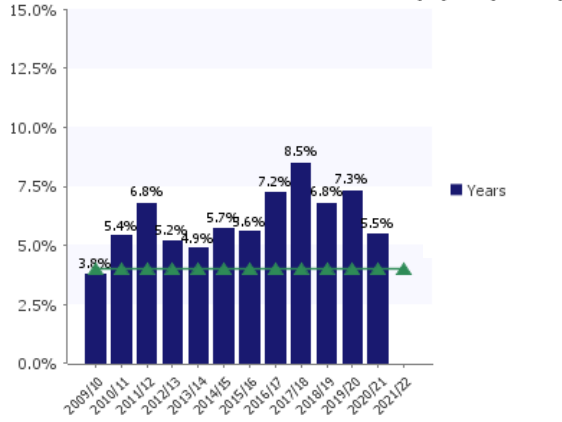

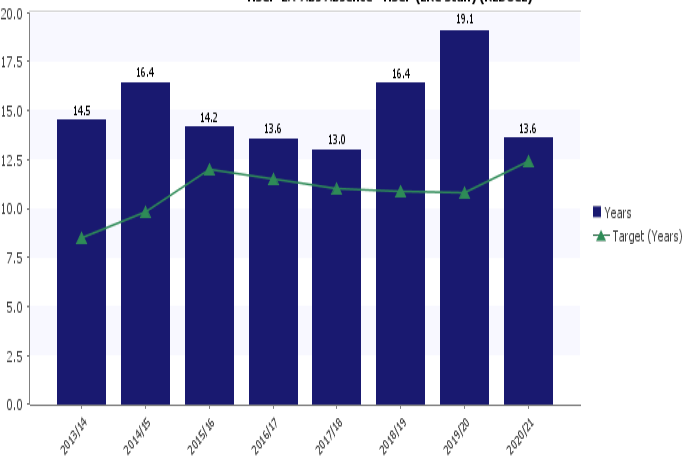
8.2 Efficiency

Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																																
<p>INCREASE - Payment of invoices: Percentage invoices paid within agreed period (30 days)</p>	<p>2020/21</p>	<p>68.8%</p>	<p>90%</p>	<p>Red</p>		<p>CHCP-IN02 Payment of invoices: Percentage invoices paid within agreed period (30 days) (INCREASE)</p>  <table border="1"> <caption>CHCP-IN02 Payment of invoices: Percentage invoices paid within agreed period (30 days)</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>2006/07</td><td>77.17%</td></tr> <tr><td>2007/08</td><td>86.91%</td></tr> <tr><td>2008/09</td><td>89.61%</td></tr> <tr><td>2009/10</td><td>91.22%</td></tr> <tr><td>2010/11</td><td>93.02%</td></tr> <tr><td>2011/12</td><td>89.91%</td></tr> <tr><td>2012/13</td><td>78.8%</td></tr> <tr><td>2013/14</td><td>78.8%</td></tr> <tr><td>2014/15</td><td>73.1%</td></tr> <tr><td>2015/16</td><td>84.2%</td></tr> <tr><td>2016/17</td><td>84.2%</td></tr> <tr><td>2017/18</td><td>84.2%</td></tr> <tr><td>2018/19</td><td>84.2%</td></tr> <tr><td>2019/20</td><td>84.2%</td></tr> <tr><td>2020/21</td><td>68.8%</td></tr> </tbody> </table>	Year	Percentage	2006/07	77.17%	2007/08	86.91%	2008/09	89.61%	2009/10	91.22%	2010/11	93.02%	2011/12	89.91%	2012/13	78.8%	2013/14	78.8%	2014/15	73.1%	2015/16	84.2%	2016/17	84.2%	2017/18	84.2%	2018/19	84.2%	2019/20	84.2%	2020/21	68.8%	<p>Invoice processing timescales were impacted significantly in the first months of the pandemic but have recovered over the remainder of the year. Payments within the 30 day target were at 86% for March 2021. Moving forward we will continue to work with the Council to improve Purchase2Pay processes.</p>
Year	Percentage																																						
2006/07	77.17%																																						
2007/08	86.91%																																						
2008/09	89.61%																																						
2009/10	91.22%																																						
2010/11	93.02%																																						
2011/12	89.91%																																						
2012/13	78.8%																																						
2013/14	78.8%																																						
2014/15	73.1%																																						
2015/16	84.2%																																						
2016/17	84.2%																																						
2017/18	84.2%																																						
2018/19	84.2%																																						
2019/20	84.2%																																						
2020/21	68.8%																																						
<p>INCREASE - Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency. (NI-20)</p>	<p>Q3 2020/21</p>	<p>17%</p>	<p>24%</p>	<p>Green</p>		<p>HSCP-NI-20 Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency (REDUCE)</p>  <table border="1"> <caption>HSCP-NI-20 Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>21%</td></tr> <tr><td>2011/12</td><td>21%</td></tr> <tr><td>2012/13</td><td>21%</td></tr> <tr><td>2013/14</td><td>20%</td></tr> <tr><td>2014/15</td><td>19%</td></tr> <tr><td>2015/16</td><td>23%</td></tr> <tr><td>2016/17</td><td>23%</td></tr> <tr><td>2017/18</td><td>23%</td></tr> <tr><td>2018/19</td><td>21%</td></tr> <tr><td>2019/20</td><td>21%</td></tr> <tr><td>2020/21</td><td>17%</td></tr> </tbody> </table>	Year	Percentage	2010/11	21%	2011/12	21%	2012/13	21%	2013/14	20%	2014/15	19%	2015/16	23%	2016/17	23%	2017/18	23%	2018/19	21%	2019/20	21%	2020/21	17%	<p>Interim data at March 2021 (Source: Public Health Scotland)</p>								
Year	Percentage																																						
2010/11	21%																																						
2011/12	21%																																						
2012/13	21%																																						
2013/14	20%																																						
2014/15	19%																																						
2015/16	23%																																						
2016/17	23%																																						
2017/18	23%																																						
2018/19	21%																																						
2019/20	21%																																						
2020/21	17%																																						

Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																						
DECREASE - The gross cost of "children looked after" in residential based services per child per week £ (LGBF)	2019/20	£4,109			↑	<p>SCHN08a The gross cost of "children looked after" in residential based services per child per week £ (REDUCE)</p> <table border="1"> <caption>SCHN08a Data</caption> <thead> <tr> <th>Year</th> <th>Cost (£)</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>4830</td></tr> <tr><td>2011/12</td><td>3010</td></tr> <tr><td>2012/13</td><td>5810</td></tr> <tr><td>2013/14</td><td>4357</td></tr> <tr><td>2014/15</td><td>6889</td></tr> <tr><td>2015/16</td><td>7776</td></tr> <tr><td>2016/17</td><td>2983</td></tr> <tr><td>2017/18</td><td>3896</td></tr> <tr><td>2018/19</td><td>12308</td></tr> <tr><td>2019/20</td><td>4109</td></tr> </tbody> </table>	Year	Cost (£)	2010/11	4830	2011/12	3010	2012/13	5810	2013/14	4357	2014/15	6889	2015/16	7776	2016/17	2983	2017/18	3896	2018/19	12308	2019/20	4109	Gross costs of residential placements are relatively stable and comparable with the Scottish average and the benchmarking family group.
Year	Cost (£)																												
2010/11	4830																												
2011/12	3010																												
2012/13	5810																												
2013/14	4357																												
2014/15	6889																												
2015/16	7776																												
2016/17	2983																												
2017/18	3896																												
2018/19	12308																												
2019/20	4109																												
DECREASE - The gross cost of "children looked after" in a community setting per child per week £ (LGBF)	2019/20	£223			↓	<p>SCHN08b The gross cost of "children looked after" in a community setting per child per week £ (REDUCE)</p> <table border="1"> <caption>SCHN08b Data</caption> <thead> <tr> <th>Year</th> <th>Cost (£)</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>147</td></tr> <tr><td>2011/12</td><td>95</td></tr> <tr><td>2012/13</td><td>108</td></tr> <tr><td>2013/14</td><td>151</td></tr> <tr><td>2014/15</td><td>186</td></tr> <tr><td>2015/16</td><td>191</td></tr> <tr><td>2016/17</td><td>178</td></tr> <tr><td>2017/18</td><td>205</td></tr> <tr><td>2018/19</td><td>217</td></tr> <tr><td>2019/20</td><td>223</td></tr> </tbody> </table>	Year	Cost (£)	2010/11	147	2011/12	95	2012/13	108	2013/14	151	2014/15	186	2015/16	191	2016/17	178	2017/18	205	2018/19	217	2019/20	223	Community settings gross costs for children subject to statutory measures are the same as the previous year and we are ranked 4 th in Scotland. N.b. formulae for costings is to be revised as part of local accountancy review for following year.
Year	Cost (£)																												
2010/11	147																												
2011/12	95																												
2012/13	108																												
2013/14	151																												
2014/15	186																												
2015/16	191																												
2016/17	178																												
2017/18	205																												
2018/19	217																												
2019/20	223																												

Description	Data Period	Current Value	Current Target	Traffic Light	Trend Arrow	Trend Chart	Latest Note																								
DECREASE - Older Persons (Over65) Home Care Costs per Hour (LGBF)	2019/20	£25		Data Only	■	<p>SW01 Home care costs for people aged 65 or over per hour £ (REDUCE)</p> <table border="1"> <caption>SW01 Home care costs for people aged 65 or over per hour £ (REDUCE)</caption> <thead> <tr> <th>Year</th> <th>Cost (£)</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>£9</td></tr> <tr><td>2011/12</td><td>£11</td></tr> <tr><td>2012/13</td><td>£10</td></tr> <tr><td>2013/14</td><td>£18</td></tr> <tr><td>2014/15</td><td>£22</td></tr> <tr><td>2015/16</td><td>£25</td></tr> <tr><td>2016/17</td><td>£23</td></tr> <tr><td>2017/18</td><td>£23</td></tr> <tr><td>2018/19</td><td>£25</td></tr> <tr><td>2019/20</td><td>£25</td></tr> <tr><td>2020/21</td><td>£25</td></tr> </tbody> </table>	Year	Cost (£)	2010/11	£9	2011/12	£11	2012/13	£10	2013/14	£18	2014/15	£22	2015/16	£25	2016/17	£23	2017/18	£23	2018/19	£25	2019/20	£25	2020/21	£25	Performance has remained consistent with the previous year at £25/h. We performed more favourably than other partnerships in 2019/20 and our ranking improved from 17 th to 15 th .
Year	Cost (£)																														
2010/11	£9																														
2011/12	£11																														
2012/13	£10																														
2013/14	£18																														
2014/15	£22																														
2015/16	£25																														
2016/17	£23																														
2017/18	£23																														
2018/19	£25																														
2019/20	£25																														
2020/21	£25																														
DECREASE - The Net Cost of Residential Care Services per Older Adult (+65) per Week (LGBF)	2019/20	£170		Data Only	▲	<p>SW05 Net Cost of Residential Care Services per Older Adult (+65) per Week (REDUCE)</p> <table border="1"> <caption>SW05 Net Cost of Residential Care Services per Older Adult (+65) per Week (REDUCE)</caption> <thead> <tr> <th>Year</th> <th>Cost (£)</th> </tr> </thead> <tbody> <tr><td>2010/11</td><td>£353</td></tr> <tr><td>2011/12</td><td>£388</td></tr> <tr><td>2012/13</td><td>£377</td></tr> <tr><td>2013/14</td><td>£370</td></tr> <tr><td>2014/15</td><td>£364</td></tr> <tr><td>2015/16</td><td>£326</td></tr> <tr><td>2016/17</td><td>£233</td></tr> <tr><td>2017/18</td><td>£165</td></tr> <tr><td>2018/19</td><td>£160</td></tr> <tr><td>2019/20</td><td>£170</td></tr> <tr><td>2020/21</td><td>£170</td></tr> </tbody> </table>	Year	Cost (£)	2010/11	£353	2011/12	£388	2012/13	£377	2013/14	£370	2014/15	£364	2015/16	£326	2016/17	£233	2017/18	£165	2018/19	£160	2019/20	£170	2020/21	£170	We continue to be one of the best performers in Scotland on this measure (ranked 2 nd) although costs rose slightly compared with the previous year.
Year	Cost (£)																														
2010/11	£353																														
2011/12	£388																														
2012/13	£377																														
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2014/15	£364																														
2015/16	£326																														
2016/17	£233																														
2017/18	£165																														
2018/19	£160																														
2019/20	£170																														
2020/21	£170																														

8.3 Our People

Description	Data Period	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Trend Chart	Notes & History Latest Note
<p>DECREASE - Percentage of days lost to sickness absence for HSCP NHS staff</p>	<p>2020/21</p>	<p>5.5%</p>		<p>Data Only</p>		<p>HSCP-AB05d Sickness absence (%) NHS (REDUCE)</p> 	<p>Within the NHS the average percentage for the year 2020/21 is 5.5% against a target of 4%. This compares to 7.3% for the year 2019/20 a reduction of over 2% year on year. Again the reasons for the reductions can be attributed to the reduction in short term absence. The top reason for absence prior to the pandemic was psychological reasons and we expect an increase in this for 2021/22. Absence levels reduced to 3.8 and 4.2 respectively in Dec and Jan. However have been rising in February and March due to a number of serious cases where the expectation is ill health retiral.</p>
<p>DECREASE - Sickness absence days lost to sickness absence per employee - HSCP (LA staff)</p>	<p>2020/21</p>	<p>13.6</p>		<p>Data Only</p>		<p>HSCP-LA-Abs Absence - HSCP (ERC Staff) (REDUCE)</p> 	<p>Within the Council the cumulative absence PI based on the Q1-Q4 above for the year 2020/21 is 13.61 days lost per fte. This is a significant reduction from the 19/20 total of 19.1 days lost per fte. It should be noted no formal target were set for 2021. The reduction in absence is in part down to the social distancing and reduction in other infections and the ongoing work of the Care at Home and HR teams to reduce absence within the service. Prior to the pandemic the top reason for absence within the HSCP was non work related stress. Given the increases demand on our workforce during the pandemic and levels personal stress the pandemic has caused we anticipate there will be increase in absence levels due to stress / mental health. As restrictions lift</p>

Description	Data Period	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Trend Chart	Notes & History Latest Note										
							there will be more opportunities for people to mix and therefore we anticipate an increase in short term illness due to infections.										
INCREASE - Percentage of staff who say they would recommend their workplace as a good place to work. (NI-10)	2019/20	77%		Data Only	↑	<p>HSCP-NI-10 Percentage of staff who say they would recommend their workplace as a good place to work (INCREASE)</p> <table border="1"> <caption>HSCP-NI-10 Percentage of staff who say they would recommend their workplace as a good place to work (INCREASE)</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>2016/17</td> <td>75%</td> </tr> <tr> <td>2017/18</td> <td>75%</td> </tr> <tr> <td>2018/19</td> <td>77%</td> </tr> <tr> <td>2019/20</td> <td>77%</td> </tr> </tbody> </table>	Year	Percentage	2016/17	75%	2017/18	75%	2018/19	77%	2019/20	77%	National Indicator remains under development at March 2021 (Source: Public Health Scotland). Data relates to iMatter Survey Report July 2018 as a proxy figure.
Year	Percentage																
2016/17	75%																
2017/18	75%																
2018/19	77%																
2019/20	77%																

Performance indicators with no new updates

(n.b. Latest data not published for National Core Suite of Integration Indicators 1 to 9 due to proposed changes to survey methodology – to be included in our Annual Performance Report)

- Percentage of adults able to look after their health very well or quite well (NI-1)
- Percentage of adults supported at home who agreed that they are supported to live as independently as possible. (NI-2)
- Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided (NI-3)
- Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated (NI-4)
- Total % of adults receiving any care or support who rated it as excellent or good. (NI-5)
- Percentage of people with positive experience of the care provided by their GP Practice. (NI-6)
- Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life (NI-7)
- Total combined % carers who feel supported to continue in their caring role. (NI-8)
- Percentage of adults supported at home who agreed they felt safe. (NI-9)



Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board	
Held on	23 June 2021	
Agenda Item	10	
Title	HSCP Recovery and Renewal Programme Update	
Summary		
<p>The purpose of this report is to update the Integration Joint Board on the HSCP Recovery and Renewal Programme. The Recovery and Renewal Programme combines the overall aims of both recovery and transformation under one programme. The programme will seek to ensure that the lessons learned during the pandemic are used to inform recovery as well as transform services in the future.</p>		
Presented by	Lesley Bairden, Head of Finance & Resources (Chief Financial Officer)	
Action Required		
<p>It is recommended that the Integration Joint Board:</p> <ul style="list-style-type: none"> • Note and comment on the development of the HSCP Recovery and Renewal Programme • Agree to receive regular update reports at future meetings 		
Directions	Implications	
<input checked="" type="checkbox"/> No Directions Required <input type="checkbox"/> Directions to East Renfrewshire Council (ERC) <input type="checkbox"/> Directions to NHS Greater Glasgow and Clyde (NHSGGC) <input type="checkbox"/> Directions to both ERC and NHSGGC	<input type="checkbox"/> Finance <input type="checkbox"/> Policy <input type="checkbox"/> Workforce <input type="checkbox"/> Equalities <input type="checkbox"/> Risk <input type="checkbox"/> Legal <input type="checkbox"/> Infrastructure <input type="checkbox"/> Fairer Scotland Duty	

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

23 June 2021

Report by Chief Officer

HSCP RECOVERY AND RENEWAL PROGRAMME UPDATE

PURPOSE OF REPORT

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

RECOMMENDATIONS

2. It is recommended that the Integration Joint Board:
 - a) Note and comment on the development of the HSCP Recovery and Renewal Programme; and
 - b) Agree to receive regular update reports at future meetings

BACKGROUND

3. At the May meeting of the Integration Joint Board members will recall a presentation on the proposed Recovery and Renewal Programme for the HSCP. The presentation outlined the programme of work to be undertaken that will seek to support the challenges faced in terms of operational recovery from Covid-19 whilst reflecting on and incorporating the lessons learned during this time.
4. Prior to the pandemic the HSCP had refreshed its existing change programme and had set out an ambitious change programme to support the delivery of key projects to transform service delivery and realise identified efficiencies. The programme was unavoidably put on hold to allow the HSCP to respond to the significant challenges presented by the pandemic. A separate recovery programme was subsequently established to oversee the return to more normalised service delivery. This too had to be paused to allow focus on responding to the second wave of the pandemic. As the HSCP once more looks at entering into recovery mode it is believed the opportunity now exists to revisit the original change programme and expand this into a broader transformation programme which incorporates recovery.

REPORT

5. The Recovery and Renewal Programme combines the overall aims of both recovery and transformation under one programme. The programme will seek to ensure that the lessons learned during the pandemic are used to inform recovery as well as transform services in the future. The aims and objectives of the programme are:
 - To establish a comprehensive programme of recovery and renewal to support key areas of change and development across the HSCP
 - Support the operational challenges faced by the partnership as a result of the pandemic
 - Focus on wellbeing and support of staff and those who use our services

- Build on the lessons learned and new ways of working during the response and initial recovery phase
 - Work with those who use our services and our partners to develop and enhance services
 - Delivery of financial efficiencies and savings
 - Informed by and informing the delivery of the current and future HSCP strategic plans
6. The programme consists of four overarching themes under which projects are aligned. The four themes of the Recovery and Renewal Programme are:
- Recovery
 - Wellbeing
 - Individual's Experience
 - Business Systems and Processes
7. Projects within the recovery theme focus on the transition from response towards the new normal. The projects under this theme cover the new areas of work as a result of the pandemic including adult vaccination programme and a premises project looking at safely managing the remobilisation of building based services whilst adhering to social distancing.
8. The importance of the wellbeing of staff and our partners across East Renfrewshire is a strategic priority for the Partnership. Projects include a workforce wellbeing action plan and development of wellbeing champions.
9. Over the last year the traditional model of service delivery has changed as we responded to the pandemic. Projects under the individual's experience theme will see us engage with those who use our services to reflect on the changes, consider the role of technology and identify how we can further improve/redesign services. Projects include the second phase of care at home redesign and the learning disability overnight support project.
10. The theme of business systems and processes is predominately focused on information systems and process improvement. There are significant projects underway including the replacement of the HSCP case recording system and care at home scheduling system.
11. The delivery of the programme and associated outcomes and benefits will be monitored via a robust governance structure. The project management approach adopted will embed clear lines of escalation and reporting. This will enable risks, issues and progress issues to be identified and addressed early. The Recovery and Renewal Programme Board will comprise the HSCP Management team, Change Programme Manager and other key roles as required.
12. To ensure the programme delivers and does not over commit resources there will be a need to prioritise projects based on consistent criteria. This process will be overseen by the Recovery and Renewal Programme Board.
13. Strong communication and engagement with our staff, those who use our services, staff side representatives and partner providers will be pivotal to this programme. A specific communication and engagement strategy is being developed to support regular and meaningful communications to the various groups.

14. Following the presentation to the Integration Joint Board in May the progress made has been outlined below:

- Recognising the pivotal role communication plays in the overall success of the programme, we have begun discussions about participation and engagement. We are focused on developing a clear communication and engagement plan for those who use our services, staff and our partners.
- An initial prioritisation exercise of all planned and future projects using consistent criteria has been completed. This has highlighted the resource challenges and interdependencies across projects. This will be discussed at the Recovery and Renewal Programme Board. Prioritisation of projects will be ongoing throughout the lifecycle of the programme.
- Work with finance colleagues is underway to refine project costs and potential benefits and efficiencies. This will ensure complete oversight and no duplication of potential savings.
- The programme management team has made links with the Digital Office to look for opportunities for collaboration, and benefit from Scotland-wide best practice and learning.
- Implementation of the governance model is progressing with the first Recovery and Renewal Programme Board scheduled to take place in June.

CONSULTATION AND PARTNERSHIP WORKING

15. As the programme evolves and projects are formally established, appropriate representation from staff, those who use our services, staff side representatives and partner providers will be invited onto projects as appropriate.

IMPLICATIONS OF THE PROPOSALS

16. There are no implications arising from this report.

DIRECTIONS

17. There are no directions arising from this report.

CONCLUSIONS

18. The HSCP has commenced work on the Recovery and Renewal Programme, which combines the overall aims of both recovery and transformation under one programme.

RECOMMENDATIONS

19. It is recommended that the Integration Joint Board:

- a) Note and comment on the development of the HSCP Recovery and Renewal Programme; and
- b) Agree to receive regular update reports at future meetings

REPORT AUTHOR AND PERSON TO CONTACT

Lesley Bairden, Head of Finance & Resources (Chief Financial Officer)
Lesley.Bairden@eastrenfrewshire.gov.uk
0141 451 0749

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

Recovery and Renewal Programme Presentation, May 2021



Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board	
Held on	23 June 2021	
Agenda Item	11	
Title	Inclusion of Integration Joint Boards as Category 1 Responders under Civil Contingencies Act 2004	
Summary		
To provide the Integration Joint Board (IJB) with information about the inclusion of IJB's as Category 1 Responders in terms of the Civil Contingencies Act 2004 and an outline of the requirements that this involves.		
Presented by	Lesley Bairden, Head of Finance and Resources (Chief Financial Officer)	
Action Required		
The Integration Joint Board is asked to:		
<ul style="list-style-type: none"> • Note the inclusion of IJB's as Category 1 Responders in terms of the Civil Contingencies Act 2004 (the 2004 Act); the requirements and the arrangements in place and plans to ensure that the IJB meets its requirements under the Act. • Instruct the Chief Officer, as its Accountable Officer, to carry out all necessary arrangements to discharge the duties on behalf of the IJB under the 2004 Act. • Instruct the Chief Officer to bring a report, annually, providing assurance on the resilience arrangements in place to discharge the duties on the IJB under the 2004 Act. 		
Directions	Implications	
<input checked="" type="checkbox"/> No Directions Required	<input type="checkbox"/> Finance	<input checked="" type="checkbox"/> Risk
<input type="checkbox"/> Directions to East Renfrewshire Council (ERC)	<input type="checkbox"/> Policy	<input checked="" type="checkbox"/> Legal
<input type="checkbox"/> Directions to NHS Greater Glasgow and Clyde (NHSGGC)	<input type="checkbox"/> Workforce	<input type="checkbox"/> Infrastructure
<input type="checkbox"/> Directions to both ERC and NHSGGC	<input type="checkbox"/> Equalities	<input type="checkbox"/> Fairer Scotland Duty

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

23 June 2021

Report by Chief Officer

**INCLUSION OF INTEGRATION JOINT BOARDS AS CATEGORY 1 RESPONDERS
UNDER CIVIL CONTINGENCIES ACT 2004**

PURPOSE OF REPORT

1. The purpose of the report is to provide the Integration Joint Board (IJB) with information about the inclusion of IJB's as Category 1 Responders in terms of the Civil Contingencies Act 2004 and outline the requirements that this involves.

RECOMMENDATION

2. The Integration Joint Board is asked to:-
 - a) Note the inclusion of IJB's as Category 1 Responders in terms of the Civil Contingencies Act 2004 (the 2004 Act); the requirements and the arrangements in place and plans to ensure that the IJB meets its requirements under the Act;
 - b) Instruct the Chief Officer, as the Accountable Officer, to carry out all necessary arrangements to discharge the duties on behalf of the IJB under the 2004 Act; and
 - c) Instruct the Chief Officer to bring a report, annually, providing assurance on the resilience arrangements in place to discharge the duties under the 2004 Act.

BACKGROUND

3. In September 2020, the Cabinet Secretary for Health and Sport wrote to confirm the intention of the Scottish Government to pass legislation to include Integration Joint Boards as Category 1 Responders under Schedule 2 of the Civil Contingencies Act, 2004 and invited responses to a consultation on any envisaged impact or unintended consequences under the Equality Act 2020 including the Fairer Scotland Duty.
4. East Renfrewshire IJB did not respond to the consultation however it is not envisaged that the inclusion of the Integration Joint Boards as Category 1 responders will have any significant wider impacts or unintended consequences.
5. In January 2021, the Cabinet Secretary for Health and Sport wrote to confirm that the Scottish Government concluded that the results of the consultation showed that there was no clear equality, operational or strategic planning barriers to progressing the proposal and legislating for the inclusion of IJBs within the Civil Contingencies Act 2004 as Category 1 responders. The amendment to the legislation came into effect on 18 March 2021.
6. Until now Chief Officers have been contributing to local emergency and resilience planning as part of the corporate management team for Health Boards and Local Authorities but without the appropriate reference to their accountable officer status within the Integration Joint Boards.

7. By including IJBs as Category 1 responders, it ensures that where there is a risk of an emergency which will impact functions delegated to the IJB there will be formal coordinated and appropriate arrangements in place for emergency planning, information sharing, co-operation with other responders and joined up information sharing and advice for the public.
8. It is recommended that the IJB instructs the Chief Officer, as the Accountable Officer, to carry all necessary arrangements to discharge the duties on behalf of the IJB under the Civil Contingencies Act 2004 (the 2004 Act) and instruct the Chief Officer to provide annually, a report providing assurance on the resilience arrangements in place to discharge the duties under the 2004 Act.

REPORT

Civil Contingencies Act 2004

9. The Civil Contingencies Act 2004 (CCA), is supplemented by the Contingency Planning (Scotland) Regulations 2005 and "Preparing Scotland" Guidance. Taken together the law and guidance provides a consistent and resilient approach to emergency planning, response and recovery which responders have used to develop good practice.
10. The Act placed new duties and responsibilities on organisations. It defines an emergency as:
 - 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.
11. The Act divides responders to an emergency into two categories, depending on the extent of their involvement in civil protection work.
12. IJBs are now Category 1 Responders. These are the organisations at the core of an emergency response:
 - Local authorities
 - Police (including British Transport Police)
 - Fire and Rescue Services
 - The Scottish Ambulance Service
 - National Health Boards
 - The Scottish Environmental Protection Agency (SEPA)
 - Maritime and Coastguard Agency
13. Category 2 Responders have statutory duties to co-operate and to share information with Category 1 Responders in the planning and response to major emergencies. These are organisations which, although not 'primary' responders, could potentially have a significant role. They include:
 - Utilities (Scottish Water, gas and electricity distributors and telecommunications companies)
 - Transport (airport operators, railway operators, Network Rail, roads companies, Transport Scotland)
 - Harbour authorities
 - Health and Safety Executive
 - NHS National Services Scotland

Resilience Partnership Arrangements

14. There are 3 Regional Resilience Partnerships in Scotland (West, East and North). East Renfrewshire is part of the West of Scotland Regional Resilience Partnership (WoSRRP). RRP's bring together the organisations involved in dealing with emergencies to plan for and respond to all kinds of emergencies. These multi-agency groups have plans in place to respond to all kinds of events and are regularly tested in joint exercises and during real emergencies.
15. Within each RRP there are a number of Local Resilience Partnerships (LRP's). East Renfrewshire is part of the West LRP which consists of East Renfrewshire, Renfrewshire and Inverclyde. The West LRP also manages structures for planning and response and prepares plans for the management of risks within its geographic area.
16. Both NHS Greater Glasgow & Clyde (NHSGGC) and East Renfrewshire Council (ERC), as Category 1 Responders, have established governance arrangements in place to enable them to meet the duties required under the Act, which allows them to respond through the West LRP and the WoSRRP.
17. Since its establishment, East Renfrewshire HSCP has liaised and worked closely with both NHSGGC, ERC and other resilience partners, to ensure that the duties of Category 1 responders are adhered to. This has included previous invitations to sit on the West LRP to provide input and support to specific areas of work. The Chief Officer now has a permanent seat at the West LRP as a Category 1 responder on behalf of the IJB.
18. The specific duties of a Category 1 Responder and how the IJB discharges these duties are outlined below:

Assessing the risk of emergencies occurring and use this to inform contingency planning in the form of a Community Risk Register.

- The HSCP links into existing governance structures relating to risk assessment and planning in both NHS GGC and ERC.

Put in place emergency plans.

- As mentioned above the HSCP is already a member of the West LRP which identifies risks which are likely to manifest in the geographical area. The LRP has governance structures and emergency plans to help mitigate these risks.

Create business continuity plans to ensure that they can continue to exercise critical functions in the event of an emergency

- The HSCP has a Business Continuity plan in place which is supplemented by service specific business impact assessments. During times of emergency response the HSCP establishes the Local Resilience Management Team which is comprised of officers from across the partnership.

Make information available to the public about civil protection matters, and maintain arrangements to warn, inform and advise the public in the event of an emergency

- The HSCP web pages and social media channels will carry relevant information as soon as it becomes available in order to inform the public and our staff in a timely manner of important developments and updates. The HSCP would also contribute to public information being released by our partner organisations and other Category 1 responders where appropriate.

Share information with other local responders to enhance co-ordination and co-operate with other local responders to enhance coordination and efficiency

- The HSCP is already a member of various groups in ERC and NHSGGC as well as the West LRP. Through these established channels the HSCP can share information with other responders to enhance co-ordination.

CONSULTATION AND PARTNERSHIP WORKING

19. Integration Joint Boards were offered the opportunity to participate in a consultation in relation to legislative changes to include Integration Joint Boards as Category 1 Responders under Schedule 2 of the Civil Contingencies Act, 2004.

IMPLICATIONS OF THE PROPOSALS

Risk

20. The inclusion of IJB's as Category 1 responders under the Civil Contingencies Act 2004 means that East Renfrewshire IJB has identified duties that are required to undertake. There is a risk that these duties are not met. The HSCP will monitor progress towards meeting the requirement of the Act and therefore mitigating the areas of risk and will provide further detail to the IJB through an Annual Report.

Legal

21. The amendment to the Civil Contingencies Act 2004 to include IJBs as Category 1 responders places duties on IJBs which are detailed in this report.

DIRECTIONS

22. There are no directions arising from this report.

CONCLUSIONS

23. The purpose of the report is to provide the Integration Joint Board with information about the inclusion of IJB's as Category 1 Responders in terms of the Civil Contingencies Act 2004 and an outline of the requirements that this involves.

RECOMMENDATIONS

24. The Integration Joint Board is asked to:
- a) Note the inclusion of IJB's as Category 1 Responders in terms of the Civil Contingencies Act 2004 (the 2004 Act); the requirements and the arrangements in place and plans to ensure that the IJB meets its requirements under the Act;
 - b) Instruct the Chief Officer, as the Accountable Officer, to carry out all necessary arrangements to discharge the duties on behalf of the IJB under the 2004 Act; and
 - c) Instruct the Chief Officer to bring a report, annually, providing assurance on the resilience arrangements in place to discharge the duties under the 2004 Act.

REPORT AUTHOR AND PERSON TO CONTACT

Lesley Bairden, Head of Finance & Resources (Chief Financial Officer)
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0141 451 0749

Chief Officer, IJB: Julie Murray

May 2021

BACKGROUND PAPERS

The Civil Contingencies Act 2004 (Contingency Planning) (Scotland) Regulations 2005
<https://www.legislation.gov.uk/ssi/2005/494/made/data.pdf>

[Government Response to the Consultation to include Integration Joint Boards and Category 1 Responders under the Civil Contingencies Act 2004](#)

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Meeting of East Renfrewshire Health and Social Care Partnership	Integration Joint Board	
Held on	23 June 2021	
Agenda Item	12	
Title	CALENDAR OF MEETINGS 2022	
<p>Summary:</p> <p>Proposed meetings dates for the Board for 2022.</p>		
Presented by	Eamonn Daly, Democratic Services Manager, East Renfrewshire Council	
<p>Action required:</p> <p>That the Integration Joint Board approves the proposed meeting dates for 2022</p>		
<p>Directions</p> <p><input checked="" type="checkbox"/> No Directions Required</p> <p><input type="checkbox"/> Directions to East Renfrewshire Council (ERC)</p> <p><input type="checkbox"/> Directions to NHS Greater Glasgow and Clyde (NHSGGC)</p> <p><input type="checkbox"/> Directions to both ERC and NHSGGC</p>	<p>Implications</p> <p><input type="checkbox"/> Finance</p> <p><input type="checkbox"/> Policy</p> <p><input type="checkbox"/> Workforce</p> <p><input type="checkbox"/> Equalities</p> <p><input type="checkbox"/> Risk</p> <p><input type="checkbox"/> Legal</p> <p><input type="checkbox"/> Infrastructure</p> <p><input type="checkbox"/> Fairer Scotland Duty</p>	

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

23 June 2021

Report by Chief Officer

CALENDAR OF MEETINGS 2022

PURPOSE OF REPORT

1. To seek approval of proposed meetings dates for the Board for 2022.

RECOMMENDATION

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

REPORT

3. At the meeting of the IJB in June 2020 meeting dates for 2021 were approved. In order to assist Board members in programming their diaries the proposed meeting dates for 2022 are now submitted for consideration.

4. It is proposed that meetings of the IJB be held on the following dates.

Wednesday 26 January
Wednesday 16 March
Wednesday 22 June (draft accounts)
Wednesday 10 August
Wednesday 21 September (including annual accounts)
Wednesday 23 November

5. A meeting of the IJB is normally held around mid-May. However the local government elections are taking place on Thursday 5 May 2022 and East Renfrewshire Council will not make its appointments to the IJB until its statutory meeting which will be held towards the end of that month.

5. Following earlier consultation with members of the Board prior to the onset of the pandemic, it is proposed that all meetings take place in the Eastwood Health and Care Centre, Clarkston. However, this will continue to be qualified by circumstances at the time. It may be that the Board is still meeting remotely, or, depending on whatever (if any) social distancing guidelines are in effect at the time in relation to in-person meetings, it may be necessary to move to an alternative venue.

6. It should be noted that with regards to the meetings of 16 March, 22 June, 21 September and 23 November, subject to approval by the Performance and Audit Committee, arrangements will be made for the committee to meet prior to the meetings of the Board. In particular the meetings of the committee on 22 June and 21 September will meet to consider the draft and final annual accounts, prior to making a recommendation to the subsequent meetings of the Board.

7. To facilitate this, it is proposed to maintain the current arrangement that the meetings of the IJB being held on the above dates start at **10.30 am**. For the remaining dates on which there is no Performance and Audit Committee (26 January and 10 August), the start time will remain at 10.00 am.

FINANCE AND EFFICIENCY

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

CONSULTATION AND PARTNERSHIP WORKING

9. The dates suggested have been drawn up taking into account the meetings calendar for East Renfrewshire Council. As a number of the NHS non-Executive members of the IJB also sit on the Glasgow IJB a copy of the proposed calendar has also been sent to the Clerk to the Glasgow IJB to try and minimise meeting clashes. The Glasgow IJB Clerk has confirmed that they are not yet in a position to consider proposed meeting dates but will endeavour to ensure there are no meeting clashes. In the event this is not possible, further changes to meeting dates may need to be considered.

IMPLICATIONS OF THE REPORT

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

CONCLUSIONS

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

RECOMMENDATION

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

REPORT AUTHOR AND PERSON TO CONTACT

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BACKGROUND PAPERS - NONE