### **South Ayrshire Council**

### Report by Chief Social Work Officer to Cabinet of 28 November 2023

**Subject:** Chief Social Work Officer Annual Report

#### 1. Purpose

- 1.1 The purpose of this report is to update Cabinet on the performance of statutory social work services for 2022 2023.
- 2. Recommendation
- 2.1 It is recommended that the Cabinet:
  - 2.1.1 considers the performance of statutory social work service as summarised in paragraph 4.1 and the report attached in Appendix 1; and
  - 2.1.2 agrees the report is submitted to the Office of the Chief Social Worker Advisor in the Scottish Government.

#### 3. Background

- 3.1 Every local authority must have a professionally qualified Chief Social Work Officer (CSWO) as per Section 45 of the Local Government etc. (Scotland) Act 1994. The role of the CSWO is to ensure the provision of appropriate professional advice in the discharge of a local authority's statutory functions as described in Section 5 (1B) of the Social Work (Scotland) Act 1968.
- 3.2 The role covers the full range of a local authority's social work functions to provide a focus for professional leadership and governance. The role provides strategic and professional leadership in the delivery of social work services.
- 3.3 The Public Bodies (Joint Working) (Scotland) Act 2014 provides for the delegation of certain social work functions by a local authority to an integration authority for example, a Health and Social Care Partnership.
- 3.4 The Scottish Government requires the CSWO to produce an annual report of service quality and performance, key challenges, and for this particular year, the initial impact of COVID-19.

#### 4. Proposals

- 4.1 The CSWO annual report (Appendix 1) highlights areas of performance across statutory Social Work services. The CSWO would wish to draw attention to the following key points within the report:
  - 4.1.1 That overall the report shows that as services return to operational status post covid demand continues to grow across the majority of service areas.
  - 4.1.2 The range of transformational work within Children's Health, Adult Services and Justice Services to build on strengths and offer choice and control to those who use our services.
  - 4.1.3 The developments outlined for each service in relation to "looking ahead" that will drive improvement and therefore deliver better quality services to the people of South Ayrshire.
  - 4.1.4 The implementation of our Workforce Plan that seeks to address the retention and recruitment and wellbeing issues within the profession.
- 4.2 Alongside these key issues, the CSWO would wish to publicly recognise and acknowledge the skills and compassion shown by our practitioners, managers and partners every day to provide services to our community.

### 5. Legal and Procurement Implications

- 5.1 The CSWO has prepared an annual report of service quality and performance which complies with the Council's statutory duties and will submit this to Scottish Government as required.
- 5.2 There are no procurement implications arising from this report.

#### 6. Financial Implications

6.1 There are no financial implications arising from this report beyond those contextualised within the body of the annual report.

#### 7. Human Resources Implications

7.1 There are no human resource implications arising from this report beyond those contextualised within the body of the annual report

#### 8. Risk

#### 8.1 Risk Implications of Adopting the Recommendations

8.1.1 There are no risks associated with this report beyond those contextualised within the body of the annual report.

#### 8.2 Risk Implications of Rejecting the Recommendations

8.2.1 Rejecting the recommendation may impact on the reputation of the Council.

#### 9. Equalities

9.1 The proposals in this report allow scrutiny of performance. The report does not involve proposals for policies, strategies, procedures, processes, financial decisions and activities (including service delivery), both new and at review, that affect the Council's communities and employees, therefore an equality impact assessment is not required.

### 10. Sustainable Development Implications

10.1 This report does not propose or seek approval for a plan, policy, programme or strategy or document otherwise described which could be considered to constitute a plan, programme, policy or strategy.

### 11. Options Appraisal

11.1 An options appraisal has not been carried out in relation to the subject matter of this report.

#### 12. Link to Council Plan

12.1 The matters referred to in this report contribute to Priority 4 of the Council Plan: Efficient and effective enabling services.

#### 13. Results of Consultation

- 13.1 There has been no public consultation on the contents of this report.
- 13.2 Consultation has taken place with Councillor Lee Lyons, Portfolio Holder for Health and Social Care, and the contents of this report reflect any feedback provided.
- 13.3 The contents of this report have been reported through other structures attended by Cabinet / Portfolio holders.

#### 14. Next Steps for Decision Tracking Purposes

14.1 If the recommendations above are approved by Members, the Chief Social Work Officer will ensure that all necessary steps are taken to ensure full implementation of the decision within the following timescales, with the completion status reported to the Cabinet in the 'Council and Cabinet Decision Log' at each of its meetings until such time as the decision is fully implemented:

Implementation	Due date	Managed by		
The annual report is submitted to the Office of the Chief Social Worker Advisor in the Scottish Government	1 December 2023	Chief Social Work Officer		

**Background Papers** None

**Person to Contact** 

Gary Hoey, Chief Social Work Officer Elgin House, Ailsa Hospital, Dalmellington Road, Ayr, KA6

6AB

Phone 01292 617426

E-mail gary,hoey@south-ayrshire.gov.uk

Date: 16 November 2023



Chief Social Work Officer Annual Report 2022 – 2023

October 2023



# **Contents**

Intro	duction	4
1.	Governance and Accountability	5
2.	Service Quality and Performance	9
Chil	drens Services	10
2.1	Child Protection	10
2.2	Looked After Children	14
Adu	It Services	19
2.3	Adult Support and Protection	19
2.4	Care and Support for Adults	22
2.5	Adult Carers Support Plans	23
2.6	Self-Directed Support	24
2.7	Delayed Transfers of Care.	26
2.8	Mental Health	27
2.9	Learning Disability	27
2.10	Adults and Older People	28
Just	ice Services	30
2.11	Community Safety and public protection	30
2.12	Multi Agency Public Protection Arrangements (MAPPA)	32
2.13	Partnership Delivery Team	33
2.14	Multi Agency Risk Assessment Conference	33
2.15	Prevent	34
Alco	ohol and Drugs Partnership (ADP)	35
2.16	Alcohol and Drugs Partnership (ADP)	35
3.	External Scrutiny	38
3.1	Adult Support and Protection	38
3.2	Adult Services	38
3.3	Child Protection	39
3.4	Fostering and Adoption Services	39
3.5	Childrens Houses	39
3.6	Care Homes	39
3.7	Care at Home	39
4.	Internal Scrutiny.	40
4.1	Adult Services	40
4.2	Childrens Services	40
4.3	Large Scale Investigations	40
4.4	Care Home Moratorium	41
4.5	Duty of Candour	41
5.	Resources	42

Chief 5.1	Social Work Officer's Annual Report 2022 - 2023  Summary of Financial Performance	<b>PAGE 3</b>
	Best Value	
6.	Workforce	45
6.1	Workforce Plan	45
6.2	Practice Development	46
6.3	Practice Teaching (Social Work)	48
6.4	Quality Improvement	48

### Introduction

I am delighted to share with you South Ayrshire's Health and Social Care Partnerships Chief Social Work Officers Report.

I would like to begin by paying tribute to all within the partnership who have worked tirelessly over the past year to continue to work toward our ambition of ensuring that those within our communities start well, live well and age well.

All of us are assimilating the impact of the pandemic and as we emerged, we faced a brighter horizon but one that carries the legacy of COVID and the impact of economic pressures such as the cost-of-living crises that places more uncertainty into the lives of the people of South Ayrshire.

My reflection of the last year is one of many achievements and growth across social work services as we focus on early intervention and prevention while continuing to carry out our statutory duties to safeguard and protect the most vulnerable within our communities.

Our Child Protection and Adult Protection Committees laid down a new framework to monitor performance, engage with the public and build confidence and competence in practice. In Adult Services the foundations of our new service delivery model were firmly established. Justice Services established new workshop facilities to build capacity and support for those recovering and making reparation to their communities. In Childrens Services our 'Family First' model saw expansion and our Young Carers delivered a thought-provoking film 'The Weekend' to raise awareness of the challenge they face in their young lives

In March 2023 we received our inspection report of Learning Disability Services within Adult Services concluding that across all the inspected areas we were good.

The bedrock of our improvement journey our AIFFS programme has seen cohort after cohort embrace the methodology that drives change and improvement. We have continued to deliver core, mandatory, specific and specialist training to build confidence and competence within our workforce.

It is difficult for me in this short introduction to encapsulate all these things working for good. We are a sum of our parts and our Annual Performance Report highlights the significant progress we have made and our ambition to be the best.

I would like to thank the entirety of workforce who have supported me and provided wisdom and counsel as I continue to grow and develop into this role.

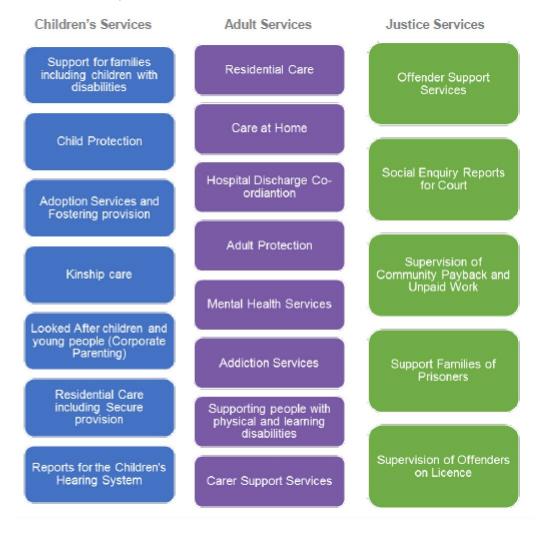
I would like to thank those who have shared their lived experience of social work services in particularly to those in the recovery communities whose representation, strength, compassion and dedication is an example for all.

Gary Hoey

## 1. Governance and Accountability

The Chief Social Work Officer (CSWO) provides professional leadership and promotes values and standards of professional practice, ensuring that only Registered Social Workers undertake those functions reserved in legislation and meet the requirements of the Scottish Social Services Council (SSSC) and the associated Codes of Practice. Any social worker or social care professional may approach the CSWO for advice.

The CSWO has a "stand-alone" function across Social Work Services and reports directly to the Chief Executive of South Ayrshire Council. The CSWO also, reports directly to the Director of South Ayrshire Health and Social Partnership (SAHSCP) on operational and strategic matters across the service. Social Work provides a variety of services to protect and support people and in South Ayrshire; this is split across three distinct services:



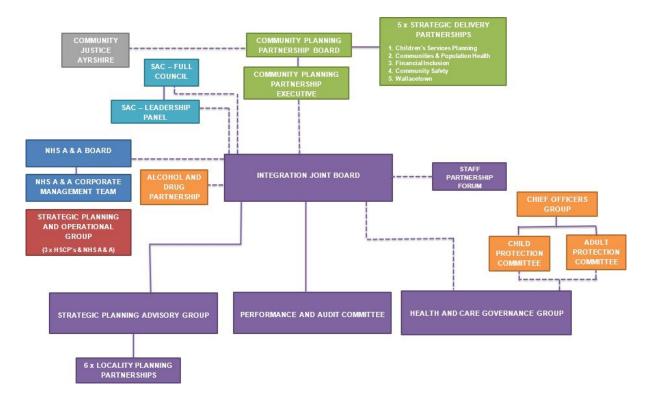
The CSWO is responsible for professional and specialist advice on the provision of social work services to strategic governance and accountability structures within South Ayrshire.

<u>"The Role of the Chief Social Work Officer: Guidance for local authorities regarding the role of the Chief Social Work Officer"</u> outlines the scope and responsibilities of the role.

- Values and standards
- Decision Making

- Leadership
- Reporting

The Governance structure for SAHSCP is shown below.



The CSWO sits on a number of these structures including:

- Integrated Joint Board
- Chief Officers Group
- Adult Protection Committee
- Child Protection Committee

- Strategic Planning Advisory Group
- Performance and Audit Committee
- Health and Care Governance Group

In addition to this the CSWO is an integral member of the SAHSCP's Directorate Management Team and is therefore involved in key aspects of planning, budgeting, service development and implementation.

The role also involves responding to enquiries, providing support, information, reflection and direction to elected members, relevant Cabinet members and attendance at relevant Council and Leadership Panel meetings, where required.

The CSWO is currently the Chair of South Ayrshire Alcohol and Drugs Partnership and the Social Work Governance Board. Participation in short life working groups and service specific governance such as the Community Services Oversight Group, is integral to the core tasks of the CSWO.

The CSWO has responsibility for 5 direct reports:

- Child Protection Lead Officer
- Adult Support and Protection Lead Officer
- Self-Directed Support Lead Officer
- Alcohol and Drug Partnership Lead Officer
- Practice Development Team Service Manager

In addition to this there are a small number of areas of decision-making where legislation confers functions directly on the CSWO by name. These areas relate primarily to the curtailment of individual freedom and the protection of both individuals and the public. Such decisions must be made either by the CSWO or by a professionally qualified social worker, at an appropriate level of seniority, to whom the responsibility has been formally delegated and set out within local authority arrangements. Even where responsibility has been delegated, the CSWO retains overall responsibility for ensuring quality and oversight of the decisions.

#### These areas include:

- deciding whether to implement a secure accommodation authorisation in relation to a child (with the consent of a head of the secure accommodation), reviewing such placements and removing a child from secure accommodation if appropriate.
- the transfer of a child subject to a Supervision Order in cases of urgent necessity.
- acting as guardian to an adult with incapacity where the guardianship functions relate to the personal welfare of the adult and no other suitable individual has consented to be appointed.
- decisions associated with the management of drug treatment and testing orders.
- conducting functions as the appropriate authority in relation to a breach of a supervised release order, or to appoint someone to carry out these functions.

Additionally, the CSWO assumes the role of Agency Decision Maker performing an essential role in making decisions about the best plans for children, their carers and adopters. The Adoption and Children (Scotland) Act 2007 provides the framework for this role.

## 2. Service Quality and Performance

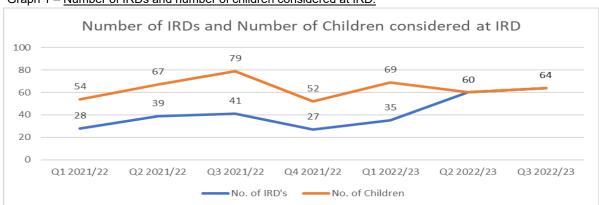
For the purposes of the annual report, we will focus on the following key areas of service quality performance. The report aims to describe our journey and achievements over the past year but also to identify the next steps we must take to excellence.

- Children Services
  - o Child Protection
  - Looked After Children
- Adult Services
  - Adult Support and Protection
  - o Adult Care and Support
- Mental Health Services
- Justice Services
  - MAPPA
  - o Prevent
  - MARAC
- External Scrutiny
- Internal Scrutiny

### **Childrens Services**

### 2.1 Child Protection

Children are placed on the child protection register when a child is deemed at risk of significant harm. Children on the register will be reviewed by the team around the child at core group meetings on a frequent basis. (4 weeks) Families and children will also experience more supportive visits to ensure the progression of the child's protection plan. A crucial part of the process is the initial referral discussion between agencies that establishes the immediate steps required to safeguard and protect children and commence planning to ensure their continued safety and wellbeing.



Graph 1 – Number of IRDs and number of children considered at IRD.

Over the past year we have seen the number of Initial Referral Discussions rise. This may reflect the impact of structures established to monitor the welfare of children returning to routine service following the pandemic. Another aspect which may impact upon this is the strengthening of Public Protection resource within NHS Ayrshire and Arran.

Additionally, questions were raised about South Ayrshire having relatively low numbers of IRD, particularly when benchmarking against similarly sized local authorities.

There have been various approaches to scrutinise and question this over the last three years, resulting in the commissioning and production of the Annual Child Protection Trend Analysis reports and consequential meetings and discussions.

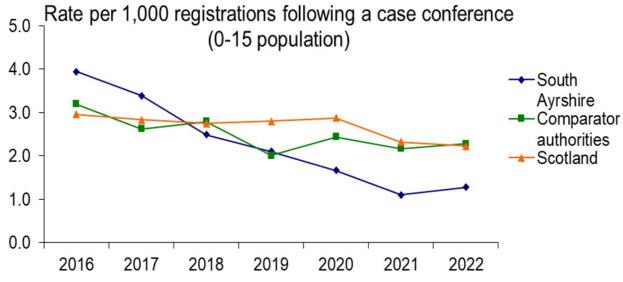
As the trend continued, this year it was agreed that there should be a multi-agency workshop to discuss and explore this further with a view to bringing it to a conclusion.

This workshop took place in March 2023, its aim was to create an environment which enabled "Professional Curiosity" across the multi-agency team invited.

The ambition of the workshop was to either arrive at a necessary improvement action plan or to be assured at the current approach and bring this discussion to a conclusion, with further audit and scrutiny as part of the normal CPC and COG reporting cycle.

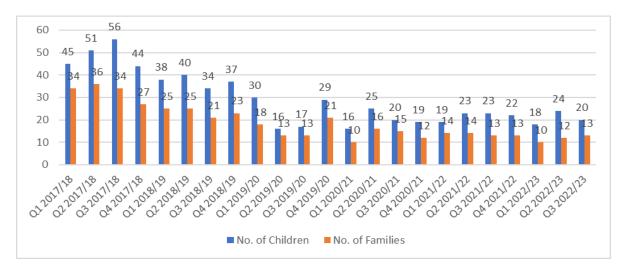
Assurances around IRD and Child Protection in general were achieved and we continue to support the current model for undertaking IRD in South Ayrshire.

To provide further assurance around this process a multi-agency group meets quarterly to review IRD's and decision-making processes to highlight learning and share any information regarding the robustness of this process. This activity also strengthens our multiagency working and understanding of roles and service priorities and ambitions. Moving through the year 2023 – 2024 we will implement the new Child Protection Procedures and develop local guidance in relation to Initial Referral Discussions.



Graph 2 - Rate per 1,000 registrations following a case conference.

A decision to proceed to case conference follows the initial investigation of concerns resulting from the professional discussion at IRD Graph 2 highlights a reduction of registrations following case conference over a 6-year period. It is interesting to note that with there is an upturn in registrations from 2021 this tracks the data in relation to IRD's. Our registrations are lower than that comparator authorities, but these do not include areas where the Signs of Safety Approach has been adopted. These areas overall have reduced numbers of registration and children on the register. The upturn may also suggest despite initial concerns with this approach that processes continue to safeguard and promote the welfare of those who require this level of intervention.



Graph 3 – Number of children/ families placed on Child Protection Register.

As of 30<sup>th</sup> April 2023 (Q3 2022/23), there were 20 children (13 family groups) on the Child Protection Register which is similar to the same quarter in 2021/22 (23 children / 15 family groups). The figures through the reporting period have remained within a steady range considering family composition.



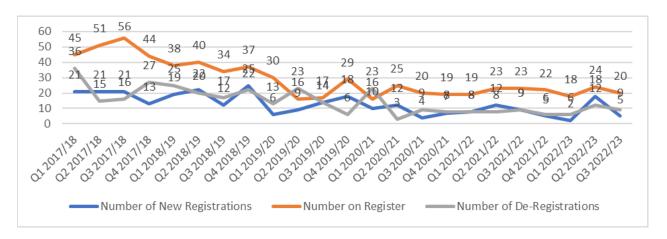
Graph 4 – Concerns Recorded at Registration Q3 2022/23.

Graph four highlights the nature of concerns for those placed on the register.

The main reasons for registration are:

- Neglect
- Parental Mental Health Problems
- Parental Drug Misuse

Working with our Practice Development Team, our Child Protection Committee and our multiagency and third sector partners we will ensure that we have a workforce that has the confidence and skills to identify prevent, intervene and support.



Graph 5- Rate of new registrations/ number on register and number of deregistrations.

Re-Registrations	2019/20			2020/21		2021/22			2022/2023							
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
3 months	0	0	0	0	2	2	0	0	0	0	0	0	0	0	0	
6 months	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	
12 months	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	
24 months	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	

Table 1 – Rate per 1,000 registrations following a case conference.

Table one highlights the number of re-registrations over 4 years. This is a valuable indicator that highlights the success of post registration support,

There was one child re-registered following de-registration returning to the register within 24 months. This was as a result of the re-emergence of previous concerns. Over the last 8 quarters, only 2 children have been subject to re-registration that may suggest that the majority families are primarily receiving the correct support and risk is being managed for these children effectively.

An audit and self-evaluation of children de-registered was carried out, to ensure children and young people removed from the Child Protection Register were receiving the necessary support.

There is currently only one child (from the Children with Disabilities Team) who has been on the Child Protection register for more than 12 months (25 months as of 30/04/23). Professional discussion with the Team Leader concluded reasons for continued registration were justified.

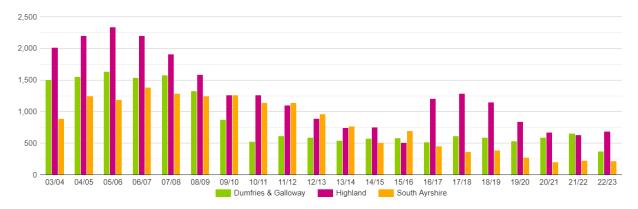
## **Looking Ahead**

Our Child Protection Committee over the past year has developed a robust plan to ensure that we continue to meet our statutory requirements to continue to safeguard and promote the welfare of children and young people and support families to remain together. Over the next year we will.

- The implementation of revised and new guidance relating to Child Protection.
- Encourage lived & care experienced voices to influence CPC strategy.
- Embed our Trauma Informed Practice officer in Child Protection Processes.
- Continue to embed and implement our new subcommittee framework.
- Produce guidance packs for multi-agency participation while developing audit activity across children's services.

### 2.2 Looked After Children

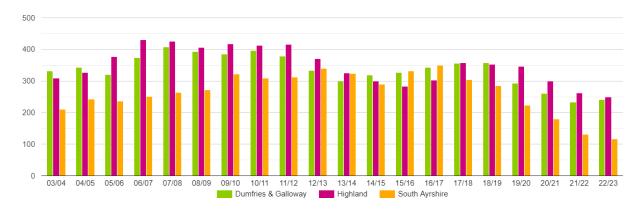
South Ayrshire Health and Social Care Partnership also carry out their statutory function in relation to children and families who may require more focussed support. Some children and families will have been referred to the Scottish Childrens Reporter Administration. (SCRA) resulting in statutory measures being implemented under the auspices of a Compulsory Supervision Order.



Graph 6 - Children referred to the Childrens Reporter. Analysis by comparator authorities.

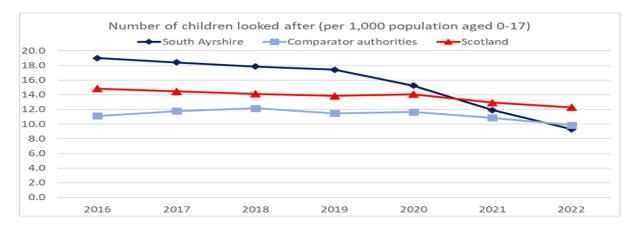
Within South Ayrshire referrals to the SCRA have remained static over the past three years. Ranging from 203 in 2021, 226 in 2022 and 216 in 2023.

Children referred to SCRA on offence grounds has decreased. In 2021 37 children were referred. In 2023, 30 children were referred on offence grounds.



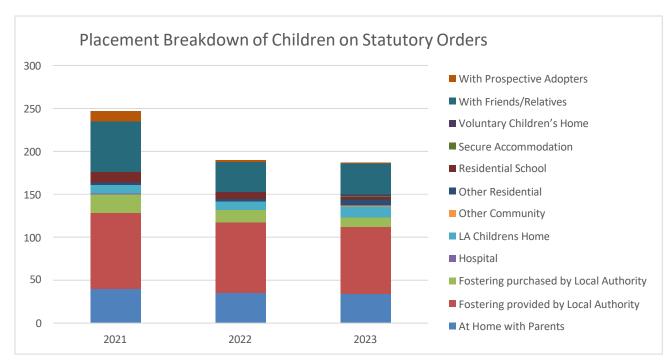
Graph 7 – Children Subject to Compulsory Supervision Order including Comparator Authorities.

Graph 7 highlights an ongoing downward trend in relation to children who are subject to Compulsory Supervision Orders.



Graph 8 – Number of Children Looked After Per 1000 population aged 0 - 17.

Graph 8 highlights that South Ayrshire sits marginally below the comparator authorities but well below Scotland. As previously mentioned, reasons for this may be the transformational work we have undertaken in terms of early intervention and prevention. A key feature in this is the robust and supportive relationship we have both with the Scottish Childrens Reporters Administration and Childrens Hearing. As part of our implementation of the 'Signs of Safety' awareness and training was delivered to them and all partner agencies regarding this approach.



Graph 9 - Placement Breakdown of Children on Statutory Orders

As of 31st July 2022, the majority of children (88%) are being looked after in the community either at home with their parents, with friends / relatives or with foster carers. 12% of children looked after are in residential accommodation. 90% of children looked after across Scotland were being looked after in the community and 85% across the comparator authorities. The number of children in South Ayrshire who are Looked After and Accommodated is down by 16% between 2021 and 2022. Table 2 provides numbers in relation to this.

Summary	01/04/22	01/04/22	01/04/23
At Home with Parents	40	35	34
Fostering provided by Local Authority	88	82	78
Fostering purchased by Local Authority	22	15	11
Hospital	1	0	0
LA Childrens Home	10	10	13
Other Community	0	0	1
Other Residential	3	3	7
Residential School	12	7	3
Secure Accommodation	0	0	1
Voluntary Children's Home	0	1	2
With Friends/Relatives	59	35	36
With Prospective Adopters	12	2	1
Sum:	247	190	187

Table 2 – <u>Placement Breakdown of Children on Statutory Orders.</u>

## **Looking Ahead**

In summary the partnership has invested in and continues to grow support to promote early intervention, diversion and prevention. One example of this is the completion of an independent living space built on the site of Cunningham Place to support transition to independence. The downward trend in both looked after and children on statutory orders is to be welcomed as we shift from the servicing of statutory work to the provision of preventative and early intervention services.

Children and Families through the range of strategies and services noted below aim to identify strengths within individuals and families and support them to start well live and age well.

- Signs of Safety Approach
- Child Poverty Action Plan
- Belmont Family First
- Functional Family Therapy
- Small Steps to Wellbeing Service.
- Throughcare and Aftercare

- Carrick Family Wellbeing Service
- Kinship Care
- Youth Diversion
- Intensive Family Support

These transformational projects have evidenced financial efficiencies over and above targets as well as delivered improved outcomes for children and their families. This has enabled the change in the balance of care with more focus and investment being placed on early intervention and prevention, collaborative working and whole system change and away from expensive care providers and intrusive statutory interventions.

This work, along with the more "whole system, cultural change" challenge that the Promise brings, and the focus on being Trauma informed and Children's rights focused, creates an opportunity for change in not only what we do but how we do it.

The team will continue to focus on developing:

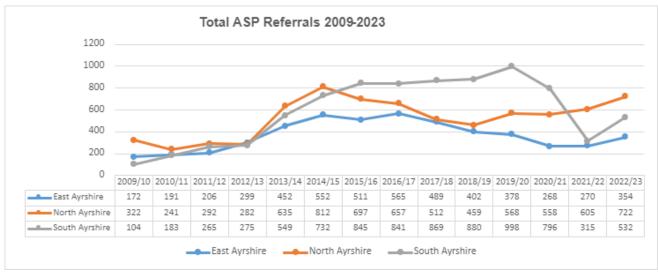
- Roll out to other schools, a Family First Schools project, learning from the Small Steps to Wellbeing project and expanding on the Belmont First model.
- To have teams in localities working with partners to respond to local needs and develop strong community partnerships.
- Transform and modernise the children with disability team.
- Create additional nursing support within Ayr North / Wallacetown
- Redesign of Young Persons Support and Transition Team with Youth Justice and Through Care and After Care clearly defined.
- Develop trauma informed therapeutic services for children looked after in Foster and Kinship Care, including the employment of a Play Therapist and enhanced training to reduce the number of family care break downs.

- Contribute to Children Services Planning Partnership, Whole Family Wellbeing to ensure a coordinated and cohesive approach to Family Wellbeing as outlined within the Promise.
- Take the learning from the work of Horizons Research commissioned by the Children Services Planning Group, to develop a whole family approach offer in South Ayrshire that is informed and reflects the whole Community Planning Partnership contribution through the Children's Service Planning Partnership
- To deliver on the Promise and change the "whole system" and how we care for Children who are in Care or Care Experienced, in particular the challenge to the use Care based language.
- To deliver on the Parenting Promise and our objective of loving our Care Experienced Children and young people in word and in action
- Improve the use of data and the presentation of it, to inform service design and resource allocation.
- To devolve more data and local decision making to front line managers.

### **Adult Services**

## 2.3 Adult Support and Protection

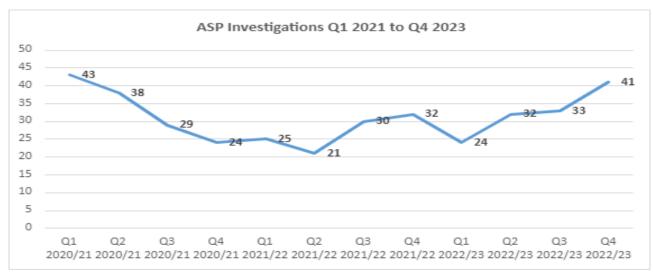
During 2022-23 there were 532 Adult Protection referrals, which is an increase of 69% from the 315 referrals received in the previous year.



Graph 10 - Total ASP Referrals 2009 - 2023

This increase is attributed to a combination of the impact of the reduction in pandemic lockdown measures, continued training being delivered supporting competence and confidence in practice and the revised Vulnerable Adult escalation procedure. This process aimed to provide initial screening, assessment of risk and consideration of any care and support needs for the individual and any informal carers involved. Individuals who are the subject of these referrals will very often not meet the criteria for Adult Support and Protection or Social Work's eligibility criteria and will be living in circumstances where their lifestyles and behaviours are impacted by alcohol and/or drug consumption, mental health issues, financial deprivation, and homelessness.

Following discussions with South Ayrshire Alcohol and Drugs Partnership (ADP) on how best to ensure the needs of people living with these complex issues were being met, the ADP commissioned a piece of research to report on the picture in South Ayrshire. The findings and recommendations from this research will inform the planning, commission and delivery of services in South Ayrshire.



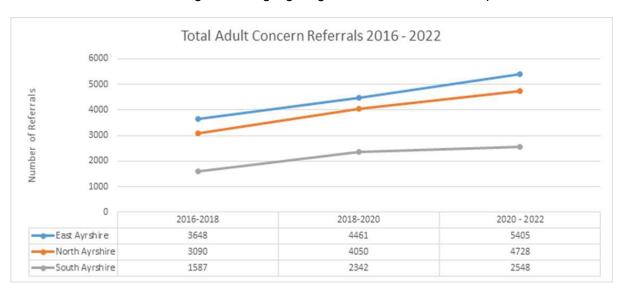
Graph 11 - ASP Investigations Q1 2021 to Q4 2023

The number of ASP Investigations highlights a growing increase in this area of activity. 130 were completed in the reporting period representing an 18% increase on the number carried out in 2021-22.

28 (22%) of these ASP Investigations carried out in 2022-23 progressed to an ASP Case Conference – this compares with 35 (33%) that progressed to an ASP Case Conference in 2021-22.

Responding timeously and appropriately to Adult Support and Protection concerns presents a continuous and increasing demand on the HSCP workforce and Council Officers in particular.

Data in respect of this is gathered on a biennial basis and the next reporting period is scheduled in 2024. Taking a midpoint measurement in this reporting cycle highlights that there have been 1471 adult concern referrals through 2023 highlighting a 13% increase in adult protection concerns.



Graph 12 - Total Adult Referrals 2016 - 2023

Historically, South Ayrshire has had significantly fewer such referrals than partners in East and North Ayrshire, but each partnership area has seen significant increases in the number of these referrals.

## **Looking Ahead**

In 2023 we completed and our Adult Support and Protection Improvement Plan in response to the Inspection of Adult Support and Protection in late 2021. We are working towards further audit work in this area to ensure that the recommendations and changes made can be evidenced as we move forward.

South Ayrshire continues to be heavily involved in the National Implementation Group set up to implement the Revised Adult Support and Protection Code of Practice.

South Ayrshire was also one of the pilot areas to develop the Adult Support and Protection National Minimum Dataset and continues to work closely with IRISS and the Scottish Government on both these important areas of work. Our Adult Protection Committee over the past year has developed a robust plan to ensure that we continue to meet our statutory requirements to continue to safeguard and promote the welfare of adults.

Over the next year we will.

- The implementation of revised guidance relating Adult Support and Protection.
- Continue to embed and implement our new sub-committee framework.
- Prepare for phase 2 of the Adult and Support inspection that was published on the 16<sup>th</sup> of November 2021.

## 2.4 Care and Support for Adults

Within Adult Services the demand upon services has been high and is reflected below in the data below that provides details of the referrals into the service and therefore demands a huge breadth of initial inquiry, action planning and review throughout the year (01/04/22 – 31/03/2023)

Referral Activity	Number
Adult Support and Protection Referrals	1685
Carer Support Plan	562
Community Care - Initial Referral	16427
Mental Health / Adult with Incapacity Referral	689
My Life My Outcomes - Support Plan	3980
Reablement - Support Plan	200
Vulnerable Adult Referral	5362

Table 3 – Referral Activity in Adult Services April 2022 – March 2023.

Within the reporting period the Community Health and Care service published the culmination of its work to transform the delivery of integrated leadership, management and service delivery arrangements relating to Adult Services. This is the culmination of a 12-month project seeking the views of those we serve, collaboratively working with partners across agencies, academics, researchers and third sector and commissioned services to establish the key outputs of

- Design and enable easy access to modern wellbeing hubs.
- Co-located services to reduce bureaucracy and duplication for those accessing the hub.
- Individuals receive the right help, at the right time and in the right way.
- Locality services become more joined up and embedded in communities and delivered in a
  way to meet the needs of the community.

We are now able to enter the implementation phase of our programme to build this new service model. We have been successful in attracting highly skilled and highly motivated professionals into our structure to lead and implement our locality-based services. At the heart of our new model is integrated leadership and improving the outcomes for individuals and carers who access our services. The revised mode will also contribute to how we will deliver on our 'Wellbeing Pledge'.

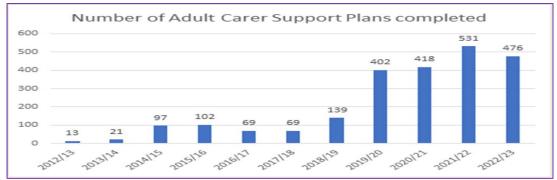
To promote the professional identity of the social work role we developed an Ethics of Care Framework based around five ethics of care: responsibility, competence, responsiveness and integrity of care. This was developed alongside frontline staff and with input from individuals with lived experience and we concluded and circulated a final Ethics of Care Framework in February 2022. Through the reporting year the CSWO has delivered lunchtime briefings to explore with professionals across the service what this means to us in practice and how can we keep the rights and needs of those we serve at the forefront.

It is important to acknowledge the huge effort by all involved that as we progress our journey towards our locality-based model, we have continued to deliver robust services to support the people of South Ayrshire.

## 2.5 Adult Carers Support Plans

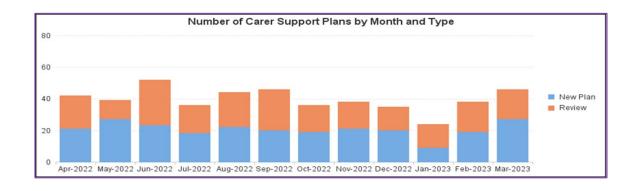
The Carers (Scotland) Act imposes a duty on the Local Authority that a Carer over the age of 18 must be offered an Adult Carer Support on being identified as carrying out a caring role for an individual or individuals.

Ware presently supporting more than **1,055** known Carers presently active within our commissioned service with a further **476** having been identified and opting to have a Support Plan completed via our Adult Services Teams in 2022 / 23.



Graph 13 - Number of Adult Support Carers Plans Completed.

There has been an improvement in the numbers of Adult Carer Support Plans being offered and generated locally (formally Adult Carer Assessments) over the last five years.



Graph 14 – Number of Carers Support Plans by Month and Type.

The Partnership continue to review and progress carers assessment and data from our Adult Services Teams this has displayed a good balance of new support plans being completed alongside active plans being reviewed.

Furthermore, we have broadened the access opportunities for carers by introducing electronic carer registration. Initial data highlights a cautious uptake of this new system we will continue to offer this as an option to those who use our services and promote awareness of the system.

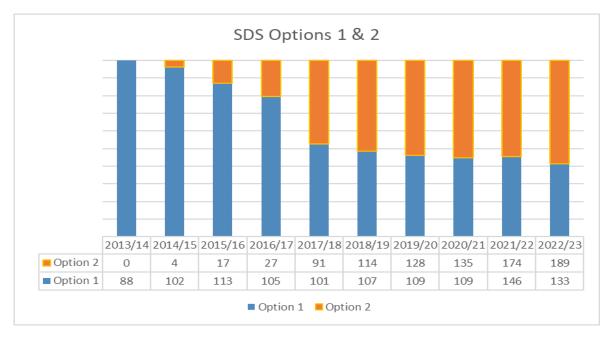
## 2.6 Self-Directed Support

Choice and control are core to the delivery, of person-centred health and social care and we utilise Self-Directed Support (SDS) to deliver this across all our services. Staff carry out their statutory role to offer SDS at each assessment and review (as evidenced by our audit of support plans) and information on SDS is available on our website.

Analysing data in regard to Self-Directed Support we see:

- The majority of people we support continue to choose Option 3 as the means to deliver services.
- From 2017 2018 to 2022 2023 there has been an increase of people choosing to take more control of their care and support through the option 1 and 2 route.
- The uptake of SDS options 1 and 2 have increased from 192 in 2017 /18 to 322 in 2022 / 23.
- Option 1 levels increased from 101 to 146 in 2021 / 22 with 2022 / 23 showing a slight reduction down to 133.
- Option 2 has increased from 174 cases in 2021 / 22 to 189 in 2022 / 23.

(Option 1- Direct Payment, Option 2- Individual Service Fund, Option 3)



Graph 15 - Balance of SDS Option 1 and 2.

The table above shows progress made with regards to the uptake of SDS options 1 and 2. Whilst the table demonstrates that there has been reasonable progress during the last 10 years, with the period impacted with Covid remaining static there is more to be done. This is an area of focus to progress further and the HSCP has recently reviewed the SDS lead officer post remit. A successful

recruitment campaign following a period where the post was vacant is expected to support front line staff to maximise SDS routes with service users. This is an area which will be further progressed, regular updates will be reported to the IJB and Governance groups as necessary to ensure that South Ayrshire HSCP offers individuals who have care and support requirements flexible routes for their care and independence support needs.

A portfolio of improvement activities is ongoing:

- New SA HSCP SDS Improvement plan linked to the recently published National SDS Improvement plan 2023 2027, IJB Strategic plan 2021 2031 and the recommendations from the Care Inspectorate and Healthcare Improvement Scotland Joint Inspection (March 2023).
- New SDS e-learning module introductory module for all staff which has been reviewed and is ready to go live on the South Ayrshire Council Learning Portal.
- New webpage in design more user friendly and in line with corporate and SDS branding.
- New leaflets to be co-produced and linked to webpage. This will include staff information cards with QR codes to relevant information.
- Initial discussion with Planning and Performance (Communications) regarding a rolling social media presence for SDS. This will link to new webpage and leaflets.
- South Ayrshire are working on a Pan-Ayrshire Pilot Project (facilitated by In Control Scotland and funded by Scottish Government) the purpose of which is to map out and facilitate change projects to improve the experience of SDS for key people (service user, families, social work staff, service providers).

## 2.7 Delayed Transfers of Care

A comparison of figures from 31st 2022 to 31 March 2023 show the following:

	Total delays						
Date	Acute	Mental Health	Community				
31 <sup>st</sup> March 2022	39	5	27				
31 <sup>ST</sup> March 2023	55	2	39				

Table 4 – Number of Delayed Transfers of Care March 2022 - 2023

We have seen an increase through 2022 with the number of delayed transfers of care peaking at 176 in December 2022.

Analysing the week on week figures it is positive that we are seeing these reducing, and it is of note that the number of delayed discharges within mental health remain low as a result of our continued investment in our mental health team.

From an operational perspective our adult services team have met with several significant challenges over the year. These include a reduction in home care hours available as a result from the collapse of a provider and commissioned hours being returned to the partnership by our partners in the independent care sector. Over the past year this represented the loss of 530 care packages. The impact of moratorium in response to inspection and our monitoring of quality within our care homes and care at home provision impacts on capacity. Additionally, our resources in terms of qualified workers to support assessment and return to the community is proving problematic.

Throughout the health and social care system workforce recruitment and retention continues to pose significant risk to deliver on our ambition.

We have continued to implement strategies to create capacity and efficiency across the system.

#### These include:

- Implementation of a Hospital at Home Service
- Opened our Racecourse Road Intermediate Care Unit.
- Increased capacity in relation to discharge to assess beds.
- Established the RUNAT Team (Reablement Unmet Need Assessment Team)
- Stepped up our recruitment activity in relation to Home Care.
- Continued to encourage the growth of Micro Enterprises.
- Worked with colleagues in council HR to prioritise and speed up process and waiting times for vacancy approval.
- Established our workforce development group to increase and improve recruitment and retention of staff.

### 2.8 Mental Health

South Ayrshire have invested in a dedicated team of Mental Health Officers who are registered social workers required by law to have undertaken specialist training and hold an additional qualification in mental health. When the Statutory mental health team began in August 2022 south Ayrshire sat 32<sup>nd</sup> out of 32 local authorities in respect of MHO services.

From the 2021 MHO report completed by the SSC South Ayrshire provided 4.9 MHOs per 100,000. of the population. There has been a dramatic improvement in this resource and with the input from the statutory MHO team South Ayrshire now sits 14<sup>th</sup> out of 32 local authorities in the MHO report published by the SSSC in 2023.

South Ayrshire now provides 23.7 MHOs per 100,000 of the population.

The Statutory MHO team has been a significant success story for social work services in South Ayrshire.

Since statistics for the team were collected from October 2022 100% of statutory reports have been provided by the new MHO team within specified timescales.

A sustained improvement can be seen in the 11-month figure of a 99% return on SCR (Social Circumstances Reports) reports by MHOs. Given that this figure was sitting as low as 20% in 2021 and early 2022 this is a major turn around and an excellent improvement in the performance of MHO reporting on SCRs.

The MHO service has made significant innovations in promoting the national agenda for change in working on supported decision making and other aspects of the Scott review alongside colleagues from the Scottish Government. The pilot on Supported Decision Making (SDM) is being implemented and emerging signs are a real impact on tacking issues such as delays in hospital.

The partnership has agreed investment in a specific post for an SDM social worker to continue this work and we are the only partnership promoting this new way of working.

## 2.9 Learning Disability

In the past 12 months there has been exceptional developments in Learning Disability services. Following the pandemic and lessons learned during this time. We transformed our community supports in the Girvan and Ayr areas and developed a new building-base to enable those with a learning disability to meet up with friends in safe spaces. Within this space there will also be opportunities to attend themed groups for specific periods of time to develop life skills and more enhanced educational skills. This will also enable the service to provide a front door service where service users can drop in for advice and support. With monies from the Community Living Fund, we have been able to redesign a model of support whereby we support early hospital discharge and prevent admissions and holistically review our residents who live out of area. We also intend to support carers and residents in crisis by providing an intense model of support at time of crisis.

The League of Champions are a group who were established to support the development and review the outcomes of the new Learning Disability strategy and coproduce the strategy. They came together from across South Ayrshire to champion the rights of people living with a learning disability. They have shared lived experiences as service users, providers, parents and carers, have influenced and promoted positive changes in services, policies and practices. They communicate honestly and openly with people, listen to people's views and share this information with the Health

and Social Care Partnership. By engaging with local councillors, service providers, planners, commissioners, heads of services and front-line staff, they ensure that people with learning disabilities have a greater say in the decisions that affect their lives. They have a moto that to make a positive difference to people's lives they will seek the truth and will not back down!

The Learning Disability strategy was rewritten and coproduced in easy read version with support from the Scottish Commission for People with Learning Disabilities (SCLD), League of Champions and Strategy Development and Steering Groups. The League of Champions who will remain in place to ensure continuous engagement and give people with learning disabilities a forum for making their views known beyond the launch of the Strategy. There was robust and inclusive engagement to collate as many views as possible for the development of the new strategy. The feedback we received was rich and comprehensive and is incorporated into the final strategy. The Strategy applies to all adults with learning disabilities, including those aged from 16 onwards who are in transition into adult services. Policy at both a national and local level aims to ensure that people with learning disabilities have their rights respected, are treated equally and fairly, and are supported to make their own decisions and to live as independently as they choose. The vision of the Strategy was chosen by the League of Champions and received positive feedback in the consultation. The vision is: 'Life your best life in the way that you choose' This Strategy builds on the principles of the South Ayrshire Wellbeing Pledge and outlines what we offer to people with learning disabilities in South Ayrshire. The Strategy is informed by and supports delivery of the priorities and requirements set out in South Ayrshire Health and Social Care Partnership's Strategic Plan for 2021-31.

Core and Cluster is very much part of the housing options offered within South Ayrshire for our residents who have a Learning Disability. We are opening our 3<sup>rd</sup> Core and Cluster within Learning Disability services soon. Each time we develop with housing new houses we ensure our telecare is up to date and aspirational. For our new site we have worked with Health Improvement Scotland which has allowed more attuned and person-centred telecare for the proposed tenants. This new model is allowing us to have a true core and cluster where we have residents within a designated area of the new town centre development which also has mainstream housing. We have managed to access tenancies for people who need a lower level of support but the ongoing checking, advice and guidance to be as independent as possible and work to the vision of our new strategy which is Live your best life in the way you choose.

## 2.10 Adults and Older People

Building on the success of our Strategic Plan and Wellbeing Pledge we have a clear vision for our "team around the locality" and whole system approach to service provision set out in our Adult and Older People Service Plan.

Following significant investment in our front-line teams and Senior Management and Professional Leadership capacity we will be developing and delivering on Locality Plans for each of the six localities.

We are a Scottish Government GIRFE (Getting It Right for Everyone) pathfinder site and have been asked by Health Improvement Scotland to share our whole system frailty work nationally.

## **Looking Ahead**

Across Community Health and Care Services we have invested significantly to drive quality improvement, professional standards and integrated working with a focus on prevention, early intervention and partnership working. Building on the positive Joint Inspection of Adult Services our mission is to go from "Good to Great", delivering and celebrating sector leading services.

Moving forward there are a number of areas of improvement that we will continue to deliver:

- Build practice knowledge and competence around SDS leading to empowerment for those who
  use our services.
- Continued development with the third sector on the use of micro enterprises to support the social care landscape to increase choice.
- Improve performance management dashboard and develop methods to collect qualitative data (service user and carer survey, provider survey, roll out Care Opinion).
- Continue to invest in locally tailored, prevention and early intervention initiatives and microenterprises through Participatory Budgets
- Development and provision of easy-to-understand information and service directories to help people to self-manage and find the support they need.
- Embed team around the locality approach within each of the six localities to Improve access for people and their carers for early intervention, assessment and support using learning from new initiatives to reshape our approach.
- Promote and support the early identification of Power of Attorney to ensure those who cannot offer their views have a voice through their appointed person.
- Development of advocacy strategy.
- Further improve visibility of Partnership improvement work within the NHS and Council, building on current work to celebrate success locally, nationally and internally.

### **Justice Services**

The National Outcomes for Justice Social Work goal is to work toward reducing reoffending, while aiming to gain and sustain the public's confidence in the work of justice related services through promoting the values of safety, justice, and social inclusion.

### 2.11 Community Safety and public protection



Graph 16 – % of Social Work report presented to court by due date.

Justice social work continue to perform strongly in the submission of Social Work Reports that offer to the court options including community-based disposals.



Graph 17 – % of individuals places CPOs with supervision.

Graph 17 highlights a high percentage of cases where matters before Court are disposed by the use of Community Payback Orders. By working with Third Sector agencies such as Barnardo's individuals appearing at court are supported to reintegrate back into the community. Justice links with South Ayrshire Alcohol and Drug Partnership are particularly strong and have joint support groups, including a service user engagement group. Over the past year we have established a new

Justice Workshop which serves as a hub where individuals can fulfil the demands of their community payback orders and engage and meet with Justice staff to identify opportunities to further support them on their journey to reparation and desistance.

Activity	2021/2022	2022/2023	Change
Full Criminal Justice Social Work Reports Submitted	475	642	35%
Community Payback Orders	376	399	6%
Unpaid work requirement CPO	141	175	24%
Number of throughcare cases	115	118	2%
Supervised in the Community	53	50	-5%
Custody	62	68	9%
Number of interviews by CJ staff in Ayr Sherriff	1406	1419	0.9%
Court			

Table 5 – Comparison of activity in Justice Services 2021/2022 – 2022 - 2023

Table 5 highlights increased demand on our Criminal Justice team in relation to Criminal Justice Social Work reports, a slight increase in the number of Community Payback Orders Supervised by the team and a substantial rise in the number of these that require an unpaid work element to be managed by the team. The number of throughcare cases had remained relatively static with figures showing a slightly higher leaning towards work while individuals are in custody.

The number of interviews by Justice to service work in Ayr Sherriff Court for post sentence and report requests remain static.

Overall, our Justice Team continue to perform to a high level in their work to support those who are involved in the justice system within South Ayrshire

## 2.12 Multi Agency Public Protection Arrangements (MAPPA)

Multi Agency Public Protection Arrangements is the framework which joins up the agencies who manage offenders. The fundamental purpose of MAPPA is public safety and the reduction of serious harm and places a statutory function on police, local authorities, and the Scottish Prison Service (the responsible authorities) to establish joint arrangements for assessing the risk from sex offenders including the effective sharing of information. Health Services are included in relation to Mentally Disordered Restricted Patients.

The 3 management levels in MAPPA are:

- Level 1: Routine Risk Management.
- Level 2: Multi-Agency Risk Management.
- Level 3: Multi Agency Public Protection Panels (MAPPP).
- > Category 3: other dangerous offenders, at risk of causing serious harm.

For MAPPA purposes the imminence and likelihood of risk of serious harm is classified as follows:

- ➤ Very High: there is an imminent risk of serious harm. The potential event is more likely than not to happen imminently, and the impact would be serious.
- ➤ High: there are identifiable indicators of risk of serious harm. The potential event could happen at any time and the impact would be serious.
- ➤ Medium: there are identifiable indicators of serious harm. The offender has the potential to cause such harm, but is unlikely to do so unless there is a change in circumstances, for example failure to take medication, loss of accommodation, relationship breakdown, drug or alcohol misuse; and
- Low: current evidence does not indicate likelihood of causing serious harm.

South Ayrshire Social Work Justice Service is responsible for managing these offenders as the lead agency alongside the Police: Sex Offender Policing Unit (SOPU). The agencies provide robust risk assessments and continue to monitor and provide interventions for individuals subject to sex offender registration, through the Multi Agency Public Protection Arrangements.

MAPPA cases in South Ayrshire										
	2020-202	21 Revised	d	2021 - 2	2022		2022 2023			
	Number Comm. Prison Number Comm. Prison					Prison	Number	Comm.	Prison	
Level 1	131	111	20	138	118	20	146	121	25	
Level 2	4	2	2	6	2	4	6	3	3	
Level 3	1	0	1	0	0	0	2	0	2	
Total	136	113	23	144	120	24	154	124	30	

Table 6: The number of MAPPA cases and MAPPA levels in 2021-22 with Justice as lead agency.

The table above shows an overall increase in MAPPA cases within South Ayrshire. In this reporting year the number of people within Prison has risen by 3% on a previously static range of 16%. A slight movement from community to prison based.

### 2.13 Partnership Delivery Team

Partnership Delivery Team (PDT) is part of the three Ayrshire Justice Services: East, North and South. It has a pan Ayrshire remit and is responsible for delivery of specific services which offer an economy of scale. It is jointly funded and strategically managed by the three Ayrshires. North Ayrshire are the host authority. The specialist services delivered by PDT are Caledonian System (domestic abuse), Moving Forward Making Changes (sex offending) and Drug Treatment and Testing Orders. Over the years PDT have also delivered Women's Service, Bail Supervision, Structured Deferred Sentence and Diversion from Prosecution, with Electronic Monitoring being added most recently. However, these services will return to locality teams and PDT will concentrate on the specialist services during the next year.

During 2022/23, PDT have managed on behalf of South Ayrshire:

- Structured Deferred Sentence: 7 imposed.
- Women Service: 42 women supported.
- Drug Treatment & Testing Orders: 5 commenced and 9 still on order.
- Caledonian requirements: 46 men on orders, 75 women being supported, 10 children being supported.
- MFMC: 18 commenced.
- Bail Supervision: 37 assessments completed, and 13 cases commenced.
- Diversion: 64 assessments undertaken: 48 cases commenced

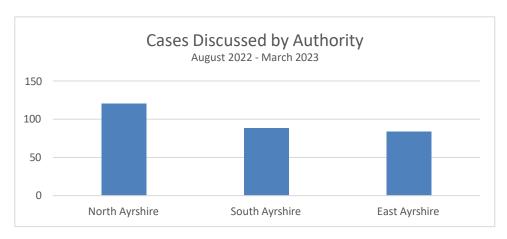
### 2.14 Multi Agency Risk Assessment Conference

The year has seen embedding of the MARAC (Multi-Agency Risk Assessment Conference model into our procedures and processes relating to public protection. MARAC was implemented in August 2022 and there are monthly meetings for those identified by multiagency partners through the process.

MARAC process provides a structured response to the highest risk cases of domestic abuse and gender-based violence (GBV) and is embedded within the Scottish Government's Equally Safe Delivery Plan. It is an ambition of all Violence against Women Partnerships in Ayrshire to support those most at risk of serious harm.

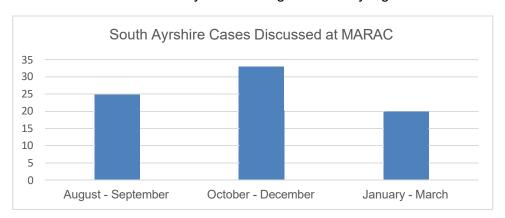
As indicated in prior data reports, this performance report highlights that the agencies referring most frequently are Police Scotland, Women's Aid and ASSIST. (An independent domestic abuse advocacy service.) The most prevalent factors are Physical Abuse, Coercive Control and Emotional Psychological Abuse. The use of alcohol and drugs are also by the perpetrator is also prevalent in referrals.

Data available highlights the number of referrals into MARAC from South Ayrshire started lower than both North and East but as processes have embedded, we have seen these rise.



Graph 17 - MARAC Cases discussed by each authority.

Graph 17 highlights that South Ayrshires figures are in line with East Ayrshire. Analysis of referrals has leaned towards North Ayrshires being consistently higher.



Graph 18 - Number of South Ayrshire MARAC cases discussed.

Graph 18 highlights through the reporting period an upturn in between October and December of 2022.however there is downturn January – March 2023. It is important to note that the first quarter represented only includes 2 months of data as MARAC commenced in August 2022

#### 2.15 Prevent

Within the reporting year we have continued to work with a range of multiagency partners to protect those who may be targeted by individuals who wish to promote radicalised thinking. Prevent is an early intervention programme to protects individuals targeted by terrorist influences by providing local, multi-agency safeguarding support. The type of support available is wide-ranging, and can include help with education or careers advice, dealing with mental or emotional health issues, or digital safety training for the individual or those who have care for them. During the reporting period one intervention has been completed with a successful outcome and another individual was considered for adoption to Prevent intervention but this was not deemed necessary or proportionate.

# **Alcohol and Drugs Partnership (ADP)**

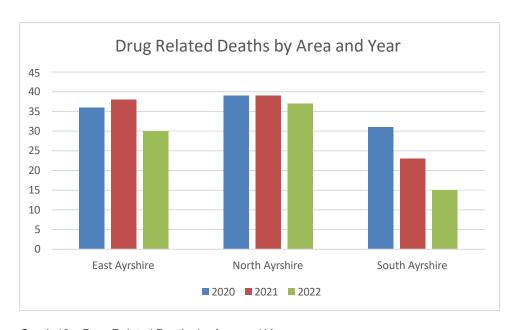
# 2.16 Alcohol and Drugs Partnership (ADP)

During 2022-23 the Alcohol and Drug Partnership (ADP) concluded their independent three phase learning review and published their new **Change Story** on the 4 November 2022. The ADP had been adapting and flexing its services and support in the light of Covid-19 and this impacted on how the ADP worked with young people, carers and families, their work on reducing alcohol and drug related deaths, prevention and early intervention, strength in recovery and transitions work.

The <u>National Records for Scotland Drug Related Deaths in Scotland 2022</u> report showed that drug related deaths in South Ayrshire reduced from 23 in 2021 to 15 in 2022. Table 7 and Graph 19 present data in relation to drug related deaths in East Ayrshire, North Ayrshire, and South Ayrshire from 2020 to 2022.

Year	East Ayrshire	North Ayrshire	South Ayrshire	Ayrshire & Arran
2020	36	39	31	106
2021	38	39	23	100
2022	30	37	15	82

Table 7: The number of MAPPA cases and MAPPA levels in 2021-22 with Justice as lead agency.



Graph 19 - Drug Related Deaths by Area and Year

The ADP agreed it was the right time develop a fresh approach to evaluation and the difference their work was making in terms of supporting better outcomes for those who access services and how to develop collaborative practices with other parts of the system in South Ayrshire. The learning review was also set in the context of the emerging Ministerial Priorities including the National Drug Mission to Reducing Drug Related Deaths and Harms.

The ADP continued to work collaboratively and at pace to implement the Medication Assisted Treatment (MAT) Standards and secured additional four-year funding to support South Ayrshire Treatment and Recovery Team (START) to implement the MAT Standards. A range of Process, Numerical and Experiential Data collection informed the final RAGB status for South Ayrshire in 2022 / 2023. The 'provisional' status was given to several ADP areas across Scotland as the new Experiential Process was embedding.

ADP	мат	Predicted RAGB	Final RAGB AS 15.05.2023
South Ayrshire	MAT 1	Provisional Green	Provisional Green
	MAT 2	Provisional Green	Provisional Green
	MAT 3	Provisional Green	Provisional Green
	MAT 4	Provisional Green	Provisional Green
	MAT 5	Provisional Green	Provisional Green
	MAT 6	Amber	Provisional Amber
	MAT 7	Amber	Amber
	MAT 8	Amber	Amber
	MAT 9	Amber	Provisional Amber
	MAT 10	Amber	Provisional Amber

The ADP undertook a range of additional research, scoping and feasibility activities to inform service improvement activities and future commissioning. These included a research and scoping study, informed by the voices of people with lived experience, to develop a residential Rehabilitation Funded placement model and dedicated multiagency community-based support team (ROADS).

They undertook a feasibility study to inform the development of a Hub and Spoke Model, offering a range of support for vulnerable people with multiple and complex needs, under one roof, including evening and weekend support. They also undertook a range of activities to support the implementation of a whole family approach and family inclusive practice across South Ayrshire and further developed support for young people affected by their own substance use. They continued to develop our collaborative practices with Justice Services offering a range of peer led support for people involved with justice services, including in reach support in custody settings.

Their lived experience and front-line practitioner led subgroup developed a local Stigma Charter and Stigma Awareness session for delivery across South Ayrshire. The recovery community continues to go from strength to strength, offering a wide range of peer led recovery focussed groups, activities, volunteering and training opportunities. The ADP launched their new Peer2Peer Network for individuals working in lived experience roles across South Ayrshire with almost twenty people attending the first meeting. They developed a new <a href="ADP website">ADP website</a> and continued to support multiagency staff to undertake training and development through the commissioning of Trauma Informed Practise courses, including Vicarious Trauma Training, and Community Reinforcement and Family Therapy (CRAFT) training courses.

For the year ahead they are refreshing the Alcohol and Drug Strategy in line with the new Change Story and developing a new Commissioning Plan and Performance Framework. They are continuing to develop their collaborative working with the Children Services Planning Group and Mental Health Services, embedding the priorities of the Change Story. The ADP are driving forward their ambition for the Hub and Spoke model and will continue to drive forward whole family approach and family inclusive practice, along with our Trauma Pledge and our Stigma Charter.

They will also be hosting their second Recovery Festival on 2 September 2023 which will bring together individuals, families and communities from across South Ayrshire.

# 3. External Scrutiny

# 3.1 Adult Support and Protection

There has been no inspection of adult support and protection processes and procedures in the reporting year. We are currently preparing for phase 2 of the inspection that was published on the 16<sup>th</sup> of November 2021.

# 3.2 Adult Services

Within the reporting year we have been involved in the Joint inspection of services for adults with Learning Disability in South Ayrshire. The report was published on the 30<sup>th of</sup> March 2023. In summary the report evaluated the partnership to have attained the following grades. A full copy of the report can be accessed <u>here</u>:

Key area	Quality indicator	Evaluation
1 - Key performance outcomes	1.2 People and carers have good health and wellbeing outcomes.	Good
2 - Experience of people who use our services	2.1 People and carers have good experiences of integrated and person-centred health and social care outcomes	Good
	2.2 People's and carers' experience of prevention and early intervention outcomes	
	2.3 People's and carers' experience of information and decision-making in health and social care services	
5 - Delivery of key processes	5.1 Processes are in place to support early intervention and prevention	Good
	5.2 Processes are in place for integrated assessment, planning and delivering health and care	
	5.4 Involvement of people and carers in making decisions about their health and social care support	
6 - Strategic planning, policy, quality and improvement	6.5 Commissioning Arrangements	Good
	9.3 Leadership of people across the partnership	Good

9 - Leadership	9.4 Leadership of change and improvement	
and direction		

Table 8: Joint inspection of services for adults with Learning Disability in South Ayrshire

In summary the report highlights that South Ayrshire was performing well on key outcomes despite the significant challenges faced such as growing levels of deprivation and a high and growing ageing population. The inspection highlighted good examples of integrated working with clear direction on how to move from good to excellent in relation to this. The report highlighted our common vision and the focus of our workforce to deliver this for the people of South Ayrshire.

#### 3.3 Child Protection

There has been no external inspection activity in relation to Child Protection.

# 3.4 Fostering and Adoption Services

There has been no external inspection activity relating to Childrens Houses.

#### 3.5 Childrens Houses

There has been no external inspection activity relating to Childrens Houses.

#### 3.6 Care Homes

Within the reporting period there have been 15 unannounced inspections to older people care homes within South Ayrshire between April 2022- March 2023 by the Care Inspectorate. Five of the homes inspected had excellent inspections with grades of very goods in place. Seven of the homes inspected were awarded grades of good & adequate. Of the three remaining care homes they had not achieved well with grades of weak resulting in moratoriums being placed on them until the necessary requirements & improvements were made. Following the re-inspection of the three care homes they all met the necessary requirements resulting in adequate grades until their next full inspection from the care inspectorate.

### 3.7 Care at Home

Within the reporting period 3 care at home services commissioned by the council were inspected.

# 4. Internal Scrutiny

In May 2022 the Scottish Government published new guidance relating to the undertaking of Learning Reviews in both the areas of Adult Support and Protection and Child Protection. This replaced the previous guidance on conducting Significant Case Reviews (SCR)'s and Initial Case Reviews.

### 4.1 Adult Services

Within the reporting period there have been two consideration meetings to proceed to a learning review.

In the case of EM following case discussion by relevant agencies the decision was that there was no requirement to progress to a Learning Review.

In the case of LH following a consideration of learning review meeting with multiagency representation the recommendation to the Adult Protection was not to progress to a Learning Review. Highlighted in this case was the right of the individual to refuse care / health care advice and assistance with living conditions.

#### 4.2 Childrens Services

There has been two Learning Reviews initiated by Children's Services between April 2022 and 2023.

The first of these relates to Child A. The learning from this review will be published in the latter half of 2023.

The second of these relates to Child B and was published in February 2023.

### 4.3 Large Scale Investigations

In August 2022, a Large-scale Investigation (LSI) was initiated following an accumulation of concerns regarding a local provider of care-at-home services. The HSCP led a multi-agency investigation and support team, ensuring appropriate practical support, advice and guidance was available to the provider. However, over the weeks that followed, the necessary improvements were not being made and it became increasingly difficult for the provider to maintain the level, and quality, of service they were required to provide, and to ensure that service users were supported and protected from harm. This ultimately resulted in the provider's contract with the HSCP being terminated and TUPE arrangements being put in place for staff that wished to be retained. The LSI concluded on the 29<sup>th</sup> of November, satisfied that there were no longer adults at risk of harm.

In October, a further LSI was initiated following concerns regarding the safe delivery of care in a local care home. Again, the HSCP led a multi-disciplinary and investigation and support team which worked closely with the provider to address the identified issues and concerns. The provider was highly motivated to effect change and evidence of improvement was quickly seen and feedback from the Care Inspectorate on the required changes was positive. The LSI was concluded in February, with the investigation team happy with the improvements that had been made and that there were no longer adults at risk of harm.

### 4.4 Care Home Moratorium

Within the reporting period 2 Care homes and 2 care at home providers were subject to local moratoria. These were instigated by the feedback and reporting from the Care Home Review Team, Community Services Oversight Group and the Care Inspectorate.

Working with providers we were able to offer leadership guidance and support to ensure that the necessary improvement plans were implemented and people using those services continued to experience a high standard of care.

### 4.5 Duty of Candour

Within the reporting there have been no reportable incidents under Duty of Candour guidance as set out by Health (Tobacco, Nicotine etc. and Care) (Scotland) Act 2016 (The Act) and The Duty of Candour Procedure (Scotland) Regulations 2018 relation to duty of candour.

#### 5. Resources

# **5.1 Summary of Financial Performance**

Financial information is part of the performance management framework with regular reporting of financial performance to the IJB. This included an integrated approach to financial monitoring, reporting on progress with savings delivery, financial risks and any variations and changes to the delegated budget. This year's financial reporting included regular updates on the financial impact and use of reserves to create additional capacity to meet demand, and steps taken to mitigate against the staffing crisis impacting both health and social care posts. During the year regular financial monitoring reports including progress on transformation projects and savings targets, financial risks and any changes to the delegated budget were presented to the IJB.

This year's financial performance reflects issues in health and social care recruitment with underspends in both internal and purchased frontline care services. The performance is also reflective of transformation projects within children services focussing on early intervention approaches keeping children with their families or community-based services.

Within community care and health there was significant underspends in relation to the ability to recruit to front line posts from budget investments and additional Scottish Government investment to increase capacity in the community care workforce. South Ayrshire has a high dependency ratio meaning there is less of a working age population available to support the ageing population. Due to the high level of staff turnover and the projected underspends the Council and the NHS did not pass through the Scottish Government allocation for the increase in pay award for both social care and health staff. Whilst this was affordable this year due to the level of turnover, both parties passed over the additional pay uplift in the base budget for 2023 - 24.

The lack of workforce has become a significant concern and a risk to the ability to provide services at the right time in the right place. The HSCP has worked during this year to mitigate the risk by creating new models of care delivery focussing on early intervention within the community to reduce the level of need. This includes a frailty team and the reablement unmet need assessment team, both focussing on supporting people to reduce level of need and maintain independence for longer.

There continues to be an underspend in looked after children's placements, an anticipated demand in need for foster carers has not materialised and we have been supporting children in our neighbouring authorities. This can be attributed to the Whole Family, Whole System approach including the Signs of Safety training and Functional Family Therapy.

The overall financial performance against budget for the financial year 2022 - 23 was an underspend of £14.767m. The underspends are partially due to reserves carried forward not fully utilised.

On the 14th of June 2023, the IJB approved £4m to create an Improvement and Innovation Fund, replacing the previous change fund of which £0.456m was already committed. The Improvement and Innovation Fund will be used over the next three years to provide investment in specific projects or services to embed future financial sustainability.

The balance of £2.235m will be allocated to unallocated general fund. In the first instance the unallocated reserve will be utilised to meet any financial challenges in 2023 - 24

It is essential that the partnership operates within the delegated budget and commissions services from the Council and Health Board on that basis. Significant progress has been made during 2022-23 to ensure the ongoing financial sustainability. This work will continue and be built upon moving into 2023-24.

#### Key successes for 2022-23 include:

- Debt repayment of £0.802m, being the final instalment of outstanding debt to the Council.
- Overall reported surplus allows for the earmarking and protection of ring-fenced funding for Scottish Government priorities.
- Surplus has allowed for creation of an Improvement and Innovation Fund to be utilised to ensure future financial sustainability.
- Progress with reducing the number of children placed in out with authority placements in 2022-23 has been achieved through transformation in Children Services.
- Investment in training and development to create capacity by providing opportunities for existing employees to become qualified social workers.
- Increasing capacity in our own care homes to support delayed transfers of care.
- Investment in occupational therapy focussing on early intervention and prevention, in the short term this has reduced the level of unmet need in the community, longer term benefits will be realised from prevention of hospital admissions.

Strong financial leadership will continue to be required to ensure that future spend is contained within the budget resources available, and the IJB moved into 2023-24 with an approved balanced budget.

#### 5.2 Best Value

NHS Ayrshire and Arran and South Ayrshire Council delegate functions and budgets to the IJB in accordance with the provision of the Integration Scheme. The IJB decides how to use these resources to achieve the objectives set out in the Strategic Plan. The IJB then directs NHS Ayrshire and Arran and South Ayrshire Council to deliver services in line with the objectives and programme set out in its Plan.

The governance framework sets out the rules and practices by which the IJB ensures that decision making is accountable, transparent and carried out with integrity. The IJB has legal responsibilities and obligations to its stakeholders and residents of South Ayrshire. The IJB also has a duty under the Local Government in Scotland Act 2003 to make arrangements to secure Best Value, through continuous improvement in the way in which its functions are exercised, having regard to economy, efficiency, effectiveness, the need to meet the equal opportunity requirements and contributing to the achievement of sustainable development.

During this year transformation change within services has continued as well as development of new ways of working to mitigate against challenges from lack of workforce capacity. It is recognised that transformation is key to shaping health and care services for the future, shifting the balance of care to more early intervention and prevention approaches and community-based services with less reliance on institutional based services.

Reports to the IJB this year included <u>Transformation and Efficiency Update</u> demonstrating the improvement to outcomes as well as reducing the spend by focussing on early intervention to reduce demand in particular within children's family placements and out with authority placements. Within adult services the development of core and cluster supported accommodation has reduced the need for more expensive residential based care, providing accommodation locally in the community. An increased update of Self-Directed Support options 1 and 2 providing service user with more choice and control has reduced spend on traditional purchased care services and provided service users with more autonomy to direct their care. Investment in services for Older People providing early intervention and preventative care such as telecare equipment with responder services and reablement provision has been proved to limit demand for care home and care at home placements as detailed in the report. The focus on high volume lower level supports benefits the demand for higher cost lower volume and ensures people are maintained in the community in their home or homely setting for as long as possible.

A further report was presented to the IJB <u>Transformation and Improvement Project Plan</u> providing detail on new projects in progress to continue to improve services and provide best value. This includes development of a new Core and Custer in Ayr town centre, building based day care and community-based activities for Learning Disability service users. Within older people implementation of Hospital at Home service and development of micro-enterprises offering low level health and social care support in communities. Children and Families services plan to develop further early intervention family first approach to be available in all schools, recruitment of play therapist to promote health and wellbeing for children and reduce breakdown of kinship and foster care relationships. Allied Health Professional projects include tackling prevention and inequality by building on rehabilitation capacity, self-management approaches and improve of skills mix within roles to mitigate against recruitment pressures.

The creation of an Improvement and Innovation fund will enable the services to continue to progress further with developments in service delivery to meet strategic priorities and ensure financial sustainability in the longer term.

#### 6. Workforce

#### 6.1 Workforce Plan

The South Ayrshire Health and Social Care Partnership has a statutory duty to provide a workforce plan, the Scottish Government requires all Partnerships and Health Boards to provide 3-year plans for the periods 2022-25 and thereafter. The workforce plan primarily focuses on workforce requirements within South Ayrshire Council (SAC) and NHS Ayrshire and Arran (NHS A&A), but also considers the workforce within the Third and Independent Sector.

The South Ayrshire HSCP 2022-25 Workforce Plan was approved by the Integrated Joint Board in October 2022 and Performance and Audit Committee in November 2022. This was subsequently submitted to the Scottish Government Health and Social Care Workforce Planning and Development Division and received positive feedback.

Section 7 of the <u>workforce plan</u> contains an action plan which sets out a broad range of activities that will progress during the next 3 years. To support the action plan, a Staff Governance Group was established in November 2022 tasked with providing strategic direction and oversight. Three sub-groups were created to the key themes of Recruitment and Retention, Learning and Development, and Wellbeing (with a focus on Strategic Planning underpinning all groups). Membership of groups consists of a range of expertise across both SAC and NHS A&A. Sub-groups meet bi-monthly and provide updates to the Staff Governance Group (which also meets bi-monthly). To ensure consistency and minimise any duplication, the Organisational Development Workforce Lead attends and supports all sub-groups.

The activities within the action plan fall within the following themes:

- Embedding and supporting evidence-based workforce planning within service planning and business transformation.
- Progressing a range of activities that will develop a 'pipeline' of employees and enhance recruitment to attract the best candidates into health and care employment in South Ayrshire.
- Supporting employees through education and training to equip them with the skills required to deliver the best quality of care, and to ensure continuity of service in key roles.
- Making the South Ayrshire Health and Social Care Partnership an "employer of choice" by ensuring staff feel valued and rewarded.
- Creating a workforce and leadership culture with a heightened focus on the health and wellbeing (physical, mental, and financial) of employees.

Updates on the action plan are presented to the Performance and Audit Committee on a six-monthly basis.

The workforce plan highlights a range of workforce risks which the Partnership is attempting to mitigate, although these are not unique to South Ayrshire or the wider health and social care sector. These include –

- turnover averaging 10%
- significant number of employees (in some cases one-third) leaving within 3 years
- 50% of the Partnership workforce aged over 50 within the next 9 years.
- absence rates averaging 7.5% (with some services facing 20 working days lost per employee) and with increasing rates of psychological absence.

## **6.2 Practice Development**

In April 2021 the HSCP created a new Practice Development team to drive forward training and development across the workforce. During the 2021 / 22 period the Practice Development Team Leader undertook a series of evaluations to the training provided, which has informed areas for progression and improvement.

Over the last 12 months in particular, significant growth has been experienced across Practice Development. This includes:

The establishment of the Practice Development Base at 8 Wellington Square which hosts 3 Training rooms, two of which have modern "Clever Touch" screens to support the Training and Development Activity, along with a fully equipped Moving and Handling facility.

The Practice Development Base is now a full-time facility offering a range of Training and Development opportunities to staff and services in South Ayrshire's HSCP.

The Training activity has grown significantly, between January and March 2023, over **600** training opportunities have been used by staff in courses including:

- Developmental Training
- Public Protection Training
- Mandatory Training

In 2022, Practice Development, alongside Organisational Development, were able to develop a process to include NHS Colleagues within South Ayrshire's HSCP for the first time to access our COAST system to ensure that both local authority and NHS staff can both book and train together. All training is uploaded and recorded on COAST.

In late 2022, in conjunction with our Third Sector partners in VASA, we were able to develop a process of engaging with external Third / Independent sector partners in a range of training opportunities. This has been welcomed across the Third and Independent sector providers.

Throughout 2022, in conjunction with the Welfare Rights Hub, we supported the Roll out of 'Welfare Rights' across South Ayrshire's HSCP. This was a direct action to ensure those we work through get access to their entitlements to attempt to address pressures through the cost-of-living crisis. The outcome of the training was a significant rise in referrals from those most in need.

Along with Police Scotland, Practice Development supported the roll out of the Prevent Agenda to HSPC staff in addition to Third / Private Sector Partners.

For the first time, we have been able to produce and promote an extensive calendar of Training and Development opportunities which is continually changing and adapting to need. This doesn't include the SVQ 2, 3 and 4 or PDA work in Supervision which is additional.

A monthly bulletin is now sent out which covers both Internal and external Training and Development opportunities along with Practice Development news.

An online Platform was created in early 2023 for HSCP Staff and services to view all training being undertaken across South Ayrshire HSCP. This in turn point's all staff to COAST so that they can sign up where their training is now recorded under their names. We can now track staff undertaking all training where in turn, this assists services to plan ahead to support both PDR and Supervisory processes.

Some significant evaluation has been undertaken across specific themes of work such as Leadership and Management which shows learning being taken into practice. The feedback from staff has been nothing short of remarkable.

13 Newly Qualified Social Workers are currently in their Early Implementation Supported Year Pilot, proactively recruiting NQSW through Practice learning programme so numbers will increase over summer period.

We introduced our Social Work training programme to empower those within our organisation to attain a professional qualification in Social Work. Currently we have:

- 4 Post Graduate Candidates on the Open University Route.
- 6 Undergraduate candidates commencing Open University Route.
- Process underway for further places utilising both Postgraduate and Undergraduate routes.

Across the partnership we have been involved in initiatives to attract staff to work in the South Ayrshire. These include attending recruitment fairs, Fastrack recruitment processes, increased promotion of vacancies across social media platforms and offering our partners free advertising on the My Job Scotland platform we were able to maximise awareness of vacancies.

We are working with colleagues in Human Resources to make our application process as seamless as possible and we are working on robust career pathways linking to training and formal qualification.

It is significant that we were once again able to offer Face-to-face training returned during the year 2022/23 allowing richer professional discussion and supporting networking and joint working.

There is a requirement for staff in particular services to be registered with the Scottish Social Services Council (SSSC). Over the past 12 months

- 41 people have completed SVQ Level 2,
- 16 people have completed SVQ Level 3
- 9 people have completed SVQ Level 4
- 21 people have completed P.D.A in Supervision

Ensuring staff are supported and trained to the highest standard required to meet registration requirements is a key area of focus for the Senior Management team.

# **6.3 Practice Teaching (Social Work)**

South Ayrshire HSCP continues to have a robust practice learning programme in place and has worked closely with the Learning Network West and Universities to exceed it allocation of student placements through the provision of 10 additional placements. This was achieved through the commitment and creativity of South Ayrshire's Practice Teachers and Link Worker and services who were committed to ensure that social work students were well supported with all students being successful in completion of their placement. Approaches to working styles have evolved following the pandemic and we have been mindful of the potential impact that this could have on student's experience of placement. We have brought students together through a Pan Ayrshire Student Group Programme providing enhanced learning opportunities and ensured that all students have dedicated laptops to maximise flexibility.

The HSCP have a healthy number of qualified practice teachers and is continuing to recruit on the Professional Development Award in Practice Learning with approximately 4 candidates each year. We are currently focusing on specific service areas across 2023 - 2025 to strengthen capacity and maintain a balance between practitioners and managers.

The HSCP continues to be active supporting the work of the Social Work Education Partnership where the focus is moving towards the development of regional areas. The HSCP are currently working with the University of the West of Scotland undertaking research on the use and application of virtual reality in education and practice. This is an exciting piece of research that could lead to much wider developments across social work and education.

### 6.4 Quality Improvement

South Ayrshire HSCP's Framework for Quality Improvement was approved in September 2022 and describes the HSCP's desire to embed a culture which empowers our workforce to deliver quality services through continuous improvement.

In 2022 / 23, the focus has been on empowering our workforce to strive for quality within their services; with an overall aim to improve staff knowledge of Quality Improvement (QI) and confidence in using QI tools to 75%, as determined by an annual HSCP wide survey undertaken annually each September. In pursuit of this we have focussed on building QI capacity/ capability through tiered training designed to meet the needs of all staff, based on their role and level of involvement in improvement work.

The baseline QI Survey undertaken in September 2022 evidenced that, in those who responded, confidence and competence in using QI was 35%; and that 55% were involved in QI activity.

To build improvement capacity and capability within our workforce, mandatory (Foundation Level) training was introduced for all staff in February 2023, with a June 2023 compliance target of 90-100%. These learning resources should provide a helpful introduction to quality improvement and widely used improvement methods which in turn will support staff to develop team plans using self-evaluation to identify areas for improvement, as well as providing the knowledge and tools needed to participate in improvement projects at team level.

In addition, 41 staff have completed Ayrshire and Arran Improvement Foundation Skills (Practitioner Level) training in 2022 / 23, resulting in positive improvements being made through 38 QI projects delivered as part of their training. This training will continue to be rolled out in 2023 / 24 with a further 40 staff expected to complete their Practitioner Level training before the end of 2023. The

expectation is that all staff undertaking Practitioner Level training will continue to undertake further improvement work post AAIFS graduation.

Staff have also been encouraged and supported to access national (Lead Level) training with 4 staff successfully securing places on Cohort 45 of the Scottish Improvement Leader (ScIL) Programme, due to commence in June 2023. Access to national training is limited due to availability of spaces and as such we will also be trialling a Certificate in Team Coaching to allow us to 'grow our own' mentors to support staff who are at an earlier stage of their QI learning journey.

Further work will be progressed in 2023/24, to ensure that we continue to promote QI across our workforce; that our training supports both our aim, and other improvements needed to create our desired culture; and to put in place an infrastructure to support/ empower our workforce with QI in other ways.

South Ayrshire HSCP have also provided a small core group of staff with Coaching Skills training, which is designed to improve culture; increase opportunity and confidence locally; support staff awareness and development; create a learning platform for teams to engage with; encourage innovation and engagement as well as build trusting relationships with staff and managers. Although in early stages, when added to the tool kit for Quality Improvement which has been invested in by the HSCP there is further opportunity to expand staff skills and engage them positively in decision making.