#### ITEM No ...6......

REPORT TO: POLICY AND RESOURCES COMMITTEE – 18 NOVEMBER 2019

REPORT ON: THE CHIEF SOCIAL WORK OFFICER ANNUAL REPORT 2018-19

REPORT BY: CHIEF SOCIAL WORK OFFICER

**REPORT NO: 383-2019** 

#### 1.0 PURPOSE OF REPORT

1.1 This report brings forward for Members' information and approval the Chief Social Work Officer's Annual Report for 2018/19, attached as Appendix 1.

#### 2.0 **RECOMMENDATIONS**

It is recommended that the Policy and Resources Committee:

- 2.1 Approves the Chief Social Work Officer's Annual Report for 2018/19, attached as Appendix 1.
- 2.2 Approves the submission of the Chief Social Work Officer's Annual Report for 2018/19 to the Scottish Government.

#### 3.0 FINANCIAL IMPLICATIONS

None.

#### 4.0 BACKGROUND

- 4.1 The requirement that every local authority has a professionally qualified Chief Social Work Officer (CSWO) is set out in Section 5 (i) of the Social Work (Scotland) Act 1968, as amended by Section 45 of the Local Government (Scotland) Act 1994. Associated regulations state that the CSWO should be a qualified Social Worker and registered with the Scottish Social Services Council (SSSC).
- 4.2 The CSWO provides a strategic and professional leadership role in the delivery of Social Work services, in addition to certain functions conferred by legislation directly on the officer. The overall objective of the role is to ensure the provision of effective, professional advice and guidance to Elected Members and officers in the provision of Social Work and Social Care services.

The Public Bodies (Joint Working) (Scotland) Act 2014 provides for the delegation of certain Social Work functions to an integration authority but the CSWO's responsibilities in relation to local authority Social Work functions continue to apply to services which are being delivered by other bodies under integration arrangements. Responsibility for appointing a CSWO cannot be delegated and must be exercised by the local authority itself. The CSWO also has a role in providing professional advice and guidance to the Integration Joint Board (IJB).

4.3 National guidance requires that the CSWO produces and publishes an annual summary report for local authorities and IJBs on the functions of the CSWO and that the approved report is forwarded to the Scottish Government to contribute towards a national overview of Social Work services. The information in this report complements other more detailed service specific reports on Social Work and Social Care services which have been reported in other ways.

As can be seen in this year's report, Social Work and Social Care services have continued to deliver quality support which improves lives and protects vulnerable people, whilst also responding to many challenges across the wider public sector and Social Work specific landscape.

There are a number of highlights in the report alongside a description of ongoing challenges and priorities ahead. Some specific achievements include:

- The implementation of a wide range of approaches to service user and carer involvement and empowerment which demonstrate that co-production is increasingly becoming embedded in the way in which we work to plan, improve and deliver Social Work and Social Care services and supports.
- The production of a revised Strategic and Commissioning Plan for Health and Social Care, that has a key focus on addressing health inequalities that impact disproportionately on some of the most vulnerable people in the city, including people affected by substance misuse and mental health issues.
- The completion of a range of self-evaluation activities the findings of which will inform future improvement activities. This includes a multi-agency audit of child protection and Looked After Children cases that identified a number of aspects of good practice within Social Work services.
- The development and implementation of a range of learning and development activities to support the Social Work and Social Care workforce to deliver high quality services and acquire the knowledge and skills to lead and manage increasingly integrated responses to health and social care needs.
- Positive performance across a range of services, including stabilising placements for Looked After Children, maintaining low usage of secure care for children and young people, increasing the number of people diverted from prosecution, performing above the Scottish average in the majority of national indicators of citizen's perceptions of health and social care and achieving further reductions in the use of unscheduled care by people aged 18 and over.
- 4.4 The report is also forward looking and identifies the key challenges and opportunities for the coming year across Children's Services, Community Justice and Health and Social Care. Given the recent retirement of the former CSWO, these will now be taken forward by her replacement, who will continue to work alongside a range of partners and local communities to strengthen and improve services. This will include work on:
  - Across all services, strengthening our approaches towards protecting the public through the implementation of a Transforming Public Protection Programme with the Care Inspectorate to improve practice and processes in respect of assessments, chronologies and plans.
  - Across all services, strengthening our approaches towards vulnerable women, including through the New Beginnings Team, Pause Programme, new Community Custody Unit, Caledonian Programme and Safe and Together.
  - In Children's Services, continuing to lead on a GIRFEC Improvement Programme which focuses on prevention through the related initiatives of a Centre of Excellence for Looked After Children (CELCIS) Addressing Neglect Programme, What Matters 2 U and a Fast Online Referral Tracking system.
  - In Children's Services, continuing to improve the placement stability of Looked After Children and Care Leavers to fully meet their health and wellbeing needs and support them towards positive destinations in adulthood.
  - In Children's Services, working with the Centre for Excellence for Looked After Children on a PACE programme to improve approaches towards children and young people moving into permanent fostering and adoptive placements.
  - In Children's Services, responding to the findings and recommendations of the Independent Care Review, which will cover the care system as a whole and apply to both Social Work and other partners.
  - In Community Justice, work with the Scottish Prison Service to develop a new Community Custody Unit in Dundee, along with work to implement the extension of a presumption against short-term sentences from 3 to 12 months.
  - In Health and Social Care, aligning statutory service delivery to localities and taking forward major service re-designs in mental health services and substance misuse, with each informed by the recommendations of the Dundee Drug Commission and pending Mental Health Inquiry.
  - In Health and Social Care, to continue to target improvement activity to prevent falls and to increase the number of people accessing self-directed support options 1 and 2.
  - In Health and Social Care, to work with communities to better understand performance information that demonstrates inequalities in outcomes between Local Community Planning Partnership areas and to identify ways to reduce these inequalities.

• In all areas, addressing major financial challenges which will continue to require new ways of working, the active involvement of communities in service redesign, joint work with neighbouring authorities and prioritisation of resources towards key needs.

#### 5.0 POLICY IMPLICATIONS

5.1 This report has been subject to an assessment of any impacts on Equality and Diversity, Fairness and Poverty, Environment and Corporate Risk. A copy of the Integrated Impact Assessment is available on the Council's website at <u>www.dundeecity.gov.uk/iia</u>.

#### 6.0 CONSULTATIONS

6.1 The Council Management Team were consulted in the preparation of this report.

#### 7.0 BACKGROUND PAPERS

7.1 The Role of the Chief Social Work Officer – Scottish Government Publication July 2016. Guidance for local authorities and partnerships to which local authorities have delegated Social Work functions.

Diane McCulloch Chief Social Work Officer



### **Dundee City Council**

# Chief Social Work Officer Annual Report







This year, publication of the Chief Social Work Officer Annual Report occurs shortly after the retirement of the previous post holder but as the new CSWO, I am pleased to present the report and determined to respond to the many opportunities and challenges ahead. As in previous years, the report has been written for Elected Members, Social Work staff, other Council staff and partner organisations to provide a summary of activity over the last 12 months. It includes information about leadership; partnerships; statutory decisions made on behalf of the Council; finances; the involvement of service users; and on performance across all service areas. The report is not intended to be exhaustive but gives an indication of key trends, achievements, challenges, opportunities and priorities. Once again it has been an exceptionally busy year for Social Work staff and a privilege to be part of a profession which contributes towards the support and protection of our most vulnerable people.

This year I have been particularly proud of the way in which Social Work and Social Care services have worked to involve and empower service users and carers. The wide range of approaches that have been developed and used through the year demonstrates that co-production is increasingly becoming embedded in the way in which we work to plan, improve and deliver Social Work and Social Care services and supports. The production of a revised Strategic and Commissioning Plan for Health and Social Care, that has a key focus on addressing health inequalities that impact disproportionately on some of the most vulnerable people in the city, reflects our commitment to core Social Work values and to work with others across the Community Planning Partnership to deliver on the Fairness agenda.

Throughout the year a number of self-evaluation activities have been undertaken, supplemented by external scrutiny of our services and supports. The findings from this activity will inform future improvement activities. This year our self-evaluation programme included a multi-agency audit of child protection and Looked After Children cases that identified a number of aspects of good practice within Social Work services. Next year we plan to undertake a similar audit in relation to young people transitioning into adulthood. Positive performance has been achieved in the last year across a range of services, including stabilising placements for Looked After Children, maintaining low usage of secure care for children and young people, increasing the number of people diverted from prosecution, performing above the Scottish average in the majority of national indicators of citizen's perceptions of health and social care and achieving further reductions in the use of unscheduled care by people aged 18 and over.

The development and implementation of a range of learning and development activities to support the Social Work and Social Care workforce has also been a highlight during 2018-19. This activity is essential in supporting the delivery of high quality services and ensuring that our workface can acquire the knowledge and skills to lead and manage increasingly integrated responses to health and social care needs. I have also been particularly pleased with developments that have supported the young workforce, including Care Experienced Young People to access employment and development opportunities.

None of these achievements could have been reached without a professional and committed staff group and the close involvement and support of partner agencies. As a profession, we continue to have a strong value base which emphasises the importance of social justice, anti-discrimination, empowerment, human dignity and worth. We know issues such as intergenerational poverty, mental health and substance misuse interact to affect the lives and life chances of people in our communities. We therefore work in partnership with both service users and partner agencies because we know that this is most likely to achieve the best outcomes. I am proud to be part of the profession and recognise the significant contributions all our staff, whether managing and delivering services or providing technical support. I hope this report helps to explain our services and the positive impact they have on the people of Dundee.

Diane McCulloch Chief Social Work Officer

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### Introduction

This report details the arrangements within Dundee which enable the Chief Social Work Officer (CSWO) to fulfil their responsibilities as outlined in Section 5 (1) of the Social Work (Scotland) Act 1968, as amended by Section 45 of the Local Government (Scotland) Act 1994. The post is a senior one designed to promote leadership, standards and accountability for Social Work services, including commissioned services. Statutory guidance outlines requirements of the CSWO to:

- Report to Elected Members and the Chief Executive any significant, serious or immediate risks or concerns arising from his or her statutory responsibilities.
- Provide appropriate professional advice in the discharge of the Local Authorities functions as outlined in legislation, including where Social Work services are commissioned.
- Assist Local Authorities and their partners to understand the complexities and crosscutting nature of Social Work, including corporate parenting and public protection.
- Promote the values and standards of professional Social Work, including all relevant National Standards and Guidance and adherence to Scottish Social Services Council Codes of Practice.
- Establish a Practice Governance Group or link with relevant Clinical and Care Governance Arrangements designed to support and advise managers in maintaining high standards.
- Promote continuous improvement and identify and address areas of weak and poor practice in Social Work services, including learning from critical incidents and significant case reviews.
- Workforce planning, including the provision of practice learning experiences for students, safe recruitment practice, continuous learning and managing poor performance.
- Make decisions relating to the placement of children in secure accommodation and other services relating to the curtailment of individual freedom.
- In co-operation with other agencies, ensure on behalf of the Local Authority that joint arrangements are in place for the assessment and risk management of certain offenders who present a risk of harm to others.

The statutory guidance also states that the CSWO must produce and publish a summary Annual Report for Local Authorities and Integration Joint Boards. This report therefore provides details on how the CSWO functions are being discharged within Dundee, including the systems and processes in place to ensure the safety of children and vulnerable adults and the management of those who present a risk to others, in the period 2018-19. The report ends with an outline of key priorities over the next 12 months.

# 2 Summary

In the last Annual Report covering 2017-18, the CSWO set out the focus for developments in the forthcoming year. The priorities were informed by a variety of factors, including opportunities and challenges afforded by new and anticipated legislative requirements, national or local structural changes, ongoing financial pressures, internal self-evaluation, external inspections and SSSC Codes of Conduct. We committed to:

- Strengthening our approaches towards protecting the public through the implementation of a Transforming Public Protection Programme supported by the Care Inspectorate to mutually share and improve practice and processes across partnerships and services.
- In Children's Services, work with partners to continue to implement the Tayside Plan, the local GIRFEC Improvement Programme, local placement capacity for Looked After Children and the requirements of Continuing Care. We anticipated much of this work would be informed by the work and findings of the Independent Care Review, which is now due to report in early 2020.
- In Community Justice, work with the Scottish Prison Service to develop new approaches to women, employability, prison release, electronic monitoring, males aged 21-26 years and young people.
- In Health and Social Care, aligning statutory service delivery to localities and take forward major service re-designs in mental health services and substance misuse.
- In all areas, addressing major financial challenges which will continue to require new ways of working, the active involvement of communities in service redesign including people, with lived experience, joint work with neighbouring authorities and prioritisation of scarce resources.
- Respond to any recommendations that might arise from the Dundee Drug Commission and the NHS Tayside Mental Health Inquiry which may impact on Social Work.

This year's Annual Report describes how the CSWO supported the progression of each of these areas of work. It shows how there were a number of key achievements in each of our service areas and how, in particular, all service areas strengthened their approaches to integrated working and co-production with local communities.

In Dundee during 2018/19, the role of CSWO was undertaken by the Head of Service for Integrated Children's Services and Community Justice, with the Head of Service for Health and Community Care deputising as required. The CSWO Governance Framework sets out the ways in which they will discharge the requirements of the role and provide assurances to Elected Members throughout the year.

The CSWO has direct access to Elected Members, the Chief Executive, Chief Officer of the Integration Joint Board, Directors, Heads of Service, managers and front line practitioners both within the Council and Health and Social Care Partnership, and with partner agencies in relation to professional Social Work issues. During 2018/19 they attended a broad range of Council leadership and strategic partnership meetings with varying terms of reference as follows:

- Reporting to the Executive Director of Children and Families and regular meetings with the Chief Executive and Chief Officer of the Integration Joint Board.
- Member of the Integration Joint Board and IJB Performance and Audit Committee.
- Member of the Tayside Clinical Care Professional Governance Forum, alongside CSWOs from Angus and Perth and Kinross.
- Member of three Executive Boards which oversee the implementation of local community planning priorities.
- Member of the Adult Support and Protection (ASP) Committee, providing advice on Social Work matters relating to vulnerable adults.
- Member of the Alcohol and Drug Partnership (ADP), providing advice on Social Work matters relating to substance misuse.
- Member of the Child Protection Committee (CPC), providing advice on Social Work matters relating to children and young people at risk of harm.
- Member of the Chief Officer Group for Protecting People, contributing leadership and oversight on all public protection matters.
- Member of the Tayside Strategic Children and Young People Collaborative Group as the representative of the CSWOs in all 3 local authority areas.

The CSWO is also supported by a Joint Social Work Management Team which brings together the Senior Officers (or their representatives) with responsibilities for Social Work functions, alongside supporting officers. The group maintains oversight of:

- Key national and regional developments with implications for Social Work practice, including considering local actions required in response and monitoring implementation of these actions.
- Local developments, both strategic and operational, with specific implications for the Social Work workforce and services.
- Datasets relating to statutory Social Work functions.
- The effectiveness of arrangements to support the CSWO in discharging their statutory role, including the implementation of the CSWO Governance Framework.
- Production and publication of the CSWO annual report.

# **4** Partnership with Service Users and Carers

Social Work has a strong tradition of engaging with communities and families to mutually explore and identify key risks, needs and strengths; agree plans which protect people and help them to realise their potential; and jointly implement, review and adapt those plans. Given the range and complexity of communities and individuals, the challenge is to find creative methods which best suit their needs and promote the best possible outcomes for them, their families and communities.

#### **Children's Services**

In the core Social Work service, increased engagement with service users has been promoted through the 4 areas of Child Protection Case Conferences (CPCC), Looked After Children (LAC) Reviews, the Champions Board and an advocacy services delivered by Who Cares? In CPCCs, parents/carers attended 94% of meetings to inform decisions on the care and protection of children and young people. In LAC Reviews, Reviewing Officers coordinated and attended all meetings to scrutinise plans and enable children and young people to be heard. The Champions Board continued to grow and contributed towards improvements across a range of areas, including through a new film on the experiences of Care Leavers entitled 'Grit'. Who Cares? provided advocacy for 77 children and young people.

The approach being adopted by an Addressing Neglect and Enhancing Wellbeing (ANEW) Programme also involves close engagement with children, young people and parents/carers. Where concerns are identified, school support staff pro-actively engaged with families and provided a buddy service to help them to attend and meaningfully participate in meetings, which are conducted in more informal ways and lead to the shared creation of support plans. This has also led to positive feedback from both families and professionals, who reported that new arrangements are more manageable and effective in promoting the health and wellbeing of children and young people.

Over the year, a Food and Fun Programme was coordinated to provide lunches to children in deprived areas during the school holidays. The purpose was to promote their health and wellbeing and contribute towards narrowing the attainment gap, with children experiencing 'holiday hunger' less likely to progress academically during the new school term. The programme covers all holiday periods and delivers thousands of lunches and vouchers. In 2018-19, the programme became a fully constituted charity known as Dundee Bairns, widened its scope from lunches to breakfasts and extended to offer low cost holidays. It is being extremely well received and many recipients are also Social Work service users.

The Family Placement team has continued to support a high number of carers over the last 12 months (84 foster carers and 16 adopters) to look after in excess of 150 of Dundee City's most vulnerable children.

Alongside directly supporting carers the team and some foster carers have carried out an impressive recruitment drive; having stalls at the first ever Dundee Pride back in September 2018 and a 2nd year at Dundee Flower and Food Festival. As a result of all the recruitment events preparation groups were run for both fostering and adoption and in the 12 month period 5 new fostering households and 4 sets of adopters were approved. Within the period 6 fostering households have been de-registered: 4 of which were due to retirement. September also saw the launch of the new Fostering and Adoption website.

As part of our celebration of foster carers the team hosted 2 garden party/fun days. The first was as part of Foster Care Fortnight with a circus themed garden party welcoming over 100 guests of foster carers, their families and looked after children. The 2nd was a shared services fun day with the fostering teams from Angus Council and Perth & Kinross Council where the looked after children enjoyed many activities including a petting zoo. The team were also part of a shared services practitioners' day where the 3 local authority teams came together to undertake training and share good practice stories.

As a way of building better relationships with other children and families teams 2 family placement information sessions were held to share the work of the teams with new and existing workers and talk workers through the referral process for fostering placement and also the paperwork required for adoption and permanence panels.

In May the team were nominated and shortlisted for an Outstanding Service and Commitment Award: on the night winning the Lord Provost Award.



#### **Community Justice Service**

When an individual is made subject to a Community Payback Order with a requirement for supervision their risks and needs are assessed using the accredited LSCMI process, which partly involves the individual's self-assessment of their needs. Similarly the resultant case management plan includes targets agreed with the individual. For example in a recent plan for a woman made subject to Unpaid Work it was agreed that attending Incredible Years Parenting classes could count as Other Activity, as part of her statutory hours. In August 2019 the Community Justice Service introduced a requirement that a Personal Outcome Inventory should be completed at the beginning and end of Orders and it is hoped that this will provide us with both individual and aggregated information on progress made within key areas such as health, housing and employment.

Unpaid Work continues to be one of the most visible aspects of people who have committed offences making a contribution to the community. After every work placement the views of those taking part in Unpaid Work and those who have had the benefit of their work are sought. Recipients of Unpaid Work expressed a 100% rate of satisfaction and those taking part 78%. Some of the comments collected from the individuals who were subject to an Unpaid Work order or recipients at the end of placement included:

"The good parts for me were helping people in the community".

"It was good being able to do my unpaid hours at night as I also work".

"I got regular activity, team working and met people".

"Learned new skills and worked as part of a team".

"The transformation is absolutely astounding. The gravel, the patio, the fencing, the gate... was just wonderful"

"I want to thank you all for the hard work you put in. It is all looking fabulous and the children can't wait to visit the allotment".

In terms of engagement to inform service delivery, in April 2018 four focus groups were facilitated inside HMP Perth in partnership with Positive Prison / Positive Futures, Scottish Prison Service (SPS) and members of the Community Justice Partnerships from Dundee, Angus, Fife and Perth and Kinross. These focus groups followed on from those that were carried out 18 months prior, and the purpose was to update on current issues for short term prisoners. Themes of housing, healthcare, welfare, finances and employability/work education were identified. The findings were presented to each respective Community Justice Partnerships and the Throughcare Network for taking forward.

Dundee staff also supported SPS staff in the completion of their Engagement Sessions with the public regarding the proposed female Community Custody Unit (CCU) in Dundee. Planning Permission was granted by Dundee City Council in October 2018; the CCU is due to open in early 2021; and the multiagency Project Board is well aware of the centrality of working alongside the local community as the Unit develops.

Dundee Community Justice Service has also encouraged service users to participate in some key pieces of national research, for example Dundee service users were interviewed by Community Justice Scotland researchers who were seeking to estimate the community support needs of people who will receive community orders instead of custody after the Government extends the Presumption Against Short Term Sentences from 3 months to 12.

#### Health & Social Care

The Health and Social Care Partnership recognises that co-production is key to making the best use of resources, delivering better outcomes for people who use services and their carers, building stronger communities and developing citizenship. A wide range of activities have been undertaken that demonstrate that the Partnership is actively embedding a culture of listening to citizens, service users, carers and their families and developing and improving services in accordance with this.

The Health and Social Care Partnership Equality Outcomes were developed with people who have Protected Characteristics, people who are affected by poverty and poor social circumstances, organisations who help and support these people and a range of other people and organisations who are interested in Equality issues. The Mainstreaming Equality Report and Equality Outcomes can be found at <a href="https://www.dundeehscp.com/sites/default/files/publications/mainsteam">https://www.dundeehscp.com/sites/default/files/publications/mainsteam</a> report and equality outcomes - 2019-2022.pdf.

The Service Users Representative Group Executive (SURGE) has been established at The Mackinnon Centre. The Centre hosts both a Respite Unit and a Skills Centre for adults with physical disabilities or progressive illness. Up to 12 committee members are voted in by service users. SURGE has monthly meetings and a copy of minutes of the meeting or Newsletter are shared with all service users.

The Community Health Team worked with local people to East End' locality establish and support the Health Issues in the Community (HIIC) Group. Individuals in the group have had a major influence on service design and delivery through a number of activities including volunteering for local developments and sharing their lived experience with others. This work resulted in co-produced, locally led mental health provision. The group has a broad range of achievements across the city including helping produce a user friendly Mental Health and Wellbeing Briefing for people in local communities; hosted a co-design event, providing support at the local 'Healthy Minds' Drop-In Service, delivering a drama performance on self-harm and suicide. Five group members achieved accreditation for completing Part 1 of the HIIC Learning Pack with three people continuing to work towards Part 2.

One HIIC members said:

"....we find it hard to believe the impact we are having locally. We benefit socially, mentally and physically.

The Making Recovery Real (MRR) partnership continues to work together listening to people with lived experience (PWLE) of mental health challenges. As well as having a dedicated post based at Dundee Voluntary Action whose main role is to support the development of recovery locally, work is now progressing to recruit the equivalent of 4 full-time Peer Recovery practitioners to continue recovery story sharing and peer recovery activities. Peer to Peer training continues, with more than 20 volunteers having already been trained and some taking up voluntary roles in mental health organisations in Dundee, others going on to paid employment and one going on to university. The short film 'One City, Many Recoveries' is being

used to promote recovery with front line staff and other PWLE and was recently used with staff and patients at Carseview to raise awareness.

The Health and Social Care Partnership recognises that Volunteering is an excellent opportunity for local people to increase their partnership with services as well as benefit their own health and wellbeing. With support supported from Volunteer Dundee and colleagues in the private sector, we developed a recruitment and support plan for the involvement of volunteers. This was completed last year and culminated in a civic reception on the 28th September 2018 where both Craigie House and Menzieshill House became the first care homes in Scotland to achieve the Volunteer Friendly award.

"As a manager who recruits the volunteers I think their contribution is invaluable to residents, staff and the volunteers themselves. The enthusiasm that the volunteers bring with them rubs off on staff and I see them wanting to be more involved. Residents are attending the sessions and are enjoying them. Staff are seeing the benefits as they can spend time with residents who do not want to participate and focus on them for an uninterrupted period of time. Volunteers are bringing skills into the home that staff may not have. All in all it is a win win situation."

Two of Dundee's care homes are the first in Scotland to receive Volunteer Friendly Award Plaques:



From left Angela Smith, Resource Manager Dundee Health & Social Care Partnership, Sarah Clark, Team Manager (Craigie House), Lynn Thain, Team Manager (Menzieshill House), Wendy Taylor, Team Leader Volunteer Dundee

#### Joint Work across Children's Services and the Health and Social Care Partnership

Both the Children's and Families Service and the Health and Social Care Partnership have worked closely with Community Planning colleagues during 2018-19 as part of the Community Learning and Development (CLD) Strategy Group to develop and agree our Framework for Community Engagement which will:

- Ensure a consistency of approach across the Partnership;
- Improve the quality of Engagement activity across the Partnership; and
- Provide an assurance mechanism for the Partnership about the quality of engagement taking place.

The CLD Strategy Group is developing an on-line resource to allow all members of the Dundee Partnership to record and share engagement activity. This will help us to listen better to individuals and communities, will help avoid duplication and will assist with audit and performance management of our engagement activity.

Joint work has also progressed across Children and Families and Health and Social Care in relation to supporting carers. Over the last 12 months, Children's Services has worked with Young Carers, the Carers Centre and Schools to jointly raise awareness of the needs of Young Carers and increase support, including through short-breaks. There was an emphasis on involving Young Carers in all developments and co-producing new approaches. This has led to significant increases in the number of identified Young Carers, increases in the numbers receiving support, improvements in their educational attendance and engagement and consistently positive feedback from children and young people. The approach adopted at Baldragon Academy was particularly successful and will be extended to all other Primary and Secondary Schools.

The Dundee Carers Partnership developed a Short Breaks Services Statement following research and continuing consultation and involvement. The Carers Partnership developed a clear understanding of people's needs and wants and are committed to continue to co-produce Short Breaks in the City. The statement can be found at <a href="https://www.dundeehscp.com/sites/default/files/publications/short\_breaks\_services\_statement\_dundee.pdf">https://www.dundeehscp.com/sites/default/files/publications/short\_breaks\_services\_statement\_dundee.pdf</a>. The Carers Partnership commissions Dundee Carers Centre to provide a Short Breaks Brokerage Service for Carers in Dundee. Demand for the service continues with 372 people awarded and benefitting from a short break during 2018/19. A carer accessing a short break commented:

"We thoroughly enjoyed our weekend stay in St Andrews. We are grateful for the efforts of the Respitality team for arranging this short break for us, as it was really appreciated."

# 5 Social Service Landscape/Market



Dundee is a dynamic, modern city which is undergoing a period of significant change associated with the development of the Waterfront and opening of the V&A Museum. The city has a thriving port, is a hub for creative industries, media and life sciences, is a UNESCO City of Design and has a strong commitment to fairness and social justice. However the population of 148,000 also faces challenges associated with high levels of poverty, deprivation and inequality. This is accompanied by the range of related social, community and personal problems, including high levels of unemployment, substance misuse, drug deaths, mental health, physical health, domestic abuse, re-offending and morbidity. There are also more people with physical or learning disabilities than the Scottish average. Typically, there are over 9,000 users of social care services in the city at any time.

Over the next 25 years, the number of people aged over 75 years is also expected to rise by 45%. There will be similar increases in the number of people aged over 90 years. This is likely to lead to a greater prevalence of problems associated with older age which require health and social care, such as dementia, injuries resulting from falls, osteoarthritis, osteoporosis, immobility and other features of deteriorating mental and physical health.

As a result, in the context of growing financial pressures, there are unusually high and ever increasing demands on health, social care and other relevant local services. It means services must work together in a joint focus on prevention and engage with communities to prioritise and address problems within existing, shared resources. As such, the Dundee Partnership has outlined an aspirational vision for the City which will be realised over the next 10 years. Our shared vision is that:

- We will have a strong and sustainable city economy that will provide jobs for the people of Dundee, retain more graduates and make the city a magnet for new talent.
- We will offer real choice and opportunity in a city that has tackled the root causes of social and economic exclusion, creating a community which is healthy, safe, confident, educated and empowered.
- We will be a vibrant and attractive city with an excellent quality of life where people choose to live, learn, work and visit.

To achieve this, the Dundee Partnership is focusing on 5 priorities of Work and Enterprise; Children and Families; Health, Social Care and Wellbeing; Community Safety and Justice; and Building Stronger Communities. This is supported by themes on Cultural Development, Sustainability, Public Protection and Substance Misuse. We will engage with localities, jointly resource, prevent problems occurring or escalating and reduce inequalities. Given its work with vulnerable groups, Social Work will play a major role.

<u>The Tayside Plan for Children, Young People and Families 2017-2020</u> sets out the joint vision and priorities across the three local authorities, NHS Tayside and other local and national partners. It has been informed by the views and responses from children and families gathered through the Dartington Social Research Unit in 2014 along with evidence on what works to improve outcomes for children, young people and families. It has a clear focus on reducing inequalities and improving outcomes for all of Tayside's children, with partners committed to working collaboratively in five priority areas:



The Plan identifies a range of ways in which Children and Families will work with the Health and Social Care Partnership to improve outcomes for children, young people and adults. These include developing shared strategies on joint priorities such as parenting, substance misuse and mental health, with a focus on prevention, early intervention and tiered responses to need. It mirrors both the City Plan and the Council Plan, each of which include the same shared 5 priorities within and between partner services. In Community Justice, a Community Justice Outcome Improvement Plan (CJOIP) focuses on the improvement of key processes across the criminal justice system overall and on the delivery of services to people who have offended. In accordance with whole systems models, this includes a range of priorities and actions relating to Early and Effective Intervention, Diversion from Prosecution, Community Payback Orders and Resettlement. There is a particular focus on pathways into and out of prison involving close partnership work with NHS Tayside, Housing and Employability Services.

In 2018-19 the Integration Joint Board undertook a review of its <u>Strategic and Commissioning Plan</u> 2016-2021 as required under legislation and agreed to revise the plan. The process of revising the Strategic and Commissioning Plan was led by the Integrated Strategic Planning Group (ISPG) and drew from our continuous conversations over the last three years with communities, people accessing health and social care services, their families and with carers. This was supplemented by specific activities across the full range of health and social care stakeholders to consult on the Strategic and Commissioning Plan 2019-2022. The replacement plan was approved by the IJB in March 2019 and complements other strategic plans across the Community Planning Partnership. The vision for the Integration Joint Board remains the same in that "Every Citizen of Dundee will have access to the information and support that they need to live a fulfilled life." The main change from the previous plan is to focus on the delivery of four of the previous eight strategic priorities:

- Health Inequalities
- Early Intervention and Prevention
- Locality Working and Engagement with Communities
- Models of Support and Pathways of Care

The four remaining priorities from the 2016-21 plan: Person Centred Care and Support, Carers, Building Capacity and Managing Resources Effectively are all now embedded in the Health and Social Care Partnership's everyday work.

In 2018-19, the total net Social Work budget of £113,889,000 was allocated across services as	
follows:	

Service Area	2018-19 Budget £000
Children's Services	£35,249
Community Justice Services	£182 (plus additional Grant Funding of (£4,820k)
Adult Social Care Services*	£78,458
Total	£113,889

\* Delegated to Dundee Integration Joint Board - net of funding transfer from NHS Tayside

Children's Services continued to experience significant financial pressures around Looked After Children. In response, an action plan has been developed to reduce the overall numbers of Looked After Children and re-model the type and range of local placement options. This includes work with the Third Sector on preventative services; work to support kinship carers; work to increase the number of foster carers; the development of satellite flats attached to Children's Houses; and returning some young people from external residential placements to suitable local alternatives which help promote positive transitions into Continuing Care.

The Community Justice budget continued to be provided by the Scottish Government on a ringfenced basis, for spending on matters relating to community justice only. It is calculated on the basis of a combination of local demographic factors and workload and continued to be managed in accordance with key priorities.

The delegated budget to the Integration Joint Board to support the delivery of adult Social Work and Social Care services continued to be impacted on by demographic and other cost pressures throughout the year. Given the impact of these pressures, the IJB agreed to release resources of approximately  $\pm 2.7m$  from its reserves as part of its 2018-19 budget setting process and Transformation Programme to support investment in social care. The actual gross expenditure on adult Social Care for 2018-19 was around  $\pm 103.500m$  with funding transfers from NHS Tayside in relation to Scottish Government funding and resource transfer totalling over  $\pm 21m$  providing further support to Social Care spend. The adult social care element of the integrated budget resulted in an overspend of  $\pm 3,630k$  at the end of the financial year 2018/19 compared with an overspend in operational services of  $\pm 403k$  at the end of 2017/18, indicating the challenges faced in delivering on the IJB's strategic priorities.

#### Self-Evaluation

In 2018-19 Social Work services led and participated in a number of single and multi-agency selfevaluation activities focused on continuous improvement and improving outcomes for service users, carers and communities. These activities sit within the framework of the Care Inspectorate Performance Improvement Model and include case file audits, case reviews and audits of specific processes/documents. This activity is supported by the Learning and Organisational Development Service to ensure that learning is effectively shared and informs improvement plans at team and service level, as well as contributing to the development of strategic and commissioning plans for Health and Social Care and Children and Families.

Progress has been made transferring the Balanced Scorecards that are used by the Public Protection Committees / Partnerships onto the Council's electronic performance monitoring system during 2018-19. This will allow the scorecards to be more accessible to a range of stakeholders, including senior officers and Elected Members / Board Members who are responsible for the scrutiny of public protections services. It will also allow the input, collation and viewing of data in real time by operational and strategic staff. The Public Protection Committees / Partnerships have benefited from the addition of a Senior Officer (Information) who will specifically focus on the data and analytical needs of the Committees / Partnerships and Chief Officers Group.

Through the Health and Social Care Partnership in-depth analysis has taken place regarding falls, unscheduled care (including readmissions to hospital within 28 days of discharge) and complex delayed discharges. This has supported the Partnership to identify focussed areas for improvement and more effectively target actions to address these. In addition analytical work has also been undertaken to aid understanding of the variation in performance across the 8 LCPPs in relation to key national health and wellbeing outcomes; this work is continuing, with a priority in 2019-20 being engagement with affected communities to better understand the data and findings produced during the initial analysis. Arrangements have also been put in place during 2018-19 to enable the Partnership to expand the analysis previously undertaken to support the Pause project to provide detailed information about the health and wellbeing needs of women and their interaction with health and social care services. The outcomes of this work will be available during 2019-20.

In February 2019 the Children and Families Service completed multi-agency case file audit of Child Protection and Looked After Children (LAC) services in Dundee. Informed consent was gained to audit 14 cases out of an original sample of 30. This process was co-ordinated by a sub-group of the Protecting People Self-Evaluation Group as part of its commitment to learning and continuous improvement. This audit was conducted in order evaluate the extent to which vulnerable children and their families are being supported by effective joint working across services within Dundee. The audit had a multi-agency focus and included Social Work, Health, and Police records. All these services participated in the audit, along with representatives from Education, the Third Sector and SCRA. The audit aimed to assess both child protection and LAC services. In addition, the audit also included a focus on adult protection issues, specifically parental substance misuse, parental mental health issues, and parental domestic abuse. Areas of strength identified were:

- Early intervention
- Initial response to child protection concerns
- Improving family resilience and parental confidence
- Improving the wellbeing of children / young people

Areas identified through the audit for improvement were: chronologies; recording of core processes; quality of plans; initial response to wellbeing concerns; involving children / young people and advocacy; and, reviewing the child / young person's progress. An action plan addressing these areas has been developed by operational managers and will be implemented during 2019-20.

The Child Protection Committee and Adult Support and Protection Committee have not considered any Initial Case Reviews during 2018-19. One Adult Protection Significant Case Review remains in progress due to delays associated with legal proceedings. The Tayside MAPPA Strategic Oversight Group oversaw the completion of a Significant Case Review, which was published on their behalf by the Dundee COG in May 2019. An action plan in response to the recommendations made has been progressed by partners, with the majority of actions having been completed prior to the date of publication.

Teams across Children and Families and Health and Social Care have continued to undertake a range of planned self-evaluation activities, including peer auditing, service user satisfaction surveys and stakeholder engagement events. Many of these activities have directly informed changes in service design and practice. For example, in the Health and Social Care Partnership:

- Craigie House (Care Home) improved its garden area and the residents now enjoy watching wildlife in a more inviting, brightly coloured area with central seating area.
- Oakland Centre have involved service users and carers in workforce recruitment and selection process.
- The Mackinnon Centre set up a computer games area for younger adults who use the service; this is now used by people of all ages
- Feedback regarding a delay in care at home service delivery that was directly associated with mobile phone issues has led to:
  - contract with a telephone service being renewed with another approved provider.
  - an improved contingency plan for contacting the IT helpdesk to report mobile phone faults.
  - IT colleagues having information about critical mobile phone numbers.

#### **External Scrutiny**

During 2018-19 the Care Inspectorate also continued a programme of inspections of our Children's Houses and an inspection of Fostering and Adoption. In all areas, services were graded as Very Good or Good, with the exception of the quality of the environment in one Children's House. This is being addressed through a programme of renovations. The leadership of services and the quality of care provided to children and young people was consistently noted by inspectors.

Services for adults registered with the Care Inspectorate in Dundee include services directly provided by the Partnership, services commissioned by the Partnership from the third sector and independent providers and services operating independently of the Partnership. Of these contracted services, 81 were inspected during the year, of which 23 were combined inspections, where both the Housing Support and Support Services were inspected together. In 2018-19 Dundee was placed 13th out of 31 partnerships for the proportion of care services rated as good or better in Scotland (86%). This figure now sits above the Scottish average (82%).

Appendix 1 sets out the outcomes of external scrutiny of care services provided directly by the Council and the Health and Social Care Partnership. These grades have remained consistently high in the main and there is a process in place that any issues raised are quickly discussed with the appropriate service and improvement plans put in place. Comments from service users and their relatives/carers during inspections included:

"My mother has become a happy, contented person since becoming a resident in this home."

"I like living here the staff are really friendly and I get on well with them."

"They look after me really well here and I am happy."

"I feel safe here."

"I love it here."

## Partnerships with Commissioned Services

In 2018-19, services continued to be delivered through a mixed economy of local authority, private, independent and third sector provision. In total, there were **166** contractual arrangements put in place with **114** external providers. Of these, **133** were involved the supply of regulated social care services, ranging from residential care, home care, fostering, homelessness, violence against women, substance misuse, mental health, housing support to care at home. The remaining **36** contractual arrangements were for unregulated services, including meals provision, lunch clubs, shopping deliveries, outreach support, befriending, humanitarian protection, mentoring, advocacy services and family support services.

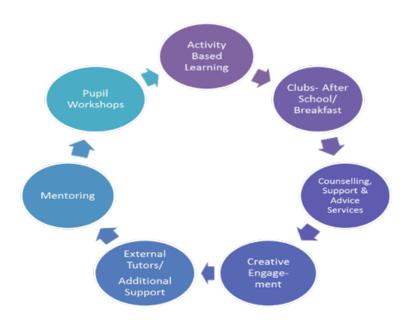
The continued operation of a Social Care Contracts Team supporting commissioning and procurement activity across both Children and Families and the Health and Social Care Partnership has sustained robust contract management and monitoring arrangements.

Partnership work with external providers has continued over the last year with a range of innovative and creative approaches in place to ensure the best use of local resources. Examples of this over 2018-19 include:

• As part of the homelessness and substance misuse transformation programme, Housing First Dundee is an innovative programme that will work positively and proactively with those that have had difficulty in engaging with traditional housing and support services due to a variety of complex needs. It is an exciting opportunity to give participants hope and end the revolving door of homelessness. It is being delivered by a consortium of four Third Sector organisations (Transform Community Development, Dundee Survival Group, The Salvation Army & Addaction Scotland), with acknowledged support of Housing First Scotland Fund.

Housing First is an internationally evidence-based approach, which uses independent, stable housing as a platform to enable individuals with multiple and complex needs to begin recovery and move away from homelessness.

• A Framework Agreement has been established to provide supplies and services to support children and young people. This innovative development now provides the mechanism for staff in Dundee, Angus and Perth and Kinross Council's to access a wide range of support services whilst adhering to the required procurement procedures.



A total of 55 individual providers have been appointed to the Framework covering approximately 200 different support services. A Buyers Guide and Directory has also been compiled and shared with a range of stakeholders who are involved in the procurement of support services for children and young people.

• British Red Cross has continued to test an Assessment at Home model for people who are in a hospital setting and there is uncertainty as to whether the person can return home. The project allows people to go home with a flexible care service delivered by British Red Cross that is appropriate to their needs including the provision of overnight care where this is required. Over a maximum 21 day period an assessment is undertaken to identify if the individual can safely remain at home as opposed to being admitted to long term care, which had been the identified pathway for the person when they were in hospital.

The test of change was extended during 2018-19 to include the provision of a flexible and responsive care at home service by British Red Cross to people who are identified by Dundee Health & Social Care Partnership's Enhanced Community Support/Dundee Enhanced Community Support Acute Services as requiring support to prevent a hospital admission as part of an ongoing assessment.

The two year test of change has now come to an end and an evaluation is being undertaken with a view to procuring an ongoing service from a care at home provider.

- In Children and Families collaboration with the wider Third Sector included respite support for families with children with disabilities commissioned from 6 organisations. As a result, over 120 families received routine support at home and/or overnight breaks to help them to cope with the demands of caring for children and young people with complex needs. These services are extremely well received by families and are also seen to help prevent family breakdown, which can result in children and young people being taken into care. The service also engaged with parents/carers in respect of Gillburn Road Children's House, a dedicated respite facility. It is presently working jointly with them to explore possible improvements in accessing support from the house and/or alternative forms of respite.
- Further collaboration between Children and Families and the Third Sector included continued work to help return some children and young people from external residential placements into suitable local settings with extra supports. This has contributed towards reducing the number of children and young people in external establishments to just 28 from a high of over 40 three years ago. Building on this, the service also worked with one organisation to secure the use of a dedicated building which had previously been used by them to support Looked After Children and Young People towards early adulthood. This building will now be used to temporarily de-cant young people from 2 Children's Houses whilst the houses are being renovated. Longer-term, it may provide capacity to help avoid young people going to external residential placements.
- Over the year, the service also continued to work with Pause partners and the Robertson Trust to develop and start to implement a new programme for particularly vulnerable women who have experienced repeat removals of their babies into care upon them being born. As a result of adverse childhood experiences and corresponding problems into adulthood, including mental health, substance misuse and domestic abuse, these women have previously been unable to care for their children and face ongoing risks of having them removed. They have also been unable to respond to other forms of support and the programme works with them on a voluntary basis to help prevent repeat pregnancies, reduce further trauma and stabilise their lives.

## Complaints

Since the 1st April 2017 both Dundee City Council Social Work Complaints and Dundee Health and Social Care Partnership Complaints Handling Procedure follow the Scottish Public Service Ombudsman (SPSO) Model Complaint Handling Procedure. Both Complaint Handling Procedures have been assessed by the SPSO as complying with the model complaint handling procedure.

Complaints are categorised by 2 stages:

- Stage 1: Frontline Resolution
- Stage 2: Investigation

If a complainant remains dissatisfied with the outcome of a Stage 1 it can be escalated to a Stage 2. Complex complaints are handled as a Stage 2: Investigation complaint. If a complainant remains dissatisfied with the outcome of Stage 2: Investigation complaint they can contact the SPSO who will investigate the complaint, including professional decisions made.

In 2018-19, the total number of social work complaints received was 84, compared with 71 the year before. There were 46 complaints relating to Children's Services, 35 in Dundee Health and Social Care Partnership and 3 in Community Justice. The outcomes were:

- Upheld 20%
- Partially upheld 14%
- Not upheld 66%

Most of the complaints related to a failure to meet service standards or treatment by or attitude of a member of staff. Two complaints progressed to the final stage of the appeal process which is the SPSO. The agreed timescales for finalising investigations was met in 70% of cases, with delays usually caused by the complexity of the complaint and the investigation taking longer than expected.

Given the total number of Social Work service users of 9,000, the number of complaints is a small proportion however services do endeavour to use complaints to improve practice and service improvements which are made as a result of complaints are monitored. In 2018-19, a total of 26 planned service improvements were implemented.

In addition to complaints, a range of compliments have also been received from service users and some examples are provided below:

#### From Children's Services and Community Justice

"The truth is: if it weren't for the Social Work intervention, I'd probably be dead or worse. You do what could be considered a thankless job. I want you to know how much of a positive effect you have had on me. All of you. Thank you."

"I have a looked after child in my care...I am writing to congratulate the staff and give my heartfelt thanks. The social worker and his senior have encouraged, supported, believed in and NEVER given up hope on this young man. My heart is bursting with pride to inform you that he has just accepted a conditional place at college which is beyond our wildest dreams. None of this would have been possible without the support of the staff involved. They are a true credit to your team"

#### From Dundee Health and Social Care Partnership

"The professionalism of the Enablement team. The quality of care and expertise shown by the above team under the leadership of its manager is amazing. I will be happy to give you further details but since normally you only get complaints about services I am writing in praise of the dedicated team. I hope you will pass on my thanks and praise of their efficiency, expertise, cheerful and tireless dedication."

# **10** Performance

In Dundee, the CSWO reports statutory and local performance indicators through the Council Annual Performance Report and the Integration Joint Board Annual Report. This is supplemented by a range of separate reports to Elected Members, the Integration Joint Board and the various governance bodies relating to Children's Services, Community Justice and Health and Social Care. Further oversight is provided by the Chief Officer Group for Protecting People, including scrutiny of balanced scorecards. In 2018-19, trends included:

#### **Children's Services**

- The length of time children stayed on the child protection register continues to reduce, with 95% de-registered after less than 12 months. This indicates that measures put in place reduced the level of risk and protected children from harm.
- A total of 41 Child Protection Orders were made, which is a significant increase from 31 the previous year and closer to 2016-17 levels (45). In partnership with the Children's Reporter, the Service continues to scrutinise applications for CPOs and trends are considered at the Child Protection Committee, where the Reporter has noted they have been proportionate responses to the nature and level of risk in certain families.
- The number of Looked After Children has reduced slightly with exactly 500 children on 31st March 2019. Around 88% of Looked After Children are cared for in the community, which is very slightly lower than the national average.
- There were a total of 10 Emergency Placements, which involve authorising an emergency move of a child or young person subject to supervision requirements in cases of urgent necessity. This was a decrease on the previous year of 16.
- Attendance for Looked After Children remains below average at around 87% but exclusion rates have been dramatically reduced from 238 in 2017-18 to 87 incidents in 2018-19
- 76% of Looked After Children are living in Dundee or with Dundee carers in close proximity to Dundee.
- The proportion of care leavers aged up to 26 years old in education, training or employment has risen to 49%. Longer sustained employment, training and education continues to be a key priority, with a range of actions outlined in a Corporate Parenting Plan.
- 140 children with disabilities or complex needs received targeted community based support over the year with a case load of around 110 at any one time. Work is ongoing across Tayside to review arrangements for the provision of respite care.
- Five young people entered secure care in the reporting period but they were all short term placements for less than three weeks each.
- In respect of permanent alternative care and adoption, 21 new Permanence Orders were made and of these, 8 were with authority to adopt. This is about the same as last year. In total 142 children and young people were on Permanence Orders on 31st March 2018, 28% of the LAC population, compared to 149 out of 509 (27%) on 31st March 2018.
- During 2018-19 there were a total of 229 children in internal foster placements, with the majority (61%) aged between 0 and 5 years old. Over the last year there have been 55 emergency admissions to foster placements and 22 emergency moves of placement.
- There continues to be a shortage of carers and adopters for some groups of children and young people, including adolescents, large sibling groups and children with complex additional support needs.

#### Adult Support and Protection

- In 2018-19 1558 adult protection referrals were received which is a 33% increase on 2017-18. 56 of these referrals resulted in adult protection activity, with 42 Adult Support and Protection Case Conferences taking place over the year. Most referrals (1383- 89%) continue to be made by Police Scotland. Dundee has a single pathway for vulnerable adults and this has resulted in an increase in police involvement for non-crime related referrals eg. mental health and substance misuse.
- Of the 56 referrals which resulted in adult protection investigations, financial and physical harm featured as the highest single areas of adult harm identified. In the other referral reason categories included neglect by carer and risk associated with vulnerabilities due to age, disabilities or health concerns, domestic abuse, fire safety risk, harassment and welfare harm.
- During 2018-19, 811 (52% of all referrals) have been considered by the Early Screening Group providing opportunities for early intervention and prevention.

#### **Mental Health**

- There were a total of 115 emergency detentions in hospital and an average of 87 detentions a year in the last 5 years.
- There were a total of 177 short-term detentions in hospital, compared with 146 in 2017-18. There has been an average of 152 shot-term detentions a year in the last 5 years
- There were 41 Compulsory Treatment Orders. With an average of 36 Compulsory Treatment Orders in the past five years.
- In 2018-19 95 Social Circumstance Reports were completed. 67 resulted in short term detention and 27 in Compulsory Treatment Order.
- In 2018-19 there were in total 143 guardianship applications of which 87 were Private Guardianship and 56 were Local Authority Guardianship applications. Of them 99 were granted.
- There were 12 people who were subject to Compulsion Orders with Restriction and 3 people to Treatment Orders. This has remained stable in comparison with the year before. There were one Transfer for Treatment Directions (none in 2017-18), 10 Compulsion Orders (9 orders in 2017-18) and 5 Assessment Orders (6 in 2017-18).
- During 2018, there were 1337 Power of Attorney (POA) registrations in Dundee per 100,000 population (18 and over) compared to 1934 registrations in 2017. 2017 had a high number of registrations in Scotland as whole. It is notable that those local authorities with a more aged population have higher numbers of new registrations. In 2018, Dundee had the sixth lowest number of new registrations compared to all Partnerships across Scotland.

#### **Community Justice**

- A total of 535 Community Payback Orders (CPOs) were imposed, compared with 656 the previous year. This is the third year this number has reduced and is correlated with a corresponding reduction in the number of Court Reports.
- A higher percentage of CPOs (17%) were issued to women compared to the previous year where 14% were imposed.
- The number of referrals for Diversion from prosecution cases continues to rise, moving from 92 in 2017-18 to 129 in 2018-19. The number of Diversion cases successfully completed has also risen, moving from 55 in 2017-18 to 64 in 2018-19.
- Unpaid work continues to be a disposal that the Court has confidence in, with 45,339 Unpaid Work hours imposed by Court in 2018-19. In addition, over the course of the year, a total of 27,640 hours of unpaid work were carried out (555 of which were other activity hours).

- In respect of Drug Treatment and Testing Orders, the Sheriff Court imposed 3 Orders compared to 5 the year before. These Orders are designed for people with the most persistent substance misuse problems related to offending and require their compliance with stringent conditions.
- There were 156 Registered Sex Offenders subject to statutory supervision under MAPPA. In Tayside, 38% were jointly managed by Community Justice Social Work and Police Scotland because the RSO was subject to both a CPO or License and Notification Requirement.
- There were 15 new Supervised Release Orders (SROs), almost double the number from the previous year. These orders are imposed for prison sentences of less than 4 years where the person is deemed to require supervision on release.
- There were 156 people serving prison sentences of more than 4 years who will be subject to statutory supervision on release, compared with 153 people the year before. The service provides throughcare whilst they are in prison and on their release to community.
- No young people aged between 17 and 18 received a custodial sentence 1 less than the previous year.

In Community Justice, the service continued to implement Unpaid Work and received consistent positive feedback from both the individuals carrying out their work and from the recipients. In response to requests from members of the community, more than 100 projects & placements and over 27,000 hours of unpaid work were carried out at various locations across the city. There was a particular focus on constructing and refurbishing playground and public play park furniture as well as external furniture such as benches and tables for public spaces. We continued to provide practical assistance to vulnerable groups and work included ground clearance for sheltered & supported tenancy residents, preparing food parcels and placements in charity organisation warehouses.

People subject to unpaid work reported that it got them into better routines and they valued the chance to contribute something back for others. Members of the community reported that they appreciated the positive impact as well as the good quality of the work.



#### Health and Social Care

- The National Health and Care Experience Survey for 2017-18 (the latest version available) provides feedback to Health and Social Care Partnerships regarding citizen's perceptions of health and social care services and their impact on health and wellbeing. Across eight of the nine key indicators measured by the survey Dundee performed better than the Scottish average, for the remaining indicator Dundee was at the Scottish average. There have been increases in the proportion of adults supported at home who agree that their health and care services seem well co-ordinated (from 75% in 2015-16 to 81% in 2017-18) and in the proportion of adults supported at home who agree they feel safer (from 84% in 2015-16 to 87% in 2017-18).
- There has been further focused improvement work relating to unscheduled care that has contributed to a reduction in the length of time people spend in hospital when they have been admitted in an emergency. During 2018-19 the number of hospital bed nights reduced by 12,506 from the previous year.
- Of the people who died during 2018-19 89% of time in the last 6 months of life was spent at home. This is a positive result (similar to the Scottish average) and could not be achieved without a strong partnership between acute and community teams, the third and independent sectors and patients and their loved ones. The Tay Palliative and End of Life Care Managed Care Network is further exploring information related to those who spent greater than 10% of their last six months in hospital, to understand the role of hospital care at this time and how best to ensure acute admissions are purposeful, positive and person-centred.
- In 2018-19, for every 100 people aged 75 and over, 36.9 bed days were lost due to a delayed discharge. This is a slight deterioration on the 2017-18 figure when there were 34.9 bed days lost for every 100 people aged 75 and over. Throughout 2018-19 Dundee been amongst the best performing Partnership in Scotland. The creation a multi-disciplinary discharge hub and assessment at home service, introduction of 7 day working within the Acute Frailty Team and further development of the Enhanced Community Support Team have all contributed to these reductions in delayed discharge.
- The National Health and Care Experience Survey 2017-18 reported that 38% of Dundee respondents who provided unpaid carer felt supported to continue in their caring role; this is similar to the Scottish average of 37%. Information and advice services are commissioned through Dundee Carers Centre and are a pivotal part of this is the 'Carers of Dundee' website which was launched in May 2018 (http://carersofdundee.org/). The website allows carers to find out about relevant support, events, courses and activities to support them in their caring role, without having to search through individual local and national support organisations' websites. The site also lets carers know their rights and how they can get further information and advice.

Dundee Carers Centre have been working in partnership with young people and Dundee City Council to increase awareness of young carers. Young Carers Voice co- hosted 'Young Carer Roadshows' within all secondary schools in Dundee throughout March 2018. The roadshows were a mixture of workshops, assemblies and lunchtime events and reached over 1,200 pupils. The roadshows involved young carers at each school helping with the events, with an opportunity to take part in discussions about improving support for young carers in Dundee which included the Minister for Public Health, our local MSP, the Head of Schools, the Health and Social Care Partnership's Lead for Carers, the Convenor of the Children and Families Committee, and Carers Centre staff.

"Before the roadshows began I was worried people wouldn't listen, it was nerve wracking working with people roughly my own age. I was also excited and thought it would be interesting.

During the roadshows I felt confident and enjoyed taking the lead of groups and was surprised I was able to make a difference. I felt good as I was able to share my experience of being identified as a young carer at 15, when I was actually a young carer from age 6, if I accessed the support sooner things would have been easier. After the roadshows I felt proud and like I actually accomplished something. I wanted to do more as it was a great experience. I can now talk to other young people more. This has helped me become the young person I am now."

- Dundee has a high rate of readmissions to hospital, where the patient had been discharged within the last 28 days. In 2018-19 12.4% of people discharged from hospital following an emergency admission, were readmitted within 28 days. Throughout 2018-19 Dundee has been amongst those Partnerships with the highest readmission rate in Scotland.
- Dundee also has a high rate of hospital admissions as a result of falls, with a rate of 31 admissions for every 1,000 of the 65 and over population. Throughout 2018-19 Dundee has been amongst the most poorly performing Partnership in Scotland. There is now an established multiagency group meeting on a regular basis to share knowledge and skills and support the development of falls services across Dundee. The pathways for patients presenting at the Emergency Department has been reviewed and now provides a more streamlined process for those requiring a falls screening assessment. The falls group has also focused on building capacity for citizens to access a wide range of physical activities to improve health and wellbeing.
- There has been an increased spend on Self-Directed Support options one and two; with an increase from £1.7 million in 2017-18 to £2.2 million in 2018-19. Since the implementation of the Social Care Self-directed support (Scotland) Act 2013 the spend on packages of care for people opting for Options 1 and 2 has increased year on year although Dundee remains low in terms of proportions of people receiving Options 1 and 2, compared to other Partnerships.

## **Statutory Functions**

As outlined in the legislation and guidance, there are a number of duties and decisions that can only be made either by a CSWO, or by a professionally qualified Social Worker to whom responsibility has been delegated by the CSWO and for which the CSWO remains accountable. These relate primarily to the restriction of individual freedom and the protection of service users from themselves and others and the protection of the public from service users. It includes the following:

- Children and young people on the Child Protection Register
- Looked After children and young people
- Fostering and adoption
- Placement in secure accommodation
- Offenders assessed as very high or high risk of harm to others
- Mental health statutory provisions
- Adults with incapacity and welfare guardianship
- Adult support and protection

The Public Bodies (Joint Working) (Scotland) Act 2014 required NHS Boards and Local Authorities to integrate planning for, and delivery of, certain adult health and social care services. The main purpose of integration is to use the available resources to improve the wellbeing of people who use health and social care services, including adult social work services, in particular those whose needs are complex and who require both health and social care support at the same time.

Following the establishment of the Dundee IJB, they became responsible for the planning and delivery of a wide range of adult Social Work and Social Care services. The CSWO's role in relation to these delegated functions continues and the CSWO has continued to play an important role in the leadership and governance of health and social care integration over the last year, ensuring that adherence to Social Work values, principles and standards is central to developing the partnership.

Details on each of the statutory functions are provided in section 10 and the trends are generally positive but with some ongoing priorities including maintaining Looked After Children in local placements where appropriate and possible; increasing fostering and adoption places, especially for teenagers, sibling groups and children with disabilities; assessing and managing risks presented by Registered Sex Offenders with internet convictions; responding to the significant increase in adult concern referrals; better understanding and continuing to monitor increases in Emergency Detentions and Compulsory Treatment Orders; reducing readmissions within 28 days and falls related hospital admissions; continuing to increase use of Self-Directed Support Options 1 and 2; and, increasing the proportion of carers who feel supported to continue in their caring role.

In addition to this the CSWO has had a key role in responding to statutory requests for information from the Scottish Child Abuse Inquiry and supporting subject access requests. In-line with national trends there has been a considerable increase in Subject Access Requests which places additional demands on resources. However, we have continued to promote person-centred responses to those people requesting access to their personal files.

# **12** Workforce Learning and Development

#### Social Work and Social Care Workforce Development

The Council's commitment to our employees is reflected within Our People Strategy and includes our approach to Workforce and Succession Planning, Talent Management and Developing the Young Workforce. Within Social Work, there is a culture of shared learning across professional groups and our partnerships. Increasingly we are working across Tayside with our partners in local authorities, NHS Tayside and the private and voluntary sectors. We also continue to contribute to and build on collaborative approaches to Learning and Workforce Development nationally also. We have an excellent track record of working alongside practitioners and services to develop the learning they need to practice safely and professionally and almost all new approaches developed and delivered in 2018 were approached this way.

#### Newly Qualified Social Work Programme

Dundee and Angus Council have worked in partnership to create an induction process for supporting Newly Qualified Social Workers (NQSW) to feel competent, confident and knowledgeable when working with children and families where there are child protection concerns.

The programme is a blended learning approach which consists of an online resource, learning audit to identify any specific learning needs for use in supervision and to identify relevant shadowing opportunities, a full day practice development session and follow up workshop event. Two cohorts ran in 2018-19, the programme is currently being evaluated and feedback from each cohort used to update programmes for 2019-20.

Participant feedback;

" I really liked the online learning resource, it was really good to see all the information in one place"

"I enjoyed the group interactive work. I think being only NQSW helps people to build confidence".

*"joining Dundee and Angus together and feeling as if you're not alone with your feelings/anxieties of being NQWS."* 

(Dundee NQSW, Cohort 2)

#### **Talking Social Work**

Talking Social Work is a Tayside and Fife forum for anyone with an interest in Social Work. The forum is a partnership between Angus, Dundee, Fife, Perth and Kinross councils and the University of Dundee.

The forum was launched on 13th September 2018 to celebrate 50 years of Social Work in Scotland and included a presentation from Dundee's CSWO. The forum continues to go from strength to strength with Social Work students, NQSWs, Social Workers, Social Work managers, practice educators and academics participating and contributing to the talks and discussions. Since the launch of the forum the following themes/topics /research/presentations have been discussed

- 6th December 2018 Risk
- 14th March 2019 Social Work values and relationships

#### SSSC ELearning

An open learn resource has been developed in partnership with HR colleagues to support all employees who are required to, or are registered with the SSSC, and their managers. Alongside this, PRTL sessions will be available to all registered employees. The resource covers the following;

- SSSC codes of practice
- Registration responsibilities
- Clarifying which part of the register(s) the employee is required to be on
- Post-Registration Training and Learning (PRTL)
- Fitness to practise

This resource will be available to all staff by end September 2019.

#### **Registerable workforce**

We have invested significantly in our registerable workforce to ensure they are fully equipped with the occupational competences to meet management and leadership standards and our statutory requirements. We have continued to directly deliver a high proportion of the required qualifications across the SSSC registerable workforce groups. The Learning & Organisational Development Service sought approval from SQA to deliver the Professional Development Award Health & Social Care Supervision at SCQF 7. We have now successfully delivered our first cohort to 10 H&SCP employees working as Senior Social Care Officers and Social Care Organisers in homecare to meet their requirements for SSSC Registration. We are planning to deliver a second cohort in conjunction with Angus Council.

#### TURASLearn

TURASLearn is NHS Education for Scotland's (NES) learning platform. It provides a wide range of educational resources for the health and social care workforce. Dundee City Council, in partnership with Angus and Perth and Kinross Council's, have worked with NES to develop a Tayside learning platform hosted on TURAS. The live Tayside portal will be launched in the coming weeks and will offer Dundee City Council employees and volunteers including DH&SCP, NHS Tayside employees and third or independent sector colleagues the opportunity to access a range of protection E-learning and open learn resources from across Tayside previously unable to them.

This includes:

- Protection basic Awareness E-learning
- Adult Support and Protection Awareness E-learning
- Human trafficking E-learning
- Self-directed Support (Tayside wide) E-learning
- Protecting children: module 1 (CP in a school setting)
- Emotional health and wellbeing (CP in a school setting)
- Protecting children with a disability E-learning
- Child protection basic awareness E-learning
- Getting it right for every child (GIRFEC) learning resource
- Adult Support and Protection Open Learn Resource

#### Case Study: Billy aged 18

Billy was working with the Moving On Team who referred him to the team to support him into work. He was 16 at the time of the referral, had been Looked After for 10 years, was experiencing health and wellbeing issues and was also at risk of homelessness.

Billy worked with our Mental Health practitioner for a number of months to address his anxiety and depression. He also completed our EmployabiliTAY course to develop his employability skills and following the successful completion of this course was supported by our Employer Recruitment Incentive Officer into a Modern Apprenticeship (MA) as an Early Year's Practitioner in a local nursery. Billy was provided with ongoing support for the duration of his MA and following successful completion, he was helped to successfully apply for a job as a support worker with Action for Children.

Billy continues to work in Action for Children and has also secured a sessional Social Care Officer post with DCC.

#### Leadership Development

Dispersed leadership remains a key priority for our Social Work and Social Care workforce. This year we have continued to offer access to leadership development opportunities, supported employees to gain recognised leadership qualifications, delivered business coaching to those supporting change, facilitated Action Learning, developed resources to assist with an organisation-wide approach to Succession Planning and Talent Management, and worked with a range of teams and services to develop bespoke approaches to how they learn as a team.

#### **Integrated Induction**

Dundee Health & Social Care Partnership offers a unique approach to integrated induction. Sessions have been offered throughout the year that brings the integrated workforce together, from Social Work, NHS Tayside, and our Third and Independent partners. This year as part of our induction work we celebrated World Social Work day with displays, dialogue, and encouraged participants to discuss their role in relation to the theme "The Importance of Human Relationships".

#### Protection

In 2018-19, specific learning programmes relating to the protection of children and adults has remained a priority as in previous years. We have developed and delivered core programmes of multiagency training on Child and Adult Protection and provided a range of face to face and high quality e-learning programmes across the protection spectrum. We also hosted a Tayside wide multy-agency conference in Dundee 'Connect with Neglect – How can I make a difference?' A Tayside approach to recognising and responding to neglect which was highly commended. This was for frontline practitioners and managers who work with children, young people and families (including unborn babies) in Angus, Dundee and Perth and Kinross.

### Good Practice example:

#### The CLICK: Path to Protection training model

This is a ground-breaking new programme that aims to enable all frontline workers to better protect children harmed online. It is an evidence-based, multi-faceted training and support programme. This new initiative, which is supported by BT, aims to ensure that every professional working with children that are either at risk of or the victims of online abuse, understands not only what his/her role entails but also those of their colleagues from organisations jointly charged with protecting children.

Through experience of working with children harmed online, the Marie Collins Foundation MCF has found that when abuse or exploitation has involved online activity, the impacts on the victims and families are different. This, in turn, requires a specific response tailored to meet their protection needs.

The development of the model entailed a Pilot phase (2014-2016). BT contributed to the funding of the pilot which enabled the MCF to participate.

Special programmes of support for courses including the Postgraduate Certificate in Child Welfare and Protection, Adult Support and Protection, the Mental Health Officer Award, Professional Supervision, and Practice Learning Qualification remain in place and are currently prioritised for funding support in relation to our statutory duties and SSSC work streams. We continue to review effective ways to recruit to the MHO award. A council-wide personal and professional development support process also encourages individualised opportunities for study supported by the organisation. This is widely used by frontline employees as part of both career development and continued learning.

Development work has been carried out with practitioners who have specific functions under the Adult Support and Protection (S) Act 2007. This has included consultation and engagement events which has led to the development of an ASP council officer forum and new learning and development opportunities.

The ASP council officer forum meet on a monthly basis. Every other forum consists of a developmental session which may involve inviting speakers to present specific topics/learning and/or skills based sessions such as MOSAIC, Investigative interviewing etc. The monthly sessions in between the development sessions are case based peer mentoring using an Action Learning approach.

The development of a new Tayside workshop based on adult support and protection defensible decision making and SCR's has also been piloted and a rolling programme now agreed in partnership with Angus, Perth and Kinross Councils and NHS Tayside. 2nd worker (interviewer) ASP Training will also be launching in September alongside an online resource in partnership with Angus Council.

Dundee Mental Health Officers (MHO's) will be delivering workshops on "Crossing the Acts", the interface between Mental Health Care and Treatment, Adults with Incapacity and Adult Support and Protection legislation for practitioners working with children, families and adults where mental health, learning disability, capacity and protection are themes.

We continue to lead the delivery of the PDA Practice Learning (Social Services) Qualification on behalf of 6 local authorities. The leadership and quality of the programme along with the excellence in the partnership arrangements was commended in both our SSSC annual monitoring and SQA External Verification reports. We remain at the fore of the practice learning agenda across Scotland and will continue to contribute to the development of the National Partnership in Social Work Education.

#### **Promoting Social Work Values and Standards**

The CSWO has a duty to ensure Social Work values and standards as outlined in the SSSC Codes of Practice are promoted. For employers, the Codes include such requirements as making sure people understand their roles and responsibilities, having procedures in place relating to practice and conduct and addressing inappropriate behaviour. For employees, protecting the rights and interests of service users, maintaining trust and promoting independence. This includes the following:

- Recruitment and selection, including checking criminal records, relevant registers and references.
- Induction, training, supervision, performance management and a range of procedures on such things as risk assessment, records and confidentiality.
- Responding to internal or external grievances or complaints about the conduct or competence of staff.
- Ensuring line managers appropriately support staff and progress self-evaluation activities to identify strengths and areas for improvement.
- Ensuring health and safety policies are in place, including risk assessments and controls for identified hazards such as lone working and moving service users.
- Ensuring that staff required to register with the SSSC do so and are supported to meet the learning and development requirements associated with this.

Within the Health and Social Care Partnership Workforce and Organisational Development Strategy (published in June 2016) a number of guiding principles to support the workforce to deliver on the ambitions of integrated health and social care were adopted. These locally created principles sit alongside existing legislative and clinical, care and professional governance requirements, as well as the SSSC Codes of Practice. The principles include: inclusivity and equality, visible leadership, collaborative co-production and reflective practice.

#### **Planning for Change**

The Dundee Child Protection Committee and Children and Family Service in conjunction with the Violence Against Women Partnership is in the process of transforming its response to Domestic Abuse. In October 2018 Dundee (in partnership with Perth and Kinross Council, Action for Children and Perthshire Women's Aid) was successful in attracting Scottish Government funding to implement the Caledonian System. It is hoped that implementation, which involved an extensive programme of staff training, systems change and liaison with the Sheriff Court, will lead to more perpetrators receiving an appropriate intervention, details of which will be provided in the CSWO Report covering 2019-20. The Caledonian system is an integrated system that co-ordinates the input of Women and Children's workers. The woman's perspective is carefully included within the report writing stage and support can continue on a voluntary basis if requested. The children's worker can help obtain the child's views and support any children effected.

Dundee began introducing Safe and Together in 2016 with the first cohort of training taking place. This was followed with another in 2017. The commitment to implementing Safe and Together (S&T) in Dundee has intensified over 2018-19 and we have been working together to develop a structured approach to rolling out S&T. We refreshed the action plan and established a short life working group to develop resources/guidance for Dundee. A short guide to S&T/Risk Assessment tool for domestic abuse has been developed with wider guidance in progress. Our Practitioner Forum has been meeting regularly and an online KHub group established for sharing resources, ideas and challenges. A standardised briefing presentation and guidance will be developed and a programme of cascading briefing sessions will take place over 2019-20.

#### Working with Vulnerable Women

The partnerships have also been working hard to improve services and responses to vulnerable women in Dundee and developments include the work of Dundee CJS Women's Team and preparation for the Female Community Custody Unit.

Since the 2011 Angiolini Commission into Female Offenders, Dundee CJS has operated a specialist Women's Team. This team includes a mental health nurse and works closely with key voluntary partners such as Tayside Council on Alcohol (TCA) mentoring, Women's Aid and Women's Rape and Sexual Abuse Centre. The whole CJS service has undertaken training in trauma informed practice but the Women's Team has been at the forefront of rolling this out and the Team nurse offers Safety and Stabilisation training to staff as well as offering these techniques through group work with women.

Dundee has been chosen as the site for one of Scotland's first two Female community Custody Units. This 16 bed unit is designed to be an alternative to the large national prison. The unit is not due to open until late in 2020 but negotiations are actively underway regarding how best to ensure the women in the unit receive the most effective, appropriate community support.

In January 2019, the Council agreed to support the establishment of a new service for vulnerable women who have had 2 or more children removed from their care. A scoping study identified 113 women who met the criteria for this service, and following multi-agency preparation work, Pause Dundee began in June 2019, provided by TCA Dundee with funding from the Robertson Trust and the Big Lottery. Pause will be reaching out to some of Dundee's most vulnerable women, most of whom will have a multiplicity of needs such as mental health, housing issues, exposure to domestic abuse, substance misuse etc. The scheme is entirely voluntary and it will be working closely with a range of relevant services to ensure that the women receive the right support to help them to get their lives back on track, whether or not they work with the Pause programme. We anticipate that the lives of women who take part in the programme will be significantly improved - with a consequential positive impact on their relationships with their children - and an evaluation will report back on outcomes in two years' time.

In Health and Social Care there have also been a number of developments that have focussed on planning for change and testing new, more integrated ways of working. These developments have been driven by changes in legislation as well as the implementation of the Health and Social Care Partnership Strategic and Commissioning Plan. They include:

 Dundee is one of a number of sites working with Healthcare Improvement Scotland's ihub to support the implementation of The Scottish Government's Strategic Framework for Action on Palliative and End of Life Care which states that everyone who needs palliative care will have access to it by 2021. The focus is on improving the earlier identification of and coordination of care for those who have palliative care needs as well as testing and evaluating Alzheimer Scotland's Advanced Care Dementia Palliative and End of Life Care Model and identifying ways to make improvements in palliative and end of life care for people with dementia.

To gain deeper understanding of the complexity of the system and the experience of people receiving care, a number of person pathways were undertaken to strengthen knowledge. Individual experiences of care were mapped and showed evidence of positive outcomes in care where reviews, conversations and decision-making was evident at the earliest point in the journey. It is clear that planning for transitions, expertise and knowledge to interpret changes in presentation are key in achieving the wishes for end of life that matter to the individual. Identification Tools are being tested within some care homes to determine if the use of the tools supports the identification of changes and decline in a person's presentation and whether this leads to a responsive and timely response in meeting the needs identified. Where deterioration is recognised from application of the tools and/or needs unmet the individual is escalated to the Care Home Team where a coordinated response can be delivered. Initial learning from the care homes is that where tools have been considered for an individual this supports decision making around interventions.

• In April 2018 three teams supporting local care homes integrated and co- located to form the Care Home Team. The team includes a Social Work team manager; two advanced nurse practitioners; four mental health nurses; four general health nurses and five social workers. The team are able to maximize the opportunity for a professional from the right discipline at the right time to provide tailored support in achieving people's identified outcomes. In order to further integrate and improve services the team have held a number of team development and joint training sessions. The sessions have brought increased understanding each other's roles, supported the unification of team processes and built stronger links between colleagues each professional group in order to provide the best support care homes and people living there.

The vision of the Care Home Team is:

"For people living within care homes to have the best experience as possible".

## Care Home Team Case Example:

Mrs H moved into a care home after her husband died. Mrs H had a diagnosis of dementia and as her dementia progressed she frequently became distressed. When distressed she sometimes hit out at other frail residents. The workforce in the care home struggled with this, and the management stated that they would have to terminate her placement.

The Care Home Team undertook a joint adult protection investigation. The team identified processes which will better support the workforce in care homes in reducing risk to individuals like Mrs H and to the other residents.

Support and training was provided to the workforce by the mental health nurse. This increased workforce understanding of dementia and how best to manage the symptoms.

Mrs H's incidents caused by distress have been reduced and there is a reduced risk of further incidents with other residents. The general/physical health nurses will continue to support the workforce in the care home to identify changes/deterioration in Mrs H's overall health which may affect her levels of distress.

The Social Worker from the team reviewed the overall circumstances of Mrs H's care home placement and confirmed that Mrs H had become much more settled and the workforce in the care home were now more able to meet her needs. She has continued living in the care home.

During 2018-19 the Partnership worked with wider Community Planning partners to establish the Transforming Public Protection Programme. The programme was set-up in response to the findings of the Joint Inspection of Adult Support and Protection that was carried out in 2017-18, as well as findings from previous inspections of services for Children and Young People and from Significant Case Reviews that have been carried out in Dundee. The Transforming Public Protection Programme is being delivered in partnership with The Care Inspectorate who have committed to providing active support for the programme through the provision of advice as well as participation of their own staff in programme activities.

The programme aims to ensure that our approach to public protection is of a consistently high quality and is supported by the right range of resources. As well as focusing on improving the leadership of public protection responses, work will also take place to make sure that processes that provide immediate and longer-term responses to people in need of protection are as good as they can be.

The first phase of the transformation programme has focused on 3 frontline practice teams leading activity to improve practice in relation to chronologies, risk assessments, support and supervision of frontline staff and quality assurance of our day-to-day protection work. These teams, with support from the Care Inspectorate, have been researching best practice and testing new approaches in their own practice. As these small tests of change develop the teams will be sharing their learning and successes with practice teams across the Partnership.

Quotes from team members

"I was a bit sceptical to begin with but, as we've moved forward, see this as an opportunity to improve things for our service users and the team as a whole."

The second phase of the programme will focus on improvements relating to leadership of public protection, particularly in relation to the role of the Chief Officers Group and Public Protection Committees / Partnerships. This work began at the start of 2019-20 and will be followed later in the year by a third phase focussed on integration and service redesign of functions that respond to protection concerns, including progressing joined-up approaches to the various multi-agency protection processes that operate across the life span and scope of public protection.

#### Personalisation and Outcome Focused Practice

The Personalisation Delivery Group has continued to make good progress towards the recommendations that were agreed last year. The tasks completed include:

- The development of a quality charter for direct payment employers. This outlines what people managing a direct payment in a self-directed context should expect from their employees as a minimum standard of quality of care and support.
- The formalisation of a third-party managed account process to support those who may struggle to manage a direct payment due to cognitive capacity or a disability.
- Service specifications for care and support services now allow for the supported person to 'bank' time so that they can then use this time more creatively to meet their own personal outcomes.
- The appointment of a new lead officer for Personalistaion.

Community and asset based approaches to assessment continue to develop locally with greater links being made with localities and the locality planning processes. Community resources are currently being mapped and consideration given to how they can support people in collaboration with Health and Social Care services. The number and availability of service providers has also been enhanced so that supported persons have more opportunities to receive a service that is personalised for them.

The outcome focused assessment for adults is currently being reviewed to incorporate a community based approach to assessment and a focus on persons own assets, personal strengths, supports, friends and family.

Additional learning and development opportunities continue to be developed incorporating all aspects of personalised practice, ranging from referral, through assessment, agreeing budgets, offering choice and control through to reviewing outcomes.

#### **Self-Directed Support**

In the Health and Social Care Partnership two specialist Social Workers have been employed with a specific focus on supporting the implementation of the Social Care - Self Directed Support (Scotland) Act 2013 across our services. These Social Workers support staff through the application process for options 1 and 2 to ensure that these options are understood and accessible to people using services. Dundee Carer's Centre also continue provide support to people accessing direct payments.

The introduction of the two specialist Social Workers has impacted on the number the numbers of Option 1s and 2s across adult health and social care services. An increase of 39% has been observed for option 1s and 105% increase for Option 2s. The annual comparators with other Health and Social Care Partnerships have not been published yet by Scottish Government for 2017-18, therefore, it is unclear where Dundee is currently sitting compared to others.

	2	014-15	2	015-16	-	2016-17		2017-18		2018-19	
Option	n	Cost	n	Cost	n	Cost	n	Cost	n	Cost	
Option One - Total	49	£860,256	58	£928,673	60	£1087024	74	£1,522,411.91	103	£1,875,293.80	
Option One - Adults only	40	£803,313	50	£865,451	52	£1,016,659	65	£1,413,325.70	79	£1,640,764.55	
Option Two	12	£22,691	22	£96,279	30	£308,726	39	£287,817.47	70	£613,366.38	

## Self Directed Support Case Study

Mrs X is a 95 year old lady living with her son, daughter in law and her grandchildren in Dundee. Mrs X has a diagnosis of Dementia. Although not always able to recognise family she is aware that she is with family and living where she wishes to be.

Due to her Dementia Mrs X can only speak and understand her first language. She requires to be reassured in her native tongue and this can only be achieved within her own home setting.

In Mrs X's culture it is traditional for the family to look after the elders of the family. Mrs X wishes to be cared for within the family unit. The family want her to remain within the family unit and will continue to support Mrs X to have her care and support delivered under Option One of Self-directed Support.

Due to her life experiences Mrs X gets distressed overnight and may shout out overnight. Her family take turns to sit with her overnight and at times get her out of bed to comfort her. This can take a number of hours before Mrs X is comforted and settled.

The family have been able to use Option One of Self-directed Support to employ Personal Assistants who speak Mrs X's first language. This enables Mrs X's care and support needs to be met whilst the family receive much needed support and respite to enable them to continue in their caring roles.

As there is not a care home that can meet Mrs X's individual and unique needs, through receiving a direct payment this is the most flexible way of delivering the support to her in her own home surrounded by her family.

Ms Y is a 44 year old lady who lives with her two children one of whom has additional support needs. She has a number of health conditions that impact on her ability to function and is now registered blind.

Ms Y describes her life as living in a prison for a crime she did not commit.

Ms Y is to use her Option One of Self-directed Support to employs Personal Assistants (PAs) to provide support to her to make meals for her and her family. They will provide support to her when she is carrying out household tasks such as housework and laundry. Ms Y will utilise her PAs to enable her to carryout food and clothes shopping.

Ms Y cannot ensure her younger child's safety when outside and she has never been able to play outside with her, nor has she been able to take her to a play park. Having a PA to support her to play in the garden with her young child is life changing for Ms Y.

Without the provision of support through Option One Ms Y stated she would not be able to continue in her parental role.

Master T is a teenage boy who has Muscular Dystrophy which is a degenerative condition. His parents asked for support to take him out and allow them to have a break. They decided that Direct Payments would encourage Master T to go out with a PA who was younger in the community in his wheelchair which seemed to be a barrier for him.

Having the choice of who to employ makes Master T feel more included and helps him to live his life with choice and dignity as his condition progresses. The PA plays computer games and has similar interests which has helped Master T adapt to his condition and accepting support to be independent in the city. His parents feel supported and have time together and recuperate from caring. They found that Option One was ideal to meet their son's needs.

Over the next year our priorities for Social Work and Social Care will be:

- Across all services, strengthening our approaches towards protecting the public through the implementation of a Transforming Public Protection Programme with the Care Inspectorate to improve practice and processes in respect of assessments, chronologies and plans.
- Across all services, strengthening our approaches towards vulnerable women, including through the New Beginnings Team, Pause Programme, new Community Custody Unit, Caledonian Programme and Safe and Together.
- In Children's Services, continuing to lead on a GIRFEC Improvement Programme which focuses on prevention through the related initiatives of a CELCIS Addressing Neglect Programme, What Matters 2 U and a Fast Online Referral Tracking system.
- In Children's Services, continuing to improve the placement stability of Looked After Children and Care Leavers to fully meet their health and wellbeing needs and support them towards positive destinations in adulthood.
- In Children's Services, working with the Centre for Excellence for Looked After Children on a PACE programme to improve approaches towards children and young people moving into permanent fostering and adoptive placements.
- In Children's Services, responding to the findings and recommendations of the Independent Care Review, which will cover the care system as a whole and apply to both Social Work and other partners.
- In Community Justice, work with the Scottish Prison Service to develop new approaches to women, employability, prison release, electronic monitoring, males aged 21-26 years at risk of custody and young people.
- In Health and Social Care, aligning statutory service delivery to localities and taking forward major service re-designs in mental health services and substance misuse, with each informed by the recommendations of the Dundee Drug Commission and pending Mental Health Inquiry.
- In Health and Social Care, to continue to target improvement activity to prevent falls and to increase the number of people accessing self-directed support options 1 and 2.
- In Health and Social Care, to work with communities to better understand performance information that demonstrates inequalities in outcomes between Local Community Planning Partnerships areas and to identify ways to reduce these inequalities.
- In all areas, addressing major financial challenges which will continue to require new ways of working, the active involvement of communities in service redesign, joint work with neighbouring authorities and prioritisation of resources towards key needs.

Appendix 1 Summary of Care Inspectorate Gradings – All Registered Services with the exception of Care Homes in Dundee

Organisation	Name of Service	Service Type	Category	Inspection	Quality of	Quality of	Quality of	Quality of
			LA/Priv/Vol	Date	Care and Support	Environment	Staffing	Management & Leadership
Dundee City Council	White Top Centre	Adult Respite	LA	16/10/18	9	6	5	6
Dundee City Council	Mackinnon Centre	Adult Respite	LA	1/11/18	5	5	6	6
Dundee City Council	Oakland Centre	Support Service	LA	28/09/16	6	5	9	5
Dundee City Council	Weavers Burn	CAH/HS	LA	17/08/18	5	n/a	5	5
Dundee City Council	Craigie House	Care Home	LA	22/11/18	5	4	5	4
Dundee City Council	Menzieshill House	Care Home	ΓV	13/10/17	5	5	5	5
Dundee City Council	Turriff House	Care Home	LA	07/03/18	5	5	5	5
Dundee City Council	Janet Brougham House	Care Home	ΓV	05/10/17	5	9	5	4
Dundee City Council	Gillburn Road	Respite	LA	24/08/18	5	n/a	n/a	4
Dundee City Council	The Junction	Care Home	LA	03/09/18	5	n/a	5	n/a
Dundee City Council	Millview Cottage	Care Home	LA	22/11/18	4	n/a	4	n/a
Dundee City Council	Drummond and Forester House	Care Home	ΓV	22/11/18	5	3	n/a	n/a
Dundee City Council	Fairbairn St YPU	Care Home	LA	27/02/19	4	n/a	n/a	5
Dundee City Council	Fostering Services	Fostering	LA	20/11/17	5	n/a	n/a	4
Dundee City Council	Adoption Services	Adoption	LA	20/11/17	5	n/a	n/a	4
Dundee City Council	Through-care & Aftercare Service	Housing Support Service	ΓA	17/03/16	4	n/a	5	3
Dundee City Council	Homecare Social Care Response Service	Housing Support Service	LA	19/10/18	5	n/a	n/a	5
Dundee City Council	Care at Home City Wide	Care at Home and Housing Support combined	ΓA	17/12/18	5	n/a	5	5

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Jundee City Council	Dundee City Council Home Care Enablement Care at Home and and Support City Wide   and Support City Wide Housing Support   and Community MH combined   Older People Team Older People		LA	23/01/19	5	n/a	5	n/a
undee City Council	Dundee City Council Supported Living Team Support Service	Support Service	LA	19/11/18	5	n/a	n/a	5
undee City Council	Dundee City Council Dundee Community Living	Support Service	LA	28/09/18	6	n/a	n/a	6

n/a - not assessed (including where there is no requirement to be assessed)

Notes		



# 2018-19

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