

City Chambers
DUNDEE
DD1 3BY

21st November, 2025

Dear Colleague

You are requested to attend a MEETING of the **CITY GOVERNANCE COMMITTEE** to be held in the Council Chamber, City Chambers, City Square, Dundee and also to be held remotely on Monday, 1st December, 2025 following the special meeting of the City Council and the meetings of the Children and Families, Neighbourhood, Housing and Communities Committees called for 5.00pm.

The meeting will also be livestreamed to YouTube. Members of the Press or Public wishing to join the meeting as observers should follow this link www.dundee.gov.uk/live or alternatively they may attend in person.

Should you require any further information please contact Committee Services on telephone (01382) 434228 or by email at committee.services@dundee.gov.uk.

Yours faithfully

GREGORY COLGAN

Chief Executive

AGENDA OF BUSINESS

1 DECLARATION OF INTEREST

Members are reminded that, in terms of The Councillors Code, it is their responsibility to make decisions about whether to declare an interest in any item on this agenda and whether to take part in any discussions or voting.

This will include all interests, whether or not entered on your Register of Interests, which would reasonably be regarded as so significant that they are likely to prejudice your discussion or decision-making.

2 NEONATAL INTENSIVE CARE UNIT (NICU), NINEWELLS HOSPITAL

This item has been placed on the agenda at the request of Bailie Keenan who will ask the Committee to agree to oppose any downgrading of the Neonatal Intensive Care Unit (NICU) at Ninewells Hospital.

3 PROTECTING PEOPLE ANNUAL REPORT 2024/2025 - Page 1

(Report No 350-2025 by the Protecting People Committee Independent Chairs, copy attached).

4 CHIEF EXECUTIVES SERVICE PLAN 2023/2028 – MID YEAR PROGRESS REPORT FOR 2025/2026 - Page 33

(Report No 328-2025 by the Chief Executive, copy attached).

5 CAPITAL EXPENDITURE MONITORING 2025/2026 - Page 59

(Report No 333-2025 by the Executive Director of Corporate Services, copy attached).

6 REVENUE MONITORING 2025/2026 - Page 75

(Report No 343-2025 by the Executive Director of Corporate Services, copy attached).

7 CHIEF SOCIAL WORK OFFICER ANNUAL REPORT - Page 89

(Report No 247-2025 by the Chief Social Work Officer, copy attached).

8 DUNDEE INTEGRATION JOINT BOARD PERFORMANCE AND STRATEGIC PLANNING DEVELOPMENTS 2024/2025 - Page 131

(Report No 344-2025 by the Executive Director of Dundee Health and Social Care Partnership, copy attached).

9 DEVELOPING A WHOLE FAMILY SUPPORT APPROACH - Page 217

(Report No 349-2025 by the Chief Executive, copy attached).

10 AUDITORIUM HIRE DRUMGEITH COMMUNITY CAMPUS 2025/2026 (AN38–2025)

Committee is asked to approve the following rates to be applied for auditorium hire at DrumgeithCommunity Campus.

The Review of Charges outlines all terms and conditions for hiring Dundee City Council facilities, Committee Report 57-2025 Provisional Revenue Budget and Review of Charges refers. This is reviewed annually as part of the budget-setting process.

Drumgeith Campus opened to the public on Monday, 25 August 2025, and the auditorium is now available for hire. As the Drumgeith auditorium is a unique resource, offering conferencing, performance and event space, there was no direct equivalent in the Review of Charges agreed for 2025/26. This has necessitated bespoke arrangement being put in place for this resource.

Following local benchmarking with other similar events and conferencing spaces, it is proposed to set the following hourly rates:

- £100 for commercial hires
- £85 for standard hires
- £50 for concession hires

All Drumgeith Campus charges will be reviewed as part of the 2026/27 Review of Charges process and the auditorium will be included as part of that process.

ITEM No ...3.....

REPORT TO: CITY GOVERNANCE COMMITTEE – 01 DECEMBER 2025

REPORT ON: PROTECTING PEOPLE COMMITTEE ANNUAL REPORT 2024/25

REPORT BY: PROTECTING PEOPLE COMMITTEE INDEPENDENT CHAIRS

REPORT NO: 350-2025

1.0 PURPOSE OF REPORT

To present to the City Governance Committee the annual report published by the Protecting People Committees for the period 2024/25.

2.0 RECOMMENDATIONS

It is recommended that the City Governance Committee:

- 2.1 Note the content of the annual report for the Dundee Protecting People Committees (attached as appendix 1).
- 2.2 Note the progress made in developing an effective partnership response to the needs of at-risk children and adults during 2024/25 (section 4.2).
- 2.4 Note the challenges and priority areas for action identified across the annual reports for focus during 2025/26 and beyond (section 4.3).

3.0 FINANCIAL IMPLICATIONS

- 3.1 None.

4.0 MAIN TEXT

4.1 Background

- 4.1.1 All agencies, professional bodies and services that deliver child and / or adult services or otherwise work with members of the public have a responsibility to recognise and actively consider potential risks to the safety and wellbeing of the people they come into contact with. Dundee City Council therefore has a vital role to play in local arrangements, both at an operational and strategic level, in relation to child protection, adult support and protection, violence against women, alcohol and drugs, and suicide prevention.
- 4.1.2 During 2024/25 the Alcohol and Drug Partnership, Adults at Risk Committee and Children at Risk Committee had overall strategic responsibility for the continuous improvement of protecting people policy and practice in the local area. These partnerships consist of representatives from a range of backgrounds including the police, health services, local authority, health and social care, prison service, fire and rescue service, community planning and the third sector.
- 4.1.3 Requirements relating to the production and publication of annual reports vary, having been set out in legislation and national guidance for each specific group. Current arrangements can be summarised as follows:
 - Dundee Alcohol and Drug Partnership (ADP) – no requirement to publish an annual report, although an annual return is made to the Scottish Government (on a template set by them), however the Partnership in consultation with Dundee Chief Officers Group agreed a public facing annual report should be published.
 - Dundee Children at Risk Committee (CARC) – no requirement to publish an annual report, however most Committees across Scotland which incorporate responsibilities in relation to child protection do so, including Dundee.

- Dundee Adults at Risk Committee (AARC) – Section 46 of the Adult Support and Protection (Scotland) Act 2007 requires the Independent Convenor to prepare a Biennial Report outlining the activities of the Adult Protection Committee (which is now incorporated within the overall AARC) and progress made in protecting adults at-risk of harm. Please note that 2024/25 is not a biennial reporting year.

National guidance also sets out the requirement for each MAPPA Strategic Oversight Group to publish an annual report by a specified deadline every year. However, given the Tayside wide remit of the MAPPA Strategic Oversight Group a separate report continues to be produced and published by them aligned to the deadline set nationally by the Scottish Government.

During 2024/25, the Community Justice Partnership also became part of the multi-agency protecting people governance arrangements overseen by the Dundee Chief Officer Group. For 2024/25 a separate report is also continuing to be produced for the Community Justice Partnership to meet their statutory reporting requirements but officers will explore how this can be incorporated within the integrated protecting people report in future years.

The reports for MAPPA and the Community Justice Partnership will be submitted to Committee early in 2026.

- 4.1.4 This is the third year that the ADP, CARC and AARC have published a single integrated report rather than individual committee reports. This integrated report focused on multi-agency activity led by the committees, further detail regarding developments in individual services will be included within their own annual performance reports (for example, the Chief Social Work Officer Annual Report and Dundee Integration Joint Board Annual Report). The production of a single report has supported the best use of available resources and has been well received by both partner agencies and the public. Taking onboard feedback from 2023/24, the structure of the report has been further updated this year to focus on a single, accessible summary report suitable for both organisational stakeholders and members of the public.
- 4.1.5 Following endorsement from the Chief Officers Group the Protecting People Annual Report 2024/2025 was published on 03 November 2025.

4.2 Areas of Progress

- 4.2.1 During 2024/25 noteworthy progress has been made in improving services and supports in a range of areas that are relevant across all the Protecting People Committees. This includes:
- Through a restructuring of the multi-agency committees, including the establishment of new Children at Risk and Adult at Risk Committees responsible for suicide prevention and violence against women alongside child and adult protection, joint working has improved, and stronger linkages are being made across the workforce, services and strategic and governance structures.
 - Protecting People branding has been refreshed and a website, with landing page was re-launched at the beginning of 2025/26.
 - The focus on suicide prevention activity has been significantly enhanced, including through the appointment of a full-time Suicide Prevention Co-ordinator and publication of a two-year delivery plan, Creating Hope Together in Dundee.
 - The new Dundee and Angus Joint Learning Review Guidance, that takes a multi-agency systems approach to learning and improvement, was implemented resulting in an increase in reviews undertaken and subsequent improvement activity.
- 4.2.2 With individual committee remits there have also been some significant positive developments throughout the year, including:

Alcohol and Drug Partnership

- There has been continued progress with the implementation of the Medication Assisted Treatment (MAT) Standards. The most recent benchmarking report confirms that improvements to service provision in Dundee have been achieved, with Dundee scoring green for all standards (please note MAT 10 was not included in the most recent national benchmarking report).
- The Dundee Alcohol Pathway was reviewed with improvements made to ensure easier and quicker access to services and supports. Work is continuing to support the delivery of Alcohol Brief Interventions and related staff learning and development opportunities.
- An A&E pathway was developed to respond to near-fatal overdoses and increase the distribution of Naloxone. This has resulted in increased engagement with people who historically have not benefitted from specialist substance use services.

Adults at Risk Committee

- A multi-agency adult support and protection case file audit and staff survey evidenced improvements in the completion and quality of chronologies and risk assessments for adults at risk of harm.
- Considerable progress has been made in the redesign of pathways for responding to adults at risk of harm. Work has been led by operational staff to establish a multi-agency safeguarding hub and Team Around the Adult / Lead Professional model to better meet the needs of vulnerable adults who do not meet thresholds for statutory intervention.
- The Adult Support and Protection Learning Framework has been launched, Tayside Multi-agency Protocol for Honour-based Abuse has been published, and an e-learning module on chronologies developed in partnership with Perth & Kinross has received national recognition.

Children at Risk Committee

- A multi-agency audit focused on the quality of assessments and risk management was completed, the findings of which were very positive. Services continue to focus on the quality of assessments, chronologies and plans.
- The 16 Days of Action Against Gender-Based Violence included work to gather the views of primary school pupils on gender roles, norms and prevention of gender-based violence. This work is now informing the development of Dundee's Violence Against Women and Girls Prevention Framework.
- The Bairns Hoose Model Pathfinder celebrated their first year of work, including key successes in relation to improved co-ordination of forensic medical examination for children and the delivery of a wider range of multi-agency training.

4.3 Challenges and Future Priorities

- 4.3.1 All of the Protecting People Committees have experienced and responded to a challenging landscape over the last reporting year. There continues to be a need to carefully prioritise available resources against key priorities to accelerate continued improvements in services. This has been a particular challenge during 2024/25 as partners have supported significant changes to the strategic and governance structure whilst also continuing to progress improvement work.

A significant increase in the volume of referrals for learning reviews, associated with the implementation of revised national guidance that changed the threshold for referral, has also presented resource challenges across all partner agencies; work is ongoing to amend local guidance and arrangements to ensure a proportionate approach to reviews and that capacity is prioritised to support improvement activity.

Legislative and policy changes have also been a feature during 2024/25, with implications for workforce communication and learning and development. Achieving a communications strategy that reaches all parts of the workforce in an accessible way and supports their engagement with improvement activity continues to be a challenge due to the scale and diversity of workforce roles / needs. As part of the new committee structure a dedicated Communications Sub-group is proactively addressing these ongoing challenges.

4.3.2 Moving into 2024/25 the Protecting People Committees are now working to deliver priorities set out within a recently agreed Strategic Plan and supporting delivery plans for committee sub-groups and for the ADP. However, some shared areas of focus include:

- Developing a clear public communication strategy and engagement plan across all protecting people areas.
- Continuing to strengthen learning opportunities and communication across the protecting people workforce.
- Development of a single integrated protecting people dataset to minimise duplication and improves effectiveness of data and intelligence analysis.
- Finalising the protecting people quality assurance framework.
- Co-ordinating meaningful, trauma-informed and consistent engagement and participation across all protecting people areas.
- Continuing to implement the ADP Prevention Framework and develop the Violence Against Women and Girls Prevention Framework (supported by funding from the Scottish Government).

5.0 POLICY IMPLICATIONS

5.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services, or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

6.0 CONSULTATIONS

6.1 Members of the Chief Officers (Public Protection) Strategic Group, members of the Dundee Children at Risk Committee, members of the Dundee Adults at Risk Committee, Dundee City Council Leadership Team, the Chief Social Work Officer and the Clerk have been consulted in the preparation of this report.

7.0 BACKGROUND PAPERS

None

ELAINE TORRANCE
INDEPENDENT CONVENOR, DUNDEE ADULTS AT RISK
COMMITTEE / INDEPENDENT CHAIR, DUNDEE CHILDREN AT
RISK COMMITTEE

DATE: 04 NOVEMBER 2025

PAMELA DUDEK

INDEPENDENT CHAIR, DUNDEE ALCOHOL AND DRUG
PARTNERSHIP

ANN HAMILTON
INDEPENDENT ADVISOR, VIOLENCE AGAINST WOMEN



Protecting People Annual Report 2024-2025

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Foreword

As the Committee/Partnership Chairs and Independent Violence Against Women and Girls Advisor, we are pleased to share this year's Protecting People Annual Report, covering the period from April 2024 to March 2025. Building on the success of last year's summary report, we've continued with a single, integrated publication that brings together key updates, achievements, challenges, and future priorities from across our partnerships.

2024-25 marked a significant transition in how we work together to keep people safe. We introduced a new strategic governance model, moving away from the traditional 'care group' structure to a more integrated, cross-cutting approach. This led to the creation of two new Committees: The Adults at Risk Committee and The Children at Risk Committee. These Committees now bring together work previously carried out by the Adult Support and Protection Committee, Child Protection Committee, Violence Against Women Partnership, and Suicide Prevention portfolio, reflecting our commitment to addressing risk and vulnerability in a more joined-up way.

While the Community Justice Partnership and Alcohol and Drugs Partnership remain separate for now, plans are in place to integrate them into the new structure by 2026-27. This shift is already strengthening multi-agency collaboration and helping us respond more holistically to the needs of individuals and families. One example is the newly established Learning Review Group, which is beginning to explore whole-family dynamics through both adult and child learning reviews.

Alongside this structural change, a wide range of work has been delivered. A major milestone was the launch of the Dundee and Angus Joint Learning Review Guidance, which promotes a multi-agency approach to learning and improvement. We also strengthened our focus on suicide prevention with the appointment of a dedicated Suicide Prevention Co-ordinator and the publication of a two-year delivery plan. Work was also undertaken to improve transparency and accessibility by refreshing our branding and developing a new Protecting People website. The landing page will go live at the start of 2025-26, with the full site launching later in the year.

In addition to the cross-cutting work, each of the new Committees has made significant progress in their individual areas:

Adults at Risk Committee (AARC):

- Led a joint multi-agency audit and staff survey focused on Adult Support and Protection.
- Made strong progress in redesigning the system to support a new Adults at Risk Pathway, aimed at improving how we respond to concerns.
- Developed and launched a new Adult Support and Protection Learning Framework to support training and development across the multi-agency workforce.
- Introduced the Tayside Harmful Practice Protocol, providing clearer guidance for professionals working with adults at risk.

Children at Risk Committee (CARC):

- Delivered a multi-agency audit to strengthen child protection practices.
- Continued to develop the Young People's Intelligence Briefing, helping partners better understand emerging risks and trends.
- Created and agreed a new policy approach for supporting 16-17 year olds, ensuring a more streamlined and consistent response to concerns.
- Completed Year One of the Bairns Hoose Pathfinder Programme, which included coordinating forensic medicals for children and delivering a wide range of training for staff across agencies.

Alcohol and Drugs Partnership (ADP):

- Ongoing implementation of the Medication Assisted Treatment (MAT) Standards is helping ensure consistent, high-quality care across services.
- The Dundee Alcohol Pathway was reviewed and is currently undergoing a process of being updated to make it easier and quicker for people to access the help they need.
- Services have expanded to better support individuals affected by cocaine and other non-opioid drug use, improving access and outcomes.
- A Tayside Near-Fatal Overdose Review Group was created, which brings partners together to learn from serious incidents and improve prevention.
- The Multi-Agency Consultation Hub (MACH) continued to provide rapid joint assessments and referrals for people experiencing both substance use and mental health challenges.

While there have been many achievements this year, the Protecting People Committees recognise that challenges remain. The strategic transition to a new governance structure, while essential, made it difficult at times to maintain momentum in ongoing work. The introduction of the new Learning Review Guidance also led to a rise in multi-agency reviews, which placed pressure on meeting statutory timelines and delivering associated improvements.

Embedding lived experience meaningfully at a strategic level continues to be a challenge. The Committees are committed to ensuring that this work is trauma-informed, inclusive, and avoids tokenism. Limited public sector funding and workforce pressures often mean that resources are directed toward crisis response, this hinders the Committee's ability to focus on preventative work.

To address these challenges, the Committees will focus on several key areas in 2025–26:

- **Listening to lived experience:** Strengthening how we gather the voices of people we support, ensuring their insights shape strategic decisions, service delivery, and operational processes.
- **Prevention-focused approaches:** Increasing efforts to understand and prevent harm before it occurs, rather than responding only in times of crisis.
- **Improved communication:** Enhancing how information is shared across the workforce to support the success of the strategic transition and ensure all partners are informed and engaged.
- **Driving improvement:** Continuing to implement recommendations from the most recent Adult Support and Protection Inspection, Child Protection Inspection, and Learning Reviews, with a focus on better outcomes for children, young people, adults, and families in Dundee.

We would like to extend our sincere thanks to all members of the Protecting People Committees for their ongoing dedication, and to the many staff across agencies who work tirelessly every day to protect and support the people of Dundee.



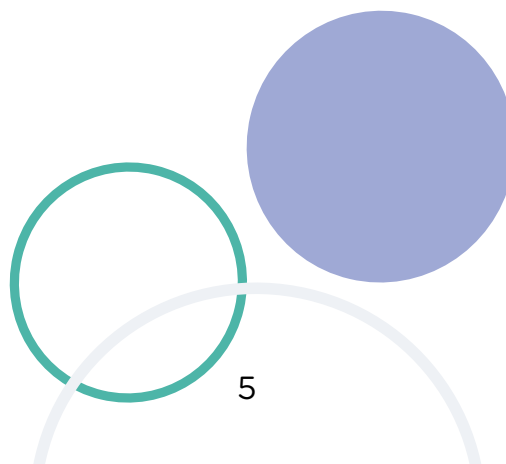
Elaine Torrance
Chair of Adults at Risk
Committee and Children at
Risk Committee.



Pamela Dudek
Chair of Alcohol and Drugs
Partnership.



Ann Hamilton
Independent Violence
Against Women and Girls
Advisor.



1. Dundee Public Protection at a Glance



Dundee is Scotland's fourth largest city and has the second highest population density.



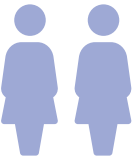
Dundee's population is estimated to be 153,000.



Dundee is the **fifth most deprived local authority in Scotland**, with 36.6% of its population living in the 20% most deprived areas.



There are 73,280 males in Dundee.
Life expectancy: 74.6 years.



There are 77,110 females in Dundee.
Life expectancy: 79.2 years.



Estimated that 43% of children aged 0-15 live within the **20% most deprived data zones**.



71% of those aged 16-64 years in Dundee City are **economically active**.



In the 2020-24 period, **Dundee had the second highest rate of suicide** of all Scottish Local Authority areas at 19.9 per 100,000.



528 sexual crimes recorded by Police Scotland. A rate of 35 per 100,000 population.



Dundee City has the largest number of domestic abuse incidents recorded by police per 10,000 population of all local authorities at 183 incidents compared to the Scotland average of 116 incidents.



92 child protection orders issued in 2024-25.



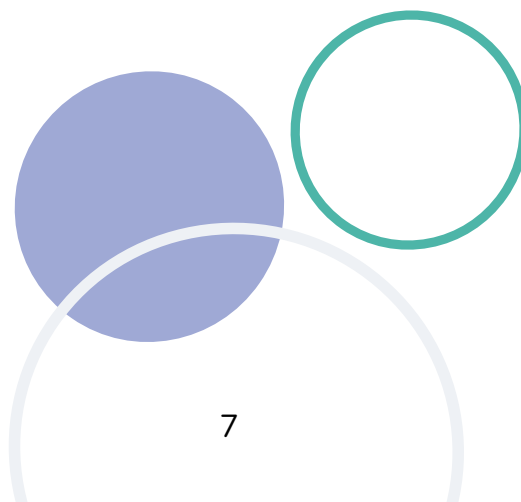
42 drug-related death notifications in 2024, a decrease of 2.3% from 2023.



35 alcohol-specific deaths in 2024, a decrease of 2.8% from 2023.



Dundee City has the highest imprisonment rate of local authorities in 2024 at 3.7 per 1,000 population.



2. Protecting People in Dundee

“Dundee’s future lies with its people. They deserve the best this city can give them. We will provide the protection they need, when they need it, to keep them safe from harm.”

2.1 What is Protecting People?

Protecting People (PP) is the term that we use in Dundee to describe the work undertaken to protect children, young people and adults from abuse, neglect and harm.

Our approach to PP includes:

- Child protection
- Adult support and protection
- Addressing violence against women and girls
- Addressing alcohol and drug use
- Suicide prevention
- The management of sexual and violent offenders (Multi-Agency Public Protection Arrangements)

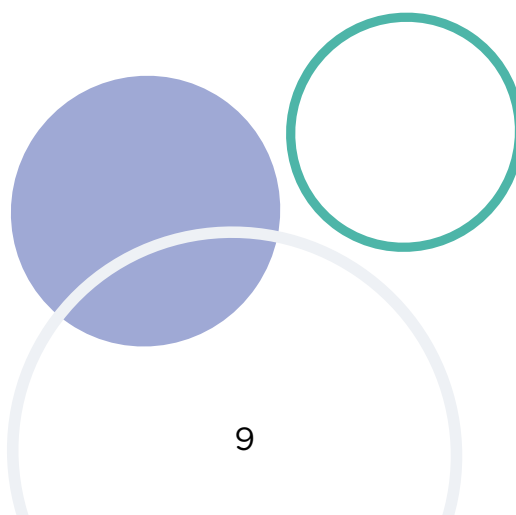
Protecting People is a shared responsibility. Across Dundee, agencies from the public sector (including Dundee City Council, NHS Tayside, Police Scotland, and the Scottish Fire and Rescue Service), the third sector (voluntary and community organisations), and the independent sector (social care providers) are working together to:

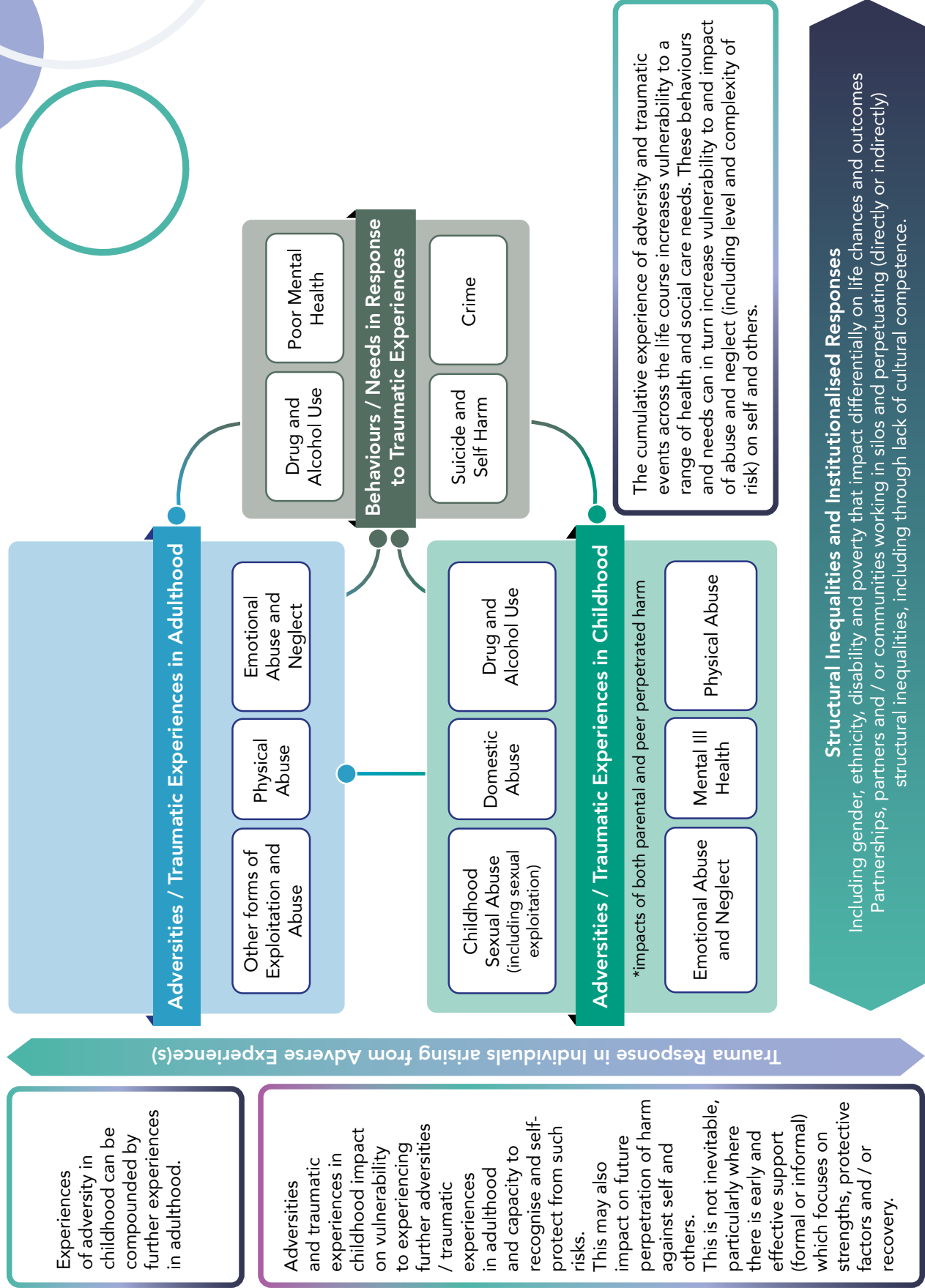
- Improve arrangements for identifying and supporting people who have been harmed or are at risk of harm. This includes involving people who have experiences harm and who have been supported through public protection services in helping to improve services and supports;
- Raise awareness of PP issues across communities, including signs that people might be at risk of harm and how to report this;
- Work together with communities to help prevent harm happening in the first place;
- Support the workforce who deliver PP service, including through learning and development activities; and
- Monitor data and other types of information about the impact services and supports have on vulnerable people so that services can learn from what is good and work together to change to things that need to be improved.

This collaborative approach extends beyond Dundee. Services also work together across Tayside and with national organisations to share learning, resources, and best practice, helping to build a stronger, more connected system of support for vulnerable people.

2.2 Why Have a Protecting People Approach?

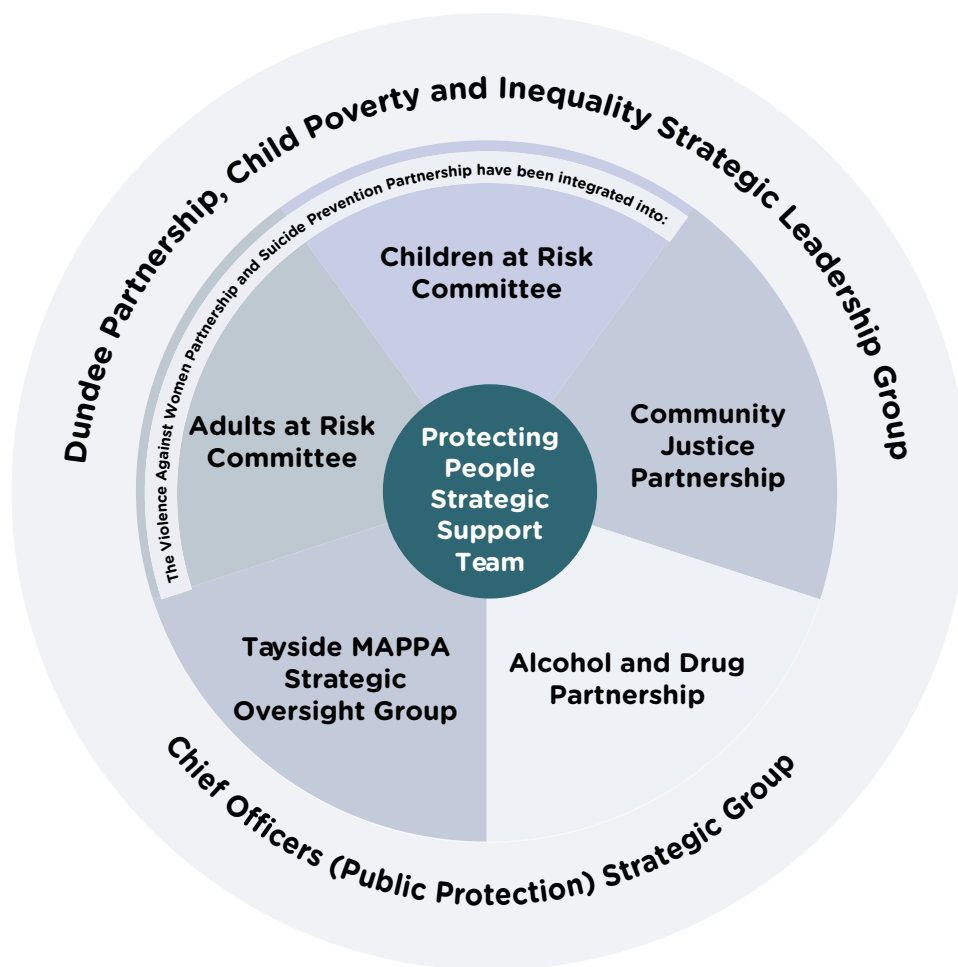
In Dundee an integrated PP approach informs all our work to protect people at risk of harm. We know that many people in Dundee have multiple, complex and changing needs which typically arise from experiences of abuse, neglect and trauma through their lives. The graphic below describes the interconnected nature of PP work and how experiences of trauma can impact life experiences and outcomes.





2.3 What are the Protecting People Committees?

The Protecting People Committees are where different organisations come together to lead, plan, and review how Dundee protects people from harm. These groups have a strategic focus, meaning they look at the bigger picture, identifying key themes, sharing good practice, and spotting gaps where improvements are needed. While the Committees work across agencies to strengthen collaboration, each individual service also has its own internal systems to make sure their responses to protecting people are effective and of high quality. Together, the Committees help ensure that Dundee’s approach to protecting people is joined-up, informed by evidence, and focused on making a real difference in people’s lives.



Each of the Committees is led by an Independent Chair. This is someone who does not work for local agencies and has significant knowledge, skills and experience in specific areas of PP, as well as experience of leading services, change and improvement. They have an important role in supporting and leading improvement work, as well as challenging local agencies where they think improvement is needed.

The wider membership of the Committees is made up of representatives from the public, third and independent sectors. As well as senior officers, some Committees have community representatives who have experience of harm and PP services (either themselves or as a family member). The Committees are supported by a number of sub-groups that cover all protection people areas of harm where staff who work in protection services contribute to developing good practice and planning and implementing improvements.

2.4 Protecting People Transition

In 2024–2025, Protecting People underwent a major transformation, adopting a new strategic governance structure. This shift moved away from the traditional ‘care group’ approach and introduced a more integrated structure designed to better reflect the complex and interconnected nature of risk and harm.

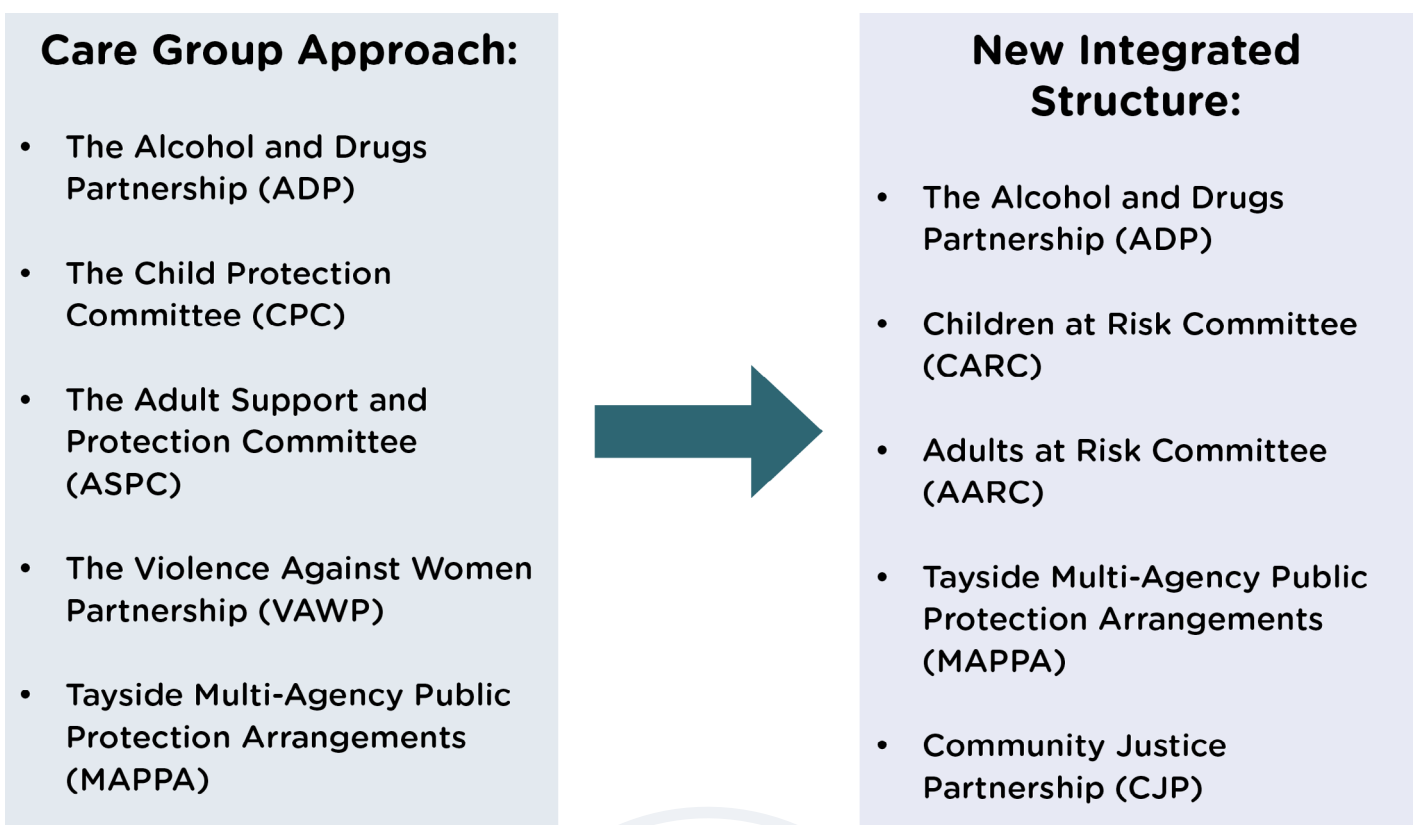
As part of this change, two new Committees were established:

- Adults at Risk Committee (AARC)
- Children at Risk Committee (CARC)

These Committees now bring together work previously carried out by the Adult Support and Protection Committee, Child Protection Committee, Violence Against Women Partnership (VAWP), and Suicide Prevention portfolio. By integrating these areas, the Committees are better positioned to respond to risk and vulnerability in a more joined-up and holistic way.

The Community Justice Partnership has also come under the Protecting People Chief Officers Group (COG) governance structure. While both the Community Justice and Alcohol and Drugs Partnerships remain separate for now, plans are in place to integrate them into the new committee structure by 2026–27.

To ensure that Violence Against Women and Girls (VAWG) remains a key focus, the former Independent Chair of the VAWP now acts as an Independent VAWG Advisor to both AARC and CARC. This role helps ensure that VAWG issues are fully embedded within the work of both Committees and remain central to strategic planning and improvement.



Key reasons for adopting this new structure were to:

Reduce duplication: with one set of cross-cutting sub-groups being created, this allows the same conversation to happen once and in a collective manner, ultimately increasing capacity of those attending meetings.

Reduce siloed working: by adopting even more of a cross-cutting approach, this allows a more holistic approach to addressing the needs of vulnerable people and families.

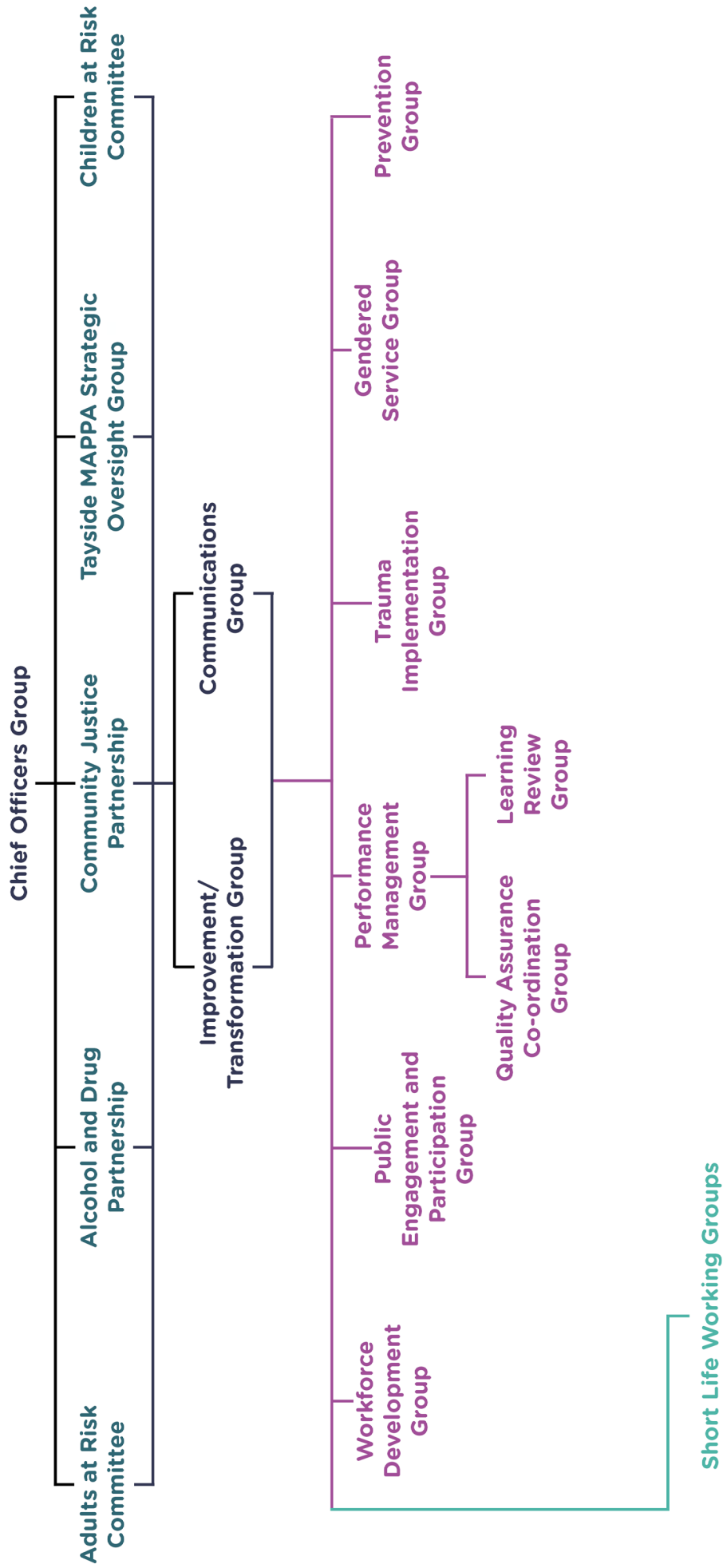
Adopt learning from the pandemic: during COVID-19, partners worked closely to understand cross-cutting risks and became more effective at recognising that people we are striving to support did not fit into one category and their complex lives and needs were the focus of more than one public protection area/Committee. By adopting this learning, we want to continue to develop working in a more holistic, whole family, trauma-informed way within the new structure.

Effectively use resources: The public protection workforce are operating in pressurised times in terms of the resources available and the Protecting People structure needs to be as effective and efficient as possible to meet local demands. Having a large complex structure meant many members of the workforce were attending multiple meetings, adding pressure and straining capacity, ultimately impacting partners ability to participate fully. Through the transition the aim is for the new structure to be more effective.

Beneath the Committee Structure is a set of sub-groups, each sub-group will cover child protection, adult protection, violence against women and girls, community justice, suicide prevention and alcohol and drugs. The sub-groups are as follows:

- Improvement and Transformation
- Workforce Development
- Public Engagement and Participation
- Performance Management (data and information)
- Quality Assurance Co-Ordination
- Learning Reviews
- Trauma Informed Practice Implementation
- Gendered Services
- Prevention
- Communications

There will also be an option to establish short-life working groups as necessary for specific, time-limited pieces of work.



3. Key Achievements in 2024-25

3.1 Cross-Cutting

Through the Transition, joint working was improved and stronger linkages between the workforce, services and Committees have been made.

Work was undertaken to refresh the Protecting People branding and website, with the landing page to be launched at the beginning of 2025-26.

Enhanced focus on suicide prevention through recruitment of a full-time Suicide Prevention Co-ordinator and publication of a two-year delivery plan, **Creating Hope Together in Dundee**.

The new Dundee and Angus Joint Learning Review Guidance that takes a multi-agency systems approach to learning and improvement was implemented, resulting in an increase in referrals and learning and improvement activity.

3.2 Adults at Risk Committee (AARC)

A Joint Multi-Agency Adult Support and Protection Audit and staff survey was carried out, highlighting the improvement of quality and quantity of chronologies and risk assessments.

Significant progress has been made on the ongoing system redesign for the development and implementation of a new Adults at Risk Pathway. The work is establishing a Multi-Agency Safeguarding Hub, Team Around the Adult/Lead Professional Model, and redesign of the **Health & Social Care Partnership Front Door Model**. This is to ensure the needs of vulnerable adults, who do not meet statutory intervention thresholds, are addressed.

The new **Adult Support and Protection Code of Practice** was integrated into the Health and Social Care Partnership Adult Support and Protection Procedures, Council Officer Training, and second worker training, drawing attention to the impact of trauma.

Developed and launched a new Adult Support and Protection Learning Framework for the multi-agency workforce.

Launched the new **Tayside Multi-Agency Protocol for Honour-Based Abuse**.

Developed and launched an e-learning on chronologies in partnership with Perth and Kinross to support practice improvement, which is now available nationally due to recognition of its quality.

Developed a new Adult Support and Protection dataset that encompass the new national minimum dataset developed in the previous year.

Large Scale Investigation procedures were updated to align with national guidance and launched.

3.3 Children at Risk Committee (CARC)

The CARC carried out a multi-agency audit in October 2024, which focussed on investigating whether appropriate assessments were being carried out and if risks are managed effectively. Findings were generally positive with areas for improvement being identified and shared with the workforce.

There has been ongoing development of the Young People's Intelligence Briefing that is informed work to address the online harms faced by young people.

During **16 Days of Action Against Gender-Based Violence** the views of primary school pupils were gathered regarding gender roles, norms and views on how to address GBV. This work highlighted the importance of primary prevention and will link to future work of the development of the Dundee VAWG Prevention Framework in 2025-26.

The CARC produced and agreed a new policy approach to 16/17-year-olds in order to ensure a streamlined response to concerns for this age group.

Following the successful regional multi-agency joint bid in 2023 to Scottish Government to become a Tayside Pathfinder site for the **Bairns Hoose Model** of Child Protection, 2024-25 marked Year one of the three-year pathfinder programme. Key successes including coordination of forensic medicals for children by the Child Protection team and a range of training for multi-agency staff.

A review of partnership services for young people in Dundee has been ongoing including work to develop a co-located multi-disciplinary team. It is anticipated that work will be completed, and teams will occupy the intended premise from autumn 2025. The model will also involve collaboration with The Corner for sexual health services and Employability colleagues to promote positive destinations for vulnerable young people on leaving school.

3.4 Alcohol and Drug Partnership (ADP)

The implementation of the **Medication Assisted Treatment (MAT) Standards** continued to be a key aspect of work undertaken by the Dundee ADP, with **significant improvements** to all Standards being made.

The Dundee Alcohol Pathway was reviewed with improvements introduced to ensure easier and quicker access to services. There will be a continued focus on the provision of **Alcohol Brief Interventions** and upskilling a range of frontline staff to deliver these interventions to the general public.

Acknowledging the increase in non-opioid substance use, cocaine brief interventions were introduced to support faster identification of individual needs.

At a Tayside level, a Tayside Near-Fatal Overdose Review Group was established, which brings partners together to learn from serious incidents and improve prevention.

An A&E pathway was developed to respond to near-fatal overdoses and increase provision of naloxone. This resulted in engagement with individuals who historically did not benefit from the specialist substance use services.

The Multi-Agency Consolation Hub (MACH) continued to provide quick joint assessment and referral for those affected by substance use and mental health. MACH also benefits from multi-agency co-ordination, led by the Dundee Drug and Alcohol Recovery Service (DDARS) Psychology Service.

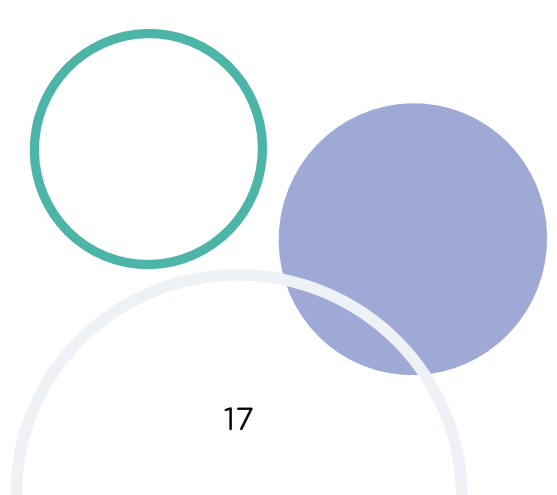
The provision of Independent Advocators has been increased to support individuals navigate and access services, specifically those accessing MAT. Independent Advocators also support people in their recovery journey and participation in lived experience work.

The Dundee Recovery Network continued to develop, with more individuals with lived and living experience inputting to local community recovery projects. This included input from family members and carers.

Work with Scottish Families has continued to implement the Whole Family Approach in Dundee. Frontline staff received training to ensure they are skilled at supporting family members and to provide them opportunities to remain engaged in their loved ones recovery journeys.

The ADP has extended its focus on prevention work by supporting the Planet Youth project, the Hot Chocolate Trust's action learning research and funding the employment of a Graduate Trainee to assist with the implementation of the **Dundee Alcohol and Drug Prevention Framework**.

Collaborated with partners through the Year of Kindness role to build kindness, compassion and hope and address stigma experienced by people who use substances. The Year officially began in January 2025 and will involve community events and shifting a focus towards improving staff wellbeing within the sector.



4. Key Priorities for 2025-26

4.1 Cross-Cutting Priorities

Embed Protecting People principles and values throughout all work conducted and across the multi-agency workforce.

Develop a clear public communication strategy and engagement plan across all Protecting People areas.

Continue to strengthen learning opportunities and communication across the Protecting People workforce.

Development of one collective Protecting People dataset to minimise duplication and improve effectiveness of data and intelligence to identify key priorities.

Finalise the development of a new Protecting People Quality Assurance Framework.

Fully implement the Dundee and Angus Learning Review Protocol including the tools and templates for the process.

Co-ordinate meaningful, trauma-informed and ongoing engagement and participation across all Protecting People areas.

Continue work on leadership and culture including targeted leadership sessions, and launch the Trauma Informed Leadership Pledge.

Continue to implement the Dundee Alcohol and Drug Prevention Framework and support the development of the Violence Against Women and Girls Evidenced-based Prevention Framework.

Development of the new interim Protecting People Integrated Strategy and Delivery Plan and continued development of the new strategic structure.

4.2 Adults at Risk Committee (AARC)

Finalise the development and implementation of the new multi-agency pathway for adults at risk of harm including co-location for screening.

Apply the gendered lens to understand and address the barriers men experience in accessing support in relation to their mental health.

Continue to develop sustainable and collaborative approach to VAW funding locally and nationally.

Whilst significant progress has been made, the Committee will continue to implement the recommendations and subsequent action plan from the Ms. L Significant Case Review and the Joint ASP Multi-agency Inspection.

4.3 Children at Risk Committee (CARC)

Finalise new arrangements for a co-located multi-disciplinary team, Care and Risk Management (CARM) procedure and implementation of Contextual Safeguarding.

Increase local work focussing on young people's experiences of gender-based violence (GBV) within their own intimate relationships and the online harm associated with these issues.

Improved support to children and young people with mental health or emotional wellbeing issues.

Preliminary Learning Review activity highlights that neglect will be a key focus.

4.4 Alcohol and Drug Partnership (ADP)

Complete and implement recommendations from the Female Drug Death Deep Dive, and the Workforce Wellbeing Survey.

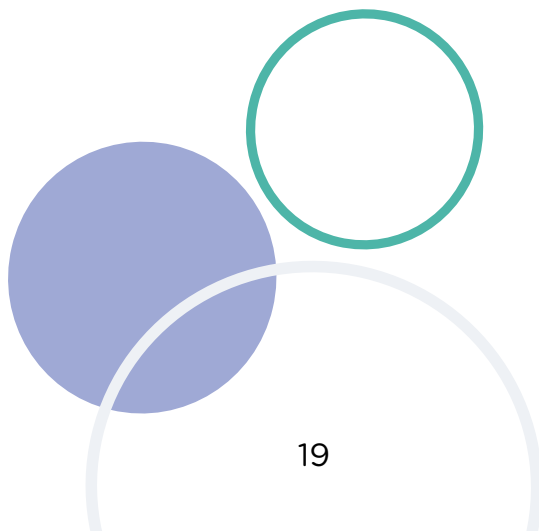
Continue the progress that has been made with the implementation of all Medication Assisted Treatment (MAT) Standards with a specific focus on implementing the **Human Rights Approach**, and expand the MAT Standards include alcohol and all drugs.

Following the launch of the Charter of Rights in 2024, work to progress this locally will be a key feature for 2025/26.

The ADP will undertake a review of all its funding allocation, initially to develop a better view of the current gaps, areas of duplication and highlight opportunities for more partnership working.

Embed the residential and community rehabilitation pathway within mainstream service provision.

Complete the Safer Consumption Facility feasibility study (with Dundee University) and identify an approach for Dundee.



5. Key Challenges in 2024-25

5.1 Key Challenges for the Adults and Children at Risk Committees

Keeping essential work progressing across the Protecting People Committees whilst facilitating the strategic transition, which will continue into 2025-26, has stretched both operational and strategic multi-agency workforce.

Volume of Learning Reviews. Since the launch of the new Dundee and Angus Learning Review Guidance in April 2024, there has been a notable increase in the volume of referrals for Multi-Agency Public Protection Learning Reviews. This surge reflects a positive shift in the culture of learning and continuous improvement across services. However, it has also presented challenges in meeting statutory timescales and progressing associated improvement work. Recognising the importance of maintaining both quality and timeliness, consideration will be given in 2025-26 to increasing capacity and resources to support the delivery of the learning review process. This will help ensure that learning is translated into meaningful action while meeting statutory expectations.

Improving communication and engagement. One size does not fit all, different audiences have different needs and preferences. Within the resources available it can be challenging to meet everyone's need and there often must be a process of prioritisation. Committees will continue to be proactive in their approach to communications and work collaboratively to maintain enhanced communication and design capacity required.

Continue embedding lived experience. The commitment to embedding lived experience within the Protecting People Committees remains a priority. It is important that we continue to embed and expand this work but ensure that all lived experience work is trauma-informed, meaningful, and not tokenistic. Looking ahead, the establishment of the Engagement and Participation Group under the new strategic structure offers a renewed opportunity to further embed lived experience meaningfully.

Increasing focus on prevention and early intervention. This continues to be a challenge, impacted by the restrained public sector financial landscape that strains capacity within frontline and strategic teams. It does not always allow for a prevention focus to be at the forefront, with resources being assigned to crisis-driven responses.

The public sector continues to face very challenging financial landscape. This has impacted a range of Protecting People services and supports, particularly those delivered in the third sector. Protecting People Committees have focused on taking positive action to mitigate risks associated with financial challenges where possible. This includes the continued work of the ADP Commissioning Group and the VAWP Funding Group.

Changing landscape in legislation across the children and adult sector. Examples of this are the Children (Scotland) Care and Justice (Act) 2024, The UNCRC being enshrined in Scottish legislation, and the updated Code of Practice within the Adult Support and Protection Act (2007).

5.2 Alcohol and Drug Partnership (ADP)

The uncertain financial future remains a key challenge for the ADP. All the funding linked to the delivery of the National Mission is guaranteed only until end March 2026. With the 2026 Scottish Elections, it is also unclear what will be the key national priorities going forward and what funding will be provided to support priorities. The Dundee ADP also have several key provisions that are only supported by short-term funding.

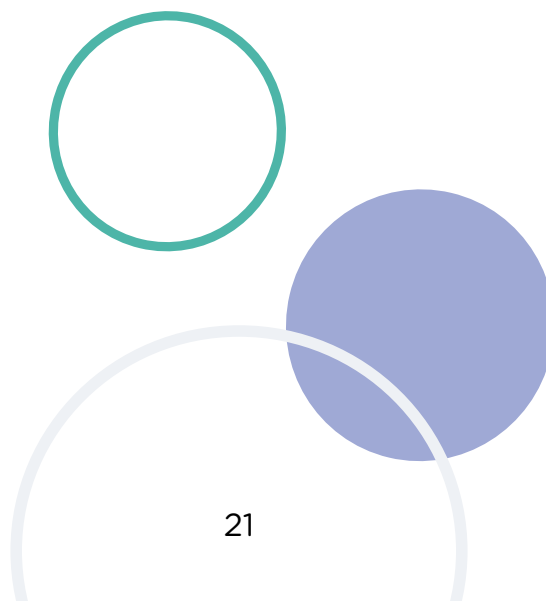
The prevalence and changing nature of drug use, and new substances being used, require frontline services to change and adjust on a regular basis. Staff require support, training, and upskilling to help them provide effective treatment and care.

Maintaining the delivery of all ten MAT Standards for the longer term will remain a challenge. This includes the future requirement to extend the implementation of the MAT Standards to all drugs and alcohol.

Implementation of the Human Rights Approach will continue to be a key priority and the challenge will be to ensure frontline staff receive training and support to implement this approach.

There is more progress to be made on the implementation of the Family Focused Approach, both in terms of providing support to families affected, and including them in their loved ones recovery journeys. This will require additional planning and resources.

Shifting resources to prevention and early intervention is a challenge for the ADP, as the impact of substance use and the need for quick effective interventions to support individuals remains high.



6. Data

6.1 Adults at Risk Committee (AARC)

4,480 ASP referrals in the year 2024-25 (an increase of 7% on the previous year) of which 90% were screened out before any inquiry or investigation.



The reasons why ASP referrals are screened out are:

41%

Existing Support Services have been Informed of the Concern and Will Manage Appropriately

22%

Other Outcomes/Decisions

8%

Adult Support and Protection Procedures Already in Place

There were 68 ASP investigations (33% decrease) and 58 Initial Case Conferences were held (35% decrease).

The highest type of harm recorded for inquiries (with and without investigation) was Welfare Concerns for adults under 65 years of age (32%) and Financial Harm (12%).



Age groups most at risk



40-64 years is split roughly equally for men and women.

The highest types of harm recorded for ASP investigations are:

34% Welfare Concerns

9% Financial Harm

9% Psychological/ Emotional Harm



25-39 has four times as many women as men (72% to 27%).

62% women

37% men

66% of harm occurs in the adult's own home.




There are twice as many women than men (62% to 37%) that have an inquiry (with or without investigation).

6.2 Children at Risk Committee (CARC)

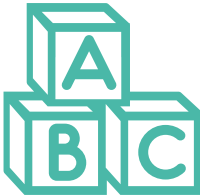
107 Children and Young People subjected to Initial and Pre-birth Child Protection meetings.

92 Children and young people **added** to Child Protection Register in 2024-25.

 **2,729** Police CP Concern reports.

478 Initial Referral Discussions

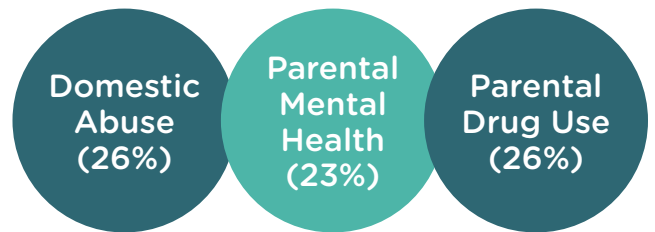
106 Children **removed** from the Child Protection Register in 2024-25.

 At the end of 2024-25, there were **50 children and young** on the Child Protection Register.

Age of children and young people at registration:




Most frequently recorded concerns:



6.3 Alcohol and Drug Partnership (ADP)

Dundee had **42 drug-related deaths** in 2024 reported by the National Records of Scotland. Decrease of 9% from previous year.

Dundee had the **second highest drug death rate** of all council areas at 35.6 per 100,000. (Scotland 22.5 per 100,000)

 The **highest age group for drug deaths was that of ages 45 to 54**, and the majority of deaths were that of men (64%).

Drugs implicated in cause of death:

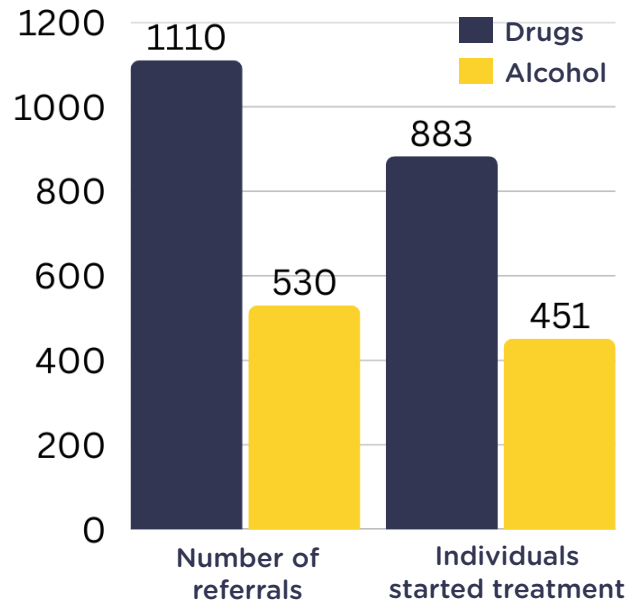


There were **36 alcohol specific deaths in 2023**, this is the fourth highest figure in Scotland when adjusted for age.



There were **251 Non-fatal overdoses (NFODs)** in 2024.

1,430 Naloxone kits were distributed.




There were **576 drug-related hospital stays for 405 patients in 2023-24** and early data suggest this is likely to be similar in 2024/25.



There were **1,062 alcohol-related hospital stays for 669 patients in 2023-24** and early data suggests this is likely to increase for 2024/25.

6.4 Violence Against Women and Girls (VAWG)

 **2,658**
 Referrals to VAWG specialist services (9% increase from 2023/24).

Ages of those referred to VAWG Specialist Services:



Referrals were predominantly made to services by Police.



528 Sexual crimes recorded by Police Scotland.

A rate of 35 per 100k population.

2,766 domestic abuse incidents recorded by Police.

Increase of 6% on last year.



68%

68% of children added to the Child Protection Register in 2024-25 had domestic abuse recorded as one of the contributing factors.

115 refuge requests to Dundee Women's Aid.

All services consistently reported **high levels of complexity within the cases referred**, particularly in relation to **mental health, housing issues, substance use and financial difficulties.**

331 MARAC referrals.

6.5 Suicide Prevention

Based on the most recent National Records of Scotland report, in 2024:



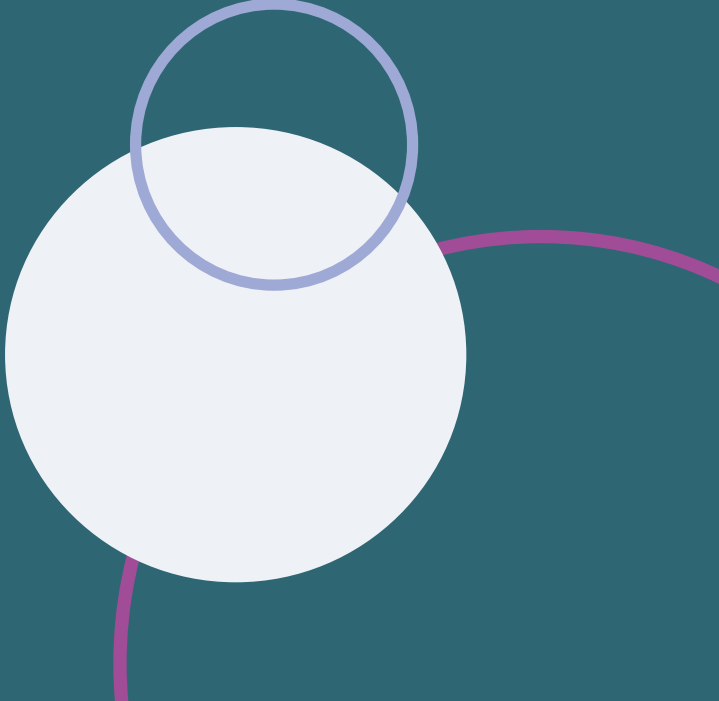
25 people died by probable suicide in Dundee (a decrease of five from 2023). Of these deaths, **76% were male.**



The rate of probable suicide mortality was **over twice as common** in the **most deprived SIMD** quintile compared to the least deprived.



The most common age groups of death by probable suicide were **25-44** and **45-64 years.**



ITEM No ...4.....

REPORT TO: CITY GOVERNANCE COMMITTEE – 1 DECEMBER 2025

REPORT ON: CHIEF EXECUTIVE'S SERVICE PLAN 2023 - 2028 -
MID-YEAR PROGRESS REPORT FOR 2025-26

REPORT BY: CHIEF EXECUTIVE

REPORT NO: 328-2025

1.0 PURPOSE OF REPORT

To update elected members on progress made so far during financial year 2025/26 (Year 3) of the Chief Executive's Service Plan for 2023 - 2028.

2.0 RECOMMENDATIONS

It is recommended that Committee notes the progress summarised in section 5.0 and approves the attached detailed progress report.

3.0 FINANCIAL IMPLICATIONS

There are no direct financial implications arising from the agreement of this report.

4.0 BACKGROUND

- 4.1 In April 2025, elected members endorsed the Council's [Performance Management Framework 2025/28](#) (Article V of the minute of the meeting of City Governance Committee on 21 April 2025, Report No: 66-2021, refers). This framework was reviewed following an update of the Accounts Commission's Statutory Performance Information Direction in 2024 and sets out the arrangements for performance management across the Council, including a requirement for services to report an update of progress on their respective Service Plans every 6-months. It also sets out how local priorities for managers and employees at individual, team, service, and directorate level are identified and connected through the strategic objectives of the Council and the Dundee Partnership to the National Performance Framework and to the UN Sustainable Development Goals.
- 4.2 Following the Council adopting the City Plan 2022-2032 (Article II of Policy & Resources Committee on 26 September 2022, Report No: 255-2022, refers) and agreeing its new Council Plan for 2022-2027 on 5 December 2022 (Article II of Policy & Resources Committee on that date, Report No: 280-2022, refers) individual service plans require to be updated and aligned. This Service Plan reflects the next tier of the performance management framework and addresses the key outcomes in the City Plan 2022-32 and Council Plan 2022-27, setting out where the Chief Executive's Service will contribute to improving outcomes.
- 4.3 The Chief Executive's Service Plan (Article IV of the City Governance Committee on 21 August 2023 (Report No: [119-2023](#)) sets out the strategic direction for the service for the next five years (financial years 2023/24 to 2027/28) and outlines the key priorities and improvements which the service intends to deliver, based on the financial and employee resources which are expected to be available. It also sets out in more detail the service's key responsibilities and identifies the key actions to be undertaken to meet these priorities, as well as the performance indicators which will be used to monitor progress.

5.0 PROGRESS SUMMARY

- 5.1 The report attached as Appendix 1 is the third mid-year progress report in relation to this Service Plan. It covers performance for Quarters 1 and 2 of financial year 2025/26 and provides an update on the performance indicators and actions under each priority theme in the plan and,

where required, identifies further improvement activity to achieve the targets and actions in the plan. The Service Plan Improvement Action Plan can be found on page 10.

- 5.2 62.5% indicators in the plan have improved or maintained since the last progress report and 76.5% are on target or within the target threshold.
- 5.3 The service is making good progress towards the key priorities during this third year of the plan. Of the 37 actions, 16 actions are now completed, and all 21 remaining actions are on schedule for completion by their due date. 6 actions are due to be completed by the end of March 2026.
- 5.4 The Communication strategy and action plan has previously been reported separately, it is now being subsumed into the Chief Executive's Service Plan progress reporting in line with the Design a Modern Council approach. Progress on the action plan for 2024/25, and new actions for 2025/26 are outlined in Appendix 2 of this report. This appendix also includes infographics outlining key measures of our success.

6.0 POLICY IMPLICATIONS

- 6.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services, or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

7.0 CONSULTATIONS

- 7.1 The Council Leadership Team has been consulted in the preparation of this report.

8.0 BACKGROUND PAPERS

None.

GREGORY COLGAN
CHIEF EXECUTIVE

10 NOVEMBER 2025

ANDREA CALDER
HEAD OF CHIEF EXECUTIVE'S SERVICE

Chief Executive's Service

Service Plan 2023-2028



Dundee City Council
www.dundeecc.gov.uk CHANGING FOR THE FUTURE

Chief Executive's Service

Performance Report December 2025

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Executive Summary by Head of Chief Executive's Service

Some of the key achievements and developments by the service over the past six months include:

Strategic Planning

The third [annual progress report](#) was prepared on the **Council Plan** setting out progress during 2024/25 and approved by the City Governance Committee in June. The third six monthly progress report for 2025/26 (Year 4) was approved by Committee in November (Item 4).

The third annual report on the City Plan was also prepared and agreed by the Dundee Partnership Management Group in September. This has subsequently been reported to the City Governance Committee in October.

Regular progress reporting on the City Plan, Council Plan and Service Plans to monitor progress towards our targets is well established.

Best Value

As part of their thematic review of the council's approach to transformation, Audit Scotland made three recommendations for improvement.

Recommendation 1: The council should ensure that its plans for transformation are sufficiently ambitious to respond to the scale of the financial challenges it faces. It should clearly set out the extent to which savings from transformation will help address its projected budget funding gap.

Recommendation 2: To provide assurance on how it is changing to sustain services in the future, the council should report in more detail to elected members and the public on its plans to transform and how it is progressing with its full transformation programme.

Recommendation 3: The council should continue to roll out its new approach to benefits tracking and monitoring, ensuring that benefits trackers are compiled at the start of new transformation projects. This will help inform officers and members, from an early stage, of the extent to which transformation projects are delivering their intended benefits

In response to the recommendations, work is ongoing to identify those savings that are attributable to transformation efforts. In respect of benefits management, current trackers are being reviewed to ensure that they include both financial and non-financial benefits. Theme delivery board leads are currently reviewing the projects under their respective themes and once complete, any new projects will be required to produce a benefits tracker and report on progress thereafter as part of regular reporting arrangements to the Transformation Board. The Project Management Office is currently drafting guidance to help support officers in identifying the potential benefits associated with any particular project. This is an important aspect of the Transformation Programme management to ensure that both financial and non-financial benefits are identified and subsequently realised.

Fairness

Dundee's sixth annual [Fairness and Child Poverty Action Report](#) was prepared and considered by the Dundee Partnership, Fairness Leadership Panel, and City Governance Committee. The report reflects the work done across the Dundee Partnership to tackle poverty and its impact on our communities in delivery of our strategic priority to reduce inequalities in income attainment and health. The report provided updates on progress and developments for 2024/2025 reflecting the extensive ways that Dundee is attempting to reduce child and household poverty despite the pressures resulting from the ongoing cost-of-living crisis.

The Local Fairness Initiatives (LFI) in Linlathen and Stobswell West have been shortlisted for a Cosla Excellence Award for 'Tackling Inequalities and Improving Health & Wellbeing'. An evaluation of the work done in Linlathen has identified a range of critical success factors. The learning from this has been shared with local, strategic and national partners and is influencing the new Fairer Future Partnerships

across Scotland. Work in Stobswell is proceeding at greater pace with additional advice, employability, childcare and housing support being offered to priority families through outreach work and the co-located drop-in sessions.

The third Fairness Leadership Panel annual conference, held on 5 November 2025, focused on the future priorities for the Fairness Action Plan. Workshops discussed inputs from local third sector leaders from projects supporting families with lone parents, carers and people with disabilities and black and minority ethnic families. A presentation from the Joseph Rowntree Foundation set out approaches that would help to reach the national child poverty targets for 2030, and participants proposed actions that will help to 'meet the moment' in Dundee. A full report on the outcome of the conference will be shared with participants, partners and the public before the end of 2025.

The Fairness Leadership Panel presented its annual update to the conference and will use the final report to identify its areas for attention in the coming year. Members of the Panel presented their recommendations to several strategic groups and are monitoring implementation of them through their inclusion in the most recent Fairness Action Plan. The Panel also opened Challenge Poverty Week in October by holding its first photo exhibition in the Central Library. Photos taken by Panel members shared stories and emotions emerging from photographs taken in Dundee to reflect aspects and experiences of poverty in the city.

Despite the economic pressures affecting local companies, the number of Living Wage companies and organisations in Dundee has been stable. The Dundee Living Wage Action Group aims to build from the profile achieved during the Living Wage week activities held in November including a business breakfast to raise awareness and a Living Wage walking football tournament.

Reducing stigma associated with poverty continues to be a priority. The provision of free period products in a sensitive way resulted in 422,704 individual period products being distributed in the 2024/25 financial year. Materials and guidance were distributed to schools to ensure pupils are aware of availability during school time and in communities during weekends and holidays. During Challenge Poverty Week in October, a public consultation exercise was promoted through social media to seek views on the awareness and use of this service.

The service continues to coordinate and administer the Community Regeneration Fund, working closely with Neighbourhood Services' Community Empowerment Team (CET). Up to the end of September 2025, a total of £279,454 has been allocated, 61.8% of the annual budget of £452,226. A new approach to community-based decisions on capital funding has been agreed. The Neighbourhood Capital Fund have now allocated the £308,000 budget for 2024 & 2025 across the six wards with significant community regeneration areas.

Equalities

City Governance Committee approved the Mainstreaming Equalities Report for 2025-2029 on 21 April 2025, which sets out the new equality outcomes and action for the next four years. The new outcomes and actions reflect the strategic priorities of Dundee City Council while considering the Scottish Government's approach, Equality and Human Rights Commission (EHRC) guidance, and feedback from key equality groups representing those with protected characteristics from across the city. In addition to supporting the development of these equality outcomes and actions, the Council continues to ensure that the voices of those with protected characteristics inform the delivery of the agreed outcomes and actions to in turn inform relevant policy development and service delivery.

Following the UK Supreme Court ruling on 16 April 2025 in *For Women Scotland Ltd v The Scottish Minister* that the definition of sex in the Equality Act 2010 (the Act) should be interpreted as 'biological' sex only. This judgment requires employers and service providers to review policies, practices and communications to ensure they reflect this legal position. It also highlights the importance of sensitive and inclusive implementation, avoiding unlawful discrimination and maintaining a culture of dignity and respect for all citizens and employees. A short life working group has been established to identify any potential implications for the Council. As a result, Council policies, guidance and facilities are currently being reviewed whilst awaiting further updates and statutory guidance from the EHRC to ensure and changes are undertaken in an appropriate, proportionate and sensitive way, The working group is engaged with Trade Union colleagues and the Corporate Equality, Diversity & Inclusion Steering Group.

Communications

Effective communications are essential to achieving the ambitions set out in the Council Plan and ensuring that people in Dundee and beyond have a clear understanding and appreciation of the council's operations, priorities and challenges.

The Council's corporate communication strategy sets out how the council communicates externally and internally, delivering on a vision to provide modern, multi-channel communications that support the strategic priorities of the council and its partners.

The strategy is being delivered against the backdrop of an ever-changing communications landscape. Social media and digital channels are redefining the way people consume information, interact with large organisations and share opinions.

Whilst the strategy seeks to embrace and harness new channels for communicating, with a shift to "digital by default" communications in keeping with the Council's Digital Strategy, listening to feedback from communities means this must be supplemented by continuing to use inclusive channels to reach those who don't have ready digital access or skills.

It also supports the statutory processes and partnerships required to deliver resilience communications like those required during severe weather.

Progress on the Communications Strategy and action plan for 2024/25, and new actions for 2025/26 are outlined in Appendix 2 of this report. This appendix also includes infographics outlining key measures of our success.

Key achievements over the past 12 months include:

- Continued rapid growth of our social media channels, increasing the audiences with which we communicate and engage. Across all social media channels, the Council now has over 95,500 followers, a growth of 9.8% over the past year.
- Continuing to inform the public and media about key Council information through the publication of news updates. Some 183 news releases were issued in the past year, and around 400 media inquiries responded to.
- Successfully executing a year-long programme of City Marketing activity. Put Dundee on Your Map and the wider One City, Many Discoveries exceeded expectations over the year, delivering over 111,000 engagements while shifting its focus to video-based content.
- Harnessing the "extranet" - OneDundee on The Move – which was launched as a tool to engage with employees working from home or without easy access to Council IT systems. The number of page views increased by 153% last year to 534,762.
- Developing the use of WhatsApp as a communications channel to support the public in emergency situations such as adverse weather. This additional channel was used in the response to storms Eowyn and Floris.
- Supporting the delivery of the annual budget consultation, which attracted its highest number of responses. Some 3,571 citizens and organisations took part, sharing feedback on priorities and potential impacts of savings options.
- Supporting the opening of the Drumgeith Community Campus, the delivery of significant Housing Revenue Account capital works and the roll-out of the Council's VS/VER scheme.
- Executing significant marketing campaigns including Recycling – Let's Sort It, Dundee's Christmas offering and the relaunch of the Dundee Gift Card.
- Collaborating with neighbouring authorities on communications which impact on citizens across the wider region, including the Tay Cities Region Deal and a range of other partnerships.
- Continuing to raise awareness of the support available during the Cost-of-Living Crisis. The multi-channel campaign has led to a dedicated web resource being accessed 21,149 times in 12 months.

Activity over the coming year will focus on continued signposting of support for citizens struggling due to the cost-of-living crisis, preparation for the inclusive communications equality duty and supporting the budget setting process and Scottish Parliament election.

Other key goals for 2026 include growing the use of WhatsApp as a channel for public communications, supporting the ongoing implementation of inclusive communications in line with proposed legislation and launching an updated version of the OneDundee intranet.

National Entitlement Card

As of the end of September, there were 88,543 Dundonians with an NEC card, an increase of more than 3,500 people from 85,036 at the end of March 2025, an increase of 3.8%. This is largely driven by the take up of concessionary travel for both over 60s and under 22s. A key target is maximising access for free bus travel for all under 22s, and as of the end of September this stood at 24,822, which is 82% of the Dundee 5-21 population. 5–21-year-old uptake for free bus travel has continued to grow steadily over the six months, and the number of young people with an NEC for free bus travel has increased by over 500 cardholders since the end of March 2025.

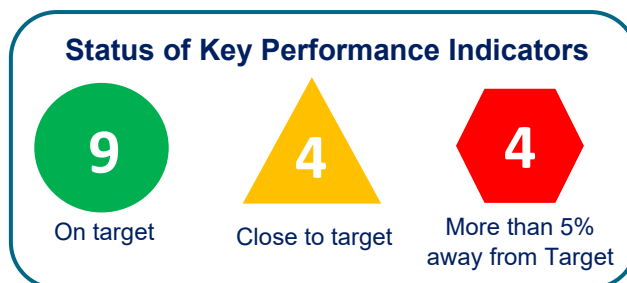
Systems are now in place to increase and maintain the take up of NEC by Under 22s for free bus travel. Most applications are done through the Scotland wide Get Your NEC; however, Parents Portal also supports applications and Customer Services offer face to face appointments or telephone support for applications if online options aren't available. Schools also offer support to apply but issue a strong message to use Get Your NEC and Parents Portal.

Chief Executive's Service Overview

Service Priorities are aligned to the Council Plan priorities below:



Key Performance Indicators Summary



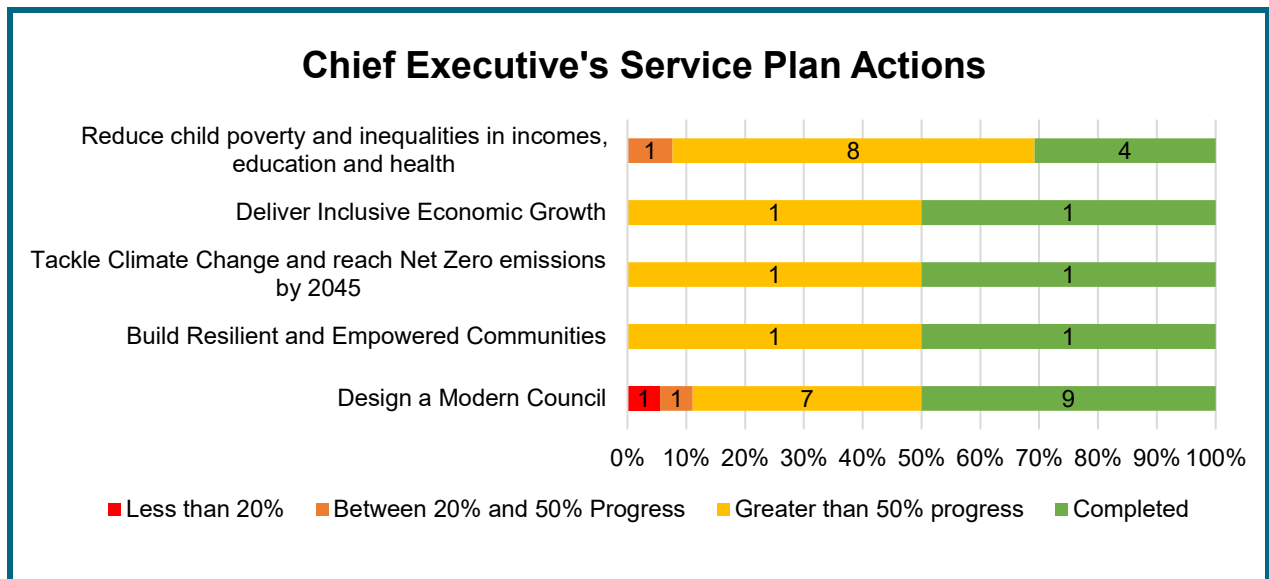
Trend of Performance Indicators

10 Improved and Maintained ↑
6 Deteriorated ↓
 (1 has no previous data)

Most Improved PI's ↑	Most Deteriorating PI's ↓
Number of engagements on Facebook per month (91.5% improvement)	Average number of workdays lost through sickness absence per FTE employee in CEXs (128% deterioration)
Percentage of under 22s saying they did more as a result of the free bus scheme (9.8% improvement)	% of stage 1 complaints responded to within target or agreed extended timetable (Council) (24% deterioration)
% City Plan Indicators Improving or maintained (9% improvement)	Level of engagement with city marketing campaigns (14% deterioration)

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What Action Will We Take?



Actions Completed since the 2024/25 Annual Report:

- Promote the use of the new Local Government Benchmarking Framework dashboard across the Council.

Actions Due for Completion by 31st March 2026

- Review arrangements for reporting of financial savings linked to the transformation programme to more clearly show how the programme supports the budget setting.
- The reporting of the Transformation Programme within the Council Plan will be enhanced to provide more detail for elected members and the public. This will include publicly available information on the website.
- Continue to roll out the new approach to benefits tracking to ensure benefits trackers are compiled at the start of new transformation projects.
- Expand the use of Power BI across the Council.
- Conduct an annual impact survey in Dundee on increased inclusion of children and young people and their families from free travel (per year up to 2026).
- Implement identified areas for improvement of the Integrated Impact Assessment procedures and carry out regular reviews of IIAs.










Areas for Improvement 2025/26 and Improvement Action






Action/PI to be Improved	Indicator Performance and Planned Improvement Activity	Target Completion Date	Lead Officer
% of employees who have had 'Quality Conversation' reviews	<p>This indicator was previously highlighted in the Annual Progress Report.</p> <p>At end of Sept the Quality Conversations % is sitting at 66.7%. This is within 5% of target, so is close to being on track to meet the end of year target. IT issues with Scottish Cities Alliance colleagues are being resolved. Full year figure will be available in annual report for 2025/26.</p>	Completed (Improvement Shown)	Head of Chief Executive's Services
Percentage of Council Plan Performance Indicators that are maintained or improving	<p>This indicator was previously highlighted in the Annual Progress Report.</p> <p>The proportion of Council Plan indicators improving or maintaining has increased from 68% to 73%. An improvement action plan is included in each Council Plan report to highlight indicators which should be prioritised as areas for improvement based on trend data and performance against target. This improvement action plan also outlines what work will be done to improve performance in this area.</p>	Completed (Improvement Shown)	Head of Chief Executive's Services
% of stage 1 complaints responded to within target or agreed extended timetable (Council)	<p>This indicator was previously highlighted in the Annual Progress Report.</p> <p>The Council responded to 62.1% of complaints within the target or agreed extended timetable (64.15% in Q1 and 60.1% in Q2). This is a deterioration from last year's performance; the figure for 2024/25 was 81.8%. The Council has a very ambitious target to respond to 100% complaints within agreed timescales.</p> <p>Planned Improvement Activity Includes:</p> <p>Performance in relation to this indicator will continue to be monitored monthly by the Council Leadership Team to improve performance. Handling Complaints training will continue to be offered. Quality checks being undertaken to provide feedback and tips to improve to individual services. The new system and reporting is under review also.</p>	March 31 st 2026	Senior Policy Officer

<p>Average number of workdays lost through sickness absence per FTE employee in CEXs</p>	<p>This indicator is a new area for improvement highlighted in this report</p> <p>This indicator shows the most deterioration out of all the indicators in the Service Plan, increasing by 128% from the 2024/25 annual figure. This has also increased for 3 consecutive quarters, from 1.57 in Q3 2024/25 to 5.7 in Q2 2025/26. Further action is required to bring this indicator back within the target of 3 days.</p> <p>Planned Improvement Activity Includes:</p> <p>Given the size of the service any long-term absence can have a significant impact on this indicator. The service management team monitor absence monthly and ensure that the appropriate supports are in place for employees, particularly with longer term health issues.</p>	<p>March 31st 2026</p>	<p>Head of Chief Executive's Services</p>
<p>Level of engagement with city marketing campaigns</p>	<p>This indicator is a new area for improvement highlighted in this report</p> <p>Good progress was made on this indicator in 2024/25 with the successful delivery of Put Dundee on Your Map and the wider One City, Many Discoveries, exceeding expectations by delivering over 111,000 engagements while shifting its focus to video-based content. However, the mid-year figure for 2025/26 shows a decrease on the mid-year figure from 2024/25 and is currently below target, reflecting that paid marketing activity is no longer being undertaken.</p> <p>Planned Improvement Activity Includes:</p> <p>Review the KPI for City Marketing in light of budget changes and the city's new tourism strategy. Work with stakeholders to grow organic engagement on the One City, Many Discoveries channels.</p>	<p>March 31st 2026</p>	<p>Communications Service Manager</p>

Detailed Updates by Priority Theme

The Service Plan 2023-2028 has targets for each year of the plan's lifespan. The current target for comparison is Year 3, but Year 4 is also shown as this is now the target officers are working towards meeting by 31/3/27. Each section provides an update on each Performance Indicator and Action contained in the Service Plan. The following legends are used in the tables.

PERFORMANCE INDICATOR (PI) STATUS EXPLAINED					
Status		Short Term Trend		Long Term Trend	
	More than 5% away from Target		Improving		Improving
	Close to target		Maintaining		Maintaining
	On Target		Deteriorating		Deteriorating





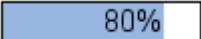
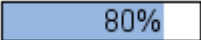
ACTION PROGRESS SYMBOLS AND STAGES EXPLAINED	
	Unassigned – The action has been created on the system but hasn't yet had the required relevant officers assigned to it.
	In Progress - Action is progressing well, on target for achieving all objections set in the initiation phase. 20% - The task is defined and agreed by relevant partners/stakeholders 40% - Necessary tasks planned and implementation in early stages 60% - Number of key actions achieved/agreed process or improvement taking shape or in place or underway 80% - Majority of actions achieved/ agreed process or improvement largely in place or underway leading to confidence that the overall action will be delivered in full/on schedule
	Overdue – Action is still progressing; however, it has exceeded its due date.
	Completed - Action has been completed, and objectives have been achieved.
	Alternative Action Identified - When the action will not reach its due date or/and an alternative has been initiated



Reduce Child Poverty and Inequalities in Incomes, Health, and Education

	PI Short Name	2023/24	2024/25	Current Value	Current Target	Yr 4 Target	Short Term Trend	Long Term Trend	Latest Update
		Value	Value						
	% of the Fairness and Child Poverty Plan indicators improving	40%	72%	72% (mid-year 2025/26)	46.5%	49%			The performance indicators contained in the Fairness and Child Poverty Action Plan are all reported on an annual basis. The current position is 18 of the 25 (72%) indicators have improved compared to the previous year.
	Percentage of 5-21 population provided with an NEC Card	75%	81%	82% (mid-year 2025/26)	86%	91%			24,822 NEC cards for free bus travel for under 22s were issued up to the end of September 2025 out of a total 5-21 population of 30,127 (NRS Mid-year Population Estimate). This indicator counts only age travel products. The number of non-age products in this group (e.g., for 5–21-year-olds who have a disability) totals 632. So, including non-age products in the calculation would mean a total of 25,454 under 22s with free bus travel, which is 84.5%.
	Percentage of under 22s saying they did more as result of the free bus scheme (attended educational, healthy, or social activity)	57% (2022/23)	82% (2023/24)	90% (2024/25)	63%	66%			From a survey of 1392 responses, 1307 had an NEC for free bus travel. Out of these 1307 young people, 90% said they were able to do more because of it. This indicator will be updated when the next annual impact survey is distributed to young people next year.
	% of equality outcome actions completed (2025/29)	n/a	n/a	0% (mid-year 2025/26)	0%	0%			Following publication of the new Equality Outcomes and Actions earlier this year, Services are currently progressing these. There is a statutory reporting requirement on progress due in 2027.

	Action Title	Progress Bar	Due Date	Latest Update
	Take up of National Entitlement – Under 22s NEC card for free bus travel		30-Apr-2026	Completed September 2024.

	Action Title	Progress Bar	Due Date	Latest Update
✔	Improve access for BSL users in Dundee	 100%	30-Sep-2024	Completed July 2024.
✔	Deliver on the Mainstreaming Equalities Report Action Plan (2021/25)	 100%	31-Mar-2025	Completed February 2025
✔	Publish Community Profiles using Census and related data	 100%	31-Oct-2024	Completed June 2025
▶	Implement identified areas for improvement of the Integrated Impact Assessment procedures and carry out regular reviews of IIAs	 95%	01-Apr-2026	IIA Guidance and toolkit have been updated following recent changes in legislative requirements regarding the United Nations Convention on Rights of a Child.
▶	Conduct an annual impact survey in Dundee on increased inclusion of children and young people and their families from free travel (per year up to 2026)	 80%	01-Apr-2026	<p>Results of the 2025 survey were shared internally, and the Council released a news article to outline the key findings which included:</p> <ul style="list-style-type: none"> • 90% of young people with a free bus pass said they can do more as a result of the scheme. This includes a range of activities and benefits which are enriching their lives with more opportunities and experiences: • Young people are using free bus travel to spend more time with friends and family, including enjoying different activities. • Free bus travel is also supporting young people with their leisure and learning activities, such as school, college and university travel, library visits, employment and volunteering opportunities, and travel to events and cultural attractions across Scotland. • Lots of young people are also participating more in a range of indoor and outdoor physical activities. <p>Respondents said their free bus pass supports them and their families by allowing them to travel without relying on parents or carers for transport, particularly for travelling to activities after school, or if their parents don't drive. This independent travel also builds confidence and life skills, with two-thirds of young people saying that having a free bus pass has supported and developed their independence.</p> <p>The next and final survey will be undertaken in 2026.</p>
▶	Monitor progress of the Local Fairness Initiatives to ensure support and engagement across	 80%	31-Mar-2027	An evaluation of the Linlathen Local Fairness Initiative (LFI) has been completed and presented to the Child Poverty & Inequalities Strategic Leadership Group. It includes key lessons which are being shared with local and national partners. The Stobswell

	Action Title	Progress Bar	Due Date	Latest Update
	council services, as well as implementing changes to services or policies, as appropriate			LFI is fully into implementation phase with the drop-in established, employability support deployed and action progressing on support to people in private tenancies. The Dundee LFI work has been shortlisted in the Cosla Excellence Awards 2025 in the category of Tackling Inequalities and Improving Health.
▶	Jointly facilitate the work of the Dundee Fairness Leadership Panel and convene annual Fairness Leadership Panel conferences.	80%	31-Mar-2028	The Panel's recommendations were incorporated into the Dundee Fairness Plan agreed in June 2025. Panel members recently completed a photo project reflecting experiences and perspectives on poverty and this is to be exhibited in Central Library as a feature of Challenge Poverty Week from 6 October 2025. Members provided feedback on the current Fairness Report and contributed to the planning for the Dundee Fairness annual conference which was held on 5 November. The conference theme was <i>Where Next for Fairness in Dundee?</i>
▶	Produce annual Fairness and Child Poverty progress reports	80%	31-Mar-2028	The Annual Local Child Poverty and Fairness Action Plan Progress Report was approved by City Governance Committee on 23 June 2025.
▶	Develop a longer-term emergency food approach based on the Cash First principles to promote financial security to prevent ongoing food need	70%	31-Mar-2027	<p>As part of the Cash First approach, 19 trained dedicated Community Guiders are actively providing dedicated signposting and referral support for those presenting with mental health & substance use challenges, as well as issues surrounding financial security and money worries. These Guiders are based in community food projects, third sector organisations and community initiatives focusing on income maximisation and associated wraparound support.</p> <p>In addition, from January to September 2025, 16 new community-based guiders were trained to provide support in Ninewells, Dundee International Women's Centre, Dundee Carers Centre and Craigowl Church.</p>
▶	Promote uptake of free period products	70%	31-Mar-2028	Public consultation took place during Challenge Poverty Week in October; this will be promoted on social media. The consultation sought views on awareness and use of service.
▶	Maintain the Provision of Period Products	60%	31-Mar-2028	167,989 products were distributed between April-September 2025/26. Orders remain steady amongst premises and via home delivery option.
▶	Deliver on the Mainstreaming Equalities Report Action Plan (2025/29)	20%	31-Mar-2029	The 2025-2029 Equality Mainstreaming Report and Action Plan was agreed by the City Governance Committee on 21 April 2025. All agreed actions are being progressed by assigned to services.



Delivering Inclusive Growth and Community Wealth Building

	PI Short Name	2023/24	2024/25	Current Value	Current Target	Yr 4 Target	Short Term Trend	Long Term Trend	Latest Update
		Value	Value						
	Level of engagement with city marketing campaigns	31,839 (mid-year)	55,726 (mid-year)	47,698 (mid-year)	50,948 (mid-year)	53,495 (mid-year)	↓	↑	Reflects organic One City, Many Discoveries engagement on Meta platforms only as the Put Dundee on Your Map paid campaign is no longer running. The focus of the Put Dundee on your Map campaign, under the tagline Do It All in Dundee, has switched to video views which are not recorded as "engagements" under this measure. Video views for the quarter reached 2.1million. Year on year engagement for this is up 25%.
	Number of living wage accredited employers based or headquartered in Dundee	128	126	121 (mid-year 2025/26)	131	136	↓	↓	There are 121 Living Wage accredited employers based in Dundee, collectively employing 43,371 workers and uplifting 2,067 to the real Living Wage. This is up from 120 accredited employers at the end of Q1 of 2025/26 but down from 126 at the end of 2024/25 financial year.

	Action Title	Progress Bar	Due Date	Latest Update
	Implement the next phase of the city marketing campaign	<div style="width: 100%; background-color: #4F81BD; color: white; text-align: center;">100%</div>	31-Mar-2024	Completed March 2024.
	Increase the impact of the Dundee Living Wage City campaign	<div style="width: 85%; background-color: #4F81BD; color: white; text-align: center;">85%</div>	31-Mar-2028	The service is working closely with the Living Wage Action Group and finalising the new Living Wage Action Plan. Planning is well underway for Living Wage Week in November, which will celebrate newly accredited employers and recognise those already committed to the Living Wage.



Tackle Climate Change and Reach Net Zero Emissions by 2045

	PI Short Name	2023/24	2024/25	Current Value	Current Target	Yr 4 Target	Short Term Trend	Long Term Trend	Latest Update
		Value	Value						
	Number of Citizens with NEC smartcard	82,449	85,036	88,543 (mid-year 2025/26)	93,070	97,723			The number of Dundee citizens with an NEC card has increased by over 3,500 in the past 6 months. This is a higher uptake than the whole 2024/25 year when uptake increased by approximately 2,500 citizens.

	Action Title	Progress Bar	Due Date	Latest Update
	Promote take up of free bus travel on the NEC for all eligible groups		01-Apr-2025	Completed April 2025.
	Work with partners to explore a digital NEC		31-Mar-2027	Discussions are ongoing and are driven by Transport Scotland. NEC supplier contracts have been extended to October 2027. In the two years preceding that date, NECPO will be working with stakeholders and partners to shape requirements for new contracts. This may include a digital version of the card.












Building Resilient and Empowered Communities


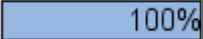






	Action Title	Progress Bar	Due Date	Latest Update
	Improve inclusivity in our corporate communications.		31-Mar-2024	Completed January 2024.
	Co-ordinate and administer the Community Regeneration Fund		31-Mar-2028	As at 30th September 2025, £279,454 of the CRF budget for this year has been allocated. This is 61.8% of the annual budget of £452,226 (now consisting of 100% Revenue funds).




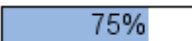



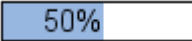
Designing a Modern Council and Transformation


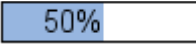

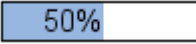

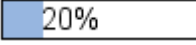

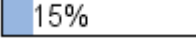
	PI Short Name	2023/24	2024/25	Current Value	Current Target	Yr 4 Target	Short Term Trend	Long Term Trend	Latest Update
		Value	Value						
	Average daily website page view numbers	16,843	16,258	16,662 (mid-year 2025/26)	15395	16,165			The average monthly figure in the first six months of 2025/26 is 16,662. This is an improvement on the average for 2024/25, and this indicator is exceeding its target.
	Number of engagements on Facebook per month	20,800	42,229	80,871 (mid-year 2025/26)	22,230	23,341			Average over the 6-month period between April and September 2025 was 80,871. This is a significant increase on 2024/25 annual figure. The average for the 6-month period in the second half of 2024/25 was 72,771, meaning the first 6 months of 2025/26 shows improvement from the last 6 months of 2024/25.
	Number of Social Media Followers	85,646	90,901	95,557 (mid-year 2025/26)	88200	92,160			The growth of the Council's social media audience continues, with an 8.5% increase in the last 12 months.
	Percentage of Council Plan Performance Indicators that are maintained and improving	77.3%	68.2%	73% (Mid-year 2025/26)	68%	69%			16 out of 22 indicators in the Council Plan have improved or maintained from the previous year.
	% City Plan indicators improving or maintained	63%	67%	73% (Mid-year 2025/26)	68%	69%			The City Plan annual progress report for 2024/25 outlines that 73% of indicators have improved or been maintained over the previous year.
	% of FOI requests where response sent to Information Governance within 10 days (CEXs)	95.0%	96.8%	96.6% (Mid-year 2024/25)	100%	100%			For the period April to September of 2025/26, Chief Executive's Service received 58 FOI requests: 56 requests were responded to within the internal target of 10 days. There has been a greater number of FOI requests than previously – the number of FOI requests in this 6-month period was almost as high as the 63 requests received in the entire 2024/25 year.
	% of stage 1 complaints responded to within target or agreed extended timescale (CEXs)	100%	100%	100% (Mid-year 2025/26)	100%	100%			There were no complaints for the service between April – September 2025.

	PI Short Name	2023/24	2024/25	Current Value	Current Target	Yr 4 Target	Short Term Trend	Long Term Trend	Latest Update
		Value	Value						
	% of stage 1 complaints responded to within target or agreed extended timescales (Council)	70.7%	81.8%	62.3% (Mid-year 2025/26)	100%	100%			Between 1 April and 30 September 2025, there were 379 Stage 1 complaints. 238 were closed on target or within the extended time frame - 62.3% in total.
	Average number of working days lost through sickness absence per FTE employee in CEXs	5.6	2.1	5.7 (Mid-year 2025/26)	3	3			This indicator has been increasing for 3 consecutive quarters, from 1.57 in Q3 2024/25 to 5.7 in Q2 2025/26.
	% of employees who have had 'Quality Conversation' reviews	66.7% (Jan - Sep 2023)	67.6% (Jan - Sep 2024)	66.7% (Jan - Sep 2025)	67.5%	100%			This indicator is monitored using the calendar year rather than the financial year meaning it will be at its highest at the end of December before starting again at the beginning of January 2026. At end of Sept 66.7% of employees had a QC.

	Action Title	Progress Bar	Due Date	Latest Update
	Complete review and implement changes to the structure and operation of the Dundee Partnership		31-Dec-2023	Completed December 2023.
	Embed the culture of regular performance reporting and use of Pentana across the Council		30-Jun-2025	Completed April 2024.
	Develop real time monitoring data e.g., active travel and city centre footfall		01-Apr-2024	Completed July 2024.
	Review our workforce data and ensure that succession planning arrangements to ensure that sufficient resources are in place to work on Council and our service priorities		31-Mar-2024	Completed October 2024.
	Provide training and quality assurance for the corporate complaints system.		31-Mar-2027	Completed April 2025.

	Action Title	Progress Bar	Due Date	Latest Update
✔	Publish a new About Dundee using the latest Census data and launch with census briefings and training	100%	31-Dec-2024	Completed April 2025
✔	Update and publish a new Performance Management Framework	100%	31-Oct-2024	Completed April 2025
✔	Ensure new software is developed and implemented to manage the complaint handling procedures and reporting requirements	100%	31-Mar-2024	Completed April 2025
✔	Promote the use of the new Local Government Benchmarking Framework dashboard across the Council	100%	31-Mar-2026	The LGBF dashboard is a well-used tool to monitor to Council's performance in relation to national indicators. The Statutory Performance Information Direction 2024 update has an emphasis on the need for Councils to use benchmarking as a means for driving continuous progress, and the LGBF dashboard is and will continue to be a useful tool in providing insight and evidence for this.
▶	Promote applications for national awards (in particular, the COSLA Excellence Awards and Scottish Public Service Awards)	90%	30-Jun-2028	<p>Teams across the council were supported to submit nominations for the COSLA Excellence awards 2025. Three projects have been shortlisted for the awards: with the winners being announced on 13th November. The three projects in the finals are:</p> <ul style="list-style-type: none"> • Local Fairness Initiative Tackling Inequalities and Improving Health & Wellbeing' category • The Family Empowerment initiative Strengthening Communities and Local Democracy category • Bell Street Green Transport Hub Just Transition to Net Zero' category. <p>The Scottish Public Services Awards 2025 closed for nominations at the end of September. Services were encouraged to submit nominations for these awards, including those projects which were unsuccessful in getting through to the final of the COSLA Excellence Awards.</p>
▶	Ensure service budgets are actively monitored and agreed savings delivered	75%	31-Mar-2028	Regular financial monitoring is undertaken with the service accountant and service management team. Variances investigated and remedial action taken as appropriate. Savings agreed are tracked until delivered.

	Action Title	Progress Bar	Due Date	Latest Update
	Continue to monitor financial impacts on the cultural organisations we support financially		31-Mar-2028	Annual process in place for information gathering on financials, visitors, funding and recovery plans.
	Administer the Change Fund to grow the number of successful ideas to generate efficiency savings and projects that deliver efficiencies		30-Apr-2026	No change fund bids have been submitted since the last progress update. The Transformation Programme Manager continues to work with Finance colleagues to monitor the fund.
	Lead the next phase of the Transformation Plan to Design a Modern Council.		31-Mar-2027	<p>Work continues to raise the profile of the Transformation Programme in several ways:</p> <p>Service Re-design – a revised iteration of the council’s approach has now been finalised, and the next stage is to identify new opportunities for transformation. The Service Manager (Communications & Transformation), the Transformation Programme Manager and Performance colleagues have attended service Leadership Team Meetings and identified potential transformation opportunities. Following this exercise, a list of potential transformation projects will be submitted to the Transformation Board for consideration and prioritisation.</p> <p>As part of revised governance arrangements, bi-monthly reporting is now taking place. Theme Board Leads are being encouraged to include lessons learned as part of bi-monthly reporting to ensure that these can be captured and shared at the earliest opportunity.</p> <p>The Transformation SharePoint site continues to be used and colleagues who attended recent project management training were signposted to this resource.</p> <p>The Council has now provided a second financial contribution from the change fund to the IS/SOLACE transformation work. Furthermore, work has progressed to map Dundee City Council’s shared services and Transformation Programme with the IS/SOLACE transformation projects and Public Sector Reform (PSR) Strategy to better understand the current landscape and also any future potential opportunities to expand on this.</p> <p>A further extension of the Engage Modeller software licence has been approved by the Transformation Board. This tool helps to support transformation activity whilst providing valuable cost and time analysis that can help provide justification for change.</p>

	Action Title	Progress Bar	Due Date	Latest Update
	Expand the use of Power BI across the Council		31-Mar-2026	IT colleagues are looking at licensing requirements at present.
	The reporting of the Transformation Programme within the Council Plan will be enhanced to provide more detail for elected members and the public. This will include publicly available information on the website.		31-Dec-2025	It has been agreed that more detail will be included in the 'Design a Modern Council' section of the Council Plan six monthly and annual reports to improve the level of detail made available to elected members and the public. This enhanced reporting commenced in June 2025.
	Continue to roll out the new approach to benefits tracking to ensure benefits trackers are compiled at the start of new transformation projects.		31-Mar-2026	Current benefits trackers are being reviewed to ensure that they include both financial and non-financial benefits. All new projects will be required to produce a benefits tracker and report on progress thereafter as part of regular reporting arrangements. Guidance is being drafted to support officers in identifying the potential benefits associated with any particular project.
	Review arrangements for reporting of financial savings linked to the transformation programme to more clearly show how the programme supports the budget setting.		31-Dec-2025	Work is ongoing to identify those savings that are attributable to transformation efforts. Discussions are ongoing to review and agree how this information will continue to feed into the budget setting process moving forward.

Communications Strategy 2022/27 - Action Plan Updates

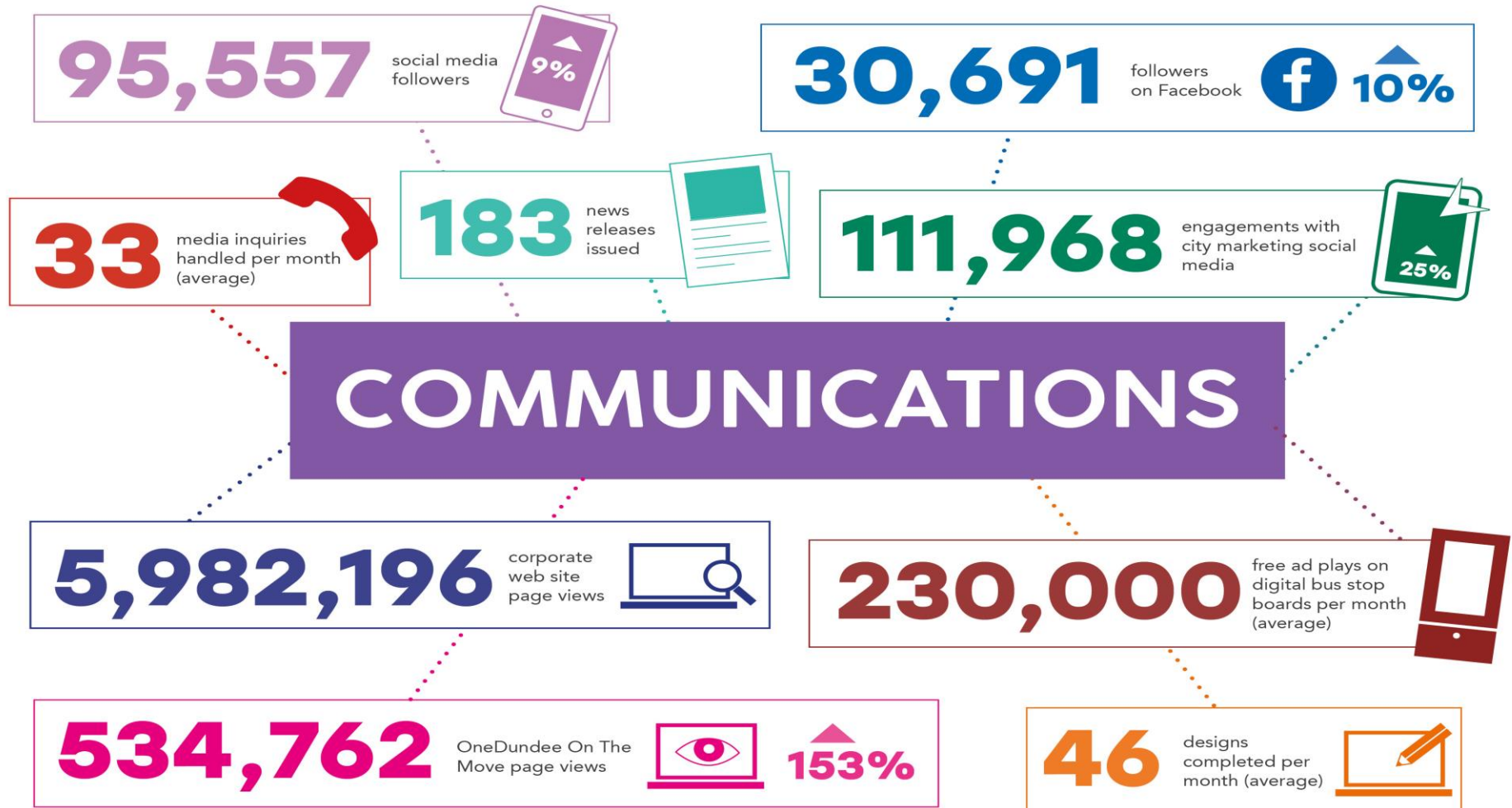
Communication Strategy Action Plan 24/25

Action	Area	Responsibility	Measure/KPI	Due date
Deliver a year of effective marketing activity under the Put Dundee on your Map campaign, supporting tourism outcomes for the attraction and hospitality industries	City marketing	Communications manager, Team Leader city promotion	90,000 engagements with campaign during 24/25	Complete
Roll out and implement emergency communications plan to reflect learning from recent major incidents	Crisis communications	Communications manager	Emergency communications plan is followed in a major incident	Complete
Trial the use of WhatsApp Channels as a means of quickly “broadcasting” important information during an emergency	Crisis communications	Communications manager	1000 followers of channel	Partially complete, trialled and currently approx. 800 followers
Review and scope the impact of changes to the Public Sector Equality Duty in Scotland relating to inclusive communications	Marketing and design, Digital and Social Media	Communications manager	Council complies with new responsibilities under the PSED. Relevant staff training undertaken	Now 25/26

Communication Strategy Action Plan 25/26

Action	Area	Responsibility	Measure/KPI	Due date
Relaunch an updated OneDundee Intranet	Internal communication	Communications Manager, IT	Site is fully launched with positive feedback and maintained pageviews	Winter 2025
Review KPI for City Marketing in light of budget changes and new tourism strategy. Working with stakeholders to grow organic engagement.	City marketing	Communications manager	Emergency communications plan is followed in a major incident	Winter 2025
Grow the use of WhatsApp Channels as a means of quickly “broadcasting” important information during an emergency	Crisis communications	Communications manager	1200 followers of channel	Spring 2026
In conjunction with IT and services, undertake a review/ rationalisation of council- hosted websites to ensure best use of resources and maximum audience impact	Digital and Social Media	Communications manager, IT manager, service managers	Reduce number of websites by appropriate amount	Summer 2026

Communication Strategy Action Plan - Measures of our Success in 2024/25



REPORT TO: CITY GOVERNANCE COMMITTEE – 1 DECEMBER 2025
REPORT ON: CAPITAL EXPENDITURE MONITORING 2025/26
REPORT BY: EXECUTIVE DIRECTOR OF CORPORATE SERVICES
REPORT NO: 333-2025

1 PURPOSE OF REPORT

1.1 To appraise Elected Members of the latest position regarding the Council's Capital Plan 2025-30.

2 RECOMMENDATION

2.1 It is recommended that the Committee note the latest position regarding the Council's Capital Plan 2025-30.

3 FINANCIAL IMPLICATIONS

3.1 This report shows the latest projections for 2025/26 expenditure and total cost as at 31st October 2025.

Appendix 1, which details the General Services position to the end of October 2025, shows a revised projected outturn for 2025/26 of £60.122m, an increase of £0.489m since the previous Capital Monitoring report was approved at City Governance Committee on 17th November 2025 (Report 311-2025, Article VI refers). The movements that have contributed to this increase are summarised in paragraph 5.2 of this report. The net movement of budget from 2025/26 into 2026/27 of £0.708m since the previous Capital Monitoring report was approved will be funded from borrowing.

Appendix 3, which details the Housing HRA position to the end of October 2025, shows a projected outturn for 2025/26 of £22.456m. There are no variations since the previous Capital Monitoring report was approved at City Governance Committee on 17th November 2025 (Report 311-2025, Article VI refers).

4 BACKGROUND

4.1 The Capital Plan 2025-30 was approved at City Governance Committee on 17 February 2025 (Report 44-2025, Article V refers).

In addition to monitoring the in-year budget (i.e. 2025/26) the total projected cost of each project will be monitored against the cost when the tender acceptance was approved at Committee. Furthermore, the projected completion date for each project will be monitored against the completion date as anticipated when the tender report was approved. The capital programme is being monitored in conjunction with the Council's asset managers.

The Housing HRA Capital Programme 2025/26 was approved as part of the Capital Plan 2025-30 at the City Governance Committee on 17 February 2025 (Report 44-2025, Article V refers).

4.2 Local Authorities from 1 April 2004 are required, by Regulation, to comply with the Prudential Code under Part 7 of the Local Government Act 2003. The Capital Budget for 2025/26 is being monitored within the framework of the updated Prudential Code 2021.

4.3 The Capital Monitoring report provides detailed information on major projects and programmes contained within the Capital Budget and the impact of expenditure movements on future financial years.

5 GENERAL SERVICES CURRENT POSITION

5.1 Appendix 2 details the latest projected outturn for major projects and programmes, both for 2025/26 and for the whole project lifespan. In addition, the Appendix monitors project timescales, with approved completion dates taken from tender approval reports.

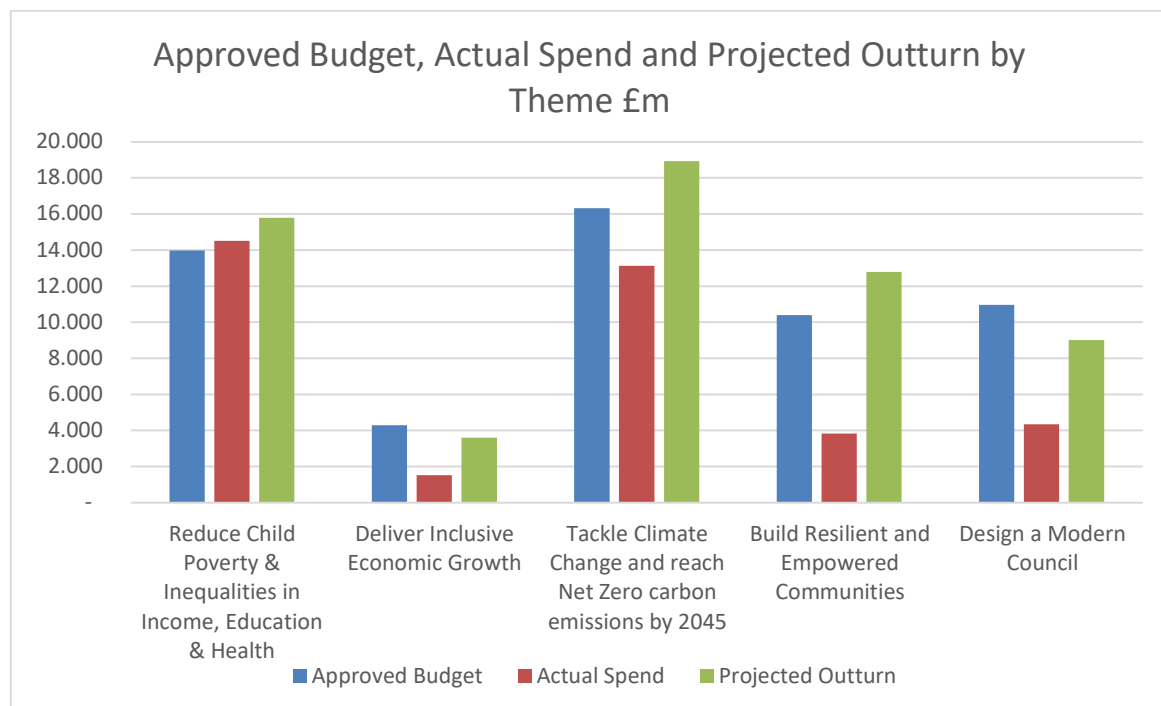
In some instances, it is not possible to provide approved or projected total project costs and timescales due to the budget being a block programme containing various smaller projects within it. In these cases, the total cost is assumed to be the budgeted figure plus previous year actuals. The projected completion date is assumed to be the end of the financial year.

5.1.1 The projects funded from the grant award of £20m to Dundee for the Community Regeneration Partnership (previously named the Levelling Up Partnership) reported to the Fair Work, Economic Growth and Infrastructure Committee on 21 April 2025 (Report 114-2025, Article X refers) are now being progressed with officers working with stakeholders to progress the delivery of the projects, in accordance with the terms of the Partnership’s Memorandum of Understanding. Appendix 4 shows the progress to date on the various projects. This will be updated monthly and reported along with the Capital Monitoring report, to City Governance Committee. At present all the projects are progressing satisfactorily the exception of the waterfront project which is under review. The UK Government has requested that projects are making satisfactory progress by the end of the financial year 2025/26, with the exception of the larger College project which has until the end of financial year 2026/27.

Progress is reviewed fortnightly and reported to the Capital Governance Group to ensure strategic oversight and accountability. Should any project within the programme be unable to progress, funding will be reallocated to projects already identified within the programme. Only if funding remains, new projects that contribute to the aims of the package and reflect the menu of interventions developed, could be considered, though such amendments to the programme require to be agreed by UK Government Ministers

5.1.2 Appendix 1 summarises the total gross expenditure for 2025/26 and how this expenditure is funded. The projected budgeted capital expenditure is 100% of the projected capital resources. Project cashflows, for phasing of budgets, are constantly being reviewed. Actual expenditure to 31st October 2025 is £37.339m, 62% of the Revised Budget 2025/26 compared to 52% for the same period last year.

The table below shows a comparison of approved budget, actual spend and projected outturn for 2025/26, broken down by Council Theme.



The net increase in the projected outturn for 2025/26 reflects additional grant income awarded to the Council that will be spent in year, and project/programme budgets being reprofiled from 2025/26 into 2026/27. Key variations are as follows and details are provided in subsequent paragraphs. The remainder of the variances, due to reprofiled project/programmes, are below the £0.250m reporting threshold.

Increase in planned expenditure:

- Union Street Infrastructure Improvements - £1.116m

Reduction in planned expenditure:

- Sustainable Transport - (£0.353m)
- Capitalisation Borrowing Costs – (£0.280m)

5.2 2025/26 Expenditure Variations

Appendix 1, which details the General Services position to the end of October 2025, shows a revised projected outturn for 2025/26 of £60.122m, an increase of £0.489m since the previous Capital Monitoring report was approved at City Governance Committee on 17th November 2025 (Report 311-2025, Article VI refers). The net movements that have contributed to this increase are summarised in paragraphs 5.2.1 & 5.2.3 below.

- 5.2.1 Union Street Infrastructure Improvements (Build Resilient & Empowered Communities) - Additional expenditure of £1.116m in 2025/26. The additional expenditure is attributed to mid-year Transport Scotland grant award and will be utilised to deliver new transformative street infrastructure, including improved crossings to Nethergate and Yeaman Shore and deliver a high quality accessible level public space with outdoor seating, shelters and a public events space. The expenditure is funded by a grant from the Scottish Government so there will be no impact on the Council's level of borrowing.
- 5.2.2 Sustainable Transport and Infrastructure (Tackle Climate Change and Reach Net Zero Carbon Emissions by 2045 – Other Projects) – Reduction in projected expenditure of £0.353m in 2025/26. The budget will be required in 2026/27 as match funding requirement to externally funded infrastructure projects. The budget has been rephased to reflect when the infrastructure programme development will occur. There will be a decrease in borrowing in 2025/26 and a corresponding increase in 2026/27.
- 5.2.3 Capitalisation of Borrowing Costs (Design a Modern Council – Other Projects) - Reduction in projected expenditure of £0.280m in 2025/26 The Council have not revised its accounting policy in this area to date. This will continue to be reviewed, as part of the forthcoming review of the capital plan 2025-30 it will be determined whether this is required moving forward and further updates provided to members as deemed necessary. The budget will be required in future years. There will be a decrease in borrowing in 2025/26 and a corresponding increase in future.

- 5.3 The table below shows the latest position regarding the capital resources for funding of the 2025/26 programme: -

	Approved Budget £m	Adjustments £m	Revised Budget £m	Projected Outturn £m	Variance £m
Borrowing	27.230	0.764	27.994	27.994	-
General Capital Grant	13.187	0.924	14.111	14.111	-
Capital Grants & Contributions	8.859	7.158	16.017	16.017	-
Capital Receipts – Sale of Assets	<u>2.000</u>	-	<u>2.000</u>	<u>2.000</u>	-
	<u>51.276</u>	<u>8.846</u>	<u>60.122</u>	<u>60.122</u>	<u>-</u>

- 5.3.1 Over the last 5 years the actual outturns achieved have been: -

	£m
2021/22	45.038
2022/23	44.086
2023/24	73.454
2024/25	105.619
2025/26 (Projected)	60.122

5.4 Projected Total Cost Variations

There are no total cost variations to report since the previous capital monitoring report went to committee.

5.5 Completion Date Variations (this compares the estimated completion date as per the tender acceptance report to the actual completion date)

There are no completion date variations to report since the previous capital monitoring report went to committee.

Officers are constantly reviewing the capital programme to ascertain the impact of global supply chain issues on the timescales for delivering projects. Officers will report any further revisions to estimated completion dates in future capital monitoring reports.

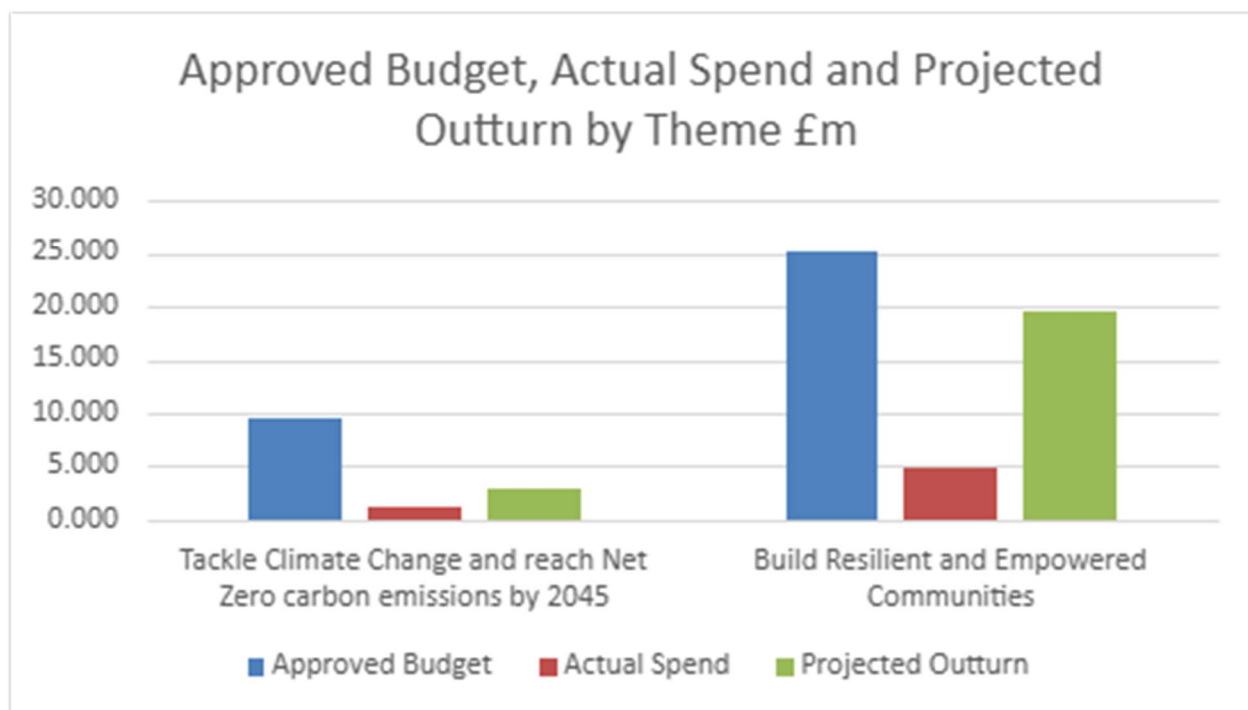
6 HOUSING HRA - CURRENT POSITION

6.1 2025/26 Expenditure Variations

Appendix 2 details the latest projected outturn for each project, both for 2025/26 and for the whole project lifespan. In addition, the Appendix monitors project timescales. In some instances, it is not possible to provide approved or projected total project costs and timescales due to the project being a block programme containing various smaller projects within it. In these cases, the total cost is assumed to be the budgeted figure plus previous year actuals.

Appendix 3 summarises the total gross expenditure for 2025/26 and how this expenditure is funded. The projected budgeted capital expenditure is 100% of the projected capital resources. Project cashflows, for phasing of budgets, are constantly being reviewed. Actual expenditure to 31st October 2025 is £5.989m, 27% of the Revised Budget 2025/26 compared to 32% for the same period last year.

The table below shows a comparison of approved budget, actual spend and projected outturn for 2025/26, broken down by Council Theme.



6.2 Appendix 3, which details the Housing HRA position to the end of October 2025, shows a projected outturn for 2025/26 of £22.456m. There are no variations since the previous Capital Monitoring report was approved at City Governance Committee on 17th November 2025 (Report 311-2025, Article VI refers).

6.3 The table below shows the latest position regarding the funding of the 2025/26 programme: -

	Approved Budget £m	Adjustments £m	Revised Budget £m	Projected Outturn £m	Variance £m
Borrowing	32.301	(11.900)	20.401	20.401	-
Capital Grants & Contributions	1.130	(150)	980	980	-
CFCR	450	-	450	450	-
Capital Receipts – Sale of Assets	460	-	460	460	-
Receipts from Owners	<u>165</u>	-	<u>165</u>	<u>165</u>	<u>-</u>
	<u>34.506</u>	<u>(12.050)</u>	<u>22.456</u>	<u>22.456</u>	<u>-</u>

6.3.1 Over the last 5 years the actual outturns achieved have been: -

	£m
2021/22	12.338
2022/23	9.232
2023/24	12.175
2024/25	16.530
2025/26 (Projected)	22.456

6.4 Projected Total Cost Variations

There are no total cost variations to report since the previous capital monitoring report went to committee.

6.5 Completion Date Variations (this compares the estimated completion date as per the tender acceptance report to the actual completion date)

There are no completion date variations to report since the previous capital monitoring report went to committee.

7 **POLICY IMPLICATIONS**

7.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services, or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

8 **CONSULTATION**

8.1 The Council Leadership Team have been consulted with the content of this report.

9 **BACKGROUND PAPERS**

9.1 None.

PAUL THOMSON
EXECUTIVE DIRECTOR OF CORPORATE SERVICES

17 NOVEMBER 2025

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2025/26 DUNDEE CITY COUNCIL CAPITAL EXPENDITURE MONITORING TO 31st OCTOBER 2025

Appendix 1

	<u>Approved Capital Budget 2025/26 £000</u>	<u>Total Budget Adjustments £000</u>	<u>Revised Capital Budget 2025/26 £000</u>	<u>Actual Spend 2025/26 £000</u>	<u>Projected Outturn 2025/26 £000</u>	<u>Variance £000</u>	<u>Actual Spend to 31.10.25 as a % of Revised Budget</u>
GENERAL SERVICES							
<u>Capital Expenditure</u>							
Reduce Child Poverty & Inequalities in Income, Education & Health	13,982	1,804	15,786	14,506	15,786	0	92%
Deliver Inclusive Economic Growth	4,298	(694)	3,604	1,515	3,604	0	42%
Tackle Climate Change and reach Net Zero carbon emissions by 2045	16,331	2,598	18,929	13,129	18,929	0	69%
Build Resilient and Empowered Communities	10,397	2,394	12,791	3,838	12,791	0	30%
Design a Modern Council	10,968	(1,956)	9,012	4,351	9,012	0	48%
Capital Expenditure 2025/26	55,976	4,146	60,122	37,339	60,122	0	62%
<u>Capital Resources</u>							
Expenditure Funded from Borrowing	27,230	764	27,994	20,716	27,994		
General Capital Grant	13,187	924	14,111	8,076	14,111		
Capital Grants & Contributions - project specific	8,859	7,158	16,017	8,259	16,017		
Capital Receipts - Sale of Assets	2,000		2,000	288	2,000		
Capital Resources 2025/26	51,276	8,846	60,122	37,339	60,122		
Capital Expenditure as % of Capital Resources	109%		100%		100%		

REDUCE CHILD POVERTY AND INEQUALITIES IN INCOMES, EDUCATION AND HEALTH

Project/Nature of Expenditure	Approved Budget 2025/26 £000	Total Adjusts £000	Revised Budget 2025/26 £000	Expenditure to 31/10/2025 £'000	Projected Outturn 2025/26 £000	Note 1				
						Actual Project Cost to 31/10/2025 £000	Current Approved Project Cost £000	Projected Total Cost £000	Approved Completion Date	Projected/ Actual Completion Date
MAJOR PROJECTS - Reduce Child Poverty and Inequalities										
School Estate Investment-East End Community Campus	12,992	2,181	15,173	14,489	15,173	100,216	100,800	100,900	Jul-25	Aug-25
(Less External Funding)	(100)		(100)	(35)	(100)	(35)		(100)		
OTHER PROJECTS - Reduce Child Poverty and Inequalities	990	(377)	613	17	613	476	1,277	1,285		
(Less External Funding)	(210)	(15)	(225)		(225)	(50)	(275)	(275)		
Net Expenditure	13,672	1,789	15,461	14,471	15,461	100,607	101,802	101,810		
Receipts	(310)	(15)	(325)	(35)	(325)	(85)	(275)	(375)		
Gross Expenditure	13,982	1,804	15,786	14,506	15,786	100,692	102,077	102,185		

Note 1: The Current approved project cost is either the approved cost as per the tender price, or the revised budgeted figure as per the Capital Plan 2025-30

DELIVER INCLUSIVE ECONOMIC GROWTH

Project/Nature of Expenditure	Approved	Total	Revised	Expenditure	Projected	Note 1				
	Budget 2025/26 £000	Adjusts £000	Budget 2025/26 £000	to 31/10/2025 £'000	Outturn 2025/26 £000	Actual Project Cost to 31/10/2025 £000	Current Approved Project Cost £000	Projected Total Cost £000	Approved Completion Date	Projected/ Actual Completion Date
MAJOR PROJECTS - Deliver Inclusive Economic Growth										
Site 6 South Side - Office Development	2,615	(1,209)	1,406	1,076	1,406	24,572	26,202	26,202	Feb-25	Sep-25
Demolition of Properties & Remediation Works	1,312	556	1,868	462	1,868	633	2,039	2,039	Mar-26	Mar-26
OTHER PROJECTS - Deliver Inclusive Economic Growth	371	(41)	330	(23)	330	1,797	2,321	2,150		
(Less External Funding)	(331)	31	(300)		(300)	(134)	(485)	(434)		
Net Expenditure	3,967	(663)	3,304	1,515	3,304	26,868	30,077	29,957		
Netted Off Receipts	(331)	31	(300)		(300)	(134)	(485)	(434)		
Gross Expenditure	4,298	(694)	3,604	1,515	3,604	27,002	30,562	30,391		

Note 1: The Current approved project cost is either the approved cost as per the tender price, or the revised budgeted figure as per the Capital Plan 2025-30

TACKLE CLIMATE CHANGE AND REACH NET ZERO CARBON EMISSIONS BY 2045

Project/Nature of Expenditure	Approved Budget	Total	Revised Budget	Expenditure to	Projected	Note 1				
	2025/26 £000	Adjusts £000	2025/26 £000	31/10/2025 £'000	Outturn 2025/26 £000	Actual Project Cost to 31/10/2025 £000	Current Approved Project Cost £000	Projected Total Cost £000	Approved Completion Date	Projected/ Actual Completion Date
MAJOR PROJECTS - Tackle Climate Change and Reach Net Zero Emissions by 2045										
Broughty Ferry to Monifieth Active Travel Improvements	1,490	(505)	985	727	985	17,275	17,479	17,533	Sep-24	Mar-26
(Less External Funding)	(1,269)	434	(835)	(570)	(835)	(17,049)	(17,314)	(17,314)	Sep-24	Mar-26
Tier 1 Active Travel Infrastructure Fund (formerly known as Cycling, Walking & Safer Routes)	655	517	1,172	523	1,172	523	1,172	1,172	Mar-26	Mar-26
(Less External Funding)	(655)	(517)	(1,172)	(523)	(1,172)	(523)	(1,172)	(1,172)	Mar-26	Mar-26
DCA Lifecycle plant replacement programme	1,110	20	1,130	846	1,130	1,102	4,550	4,550	Main Works Tender targeted for approval during 2025/26	
Low Carbon Transport (Green Transport Hub & Spokes - Bell Street)	6,414	1,784	8,198	7,808	8,198	17,550	17,940	17,940	Sep-25	Nov-25
(Less External Funding)	(4,519)	(1,784)	(6,303)	(6,303)	(6,303)	(16,045)	(14,400)	(16,045)	Sep-25	Sep-25
Vehicle Fleet & Infrastructure	3,172	942	4,114	2,750	4,114	2,806	4,170	4,170	Mar-26	Mar-26
(Less Sale of Vehicles & Equipment)		(184)	(184)	(125)	(184)	(125)	(184)	(184)	Mar-26	Mar-26
OTHER PROJECTS - Tackle Climate Change and Reach Net Zero Carbon Emissions by 2045	3,490	(160)	3,330	475	3,330	17,167	21,658	21,684		
(Less External Funding)	(666)	(1,525)	(2,191)	(158)	(2,191)	(260)	(2,817)	(2,817)		
Net Expenditure	9,222	(978)	8,244	5,450	8,244	22,421	31,082	29,517		
Receipts	(7,109)	(3,576)	(10,685)	(7,679)	(10,685)	(34,002)	(35,887)	(37,532)		
Gross Expenditure	16,331	2,598	18,929	13,129	18,929	56,423	66,969	67,049		

Note 1: The Current approved project cost is either the approved cost as per the tender price, or the revised budgeted figure as per the Capital Plan 2025-30

BUILD RESILIENT AND EMPOWERED COMMUNITIES

Project/Nature of Expenditure	Approved Budget 2025/26 £000	Total Adjusts £000	Revised Budget 2025/26 £000	Expenditure to 31/10/2025 £'000	Projected Outturn 2025/26 £000
MAJOR PROJECTS - Build Resilient and Empowered Communities					
Road Maintenance Partnership	3,460	(77)	3,383	1,711	3,383
Street Lighting Renewal	1,016	32	1,048	456	1,048
City Improvement/Investment Fund	1,342	(951)	391	59	391
(Less External Funding)	(500)	109	(391)	0	(391)
Community Regeneration Partnership		700	700	181	700
(Less External Funding)		(700)	(700)	(181)	(700)
Union Street Infrastructure Improvements		1,116	1,116		1,116
(Less External Funding)		(1,116)	(1,116)		(1,116)
Parks & Open Spaces	2,140	76	2,216	762	2,216
(Less External Funding)	(609)		(609)	(305)	(609)
OTHER PROJECTS/PROGRAMMES - Build Resilient and Empowered Communities	2,439	1,498	3,937	669	3,937
(Less External Funding)		(1,891)	(1,891)	(59)	(1,891)
Net Expenditure	9,288	(1,204)	8,084	3,293	8,084
Receipts	(1,109)	(3,598)	(4,707)	(545)	(4,707)
Gross Expenditure	10,397	2,394	12,791	3,838	12,791

Note 1

Actual Project Cost to 31/10/2025 £000	Current Approved Project Cost £000	Projected Total Cost £000	Approved Completion Date	Projected/ Actual Completion Date
1,711	3,383	3,383	Mar-26	Mar-26
456	1,048	1,048	Mar-26	Mar-26
101	992	933	Mar-26	Mar-26
0	(500)	(391)	Mar-26	Mar-26
181	700	700	Mar-26	Mar-26
(181)	(700)	(700)	Mar-26	Mar-26
	1,870	1,870	Sep-26	Sep-26
	(1,116)	(1,116)	Mar-26	Mar-26
1,503	3,007	3,007	Mar-26	Mar-26
(500)	(804)	(804)	Mar-26	Mar-26
2,254	5,755	5,833		
(819)	(2,648)	(2,651)		
4,706	10,987	11,112		
(1,500)	(5,768)	(5,662)		
6,206	16,755	16,774		

Note 1: The Current approved project cost is either the approved cost as per the tender price, or the revised budgeted figure as per the Capital Plan 2025-30

Appendix 2

DESIGN A MODERN COUNCIL

Project/Nature of Expenditure	Approved Budget	Total	Revised Budget	Expenditure to	Projected	Note 1				
	2025/26 £000	Adjusts £000	2025/26 £000	31/10/2025 £'000	Outturn 2025/26 £000	Actual Project Cost to 31/10/2025 £000	Current Approved Project Cost £000	Projected Total Cost £000	Approved Completion Date	Projected/ Actual Completion Date
MAJOR PROJECTS/PROGRAMMES - Design a Modern Council										
Baldovie Depot Redevelopment	200	31	231	15	231	259	5,200	5,200		Tender will follow acquisition of land
Depot Rationalisation Programme	867	(847)	20		20	330	3,063	3,063		Service review ongoing - tender will follow once review complete
Dundee Ice Arena Plant & Upgrade	500	(200)	300	68	300	1,243	9,100	9,100		Early stages of development with consultation on-going. Tender report will follow
Property Lifecycle Development Programme	5,089	(552)	4,537	2,492	4,537	5,521	8,569	8,459	Mar-26	Mar-26
Purchase Computer Equipment	1,251	112	1,363	708	1,363	805	1,460	1,460	Mar-26	Mar-26
Schools Connectivity		49	49	49	49	1,538	2,600	2,679		
OTHER PROJECTS/PROGRAMMES - Design a Modern Council	3,061	(549)	2,512	1,019	2,512	4,597	6,713	6,841		
Net Expenditure	10,968	(1,956)	9,012	4,351	9,012	14,293	36,705	36,802		
Netted Off Receipts										
Gross Expenditure	10,968	(1,956)	9,012	4,351	9,012	14,293	36,705	36,802		

Note 1: The Current approved project cost is either the approved cost as per the tender price, or the revised budgeted figure as per the Capital Plan 2025-30

TACKLE CLIMATE CHANGE AND REACH NET ZERO EMISSIONS BY 2045 - HOUSING REVENUE ACCOUNT ELEMENT

Project/Nature of Expenditure	Approved Budget 2025/26 £000	Total Adjusts £000	Revised Budget 2025/26 £000	Expenditure to 31/10/2025	Projected Outturn 2025/26 £000
Energy Efficiency	9,452	(6,571)	2,881	1,125	2,881
Net Expenditure	9,452	(6,571)	2,881	1,125	2,881
Receipts					
Gross Expenditure	9,452	(6,571)	2,881	1,125	2,881

Note 1				
Actual Project Cost to 31/10/2025 £000	Current Approved Project Cost £000	Projected Total Cost £000	Approved Completion Date	Projected/ Actual Completion Date
1,738	984	2,431	Mar-26	Mar-26
1,738	984	2,431		
1,738	984	2,431		

BUILD RESILIENT AND EMPOWERED COMMUNITIES - HOUSING REVENUE ACCOUNT ELEMENT

Project/Nature of Expenditure	Approved Budget 2025/26 £000	Total Adjusts £000	Revised Budget 2025/26 £000	Expenditure to 31/10/2025	Projected Outturn 2025/26 £000
Free from Serious Disrepair	11,658	(1,538)	10,120	3,010	10,120
Modern Facilities & Services	876	36	912	242	912
Healthy, Safe and Secure	5,383	(2,851)	2,532	677	2,532
Miscellaneous	2,497	(162)	2,335	650	2,335
Increased Supply of Council Housing	4,430	(1,673)	2,757	173	2,757
(Less External Funding)	(1,130)	150	(980)		(980)
Demolitions	10	66	76	55	76
Sheltered Lounge Upgrades	200		200	57	200
Improvement Plan		643	643		643
Net Expenditure	23,924	(5,329)	18,595	4,864	18,595
Receipts	(1,130)	150	(980)		(980)
Gross Expenditure	25,054	(5,479)	19,575	4,864	19,575

Note 1				
Actual Project Cost to 31/10/2025 £000	Current Approved Project Cost £000	Projected Total Cost £000	Approved Completion Date	Projected/ Actual Completion Date
6,416	13,526	13,526	Mar-26	Mar-26
344	1,062	1,062	Mar-26	Mar-26
3,659	5,479	5,499	Mar-26	Mar-26
2,854	4,309	4,541	Mar-26	Mar-26
1,574	8,673	8,684	Apr-27	Apr-27
	(2,526)	(2,526)	Apr-27	Apr-27
107	128	128	Mar-26	Mar-26
57	200	200	Mar-26	Mar-26
	643	643	Mar-26	Mar-26
15,011	31,494	31,757		
	(2,526)	(2,526)		
15,011	34,020	34,283		

Note 1: The Current approved project cost is either the approved cost as per the tender price, or the revised budgeted figure as per the Capital Plan 2025-30

DUNDEE CITY COUNCIL CAPITAL EXPENDITURE MONITORING 31 OCTOBER 2025

Appendix 3

	<u>Approved Capital Budget 2025/26 £000</u>	<u>Total Budget Adjustments £000</u>	<u>Revised Capital Budget 2025/26 £000</u>	<u>Actual Spend to 31 Oct 2025 £000</u>	<u>Projected Outturn 2025/26 £000</u>	<u>Variance £000</u>	<u>Actual Spend to 31.10.2025 as a % of Revised Budget</u>
<u>Capital Expenditure</u>							
<u>Tackle Climate Change and reach Net Zero carbon emissions by 2045</u>							
Energy Efficiency	9,452	(6,571)	2,881	1,125	2,881	-	39%
<u>Build Resilient and Empowered Communities</u>							
Free from Serious Disrepair	11,658	(1,538)	10,120	3010	10,120	-	30%
Modern Facilities and Services	876	36	912	242	912	-	27%
Healthy, Safe & Secure	5,383	(2,851)	2,532	677	2,532	-	27%
Miscellaneous	2,497	(162)	2,335	650	2,335	-	28%
Increase Supply of Council Housing	4,430	(1,673)	2,757	173	2,757	-	6%
Demolitions	10	66	76	55	76	-	72%
Sheltered Lounge Upgrades	200		200	57	200	-	29%
Improvement Plan		643	643		643	-	0%
Capital Expenditure 2025/26	34,506	(12,050)	22,456	5,989	22,456	-	27%
<u>Capital Resources</u>							
Expenditure Funded from Borrowing	32,301	(11,900)	20,401	5,759	20,401	-	
Capital Receipts, Grants & Contributions - project specific							
Scottish Government Grants	930		930		930	-	
Insurance contribution	200	(150)	50		50	-	
Capital Funded from Current Revenue							
Council Tax discount reductions used to fund affordable housing	450		450		450	-	
Capital Receipts, Grants & Contributions							
Receipts from Owners	165		165		165	-	
Capital Receipts:-							
Sale of Assets - Land	460		460	230	460	-	
Capital Resources 2025/26	34,506	(12,050)	22,456	5,989	22,456		
Capital Expenditure as % of Capital Resources	100%		100%		100%		

CAPITAL MONITORING 2025/26

COMMUNITY REGENERATION PARTNERSHIP

Dundee City Council Capital Projects

Project	Grant Award £000	Expenditure to 31/10/2025 £000	Comments	Making satisfactory progress at March 26
Phase 3 Waterfront Office Development	3,000		Project is under review and unlikely to proceed in short-term	TBC
City Centre Masterplanning	200	181	Supporting the City Centre Traffic Modelling study as part of the City Centre Strategic Investment Plan.	Yes
Eastern Quarter Improvements	1,000		Engineers working on detailed design and procuring contractor. Tender report taken to Fair Work, Economic Growth & Infrastructure Committee in February 2026 for approval.	Yes
Dundee Green Circular Active Travel	500		Report 230-2025 approved at Fair Work, Economic Growth & Infrastructure Committee on 18th August, committed £0.5m spend in 25/26	Yes
	4,700	181		

Third Party Capital Projects

Project	Grant Award £000	Expenditure to 31/10/2025 £000	Comments	Making satisfactory progress at March 26
Commercial Buildings Enhancement Scheme	1,000		Scheme is open. The fund has been extended to allow applicants to meet criteria for submissions, after which applications will be assessed. Further phases may be possible dependent on remaining budget. Members will be briefed once grants have been finalised.	Yes
Historic Buildings Renewal Fund	2,000		Scheme open. Engagement underway with potential applicants. The Fund is currently open and is being promoted. Members will be briefed once grants have been finalised.	Yes
Community Facilities Grant Scheme	1,000		Scheme closed. 18 Expressions of Interest received - 11 full applications received. Assessment panel agreed to move 9 applications to the next stage. Due diligence is almost complete and then grant offers will be announced formally.	Yes
Life Sciences Innovation District	2,000		Programme of works subject to a scoping study being undertaken by University of Dundee.	Yes
Dundee Waterfront - A Home For LegalTech Education & Innovation	1,100		Discussions with lead partner progressing. Met on 30/10/25 - designs progressing and grant offer letter is being finalised. Work going out to tender shortly, with proposed start in January.	Yes
Dundee Museum of Transport	1,200		Project subject to conclusion of funding package to enable full project delivery.	Yes
Dundee & Angus College Future Skills	4,500		Dundee & Angus College are in negotiation with the Scottish Funding Council over the wider regeneration of their estate. There is the potential to phase elements of the wider redevelopment with the Future Skills project as Phase 1. Decision anticipated by December. This project has been given an additional year to seek commitment to end March 27	Yes
Dundee & Angus College Health Facility	500		College have identified a space for the facility within Gardyne Road, planning application and building warrant due to be submitted in next 4 weeks, followed by procurement. Likely to be on site by end of 2025 with project completed by end of March 2026.	Yes
Kirkton Community Enterprise Centre	1,500		Development options and approach being reviewed. Stage 1 application for £2m of Regeneration Capital Grant Funding from the Scottish Government has been progressed to Stage 2. The outcome from Stage 2 will not be known until February/March 2026. SCIO is working with Business Gateway to revise business plan and with QS to revise scale/cost of building.	Yes
Social Bite Recovery Village	500		Social Bite commencing community consultation on project.	TBC
	15,300	-		

Dundee City Council Revenue Projects

Project	Grant Award £000	Expenditure to 31/10/2025 £000	Comments	Making satisfactory progress at March 26
Housing Research Dundee	60		Brief being finalised for this research.	Yes
Improving Business Support for High Potential Start-ups	120		Support programmes identified, businesses need to be identified. Abertay University to develop micro-credentials.	Yes
Community Facilities Fund - Development Support	70		Support Development of Projects	Yes
	250	-		

TOTAL	20,250	181		
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REPORT TO: CITY GOVERNANCE COMMITTEE – 1 DECEMBER 2025
REPORT ON: REVENUE MONITORING 2025/2026
REPORT BY: EXECUTIVE DIRECTOR OF CORPORATE SERVICES
REPORT NO: 343-2025

1 PURPOSE OF REPORT

1.1 To provide Elected Members with an analysis of the 2025/2026 projected revenue outturn as at 30 September 2025 and the impact on the Council’s overall revenue budget position.

2 RECOMMENDATIONS

2.1 It is recommended that the Committee:

- (a) note that as at 30 September 2025 the General Fund is projecting an overall overspend for the year of £3.404m against the adjusted 2025/2026 Revenue Budget, the impact this has on the Council’s General Fund Balances and the actions being taken to address the forecast budget shortfall;
- (b) note the budget adjustments totalling £5.223m and detailed in the second column of Appendix A and (summarised in Appendix B) as adjustments to the previously approved Revenue Budget;
- (c) note that as at 30 September 2025 the Housing Revenue Account (HRA) is projecting an overspend of £2.600m against the adjusted HRA 2025/2026 Revenue Budget and the impact this has on the projected Renewal & Repair Fund balance earmarked to HRA;
- (d) note the information included in paragraph 3.6 in relation to financial recovery and authorise the Executive Director of Corporate Services to continue to take actions to address forecast overspends with the objective of achieving a balanced budget;
- (e) note that as outlined in paragraph 3.3, this report does not reflect projections and costs associated with the Voluntary Severance and Early Retirement (VSER) scheme and these will be reflected in future monitoring reports.

3 FINANCIAL IMPLICATIONS

3.1 The unallocated portion of the General Fund as at 30 September 2025 is projecting an overspend of £3.404m against the adjusted 2025/2026 Revenue Budget. The impact this would have on the Council’s General Fund Balances is outlined below:

General Fund	Opening Balance 1 April 2025 £000	(Surplus) / Deficit for the Year £000	Transfers (In) / Out	Projected Balance 31 March 2026 £000
Earmarked Carry-forwards *	1,509	507		1,002
Children Services pressures	1,033	749		284
Organisational Change Fund	2,169	16		2,153
Covid cost related pressures *	1,550			1,550

General Fund	Opening Balance 1 April 2025 £000	(Surplus) / Deficit for the Year £000	Transfers (In) / Out	Projected Balance 31 March 2026 £000
Service change initiatives	5,000			5,000
Roof Remedial Works	1,875	1,408		388
Other earmarked Funds	5,948	405		5,543
Service concessions flexibility	39,773			39,773
Total earmarked funds	58,857	3,085	0	55,772
Unallocated Balance	8,174	3,404		4,770
Total General Fund	67,031	6,489	0	60,542

* These balances will be drawn down as required during the year.

- 3.2 The projected unallocated general fund balance of £4.770m may fail to provide sufficient in year buffer against potential additional pressures. Additional financial pressures could arise in year from:
- The Housing Revenue Account (HRA) reserve balance at year end is projected to be £0.593m as outlined in paragraph 8.3. A significant risk would arise should the HRA reserve balance be fully drawn down. Any spend over and above the reserve balance would be required to be absorbed by the General Fund.
 - Anticipated funding from Scottish Government in relation to the 2025/2026 LGE pay award being lower than the estimate of £1.5m. Refer paragraph 3.4 below.
 - Any unplanned and unavoidable expenditure arising over the remainder of the financial year that cannot be contained within the remaining general contingency amount.
- 3.3 The projections in this report exclude forecast outcomes from the Voluntary Severance and Early Retirement (VSER) scheme. VSER outcomes including any upfront costs of agreeing these settlements will be incorporated in future revenue monitoring reports, once any agreements have been approved and legal arrangements are concluded.
- 3.4 The approved budget included an allowance of 3% for the 2025/2026 pay awards for both LGE and teachers. It should be noted the pay deal for LGE of 4% increase for the current financial year has been agreed although funding to support the additional 1% is yet to be confirmed. Our estimate is that the additional 1% will cost £1.5m and our assumption is that the Scottish Government will fund this in full. The LGE pay award was made in August, back-dated to April. The estimated cost of £6.057m is met from the contingency budget and anticipated funding from the Scottish Government. The agreed pay offer for teachers is 4%, effective from 1 August 2025. The teachers pay award will be made in December, back-dated to August and the effect of this will be reported in the future revenue monitor reports.
- 3.5 Based on the financial information available as at 30 September 2025 the HRA outturn position for 2025/2026 is projecting an overspend of £2.600m. Further details are provided in section 8 of this report.
- 3.6 Financial Recovery Plan

As agreed previously (Report 240-2025 to City Governance Committee 22 September 2025 refers) given the adverse forecasts on both General Fund and HRA budgets, the following specific actions continue to be taken forward to mitigate current pressures:

- a) services will limit recruitment of vacancies to posts that are considered essential or where not filling these posts would place the Council at significant risk. All recruitment requests will be monitored through the Establishment Control Board.
- b) non-contractual overtime will be restricted to essential areas only and will only be approved where considered essential or where not undertaking overtime would place the Council at significant risk. All requests for overtime will not be granted without approval from Heads of Service.
- c) the Head of Corporate Finance is undertaking a review of earmarked balances to ascertain whether these can be utilised to offset in year pressures.
- d) the Head of Design and Property has established a working group to review all property expenditure and ensure only essential works are undertaken.
- e) the Head of Corporate Finance is undertaking a review of all property contracts to ensure that value for money is being achieved across all property, maintenance and inspection contracts.
- f) the Head of Design and Property is undertaking a review of energy costs to ensure energy usage is reduced and consider any spend to save projects that can be undertaken. This review will include the raising of awareness to promote more efficient energy usage in all council buildings.
- g) the Head of Housing, Construction and Communities is also conducting a thorough review of expenditure and income within the Housing Revenue Account to ensure expenditure is prioritised on essential spend.

The above actions will continue to be monitored closely by the Council Leadership Team through regular meetings and elected members will be kept updated on progress through regular budget monitoring reports.

4 BACKGROUND

- 4.1 Following approval of the Council's 2025/2026 Revenue Budget by the City Governance Committee on 27 February 2025, this report provides the projected revenue outturn position as at 30 September 2025, against the adjusted 2025/2026 Revenue Budget.
- 4.2 The total 2025/2026 Revenue Budget is £496.111m. For revenue monitoring purposes, the Council Tax Reduction Scheme budget of £14.741m is moved from expenditure to income and netted off against Council Tax income. This results in total budgeted expenditure of £481.370m for revenue monitoring purposes, as set out in Appendix A.
- 4.3 This report provides a detailed breakdown of service revenue monitoring information along with explanations of material variances against adjusted budgets. Where services are projecting a significant (underspend) or overspend against adjusted budget, additional details have been provided. Where service expenditure is on target and no material variances are anticipated, additional information has not been provided.
- 4.4 The forecast position is shown in more detail in the appendices to this report, as follows:

Appendix A shows the variances between budget and projected outturn for each service of the Council.

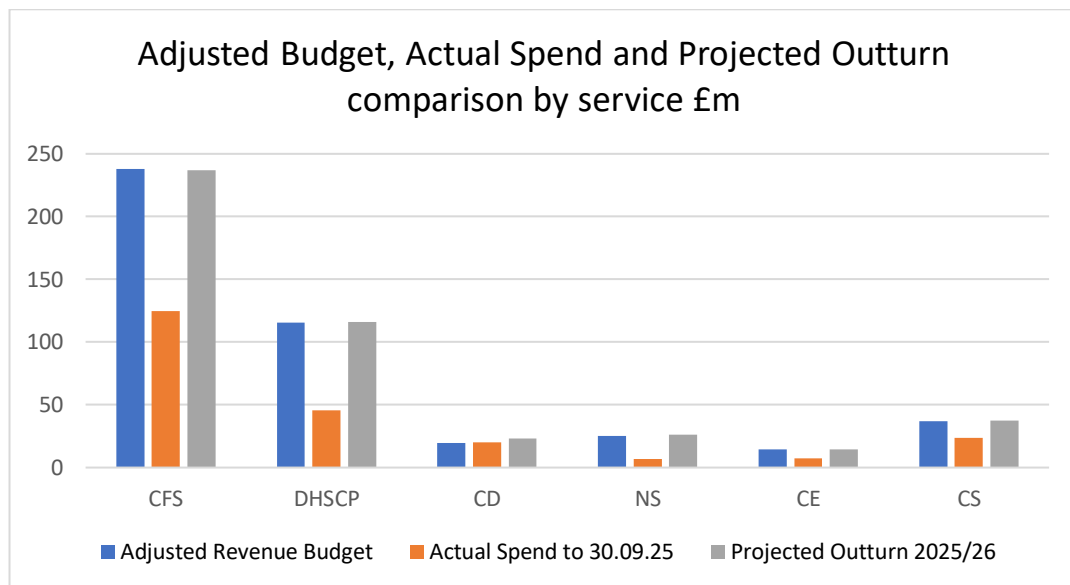
Appendix B lists the budget adjustments undertaken to date.

5 GENERAL FUND SERVICES - MONITORING POSITION AS AT 30 SEPTEMBER 2025

5.1 The forecast position as at 30 September 2025 for General Fund services is summarised below.

	(Under)/Over Spend as at 30 Sep £m	(Under)/Over Spend as at 31 Aug £m	Movement (from previous month) £m
Net Expenditure	3.625	6.732	(3.107)
Sources of Income	(0.221)	(0.221)	0.000
Net projected reduction uncommitted balances	3.404	6.511	(3.107)

The graph below details the comparison between each service's actual spend and projected outcome.



6 DETAILED ANALYSIS

The following paragraphs summarise the main areas of variance by service area along with appropriate explanations. These figures reflect movements for the full year to date.

6.1 Children & Families Services: (£1.076m) underspend

There has been a significant reduction in the overall forecast since August 25. Projected overspends remain including staffing costs in Children's Services due to service demand in this area £0.995m. This area is continuing to be reviewed as there are still further opportunities to reduce the overspend. There is also an overspend in third party payments for early years childcare, reflecting increased demand and the rising cost of providing care in private nurseries £0.978m. A review is currently underway in this area.

There are projected underspends in staff costs mainly reflecting the realignment of the former budgets into the new Greenfield Academy. There is also a projected underspend for LGE staff costs (£0.818m) mainly relating to staffing changes in the nursery sector. Additionally, there is a projected underspend in property costs due to rates rebates (£0.935m) received for 2023/24, 2024/25 and 2025/26 as well as additional income projected within Children Services (£0.492m) mainly relating to funding for unaccompanied asylum-seeking children.

6.2 Dundee Health & Social Care Partnership (DHSCP): £0.700m overspend

The latest financial monitoring report presented to Dundee IJB projects an overspend of £5.996m for 2025/26 (utilising actual info to end August), with this information presented to Dundee IJB at its meeting on. This projected overspend reflects the challenging financial position continuing to be experienced by Dundee IJB and while it reflects progress towards achieving savings targets totalling £17.5m for 2025/26, there remains a shortfall in the overall position.

At present, the IJB only holds £0.644m in General Reserves to offset this shortfall and, as a result, the IJB remains in Financial Recovery with a Financial Recovery Plan also presented to the IJB's October 2025 meeting. For more information, please refer to the Dundee Integration Joint Board Financial Recovery Plan 2025/26 within the agenda papers for the City Governance Committee to be held on 17 November 2025, report 338-2025 refers.

DHSCP is continuing to respond to significant operational challenges in demand and demographics (notably in Care at Home provision to help support discharge without delay from hospital, minimise unnecessary hospital admissions, reduce social care unmet need and reduce Care Home beds), and in particular staffing challenges (both recruitment and retention, sickness absence and premium cost of back-fill cover) and increasing complexity of needs in both inpatient / residential and community settings. Operational managers and finance team continue work to explore ways of mitigating the overspend through efficiencies, cost reduction, whole system working, transformation, prioritisation and savings opportunities against current year and recurring budgets with any impact of these being reported to the IJB.

Under the risk sharing arrangement reflected in the Integration Scheme, the Integration Joint Board (IJB) retains any underspend within its reserve balances for investment in integrated health and social care services in future years, however any shortfall (after utilising reserves and implementing the Financial Recovery Plans) would be shared proportionately between the Partner Bodies. Officers continue to work with Council (and NHST) colleagues to monitor and mitigate the financial implication.

The Council's estimated share of the Dundee IJP's estimated residual financial deficit as contained in the IJB financial recovery plan is £0.700m, which is included within the overall projections contained in this report.

6.3 City Development: £3.477m overspend

There has been a decrease in the overall forecast overspend since August 25. The projected overspend is mainly within Corporate Property £3.087m, primarily due to costs associated with property maintenance, inspection contracts, and remedial repairs arising from inspections. This is partly offset by a refund from rates revaluation appeals amounting to (£0.388m).

There is a forecasted overspend of £0.366m in Roads and Transportation, which is predominantly due to projected overspends through third party payments for road maintenance. There is also a projected shortfall in income of £0.250m relating to additional commercial rental income that was assumed in the budget but has not materialised so far. In addition, there is a projected shortfall in income for Building Warrants £0.244m and Planning Applications £0.100m.

The forecasted pressures within this service area are partially offset by a projected underspend of (£0.440m), resulting from vacant posts.

As part of the financial recovery plan, an analysis of current and historical property costs has been issued across services to identify cost savings and opportunities for property rationalisation. A working group is reviewing the overall position regarding property cost pressures, and the outcome will be reflected in future revenue monitoring reports. Further reductions in energy costs are also being explored together with recruitment to vacant posts in this team.

Ongoing discussions within the service are focused on identifying savings from vacant posts, service redesign opportunities, and other income generation.

In line with previous years there is a medium-term risk of £0.600m under recovery in off-street car parking income against budgeted levels for the current financial year. This reflects parking activity failing to recover fully since the pandemic. There is an amount of £1.550m in contingency reserves remaining to cover this forecasted shortfall although this remains a risk for future years.

6.4 Neighbourhood Services: £0.900m overspend

The projected overspend is within waste management third party payments, predominantly relating to the old waste plant nearing the end of its useful life and reduced lifetime extension agreement (LEA) income streams coming from it, two unplanned shutdowns of the new waste plant which adversely affected revenue, trade waste income shortfall (broadly consistent to last year), a shortfall in recycling income due to changes triggered by the Extended Producer Responsibility scheme, partially offset by a projected underspend of (£0.964m) resulting from the holding of vacant posts.

The Council is in regular dialogue with the waste plants' contractor in relation to the impacts of the plant's performance and the long-term viability of the lifetime extension agreement (LEA).

6.5 Corporate Fleet: £1.015m overspend

Reflects the projected net overspend associated with the corporate fleet. The cost of the Council's fleet remains a budget pressure mainly due to rising expenditure in relation to the external hire of vehicles used by services together with the cost of parts and materials for vehicle repairs.

6.6 Corporate Services: £0.217m overspend

There has been a reduction in the overall forecasted overspend since August 25. The service is currently projecting an underspend of (£0.694m) in staff costs, resulting from the holding of vacant posts. An overspend of £0.500m in transfer payments, primarily due to increased use of hotels for housing homeless individuals. These costs do not receive full housing benefit subsidy from the Department of Work and Pensions and are outside the control of the Benefit Delivery Team. Additionally, a forecast overspend of £0.244m in supplies and services is being reported, driven by increased costs for IT licence fees, audit fees, software expenses, additional voluntary pension contribution commission, and external fees for professional services. A projected shortfall in income of £0.281m is mainly attributed to under-recovery in Scientific Services and under-recovery of income for car parking in the underground garage.

6.7 Supplementary Superannuation: (£0.313m) underspend

Projected underspend in Supplementary Superannuation costs.

6.8 Miscellaneous Items: £0.325m overspend

Reduction in grant income reflecting lower than expected allocation from Extended Producer Responsibilities.

6.9 Capital Financing Costs: (£1.771m) underspend

The total projected underspend in Capital Financing Costs includes estimated savings of £1.172m relating to a restructuring exercise to replace current loan agreements with short-term local authority borrowing until longer-dated interest rates fall, when appropriate replacement borrowing would be undertaken. The remaining £0.599m underspend is mainly due to greater than expected interest on revenue balances.

6.10 Council Tax: (£0.221m) underspend

The Council Tax projected outturn shows a positive variance of £0.221m, which is based on updated estimates of anticipated Council Tax income, less anticipated Council Tax Reduction costs and taking into account the current Council Tax base (i.e. number of dwellings).

7 EXTERNAL ORGANISATIONS

7.1 The budget includes the assumption that Tayside Contracts will return a surplus in 2025/2026, our share of which will be £0.232m. Any expected variances against this will be reflected as known.

8 HOUSING REVENUE ACCOUNT - MONITORING POSITION AT 30 SEPTEMBER 2025

8.1 The forecast position as at 30 September 2025 for the HRA is summarised below:

	(Under)/Over Spend as at 30 Sep £m	(Under)/Over Spend as at 31 Aug £m	Movement (from previous month) £m
Net Expenditure	2.507	1.995	0.512
Sources of Income	0.093	0.116	(0.023)
Net over/ (underspend)	2.600	2.111	0.489

8.2 The key variances contributing to the above projection include an increased recharge from Construction Services for repairs, reflecting a higher number of employees working on repairs and a pay award that was greater than expected £1.306m. In addition, property-related costs for non-construction repairs and maintenance, such as fire damage, tenant allowances, and decant payments, are expected to exceed the budget by £0.892m. The anticipated cost of relets is also higher than budgeted, due to an increase in the number of relet properties assumed within the budget £0.952m. These adverse variances are partially offset by projected underspends on environmental improvements, resulting from delays in the commencement of these projects (£0.350m).

The above projection also includes estimated savings of £0.433m relating to a restructuring exercise to exit current loan agreements and replace with short-term local authority borrowing until longer-dated interest rates fall, when appropriate replacement borrowing would be undertaken.

8.3 A system of ongoing monitoring will continue to take place up to 31 March 2026 with the objective of the HRA achieving a final outturn which is below or in line with the adjusted 2025/2026 HRA Revenue Budget.

Any variance will be adjusted against the Renewal & Repair Fund, the housing element of which amounted to £3.193m as at 31 March 2025:

HRA Renewal and Repair Fund	September £m
Opening Balance as at 1 April 2025	3.193
<u>Less Projected Overspend to 31 March 2026</u>	(2.600)
Projected Balance as at 31 March 2026	0.593

9 POLICY IMPLICATIONS

9.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

10 CONSULTATIONS

10.1 The Council Leadership Team were consulted in the preparation of this report.

11 BACKGROUND PAPERS

11.1 None.

PAUL THOMSON
EXECUTIVE DIRECTOR OF CORPORATE SERVICES

20 NOVEMBER 2025

DUNDEE CITY COUNCIL							
2025/2026 REVENUE OUTTURN MONITORING							
PERIOD 1 APRIL 2025 - 30 SEPTEMBER 2025							
	Approved	Total	Adjusted		Projected	Previous	Movement
	Revenue	Budget	Revenue	Projected	Variance	Months	Since
	Budget	Adjustments	Budget	Outturn	Over/(under)	Projected	Previous
	2025/26	(see Appx B)	2025/26	2025/26	spend	Variance	Month
	£m	£m	£m	£m	£m	£000	£000
General Fund Services							
Children & Families	233.620	4.182	237.802	236.726	(1.076)	1.548	(2.624)
Dundee Health & Social Care Partnership	114.842	0.424	115.266	115.966	0.700	0.700	
City Development	18.250	1.338	19.588	23.065	3.477	3.868	(0.391)
Neighbourhood Services	23.603	1.497	25.100	26.000	0.900	0.964	(0.064)
Chief Executive	14.320	0.370	14.690	14.655	(0.035)	0.025	(0.060)
Corporate Services	35.318	1.708	37.026	37.243	0.217	0.343	(0.126)
Construction Services	0.000	1.408	1.408	1.408	0.000	(0.035)	0.035
	439.953	10.927	450.880	455.063	4.184	7.413	(3.229)
Capital Financing Costs / Interest on Revenue Balances	30.863		30.863	29.092	(1.771)	(1.771)	
Contingencies:							
- General	0.500	(0.137)	0.363	0.363	0.000	0.000	
- Budget growth/Pay Pressures	8.324	(4.593)	3.731	3.731	0.000	0.000	
- Unallocated Corporate Savings	(0.944)	(0.541)	(1.485)	(1.485)	0.000	0.000	
- New monies	0.922	(0.467)	0.455	0.455	0.000	0.000	
Tayside Contracts surplus	(0.232)		(0.232)	(0.232)	0.000	0.000	
Corporate Fleet	3.982	0.034	4.016	5.031	1.015	1.015	
Miscellaneous Items	(7.628)		(7.628)	(7.303)	0.325	0.325	
Discretionary Non Domestic Rates (NDR) Relief	0.392		0.392	0.504	0.112	0.111	0.001
Supplementary Superannuation Costs	3.041		3.041	2.728	(0.313)	(0.313)	
Tayside Valuation Joint Board	1.149		1.149	1.149	0.000	0.000	
Empty Property Relief Devolution	1.048		1.048	1.120	0.072	(0.048)	0.120
Total Expenditure	481.370	5.223	486.593	490.218	3.625	6.732	(3.107)
Sources of Income							
General Revenue Funding	(335.339)	(2.058)	(337.397)	(337.397)			
Contribution from National Non Domestic Rates (NDR) Pool	(71.406)		(71.406)	(71.406)			
Council Tax	(70.249)		(70.249)	(70.470)	(0.221)	(0.221)	
Use of Balances -							
Committed Balances c/f	0.000		0.000	0.000			
Earmarked funds	0.000	(3.069)	(3.069)	(3.069)			
Service concessions	(4.376)		(4.376)	(4.376)			
Change Fund	0.000	(0.016)	(0.016)	(0.016)			
R&R Fund	0.000	(0.080)	(0.080)	(0.080)			
(Surplus)/Deficit for the year	0.000	0.000	0.000	3.404	3.404	6.511	(3.107)
(Surplus)/Deficit for Housing Revenue Acct	0.000	0.000	0.000	2.600	2.600	2.111	0.489

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Dundee City Council										
Revenue Monitoring to 31st March 2026 - Budget Adjustments to date										
	<u>Alloc To/From General Conts</u>	<u>Alloc To/From Conts: Cost Pressures</u>	<u>To/From Conts: New Monies</u>	<u>Alloc To/From Conts: Savings</u>	<u>Funding Transfers</u>	<u>Alloc from Earmarked Funds</u>	<u>Alloc from Change Fund</u>	<u>Alloc from R&R Fund</u>	<u>T/Fs Between Depts / Conts</u>	<u>Dept Totals</u>
	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>
<u>General Fund Services</u>										
<u>Children & Families</u>										<u>4,182</u>
Social Care Uplift 2024-25 and 2025-26			467		230					
Revenue Support Grant to Children & Families - Early Learning Care uplift 2025/26					273					
Revenue Support Grant to Children & Families - Holiday playschemes and activities					31					
Earmarked Reserves to Children & Families service re Children Services TPP pressures						749				
Contingencies to Children & Families - LGE 2025/26 Pay Award		2,246								
RSG to Children & Families - Tayside Contracts 2025/26 Pay Award					126					
RSG to Children & Families - uplift to Scottish Recommended Allowance for kinship and foster carers					60					
<u>Dundee Health & Social Care Partnership</u>										<u>424</u>
Contingencies to Dundee Health & Social Care Partnership - 2025/26 Pay Award		424								
<u>City Development</u>										<u>1,372</u>
Contingencies to City Development - transfer of budget for post				34						
Contingencies to City Development - Bus Shelters/Street Lighting	100									
Earmarked Reserves to City Development - Eden Project						405				
Contingencies to City Development - recruitment approval for post				2						
Contingencies to City Development - 2025/26 Pay Award		767								
RSG to City Development - Tayside Contracts 2025/26 Pay Award					49					
Corporate Services to City Development - Transfer of Software Budget £15k (permanent)									15	
<u>Neighbourhood Services</u>										<u>1,497</u>
Renewal & Repair fund to Neighbourhood Services - Kirkton overspend £80k								80		

Dundee City Council										
Revenue Monitoring to 31st March 2026 - Budget Adjustments to date										
	<u>Alloc To/From General Conits</u>	<u>Alloc To/From Conits: Cost Pressures</u>	<u>To/From Conits: New Monies</u>	<u>Alloc To/From Conits: Savings</u>	<u>Funding Transfers</u>	<u>Alloc from Earmarked Funds</u>	<u>Alloc from Change Fund</u>	<u>Alloc from R&R Fund</u>	<u>T/Fs Between Depts / Conits</u>	<u>Dept Totals</u>
	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>
General Fund Services										
Contingencies to Neighbourhood Services - Communities Staff Budget				212						
Contingencies to Neighbourhood Services - Maintenance Budget for Caird Park	27									
RSG to Neighbourhood Services - 2025/26 Pay Award					1,027					
RSG to Neighbourhood Services - Tayside Contracts 2025/26 Pay Award					5					
Contingency to NS - ECB recruitment approvals August 2025 Various Refuse Collector posts				146						
										370
Chief Executive										
2024/25 Carry Forwards - Protecting People						38				
Contingencies to Chief Executive - budget for post				26						
Change Fund to Chief Executive - EKOS project							8			
RSG to Chief Executive - 2025/26 Pay Award					80					
RSG to Chief Executive - LACD 2025/26 Pay Award					200					
Chief Executive to Contingencies - Reversal of part of LACD Pay Award 2025/26					(43)					
Corporate Services to Chief Executive - Transfer of Software Budget to LACD £50k									50	
Change Fund to Chief Executive - Improvement Service							8			
2024/25 Carry Forwards - Gaelic Plan & Training						3				
										1,708
Corporate Services										
Contingencies to Corporate Services - transfer of budget for various posts				121						
Contingencies to Corporate Services - 2025/26 Pay Award		1,156			20					
Corporate Services to Chief Executive - Transfer of Software Budget to LACD £50k									(50)	
Corporate Services to City Development - Transfer of Software Budget £15k (permanent)									(15)	
General Contingency to Corporate Services - equipment for Floor 4 Dundee House	10									
2024/25 Carry Forwards - Scottish Welfare Fund						318				

Dundee City Council										
Revenue Monitoring to 31st March 2026 - Budget Adjustments to date										
	<u>Alloc To/From General Conits</u>	<u>Alloc To/From Conits: Cost Pressures</u>	<u>To/From Conits: New Monies</u>	<u>Alloc To/From Conits: Savings</u>	<u>Funding Transfers</u>	<u>Alloc from Earmarked Funds</u>	<u>Alloc from Change Fund</u>	<u>Alloc from R&R Fund</u>	<u>T/Fs Between Depts / Conits</u>	<u>Dept Totals</u>
	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>
General Fund Services										
2024/25 Carry Forwards - Cost of Living Advice Work						55				
2024/25 Carry Forwards - Scottish Welfare Fund admin						93				
Construction										1,408
Earmarked Reserves to Construction service re Roofs						1,408				
General Contingency										(137)
Contingencies to City Development - Bus Shelters/Street Lighting	(100)									
Contingencies to Neighbourhood Services - Maintenance Budget for Caird Park	(27)									
General Contingency to Corporate Services - equipment for Floor 4 Dundee House	(10)									
Contingency: Cost Pressures										(4,593)
Contingencies to Children & Families - LGE 2025/26 Pay Award		(2,246)								
Contingencies to Dundee Health & Social Care Partnership - 2025/26 Pay Award		(424)								
Contingencies to City Development - 2025/26 Pay Award		(767)								
Contingencies to Corporate Services - 2025/26 Pay Award		(1,156)								
Contingency: New monies										(467)
Social Care Uplift 2024-25 and 2025-26			(467)							
Contingency: Unallocated Savings										(541)
Contingencies to City Development - budget for driver post (permanent)				(34)						
Contingencies to Neighbourhood Services - Communities Staff Budget				(212)						
Contingencies to City Development - recruitment approval for post				(2)						
Contingencies to Chief Executive - budget for post				(26)						
Contingencies to Corporate Services - transfer of budget for various posts				(121)						

Dundee City Council										
Revenue Monitoring to 31st March 2026 - Budget Adjustments to date										
	<u>Alloc To/From General Conts</u>	<u>Alloc To/From Conts: Cost Pressures</u>	<u>To/From Conts: New Monies</u>	<u>Alloc To/From Conts: Savings</u>	<u>Funding Transfers</u>	<u>Alloc from Earmarked Funds</u>	<u>Alloc from Change Fund</u>	<u>Alloc from R&R Fund</u>	<u>T/Fs Between Depts / Conts</u>	<u>Dept Totals</u>
	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>	<u>£000</u>
General Fund Services										
Contingency to NS - ECB recruitment approvals August 2025 Various Refuse Collector posts				(146)						
Total Adjustments (General Fund)	0	0	0	0	2,058	3,069	16	80	0	5,223

REPORT TO: CITY GOVERNANCE COMMITTEE – 1 DECEMBER 2025

REPORT ON: CHIEF SOCIAL WORK OFFICER ANNUAL REPORT 2024-25

REPORT BY: CHIEF SOCIAL WORK OFFICER

REPORT NO: 247-2025

1.0 PURPOSE OF REPORT

1.1 This report brings forward for information the Chief Social Work Officer's Annual Report for 2024-25, attached as Appendix 1.

2.0 RECOMMENDATIONS

It is recommended that the City Governance Committee:

2.1 Note the content of this report and the Chief Social Work Officer's Annual Report for 2024-25 attached as appendix 1.

3.0 FINANCIAL IMPLICATIONS

3.1 There are no financial implications arising from this report.

4.0 MAIN TEXT

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).

4.1 The CSWO provides a strategic and professional leadership role in the delivery of Social Work and Social Care 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.

4.2 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. Responsibility for appointing a CSWO cannot be delegated and the officer also has a role in providing professional advice and to the Integration Joint Board (IJB).

4.3 National guidance requires that the CSWO presents and publishes an annual summary report for local authorities and IJBs 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.

4.4 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 contributing towards and responding to a range of national, regional and local developments. There are several highlights in the report alongside a description of ongoing challenges and priorities ahead. Some specific developments over the last 12 months have included:

- Response to the Care Inspectorate National Thematic Review of Social Work Governance and Assurance published in November 2024

- Implementation of a new local CSWO Governance Framework including a cross-cutting dataset to enhance oversight of levels of volume, demand, capacity and performance
- The first annual Strength in Practice event to help promote leadership visibility across the workforce and ensure clarity of governance, performance and support arrangements
- Implementation of Magic Notes in Children's and Justice Social Work to reduce administrative tasks and enable enhanced direct support to service users
- Continued implementation of a Newly Qualified Social Worker (NQSW) scheme and development of a new Supervision and Support Framework
- Co-location of the Adult Support and Protection First Contact Team with Child Protection services at Seymour House to promote an integrated Protecting People approach
- Progress with the implementation of a new ASP Pathway with key priorities of a shared vision, risk assessment tool and multi-agency meetings for the most vulnerable people
- Collaborative review of Children's Social Work working hours designed to maximise support to families at times of greatest need, including evenings and weekends
- Coordination of the Early Release Scheme for Short-Term prisoners in response to concerns about population levels in prisons

4.5 The 2024-25 annual report is also forward looking and identifies the key challenges and opportunities for the coming year. Further policy and/or legislative change specific to Social Work and Social Care are anticipated, alongside continued budgetary constraints and requirements to maintain support to vulnerable groups in all services. In this context, some key priorities include:

- Inform and respond to developments within the new National Social Work Agency which is currently operating in its shadow year.
- Implement a new Supervision and Support Framework across all 3 services areas and explore the expansion of Magic Notes or similar in Health and Social Care.
- Advise on quality assurance arrangements on assessments, plans and support and support arrangements for formal learning reviews and associated improvement activity.
- Coordinate enhanced support for care experienced children and young people subject to Compulsory Supervision Orders at home and in Kinship Care in Children's Services
- Implement an Improvement Plan on defensible community-based alternatives to custodial remands and custodial sentences in the Community Justice Service
- Respond to the findings and recommendations of the pending Care Inspectorate inspection on mental health services in Adult Services
- Work with all partners to explore opportunities to develop a cross-cutting prevention plan for vulnerable people including through the development of place-based approaches.

4.6 Over the next 12 months, there will continue to be a focus on the capacity, confidence and competence of the Social Work and Social Care workforce. This will include recruitment, oversight of the Newly Qualified Social Worker scheme, supervision and support, training and development, caseload management, absence management, team development, involvement in improvement activity and wider welfare supports.

5.0 POLICY IMPLICATIONS

5.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

6.0 RISK ASSESSMENT

6.1 This report has not been subject to a risk assessment as it does not require any policy or financial decisions at this time.

7.0 CONSULTATIONS

7.1 The Chief Officer, Chief Finance Officer, Heads of Service - Health and Community Care, Dundee City Council Leadership Team and the Clerk were consulted in the preparation of this report.

8.0 BACKGROUND PAPERS

8.1 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.

Glyn Lloyd
Chief Social Work Officer

DATE: 5 November 2025

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**Chief Social Work Officer Annual Report
Dundee City Council
2024-25**

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Introduction from the Chief Social Work Officer

I'm extremely proud to present the Chief Social Work Officer Annual Report 2024-2025. In my first full year in the role, services have continued to implement multiple new national policies or legislation whilst working within current and anticipated budgetary constraints, responding to changing levels and complexity of demand, managing risks, supporting teams, improving practice and meeting the varying needs of vulnerable groups from pre-birth to older people across our city.

Over the period, I've been struck by the level of commitment, flexibility and innovation across Children's, Community Justice and Adult services. Progress has been made with priorities identified last year in strengthening both CSWO and wider Protecting People governance arrangements; all services are improving foundational practice in assessments, plans and support; inspection grades improving in most areas; and performance exceeding national averages in several respects.

In my view, services are continuing to apply Social Work and Social Care values and practice to make major contributions to Council and Health and Social Care Partnership priorities, particularly in respect of addressing inequalities, promoting social inclusion and protecting people from harm. There have been some outstanding achievements, including Excellent inspection grades, services described as sector leading and others winning or short-listed for both UK-wide and Scottish awards.

The report shows how services are also increasingly focused on enhancing prevention and building community capacity to accelerate a shift in focus away from institutional care such as children's homes, hospitals or prisons. In doing so, they are working with partners and service users to jointly develop multi-disciplinary place-based approaches in our areas of greatest need. It involves a focus on enhancing the flexibility and accessibility of services, including during evenings/weekends.

We know there are continued challenges on the horizon, including financial constraints and levels of demand projected to continue to increase. New legislation in the Care and Justice (Scotland) Act 2024, the Promise (Scotland) Bill, the Domestic Homicide (Scotland) Bill and the Assisted Dying (Scotland) Bill are also on the horizon. It is imperative that we continue to empower communities, prioritise, support teams and enable them to build meaningful support to the people we serve.

Over the next 12 months, priorities therefore include a joint place-based focus on prevention; continued support to the workforce; enhanced targeted support to more vulnerable families; finalising a new Adult Support and Protection Pathway; responding to a pending Care Inspectorate inspection of mental health services to adults; and contributing towards reducing the growing prison population through defensible community-based alternatives.

Some Key Achievements in 2024-25

The Children and Families Service was a finalist in the UK-wide Local Government Chronicle (LGC) Awards 2024 for Our Promise

The White Top Centre received grades of 6 (Excellent) for wellbeing and leadership in their most recent service inspection.

Over 98% of patients were discharged from hospital without any delay and lost bed days reduced from 9,861 to 7,917

The balance of family-based versus residential care for children increased from 87.2% to 90.5%, now above the national average

The proportion of Diversion from Prosecution schemes completed successfully increased from 75% to 95%

99% of participants attending Save a Life suicide prevention training reported greater confidence in how they would approach concerns

99% of unpaid carers supported by the Carers Centre reported feeling their health and wellbeing increased after receiving support.

Children's Services case file audits showed further improvements with 94% graded as Good or better

Forrester Children's House received Very Good grades from the Care Inspectorate, describing their approach as 'sector leading'.

The What Matters to You initiative winning a COSLA Award on Community Engagement

Governance, Accountability and Statutory Functions

The Head of Service for Children's and Community Justice Social Work became the Chief Social Work Officer (CSWO) on 1st March 2024. They continue to have direct access to Elected Members, report to the Chief Executive and Executive Director of the Children and Families Service and hold regular meetings with the Chief Officer of the Integration Joint Board. They also meet other Social Work leaders, managers and front-line practitioners. They contribute towards strategic partnership meetings as follows:

- **Chair of the Our Promise Partnership**
- **Chair of the Community Justice Partnership**
- **Chair of the What Matters to You Advisory Board**
- **Member of the Integration Joint Board**
- **Member of the IJB Performance and Audit Committee**
- **Member of Child Poverty, Inequalities and Attainment Leadership Group**
- **Member of Chief Officer Group for Protecting People**
- **Member of the Children at Risk Committee**
- **Member of the Adults at Risk Committee**
- **Member of the Tayside MAPPA Strategic Oversight Group**
- **Member of the Tayside Regional Improvement Collaborative.**

The CSWO is a member of the national Social Work Scotland CSWO Forum and over the last 12 months, Chaired the Social Work Scotland Justice Standing Committee. As such, they are also a member of associated partnerships such as the national Criminal Justice Board and have opportunities to contribute towards national developments and cascade them locally. In doing so, they are supported by a Governance Group which brings together senior Social Work leaders across the city with a focus on:

- **Practice governance and continuous improvement**
- **Professional advice including where services are commissioned**
- **Workforce planning, learning, recruitment and support**
- **Making decisions relating to the curtailment of individual freedom**
- **Assessment and management of certain offenders who present a risk of harm**
- **Assessing, reporting and advising on mitigations for serious or immediate risks**
- **Assisting partners to understand the complexities of Social Work practice**

Governance Challenges, Opportunities and Next Steps

Going forward, the CSWO Group will maintain a focus on priorities in this report in the context of wider developments, including social care reform; the development of the new National Social Work Agency and Scottish Social Work Partnership; national and local Protecting People Committees and workstreams; and legislative and policy change. To avoid duplication, enable integration and maximise partnership effectiveness in the delivery of services, there will be a continued focus on streamlining governance, planning and reporting arrangements as far as possible.

In November 2024, the Care Inspectorate published the findings of a National Thematic Review of Social Work Governance and Assurance. It focused on how well governance and assurance arrangements support leaders to ensure statutory duties are carried out safely and effectively; enable staff to be supported and accountable; and assist staff to uphold Social Work professional values. The methodology included consideration of literature, structured interviews with key leaders such as Chief Executives and CSWOs and a workforce survey. Nationally, key findings included:

- Services sometimes finding it difficult to match supply with demand exacerbated by increased levels of complexity
- Concerns that traditional relationship-based practice was being replaced by transactional or episodic engagement with service users
- A new approach to tackle recruitment and retention, which has been especially problematic in rural areas.

Locally, some key findings included staff having confidence in supervision and raising practice concerns, good understanding of line management arrangements, confidence in helping people to access community-based services and up to date training in Adult Protection, Child Protection, Trauma Informed Practice and Risk Assessments. As there was less certainty about wider governance structures, mixed views about support for Social Work values and some uncertainty about the effectiveness of their work, the CSWO convened the first annual Staying Connected event.

This occurred in November 2025, was jointly delivered by the CSWO, Care Inspectorate and Social Work Scotland and involved teams from across all 3 service areas. It had a shared focus on national and local developments, practice, priorities, wellbeing and support. The outcomes from the event are being used by the CSWO Governance Group to clarify and communicate both national and local governance arrangements and promote transparent and accessible performance reporting within and between service areas. Further events will be held on a minimum of an annual basis.

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Service Quality and Performance

Children's Services

In Children's Social Work, over the last 12 months the Multi Agency Screening Hub (MASH) responded to an increased number of Child Protection referrals. In 2022-23, a total of 7,769 referrals, or around 148 referrals a week, were made to the hub by partners and members of the public. In 2023-24, this increased very slightly to 7,750, or 149 a week. In 2024-25, it increased again to 8,505, or 163 a week. This increase is partially attributable to a policy change stipulating that all 16–17-year-olds should be treated as children with concerns responded to under Child Protection Arrangements.

There was a slight reduction in the number of reported concerns for vulnerable pregnant woman from 187 to 174 but support to this cohort continues to be a key priority. In addition to existing support, this continues to inform the development of new initiatives both within Children's Social Work and with key partners for both infants and adolescents. The aim is to provide effective support to families before difficulties escalate and continue to reduce the number requiring alternative care, which has declined by 14% over the last 2 years. Developments include:

- **Revision of a Getting it Right for Every Child (GIRFEC) Delivery Plan to promote consistency in the organisation of Team Around the Child Meetings and Named Person roles**
- **Allocation of Whole Family Wellbeing Funding (WFWF) to the Tayside Council on Alcohol Birch Programme and Alternative Counselling services to support identified vulnerable pregnant women and other women at risk**
- **Work with NHS Tayside and Dundee University on the development of an Infant Pledge resource entitled 'Hello in There Wee One', promoting active listening and positive attachments between mothers and babies**
- **Allocation of WFWF funding to develop a co-located multi-disciplinary hub focused on enhanced information sharing and support to vulnerable young people in Child Protection or Youth Justice processes**

Following referral to the MASH, there was a small reduction in the number of families requiring more in-depth assessment by a Social Work team. Of those, the number proceeding to multi-agency Child Protection Planning Meetings decreased from a peak of 159 in 2023-24 to 99 in 2024-25. The number of new Child Protection Registrations also reduced from 136 in 2023-24 to 92 in 2024-25. As there were also 102 de-registrations over the same period, with decisions to remove a child from the Child Protection Register because risks had been addressed, this support is interpreted as being effective.

Bairns Hoose

To further enhance immediate responses to risks and prevent difficulties escalating, the service also continued to collaborate with partners in Angus Council, Perth and Kinross Council, NHS Tayside and Police Scotland to sustain a regional approach towards delivery of Bairns Hoose through extended Scottish Government funding. It involves enhancing support across the 4 Bairns Hoose 'rooms' of Protection, Health, Justice and Recovery. A full update is being prepared for the Children at Risk Committee in early 2026 and key developments over the last 12 months have included:

1. **Protection** – further upgrading the layout and facilities at the MASH at Seymour House to make it a more child-friendly environment and developing work with Speech and Language Therapists and Talking Mats to assist communication.
2. **Health** – additional capacity to carry out general GIRFEC assessments and specific Forensic Medical Examinations, along with training to NHST staff not accustomed to attending Initial Referral Discussions.
3. **Justice** – introduction of a new Scottish Child Interviewing Model (SCIM) to Police and Social Work teams to replace Joint Investigative Interviewing (JII) and improved links with the Procurator Fiscal and Court via a video link.
4. **Recovery** – commissioning longer-term flexible family support to assist children, young people and their parents/carers, which includes a focus on families being the key decision-makers in support received.

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Bairns' Hoose

Children and Young People Requiring Temporary or Permanent Alternative Care

Over the period, there was a marked reduction in the overall number of children and young people requiring temporary or permanent alternative care alongside continued positive changes in the balance of family-based versus residential care. It mirrors the development of targeted support to vulnerable families and efforts to return some children and young people from external residential care to their local community, school and family ties. By June 2025, the balance of care had returned to a high of 91%, above the national average. Some details are provided in the table below:

<u>Types of Care</u>	<u>31.03.2024</u>	<u>31.03.2025</u>	<u>% Variation</u>
Secure Care	0	1	100%
External Residential	17	17	0%
Internal Residential	20	24	20%
External Foster Care	83	73	12%
Internal Foster Care	83	76	-16%
Kinship Care	111	91	-18%
Prospective Adopters	21	27	29%
At Home	50	78	56%
Flat/supported Accom	4	11	150%
Grand total	389	398	2%
Balance of Family-Based	90.5%	89.5%	-1%
% Externally Placed	31.4%	31.5%	0.5%

However, a reduction in the number of Foster Carers from 109 in 2022 to 74 in 2025 has continued to mirror national trends and both a national recruitment campaign and local 'Ideas to Action Programme' have had little impact. The service is therefore currently considering the findings of a recent Scottish Government consultation on Foster Care and finalising a review of fees/allowances in the context of budgetary constraints and affordability. A review of commissioned services is also including support to Foster Carers as a key priority.

Adolescents

In relation to vulnerable young people and young adults, Children's Social Work services now lead a partnership Young People's Strategic Group. The current key priority of the group mirrors the findings of the Joint Inspection of Child Protection Services published in January 2022 and Significant Case Reviews into support to adolescents. It involves implementation of a new co-located city centre multi-agency service due to be opened in early 2026 alongside the development of a new operating model and practice pathways. A wider framework of support also includes:

- **Two new Supported Accommodation facilities**
- **All 16–17-year-olds responded to as children within CP arrangements**
- **Delivery of Functional Family Therapy to families with teenagers at risk**

Continuing Care and Aftercare

In Continuing Care, a young person can remain in the same care arrangement if they choose to until they are aged 21 years as part of a supported transition to adulthood. Over the last 12 months, the total number of young people wanting to remain in their care placement increased having previously reduced from 40 to 31 in 2023-24 back to 41 in 2024-25. This may partially be due to the service revising a protocol in response to last year's decrease, which now involves the Aftercare Team explaining options to young people sooner.

However, the number of young people receiving compulsory Aftercare up to the age of 21 years and discretionary aftercare up to the age of 26 years reduced. The former decreased slightly from 52 to 44 and the latter from 119 to 107, with a total decrease in young people receiving Aftercare support from 171 to 151. Typically, young adults might not wish to avail themselves of support, but the service is reviewing the extent to which the team remains sufficiently pro-active in identifying, tracking and offering appropriate support to care leavers.

Positive destinations for care experienced young people showed a small improvement from 70% in 2023-24 to 73% in 2023/24 but data for the 2024-25 period is not yet available. Whilst each year this figure is based on around 20 care experienced school leavers, it is still significant that they lag their peers and can struggle to maintain progress longer-term. It reinforces the importance of the Aftercare Team ensuring that they are sufficiently pro-active in their approach towards care leavers and the review will be informative.



Children and Young People with a Disability

Following a review in the last 12 months, the service has retained a specialist Children with Disabilities Team to maintain and develop specialist knowledge and skills. This requires effective partnership with adult services, schools and NHS Tayside colleagues, including in relation to their transition to adulthood. The team continues to support families based on assessed and identified need which includes the assessment for and coordination of Self-Directed Support (SDS). Currently, 140 families are in receipt of various forms of SDS and a new assessment tool ensures equity.

This forms part of an action plan in response to a national Care Inspectorate Thematic Review of Approaches Towards Children with a Disability, which the team contributed towards. The review identified a range of good practice within Dundee whilst noting a need for greater clarity and consistency of available support both nationally and locally. This has resulted in a national social work group being formed with a specific focus on children with disabilities. The service is represented at the group, which affords opportunities for sharing of best practice.

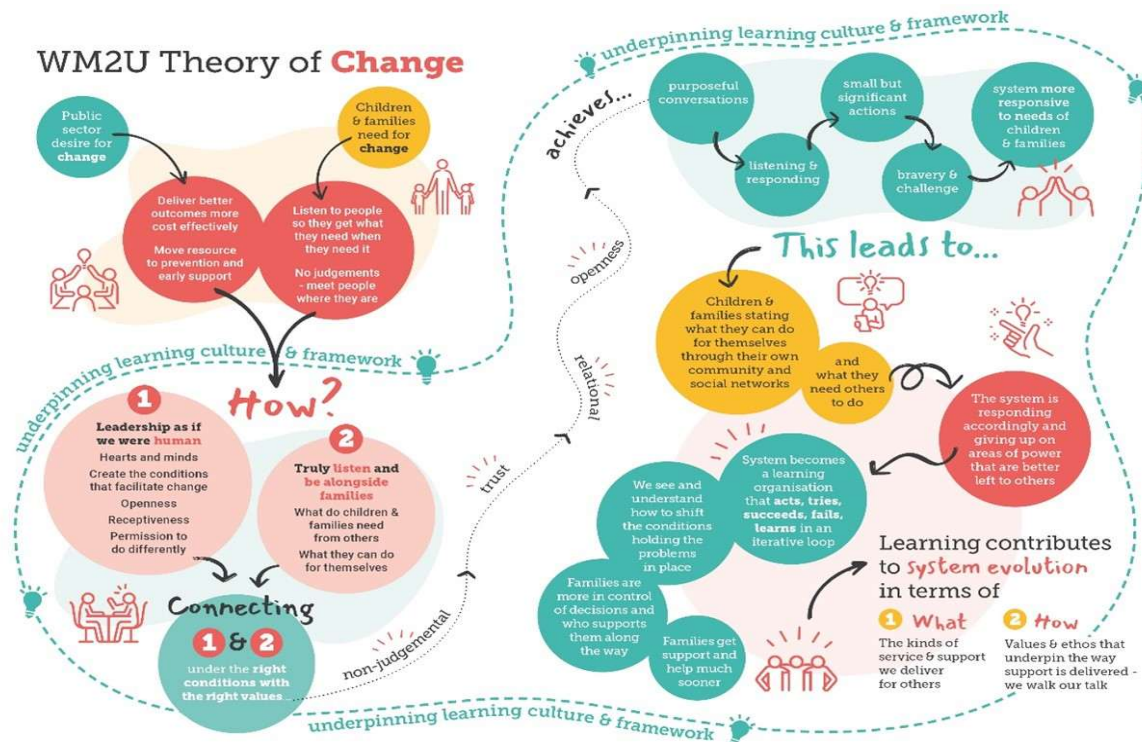
Unaccompanied Asylum-Seeking Children (UASC)

In 2024-25, 19 vulnerable young people newly arrived in the city without their parents or carers via the Home Office National Transfer Scheme (NTS) to be accommodated under S.25 of the Children (Scotland) Act 1995. As such, these young people were legally defined as care experienced and the service supported them to settle, integrate, access wider services and stay safe. As children and young people, they can also be protected where necessary by local Child Protection arrangements and services will continue to ensure they receive appropriate support.

What Matters to You

The Children's Service also closely involved in the development of What Matters to You in partnership with the Hunter Foundation, BBC Children in Need, Columba 1400 wider Council and other partners. This initiative places the voice, needs, aspirations and capacity of communities and families at the centre of engagement and support. It has been piloted in Lochee, Strathmartine and Whitfield, where engagement and support has occurred via Columba 1400 Values Based Leadership Experiences, Community Cafes, family sessions and other activities.

Families have reported a positive difference to their lives involving a greater sense of belonging, growing self-efficacy, heightened trust, improved emotional health and hope. The initiative has made further progress this year and Local Community Planning Partnerships will be instrumental in scaling and sustaining the approach. As the Hunter Foundation and BBC Children in Need will withdraw in June 2026, the Advisory Board is developing a plan to scale and sustain the initiative. **The approach won a COSLA Award for Community Engagement and Empowerment in November 2025.**



For our overall approach to The Promise, which involves a range of actions under the 5 foundations of People, Family, Care, Voice and Scaffolding, the service was shortlisted as a finalist in the UK Local Government Chronicle Awards 2024 in the category of Children's Services. There have been demonstrable improvements in support and outcomes. An Expert Panel consisting of UK-wide senior leaders commented on a **'strategic approach to improving outcomes engaging a variety of partners evidencing good progress in a challenging context'**.



Community Justice Services

In Community Justice, the service continued to deliver and develop a range of interventions across the criminal justice system to ensure that timely, proportionate and effective responses are available to people who commit different types of crime. For the first time in 4 years, levels of demand across most areas exceeded pre-pandemic levels, especially in relation to Diversion from Prosecution referrals. When all areas of demand are combined, the total in 2019-20 was 3,918 and in 2024-25 4,066. Comparisons with last year were:



In March 2025, there were 443 Registered Sex Offenders across Tayside and 185 in Dundee. The service continued to jointly assess, supervise and support these RSOs and 2 high risk of harm Violent Offenders under Multi Agency Public Protection Arrangements (MAPPA). This includes regular information sharing, reviews and joint interventions with Police Scotland, NHS Tayside and Neighbourhood Services regarding Environmental Risk Assessments. The framework provides partners with structured opportunities to ensure risks are appropriately understood and mitigated.

Over the period, the service also worked with the Scottish Prison Service and other national and local partners to coordinate the release of short-term prisoners subject to the Early Release Scheme triggered by Scottish Government in response to a growing prison population. Locally, this involved the early release of 20 people with less than 180 days remaining of their sentence, not convicted of either sexual or domestic abuse offences and subject to a Governor veto where there were any concerns about other risks of harm.

Adult Services

In Adult Services, all teams continued to respond to increased demand driven by demographic pressures involving increased scale and complexity of need. Integration across the whole system of health and social care services and supports has continued to underpin a strong focus on shifting the balance of care from hospital and residential to community settings, particularly the delivery of care and support in people's own homes. This shift will need to continue with an emphasis on ensuring that all people receive the type and quality of care they need.

Hospital Admission and Discharge

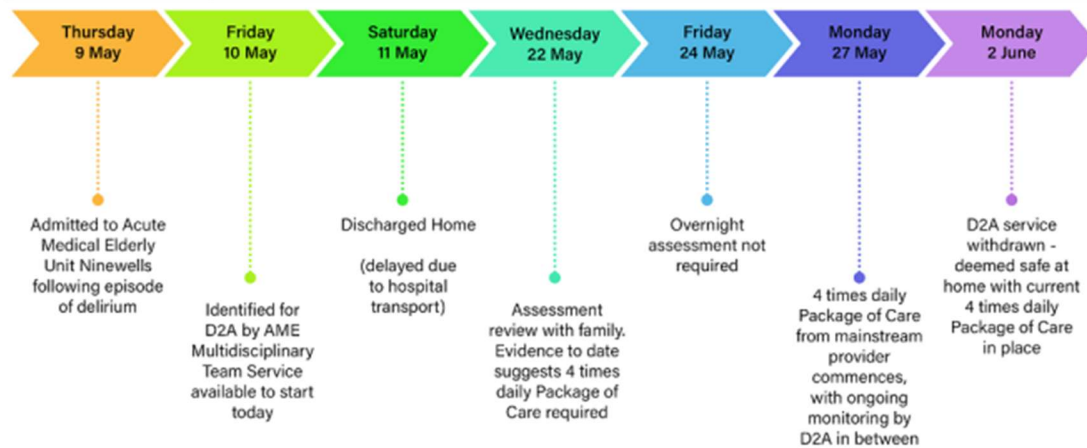
The rate of admissions to hospital for people aged 18+ continued to increase from 12,456 in 2019-20 to 15,124 in 2024*. Conversely, emergency bed days for people aged 18+ continued to reduce, from 113,813 in 2019-20 to 103,847 in 2024*. Moreover, 98% of people were discharged from hospital without delay and the number of bed days lost for people aged 18+ reduced from 9,861 in 2019-20 to 7,917 in 2024-25. Please note that Scottish Government has published calendar year 2024 data and are yet to publish financial year 2024-25 data.

The Discharge Without Delay: No Place Like Home Programme has ensured that frail older people spend as little time on hospital as possible, maintaining greater independence and preventing additional demand on social care services. Over the last year the Discharge to Assess Red Cross Service has been mainstreamed and from May 2024 focused its resources on supporting the timely discharge of patients from the Acute Medical Elderly unit within Ninewells Hospital. This has included at-home assessments and bridging the care gap for patients awaiting long-term care.

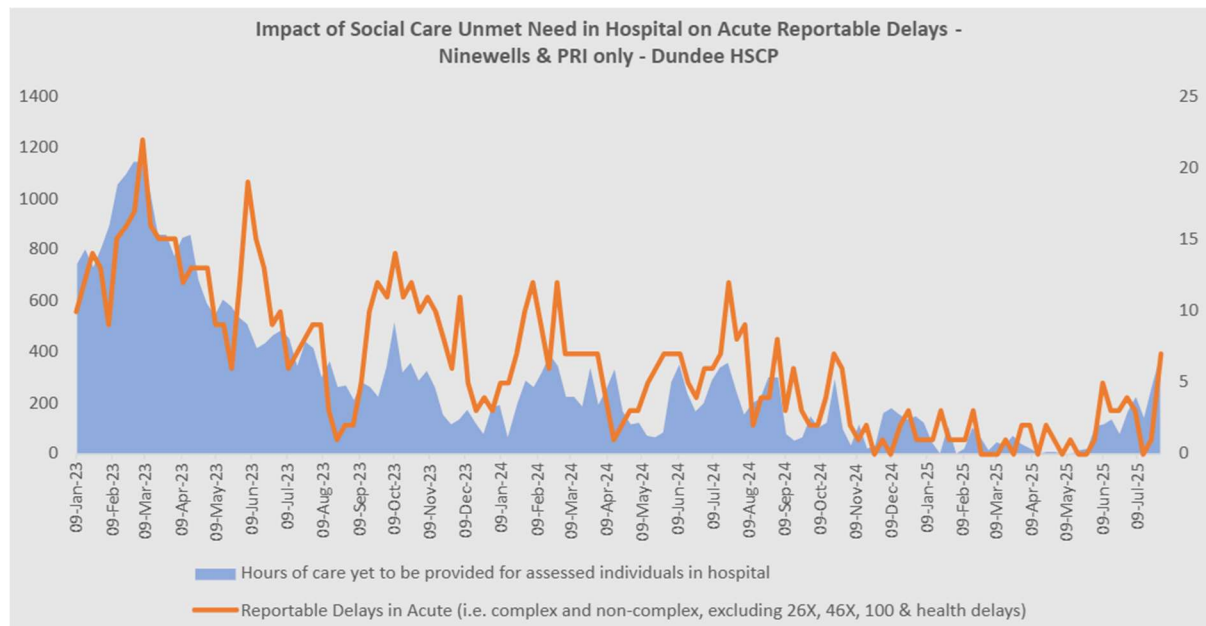
Discharge to Assess (D2A) Patient Pathway Example 1.



Presentation	<ul style="list-style-type: none"> Delirious/confused in the last few days and wandering. Son was struggling to manage at home. Diagnosed with a lower respiratory tract infection and commenced on oral antibiotics for this. Mobilising independent. Ongoing issues with confusion likely to be caused by infection and environmental changes. Awaiting Psychiatry of Old Age (POA) review in the community.
Length of time on Service	24 days
Outcome of Assessment	Remain home with Package of Care.



This focused work is an example of targeted prioritisation of support to key groups and has resulted in the partnership being recognised as one of the top-performing in Scotland, where it has evidenced a sustained reduction in bed days lost due to unnecessary hospital stays. As a result of the ongoing improvement work with the Partnership's Care at Home services, bed days lost to delay have gradually reduced over the year. In April 2023, 604 acute bed days were lost to reportable delays, compared to 12 in April 2025.



This work will need to remain a key priority for the IJB and partners, as in addition to growing admission rates the city has a high rate of readmissions for people aged 18+ where the patient had been discharged within the last 28 days. In 2019-20, the rate was 128 readmissions per 1,000 population

and 139 readmissions in 2024. It will need to include a concerted focus on slips, trips and falls, as the city also continues to have a high rate of falls related admissions to hospital for people aged 65+. The rate increased from 31.1 admissions per 1,000 in 2019-20 to 34.0 admissions per 1,000 in 2024*.

Carers

In 2024-25, the Carers Partnership finalised their Involvement Framework, which has been developed to actively promote engagement and participation of carers regardless of their age, background or characteristics of the person they are caring for. The partnership has undertaken activities such as targeted engagement with young carers and parent carers, a survey of the workforce and service providers and focus groups held in localities. This has informed a statutory review of the Carers Strategy, which is now being revised to reflect the changing context and priorities for carers in the city.

Mental Health

Over the last year, Hope Point has continued to provide accessible 24/7 support for people experiencing distress. During 2024-25, 1,078 new individuals were supported with 6,015 instances of support being provided. Feedback from people accessing the service reflects the impact on their lives:

“I am leaving much more uplifted than when I arrived. I am extremely grateful for your help. Hope Point is an amazing service, all the staff here do such a great job and you should be proud of yourselves in what you do.”

“It was good to speak to someone who has been through the same experiences, more personal instead of medical.”

“Exactly what I needed at the time, not someone trying to fix me, just being there, understanding and caring”

The **Working Better Together, Substance Use and Mental Health project** (funded by CORRA), commenced in 2022 with the aim of improving collaboration between substance use and mental health services. There has been a focus on listening to and learning from the experiences of individuals and families. A Multi-agency Collaboration Hub (MASCH) has been established to provide quick joint assessments to access services and an information sharing system has been developed to support this approach.

Since the implementation of MASCH to December 2024, 85% of the referred individuals received support from or are engaging with at least one other services for their identified co-occurring condition. Individuals supported report they can access a wider range of services, reducing risks of suicide and psychological harms.

“I am now getting specific support for my substance abuse with Thrive thanks to and this meeting and I'm on the waiting list for community mental health for more support”.

The **Mental Health and Learning Disability Whole System Change Programme** in Tayside has continued to make positive progress over the last year. One of the programme aims is to co-produce a model of care ensuring equitable, effective, treatment, care and support for people living in the community with complex and severe mental illness. A comprehensive and co-produced engagement plan has been developed to ensure all stakeholders are involved in shaping and ownership of the final model, and service design workshops have taken place.

Following the publication of the new national strategy in 2022, local arrangements to support suicide prevention were also revised. Suicide prevention has now been fully integrated as part of the remit for

the new Children at Risk and Adults at Risk Committees within the multi-agency protecting people structure.

During 2424-25 a key priority for suicide prevention has been enhancing the availability of multi-agency training. A new training alliance called Every Life Matters has been established (funded by NHS Charitable Foundation) and 652 people have completed training at informed (210 people), skilled (396 people) and enhanced (46 people) levels. Having completed training:

- **94% of participants reported increased knowledge of suicide risks and protective factors.**
- **99% of participants reported feeling confident in having sensitive and compassionate conversations about suicide.**
- **94% of participants reported feeling more confident to support someone at risk of suicide to develop a safety plan.**

Mental Health Officer Service

The Mental Health Officer (MHO) Service continues to experience a high demand in both areas of Mental Health and Adults with Incapacity (AWI). In respect of mental health, there has been a slight decrease in the number of all Orders compared to the previous year. There continues to be difficulties in the number of practicing MHOs but the service continues to try and maintain capacity. One new MHO has commenced in role, whilst 3 experienced MHO's have left the service over the same period. One of these is hopefully temporary. A further 2 will now start this year's MHO course.

In relation to Adults with Incapacity, requests for new Guardianship applications have increased slightly this year. The trend of increasing numbers of requests for reports related to renewals of Welfare Guardianship Orders has continued with this now a significant demand on resources. However, the overall capacity of mental health services continues to be a key priority, as well as work in relation to supervising private Welfare Guardianships. A training program by the MHO Service for AWIA has been rolled out to all Health and Social Care Teams and some in Children Services.

It is intended that all operational teams in Dundee will receive this training and that it will form a part of a rolling program going forward. The MHO Service in collaboration with our Learning and Workforce colleagues are developing a separate AWIA program for all Newly Qualified Workers as part of their supported year. Further developments will be informed by the findings of the current Care Inspectorate inspection of mental health services for adults, due to be published towards the end of 2025. It is anticipated that the inspection will confirm self-evaluated strengths and areas for improvement.



mental welfare
commission for scotland

Older People

Work to support older people was encompassed within approaches towards hospital admission and discharge; carers; and mental health. This this was augmented by specific initiatives focused on care homes, designed to enhance the experience of residents and their families. One such initiative was the **Dundee Activity Network (DAN)**, which aims to improve the quality of life and physical and mental health and wellbeing of care home residents by offering person-centred meaningful activity focused on the needs, interests and hobbies of residents.






Some benefits of being involved in the network include sharing good practice, activity ideas and resources; networking and support; training opportunities for care home staff; and collaborative working opportunities and inter-home activities. In September 2024, working in conjunction with Leisure and Culture Dundee and DVVA, the Network relaunched Going for Gold. The theme was the Dundee Olympics and care home, and daycare services took part in a variety of creative and physical activities. It was very well received by residents.

Drug and Alcohol Services

In 2024-25, 159 people were supported following a near-fatal overdose, with 75% of those people receiving contact from support services within 24 hours. In 2024, there were 46 drug-related deaths in Dundee, an increase of 8 deaths from the previous year and 36 alcohol specific deaths, an increase of 1 death from the previous year. These trends are concerning, involve a disproportionate number of women and often occur when people are at home alone. It is informing further improvement activity, including gender informed preventative support to women and naloxone training.

More positively, where people are accessing treatment and support the implementation of the national Medication Assisted Treatment (MAT) Standards was a key aspect of the work of the Alcohol and Drug Partnership in 2024-25. The national benchmarking report on MAT implementation was published on 17 June 2025 (see [MAT Benchmarking 2024](#) for full report) and demonstrated considerable progress:

	MAT 1	MAT 2	MAT 3	MAT 4	MAT 5	MAT 6	MAT 6 (& 10)	MAT 7	MAT 8	MAT 9	MAT 10
2022	Red	Provisional Amber	Provisional Amber	Provisional Amber	Provisional Amber	N/A	N/A	N/A	N/A	N/A	N/A
2023	Provisional Amber	Provisional Green	Provisional Green	Provisional Green	Provisional Green	Amber	N/A	Provisional Amber	Provisional Amber	Amber	Provisional Amber
2024	Green	Green	Green	Green	Green	N/A	Provisional Green	Provisional Green	Provisional Green	Provisional Green	N/A
2025	Green	Green	Green	Green	Green	N/A	Green	Green	Green	Green	N/A

	Red	2022	MAT 6 to MAT 10 were not assessed
	Provisional Amber	2023	MAT 6 and MAT 10 were assessed separately
	Amber	2024	MAT 6 and MAT 10 were assessed jointly
	Provisional Green		
	Green		

In terms of what this means in practice for local people with a substance use concern:

- ✓ **The number of days between people’s first engagement with services to assessment has reduced to 0.**
- ✓ **All individuals who would benefit from it are offered Harm Reduction support at the point of MAT delivery.**
- ✓ **Services retained and continued to support 91.3% of people in treatment for six months or more.**
- ✓ **All MAT delivery is psychologically and trauma informed; 89% of staff have completed appropriate tier one training.**
- ✓ **People can access MAT via Primary Care (including GPs and Community Pharmacies), with 27 people now prescribed OST through these arrangements.**
- ✓ **There is good access to Independent Advocacy and support in relation to housing, welfare and income.**

In addition to progress around the MAT Standards, other key developments led by the Alcohol and Drug Partnership include the development and implementation of a training programme on Cocaine Brief Interventions. Dundee has also continued to develop their whole family approach through a joint project with Scottish Families and the decentralised fund was allocated for a third year to support Local Community Planning Partnerships to work with local services to tackle stigma. This work will continue in 2025-26 and will form part of planned place-based approaches.

Out-of-hours Service

The Social Work Out of Hours Service (OOHS) continued to coordinate responses to vulnerable families and adults in crisis, in partnership with key professionals from Health, Police, Private and Third Sector Agencies. The service still covers both Angus and Dundee and in the last year provided the following services to local people:

- Responded to 4,621 calls and undertook 9,063 visits concerning children and young people across the Dundee area.
- Out of hours staff also OOHS responded to 3,966 calls and undertook 104 visits to adult service users in the Dundee area.

Resources

Given growing levels of demand and/or complexity in several key areas, alongside reductions to funding and intermittent recruitment challenges, most services have reported that resources were stretched at times and outline concerns about sustainability. This was mirrored in the findings of the Care Inspectorate thematic review of governance and it is recognised that there will continue to be financial constraints which require services to innovate and adapt. In 2024-25, the total Social Work budget was £144.775m:

Service Area	2023/24 Budget
Children’s Services	£38.312m
Community Justice Services	£5.305m
Adult Social Care Services*	£112,278k
Total	£144.775m

* Delegated to Dundee Integration Joint Board – net of funding transfer from NHST

Children's Services

Over the period, Children's Social Work continued to respond to financial pressures by adapting support to families where there is a risk of a child or young person escalating into external residential care; returning young people from external residential care to Children's Houses and Kinship Care; providing enhanced leadership and practice support to the Children's Houses; enhancing Kinship Care supports; developing internal provision of Supported Accommodation; and strengthening care planning arrangements for all children and young people.

The integration of management arrangements of Locality Teams and Children's Houses has resulted in a reduction in the number of young people being accommodated in external residential provision or Secure Care. The service invested in a leadership programme for Children's House Managers and this has led to the shared development of an overarching Improvement Plan designed to continue to build the capacity, competence and confidence of teams. One house also participated in a Winning Scotland Growth Mindset Programme which concluded:

- **'... staff who took part in the programme began approaching challenges differently. They focused on setting meaningful goals. Staying consistent and viewing setbacks as opportunities to learn rather than signs of failure. Staff described improvements in resilience, emotional regulation, communication and confidence'.**

The service also completed a review of Self-Directed Support (SDS) assessment processes, to ensure support is equitable and mirrors types/levels of need. It will enable this part of the service to operate within budget or use evidence from assessments to demonstrate and respond to any identified unmet need. A key part of this process entails the team confirming existing assets and supports available to families to provide a baseline on which any additional support needs to be coordinated or provided.



Community Justice

In Community Justice, there were no financial pressures in 2024-25 and the service continued to meet requirements via its ringfenced budget. However, following a Scottish Government led review of the Justice Social Work core funding formula and changes to the formula for the allocation of funding for the Caledonian Programme, challenges are expected in 2025-26. The service is therefore currently exploring contingency options to mitigate the impact of any reduction and ensure requirements can continue to be met.

Adult Social Care Services

In the context of a challenging overall financial settlement, the IJB continued to deal with increasing levels of demand associated with the requirements of people with disabilities, mental health and substance use issues, alongside the legacy impact from the pandemic and cost of living crisis. It reported a year end overspend of £7,216k, including £5,825k in social care budgets. Some key factors contributing towards these challenges include:

- Teams continue to experience vacancies because of recruitment and retention challenges, which has resulted in use of agency, overtime and sessional staff where necessary with a total of £3,150k spent over 2024-25.
- Increasing demand for community services for older people has resulted in increased hours for services such as Care at Home, which has also seen an overspend of £6,056k in 2024-25.

However, it should be recognised that the increased Care at Home activity has had a beneficial impact for in-patient services through significant and sustained reductions in Delayed Discharge, as well as reducing unmet need for service users in the community awaiting packages of care and minimizing unnecessary hospital admission.

Long-term financial sustainability and making best use of resources is critical to delivering the IJBs Strategic Commissioning Framework priorities at an appropriate pace and scale that matches the population needs but there are clear challenges. Continuous service redesign through transformation, collaborative working and further integration of services is critical.

Given the financial challenges during 2024-25 and anticipated demands and constraints going forwards, the IJB agreed a programme of savings and transformation activity to support the 2025-26 budget. The successful implementation of this activity across Social Work and Social Care services will be key to developing a sustainable service model which meets strategic priorities within existing resources, including financial, workforce and property.

Workforce

Recruitment and Support

The Social Work and Social Care workforce provides support to vulnerable groups in sometimes challenging situations. Teams frequently support people who have been traumatised and who, in various ways, may present a risk of harm to themselves, to others or from others. They are required to engage with service users and empower them whilst sometimes informing statutory decisions made by the Children's Hearing, Sheriff Court or Parole Board which may restrict their liberty, including in relation to Secure Care, mental health detention and enforcement of community sentences.

The workforce is therefore highly valued and currently consists of 1,325 people employed within the Children and Families Service (387) and the Health and Social Care Partnership (938). As an overview of their employment status, age, ethnic identity, recruitment, retention and absences in 2024-25:

- Over 99% are employed on a permanent basis
- Just over 12% of the workforce are aged 30 years or under
- Almost 45% are aged 51 years or older
- At 81% most of the workforce are women
- Over 5% identify as having a disability
- Just under 5% identify as being of black or minority ethnic origin
- Workforce leavers in children's and community justice services was 8.53%.

- Workforce leavers in adult services were 9.17%
- Just over 38% of new starts were aged 30 years or under
- Over 15% of new starts were 51 years or older.
- Days lost to absence was 22.67 days lost per FTE
- This is higher than the overall Council figure of 15.32 days lost per FTE
- There was an increase in working days lost across Children's and Justice Services
- There was a decrease in working days lost across Adult Services.
- There were less long-term absences at 81% compared to the Council at 85%
- The most common reason for lost days was mental health at 45.64%

It is therefore apparent that the workforce is under-represented across some of the protected equality characteristics and that absences from work continue to present a challenge. All services have been involved in broader developments to enhance welfare support to people in the workplace, encourage early responses to any emotional or mental health concerns, support teams to manage workloads through prioritisation and use of such tools as Magic Notes, ensure tasks are equitable and manageable and appropriately apply absence management procedures but this remains a priority.

The recruitment pattern also provides some indication that some progress is being made in addressing challenges related to an ageing workforce and a desire to increase the young workforce but this will also need to continue to be a priority, whilst building on a range of measures introduced to enhance support and retention:

- ✓ Collaboration with Dundee University to increase student placements
- ✓ Delivery of mandatory qualifications to meet SSSC registration requirements.
- ✓ Fair Work First Commitments, such as payment of the Living Wage.
- ✓ Introduction of the national Newly Qualified Social Worker (NQSW) Supported Year and Continuous Professional Learning Mandatory Learning activities
- ✓ Support with manageable caseloads informed by a Setting the Bar report
- ✓ Using Artificial Intelligence to record and transcribe assessments and support
- ✓ Ongoing [Navigating Individual and Organisational Resilience](#) workshops
- ✓ Ongoing [Reflection and Resilience](#) work with teams
- ✓ The Employee Health & Wellbeing Service SharePoint site wellbeing information
- ✓ The Scottish Government's [National Wellbeing Hub](#)
- ✓ An increase in the past year from 6 to 130 wellbeing ambassadors
- ✓ 21 of which are from across the HSCP and Children and Families Service.
- ✓ Trauma informed response to potentially traumatic events in the workplace
- ✓ Absence Review Learning
- ✓ Targeted focus group work where data indicates there are wellbeing concerns
- ✓ Able Futures Access to Work Mental Health Support Service
- ✓ A focus on race discrimination towards both the workforce and service users

Over the past year, services have continued to prioritise employee wellbeing through the dedicated work of the Employee Wellness Advisor. The service has offered confidential 1:1 support, team wellbeing interventions, and manager consultations. This has included bespoke sessions on burnout, stress and vicarious trauma with teams from across the social work and social care workforce. We have also held wellbeing roadshows and monthly themed events which have been aligned with national wellbeing and equality calendars – examples of events have included:

- Menopause Cafe
- Self-Care Week Yoga & Meditation sessions
- Grief Cafe
- Brew Monday: Wellbeing Workshop Virtual Brew Morning

- Time to Talk: Wellness Walk & Talk
- Heart Awareness Month: Cardiovascular Health Checks
- Celebrating Neurodiversity Week: Neurodiversity Workshop
- Endometriosis Awareness Month: Endometriosis Session

Services have also developed a comprehensive suite of resources which have included the Employee Health and Wellbeing SharePoint Site, referral pathways and training packs which have enhanced access to self-help tools and guidance. Feedback indicates improved awareness, confidence and wellbeing outcomes following interventions, with employees reporting increased satisfaction and a stronger sense of support in the workplace.

Training and Development

Protecting People Multi Agency Framework

In addition to general support, training is key to build the confidence and competence of teams and a comprehensive multi-agency framework was launched in February 2024 providing a basis of protection learning for all workers across the city. There is also now a greater emphasis on learning opportunities associated to equality and anti-discriminatory practice, including highlighting a new cultural humility module produced by colleagues at NES Scotland. In addition, we now have an equality section within the framework and as we review the framework, we are working towards making this section more visible to the workforce.



Going forwards, in addition to this generic training a training needs analysis will also be explored with Learning and Organisational Development. Teams across Children's and Community Justice Social Work and the Health and Social Care Partnership will implement Quality Conversations.

Additional Protecting People Learning Opportunities

Children and Families Risk Assessment Training

- A two-part workshop for practitioners from social work and education was launched to explore risk assessment and analysis. The workshops were developed and currently co-facilitated by the Learning and Organisational Development Service, Social Work Senior Management and Educational Psychologists.

Child Protection e-Learning Modules and Online Resources

- A range of new online e-learning resources and guidance relating to Child Protection has been introduced which has included 'Working with Resistance in Child Protection', 'Supporting Young People who Self-Harm: A Guide for School Staff & those Working with Young People', and a 'New Approach for Protecting 16/17 Year Olds in Dundee'.

Action Learning Sets

- A recent trial of Action Learning Sets focused on the issue of non-engagement in protection work. Participants reported the sessions provided them with a safe space to intensively reflect and be professionally curious in a supportive environment. The sets not only provided professional development but provided action plans for workers to test in practice in relation to the difficult topic of non-engagement and protection

IRISS Chronology Tool Pilot

- IRISS and the National Implementation Group have developed a chronologies tool designed to support reflective practice among leaders. The tool aims to foster critical reflection within leadership and across teams, with the goal of influencing practice and culture around the use of chronologies. The pilot phase in Dundee includes participation from both adult and children's services, and the work is set to continue through to the end of 2025.

Mental Health Legislation Learning

- A new SharePoint page has been launched to support practitioners in understanding and implementing mental health legislation. In addition to targeted face-to-face learning sessions on topics such as 'Crossing the Acts', our Mental Health Officer Team has created a series of short, recorded sessions covering specific aspects of the legislation.

Further programmes

- Council Officer Programme and Refresher Sessions
- Multi-agency Second Worker and Suicide Prevention full-day learning sessions
- Defensible Decision-Making learning Programme
- Adult Support and Protection, and Child Protection Awareness s

Adult Support and Protection Week

In 2025, the partnership again coordinated a calendar of events for Adult Support and Protection (ASP) Week. This included learning facilitated by the Learning and Organisational Development Service and multi-agency partners, covering key topics such as self-harm, independent advocacy, trauma-informed practice and the role of the Office of the Public Guardian.

Newly Qualified Social Worker Supported Year

In response to the national implementation of the Newly Qualified Social Worker Supported Year, we have continued to introduce and update the support and resources available to our Newly Qualified Social Workers (NQSWs). The introduction of the mandatory learning activities prompted us to review our monthly continuous professional learning (CPL) sessions and embed some of the learning activities into these sessions, encouraging opportunities for NQSWs to reflect and learn together. A further development in 2024/2025 has been the launch of our NQSW Mentoring Programme which involves NQSWs being matched with more experienced social workers, who are provided training and regular supervision to support NQSWs using a coaching approach.

Practice Learning

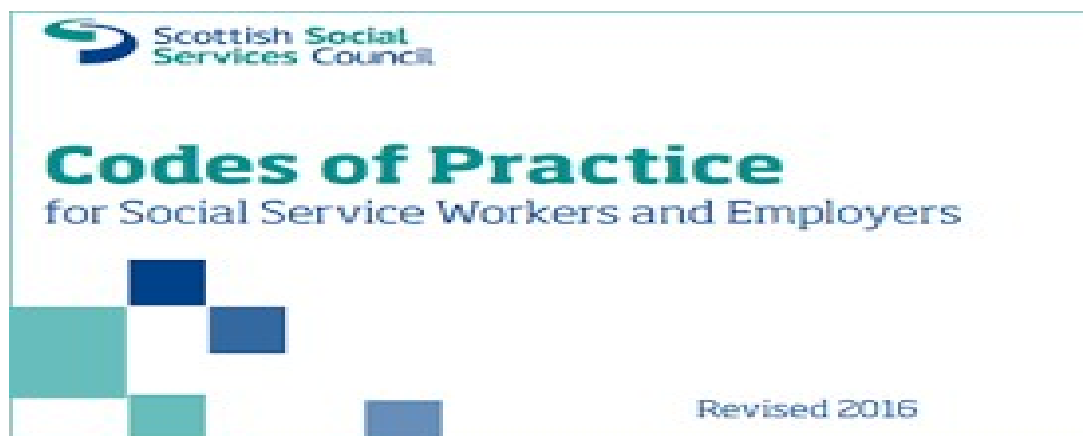
In 2024-25, services continued to work in partnership with Dundee University to increase our offer of statutory placements. We moved into the second phase of a test of change which involved a social work student being placed within one of our secondary schools, with additional learning opportunities from a social work team. Whilst we continue to test out this model, initial feedback and learning has highlighted benefits including the direct work with young people and families, the opportunity to build relationships and the importance of understanding roles in different settings.

Practitioner Forums

Our Practitioner Forums have continued to develop and provide opportunities for our workforce to learn together and be involved in service development and improvement activity. For example, the Adult Support and Protection (ASP) Forum has played a key role in shaping guidance and procedures to ensure they are reflective of current practice, fit for purpose and user-friendly for practitioners. Recent discussions around templates, policies, and guidance have led to the creation of a dedicated SharePoint page for Adult Services, providing practitioners with a centralised resource hub.

Scottish Social Service Council requirements

The Learning and Organisational Development Team have coordinated the delivery of vocational qualifications which enable employees to demonstrate that they can work to national occupational standards, along with academic credits to meet management registration requirements. In addition to professional Social Work training, this training ensures that the values, knowledge and skills of the workforce are maintained. It contributes to both the Council as an employer and the workforce meeting the SSSC Codes of Practice, which clearly outline joint expectations.



Inspection Findings and Improvement Actions Children's Services

Inspection of Children's Houses focus on Key Question 7 of the Care Inspectorate's Quality Framework for care homes for children and young people. It is comprised of a single key question with two quality indicators. The key question is 'How well do we support children and young people's rights and wellbeing?'. The quality indicators are children and young people are safe, feel loved and get the most out of life; and leaders and staff have the capacity and resources to meet needs and rights. Three of the houses were inspected last year and current grades and dates of all inspections are:

- **Craigie Cottage (May 2025)** - Very Good
- **Foresters House (March 2025)** - Very Good
- **Gilburn House (December 2024)** - Good
- **Drummond (April 2023)** - Good
- **Millview Cottage (October 2022)** - Good
- **The Junction (January 2025)** - Adequate
- **Fairbairn House** – not yet inspected

Adult Services

In total, 53 inspections were undertaken during 2024-25 across 44 registered adult services. This included 24 inspections carried out across 17 care homes and 29 inspections carried out across 27 other adult services. Four care homes operated by the HSCP were inspected during the reporting year.

Table 2 illustrates:

Table 1: Grade Received by Service	Care Homes		Other Adult Services	
	2024-25	2023-24	2024-25	2023-24
Number of Services Inspected	17	24	27	22

6 'excellent' in one or more key questions	2	12%	2	8%	0	0	0	0
5 'very good' in one or more key questions	8	47%	5	21%	15	56%	11	50%
4 'good' in one or more key questions	11	65%	17	71%	20	74%	17	77%
3 'adequate' in one or more key questions	7	41%	15	63%	8	30%	7	32%
2 'weak' in one or more key questions	2	12%	4	17%	0	0	0	0%
1 'unsatisfactory' in one or more key questions	1	6%	-	-	0	0	-	-

4 'very good' and above in all grades (initial annual inspection)	10	59%	9	38%	18	67%	17	77%
3 'adequate' or below in all grades (initial annual inspection)	7	41%	8	33%	9	33%	0	0%

The grading data evidence an improvement in grades between 2023-24 to 2024-25 for care homes. Particularly of note are the grades 5 'very good' and 6 'excellent'. Other adult services grades remained similar even although there was a 20% increase in the number of services inspected. Whilst other adult services did not receive an 'excellent' in any Key Question they also did not receive a grade of 'poor' or 'weak'. One inspected care home received a grade 1 (unsatisfactory) and the service has provided direction and support to ensure the home addresses requirements and areas for improvement.

Joint Inspection of Services for Children and Young People at Risk of Harm

This was published in January 2022 and services were graded as Good overall with 4 areas for improvement, which mirrored a local partnership self-evaluation. Progress over the last 12 months has included:

1. **Approaches to recognising and responding to concerns about risk of harm and providing support to young people were not as effective as those for younger children** - funding has been secured for a co-located Hub in the city centre to support young people and respond to complex needs through a joined up partnership approach and will ne open early 2026.

Developments in multi-agency approaches to this age group are overseen by Dundee's Young People's Strategic Group which consists of senior managers from across the council and partnership, including Third Sector. Learning and Organisational Development have supported those involved in the new initiative through development sessions and training in risk assessments.

The model will also involve collaboration with The Corner for sexual health services and with Employability colleagues to promote positive destinations for vulnerable young people on leaving school. A new infrastructure has also been put in place to support implementation of the Care and Risk Management protocol; leadership and management of Young People's Houses have been revised; Supported Accommodation facilities for Care Leavers have been extended; and a Transitions Protocol is being revised.

2. **Children and young people at risk of harm and their parents or carers were not consistently being supported to participate in protective processes** – a Child Protection Charter which mirrors the principles of Trauma Informed Practice was developed by young people and widely circulated across the multi-agency workforce. This involved several briefing sessions and agency leads being identified to embed the principles of the charter Further work in relation to the charter is now integrated into the protecting people engagement and participation subgroup.

The service has introduced a Mind of My Own app, which enables children and young people to comment on the support they receive in their own time. The Champions Board now operates in all 8 Secondary Schools and young people have participated in Columba 1400 Values Based Leadership Academies.

"I'm not the greatest with technology but I explained what Mind Of My Own is to a 15-year-old and he downloaded the app onto his phone - he enjoys having a way to communicate with me and working through some of the questions in his own time that he normally would avoid answering."

The service also continued to commission an independent advocacy provider in 'Who Cares? Scotland', who have a strong presence in the Young People's Houses. Feedback from young people indicates they value the support they provide in enabling them to present their views to inform professional decisions.

3. **The partnership did not yet have in place arrangements for the joint and systematic review of outcomes data to evidence the difference it was making to the lives of children at risk of harm and their families** – this has been a key focus and developments over the last year have included:

The Child Protection Committee Data Scrutiny Group has now been integrated into the Protecting People Performance Management (PMG) subgroup, however, quarterly reporting of the minimum dataset continues to the Children at Risk Committee. The PMG are in the process of developing an integrated protecting people dataset which will link all the protection datasets in a more effective way.

The Dundee and Angus Learning Review Project has taken place with a successful transition to the new approach to Learning Reviews. A Learning Review group is in place and now incorporates all learning reviews, adult, child and violence against women.

An integrated Quality Assurance subgroup has also been established within the Protecting People structure with responsibility for both single and multi-agency quality assurance activities. An overarching, integrated Quality Assurance framework is in development which will outline the approach

to triangulation of information from data, quality assurance and learning reviews and will include a focus on measuring outcomes and impact.

Joint Inspection of Adult Support and Protection

The Joint Inspection of Adult Support and Protection was published in November 2023. The inspection focused on two key quality indicators in the [ASP Quality Indicator framework](#) of key ASP Processes and Strategic Leadership. It graded both as Effective with clear strengths which collectively outweighed areas for improvement. Progress over the last 12 months has included:

1. **Improve the consistent application and quality of investigation, chronology and risk assessment templates** – key processes have been reviewed and updated guidance included within HSCP adult protection procedures. This has been supported by extensive learning and development activity, with a focus on Council Officers. Recording templates for both meetings and within case management systems have also been updated to reflect the revised guidance.

Multi-agency case file audits completed in October 2024 indicated that 74% of cases with a risk assessment were found to have a good or better quality of risk assessment. Small improvements were also found in the presence and quality of chronologies and the HSCP continues to work on this area as a priority in 2025-26.

2. **Adult support and protection guidance and procedures should be updated as a matter of priority** - HSCP adult protection procedures have been revised and are now available to the workforce, supported by learning and development resources. Large Scale Investigation guidance has also been fully reviewed and updated.
3. **Quality assurance, self-evaluation and audit activities were embedded but to varying degrees across social work services** - these captured areas for improvement but the approaches were inconsistent. Greater cohesion and strategic oversight were needed to ensure the necessary change and improvement.

The HSCP has developed, tested and then amended a peer audit tool, with final questions evaluating trauma-informed practice being considered for inclusion. The Protecting People Quality Assurance Framework has been drafted, and a range of specific quality assurance activities progressed, including:

- New learning review guidance and process implemented.
- Implementation of the National Minimum Dataset
- Development of a PowerBi dashboard for adult protection.
- Completion of multi-agency case file audit.
- Single and multi-agency audit calendar.

The final 3 areas of improvement, relating to strategic leadership and pace of change have been addressed as a group.

- The Partnerships Adult Support and Protection Lead Officer and support team should ensure they remain sighted on the quality of practice and prioritises the necessary improvements, including adherence to guidance, under its new public protection arrangements.
- The pace of strategic change and improvement needed accelerated. The Partnership were aware through joint inspection in 2017 that improvement was required across key areas of practice and strategic leadership. Their own audit activity had reached similar conclusion, but progress was limited in key areas.
- The Partnership should ensure that strategic planning and implementation of new initiative across key processes and strategic leadership are well resourced, sustainable and impact assessed.

Some key developments include the completion of work to transition from an Adult Support and Protection Committee to an Adults at Risk Committee; the launch of a new sub-group structure with a greater focus on quality assurance and improvement; the appointment of a permanent Lead Officer with a portfolio for adults at risk; re-development of the strategic risk register; review of COG membership and terms of reference; and a review of the HSCP internal oversight infrastructure for Protecting People work.

The development of the Adults at Risk Pathway was progressed with the establishment of the Adults at Risk Leadership Group, Team Around the Adult Workstream, Adult MASH workstream and resources allocated to the redesign of the Front Door Model for Health and Social Care Partnership. Implementation plans for these key pieces of work were developed and approved. With the appropriate infrastructure in place, the design and implementation work is now well underway with all partners.

Learning Reviews

During 2024-25, the Protecting People Committees focused on responding effectively to a rising number of referrals for Learning Reviews. The Dundee and Angus Learning Review Guidance provides a single process for undertaking reviews, applies to all types of harm and is aligned to national guidance. Overall, there were nine areas of work associated with active Learning Review activity. Seven new referrals for consideration of a Learning Review to be undertaken were also submitted to the Children and Adults at Risk Committees. Five of these proceeded to a formal Learning Review, 1 was not accepted as it did not meet the criteria and the other did not proceed but identified key actions for improvement plans. Of the five learning reviews that proceeded, they are currently ongoing and outcomes are pending.

Quality Assurance

Children's Services

For the last 4 years, Children's Social Work has been carrying out regular audits using a Care Inspectorate evaluation tool focused on the quality of chronologies, assessments, plans and support. The audits are undertaken by pairs of managers in the service and reports are completed on a quarterly basis highlighting key themes. The most recent audit in May 2024 found that 94% of files were rated as 'Good' or better, compared with 93% in the previous audit and 53% when the process commenced in 2020-21. It illustrates a clear trajectory of overall improvement, whilst confirming further support is required to improve chronologies.

Categories of case file audit tool	Number rated good or better	Percentage rated good or better
Overall	16	94%
Accuracy of Information	25	88%
Assessment	16	94%
Chronology	11	65%
Care Plan	13	76%
Supervision/ Support	11	65%

The service-wide audit programme has been expanded to include quality assurance of family-based care, where results have been mirrored in terms of percentages rated as Good or above. In addition to this, the service has also undertaken a specific case file audit of adolescent services, where 83% were rated as Good or above.

Community Justice

This auditing process is mirrored in Community Justice, where over 80% of Court Reports were assessed as being Good or better; 100% of LSCMI risk assessments were assessed as Good or better; and 70% of Risk Management Plans were assessed as Good or better.

Areas for improvement were noted as ensuring all relevant documentation is uploaded and available on the case recording system and increasing the number of home visits in line with National Standards and Objectives. These are being progressed by the Service Manager and management team.

Adult Services A multi-agency audit of Adult Protection focused on cases where the adult had been the subject of an investigation or case conference (initial or review) in the year between September 2023 to October 2024. The tool required case file readers to consider all stages from duty to inquire onwards and asked whether all partners were involved, all relevant files were shared and what the quality of decision making, chronologies, risk assessments and outcomes were. The audit process identified some areas of strength:

- How partners work together to assess whether adults are at risk of harm. This includes how Adult Support and Protection legislation is applied and how inquiries are made to support the initial assessment of risk.
- How case conferences are used to identify, assess and manage risk and to plan supports for adults at risk of harm.
- How adult support and protection processes and supports make a positive impact of outcomes and quality of life for adults at risk of harm.

The audit also identified areas for improvement, including improving chronologies, risk assessments, information sharing and involvement of adults at risk and all relevant professional partners are each stage of the adult protection process. Significant work has occurred in the partnership focusing on improving chronologies and risk assessments. They have been improving:

- **Chronologies** - 60% were Good or better in 2020 and 82% in 2025
- **Risk assessments** - 67% were Good or better in 2020 and 74% in 2025

To continue to address the areas for improvement, the Partnership is focusing on two areas of work:

1. **Participating in a national pilot project alongside the Children and Families Social Work Service and IRISS focused on improving chronologies.** A reflective practice tool has been developed nationally which is now been implemented across social work teams. Team managers are leading discussions within their own teams and testing different ways of using the tool, meeting every six weeks to learn from each others successes and agree what needs to change to support further improvement.
2. **Working with multi-agency partners to implement a new pathway of support for adults at risk.** This includes a multi-agency risk management approach (Team Around the Adult) and a collaborative approach to initial assessment of adult concern reports (Adults Multi-agency Safeguarding Hub). It will also include co-location of Partnership staff with colleagues from Police and NHS Tayside to help promote joint working and communication.

Looking Ahead

This report has shown how our Social Work and Social Care services have continued to provide and improve support to vulnerable groups, including children on the edge of care; people subject to community sentences; people released from short and long-term imprisonment; people at risk of hospital admission or leaving hospital; older people; and people with substance use concerns.

In some areas, there have been some major achievements, such as our approach towards The Promise as a finalist in the LGC Awards, What Matters to You winning a COSLA award, Forrester House described as 'sector leading' by the Care Inspectorate, grades of Very Good and Excellent in adult care homes and performance in respect of MAT Standards and Delayed Discharge.

It shows a focus on providing crucial support to the workforce, with numerous measures on recruitment, induction, wellbeing, training, shared learning via quality assurance processes and joint responses to the findings of Care Inspectorate inspections of Child Protection, Adult Support and Protection and regulated services such as children's and adult care homes.

The Care Inspectorate national thematic review of governance and assurance arrangements has been informative and influenced the Strength in Practice event, where the professional values, practice, performance and improvement requirements will be further explored with the workforce across all 3 areas of Children's, Community Justice and Adult Services.

However, the report highlights some continued challenges, such as concerns about vulnerable pregnant women and babies/infants; Foster Carer recruitment; hospital admissions/re-admissions/discharge; mental health; and substance use. There are also some enduring workforce issues, including an under-representation of key groups, absence and recruitment challenges in some key areas.

The Care Inspectorate finding in the governance review that services are experiencing difficulties in matching supply with demand exacerbated by increased levels of complexity is mirrored locally and involves both financial and individual risks. There will also be further challenges as services respond to expected new legislative requirements across all 3 service areas.

It is therefore imperative that services continue to innovate and transform, whilst mitigating identified risks and escalating any current or anticipated concerns which cannot be addressed or tolerated. The CSWO will need to play a key role in this both nationally with Scottish Government and the new National Social Work Agency and locally with Elected Members and Chief Officers.

REPORT TO: CITY GOVERNANCE COMMITTEE – 01 DECEMBER 2025

REPORT ON: DUNDEE INTEGRATION JOINT BOARD – PERFORMANCE AND STRATEGIC PLANNING DEVELOPMENTS

REPORT BY: CHIEF OFFICER, DUNDEE INTEGRATION JOINT BOARD

REPORT NO: 344-2025

1.0 PURPOSE OF REPORT

To inform the City Governance Committee of the publication of the Dundee Integration Joint Board's statutory Annual Performance Report 2024/25, and of the key developments in relation to strategic planning for adult health and social care.

2.0 RECOMMENDATIONS

It is recommended that the City Governance Committee:

- 2.1 Note the content of this report, including the achievements throughout 2024/2 in the commissioning and delivery of integrated health and social care services (section 4.1.3 and 4.1.4).

3.0 FINANCIAL IMPLICATIONS

- 3.1 The Integration Joint Board's delegated budget consists of funding provided by Dundee City Council and NHS Tayside for the provision of community-based health and social care services. The services and priorities set out within the IJB's annual report and Plan for Excellence in Health and Social Care in Dundee, supported by the Health and Social Care Partnership Delivery Plan, are met from this delegated budget.

4.0 MAIN TEXT

4.1 Dundee Integration Joint Board Annual Performance Report 2023/24

- 4.1.1 Section 42 of the Public Bodies (Joint Working) (Scotland) Act 2014 states that Integration Authorities must prepare an annual performance report for each reporting year. A performance report is described as a report which sets out an assessment of performance by each Integration Authority in planning and carrying out its integration functions. The eighth annual report of the Dundee Integration Joint Board (for 2024/25) was published on 31 July 2025.

- 4.1.2 Over recent reporting years the Integration Joint Board has focused on the principle that the primary purpose of the annual report should be to evidence to the public in an open, transparent and accessible way the use of public resources to meet the health and social care needs of the population and the impact that this has on improving outcomes. This year advances in Adobe which allows embedding of interactive digital content led to a decision to produce the 2024-25 Annual Performance Report as a PDF file with hyperlinks to further reading embedded throughout the document. The published report is available at: <https://www.dundeehscp.com/sites/default/files/2025-07/DHSCP%20Annual%20Performance%20Report%202025.pdf>

4.1.3 Due to the availability of data for National Health and Wellbeing Indicators 11 to 20, which are produced and published by Public Health Scotland, it has not been possible to provide financial year data (2024-25) for all indicators. The Annual Performance Report therefore contains financial year data for indicators 15, 17 and 19 (last 6 months of life, care services gradings and delayed discharge), with all other indicators in this subset being reported against the 2024 calendar year. The report will be updated as soon as financial year data is made available by Public Health Scotland for all indicators.

4.1.4 The annual report demonstrates a range of achievements and challenges in the commissioning and delivery of integrated health and social care services throughout 2024/25. Some highlights include:

- The range of work undertaken to support the health and wellbeing of the workforce and to progress workforce planning. In 2024, members of the team from Oakland Daycentre presented at both Dundee City Council's Corporate Leadership Conference (a gathering of senior leaders from across the council, HSCP and LACD) and at a conference for all Wellbeing Ambassadors, showcasing their experiences of developing a culture of wellbeing within their team. Additionally, the council's Employee Wellness Advisor worked with Homecare, an area within the Partnership with higher-than-average sickness absence rates. Since starting in post in September 2024, the Advisor has delivered 33 Team Wellbeing Introductions, events or 1:1 support sessions focusing on topics such as burnout, vicarious stress and reflective practice.
- External scrutiny inspections continued to demonstrate a high standard of care delivered via care home and other adult care services. White Top (residential care home) received a grading of Excellent, and a number of other internally delivered services were graded as Very Good.
- The Partnership performed comparatively well with others across Scotland in relation to the proportion of last six months of life spent at home or in the community, number of days people spend in hospital when they are ready to be discharged, proportion of adults with intensive care needs receiving support at home, emergency bed day rates and a range of public perceptions measures related to support to live independently, influence over care and support provided, co-ordination or care and support, experiences of GP practices, impact of support on quality of life and safety, and influence in their care and support plans.
- Services have continued to work together to support early access to services and supports, and ensure people access the right help at the right time. GP Practices have had a specific focus on this area, with learning sessions for practice staff supporting them to help to navigate patients to the most appropriate primary care service. Six practices were also supported to test asynchronous (remote) consulting, reducing telephone traffic and freeing up time for staff to respond more quickly to other concerns and requests. Staff from Positive Steps assertive outreach worked jointly with Dundee Drug and Alcohol Recovery Service (DDARS) to support 159 individuals in crisis to access treatment services. Near Fatal Overdose Rapid Response and Assertive Outreach services ensured that 75% of those people experiencing a high-risk event during 2024-25 were contacted within 24 hours.
- Significant progress has been made to improve services and supports for people who use drugs and alcohol, and for people who have poor mental health and wellbeing. Through the Primary Care Mental Health and Wellbeing Programme a new website has been developed to help people to find and quickly access supports when they are in distress. Over 1,000 individuals have been supported via Hope Point over the last year, and the Multi-Agency Collaboration Hub (MACH) has provided quick assessment and access to services for people with co-occurring substance use and mental health needs. By December 2025, 85% of the people referred to MACH were receiving support from at least one service.
- An enhanced model of community based palliative care was developed and tested in Dundee between March 2023 and March 2024. The model was designed to support palliative and end of life care at home, or in a hospice setting, if people wished to avoid hospital admission. An evaluation of the project showed that the majority of people supported by this service died either at home or in Roxburghe House, and only a very small number of people died in hospital. The feedback from people and families who used the service was also very positive.
- The Carers Partnership finalised their Involvement Framework in August 2024. This is a framework designed to actively promote engagement and participation of

Carers in Dundee. 99% of unpaid carers supported by Dundee Carers Centre reported that they felt that their health and wellbeing increased as a result of receiving support.

- By implementing improvement measures aligned to the Discharge Without Delay workstream within the local Urgent & Unscheduled Care Board programme of work, Dundee has successfully and consistently achieved excellent performance in relation to the locally set targets and is consistently performing in the top five Health and Social Care Partnerships across Scotland.

The annual report contains a range of case studies and feedback that demonstrate at an individual and small group level the impact health and social care services have had on the safety, wellbeing and quality of life of people across Dundee.

- 4.1.5 The annual report also identifies a number of areas for improvement during 2025/2 and beyond. These are reflected in the strategic priorities set out within the IJB's strategic commissioning framework ([The Plan for Excellence in Health and Social Care in Dundee](#)), with a range of improvement work already progressing across Partnership services.

4.2 Statutory Review of the Plan for Excellence in Health and Social Care in Dundee

- 4.2.1 The Dundee Integration Joint Board's strategic commissioning framework was finalised and published in June 2023. The framework sets out the IJB's ambition and priorities for adult health, social work and social care services in Dundee, identifying a range of strategic shifts against which the IJB will allocate resources and direct the delivery of services.

- 4.2.2 Under section 37 of the Public Bodies (Joint Working) (Scotland) Act 2014 the IJB is required to have completed a review of the effectiveness of its strategic plan by 31 March 2026. This review must have regard to the views of the Strategic Planning Advisory Group and to the integration delivery principles and national health and wellbeing outcomes. To complete the statutory review the IJB must then decide whether to extend, revise or replace the current strategic plan. No timescale is set in the legislation for the preparation of a revised or replacement strategic plan should the IJB agree that this is required.

- 4.2.3 Whilst under section 37 of the 2014 Act it is the IJB who is responsible for carrying out the statutory review, in practice this process is led and supported by the Strategic Planning Advisory Group on their behalf. The Strategic Planning Advisory Group includes members representing the Council, alongside other stakeholders. This is therefore the key forum through which the Council can participate in, support and influence the review process.

- 4.2.4 The review process started in August and substantive work will be completed by the end of the calendar year. This includes a refresh of the IJB's Strategic Needs Assessment, review of progress against the Plan for Excellence to date and analysis of changes in the local, regional and national strategic environment over the last three-year period. Significant engagement activity has also been progressed with the workforce, organisational stakeholders and with members of the public (with a focus on people who use health and social care services and unpaid carers). As well as engagement activity specific to the statutory review, information from other engagement and co-production activities across the adult health and social care landscape has also been taken into account (for example, engagement to support the revision of the Carers Strategy and in relation to the ongoing review of Out-of-Hours Primary Care Services).

- 4.2.5 It is anticipated that a recommendation on the outcome of the review will be submitted to the IJB in February 2026. Should the IJB decide to either revise or replace the current Plan for Excellence there will be further opportunities for the Council to participate in the process of developing the relevant content.

5.0 POLICY IMPLICATIONS

- 5.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services, or funding and so has

not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

6.0 CONSULTATIONS

6.1 The Dundee Integration Joint Board, their Strategic Planning Advisory Group and care group strategic planning groups were consulted on the preparation of this report.

7.0 BACKGROUND PAPERS

None

DAVE BERRY
CHIEF OFFICER, DUNDEE INTEGRATION JOINT BOARD

DATE: 04 NOVEMBER 2025

Dundee Health and Social
Care Partnership

**Annual
Performance
Report**

2024-2025

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Foreword

2024/25 has been another challenging year however we are once again proud to present our achievements in our annual report.

The current fiscal challenges have led to many difficult challenges and concerns about current and future resource, but this has also led to transformational change projects to identify how we can enhance efficiency and productivity in response to those challenges.

We cannot make these service changes without engaging and listening to our fantastic staff, who are pivotal to delivering successful change, and also the people who use our services, their representatives and carers and our communities.

Many Dundee citizens continue to experience the effects of multiple deprivation and the associations this has with mental illness, drug and alcohol use, obesity and frailty associated with early diagnosis of long-term conditions such as diabetes and chronic obstructive pulmonary disease.

We will continue to work hard to ensure that services are accessible and are of high quality, are focussed on prevention and are designed around people rather than systems or services.

Improving access to services and treatments in communities will also mean using resources differently and this will mean; further integration with key stakeholders, considering different models of care and considering how we use digital technologies to make use of the right information and enhance the care of service users.

Our external commissioned care providers are an essential and highly valued part of our workforce, and we will continue to support the care market by ensuring that fair work principles are embedded in our approach to procuring services for our population.

This annual report is a snapshot of the achievements undertaken by our teams this year which will be built upon and expanded as we continually change and improve.



Councillor Ken Lynn
Chair, Dundee IJB



Dave Berry
Chief Officer, Dundee IJB

Who We Are

Established in April 2016 the IJB is the group of people responsible for planning, agreeing and monitoring community-based health, social work and social care services for adults. The Dundee Health and Social Care Partnership ('Partnership') is responsible for delivering person centred adult health and social care services to the people of Dundee in-line with the ambition and strategic priorities of Dundee Integration Joint Board. The IJB's ambition for health and social care in Dundee is:

People in Dundee will have the best possible health and wellbeing. They will be supported by services that:

- Help to reduce inequalities in health and wellbeing that exist between different groups of people.
- Are easy to find out about and get when they need them.
- Focus on helping people in the way that they need or want.
- Support people and communities to be healthy and stay healthy throughout their life through prevention and early intervention.

The Partnership consists of Dundee City Council, NHS Tayside and providers of health and care services from across the third and independent sectors. This includes all adult social care, adult primary health care and unscheduled adult hospital care.



The Plan for Excellence in Health and Social Care in Dundee, Strategic Commissioning Framework 2023-2033

As part of The Plan for Excellence in Health and Social Care in Dundee the IJB identified six strategic priorities that will be the focus for work over the next eight years, supporting them to deliver their ambition for health and social care.

Strategic Priorities



Inequalities

Support where and when it is needed most.

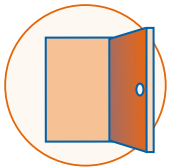
Targeting resources to people and communities who need it most, increase life expectancy and reduce differences in health and wellbeing.



Self Care

Supporting people to look after their wellbeing.

Helping everyone in Dundee look after their health and wellbeing, including through early intervention and prevention.



Open Door

Improving ways to access services and supports.

Making it easier for people to get the health and social care supports that they need.



Planning Together

Planning services to meet local need.

Working with communities to design the health and social care supports that they need.



Workforce

Valuing the workforce.

Supporting the health and social care workforce to keep well, learn and develop.



Working together

Working together to support families.

Working with other organisations in Dundee to prevent poor health and wellbeing, create healthy environments, and support families, including unpaid carers.

This Annual Performance Report, the ninth published by the IJB provides evidence against each of these Priorities by summarising key achievements, case studies and information about what people who use our services, their representatives and our workforce have told us about the quality and impact of health and social care services and supports.

Introduction



Dundee is Scotland's fourth largest city, with a population of 153,000 people (Source: NRS, 2024).



The city has an ageing population, with a 9% increase in the 75+ age group expected by 2028, lower than Scotland's 25% average. (Source: NRS, 2024).



21.6% of the population reported that they live with a long-term illness, disease or condition (Source: Scotland's Census, 2022).



Dundee has approximately 18,300 adult carers, and 830 young carers among its 20,936 children aged 4-17.



Life expectancy of males in Dundee is 74.6 and for females in Dundee it is 79.2 (Source: NRS, 2024).



Dundee is the 5th most deprived local authority in Scotland, with 36.6% of its population living in the 20% most deprived areas, leading to significant health and social inequalities (Source: SIMD 2020).



23% of working people in Dundee are employed by accredited Living Wage Employers.



2,690 people work directly for the Partnership, employed by Dundee City Council or NHS Tayside, and many more people work in the Third and Independent Sector, in services commissioned on behalf of the IJB.

Introduction



Over 4,000 people receive a service from the HSCP across older people and adult services.



On a snapshot day in March, 0 people waited in hospital and 138 people waited in the community for a social care assessment. One person was assessed and waiting for a care at home package in hospital (12 hours to be provided). Two people were assessed and waiting for a care at home package in the community (four hours to be provided).



The Partnership is one of the top performing in Scotland in Delayed Discharge. This means that the length of time people remain in hospital when they are well enough to return home is less than other Partnerships across Scotland.



30 people died of probable suicide in Dundee in 2023, with 22 of these being male and eight being female. (NRS, 2024)



Dundee has the highest rate of Drug Related Deaths in Scotland with 46 Drug Related Deaths in 2024, which is an increase of eight deaths from 2023. (NRS, 2024)



Dundee is one of the highest three Partnerships in Scotland for alcohol specific mortality rate with 36 Alcohol Specific Deaths in 2024 which is an increase of one death from 2023. (NRS, 2024)

Achievements



A change in the Pulmonary Rehabilitation model to ensure all patients taking part in Pulmonary Rehabilitation over all sites have access to COPD Clinical Nurse Specialist. This raises awareness and also identification of self-management issues which can also be supported.



Individuals presenting with acute mental health distress are now able to access physical health screening to ensure any reversible cause of distress (i.e. infection) is addressed promptly, in a trauma and mental health informed manner. This has addressed a significant health inequality for older adults with mental health conditions.



The 'home first' approach, prioritising care delivery as close to individuals' own home as possible has contributed to ensuring they remain in hospital only for essential treatment periods and are promptly transitioned back to their homes or community settings. This success was due to all partners working together to ensure joined up working and personalised approaches to individual health and care needs.



When people need support, especially when leaving the hospital, clearer steps and plans were developed to ensure that care continues smoothly. This involves different teams knowing exactly what to do and when, so people have a safe and supported transition.



Over the last year access to learning on equality and fairness matters increased. An Equality & Human Rights Workforce Learning Network was established and communication methods were reviewed and made more accessible. This included reviewing the way the IJB completes and assesses detailed Integrated Impact Assessments on all proposed changes that might affect protected groups.



99% of unpaid carers supported by the Dundee Carers Centre reported that they felt their health and wellbeing increased as a result of receiving support.

Challenges



Health and Care needs associated with high levels of multiple deprivation in the city, including high levels of drug and alcohol use, mental illness and multiple long term conditions and frailty at a younger age, create high demands on services.



Significant challenges resulting from demand exceeding budgets for social care is unsustainable. Unless this is addressed, delayed discharges, for instance, are likely to increase and would impact disproportionately on older people as the predominant users of services. This will also impact the wider population due to the impact this will have on acute beds. In the context of current resources, it emphasises the importance of transformational change in the way we prevent escalation of concerns and jointly design and deliver care and support.



Challenges continue to arise in ensuring that teams are situated locally and within communities. This has involved changing the roles of staff and requesting that they work in different ways. These changes require significant consultation with teams to ensure that they are supported through change whilst ensuring that models of service delivery are efficient and outcomes focussed.

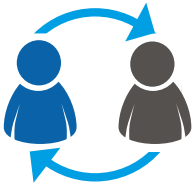


The scale and complexity of improvement and transformation required to keep pace with demand is significant and must be delivered within a reducing level of financial resources. This activity also requires co-ordination both within the Partnership and at the interface with Dundee City Council, NHS Tayside and other partner organisations, in order to ensure that high quality services are delivered at the right time and in the right places.



Although absence levels have started to reduce, they remain high and have a significant impact on workforce availability and the health and wellbeing of wider staff groups. There is a need to continue to focus on reducing absence levels whilst managing current absences.

Challenges



There are specific workforce availability challenges relating to Occupational Therapists, Social Care Workers and General Practitioners. Challenges are also experienced, to a lesser extent in relation to, Advanced Nurse Practitioners and Physiotherapists. This can impact the ability to provide an optimal service, particularly regarding the availability of appointments and workforce wellbeing. Services have used a range of approaches to support recruitment and manage vacancies, however the local position reflects national workforce supply challenges.



Challenges continue to present within Primary Care services, due to recruitment issues, inadequate infrastructure including IT and locations, and inadequate funding to fully implement the Primary Care improvement plan. If there continues to be huge pressure on general practice due to increasing demand and complexity of health needs together with the increase in GP vacancies due to retirement and recruitment and retention issues there may be challenges to meet the health needs of the population.



Cost of living and inflation impact on both service users and staff, in addition to the economic consequences on availability of financial resources. This is likely to have a significant impact on population health and the challenge this will present to the IJB in delivering its strategic priorities

Priority Areas for Next Year

- Publish a revision of A Caring Dundee Two Strategy for Carers.
- Ensure the delegated budget is targeted towards areas of spend which contribute to delivering the IJB's strategic priorities and delivers best value.
- Continue to shift the balance of care from bed-based models of care to community-based health and social care services.
 - Develop frailty focused Multi Disciplinary Team team, ensuring seamless care delivery across hospital and community pathways.
 - Create a Single Point of Contact for Urgent Care: Collaborate with partners to develop a unified access point for urgent care services, coordinating appropriate community-based support and enabling enhanced care closer to home.
 - Strengthen "Home First" Principles: Continue to build upon and promote the "Discharge Without Delay" (DWD) and "Home First" ethos, alongside the setting of realistic Expected Dates of Discharge (PDD).
 - Optimise Discharge to Assess (D2A) for Care Home Avoidance: Utilise data proactively to support a reduction in, or complete avoidance of, care home admissions from a hospital setting by maximising the effectiveness of the D2A service.
 - Transition to seven-Day Urgent Community and Allied Health Professional (AHP) Services: Move towards providing a seven-day service for urgent community care and AHP support to enhance responsiveness.
- Prioritise investment in early intervention and prevention for longer term impact on demand for health and social care services.
- Support the development of a whole system approach to improve food environments; ensure a healthy balanced diet is accessible and affordable to all; and improve population levels of healthy weight.
- Continue to work with statutory partners to develop the use of technology to enhance direct service user/patient contact and to support staff in the community to work in a more mobile way.

Introduction

- Set out clearly the eligibility criteria under which the local population can access the range of health and social care services available, including signposting to the most appropriate services where applicable.
- Increase the pace of major transformation programmes, and work with statutory partners, including neighbouring IJB's to identify wider transformation programmes within which health and social care services can benefit.
- Continue to focus on the longer-term sustainability of the ten Medication Assisted Treatment (MAT) standards, including immediate responses to non-fatal overdoses, to ensure fast and effective access to treatment, safeguarding people from drug-deaths.
- Continue to ensure the implementation of fair work practices in social care provider contracts.
- Strengthen mechanisms for member of the workforce to share their experiences and views regarding discrimination and make improvements to how incidences are recorded and reviewed.
- Continue to take an active leadership role in wider multiagency developments as part of the Protecting People Committees and Chief Officers Group.
- Continue to implement the Dundee Adult Support and Protection Inspection Improvement Plan six key recommendations for improvement.

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Tayside Primary Care Strategy 2024-25

The Tayside Primary Care Strategy 2024-25 was published.

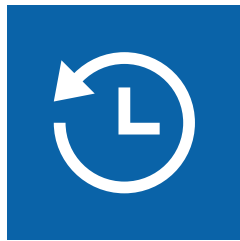
The Vision:

“To deliver excellent, high quality preventative Primary care in a sustainable way, improving the health and wellbeing of the population of Tayside”

What do we mean by Primary Care?



General Practice Services



Primary Care Out of Hours Services



Pharmacy



Dentistry



Optometry

Aims

Proactive and Community-Based Health & Wellbeing

- People will be supported to take more of an active role in improving and managing their own health and be better informed about which professional is best able to help them.
- Effective and efficient interventions, where needed, will be delivered in the right place, by the right person at the right time.

Independence, Care and Quality

- Care organised around populations, individuals and their carers, as opposed to organisations.
- Delivering the right type of care, in the right setting, based on people's needs.
- Primary care supports and enables people to achieve and engenders pride among those who work in it and respect by those who use it.

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Effective Resource Utilisation

- Fully integrated, highly skilled multidisciplinary and multiagency teams, are the first point of contact, delivering integrated, person-centred models of care, designed around the needs of our population, focused on prevention, self-care and shared health outcomes, delivered closer to home, utilising new technologies which minimise the need for hospitalisation or residential care, whilst improving workforce sustainability and resilience.
- A sustainable model of Primary Care, supported by appropriate estates, facilities.

The strategy has been developed with the following principles at its heart:

- **Person-centred.** The views of the population of Tayside will be routinely sought and will guide the development of the Primary Care system, putting people at the centre of service provision.
- **Empowerment.** Providing individuals with the opportunity to take greater responsibility for their own health and wellbeing.
- **Partnership.** Working collaboratively with the population of Tayside and the primary care workforce to ensure an integrated team-based approach.
- **Excellence.** Promoting excellence in service delivery and building on evidence-based practice.
- **Safety.** Ensuring that practice and services are of the highest possible quality.
- **Deliver best practice.** Ensuring that all services are affordable and delivered efficiently and cost effectively.
- **Equity.** Consistency in service delivery ensuring equity of access and treatment for those in need of services.
- **Outcome focused.** Aimed to achieve the priorities that patients/service users identify as important.

Further information about the Tayside Primary Care Strategy can be accessed [here](#).

Reducing Inequalities, Supporting Self-Care and Ensuring Services are Open Door

Dundee IJB General Practice Strategy

Dundee IJB has responsibility for the provision of the full range of general practice services across the city, working with NHS Tayside Board and Primary Care Contractors.

The scope of the Dundee General Practice Strategy is general medical services and services covered by the GP 2018 Contract and Memorandum of Understanding.

There is a national challenge to the sustainability of general practice which is reflected in Dundee. The contributing factors include:

- Increasing practice list sizes as practices close and patients are allocated to other practices. For example, Park Avenue Medical Practice closing as the practice was unable to recruit GPs to vacancies.
- There are challenges to workforce recruitment and retention across general practitioners, practice nurses and those with the skills needed to provide the services. Around half of Dundee practices have at least one GP vacancy. This is compounded by the numbers of clinical colleagues due to retire within the next five years.

The following activities have been undertaken to improve access:

Information and Education

- Care Navigation Training during May and June 2024. The purpose of this training was to build knowledge, confidence, and resilience in this front-line staff group to enable them to be better able to direct patients to the most appropriate services in primary care.
- Service specific training to increase knowledge about the services. Reception colleagues had opportunities to spend time with their colleagues to learn from each other, to discuss issues, achieve a better understanding of each other's perspective and develop relationships. For example, in June at the General Practice Learning Time event, the Sources of Support team shared with practice staff how their service supports patients.
- Televisions with media players have been installed into practice waiting rooms in order to share information about services and supports to improve health. Only one practice was unable to take part due to space and one is awaiting some remedial work to enable the install.

Reducing Inequalities, Supporting Self-Care and Ensuring Services are Open Door

Access to Appointments

The public consultation, undertaken as part of the GP Strategy, found that 66% of responses asked for improvements in accessing appointments. This is ongoing work but to date:

- Funding has been provided to enable six GP Practices to test asynchronous consulting. This is where a health assessment is done remotely, with the patient completing an online assessment form which is then reviewed by a clinician who responds within 72 hrs. By offering this alternative route it is anticipated it will reduce telephone traffic making it more straight forward for those that prefer to telephone and to support practices to manage incoming requests. Asynchronous consulting complements care navigation by signposting patients to the most appropriate clinical provider. For example, directing eye related concerns to a community optician as the first point of contact.
- All Practices in Dundee have an opportunity to test a digital solution called Medlink. It has a variety of functions, including the ability to do bulk text messaging, online medication reviews (for example, contraception checks), to share information with patients (for example, videos on asthma inhaler techniques) and the ability for patients to submit information (for example, blood pressure or blood sugar readings). Patients receive a message by text or email and respond by clicking on the link. Patients do not need to download any software. Evidence suggests using Medlink enables routine work to be done more efficiently including reducing unnecessary appointments.
- Self check-in has been tested in a few practices to enable patients to confirm they have arrived for their appointment at the practice. The clinician can then call the patient through to the consulting room. This frees up reception colleague time to answer and respond to other patient enquiries.

Mental Health and Wellbeing in Primary Care

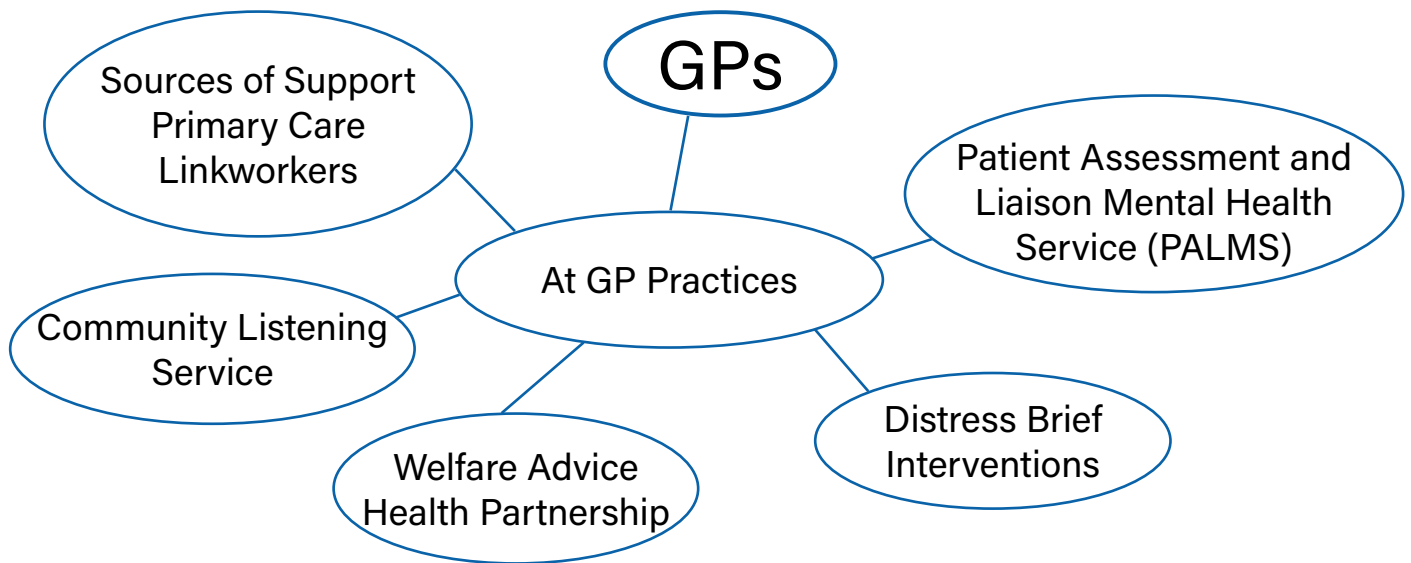
The Primary Care Mental Health and Wellbeing Programme aims to provide mental health and wellbeing services in Primary Care that enable people to access the;

- right support
- at the right time
- in the right place
- by staff who have the knowledge and skills to deliver this.

This is achieved through the Primary Care Mental Health and Wellbeing (MHWB) Framework utilising a multi-disciplinary team and collaboration with communities, third sector, and specialist services.

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General Practices currently offer:



Feedback from service users:

"Thank you very much for your support throughout the most difficult time in my life"

"Great service"

"Was lovely and supportive, made me feel very at ease and I felt this was a safe and good place to discuss some difficulties I had"

"This made me feel things will get better"

"She helped you to become less fearful and guilt free"

"It's nice to know that I no longer have to worry about money or barely making ends meet"

"I now have all the current support in place and a better relationship with my GP"

"I felt listened to and understood"



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Website Development

In November 2024 new pages were launched on the NHS Tayside website providing information about mental health and wellbeing support available at GP practices. The website also holds information for people who may be seeking support urgently while in distress. It also has an A-Z Directory of services available in Dundee to support mental health and wellbeing. A poster and leaflet campaign is underway to raise awareness of the new web pages and information sessions have taken place in person and across teams for local groups and services to attend. The website can be accessed by typing 'Dundee Mental Health and Wellbeing' into your search engine. Services can be accessed by phoning your GP practice.



Hope Point

HOPE Point is a partnership between Penumbra that provides peer support to people experiencing emotional distress.



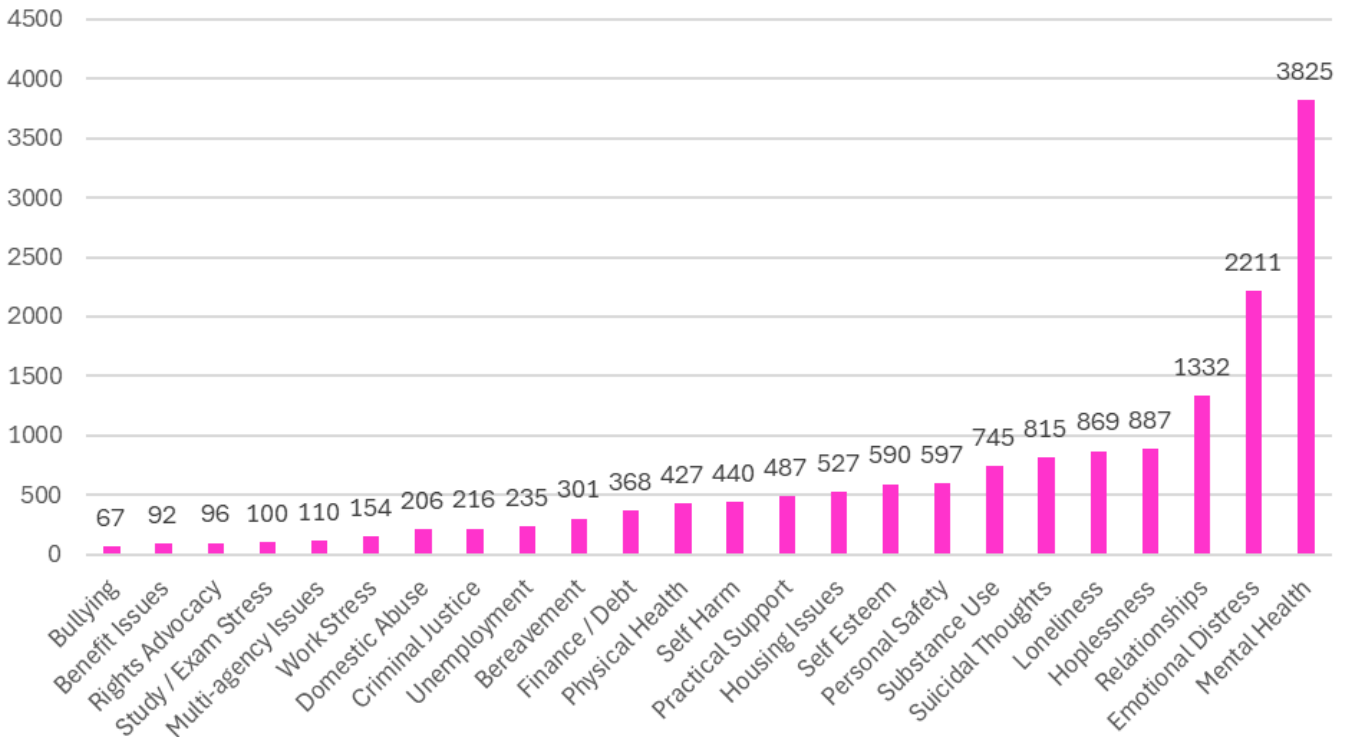
Hope Point has continued to provide 24/7 support for people experiencing emotional distress. An average of 75 new people each month accessed Hope Point during 2024-25. People cite feeling welcome, heard and understood and thus able to return for support when required. A significant milestone was the agreed pathway with Police Scotland becoming operational in October 2024. This allows for improved transitions for people requiring support due to distress, who do not meet the threshold for clinical input. In March 2025, Hope Point and Distress Brief Intervention partners were awarded 'Policing Partner of the year' at the Tayside Division, Divisional Commander's Annual Awards & Recognition ceremony for "delivering an outstanding level of performance in support of individuals in distress and experiencing mental health concerns".

Hope Point has been influential in a range of forums across the city. In particular, links with drug and alcohol services have been established and improved, ensuring that people experiencing both mental health challenges and substance use can receive timely, compassionate, and non-judgemental support. The service has continued to promote the support on offer via local networks and online platforms. Significant work has been undertaken with primary care colleagues, resulting in a continued increase of people being sign-posted for support by their GP practice.

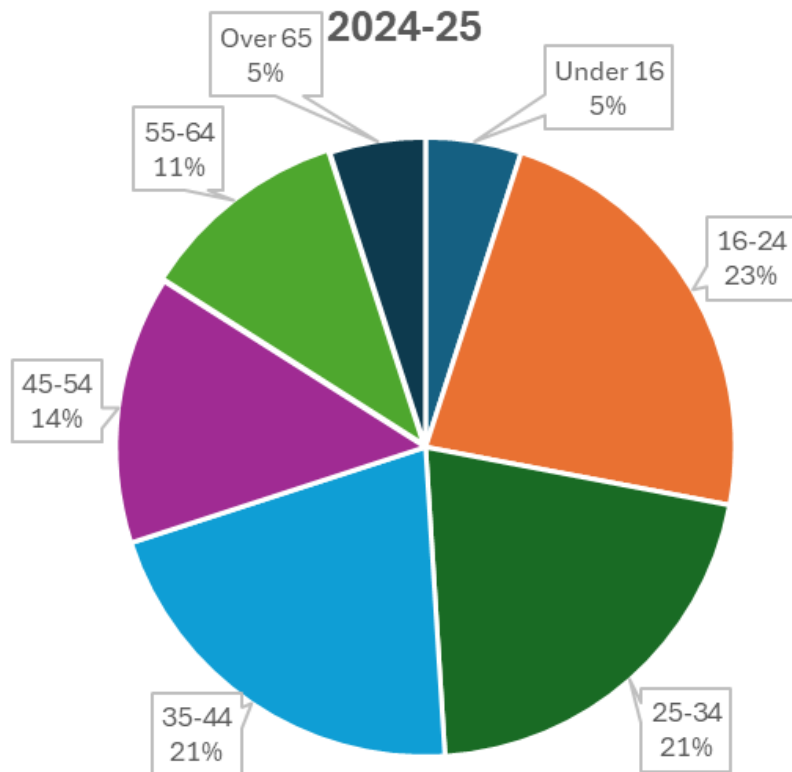
During 2024-25 1,078 new individuals were supported, with 6,015 supports carried out.

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Hope Point Reasons for Contact 2024-25



Hope Point Age Distribution of People Who Made Contact



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"I am leaving much more uplifted than when I arrived. I am extremely grateful for your help. Hope Point is an amazing service, all the staff here do such a great job and you should be proud of yourselves in what you do."

"It was good to speak to someone who has been through the same experiences, more personal instead of medical."

"Reaching out to Hope Point tonight was my final attempt to get help as I just didn't feel I could carry on with life. I feel so much better, our conversation has given me hope"

"Most amazing support in Dundee, thank you from the bottom of my heart :)"

"I have never experienced something that has helped me as much as Hope Point has"
"talking to you all made me realise that I was not alone, and my feelings were not that unusual or weird"

"I am extremely impressed by the quality of care at Hope Point Dundee, their kindness is outstanding"

"You have saved my life twice now, If Hope Point wasn't here, I don't know if I would be here"

"Exactly what I needed at the time, not someone trying to fix me, just being there, understanding and caring"

Community Health Advisory Forum

The Community Health Advisory Forum (CHAF) is a Dundee group who commit to learning about health and wellbeing and undertake health-related groups and activities in their local community. The Community Health Team support the group to meet monthly to share experiences and ideas, hear about local and national developments, and discuss how to take forward action that can help reduce health inequalities. Group members are actively listening to people living in the most disadvantaged local communities to find out what matters to them. Group members support Dundee Health and Social Care Partnership and other organisations to ensure that residents at higher risk of poor health and wellbeing are meaningfully involved in decisions. CHAF members undertake an accredited Health Issues in the Community Course, which explores topics such as social justice, democracy, and participation. They are committed to the inequalities agenda and use their own experience in addition to hearing from others. In November 2024, the group organised a city-wide drop-in information event to respond to the findings of the Engage Dundee Survey, which was attended by over 80 people.

The CHAF has contributed to several important developments in the city including the Suicide Prevention Delivery Plan, the GP Premises Strategy, the IJB Plan for Excellence, the Community Learning and Development (CLD) Plan, and mental health promotion materials. CHAF members also reviewed the information about services available in general practices.

Drug and Alcohol Use

Working Better Together Project (funded by CORRA)

The Alcohol and Drug Partnership continues to prioritise progress with the local implementation of the National Mission to reduce drug deaths. Focusing on the implementation of Medication Assisted Treatment (MAT) standards, access to residential and community rehabilitation, and a quick response to the high risk reflected in non-fatal overdoses. During the past year, individuals in Dundee had immediate access to treatment, they had more choice about treatment options and could remain in treatment for as long as they require. More people than ever successfully accessed residential and community rehabilitation, and those experiencing a non-fatal overdose received immediate support on an outreach basis.

The Working Better Together, Substance Use & Mental Health (WBT) project commenced in 2022 with the aim of improving collaboration between substance use and mental health services. The key focus was to help individuals affected by substance use to access mental health services. Some parts of the project focused on the specific needs of women and worked closely with Women's Services to develop support.

Throughout the project, services listened and learned from the experiences of individuals and families. The Multi-Agency Collaboration Hub (MACH) was developed to provide quick joint assessments and access to services for individuals. Information sharing systems were also developed, including considering data protection requirements, to ensure that up-to-date information was available to all relevant professionals. Since the implementation of MACH, by December 2024, 85% of referred individuals received support from or are engaging with at least one other service for their identified co-occurring condition. Individuals report they are able to access a wider range of services, reducing risks of suicide and psychological harms.

During this project an extensive programme of staff development and training was delivered. This was done in collaboration with Health Improvement Scotland.

The funding from CORRA has now finished but new, improved multi-agency approaches are in place, which will continue to be developed.

What people said

"I am now getting specific support for my substance abuse with Thrive thanks to [Thrive staff member] and this meeting and I'm on the waiting list for community mental health for more support."

"I just feel that people are understanding my difficulties better."

"I am more aware of what is going on to help me. Before, I felt like I was being kept in the dark at times."

During 2024-25 the ADP reviewed its Delivery Plan (originally published in 2023), updated some of the actions and monitored progress.



Reducing Inequalities, Supporting Self-Care and Ensuring Services are Open Door

The implementation of the delivery plan reflects the high priority given by all local partner agencies to tackling harm caused by drugs and alcohol and recognises the need to continue to work at pace to improve responses to people currently affected, alongside preventing future harm. Significant progress was made during the second year of the strategic framework (2024/25) towards achieving the five key priorities.

ADP members have continued to build on progress with all aspects of the Medication Assisted Treatment Standards achieving a green status in all ten standards in the latest benchmarking report produced by Public Health Scotland. Green status is given when there is evidence of full implementation and meaningful change in services.

Key developments under this work have been the expansion of the shared care pathways bringing further GP practices on board to deliver shared care and the development of the Multi Agency Consultation Hub (MACH).

The ADP continued to allocate funding to local organisations to develop trauma-informed spaces and the Trauma Steering Group are continuing to lead multi-agency work to develop both trauma informed leadership and practice. There has also been significant improvement, via the establishment of Dundee Women's Hub, in providing safe and supportive services to women. Looking beyond the implementation of the MAT Standards, other notable developments in drug and alcohol services during 2024/25 included:

- Services have created and implemented a training programme of Cocaine Brief Interventions to ensure a first line response to increasing cocaine use.
- Dundee's Recovery Network continues to thrive , the Lived Experience Framework developed, and a robust system for gathering evidence from those receiving MAT is in place.
- Independent Advocacy (IA) is available to all individuals accessing specialist substance use services. Individuals with living experience report that this support has been key to help them remain in services and have access to all the support they need.
- Dundee has continued to develop the Whole Family Approach through a joint project with Scottish Families.
- The 'decentralised fund' was allocated for the third year and continues to support all the Local Community Planning Partnership to work with local services to tackle stigma and ensure individuals feel welcomed by communities. The 'Year of Kindness' project, started in April 2024.
- Hillcrest Futures continues to work in partnership with Scottish Government and University of Dundee to progress the set up of the Drug Checking Service in Dundee, as one of the three pilot sites in Scotland. The service will be offered as part of Hillcrest's existing harm reduction services, with people submitting a sample of a substance to get an analysis of the types of drugs contained in it.

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We have continued to support individuals from Dundee in accessing residential rehabilitation. During 2024-25 11 people from Dundee accessed residential rehabilitation establishments. All these individuals are supported through the dedicated pathway to enter the residential treatment, during their stay and on their return to the community.

The Primary Care Drug Redesign Project continues to test ways of working to provide care for substance use patients. Currently three practices provide care for stable patients on Opioid Substitution Therapy (OST) and a fourth practice provides care for both OST and patients taking other illicit substances. The Practice Key Worker (from Hillcrest Futures or With You) is the patient's key contact. A further six practices provide holistic health checks to those on OST. Results include patient attendance almost doubling and non-attendances almost halving, one patient is no longer on OST and a number of patients are reducing their OST dose. Health checks include a patient diagnosed and treated for deep vein thrombosis, another for narrowing of arteries and another for menopause symptoms. This project involves many partners including general practices, psychological therapies, DIAS and the Public Dental Service.

Long-term funding has been allocated by the ADP to Positive Steps to support and develop the assertive outreach project. Staff from Positive Steps worked jointly with Dundee Drug and Alcohol Recovery Service (DDARS) to support 159 individuals in crisis to access treatment services. Near Fatal Overdose Rapid Response and Assertive Outreach services ensured that 75% of those people experiencing a high-risk event during 2024-25 were contacted within 24 hours.



Please click the [link](#) to watch the interview from STV News 26/03 which covers the current work being conducted through the Drug Deaths Deep Dive, highlights the importance of a gendered approach and the Welcoming Women Accreditation.

The video can be found at: https://www.youtube.com/watch?v=NisxBnP_UtQ

Community Sexual and Reproductive Health Team

The Community Sexual & Reproductive Health Team (CSRH) was created in 2024 to reduce sexual health inequalities. TSRHS is committed to improving access to care in all three localities in line with the Sexual Health and Blood Borne Virus Action Plan (2023-2026), Women's Health Plan (2021) and Dundee Health and Social Care Partnership Strategic Priorities 2023-2033. There is a focus on enhancing service delivery within a community setting in Dundee currently and expanding service provision in Angus. Meetings are planned to consider models of care.

The CSRH team strives to deliver training, development and support to enhance the capacity of key agencies and services to deliver a tier of sexual health care and assessment for vulnerable individuals. This will help ensure harm is reduced through improved access and early intervention. Sexual health services are being delivered by the nurse led CSRH team in community settings including emergency contraception, LARC, smears, STI and BBV screening and treatment.

Cognitive Decline/Dementia

Within the Older People Community Mental Health Teams, a Cognitive Behavioural Therapist (CBT) post has been introduced as part of the strategy to reduce reliance on the nursing and medical team within the service and to offer further psychological support to people over 65. The new post commenced in August 2024 and there has been 6 clinics every week held between Kingsway Care Centre (KCC) and home visits. A total of 162 appointments have been offered since the post commenced and the therapist has seen 29 new patients from the psychology waiting list, 10 of which have already been seen and discharged.

In addition to this, regular weekly Nurse Led Memory Clinics were held at Kingsway Care Centre. This resulted in waiting times being reduced from months to weeks allowing the nurses an opportunity to provide information and reassurance to patients and their families before being seen by the Psychiatrist for a potential dementia diagnosis. The newly qualified Advanced Nurse Practitioners were also able to assist the Psychiatrist and impart diagnosis if appropriate. This means that patients could be seen in a timely manner and a management plan be put in place to help them live well with the diagnosis.

The Partnership has successfully reduced the waiting list for accessing specialist assessment and diagnosis.

"A thank you note for being so kind to the both of us. You were very smart, professional, dedicated and heartfelt. Words seem inadequate to express the depth of gratitude. We hope to meet you again."

(Feedback from a family member regarding the Memory Clinic)



Reducing Inequalities, Supporting Self-Care and Ensuring Services are Open Door

Advance Nurse Practitioners (ANP) have been working closely with the Hospital at Home team to raise awareness of delirium in older adults. This has led to individuals with an acute delirium being successfully identified and supported in their home environment which prevented escalation to hospital services.

The teams have also been supporting Foundation Apprenticeships throughout the year meaning 5th/6th year school students who have expressed an interest in mental health have come to shadow the teams twice a week during a school term.

The Post Diagnostic Support (PDS) team have successfully completed the Care Co-ordination programme with Health Improvement Scotland (HIS). The programme consisted of quality improvement methodology, supporting robust development of theory of change, required to ensure that people living in Dundee diagnosed with dementia receive high quality post diagnostic support.

The PDS Team also facilitates Cognitive Stimulation Therapy groups which continue to be well attended and received, along with ongoing exercise groups. Groups are held in Community Centres and the Hub at Royal Victoria Hospital as part of community engagement and vision under Reshaping Non-Acute Care. A monthly drop-in session has also been created for anyone with a dementia diagnosis to ensure ongoing support is available once discharged.

[Dementia post-diagnostic support - NHS Scotland performance against LDP standards - gov.scot](#)



Psychology


'Hello In There Wee One' is a unique project and beautiful book, designed to support expectant parents to communicate and bond with their baby. The book is given to all expecting families across Dundee at their 16-week midwifery appointment, free of charge and has already reached 600 families. It has been translated into multiple languages, including Dundonian Scots. It was designed in partnership with local families, who worked with artist Louise Kirby at a series of workshops to develop the book.

Lesley Sharkey (Nurse Director Acute Services, NHS Tayside) said:

"Research shows and clinical practice tells us that babies' emotional health and wellbeing begins before they are born. Hello In There Wee One helps parents in Dundee find ways to bond with their babies before they arrive. This can help build strong bonds between babies and the important people in their lives right from the start, and supports infant development and mental health."

Beth Bate, Director of DCA said:

"We're delighted to have been nominated for Hello In There Wee One - this project is an incredible demonstration of the ways art and culture can support health, wellbeing and social care outcomes, through working in partnership with some of our most important services and institutions"



Hello
in there
wee one

Reducing Inequalities, Supporting Self-Care and Ensuring Services are Open Door

The English language version of book can be viewed here:

<https://indd.adobe.com/view/906e7871-0c70-4bfe-a6d8-5d7b61739394>

Please click here to access the book in alternative versions

[NHS Tayside](#)

Please click here to watch Hello in there wee one video:

https://youtu.be/e_OZotEsDTQ

This project was funded by the Scottish Government's Children's Rights Unit through CORRA. It brought together a collaboration of partners from NHS Tayside, Dundee City Council, Dundee Contemporary Arts and University of Dundee.

The experience and advice of professionals across Midwifery, Health Visiting, Family Nurse Practitioners, Infant Mental Health, Speech and Language Therapists, and Social Work teams was also used to develop the book.



Best Foot Forward

Best Foot Forward is a partnership between the NHS Healthy Weight team, Active Schools and 20 Primary schools in Dundee. It aims to encourage peer support and relationships between parents/carers, and to foster open and honest conversations around the challenges of achieving healthy eating and physical exercise day to day.

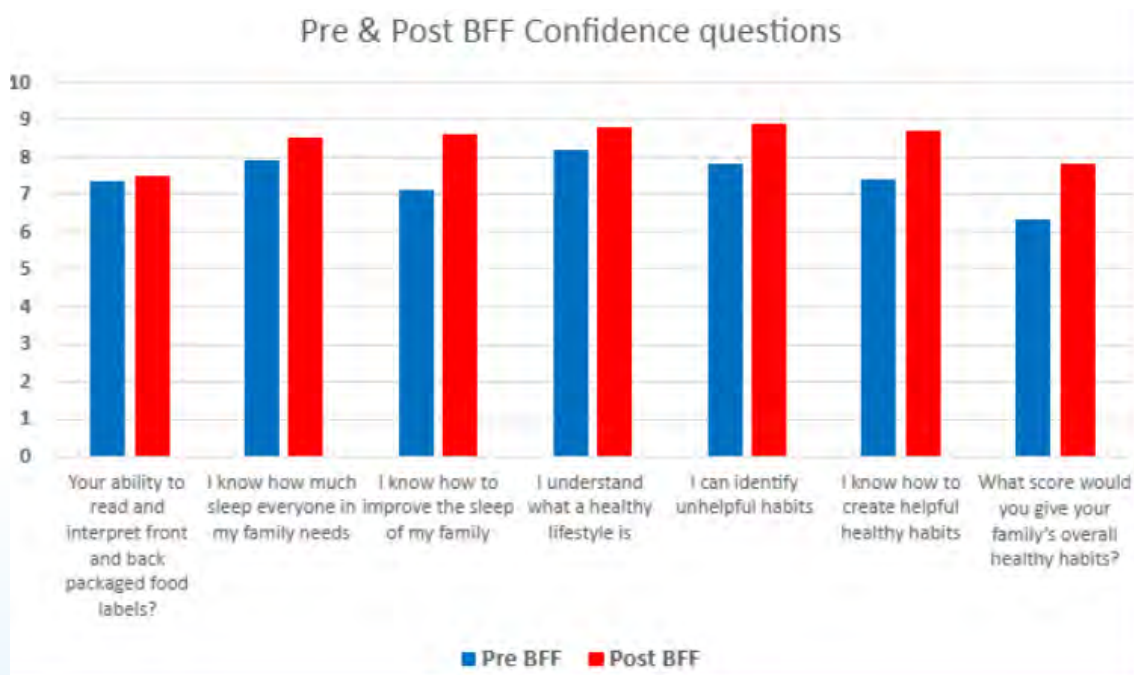
The sessions are 1.5 hours long with both adults and children attending together. Each week there are healthy snacks available for the families to try - rotating these so that participants will try new foods (various fruit and veg, oat cakes, dips etc.). Parents/carers were asked to sign up to the group if they felt this was an area of family life that they were interested in talking about/seeking support for.



Working in partnership with:

- Active Schools Tayside
- NHS Oral Health Improvement (Childsmile)
- Dundee FC Community Trust
- Arbroath FC Community Trust
- Saints in the Community
- Signpost International
- Heart Space Yoga
- Tayside Contracts
- Sustrans
- Fairfield Community Football
- Perthshire Rugby Club
- Kobudo Martial Arts
- West End Tennis Club
- Dundee West FC
- Camoy Growers
- Kanzen Karate
- Ancrum Outdoor Centre (bikeability)
- Baldragon Academy Swimming Pool

- 104 families have started Best Foot Forward.
- 88 families attended the group regularly.
- 44% of families live in the 10% most deprived data zones in Scotland and 82% of families live in the 30% most deprived data zones in Scotland.
- By the end of the programme families increased their number of physical activity days by one day compared to week one.
- Compared to the start of the programme 20% of families felt a lot more active.
- There was a reduction in screen time use by families.



Care Homes for Older People

Dundee Activity Network

The Activity Network aims to improve the quality of life and physical and mental health and wellbeing of care home residents through offering person-centred meaningful activity which is focussed on the needs, interests, and hobbies of residents.

Benefits of being involved in an activity network:

- Sharing of good practice, activity ideas and how to adapt, materials and resources.
- Networking and support.
- Training opportunities for care home staff.
- Bring information from the network back to the care home.
- Facilitates collaborative working and inter-care home activities such as Go4Gold.
- Opportunities to be involved in national initiatives.



Since September 2023, the DAN have held get togethers, events and some friendly competitions along the way. However, a wish of the network was to be able to relaunch the Going for Gold Event in Dundee, which last happened in 2019. Working in conjunction with staff from Leisure and Culture, Dundee and DVVA, the 2024 Going for Gold was relaunched on 6 September 2024.

The theme was the 'Dundee Olympics' and all care homes/daycare services that took part were tasked in the lead up to the games to get everyone involved to choose a team name, make a team badge and a flag that was decorated and represented the area of Dundee where the care home/daycare was situated. In the weeks leading up to Going for Gold, everyone practiced for taking part in the team events, which included boccia, football, golf, javelin throw, tennis, cup pong, basketball/netball, ten pin bowling and sport reminiscence. There was also a station set up for people to rest up and have a well-earned cup of tea between events.

Everyone was welcomed to the Menzieshill community hub by a piper before the care homes took part in the opening ceremony where everyone showed off the flags they had made before all competing against each other in the team events. There was lots of fun and laughter throughout the day, and STV News came along to capture what was happening on the day, which was televised that evening.

The day was brought to a close with the prize giving with each of the participants all receiving an Olympic medal and a certificate of achievement for every care home or change to daycare service that took part.

Trophies/certificates were given for the best scores from the team events on the day with Balcarres also taking home a celebration basket to be shared amongst all their residents.

The trophies will take pride of place in the winning homes throughout the year until the next Going for Gold in 2025.

6th September 2024
Dundee Olympics

20 Care Homes
& Day Cares

59
Participants

48 Support
Staff



Balcarres



Lochleven



St. Ronan's



Best Flag Design

- 1st Lochleven
- 2nd St. Ronan's
- 3rd Menzieshill



Best Team Name

- 1st Carmichael
- 2nd Clement Park
- 3rd Ballumbie



Best Badge

- 1st Riverside View
- 2nd Turriff House
- 3rd Mackinnon



Participant Feedback

"The whole event has been fantastic. Sign me up for next time!"

"More of the same please."

"Thoroughly enjoyed myself - very nice."

How would you rate the following?

Information provided before the event:

Not Good - 0 Ok - 1 Good - 3 Very Good - 16

The range of activities offered on the day:

Not Good - 0 Ok - 0 Good - 1 Very Good - 19

How the activities/stations were set up:

Not Good - 0 Ok - 0 Good - 3 Very Good - 17

Suitability of the venue:

Not Good - 0 Ok - 0 Good - 1 Very Good - 19

Participants enjoyment of the day:

Not Good - 0 Ok - 0 Good - 1 Very Good - 19

Working and Planning Together

The **Mental Health and Learning Disability Whole System Change Programme** in Tayside has made positive progress since its approval in June 2023.

The vision for the mental health and learning disability whole system change programme is in three parts reflecting different parts of the system and includes:

- Providing excellent care and treatment for people for whom inpatient treatment is the best option through a redesigned service model with strong evidence base;
- A co-produced model of care ensuring equitable, effective, treatment, care and support for people living in the community with complex and severe mental illness; and
- In partnership with commissioned providers, deliver Coming Home ambitions so that people with a learning disability receive the right support at home/community to maintain their health and wellbeing and minimise the likelihood of hospital admission.

There has been considerable progress in creating the conditions for whole system collaborative leadership and decision-making, improvements in the reporting of progress across partners, and better involvement and participation of people with lived experience across the programme. This is resulting in an integrated whole system change programme.

1. The model of care development aims to deliver a community mental health framework that integrates secondary, primary, and community mental health services. A comprehensive and co-produced engagement plan has been developed which aims to achieve whole-system, multi-sector and significant stakeholder involvement in shaping and ownership of the final model.
2. The V&A Dundee design accelerator workshops generated four ideas for whole system redesign, including crisis support, individualised care, alliance commissioning approaches and improved voice for people with learning disabilities.
3. The “Care and Share Together” approach is ensuring ongoing sustainable and meaningful engagement and is gaining traction with a dedicated co-production development officer. A co-production working group is preparing a framework based on the ladder of co-production, defining roles and expectations for service providers and users.
4. NHS Tayside is a national pathfinder site for Early Intervention in Psychosis (EIP) services. The EIP team has achieved positive outcomes, reducing inpatient re-admissions and improving engagement with the service and consideration for resourcing and roll-out is now required. In summary, the program is advancing toward a whole system model of care, emphasising community/place-based services, stakeholder involvement, and financial sustainability. The focus remains on improving and achieving excellence in mental health and learning disability services for people in Tayside.

Enhanced Community Care Model for Palliative and End of Life Care (PEOLC)

An enhanced model of community based palliative care was developed and tested in Dundee between March 2023 and March 2024. The model was designed to support palliative and end of life care at home, or in a hospice setting, if people wished to avoid hospital admission. A rapid response, multidisciplinary service was offered to people living in Dundee which provided urgent help with symptom control, holistic support and coordination of care with other community services. This team of specialists included a palliative care doctor, Macmillan nurses, health care support workers, physiotherapists and occupational therapists. An evaluation of the project showed that the majority of people supported by this service died either at home or in Roxburghe House, and only a very small number of people died in hospital. The feedback from people and families who used the service was also very positive. As a legacy of this project, Dundee Community Palliative Care Service now employs a permanent specialist palliative care doctor, who works closely with the Macmillan nurses and GP practices to support end of life care at home.

“The speed of delivery of equipment and medication was beneficial. The team were able to quickly build rapport and understand my Mum's wants as an individual...an outstanding service” (relative)

“Having someone checking in on us and able to action things quickly if required. Both medical and pastoral support has been beneficial and has provided practical advice and a calming effect on the situation” (relative)

“We appreciated the timely communication between all teams in, and having access to nurses in and out of hours” (relative)

“A wrap around service that was there when required” (relative)

“It is good to have the expertise from the team and they are more visible. Communication has improved and it is good to get prompt input when needed” (Community Nurse)

“The community palliative care doctor has provided excellent advice and support for the practice” (GP)



Suicide Prevention

Following the publication of the new national strategy in 2022, local arrangements to support suicide prevention were also revised. Suicide prevention has now been fully integrated as part of the remit for the new Children at Risk and Adults at Risk Committees within the multi-agency protecting people structure. Through agreement between Dundee Health and Social Care Partnership a dedicated Suicide Prevention Co-ordinator post has been established within the multi-agency Protecting People Strategic Support Team (hosted by the Health and Social Care Partnership) to lead this area of work, supported by colleagues across the wider team structure. Alongside other duties, the Suicide Prevention Co-ordinator has a lead role in supporting the development, delivery and evaluation of local suicide prevention delivery plans, aligned to both the national strategy and relevant local strategic plans and policies.

Dundee Suicide Prevention Delivery Plan 2024-2026 can be viewed [here](#).

Suicide Prevention Training in Dundee Snapshot Report 1st April 2024 – 31st March 2025

The number of facilitators to deliver and test a recommended training programme developed by NHS Education for Scotland and Public Health Scotland as part of their Mental Health Improvement and Suicide Prevention Knowledge and Skills Framework has increased. In the last year a new training alliance called Every Life Matters was also established in Dundee to build training capacity across a range of Third Sector organisations and wider partners including Dundee City Council, and the University of Dundee. This was funded for 18 months by the NHS Tayside Charitable Foundation to co-produce and pilot the initiative. The training figures above include participants from these programmes and the others as named below:

During 2024/25 the following levels of training was delivered:



- Suicide Awareness for Volunteers and Volunteer Co-ordinators (Informed)
- Let's Talk About Suicide (Informed)
- Save a Life Dundee (Skilled)
- Let's Stop Suicide (Skilled)
- Applied Suicide Intervention Skills Training (ASIST) (Skilled)
- Suicide Intervention and Prevention Programme (SIPP) (Skilled)
- Formulation Based Approach to Suicide Risk Assessment (Enhanced)

Working and Planning Together

Save a Life – Supporting People at Risk of Suicide

Save a Life is a one-day workshop that offers 'skilled level' learning using the NHS Education for Scotland/Public Health Scotland resources. It is aimed at non-specialist front line staff and volunteers working in health, social care, wider public and other services who are likely to have direct and/or substantial contact with people who may be at risk of suicide. Participants complete a post-training evaluation which found that:

94%

of participants reported increased knowledge of suicide risk and protective factors.

99%

of participants reported feeling more confident in having sensitive and compassionate conversations about suicide.

94%

of participants reported feeling more confident to support someone at risk of suicide to develop a safety plan.

Participants found safety planning the most useful element of the training.

Quotes from participants:

"Overall, all learning has been useful. I've come into this with no knowledge and feel I'm leaving with lots."

"What I found most useful was understanding how to start a conversation with someone I am worried about, and knowing the tools/resources available to help further."

"The session was delivered really well with it being both sensitive and informative."

Future Plans

In the coming year partners aim to:

- **Expand** the pool of suicide prevention trainers and increase the number of workshops available at informed and skilled level.
- **Streamline** and raise awareness of suicide prevention training to offer clarity and consistency for communities and organisations in Dundee.
- **Target** specific priority workplace settings such as schools and universities.
- **Extend** delivery for wider communities, including volunteers.
- **Improve** the evaluation approach to better measure the impact of training.

Carers

There are in the region on 20,000 unpaid carers living in Dundee.

99% of Carers supported by the Dundee Carers Centre reported.

'I feel my health and wellbeing has increased as a result of receiving support'
(Dundee Carers Centre)



The Carers Partnership finalised their Involvement Framework in August 2024. This is a framework designed to actively promote engagement and participation of Carers in Dundee. The framework supports involvement of carers of all ages, from varied backgrounds, caring for a diverse range of people. The framework recognises that engagement and participation methods need to take account of individual circumstances and the issues being considered.



Further information about carer involvement, including a draft of the Carers Partnership Involvement Framework can be found at:
<https://carersofdundee.org/carers-involvement/>.

Within the context of the overall Involvement Framework, the Carers Partnership has identified the following opportunities as being key to successful involvement of stakeholders in the statutory review process:

- Use of the Involvement Page on Carers of Dundee website to inform people of the statutory review and opportunities for involvement, including directed links to digital opportunities.
- Targeted engagement with young carers and parent carers, supported by Children and Families Services.
- Ensure that surveys of the workforce and partner agencies recognise that some employees will themselves be unpaid carers.
- Carers focus groups and support services continue to be provided on a locality basis with improved links to existing locality planning and involvement groups, such as Local Community Planning Partnerships, Health and Wellbeing Networks and the Community Health Advisory Forum.
- A public facing survey.
- Targeted engagement with age, health, and disability groups and with individuals and organisations representing people with protected characteristics.

Working and Planning Together

In addition the Carers Partnership has also achieved the following:

- Supported Health and Social Care professionals and associated workforce to proactively involve and seek the views of Carers when planning supports for the person they care for.
- Reviewed emergency planning procedures which includes information completed by and jointly held by carers, of which a copy is scanned to electronic records.
- Worked with Council Advice Services to identify carers who may benefit from a benefits check to ensure that their income is maximised.
- Improved and streamlined processes for Young Carers to be able to access a short break.
- Worked in partnership with Dundee City Council and schools to enable Young Carers to access peer support in school, college and their community to maintain attendance/ attainment and life balance.



Community Care and Treatment (CTACS)

Following on from the 2018 General Medical Council (GMC) contract, GPs identified aspects of their services that could be redesigned to allow practice staff to focus more time on managing patients with long term conditions more effectively. CTACS was introduced to be able to provide patients with person-centred treatment room care services.

The primary aim is to increase multidisciplinary team working and improve access to care and treatment at the right time, with the right person and closer to home:

- 34 wound clinics and 63 healthcare clinics are provided per week.
- The team comprises of 50 clinical staff and eight admin staff members.
- Admin staff respond to up to 10,000 incoming calls a month.
- Approx 7,500 appointments booked every month.

Feedback

"Fantastic service, all staff kind, caring and helpful. Felt listened to when describing my symptoms and previous wound healing experience. Can't thank you all enough"

"Excellent care and attention given to me by a variety of nurses for which I am very grateful."

Patients or staff can phone CTACS to be booked in directly for any wound care required including removal of sutures / clips. Patients can also phone and be booked in directly to have ear irrigation providing patients have been instilling ear drops for seven days.

Patients will be directed to the service from GP for chronic disease monitoring and non-urgent blood sampling, for example leg ulcer clinics and warfarin service require referrals into service from either GP or hospital staff.

Achievements

Two nurses qualified as Non Medical Prescriber (NMP), one nurse completed Leg Ulcer Management course, six nurses completed Tissue Viability Module, one nurse commenced NMP module, one nurse undertaking Ear Care Diploma. This is enhancing the anticipatory and preventative healthcare provided in the community and reducing the requirement for acute hospital care.

Winter Planning

The Winter Resilience Plan (NHS Tayside and Partner Organisations) 2024/25 was published and can be accessed [here](#).

The aim of the 2024/25 Winter Resilience Plan is to formalise plans and processes between Acute Services and Health and Social Care Partnerships to improve capacity and resilience during winter periods, when pressures on systems are at their greatest. This continues to build upon the design and delivery of a whole system framework for predicting, responding to and managing peak periods of unscheduled activity. This also focusses on whole system communication and responses to support both unscheduled demand and urgent and planned elective care.

A whole system Health and Social Care approach to develop an integrated plan is essential. The Tayside and Fife Health and Social Care Partnerships, the Scottish Ambulance Service (SAS), 3rd Sector, as well as staff side/partnership representation have been involved in the development of the plan to ensure timely access to the right care, in the right place, first time. Third sector involvement is provided through the Health and Social Care Partnerships.

Section five of the Winter Plan details the specific actions for the Health and Social Care Partnerships. The primary focus continues to be ensuring that individuals receive appropriate care, in a timely manner, in the most suitable setting, with the goal of preventing unnecessary hospital admissions and promoting swift discharge when readiness permits. This approach contributes to improved health outcomes and maximises resource utilisation.

Key actions for Dundee Health and Social Care Partnership include:

- GAP community discharge hub in place.
- An intensive programme of improvement has achieved a significant reduction in unmet care need hours through working with care providers to enhance efficiency. The focus is now on sustaining performance.
- A promotion campaign is being undertaken to encourage social care support workers to access vaccination services.
- A Self-Directed Support event was held for frontline staff on 4th September to raise awareness and identify opportunities for using different SDS options to deliver care at home.
- The Spasticity Service is now fully operational as a means of supporting further rehabilitative approaches for stroke and neurology patients in a community setting.
- There is ongoing development of the Community Rehabilitation Service as a means of shifting rehabilitation closer to community settings.

Working and Planning Together

- An improvement programme is being progressed across Dundee Enhanced Care at Home Team (DECAHT) focusing on:
 - Streamlining the process for transfer of care between in-patient services and DECAHT to support care closer to home.
 - Participating in optimising access workstream to ensure appropriate use of services to optimise early access to preventative approaches.
 - Reviewing practice-based Multi Disciplinary Teams (MDTs) to support early appropriate referral.
 - Promoting joint working between cluster consultants and GPs/ Community services to support care at home.
 - Implementing remote prescribing to reduce unnecessary travel time and optimise capacity.
 - Working collaboratively across the Medicine for the Elderly (MFE) pathway to implement medication reviews for those most at risk of negative impact of polypharmacy.
 - Ongoing review of patient pathways within the service to reduce risk, reduce duplication and improve the quality of service provided.
 - Supporting the completion of RESPECT documentation to ensure that ceilings of care are agreed with the patient and shared across the MFE pathway.
 - Continuing to embed the Cluster model to ensure MDT working across the MFE pathway.
- Implementation of locality working model in community nursing to reduce unnecessary travel time and optimise capacity.
- Discharge to Assess social care service has been re-focused on front door frailty wards within Ninewells. The service Team Leader works collaboratively with the ward multi-disciplinary team to prioritise how the service is most appropriately allocated to support early discharge and assessment in a home environment.
- Redesign of rehabilitation model on the Royal Victoria Hospital site aligned to excellence in care standards
- The Stroke Neuro Rehabilitation Pathway Redesign is in progress, aiming to deliver an interdisciplinary approach to deliver an outcomes focused personalised rehabilitation pathway.

Dundee Community Living

The Dundee Community Living Service continued to achieve high standards of care and support to vulnerable adults with a wide range of needs and helped individuals to achieve their outcomes. The outcomes varied from securing a voluntary job for some individuals to feeling comfortable and safe while receiving palliative care.

This is both a responsive and flexible service which has moved resources between different parts of the provision at very short notice to meet changing needs.

The service has focussed on employee wellbeing which has positively contributed to sickness absence levels by actively promoting wellbeing conversations, peer support and the sense of being valued by the service for each member of the team.

The service continues to collaborate closely with health colleagues, for example psychology, psychiatry, learning disability nurses, GP's, mental health crisis team, also with learning and organisational development team, social workers, police and other agencies. Effective collaboration with these partners provides learning opportunities for all involved and enables development of robust systems of support for individuals to minimise the incidents of reaching a crisis point and to enable people to live a fulfilled life.

The following are results from the recent annual stakeholder analysis:

- 100% of staff, supported people, families and involved professionals said that the service was either very good or excellent in treating people with respect.

In all interactions with supported people and families staff speak and listen in a person centred, courteous and respectful manner. Relationships of trust have been built up through regular discussions and communications.

- 100% of staff and involved professionals said that the service was either excellent or very good in following professional advice and treatment plans.

Staff team within Dundee Community Living have built and maintain effective multidisciplinary collaboration with professionals from different services and organisations to ensure we are meeting the health and wellbeing needs of our supported people. This includes multidisciplinary communication, risk management and collaborative learning events.

Working and Planning Together



"I enjoy my job and it has changed a lot for the better"
(feedback from staff member)

"Staff listen to me, have a laugh and joke and I know they are there for me"
(feedback from supported person)

"I find the staff work to the highest of standards and I cannot fault the dedication of them all" (feedback from family member)

"We would like to thank the staff for their kind and caring attention. They are brilliant"
(feedback from family member)

"Excellent support provided to service users. Staff have really good understanding of needs and knowledge of care plans. Senior staff are excellent"
(feedback from professions working with the service)

"Staff are excellent at communicating concerns surrounding service users. Families and professional agencies are kept informed very well"
(feedback from professions working with the service)

"Very good service and very apparent that the interests of service users are at the forefront of their practice. Welcoming service. Staff are knowledgeable, approachable and always keep me up to date as appropriate"
(feedback from professions working with the service)

"The staff team are very committed to providing a high standard of person-centred care"
(feedback from professions working with the service)"

There are plans to further develop in the following areas:

- To support staff to further develop their IT skills and become more confident with Microsoft 365.
- To continue developing multidisciplinary collaboration and using a range of learning opportunities to enhance staff skills and knowledge.
- To continue improving opportunities for wellbeing conversations, staff mutual support and support from management.
- To further develop staff understanding of outcome focused approaches and to embed it in our engagement with supported people.

Working and Planning Together



"My relative is being followed up by the CONNECT Early Intervention Psychology Service following a nine-week inpatient admission due to a first presentation psychosis. His world had crashed, and the future was uncertain. We were in uncharted waters.

Almost five months on due to the intense, regular input he has had from his nurse and OT, I can't believe the difference in him. He is back at work, and his nurse has supported him to break a ten year cannabis habit, which he used to self regulate his ADHD. He now accepts that cannabis is a trigger. He is taking his medication and now accepts he needs it, but there is a plan over a two year period to reduce his antipsychotic and restart non stimulant based ADHD medication.

Breaking away from his cannabis friends, the OT and Nurse have supported him to get back to work and introduced him to the SAMH Chrysalis Project. He is enjoying this and meeting other people which in time will support him to develop friendship groups. He also has had support worker and peer input at social group which again is supporting more positive social networks.

I am aware his nurse is now considering clinical psychology which I feel will address some of his issues around poor self esteem because of traumatic experiences earlier in life.

The staff from EIP have very much worked with us as a family, providing reassurance and support all the way.

His nurse is now facilitating with his Consultant Psychiatrist a return to driving.

Probably one of the most important things is that he has been scaffolded by both the Team and ourselves.

We cannot thank CONNECT EIP enough. In my opinion, their early timeous intervention is an investment and preventative measure to prevent a long term interventions and journeys within Psychiatry Services."

Discharge Without Delay : No Place Like Home

Discharge Without Delay is a whole-system initiative designed for frail older people currently accessing hospitals in Scotland. It integrates best practices, individual services, and care pathways into a cohesive model that prioritises delivering Comprehensive Geriatric Assessment (CGA) promptly. This approach ensures that patients experience no negative consequences from hospital-induced harm or dependency, while facilitating a smoother transition from hospital to home.

Overall acute, health, and social care spending will be more effectively controlled if frail older patients spend less time in hospital and maintain greater independence. This can be achieved by discharging patients without delay, minimising hospital-induced dependency, and preventing the over-prescription of social care services.

The Discharge without Delay programme has been in place in Scotland since 2023 and has four co-dependent workstreams.



Home First / Discharge to Assess

Aims to facilitate discharge from the hospital, without delay, for frail people, enabling them to undergo a more accurate and comprehensive assessment of their care needs in a more suitable, homely environment.

Please click [here](#) for campaign assets:

[Home First Video links Campaign Assets | Scottish Government Marketing News - Campaign Assets | Scottish Government Marketing News](#)

There has been collaboration with the broader health and social care system across Dundee and Tayside to champion a 'home first' approach, prioritising care delivery as close to individuals' residences as possible. This commitment is evidenced by the Partnership's consistently strong performance in minimising acute hospital delayed discharges, a proxy measure of whole-system efficiency. The Partnership is proud to be recognised as one of the top-performing Health and Social Care Partnerships (HSCPs) in Scotland in this regard, demonstrating a sustained reduction in bed days lost due to unnecessary hospital stays.

This is made possible with truly partnership working with all partners to ensure joined up working across health and social care across individuals' care journeys.

This achievement translates to tangible benefits for individuals, ensuring they remain in hospital only for essential treatment periods and are promptly transitioned back to their homes or community settings. This success underscores our dedication to a truly integrated, whole-system approach to care.

Working and Planning Together

Discharge to Assess (D2A)

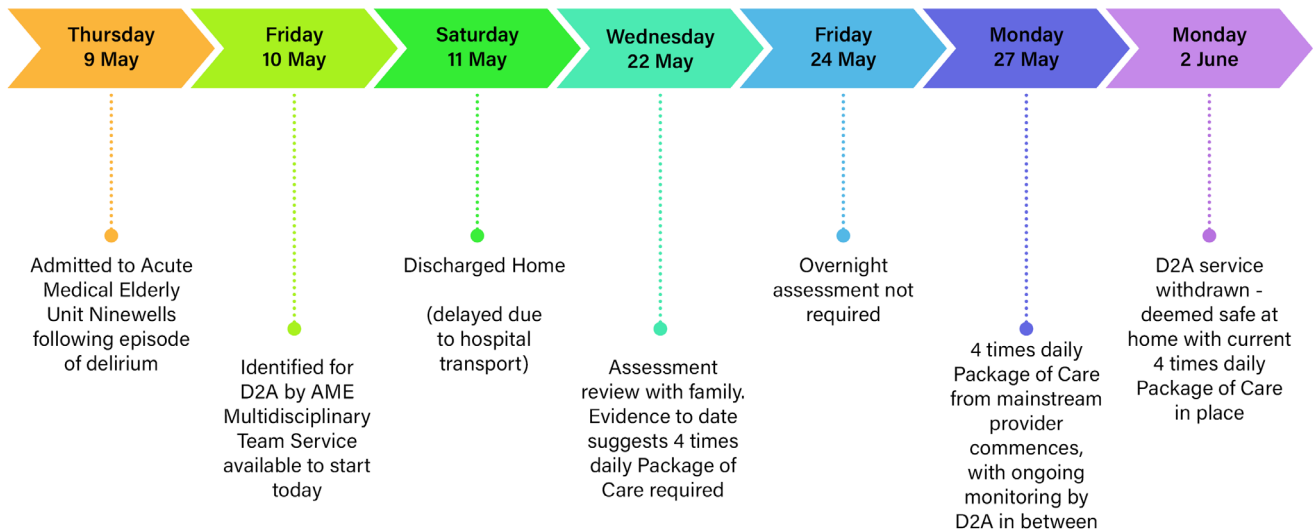
A significant development in the last year is the integration of the D2A Red Cross Test of Change into a mainstream service, which has become a main feature in national collaborative work. Discharge to Assess (D2A) service underwent a significant strategic shift from May 2024, to concentrate its resources entirely on supporting timely patient discharge from the Acute Medical Elderly (AME) unit at Ninewells Hospital.

The service has successfully refocused on resolving package delays within and, bridging care gaps for patients awaiting long-term packages, demonstrating adaptability in managing delayed discharges and optimising patient flow.

Discharge to Assess (D2A) Patient Pathway Example 1.



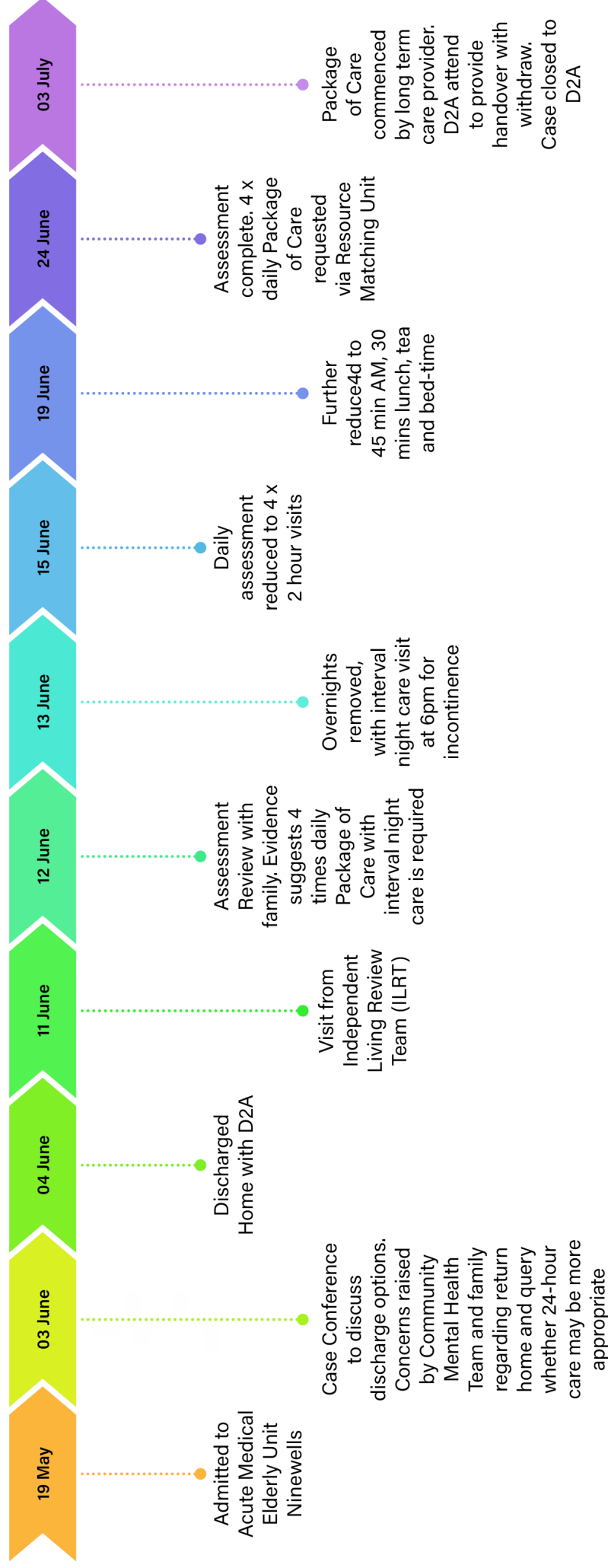
Presentation	<ul style="list-style-type: none"> Delirious/confused in the last few days and wandering. Son was struggling to manage at home. Diagnosed with a lower respiratory tract infection and commenced on oral antibiotics for this. Mobilising independent. Ongoing issues with confusion likely to be caused by infection and environmental changes. Awaiting Psychiatry of Old Age (POA) review in the community.
Length of time on Service	24 days
Outcome of Assessment	Remain home with Package of Care.



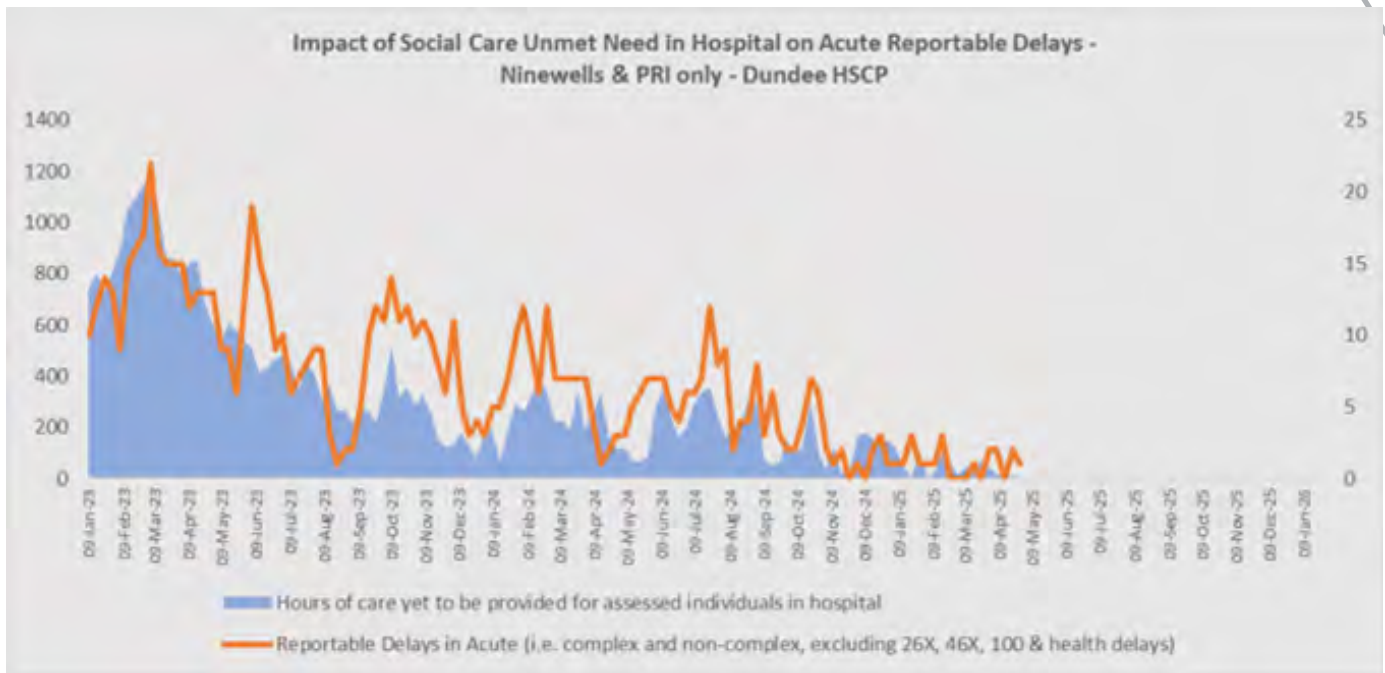
By implementing improvement measures aligned to the Discharge Without Delay workstream within the local Urgent & Unscheduled Care Board programme of work, Dundee has successfully and consistently achieved excellent performance in relation to the locally set targets, and is consistently performing in the top five HSCPS across Scotland. This involves key performance metrics with regular data reports on progress.

Discharge to Assess (D2A) Patient Pathway Example 2.

Presentation	<ul style="list-style-type: none"> Admitted following fall at home 3 days prior which resulted in increasing pain and reduced mobility. Has input with the community mental health team including a support worker, social worker and Community Psychiatric Nurse. Befriending service in place who visit on a Tuesday, Thursday and Sunday for an hour. Significant overnight needs due to incontinence. District nurses to continue medication administration AM and PM - has a venalink and locked box.
Length of time on Service	30 days
Outcome of Assessment	Remain home with 4x daily Package of Care and interval night care.



Working and Planning Together



As a result of the ongoing improvement work within DHSCP Care at Home services, the bed days lost to delay has gradually reduced over the year. In April 2023, 604 acute bed days were lost due to reportable delays, compared to 12 at April 2025.

Acute Frailty Units

Focuses on providing early frailty Multi Disciplinary Team (MDT) assessments in an environment centred around the person, seamlessly integrating with pathways such as Home First. By leveraging the Planned Date of Discharge (PDD) process, it ensures timely and efficient discharge without delay.

Planned Date of Discharge (PDD) process and Integrated Discharge Teams

The goal is to ensure frail people are discharged from hospital promptly, without delay, by ensuring that discharge conversations and planning include multi disciplinary teams involving family members and the patient as necessary. By proactively considering all of the needs of the patient being discharged, the enhanced team directly contributes to reducing the risk of poor patient outcomes and improving overall patient experience associated with hospital stays.

Working and Planning Together



Community hospital and step-down inpatient rehabilitation workstream

Aims to empower the role of non-acute hospitals in delivering timely in-patient assessment and rehabilitation for frail people within their localities. By embedding the principles of Planned Date of Discharge (PDD), ensuring appropriately staffed units with focus on rehabilitation, and facilitating early transfers from acute and frailty units, the goal is for patients in each locality to access these facilities without delay.

Dundee Enhanced Care at Home Team

Reshaping our workforce to Dundee Communities

There have been changes to how our teams work in Dundee, to better serve the community. Staff have been organised into smaller, local teams, dividing the city into East and West areas. Each area is then further divided into four smaller groups.

These smaller groups work closely with other local services, like GP practices, community nurses, social care, and other care providers. This closer collaboration means teams can work more efficiently, understand the specific needs of each community better, and provide more joined-up care for people in their own neighbourhoods.

Scottish Ambulance Service Test of Change

A collaborative partnership has been established with the Scottish Ambulance Service (SAS) to expand access to community-based urgent care services for individuals who are assessed as clinically safe to stay at home but require higher levels of support to do so. This initiative facilitates a professional-to-professional link for SAS personnel to directly refer patients to the DECaHT team for appropriate community-based interventions. This process facilitates patient discharge from ambulance care with the assurance of timely, local follow-up, thereby reducing unnecessary hospital admissions and promoting care delivery within the patient's community.

Working and Planning Together

Physiotherapy and Occupational Therapy - Dundee HSCP

The Partnership continues to support primary care through the first contact physiotherapy service which can offer physiotherapy assessment and triage in a timely manner with most patients seen within five days. Having reviewed staffing and capacity the outpatient musculoskeletal waiting list continues to reduce towards the four week target and it is expected that the community therapy waiting list will follow a similar trend following a more recent review.

A physiotherapist within the pelvic and obstetric physiotherapy team has recently had two papers published and the team is working closely with partners in acute services to look at innovative ways of addressing the long waits for gynaecology assessment.

This builds on developments within Orthopaedics and Plastic Surgery where advanced physiotherapists can deliver appropriate assessment and intervention in what traditionally was a medical role.

Enablement Support Workers

Key Priority Areas:

Safety	Medication	Cognitive Supports	Skin Integrity Promotion	Continence Care
Meal Preparation	Equipment	Mobility and Falls Prevention	Moving and Handling	Technology
Personal Care Needs	Health	Daily Living	Physical Movements/ CAPA	Observations and Goal Setting

Case Study

Background

Over the weekend an elderly woman experience a suspected mini stroke, leading to significantly reduced mobility. Previously, she was independent in daily activities such as making tea and heating meals for herself and her husband. Her son and daughter had been providing assistance with toileting, meal preparation and other daily tasks. The son who has been off work for two days is scheduled to go on holiday for three weeks and the daughter will also be away for one week.

Request

The family requested temporary support, particularly for morning and evening routines to ensure their mother's safety and well-being during their absence.

Assessment

An Enablement Support Worker conducted a comprehensive assessment focusing on the following areas:

- Sit to stand
- Pivot turns
- Mobilising
- Kitchen assessment
- Bathroom assessment
- Getting in and out of bed

Findings and Recommendations

The ESW determined that the mother would benefit from an Occupational Therapy assessment to identify aids that could support her independence. The recommended equipment includes:

- Mowbray toilet frame
- Bed rail
- Personal walking aid

Additional advice was provided to the daughter who was present during the assessment

- Use alternative footwear as the current backless slippers are unsafe
- Consider a lighter kettle such as a travel kettle

The ESW noted that the mother is currently able to manage her venalink for medicines independently.

Outcome

No immediate social care input was deemed necessary. The focus was on promoting independent living with discussions and advice provided to both the mother and daughter. An OT referral was made to support the mother's independence through appropriate aids and adaptations.

Dundee and Angus Equipment Service

Dundee and Angus Health and Social Care Partnerships jointly provide community living and nursing equipment to support people at home with physical disability and illness.

Equipment can include:

- adjustable beds and mattresses
- toileting equipment
- seating accessories
- bathing equipment

Equipment can be provided following an assessment by a community nurse or occupational therapy worker.

- 44,066 people are supported by the Dundee & Angus Equipment Service.
- 87% people received their equipment within 1.7 days of the order being placed.
- 92% of collections were collected within 0.8 days.
- The service currently has 174,670 individual pieces of equipment out on loan which equates to £6,951,591 in value.
- 17,360 individual pieces of equipment were recycled and returned to shelf for reissue which equates to £2,836,474 in value, and a reissue rate of 68%. This evidences effective reissuing of stock with minimal new spend.
- 14,000 people responded to a satisfaction survey and of these responses, 99.8% rated the service as good.



Adult Support and Protection Multi Agency Audit

A multi agency audit of Adult Support and Protection took place between 29 October 2024 and 1 November 2024. This multi-agency audit was co-ordinated by the Self Evaluation and Continuous Improvement Subgroup of the Adult Support and Protection Committee (now the Adult at Risk Committee). The aim of the subgroup is to oversee regular partnership quality assurance activity and self-assessment, including against the Care Inspectorate quality improvement framework. This includes the organisation of a range of methods across the committee to gather evidence in relation to agreed frameworks. This activity should encourage partners to scrutinise and reflect upon practice and identify strengths and areas for improvement.

This audit focused on cases where the adult had been the subject of an investigation or case conference (initial or review) in the year between September 2023 to October 2024. The tool required case file readers to consider all stages from duty to inquire onwards and asked whether all partners were involved, all relevant files were shared, and what the quality of decision making, chronologies, risk assessments and outcomes were.

The audit process identified some areas of strength:

1. How partners work together to assess whether adults are at risk of harm. This includes how Adult Support and Protection legislation is applied and how inquiries are made to support the initial assessment of risk.
2. How case conferences are used to identify, assess and manage risk and to plan supports for adults at risk of harm.
3. How adult support and protection processes and supports make a positive impact of outcomes and quality of life for adults at risk of harm.

The audit also identified areas for improvement, including improving chronologies, risk assessments, information sharing and involvement of adults at risk and all relevant professional partners are each stage of the adult protection process.

Significant work has occurred in the partnership focusing on improving chronologies and risk assessments, however, this has been hampered by the impact of Covid and changes to the operational management structure. Nonetheless chronologies and risk assessments quality and quantity have been improving, e.g., chronologies - 60% were Good or better in 2020, improving to 82% Good or better in this audit; risk assessments - 67%, Good or better improving to 74% Good or better.



Working and Planning Together

To continue to address the areas for improvement, the Partnership is focusing on two areas of work:

1. Participating in a national pilot project alongside the Children and Families Social Work Service and IRISS focused on improving chronologies. A reflective practice tool has been developed nationally which is now been implemented across social work teams. Team managers are leading discussions within their own teams and testing different ways of using the tool, meeting every six weeks to learn from each others successes and agree what needs to change to support further improvement.
2. Working with multi-agency partners to implement a new pathway of support for adults at risk. This includes a multi-agency risk management approach (Team Around the Adult) and a collaborative approach to initial assessment of adult concern reports (Adults Multi-agency Safeguarding Hub). It will also include co-location of Partnership staff with colleagues from Police and NHS Tayside to help promote joint working and communication.



Performance, Finance, Workforce and Governance

Finance

The IJB is responsible for making sure that it works in a way that follows the law and best practice standards. It must also make sure that public money is properly managed and used in a way that maximises its impact on delivering services to the public. To help them to do this the IJB has a range of different governance systems, procedures and controls in place. These arrangements help to reduce the risk that the IJB will not be able to deliver its ambitions and planned improvements. Similar systems, procedures and controls are also in place in Dundee City Council, NHS Tayside, Angus IJB and Perth & Kinross IJB and these are also used to support the IJB's work.

The Governance Framework and Internal Control System



Safe guarded



Properly accounted for



Used economically, efficiently and effectively

Performance, Finance, Workforce and Governance

The IJB spent £363.5 Million on community adult health and social care services during 2024/25 to support the needs of the people of Dundee. A breakdown of this is described in the table below.

	2020-21 £m	2021-22 £m	2022-23 £m	2023-24 £m	2024-25 £m
Total Spend	299.7	282.5	321.1	340.6	363.5
Older People	63.1	62.3	70.1	75.2	82.0
Mental Health	9.4	9.9	11.2	16.0	14.1
Learning Disability	28.7	31.2	34.1	35.3	38.5
Physical Disability	5.6	6.9	8.1	7.6	8.2
Drug and Alcohol Services	5.2	4.8	5.8	4.5	6.5
Community Nurse Services/AHP/Other Adult Services	16.8	16.1	12.8	18.5	19.7
Community Services (Lead Partner)	28.8	18.2	33.0	36.5	38.7
Other Services/Support/Management	60.8	51.4	60.8	58.0	61.4
General Medical Services (FHS) & Prescribing	81.4	81.7	85.2	89.2	94.3
Funding Received	301.8	290.4	328.6	336.8	356.3
Year-End Operational Surplus/(shortfall)	2.1	7.8	7.5	(3.7)	(7.2)

Performance, Finance, Workforce and Governance

The IJB reported a year end underlying operational overspend of £7.2m for 2024/25, arising from an underlying overspend of £5.8m in social care budgets and an underlying underspend of £2.6m in health budgets, alongside an anticipated shortfall within the integrated budget setting process for 2024/25 of £4.0m.

Increasing demand for Older People's community care has resulted in increased hours for services such as care at home which has seen an overspend of £3.4m. However, the increased care at home activity has continued to have a beneficial impact for in-patient services in Tayside through sustained reductions in Delayed Discharge, as well as reducing unmet need for service users in the community awaiting packages of care. Further demand pressures have also been experienced in Learning Disability services where individuals with particularly complex needs require enhanced and bespoke packages of care. The operational teams within the Partnership continued to experience workforce recruitment and retention challenges, which has resulted in use of agency, overtime and sessional staff where necessary with a total of £7.2m spent over 2024/25.

As a result of the higher than anticipated overspend during 2024/25, the IJB entered a period of Financial Recovery to address and minimise the unplanned overspend through enhanced actions and controls, while also maintaining performance and service delivery.

Dundee IJB, similar to other IJB's across the country, continues to face a challenging financial environment looking ahead to 2025/26 and beyond, with significant savings, efficiencies and transformation required to enable delivery of a balanced budget position. The Budget Consultation process assisted the IJB to make informed decisions regarding the proposed savings options.

Dundee Integration Joint Board

Budget Consultation



Dundee
Health & Social Care
Partnership

Budget Consultation

The IJB launched its first budget consultation in February 2025. Regular promotion of the consultation was undertaken during the consultation to encourage feedback from a variety of stakeholders, including people who use health and social care services and supports, unpaid carers, members of the health and social care workforce and providers of health and social care services in the third and independent sector. There were a total of 560 responses.

Key findings from the budget consultation exercise are summarised below:

- Respondents were asked about factors they felt should be given greatest priority by the IJB when it is making decisions about how available budgets should be allocated. Factors that respondents felt should be given greatest priority were:
 - meeting the needs of people who need services right now/are in crisis,
 - helping people with the highest levels of need and,
 - helping people to live independently in their own community.
 - In relation to how services are delivered in the future, respondents felt greatest priority should be given to timely access, services being free to access and use and, services being provided in-person.
- Respondents expressed most support for saving options to work with NHS Tayside to improve the use of digital technology across health and social care services and to work with Dundee City Council to maximise income from chargeable services. Least support was expressed for reducing flexibility in service budgets to respond to unexpected changes in demand and for reducing the amount of funding the IJB provides to the Third Sector. Respondents were most concerned that saving options would result in services not being available in crisis situations and on the number and length of delayed discharges.
- Many respondents took the opportunity to also provide further feedback on the potential impact of savings options (between 89 and 200 responses were received for each option). Overall, these responses focused on protecting those services which serve vulnerable people; many respondents mentioned the impact of the savings options on older people, disabled people and people who long-term health issues, including mental health issues and drug and alcohol use, and unpaid carers. Feedback also emphasised the impact in particular on those living in poverty in the city.

The full report of the budget consultation can be read [here](#).

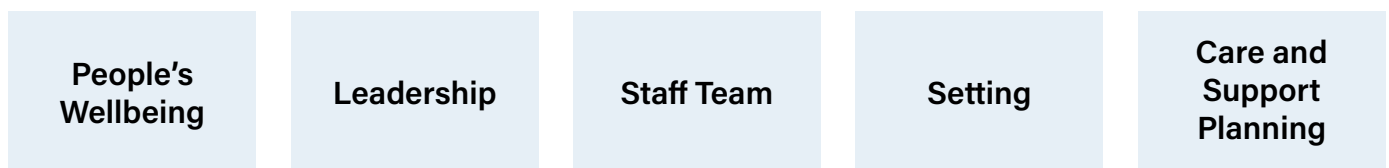
Quality of DHSCP Services

The Care Inspectorate regulates and inspects care services to make sure they meet the right standards. It also works with providers to help them improve their service and make sure everyone gets safe, high-quality care that meets their needs. The Care Inspectorate has a critical part to play to make sure that care services in Scotland provide good experiences and outcomes for the people who use them and their carers.

The current Health and Social Care Standards for Scotland came into effect in April 2018 and apply across social care, early learning and childcare, children's services, social work, health provision and community justice. They seek to provide better outcomes for everyone, to ensure that individuals are treated with respect and dignity, and that the basic human rights we are all entitled to are upheld.

The Care Standards provide a framework that is used by the Care Inspectorate to provide independent assurance about the quality of care and support. By setting out what Inspection Officers expect to see in high-quality care and support provision, it can help support improvement too. Using a framework in this way also supports openness and transparency of the inspection process.

The Care Inspectorate continues to inspect using a six-point grading scale (see below) against which the following key themes are graded:



Each theme is assessed from one to six with one being 'unsatisfactory' and six 'excellent'.

In 2024/25, 46 services for adults and care homes registered with the Care Inspectorate in Dundee were inspected and 58 inspections were completed. Of the services that were inspected, 31 of the 46 received no requirements for improvement. 1 service received a statutory notice of improvement.

Seven of the services provided directly by the Partnership were inspected during 2024/25:

- MacKinnon Centre Care Home received grade 5's (wellbeing and staff) and no requirements.
- Janet Brougham House Care Home received grades 5 (wellbeing, setting and care and support planning) and no requirements.
- Menzieshill House Care Home received grades 5 (wellbeing, staff, setting and care and support planning) and grade 4 (leadership) and no requirements.
- White Top Centre received grades 6 (wellbeing and leadership) and no requirements.

Performance, Finance, Workforce and Governance

- Dundee Community Living Housing Support Service received grades 5 (staff), 4 (wellbeing) and 3 (leadership) and no requirements.
- Dundee Care at Home Citywide Housing Support Service received grade 5 (staff) and 4 (wellbeing) and no requirements.
- Dundee Homecare Social Care Response Housing Support Service received grades 5 (staff and wellbeing) and no requirements.

42 of the 58 inspections in Dundee which were subject to a Care Inspectorate inspection last year received grades of '4 - good', '5 - very good' or '6 - excellent'.

A full list of Care Inspectorate inspections with gradings can be viewed [here](#).

Seven services received one or more complaint.

One care home service regulated by the Care Inspectorate was issued an improvement notice. A large scale investigation commenced in Benvie Care Home during July 2024 with voluntary cessation of new admissions. These measures ended during August 2024 and a follow up inspection during August 2024 identified that all improvement notice requirements had been met.

Mental Welfare Commission for Scotland

The Mental Welfare Commission for Scotland conducted an announced visit to Kingsway Care Centre on 1 October 2024.

Ward 4 is a 14-bedded, mixed-sex unit that provides care for older adults, typically aged 65 and older, who require assessment for a functional mental illness.

Summary of recommendations

Recommendation one: Managers should ensure that individuals and their relatives (where appropriate) are involved in developing care plans, where possible. Their participation should be recorded in the care records, and they should be offered a copy of their care plans. If individuals choose not to or cannot be involved, this should be recorded.

Recommendation two: Managers should ensure that all MDT document sections are completed comprehensively.

Recommendation three: Managers should ensure that all older format MDT document templates should be taken out of circulation and newer templates used consistently.

Recommendation four: Managers should ensure a robust system is in place to notify ward staff that an individual is subject to a guardianship order or has a power of attorney.

Performance, Finance, Workforce and Governance

Recommendation five: Managers must ensure welfare proxies who have powers to decide on medical treatment are consulted and their consent to proceed with treatment is obtained.

Recommendation six: Managers should ensure all individuals receiving care and treatment in Ward 4 are made aware of their rights with regards to locked door policy and these conversations should be documented in the care records.

Recommendation seven: Managers should ensure the existing fencing in the garden area is altered to one which fits with this natural environment and provides privacy for individuals using the garden.

The full report can be viewed [here](#).

Complaints

Since the 1st April 2017 both NHS and social work complaints follow the Scottish Public Service Ombudsman Model Complaint Handling Procedure. Both NHS Tayside Complaint Procedure and the Dundee Health and Social Care Partnerships Social Work Complaint Handling Procedures have been assessed as complying with the model complaint handling procedure by the SPSO.

Complaints are categorised by two stages: Stage one: Frontline Resolution and Stage two: Investigation. If a complainant remains dissatisfied with the outcome of a Stage one: Frontline Resolution complaint, it can be escalated to a Stage two. Complex complaints are handled as a Stage two: Investigation complaint. If a complainant remains dissatisfied with the outcome of Stage two: Investigation complaint they can contact the Scottish Public Services Ombudsman who will investigate the complaint, including professional decisions made. Complaints about the delivery of services are regularly presented to the Clinical, Care and Professional Governance Group to inform service improvement.

179 number of complaints were received in 2024/25 of which 142 were received through the NHS Tayside Complaints Process and 29 were received through the Dundee City Council Complaints Process.

50% of complaints received by Dundee City Council and 52% of complaints received by NHS Tayside were upheld or partially upheld.

You can view our quarterly complaints reports [here](#).

Upheld Complaint Example:

A complaint which was received regarding incorrect medication. A message was sent out to all Home Care and Housing with care staff across the city reminding them of the importance of checking the name at every prompt and when putting new venalinks (venalinks are methods of organising medicines using blister packs to assist patients and their carers) in place when they come in from the pharmacy to a service user. This was discussed at Team meeting with Home Care and Housing with Care Organisers for immediate action.

Feedback

As well as complaints the Partnership also receive feedback from people who use services, family members, representatives and staff.

"Go to physiotherapy at Kings Cross and I feel more confident after it. Really makes a difference and the staff I've seen have been great"



"I was diagnosed with rheumatoid arthritis several years ago and the care I was given was superb. I recently had a flare up in my hand and contacted the occupational department in Ninewells. I was seen within two weeks and have now had two sessions, the end result being that my hand is improving. The professional I saw was just that, professional, but kind and caring. I'm still not right but I am working hard on the exercises and am grateful for the support."



"Following diagnosis of fracture I underwent an operation at Ninewells Hospital, Dundee. I was then referred to MSK Physiotherapy at Kings Cross Hospital. I am in my 80's and with a diagnosis of leukaemia I was feeling very sorry for myself. The physiotherapist was very positive and reassuring at our first meeting. A planned programme was outlined, and I was urged to throw away my sling! This was a major step for me as the sling had become a physical and psychological crutch. I followed the detailed exercise programme at home and was provided with an illustrated printout. I religiously followed the programme of exercises 3x daily and although I had some discomfort at the outset it soon became apparent that I was making progress. This was confirmed at my next appointment when I was prescribed additional exercises. I have been discharged but encouraged to continue with the exercise programme. Having been apprehensive at the outset my consultations gave me the encouragement and assurance that I needed. Most importantly the programme I followed strengthened my arm and shoulder and gave me back my quality of life."



"I have had excellent care and support from Ninewells Oncology Dietitians during Chemo-Radiation treatment last year. During the treatment and for a year after, I have had contact with the dietitians and been given good helpful advice. I followed this and felt the benefit, such that in terms of nutrition diet and weight I am now back to normal. I was very impressed indeed with the care and interest shown by the Oncology Dietitians, and I am very grateful to them. Thank You."



Equalities

Public Sector Equality Duty

Over the last year access to learning on equality and fairness matters increased. An Equality & Human Rights Workforce Learning Network was established and communication methods were reviewed and made more accessible. Detailed Integrated Impact Assessments are completed on all proposed changes that might affect protected groups.

Dundee IJB Equality Mainstreaming and Equality Outcomes Progress Report 2023-2025 can be viewed [here](#).

Core Equality Training provided through NHS and Council E- Learning

All Social Service Employers and Workers must comply with Scottish Social Services Council Codes of Practice. Employers are expected to provide good quality accessible induction and learning and development opportunities to support workers to carry out their role safely and effectively. This means the workforce will have Equality and Human Rights learning that supports them to respect and promote the rights and, where appropriate, the views, wishes and choices of individuals and carers; respect and maintain the dignity and privacy of individuals; and promote diversity and respect for all identities, values and culture.

From April 2023 until November 2024, 290 council colleagues working in HSCP completed equality e-learning as part of their induction to a variety of roles including social care workers, social workers, peer support workers, administration colleagues and domestic assistants. In November 2024 92% of HSCP colleagues working in NHS Tayside had completed e-learning at Foundation Level - Equality, Diversity and Human Rights (1,523 colleagues in total). Eight care and support workers in contracted third sector and independent sector agencies will be supported to fulfil their equality learning requirements and providers can arrange to access the e-learning available from the Council and NHS if desired.

Transgender People

As part of discussions around the Plan for Excellence in Health and Social Care in Dundee 2023-2033, it was noted that it had not been possible to hear from local people who identified as Transgender. It was acknowledged that not enough was known about what is needed to achieve the ambition of 'excellence' in Health and Social Care in Dundee with regards to Transgender people.

Engagement with Transgender people continued into 2024, enabling ongoing discussion and feedback and this included follow-on engagement with a number of organisations including;

- the Scottish National Gender Identity Clinical Network;
- NHS Tayside Public Health;
- Dundee Health and Social Care Partnership Psychology Services;
- the local Managed Care Network for Sexual Health & BBV;
- some local Third Sector Agencies; and,
- 'Scottish Trans' (a national third sector organisation funded by Scottish Government).



Through engagement with Transgender people and supporting organisations and services key themes emerged in terms of health and social care needs, preferences and experiences. In response to these themes Partnership services, supported by the Strategic Planning Advisory Group, have identified a number of areas for improvement in relation to delivering the strategic shifts within the Plan for Excellence for Transgender people in Dundee:

- Strengthening the focus on the needs and experiences of Transgender people within the Trauma Informed Practice and Leadership programme of work that is in place within Dundee.
- Identifying and implementing approaches to sharing good practice approaches and positive feedback / impacts with the health and social care workforce and with Transgender people.
- Developing local information web resources around services and supports for Transgender people and enhancing the use of social media to communicate key information.
- Working with local Transgender people to develop learning and development resources for the health and social care workforce, with an initial focus on Primary Care, Community Pharmacy, A&E and Mental Health crisis support services.
- Providing learning and development opportunities for those in leadership and governance roles, including IJB members.
- Considering further opportunities to clarify and improve pathways of care for Transgender people, including meeting both clinical and wider health and wellbeing needs.

Race Discrimination in the Workplace

The health and social care workforce includes people from ethnic minority communities who, as well as being valuable and valued colleagues, can be a rich source of information relating to workforce matters and who have cultural and language insights to share about their wider community. It is important to acknowledge that racial inequalities and race discrimination do exist in health and social care in Scotland and will have affected colleagues across the Dundee Health and Social Care Partnership workforce. It is known that colleagues can also be subject to, and observe racism in interactions with service users, carers and the public while at work. Although there is little or no, reported racism from colleagues and managers it is also recognised that members of the workforce may also experience racism from colleagues.

72 NHS employees and 46 Dundee City Council employees stated they were from a minority ethnic background, which is 4% and 5% of employees respectively. This is lower than the 16% of Economically Active and Employed Dundee residents ages 16+ who stated they were from a minority ethnic group in the 2022 Census.

There are very few formal grievance and/or disciplinary cases in either Dundee City Council or NHS Tayside for Partnership staff where race or ethnicity has been a factor. This does not mean that race discrimination has not happened in the workplace and may reflect under reporting and low confidence in reporting.

Significant work has been progressed with a view to better understanding the experiences of the Dundee health and social care workforce, including direct engagement with workforce members and with their employers (particularly in Care at Home Services). This engagement has identified a significant increase in the number of Social Care Workers in Dundee who are of Black African origin, having moved to Scotland as economic migrants. It has also identified that members of the workforce delivering Care at Home Services are experiencing race discrimination and other equality discrimination from services users, unpaid carers and wider family members. Workforce members and their employers have shared that individuals have felt vulnerable whilst carrying out their duties, both in people's homes and within the wider community.

Performance, Finance, Workforce and Governance

Across Health and Social Care in Scotland there is a strong desire to eliminate discrimination and inequality both in service delivery and in the workplace overall. The following progress has been made within Dundee:

- Connections have been made between local officers and relevant national networks and organisations, including attendance at learning and development events.
- Identification of work being undertaken by the Scottish Social Services Council to develop resources to inform and upskill social workers about anti-racist practice and consideration of how these can be promoted and used within Dundee.
- Connections have been strengthened to the NHS Tayside Employee Network (which is available to NHS and Council employed staff, but not third and independent sector), as an important site through which to gather ongoing feedback about local workforce experiences and regarding anti-discriminatory work being progressed by the corporate bodies.
- Identification of work progressing between NHS Education for Scotland and the Coalition for Racial Equalities and Rights (CREAR) to develop learning materials for the NHS and integrated health and social care workforce.
- Promoting the 'Help Tackle Racism' survey from CREAR for the health and social care workforce. Results are not yet available but will be utilised to inform future actions and planning.
- Provision of local learning and development opportunities, including a Hate Incident, Hate Crime session for 30 colleagues across social care, housing support and employability services, and a Mental Health Foundation session on Engaging with Refugees and Asylum Seekers for 20 colleagues across the health and social care workforce.
- Identifying Renfrewshire Health and Social Care Partnership as an example of a best practice approach to tackling race discrimination, including having developed a policy framework within which to address instances of race discrimination that applies across all employers.

Workforce

The Dundee IJB's Plan for Excellence in Health and Social Care in Dundee (2023-2033) sets out six strategic priorities, including a commitment focused on valuing the workforce.

Strategic Priority: Workforce Valuing the workforce



Supporting the health and social care workforce to keep well, learn and develop.

The Health and Social Care Partnership workforce is made up of people employed by Dundee City Council and NHS Tayside, as well as the workforce employed in the third and independent sectors. The combined workforce is the single biggest asset available to the Partnership to enable them to provide the services and supports that the IJB has commissioned from them.

The first Partnership Workforce Plan was approved by the IJB in June 2022 in response to guidance from Scottish Government. The National Workforce Strategy for Health and Social Care (published March 2021), led to a requirement for Partnership's to develop and submit three-year workforce plans. After this the plan has been refreshed on an annual basis.

The most recent version of the Workforce Strategy can be found [here](#).

Our workforce plan reflects these strategic commitments and aims to enable the Health and Social Care Partnership to:

- Meet future workforce requirements – identify the number and types of health and social care professionals needed to meet future service demands.
- Promote skill development and training – ensure that the workforce has the necessary skills and competencies through access to continuous professional development and training programmes.
- Support recruitment and retention – support strategies to attract and retain skilled professionals in the health and social care sector.
- Develop integrated workforce planning – promote collaboration between health and social care services to create a more cohesive and efficient workforce.
- Support workforce wellbeing – implement measures to support the physical and mental well-being of health and social care workers.
- Adapt to change – ensure the workforce is supported to adapt to changes in technology, policy and service user needs.

Performance, Finance, Workforce and Governance

There are several challenges

- Ageing workforce, including in key staffing groups delivering frontline care and support.
- Decreasing social care workforce set against ageing population, rise in demand for social care services and complexity of need.
- The demographic profile of the workforce does not reflect the diversity of the community that it serves.
- High absence levels across both employers, with mental health and wellbeing as a specific driver of absence levels.
- There are specific workforce availability challenges relating to Occupational Therapists, Social Care Workers and G.P.s. Challenges are also experienced, to a lesser extent in relation to, Advanced Nurse Practitioners and Physiotherapists.
- There is a risk of reduced workforce availability, particularly for social care services, due to planned changes to immigration rules.



For 2024, the iMatters* process identified four areas to further improve across the Partnership (based on 54% response rate across all Partnership aligned staff):

- Performance management – I am confident performance is managed well within my organisation.
- Confidence and trust in management – I have confidence and trust in Board members who are responsible for my organisation.
- Partnership working – I am sufficiently involved in decisions relating to my organisation.
- Visible and consistent leadership – I feel that board members who are responsible for my organisation are sufficiently visible.

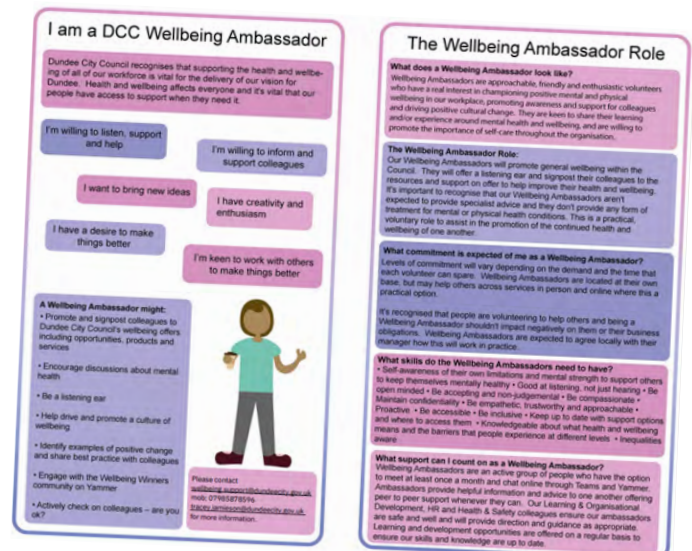
The Dundee City Council Annual Employee Survey (based on 14.3% response rate across all Council employed staff aligned to the Partnership) also identified areas for improvement, including staff being involved in decisions about their work, having enough time to do their job well and feeling that day-to-day decisions demonstrate that quality and improvement are top priorities.

*iMatters is a staff experience continuous improvement tool which is used to understand and improve how staff feel at work.

Supporting Employees

NHS Tayside Employee Networks are available for all Council and NHS Tayside employees in DHSCP. DHSCP can access the following groups which are supported by NHS Tayside Corporate Equalities Team Leads: LGBTQA+, BAME, Disability, Armed Forces and Carers Network.

Dundee City Council hosts a 'Workforce with Lived experience of Trauma' Project which is a support for employees of the council who experienced Trauma for any reason including related to Protected Characteristics. In addition to this, Dundee City Council also have a dedicated Employee Health and Wellbeing Support Service, employ a full-time Employee Wellness Advisor, and have a network of peer Wellbeing Ambassadors who support embedding a culture of wellbeing across all services. In Health and Social Care, we have 12 Wellbeing Ambassadors who are DCC employees. The Employee Wellness Advisor for DCC links in with NHS Wellbeing Champion network to ensure there is a strong ethos of partnership, sharing of best practice and learning, and minimising of duplication.



In 2024, members of the team from Oakland Daycentre presented at both Dundee City Council's Corporate Leadership Conference (a gathering of senior leaders from across the council, HSCP and LACD) and at a conference for all Wellbeing Ambassadors, showcasing their experiences of developing a culture of wellbeing within their team. Their presentation was powerful and impactful and highlighted the differences small actions and activities can make in improving wellbeing.

"It has benefited staff morale"

"The curry lunch got staff mixing together and brought the team together"

"With the 'shout out board' I feel appreciated, and comments make me feel good"

"By helping others we bond with each other and focus on common goals"

"The suggestion box has been great as we now have a toasty machine which enables me to have better lunches"

"The meetings let you vent and see how your colleagues are feeling"

Performance, Finance, Workforce and Governance



Images of some of the activities the team have undertaken and some feedback within their presentation used at the events.

Additionally, the council's Employee Wellness Advisor works with Homecare, an area within the Partnership with higher-than-average sickness absence rates. Since starting in post in September 2024, the Advisor has delivered 33 Team Wellbeing Introductions, events or 1:1 support sessions focusing on topics such as burnout, vicarious stress and reflective practice.

"All in all, D had given us a lot of information which is ever so helpful. She is very professional, and the session was really interactive, I would give her a solid 10/10 for the work she is doing"

"100% this service. D was amazing, very caring and thoughtful, thank you"

Quotes are from the feedback survey issues after each interaction to teams and individuals.



Performance, Finance, Workforce and Governance

Employee Absence

Between June and December 2024, work was undertaken to look at the reasons for absence within certain areas of the council where absence rates were significantly higher. A survey, focus groups and some 1:1 discussions with managers and others highlighted some areas for improvement which are being progressed.

Key Actions identified were:



Enhance Support Systems: Increase the frequency and quality of face-to-face interactions between staff and occupational health professionals to provide more personalised support. Implement more flexible working arrangements and workplace adaptations to accommodate employees' health needs and promote quicker returns to work.



Improve Communication: Ensure clear and consistent communication between occupational health, hospital consultants, and managers to avoid conflicting advice and support decisions. Encourage regular and empathetic check-ins by line managers to maintain employee engagement and well-being.



Review Absence Procedures: Reevaluate the absence monitoring system to reduce stress on employees, particularly those with long-term health conditions or those returning from bereavement.

Some quotes from participants who were involved in this work include:

"I have spoken to occupational health in the past and recently and the outcome of my meeting was that certain adaptations were put into place to help me at work. My manager has been extremely helpful ensuring my runs have been manageable and checking in with me regularly ensuring all is well."

"Absence Review Meeting with my manager who was very understanding and provided support and guidance on my return to work, was very helpful"

"I found speaking with my councillor on PAM (Occupational Health) very helpful. I have more confidence and a better positive attitude about everything not just work."



Performance, Finance, Workforce and Governance

Kingsway Care Centre introduced Wellbeing Champions in 2023 and there are now three champions.



The images are from a recent Kingsway Care Centre Day of Happiness which was held to celebrate the International Day of Happiness on 20th March 2025.

Achievements so far:

- Identified wellbeing spaces on the wards and outside to support staff mental wellbeing.
- Asked all staff for their feedback via a survey on what is important to them.
- Had a successful Support Workers Day to celebrate the hard work that is carried out by Support Workers in Kingsway Care Centre.
- Celebrated Happiness Day to bring about cheer and joy to brighten up staff's day to promote self-care.
- Wellbeing Champions have supported staff on individual basis and signposted to appropriate supports.

Kingsway Care Centre Support Workers



Performance, Finance, Workforce and Governance

Developing the Young Workforce: Myth Busting Event into working in a care home (March 25)

Recruitment and retention continues to be a challenge for social care and attracting new people to the sector in competition with other sectors. Working in conjunction with the Developing the Young Workforce Team (Dundee), a pilot event was organised in Baldragon Academy to showcase a day in the life of a care home and demonstrate the many different roles that make up a team including qualifications and career pathways into working in social care.

Managers and staff from a number of care homes set up a round robin event with ten tables, providing pupils with a very interactive insight to working in a care home. There was also input from some of our younger workforce who spoke about their journey/experience of working in social care and also three residents spoke about their day to day living in their care home and what, in their opinion makes a good carer.

Some of the tables:



Residents and our younger workforce



How to support different types of dietary needs



Safe moving and handling practices



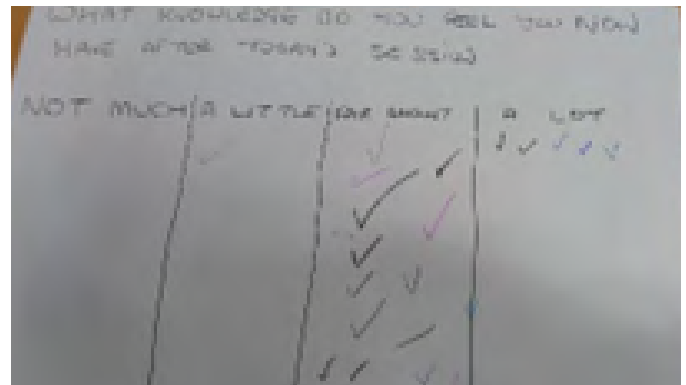
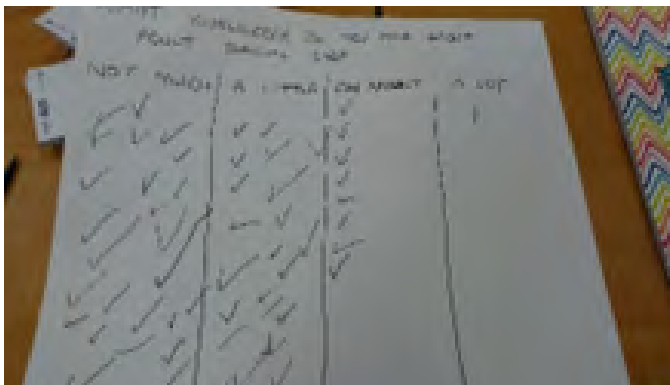
Pupils creating a personal support plan for Taylor Swift

Performance, Finance, Workforce and Governance

Some of the words collated for the event were:



Most pupils at the start of the session indicated that they did not know much or very little about adult social care but at the end of the session many more felt that they knew a fair amount/more about adult social care. A number of the pupils also asked about work experience, jobs and apprenticeships that may be available to them.



The pilot event in Baldragon Academy was the springboard to holding a larger event in September 2025, which will involve all schools across Dundee to continue to promote social care as a career and in discussion with other services, a number of Care at Home, LD and DHSCP providers have stated that they would also like to get involved in the events going forward.

Primary Care

The following actions took place to maintain a healthy workforce in Primary Care:

- A training framework to improve the experience of the physiotherapists and build resilience into the system to assist with cover.
- New ways of working with a multi-organisation approach being explored including a possibility of some Multi-Disciplinary Team development.
- Providing colleagues with the opportunity to learn about quality improvement and the opportunity to work across different teams. For example, bringing together Physiotherapy colleagues, GP Practice teams and members of the Primary Care team to improve patient access to First Contact Physiotherapy.
- A Staffnet page to host educational material and links which provide a central repository of information for GPs is under development.



Awards and Accreditations

Veterans First Point Tayside (V1P) service has been awarded with accreditation by the Royal College of Psychiatrists. V1P is a service that support veterans and their families and offers a range of services including mental health support, information and signposting and peer support.




CERTIFICATE OF ACCREDITATION

NHS Tayside

Has been accredited by the Quality Network for Veterans Mental Health Services on:

15th July 2024

The accreditation is awarded until July 2027.



Mary Jane Docherty
Clinical Strategic Director
Royal College of Psychiatrists



Peter Thompson
Director
College Centre for Quality Improvement




Performance, Finance, Workforce and Governance

Hello in there wee one won the award for Creative and Innovative Practice and was declared Overall Winner at the Advancing Healthcare Awards UK 2025.

The book was created in partnership between NHS Tayside's infant mental health team, Dundee Contemporary Arts (DCA), Dundee City Council and University of Dundee. It is given to all expecting families across Dundee, free of charge, at their 16-week midwifery appointment to support expectant parents to communicate and bond with their baby.



Since launching last year, the book has already reached 600 families and has been translated into multiple languages, including Dundonian Scots.

Performance, Finance, Workforce and Governance

Liam McGinlay was a finalist in the Outstanding Community Link Worker of the Year Award at the Scottish Community Link Worker Network Conference.

Liam works in the Sources of Support Service, which operates in all General Practices in Dundee. As a Primary Care Link Worker, he supports patients whose physical mental health and wellbeing is impacted by social and mental health issues. Liam works alongside the patient for up to 20 weeks, offering non-medical interventions and co-ordinated care to improve patients personal circumstances.

"We are delighted to see Liam being recognised as a finalist for this award. It was a huge achievement to make it to the final three and we are very proud of him" Theresa Hendry, Sources of Support Team Leader.



Liam McGinlay,
Sources of Support Worker

The Corner, Dundee's Health and Wellbeing Service for young people, has been awarded for their commitment to providing a safe, inclusive, and empowering environment for women across the city.

The team has received the Welcoming Women Award from the Dundee Violence Against Women Partnership (DVAWP). The certification is for organisations who actively think about the needs of women.

The Corner has worked alongside the DVAWP over the past year to identify areas of service delivery that could be improved. The Welcoming Women Award recognises efforts made to understand and address the unique challenges, issues, and needs faced by women in Dundee.



Zara Cargill, Clinical Team Lead said, "We are delighted to be recognised for our commitment to making The Corner a welcoming and supportive environment for women. This award reflects the hard work of our entire team and our ongoing dedication to meeting the needs of the community we serve."

The Corner is a health and wellbeing service based in Dundee City Centre for young people aged 11-19 years or up to age 25 for vulnerable young people. An NHS Tayside multi-disciplinary team provides a range of supports including sexual health, emotional health, crisis intervention, drug and alcohol use, young carer support and counselling.

Performance, Finance, Workforce and Governance

DFN (David Forbes-Nixon Family Charitable Foundation) Project SEARCH Ninewells aims to support young people with diverse additional needs into meaningful employment. A partnership between Dundee & Angus College, NHS Tayside and Dundee HSCP has developed a local Project SEARCH initiative which is based at Ninewells Hospital.

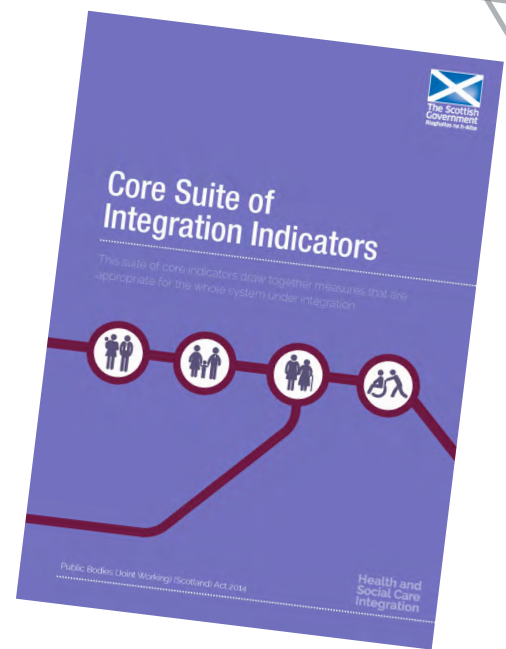
The project addresses areas of key skills shortage within NHS Tayside, whilst transforming the lives of the learners and their families. Dundee and Angus College provide a structured, supportive pathway to meaningful employment. Support is highly individualised, with one-on-one training provided for young people who have complex barriers to employment. There is significant support throughout the 36-week programme as well as an extensive aftercare period to ensure sustainability. An additional benefit of the programme has been a wider recognition of the needs of employees with disabilities, not just those within Project SEARCH. Removing Barriers to Employability.

The logo for SURF AWARDS features the word "SURF" in a large, bold, dark blue font, with a light blue starburst graphic behind the letter "F". Below "SURF" is the word "AWARDS" in a similar bold, dark blue font.

Project SEARCH won the SURF Awards for Best Practice in Community Regeneration in 2024 for Removing Barriers to Employability.

Performance

The Scottish Health and Care Experience Survey is a postal survey that is administered to a random sample of people who were registered with a GP in Scotland. The survey has been run every two years since 2019 and forms part of the Scottish Care Experience Excellence Programme, which is a suite of national surveys aiming to provide local and national information on the quality of health and care services from the perspective of those using them. The results from this survey are used to calculate National Health and Wellbeing Indicators 1-9. The results of the 2023-24 survey for Dundee Health and Social Care Partnership can be accessed [here](#).



Where the Partnership improved from the 2019/20 baseline year:

- Hospital emergency bed day rate for people aged 18 and over decreased by 8.6% and for the last five years the Dundee rate has been less than the Scotland rate.
- The proportion of the last six months of life spent at home or in a community setting increased from 89.5% in 2019/20 to 90.8% in 2024 and since 2019/20 Dundee's performance has been better than the performance for Scotland.
- The % of adults with intensive care needs receiving care at home increased from 57.8% in 2019 to 65.4% in 2024.
- The number of days people aged 75+ spent in hospital when they were ready to be discharged, per 1,000 population decreased from 443 in 2019/20 to 245 in 2024/25 and for the last 5+ years, the Dundee rate has been lower than the Scotland rate.
















































In addition to annual reporting, performance is also monitored quarterly and compared across Local Community Planning Partnership areas and reported to the Performance and Audit Committee of the IJB. Where further analysis is required to understand the data and improve services in-depth analytical reports are also developed. These can be viewed [here](#).

The methodology was changed by Scottish Government for the 2019/20 survey and it is therefore not accurate to compare results from before this survey with the more recent survey results. Note: 2024 calendar year or 2024/25 financial year data was not provided by Public Health Scotland for indicators 10,11,17 and 20-23 therefore they have not been included in the table below. Further information about these can be viewed [here](#).

 Better than
Scotland

 Worse than
Scotland

 Same as
Scotland

National Indicator	Improvement from 2019-20	Improvement from 2021-22	Comparison with Scotland 2023-24
1. Percentage of adults able to look after their health very well or quite well.			
2. Percentage of adults supported at home who agreed that they are supported to live as independently as possible.			
3. Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided.			
4. Percentage of adults supported at home who agreed that their health and social care services seemed to be well coordinated.			
5. Percentage of adults receiving any care or support who rate it as excellent or good.			
6. Percentage of people with positive experience of care at their GP practice.			
7. Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life.			
8. Percentage of carers who feel supported to continue in their caring role.			
9. Percentage of adults supported at home who agreed they felt safe.			
12. Emergency admission rate (per 100,000 people aged 18+).			
13. Emergency bed day rate (per 100,000 people aged 18+)			
14. Readmission to acute hospital within 28 days of discharge rate (per 1,000 population).			
15. Proportion of last six months of life spent at home or in a community setting.			
16. Falls rate per 1,000 population aged 65+.			
18. Percentage of adults with intensive care needs receiving care at home.			
19. Number of days people spend in hospital when they are ready to be discharged, per 1,000 population.			

ITEM No ...9.....

REPORT TO: CITY GOVERNANCE COMMITTEE – 1 DECEMBER 2025

REPORT ON: DEVELOPING A WHOLE FAMILY SUPPORT APPROACH

REPORT BY: CHIEF EXECUTIVE

REPORT NO: 349-2025

1.0 PURPOSE OF REPORT

To provide an overview of Whole Family Support (WFS) approach, including initial assessment of where this more focussed and integrated approach should be prioritised in Dundee.

2.0 RECOMMENDATIONS

It is recommended that committee:

- a) notes the contents of this report and agree the WFS approach in principle;
- b) agrees to officers engaging with communities in the East End and North East wards to develop this approach and how it should be coordinated; and
- c) further updates will be brought forward as the approach develops.

3.0 FINANCIAL IMPLICATIONS

There are no direct financial implications arising from the agreement of this report.

4.0 BACKGROUND

4.1 Whole Family Support is aligned to Scotland's strategy to tackle child poverty, improve wellbeing and deliver more effective public services as highlighted in the Public Service Reform Strategy and Independent Care Review. The approach recognises that families often face interconnected challenges - such as poverty, poor housing, and health inequalities - that require coordinated, person-centered responses. The key Principles of Whole Family Support are:

- **Prevention First:** Early intervention to prevent crises before they escalate.
- **Person and Family-Centered:** Support is tailored to the unique and often overlapping needs of each family, with a focus on dignity, trust, and empowerment.
- **Integrated Services:** Breaking down silos between services (e.g., health, education, housing, social work) to provide seamless and flexible support.
- **Co-Production:** Families are involved in designing and shaping the services they use.
- **Place-Based Delivery:** Support is rooted in local communities, recognising the importance of local context, assets, and relationships.

4.2 The Scottish Government are working with six local authorities as 'early adopters' of WFS being: Glasgow, Clackmannanshire, North Lanarkshire, North Ayrshire, Aberdeen, and **Dundee**. The programme is closely tied to child poverty reduction and delivery of "The Promise." Glasgow and Clackmannanshire are further ahead with their plans.

4.3 The six Chief Executives are meeting with the Public Service Reform Directorate about how the Scottish Government can work together to drive forward whole family support and deliver on the flexibilities, in particular funding and reporting, needed from Scottish Government to further support the work being undertaken locally. Regular meetings are in place with local leads and SG officials to work through any barriers and agree actions related to these but also share learning across different early adopter areas.

4.4 WFS Approach clearly aligns with one of our most challenging priorities for the city and the Council, being to **Reduce Child Poverty and Inequalities**, as set out in both the City Plan 2022-2032 and the Council Plan 2022-2027. It also provides an important opportunity to integrate this work more closely with our protecting people approach, trauma informed

leadership and practice developments, and with responses to frailty not only in the older population given the challenging healthy life expectancy in Dundee being around 56 years old.

- 4.5 At the same time as delivering on the key priorities within increasingly pressured budgets, developing thinking and action on public service reform, it is necessary to ensure that there are strategic, medium- and long-term solutions to the fundamental and deep-rooted challenges in public sector funding and demands on services.

5.0 WHOLE FAMILY SUPPORT (WFS) – DUNDEE

- 5.1 The WFS approach in Dundee is evolving from work on stronger integration across services, taking learning from a range of targeted place-based approaches already deployed, like the Linlathen Pathfinder (now known as the Fairer Futures Partnership), Local Fairness Initiatives, Planet Youth and What Matters 2 U. Some of this key work has recently been nationally recognised via the two Gold Awards achieved at the COSLA awards on 13 November 2025. The Local fairness Initiative won the Best Team Award, and the Family Empowerment project won the Strengthening Communities and Local Democracy Award.
- 5.2 It is about considering greater funding flexibility, reduced reporting burdens, how communities help shape any changes as the new approach develops and how partners respond collectively and flexibly to meet their needs. This includes how the community planning partners via the Dundee partnership Management Group also deploy their resources.
- 5.3 A key part of the approach involves the use of data to support decision making to best target resources to where it is needed the most to reduce inequalities. An assessment of key data produced for the annual Poverty Profile, Census and expanded to consider data across key themes like how the city is tackling poverty was undertaken – see Appendix 1. This clearly draws us to remain focused on the East End ward of the city as it is the most impacted by poverty and inequality. Given the recent changes to locality working and the new Drumgeith Campus opening, this could be expanded to include the North East also.
- 5.4 In relation to the most deprived areas of the City i.e., 5% most deprived, 52.8% (1,622) of children living in the 5% most deprived, live in the East End (33.5%) and North East (19.3%) wards. The next highest are Coldside at 18.2% and Lochee at 15.8%. The East End however, flags most consistently as an area for concern across the range of data collated.
- 5.5 Expanding the area of focus and taking the learning from Linlathen and WM2U, the support and services that families receive could look different depending on specific circumstances, but it should always be underpinned by a whole-family approach, where multi-disciplinary professionals wrap support around the family to address challenges at the earliest opportunity. This is **to ensure families receive the right support, at the right time, for as long as needed with a strong emphasis on early intervention to prevent crisis and trauma-informed approaches**. It also builds on the no wrong door ethos where families are able to connect with the right support, through an integrated and relationship focused approach that adapts to their needs instead of feeling like they simply don't know where to go or being handed or passed between different teams or service.
- 5.6 Key elements for this enhanced approach could include:
- a) **Link or key worker model** - the importance of trusted relationships with workers who understand local areas, their people's needs, and services within them is highlighted in learning from our current place-based initiatives. Link/key worker models involve supporting, advocating, and navigating families as they access services across the public sector. The ethos is no wrong door with workers able to support any issues and drawn in 'specialists' as needed. This is likely to involve more outreach work targeting those families

in the 5% most deprived areas in the wards, Low-Income families, and other priority families.

- b) **Drop-in sessions** - The model of weekly drop ins with multiple partners in attendance providing support and services in localities was a development in Linlathen from the Dundee Pathfinder (now referred to as Fairer Futures Partnership). Early work indicated that the target families face complex barriers to employment, such as childcare, health issues, transport, and a lack of understanding of available support services and benefits. Employability support and services is a key strand of work that is embedded and crucial to reducing poverty in the city.

Drop ins are now taking place in Brooksbank Centre (Tuesdays), Douglas Community Centre (Wednesdays), and Drumgeith Campus (Thursdays). Expansion of services included in this model and/or fuller integration of key services could be a future development. Ongoing work highlights high levels of physical and mental health problems impacting employment outcomes. Developing more health interventions could be a key expansion to the 'drop in' model by assessing the health needs to develop clinics, checks and screening programmes within this area to support key health issues.

- c) **Prevention & Early Intervention Hub** - Multi-agency team designed to provide timely support to most vulnerable residents. This would bring together staff from various local public and third sector services e.g. housing, police, health, social work, education, CLD, LACD and third sector. This approach will call on other services across the partnership as required.
- d) **Out of hours** - Children, families and communities often have ready access to services during normal working hours (Monday to Friday 9.00 – 5.00) then mainly emergency only services via limited out of hours provision. Issues that occur with normal working hours often escalate due to normal routines and support not being available, particularly over weekends.
- e) **Other targeted services** - wider discussions would take place to look at other enhanced services and/or targeted work in the area based on the data available. Other areas to explore that have been suggested:
- Skills to support families – digital, numeracy/literacy, homework support
 - Uptake campaigns – free travel and school meals, benefits like Scottish Child Payment and Pension Credit
 - Outdoor spaces and physical activities

5.7 There are enablers or system-level changes required to support delivering real change like this and there will be asks from other partners, locally, regionally, and nationally. These include:

- Policy alignment and funding flexibility deployed to act as a greater leverage of change. This would include how we work with Trusts and charitable funders to maximise the external funding and contributions they bring to the city.
- Linked to funding requirements a streamlining of reporting requirements to governments, scrutiny bodies and other agencies, would support more focus on actions and improving outcomes.
- Using data in a more deliberate and intentional manner to focus on targeted enhanced approaches, spend to save and spend to invest.
- Creating a culture for change and public service reform to have more focus on early help, intervention and prevention. This would also include leadership development across partners to support change.

- A deeper understanding and analysis of the 'as is' system from diverse perspectives to assess risk and support people in the transition to new more integrated and sustainable way of working.
- Build the capacity for change in terms of both resources and people.

5.8 Whole Family Wellbeing Fund (WFWF) is being provided to support the transformation of how family support is delivered. In Dundee some of this funding will support the development of our approach linked with any further funding flexibilities, future funding and/or external funding from charitable organisations.

6.0 NEXT STEPS

Developing WFS Together

6.1 To date the voice of our communities and lived experience has been brought into the thinking for this approach in several ways, as well as partners bringing their shared intelligence from communities and communities of interest to the table. Specific pieces of work such as in Linlathen and Stobswell, What Matters 2 U, Planet Youth, Local Community Planning processes, the Fairness Conference and case studies told through the Local Child Poverty and Fairness Report have contributed and will continue to do so. It is also worth noting that last year's Budget Consultation highlighted support for the council delivering services differently, and strong support services tackling poverty and inequality.

6.2 As the approach is developed, more participation and engagement with our citizens in the East End and North East will be undertaken to refine and improve what the approach is. The voices of our young people in the area will be captured through the Planet Youth work in Greenfield Academy. There is now an opportunity to align several pieces of work around the shared outcomes, scaling up and adapting across the council family, partners and our communities to best effect.

6.3 Central to the success of re-designing services to enable communities to thrive is fostering trust, building stronger community connections, and empowering individuals to be part of the decision-making process in their communities. Working with the Community Empowerment team and the What Matters 2 U team, the initial participation and engagement work would be deployed from January to March 2026 to work through how community needs mirror or change what is set out in section 5.6.

6.4 This work will also help to scope 'asks' of key community planning partners to ensure the collective efforts are aligned on improving key outcomes for these communities, this includes the resources deployed through Council's two key strategic partners - Leisure and Culture Dundee and the Health and Social Care partnership.

Governance

6.5 Within the Council, the Council Leadership Team will oversee this work via the Transformation Board initially and it will be reported through the Transformation Programme. The governance will be reviewed as the work develops, and more partners are involved.

6.6 Resources required to programme manage this significant project will be secured within current budgets and funding available.

7.0 POLICY IMPLICATIONS

This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services, or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

8.0 CONSULTATIONS

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

9.0 BACKGROUND PAPERS

None.

GREGORY COLGAN
CHIEF EXECUTIVE











DATE: 14 NOVEMBER 2025

ANDREA CALDER
HEAD OF CHIEF EXECUTIVE'S SERVICE

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DATA USED IN ASSESSMENT

Population 

	North East	East End	Strathmartine	Coldside	West End	Lochee	Maryfield	The Ferry	Dundee	Scotland
 Population - Total	16,574	14,926	19,792	18,160	20,873	19,957	18,368	19,550	148,470	
 Population - Female	8,541	7,861	10,254	9,006	10,851	10,294	9,216	10,205	76,228	
 Population - Male	8,033	7,065	9,538	9,154	10,022	9,663	9,422	9,345	72,242	
 Population - Under 16	3,494	2,830	3,793	2,301	2,049	3,745	2,333	2,992	23,537	
 Percentage of population under 16	21%	19%	19%	13%	10%	19%	13%	15%	16%	16.3%
 Population in most deprived quintile	35.5%	76.0%	42.1%	60.8%	9.9%	46.2%	43.4%	0.0%	37.7%	20%
 Population in least deprived quintile	0%	0%	9.4%	5.2%	23.0%	12.9%	0.0%	68.9%	15.9%	20%
 Population - White Scottish/ British	92%	88%	92.2%	78.3%	71.2%	85.7%	70.3%	91.6%	83.3%	87%
 Population - Other White	4.9%	5.2%	4.2%	7.6%	9.8%	6.6%	10.0%	3.2%	6.5%	5.8%
 Population - Ethnic Minority Groups	3%	6.6%	3.6%	14%	18.9%	7.8%	19.7%	5.2%	10.1%	7.1%











Health



	North East	East End	Strathmartine	Coldside	West End	Lochee	Maryfield	The Ferry	Dundee	Scotland
 Has a long term, health condition, illness or disease	21.3%	24.8%	22.5%	22.7%	17.6%	21.8%	19.8%	23.0%	21.6%	21.4%
 Physical Disability	10.4%	13.6%	11.5%	12.3%	6.6%	10.9%	8.9%	8.8%	10.3%	9.7%
 Mental Health Condition	13.2%	15.7%	12.1%	17.1%	16.4%	13.2%	17.3%	8.0%	14.1%	11.3%
 Unpaid Carer	13.2%	14.0%	13.6%	11.0%	7.9%	11.9%	9.7%	12.5%	11.6%	11.9%
 Alcohol-related hospital admissions per 100,000	404.2	1123.3	481.8	1131.7	662.0	760.5	754.3	352.3	675.0	532.0
 Drug-related hospital admissions per 100,000	229.8	653.1	204.9	617.6	461.8	601.3	553.1	62.5	408.2	201.8
 Potentially Preventable Admissions per 100,000	2124	2640	2117	2203	1150	2150	1674	1458	1907	1691
 Life Expectancy - Males	74.8	71	75.5	71.3	74.5	72.9	72.4	81.1	74.6	76.8
 Life Expectancy - Females	79.4	75.4	79.9	76.8	80	79.2	79.2	83	79.2	80.8
 Healthy Life Expectancy - Females	-	-	-	-	-	-	-	-	56.3	60
 Health Life Expectancy - Males	-	-	-	-	-	-	-	-	56.2	59.6



Child Poverty & Education



	North East	East End	Strathmartine	Collieston	West End	Lochee	Maryfield	The Ferry	Dundee	Scotland
 Child Poverty (number)	632	755	657	638	315	747	541	198	4,483	145,804
 Child Poverty (%)	18.1%	26.7%	17.3%	27.7%	15.4%	19.9%	23.2%	6.6%	18.7%	16.3%
 Children living in 5% most deprived datazones (number)	673	949	443	418	66	592	168	0	3309	n/a
 Children living in 5% most deprived datazones (%)	19.3%	33.5%	11.7%	18.2%	3.2%	15.8%	7.2%	0.0%	14.1%	n/a
 Lone Parent Households with dependant children	11.1%	9.8%	9.1%	5.6%	3.4%	8.1%	4.2%	3.5%	6.6%	6.1%
 % of Total number of care experienced children	16.0%	22.7%	8.0%	16.0%	9.3%	15.3%	11.3%	1.3%	n/a	n/a
 School Attendance - Overall	88.6%	87.9%	89.0%	89.8%	91.8%	89.8%	90.9%	93.3%	89.9%	n/a
 School Attendance - Primary	92.5%	91.5%	92.9%	93.1%	93.1%	93.0%	93.3%	95.4%	93.0%	n/a
 School Attendance - Secondary	84.0%	83.2%	85.0%	85.8%	90.1%	85.8%	88.0%	91.4%	86.5%	n/a
 No Qualifications	22.3%	25.0%	21.9%	19.2%	8.0%	20.1%	13.9%	10.4%	17.0%	16.0%

Housing, Work and Money



	North East	East End	Strathmartine	Coldside	West End	Lochee	Maryfield	The Ferry	Dundee	Scotland
 Income Deprived %	17.6%	26.9%	17.1%	21.5%	10.0%	19.7%	16.4%	5.5%	16.4%	n/a
 Employment Deprived %	11.9%	19.2%	12.4%	16.8%	7.8%	16.0%	12.9%	5.3%	12.5%	n/a
 Households in receipt of Universal Credit (number)	2315	2828	2349	2893	1389	3010	1988	692	17464	475,241
 Households in receipt of Universal Credit (%)	34.0%	39.0%	28.0%	28.0%	15.0%	32.0%	22.0%	8.0%	25.0%	18.6%
 Number of households with single adult council tax discount	41.4%	51.2%	38.9%	53.5%	39.5%	48.0%	46.1%	37.3%	44.7%	38.5%
 Number of dwellings in council tax bands A to C	80.2%	90.4%	70.1%	85.7%	65.2%	79.7%	79.7%	29.6%	72.3%	58.7%
 Social Rented Households	35.2%	39.5%	28.2%	31.5%	17.7%	32.3%	23.2%	6.5%	26.2%	22.5%

