



WEST DUNBARTONSHIRE COUNCIL
CHIEF SOCIAL WORK OFFICER's ANNUAL REPORT 2013 - 2014

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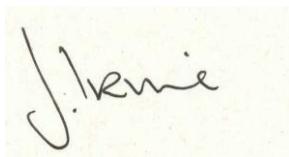
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1. Introduction and Governance

- 1.1 It is a statutory requirement that every local authority should appoint a professionally qualified Chief Social Work Officer. This requirement was initially set out in Section 3 of the Social Work (Sc) Act 1968 and further supported by Section 45 of the Local Government etc (Scotland) Act 1994. The particular qualifications are set down in regulations.
- 1.2 The responsibility of social work services is to promote people's safety, dignity and independence, and to protect communities by reducing offending and managing the risks posed by known offenders. This is done within a framework of statutory duties and powers imposed on the Council. Services are required to meet national standards and to provide best value. They are delivered in partnership with a range of stakeholders, including most importantly, people who use them.
- 1.3 The role of the Chief Social Work Officer relates to all social work services, whether they be provided by the local authority or purchased from the voluntary or private sector, and irrespective of which department of the Council has the lead role in providing or procuring them.
- 1.4 In addition, there are a small number of duties and decisions which relate primarily to the curtailment of individual freedom and the protection of both individuals and the public, which must be made either by the Chief Social Work Officer or by a professionally qualified social worker to whom the responsibility has been delegated by the Chief Social Work Officer, and for which the latter remains accountable.
- 1.5 This annual report provides Members with an overview of how the statutory duties of the Chief Social Work Officer (CSWO) have been fulfilled between April 2013 to March 2014, and it provides a summary of highlights and future challenges and developments.
- 1.6 In forming the Community Health and Care Partnership (CHCP) in 2010, with a shadow period prior to this, it was agreed that the Annual Chief Social Work Officer report would be the mechanism for affirming if the construct of the CHCP continues to fulfil the governance and statutory responsibilities for social work services.
- 1.7 This is the fourth annual report since the CHCP was formed and as Chief Social Work Officer I can confirm that all statutory and regulatory functions continue to be effectively managed within and across the CHCP. With Royal Ascent having been provided to what is now the Public Bodies (Joint Working) Act (Scotland) 2014, this will be the last time that the Chief Social Work Officer Annual Report needs to provide separate assurance to Council about the CHCP's functioning, as from April 2015 our local arrangements will be replaced by a new statutory Health & Social Care Partnership. Future reporting will therefore be

included in the overall Health and Social Care Partnership (HSCP) annual report.

- 1.8 In December 2014 the Council (and the NHS Greater Glasgow & Clyde Health Board) approved proposals for a transition to a shadow HSCP from the 1st April 2014. These have smoothly been taken forward, building on the positive arrangements and expertise developed locally.
- 1.9 Whilst the Act states the need for integration between health and social care, given that West Dunbartonshire CHCP has to date brought together all services (including Children's Social Work and Criminal Justice Services) into the Partnership, this has remained the position within the shadow Health and Social Care Partnership; and as directed by the Council and the Health Board the integration scheme for the new HSCP will incorporate the full complement of these services.
- 1.10 In conclusion as Chief Social Work Officer, I fully support and endorse the work that has been undertaken this past year in developing a comprehensive integration scheme for presentation to the Council and the Health Board in December 2014 and then Scottish Ministers at the earliest opportunity thereafter. We will ensure that the new HSCP builds on what we have achieved to-date whilst also working towards realising greater benefits for local residents, especially the most vulnerable in our communities.

A handwritten signature in black ink on a light-colored background. The signature reads "J. Irvine".

Jackie Irvine
Chief Social Work Officer
October 2014

2. Public Protection

2.1 Public Protection Chief Officers Group (PPCOG)

The highest priority in social work is to ensure that in collaboration with partner agencies, people at risk of harm are afforded effective protection. The PPCOG is chaired by Joyce White, Chief Executive of the Council and the PPCOG is responsible for the strategic co-ordination of all public protection services in West Dunbartonshire.

The chairs of both the Child Protection Committee (CPC) and the Adult Protection Committee (APC) report directly to the PPCOG. Over the past year much of the agenda has focused on improving reporting to the PPCOG in respect of performance and assurance. It is acknowledged that as well as covering the three main areas of public protection; adult protection, child protection and high risk offenders, a cross cutting theme for all of these service areas is domestic abuse. With this in mind there will be an annual staff event in December this year focusing on the various aspects of domestic abuse.

With the revision of the Community Planning Partnership (CPP) structures and work streams the role and function of the PPCOG is clearly linked to the CPP strategic map. We are also undertaking awareness raising exercises to ensure there is an understanding of the role of the PPCOG across each service area in the Council and the CPP.

A Performance reporting and Assurance Framework has been developed for the PPCOG and this is considered at every meeting. In addition an analysis of key performance issues and significant changes are highlighted for PPCOG members. This has been in place since January 2014 and is proving a useful tool in providing assurance for the PPCOG whilst also facilitating PPCOG member's scrutiny of key areas. Included in this analysis report, when applicable, is detail of any significant staffing shortage or vacancy issues.

2.2 Child Protection

As at 31 March 2014 there were 20 children living in 13 families on the Child Protection Register (CPR) in West Dunbartonshire, compared with 29 children living with 16 families the year before. This represents a fall of 31%. Whilst this appears a significant drop, we continue to monitor the numbers on the CPR. Over the course of the year a total of 51 children were registered and 65 were de-registered.

We monitor the length of time children are on the register. This is to ensure that children do not remain on the register for excessive periods of time as this could indicate that improvements in safety are not being achieved, in which case consideration should be given to the viability of the family unit remaining together. In addition to monitoring the statistical performance associated with child protection, we have a rigorous quality assurance process in place which examines all child

protection reports and the minutes of case conferences. Any issues that are identified are feedback to the staff and managers involved and reported to the Chief Social Work Officer.

As advised in my previous report, there have been a number of essential changes made to the format and structure of the Child Protection Committee (CPC) in recent years. The aim has been to ensure there is membership from across the services that have a role to play in protecting children and ensure that the agenda and content are sufficiently robust that we are able to identify areas for improvement and examine practice implications.

The Improvement Action Plan spans three years from 2013 to 2016 with an annual update and review each year. This was first presented to the PPCOG in January 2014, which was somewhat delayed due to the development work that we undertook in 2013 on the format and structure of both the CPC and the content and themes for the Improvement Action Plan (IAP). We will be reviewing the IAP in October 2014 and this will then be reported and signed off by both the CPC and PPCOG.

2.3 Adult Protection

The Adult Protection Committee has continued to meet on a quarterly basis. The membership is from a range of partner agencies that work together to effectively safeguard adults at risk of harm. The membership of the Committee has been extended since the last report and now includes the lead officer for Child Protection recognising the important links between child protection and adult protection. The work of the committee has continued to focus on the implementation and development of the Action Plan.

Of particular note has been the development of a Large Scale Investigation Protocol. This was one of the key tasks detailed within the Action Plan. A Short Life Working Group was established, the membership of this group included representatives from Nursing, Care Inspectorate, Police Scotland, Quality Assurance and CHCP staff. This group has developed a multi-agency framework to define and manage Large Scale Investigations. The protocol also incorporates proactive measures to safeguard individuals. This includes the incorporation of the early indicators of concern tool which is based upon the research published by the Scottish Government in 2014. The protocol is now in the final draft and will be considered at the next meeting of the Adult Protection Committee.

Detailed and basic awareness raising training has been further developed and has continued to be offered on a monthly basis, this is open to all agencies and it is well attended. The Committee via the Quality & Assurance Sub-Group, has developed a cohort of council officers to deliver basic awareness training to agencies on an on-going basis. Be-spoke briefing sessions have been delivered when requested, this has included the delivery of briefings at the lunchtime seminars held within health centres, and attendance at these included GP's and nursing staff. Refresher training has been offered to all council officers.

The number of referrals in 2013-14 has decreased by 16%. In the main this is due to the Vulnerable Adult referral process which is now utilised by the police. This has provided an alternate pathway for referrals for individuals that the police are concerned about but have assessed that it would not be appropriate for the adult to be referred as an adult at risk. Therefore the police are now making more suitable referrals; this is an example of effective partnership working in developing a shared understanding of Adult Protection processes and criteria. The number of referrals in 2013-14 that have proceeded to investigation has increased considerably from 12% to 25%. This can partly be attributed to the Large Scale Investigations into care homes which occurred during this period. The increase is also due to more appropriate referrals being made which is resulting in more proceeding to investigation.

2.4 Criminal Justice – the Management of High Risk Offenders

Criminal Justice Social Work Services have statutory responsibilities for the assessment and supervision of offenders. This broadly involves the preparation of reports for courts and parole board and the supervision of offenders subject to community sentences and post custodial licence. Staff within CJSW services utilise a range of complex risk assessment tools and work closely with other agencies within the Criminal Justice System, in particular Police Scotland and the Scottish Prison Service.

West Dunbartonshire has a formal partnership arrangement with Argyll and Bute and East Dunbartonshire Councils.

The Criminal Justice Service has a critical role in the assessment and management of offenders including those who present a high risk of harm to others within the community. Multi-agency public protection arrangements (MAPPA) are the principle means of discharging this responsibility with regard to registered sex offenders and restricted patients (mentally disordered offenders). Within the statutory framework supporting MAPPA the service shares information and collaborates with the Police, Scottish Prison Service and the NHS.

The statutory provisions relating to the inclusion of certain categories of serious violent offenders within MAPPA will come into effect in 2015. Over the course of 2013-14 the service has developed and implemented more formal local information sharing and planning arrangements with police colleagues in respect of the critical few but most concerning violent offenders. This will enable the service to anticipate the impact of the forthcoming formal changes in terms of organisational priorities and resources.

The responsibility for the management of offenders who present a risk of serious harm to others is that of the Criminal Justice service of the Community Health and Care Partnership. However it is important to note the wider role of local authority and health colleagues in identifying and managing risk. In this regard the role of housing services in securing suitable stable accommodation is particularly important.

The additional responsibilities arising as a result of MAPPA, to be introduced in 2015, will not bring with it any additional funding and so this will need to be absorbed into the current workload.

2.5 Community Payback Orders (CPO)

The principles underpinning CPO emphasise the benefits to the community in terms of paying back directly through unpaid work and/or other rehabilitative measures within a supervisory framework. The first year in which the full impact of the introduction of CPO could be analysed without reference to the community disposals which it replaced was in 2013 -14. In terms of overall activity levels there has been a 22% increase in new orders. In addition to increasing volume of demand there is also a challenge in terms of increasing complexity both in relation to the range of needs and risks presented by offenders and the requirements of orders; for instance 73% of CPOs with supervision requirements also have unpaid work requirements.

Unpaid work is the most visible element of the work undertaken by Criminal Justice Services. This work is highly valued by recipients of the service and over the course of 2013-14 has received positive coverage in most of the local press in respect of projects across the authority and the Criminal Justice Partnership area.

2.6 Mental Health Officer Service and Public Protection

Mental Health Officers in West Dunbartonshire undertake legislative duties in relation to the risk assessment and management of people with mental disorders, including mentally disordered offenders. The principle duties are set out in relevant legislation, with additional policy and guidance featuring such as the Multi-Agency Public Protection Arrangements (MAPPA); the Memorandum of Procedure on Restricted Patients (2010); and the Enhanced Care Programme Approach. Mental Health Officers also directly contribute to the formulation of multi-agency formal risk assessment and management plans.

All mentally disordered offenders from the West Dunbartonshire who are subject to statutory measures must have a designated Mental Health Officer. The Mental Health Officer (MHO) Service continues to experience a year-on-year increase in terms of demands on the Service. The volume of civil work generated under the terms of the Mental Health (Care & Treatment) (Scotland) Act 2003 remains largely consistent over time. West Dunbartonshire Council has however a disproportionately large number of statutory orders pertaining to mentally disordered offenders. In the period 2014-2015 it is anticipated that a number of mentally disordered offenders will be discharged from hospital and re-settled into a community living context. This will significantly enhance the role of the designated MHO, and will also have a considerable impact in respect of funding requirements for intensive care packages given the complex nature of these cases.

Whilst it remains the case that people with mental disorders are significantly more likely to be vulnerable to harm on the part of others, as opposed to presenting a risk to the broader community, it is essential that we identify and manage all risk factors, and Mental health Officers are central to this process.

2.7 Blue Triangle Multi-Agency Review

As previously reported, we undertook a multi-agency review of the three young women who took their own lives whilst residing within Blue Triangle Housing Accommodation between July 2012 and September 2012. This had been commissioned by the Chief Executive of West Dunbartonshire Council in her capacity as Chair of the West Dunbartonshire Public Protection Officers Group and the Director of the CHCP.

Following examination of each of the three cases, the Review found no evidence of any deficits in care. Appropriate information sharing and timely interventions were evident in all three cases with good evidence of planning, continuity of care and significant efforts made by services to keep all three clients engaged and supported.

The final Critical Incident Report contained several recommendations and I can report that all of these have been enacted and new processes and additional supports have been put in place to ensure we identify and intervene in the lives of vulnerable young people. This is not exclusively focused on young people who have previously been looked after and accommodated but also extends to other vulnerable young people in the community.

The Council agreed to support a bid for additional budget provision in order to enhance support services. This included:

- ❖ Additional posts within our Young People in Minds service;
- ❖ Intensive support and wrap around care;
- ❖ Additional crisis support when required;
- ❖ Provision for early intervention family mediation.

3. Corporate Parenting

We are expecting the publication of new guidance at the end of 2014 on Corporate Parenting; in preparation over the last year we have established a programme of localised activity. We have hosted a number of events focused on our corporate parenting responsibilities across the Council and the Community Planning Partnership (CPP). These sessions have provided an opportunity for reflection on our progress and identified key areas of focus; in line with commitments within our Single Outcome Agreement and the Council's Corporate Plan.

Corporate Parenting is the term used to describe "*the formal and local partnerships needed between local departments and services, and associated agencies, who are responsible for working together to meet the needs of looked after children and young people*" Looked After Children and Young People; We Can and Must Do Better (2007).

We developed and published our first Corporate Parenting Strategy in 2010 to support our commitment to improving the life chances and outcomes of every looked after child in our care. We have embedded the corporate parenting ethos within specialist services across social work, health, housing services and education as well as wider

community planning partners including Police Scotland, West Dunbartonshire Leisure Trust and Skills Development Scotland.

Both the Council in its widest sense and the CPP should be seen as Corporate Parents in respect of Looked After Children. In this context, we have a duty to support children and young people we look after on a statutory basis. This includes both children who are on formal orders and cared for by their parents or extended families and those who have been formally accommodated in the care of the Local Authority; either within a foster placement or residential placement.

To support our approach, senior managers across all Departments within the Council attended a specific session hosted by the Senior Managers' Network in February 2014 called 'Open Your Eyes'. There was a drama production presented by a young person who had spent considerable years within one of our Children's Units in West Dunbartonshire. This drama had been developed by the drama group within Kibble, one of Scotland's national specialist providers of services for young people. This was followed by a facilitated discussion on achieving good outcomes for young people, as part of our Corporate Parenting responsibilities.

This was followed up quickly by a Development Session in March 2014, attended by practitioners from across services within the Council as well as the CPP and Third Sector partners. This session was facilitated by CELCIS on behalf of the Council to provide a "critical friend" role for us, to support self-evaluation as well as identifying key actions for us moving forward.

The outcome of the Development Session has been the re-fresh of our planning structure. We have identified the Children and Families Delivery and Improvement Group of the Community Planning Partnership (CPP) as the overarching strategic leadership for the looked after work stream. There are a range of short life working groups attached to this work stream, they are:

- Engagement with looked after children and young people;
- Positive Destinations for looked after children and young people;
- Reviewing the Care Planning Process;
- Continuing care.

In May 2014, as a follow up session with the Senior Managers Network to remind all Council staff of their corporate parenting responsibilities. This was an interactive discussion and development session. The group were encouraged to consider how parenting support needs to be accessed by parents with a view to ensuring that these children receive high quality care and that they are afforded the same opportunities and experiences as children in the general population, in order that they can achieve the same outcomes.

We know from research and statistics that many of the looked after children in our society fair less well than the general population in a

number of facets of their life, such as: training opportunities, health, educational attainment and further education, to mention but a few. In addition a far greater proportion of the prison population are people who have at some time in their childhood been looked after.

We have worked closely with our third sector partners with training provided on an on-going basis in partnership with Who Cares? Scotland, to a range of practitioners within health, social work and education working with looked after children and young people.

We all have a role to play in being Corporate Parents and it is imperative that we raise awareness of this duty and the reasons why this population of children require additional assistance in order to overcome barriers that come with having been looked after.

4. Regulation, Inspection and Quality Assurance

The Care Inspectorate's role is to register care services and to inspect all care and social services with the aim of encouraging and driving improvement in those services where they have detailed either recommendations and or requirements in certain aspects of care. All inspection findings and reports are reported to the CHCP Committee along with details of improvement actions and progress.

We work closely with the Care Inspectorate in discharging our responsibilities to ensure that service provision, both provided and commissioned, are of the highest standard. The Quality Assurance team within the CHCP has a clear role in proactively monitoring the quality of care delivered and ensuring that the response to individual concerns about service delivery are responded to quickly and effectively.

Early in 2014, the Care Inspectorate carried out an extensive national questionnaire and examination of the progress being made across the country regarding child and adult protection. Scottish Ministers, conscious that Child Protection inspections had been replaced by a broader children's services inspection model and that the adult services inspection model was still in development, asked the Care Inspectorate to carry out a quality assurance process across all 32 Local Authority CPP areas.

The individual report for West Dunbartonshire was extremely positive and noted the extent of self evaluation that had taken place and had become embedded across services as core practice. The process undertaken did not constitute an 'inspection' per say and therefore the report contains the following statement:

"It was not possible to provide scrutiny based judgement on the extent to which the arrangements to protect children and adults at risk of harm were robust. The last inspections were more than 2 years ago and at that time the services were generally evaluated as performing well".

The opportunity to present an account of our collective developments and improvements proved to be worthwhile and allowed senior officers

a degree of self-reflection on our direction of travel and evaluative work undertaken to date.

We anticipate that we will be advised of a forthcoming Joint Children's Services inspection to take place at some point in 2015 and we will receive 12 weeks notification of this. Preparation for this inspection is already underway and Council will be aware that this has featured as a topic on the Elected Members Seminar programme and has been reported to the Management Group of the CPP.

For adult services, new inspection methodology has been developed and we would anticipate this will come to West Dunbartonshire in due course.

There is to be a joint thematic inspection of Multi Agency Public Protection Arrangements (MAPPA), undertaken by the Care Inspectorate and Her Majesty's Inspectorate of Constabulary Scotland (HMICS). At present the national working group is deliberating on the scope of the review and there are plans for a launch event in October 2014. The review will take place between April and June 2015. The plan is to undertake initial audits which will include all level 3 MAPPA cases, these being the most serious, as well as 10% of Registered Sex Offender case files from each Local Authority with a spread across risk categories 1 and 2. The review team will also look at all MAPPA serious case reviews since 2007 with a view to determine whether recommendations have impacted on practice across Scotland or whether some issues appear to be persistent. A self-assessment questionnaire will be completed in Partnership by the Strategic Oversight Group of the North Strathclyde Criminal Justice Authority area.

5. Service Achievements

5.1 Criminal Justice Women's Support Service

The 2012-13 CSWO report noted the achievements of the Criminal Justice Women's Safety and Support Service. This service supports women affected by domestic violence whose partners/ex partners are being assessed/managed by the service and women offenders affected by gender based violence. During 2013-14 the service received 119 referrals of which 28 were re-referrals. These figures reflect the persistence of high levels of domestic violence but also the level of awareness and activity in responding to the needs of victims.

Criminal Justice has for many years run a programme for women offenders reflecting the particular needs and vulnerabilities of this small but not insignificant group. A feature of the programme has been staff working alongside women to determine their specific needs and goals across a range of issues from dealing with anger, conflict in relationships, to substance misuse, health and employment.

This programme has been delivered from within core resources without additional funding. Criminal Justice were successful in a bid for short term (one year) funding to support women's services over 2014-15

which will enable the development of initiatives which would otherwise be beyond the capacity of the service to undertake.

- 5.2 Getting It Right For Every Child (GIRFEC) National Practice Model
Significant progress has been made in relation to the implementation of GIRFEC. This work is led by a multi-agency group of managers and representation from the third sector and Police Scotland. The legislative requirement for a 'Named Person' for each child is enshrined within the Children and Young People (Sc) Act 2014; however the implementation for this has been put back from August 2015 to August 2016.

It should be noted however that this delay in legislative implementation will not hold us back from ensuring we continue to build the key components of GIRFEC practice and systems into every day core practice and services. Our implementation plan has progressed well and we are starting to write the guidance for staff. The Scottish Government GIRFEC team are also preparing guidance which we both welcome and seek to influence given our operational experience in bringing GIRFEC to West Dunbartonshire.

Significant progress has been made through; awareness raising events across all services including adult services and the third sector; delivery of Named Person and Lead Professional training; development of single agency assessment and a review of caseloads within social work teams to assess whether they meet the 'Lead Professional' test.

Over the past year two important multi-agency staff seminars have been held looking at key GIRFEC themes affecting all staff. In November 2013 the theme was Information Sharing and GIRFEC Self Evaluation. Over 200 staff attended and listened to guidance from the Information Commissioners Office and discussed the current services and their compatibility with GIRFEC practice. In March 2014 the theme was Children's Rights, as enshrined in the United Nations Convention on the Rights of the Child (UNCRC) which provides the foundation for the GIRFEC approach and promotes the involvement of children, young people and their families in decision making. This was attended by 180 multi-agency staff who considered the effectiveness of our local practice in embracing the rights of the child.

These key events raise awareness of the important points around service provision and promoted multi-agency learning and understanding across a range of professionals and service areas in order to improve outcomes for children and young people. These events also helped us meet West Dunbartonshire's commitment to meeting the objectives of our Single Outcome Agreement whereby all children and young people will be Successful Learners, Confident Individuals, Responsible Citizens and Effective Contributors.

Further seminars are planned around key themes. The benefit in taking this multi-agency approach to developing high quality and effective joint children's services is evident through our daily interaction across agencies and the positive impact this has on children and their families.

5.3 Youth Mentoring Project – National Award

The CHCP's Youth Mentoring Project earned a Scottish Social Services Council (SSSC) Care Accolades award in the 'Preventing Offending and Reducing Reoffending' category. The scheme gives young people who need extra help and support to achieve their goals and make better decisions about their life.

Adults from the local community work together with young people to change their behaviour and achieve agreed goals. A team of 50 dedicated and trained mentors provide long term individual support to over 60 vulnerable young people across West Dunbartonshire who often have a history of offending and antisocial behaviour and have struggled to accept support from services. Mentors can be the constant meaningful relationship in the lives of our young people who can struggle to maintain consistency during teenage years. This scheme continues to expand, reflecting the positive impact it has had on the lives of many young people across West Dunbartonshire.

5.4 The Link Up Service – National Awards

'Link Up' is a partnership between West Dunbartonshire's Council for Voluntary Service (CVS) and the CHCP. It gives older people access to a range of community health, social care and third sector services through a single point of access, ensuring that local residents quickly and effectively make contact with and are referred to the services they need. Developed in response to feedback from older people and their carers, Link Up is delivered by a team of extensively trained volunteers who are regarded as trusted members of their communities, all of whom are themselves aged 55 years and over.

This service has received much acclaim nationally, including winning the 'Working with Local Communities' category at the 2014 Scottish Social Services Council (SSSC) Care Accolades Awards and the Self Management Project of the Year for the Health and Care Alliance Scotland awards.

In 2013/14, 442 older people were supported by West Dunbartonshire Link Up, receiving a wide variety of help and assistance from the CHCP and third sector partners. Link Up gives older people access to a range of community health, social care and third sector services, ensuring that they are supported to maintain their independence by quickly and effectively making contact with and receiving the services they need.

5.5 Care at Home Prescribing Service (CAPS)

Our Care at Home Prescribing Service (CAPS) work has led to increased numbers of older people having the choice and support to remain at home or return to their homes after periods in hospital. CAPS prevent older people having avoidable re-admissions to hospital due to medication-related problems by supporting their Care at Home Services. They also support positive and timely discharge from hospital.

Made up of pharmacists and pharmacy technicians, CAPS visit people in their own homes when they are discharged from hospital, liaise with Care at Home services that day, and link with other services where people require it. They check that people have an up to date medication assessment, have the right medication in their home and organise the dosage for the patient. They support understanding and confidence of usage with the person and, if required, carer. The team also provide education and training around medication care to Care at Home staff, who report the value of this training, leading to an increased confidence in their roles. CAPS have facilitated people remaining in their homes and have reduced re-admissions to hospital. CAPS success means that the initiative has been broadened to now support all older people living at home, rather than only those being discharged from hospital. We anticipate that the roll out of this service will continue to have a positive impact in enabling older people to continue living in their community.

5.6 Whole Systems Approach (WSA) to Youth Offending

The Whole Systems Approach is a Scottish Government funded initiative which aims to establish systems and processes to address and reduce offending for all Young People under the age of 18. The approach engages all partners who work with Young People under 18 involved in offending behaviour, to meet their needs and manage any risks they present. This supports and ensures an appropriate, proportionate and timely response for the young person, their families and communities. Scottish Government funding has allowed us to appoint a Whole Systems Lead Officer and an administrative worker. Funding is in place until March 2015.

The WSA work streams and overall aims are to;

- ❖ Provide Early and Effective Intervention for all Young People involved in offending;
- ❖ Identify diversion from prosecution opportunities and interventions;
- ❖ Provide robust alternatives to secure care and custody to address risk and need;
- ❖ Support Young People if they do appear in court;
- ❖ Support re-integration from secure care and custody;
- ❖ Retain more Young People on supervision longer and encouraging more Young People to be remitted to the Hearing system from courts.

This early intervention approach is achieved by aligning this approach with Police Scotland's Concern Management HUB. In this way police officers and social work staff screen all cases of youth offending together and identify the appropriate course of action or intervention for the young person. This encourages young people and their families to address the issues before they escalate any further and it reduces the amount of report requests from the Children's Hearing service, which in turn further facilitates early intervention.

Whilst funding is only in place until March 2015, we will ensure that this approach is maintained as part of our core service provision and it will remain the way that we will work with young offenders.

5.7 Fostering Campaign

In recent years the numbers of local authority approved foster carers has reduced. This has been due to a fall in people coming forward and the inevitable reduction through retirement of foster carers who have provided a much valued service to the children of West Dunbartonshire over a number of years. We launched a new fostering campaign in January 2014. We were acutely aware of the fact that given a fall in local resources we had been placing children in independent fostering placements at higher cost and importantly sometimes at some distance from the child's own community. This issue formed the central purpose of the campaign to 'bring children back to West Dunbartonshire'.

The campaign has been a success in that we received over 244 enquiries in the first six months of the campaign and enquiries continue to come in. Further advertising following on from the initial launch takes place at key points throughout the year and will continue into 2015. We continue to hold awareness raising events in local centres and we had a presentation to partners of navy personnel at the Faslane naval base.

To date several assessments have been approved at the fostering panel and children have been placed successfully with couples and single carers. There are significant numbers of assessments in progress and this has placed a high demand on the staff within the fostering and adoption team. Due to the increase in numbers of carers we have reduced our demand on the independent sector however there is a continual need to recruit more carers.

The assessment and approval process for all foster care applications is rigorous and can take between 6 to 9 months to complete. References are taken up, including interviews with referees, and full background checks are made. Should the applicant proceed to full assessment then their case is brought before the Fostering Panel which has multi-agency representation and a number of professional advisors as well as current foster carers or adopters. Once a recommendation for approval is made by the panel then the minutes are passed to me as the Chief Social Work Officer in my role as 'Agency Decision Maker', for final approval.

For children who are older there are often challenges in finding permanent 'forever families' however we continue to use the national network of enquiries. For some, after months of disappointment their temporary foster carers will step forward and request that they are considered on a permanent or adoptive basis for the child/children they are caring for. This illustrates both the significant commitment and care offered by our own foster carers and presents very good outcomes for these children. The result of this however is that resources and placement options locally are reduced further.

Based on information from other authorities who have had great difficulties recruiting carers, our campaign has been successful. We will review the overall outcome later this year with a view to how we continue to maintain a profile and plan for further large scale campaigns.

5.8 Care Leavers – Corporate Parenting

Each year we reinforce the roles and duties of Corporate Parenting within our annual National Care Leavers' Week. In 2013 the extensive programme included; a drama production called "Please Listen" performed by young people from Kibble Care & Education Centre, including one of our young people, and an input from the Children's Commissioner for Scotland, Tam Baillie, who spoke about the importance of corporate parenting. We locally launched the Who Cares? Scotland anti-stigma campaign and signing of the [Listen] pledge to give young people in care a voice. Young people contributed significantly to this programme and will continue to be supported to do so. The corporate parenting theme will be central to our programme for National Care Leavers' Week in 2014.

5.9 Self Directed Support

Following the implementation of the Self Directed Support (Scotland) Act on the 1st of April 2014, West Dunbartonshire Council CHCP has continued to make significant progress in ensuring that the duties relating to the Act are fulfilled and that staff, services and service users are supported throughout this process. Progress to date includes the following:

- ❖ Information relating to SDS is now available to staff, providers, service users and carers through the creation of a dedicated SDS web-site and Newsletter. A dedicated phone line and e-mail addresses have also been set up to deal with any SDS enquiries;
- ❖ SDS Link Workers are in place in every team across the CHCP. They attended training and development workshops to prepare for the implementation of SDS and are the SDS point of contact within their service offering information and peer support;
- ❖ A Self Directed Support policy has been created and approved by the West Dunbartonshire CHCP Committee. A Self Directed Support procedural guidance has also been created;
- ❖ A new Single Shared Assessment (SSA) has been introduced which incorporates all four SDS options;
- ❖ An SDS Project Worker has been employed within Children's Services on a seconded basis until March 2015. This officer links with colleagues from the SDS Team and Adult Services to inform developments across the authority and ensure that relevant information regarding Children with Disabilities within Procedural documents.

- ❖ CHCP staff, service providers, service users and carers have had access to a rolling programme of formal and informal training, information and consultation events;
- ❖ The development of an Individual Resource Framework (IRF) based on an equivalency model is now complete and has been tested throughout the CHCP. The IRF will be rolled out over the next few months;
- ❖ A financial system for the Carefirst IT system has been commissioned from OLM. This will allow the IRF to be completed as part of the SAA and provide budgetary information and reports;
- ❖ The SDS Team continue to network with other Local Authorities and partnerships via the Social Work Scotland SDS Sub-Group in order to share learning, best practice and progress. This group has regular contact with the Scottish Government SDS Team;
- ❖ The CHCP are funding an independent SDS support service for the Carer's of West Dunbartonshire to provide independent on-going information and/or support to both service users and carers;
- ❖ An SDS Action Plan has been developed and is regularly reviewed and updated;
- ❖ Regular meetings are held by the SDS Steering Group with management representation from each service group of the CHCP.

6. Opportunities and Challenges for the Year Ahead

6.1 Mental Health Officer (MHO) Service

The CHCP introduced new procedures in respect of processing guardianship referrals and applications in late 2013, with a view to minimising the potential for unnecessary delays in securing the appropriate outcome for Adults who lack capacity. Initial indications are that the new procedures are having a positive impact in this regard.

A further related initiative has been the establishment of an Adults with Incapacity Authorisation Group (AAG). This group was introduced, in part, as a response to a high profile Supreme Court ruling in respect of deprivation of liberty cases. The AAG currently operating on a pilot basis ensures that the CHCP processes relevant referrals in a consistent and transparent manner, with appropriate legal scrutiny. Again early indications are that the AAG has resulted in a more robust yet efficient system for securing appropriate outcomes for the adults involved.

The greatest increase in resource pressure continues to be experienced in the context of Adults with Incapacity (Scotland) Act 2000 (AWI) practice. Of particular note has been a marked increase in the number of referrals received in respect of private applications for to adults with a learning disability. This now accounts for approximately 40% of all referrals received.

In terms of the MHO Service staffing resource, there are currently sixteen MHOs appointed in West Dunbartonshire CHCP. This number includes six full-time MHOs (whose primary role is to undertake statutory MHO duties), while the remainder consists of those in a dual role, and a number of managers who hold the qualification. All qualified MHOs in West Dunbartonshire are expected to undertake statutory duties on an ongoing basis in order to maintain accreditation and in accordance with the National Standards for Mental Health Officer Services.

6.2 Criminal Justice Reform

The Scottish Government consulted on proposals to redesign community justice services in early 2013 canvassing opinion on a range of models including one in which local authorities would plan and deliver community justice services and at the other end of the scale a national model. The Scottish Government's response favoured a local authority model, the main feature of which is that local strategic planning and service delivery would fall to a defined set of partner bodies within the ambit of Community Planning Partnerships. Further consultation took place with regard to the details of this proposal and in particular the relationship between local authorities and a new national body, Community Justice Improvement Scotland (CJIS). This consultation ended in July 2014 and at the time of writing awaits a formal response from the Scottish Government.

The intention of the Scottish Government (subject to a legislative timetable) is that the changes will be implemented in 2016-17.

Senior managers with responsibility for Community Justice Services are reviewing current strategic and operational partnership arrangements with our partner authorities including budgetary arrangements. This recognises that (a) the proposals for change specifically acknowledge the possible continuance of existing or development of new inter-authority strategic and operational relationships and (b) that there are clear advantages and efficiencies to be gained or maintained.

6.3 Criminal Justice Funding

Criminal Justice funding is ring fenced and is allocated annually largely on the basis of historic activity levels. The main challenge facing criminal justice service provision is that for a number of years the value of the Community Justice Grant has declined in relation to costs leading to significant financial pressures. It is widely recognised by a range of bodies including Audit Scotland that the funding formula in use at present is in need of reform. In addition the application of the

formula within a fixed national budget without account of inflation (since 2006-7) has led to further inequity.

A feature of the new arrangements described above are that the ring fenced funding of Community Justice Services will be allocated directly to local authorities from 2016-17. At present this is done via Community Justice Authorities. The funding formula for core (statutory) services is largely predicated upon activity levels averaged out over the previous three years with an additional element related to population and indices of need.

6.4 Children and Young People (Sc) Act 2014

There are a number of opportunities presented within the many themes that run through the Children and Young People (Sc) Act 2014. Among these are: implementation of a 'named person' for all children through the implementation of the Scottish Government Policy initiative of Getting It Right For Every Child (GIRFEC), further support for kinship carers, extending the age of responsibility for care leavers to 25, extending pre-school child care provision, re-iterating the rights of the child as set out in the United Nations Convention on the Rights of the Child and introducing outcomes based performance reporting.

The challenges of the Act lies however in the uncertainty of the detail that will be provided in the Regulations which have yet to be finalised and in the financial calculations and methodology used to estimate the financial impact of some of these elements.

Through COSLA negotiations we have provided a significant amount of detail in respect of the potential financial impact of the new requirements within the Act and have raised our concern about the assumptions being made financially.

Finance colleagues have been in recent discussions with Scottish Government and COSLA about the full effect of the implications of the Act and we expect detail of the financial elements to be concluded shortly. Given our concern and the financial risks associated with this legislation there may be the need to present further specific reports on this matter to the CHCP Committee and Council Committee.

Another significant matter will be the need to review practice policy and procedural documents in line with the changes brought about by the Act. There will be a need for staff briefing sessions and additional training.

6.5 Self Directed Support Bill

The challenges for public services are formidable: social inequalities, an aging population and increased public expectations about the choice and control that can exert when they receive services.

As reported last year, the Scottish Government has set an ambitious vision for reform of public services and the Self Directed Support (Sc) Act 2014 continues to be a significant vehicle for change.

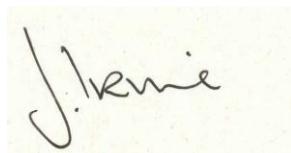
Whilst, as reported at 5.10 above, we have made significant progress and are now actively implementing the requirements of this policy and legislation, there are significant challenges that come with this.

Notably the releasing of funding from current budgets can be difficult and as we already have a significant amount of contracted and commissioned services in place for service users who are now eligible to apply for a self directed support package. Our ability to release the funding already assigned to pre-existing contracts is restrictive. We continue to monitor and report on the related impact on overall budgets.

6.6 Economic Challenges

The CHCP works with children, their families and individuals from a variety of backgrounds on both a voluntary and statutory basis. Often we see the impact of how difficult family backgrounds continue to play out in the lives of vulnerable people, beyond their childhood years, and this also can impact on generations.

The CHCP as a whole provides significant front line services and support to the communities of West Dunbartonshire. As we all know the financial restrictions and the current and ongoing economic challenges are significant. It is important therefore in my role as Chief Social Work Officer to champion the protection of front line services to vulnerable communities wherever possible above all other back office functions. This applies both within the CHCP but also to the Council as a whole. If we are to improve the life circumstances of some of our most vulnerable children, families and adults in the years to come then we need to prioritise those services that impact directly on the lives of these people.

A handwritten signature in black ink, appearing to read "J. Irvine".

Jackie Irvine
Chief Social Work Officer
October 2014