

Agenda

West Dunbartonshire
Health & Social Care Partnership

West Dunbartonshire Health & Social Care Partnership Board

Date: Thursday, 25 June 2020

Time: 10:00

Venue: Video Conference

Contact: Scott Kelly, Committee Officer
Email: scott.kelly@west-dunbarton.gov.uk

Dear Member

Please attend a special meeting of the **West Dunbartonshire Health & Social Care Partnership Board** as detailed above.

The Convener has directed that the meeting will be held by way of videoconference and Members will therefore attend the meeting remotely.

The business is shown on the attached agenda.

Yours faithfully

BETH CULSHAW

Chief Officer of the Health
& Social Care Partnership

Distribution:-

Voting Members

Allan Macleod (Chair)
Denis Agnew
Marie McNair
John Mooney
Rona Sweeney
Audrey Thompson

Non-Voting Members

Barbara Barnes
Beth Culshaw
Jonathan Hinds
Chris Jones
John Kerr
Helen Little
Diana McCrone
Anne MacDougall
Kim McNab
Peter O'Neill
Selina Ross
Julie Slavin
Val Tierney

Senior Management Team – Health & Social Care Partnership

Date of issue: 15 June 2020

WEST DUNBARTONSHIRE HEALTH & SOCIAL CARE PARTNERSHIP BOARD

THURSDAY, 25 JUNE 2020

AGENDA

1 APOLOGIES

2 DECLARATIONS OF INTEREST

Members are invited to declare if they have an interest in any of the undernoted items of business on this agenda and, if so, state the reasons for such declarations.

3 MINUTES OF PREVIOUS MEETING 5 – 9

Submit, for approval as a correct record the Minutes of Meeting of the Health & Social Care Partnership Board held on 25 March 2020.

4 VERBAL UPDATE FROM CHIEF OFFICER

The Chief Officer will provide a verbal update on recent business of the Health & Social Care Partnership.

5 CHIEF SOCIAL WORK OFFICER ANNUAL REPORT 2018-19 11 – 61

Submit report by the Head of Children's Health, Care and Criminal Justice presenting the Chief Social Work Officer (CSWO) Annual Report for 2018-19 which details statutory work undertaken, including a summary of performance and partnership working.

6 PUBLIC PERFORMANCE REPORT OCTOBER TO DECEMBER To Follow 2019

Submit report by the Head of Strategy & Transformation in relation to the above.

7/

**7 INTERNAL AUDIT ANNUAL REPORT FOR THE YEAR ENDED 63 – 69
31 MARCH 2020**

Submit report by the Chief Internal Auditor presenting the Annual Report for 2019/20 based on the internal audit work carried out for the year ended 31 March 2020, which contains an independent opinion on the adequacy and effectiveness of West Dunbartonshire's Health and Social Care Partnership Board's internal control environment that can be used to inform its Annual Governance Statement.

**8 LOCAL CODE OF GOOD GOVERNANCE REVIEW AND 71 – 90
ANNUAL GOVERNANCE STATEMENT**

Submit report by the Chief Financial Officer presenting:-

- (a) the outcome of the self-evaluation undertaken of the Health and Social Care Partnership's compliance with its Code of Good Governance; and
- (b) the Annual Governance Statement for inclusion in the HSCP Board's Unaudited Annual Accounts.

9 2019/20 UNAUDITED ANNUAL ACCOUNTS To Follow

Submit report by the Chief Financial Officer in relation to the above.

**10 NHSGGC UNSCHEDULED CARE DRAFT COMMISSIONING To Follow
PLAN**

Submit report by the Head of Health & Community Care in relation to the above.

WEST DUNBARTONSHIRE HEALTH & SOCIAL CARE PARTNERSHIP BOARD

At a Meeting of the West Dunbartonshire Health & Social Care Partnership Board held via teleconference on Wednesday, 25 March 2020 at 2.00 p.m.

Present: Bailie Denis Agnew and Councillors Marie McNair and John Mooney, West Dunbartonshire Council; Allan MacLeod, Rona Sweeney and Audrey Thompson, NHS Greater Glasgow and Clyde Health Board.

Non-Voting Members: Beth Culshaw, Chief Officer; Julie Slavin, Chief Financial Officer; Helen Little, MSK Physiotherapy Service Manager; Diana McCrone, NHS Staff Side Co-Chair of Joint Staff Forum; Sean Davenport (Substitute) for Peter O'Neill, WDC Staff Side Co-Chair of Joint Staff Forum; and Selina Ross, Chief Officer – WD CVS.

Attending: Laura Smith, Criminal Justice Manager; Jennifer Ogilvie, HSCP Finance Manager; Nigel Ettles, Principal Solicitor and Craig Stewart, Committee Officer.

Also Attending: Zahrah Mahmood, Senior Auditor and Marie McFadden, Trainee Auditor, Audit Scotland.

Apologies: Apologies for absence were intimated on behalf of Jonathan Hinds, Head of Children's Health, Care & Criminal Justice/Chief Social Work Officer and John Kerr, Housing Development and Homelessness Manager.

Mr Allan MacLeod in the Chair

CHAIR'S REMARKS

After hearing Allan MacLeod, Chair, it was noted that in light of national advice on avoiding public gatherings due to the Covid-19 situation, this meeting was being teleconferenced with Board Members and others dialling in to join it. The Chair also advised that he had agreed to take an urgent item, 'West Dunbartonshire Health and Social Care Partnership Board – Temporary Decision Making Arrangements' which would be taken first and followed by the main substantive item on Budget Setting.

DECLARATIONS OF INTEREST

It was noted that there were no declarations of interest in any of the items of business on the agenda.

MINUTES OF PREVIOUS MEETING

The Minutes of Meeting of the Health & Social Care Partnership Board held on 19 February 2019 were submitted and approved as a correct record.

VARIATION IN ORDER OF BUSINESS

After hearing Allan MacLeod, Chair, the Board agreed to vary the Order of Business as hereinafter minuted.

WEST DUNBARTONSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP – TEMPORARY DECISION MAKING ARRANGEMENTS

A report was submitted by the Chief Officer:-

- (a) presenting an alternative Health and Social Care Partnership Board meeting arrangement for the meeting of the Board scheduled to take place today;
- (b) seeking approval for the suspension of normal governance arrangements, that is, following government guidance that physical meetings may not take place during the course of the Covid-19 pandemic; and
- (c) seeking approval that “if required”, to meet immediate operational demand on decisions, alternative decision making arrangements would be enacted in that the Board will delegate authority to the Chief Officer in consultation with the Chair and Vice Chair of the HSCP Board and the Chief Financial Officer.

After discussion and having heard the Chief Financial Officer, the Chief Officer and the Senior Auditor, Audit Scotland in further explanation of the report and in answer to Members’ questions, the Board agreed:-

- (1) to approve the suspension of normal governance arrangements during the Covid-19 pandemic and accept the alternative Board meeting arrangement outlined at section 4 of this report;
- (2) to approve delegation of authority to the Chief Officer, in consultation with the Chair and Vice Chair of the HSCP Board and the Chief Financial Officer, to be enacted “if required”, to meet immediate operational demand on decisions normally requiring Board approval;
- (3) to note that regular weekly updates would be provided to members;

- (4) to note arrangements would be reviewed in line with any guidance received from the Scottish Government or as informed by the experience of the Chair and Vice Chair or the HSCP Board; and
- (5) otherwise to note the terms of the discussion that had taken place in relation to this item.

2019/20 FINANCIAL PERFORMANCE UPDATE 2020/21 BUDGET SETTING AND MEDIUM TERM FINANCIAL PLAN

A report was submitted by the Chief Financial Officer:-

- (a) providing the Health and Social Care Partnership Board with an update on the financial performance as at period 10 to 31 January 2020;
- (b) providing a proposed 2020/21 revenue budget based on actual and indicative budget offers from our funding partners; and
- (c) providing the Board with the an extract from the draft Medium Term Financial Plan covering the period 2020/21 to 2024/25 with an indicative financial position for the period 2025/26 to 2029/30 also included based on extrapolated data for years 1 to 5.

After discussion and having heard the Chief Financial Officer in further explanation of the report and in answer to Members' questions, the Board agreed:-

- (1) to note that the revenue position currently shows a projected year to date and annual favourable (under spend) position of £0.387m and £1.355m respectively;
- (2) to note that the capital position currently shows a projected delay to the opening of the Clydebank Care Home and an anticipated over spend of £0.080m;
- (3) to note the analysis of the reserve position and the projected balances as at 31 March 2020;
- (4) to accept the 2020/21 allocation for Criminal Justice Social Work Services of £1.959m funded by the Scottish Government via West Dunbartonshire Council and **note** the budget implications;
- (5) to accept the 2020/21 revenue budget contribution of £70.650m as agreed at Council on 4 March 2020 and **note** that this budget contribution together with agreed management actions, including service improvements, results in a balanced budget for social care;
- (6) to accept the 2020/21 indicative budget contribution of £96.039m from NHS Greater Glasgow and Clyde (NHSGCC) subject to formal approval by the Health Board on 21 April 2020 and any final adjustments to the recurring

budgets at month 12 and **note** that this budget contribution together with agreed management actions, including service improvements, results in a balanced budget for health care;

- (7) to approve an indicative 2020/21 revenue budget of £166.689m required to deliver the strategic priorities of the HSCP Board;
- (8) to note that this budget position was based on the current reported demand pressures, inflationary assumptions and demographic pressure. The rapidly developing operational response to the emerging Covid-19 situation does not factor into the 2020/21 proposed budget;
- (9) to approve the indicative set aside budget of £28.694m, based on the 2019/20 projected activity and actual costs with a 3% uplift;
- (10) to accept the 2020/21 budget allocations for Housing Aids and Adaptations of £0.25m and the Care of Gardens budget of £0.453m, held and managed by WDC's Regeneration, Environment and Growth Directorate on behalf of the HSCP Board;
- (11) to note the update to WDC's 10 Year Capital Plan from 2020/21 to 2028/29 and the programmes linked to the strategic priorities of the HSCP Board; and
- (12) to note the extract from the draft Medium Term Financial Plan covering the period 2020/21 to 2024/25 with an indicative financial position for the period 2025/26 to 2029/30 also included based on extrapolated data for years 1 to 5.

INSPECTION OF JUSTICE SOCIAL WORK SERVICES: UPDATE ON THE MANAGEMENT OF HIGH RISK OFFENDERS

A report was submitted by the Criminal Justice Manager providing an update on the activity surrounding the risk assessment and risk management of High Risk Offenders subject to statutory supervision currently residing in West Dunbartonshire.

After discussion and having heard the Criminal Justice Manager in further explanation of the report and in answer to Members' questions, the Board agreed to note the latest update on the improvement activity currently being taken forward, which sought to address, underpin and promote best practice in the supervision of those deemed to be a Risk of Serious Harm to others.

VERBAL UPDATE FROM CHIEF OFFICER

The Chief Officer provided a verbal update on recent business of the Health & Social Care Partnership and the position was noted in relation to:-

- Update on Covid-19 virus and the resilience arrangements that had been put in place on a national and local level to deal with this situation, including

discussions which had taken place in regard to emergency spend and funding arrangements;

- With regard to the above, to note the set up of a Strategic Resilience Group in the area and the arrangements that had been put in place to mitigate against the potential risks in the health and social care services and planned information sharing practices across all 6 HSCPs to resolve difficulties and challenges, and to acknowledge with thanks the support of the third sector, West Dunbartonshire CVS, who had indicated their willingness to become involved, as and when required; and
- To the current position with the development of a Dementia, Alzheimer and Autism Strategy and that a written update would be provided to the Board as soon as possible.

Following the verbal update by the Chief Officer, Mr Allan MacLeod, Chair, thanked the Chief Officer, all officers of the HSCP and in particular key workers for their exceptional work in the local area at this time, while acknowledging the fluid nature of the current health emergency of the Coronavirus pandemic. It was noted that the Chief Officer would continue to communicate key issues to the Board on a regular basis.

The meeting closed at 3.15 p.m.

WEST DUNBARTONSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP BOARD

25 June 2020

Subject: Chief Social Work Officer Annual Report 2018-19

1. Purpose

- 1.1** The purpose of this report is to provide the HSCP Board with the Chief Social Work Officer (CSWO) Annual Report for 2018-19 which provides information on statutory work undertaken, including a summary of performance, partnership working and performance.
- 1.2** This report was first presented to the meeting of West Dunbartonshire Council on 27 November 2019 where it was subsequently approved for submission to the Office of the Chief Social Work Advisor to the Scottish Government.
- 1.3** The impact of the Covid-19 pandemic has unavoidably delayed this report being brought to the HSCP Board, given changes in the schedule of meetings of the Board.

2. Recommendations

- 2.1** The HSCP Board is asked to note the content of the Chief Social Work Officer Annual Report 2018-19.

3. Background

- 3.1** The requirement for each Council to have a Chief Social Work Officer was initially set out in section 3 of the Social Work (Scotland) Act 1968 and is also contained within section 45 of the Local Government etc. (Scotland) Act 1994.
- 3.2** The role of the CSWO is to provide professional guidance, leadership and accountability for the delivery of social work and social care services – both those provided directly by the HSCP and also those commissioned or purchased from other providers.
- 3.3** The CSWO Annual Report has been prepared in line with national guidance: 'The Role of the Chief Social Work Officer' (Scottish Government: 2016). This report also fulfils the statutory requirement for each CSWO to produce an annual report on the activities and performance of social work services within the local area.

4. Main Issues

4.1 The CSWO Annual Report provides information on the local context within which services are delivered and information on the following areas:

- Performance: key challenges, developments and improvements
- Partnership Working: Governance and Accountability Arrangements
- Social Services Delivery Landscape
- Resources
- Service Quality and Performance including delivery of statutory functions
- Workforce planning and development
- Key challenges and pressures for social work services in 2019-20.

4.3 The annual report for West Dunbartonshire refers to the following key issues:
:

- Demand for services and budget pressures around placements for children and young people, home care and residential accommodation for older people during 2018-19;
- Inspections of Self Directed Support (SDS) and criminal justice social work and action plans to address areas for improvement;
- The creation of a multi-agency SDS Programme Board which monitors progress on the action plan and changes to practice;
- For criminal justice, professional support from Community Justice Scotland to inform the improvement plan and other key changes including engagement with sentencers, performance improvement and interventions;
- The development of the Focussed Intervention Team to provide greater community support and reduce the likelihood of hospital admissions.

4.4 Recruitment to children and families vacancies and a commitment to recruit a further six social workers above the staffing establishment is referred to, alongside recruitment for six new support worker posts to provide family support, parenting assessments and support to young people.

4.5 The report also refers to the importance of enhanced performance reporting to track changes in demand, monitor caseloads and manage risk across services.

4.6 Overall, the developments across social work services to children, adults and families are supported by working more closely with a range of professional partners, reflecting the benefits of integration alongside the importance of professional liaison and support.

5. People Implications

- 5.1** The CSWO Annual Report refers to workforce planning and development including activity to support staff compliance with professional registration as well as recruitment and retention activity.

6. Financial and Procurement Implications

- 6.1** Financial implications are highlighted within the annual report and are impacted by the demographic profile of West Dunbartonshire, particularly provision of Care at Home and services to children and young people who are looked after away from home.
- 6.2** Work to address these financial pressures is a key priority of the HSCP and ongoing efforts reflect this, including work with key partners, to ensure resources are targeted appropriately to meet need and shift the focus of practice to ensure sustainable service provision to meet statutory duties.

7. Risk Analysis

- 7.1** Provision of statutory social work services requires appropriately qualified and skilled staff – analysis of activity and future demand is intended to inform future service planning to continue to meet statutory duties.

8. Equalities Impact Assessment (EIA)

- 8.1** There is no equalities impact as the report does not recommend a change to existing policy, function or strategy.

9. Consultation

- 9.1** The CSWO Annual Report was informed by information provided by managers across the HSCP; Heads of Service within the HSCP Senior Management Team have also contributed to and been consulted on the report content.

10. Strategic Assessment

- 10.1** The findings and analysis within the CSWO Annual Report provide assurance that social work services in West Dunbartonshire continue to be planned and delivered in a way that reflects statutory requirements.
- 10.2** The report also reflects how services support the HSCP's strategic priorities, particularly by supporting individuals, families and carers to live independently

and with dignity, as well as meaningful community engagement with active, empowered and informed individuals who feel safe and engaged.

Jonathan Hinds
Head of Children's Health, Care and Criminal Justice
Chief Social Work Officer
4 June 2020

Person to Contact:	Jonathan Hinds, Head of Children's Health, Care and Criminal Justice, Chief Social Work Officer; 16 Church Street, Dumbarton, G82 1QL; Telephone 01389 737320; email jonathan.hinds@ggc.scot.nhs.uk
Appendices:	Chief Social Work Officer Annual Report 2018-19
Background Papers:	The Role of the Chief Social Work Officer, Guidance issued to Ministers pursuant to section 5 (1) of the Social Work (Scotland) Act 1968, revised version: July 2016 https://www.gov.scot/publications/role-chief-social-work-officer/



West Dunbartonshire
Health & Social Care Partnership

Chief Officer: Beth Culshaw

West Dunbartonshire Health and Social Care Partnership

Chief Social Work Officer Annual Report

2018-19



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1. SUMMARY OF PERFORMANCE: KEY CHALLENGES, DEVELOPMENTS AND IMPROVEMENTS DURING 2018-19

This is my first annual report since joining West Dunbartonshire as Chief Social Work Officer and I am pleased to have the opportunity to report on how social work services have been delivered, in the context of integration arrangements by the Health and Social Care Partnership (HSCP), as well as highlighting the achievements, challenges and progress to deliver services in West Dunbartonshire over the past year.

During 2018-19, child protection referrals, investigations and case conferences reduced, differing from the trend of increasing demand over recent years. Whilst this indicates a proportionate, balanced approach by social workers and partner agencies, the number of children who are looked after in West Dunbartonshire continued to increase, particularly kinship care placements, echoing trends in previous years. This significantly impacted on the HSCP budget and reflects the importance of ensuring services are designed to meet local need. As part of a process to review our service delivery arrangements, monthly management information and performance reports were introduced to track demand, identify opportunities for change and plan interventions to improve outcomes for children, young people and families.

Referrals for adults at risk and vulnerable adults also reduced during 2018-19 and ongoing self-evaluation activity was supported by the delivery of significant training to a wide range of professionals involved in public protection.

The senior management team progressed arrangements to capitalise on the benefits of integration, particularly work to support improvements around delayed discharge and the development of a new Focussed Intervention Team to reduce admissions to hospital. Work to embed practice that reflects the impact of adverse childhood experiences (ACEs) on health and behaviour was also extended across the HSCP and a range of partners to improve practice.

Financial pressures across the HSCP continue to be carefully monitored, reflecting the importance of ensuring that services are provided in a way that also recognises the strengths of our communities and partners in rethinking care and earlier intervention. Nevertheless, continued financial pressure is evidenced by over spend in the budgets associated with caring for children away from home and care at home for adults.

Information from inspection activity is outlined in section 5, however, notably, West Dunbartonshire was one of six partnership areas to take part in a thematic review of Self Directed Support (SDS) by the Care Inspectorate and Healthcare Improvement Scotland during 2018-19. Furthermore, our criminal justice social work services will be the second area in Scotland to be inspected as part of the Care Inspectorate's new quality indicator model, focussed on Community Payback Orders. In advance of these inspection reports being published later in 2019, teams are already working on improvement actions to develop practice, informed by pre-inspection activity.

West Dunbartonshire continues to face challenges around the impact of poverty, violence against women and other inequalities. Ongoing financial pressures are likely to be further affected by increased demand arising from legislative changes such as the extension of free personal care and the presumption against short sentences. Continuous improvement in practice, performance and outcomes for children, young people and adults is therefore a significant, though not new challenge. The dedication and commitment of social work and health colleagues, as well as the positive, trusting and constructive relationships with our partners, carers and communities will continue to be instrumental to how we deliver services together to improve lives.

2. PARTNERSHIP WORKING: GOVERNANCE AND ACCOUNTABILITY ARRANGEMENTS

Role and Function of the Chief Social Work Officer

The requirement for each Council to have a Chief Social Work Officer (CSWO) was initially set out in Section 3 of the Social Work (Scotland) Act 1968 and further supported by Section 45 of the Local Government etc. (Scotland) Act 1994.

The role of the CSWO is to provide professional governance, leadership and accountability for the delivery of social work and social care services, not only those provided directly by the HSCP but also those commissioned or purchased from the voluntary and private sector. Social work services are delivered within a framework of statutory duties and powers and are required to meet national standards and provide best value.

West Dunbartonshire Council has resolved that the Chief Social Work Officer role is held by the Head of Children's Health, Care and Justice.

The Chief Social Work Officer is a 'proper officer' of the Council in relation to social work functions and is a member of the Senior Management Team within the HSCP and a non-voting member of the HSCP Board.

Integration

West Dunbartonshire Health & Social Care Partnership was formally established on 1 July 2015; the HSCP Board is responsible for the operational oversight of the HSCP as the joint delivery vehicle for services delegated to the Integration Joint Board (except for NHS acute hospital services) as set out within its integration scheme.

During 2018-19, the HSCP agreed its vision as 'improving lives with the people of West Dunbartonshire' and will be implemented through delivery of the following key strategic priorities:

- Early Intervention
- Access
- Resilience
- Assets
- Inequalities

The priorities and vision of the HSCP and its strategic plan has been shaped by the Annual Performance Report for 2018/19; the local strategic needs assessment (which illustrates the growing complexity of need and demand within the local area); active engagement with stakeholders at locality, community planning and national levels and understanding of the broader policy and legislative context.

Commissioning

The Public Bodies (Joint Working) (Scotland) Act 2014 requires that a Market Facilitation Plan is produced to set out the health and social care commissioning priorities and intentions for HSCPs. West Dunbartonshire's Commissioning and Market Facilitation Plan was developed to complement the current Strategic Plan and will also set out the commissioning priorities and intentions over the duration of the forthcoming Strategic Plan for 2019-2022.

The Commissioning and Market Facilitation Plan commits the HSCP to a programme of communication with service providers, service users, carers and other stakeholders about the future shape of the local health and social care market, whilst partners and providers can ensure that services are responsive to the changing needs of service users.

The Commissioning and Market Facilitation Plan seeks to identify what future demand for care and support might look like to support and shape the market to meet future needs. Constructive partnership working and engagement has been intrinsic to developing the plan to reflect an innovative and flexible approach to service delivery.

Scottish Government guidance has highlighted the need to specify the total available resources to deliver the outcomes and objectives within strategic plans – as such, work is underway to scope current and future spend across the sector and to reflect the uncertainties and pressures regarding financial allocations that will be made to the HSCP Board in future financial years.

Partnership Arrangements

The Chief Social Work Officer participates in a range of groups and forums to ensure the proper delivery of social work functions. These include the 'Nurtured' and 'Safer' Delivery & Improvement Groups (DIGs) which deliver on the strategic priorities of West Dunbartonshire Community Planning Partnership as well as the Public Protection Chief Officers Group, West Dunbartonshire Council, the HSCP Board, Audit Committee and Clinical & Care Governance group. These arrangements support work with a range of key partners including the Council, third sector, Police, and Scottish Children's Reporters Administration to ensure that services are developed and provided across West Dunbartonshire that reflect local strategic priorities.

Clinical and Care Governance

Within the HSCP, the Clinical and Care Governance group has a responsibility to provide scrutiny, constructive challenge and oversight across health, care and social work services in West Dunbartonshire. The group meets quarterly to ensure that services provide quality, effectiveness and efficiency to meet the needs of local residents and communities, as well as evidencing good practice around professional standards, risk management, staff learning and development.

The Clinical and Care Governance group comprises the HSCP Chief Officer, Heads of Service, Chief Social Work Officer and Chief Nurse who also review progress around quality assurance improvement plans arising from inspections.

Self-evaluation and improvement activity is regularly reported in addition to compliance with statutory and mandatory training for staff across the HSCP.

Locality Engagement Networks (LENs)

Locality Engagement Networks (LENs) are firmly established as a dynamic forum for users of services, families and carers to share their experiences to inform continuous improvements to care in West Dunbartonshire.

Meetings continued to take place across the Clydebank and Dumbarton & Alexandria locality areas during 2018-19. LENs have focused on Addictions Services, building resilience in Older People (Community Older Peoples Team), developing the new West Dunbartonshire HSCP Strategic Plan 2019-22 and NHS Greater Glasgow and Clyde's Moving Forward Together Programme. The Strategic Plan and the Moving Forward Together Programme included engaging with service users groups, third sector organisations, voluntary groups and community councils. There was also a discussion group held with Carers of West Dunbartonshire on the draft HSCP Carers Strategy.

Public Protection Chief Officers Group (PPCOG)

West Dunbartonshire's multi-agency Public Protection Chief Officers Group (PPCOG) is chaired by the Council Chief Executive and core membership includes the Director of Nursing (NHS Greater Glasgow & Clyde), the Divisional Commander (Police Scotland), the Chief Officer (HSCP) and the Chief Social Work Officer. The PPCOG is responsible for the strategic co-ordination of all public

protection services in West Dunbartonshire. This includes scrutinising the performance of services for child protection, adult protection and multi-agency public protection arrangements (MAPPA) for the management of high risk offenders. The group also oversees the activity around the Alcohol & Drugs Partnership and violence against women.

The PPCOG continues to hold regular development sessions and to review the purpose and function of the group in terms of assurance and governance. Following a review of membership in 2018-19, a number of crucial partners, including West Dunbartonshire’s Chief Education Officer and the Locality Reporter Manager from the Scottish Children’s Reporter Administration joined the group.

With the independent chair of the Adult Protection Committee moving on in November 2018, it was agreed that a joint independent chair role for both Adult and Child Protection Committees would be established. This new role includes greater capacity to drive forward strategic priorities and to provide constructive challenge and scrutiny.

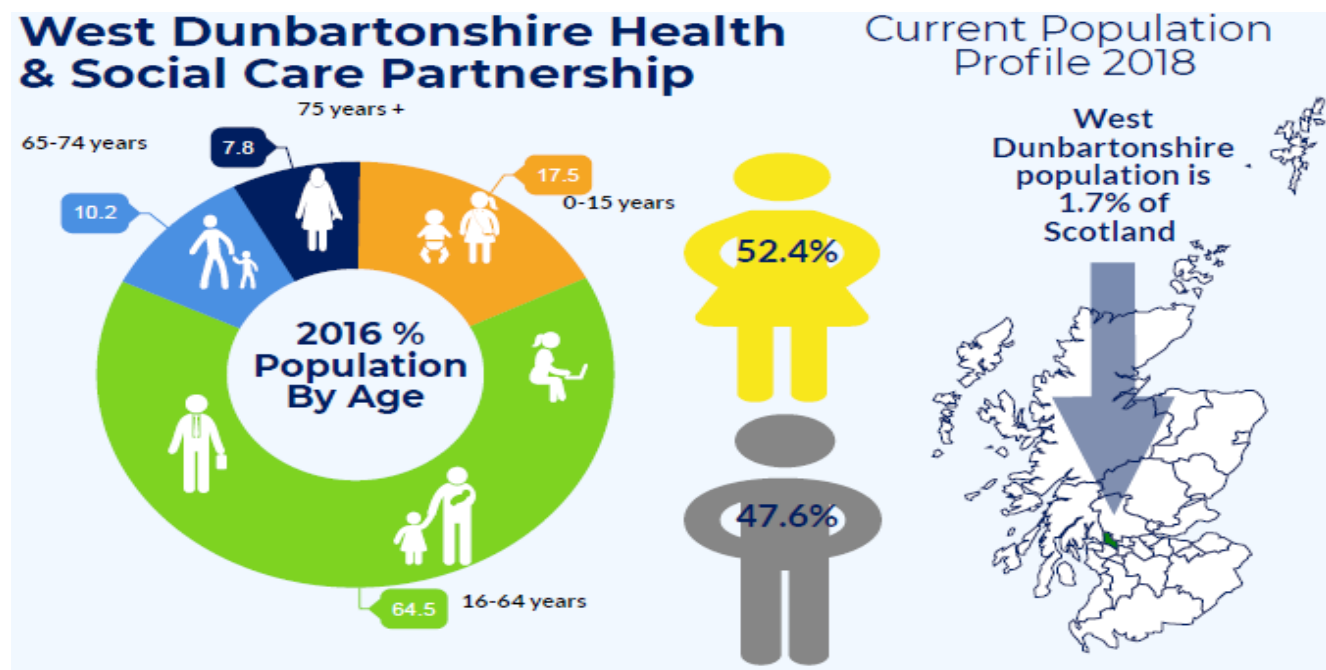
The Performance and Assurance Reporting Framework (PARF), included at Appendix 4, provides performance against targets for child protection, high risk offenders, adults at risk and vulnerable adults. The main purpose of the report is to ensure that the PPCOG reviews performance, outcomes and demand levels and takes any necessary action required or request the provision of further analysis and review.

Following the development of a national shared data set for Child Protection and revised West of Scotland Adult Protection Guidelines, our PARF will be adapted to reflect the new indicators and arrangements.

3. SOCIAL SERVICES DELIVERY LANDSCAPE

Population Profile

Figure 1: Population information



Demographic Profile

West Dunbartonshire lies north of the river Clyde, encompassing urban and rural communities. According to the National Records for Scotland, the 2018 population was 89,130 – a decrease of 0.5% from 89,610 in 2016-17. The population of West Dunbartonshire accounts for 1.7% of the total population of Scotland.

In West Dunbartonshire, 17.6% of the population are aged 0-15 which is slightly higher than Scotland (16.9%). People aged 16-24 make up 10.0% of the population which is smaller than Scotland (10.7%). People aged 65 and over make up 18.4% of West Dunbartonshire which is slightly lower than the whole Scotland population (19.5%).

National and local evidence indicates an ageing local population, particularly due to a reducing number of births, while the number of people migrating to other council areas within the 15-44 age group is increasing.

West Dunbartonshire's Social and Economic Profile (2018) shows a notable increase in the share of the 20% most deprived data zones in Scotland, the biggest increase in relative deprivation from 2012. The area also has the second highest rate of income-deprived population in Scotland (18%) which is lower only than Glasgow at 20% (SIMD: 2016).

Child Poverty

Child poverty remains persistently high with 25% of children in West Dunbartonshire affected by child poverty (End Child Poverty Now: 2019). Local reporting on actions to address child poverty are established within the West Dunbartonshire Community Planning Partnership 'Plan for Place' as well as the HSCP Strategic Plan and is reviewed on an ongoing basis.

The Nurtured DIG of the Community Planning Partnership co-ordinated the first West Dunbartonshire Council and NHS Greater Glasgow and Clyde 'Local Child Poverty Child Action Report' which sets out commitments to address the key drivers of poverty:

- increasing income through employment
- maximising income from the social security system including the range of new Best Start benefits targeting families with children under the age of five
- reducing household costs.

Local activity has been developed with the Information and Advice Partnership, Youth Alliance and the Adult Learning Partnership. Community-based events will promote the local child poverty action report and seek third sector and local resident input to future action areas.

Work is also ongoing with the Council and NHS Greater Glasgow & Clyde to prepare the first report on activity to progress children's rights, within the Children and Young People (Scotland) Act 2014. Consultation activities during 2018-19 to inform the report included a Nurtured DIG development session to identify priorities; ongoing progress updates to the Nurtured DIG; an Improvement Service Review and updates to the Community Planning Board.

Universal Credit

Universal Credit was fully implemented in West Dunbartonshire in November 2018, with significant work carried out by Working 4U to mitigate its impact on particularly the most vulnerable residents. West Dunbartonshire anticipates a significant reduction in welfare spending in future years; ongoing work will seek to continue to limit the negative impact of welfare reform.

Given the burden of disease profile for West Dunbartonshire, work has continued with NHS Greater Glasgow & Clyde to better understand the impact of the history of heavy industry in the area, with

long term conditions and diseases affecting people at a comparatively young age.

The Information and Advice Partnership established a plan to ensure all residents can submit and maintain a claim, working with the local Citizens Advice Bureau and the Council’s welfare benefits support team (Working 4U Money) for the development of local benefit support Hubs.

4. RESOURCES

2018/19 Budget Setting National and Local Context

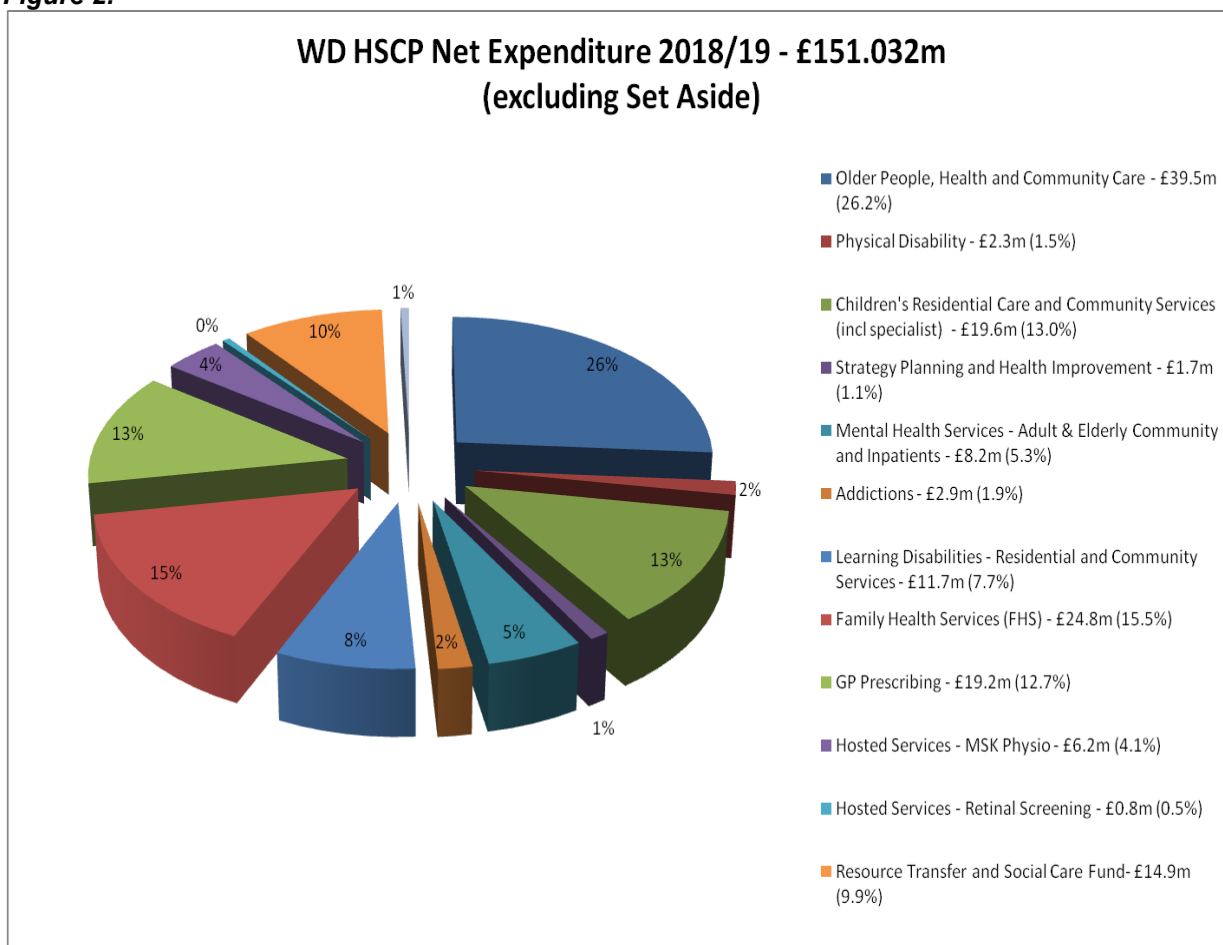
The HSCP Board undertook a public consultation on health and social care savings options developed by senior managers to fill projected budget gaps. The consultation ran online from 6 March to 4 April 2018 and 335 people participated.

The final 2018/19 budget setting gap was £0.763m (£0.552m for health and £0.211m for social care). The HSCP Board approved the following savings options of £1.216m:

- reviewing the external provision of older people’s residential placements
- revising community based supports for children & families
- increasing income
- redesign of the senior management and support teams
- review of learning disability housing support to a core and cluster model.

The agreed budget for 2018/19 to deliver the HSCP strategic priorities was £151.032m, excluding the set aside notional budget of £18.210 million. Figure 2, below, details how this funding was allocated across the main care groups.

Figure 2:



Financial Challenges

In recognition of the significant financial challenges for 2018-19, a recovery plan was subsequently approved which included the following measures:

- vacancy control procedures - vacancies are submitted to the HSCP senior management team for consideration and approval
- overtime authorisation procedures updated and aligned more closely with priority need
- Head of Service and Chief Finance Officer approval for purchase of IT or mobile devices
- any underspend in non-staffing budgets to be secured as far as possible
- income maximisation ie: prompt financial assessments and grant income secured
- savings related to ring-fenced budgets for service redesign models to help offset older people services pressure and community placements and
- continuous review of savings targets for 2018/19.

This recovery plan contributed to the 2018/19 final outturn position as an overall surplus of £1.038m, which was transferred to earmarked and general reserves for 2019/20 and future years. This overall position is summarised in Figure 3, below:

Figure 3: 2018/19 Final Outturn against Budget

West Dunbartonshire Integrated Joint Board	2018/19 Annual Budget	2018/19 Net Expenditure	2018/19 Underspend/ (Overspend)
Consolidated Health & Social Care	£000	£000	£000
Older People, Health and Community Care	44,368	45,008	(640)
Physical Disability	3,106	3,006	100
Children and Families	20,249	22,511	(2,262)
Mental Health Services	9,571	8,949	622
Addictions	2,809	2,569	240
Learning Disabilities	16,802	16,655	147
Strategy, Planning and Health Improvement	1,672	1,351	321
Family Health Services (FHS)	25,738	25,738	0
GP Prescribing	19,306	19,383	(77)
Hosted Services - MSK Physio	6,493	6,254	239
Hosted Services - Retinal Screening	791	755	36
Criminal Justice - Grant funding of £2.1m	0	0	0
HSCP Corporate and Other Services	4,204	1,892	2,312
IJB Operational Costs	270	270	0
Cost of Services Directly Managed by West Dunbartonshire HSCP	155,379	154,341	1,038
Set aside for delegated services provided in large hospitals	18,210	18,210	0
Assisted garden maintenance and Aids and Adaptations	577	577	0
Total Cost of Services to West Dunbartonshire HSCP	174,166	173,128	1,038

The main social work and social care budget pressures were around community and residential placements for children and young people which exceeded the budget by £1.2m despite additional investment in 2018/19 of £1.1million, however kinship and fostering placements continued to rise by approximately 25%. The Head of Children and Families is committed to reviewing the reasons, processes and outcomes of these placements. Furthermore, children placed in residential schools exceeded the budget by £0.9million. It is recognised that this is an extremely volatile budget and

secure placements can cost in excess of £0.2million per child. Children's Services managers review these packages on a weekly basis for alternative, appropriate community based support.

Older people supported through care at home services or in residential or nursing care exceeded the budget by £0.5million and £0.2million respectively and can be attributed to demographic demand and continued improved performance on anticipatory care planning and reduction to bed days lost through delayed discharge.

All other adult services including learning and physical disability and mental health and addiction services collectively underspent by £1million, mainly due to a reduction in a small number of high tariff, complex cases.

The savings programme agreed by the HSCP Board as part of the 2018/19 budget setting process covers the three year period to 2020/21 and a further £1.1m of savings are anticipated from this.

5. SERVICE QUALITY AND PERFORMANCE (INCLUDING DELIVERY OF STATUTORY FUNCTIONS)

CSWO and Service Standards

The Chief Social Work Officer has a core responsibility to provide professional oversight and leadership regarding the provision of social work services and to ensure that the social services workforce practices within the standards and codes of practice as set out by the Scottish Social Services Council (SSSC).

The Care Inspectorate is responsible for registering a range of social care and social work services as well as providing scrutiny through inspection. From inspection, services are supported to evidence improvement based on action plans arising from recommendations from inspections within the context of service quality alongside suitably robust arrangements for governance and accountability. Inspection reports and recommendations, as well as local improvement action plans, are reported to the HSCP Audit Committee who monitor progress to provide our communities with confidence in services provided in West Dunbartonshire.

Inspection findings and improvement activity are also reported to a range of forums including:

- West Dunbartonshire Public Protection Chief Officers Group
- HSCP Board
- HSCP senior management team
- HSCP Clinical and Care Governance Group
- Community Planning groups.

Positive engagement with the Care Inspectorate has been helpful in preparing for the forthcoming inspection of criminal justice social work services. Work has developed following notification in October 2018 that West Dunbartonshire will be the second area to be inspected within the new justice inspection quality improvement model.

During the past year, the Care Inspectorate completed their inspection of Self Directed Support (SDS) services in West Dunbartonshire. The report will be published in late Spring/early summer 2019. Staff, carers, users of our services and local third sector partners were central to our preparation activity for inspection. Once the recommendations are published, the HSCP will develop an action plan to take forward in partnership with relevant colleagues and organisations.

Within the HSCP, our Quality Assurance team has an important role in monitoring the quality of care delivered whilst ensuring that we respond to individual concerns in a thorough, efficient and effective way that continues to promote quality service provision.

The HSCP senior management team meets regularly with our Strategic Link Inspector from the Care Inspectorate to provide valuable critical challenge to support our work to continually improve service standards across the HSCP.

Care Inspectorate Inspections

During 2018-19, 13 services were inspected across West Dunbartonshire during 2018-19:

- Children's Services: Adoption Service, Fostering Services, our three children's houses (Blairvadach, Burnside and Craigellachie), Throughcare (adult placement) service
- Community Health and Care Services: Care at Home, Crosslet House, Crosslet Day Care, Frank Downie House, Sheltered Housing
- Learning Disabilities: Learning Disability Housing Support Service, Community Connections.

Our children's houses were graded as 'good' or 'very good' for care and support, whilst our staff in Fostering and Adoption services were rated as very good. This reflects the care, support and dedication of colleagues across our services to looked after children in West Dunbartonshire.

Meanwhile, our Throughcare (Adult Placement) service retained their 'excellent' grading for care and support – this is the highest grading available from the Care Inspectorate and reflects the dedication, commitment and inspiring work of this team. They are to be congratulated for retaining this grading and continuing to support our care-experienced young people to such a high standard.

Community Health and Care services achieved 'good' or 'very good' for care & support and staffing within inspection across a range of quality themes.

Furthermore, our Learning Disability Housing Support Service achieved 'excellent' gradings for care & support and management & leadership – staff and managers deserve particular credit for their dedication within this service to improve outcomes for users of this service.

Other inspections that took place during the past year and will formally report later in 2019 will be included in the next annual report.

Further information on performance across services is included in the following Appendices:

Appendix 1: Care Inspectorate Inspection Outcomes 2018-19

Appendix 2: West Dunbartonshire HSCP Key Performance Indicator Summary 2018-19

Appendix 3: HSCP Local Government Benchmarking Framework Indicators

Appendix 4: Performance and Assurance Reporting Framework Public Protection Chief Officers Group 2018-19.

CHILDREN AND FAMILIES

Child Protection

In the past year the Public Protection Chief Officers Group has continued to receive regular updates from the Child Protection Committee in respect of the analysis and findings of the National Child Protection Improvement Programme (CPIP) and its relationship to West Dunbartonshire's Child Protection Committee (CPC) Improvement Plan. This programme continues to guide the Child Protection Committee Improvement Plan to reflect national policy and learning.

West Dunbartonshire CPC continued to monitor activity over the course of the year. During the last quarter of 2018-19, a monthly performance report to track practice improvements has been developed. This includes information on achievement of key performance indicators such as moving from referral to child protection case conferences within 21 days. This report will also provide the PPCOG with important information on workload and demand to support practice improvement and constructive challenge.

Furthermore, regular meetings with the Area Locality Reporter to the Scottish Children's Reporter Administration have been established to progress the 'Better Hearings' work stream.

The CPC Improvement Action Plan is focussed on a range of areas for development and improvement. This is a 'live' three year plan and is a standing agenda item on the CPC, where progress is noted and additional improvement areas or actions are added following case file audit, reflective case reviews, outcomes of national Significant Case Reviews or self-evaluation.

Statistics and activity levels gathered for the Performance and Assurance Reporting Framework (Appendix 4) have been monitored and analysed on a quarterly basis for a number of years, for the purpose of reporting to the PPCOG and for the CSWO to monitor demand in comparison to resources and address any risks that may occur in this respect.

For 2018-19, the number of child protection referrals reduced to 340, from 423 in 2017-18 (19.6% reduction). Child protection investigations reduced by 25% and case conferences fell by 32%. This is illustrated in Figures 4, 5 and 6, below:

Figure 4: Number of Child Protection referrals (quarterly)

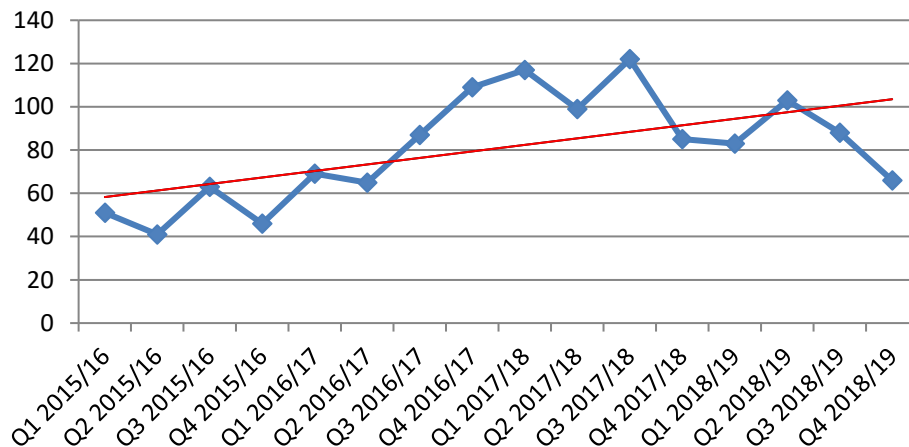


Figure 5: Number of Child Protection referrals (annual)

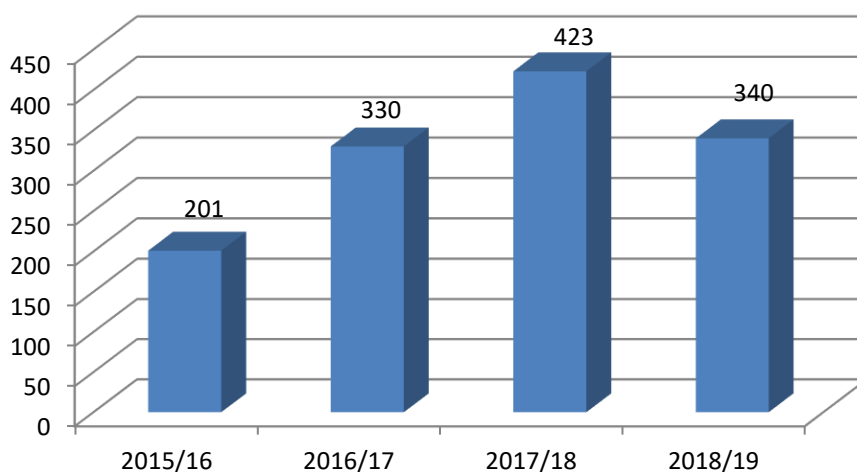
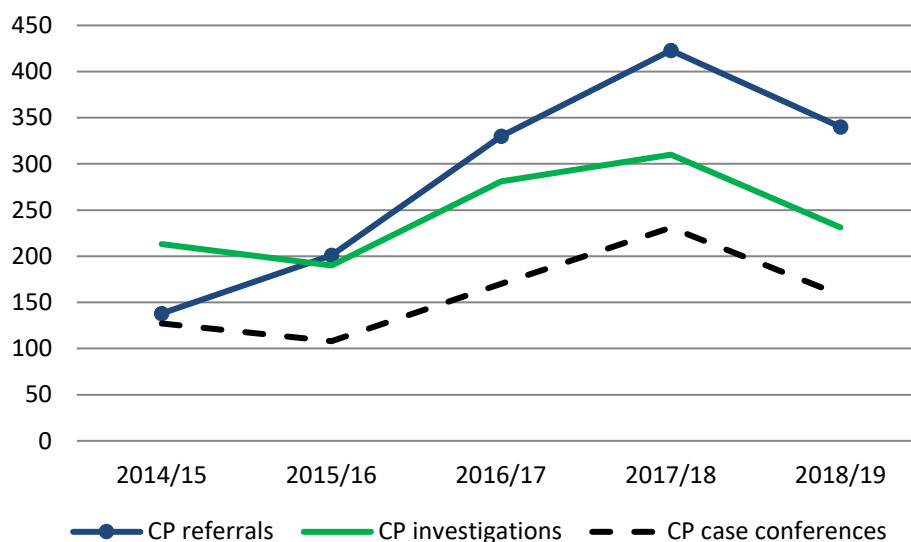


Figure 6: Child Protection referrals, investigations and case conferences



The reduction in child protection referrals leading to a fall in the number of investigations and child protection case conferences reflect work undertaken by staff cross a range of professional groups to ensure that referrals are investigated and directed to the most appropriate service.

Where there are other welfare concerns for children which may merit social work input, these are referred via the Getting it Right for Every Child (GIRFEC) request for assistance process to ensure that children get the right help at the right time.

In 2018-19, 88 children were placed on the child protection register, compared to 111 in 2017-18; a 21% reduction. As at 31 March 2019 there were 52 children on the Child Protection Register in West Dunbartonshire. This reduction is explained to some extent by the reduction in referrals, however highly complex child protection concerns continue to come to the attention of the service, particularly domestic abuse matters in the context of other offending behaviour. Thus, while the number of child protection registrations has reduced, the number of children becoming looked after continued to increase.

Analysis of this decrease in referrals and activity reflects a number of factors, including a more consistent approach to the referral threshold for child protection. A more robust practice model in respect of the child protection Initial Referral Discussion has improved joint decision making across services, reduced the impact of violence and improved joint working arrangements in the earlier identification of neglect. During 2018-19, our Initial Referral Discussion (IRD) process was streamlined with the other HSCPs across NHS Greater Glasgow & Clyde, whereby the Child Protection Unit is the health representative as part of the IRD process. Education services continue to be included as a core partner in this process, which has proved invaluable in informing initial child protection discussions from a local perspective.

Another practice development was an improved assessment of child wellbeing for adult services practitioners who support individuals with care of children. Following consultation, this is expected to be rolled out in due course, to ensure adult services practitioners are more able to contribute to parental capacity assessments, with the aim of better supporting effective planning for children.

Special Needs in Pregnancy (SNIPS)

During 2018-19, a multi-professional model of care was piloted to support six females throughout their pregnancy and post-birth by an addiction worker, a medical officer and a Children & Families social worker. All individuals progressed well which resulted in their children being removed from the child protection register and social work services ending their formal involvement.

This joint approach brought important specialist knowledge to the screening and planning for women who are vulnerable in their pregnancy. The social worker and addictions worker are working closely to further develop the service including potential group interventions with women and their babies to promote positive peer support.

Family Group Decision Making

After an initial pilot project last year, further funding was secured in 2018-19 through the Looked after Children Pupil Equity Fund (LAC PEF) to implement Family Group Decision Making. This will allow the local authority to evaluate the benefits of this service and how it may be progressed in the future. The service received 25 referrals to-date and, working in conjunction with the Alternative to Care team, has managed to sustain young people within their family settings and prevent them coming into care settings.

Transitions

During 2018/19 there have been continual improvements in advanced planning around the identification of services for young people transitioning from Children's to Adult services. Through this process, which involved key partners from Learning Disability, Adult Care, Mental Health, Education and Children's Services, 12 young people are being supported in preparation for their transition into Learning Disability services and to develop the required support packages for them.

The multi-professional Transitions Advisory Group (TAG) continued to support young people with additional support needs to move from education and children's services to adult services and, during 2018-19, an improved planning process was developed to identify young people who may require support in adulthood at an earlier stage. The Transitions Advisory Group has the delegated authority to agree the adult service which will best meet the needs of the young person and also functions as a case discussion forum for those young people with more complex needs who may require high cost adult services.

Further development of the TAG process will include a review of the balance of resources across the adult services with the aim of ensuring transition plans for young people are progressed across all adult services on an equitable basis.

Looked After Children and Young People

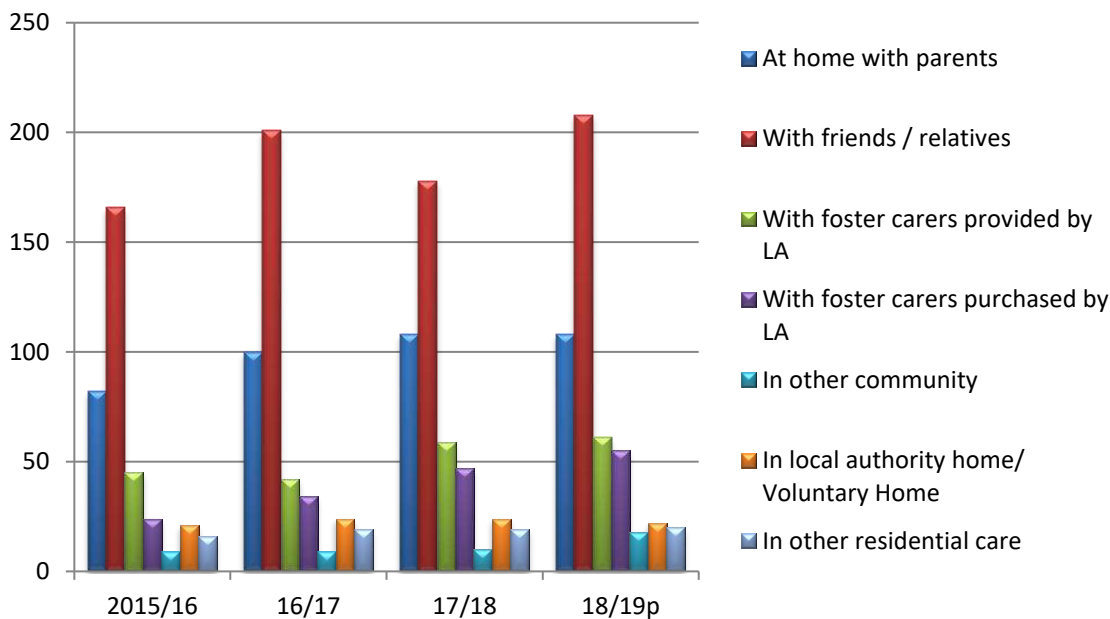
The number of children and young people looked after in West Dunbartonshire has continued to be challenging during 2018-19; on 31 March 2019, 68 more children and young people were in a range of community and residential placements compared to the same date last year. Figure 7, below, provides further information on the usage of placement types over the past year:

Figure 7: Placements for looked after children & young people 2018-19 and 2017-18

	2018-19	2017-18	Change (n)	Change (%)
Kinship care	247	203	+44	+22%
Fostering (internal)	62	56	+6	+11%
Fostering (external)	60	41	+19	+46%
Residential Schools	18	17	+1	+6%

Whilst further analysis is provided in the following sections, the overall trend analysis for looked after children from 2015-16 to 2018-19 is illustrated in Figure 8, below:

Figure 8: looked after children and young people 2015-16 to 2018-19



This reflects the continued high use of kinship placements and the continued high number of children who are looked after at home with parents. The number of children in residential children's houses and other residential settings remained comparatively static.

Kinship Care

High rates of kinship care placements during 2018-19 continued the existing trend: at 31 March 2019, 247 children were in kinship placements, an increase of 44 (22%) on the previous year.

Whilst kinship care can enable children to remain with family members, the rate of kinship placements in West Dunbartonshire is significantly greater than other comparable authorities; further work will be taken forward to improve timescales and review placements as well as examination of the length of time children have been in kinship care and looked after at home, use of kinship orders and wider improvements in permanence planning in West Dunbartonshire.

The Permanence and Care Excellence Programme (PACE)

West Dunbartonshire has progressed to Phase Two of the Permanence and Care Excellence (PACE) Programme, which seeks to reduce drift and delay in securing better outcomes for children. In October 2018 a two-day improvement training event for the multi-agency group was followed up by a workshop which agreed data requirements and set out our local aims:

Aim 1: by 30 September 2019 100% of children who are looked after at home for more than 18 months, will have a peer review

Aim 2: by 31 March 2020 90% of children who become looked after and accommodated, on or after 23 October 2018 will have a permanence recommendation (including those returning home) at the Legal Advice Meeting within 36 weeks of becoming looked after and accommodated.

Aim 3: by 31 March 2020, 70% of children who have had a recommendation for permanence away from home on or after 23 October 2018, will be presented to the Agency Decision Maker within 28 weeks of the Legal Advice Meeting that made the Permanence Away from Home recommendation. (This aim does not currently include children in Kinship as of 23/10/2018 but will be developed in recognition of the continued increase in the number of children in kinship placements.)

Aim 4: by 31 October 2019, 95% of children whose plan has been approved by the Agency Decision Maker, on or after 23 October 2018, will have their application for a Permanence Order lodged in court within 13 weeks of the Agency Decision Maker's decision.

The multi-agency sub-group has continued to meet to examine performance information around permanence and to consider where processes require to be amended to meet appropriate milestones for children in our care. Using the model for improvement, partners have identified a number of tests of change which are focussed on improving practice.

Fostering

By 31 March 2019, 62 children were placed with 47 fostering families registered with West Dunbartonshire Council: 25 more children than the previous year. A further 60 children were placed with foster carers registered with external agencies. This represents an increase of 19 external placements (46%) to 2017-18. Carers provide a mix of short break, interim, long-term and permanent placements. Although many placements are in the local area, a key improvement measure is the number of children in foster care within their local community.

Fostering is key to ensuring better outcomes for children within high quality placements within loving homes and, therefore increasing the number of foster carers registered with West Dunbartonshire Council is an important area for further improvement. This is particularly important as it will support children who need to live away from their family to remain as part of the local community whilst also addressing the considerable spend currently against external foster placements. As such, the service will develop an updated campaign to encourage more people to become foster carers in West Dunbartonshire. Activity for 2018-19 is included in Figure 9, below:

Figure 9: Fostering Panel activity 2018-19

Fostering assessments	13
Approvals	9
Reviews	33
Changes in registration	3
De-registrations	4
Transfer from independent fostering agency	1

During 2018-19, the team has worked with our Champions Board colleagues to facilitate and develop children and young people's groups, where looked after children and young people have space to voice their views on how we can support them better. As well as arranging Christmas parties and other celebration events for children in foster placements and their carers, the service has provided a rolling programme of training to new and existing foster carers as well as updating policies/procedures/review paperwork and guidelines to ensure they reflect high standards of practice.

Adoption

The Adoption service has continued to work co-operatively with neighbouring local authorities and approved voluntary agencies in providing and seeking placements for children. In addition, the service works with Scottish Adoption Advice Service (SAAS) to offer post-adoption support for individuals who are adopted, adopters and birth families. Activity during 2018-19 is included in Figure 10, below:

Figure 10: Adoption and Permanence Panel activity 2018-19

Adoption assessments	8
Adoption approvals	7
Adoption reviews	1
Matches	12 (adoption) 3 (permanent fostering)

Over the past year, consultation with adoptive parents and applicants, as well as members of the Adoption and Fostering Panels, has highlighted the need to further develop comprehensive training to adoptive applicants including pre- and post-adoption support; support for birth families and training to enhance social workers' knowledge and understanding around the permanence process.

Children's Houses

Our three children's houses (Blairvadach, Craigellachie and Burnside) have continued to provide loving homes for children and young people, with practice reflecting the organisation's commitment to practice which reflects the impact of adverse childhood experiences (ACEs). Staff have worked closely with families, social work staff and specific projects including the Alternative to Care service (for young people preparing to leave care) and Young People in Mind (for mental health and wellbeing support) alongside key third sector agencies.

Details of inspections of our children's houses are included at Appendix 1.

Young people in our residential houses enjoyed a variety of achievements during 2018-19, some of which included:

- securing employment in a range of roles and settings
- gaining college places at NC and HNC level
- attending summer camp for one week
- completing a 'Sportathon' event throughout the night, raising money for Sport Relief
- recognition for improved school attendance and attainment
- participation in fundraising events for a national charity
- completing courses including mentoring/coaching, Fire Reach and working with Police Scotland Youth Volunteers
- one young person represented Scotland at a home nations football tournament.

Alternative to Care Team (ATC)

As a community resource working alongside Children and Families fieldwork and residential services, ATC provides a 7 day-per-week service from 8am – 10pm, reflecting the need to respond to the needs of young people, often outwith normal working hours.

The ATC predominantly works to prevent young people from requiring care by the local authority – this typically involves providing intensive interventions to support young people and their families at times of crisis and concern, focusing on diversion from negative behaviours and offering support and guidance to parents and carers.

The service received an average of 10 referrals per month to support or maintain young people in the community. This intensive intervention approach has contributed to only 5% of young people being accommodated.

During 2018-19, the team experienced a notable increase in child protection welfare and monitoring referrals, particularly during evenings and weekends which has assisted Social Workers in the assessment of cases where concerns have been raised.

Intensive Support and Monitoring Services (ISMS) were also delivered by the ATC team to a small number of young people at risk of requiring secure accommodation.

Across the range of partnerships, the team has increasingly worked with Education colleagues around Interrupted Learning Services. Here, ATC staff have facilitated access to educational services for young people who do not currently attend school. ATC also sourced funding from the Looked after Children Pupil Equity Fund (LAC PEF) to support a pupil confidence programme to young people attending Dumbarton Academy.

Throughcare and Aftercare service

The Throughcare and Aftercare service supports young people up to 26 years of age to prepare to move from a range of care settings and support them into positive destinations which may include supported tenancies, further education and independent living.

The team provided an adult placement service (supported lodgings) and a housing support service to 88 young people during 2018-19; both services are registered with the Care Inspectorate and details of inspection activity over the past year is included in Appendix 1.

Some achievements by our young people supported by our Throughcare and Aftercare team in 2018-19 include the following:

- several young people undertook college courses, some of whom were supported by the new Care Leavers Bursary
- one young person was supported to attend 'Americamp'
- three young people were provided with driving lessons and passed their driving test
- one young person is returning to university.

An area of particular achievement was the development of a joint Leaving Care Housing Protocol with Housing Services which prioritises and simplifies access to housing options for care experienced young people. We received a Silver COSLA Excellence Award for this work and the protocol was also a finalist for the Association of Public Service Excellence (APSE) Margo Blair Award and the Chartered Institute of Housing Excellence awards.

A further development will be taken forward by corporate parents to provide rent support to care experienced young people who wish to attend full time education but would not qualify for assistance with housing costs.

Corporate Parenting: West Dunbartonshire Champions Board

West Dunbartonshire Champions Board continued to develop into its second year of three year funding from the Life Changes Trust. This supported three care experienced young people to be directly employed (as Lead Young People) to develop the Champions Board and to engage with more children and young people.

Lead young people are key to developing positive relationships with our care experienced children and young people; they have also organised activities, groups and meetings with corporate parents, sustained a presence in our residential houses, attended national networking events and supported young people to attend a range of meetings and appointments.

Corporate Parents attended a range of engagement and participation activities with young people in 2018-19, including an Alpaca Trek and dinner to enable care experienced young people and their corporate parents to get to know each other better and learn more about what young people need to fulfil their potential. This event was also filmed and the completed film will be available later in 2019.

Figure 11, below, illustrates the increasing number of children, young people and corporate parents engaging with Champions Board activity during 2018-19:

Figure 11: Engagement with Champions Board

	2017/2018	2018/2019	TOTAL
Children and Young people in:			
Foster care	1	12	13
Throughcare/Aftercare	8	14	22
Residential houses	9	12	21
Kinship care	1	4	16
Looked after at home	1	7	8
External placement or secure care	1	4	5
Previously care experienced	12	33	45
Corporate Parents attending activities	5	9	14
Number of groups in place	2	7**	9

A number of groups were established to support young people to develop their confidence and confidence to access support from a range of corporate parents including housing, education, health as well as peer support, including:

- Girls group
- Boys group
- Young parents group
- Children's House group
- Throughcare and Aftercare group
- Foster care group
- Changes group.

During 2018-2019 our young people provided input and engagement sessions to senior police officers; a five-week programme of engagement with over 130 frontline police officers and addressed a conference with around 70 Children's Panel members around corporate parenting.

The Working 4U team provided opportunities for ten care experienced young people to get driving lessons, whilst West Dunbartonshire Leisure provided more than 230 care experienced young people with a free Leisure Pass for swimming and gym use in the three local leisure centres.

Another important working relationship is with our third sector partner, YSortit, who supported care experienced young people to attend youth clubs and other groups along with their peers.

Activity for the Champions Board next year will include a 'Changes Group' where young people and corporate parents will work together to influence change.

ADULT SERVICES

Adult Support and Protection (ASP)

Referrals for adults at risk decreased from 347 in 2017-18, to 321 in 2018-19, whilst vulnerable adult referrals have reduced from 743 in 2017-18 to 713 in 2018-19. Despite this fall in numbers, the complexity of risk has increased, as illustrated by the rise in identified types of harm from 425 to 442 in the same period, and indicating an increase in the complexity of the risk and harm to individuals referred, specifically regarding financial/maternal harm and mate crime; which are often linked.

West Dunbartonshire's Adult Protection Committee (APC) continues to meet on a quarterly basis, with an independent chair. Members include Police Scotland, Trading Standards, Care Inspectorate, Adult HSCP Social Work and Health Services, Community Health, Advocacy Services, Scottish Care, Scottish Ambulance Service and the Scottish Fire and Rescue Service.

A key component of the quality assurance work undertaken by the APC continues to be the completion of regular case file audits for the purpose of learning and improvement. Learning from these audits prompts improved processes and is embedded into our training programme.

Performance monitoring and analysis, led by the Public Protection co-ordinator, has also informed staff and practice development across agencies, in addition to providing advice to staff and managers about specific complex cases.

The self-evaluation and training working group developed the annual Public Protection training calendar and new training was provided that reflected identified learning needs of the workforce, including identification of and addressing financial harm, defensible decision making and joint basic awareness training for child and adult protection.

The co-ordinator has also delivered Adult Support and Protection training to over 400 people across agencies and sectors in West Dunbartonshire. This reflected an increased focus on supporting services in the community to be skilled and confident in identifying and responding to risk of harm, including work with Community Pharmacies, the Department for Work and Pensions and Education colleagues.

In 2018-19 a priority focus for the APC was around preventing financial harm. This has led to a consistent approach to responding to and reporting concerns regarding harm and has included peer learning training sessions which will continue into the current year.

Improved timescales for Adult Protection investigations were addressed over the last year, with 98% of investigations completed within timescales, from a low point of 60% during part of the previous year, meaning that more complex cases are receiving faster response and action.

These figures and further detail pertaining to adult support and protection targets and activity are contained within Appendix 4.

Mental Health Officer (MHO) service

The core team of dedicated Mental Health Officers (MHOs) has remained at full staff complement with no turnover during 2018-19, however over recent years there has been a marked decrease in the number of qualified MHOs who undertake MHO duties alongside their substantive post as a social worker within a practice team. This has adversely impacted on allocating work and meeting statutory timescales and limited the availability of practitioners to provide advice and consultation to other teams. Social workers will, however, continue to be supported to apply to the MHO training programme.

Following a realignment of the service, a social work post designated to undertake assessment and care management functions for mentally disordered offenders now sits wholly within the core MHO team (having previously been a shared post with Criminal Justice services).

In terms of statutory duties undertaken by the MHO service, the volume of work has been relatively stable during the period 2018-19, with no marked contrast to the previous annual period. Figure 12, below, illustrates minor variances from the previous year related to private guardianship and local authority orders:

Figure 12: Private Guardianship and Local Authority Orders:

	2018-19	2017-18	variance (n)
Private Guardianship Orders	54	62	-8
Local Authority Orders	23	19	+4

During 2018-19, specific activity sought to reduce timescales to allocate MHO reports to accompany local authority and private guardianship applications. The average time from receipt of referral to

appointment of an MHO during 2018-19 was six weeks; an improvement from eight weeks in 2017-18; a process is in place for prioritising more urgent cases (eg: hospital discharge).

The other main area of work for the service is the discharge of functions under the terms of the Mental Health (Care and Treatment) (Scotland) Act 2003. This includes the provision of service to mentally disordered offenders who are subject to statutory measures. The service currently supports 14 individuals who require significant input.

There have been no instances whereby statutory duties as specified in the 2003 Act have not been completed in accordance with prescribed requirement and timescales.

Adult Care Team

The Adult Care Team and Your Enablement Service (YES) health component consists of Physiotherapists, Occupational Therapists and a Rehabilitation Support Worker who provide support and rehabilitation for adults aged 65 years and under.

During 2018-19 the team prioritised reducing waiting times and targeting individuals who required input from the team according to assessed need. They provided rehabilitation focussed on patient goals, promoting self management and improving overall health outcomes

Analysis of referral pathways, referral type and opportunities to signpost individuals to more appropriate services sought to improve waiting times – from a waiting time of 6 months for a physiotherapist or occupational therapist in May 2018, the longest wait by the end of the financial year was projected to just over 8 weeks..

Community Hospital Discharge Team

The Community Hospital Discharge Team received an average of 60 new referrals per week during 2018-19. The team is focussed on ensuring safe and timely discharge to home or a homely setting and offers a multi-disciplinary response to presenting need.

By continuing to focus on timely and appropriate hospital discharge, the number of acute bed days lost to delayed discharge for West Dunbartonshire residents improved by 28% over the past two year period, although there was a small increase of 73 bed days (2%) from 2017-18. The number of bed days lost to delayed discharge in relation to complex cases reduced by 32% from 2017-18.

The team will focus more on in-reach in 2019-20, utilising a more targeted approach to those individuals who have been inpatients for 10 days or more, thereby identifying themes and engaging with ward staff to promote more timely discharge to support people to return home wherever possible.

Avoiding Hospital Admissions – Focussed Intervention Team

During 2018-19, our new Focussed Intervention Team was developed, with structured links to key partners including the Community Older People's Team, Hospital Discharge Team, District Nursing, Care at Home, GPs, mental health services, care homes and third sector organisations.

The team has been set up to respond rapidly to referrals (within 2 hours) to avoid unnecessary admission to hospital and support individuals to remain in their own home during an acute episode of ill health including evenings, weekends and public holidays.

It is anticipated that the Focussed Intervention Team will provide a safe alternative to hospital admission, thereby positively impacting on the number of unscheduled care presentations.

Frailty and Falls

In 2018/19 there were 2,567 level one falls conversations recorded within health and care teams including social workers and community occupational therapists. In addition, 2,442 level two multi-factorial falls assessments were completed, resulting in 503 home exercise programmes being delivered. Work continues with the Scottish Ambulance Service to increase referrals to the Community Older Peoples team for assessment after a fall to reduce the need for hospital admission wherever possible.

The use of the Clinical Frailty scale was embedded in practice over the past year and 2,748 Frailty screens were completed by integrated teams, providing a greater understanding of the potential needs of the older population.

Older People's services

After significant engagement and consultation with residents, relatives and staff, Boquhanran House was closed in February 2019, in response to challenges associated with the fabric and maintenance of the building and the health and wellbeing of the people residing there.

All 17 residents were moved successfully and settled within their own chosen place of residence. The improved standard of accommodation in their new chosen residence has improved quality of life while the provision of care across two Clydebank homes has allowed for a better staff skill mix, providing better quality care to residents.

The positive impacts from this service change should go some way to prepare staff, residents and their families for the move to the new Clydebank care home being developed at Queens Quay – an important further development for care services within West Dunbartonshire.

Mental Health Services

Scotland's Mental Health Strategy: 2017-2027, Action 15, emphasises the need to prevent and treat mental health problems with the same commitment, passion and drive as physical health problems.

Work in West Dunbartonshire has therefore focused around improvements to prevention and early intervention, access to treatment, physical wellbeing and rights, information use and planning around mental health services.

The Strategy commits the Scottish Government to increase the workforce to give access to dedicated mental health professionals at Accident and Emergency Departments, all GP practices, every police station custody suite and prisons. Additional national investment over the next five years will increase to £35 million for the equivalent of 800 new mental health workers in these key settings.

West Dunbartonshire HSCP has been allocated a proportionate amount of funding that will create a range of new posts to support people with complex care needs in these settings, while the HSCP will receive the benefits of an approach across NHS Greater Glasgow & Clyde that will support additional mental health workers within the prison service, acute hospital liaison services, police custody suites and peer support workers within mental health hospital settings.

Learning Disabilities Services

In 2018-19 there were approximately 460 people with a learning disability living in West Dunbartonshire. 55% were supported at home by a family carer and 40% were living in mainstream accommodation with support.

Over the last year, the service completed a benchmarking exercise to review existing services against the recommendations of the Keys to Life (2013) and its four strategic outcomes: Independence, Choice and Control, Healthy Life and Active Citizen.

An integrated approach to service delivery across community health and care, as well as third sector providers, has supported the delivery of effective and targeted specialist services, which is prioritised around the key aims of people with a learning disability using an outcome-focussed approach to promote person-centred assessment and planning.

The team has also worked with colleagues from hospital inpatient services as part of a redesign of assessment and treatment services to scope how to build local capacity and capability to reduce admissions to hospital. This includes individuals currently in long stay beds or 'out of area' placements which have been highlighted as a priority within the 'Coming Home' Report (Scottish Government: 2018).

Work with partners from education, children's services and other adult services has sought to deliver improvements in the transition from education into adult services for young people identified as having additional support needs (including learning disability). Earlier identification of the appropriate adult service up to two years in advance and improved information sharing to identify the best future services and developing blended services across Mental Health, Adult Care and Learning Disabilities Services are expected to provide improved person centred outcomes.

The service has also been working with Housing Services colleagues and housing developers to identify future housing stock that can support people to have homes that better meet their needs within a 'core and cluster' model of support.

Work Connect – Specialist Supported Employment Service

The opening of the Pavilion Cafe in February 2019 represented the latest addition to the Work Connect partnership portfolio with the Council's Greenspace service. The £4million investment in the park includes £2.8million from Heritage Lottery Funding.

The cafe, in Levensgrove Park, Dumbarton, is managed by Work Connect Specialist Supported Employment Services and will also be used as a training kitchen for adults recovering from mental health issues and Addictions as well as people with Learning Disabilities and Autism. This opportunity offers trainees the chance to develop employability skills and to gain work experience to support a return to work.

All Pavilion trainees have completed a recognised customer service course in partnership with Working 4U and West College Scotland in Clydebank. They have also received West Dunbartonshire Council Induction and Fire Safety training.

Addiction Services

West Dunbartonshire Addiction Services continued to work with Police Scotland to support 'hard to reach' vulnerable adults with chaotic and complex drug and alcohol use, often with co-existing mental health issues and offending behaviour.

Joint working with colleagues including Health, Criminal Justice Social Work, Mental Health, Youth Services and housing agencies has provided support, advice and education around any alcohol and/or drug dependence issues.

Vulnerable adults are discussed weekly at the Vulnerable Adult Forum which includes staff from Addictions, Mental Health, Adult Services, Learning Disabilities and Hospital Discharge. Addictions staff also regularly review Emergency Hospital Admissions to monitor and revise care plans of those frequently being admitted to hospital to ensure effective, responsive interventions.

CRIMINAL JUSTICE SOCIAL WORK SERVICES

During 2018-19, criminal justice social work services saw some notable variations in workload compared to the previous year. Figure 13, below, illustrates changes in demand across a range of criminal justice activity:

Figure 13: Criminal Justice Workload

	2018-19	2017-18	Change (n)	Change (%)
Criminal Justice Social Work Reports	575	618	-43	-7%
Community Payback Orders	409	428	-19	-4%
Drug Treatment and Testing Orders	8	24	-16	-67%
Diversion	14	5	+9	+180%
Throughcare (released prisoners)	26	46	-20	-43%
Throughcare (serving prisoners)	34	42	-8	-19%
Home Circumstance Reports	124	140	-16	-11%
Home Detention Curfew assessments	36	73	-37	-51%

Community Payback Orders (CPOs)

During 2018-19, 409 new CPOs were imposed, a reduction of 19 (4%) on the previous year. Of these orders, a supervision requirement was included in 71 Orders (17%); unpaid work was included in 148 orders (36%), whilst 190 orders (46%) had both supervision and unpaid work included. Other requirements available to the Courts include: alcohol/drug treatment, mental health treatment, programme and compensation requirements. In January 2019 new National Standards were developed to promote good practice and will be embedded within the team's assessment and supervision of individuals.

Positive working relationships with a range of key partners have been key to the development of risk management plans that focus on both reducing offending behaviour and supporting individuals to develop stronger community connections and an enhanced focus on living without offending.

During 2018-19 the service established links with Cornerstone's 'Partnership Project' who work with individuals at risk of becoming involved or already involved with the criminal justice system, providing emotional and practical support around housing, benefits, support to access and attend appointments and to reduce social isolation. Also, their 'Finding a Voice' service offered 1-1 emotional support to survivors and perpetrators of sexual violence and trauma.

The service continued to work with the Turning Point (Scotland) residential programme, which provides residential-based interventions for 6-8 weeks for individuals to address their alcohol and/or drug use. Locally, work with the Alternatives addictions service 'Safe as Houses' project supported individuals to access residential accommodation and intensive support to address addiction issues.

Another key partnership with SACRO's Pair Project provided interventions with a number of men convicted of domestic abuse offences to challenge their behaviour and beliefs with the aim of reducing their risk of further violence against women. Positive feedback from participants and local Sheriffs resulted in further HSCP funding to extend the project into 2019-20.

The service has worked to develop stronger links with Community Justice Scotland, whilst preparation for the forthcoming inspection of Justice Services by the Care Inspectorate has enabled the team to reflect on practice and areas for further service improvement and team development. Although the outcome of the inspection process is not expected until summer 2019, managers and staff have reviewed how performance and management information can be developed, alongside improved participation in national policy developments including the potential extension of the presumption against short sentences.

Unpaid Work

Individuals sentenced by Courts to undertake unpaid work in their community complete a range of activities, either within a supervised work squad or in an individual placement e.g. charity shops and community groups. The unpaid work service continued to prioritise projects that offer the most benefit to the local community. Strong links and partnerships with community groups and the Council are fundamental to developing and sustaining a range of unpaid work placements.

During 2018-19, individuals undertook a range of projects including environmental conservation work; landscaping and gardening maintenance of local churches and children's hospice; assistance with food share distribution; a joinery project; painting and decorating; tackling flying tipping and litter removal.

Diversion from Prosecution

During 2018-19, the service provided Diversion services to 14 individuals (an increase of 9 from 2017-18). Individuals who agreed to participate in the service received individual support and were signposted to appropriate services to address underlying issues such as alcohol/drug use, mental health, housing and employability. The service also participated in the North Strathclyde grouping of the national liaison network of partner agencies, established by the Crown Office and Procurator Fiscal Service during 2018-19. Work to improve the referral process and the service provided from point of arrest has commenced and will be continued into 2019-20.

Fiscal Work Orders (FWO)

The service completed 11 Fiscal Work Order assessments in 2018-19 (one more than the previous year) for individuals referred by the Procurator Fiscal where between 10 and 50 hours unpaid work can be imposed. Fiscal Work Orders were facilitated either alongside individuals completing unpaid work as part of a CPO or in individual placements, for example where the person may be vulnerable or under 18 years old.

Home Detention Curfew (HDC)

36 HDC assessments were provided for the Scottish Prison Service (SPS) on the suitability of accommodation identified for prisoner to be released early subject to electronic monitoring. This represented a 51% reduction from 2017-18.

Multi-Agency Public Protection Arrangements (MAPPA)

The management of high risk offenders is a key area of priority for criminal justice social work services in West Dunbartonshire. MAPPA is well established across the range of responsible authorities (West Dunbartonshire Council, Police Scotland, Scottish Prison Service and NHS Greater Glasgow & Clyde).

The national extension of MAPPA to include other offenders who have been assessed as posing an imminent risk of serious harm continued to have a small but notable impact on the work of the service in directly contributing to public protection.

West Dunbartonshire is part of North Strathclyde MAPPA arrangements and the service is supported by the MAPPA unit who provide professional advice and guidance as well as supporting responsible authorities to fulfil their statutory duties around information sharing and joint working to assess and manage the risk of individuals managed within MAPPA.

MAPPA cases are assessed and reviewed on an ongoing, multi-agency basis; the majority of cases in West Dunbartonshire are managed at level 1 (ordinary risk management), with fewer cases requiring level 2 (multi-agency) or level 3 (critical) interventions. As referred to in section 2, above,

West Dunbartonshire Public Protection Chief Officers Group oversees local arrangements and the Chief Social Work Officer is a member of the North Strathclyde MAPPA Strategic Oversight Group which oversees operational developments are being taken forward by the Management Oversight Group.

Drug Treatment and Testing Orders (DTTOs)

DTTO continues to be provided by an integrated team across the inter-authority areas of Argyll & Bute, East Dunbartonshire and West Dunbartonshire. Interventions seek to promote recovery, stability and a reduction in offending. During 2018-19, the service completed 29 assessments and managed 8 new orders for West Dunbartonshire in addition to existing orders made in the previous year and orders imposed in the other local authority areas.

Community Justice

With effect from April 2016 the responsibility for planning and delivery of community justice has been the responsibility of local community justice partners. Governance arrangements have remained with the Safer DIG.

Our Community Justice Outcome Improvement Plan for 2017-18 has been carried forward to 2018-20 and will be supported by working in partnership with Community Justice Scotland to deliver on improvements around community justice.

The Community Justice (Scotland) Act 2016 sets out a duty on the named community justice statutory partners to reduce/prevent reoffending by:

- ensuring that improved processes for multi-agency assessment of need and access to relevant services is implemented for individuals aged 16 years and older involved in, or on the edges of, the criminal justice system
- preparing and publishing a local plan that details how they will improve community justice outcomes
- submitting an annual report on progress to Community Justice Scotland, having consulted with third sector partners, community bodies and any other appropriate services.

The rationale driving the national strategy for community justice is that the issues underpinning offending are complex, beyond the power of any single agency to resolve and may have aspects which have particular importance in certain localities, for instance the continuing persistently high and complex levels of reported gender based violence in West Dunbartonshire. This underpins work being taken forward to re-establish a West Dunbartonshire Violence against Women partnership, focussed specifically on the needs of the local population following a previous model across Police Scotland 'L' Division which includes the Argyll & Bute Council area.

Domestic Abuse/Equally Safe

Domestic abuse continues to present a significant challenge for the residents, services and communities within West Dunbartonshire, which has one of the highest rates of domestic abuse per 10,000 of the population in Scotland.

As one of the top priorities for the Community Planning Partnership's Local Outcome Improvement Plan (LOIP), domestic abuse has now been located within the Safer DIG, with the Scottish Government Equally Safe priorities embedded in the 2018-19 DIG action plan.

During 2018-19, the cross-authority Domestic Abuse Partnership arrangements for West Dunbartonshire and Argyll & Bute Councils were changed to single authority, in recognition of the distinct needs in each area (although a strategic oversight group will continue to meet twice per year to share learning and experience). Work to develop the refreshed Violence against Women

Partnership will build on progress over the past year around the work of the local Domestic Abuse summit group and the 'No Home for Domestic Abuse' project. These developments will also align local priorities with the National Standards for Equally Safe.

ACES (Adverse Childhood Experiences)

In May 2018, West Dunbartonshire Community Planning hosted an ACEs conference in Clydebank Town Hall, attended by 244 people from across the public and third sectors. From this, a local ACEs hub was established, as a forum for networking and facilitating continued staff development.

The ACEs Hub now includes approximately 100 professionals from across the voluntary and third sector, West Dunbartonshire Council and the HSCP. The group meets every quarter and activity during 2018-19 has focussed on topics such as 'One Good Adult' and the Trauma Training Framework. This group has developed into a dedicated community of interest and networking to enhance ACEs awareness across multi-professional strategic and planning groups in West Dunbartonshire.

The ACEs planning group also meets quarterly – this is a multiagency group of senior managers from children's health, social work, education, adult mental health, addictions, Police, Fire, and health improvement services. This work has been further enhanced by links with Health Scotland around ACEs work.

Part of our commitment to ACEs last year was to extend the opportunity for staff in the HSCP and other services to view the 'Resilience' documentary – as such, bi-monthly viewings have been provided and continue to be well attended with 450 staff attending a viewing of the documentary by 31 March 2019. This is a key mechanism for raising awareness of ACEs and, encouragingly, 97% of people reported that the film had made them think about their practice. A series of follow-up focus groups continue to evaluate the impact of the documentary and to track how practitioners across services can integrate ACEs awareness to their roles. Furthermore, a trauma training scoping exercise is currently underway to inform staff and service development around ACEs in West Dunbartonshire.

In the next year, further development will seek to ensure genuine community involvement at all levels of ACEs work in the HSCP and Council, where professional leads will seek opportunities to develop trauma informed practice across all services.

Self-Directed Support (SDS)

West Dunbartonshire HSCP remains committed to supporting those who wish to take advantage of the opportunities within SDS. As referred to above, West Dunbartonshire was one of six areas across Scotland to take part in a thematic inspection of SDS, coinciding with plans to revise local guidance and training. The inspection took place during summer 2018 and the report is expected around June 2019. In advance of the inspection report, work has been developed to support more consistent practice, whilst strategic accountability and governance arrangements are also being reviewed to shape and reform the policy arrangements for SDS.

SDS has been embedded in the HSCP's assessment process across adults and children's services. The HSCP's Integrated Resource Framework supported indicative personal budgeting assessments, which aim to support fairness and equality for everyone assessed as eligible for local authority-funded support.

Over the past year, the number of service users who opted to take a Direct Payment (Option 1) continued to be low, however expenditure on Options 1 and 2 has increased overall, suggesting an improving awareness and confidence in the opportunities for tailored support and care within SDS, which services will build on in the next year.

Within West Dunbartonshire's SDS approach, a whole systems approach to commissioning and monitoring has been promoted. The recommendations from the inspection report will be instrumental in further developing and delivering the strategic priorities for SDS in West Dunbartonshire across HSCP and independent services in partnership with service users and carers.

Carers

Unpaid carers continue to make a valuable contribution in supporting vulnerable people to live independently within our communities. The Carers (Scotland) Act came into force on 1st April 2018 to promote, defend and extend the rights of all adult and young carers. It aims to better support all carers with their own health and wellbeing and help make caring roles more sustainable.

Partnership work with Carers of West Dunbartonshire and Y Sort-It (in relation to young carers) has been central to developing a range of supports, from signposting to financial advice, community groups and other support organisations, to providing carer assessments and respite or short break services.

A two tier process has been developed to assess the needs of adult carers. Tier 1 involves a practitioner undertaking a 'carer conversation' with a person who has identified themselves as a carer, focussed on rights, identifying specific carer needs and to explore access to support.

A Tier 2 Adult Carer Support Plan involves a full carer assessment to develop a carer support plan to meet the personal outcomes of each carer based on their specific and individual needs.

Young carers are identified through a Children's Comprehensive Assessment and referred to our local young person's third sector partner, Y Sort-it, who complete a Young Carer's Statement on behalf of the HSCP.

Complaints

A total of 35 stage one (frontline) complaints and 49 stage 2 complaints were received across the HSCP during the year. One stage one complaint was dealt with as a stage 2 matter. Complaints are responded to under either the local authority complaints policy (social work) or the NHS Greater Glasgow & Clyde complaints policy (health). A summary of complaint handling and outcomes for matters dealt with by the social work complaints policy is provided in Figure 14, below:

Figure 14: Complaints by outcome and service area

Outcome	
Fully upheld	4
Partially upheld	9
Not upheld	18
Unsubstantiated	6
Service Area	
Mental Health, Learning Disabilities and Addictions	6
Children's Health, Care and Criminal Justice	16
Community Health and Care Services	14
Joint HSCP and Housing complaint	1

Of these complaints, 49% were not upheld, 24% were partially upheld and 11% were fully upheld.

Furthermore, 12 (32%) complaints were responded to within timescales against a target of 70%. The majority of delays were related to the complexity of complaints, which necessitated more time to complete the investigation process to inform a response. Also integrated arrangements with parallel complaints processes continue to impact on achieving this target.

Four individuals took their complaint to the Scottish Public Service Ombudsman (SPSO) in 2018-19, three of which were not taken forward by the SPSO. One matter has been investigated and the outcome is expected in due course.

Each complaint provides a learning opportunity for services to learn from and to inform ongoing practice improvements and a report providing information about the type of complaints, response, timescales and trends is provided to the quarterly HSCP Clinical and Care Governance group who consider the responses, emerging themes and actions for further practice improvement.

6. WORKFORCE

Planning

The ageing workforce within Care at Home Services presents a challenge with over 23% of the workforce over 60 years of age. Trend analysis also shows that staff are choosing to work longer. How we support older people in the workforce is one of the areas that our Employee Wellbeing Strategy has been seeking to address, whilst work has been taken forward to look at employability in conjunction with the Council's Working 4 U team and a Job Sector Academy to encourage people in the local area into careers in care.

The Scottish Social Services Council (SSSC) is the main regulatory agency for social work and social care. During 2018-19, registration of the social services workforce and supporting professional development has been an important aspect of the CSWO function. Workforce planning activity included efforts to ensure staff will be registered in our Care at Home workforce by the 17th December 2019 deadline. A module on the electronic HR system has been developed where managers can update registration for staff and run reports on all staff who are registered. This provides assurance within a single recording system for staff registered with the SSSC.

Recruitment and retention of staff across social work and care services is of continuous importance to meet the needs of our service users. Support to paraprofessionals who may wish to undertake social work training has been emphasised, alongside a review of the staffing establishment and skill mix across the HSCP.

Over the next year, the Workforce and Organisational Development Strategy for the HSCP will be reviewed to reflect the requirements of the revised Workforce Planning Guidance for the Health and Social Care Workforce, which is due to be issued shortly.

Development

Supervision sessions continue to be the main opportunity for staff to discuss career development, learning and profession-specific training to support them in their roles. This was extended to housing services colleagues during 2018-19, when the HSCP delivered mental health first aid training for all frontline Housing Officers in the Council.

A number of staff have been supported on leadership programmes through the NHS and Council to support them in frontline leadership and management roles. Participants are from different levels of management and professional backgrounds. These courses create opportunities for staff to share good practice and facilitate better understanding of roles within an integrated setting.

HSCP staff also took part in the iMatter staff engagement survey which saw an improvement in overall response rates of 62% compared to 47% the previous year. Care at Home staff also took part in a pilot to reduce paper copies, resulting in a 72% response rate for this staff group, compared to 4% the previous year.

Team action plans have been developed which support improvements to how teams operate

and to identify what is important to staff. This offers notable benefits in terms of a single approach to staff engagement across the HSCP.

7. LOOKING AHEAD TO 2019-20

The continued development of services, maximising opportunities from integration and the overall commitment to continually improving practice to support better outcomes for children, young people and adults is clear. This has helped to shape and inform the next HSCP Strategic Plan 2019-22¹ with the vision of 'improving lives with the people of West Dunbartonshire'. The plan will demonstrate the commitment to:

- children and young people (reflected in Getting It Right for Every Child)
- continual transformation in integrated delivery of services for adults and older people
- the safety and protection of the most vulnerable people within our care and wider communities
- support people to exercise choice and control in the achievement of their personal outcomes
- manage resources effectively, making best use of our integrated capacity.

The budget-setting process for 2019-20 has included significant focus on known pressures as well as estimating future demand. Key pressures will be centred on:

- community placements for children and young people
- residential accommodation for young people
- residential accommodation for older adults
- care at home.

These areas of service will require to review practice arrangements and undertake work to address longstanding financial challenges – for example, joint working with Education colleagues will inform senior leaders on work to identify alternative supports for younger people, whilst the development of the new Clydebank Care Home will increase availability of nursing home placements in the local area, albeit that demand remains high meantime. Furthermore, increasing demand for care at home, including from work to keep delayed discharges low, places pressure on internal and external resources. Work to balance these competing issues will therefore be key to addressing local financial challenges.

Health inequalities in West Dunbartonshire are reflected in the high number of people living with complex, long-term conditions, whilst the impact of adverse childhood experiences (ACEs) across the population will continue to impact on the need for services and the need for achieving generational change to address the emotional and physical inequalities in health and wellbeing. Demand for social work and care services will continue to be high which presents significant challenges to planning and providing services which address these longstanding inequalities within a climate of limited financial resources.

Work to tackle demand and financial pressure around Kinship will be taken forward as part of the Kinship PACE work stream alongside our participation in the national kinship care group which is being developed through Social Work Scotland.

Meanwhile, the Mental Health Officer service will review processes for reporting on performance and management information alongside a full review of the HSCP's Adults with Incapacity procedures. A consultation process will explore the potential development of a link-worker/clinic system to ensure that teams across the HSCP have an additional access point to the service and to improve access to professional advice. Further work around improving uptake of MHO training by social workers will also be taken forward.

¹ <http://wdhscp.org.uk/about-us/health-and-social-partnership-board/strategic-plan/>

The Focussed Intervention Team will shortly be fully staffed and is expected to have a positive impact on reducing the number of adults who are admitted to hospital; meanwhile learning from the inspections of SDS and criminal justice social work services will be taken forward to improve practice, performance and access to services.

The Chief Social Work Officer will therefore continue to work with managers and staff across the HSCP and wider partners to address these challenges, ensuring a focus on the continuous development of practice to increase access to services at the point of need; to reduce inequalities and to manage the competing issues of rising demand and limited resources.

Finally, I must thank my social work and health colleagues across the HSCP and our partner organisations, whose commitment, dedication and creativity have impressed me since recently coming into post. I am confident that these strengths will be instrumental in making a positive difference in the year ahead.




Jonathan Hinds
Head of Children's Health, Care and Criminal Justice
Chief Social Work Officer
September 2019




Appendix 1: Care Inspectorate Inspection Outcomes 2018-19


This Appendix details the grades achieved for West Dunbartonshire HSCP services which were inspected and had reports published between 1st April 2018 and 31st March 2019. All 4 Quality Themes are not routinely inspected at each inspection. Those Quality Themes which have not been included in the inspection have been recorded as N/A below.





Gradings:

1 – Unsatisfactory; 2 – Weak; 3 – Adequate; 4 – Good; 5 – Very Good; 6 – Excellent



















Service	Previous Inspection	Grade	Latest Inspection	Grade	Quality Theme
Children's Health, Care and Criminal Justice					
Adoption Service	26 April 16	5 N/A N/A 4	26 April 18 	4 N/A 5 N/A	Care and Support Environment Staffing Management and Leadership
	Requirements: None Recommendations: 1. Improvements should be made to the timescales for children moving into their adoptive family. 2. Timescales should be set for children's social workers to consider potential adopters for children and a member of the adoption team should be involved throughout this process in recognition of their expertise in this area. 3. The adoption and permanence procedures should be updated to promote best practice in the adoption of children.				
Blairvadach Children's House	21 June 17	4 3 N/A N/A	24 July 18 	5 3 N/A N/A	Care and Support Environment Staffing Management and Leadership
	Requirements: None Recommendations: The young people living within Blairvadach should experience the best possible environment. Therefore we have recommended that they reduce the number of young people living in the house from seven to six and to re-register the service with the Care Inspectorate. West Dunbartonshire Council have ensured us that they will fulfil this recommendation at the first opportunity.				
Burnside Children's House	20 March 18	5 N/A N/A 5	26 November 18 	5 N/A 5 N/A	Care and Support Environment Staffing Management and Leadership
	Requirements: None Recommendations: None				















Service	Previous Inspection	Grade	Latest Inspection	Grade	Quality Theme
Children's Health, Care and Criminal Justice					
Craigellachie Children's House	23 February 17	4 N/A 4 N/A	18 September 18 	4 N/A N/A 4	Care and Support Environment Staffing Management and Leadership
	Requirements: None Recommendations: <ol style="list-style-type: none"> 1. Service delivery should be consistently applied by the staff team for all young people. The decisions about behaviour management or care and support should reflect the age and progress of the young people. Any changes to these decisions should be clearly communicated to them. 2. The young people should be supported by a staff team that is motivated, well led and is working together. In order to achieve this, the staff require individual support and bespoke opportunities to develop their skills. Furthermore, the views of the staff team are essential in service delivery and improvement. We would encourage the management team to gather the views of the staff team and seek opportunities to bring them together to develop a shared focus for the service. 3. Each of the young people should have an outcome focused care plan which is built upon their views and needs. This plan should measure progress and be updated on a regular basis through a clear review process. 				
Fostering Service	26 April 2016	5 N/A N/A 4	26 April 2018 	4 N/A 5 N/A	Care and Support Environment Staffing Management and Leadership
	Requirements: None Recommendations: <ol style="list-style-type: none"> 1. The service should review their processes to ensure that when carers are outwith their registration they are returned to panel within timescales. This is to ensure the continued suitability of the foster carers and enable a recommendation to be made regarding any variation to the terms of approval. 2. The service should make arrangements to implement risk assessments and safer caring plans for children and young people as soon as possible. 				
Throughcare – Adult Placement Services	3 February 17	6 N/A 6 N/A	28 March 2019 	6 N/A N/A 6	Care and Support Environment Staffing Management and Leadership
	Requirements: None Recommendations: None				




Service	Previous Inspection	Grade	Latest Inspection	Grade	Quality Theme
Community Health and Care Services					
Care at Home Services	15 March 18	5 N/A 5 N/A	5 October 2018 	4 N/A 4 N/A	Care and Support Environment Staffing Management and Leadership
	<p>Requirements: None</p> <p>Recommendations:</p> <ol style="list-style-type: none"> 1. The service should review its approach to supporting people with medication. This should include; clear definitions of what support might be provided by staff and ensuring staff are made aware of the appropriate guidance and their role in supporting people with medication. 2. The service must ensure that people are provided with care plans that provide full information on their assessed needs and the supports that will be provided. 3. The service should ensure that it reviews the care provided to people no less than every six months. People supported should be actively involved in reviewing their care and support. Copies of reviews should be available to people in their own homes. 4. The service must ensure that staff are provided with supervision on a regular basis, in keeping with the service's supervision policy. This should be scheduled in advance with discussions and decisions being clearly recorded. 				
Crosslet House	No previous inspection		17 May 2018	5 5 5 5	Care and Support Environment Staffing Management and Leadership
	<p>Requirements: None</p> <p>Recommendations:</p> <p>The provider should provide care staff with meaningful activity training to ensure that activities, both social and physical, are consistently promoted throughout the care home each day of the week.</p>				
Crosslet Day Care	No previous inspection		31 May 2018	5 5 5 5	Care and Support Environment Staffing Management and Leadership
	<p>Requirements: None</p> <p>Recommendations: None</p>				

Service	Previous Inspection	Grade	Latest Inspection	Grade	Quality Theme
Community Health and Care Services					
Frank Downie House	11 October 17	5 4 4 N/A	17 September 18 	5 N/A N/A N/A 5	How well do we support people's wellbeing How good is our leadership How good is our staff team How good is our setting How well is care and support planned
	Requirements: None Recommendations: The service provider should ensure that staff are given regular opportunities to meet with their supervisors and that appropriate records of these meetings are maintained.				
Sheltered Housing	15 March 18	5 N/A 5 N/A	21 December 18 	5 N/A 5 N/A	Care and Support Environment Staffing Management and Leadership
	Requirements: None Recommendations: Dementia training at skilled level should be completed by all staff.				
Mental Health, Learning Disability and Addiction					
Learning Disability Service – Housing Support Service	24 November 17	5 N/A 4 5	15 November 18 	6 N/A N/A 6	Care and Support Environment Staffing Management and Leadership
	Requirements: None Recommendations: None				
Learning Disability Service – Community Connections	9 March 18	5 N/A 5 N/A	7 February 19 	5 N/A N/A 5	Care and Support Environment Staffing Management and Leadership
	Requirements: None Recommendations: None				





Appendix 2: West Dunbartonshire HSCP Key Performance Indicator Summary 2018/19

Performance Indicator	2017/18	2018/19		
	Value	Value	Target	Status
Child and Adolescent Mental Health Service (CAMHS) 18 weeks referral to treatment	84.2%	78.5%	90%	
Mean number of weeks for referral to treatment for specialist Child and Adolescent Mental Health Services	7	9	18	
Percentage of Measles, Mumps & Rubella (MMR) immunisation at 24 months	94.9%	94.9%	95%	
Percentage of Measles, Mumps & Rubella (MMR) immunisation at 5 years	97.7%	97.5%	95%	
Balance of Care for looked after children: % of children being looked after in the Community	90.34%	91.5%	90%	
Percentage of 16 or 17 year olds in positive destinations (further/higher education, training, employment) at point of leaving care	78%	60%	75%	
Number of delayed discharges over 3 days (72 hours) non-complex cases	4	10	0	
Number of attendances at Accident and Emergency (Emergency Departments and Minor Injuries Units)	30,463	32,819	28,333	
Number of clients 65+ receiving a re-ablement intervention	632	450	575	
Percentage of adults with assessed Care at Home needs and a re-ablement package who have reached their agreed personal outcomes	64.7%	57.6%	60%	
Number of patients in anticipatory care programmes	1,921	1,306	1,400	
Number of people aged 75+ in receipt of Telecare - Crude rate per 100,000 population	23,139	21,247	21,036	
Total number of homecare hours provided as a rate per 1,000 population aged 65+	488	566.5	518	
Percentage of people aged 65 and over who receive 20 or more interventions per week	34.2%	36.9%	30%	
Percentage of homecare clients aged 65+ receiving personal care	92.1%	94.9%	90%	
Percentage of people aged 65 years and over assessed with complex needs living at home or in a homely setting	98%	98.4%	98%	
Percentage of people aged 65+ admitted twice or more as an emergency who have not had an assessment	26.9%	25%	30%	
Percentage of identified patients dying in hospital for cancer deaths (Palliative Care Register)	24.4%	32.9%	30%	

Performance Indicator	2017/18	2018/19		
	Value	Value	Target	Status
Percentage of identified patients dying in hospital for non-cancer deaths (Palliative Care Register)	42.5%	31.4%	35%	
Percentage of patients seen within 4 weeks for musculoskeletal physiotherapy services - WDHSCP	43%	39%	90%	
Number of clients receiving Home Care Pharmacy Team support	941	930	900	
Prescribing cost per weighted patient	£173.07	£167.87	£173.72	
Compliance with Formulary Preferred List	80.2%	79.1%	78%	
Percentage of carers who feel supported to continue in their caring role	97.4%	98%	90%	
Percentage of clients waiting no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery	92.4%	91.6%	90%	
Percentage of Criminal Justice Social Work Reports submitted to court by noon on the day prior to calling.	90%	83%	98%	
Percentage of Community Payback Orders attending an induction session within 5 working days of sentence.	79%	59%	80%	
Percentage of Unpaid work and other activity requirements commenced (work or activity) within 7 working days of sentence.	15%	40%	80%	
Percentage of children on the Child Protection Register who have a completed and current risk assessment	100%	100%	100%	
Percentage of child protection investigations to case conference within 21 days	79.2%	75%	95%	
Percentage of Adult Support and Protection clients who have current risk assessments and care plan	100%	100%	100%	
Percentage of patients who started Psychological Therapies treatments within 18 weeks of referral	96%	69%	90%	









-  Target achieved or exceeded
-  Target narrowly missed
-  Target missed by 15% or more

Unscheduled care performance is being measured against locally set Ministerial Steering Group (MSG) targets and against NHS Greater Glasgow and Clyde's (NHS GGC) target of 10% reduction in unscheduled bed days, unnecessary hospital admissions and A&E attendances across the NHS GGC.

Performance Indicator	2017/18	2018/19				
	Value	Value	MSG Target	MSG Status	NHS GGC Target	NHS GGC Status
Number of acute bed days lost to delayed discharges (inc Adults With Incapacity) Age 65 years & over	2,291	2,502	3,211		2,742	
Number of acute bed days lost to delayed discharges for Adults with Incapacity, age 65 and over	461	387	1,552		764	

An issue with incomplete data at Health Board level has resulted in the Scottish Government instructing HSCPs not to publish January 2019 to March 2019 data in relation to emergency admissions and unscheduled bed days.

For the purposes of comparison on previous years and to show progress against our MSG and NHS GGC targets we are therefore required to use calendar year data for emergency admissions and unscheduled bed days.

Performance Indicator	2017	2018				
	Value	Value	MSG Target 2018/19	MSG Status	NHS GGC Target 2018/19	NHS GGC Status
Number of emergency admissions aged 65+	4,621	4,757	3,734		3,537	
Emergency admissions aged 65+ as a rate per 1,000 population	273	274	238		237	
Number of emergency admissions (All ages)	10,404	10,502	10,107		9,646	
Unplanned acute bed days (aged 65+)	52,017	50,281	40,260		36,974	
Unplanned acute bed days (aged 65+) as a rate per 1,000 population	3,186	3,061	2,558		2,349	

Appendix 3: HSCP Local Government Benchmarking Framework Indicators

Performance Indicator	2013/14	2014/15	2015/16	2016/17	2017/18	
	Value	Value	Value	Value	Value	Note
Balance of Care for looked after children: % of children being looked after in the Community	90.51%	89.12%	89.81%	89.98%	90.34%	We are ranked 13th in Scotland and the Scotland figure is 89.69%, below our 90% target.
The gross cost of "children looked after" in residential based services per child per week £	£2,946.15	£2,374.54	£2,292.62	£2,022.36	£2,273.00	We are ranked 3rd lowest gross cost in Scotland in 2017/18 and are well below the Scotland figure of £3,485 per week.
The gross cost of "children looked after" in a community setting per child per week £	£155.63	£159.38	£185.70	£164.66	£200.00	We are ranked 3rd lowest gross cost in Scotland in 2017/18 and are well below the Scotland figure of £328 per week.
Self directed support spend for people aged over 18 as a % of total social work spend on adults	1.41%	1.8%	2.19%	2.37%	2.57%	We are ranked 28th in Scotland and the Scotland figure is 6.72%.
Home care costs for people aged 65 or over per hour £	£18.47	£20.91	£22.03	£24.24	£25.90	We are ranked 21st in Scotland. The Scotland figure is £23.76.
Net Residential Costs Per Capita per Week for Older Adults (65+)	£415.97	£460.43	£466.13	£479.97	£482.00	We are ranked 27th in Scotland and the Scotland figure is £372.
Percentage of children who have reached all of the expected developmental milestones at the time of the child's 27-30 month child health review - Early Years Collaborative Stretch Aim	75.98%	77.5%	71.66%	56.71%	0.35%	From April 2017 onwards, very few children reviewed in NHS Greater Glasgow & Clyde have had meaningful information recorded for every developmental domain due to a mismatch between paperwork and systems. 2017/18 figures are not comparable to previous years.

**Appendix 4: Performance and Assurance Reporting Framework: Public Protection Chief Officers Group
2018/19**



Safe

Key Performance Targets







1. Child Protection

Performance Indicator	2017/18	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	2018/19					
	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status	Long Trend	Short Trend	Note
Percentage of child protection investigations to case conference within 21 days	79.2%	57.8%	84%	92.2%	86%	90.5%	56.25%	61.76%	83.33%	75%	95%				Of the 156 case conferences held during 2018/19 117 were within 21 days
Percentage of children on the Child Protection Register who have a completed and current risk assessment	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				There are 52 children on the register.

2. Adult Support and Protection

Adults at Risk - Referrals

Performance Indicator	2017/18	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	2018/19					
	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status	Long Trend	Short Trend	Note
Percentage of Adults at Risk enquiries completed within 5 working days from point of referral	83%	74%	89%	90%	79%	89%	93%	80%	87%	87%	85%				280 of 321 enquiries.

Adults at Risk - Investigations															
Performance Indicator	2017/18	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	2018/19					
	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status	Long Trend	Short Trend	Note
Percentage of Adults at Risk Investigations started within 6 working days from point of referral (West of Scotland Guidelines requirement is 8 working days)	74%	85%	71%	60%	83%	100%	91%	100%	100%	98%	80%				43 of 44 investigations. 100% under West of Scotland Guidelines of 8 working days.
Percentage of Adults at Risk Case Conferences held within 20 working days from point of referral	48%	50%	50%	60%	33%	50%	100%	50%	N/A	58%	75%				Due to the complexity of risk it is expected that the case conference may be outwith timescales. Relevant action to mitigate risk was in place prior to conference.
Percentage of Adult Support and Protection clients aged 16 to 18 who have current risk assessment and care plan	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	100%	N/A	N/A	N/A	There were no Adult Support and Protection clients aged 16 to 18 years during 2017/18 or 2018/19.

3. Criminal Justice

Registered Sex Offenders, Restricted Patients and Serious Violent Offenders

Exceptions Reporting

The following KPIs will be included should the target not be met; 85% of Level 2 MAPPA cases reviewed no less than twelve weeks, 90% of level 3 cases reviewed no less than once every six weeks, the level 2 meeting must be held within 20 days of receipt of referral by the MAPPA Coordinator or their administrator, if the offender is in the community the Level 3 MAPPP must be held within 5 working days of receipt of referral by the MAPPA Coordinator or their administrator, If the offender is in custody or subject to CPA the level 2 or 3 meeting must be held prior to release in the community, stage 1 notifications for community sentences must be made within 3 working days of receipt of community sentences, stage 2 referral of a community sentence must be made within 5 working days of a stage 1 notifications and draft minutes of level 2 and 3 meetings should be produced and sent to MAPPA chairs within 5 working days

Quarter 3 Notifications

Notification received on 23rd October 2018 for an offender that was sentenced on 10th October 2018. 5 working days out of timescales.

Notification received on 27TH November 2018 for an offender that was sentenced on 19th November 2018. 2 working days out of timescales. 2 out of 3 community notifications received were out of timescales.

Quarter 4

Notifications

Notification received 1/03/2019 for an offender that was sentenced on 21/02/2019. 1 day out of timescales.

Notification received 16/05/2019 for an offender that was sentenced on 17/04/2019. 16 days out of timescales.

Monitoring Indicators

1. Child Protection

Performance Indicator	2017/18	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	2018/19	
	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Note
Number of Child Protection referrals	423	117	99	122	85	83	103	88	66	340	
Number of Child Protection investigations	310	82	59	106	63	68	61	44	58	231	

Performance Indicator	2017/18	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	2018/19	
	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Note
Number of children investigated	304	80	59	102	63	65	61	44	57	227	
Number of children investigated - Male	150	41	31	43	35	33	26	24	22	105	
Number of children investigated - Female	153	39	28	59	27	31	32	20	35	118	
Number of children involved in pre-birth case discussions but not progressing to pre-birth conference	0	0	0	0	0	0	0	0	0	0	
Number of children involved in pre-birth case conference	19	6	4	3	6	4	7	2	5	18	
Number of children registered pre-birth (as distinct from live child registration)	7	2	3	0	2	1	3	2	2	8	
Number of Child Protection investigations resulting in a case conference (No of case conferences held)	231	71	43	70	47	46	34	26	52	158	
Number of children on the Child Protection Register at year end	70	60	55	59	70	53	58	47	52	52	1 unborn
Number of children on the Child Protection Register - Male (At Quarter End)	29	29	26	28	29	25	31	26	28	28	
Number of children on the Child Protection Register - Female (At Quarter End)	41	31	29	31	41	28	26	21	23	23	

Performance Indicator	2017/18	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	2018/19	
Number of children with temporary registration (At Quarter End)	0	5	0	0	0	0	3	4	3	3	
Average length of time on Child Protection Register (Days) - All	152	131	134	149	152	143	142	135	148	148	
Average length of time on Child Protection Register (Days) - Male	171	142	144	177	171	153	152	145	167	167	
Average length of time on Child Protection Register (Days) - Female	145	122	124	125	145	134	135	127	125	125	
Percentage of children remaining on the Child Protection register for more than 18 months	2.9%	0%	1.8%	1.7%	2.9%	1.9%	3.44%	0%	0%	0%	
Number of Child Protection registrations	111	23	31	25	32	18	24	22	24	88	
Number of Child Protection de-registrations	112	34	36	21	21	35	19	29	18	101	
Number of de-registrations where child moved into a formal placement	23	7	7	7	2	7	1	9	6	23	
Number of de-registrations where child returned home or at home with parents	65	24	16	10	15	21	14	13	9	57	
Number of de-registrations where child living with kinship carer	16	1	8	3	4	6	4	5	1	16	
Number of comprehensive medical assessment clinics held	10	4	1	1	4	5	N/A	N/A	N/A	N/A	Not available

Performance Indicator	2017/18	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	2018/19	
Number of comprehensive medical assessment appointments held	13	4	2	1	6	10	N/A	N/A	N/A	N/A	Not available
Number of referrals to comprehensive medical assessment clinic by social workers	10	3	4	1	2	10	N/A	N/A	N/A	N/A	Not available
Number of referrals to comprehensive medical assessment clinic by health visitors	4	1	2	0	1	0	N/A	N/A	N/A	N/A	Not available
Average waiting time from referral from CPU to Medical (Weeks)	14	11	20	12	12	10	N/A	N/A	N/A	N/A	Not available
Number of referrals to comprehensive medical assessment clinic where reason is Neglect	14	4	6	1	3	8	N/A	N/A	N/A	N/A	Not available
Number of Child Protection referrals aged 0-2 years	69	27	14	20	8	12	21	15	5	53	
Number of Child Protection referrals aged 3-4 years	65	20	12	20	13	9	16	12	6	43	
Number of Child Protection referrals aged 5-8 years	111	22	24	39	26	22	32	24	14	92	
Number of Child Protection referrals aged 9-11 years	92	25	25	21	21	24	17	20	16	77	
Number of Child Protection referrals aged 12 years and over	86	23	24	22	17	16	17	17	25	75	

2. Adult Support and Protection

Adults at Risk Referrals

Performance Indicator	2017/18	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	2018/19	
	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Note
Number of Adults at Risk Referrals	347	93	98	90	66	91	70	76	84	321	
Number of Adults at Risk Referrals by Type of Harm Reported	415	112	121	98	84	122	103	108	109	442	
Number of Adults at Risk Referrals that do not meet the 3 point test known and supported by other services	80	21	18	27	14	17	18	7	18	60	

Adults at Risk - Investigations

Performance Indicator	2017/18	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	2018/19	
	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Note
Number of Adults at Risk Investigations	54	13	14	15	12	10	11	15	8	44	
Number of Adults at Risk Orders applied for	4	3	0	0	1	0	0	0	0	0	
Number of Adults at Risk Orders granted	4	3	0	0	1	0	0	0	0	0	

Vulnerable Adults - Referrals											
Performance Indicator	2017/18	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	2018/19	
	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Note
Number of Vulnerable Adult Referrals	743	173	191	165	214	205	203	157	148	713	

WEST DUNBARTONSHIRE HEALTH & SOCIAL CARE PARTNERSHIP BOARD**25 JUNE 2020**

Subject: Internal Audit Annual Report for the year ended 31 March 2020**1. Purpose**

- 1.1** To submit the Chief Internal Auditor's Annual Report for 2019/20 based on the internal audit work carried out for the year ended 31 March 2020, which contains an independent opinion on the adequacy and effectiveness of West Dunbartonshire's Health and Social Care Partnership Board's internal control environment that can be used to inform its Annual Governance Statement.

2. Recommendations

- 2.1** It is recommended that the Health and Social Care Partnership Board note the contents of this report.

3. Background

- 3.1** The Public Sector Internal Audit Standards (PSIAS) became effective on 1st April 2013 and require that:

"The chief audit executive [for WDC: Shared Service Manager – Audit & Fraud] must deliver an annual internal audit opinion and report that can be used by the organisation to inform its governance statement

The annual internal audit opinion must conclude on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and control.

The annual report must incorporate:

- *The opinion;*
- *A summary of the work that supports the opinion; and*
- *A statement on conformance with the Public Sector Internal Audit Standards and the results of the quality assurance and improvement programme"*

- 3.2** For the purposes of providing an annual opinion, reliance will be placed on the work of NHS Greater Glasgow and Clyde internal auditors and West Dunbartonshire Council internal auditors and any other work carried out by other external assessors, for example Audit Scotland and Care Inspectorate.

3.3 In order to ensure proper coverage and avoid duplication of effort, the internal auditors of NHSGGC and all local authorities operating within this Health Board area meet periodically.

4. Main Issues

4.1 The Internal Audit Annual Report for 2019/20 included at Appendix 1 advises that due to Covid-19 the presentation of the Annual Internal Audit Report for NHSGG&C has been deferred until September. This means that the Chief Internal Auditor's is unable to conclude the IJB's Annual Internal Audit Report and provide an assurance statement opinion at this time. However, based on in year reports, Officers are confident that the overall opinion will be that reasonable assurance can be placed upon the adequacy and effectiveness of systems of governance, risk management and internal control in the year to 31 March 2020 but this is not confirmed at this time.

The final accounts will include the view once it is available in September.

Covid-19

The significant incident in late March tested how well the HSCP Board's risk management, governance and internal controls framework is operating. It will be important for the HSCP Board, at the appropriate time, to carry out a post-incident review and highlight any lessons learned.

4.2 The basis of the audit opinion includes taking reliance from:

- The Assurance Statement for the year ended 31 March 2020 from the Shared Service Manager – Audit & Fraud (Chief Internal Auditor) of West Dunbartonshire Council; and
- Information provided by Scott Moncrieff, the Internal Auditors of NHS Greater Glasgow and Clyde, on audits that they have carried out during 2019/20. We have been advised that the deadline for the Annual Internal Audit report has been deferred until 30 September and the report will be provided at that point.

5. People Implications

5.1 There are no personnel issues with this report.

6. Financial Implications

6.1 There are no financial implications with this report.

7. Professional Implications

7.1 None.

8. Locality Implications

8.1 None.

9. Risk Analysis

9.1 There is a risk that failure to deliver the Internal Audit Plan would result in an inability to provide assurances to those charged with governance over which the Health & Social Care Partnership Board is required to rely upon within both the Council's and Health Board's system of internal financial control.

10. Impact Assessments

10.1 None.

11. Consultation

11.1 This report has been agreed with the Chief Officer and the Chief Financial Officer of the West Dunbartonshire Partnership Board.

12. Strategic Assessment

12.1 The establishment of a robust audit plan will assist in assessing whether the Partnership Board and Officers have established proper governance and control arrangements which contribute to the achievement of the strategic priorities of the HSCP Strategic Plan.

Author: Andi Priestman – Chief Internal Auditor for West Dunbartonshire Health and Social Care Partnership Board.

Date: 29 May 2020

Person to Contact: Andi Priestman, Shared Service Manager – Audit & Fraud
West Dunbartonshire Council
Telephone 01389 737436
E-mail – andi.priestman@west-dunbarton.gov.uk

Appendices: 1 - Internal Annual Audit Report for the year ended 31 March 2020 from the Chief Internal Auditor

Background Papers: None

Wards Affected: All Wards

Internal Audit Annual Report for the year ended 31 March 2020
from the Chief Internal Auditor

To the Members of West Dunbartonshire Health & Social Care Partnership Board (IJB), the Chief Officer and the Section 95 Officer (Chief Financial Officer)

As the appointed Chief Internal Auditor for West Dunbartonshire Health & Social Care Partnership Board (IJB), I am pleased to present my annual statement on the adequacy and effectiveness of the internal financial control system of the Partnership Board (IJB) for the year ended 31 March 2020.

Respective responsibilities of management and internal auditors in relation to internal control

It is the responsibility of senior management of the Health and Social Care Partnership Board (IJB) to establish an appropriate and sound system of internal financial control and to monitor the continuing effectiveness of that system. It is the responsibility of the Chief Internal Auditor to provide an annual overall assessment of the robustness of the internal financial control system.

The Health & Social Care Partnership Board's (IJB's) framework of governance, risk management and internal controls

The Partnership Board (IJB) has a responsibility to ensure that its business is conducted in accordance with legislation and proper standards.

The governance framework comprises the systems and processes, culture and values by which the Partnership Board (IJB) is directed and controlled and how it accounts to communities. It enables the Partnership Board (IJB) to monitor the achievement of its strategic priorities and to consider whether those objectives have led to the delivery of appropriate services and value for money.

The system of internal control is a significant element of the governance framework. Any system of control can only ever provide reasonable and not absolute assurance that control weaknesses or irregularities do not exist or that there is no risk of material errors, losses, fraud, or breaches of laws or regulations. Accordingly, the Partnership Board (IJB) is continually seeking to improve the effectiveness of its systems of internal control in order to identify and prioritise the risks that would prevent the achievement of the Health & Social Care Partnership Board's (IJB's) strategic objectives as set out within its Strategic Plan.

The work of internal audit

Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.

The operational delivery of services with WDC and NHSGGC on behalf of the WD Health and Social Care Partnership Board (IJB) will be covered by their respective internal audit arrangements.

Both the Council's Internal Audit Section and the Health Board's internal audit function operate in accordance with the *Public Sector Internal Audit Standards* (PSIAS) which have been agreed to be adopted from 1st April 2013 by the relevant public sector Internal Audit Standard setters. PSIAS applies the Institute of Internal Auditors International Standards to the UK Public Sector.

Planned work for 2020/21

Following a risk based assessment of the activities of IJB and consultation with the Chief Officer and the Chief Financial Officer the Internal Audit Plan for 2020/21 provides for 40 days of Internal Audit resource drawn from the Internal Audit Service of West Dunbartonshire Council. This will be used to undertake the following: service this audit committee; carry out specific risk based work including a review of the adequacy and effectiveness of the risk management process and a review of adequacy and effectiveness of arrangements in place to ensure that the current policy and associated procedures are appropriately updated in line with the new statutory guidance in relation to IJB Directions; and monitor the progress of the implementation of the agreed internal audit actions plans by management.

The Internal Audit Plan for 2020/21 was approved by the Health & Social Care Partnership Board (IJB) Audit Committee on 1 April 2020.

Basis of Opinion

My evaluation of the control environment is informed by a number of sources:

- The audit work undertaken by Internal Audit within the Council and the Health Board and also for the Partnership Board (IJB) during the year to 31 March 2020;
- The Assurance Statement for the year ended 31 March 2020 from the Chief Internal Auditor of West Dunbartonshire Council;
- The Assurance Statement for the year ended 31 March 2020 from the Internal Auditors for NHSGG&C*;
- The review of the Local Code of Good Governance and the identified improvement actions;

- The assurance statement signed by the Chief Officer on the operation of the internal financial controls for the services for which she was responsible during the year to 31 March 2020;
- Reports issued by the External Auditors of the Council and the Health Board and other review agencies; and
- My knowledge of the Partnership Board's governance, risk management and performance monitoring arrangements;

* In relation to the assurances received from NHSGG&C, due to Covid-19 we have been advised that The Internal Audit Annual Report 2019/20 provided by Scott Moncrieff, the Internal Auditors of NHS Greater Glasgow and Clyde will not be provided until September.

Opinion

As the presentation of the Annual Internal Audit Report for NHSGG&C has been deferred until September, this means that the IJB's Chief Internal Auditor is unable to conclude the IJB's Annual Audit Report and provide an assurance opinion at this time. However, based on in year reports, Officers are confident that the overall opinion will be that reasonable assurance can be placed upon the adequacy and effectiveness of systems of governance, risk management and internal control in the year to 31 March 2020 but this is not confirmed at this time. The final accounts will include the view once this is available in September.

Covid-19

The significant incident in late March tested how well the HSCP Board's risk management, governance and internal controls framework is operating. It will be important for the HSCP Board, at the appropriate time, to carry out a post-incident review and highlight any lessons learned.

Signature: Andi Priestman

Title: Chief Internal Auditor for West Dunbartonshire Health & Social Care Partnership Board (IJB)

Date: 29 May 2020

WEST DUNBARTONSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP BOARD

25 June 2020

Subject: Local Code of Good Governance Review and Annual Governance Statement

1. Purpose

1.1 To present to the HSCP Board:

- The outcome of the self-evaluation undertaken of the Health and Social Care Partnership's compliance with its Code of Good Governance; and
- The Annual Governance Statement for inclusion in the HSCP Board's Unaudited Annual Accounts.

2. Recommendations

2.1 The HSCP Board is asked to:

- Note the outcomes of the annual self-evaluation, the issues identified and improvement actions; and
- Approve the Annual Governance Statement.

3. Background

3.1 *Delivering Good Governance in Local Government: Framework*, published by CIPFA in association with Solace in 2007, set the standard for local authority governance in the UK. CIPFA and Solace reviewed the Framework in 2015 to ensure it remained 'fit for purpose' and published a revised edition in spring 2016. *Delivering Good Governance in Local Government: Framework* (CIPFA/Solace, 2016) has applied to annual governance statements prepared for the financial year 2016/17 onwards.

3.2 Whilst the Framework is written in a local authority context, most of the principles are applicable to the HSCP Board, particularly as legislation recognises Integrated Joint Board's as a local government body under Part VII of the Local Government (Scotland) Act 1973, and therefore subject to the local authority accounting code of practice.

3.3 The concept underpinning the Framework is that it assists local government bodies in taking responsibility for developing and shaping an informed approach to governance, aimed at achieving the highest standards in a measured and proportionate way. The Framework is intended to assist organisations individually in reviewing and accounting for their own unique approach. The overall aim is to ensure that:

- resources are directed in accordance with agreed policy and according to priorities;
- there is sound and inclusive decision making; and
- there is clear accountability for the use of those resources in order to achieve desired outcomes for service users and communities.

3.4 The HSCP Board on 31 May 2017 approved the Local Code of Good Governance and annually since June 2018 has noted the outcome of the self-evaluation process and the improvement actions identified to strength compliance with the adopted Governance Framework principles.

3.5 The annual governance statement is a significant document within the HSCP Board's annual accounts which recognises, records, assesses and publishes the governance arrangements as defined in the CIPFA/SOLACE Framework.

3.6 It is recognised as good practice to consider the annual governance statement as a standalone document. Last year's statement was approved by the HSCP Audit and Performance Committee in line with its terms of reference. However as the planned 17 June committee was replaced by a HSCP Board Members Session the HSCP Board is asked to approve this statement for inclusion in the 2019/20 draft unaudited accounts.

4. Main Issues

4.1 The annual self-evaluation review for 2019/20 has been carried out by the Chief Financial Officer and considered by the Senior Management Team. The review concluded that current practice is mainly compliant against the 7 principles (90 sub-principles); a summary of the review is attached at Appendix 1. The review of the 2018/19 areas for improvement and associated actions are detailed in Appendix 2, together with a new improvement action for 2019/20.

4.2 As indicated in last year's review the development of the HSCP Medium Term Financial Plan was identified as an improvement action across many of the code's principles to demonstrate; effective planning, optimising achievement of intended outcomes and best value. The HSCP Board accepted the 2020 – 2025 Medium Term Financial Plan on 25 March 2020. For the 2019/20 review this would move a number of sub-principles from generally compliant to fully compliant. However this plan was presented, with some sensitivity analysis, around a "business as usual" model linked to the current strategic priorities. The move through "responding and reacting" to the Covid-19 pandemic and into the "recovery and renewal" phases will require a revision to some of these priorities within the budget resources available.

4.3 For those areas remaining generally compliant, Appendix 1 provides details of this across the principles and sub-principles. Principle D. "Determining the interventions necessary to optimise the achievement of the intended.." contains the highest proportion of this compliance rating. This relates to the improvement actions identified to support the alignment of service priorities to affordability, commissioning intentions, provider sustainability and

maximisation of budget resource. This will be demonstrated by continuing to make progress on the methodology on quantifying and releasing “Set Aside” resources and the development of a robust commissioning plan. There has been positive partnership working across other HSCPs and NHSGGC and a draft commissioning plan for unscheduled care will be considered by the HSCP Board in this June agenda.

- 4.4 The one new improvement action identified in the review is the requirement to review and revise the format of HSCP Board reports to reflect the statutory guidance on Directions issued by the Scottish Government in January this year.
- 4.5 The Governance Statement, attached at Appendix 3 details the key elements of the HSCP Board’s governance framework, including how the response to the Covid-19 pandemic impacted on this framework in the last weeks of the 2019/20 financial year and to date, review of the local code and improvement actions, the annual assurance statements of the senior management team and overall opinion.
- 4.6 The work of internal audit, external audit and external inspection agencies is also reflected in the statement as well as the reliance of the HSCP Board on WDC and NHSGGC systems of internal control. However as set out in the Chief Internal Auditor’s Annual Report the assurance statement from NHSGGC auditors is not expected until September. This Annual Governance Statement will be published within the unaudited Annual Accounts for the year ended 31 March 2020 and will be examined by external audit. The timing of final sign off by our external auditors is under review but will be no later than 30 November 2020.

5. People Implications

- 5.1 None.

6. Financial Implications

- 6.1 None.

7. Professional Implications

- 7.1 None.

8. Risk Analysis

- 8.1 The risk of failure of not annually reviewing the local code and sources of assurance for governance arrangements could impact on the HSCP Board’s ability to produce a meaningful Governance Statement.

9. Impact Assessments

- 9.1 There are no issues identified.

10. Consultation

10.1 This report was prepared in conjunction with the Chief Officer and Senior Management Team.

11. Strategic Assessment

11.1 Proper budgetary control and sound financial practice are cornerstones of good governance and support the Partnership Board and officers to pursue the strategic priorities of the Strategic Plan.

Julie Slavin
Chief Financial Officer
8 June 2020

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Appendices: Appendix 1 – Local Code Review Summary
Appendix 2 – Improvement Action Plan
Appendix 3 - 2019/20 Draft Governance Statement

Background Papers: Delivering Good Governance Framework
Full Review of the Local Code, including sources of assurance

Wards Affected: All

Annual Review of Code of Good Governance - Summary June 2020

No. of sub-principles	A. Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law	Change from June 2019				
		Fully Compliant	Generally Compliant	Non Compliant	Fully Compliant	Generally Compliant
4	Behaving with Integrity	4	0	0	0	0
4	Demonstrating strong commitment to ethical values	4	0	0	0	0
5	Respecting the rule of law	4	1	0	0	0
B. Ensuring openness and comprehensive stakeholder engagement						
4	Openness	4	0	0	0	0
3	Engaging comprehensively with institutional stakeholders	3	0	0	0	0
6	Engaging stakeholders effectively, including individual citizens and service users	6	0	0	0	0
C. Defining outcomes in terms of sustainable economic, social, and environmental benefits						
5	Defining outcomes	2	3	0	0	0
4	Sustainable economic, social and environmental benefits	2	2	0	2	-2
D. Determining the interventions necessary to optimise the achievement of the intended						
2	Determining interventions	1	1	0	0	0
8	Planning interventions	5	3	0	0	0
4	Optimising achievement of intended outcomes	0	4	0	0	0
E. Developing the entity's capacity, including the capability of its leadership and the individuals within it						
4	Developing the entity's capacity	2	2	0	0	0
7	Developing the capability of the entity's leadership and other individuals	7	0	0	1	-1
F. Managing risks and performance through robust internal control and strong public financial management						
3	Managing Risk	3	0	0	2	-2
5	Managing performance	4	1	0	1	-1
5	Robust internal control	3	2	0	0	0
3	Managing Data	3	0	0	0	0
2	Strong public financial management	1	1	0	0	0
G. Implementing good practices in transparency, reporting, and audit to deliver effective accountability						
2	Implementing good practice in transparency	2	0	0	0	0
5	Implementing good practices in reporting	5	0	0	0	0
5	Assurance and effective accountability	4	1	0	1	-1
90	TOTAL	69	21	0	7	-7
90	TOTAL - June 2019 Review	62	28	0		

Annual Review of Code of Good Governance
Improvement Action Plan 2020

OUTSTANDING ACTIONS

Improvement Action	Lead Officer	Due Date	Review May 2020
<i>Refresh and update local Self Directed Support arrangements.</i>	<i>Head of Strategy and Transformation</i>	<i>September 2020 Revised</i>	<i>Update Report to HSCP Board on 19 February 2020, including engagement with the Care Inspectorate. A full review of progress and next actions is a priority as operational services move from containing the impact of service delivery during the Covid-19 pandemic into the Recovery phase.</i>
Develop medium term financial plan.	Chief Financial Officer	April 2020 Revised	COMPLETE – presented and approved by the 25 March 2020 HSCP Board. Impact of Covid-19 pandemic and recovery plans will impact on scenario planning.
Strengthening performance reports against the Scottish Government's Best Value framework.	Chief Financial Officer and Head of Strategy and Transformation	June 2019 Revised	COMPLETE - Considered WDC Best Value Report and Audit Scotland Template for IJBs. This was incorporated into the 2018/19 Annual Performance Report – published July 2019 and also updated for 2019/20 Qtr1 Performance Report. Will be refined for 2019/20 Annual Performance Report.

In partnership with NHSGGC, Scottish Government and GGC IJBs agree on methodology that allows Set Aside resources to be quantified and reflect actual activity to comply with legislation on the use of this resource in shifting the balance of care.	Chief Financial Officer	September 2020 Revised	PART COMPLETE: Data sets have been agreed to produce comparison of actual activity and associated costs. This will be reflected in the 2019/20 HSCP Board Annual Accounts. Prior to the Covid-19 outbreak the Glasgow HSCPs had developed a draft Commissioning Plan around Unscheduled Care which was due to be presented to all IJBs March – May. This will need revision to reflect Covid-19 Recovery Plans.
Develop a protocol with NHSGGC auditors to share internal audit report findings with Chief Financial Officer and Chief Internal Auditor.	Chief Internal Auditor	December 2017	COMPLETE: New NHSGGC auditors in place and protocol agreed.
Review the effectiveness of the Audit Committee and the Terms of Reference	Chief Internal Auditor	December 2019 Revised	COMPLETE: December 2019. Members Session held in October and new ToR approved by HSCP Board – including change of name to Audit & Performance Committee.
<i>Review the effectiveness of the new Strategic Planning Group</i>	<i>Chief Officer & Head of Strategy and Transformation</i>	<i>October 2020 Revised</i>	<i>Delayed due to turnover within the Senior Management Team.</i>
Consider long term financial planning in the context of projections and assumptions made by HSCP Board's funding partners.	Chief Financial Officer	April 2020 Revised	COMPLETE: presented and approved by the 25 March 2020 HSCP Board. Impact of Covid-19 pandemic and recovery plans will impact on scenario planning.

<p>Develop a robust Commissioning Plan driven by new Strategic Plan 2019 - 2022</p>	<p>Head of Strategy and Transformation</p>	<p>October 2020 Revised</p>	<p><i>An update report was presented to 19 February 2020 HSCP Board. Considered the progress made to date with the Strategic Planning Group, the procurement pipeline priorities and the agreed service improvement programmes.</i></p>
<p>Increase the % of spend by HSCP Board with 3rd party providers being compliant with Financial Regulations and have robust service specifications and contract monitoring arrangements in place.</p>	<p>Chief Financial Officer and Head of Strategy and Transformation</p>	<p>April 2020</p>	<p>PART COMPLETE: Significant progress has been made throughout 2019/20 with a number of procurements being approved by the WDC Tendering Committee or under Delegated Authority. In financial year 2019/20, the HSCP procurement spend was £47,447,790. The procurement spend that is compliant with the Financial Regulations 79.2 was (£37,568,514). This takes account of “partial compliance” i.e. spend where contracts were awarded during the year and in turn increased the compliance rate).</p> <p>In comparison, financial year 2018/19 HSCP procurement spend was £#. The</p>

			procurement spend that was compliant with the Financial Regulations was #% (£#).
Ministerial Strategic Group Review on the Progress of Integration Action Plan – from May 2019 Self Evaluation	Chief Officer	Multiple actions	PART COMPLETE: The Scottish Government accepted the WD HSCP Action Plan. Ownership and delivery of actions across the HSCP Board, WDC, NHSGGC and the Scottish Government.

NEW ACTIONS (June 2020)

Improvement Action	Lead Officer	Due Date
Review and revise the format of HSCP Board Reports to reflect the new guidance on Statutory Directions issued by the Scottish Government in January 2020.	Chief Financial Officer and Head of Strategy and Transformation	September 2020

ANNUAL GOVERNANCE STATEMENT

Introduction

The Annual Governance Statement explains the HSCP Board's governance arrangements as they meet the requirements of the "Code of Practice for Local Authority Accounting in the UK" (the Code) and reports on the effectiveness of the HSCP Board's system of internal control, including the reliance placed on the governance frameworks of our partners. It is included within the HSCP's financial statements to assure stakeholders on how the HSCP directs and controls its functions and how it relates to communities in order to enhance transparency and scrutiny of the HSCP's activities.

This statement lays out the governance arrangements in place for more than eleven months for the year ended 31 March 2020, and where significant, any changes to those arrangements as a consequence of local, national and international responses to the global Coronavirus (Covid-19) Pandemic. Further detail is provided below under "Governance Issues 2019/20 - Impact of Covid-19 Response on Governance Arrangements".

Scope of Responsibility

The HSCP Board is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively. It also has a statutory duty to make arrangements to secure best value under the Local Government in Scotland Act 2003.

To meet this responsibility the HSCP Board continues to have in place robust arrangements for the governance of its affairs and the effectiveness of its functions, including the identification, prioritisation and the management of risk. It has an established Audit and Performance Committee to support the board in its responsibilities for issues of risk, control and governance and associated assurance through a process of constructive challenge and promoting a culture of continuous improvement in performance.

In discharging this responsibility the Chief Officer has put in place arrangements for governance which includes a system of internal control. The system is intended to manage risk to a reasonable level and to support the delivery of the HSCP Board's policies, aims and objectives. Reliance is also placed on Greater Glasgow and Clyde Health Board and West Dunbartonshire Council's systems of internal control that support compliance with both partner organisations' policies and promotes the achievement of each organisation's aims and objectives, as well as those of the HSCP Board.

The Chief Internal Auditor reports directly to the HSCP Board's Audit and Performance Committee on all audit matters, with the right of access to the Chief Officer, Chief Financial Officer and Chair of the Audit and Performance Committee on any matter.

The Governance Framework and Internal Control System

The governance framework is comprised of systems and processes and cultures and values by which the HSCP is directed and controlled. It is not static and is updated to reflect new legislative requirements and best practice. This has never been more apparent as the HSCP Board, its partner organisations and numerous stakeholders have had to adapt to respond to the impact of the Covid-19 in the latter part of March 2020.

The system of internal control is based on an ongoing process designed to identify, prioritise and manage the risks facing the organisation. It enables the HSCP Board to monitor and evaluate the achievements of the strategic objectives laid out within its Strategic Plan and consider whether these have been delivered in an appropriate and cost effective manner.

The HSCP Board adopted governance arrangements are consistent with the Chartered Institute of Public Finance and Accounting (CIPFA) and the Society of Local Authority Chief Executives (SOLACE) framework "Delivering Good Governance in Local Government". Based on the framework's seven core principles a Local Code of Good Governance is in place which is reviewed annually and evidences the HSCP Board's commitment to achieving good governance and demonstrates how it complies with the recommended CIPFA standards. A copy of the code is available [here](#) (Appendix 1, 13.) on the HSCP website.

The main features of the HSCP Board's governance framework and system of internal control is reflected in its Local Code, with the key features summarised below:

- The HSCP Board is the key decision making body, comprising of a Chair, five other voting members and a number of professional and stakeholder non-voting members;
- The HSCP Board is formally constituted through the Integration Scheme which sets out the local governance arrangements, including definition of roles, workforce, finance, risk management, information sharing and complaints;
- A register of interests is in place for all Board members and senior officers;
- The HSCP Board has two governance sub-committees; Audit and Performance Committee (previously known as Audit Committee) and the Strategic Planning Group;
- Reports considered by the HSCP Board and the Audit and Performance Committee are published on the HSCP website;
- The scope, authority, governance and strategic decision making of the HSCP Board and Audit and Performance Committee is set out in key constitutional documents including the HSCP Strategic Plan 2019 – 2022, terms of reference, code of conduct, standing orders and financial regulations;
- The Terms of Reference for the updated Audit and Performance Committee Terms were agreed by the HSCP Board in November 2019 and included the additional of two additional members to the Committee drawn from the Strategic Planning Group. The full report can be found [here](#) (Appendix 1, xx);
- The Performance Management Framework commits to regular performance and financial reporting to the HSCP Board and Audit and Performance Committee, enhanced by a programme of development sessions, enabling members to interrogate performance and policy in greater detail;
- Clinical and Care Governance Group – provide oversight and scrutiny of all aspects of clinical and care risk and effectiveness as well as how patient centred care is delivered.
- The Risk Management Strategy, including the risk management policy and strategic risk register (underpinned by operational risk registers), are scrutinised at least annually by the Audit and Performance Committee with level of risk, its anticipated effect and mitigating action endorsed before being referred to the HSCP Board;
- The Reserves Policy is reviewed as part of the annual budget setting process and has identified a reasonable level of both general and earmarked reserves;

- A performance appraisal process is in place for all employees and staff who are also required to undertake statutory and mandatory training to reinforce their obligations to protect our service users, including information security; and
- Effective scrutiny and service improvement activities are supported by the formal submission of reports, findings, recommendations and associated action plans by Audit Scotland, Ministerial Strategic Group, our external and internal auditors and the Care Inspectorate.

The governance framework described, operates within the system of internal financial controls, including management and financial information, financial regulations, administration (including segregation of duties), management supervision and a system of delegation and accountability. Development and maintenance of these systems is undertaken by the Council and the Health Board as part of the operational delivery arrangements of the HSCP. In particular these systems include:

- Financial regulations and codes of financial practice;
- Procurement regulations which recognise the complexities of health and social care services for vulnerable service users;
- Comprehensive budgeting systems;
- Clearly defined capital expenditure guidelines;
- Programme of internal audits; and
- Senior officer led joint working groups, planning groups and project boards.

Compliance with Best Practice

The HSCP Board's financial management arrangements conform to the governance requirements of the CIPFA statement "*The Role of the Chief Financial Officer in Local Government (2010)*". To deliver these responsibilities the Chief Financial Officer must be professionally qualified and suitably experienced and lead and direct a finance function that is resourced and fit for purpose.

The HSCP Board complies with the requirements of the CIPFA Statement on "*The Role of the Head of Internal Audit in Public Organisations 2010*". The HSCP Board's appointed Chief Internal Auditor has responsibility for the internal audit function and is professionally qualified and suitably experienced to lead and direct internal audit staff. The Internal Audit service generally operates in accordance with the CIPFA "*Public Sector Internal Audit Standards 2013*".

The HSCP Board's Audit and Performance Committee operates in accordance with CIPFA's "*Audit Committee Principles in Local Authorities in Scotland*" and "*Audit Committees: Practical Guidance for Local Authorities (2018)*". In November 2019, to align with the review of the terms of reference, the Chief Internal Auditor and the Chair of the committee considered the CIPFA's 2018 guidance and carried out a:

- Self-assessment of Good Practice; and
- An evaluation of the Effectiveness of the Committee

The report concluded that the committee "largely complies with CIPFA good practice and thereby can assess its performance as generally meeting the CIPFA requirements". The full report can be found [here](#) (Appendix 1, xx).

Review of Adequacy and Effectiveness

The HSCP Board is committed to continuous improvement and is responsible for conducting at least annually, a review of its governance framework including the system of internal control. The review of the effectiveness of the framework is informed by the work of the Chief Officer and the Senior Management Team who have the responsibility for the development and maintenance of the governance environment and the work of internal and external audit and other review agencies including the Care Inspectorate.

The HSCP Board adopted "The Code of Practice for Local Authority Accounting", recommendation that the local code is reviewed each year in order that it can inform the Governance Statement. For the June 2020 review the 25 June HSCP Board agreed that there were no areas assessed to be non-compliant and more than three quarters were considered fully compliant.

Also supporting the review of the HSCP Board's governance framework are the processes of internal controls of West Dunbartonshire Council and Greater Glasgow and Clyde Health Board.

Within the council each member of the Corporate Management Team (including HSCP Heads of Service) completes a checklist to assess compliance levels against each aspect of the council's local code. These are considered by the Chief Internal Auditor and inform each Strategic Director's Certificate of Assurance as well as the Council's Governance Statement. An extract of the Improvement Areas identified for HSCP Senior Managers in relation to their Strategic Lead roles within the Council are detailed below:

- Complaints timescales;
- Incorporate service user feedback into Service Delivery Plans; and
- Improve governance around action plan/audit recommendation deadlines;

Within the health board a similar process is in operation which required the Chief Officer to complete a "Self Assessment Checklist" covering all the key areas of the internal control framework.

Other reviews to support continuous improvements and the control environment include the work undertaken by WDC & NHSGGC internal audit teams. Any specific control issues emerging from these audits are considered through each organisation's own Audit Committee and recommendations on improvements agreed. However any audits impacting on HSCP services are also considered by the HSCP Audit and Performance Committee for information and impact on delivering on strategic priorities.

In 2019/20 three social care audits were undertaken by WDC internal audit team:

- CM2000 Functionality Review – CM2000 is used by Care at Home services for the electronic scheduling and optimisation of visits. The audit found that the systems examined were generally working effectively. It also identified five actions to strengthen controls and support best value including increasing staff clocking in and out compliance and using this data to authorise overtime claims. These actions will be delivered in the coming financial year.
- Social Care Attendance Management Review – final recommendations have still to be finalised.
- Social Care Case Management Review – final recommendations have still to be finalised.

There were no health care based audits carried out by NHSGGC that directly impacted on HSCP service priorities.

Update on Previous Governance Issues

The 2018/19 Annual Governance Statement set-out a number of Improvement Actions based on the annual review of the Local Code and Areas for Improvement by each Head of Service. These are updated below with further expansion of two key areas.

Improvement Action 2018/19	Lead Officer	Due Date	Update
Develop a robust Commissioning Plan driven by new Strategic Plan 2019 – 2022	Head of Strategy, Planning and Health Improvement	August 2019	Date revised to late 2020 after update report considered by Feb HSCP Board. Progress made to date with the Strategic Planning Group, the procurement pipeline priorities and the agreed service improvement programmes.
Increase the % of spend by HSCP Board with 3rd party social care providers being compliant with Financial Regulations (incorporating procurement regulations) and have robust service specifications and contract monitoring arrangements in place	Chief Financial Officer & Head of Strategy, Planning and Health Improvement	April 2020	Ongoing – but significant progress made – further expanded below.
Ministerial Strategic Group Review on the Progress of Integration Action Plan – from May 2019 Self Evaluation	Chief Officer	Full agreement required from partners	Ongoing. The Scottish Government accepted the HSCP Action Plan. Ownership and delivery of actions across the HSCP Board, WDC, NHSGGC and the Scottish Government
Strengthen the budget setting arrangements with WDC & NHSGGC and work on producing a robust medium term financial plan.	Chief Financial Officer	November 2019	Chief Officer, Chief Executives and Chief Financial Officers of Council, Health and HSCP work closely together and align budget processes where possible. Medium Term Financial Plan presented and approved by the 25 March 2020 HSCP Board. Impact of Covid-19 pandemic and recovery plans will impact on scenario planning.

Update on Previous Governance Issues (Cont'd)

Improvement Action 2018/19	Lead Officer	Due Date	Update
<p>Improve case recording and assessment for Children & Families who receive statutory social work services.</p>	<p>Head of Children's Health, Care and Criminal Justice</p>	<p>On-going</p>	<p>Ongoing - work to improve case recording is continuing – most recent updates include changes to capture activity for the Scottish Government National Covid-19 dataset.</p> <p>Review of Care First case recording system by Information Team to be scheduled following lockdown.</p> <p>Improvement activity around assessments and reports is supported by monthly meetings with the Area Locality Reporter (SCRA).</p> <p>Case sampling for children on the child protection register will report to the Child Protection Committee after June 2020.</p>
<p>Improve sickness Absence Rates</p>	<p>All Heads of Service</p>	<p>On-going</p>	<p>Ongoing - analysis of absence data shows a downward trend from the start of this performance year. New Supporting Employee Wellbeing Policy for WDC launched last year, with master classes rolled out.</p>

Progress continues around the formalisation of "Set Aside" budgets with agreement across the Scottish Government, the health board and the six HSCP's on robust data sets to allow for calculation and comparison of actual activity and associated costs. This has been reflected in these annual accounts including a restatement of the 2018/19 set aside amount within the Comprehensive Income and Expenditure Statement (page x). Prior to the Covid-19 outbreak the Glasgow HSCPs had developed a draft Commissioning Plan on Unscheduled Care which was due to be presented to all IJBs March – June. This will need revision to reflect Covid-19 Recovery Plans.

Compliance with financial regulations in the area of procurement of social care services is a key priority area for the HSCP Board in evidencing best value in a climate of financial challenge and was referenced in both the Council's and HSCP Board's 2018/19 Annual Governance Statements.

Significant progress has been made throughout 2019/20 with a number of procurements being approved by the WDC Tendering Committee or under Delegated Authority. In financial year 2019/20, HSCP procurement expenditure was £47.4 million. The procurement spend that is compliant with the Financial Regulations was £37.6 million (79.2%). This takes account of "partial compliance" i.e. spend where contracts were awarded during the year and in turn increased the compliance rate. In comparison, financial year 2018/19 HSCP procurement spend was £40.2m with £5.2m (13%) spend that was compliant with the Financial Regulations. The HSCP's Senior Management Team will revisit the Procurement Pipeline Priorities and align to Recovery and Renewal Plans (further detail below).

Governance Issues 2019/20

The 2019/20 Internal Audit Annual Report for the HSCP Board identifies no significant control issues. As stated above the HSCP Board must also place reliance on the Council and Health Board's internal control framework. The Council's Internal Audit Annual Report has concluded that the Council's control procedures in key areas are operating as expected during 2019/20. The Health Board's internal auditor has yet to release their annual report opinion (expected September 2020), however based on in-year reports the opinion is expected to be one of reasonable assurance can be placed on the adequacy and effectiveness of the current governance and control systems and processes.

i. Impact of Covid-19 Response on Governance Arrangements

From mid-March 2020 as the effects of the Covid-19 pandemic began to impact on daily life in Scotland, the response of those charged with the delivery of public services especially health and social care services had to be rapid. To adapt services to meet the challenge of the pandemic there had to be appropriate and transparent amendments to current governance frameworks.

An urgent [item](#) - Temporary Decision Making Arrangements (Appendix 1, x) was considered by the 25 March 2020 HSCP Board which recommended:

- Approve the suspension of normal governance arrangements during the Covid-19 pandemic and accept the alternative Board meeting arrangement outlined at section 4 of this report ; and
- Approve delegation of authority to the Chief Officer, in consultation with the Chair and Vice Chair of the HSCP Board and the Chief Financial Officer, be enacted "if required", to meet immediate operational demand on decisions normally requiring Board approval;

This is managed through weekly telephone conferences and a decisions log/approval tracker which captures the timeline and any action sheets or final reports are published on the HSCP website. There are also weekly Chief Officer Briefings issued to all board members which update on key service impacts of Covid-19 and the interpretation of national guidance on local services.

All members of the HSCP Senior Management Team and key stakeholders are participants in a variety of HSCP specific Covid-19/Business Continuity response groups as well as WDC, NHS GGC and Scottish Government Strategic Resilience and Tactical Groups. In mid-March the Clinical and Care Governance Group stepped down and a

Local Management Response Team (LMRT) was established to respond to the Covid-19 pandemic. Membership included the HSCP SMT, our newly appointed Clinical Directors, staff side union and third sector representatives. The initial meeting took place on 17 March and at least weekly thereafter. This remains in place, however the Clinical and Care Governance Group has re-established its 6 weekly meeting cycle effective from 1 June 2020.

A comprehensive Covid-19 Impact Risk Register was developed covering all aspects of service delivery ranging from risk to service delivery from staff absence, system failure, insufficient PPE, Complaints, Freedom of Information Requests, Carer illness and increased demand for emergency support for various vulnerable individuals and families.

By the 3 April the Scottish Government required each HSCP to submit a Local Mobilisation Plan (LMP) and associated Financial Cost Tracker, which set out the high level service response across all delegated health and social care services. These were approved in principle by the Cabinet Secretary for Health and Sport on 9 April with ongoing follow-up to understand the impact on service delivery and associated costs.

The LMP set out how existing services could be impacted and their response as well as considering new service areas that required to be established to support health and care services in this public health emergency. This included the opening of two Covid-19 Hubs on 2 April to distribute the necessary Personal Protective Equipment (PPE) and two Community Assessment Centres (Clydebank and Renton) to support the clinical assessment and testing of people referred with potential Covid-19 symptoms.

ii. Business as Usual Governance Issues

As referred to under "Review of Adequacy and Effectiveness" above the Local Code was reviewed at the 25 June HSCP Board. The overall assessment was that there were improvements in overall compliance with the principles of the code, due to the completion or significant progress of a number of the Improvement Actions identified in last year's review, including:

- The Development of a Medium Term Financial Plan - presented and approved by the 25 March 2020 HSCP Board. Impact of Covid-19 pandemic and recovery plans will impact on scenario planning; and
- Evaluating the effectiveness of the Audit Committee.

The Local Code review also included the HSCP Board's Improvement Actions for 2020/21. This included those 2019/20 actions not fully complete plus one new action detailed below:

Improvement Action	Lead Officer	Due Date
Review and revise the format of HSCP Board Reports to reflect the new guidance on Statutory Directions issued by the Scottish Government in January 2020.	Chief Financial Officer and Head of Strategy and Transformation	September 2020

Recovery and Renewal

While some service areas are still in response mode the HSCP senior management in partnership with key stakeholders are shifting focus to the "Recovery and Renewal" phases.

The Clinical and Care Governance Group has re-established its 6 weekly meeting cycles and at its 1 June meeting it began its review of the governance arrangements for services developed and responses to key police directives introduced as a consequence of Covid 19 to provide assurance around compliance with these requirements. This included:

- HSCP Covid Community Assessment Centres;
- Provision of enhanced care assurance visits to local authority and independent and care homes;
- Testing in Care Homes – and all current guidance; and
- Legislative powers introduced as result of Coronavirus Act and with respect to any impact on service quality.

Reflective Learning will be a key element of recovery as well as building on the enhanced partnership working and collaboration required to creatively adapt services to meet service user needs in line with strategic priorities.

The "new normal" will have an impact on service demand and the financial consequences of this will have to be clearly laid out within the current performance reporting framework.

Conclusion and Opinion on Assurance

Overall the Chief Internal Auditor's evaluation of the control environment concluded that; based on the audit work undertaken, the assurances provided by the Chief Officers of the HSCP Board, West Dunbartonshire Council and Greater Glasgow and Clyde Health Board*, the review of the local code and knowledge of the HSCP Board's governance, risk management and performance monitoring arrangements:

*"As the presentation of the Annual Internal Audit Report for *NHS GG&C has been deferred until September, this means that the IJB's Chief Internal Auditor is unable to conclude the IJB's Annual Audit Report and provide an assurance opinion at this time. However, based on in year reports, Officers are confident that the overall opinion will be that reasonable assurance can be placed upon the adequacy and effectiveness of systems of governance, risk management and internal control in the year to 31 March 2020 but this is not confirmed at this time. The final accounts will include the view once this is available in September.*

Covid-19

The significant incident in late March tested how well the HSCP Board's risk management, governance and internal controls framework is operating. It will be important for the HSCP Board, at the appropriate time, to carry out a post-incident review and highlight any lessons learned.

Assurance and Certification

Whilst recognising that improvements are required, as detailed above, it is our opinion that reasonable assurance can be placed upon the adequacy and effectiveness of the HSCP Board's system of governance.

We consider the internal control environment provides reasonable and objective assurance that any significant risks impacting on our principal objectives will be identified and actions taken to mitigate their impact and deliver improvement.

Allan Macleod
HSCP Board Chair

Date: 25th June 2020

Beth Culshaw
Chief Officer

Date: 25th June 2020