

# Report

## Chief Social Work Officer's Report 2018/19

### Edinburgh Integration Joint Board

22 October 2019



#### Executive Summary

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1. The CSWO is required to produce an annual report. The format changed some years ago, when local authorities were asked to use a template devised by the Chief Social Work Adviser to the Scottish Government to ensure consistency across Scotland in annual report submissions.

#### Recommendations

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2. The Integration Joint Board is asked to:
  - i. Note the content of this report
  - ii. Note the report will be submitted to the Clinical and Care Governance Committee.

#### Background

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3. This is the first annual report written by the Chief Social Work Officer, Jackie Irvine, since coming into post in July 2018.

#### Main report

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4. The CSWO annual report provides a broad outline of some of the key issues facing social work and social care in Edinburgh. It includes data on statutory services, areas of decision making and sets out the main developments and challenges.
5. The report includes an update on finance, service quality, delivery of statutory functions, workforce planning and development.
6. Included in the report is a range of performance data and some of the key social work indicators are set out. This information complements, rather than replicates

the detailed performance and budget information on all social work and social care services.

7. Appendix two of the CSWO report acts as the required annual report to elected members on the operation of the statutory social work complaints process.

## **Key risks**

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8. The Chief Social Worker's Annual Report highlights strategic and operational matters which have affected social work services provided by the Edinburgh Health and Social Care partnership at the direction of the Integrated Joint Board (IJB).
9. Therefore, this report provides an overview and review of existing services and strategies. Any risks attached to either strategic or operational quality, delivery or performance will be known to the Edinburgh Health and Care Partnership and the IJB.

## **Financial implications**

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10. There are no financial implications that come directly from the Chief Social Worker's Annual Report.

## **Implications for Directions**

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11. There are no implications for IJB Directions that come directly from the Chief Social Worker's Annual Report.

## **Equalities implications**

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12. There are no equalities implications that come directly from the Chief Social Worker's Annual Report.

## **Sustainability implications**

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13. There are no sustainability implications that come directly from the Chief Social Worker's Annual Report.

## **Involving people**

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14. All social work services have the expectation to engage the participation of those citizens who require the support and assistance of those services. The

Edinburgh Health and Social Care Partnership has existing mechanisms in place to address stakeholder and community impact.

## Impact on plans of other parties

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15. The Chief Social Worker's Annual Report reports and reflects upon existing plans and will have no impact on these.

## Report author

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**Chief Social Work Officer**

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## Appendices

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**Appendix 1**

Chief Social Worker's Annual Report 2018/19

**THE CITY OF EDINBURGH COUNCIL  
CHIEF SOCIAL WORK OFFICER ANNUAL REPORT 2018/19**

## **Introduction and Acknowledgement**

It is my pleasure to provide my first Chief Social Work Officer's report in respect of the City of Edinburgh Council since coming into post in July 2018. I would like to acknowledge all the colleagues who have supported the production of this report and the associated relevant material for inclusion.

The requirement for each Council to have a Chief Social Work Officer (CSWO) was initially set out in 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 services, not only those provided directly by the Council or from within the integrated Health and Social Care Partnership (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.

The purpose of this report is to provide Council with information on the statutory work undertaken on the Council's behalf during the period 1 April 2018 to 31 March 2019 as well as outline the associated challenges within the context of the current climate within public services. This report will be posted on the Council website and will be shared with the Chief Social Work Advisor to the Scottish Government.

**Jackie Irvine**  
**Chief Social Work Officer**  
**September 2019**

## **1. Introduction – key challenges and strategic direction**

The City of Edinburgh has one of the fastest growing populations of any city in the United Kingdom. In 2016, Edinburgh's population increased to over half a million for the first time in its history and is estimated to reach 546,444 by 2026.

With this increase in the population, comes an understandable increase in the need for service provision. This is particularly true for the adult and older population, whereby people are being supported to live longer, often with more complex needs.

This results therefore is an increasing demand for essential services, at a time when public sector funding is shrinking within the climate of austerity and the need for Councils to meet ever increasing funding gaps.

Despite these challenges, the City of Edinburgh Council have been able to demonstrate improvement within the majority of social work service areas. There were major strengths identified and validated from the recent joint inspection of services for children and young people, led by the Care Inspectorate. There is more detail of their findings later in this report (see Communities and Families/page 6).

The City of Edinburgh Council continues to receive positive feedback in respect of the delivery of Community Justice services and this feedback from stakeholders is further supported by a series of 'People's Stories' from citizen's who are included in community justice services in relation to the support they receive; with many examples of how this support has assisted them to improve their circumstance, both for themselves and also their families. This is despite the financial challenges being faced by a reduction in our Section 27 budget and the likely increase in more community-based disposals with the growing move away from short term sentences.

In respect of the integrated Health and Social Care Partnership (HSCP), following the most recent inspection of the HSCP, the service had a follow up inspection in 2018 to evaluate evidence of improvement as they related to the 17 findings within the original inspection report. The HSCP, faces significant challenges due to the scale of demand. They are therefore undertaking a major transformation programme as reflected in their most recent Strategic Plan 2019-2022. This is largely based on the development of key strategic developments; the Edinburgh (HSCP) Offer, a move to the Three Conversations model, further enhancement of a Home First approach to assessment and support, as well as a broader transformation programme.

The challenges related to both increasing demand and tightening finances, highlights the need to move to more innovative ways of providing services and support across the range of social work services in Edinburgh. It also requires a more integrated approach across all Council departments and there is greater recognition of the reciprocal responsibilities and contribution that can be collectively achieved by working together.

## **2. Partnership Working - Governance and Accountability Arrangements**

Edinburgh has in place a range of governance arrangements to provide scrutiny and assurance to all areas of social work (Appendix 1).

For all areas of Public Protection, the Chief Officers Group provides oversight and governance to the range of committees and partnerships addressing public protection issues.

The Chief Officers group is chaired by the Council's Chief Executive and has representation from all the key partners as well as the chairs of the public protection groups; Child Protection Committee, Adult Protection Committee, Offender Management Group, Violence Against Women Group and the chair of the Multi-Agency Public Protection Arrangements (MAPPA) Strategic Oversight Group. Two Elected Members have been appointed to the group to improve oversight and awareness of the public protection challenges and issues within Edinburgh.

Adult social work services are now provided as part of the integrated Health and Social Care Partnership which is governed through the Integrated Joint Board (IJB). The IJB in Edinburgh has just re-organised its reporting structure, and now has five sub-committees also providing governance. The CSWO in Edinburgh sits as a non-voting member and professional advisor to the IJB and (on) the Clinical and Care Governance Committee.

Although the IJB in Edinburgh is separate from its parent bodies of NHS Lothian and the City of Edinburgh Council, the IJB still reports certain features of its business to both the NHS Lothian Healthcare Governance committee and to a number of the Committees within the Council. This provides good visibility across the Council of the progress being made by the HSCP in delivering on its key objectives.

Children's social work services are not integrated in Edinburgh, with no formalised inclusion into the IJB. **Children's social work services sits within the Communities and Families Directorate alongside Education services.** The governance and reporting arrangements for Children's Services is through the Children's Services Partnership, through the Community Planning Partnership. Edinburgh Children's Partnership is a governance arrangement linking; Council, NHS, Police and third sector agencies.

The Children's Partnership has three clear plans in place that support service delivery and improvement for children:

- Edinburgh Children's Partnership Children's Services Plan
- Edinburgh Child Protection Improvement Plan
- Edinburgh's Corporate Parenting Plan

Complementing this, each Locality has a Locality Improvement Plan, which is collaboratively created and led by partner agencies responding to local need and linked to the overall Children's Service Plan and the Health and Social Care priorities. This allows local variance in need to be reflected within each locality plan.

### 3. Social Services Delivery Landscape

#### Edinburgh Health and Social Care Partnership

The IJB was set up as a Public Body under the Public Bodies (Joint Working) (Scotland) Act of 2016. Membership comprises of voting members, five NHS

Lothian non-Executive Directors and five City of Edinburgh Council Elected Members. Non-voting members include the IJB's Chief Officer, Chief Finance Officer, Medical Nursing and AHP advisors. The Chief Social Work Officer is a non-voting professional advisor to the IJB and supports it by providing high quality professional social work advice. The role is set out in the underpinning legislation and accompanying guidance and ensures the legislative parameters supporting the social work role and function, and the statutory requirements relating to the regulation of services, is adhered to as the IJB fulfils its role and functions. Other non-voting members include people with experience of being a carer, with experience of accessing IJB services, trade unions representing the staff voice as well as the third sector representatives.

A wide range of services are delegated by both NHS Lothian and City of Edinburgh Council to the IJB. For the purposes of this report and in relation to Social Work services they relate to: Adult Social Work – in terms of social workers and social care staff, budgets for delivering social care for all adults – those with mental health issues, adults with a learning disability, older adults, people who are carers and those with physical or sensory impairment. The IJB is responsible for the delegated Adult Social Work budget relating to these services and those that are commissioned from third and independent providers to deliver the IJB's objectives as set out in its Strategic Plan. The approximate IJB Social Work budget is in the region of £250 million delegated by City of Edinburgh Council.

NHS delegated services include Community Mental Health and Learning Disability, Community Nursing and Allied Health Professionals, a range of community-hospital based services, Primary Care services and responsibility for the strategic planning of a range of acute based services which include Medicine for the Elderly, Psychiatry delivered in hospitals and Accident and Emergency Services.

The overall purpose of integrating these services and giving the IJB responsibility for the planning of them is to ensure that services are experienced as being seamless from the perspective of the individual, delivered as far as possible in the community or community setting and which are delivered maximising the use of public money through removing the organisational barriers between social work and health which, in previous years was seen to drive less than optimal outcomes for people.

This has been a period of significant change in the Edinburgh IJB. There has been a change in its leadership with a new Chief Officer taking up their role in May 2018, a new Head of Operations in June 2018 and a new interim Head of Strategic Planning joining in January 2019. The year has seen work undertaken on revising the IJB's Strategic Plan which will be published in August 2019 and in developing a new strategic transformation programme which will drive further improvement in performance as well as supporting the IJB and Health and Social Care Partnership in becoming sustainable, innovative and responsive.

Of note, in June 2018 the Joint Inspectorate undertook a progress review visit in respect of the 2016 Joint Inspection of Older People's Services. There were 17

recommendations in the original report and of these, the progress review determined that:

- 1 recommendation - good progress
- 2 recommendations - reasonable progress
- 12 recommendations - limited progress
- 2 recommendations - poor progress

IJB officers have revised the action plan relating to this and aligned it to the strategic transformation work to ensure that a more strategic approach to addressing actions can be taken.

Significant challenge for the IJB and partnership includes:

- Very challenging financial settlement; operating without a fully agreed budget beyond the start of the financial year;
- Significant savings programme to deliver;
- Historical poor performance in a number of key areas;
- Changing patterns of demand in the city – growth in the population alongside increasing in the prevalence of frailty and complex care needs that sits alongside this;
- Workforce scarcity due to the buoyant economy, high cost of living and the comparative attraction of similar jobs in other parts of Lothian;
- General volatility in the care market;
- Longstanding issues of health inequalities relating to comparative deprivation in the city.

The IJB has now set out a strategic transformation programme through its Strategic Plan which aims to rebalance its services, review and change its model and approach to delivery and develop its capability and capacity to meet the changing needs and expectations of our population. The plan, which covers 2019-2022 sets out the strategic priorities for the Board across:

- Prevention and early intervention
- Transformation of Home-Based care
- Re-design of bed-based models of care
- Developing the Edinburgh Health and Social Care Offer
- Embedding a Home First Approach
- Shifting the Operational model toward the Three Conversation Approach
- Social services Delivery Landscape – shifting practice to a Three Conversations model and approach

The IJB acknowledged that while it strives to deliver effective and efficient services to the people of Edinburgh, the current health and social care systems are highly bureaucratic, and process driven. The IJB recognised that this no longer works well for anyone and that it needs to radically shift how it works to improve the experience of both those who need and those who deliver its services. The Three Conversations® is a strength-based relationship approach which focusses on what really matters to people in their families and in their communities. It recognises that

people are the experts in their own lives and circumstances and is intended to replace the current 'assessment for services' culture and associated systems.

### **Communities and Families**

July 2019 saw the publication of a Joint Inspection of the Children's Services provided by the Community Planning Partnership. The Inspection graded Edinburgh's services, for work on care and protection, successful transitions for care experienced young people into adulthood as well as the strength of its leadership.

The inspection team found that leadership of the Partnership was good (4). Partnership leaders were noted as being both realistic and pragmatic, whilst creating a common purpose for staff. Leadership had contributed to a Partnership that was strongly collaborative and had been successful in fostering a learning culture. The inspection team found that more could be achieved by furthering the impact of the Partnership's Corporate Parenting ambitions, as well as making more systemic use of feedback for self-evaluation purposes.

The Partnership's outcomes were found to be adequate (3). The inspection team noted that the Partnership had demonstrated improvements and had undertaken a great deal of work to reduce the number of young people going missing from residential placements. Staff were identified as working well to improve outcomes for children and young people. However, as a Partnership there was a need to make better use of evidence and trends analysis of improving outcomes for children, and young people. In addition to this, the Partnership needed to better understand through evidence gathering the impact of services on the lives of citizens it was supporting.

The Partnership's impact on children and young people was rated as very good (5), with strong indications being noted that children's care and protection was improving due to Partnership services. The inspection team identified strengths in areas such as the robust Inter-Agency Referral Discussion (IRD) process as well as feedback from children and young people regarding their positive relationships with staff. The inspection team identified that more could be done to close the attainment gap for looked after children as well as to increase both the offer of and the uptake of advocacy services.

The Partnership's impact on parents was graded as good (4), with staff having supportive and trusting relationships with parents. 90% of surveyed parents reported that they got on well with staff, and that expectations upon them were clear. Specialist services in the Partnership were supporting more confident, competent, and resilient parents. Again, limited access to advocacy for parents was found by the inspection team, who also found that not everyone was receiving effective support when they needed it.

Overall the report represents an extremely robust and intensive review process. One where the inspection team found the Partnership's self-evaluation to be an accurate depiction and analysis of its own strengths and areas for development. The inspection report notes positive practice in the Partnership, as well as some examples of sector leading developments. Highlighting the continued improvements

in child protection which has been sustained over the past two inspections of services.

The report also highlights clear areas for development, with the Partnership's use of and application of quality assurance and performance data contributing to the Partnership's grading of adequate.

## **Strengths**

The number of children in Edinburgh who need to be Looked After, including those accommodated away from home, has reduced to its lowest in ten years. This is attributed to several positive developments including the implementation of restorative, strengths based and relationship-based practice across services, the impact of specialist services including Family Group Decision Making, Kinship Support Team and Multi-Systemic Therapy, and the increasing confidence and competence of staff in the Getting it Right for Every Child approach.

A robust inter-agency approach to child protection has resulted in effective risk assessment and appropriate planning to address risk. This has helped to reduce the number of children on the Child Protection Register to its lowest ever level.

Close working arrangements with Police Scotland and other agencies to assess and address risk when young people are going missing and may be exposing themselves to risk have seen a marked impact in this area of work. A proactive and collaborative model of practice in which a multi-agency group has daily oversight of risks and concerns has been developed. This is helping to improve relationships with staff and young people and this in turn has reduced the number of missing person incidents from children's residential units and the number of offences reported which involve young people in residential units. It has also helped to reduce the need for secure accommodation particularly among teenage girls.

Reduced usage of secure accommodation has allowed Edinburgh to sell part of its residential estate to NHS Lothian to create an Equally Safe Multi-Agency Centre which will support and improve services to child and adult victims of sexual abuse and other assaults.

## **Areas to Develop**

The recent Inspection of services and the resulting improvement plan has provided clear priority areas for development (see above for details). Alongside this school attendance, attainment and follow-up positive destinations for children and young people who are Looked After are below current targets and this is one of the main priorities for improvement.

## **Community Justice**

Edinburgh's Community Safety Partnership, on behalf of the Edinburgh Community Planning Partnership, is responsible for the development and implementation of Edinburgh's Community Justice Outcomes Improvement Plan. An annual report for 2017/18 was submitted to Community Justice Scotland in September 2018 and work is underway on a Community Justice Outcome Improvement plan for 2019–22. This

plan will reflect the work articulated in the 4-locality improvement plans and will complement the new Community Safety strategy which is being developed for 2020-23.

*Significant developments in 2018-19 include:*

The Peer Mentoring Service established in 2017 in conjunction with SACRO for people currently involved in the criminal justice system has become embedded into mainstream services. The mentors are supporting people who use the service to make decisions about their lives and access the services they need. They help people currently involved in the community justice system to explore issues or obstacles, set goals and achieve the things they want to do, whilst at the same time building confidence, skills and talent. Volunteers are employed to complement the work done by paid staff, acting as positive role models for people with an offending history, encouraging them to address their offending behaviour and reengage with their local community.

The Edinburgh Alcohol Problem Solving Court has been in place since February 2016 and uses community payback legislation, with frequent court reviews. The community justice social work service provides the court with speedy assessments with a focus on alcohol and ensures streamlined access to substance misuse services through close partnership working with Change Grow Live (CGL). Following an evaluation in 2018 which took into consideration the views of people who use the service, staff (including CGL), managers and the named Sheriff, the court assessment was reviewed, and a community detoxification is being developed which aims to offer another intervention for individuals whose offending is directly related to their alcohol use.

EnCompass is an education, training and employability service for people in Edinburgh living with complex needs, delivered through Access to Industry's in-house community college. Although established in 2017, it became embedded into mainstream services in 2018/19. It helps people furthest removed from the labour market to build their skills, gain access to opportunities and, where appropriate, move into employment.

Work continued throughout 2018/19 to develop a Restorative Justice service to those who are subject to statutory supervision, having been convicted of a hate crime and the victim of that offence (or a representative). The Community Justice (Scotland) Act 2016 and the creation of Community Justice Scotland are drivers for this project, in that there is an expectation that as a statutory agency consideration of and seeking input from victims of crime and communities affected by crime when delivering services. Restorative Justice is a medium which includes victims, offenders, and communities in repairing the harm caused by crime. Police Scotland are a key partner in this process and have agreed to provide information to and consent from victims of hate crime, to engage in joint training and to co-facilitate Restorative Justice where appropriate.

Services for women in the criminal justice system have been developed within the Drug Treatment and Testing Order (DTTO) service, Unpaid Work and Bail

Supervision. These compliment the work of the Willow service for women in the criminal justice system. DTTO provides services for women in a separate location with its own dedicated treatment team who work closely with a range of services. The team are skilled in supporting women through pregnancy and have worked, where possible, with people to become drug free and to have their babies and children remain in their care. When this has not been possible the team have continued to support the individuals to help them work towards a positive future.

An Unpaid Work women's group has been set up for women who have been given an unpaid work requirement as a condition of a CPO. This group encourages women to develop skills while carrying out meaningful and interesting activity.

The Court, Bail and Diversion team have set up an enhanced supervised bail service for women as a direct alternative to remand in custody. This service has allowed women to remain in the community by providing an intensive outreach service in partnership with specialist women's services such as Willow and Shine. The workers are accredited to undertake homelessness assessments which has made it easier for women without an address to access accommodation.

Groupwork services are leading on a range of developments relating to complex trauma and men's mental health. These include developing a new Men's Groupwork Service that specifically responds to the mental health impacts of trauma in adulthood, a range of trauma specific leadership and staff training, as well as undertaking a prevalence study in men to identify trauma experiences and specific mental health reactions. This is an area that will be further developed throughout 2019/20 and beyond.

The establishment of Safer and Stronger Communities has created opportunities for community justice to work more closely with other service areas, particularly Family and Household Support and Homelessness and housing support services. An example of this is the provision of training and support in working with women with multiple and complex needs, provided by Willow staff who have experience and expertise in this area, to four accommodation providers. This increases the likelihood of women being able to retain their accommodation by building the capacity of staff to manage their complex presentation, developing a shared language and understanding across agencies working with individuals.

### **Public Protection - Domestic Abuse**

Edinburgh's Domestic Abuse Strategy and Improvement Plan was agreed by the Edinburgh Partnership in June 2017 and can be found [here](#).

The plan outlines the vision to develop a coordinated community response to domestic abuse in Edinburgh, which has been the driver for a city-wide review of all statutory agencies, commissioned services and grant provision, and an evaluation of service pathways for victims, children and perpetrators.

Work streams are progressing well and include:

- Development of a draft domestic abuse housing policy and associated training and improvements in service pathways for people who are homeless due to domestic abuse.
- A locality based, multi-agency response to domestic abuse in Edinburgh which intervenes early, engages safely with all family members, coordinates services and improves outcomes.
- Development of various levels of domestic abuse training, and a pool of trainers, to ensure the workforce are competent in responding to families affected by domestic abuse, including perpetrators, as well as adult and child victims
- Increased use of the Domestic Abuse and Violence Against Women Knowledge Hub; an online space for professionals in Edinburgh to connect to each other and share information, training opportunities, learning and resources.
- Review and improvements in the Multi-agency Risk Assessment Conference process for high risk victims of domestic abuse.

## **Public Protection**

### **Adult Protection Committee**

The Adult Protection Committee has approved the introduction of new recording tools in Adult Protection work designed by Edinburgh's Adult Protection Senior Practitioners. An updated Duty to Inquire Assessment was introduced in February 2019 with the aim to make open Duty to Inquires easier for practitioners to track, ensure that referrers are acknowledged when they have reported concerns and more clearly identify those cases that are progressing to Interagency Referral Discussions (IRD).

Adult Protection Safety Assessment and Planning Forms have replaced the Complex Risk Assessment from April 2019 onwards. These forms have been designed to allow for clear articulation of the type of harm, imminence of harm, likelihood of harm and the severity of impact of harm. Feedback from practitioners has been positive. These new tools also promote the use of chronologies, as recommended in the Care Inspectorate Older People's Services inspection in Edinburgh.

The Committee are planning a development day in September 2019 to identify the key priorities and themes for 2019/2020 and agree an improvement plan for the Adult Protection Committee which will be used to drive, and measure identified actions.

The Committee identified that Adult Protection audit work was necessary in order to measure the quality of practice within Adult Protection and also that a meaningful way of gathering and evaluating adults' experiences of the adult protection process. Quality Assurance Officers facilitate audits across practice teams in Health and Social Care and Community Justice that will be carried out by frontline managers within teams.

The People's Stories Model – a qualitative interview capturing a person's experience of using social work services - will also be rolled out across Health and Social Care

with a specific focus on Adult Protection to gather direct feedback from adults who have experienced the adult protection process.

It has now been agreed that health practitioners within the Health and Social Care Partnership will contribute to and undertake IRDs in the North West Locality initially from August 2019. It is expected that this will then be rolled out across the rest of the localities. This aims to enable practitioners to be better placed to assess the level of risk to an adult by having access to all key and relevant information to the situation and to mirror the tripartite discussions that take place in child protection Interagency Referral Discussions.

## **Child Protection Committee**

The Edinburgh Child Protection Committee improvement plan for 2018/19 focused on five key themes: multi-agency chronologies, neglect, multi-agency practice evaluations, young people who abscond and are at risk of exploitation, and domestic abuse. A simplified format and regular reporting have assisted us in progressing and measuring identified actions.

These priorities reflect the range of issues which the Committee identified on a multi-agency basis as requiring focus. Within the context of this plan, Edinburgh is beginning to test a pan-Lothian approach to multi-agency chronologies, as well as continuing the roll out of Safe and Together training to address domestic abuse across the workforce. In addition, the embedding of innovative approaches to addressing the safety and wellbeing needs of young people who go missing from residential care has been a key focus.

The committee at its development day in May 2019, agreed to retain the priorities around chronologies, neglect and domestic abuse within its' improvement plan for the coming year. This is in recognition of the long-term work required to consolidate improvements.

## **Funding**

The Committee has funded a range of work this year, to help embed best practice as well as ensure a robust understanding of the impact of services and that the infrastructure is in place to promote collaborative learning. Funding has been provided for five certified trainers to deliver Safe and Together training to the local workforce, providing opportunity to significantly expand the reach of this model to all of those who work with children and families.

In addition, the Committee has commissioned external evaluations of a pilot project regarding return interview processes for young people who go missing from residential care, and of selected inter-agency training courses. These evaluations will help the understanding of how effective services and training are in making an impact on outcomes for young people and will inform future priority setting; early indications from these evaluations are that the approach has been very successful.

Funding has also been committed to a six-month public protection business support post, ensuring that crucial administrative capacity is available for key public

protection activity such as the coordination of Initial and Significant Case Reviews, across all public protection areas.

### Child Protection Registration

The numbers of children subject to child protection registration have been on a steadily reducing trajectory throughout 2017/18.

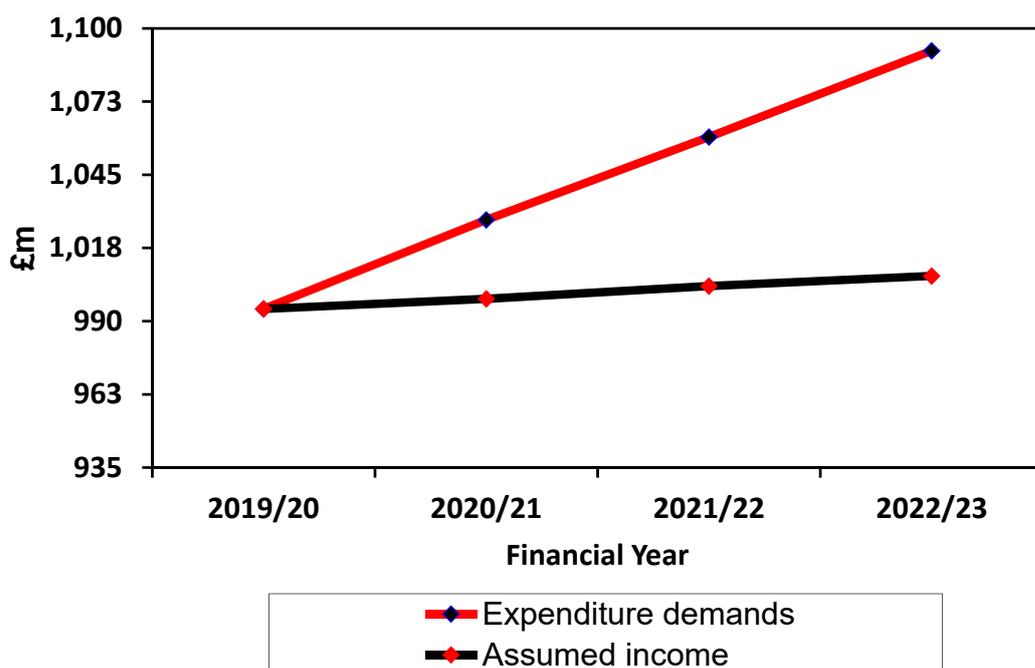
The Quality Assurance Subcommittee is carrying out an audit of cases where Child Protection Case Conference was convened but the child’s name was not placed on the Child Protection Register, as well as a follow up on selected cases six months post-registration to further scrutinise this hypothesis.

In recognition of the importance of child centered planning within a relevant timescale, the Committee has also begun tracking those children subject to Child Protection Registration for over 18 months, rather than 24 months, from 1 April 2019.

## 4. Resources

As in previous years, the Council continues to face significant financial challenges resulting from a combination of increases in service demand, inflationary pressures, legislative reform and heightened citizen expectations. These factors are set against a backdrop of reducing core Government grant income once account is taken of monies provided for the delivery of new, or expanded, commitments.

The chart below shows the gap between projected expenditure demands and available funding. This gap would, other things being equal, increase if levels of Government funding were lower than anticipated or required demographic provision higher than currently provided for.



Based on these assumptions, it is anticipated that in order to maintain expenditure in line with income, the Council will need to identify and deliver, recurring annual savings between 2020/21 and 2022/23. More immediately, the approved budget for 2019/20 is predicated on the delivery of some £39m of savings, as well as management of all service pressures and delivery of a balanced budget (by the IJB). A progress update considered by the Finance and Resources Committee on 23 May 2019 highlighted a need for urgent actions to reduce the risk of significant in-year pressures. It is likely that identification of these mitigating actions will need to go beyond incremental efficiencies and consider more fundamental prioritisation of existing services if financial sustainability is to be maintained, whilst maintaining a focus of prevention and the impacts of poverty.

### **Council-wide Change Strategy**

The Council has delivered nearly £300m of recurring savings since 2012/13, equivalent to around 30% of its net budget. This has allowed the combined financial challenges of increasing demographic-led service demand, inflationary pressures and legislative reform to be addressed whilst steadily improving performance across many areas. There is, however, now a need to place much greater focus on service transformation and prioritisation, designed using insight from active engagement with communities and elected members.

### **Demographic investment**

In recent years, budget planning in the Council has provided significant protection to social work services, as well as for other priorities, such as schools. The Council's long-term financial plan continues to provide additional funding to meet growing needs for care services from the increasing number of older people in the population, particularly those over the age of 85, and increasing numbers of people with learning and physical disabilities due largely to greater longevity.

Funding is also provided for a growing number of children and young people, the level of which is adjusted, as appropriate, for preventative investment in early years activity and by actions intended to reduce the increase in the number of looked-after children. Despite this welcome commitment, the scale of savings required from public services and the growing complexity of need across all age groups leave services with diminished capacity to meet need to the level and quality communities may expect. This creates challenging tensions in balancing potentially-competing demands on public funds. This requires a shift in the relationship between citizens and the state, doing more things with people instead of to or for them and working in ways which strengthen individuals, families and communities, reducing the need for expensive and intrusive interventions into individuals' lives.

Criminal Justice Social Work is funded by the Scottish Government through a ring-fenced grant under Section 27 of the Social Work (Scotland) Act 1968. The funding is provided to allow the Council to discharge its statutory duties and to work towards preventing and reducing further offending in line with the Community Justice Outcome and Improvement plan.

The City of Edinburgh Council received £9,711,257 Section 27 funding for the year 2018/19. This figure was a reduction of £70,000 on the grant allocation for the

previous year. These financial pressures increased in 2018/19 and will continue into 2019 - 2021 due to the unfunded pay award for public service staff. In Edinburgh, this equates to approximately £225,000 per annum. As a result, service redesign will be required. This may well impact on the ability to manage the predicted increase in workload which is likely to result from the Presumption Against Short Term sentences of 12 months or less which, subject to the approval of the Scottish Parliament, is due to come into force in 2019.

## **Health and Social Care**

### **2018/19 outturn**

The provisional outturn for the Health and Social Care service reflects significant demand-led pressures, showing an overall overspend of £7.5m. This position reflects significant slippage on planned savings delivery and growth in demand for care at home services, direct payments and individual service funds and an increase in demand usage of transport. To mitigate the overspend, the Council has allocated an additional one-off contribution of £7.5m. This payment will allow Council services directed by the IJB to break even in 2018/19.

### **2019/20 budget**

Despite this projected balanced position for 2018/19, the underlying financial pressures and challenges remain. This will be compounded by a financial settlement for 2019/20 where the increase in income is outstripped by the projected increases in cost. The board has been briefed on the implications for the 2019/20 financial plan and associated savings requirements through a combination of development sessions and a formal report to the IJB in March. The plan shared with the board in March remained unbalanced and the Chair, Vice Chair, Chief Officer and Chief Finance Officer were remitted to meet with senior representatives from the City of Edinburgh Council and NHS Lothian to progress the options to support financial balance. The financial plan presented to the board in March was based on indicative information agreed with partners.

The allocation from the City of Edinburgh Council is £216.969m, representing an increase of £16.244m (8.1%).

## **5. Service Quality and Performance – Delivery of Statutory Functions**

### **Health and Social Care Performance in Edinburgh**

Between March 2018 and April 2019 there has been a 48% reduction in the number of people **delayed in hospital** awaiting discharge (267 to 139) and a 66% reduction in the number of lost bed days for those patients (9,901 days to 3,381 days – note this is not the lost bed days in the month – but the length of delay per patient – this is also greatly improved from 37 to 24).

### **Delayed discharge**

Between March 2018 and April 2019 there has been a 48% reduction in the number of people delayed in hospital awaiting discharge and a 66% reduction in the number of lost bed days for those patients.

This represents a fall of 6.5% from March 2018 to April 2019 and 27% from the peak in September 2017.

There has been a small reduction in the number of people **waiting for assessment** in the same period (March 2018 – April 2019), 1,544 to 1,444 however, from the peak of people waiting in September 2017, when the number of people waiting was 1,978, the fall is larger.

### Waiting for assessment

	People
September 2017 (worst)	1,978
March 2018	1,544
April 2019	1,444

The number of people **waiting for a package of care** has seen a large fall. From March 2018 to now there has been a fall from 964 people to 371 people (62%). The number of unmet hours has fallen from 7,853 to 2,578 (67%). From the highest point of the waiting list in mid-April 2018 when there were 1,012 people waiting for 8,679 hours, the percentage falls are 63% and 70% respectively.

### Waiting for package of care

	People	Hours
March 2018	964	7,853
April 2018 (worst)	1,012	8,679
April 2019	439	3,052
20 May 2019	371	2,578

There has been a sustained downward trend in the number of people waiting for a package of care and the number of hours for which they are waiting. In the last year, from the worst position in mid-April, there have been reductions of around two thirds when there were 1,012 people waiting for 8,679 hours (63% and 70% respectively).

## **Performance - Mental health and Guardianship**

Mental Health Officers (MHOs) are social workers who have undertaken additional training in working with people with mental disorder, defined in the law as mental illness, learning disability and personality disorder.

All local authorities are required to provide sufficient numbers of MHOs, either through training or recruitment, to undertake statutory duties under the Mental Health (Care and Treatment) (Scotland) Act 2003 and the Adults with Incapacity (Scotland) Act 2000.

All MHOs receive their accreditation directly through the office of the Chief Social Work Officer (CSWO) and in fulfilling their responsibilities are acting on the authority of the CSWO. Mental Health Officers must be involved where any adult is receiving compulsory measures of care and treatment, whether in hospital or in the community, under either of these Acts.

The role of the MHO is to ensure that the legal rights of anyone subject to compulsory measures are fully understood, and acted on, by all involved in the adult's care and to ensure that there is reciprocity through the provision of services to the adult to ensure that any period of compulsory measures is for the shortest period possible and is providing the maximum benefit.

*Table 1 – 3 below sets out the use of compulsory measures of care and treatment and the use of welfare guardianship*

<b>Table 1</b>								
	<b>2015/16</b>		<b>2016/17</b>		<b>2017/18</b>		<b>2018/19</b>	
	No.	People	No.	People	No.	People	No.	People
Contacts	590	506	471	424	Na	Na	Na	Na
Assessments completed	1380	845	1380	835	1213	757	1131	706

*Table 2 - This table shows the increase in the use of Emergency Detention Orders (EDOs) – there are 27 more EDOs in the period 2018-19 than in the preceding year which is an increase of 11.2%. This is concerning as the use of EDOs should be the exception with the correct gateway to hospital on a compulsory basis being the Short-Term Detention Order. However, it is noted that there is an increase in all types of detention covered within the table.*

<b>Table 2 - Mental Health Act Orders Commenced</b>				
	<b>Commenced Apr 15 - Mar 16</b>	<b>Commenced Apr 16 - Mar 17</b>	<b>Commenced Apr 17 – Mar 18</b>	<b>Commenced Apr 18 – Mar 19</b>
Emergency detention in hospital (72 Hrs)	208	195	241	268
Short term detention in hospital (28 days)	411	484	472	478
Compulsory Treatment orders (indefinite with 6 monthly review in first year and then annual review)	125	107	151	147
Interim compulsory treatment orders (28 days)	61	47	72	65

*Table 3 shows a small drop in the number of Compulsory Treatment Orders (CTOs) in operation on 31 March 2019 when compared with the same date in 2018. This is reflected in the total numbers of CTOs commenced in this period (147) which is 4 less than in the preceding year (151) representing a drop of 2.6% in the number of CTOs granted. However, the number of CTOs commenced in 2018-19 remains significantly higher than the number of orders commenced in 2015-16 (125) and 2016-17 (107).*

<b>Table 3 - Mental Health Act Orders in Operation on 31<sup>st</sup> March</b>				
	<b>As at 31 March 2016</b>	<b>As at 31 March 2017</b>	<b>As at 31 March 2018</b>	<b>As at 31 March 2019</b>
Emergency detention in hospital	41	20	20	83
Short term detention in hospital	167	49	138	189
Compulsory treatment orders	306	343	416	403

*Table 4 - This tables shows a small decrease of 5 (12%) in the number of these types of orders made by court during the reporting period when compared with the previous year. However, although the number of criminal justice orders started during this period declined by 12% the total number of criminal justice orders in operation at the end of the year increased from 94 criminal justice orders at the end of 2018 to 101 criminal justice orders at the end of 2019 representing an increase in of 7.4%. This suggests that fewer criminal justice orders have ended during this period than in previous years. It is also of note that there has been an increase of 5 Compulsion Orders with Restriction Orders which are the orders related to the highest perceived level of risk and requiring the greatest level of RMO and MHO supervision.*

<b>Table 4 - Mental Health Orders under the Criminal Procedures (Scotland) Act 1995</b>				
	<b>2015/16</b>	<b>2016/17</b>	<b>2017/18</b>	<b>2018/19</b>
Total legal orders started	25	20	41	36
Total legal orders open at period end	71	80	94	101
Compulsion orders with Restriction order open at end of period	24	27	27	32

*Table 5 shows a small decrease of 10 (1.1%) in the total number of guardianships in operation in 2019 compared with the previous year.*

*However, this decline is entirely accounted for by a decline in the number of orders containing financial powers only. The total number of orders incorporating welfare powers has increased from 767 orders in 2018 to 781 orders in 2019 which is an increase of 1.8%. The total number of local authority guardianships with welfare powers has increased more significantly from 177 in 2018 to 186 in 2019 which is an increase of some 5%.*

<b>Table 5 - Guardianships</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
<b>Welfare Guardianship</b>				
CSWO welfare guardianships	116	146	148	153
Private Welfare guardianships	167	203	205	214
<b>Financial guardianship (private only)</b>	92	100	97	73
<b>Welfare and Financial guardianship</b>				

CSWO welfare and financial guardianships (guardian for financial element must be non-Council)	32	39	29	33
Private welfare and financial guardianships	319	366	385	381
<b>Total</b>	<b>726</b>	<b>854</b>	<b>864</b>	<b>854</b>

### **Performance – Children in need, child protection and looked after children**

In 2013 Children’s Services embarked on an exercise to shift the balance of care from high cost services such as residential care, secure care and purchased foster placements to supporting children within family-based settings either with parents, kinship carers or Council foster carers. This would keep children within family networks where appropriate and within the educational provision of the city.

Investment in early intervention services such as early years, family group conferencing, kinship care and Multi-Systemic Therapy has enabled a successful outcome with:

1. reductions in the number of Looked After Children (1408 in 2013 to 1256 in 2019);
2. reductions in secure care (internal capacity reduced from 12 beds to 6 beds);
3. maintaining the number in residential care (84 in 2013 to 88 in 2019);
4. reductions in purchased foster care (608 in 2013 to 520 in 2019);
5. an increase in the proportion of foster placements with Edinburgh Council carers (55% in 2013 to 68% in 2019);
6. an increase in the number of kinship carers for Looked After Children and an increase in those placed under a Kinship Care Order (467 in 2013 to 594 in 2019).

This has resulted in reduced costs overall whilst increasing early intervention and prevention. Savings from reductions in the costs of accommodating children have recently enabled family group decision making to be expanded further.

The performance set out above has enabled Children’s Services to deliver efficiencies whilst improving the outcomes for children. The additional investment in early intervention and prevention, possible through shifting the balance of care, and continuing focus on GIRFEC places the service in a strong position in the current financial climate.

<b>Table 6 – Volume</b>	
<b>Item</b>	<b>Figures as at 31 March</b>

	2017	2018	2019	Change from previous
Approximate number children allocated within Children and Families team	3400	3400	3,200	-6%
Monthly reports submitted to the Authority Reporter	200	188	175	-7%

<b>Table 7 Child Protection</b>				
	Figures for period April to March			Change from previous
	2016/17	2017/18	2018/19	
Child protection Inter-agency Referral Discussions (IRDs)	1343	1396	1,210	-13%
Child protection case conferences	1,268	940	787	-16%
Children on Child Protection Register	286	206	132	-36%

<b>Table 8 - Child Protection Case Conferences</b>				
Item	Figures for period April to March			Change from previous
	2016/17	2017/18	2018/19	
Initial	312	254	172	-32%
Pre-birth	73	71	57	-20%
Review	768	612	547	-11%
Transfer	21	3	11	+267%
Total	1174	940	787	-16%

<b>Table 9 - Looked After Children</b>	<b>As at 31 March</b>			
	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>Change from previous</b>
Total number of children and young people looked after	1372	1334	1256	-6%
At home with parents	347	338	356	+5%
In foster care	584	581	520	-10%
In residential	83	101	88	-13%
With kinship carers, friends / relatives	320	271	249	-8%
With prospective adopters	24	26	27	+4%
In secure accommodation	9	7	7	+0%
Other	5	10	9	-10%

<b>Table 10 – Secure Accommodation</b>				
<b>Item</b>	<b>Figures for period April to March</b>			<b>Change from previous</b>
	<b>2016/17</b>	<b>2017/18</b>	<b>2018/19</b>	
Total number of admissions	30	20	17	-15%
Admissions to out of Edinburgh provision	12	14	7	-50%
Average length of time in secure for young people discharged (in days)	135	155	152	-2%

<b>Table 11 – Adoption and Permanence</b>				
<b>Item</b>	<b>Figures for period April to March</b>			<b>Change from previous</b>
	<b>2016/17</b>	<b>2017/18</b>	<b>2018/19</b>	
Adopters approved	14	15	11	-27%
Children registered for adoption (Permanence Order with Authority to Adopt)	26	31	24	-23%
Children registered for permanence (Permanence Order)	51	28	47	+68%
Children placed for adoption	23	21	23	+10%
Children adopted	35	20	27	+35%
% of Permanence panels within timescale	25%	40%	33%	-18%

<b>Table 12: Domestic Abuse - Child Welfare Concerns and Child Protection Registrations</b>				
<b>Item</b>	<b>Figures for period April to March</b>			
	<b>2016/17</b>	<b>2017/18</b>	<b>2018/19</b>	
Total number of child welfare concern forms sent to Social Care Direct	11,505	10,711	10,754	
Number of child welfare concern forms with domestic abuse as a concern	3,322	3,655	3,387	
<b>Item</b>	<b>Figures as at 31 March</b>			
	<b>2017</b>	<b>2018</b>	<b>2019</b>	

Children on Child Protection Register	226	206	132
Percentage of children on the Register who had a domestic abuse concern identified	53%	44%	42%

### **Performance - Community Justice**

Edinburgh has had a long-standing commitment to preventative work and to a service model that offers a continuity of service regardless of where the person is in the community justice pathway.

#### **Examples include:**

In 2018 the Scottish Government provided some additional resource to support the reinvigoration and extension of the Whole System Approach to young people in Edinburgh. Diversion from prosecution, court support, extending bail supervision and reintegration and transitions following a custodial sentence were identified as key areas for young people up to the age of 21. A part time senior practitioner has been appointed to take this work forward.

Supervised bail allows people who would otherwise have been held on remand, to be released to an assessed address where work is undertaken to explore and manage the underlying causes of offending. A new post was established to work to reduce the female remand population.

The Diversion from Prosecution scheme provides an alternative to prosecution by supporting the individual to engage with tailored interventions to address the difficulties that have caused their offending behaviour.

The Edinburgh and Midlothian Offender Recovery Service (EMORS), for short term prisoners, takes a recovery centered approach, working with individuals to help them move away from problematic alcohol and drug use and other issues that increase the likelihood of offending. The service provides continuity of care from point of arrest, throughout an individual's stay in prison, and during the transition period from prison to community. It also uses peer volunteers to show visible recovery in the throughcare model. The approach is based on coordinated working between health services, local authorities and the Scottish Prison Service. Prison gate pickups are offered by EMORS, in recognition of the critical nature of the transition period from prison to community, and the challenges faced by individuals. Partners work to provide throughcare support to improve outcomes for at least the first twelve weeks following release. There are also addiction recovery hubs in each of the city's four localities offering drop in and appointment services to assist people to address their substance misuse.

The examples above support Community Justice Scotland's agenda and given the innovative working already in place, the Council is keen to be involved in Community

Justice Scotland’s scoping exercise and discussions on the future delivery of demonstration projects to test new approaches for community justice.

- 2,657 people were supported through open community orders by the Criminal Justice Social Work Service. This represents a 1.6% decrease from support given during 2017-18.
- Criminal Justice staff completed 2,529 social work reports to support decision making by the courts, representing a 2.6% increase from 2017-18.

<b>Table 13 – Offenders in the community subject to statutory supervision</b>			
	<b>31 March 17</b>	<b>31 March 18</b>	<b>31 March 19</b>
*Many offenders being managed in the community have their risk levels reduced to medium, reflecting successful risk management strategies.			
Assessed as very high risk or high risk (sexual violence)	17	7*	*10
Assessed as very high or high risk (violence)	46	37	*37
Probation orders	9	8	6
Community service orders	7	5	5
Community payback orders	1121	1069	940
Drug treatment and testing orders	121	145	168
Drug treatment and testing orders (II)	33	34	38
Bail supervision	16	23	24
Statutory supervision of released prisoners (e.g. life licence parole, extended sentence, supervised release orders)	128	127	121

<b>Table 14 - Offenders in prison who will be subject to statutory supervision on release</b>			
	<b>31 March 2017</b>	<b>31 March 2018</b>	<b>31 March 2019</b>

Offenders currently in prison who will be subject to statutory supervision on release assessed as very high or high risk (sexual violence)	66	69	81
Offenders currently in prison who will be subject to statutory supervision on release assessed as very high risk and high risk (violence)	113	110	146

### **Performance - Adult Protection**

The monthly Adult Protection performance figures consistently show that the conversion rate of adult protection referrals into Interagency Referral Discussions is above the national average of 12.5%.

There has been no notable increase in the number of Adult Protection referrals received; however, the number of Adult Protection Case Conferences and Case Conference Reviews has significantly increased throughout 2018-2019.

From December 2017 – September 2018, there was an average of 17.8 Adult Protection Case Conferences and Case Conference Reviews within a month, whereas from October 2018 – May 2019 there has been an average of 38.75 Adult Protection Case Conference and Case Conference Reviews within a month. This is in line with the messages promoted during Adult Support and Protection training that when considering if an adult is at risk of harm, practitioners should be guided by the message '*if in doubt, rule it in not out*', and should consider holding an Adult Protection Case Conference in order to share the responsibility of assessing the level of risk and agreeing a protection plan.

<b>Adult Protection Activity</b>				
	<b>2015/16</b>	<b>2016/17</b>	<b>2017/18</b>	<b>2018/19</b>
Adult protection referrals	1134	1726	1870	2140
Inter-agency Referral Discussions (IRD)	329	425	358	402
IRD as a % of referrals	29%	21.5%	19.1%	18.7%
Adult protection initial case conference	79	99	80	116

Initial case conference as a % of IRD	24%	23.3%	22.3%	28.9%
Adult protection case conference reviews	110	93	113	239

### **Quality Assurance of Residential, Day and Domiciliary Care for Adults**

In addition to the residential, day care and home care services managed directly by the Partnership, staff are responsible for the contract management of over 430 contracts. This includes over 121 providers of regulated care at home, care and support and registered day services.

A further 141 contracts are managed in this way for the delivery of unregulated services, which include advice, advocacy and information, lunch clubs and practical help for people who choose self-directed support.

The remit of both groups is to monitor the quality of service provision, to acknowledge good practice and to challenge providers when services do not meet consistently high standards. Action is taken in respect of services assessed as 'weak' or 'unsatisfactory', and complaints to the Care Inspectorate and/or Council that have been upheld are the subject of discussion with providers, to ensure they have been addressed and measures are in place to prevent recurrence. Based on the intelligence provided by these mechanisms, the Chief Social Work Officer can suspend admissions or referrals to services that do not meet minimum standards.

As of 30 April 2019, 42 Council run services registered with the Care Inspectorate in Edinburgh had themes graded as 'adequate' or lower. In comparison, 172 services had themes that were graded as 'good' or 'better'. For grades spread across all assessed themes, approximately 37.8% of all registered services in Edinburgh achieved grades of 5 and 6; only 1.4% of providers achieved 1 and 2s; and 60.7% were assessed with a mixed grade spread.

Services	Subtype	Grade Spread			Grand Total
		1&2	Mix	5&6	
Care at Home	Older People		38	16	54
	Alcohol & Drug Misuse		1		1
	Blood Borne Virus			1	1
	Learning Disabilities		6	3	9
	Mental Health			1	1
	Physical and Sensory Impairment		5	1	6

Support Service	Care at Home	3	62	39	104
	Other than Care at Home		18	20	38
<b>Totals</b>		<b>3</b>	<b>130</b>	<b>81</b>	<b>214</b>

## **Compliance Activity**

The activity of the two Regulation Officers is detailed at Appendices 3 and 4. This includes the Breakdown of Care Inspectorate grades for contracted providers (information on Council services is set out at Appendix 4)

The Care Inspectorate introduced a new inspection methodology for Care Homes for Older People in July 2018. This new approach introduced amended quality themes and increased the number of themes inspected on from 4 to 5.

The new approach has had an impact on the grades awarded to the Council's care homes. A strategic Care Home Programme Plan of Continuous Improvement has been developed to address systemic issues identified from the inspections undertaken in 2018. All other services continued to be inspected against the previous 4 quality themes during 2018/19, with services being given a grade of 3 – adequate, if an improvement in the quality of service provided is identified.

## **Quality Assurance of Social Work Services**

### **1. OVERVIEW**

The Quality Assurance and Compliance (QA) service, as a vehicle of the Chief Social Work Officer, monitors standards within social work services and provides feedback to these areas regarding strengths and areas for development.

Projects are also undertaken on behalf of the Chief Social Work Officer, Public Protection Committees and the service(r) areas responsible for social work service delivery.

The remit of the QA service is to:

- support services to identify strengths;
- assist in identifying areas for improvement;
- support service areas to develop action plans to address improvements;
- oversee how action plans and recommendations are addressed.

Service areas make improvements based on reported findings. This culture of continuous improvement ensures that people who require support, care and protection from adult and children's social work services receive high quality provision when they need it.

In 2019 work has been undertaken to ensure that Quality Assurance activity is aligned to service (are) and Chief Social Work Officer prioritisation. This has seen

the launch of Service Level Agreements with each area of social work. Alongside this a new development of joint workshops between service areas and Quality Assurance staff creating action plans from audit findings, as well as a cycle of 3, 6- and 12-month reviews of actions. This has strengthened the work of the Quality Assurance team.

## 2. QUALITY ASSURANCE AND COMPLIANCE ACTIVITY – 2018/19

A review of the team’s workplan provided a menu of quality assurance activities which are expected to be undertaken by the three social work areas. A number of these activities are fixed, and it is expected that they will be undertaken by all three areas. The remaining activities can be chosen on a service identified needs basis. The following table lists the individual activity, description of the activity and the QA service performance related to each activity:

Activity	Description	Performance
<b>FIXED ACTIVITIES</b>		
<b>Single-Agency Practice Evaluations (116 annually across the 3 social work areas)</b>	The practice evaluation programme is part of a quality assurance framework to monitor and improve the department’s own performance. Practice evaluations offer the practitioner the opportunity to reflect and analyse their work, evaluating what worked well/did not work well, as well as considering outcomes for service users and their families. Managers’ participation enables benchmarking of practice and improves the overall consistency of approach and practice. The QA service annually monitors the strengths and improvements reported for each service.	In 2018/19 Quality Assurance Officers worked with Community Justice Services and Health and Social Care to review and improve the efficacy of the Practice Evaluation process. All 3 social work areas have a target number of Practice Evaluations to be achieved in the year which are held fortnightly or monthly to achieve this target.

<p><b>People's Stories (36 annually across the 3 social work areas)</b></p>	<p>The aim of People's Stories is to embed a culture of qualitative engagement with the people who use social work services and to recognise the impact that a social work intervention can have on individuals. The model will also promote an ongoing culture of quality assurance and improvement in service provision, including social work practice. By gaining direct, qualitative feedback, the quality assurance of service provision can be triangulated using the experience and views of customers, staff, and management.</p>	<p>October 2018 – the QA service assisted Community Justice Services to engage with people who use their services.</p> <p>The QA service carried out a successful pilot of People's Stories in spring 2019. The model will be rolled out across the 3 social work areas in summer 2019.</p> <p>May 2019 – review and quality improvement of entry and exit questionnaires used by Community Justice Services with service users.</p>
<p><b>Supervision Survey (1 annual survey per social work area)</b></p>	<p>The purpose of the supervision survey is to elicit staff experience of supervision and gauge organisational compliance with the written supervision policy and procedure. Quality assurance of supervision aims to increase both organisational and external confidence that social work is being performed safely and to the requisite standard. A pilot survey of social work supervision within Communities and Families was undertaken in September 2017, leading to the establishment of an annual supervision survey.</p>	<p>In 2018, the supervision survey was undertaken with Communities and Families and extended to Community Justice and Quality, Governance and Regulation. In 2019, the supervision survey has been extended to staff employed within the Edinburgh Health and Social Care Partnership.</p>
<p><b>FREE CHOICE ACTIVITIES</b></p>		

<p><b>Multi-Agency Practice Evaluations (12 per year in 2 blocks of 6)</b></p>	<p>Multi-agency Practice Evaluation (MAPE) provides a qualitative model of joint self-evaluation which considers the broader needs of children/young people and their families across the spectrum of need and risk. In addition to practitioner level learning, the evaluations also provide an opportunity for organisational learning from the identified themes arising from the sessions.</p>	<p>In early 2018, the QA service used this model to lead an exercise in a reflective evaluation of cross-organisational working within the Edinburgh Children's Partnership. It is intended to embed this as regular activity in Communities and Families and MAPEs will take place twice-yearly. One improvement in the use of the model is the inclusion of feedback from young people and their families/carers.</p>
<p><b>Case File Audits (small and large-scale – as required)</b></p>	<p>Case file audits allow social work areas to evaluate their performance aligned to practice and enable areas to examine the effectiveness of processes and how well staff evidence the work they do through good quality recording-keeping. The QA service reviews all audit improvement plans at 3 and 6 months, with further reviews agreed, to ensure that areas for development/improvement are acted upon and that change is sustained.</p>	<p>November-April 2018 – Quality Assurance Officers led a city-wide examination of key processes across the four localities, including a case file audit of how referrals were managed in locality hubs and engagement with locality staff groups.</p> <p>March 2019 – case file audit of Child Protection e-IRDs where domestic abuse was a factor at case closure.</p> <p>April/May 2019 – case file audit of complaints handling across the three social work areas. (Appendix 2)</p>

<p><b>Service Reviews (as required)</b></p>	<p>Service reviews enable social work areas to assess their strengths and areas for improvement and to identify where there is a need for further growth and development. This engenders a high level of organisational self-awareness which embeds a learning culture and increases the efficacy of the social work area.</p> <p>The QA service undertakes individual service reviews. Although this has historically been carried out on both a commissioned and ad hoc basis, it is planned to have this function become a key component of the service's core business. Reviews will focus on service area compliance with policies, procedures, protocols; recognised good practice; quality of key processes, functions and outcomes.</p>	<p>Between August and November 2018, service reviews were held within Communities and Families – the four Locality Teams, Through Care and After Care Team, and the Young People's Service.</p>
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<p><b>Self-Evaluation (1 project annually per social work area – either single or multi-agency)</b></p>	<p>Self-awareness is the goal for all service areas to perpetuate the knowledge about their strengths, areas for improvement, and to have sufficient planning in place to promote improvement, together with an awareness and understanding of the impact of services on individuals. The QA service participates in work that will support and challenge service areas to develop and improve upon their own self-evaluation.</p> <p>This work can also include the co-ordination of multi-agency self-evaluations, given the role of agencies in, and recognition of, the importance of collaboration and co-production.</p>	<p>In May 2019, the QA service re-wrote the self-evaluation toolkit to encourage social work areas/teams to operate, manage and participate in self-evaluation projects.</p> <p>In April 2018, the QA service held a focus group with Communities and Families regarding assessments prepared for Initial Child Protection Case Conferences. A professional working group was set up and a shortened assessment developed. This assessment was piloted in December 2018 and was rolled out across the city early 2019.</p> <p>In March 2018, Communities and Families staff were consulted via questionnaire regarding what works and what needs to change.</p>
<p><b>Bespoke Projects</b></p>	<p>Bespoke audit or quality assurance work is undertaken on an agreed and negotiable basis and depends on priority and the capacity of the QA service.</p>	<p>February 2019 – development of a register which enables Community Justice Services to review and achieve outstanding actions and recommendations from local and national reports.</p>

<b>Inspection Activity</b>	The QA service is involved in co-ordinating inspection activity. Although an infrequent process, inspections can consume team time and capacity and, therefore, may occasionally displace other activity that has been agreed between the service and Directors, Heads of Service or Public Protection Committees.	January-March 2019 – the QA service assisted with the preparation for the inspection of Children’s services.
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## 6. Workforce

Workforce intelligence for Edinburgh is in the process of being refreshed. It is important that the makeup of the social workforce, including age, gender, length of experience, qualifications, etc, is all mapped and understood. This will allow for clearer analysis of where the workforce pressures are, where stronger succession planning is required and where the creation of single points of failure have inadvertently arisen.

### **Edinburgh’s Social Work Workforce Overview**

Average age of a social worker in Edinburgh – 45.85

Median age - 46

Average length of service of social worker in Edinburgh – 11.72 years

Median length of service - 11 years

24% of social work workforce over 55, with average of 17.85 years of service

7.3% of social work workforce under 30, with average of 1.79 years of service

Ethnicity	Percentage of Workforce
No ethnicity data held	11.7%
Any other Asian background	0.38%
Any other black background	0.38%
Any other ethnic background	0.09%
Any other mixed background	0.87%
Any other white background	3.87%

African	1.35%
Chinese	0.09%
Indian	0.29%
Prefer not to state	0.5%
White European	1.74%
White Irish	4.25%
White British	10.2%
White Scottish	64.08%

### **Support for Learning and Development**

Throughout 2018/19 support for learning and development for the social care workforce has been a key area of delivery. This has included the support of formal qualifications, inter-agency learning, child and adult protection, SVQ, practice learning, induction and essential learning for care staff and newly qualified social workers.

### **Public Protection: Digital Learning Developments**

This year has seen the launch of the Public Protection e-learning module, a resource that all staff across the Council can access. This module aims to provide employees with basic awareness of child and adult protection processes, indicators of abuse in both children and adults, and what employees can and should do if they had a concern. The module is also being made available to partners, most notably the voluntary sector.

In May 2019, a new e-learning module was launched offering an introduction to 'Getting It Right for Every Child' (GIRFEC), which is the national approach in Scotland to improving outcomes and supporting the well-being of our children and young people. The module explores the GIRFEC approach, the different tools available within GIRFEC, children's plans and chronologies, the named person and information sharing. Fictional case studies are used throughout to illustrate how the approach supports children and young people in practice.

There has been a lot of research in the last few years exploring both the positive and negative impact that the online world can have on children and young people. In the last year the Learning and Development Team have launched a course for those working with children and young people, as well as their parents, on how to keep children safe online. A workshop has been developed based on materials from the Child Exploitation Online Protection Centre (CEOP) and sits alongside a knowledge hub, and some games and activities that employees can use with children and young people to explore online safety. One delegate fed back that the course was 'one of the most useful and well-run courses [he had] been on'. Another delegate stated that they had used the resources with the young people in

their class, and that the young people had decided that they wanted to make their own version of one of the games to teach others about online safety.

### **Child Protection:**

In the last financial year 2018 to 2019, two learning and development practitioners have facilitated approximately 75 specific contact workforce child protection courses (formerly level 2) and 20 Intensive Contact Workforce child protection courses (formerly level 4). They have also continued to support social workers, deputy head teachers and Lifelong Learning staff to be able to deliver specific contact workforce training. They have arranged and facilitated approximately 10 courses focusing on communication with children (Talking Mats, Emotion Talks and Words and Pictures) and have also delivered probationer teacher specific courses, and training to support social workers around assessing contact with babies and attending Children's Hearings. In addition to this, they have continued to work in partnership on Interagency learning and development events.

In Edinburgh's Children's Services, there is a strong commitment to have frontline social workers undertake the Professional Certificate in Child Protection (Stirling University). Twelve social workers completed this course in 2018/19.

### **Further and Higher Education Child and Adult Protection:**

In 2018/19 four employees participated in the Adult Services Support and Protection course and 13 employees undertook the Child Welfare and Protection Course. Both courses are facilitated by Stirling University.

Eight successful candidates have been identified to undertake the Adult Protection postgraduate module at Stirling University starting in January 2020 to build up a resource within the workforce of practitioners confident in Adult Protection practice. The expectation would be that once the candidates have completed this course then they will be added to the resource pool of ASP Level 2 facilitators.

The Adult Protection Senior Practitioners have been continuing to deliver a regular programme of Adult Support and Protection Level 3 and Level 4 training throughout 2019, including workshops on Risk and Recording, Thresholds and Interagency Referral Discussions and Adult Protection Case Conferences.

### **Adult Support and Protection:**

#### **Learning and Development Evaluation 2018-2019**

The following provides a summary of the Level 3 and 4 Adult Support and Protection workshops and training sessions facilitated over 2018/19. The evaluation ratings highlight confidence levels pre and post course in key focus areas covered as part of the learning.

### **2018**

#### **Adult Support and Protection Level 3 Training – Council Officers**

2-day course held in January, May, June, September

#### **Adult Support and Protection Level 3 Training – Managers**

2-day course held in February, April, May, October 2018

## **2019**

In 2019 the Adult Support and Protection Level 3 Council Officers and the Managers training were merged into a one 2-day course held in January, May and June. This will also run in October.

### **Adult Support and Protection Level 4 Training**

#### **Thresholds & IRDs Workshop 2018 – 2019**

One day course held in April and November 2018 and March 2019. Further course to be held in October 2019.

#### **Recording Workshop 2018 – 2019**

One day course held in October 2018 and April 2019. Further course to be held in September 2019.

#### **Escalating Concerns Workshop 2018 – 2019**

One day course held in June 2018 and January 2019

#### **Assessing Capacity Workshop 2018**

One day course held in September 2018.

### **Adult Protection Case Conference Workshop to be held in June and November 2019.**

#### **Scottish Vocational Qualification (SVQ) in Social Services and Health Care:**

The Learning and Development Team continue to monitor and respond to the qualification needs of the wider Health and Social Care workforce, including senior managers. They have commissioned 150 SVQ Social Services and Healthcare opportunities for the current financial year and are working alongside the Quality Assurance and Compliance team, to ensure delivery of a joined-up approach to the qualification of the Homecare Workforce, under the umbrella of Project 1400. The team also work closely with Homecare Locality Managers to implement a programme of SVQ assessment for 100 frontline staff that will meet the learning requirements of employees but will also minimise any potential impact on service delivery.

#### **Professional Development Award (PDA) Health and Social Care Supervision:**

Learning and Development have commissioned up to 60 places on PDA Health and Social Care Supervision to support the leadership development of managers in Health and Social Care. As well as targeting frontline supervisory managers in the traditional settings such as Homecare and Care Homes; this year, working with a senior manager and the Social Work Governance Group to test out the effectiveness of the PDA for senior social workers. If successful, it is hoped this course may provide a relevant development opportunity for newly appointed senior social workers at the start of their leadership career.

#### **Practice Learning:**

The City of Edinburgh Council continues to host social work placements from the following universities: Edinburgh, Open University, Robert Gordon's, Stirling and lately Napier. In 2018/19 we have collectively arranged 23 placements and plan to support four student placements from the new integrated course with Occupational Therapy, Physiotherapy and Social Work, launched by Napier University in 2019.

Currently there are five employees undertaking the practice learning course with the Tayforth Partnership. Continual investment in our future Practice Educators is vital in ensuring that placements can be offered, and a learning culture can be created, and we successfully recruit the correct people for vacancies in social work.

16 employees have been supported to attend the Link Workers course over the last year. The next course is due to run in October.

### **Newly Qualified Social Worker programme:**

The six-day programme for newly qualified social workers was facilitated by Learning and Development from October to December 2018 with 26 newly qualified social workers from a range of practice areas in attendance. One of the aspirations of the programme is to help build resilience in practice from an early stage in the social work career path. The learning is continuously updated to include current and relevant policy and practice content. This year, sessions on Self-Directed Support and outcomes-based practice were introduced to the programme.

## **Edinburgh Health and Social Care Partnership**

### **Planning**

In December 2018 the Workforce Planning Group submitted their inaugural baseline workforce plan to the Edinburgh Integrated Joint Board (EIJB).

The Workforce Development workstream is assessing succession planning, career pathways, talent management, leadership and management development. Looking at how we can maximise our skill mix and ensure a joined-up approach to training and development.

The staff engagement and experience workstream have been looking at positive work culture (linking in with recruitment and retention), also more specifically about how we build and enhance our corporate identity. The group is also looking at how the Partnership's health and wellbeing is critical to our workforce challenges going forward.

To ensure integration between workforce, service and financial planning will require a significant culture change within the organisation.

The IJB is now required by the Government to produce a full, 3-year workforce plan for the Partnership by the end of March 2020. Work has started on the data trawl and will link in with the Partnership's Strategic Plan.

The Partnership needs to consider a workforce strategy that acknowledges the wider connections to the likes of recruitment and retention strategies as well as learning and development initiatives. We acknowledge that there are gaps in some of the information that we hold for the primary care workforce and the voluntary workforce within the Partnership.

Social Care as a vocation has sometimes been viewed as demanding but low paid, which is challenging for recruitment and retention. The Partnership face a potential crisis in the provision of care and support services over the coming years, with a growing population of older people but with fewer people coming into a labour market that is increasingly competitive.

The age profile of our health care workforce means that many will be retiring over the next 10-15 years, particularly within Home Care. We need to attract a younger workforce and focus on succession planning and adapt new ways of service delivery.

The development of a new resourcing strategy will utilise current initiatives already underway to improve attraction, engagement and retention.

### **Development**

This year saw the rolling out iMatter across the Partnership – to all colleagues whether employed by NHS Lothian or the City of Edinburgh Council.

iMatter is a survey tool designed with staff to help individuals, teams and the wider organisation understand and improve staff experience, the extent to which employees feel motivated, supported and cared for at work. It is important to measure staff experience and work to improve this, as it impacts on engagement, motivation and productivity levels.

### **Communities and Families**

Over 1500+ members of staff have attended Restorative Practice learning events led by our Learning and Development (L&D) team in 2018-19. These have been generally well received and our staff understand and are engaged with restorative and strengths-based approaches.

A self-directed practice guide has been produced by the L&D officers seconded to this work in 2018-19 and this is currently being refined by the L&D team leader. A core task for the working group is to develop one-page guides and devise a way of making all this material easily accessible to staff on a multi-agency basis.

A working group chaired by the Senior Manager for Children's Practice Teams will take forward the next phase of the development of a Restorative Practice strengths-based approach. This will involve further evolution of the toolkit, the development of some specific tools for support and challenge including reflective supervision and the recording of outcomes with children and families, and ongoing multi-agency staff engagement events to highlight and develop good practice.

Staff benefit from a wide programme of multi-agency child protection training which is overseen by the Learning and Development sub group of our Child Protection Committee and is delivered through a partnership of Learning and Development officers and front-line managers.

Recruitment for children's practice team social workers takes place on a city-wide basis and distribution of staff to teams is calculated in way that is proportionate to the numbers and type of children and young people being worked with in each locality. This practice which has been in place for some years and has helped maintain sufficient numbers of permanent staff in post and eliminate the need to use agency staff.

### **Local Practitioner Forum**

The Chief Social Work Officer sponsored Edinburgh Local Practitioner Forum (ELPF) continues to meet 2-3 times per year. The ELPF continues to offer opportunities for front line staff to reflect on their practice, discuss service developments across the city and how these will impact on their day to day work as well as hearing from outside speakers.

The ELPF maintains an online presence and encourages participation from voluntary sector workers, front line workers, senior managers and social work students. This year there has been a renewed interest in the ELPF, with increased attendance figures (over 50 professionals attended the meeting on 10 April 2019).

The number of subscribers to the ELPF's website ([www.elpfonline.org.uk](http://www.elpfonline.org.uk)) currently sits at 96. This is used to maintain engagement with practitioners and professionals, and to supplement traditional email and face-to-face contact opportunities. The website includes the dates of upcoming meetings and copies of the agendas and presentations used.

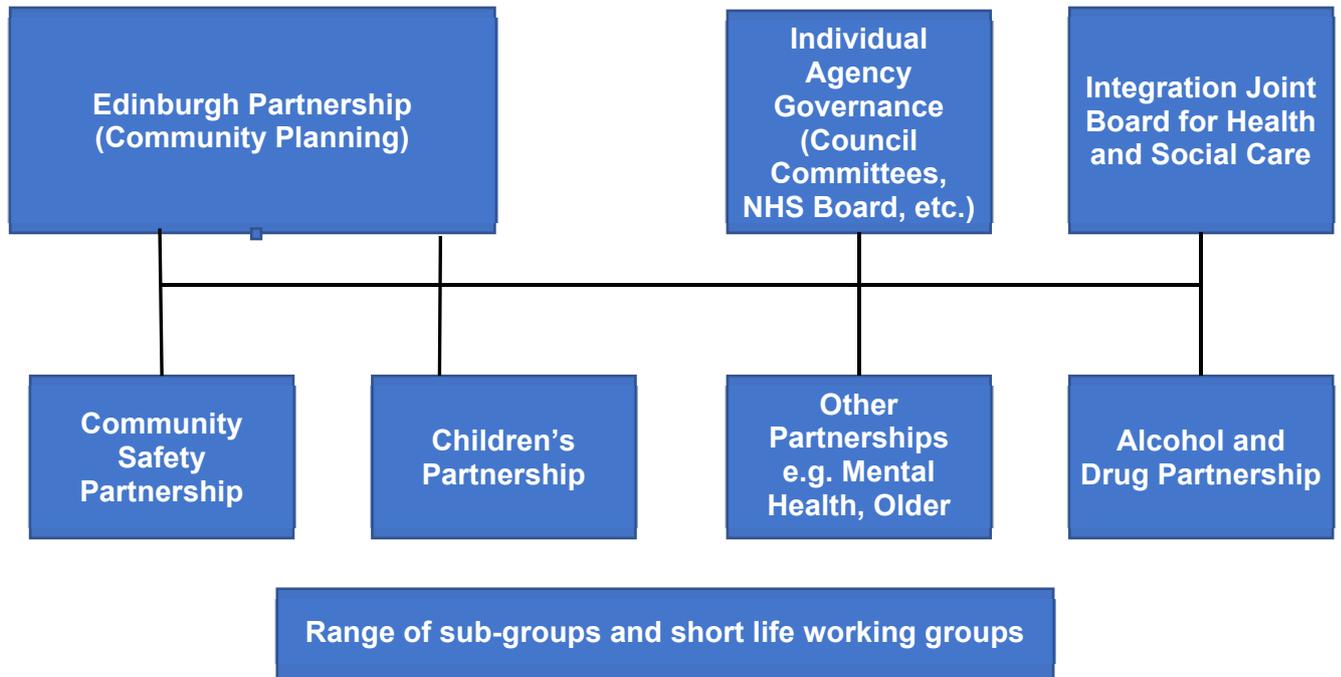
The Black and Minority Ethnic (BME) Equality Workers forum regularly meet to discuss common issues that affect all minority ethnic employees and their communities. The forum aims to:

- facilitate support between members and network with one another
- work alongside managers and equality officers to promote policy and practices on equality issues
- assist in challenging racism and discrimination
- work towards ensuring there are no discriminatory practices in recruitment, training and practice
- share information and experience
- support the development of good practice on race equality and diversity matters.

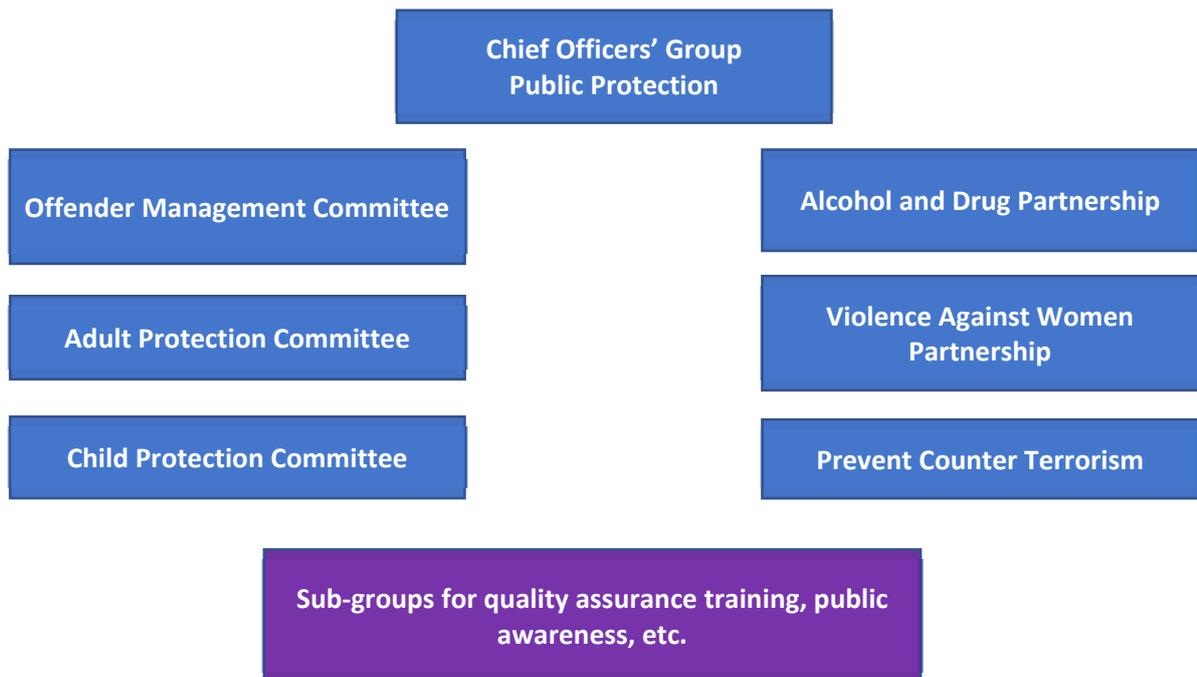
The forum achieves this through offering support and advice to colleagues; participating and consulting on Council strategies; supporting the implementation of legislation, policies and good practices; and delivering training and information sessions.

**Appendix 1 - Public Protection Strategic Partnerships and Monitoring Arrangements**

**Diagram 1 – Strategy and planning groups**



**Diagram 2 – Public protection groups**



## Appendix 2 – Statutory Complaints Analysis

### STATUTORY SOCIAL WORK COMPLAINTS PROCEDURE

#### *We take complaints seriously*

The Council are required to report annually on complaints received from anyone who receives, requests or is affected by a social work service.

#### **SUMMARY:**

The Council is committed to improving social work services for the people of Edinburgh and recognises that complaints are an important source of customer feedback. The following table sets out the number of social work complaints over the last three years dealt with as frontline resolutions (stage one); the number of complaints that required formal investigation (stage two); the number of complaints referred to a Complaints Review Committee; and the number of complaints referred to the Scottish Public Services Ombudsman (SPSO). Along with responding to complaints the Council also respond to enquiries made by the public, and by elected members (MPs, MSPs and Councillors) on behalf of their constituents.

	2016/17	2017/18	2018/19
<b><u>Stage One Frontline Resolutions</u></b>			
• Edinburgh Health and Social Care Partnership	69	74	111
• Communities and Families	26	42	35
• Community Justice	0	5	16
<b><u>Stage Two Investigations</u></b>			
• Edinburgh Health and Social Care Partnership	75	79	72
• Communities and Families	49	20	45
• Community Justice	6*	0	4
<b><u>Complaints Review Committees</u></b>			
• Edinburgh Health and Social Care Partnership	13	9	2
• Communities and Families	11	1	0
• Community Justice	1*	0	0
<b><u>Scottish Public Services Ombudsman</u></b>			
• Edinburgh Health and Social Care Partnership	2	0	0
• Communities and Families	1	0	2
• Community Justice	0	0	0

<b><u>Enquiries</u></b>			
• Edinburgh Health and Social Care Partnership	153	65	143
• Communities and Families	62	23	34
• Community Justice	2*	2	1

\* These figures were previously reported within the overall Edinburgh Health and Social Care Partnership figures.

Data is also recorded by the respective service areas regarding positive comments made by the public.

	<b>2016/17</b>	<b>2017/18</b>	<b>2018/19</b>
<b><u>Positive Comments</u></b>			
• Edinburgh Health and Social Care Partnership	6	3	11
• Communities and Families	0	0	0
• Community Justice	0	0	0

## **EDINBURGH HEALTH AND SOCIAL CARE PARTNERSHIP**

### **Summary Information:**

During 2018/19, Edinburgh Health and Social Care Partnership completed 72 formal stage two complaint investigations. This represents a decrease of 9% on the previous year. In addition, 111 complaints were completed as frontline resolutions; 143 enquiries were resolved; and 11 positive comments were received by the service. The level of complaints received is set against a background of service provision volume in the following key areas:

### **Social Care Direct:**

- Approximately 65,000 contacts were received by Social Care Direct. This reflects a 25% increase on last year when 52,000 contacts were received.

### **Practice Team, Sector Based Social Work Services:**

- 5,910 assessments were carried out by practice teams (Sector Teams, Residential Review Team), which is a 91% increase from last year when 3,090 assessments were carried out. 5,946 reviews were carried out, representing a 53% increase on last year.

### **Home Care Service:**

- 4,890 people received 97,141 hours home care service in March 2019, either from the Council's Home Care and Support Service or purchased by the Council from the independent sector. This represents a small increase on the provision in March 2018 when 4,797 people received 93,775 hours. It should be noted that there are also increasing numbers of people opting to arrange their support via a direct payment or individual service fund.

### **Residential Care Homes:**

- 293 adults aged under 65 years were supported in permanent care home places (all service user groups) an increase of one since last year.
- 3,347 adults aged 65 and over were supported in long term care home placements, which is a 5% decrease on last year. Of these 3,347 adults aged 65 and over, 561 had a placement in a Council run care home at some point in the year which is a decrease on last year.

### **Direct Payments & Individual Service Funds:**

- At the end of March 2019, over one quarter of adults were choosing to receive their support with a direct payment or individual service fund providing greater opportunity to specifically tailor their support to meet their needs.

### **Occupational Therapy:**

- 1,440 assessments were carried out to identify support needs, including adaptations, equipment and services required. This represents a 9% decrease on last year.

### **Timescales for Stage Two Complaint Investigations:**

In 2018/19, Edinburgh Health and Social Care Partnership formally responded to 72 Stage 2 complaints. 20 were responded to within 20 working days (28%), 42 were not responded to within timescales (58%) and 10 had an agreed extension (14%).

### **Outcomes:**

Of the complaints formally investigated 21 (29%) were upheld; 31 (43%) were partially upheld; and 14 (19%) were not upheld. Four (6%) complaints were withdrawn, one did not have appropriate consent and one was not applicable.

### **Complaint Trends:**

Of the 72 Stage 2 complaints, 52 were either upheld or partly upheld.

- 39 were reported in locality teams
  - North East (3)
  - North West (14)
  - South East (7)
  - South West (15)

The figures above show a variation in the number of complaints received in the locality teams although the types of complaints and themes were consistent across all areas.

- 1 was reported in the Community Alarm Team
- 12 were reported across miscellaneous services

The four top themes were around:

- Decision making (21%)
- Delays in Packages of Care or Assessments (17%)

- Communication (15%)
- Staff Behaviour (11%)

### **Service Improvements:**

In April 2018, it was agreed that all stage 2 complaints with an outcome of upheld or partially upheld should have a completed improvement plan before the response can be signed off. This is to ensure that any identified actions are completed and learning from complaints is shared through the locality Quality Improvement Teams.

The SPSO are in the process of reviewing their model complaints handling process which will help inform the improvement priorities for the partnership. The focus of improvement over the coming 12 months will be around streamlining our processes for managing complaints, increase shared learning, increasing the number of complaints dealt with as a front-line resolution and increase the level of support and training available to teams investigating and responding to complaints.

## **COMMUNITIES AND FAMILIES**

### **Summary Information:**

During 2018/19, Communities and Families (Children's Services Social Work Complaints) completed 45 formal stage two complaint investigations. This represents a 125% increase on the previous year. In addition, 35 complaints were completed as frontline resolutions (8% decrease from the previous year), and 34 enquiries and elected member enquiries were responded to (48% increase from the previous year). The level of complaints received is set against a background of service provision volume in the following key areas:

### **Practice Teams:**

- There were approximately 3,200 children and family cases being managed by practice teams as at 31 March 2019.
- approximately 1,210 child protection referrals which were subject to Interagency Referral Discussions (IRDs) took place.
- there were 787 Child Protection Case Conferences convened.
- approximately 175 reports per month were submitted to the Authority Reporter.

### **Accommodated Children and Young People:**

- 1,256 children and young people 'looked after' by the Council (356 at home, 900 away from home)
- 520 children in foster care
- 88 children in residential care
- 17 children in secure accommodation
- 249 children placed with kinship carers
- 27 children with prospective adopters
- 9 children in 'other' settings (e.g. in community)

### **Young People's Service:**

- 598 young people were discussed at multi-agency pre-referral screening (early intervention)

- 198 risk assessments were undertaken
- 38 risk management case conferences held for young people under the age of 18

### **Self-directed Support (SDS):**

As at end of March 2019 there were 213 current Self-directed Support plans for children and young people. This includes the children and young people who receive Direct Payments. It is not possible to provide a percentage increase/decrease from 2017/18 due to a revision in the way data has been collected.

### **Timescales for Stage Two Complaint Investigations:**

In 2018/19, Communities and Families formally responded to four complaints (9%) within 20 working days or within agreed extensions; 38 complaints (84%) were not completed within the targeted timescale. Three complaints (7%) were withdrawn.

### **Outcomes:**

Of the stage 2 investigations completed, twenty-three (51%) were not upheld, fifteen (33%) were partially upheld, four (9%) were upheld, and three (7%) were withdrawn.

### **Complaint Trends:**

There were 28 stage 2 investigations completed regarding social work practice teams in the year 2018/19. This is a 155% increase from 2017/18, although the previous year's total of 11 was unusually low compared to those from 2018/19 and those from 2016/17. There was a broad range of reasons for the complaints lodged regarding practice teams, the highest incidences being about professional practice (6), decisions made by practice teams (5) and alleged breaches of confidentiality (3). There is a level of consistency in the number of complaints regarding Family Based Care, and these have averaged at three complaints per year over the last three years. There has been a steady decrease in Child & Family Centre complaints, resulting in no new complaints in the last year. Centrally based Disability Services received three complaints in 2018/19, having received no complaints in the previous two years.

### **Service Improvements:**

During 2018/19, Communities and Families identified several service improvements for managers to implement as a direct result of complaints. There were five service improvements noted. As with all other council departments, there is a relationship between complaints received and the continuous improvement of services, and this provides a mechanism for service users to contribute to the development of services.

*Examples range from relatively minor procedural changes, for example:*

- A residential unit formalised a service improvement regarding their procedure for checking the answering service on their landline and mobile phone.

*To significant organisational changes, for example:*

- All financial decisions taken by the Children Affected by Disabilities Team were previously made by a funding panel. To make the process and decision-making timelier and in accordance with need, the funding panel has been disbanded and funding decisions are made directly by either a Team Leader, Team Manager, or

Senior Manager, depending on the level of funding required. This new system provides greater flexibility in the support offered, in order to respond proportionately to the specific needs of every child and their family.

## **COMMUNITY JUSTICE SERVICES**

### **Summary Information:**

During 2018/19, Community Justice received four stage two complaints. This represents an increase from the previous year. Community Justice completed three stage two complaint investigations (the fourth complaint was withdrawn). 16 complaints were completed as frontline resolutions (220% increase from previous year); one enquiry was resolved; and no positive comments were received.

*The level of complaints received is set against a background of the following service provision volume:*

- 2,657 people were supported through open community orders by the Community Justice Social Work Service. This represents a 2% decrease from support given during 2017/18.
- Community Justice staff completed 2,529 social work reports to support decision making by the courts, representing a 3% increase from 2017/18.

### **Timescales for Stage Two Complaint Investigations:**

In 2018/19 Community Justice Services responded to two complaints within 28 days (50%) and one within the agreed extension period (25%). One complaint was withdrawn (25%).

### **Outcomes**

Of the complaints completed two (50%) were partially upheld and one not upheld (25%). One (25%) complaint was withdrawn.

### **Complaint Trends:**

There were three complaint investigations completed by Community Justice Services in 2018/19. The reasons for the complaints related to a decision made by a practice team, staff/professional practice issues and decision made as a result of an assessment. One complaint investigation was by Community Intervention Team, one complaint investigation was by Resettlement Team and one complaint investigation was by the social work team at HMP Edinburgh.

### **Service Improvements:**

No service improvements to report.

### **COMPLAINT REVIEW COMMITTEES:**

Changes to legislation on 1 April 2017 saw the end of the Statutory Social Work Complaints procedure and the Complaints Review Committee. Social work complaints began to follow the Council's Corporate Complaints procedure: Frontline Resolution (stage one), Investigation (stage two) and Scottish Public Services Ombudsman.

However, complaints raised prior to 1 April 2017 could still progress to Complaints Review Committee (if requested within 28 days of receipt of the stage two response)

to be heard by three independent lay members, drawn from a wider panel. Three complaints (raised prior to 1 April 2017, where a Complaints Review Committee had been requested within the prescribed timescale) remained outstanding going into the 2018/19 reporting period.

Two Complaints Review Committees were completed during 2018/19 and one was withdrawn. Both complaints were partially upheld by the Complaints Review Committee. The recommendations of the Complaints Review Committee were presented for ratification at the Council's Health, Social Care and Housing Committee for two Edinburgh Health and Social Care Partnership cases. The Complaints Review Committee partially upheld both complaints.

*The following is an example of work undertaken to address one of the partially upheld Complaint Review Committees.*

- Staff have been reminded that any contact with clients will be recorded on the electronic AIS system. This will create an audit trail and minimise delays through the assessment and support planning process. This will also help ensure that there is clear recording of decisions made and help clarify any areas of confusion.

### **SCOTTISH PUBLIC SERVICES OMBUDSMAN**

The Scottish Public Services Ombudsman investigated two complaints in 2018/19 relating to Communities and Families. Both complaints were upheld by the Scottish Public Services Ombudsman.

### Appendix 3 – Registration of the Workforce with the Scottish Social Services Council (SSSC)

The table below outlines: dates set for compulsory registration in each part of the register; the number of Council staff employed in the social services workforce; and the number who have achieved registration.

Section of Register	Number in Workforce	Workers currently registered	Comments	Date of Compulsory Registration	Renewal Period
Social workers	813	843	The social work register part is qualification-based. Registered numbers include employees who have chosen to register but are not practicing social workers.	1 October 2005	3 years
Managers of residential child care	8	6	Two managers provide registered manager functions for two units	1 October 2009	5 years
Residential child care workers with supervisory responsibility	36	36		1 October 2009	5 years
Residential child care workers	197	320	Registered numbers include Locum Bureau workers.	1 October 2009	5 years
Managers of care homes for adults	13	12	1 manager is registered with the Nursing and Midwifery Council (NMC).	1 December 2009	5 years
Managers of adult day care services	8	6	Two managers provide registered manager functions for two-day care services	1 December 2009	5 years

Section of Register	Number in Workforce	Workers currently registered	Comments	Date of Compulsory Registration	Renewal Period
Managers of day care of children services	104	20	Discrepancy is because managers are Head Teachers who are registered with the General Teaching Council Scotland.	1 December 2010	5 years
Practitioners in day care of children	673	1019	Registered numbers include supply workers.	1 October 2011	5 years
Supervisors in a care home service for adults	57	64	Registered numbers include supply workers	1 April 2012	5 years
Support workers in day care of children services	125	193	Registered numbers include supply workers	1 July 2014	5 years
Practitioners in care homes for adults	166	166		30 March 2013	5 years
Support workers in care homes for adults	252	308	Registered numbers include supply workers	1 October 2015	5 years
Managers in a housing support service	7	6	One manager in the process of registering	1 February 2014	5 years
Supervisors in a housing support service	20	20		1 July 2017	5 years
Workers in a housing support service	96	96		1 October 2020	5 years
Managers in a care at home service	1	1		1 February 2014	5 years
Supervisors in a care at home service	2	2		1 July 2017	5 years

Section of Register	Number in Workforce	Workers currently registered	Comments	Date of Compulsory Registration	Renewal Period
Workers in a Care at Home Service	30	0			
Managers in a Combined Housing Support and Care at Home Service	15	10	Discrepancy in registered numbers is due to 3 managers registered with NMC; 1 manager on secondment and 1 manager in the process of registering	1 February 2014	5 years
Supervisors in a Combined Housing Support and Care at Home Service	114	114		1 July 2017	5 years
Workers in a Combined Housing Support and Care at Home Service	1009	489	Register opened in October 2017. Current registration programme in place to support workforce	1 October 2020	5 years

## Appendix 4 – Levels of Inspection by the Care Inspectorate for Council Registered Care Services

The table below sets out the levels of inspection by the Care Inspectorate of the Council's registered care services during 2018/19.

Frequency of inspection varies to take account of type of service and performance of a service. Combined Services includes newly registered services, 1 of which have still to be inspected, explains why 14 out of 15 inspections have taken place.

**Key to grades: 1 – Unsatisfactory; 2 – weak; 3 – adequate; 4 – good; 5 – very good; 6 – excellent**

	Number of Services	Frequency of Inspection	Inspections Undertaken	Lowest Grade	Highest Grade	% with grades of good or above	% with increased grades	% with decreased grades
<b>Communities and Families</b>								
Adoption	1	Yearly	1	4	5	100%	100%	n/a
Care Home (children and young people)	8	Yearly	8	3	4	88%	75%	25%
Day care of children (early years services)	100	Every 2 years	43	3	6	86%	39%	28%
Fostering	1	Yearly	1	4	5	100%	No change	No change
Secure Accommodation	1	Yearly	1	5	5	100%	100%	n/a
Care at Home – Children and Young People	1	Yearly	1	5	5	100%	100%	n/a
Day Care of Children	1	Every 2 years	1	3	4	0%	n/a	100%

	Number of Services	Frequency of Inspection	Inspections Undertaken	Lowest Grade	Highest Grade	% with grades of good or above	% with increased grades	% with decreased grades
<b>Adult Services</b>								
Adult Placements	2	Yearly	2	5	5	100%	50%	n/a
Care Home Service - Older People	10	Yearly	10	2	5	40%	10%	40%
Combined Housing Support/Care Support	15	Yearly	13	3	5	92%	15%	15%
Offender Accommodation	1	Yearly	1	5	5	100%	No change	No change
Support Service – care at home	2	Yearly	2	3	5	50%	50%	50%
Support Service – other than care at home	6	Every 3 years	1	4	5	100%	n/a	100%
Housing Support	8	Yearly	1	4	4	100%	No change	No change
Care Home Service - Adults	2	Yearly	1	4	5	100%	100%	n/a