



## Item No: 17

Meeting Date: Wednesday 20<sup>th</sup> November 2019

### Glasgow City Integration Joint Board

**Report By:** Susanne Millar, Interim Chief Officer

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#### CHIEF SOCIAL WORK OFFICER ANNUAL REPORT 2018/19

<b>Purpose of Report:</b>	To present the annual report from the Chief Social Work Officer for the year 2018/19, prepared in line with Scottish Government guidance.
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<b>Background/Engagement:</b>	<p>The requirement for every local authority to appoint a professionally qualified Chief Social Work Officer is contained within Section 3 of the Social Work (Scotland) Act 1968. This is one of a number of statutory requirements in relation to posts, roles or duties with which local authorities must comply.</p> <p>The Chief Social Work Officer (CSWO) is required to produce an annual report, following Scottish Government guidance for submission to the Scottish Government.</p>
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<b>Recommendations:</b>	<p>The Integration Joint Board is asked to:</p> <ul style="list-style-type: none"><li>a) note the report; and</li><li>b) note that the Chief Social Work Officer report has been submitted to the Scottish Government.</li></ul>
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#### Relevance to Integration Joint Board Strategic Plan:

Delivery of effective social care services is fundamental to supporting the vision and key aims of the IJB's Strategic Plan.
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**Implications for Health and Social Care Partnership:**

<b>Reference to National Health &amp; Wellbeing Outcome:</b>	Supports achievement of all National Health & Wellbeing Outcomes.
<b>Personnel:</b>	No direct implications arising from this report, however personnel matters are referenced within the report.
<b>Carers:</b>	No direct implications arising from this report, however carers are referenced within the report.
<b>Provider Organisations:</b>	No direct implications arising from this report.
<b>Equalities:</b>	No direct implications arising from this report. Equality Impact Assessment not required as this report does not propose a new or amended plan, policy, strategy or service.
<b>Fairer Scotland Compliance:</b>	Not applicable
<b>Financial:</b>	No direct implications arising from this report, however financial matters are referenced within the report.
<b>Legal:</b>	Local authorities are required to appoint a professionally qualified Chief Social Work Officer under Section 3 of the Social Work (Scotland) Act 1968. The duties of the CSWO include production of the annual Chief Social Work Officer's Report, which is presented to the local authority and shared with the Scottish Government.
<b>Economic Impact:</b>	No direct implications arising from this report.
<b>Sustainability:</b>	No direct implications arising from this report.
<b>Sustainable Procurement and Article 19:</b>	No direct implications arising from this report.
<b>Risk Implications:</b>	No direct implications arising from this report, however some areas of potential risk to delivery of effective social care services are referenced within the report.
<b>Implications for Glasgow City Council:</b>	This report must be considered by Council.

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<b>Implications for NHS Greater Glasgow &amp; Clyde:</b>	None
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<b>Direction Required to Council, Health Board or Both</b>	Direction to:	
	1. No Direction Required	✓
	2. Glasgow City Council	
	3. NHS Greater Glasgow & Clyde	
	4. Glasgow City Council and NHS Greater Glasgow & Clyde	

**1. Purpose**

- 1.1. To present the annual report from the Glasgow City Chief Social Work Officer for the year 2018/19, prepared in line with Scottish Government guidance.

**2. Background**

- 2.1. The requirement for every local authority to appoint a professionally qualified Chief Social Work Officer is contained within Section 3 of the Social Work (Scotland) Act 1968. This is one of a number of statutory requirements in relation to posts, roles or duties with which local authorities must comply.
- 2.2. The overall objective of the Chief Social Work Officer post is to ensure the provision of effective, professional advice to local authorities in relation to the provision of Social Work Services, and to ensure the delivery of safe, effective and innovative practice.
- 2.3. The Scottish Government has put in place statutory guidance relating to the role of the Chief Social Work Officer that clarifies:
- role and function
  - competencies, scope and responsibilities
  - accountability and reporting arrangements.
- 2.4. The Scottish Government has also preserved the statutory role of the Chief Social Work Officer within the terms of the Public Bodies (Joint Working) (Scotland) Act 2014.
- 2.5. A report was taken to Council's Executive Committee on 17 April 2009 which confirmed the above role and functions of the Chief Social Work Officer and a direction to bring forward reports to Committee on an annual basis, in line with this guidance.
- 2.6. The format for this report is in line with guidance from the Office of the Chief Social Work Adviser to the Scottish Government.

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### 3. Summary Reflections – Key Challenges, Developments and Improvements during the Past Year

- 3.1. As in previous years this section of the report identifies the personal reflections from the CSWO in terms of challenges and opportunities in developing Social Work practice over the last year, and those challenges and opportunities now facing the profession nationally and locally.
- 3.2. During this last year I have continued to focus on ensuring a value is placed on the contribution that social work brings to the Glasgow City Health and Social Care Partnership (HSCP). Through maintaining strong social work leadership structures at a central and local level I have ensured there are forums for reflection and consideration of the social work role in the HSCP.
- 3.3. Within Children's Services, we have experienced real benefit in our continued work with Centre for Excellence (CELCIS) to support our transformation work in children's services, which has resulted in further reducing the numbers of young people we are accommodating outwith Glasgow, focusing on a reinvestment in family support services in the city and improved outcomes for children and family services. The challenge to social work practice in this work has been to support our front line staff in taking an asset based approach to working with children and families, enabling decision making based on outcomes rather than immediate solutions to mitigate risk.
- 3.4. The success of this approach in Children's Services led us to reconsider our work in adults and older people's services. As a service, Social Work have successfully implemented transformational change in Adults and Older People's services including, amongst others, implementation of self-directed support, home care reablement, carer support, housing options and technology enabled care. However we have core Adults and Older People's services getting close to the limits of their capacity, while all analysis demonstrates the inverse trends in relation to growing demand for social care and health services, and reducing budgets to meet that demand. The tolerance of the system in its current form to continue to reform to absorb the twin challenges of increasing demand and reducing recourses is itself reducing.
- 3.5. This analysis led the CSWO to fully support the work now underway in the HSCP on Maximising Independence, strategy and work, whose aim is to pursue a step change in individual, family and community independence from statutory HSCP support, including social work services, focusing organisational resources and energies on prevention and early intervention approaches in partnership with local community organisations and third, independent and housing sector partners. The CSWO played a critical role in the development of this approach, and is a key member of the Maximising Independence Programme Board.
- 3.6. Further information on this work can be found in the report that was considered by the Glasgow City IJB on [26 June 2019](#).

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- 3.7. There continues to be a number of national initiatives which are important too, and will have a bearing on social work practice. The Scottish Child Abuse Inquiry and National Review of Care have continued, and we have engaged in both.

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

- 4.1. Social Work Services is engaged in a number of strategic partnerships to support development and delivery of effective services across Glasgow. Key partners include Education Services, NHS Greater Glasgow and Clyde, Glasgow Community Planning Partnership, the third and independent sectors and service users, carers.
- 4.2. The Glasgow City Integration Joint Board was established in February 2016, with a significant range of health and social care functions delegated to it from the Council and Health Board with effect from 1 April 2016. It is a key priority for the Integration Joint Board and the Glasgow City Health and Social Care Partnership to ensure that relationships with key partners are strengthened through the integration of health and social care.
- 4.3. The Chief Social Work Officer is a member of the Executive and Senior Management Teams and leads the Social Work Services Professional Governance Board; is a statutory member of the Integration Joint Board; and, sits on a number of other Partnership boards and committees. In this way, the Chief Social Work Officer has a significant degree of involvement in the governance and accountability structures of the service and key partnerships which ensures a professional social work perspective on all strategic and operational decisions.
- 4.4. The Chief Social Work Officer, as a member of the Health and Social Care Partnership Senior Management Team and the Council Management Group, with lead corporate responsibilities on key service reform areas, has a significant involvement in budgetary decisions of the service, and of the council as a whole as they relate to social care functions.
- 4.5. Within Glasgow, the Chief Social Work Officer has established a Chief Social Work Officer Group made up of professional social work leads from each of the Partnership's three localities. In this way, the Chief Social Work Officer is directly linked to local professional practice and service delivery.
- 4.6. The Chief Social Work Officer works closely with Elected Members and Council committees as necessary to ensure appropriate scrutiny of social care functions at a political level. The Chief Social Work Officer has statutory responsibility to provide the Council with effective professional advice regarding the provision of social care.

### **5. Social Services Delivery Landscape**

- 5.1. Glasgow's social and economic position in relation to its most vulnerable citizens is well known and frequently reported in detail elsewhere, however some key demographic and contextual information is below:

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- Glasgow is the largest of Scotland's 32 local authorities, the estimated population of Glasgow City as of 2018 was 626,410, 11.5% of the total population of Scotland
- Children (0-17 years) make up around 18%, of the population
- Adults (18-64 years) make up around 69%, of the population
- Older people (65+ years) make up around 13%, of the population
- 19.9% of Glasgow's population, more than 120,000 people, live in an income deprived area, compared to 12.2% for Scotland
- Social Work Services have around 53,000 service users (approx. 8% of Glasgow population), approximately 10,000 children, 25,000 adults and 18,000 older people
- Approximately 2,800 looked after children
- Approximately 400 children on the child protection register
- Approximately 8,000 open Addictions cases
- 5,679 applications made under homelessness legislation in 2017/18

5.2. Demand for services has remained high over the reporting period across all age groups. This increasing demand, particularly in the context of reducing budgets, continues to highlight the need for structural re-balancing within the delivery model of health and social care services in Glasgow.

5.3. With effect from 1 April 2016, almost all of the Council's social care functions, along with a number of housing functions, were delegated to the Glasgow City Integration Joint Board, in line with the Public Bodies (Joint Working) (Scotland) Act 2014. As required by the Act, the Integration Joint Board develops the Strategic Plan for health and social care services in Glasgow, and directs the Council and Health Board to deliver services to support delivery of the Plan.

5.4. As noted in last year's report the Glasgow City Integration Joint Board's new Strategic Plan covering 2019-22 came into effect in April 2019. The plan represents a continuation of the significant progress which has been made since the establishment of the Integration Joint Board. The plan is aligned with a range of other related plans and strategies, including the Council Plan 2017-22, NHS Greater Glasgow and Clyde's moving Forward Together strategy, the Public Health Strategy and the Community Plan. The plan is available at: [Glasgow City HSCP Strategic Plan 2019-22](#)

## 6. Resources

6.1. Budget monitoring in Glasgow City Integration Joint Board throughout 2018-19 forecast an underspend of £2.046m against which an underspend of £6.999m was secured. The main broad themes are:

- An underspend within Children Services, mainly as a result of early delivery of future year savings (£3.560m);
- Budgeted contingency in Prescribing not required to be utilised in 2018/19 (£3.213m);

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- An underspend across a range of services due to vacancies as a result of staff turnover, recruitment delays and absences was partially offset by overspends in overtime and agency costs (£8.667m)
  - An underspend in traditional Supported Living and Older people Purchased Day Care Services as a consequence of the introduction of personalisation. This partially offset the overspend experienced in this area (£2.045m)
- 6.2. This has been off-set by overspends, the main areas being attributable to unachieved savings from 2018/19 (£3.069m) and demand within Adult Services and Older people Services (£6.588m). The Integration Transformation Board continues to monitor these savings to ensure these are secured moving forward.
- 6.3. The IJB elected to draw down £4.409m of reserves to match the commitments for which they were reserved (as noted in para 6.3 of the [2017/18 CSWO Annual Report](#)). A number of commitments made in 2018-19 in relation to local and national priorities will not complete until future years and were required to be earmarked to ensure funding is in place to deliver on these commitments (£12.913m).
- 6.4. Full details of the earmarked and general reserves can be found in the report considered by the Glasgow City IJB's Finance Audit and Scrutiny Committee on [12 June 2019](#)
- 6.5. In terms of the Social Work budget, the Glasgow City Health and Social Care Partnership continues to manage and review the budget across all areas of the Service in conjunction with the Senior Management Team. The Chief Social Work Officer is actively engaged in this activity.
- 6.6. Glasgow City Council has undertaken a wide ranging Transformation Programme in an effort to ensure that the Council can continue to meet its statutory duties in the face of unprecedented reductions in public funding. The Glasgow City Integration Joint Board is also committed through its Strategic Plan to delivering transformation across the city and to working with the Council and Health Board to achieve this.
- 6.7. The Council's contribution to the overall budget for the Glasgow City Integration Joint Board for 2019-20 is £433,074,600. This is made up of core social work funding, ring-fenced Criminal Justice funding and additional funding for Free Personal Care for under 65s from Scottish Government, elements of housing functions (aids and adaptations) which fall within the strategic remit of the IJB, and the budget for Assisted Garden Maintenance.
- 6.8. This year Glasgow City IJB developed a medium term financial outlook to support the development of 2019-2022 Strategic Plan. This outlook reflected both consultation with IJB members and the funding offer from Glasgow City Council and NHS Greater Glasgow and Clyde. The medium term financial outlook was considered by the Glasgow City IJB at its meeting on [27 March 2019](#).

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### 7. Service Quality and Performance

- 7.1. The vision for Social Work Services in Glasgow is simply expressed in terms of 'protecting vulnerable children and adults from harm; promoting independence; and ensuring positive outcomes from our intervention'.
- 7.2. The Glasgow City Integration Joint Board's vision is detailed in its Strategic Plan, available at [Glasgow City HSCP Strategic Plan 2019-22](#)
- 7.3. Performance reporting for Social Work Services is now encompassed within the HSCP's annual performance reports, which are available at [Glasgow City HSCP Annual Performance Reports](#)
- 7.4. A number of particular highlights regarding service quality and performance in 2018-19 are identified below:
  - Developed an updated IJB Strategic Plan for 2019-22 following an extensive 3 month consultation
  - Opened the £17m Gorbals Health and Care Centre in January 2019
  - Transferred Care at Home services from Cordia LLP to Glasgow City HSCP (as noted in the previous report)
  - Won the healthier Lifestyles Award at the 2018 Scottish Health Awards for the work being undertaken by Glasgow Recovery Communities supporting people using drugs/alcohol in recovery
  - Piloted the Quit Your Way Pregnancy incentives programme which provides vouchers to pregnant women on completion of key smoking cessation milestones and has evidenced increased referrals, engagement and successful quit outcomes
  - Achieved the UNICEF UK Baby Friendly Achieving Sustainability (Gold Award) across all three localities
  - Launched the Heads Up mental health website which provides information about common mental health conditions and their management
  - Won the Accessing Mental Health Award in the Holyrood Digital Health and Care Awards for the Cognitive Computerised Behaviour Therapy Service. This offers computer based self-help interventions for people experiencing mild to moderate anxiety and depression.
  - Developed and implemented the 2019 framework for purchased social care supports which will ensure clients in receipt of Self Directed Support have access to quality assured service providers who can deliver a range of services to support daily living.
  - Successfully piloted the Glasgow Together Consortium model in the North East of the city with the aim of supporting families at an early stage and avoiding statutory social work intervention. Plans are in place for a city wide rollout.
  - Led implementation of the Red Bad Scheme across NHS Greater Glasgow and Clyde. This enables key patient information to be transferred with care home residents as they move to and from hospital care, speeding up processes and supporting decision making.
  - Developed a 5 year Rapid Rehousing Transition Plan which renews the focus on the Housing Options and Housing First approaches.

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- Supported the introduction of the Glasgow Alcohol Court which provides individuals with an alcohol assessment and immediate access to community based support, when their offences have been alcohol related.

### 8. Delivery of Statutory Functions and Public Protection

8.1. Social Work's performance over the range of statutory functions is outlined in the [Glasgow City Integration Joint Board's Annual Performance Report](#). A Professional and Clinical Governance Assurance Statement, which covers MAPPA, Child Protection, Adult Protection and Public Protection, is reported to the Glasgow City Integration Joint Board each quarter.

#### 8.2. Public Protection

8.3. Public protection is central to the ethos and underpinning of the Partnership, runs through every aspect of HSCP service delivery and is evidenced by its profile within our organisational structure. Key aspects in which it is specifically manifested include; Child Protection; Adult Protection; and the Multi Agency Public Protection Arrangements (MAPPA) in respect to the management of sex offenders and other high risk offenders.

#### 8.4. Child Protection

- From April 2018 – March 2019 there were 1138 Initial Referral Discussions with 55% being initiated by police
- Glasgow averaged 16 visually recorded interviews per week, of which 98% were for child protection purposes and 74% were joint police and social work interviews
- From 2016 to 2018, the number of investigations, case conferences and registrations decreased by 29%, 20% and 31% respectively. There was no corresponding reduction in the number of overall referrals to social work services.
- The number of children on the child protection register had fallen by 34% by March 2018 to 311.
- In the past twelve months, the figures remained relatively steady for the first six but we are now seeing an upward trajectory with an 22% increase in the latter half of the period, with the number on the register at the end of March 2019 being 377. This increase continues and a number of factors have been identified as potentially having an impact – the response to the publication of the Child B Significant Case Review (SCR) and associated dissemination events, the impact of welfare reforms and increasing poverty, and a number of large sibling groups being registered. There is a national increase in the number of children on the child protection register.
- The Child Protection Committee's partner agencies are engaging in a programme of self-evaluation activity to analyse these trends further.

8.5. During 2019 there continues to be a number of key initiatives to support professionals to identify and address issues of child well-being and protection. Glasgow continues to prioritise work around neglect and this was an issue at the

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heart of a recent SCR. The assessment tool (Assessment of Care) has been updated and re-launched earlier this year and each locality has a multi-agency training team who are currently delivering local programmes to all partner agencies. This work is being overseen by the Child Protection Committee and will be reported on early in 2020. There have been two very successful neglect summits in the City both of which have been very positively evaluated and heavily over-subscribed indicating the wide range of interest in this area of practice.

- 8.6. Both the Child Sexual Exploitation (CSE) and Trafficking sub-groups continue to meet on a regular basis and are driving forward practice changes and initiatives.
- 8.7. The CSE group has a number of work streams including the night time economy, training, practice guidance and the CSE multi-agency practice guidance which was launched earlier in the year. Glasgow is one of the pilot areas to develop new practice guidance around CSE and vulnerability. The Trafficking work group has been responding to Scottish Government consultations regarding the proposed new legislation. Glasgow is represented on both of these national work streams.
- 8.8. Work is currently underway to identify suitable premises to develop a Children's House in the City. Glasgow is engaged in discussion with the Scottish Government Barnahus team who are currently developing practice standards for the development of Children's Houses across Scotland. The Child Protection Committee and Chief Officers have committed to creating such a house that would ensure that all child victims could be interviewed, medicalled, supported and provide evidence to court within the one building. Currently children are interviewed in accommodation in Govan Road Police Station and there is an urgency to develop child friendly premises that provide a safe space for children to attend.
- 8.9. **Adult Support and Protection**
- 8.10. The Adult Protection Committee has increased its membership to ensure a broader perspective on the work undertaken in the city to support and protect adults who may be at risk of harm. Additional membership includes representatives from the Scottish Ambulance Service, Registered Social Landlords and the Head of Service (Homelessness/Criminal Justice). The committee and its subgroups are midway through the two-year improvement plan attached to the last biennial report. Considerable activity is centred on driving evidence and intelligence led improvement, with greater scrutiny of performance data and a self-evaluation programme. Three audits have been completed (Paid Professional as the source of harm in ASP investigations, quality of chronologies, and ASP practice) with action plans arising from each. Following on from previous work on service user engagement and consultation the HSCP and Advocacy Project are working on service user focus groups which it is hoped will become an annual event.
- 8.11. Another function of the committee is to assist in the development of a confident and competent workforce. In conjunction with the Child Protection Committee, additional learning and development opportunities have been created. Four new courses are now available and these are Trauma-informed Practice, Good Practice in Chronologies, Multi-agency Risk Assessment, and Cultural Competence. The two committees are building a Learning Network of associate

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trainers to assist in the delivery of training to increase capacity given the size of the workforce in the city.

- 8.12. The government has published its ASP Improvement Plan. One prominent feature of this is the intention to inspect each of the local authorities who were not subject to the recent thematic inspection of six areas within a two-year timescale, therefore the committee is working to become 'inspection-ready'.
- 8.13. A Tripartite Audit within Glasgow has been carried out on an annual basis since 2015. Audit indicators measure quality, actions, outcomes, stakeholder involvement and decisions taken to safeguard adults at risk through all Adult Support and Protection processes. Results of the audit are disseminated to APC as well as sharing internally with respective agencies involved in audit. Findings from the last audit have resulted in the following measures:
- Improvement to ASP e-forms on CareFirst to improve data quality and better recording
  - Further work with Advocacy project to carry out a focus group with service users
  - Work with Perpetrator on agenda
  - Chronology and Life Event work
  - Case conference minutes easier access
- 8.14. Scottish Government return information
- 2018/19 referrals were 4865 – 7% increase from the previous year's 4533
  - 2018/19 investigations were 307 – 13% decrease from the previous year's 356
  - 2018/19 ASP meetings were 368 – 13% increase from the previous year's 344
  - 2018/19 LSI's there was 1 – the previous year there had been 3
- 8.15. **Multi-Agency Public Protection Arrangements (MAPPA)**
- 8.16. A MAPPA training programme continues to be delivered with the purpose of increasing staff awareness focusing on a number of key themes. These sessions are designed to be delivered across all partner agencies. Ongoing work with Stop it Now and the Lucy Faithful Foundation continues to focus on the management of internet offenders and this, coupled with engagement with the Risk Management Authority, is allowing for the development of specific risk assessment frameworks focusing on internet offending and the management of such cases.
- 8.17. Additional staff awareness sessions have focused on understanding and managing personality disorder, investigating the use of electrical devices and input from the counter terrorism unit focusing on managing those with extremist views.
- 8.18. Following the introduction of the MAPPA extension Category 3 criteria, other Risk of Serious Harm Offenders continue to be managed in small numbers both in Glasgow and nationally. Such cases continue to be reviewed and monitored.
- 8.19. Ongoing work continues to be developed with the HSCP's Homelessness Services in securing permanent accommodation for registered sex offenders. This work is progressing in partnership with Registered Social Landlords and monitored via the

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NASSO Group. This will continue to be influenced by the implementation of the HSCP's 5 year Rapid Rehousing Transition Plan. This plan will also focus on managing prison release.

- 8.20. Glasgow has now introduced and evaluated a Block Profiling process with a key Registered Social Landlord. This test of change programme is designed to ensure that any void property that becomes adjacent to a registered sex offender is environmentally scanned and risk assessed. Following sign off, the Block Profiling process will be shared across all Registered Social Landlords.
- 8.21. Progress has also been made over the past year in relation to securing permanent accommodation for registered sex offenders. A process has been agreed with the Homelessness Team who in Glasgow are responsible for the submission of Section 5 applications and referrals continue to be submitted regularly, with the response from RSLs generally positive.
- 8.22. On 31st March 2016 Other Risk of Serious Harm Offenders were formally included in MAPPA. The Guidance defines the Other Risk of Serious Harm Offenders as those who, by reason of their conviction, are considered to pose a risk of serious harm to the public. Glasgow has managed a small number of these offenders through MAPPA during the last reporting year. There were a number of further referrals which although would meet the criteria for inclusion in MAPPA, were not released from custody. Numbers of offenders included in this MAPPA category remain small across the country.
- 8.23. **Homelessness**
- 8.24. The HSCP published the [Rapid Rehousing Transition Plan](#) (RRTP) in January 2019. The RRTP sets out the key strategic and operational objectives for the next 5 years and towards the delivery of a fundamental change in the provision of homelessness services in Glasgow.
- 8.25. In line with the new Scottish Government policy focus, the RRTP involves a shift to a rapid housing led response to homelessness as the immediate default solution and the expansion of the Housing First programme for those with multiple and complex needs.
- 8.26. The success of the RRTP is predicated on the collective and coordinated efforts of the 3 main sets of partners involved in addressing homelessness in Glasgow: the HSCP and the Council, the Housing Associations and the Third Sector. Resources provided by the Scottish Government to assist with the development of the RRTP have already been deployed to add organisational capacity to deliver on the partnership requirements of the plan.
- 8.27. The pressure on immediate access to appropriate temporary accommodation continues. The origin of this issue is clearly historic and systemic. The solution is twofold and integral to the RRTP. Firstly, a refocused and sustained commitment to the delivery of a consistent Housing Options approach across all the partner organisations as Glasgow's primary response to the prevention of homelessness. Secondly, where homelessness has not been prevented, to consciously design and deliver a housing led outcome solution for each homeless household as soon as the statutory homeless duty has been accepted.

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- 8.28. In addition, for those with multiple and complex needs, including those with a history of entrenched rough sleeping, the Housing First programme is already being expanded and this will continue for the period of the RRTP. Housing First significantly challenges established practice and tackles homelessness by shifting services from a tiered support approach to rapidly rehousing multiply excluded people in the community as the first rather than the last step.
- 8.29. Following the implementation of the RRTP, a particular focus on promoting the Housing First approach has resulted in no longer a need to open two 30 bedded units. Glasgow has reconfigured one existing emergency accommodation provision but the emphasis will now be on delivering an agreed Housing First named list as an appropriate destination for those with complex needs. This list includes those cases known to the City Ambition Network. Glasgow is now one of 5 Housing First Pathfinder cities.
- 8.30. Glasgow is in the process of developing a radical and ambitious Homelessness Alliance Commissioning framework that is expected to be implemented by early 2020 that will all for a 7-10 alliance that will focus on the priorities within the RRTP.
- 8.31. **Criminal Justice**
- 8.32. The North West locality in Glasgow are currently at the early stages of a small Restorative Justice Pilot and a working group has been set up to progress this with representation from Criminal Justice, Youth Justice, Community Justice Glasgow and the Police. This proposal to see restorative justice facilitated within the city of Glasgow has been informed by a number of sources, and perhaps most distinctly by Strathclyde University's Restorative Justice & Practices Foundation Skills Intensive Programme. Two qualified Social Work staff in the HSCP have completed this training.
- 8.33. The working group is currently looking at the regulated values and ethics, common principles, measured standards and statutory guidelines to inform the collective practice around restorative justice as well as the practical supports required to take the pilot forward.
- 8.34. As part of the HSCP's commitment to participate in a Scottish Government supported pilot to deliver trauma informed training there has been a key emphasis on enhancing training for criminal justice staff in trauma and adversity with the aim of preventing further harm and support recovery in ways which address inequalities and improve life chances.
- 8.35. The Caledonian System is an accredited integrated approach to address men's domestic abuse and to improve the lives of women, children and men. Utilising a trauma informed and evidence based approach, it represents a fundamentally different way of managing perpetrators of domestic abuse in the community. A centralised team comprising of social work and ASSIST staff have responsibility for delivering the system which supports the wider strategic aims of the HSCP in reducing violence to women. The team have been operational since March 2019.
- 8.36. We have completed a joint review of the Positive Outcome Project (POP) with our partners in Police Scotland and have recruited a lived experienced mentor to

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assist us with engaging service users who have not worked with services for some time. The mentor has proven to be a valuable member of the team, by virtue of their lived experience, and they have been able to guide and support service users through the court process and assist them to access recovery from drug and alcohol misuse. We also trained the POP team in the Justice Outcome Star Tool in August 2019 which will provide staff with a useful tool to work with service users to identify needs and formulate action plans. The tool will also allow us to gather rich data on identified needs for this service users and will allow us to track their journey of change.

- 8.37. The Criminal Justice Glasgow transition arrangements are now embedded within Glasgow Community Planning Structures and, on a national level, are aligned to the Criminal Justice Scotland national objectives including the introduction of a performance outcome framework.
- 8.38. Community Payback, and in particular Unpaid Work, continues to be a priority for Community Justice Services. Following the review of Unpaid work provision continued engagement with commissioned services and Third Sector partners has ensured a consistent approach and enhanced opportunities for both squad and personal placements.
- 8.39. With the introduction of the Presumption of Short Term Sentences early intervention and prevention will be key priorities. Glasgow has re-established Bail Supervision as well as maintaining Diversion and Structured Deferred Sentence options. Within the last 12 months Glasgow has also introduced an Alcohol Court.
- 8.40. Women within the Justice System continues to remain a priority. The Community Justice Centre (Tomorrow's Women Glasgow) remains integral to supporting and managing women within the Justice System. Additionally, a specific locality model working with women is being reviewed to determine feasibility of citywide roll out. These initiatives will also be aligned in preparation for the Scottish Prison Service implementation of a Community Custody Unit in the city by December 2020.

## 9. Workforce Planning and Development

- 9.1. Staff within Glasgow City Health and Social Care Partnership (HSCP) – our people – are integral to our success and particularly the success of our transformational journey.
- 9.2. As at December 2018, Glasgow City HSCP had a workforce of 10,058.84 Whole Time Equivalent (WTE) staff, made up of 5,795 WTE employed by Glasgow City Council and 4,263.84 WTE employed by NHS Greater Glasgow and Clyde. The significant majority of staff work directly with patients, service users, carers and their families to support them. The significant increase (+63%) in Glasgow City Council WTE staff compared to the previous report is due to the transfer of Cordia LLP care at home services into the HSCP which took place in September 2018.
- 9.3. At the heart of Health and Social Care Integration is shifting the balance of where and how care and support is delivered from hospital to community care settings, and to individual homes when that is the best thing to do. The Partnership has developed a three year Workforce Plan for 2019-22 will support the redesign of

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services around communities and ensure that they have the right capacity, resources and workforce. The Workforce Plan is reviewed on an annual basis.

- 9.4. The Workforce Plan details the key drivers and demands on each of the care groups and the response to these in line with the priorities laid out in the Strategic Plan 2019-22. This includes the care services that transferred from Cordia LLP.
- 9.5. To support Glasgow City HSCP's workforce through service redesign, integration and transformational change programmes, our organisational development approach is fundamental to building a culture of shared objectives and close partnership working. An Organisational Development Plan (which is part of the Workforce Plan) for Glasgow City HSCP is in place, focussing on four strands:
- culture
  - service improvement and change
  - establishing integrated teams and
  - leadership development.
- 9.6. The Workforce Plan details the key drivers and demands on each of the care groups and the response to these in line with the priorities laid out in the Strategic Plan 2019-22.
- 9.7. In September 2018, approximately 2,300 WTE care services staff previously employed by Cordia (Services) LLP transferred into Glasgow City Council under the management of Glasgow City HSCP. These staff cover a range of services and functions, including:
- all home care services
  - assessment and review
  - community alarms
  - all home care operational support staff
  - EquipU
  - stair lifts / ceiling track hoist services
  - transport and support service (TASS)
  - EquipU and TASS – operational support staff
  - transport and fleet management and
  - linguistics.
- 9.8. Following the transfer into the service, there was (and continues to be) been a particular focus on harmonisation of working arrangements, communicating changes to staff and planning for potential changes that may result from the equal pay settlement.
- 9.9. The Chief Social Work Officer remains a member of the senior management team of the Glasgow City Health and Social Care Partnership, with professional social work representation on the senior management team of each locality, which ensures a strong link between the Chief Social Work Officer and front line staff. The executive management structure of the Glasgow City HSCP can be viewed [here](#).

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### 10. Looking Forward

- 10.1. The population of Glasgow City is projected to increase by 7.1% over the period 2016-2041 (NRS 2016 population projections).
- 10.2. Mirroring national trends, the population of Glasgow is ageing. As shown above, it is anticipated that there will be increases in the older people population (65+) of 14.4% between 2016 and 2026; and 43.4% between 2016 and 2041. The increase in the 75+ population is expected to be even higher, at over 54.8% between 2016 and 2041.
- 10.3. A lower increase (1.1%) in the adult population (16-64) is expected between 2016 and 2041, although the number of adults is expected to fluctuate in the intervening years.
- 10.4. The child population (0-15) is projected to increase by 6.7% between 2016 and 2026, after which it is likely to decrease steadily giving an expected overall rise between 2016 and 2041 of 2.6%.
- 10.5. As noted in last year's report, the economic and political picture across the United Kingdom continues to have an impact on health and social care in Glasgow, for example through an increasing number of individuals and households experiencing financial difficulty and risk of homelessness due to the ongoing programme of welfare reform. Universal Credit continues to be rolled out in Glasgow, and the HSCP continue to monitor the impact on some of the city's most vulnerable people, as this may lead to more demand on health and social care services.
- 10.6. As noted in last year's report the risks arising from the UK's exit from the European Union are likely to impact on health and social care in Glasgow. The projected economic impact will inevitably have an impact on public sector finances. Glasgow City Council and NHS Greater Glasgow & Clyde established contingency planning groups for EU Exit early in 2019, and these continue ahead of next scheduled exit date of 31 October. Particular areas of risk to health and social care that have been identified are medicine and medical supplies shortages, disruption to supply chains and increased costs of supplies, the impact on EU nationals in the health and social care workforce and the potential impact on the independent and 3<sup>rd</sup> sector health and social care and what the resulting impact of failures in this sector will mean for local authorities and health boards.
- 10.7. Over three years in to the integration of health and social care, it is clear that significant progress has been made in that time however there is further work to be done. This is reflected in the results of the [self evaluation](#) carried out by the Integration Joint Board following the [review of the progress with integration of health and social care by the Ministerial Strategic Group for Health and Community Care](#).

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- 10.8. There is a strong culture of joint working established in some key areas across the Partnership, and that is developing in others. Glasgow City IJB has demonstrated there is a will to deliver the transformation of health and social care, and the hard work that is necessary to deliver on that shared commitment is being applied by all of our staff on a daily basis.

## **11. Recommendations**

- 11.1. The Integration Joint Board is asked to:
- a) note this report; and
  - b) note that the Chief Social Work Officer report has been submitted to the Scottish Government.

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