



**Item No. 11**

**Meeting Date Wednesday 13<sup>th</sup> December 2023**

**Glasgow City  
Integration Joint Board  
Finance, Audit and Scrutiny Committee**

**Report By:** Jacqueline Kerr, Assistant Chief Officer, Adult Services / Interim Chief Social Work Officer

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**Clinical and Professional Quarterly Assurance Statement**

**Purpose of Report:** To provide the IJB Finance, Audit and Scrutiny Committee with a quarterly clinical and professional assurance statement.

**Background/Engagement:** The quarterly assurance statement is a summary of information that has been provided and subject to the scrutiny of the appropriate governance forum.  
  
The outcome of any learning from the issues highlighted will then be considered by relevant staff groups.

**Governance Route:** The matters contained within this paper have been previously considered by the following group(s) as part of its development.  
  
HSCP Senior Management Team   
Council Corporate Management Team   
Health Board Corporate Management Team   
Council Committee   
Update requested by IJB   
Other   
Not Applicable

**Recommendations:** The IJB Finance, Audit and Scrutiny Committee is asked to:  
  
a) consider and note the report.

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**Relevance to Integration Joint Board Strategic Plan:**

Evidence of the quality assurance and professional oversight applied to health and social care services delivery and development as outlined throughout the strategic plan.

**Implications for Health and Social Care Partnership:**

**Reference to National Health & Wellbeing Outcome:**

Contributes to:  
Outcome 7. People using health and social care services are safe from harm.  
Outcome 9. Resources are used effectively and efficiently in the provision of health and social care services.

**Personnel:**

The report refers to training and development activity undertaken with staff.

**Carers:**

Offers assurance to carers that quality assurance and professional and clinical oversight is being applied to the people they care for when using health and social care services.

**Provider Organisations:**

None

**Equalities:**

None

**Fairer Scotland Compliance:**

None

**Financial:**

None

**Legal:**

None

**Economic Impact:**

None

**Sustainability:**

None

**Sustainable Procurement and Article 19:**

None

**Risk Implications:**

None

**Implications for Glasgow City Council:**

None

**Implications for NHS Greater Glasgow & Clyde:**

None

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### 1. Purpose

- 1.1 To provide the IJB Finance, Audit and Scrutiny Committee with a quarterly clinical and professional assurance statement.

### 2. Background

- 2.1 This report seeks to assure the Integration Joint Board that clinical and professional governance is being effectively overseen by the Integrated Clinical and Professional Governance Board, chaired by the Chief Officer.
- 2.2 This report provides the IJB Finance, Audit and Scrutiny Committee with information collated up to September 2023 (attached at Appendix 1 for easier scrutiny). This cover report also provides an opportunity to offer more detail on issues relating to particular incidents and cases.
- 2.3 The most recent quarterly clinical and professional assurance statement was provided to the IJB Finance, Audit and Scrutiny Committee on [13 September 2023](#).

### 3. Integrated Clinical and Professional Governance Board

- 3.1 The Integrated Clinical and Professional Governance Board allows further scrutiny of the minutes from the following Governance meetings:
- Social Work Professional Governance Sub-Group
  - Children & Families Clinical and Care Governance Leadership Group
  - Older People & Primary Care Clinical and Care Governance Leadership Group
  - Adult Clinical and Care Governance Group
  - Mental Health Quality & Clinical Governance Committee
  - Police Custody Healthcare Clinical Governance Committee
  - Prison Healthcare Clinical Governance Committee
  - Homelessness and Complex Needs Governance Group
  - Sexual Health Governance Group.
- 3.2 The HSCP, through the Integrated Clinical and Professional Governance Board, and the other governance fora, continues to emphasise the need to embed a reflective, quality assurance expectation within all sections of the HSCP.

### 4. Significant Case Reviews (SCRs) / Learning Reviews and Significant Adverse Event Reviews (SAER) activity summary

- 4.1 The Adult Support and Protection Committee's (ASPC) Quality Assurance Sub-group is in the process of reviewing progress on the action plan and will report directly to Chief Officers Group.
- 4.2 The action plan for the Adult B SCR has been reviewed, with a further review to be scheduled. The ASPC's Quality Assurance Sub-group is exploring self-evaluation activity to measure the impact and outcomes of the improvement activity.

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- 4.3 The action plan for the Child D SCR has been reviewed. The Child Protection Committee's (CPC) Quality Assurance Sub-group is exploring self-evaluation activity to measure the impact and outcomes of the improvement activity.
- 4.4 Local governance processes for the joint learning review with South Lanarkshire (Family A) are complete in both authority areas. The Child Protection Committees are in the process of devising their publication and dissemination strategies and learning materials, and improvement plans.
- 4.5 The report for the Child H Learning Review is anticipated shortly.
- 4.6 The report for the Child S Learning Review is anticipated shortly.
- 4.7 The thematic reviews (Care-experienced Young People, and Young People & Domestic Abuse) and the scoping for a further thematic review (Maternal Deaths) are in progress.
- 4.8 Six new learning reviews have been commissioned (Adult V, Adult W, Child AD, Child AE, Family B, and Deaths in Emergency Accommodation) and review teams have been established.
- 4.9 In respect of raising awareness of the learning review protocol and processes, a second series of multi-agency briefings is underway and will be completed by December 2023.

## 5. Multi-Agency Public Protection Arrangements (MAPPA)

- 5.1 The MAPPA Glasgow and National Annual Report was published on [27 October 2023](#). The MAPPA Glasgow Annual Report evidences that Glasgow continues to exceed performance indicators outlined within the National MAPPA Guidance (2022). In addition, within the report, it is notable that there was an increase of 33 category 1 offenders at liberty in comparison to last year. In relation to the management of category 1 offenders, there was an increase in Level 2, this amounted to a 30% increase from 9 category 1 level 2s to 15 by the end of the reporting year. For category 3 offenders managed at level 2, by the end of the reporting year there was an increase from 4 to 9. There has been an increase in community disposal cases managed under this category who have required active multi-disciplinary management due to the risk of serious harm presented. Presently within Glasgow, there is 1 active category 3 offender managed at level 2, and in terms of category 1 there is 1 case managed at level 3, and 6 cases managed a level 2.
- 5.2 Following the publication of the Significant Case Review (SCR) on Person H, the Strategic Oversight Group established an Implementation Group to take forward the learning and recommendations. The group consists of key representatives from each of the MAPPA responsible authorities, as well as MAPPA representatives from Scottish Government. Positive progress continues to be made in taking forward the learning from the SCR.
- 5.3 Audit activity on MAPPA cases and the use of the Violent and Sex Offender Register (ViSOR) for Criminal Justice Social Work (CJSW) users continues to be completed. The findings of audits are shared via the responsible authority representatives who sit within the audit group to support continued positive

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practice. In addition, a ViSOR user group remains on-going to support CJSW users in newly assigned tasks within ViSOR.

- 5.4 There remains ongoing consultation to support the development of Multi Agency Public Protection System (MAPPS) which is scheduled to replace ViSOR in 2025. The Scottish Government continue to hold meetings to enable the system to be considered from a Scottish Perspective.

## 6. Prevent

- 6.1 Prevent is a national UK government policy, part of the overall counter-terrorism strategy, CONTEST. The prevent aspect aims to safeguard and support those at the stage of being identified as vulnerable to radicalisation. Prevent is an enhanced multi-agency approach with all local authorities taking responsibility for delivery of the Prevent Multi-Agency Panel (PMAP) processes for their area. Glasgow City HSCP is the lead for Glasgow and a Prevent business meeting has been established.
- 6.2 The Prevent Group report into the Chief Officers Group; Glasgow City Council; Adult Support and Protection Committee; and Adult Services Governance Group in Glasgow City HSCP on a routine basis and will be providing an overview of work undertaken in the period and highlighting areas of progress, risks and points of escalation.
- 6.3 In the last quarter, there were four individuals in the Prevent Multi-Agency Panel space in Glasgow. Of the active cases, all are of an extreme right-wing ideology and are male. Two are children and two are adults. There are a further 5 individuals whose cases are closed but in the case closure review stage.
- 6.4 Glasgow's PMAP panel has been chosen as Scotland's pilot area for the Channel evaluation being conducted by IPSOS and University College London (UCL) on behalf of the Home Office. Glasgow's Prevent Co-ordinator is currently collating all documentation required to assist with the evaluation and will be involved throughout the process. A meeting is planned with Police Scotland to look at how they can support the evaluation.

## 7. Self-evaluation Activity

- 7.1 A Joint Self-Evaluation for Adult Support and Protection (ASP) was undertaken in December 2022 and findings shared at both ASP Committee and a previous report to Committee ([June 2023](#)). The findings of the Joint Self-Evaluation were generally positive, helping to reiterate the findings of the National Thematic ASP Inspection. The Joint Self Evaluation (December 2022) also helped to identify key priorities to help drive practice standards and this resulted in an Improvement Plan which focused on the following; Improving the recording of significant Life Events (Chronology); the wider Case Conference process (in terms of more accurate recording of attendees and any reasons for non-attendance) and; greater involvement of frontline staff within improvement planning.

The related ASP Improvement Plan has been progressed via the ASP Committee and has helped drive the development of a new Chronology course for frontline staff (with particular focus on Life Event recording), amendments to ASP e-forms to ensure mandatory recording of the adult's attendance and

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reasons for any non-attendance (went live on the 30 October 2023), and the use of focus groups to help embed the views of staff within self-evaluation activity.

- 7.2 The Joint Evaluation programme involves a commitment to an annual audit which is jointly planned and undertaken by Health, Social Work and Police. The next Joint Evaluation is due in December 2023. The methodology involves use of a comprehensive audit tool based upon the approach taken in the National Thematic Inspection, with some additional focus on locally driven priorities. The Research Officer has drawn the audit sample from ASP referrals received between January to June 2023, where referral source is Health or Police. Health cases excludes cases where the referrer has been the GP, NHS24, or Ambulance Service, due to difficulties experienced by file readers when looking to access these information systems (an issue that we will look to address for future audits). A total sample of 63 cases have been identified, involving 20 that have ended at Duty to Inquire stage and 43 that have progressed at least to investigation stage (which covers all Police/Health referrals that went to investigation stage within that time-period). The file reading will involve looking at case recordings across Health, SW and Police records.
- 7.3 Additionally, we have introduced a staff survey to help gather the views of staff across the three agencies that are involved in our ASP arrangements. The survey is open for a three week period and has been sent to all staff within the HSCP (survey closed on 10 November 2023). The addition of a staff survey is aimed at strengthening the involvement of front line staff within improvement planning. The aim will then be to hold staff briefings to help share the outcome of the Joint Evaluation and raise awareness of any positive findings and priority areas for improvement.
- 7.4 A Short Life Working Group has also been convened to help monitor adult participation within ASP and actively seek service user feedback. This includes strengthening recording arrangements so that ASP data linked to participation will be added to the suite of performance management information and related governance arrangements. Awareness raising has also been undertaken with staff involved in frontline ASP delivery, and the Advocacy Project, to help promote the use of the service user questionnaire. This has resulted in a marked increase in completed questionnaires albeit still within a low range (only two completed questionnaires were received from service users in the whole of 2022 – this has increased to eleven by June 2023). The feedback has been analysed and mid-point report submitted to the ASP Committee. The following feedback has been received from service users who had experience of our ASP processes:
- 92% of respondents were advised of advocacy services
  - 100% of respondents advised that they were encouraged to give their views
  - 75% felt that they were listened to
  - 67% felt that they benefitted from their ASP involvement
  - 58% were provided with an information leaflet to help explain ASP.

The aim is to continue to develop our monitoring of adult participation and provide a twice-yearly report to help quality assure actions taken to support meaningful adult participation.

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### 7.5 Assurance Areas

- 7.5.1 **Workforce Registration** - Workforce registration issues, including conduct and fitness to practice information, are reported to the relevant Governance groups. Where necessary detail is also provided to the Integrated Clinical and Professional Governance Board.
- 7.5.2 **Healthcare Associated Infection** - Matters associated with healthcare associated infection are routinely tabled during the Integrated Clinical and Professional Governance Board.
- 7.5.3 **ASP Minimum Dataset** - This involves the introduction of new reporting arrangements to Scottish Government for ASP to help support more accurate benchmarking and identification of trends. We have now submitted ASP data for the first two Quarters (April to June 2023 and July to Sept 2023) looking at a new range of indicators. A notable change is the shift to ASP inquiries with and without the use of investigative powers under s7 to s10 of the ASP Act (visits, interviews, medical examinations and examination of records). The ASP data for Quarter 1 noted total ASP referrals of 2863 and Quarter 2 submission noted 2929 ASP referrals. Nationally, it is recognised that Local Authorities are within the transition period to help provide more accurate information which will facilitate improved benchmarking and priority setting.

### 8. Child Protection Updates

#### 8.1 National Guidance for Child Protection in Scotland 2021 was published in September 2021

- The child protection team have developed an implementation plan that includes an update of the Glasgow SWS Child Protection Procedures based on the information contained in the national guidance and the findings from the consultations that have taken place with children and families staff across Children's Services staff groups and grades. Heads of Service also attended the consultations.
- A working group led by the Principal Officer, Child Protection, has been established and completed the first draft of Glasgow's Child Protection Procedures, in consultation with Children's Services, and partner agencies. The final draft will be considered via the Chief Officers Group, Social Work Governance Board, Child Protection Committee and key partners in advance of final approval. Implementation planning will follow thereafter.
- Concurrent to this, there is a plan to consult with our partners in the child protection sphere, to hear their experience of the process and listen to any suggestions that would enable Glasgow to promote best practice.
- The Social Work Practice Audit Team have completed the final draft of the Child Protection practice in the city, which was approved at the Child Protection Quality Assurance Sub-Group and Child Protection Committee. The draft will be considered via the next CP Quality Assurance Group.

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- A self-evaluation tool has been co-produced by the Monitoring and Evaluation subgroup of the National CP Guidance Implementation Group, which is to be completed in November. The tool has been developed to assist in the reporting of the implementation of the revised National Guidance. The Child Protection team in conjunction with the Lead Officer from the CPC, facilitated a session with multi agency representation to assist with the completion of the tool.

### 8.2 Scottish Child Interview Model (SCIM)

- The Glasgow Child Interview Team (GCIT) was established in October 2021. This is a joint team of social workers and police officers who are trained in the SCIM model and have begun to implement this model of joint investigative interview.
- The GCIT currently undertake 50 to 60% of the Joint Investigative Interviews in the city, and there is an ongoing recruitment plan in place to reach the aspiration for all children in Glasgow to be interviewed using this model.
- There is oversight of the implementation of the model and the team via the Strategic and Operational groups established to take forward and roll out the model across Glasgow.

### 8.3 Devolved Decision Making (DDM) Pilot, National Referral Mechanism, (NRM)

- There has been agreement that Glasgow's participation in the pilot will be extended for a further year, until March 2024. Ten further Local Authorities in Scotland had noted interest in being part of the pilot, as the Home Office were seeking a further 10 sites across the UK. However disappointingly no other LA in Scotland was successful.
- There is an ongoing programme of training from the Home Office for DDM decision makers, to ensure there is ongoing capacity for decision makers for the future.
- The feedback we have received from the Home Office to date remains positive, in that the quality of the decisions Glasgow are making are above average. We have also improved on our timescales for organising meetings and returning decisions to the Home Office, which we hope to achieve through the additional training for decision makers.

### 8.4 Inspection Preparation

- Preparation for inspection of Children's Services continues to be a priority in anticipation of notification for inspection including:
  - Strategic Meeting – Chief Social Work Officer
  - Operational meeting – Chaired by Assistant Chief Officer Children's Services
  - Children's Services Inspection plan, highlighting Key Inspection areas, Strengths, and Areas for Improvement. Led by Principal Officer for Child Protection, Lead Officer for CPC and Head of Planning (Children's Services & North East).

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### 9. Recommendations

9.1 The IJB Finance, Audit and Scrutiny Committee is asked to:

- a) consider and note the report.

**Significant Adverse Event Review Quarterly Reporting  
June - September 2023**

Service	Number of Significant Adverse Event Reviews Commenced in reporting period (1 June – 30 September 2023)	Number of Significant Adverse Event Reviews Concluded in reporting period (1 June – 30 September 2023)	Number of active Significant Adverse Event Reviews Ongoing as at 30 September 2023
Addictions	3	2	12
Children and Families	2	2	15
Homelessness	0	0	0
Mental Health Services	5	20	47
Older People and Primary Care	1	1	11
Police Custody Healthcare	2	0	0
Prison Healthcare	0	0	11
Sandyford	0	0	2