Item No: 12

Meeting Date: **Wednesday 29th November 2023**

Glasgow City Integration Joint Board

Report By: **Jacqueline Kerr, Interim Chief Social Work Officer**

Contact: **Jacqueline Kerr**

Phone: **0141 314 6250**

Chief Social Work Officer Annual Report 2022/23

Purpose of Report:	To present the annual report from the Interim Chief Social Work Officer for the year 2022/23, prepared in line with interim guidance for the 2022/23 report provided by Scottish Government.

Background/Engagement:	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. The Chief Social Work Officer (CSWO) is required to produce an annual report, following Scottish Government guidance for submission to the Scottish Government.

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 ☒ Wellbeing, Equalities, Communities, Culture and Engagement City Policy Committee Update requested by IJB ☐ Other ☒

	Social Work Professional Governance Board Not Applicable ☐
Recommendations:	The Integration Joint Board is asked to: a) note the report; and b) note that the Interim Chief Social Work Officer report has been submitted to the Scottish Government.

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.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	Supports achievement of all National Health & Wellbeing Outcomes
Personnel:	None
Carers:	None
Provider Organisations:	None
Equalities:	None
Fairer Scotland Compliance:	None
Financial:	None
Legal:	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.
Economic Impact:	None
Sustainability:	None
Sustainable Procurement and Article 19:	None

Risk Implications:	None.

Implications for Glasgow City Council:	This report must be considered by Glasgow City Council.

Implications for NHS Greater Glasgow & Clyde:	None.

Direction Required to Council, Health Board or Both	
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. Governance, Accountability and Statutory Functions

1.1 Role of the Chief Social Work Officer

1.1.1 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.

1.1.2 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.

1.1.3 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

1.1.4 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.

1.1.5 The format for this report is in line with guidance that was issued in June 2023 by the Office of the Chief Social Work Adviser to the Scottish Government.

1.2 Governance and Accountability

1.2.1 Social Work Services are 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, Police Scotland, the third and independent sectors and service users and carers.

1.2.2 The Glasgow City Integration Joint Board (IJB) was established in February 2016, with a significant range of health and social care functions delegated to it from the Council and Health Board. It is a key priority for the Integration Joint Board and the Glasgow City Health and Social Care Partnership (HSCP) to ensure that relationships with key partners are strengthened through the integration of health and social care.

1.2.3 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 organisation and key partnerships which ensures a professional social work perspective on all strategic and operational decisions.

1.2.4 The Chief Social Work Officer, is a member of the Health and Social Care Partnership Senior Management Team and the Council Management Group, holding lead corporate responsibilities on key service reform areas, a significant involvement in budgetary decisions of the service and of the council as a whole as they relate to social care functions. The executive management structure of the Glasgow City HSCP can be viewed here.

1.2.5 Within Glasgow, the Chief Social Work Officer chairs the Social Work Professional Governance Board, which has professional leads from the three localities plus frontline staff and a range of key stakeholders including Universities and regulatory bodies. The Social Work Professional Governance Board looks at all areas of Social Work practice including policy development, outcomes of inspections of registered services, training and development, research and audit and workforce profile including registration. The Terms of Reference are attached at Appendix 1.

1.2.6 The Chief Social Work Officer works closely with Elected Members and Council committees as necessary to ensure appropriate scrutiny of social work 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 work services.

1.2.7 The Chief Social Work Officer also plays a significant role in the City's new enhanced care home governance arrangements which were put in place in 2021. These arrangements ensure that the Care Home sector within the City is supported to deliver high quality care services.

2. Service Quality and Performance/Challenges and Improvements

2.1 Health and Social Care Connect

2.1.1 A new front door Social Work Service was developed across the City in November 2022 called Health and Social Care Connect (HSCC). This service has been initially launched as the front door entry to Social Work Services with the plan to develop the service as the front door entry to some community health services.

2.1.2 This change to service delivery built on our previous Social Care Direct service and was in direct response to the increased demand on statutory services alongside a review of research on effective delivery models. The aim and vision for HSCC is to reform, integrate and improve first contact arrangements for health and social care referrals across a significant number of social work, social care and health services.

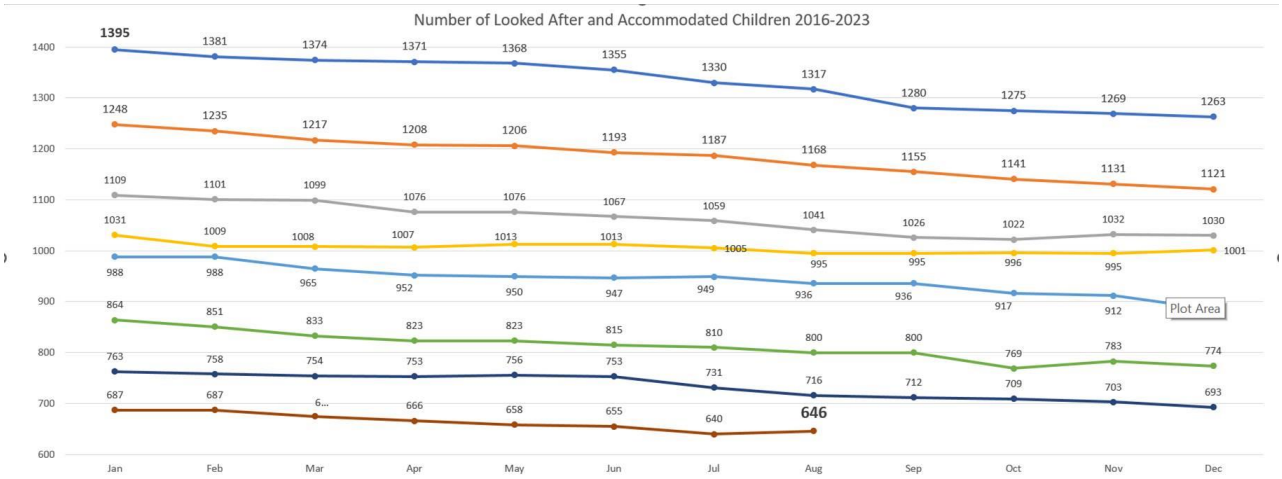
2.1.3 The main function of HSCC is to maximise independence, focus on prevention, develop early intervention approaches and embed wellbeing conversations ensuring people's needs are matched to the 'right service at the right time'. HSCC are now working in a different way to reduce the demand for statutory services by carrying out proportionate assessments and connecting people to community, 3rd sector resources and commissioned services where appropriate.

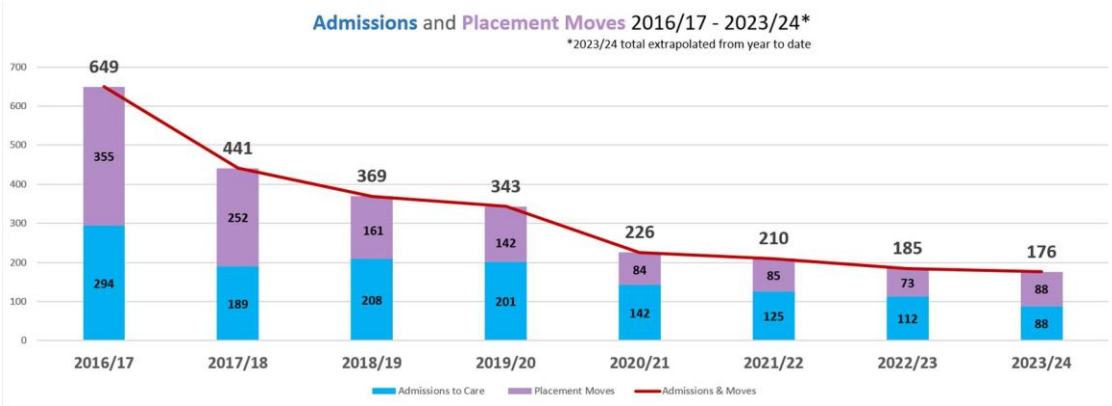
2.1.4 HSCC is already seeing early evidence of the positive impact of this approach. Having a multi-disciplinary team of practitioners and clinical staff such as occupational therapists, social workers, social care workers allows for a quick response to referrals to better address risk and need. HSCC's ability to link people into local services is a key component of the delivery model to prevent recurring referrals, unnecessary contact with statutory services and ensure people are enabled to make decisions about their support needs and live independently.

2.2 Children Services

2.2.1 **Shift towards Early Intervention and Prevention**

Despite the ongoing challenges associated with the impact of the pandemic and Cost of Living crisis, the service has continued to make significant progress in relation to shifting the balance of care, ensuring that more children are sustained with their parents, extended families and attending local schools and remaining connected to their local neighb ourhoods. This has been achieved by working alongside families, supporting families to identify their strengths, and developing a plan to support meaningful change by treating families as experts in their own lives and circumstances. Issuing direct payments to families – to address the Cost of Living crisis and the ongoing impact of the pandemic – has also helped to build trust and widening access to Section 22 funding to Health Visitors is also increasing the range of early help available to alleviate families' stress and distress.





2.2.2 Children Services have seen a significant reduction in their looked after and accommodated children and young people numbers and the current population is 646 compared to 1395 in 2016. This has been down to a significant investment in intensive family support and addressing childhood poverty and promoting early help.

2.2.3 The Glasgow Promise Board has been working to implement the recommendations of the Promise across the partnership. Activities over the course of the last year include:

- Commissioning of a comprehensive plan, which is benchmarked against the Promise
- Co-ordination of a workshop with the national Promise Implementation Team, which was attended by 60 key leaders and partners across the Community Planning Partnership
- Engagement with the national team and redesign team in the Glasgow change programme
- Support with the development of Promise Participation Workers, with care experienced individuals encouraged to apply, to strengthen participation and voice in the design and delivery of services
- Delivery of a Promise conference for all Head Teachers in the City

2.2.4 To help with the implementation of Glasgow's Promise Action Plan, four Promise Participation workers have been recruited to support a range of workstreams, with the role of ensuring meaningful involvement of children, young people and their families in decisions that affect them and in the shaping of our services.

2.2.5 **Integrated Children's Services Plan**

Following a creative engagement process with children and young people in schools and community group settings, the Children's Services Plan has been refreshed for 2023 – 2026. Due to feedback received, the new priorities broadly reflect those which have been driving work across the partnership from 2020 – 2023, with a new priority introduced specifically focused on addressing poverty in light of the impact of the pandemic and the Cost-of-Living crisis.

The draft Plan was presented to IJB in September 2023 and Education and Skills Committee in November 2023 for final approval.

Workshops are being carried out with groups of staff across the HSCP to consider how their current work relates to the priorities, exploring strengths and gaps in order to continue to strengthen efforts to improve outcomes for children, young people and families.

2.2.6 **Whole Family Wellbeing Fund (WFWF) and the Child Poverty Pathfinder**

Work has continued over the past year to align funding and policy associated with the Whole Family Wellbeing Fund and Child Poverty Pathfinder in order to maximise the benefits of the spend for families. This has involved building readiness across the system to develop a more integrated system of support for families at the earliest point, with opportunities for families to move into employability pathways.

A workshop took place in April 2023 with Scottish Government, HSCP, Council Corporate Services, Education and third sector representatives to explore ideas for creating more seamless pathways of support for families. This work highlighted the diversity of perspectives and complexity of the work to align the system of support for families. Considering the different and multi-perspective approaches to change across the system, a structured programme of work has begun to create a collective vision, shared language, and consistent approach to implementing improvements across the children's services system, which is being overseen by the WFWF Board chaired by the Chief Executive of the Council.

2.2.7 **Current Operational Pressures**

The continuing financial context is pushing up demand across all sectors, with support for families with no recourse to public funds a significant and growing challenge for the Service. The service continues to see increased referrals for children and families who require support and advice from Social Work

Services. Monthly referrals grew from 1287 in January 2022 to 1561 in June 2023.

2.2.8 Residential Care

The Residential Services team has introduced the Nurture Framework, currently utilised in Education Services, to support the development of Trauma-Informed Practice in Glasgow's Children's Residential Houses.

The outcomes that have been achieved to date include:

- Reduction of more than **50%** in the number of violent incidents in our children's houses since the introduction of the training in February 2022.
- Reduction in the number of physical restraints by a 1/3 since the introduction of the training in February 2022.
- Reduction in the number of placement breakdowns in Children's Houses
- Developing residential practice which is evidence informed and trauma based.
- Delivering the aspirations of The Promise, and improving Glasgow's children and young people's experience of their care journey
- Supporting Innovation within children's houses through the development of Nurture spaces, and integration of nurture principles into daily logs.
- Utilising the nurture framework to explore the relationship between containment, staff well-being and attendance at work.

2.2.9 Foster and Adoption Services

Both the fostering and adoption service were inspected by the Care Inspectorate in June 2023. The services were graded as 3 – adequate. While there was some positive feedback, there were a few requirements and areas for improvement. The Fostering Service is working on a detailed action plan which will focus on the requirements outlined in the Care Inspectorate report. These will include the development of a new Complaints Procedure, the development of an Appraisal System for Panel Members and the development of an Adult placement service for young people over 18 years.

The Adoption Service is also developing an action plan in relation to the requirements of the inspection which will include the management of transitions between placements, supporting the development of permanency planning practice in local areas, the development of consistent life story practice and the strengthening of post adoption support to all children.

2.2.10 Ukraine/Unaccompanied Asylum Seeking Children

The service continues to support families settling in Scotland following the war in Ukraine, and unaccompanied asylum seeking children and young people. The service is currently supporting a large number of families, who have no recourse to public funds. This has put significant challenge into the system in relation to finance as well as providing ongoing Social Work support to these families.

2.2.11 **Martha's Mammies**

Martha's Mammies is a new service introduced in Glasgow in November 2022 working with women who have lost care of their children. The project aims to develop a relationship-based partnership with women which helps women to identify their own needs and goals.

Prior to the implementation of Martha's Mammies, women who had lost care of their children in Glasgow had limited specialist support to support them with the grief and loss that inevitably followed. The team aims to develop a relationship-based partnership with women which helps them to identify their needs and goals to stabilise personal and social circumstances through practical assistance, advocacy, and support.

Martha's Mammies is a multi-disciplinary team who will work with small caseloads of women to offer flexible, intensive, and adaptive support to respond to the needs of individual women. It has in-reach physical, sexual and mental health and wellbeing services and therapeutic groupwork. The team will work with women towards emotional wellbeing, repair, and recovery and to assist them to find ways of making sense of their experiences and living with their loss of their children.

2.3 **Adult Services**

2.3.1 The demand for Adult and Older People's Social Work Services continues to increase post pandemic. New referrals for both service areas were at 1110 per month in January 2022 and are now averaging at 1334 in June 2023.

2.3.2 **Mental Health**

Social Work play a key role in the Mental Health Integrated Discharge Teams (MHIDT) and these teams continue to have a positive impact on patient flow within Mental Health Hospitals despite significant bed pressures. Social Workers and Discharge Co-ordinators within these teams continue to successfully facilitate discharge and interface positively with Community resources.

Glasgow, in accord with many other Local Authorities, continues to be challenged by the availability and capacity of Mental Health Officers (MHO). As a consequence, we have continued to actively recruit successfully to these specific roles. We have also encouraged existing Social Workers within Glasgow to undertake MHO Training. During the coming year we expect to gain 10 new MHO's from this initiative.

We have a well-developed MHO governance and support structure. Both an MHO Governance Group and MHO Forum are in place to support practice and performance.

During the last year we have also appointed a Lead MHO for Glasgow in order to further enhance professional practice and strategic development in the city.

An MHO Staffing Structure Working Group reporting to the Social Work Governance Group has recently been established. This is tasked with developing potential alternative MHO staffing models by:

- Completing an audit of current MHO Workload across the city. This will assist in understanding current demand and any implications for non-MHO work should structures change.
- Examining whether MHO workflow, support and governance can be improved by any structural changes.
- Considering which model will best support the retention and recruitment of MHOs
- Considering whether dedicated leadership and management for MHOs would be of benefit
- Considering whether current deployment and utilisation of MHOs across individual care groups is sufficient to meet service need and strategic objectives.

The Group will report in early 2024.

A joint audit is being is currently being undertaken between Health and Social Work to better understand the number of Emergency Detention Certificates (EDCs) issued without MHO consent. This will report in November 2023 and assist us in developing actions to improve practice where required.

Social Work Staff have increasingly returned to physical co-location within Community Mental Health Teams during the last year. This has further enhanced partnership working through the Multi-Disciplinary Team approach for patients experiencing mental illness.

More widely, our Social Work Teams in Mental Health continue to work diligently to support a wide range of service users with their mental health needs. Despite current financial challenges and the reduced availability of third sector supports our staff have continued to assess need in an equitable way. In turn they have continued to be successful in developing effective support plans in partnership with service users and their carers.

Social Work Services have been actively involved in the development of the NHS Greater Glasgow and Clyde Mental Health Strategy Refresh 2023-2028. This document can be accessed here: A Refresh of the Strategy for Mental Health Services in GG&C 2023-2028. The strategy refresh builds on the previous strategy by promoting the development of prevention and early intervention services. Investing in evidenced based community mental health services and reducing the reliance on high cost inpatient services. The strategy aims to promote stepped and matched care for people who require support from mental health services.

2.3.3 **Learning Disability Services**

A Self-directed Support (SDS) Policy and Practice review was initiated in the last year within the context of the national SDS Standards Framework and the publication of My Support My Choice: People's Experiences of Self-directed Support and Social Care in Glasgow. A wide range of engagement has taken place with key stakeholders including the delivery of presentations to over 200 frontline social work staff; focus groups with third sector representatives, people with lived experience and social care providers; practitioner forums to share learning points and good practice.

Key priorities for improvement have been identified from this engagement and will be progressed going forward. These include the development of best practice approaches; producing a staff learning and development plan; identifying how we can best facilitate outcomes-focused conversations with service users in a risk-enabling way that maximises the opportunity for independent living; and where necessary refreshing our SDS/personalisation policies and procedures, ensuring they are available in an accessible format.
In late 2022, Glasgow City Health and Social Care Partnership (GCHSCP) concluded the initial phase of evaluating the work of the Connecting Neighbourhoods partnership - established to take forward a transformational change agenda to extend the use of Technology Enabled Care and Support (TECS). This included consideration of whether TECS could provide a safe and effective alternative to 'sleepover' provision, as well as the extent to which a partnership model could be developed with service providers to introduce a 'responder service'; i.e. service providers working more collaboratively on neighbourhood basis, underpinned by the expert support of a TECS provider.
While the pilot projects have found that, to date, the use of TECS as a complete alternative to sleepover provision has been limited, the projects have identified many service users as being potentially suitable for TECS/responder type support. To that end, we are in the process of rolling-out the use of TECS/responder model into the North West area of the City.

Discharging people with complex learning disabilities from inpatient services has been particularly difficult during this period; services for complex people require to be intensively staffed by skilled individuals, at a time when recruitment and retention within the social care setting is extremely challenging. Added to that is the impact which the COVID pandemic has had on the housing market. This has contributed to a lack of housing, generally, and particularly for adapted housing for people with complex needs.

Notwithstanding that, GCHSCP, along with other Greater Glasgow and Clyde HSCPs, has committed to work together to take forward a programme of redesign of inpatient services, the emphasis being on improving our responses in the community to reduce the use of inpatients beds when not clinically required. GCHSCP has also secured accommodation for a new enhanced community living service for adults with a learning disability. While the accommodation will come under care home registration, the ethos of the new service will very much be to support individuals, wherever possible, to reach a

stage when a more independent form of community provision can be considered.

2.3.4 Alcohol Drug and Recovery Services

Glasgow City HSCP is now in a position to progress the implementation of a Safer Drug Consumption Facility, which will be the first in the UK. There is overwhelming international evidence which demonstrates that Safer Drug Consumption Facilities can improve the health, social wellbeing and recovery of, and reduce risk to, people who inject drugs. Legislative barriers have prevented implementation to date, but the Lord Advocate has now provided assurance that a public statement of prosecution policy will be provided when the service becomes operational, as it will not be in the public interests to prosecute people using the service for possession of drugs. The multi-disciplinary team will include clinical, social work, social care and peer support staff, aiming to engage people in treatment and care to reduce harms to individuals and families.

The Alcohol and Drug Recovery Service have introduced qualified Social Workers into the community teams, working alongside social care colleagues and clinical staff. This was in recognition of an increasing level of complexity in relation need and risk for people presenting to the service and subsequent increase in the volume of Adult Support and Protection referrals. The introduction of Medication Assisted Treatment Standards compels services to respond to service users in a trauma informed, person-centred and holistic manner, offering treatment alongside psychosocial interventions aimed at improving wellbeing. Qualified Social Workers have specific roles in the Access teams, taking an assertive outreach approach to assess and reduce risk and build relationships to improve levels of engagement.

Alcohol and Drug Recovery Services are testing a new model of delivering recovery support and interventions with people who are stable in treatment, in partnership with a third sector organisation. Treatment and crisis interventions are provided by the statutory team whilst wider social wellbeing and recovery needs are met by the third sector partner with a focus on maximising independence.

A new service for young people using alcohol and/or drugs is being developed through the Alcohol and Drug Partnership, recognising the impact of trauma and poor mental health on young people who misuse substances. The service will offer a psychologically informed, preventative approach with all young people, using a stepped/matched care model, aiming to address underlying issues that lead to alcohol and/or drug use. Young people who require medical intervention for alcohol or drug use will receive higher intensity mental health support and therapies.

2.4 Older People Services

2.4.1 Glasgow City has continued to refine its strategic direction for Older People's Services through the Maximising Independence Programme which sees a shift from the delivery of specialised Social Work Services to developing a range of early intervention and prevention services across our Communities.

2.4.2 A rise in complex conditions and increased frailty was experienced by services which directly contributed to increased lengths of stay in the acute system. Presentations however at Accident and Emergency Departments in the City and resulting admissions are down on pre-COVID baselines. This has been a result of the development of diversionary activities in Communities where service users were able to access planned care and the development of initiatives such as Home First Response and Hospital at Home.

2.4.3 A review of the Older Peoples' Mental Health (OPMH) strategy was undertaken, in line with wider review of the Greater Glasgow and Clyde Mental Health Strategy Refresh. The OPMH strategy sets the direction for both Community based and inpatient OPMH services. The strategy sees the reduction in the reliance in in-patient services and the development of community-based alternatives.

2.4.4 Delayed discharges continue to present a challenge to Glasgow City, however this is underpinned by structural challenges in our wider Independent Care Home Sector, where the city has seen two care homes close in the past year. Glasgow City Health and Social Care Partnership continues to exploit all options to reduce length of stay and to support our service users in the community as soon as is practicable. An Intermediate Care re-tender was completed at the end of January 2023. All Intermediate Care Units now accept both adults under and over 65 years.

2.4.5 A significant achievement has been the joint work with Legal Services in relation to Adults with Incapacity who are delayed in their discharge. Through the deployment of dedicated legal resources working with private solicitors there has been a marked reduction in the number of long-term AWI delayed discharges.

2.4.6 The Discharge Without Delay model has been rolled out on a co-ordinated basis across the City. Social Work staff continue to balance system imperatives with their duty of care to individuals being discharged.

2.4.7 A further key strategic priority for the HSCP is identifying and supporting carers. A group of individuals impacted significantly by cost-of-living issues. Following a change to legislation in 2022/23 improvements were made which included increased investment in the Social Work Services Carer Team supporting pandemic recovery, an update to policies and practice and ensuring the delivery of the Glasgow Carer Strategy.

2.4.8 A significant development in Older People's Services has been the establishment of the Care Home Quality Assurance Team. This team is a multi-disciplinary team including Social Work, Health, Learning and Development and Planning and Strategy staff.

2.4.9 The Social Work component of the team have now completed 72% of Statutory Reviews in the Older People care homes, with all out of Glasgow reviews being completed by December 2023 and a workplan in place to complete 500+ adult care home reviews by April/May 2024.

2.4.10 The purpose of the care assurance process has been to work together with care homes to support scrutiny of current processes and procedures and benchmark them against current guidance. This provides assurance that processes are in place, or to identify areas where support maybe required to make improvements to achieve the aim that homes can continue to provide safe, effective, person-centred care for their residents.

2.5 Care at Home

2.5.1 Glasgow City Health and Social Care Partnership deliver approximately 95,000 home care visits per week. During 2022/23 service users accessing the service increased by 16%. Social Work Service operated 8 different home care services (including mainstream homecare, reablement, homeless homecare, Supported Living and Supported Living First Response).

2.5.2 Care at Home maintained a growth of 16% (2022/23) whilst continuing to support the increasing complexity of service users coming from the community and acute; there were 9,139 referrals from hospital and 1,717 referrals from Community. It has been well documented that the level of frailty and therefore demand has challenged the social care sector as front-line services recover from Covid -19.

2.5.3 The Reablement service is the corner stone of the Home Care and has continued to meet key performance indicators throughout the year against the increase in demand and the cost-of-living crisis. The service has a key role in the flow of patients from Hospital to their homes. A total of 2928 service users fully completed or partially completed reablement services during 2022/23. 1913 (65%) of these service users transferred to mainstream home care service.

2.5.4 The Community Alarms and Telecare service currently support 9,000 individuals across the City with the key aim of assisting people to live as independently as possible. Telecare is an integral parts of care planning and the use of Telecare can help to delay admission to long term care placements, keeping service users in their own home for as long as possible. Telecare can also help to facilitate hospital discharge.

2.6 Residential and Day Care Services

2.6.1 Glasgow City have five directly provided Care Homes with a combined total of 550 beds with an average occupancy rate of 95% during 2022/23.

2.6.2 The service delivers high-quality, person-centred care to a diverse range of residents across the City and the service employs 750 staff.

2.6.3 The service seen an increase in complexity amongst residents including higher rates of dementia, significant mobility impairment and an increase in the average age to 80 plus.

2.6.4 Using learning from Covid-19 through legacy planning, Residential services have developed and implemented initiatives to support access to mental health and wellbeing services such as the 20 Minute Care Space which is a structured approach to offer staff a reflective space during working hours. It aims to enable staff to connect with colleagues, reflect on their present circumstances and identify areas for self-care.

2.6.5 Following the successful reopening of Day Care Services, individual units continued to promote care through multiple channels and have more recently engaged with Health and Social Care Connect to explore referral pathways into day services, in advance of a fuller assessment by Social Work services. Stakeholder sessions were arranged to raise the Day Care Service profile in the community and awareness of the services on offer to area social work teams, carers centres, and local area co-ordination teams.

2.6.6 With the removal of COVID-19 restrictions, the units were able to resume opportunities such as outings, social activities, and engagement with local community groups such as schools and the service continues to use learning from the pandemic and activities are not predicated on covid ending.

2.7 Commissioning

2.7.1 Purchased services account for 49% of the social care service delivered in Glasgow City and it was recognised that a review of the contract management framework that had been in place since 2012 was required to take account of the learning post pandemic. The results of an internal audit of compliance with the existing contract management framework and a review of contract management processes by our commissioning team were combined to develop a new contract management framework which will be implemented from October 2023. The new framework which is based on a range of scored risk factors seeks to improve consistency and effectiveness by targeting commissioning interventions where risks are highest and allows for more flexible monitoring in higher performing services.

2.8 Public Protection

2.8.1 Child Protection

A child protection multi-disciplinary continuity meeting has continued to meet regularly to monitor and review the arrangements for child protection in the context of the challenges of the Cost-of-Living crisis and ongoing impact of the pandemic. Refreshed Child Protection procedures are being developed in response to the new national Child Protection Guidance, which will build on the learning from a number of initiatives, including:

- Review of practice in supporting families experiencing Domestic Abuse, with sub-groups exploring specific support for men, women, and children, based on the ongoing research and input of Professor Brid Featherstone
- Supporting Families though Pregnancy workstream which is developing co-ordinated, strengths-based support for families who require additional antenatal support
- Improvement in the Joint Investigative Interview process, based on national developments and learning

Planning and preparation is underway for the anticipated inspection of Children's Services which will focus on 'Children at risk of harm' Both a Strategic Oversight Group and an Operational Oversight Group have been established for preparation for this inspection. A Children's Services Inspection plan, highlighting key inspection areas, strengths and areas for improvement, have been developed and this will be overseen by both the Operational and Strategic Oversight Groups.

The Glasgow City Child Protection Team have developed an implementation plan in relation to the National Guidance for Child Protection. The plan includes an update on the Glasgow Social Work Services Child Protection Procedures.

There are currently 318 children on the Child Protection register within the City. This is a compared to 283 children who were registered as of September 2022.

There continues to be an increase in the number of Initial Referral Discussions (IRD) of approximately 20%, however this appears to follow a trend across Greater Glasgow and Clyde and nationally. The CP team and Children's Services along with partners from Police Scotland, Education and Health have undertaken a recent sample of the IRD process within Glasgow as part of the self-evaluation and quality assurance for IRD. This will also help to inform the review of the multi-agency rewrite of the IRD guidance in line with the revised National Guidance for Child Protection. This sample's initial findings evidenced that the IRD process in Glasgow was effective in terms of mitigating against potential delays in arranging IRD and that the decision to proceed to IRD was proportionate to the potential level of risk and need.

Work continues to develop a Children's House (Bairn's House) in the City. As part of the implementation of the Bairns Hoose, Glasgow has implemented the Scottish Child Interview Model (SW and police Joint Investigative interviewing for

children and young people). The Glasgow Child Interview Team is a joint Social Work and Police team who lead on joint investigative interviewing for children across the City.

2.8.2 Domestic Abuse

The Domestic Abuse Strategy 2023-2028 was published in spring 2023 as a result of significant partnership working between the HSCP and our partners - Police, Glasgow City Council, Education, third sector and leading academics. It recognises that domestic abuse remains prevalent across the whole of someone's life and that a whole system response is necessary in achieving change across all care groups within the HSCP.

The vision for the strategy is domestic abuse is unacceptable and tackling domestic abuse is everybody's responsibility. The Strategy aims to outline initiatives to prevent domestic abuse from happening and has a number of key priorities and actions to promote safety and support for women, children and young people and men from crisis to recovery ensuring everyone has access to the right help and support when they need it.

2.8.3 Multi-Agency Public Protection Arrangements (MAPPA)

MAPPA Glasgow continues to meet performance indicators outlined within the National MAPPA Guidance (2022). The table below illustrates an overview of the period April 2022 to April 2023. Performance within MAPPA Glasgow continues to be reviewed at the MAPPA Operational Group (MOG) and the Strategic Oversight Group (SOG).

National Performance Indicators	Outcome
1. 95% (previously 90%) of level 3 cases to be reviewed no less than once every 6 weeks.	Glasgow achieved 100% during the reporting period.
2. 95% (previously 85%) of level 2 cases to be reviewed no less than once every 12 weeks.	Glasgow achieved 98% during the reporting period.
3. 90% attendance by Duty to Co-operate (DTC) agency at an appropriate level of seniority when invited to level 2 and 3 meetings.	Appropriate attendance by DTC (100%).
4. 90% attendance by Police and Social Work at an agreed level of seniority at level 2 and 3 meetings including Risk Management Team Meetings in custody.	Glasgow achieved 100% during the reporting period for level 2 and 3 meetings. Data in relation to RMT attendance is not being collated. The process relating to this is being looked at by SPS and Scottish Government.
5. 100% written contributions for Responsible Authorities and DTCs in cases of non-attendance.	N/A DTC attended to requested meetings.

National Performance Indicators	Outcome
6. 100% of MAPPP initial level 3 meetings for cases in custody to take place 4 weeks prior to liberation.	Glasgow achieved 100% during the reporting period.
7. 90% of level 2 and 3 minutes to be complete and released within 10 working days.	Glasgow achieved 94% during the reporting period.
8. Disclosure to be considered and recorded in the minutes at 100% in level 2 and 3 meetings.	Glasgow achieved 100% during this period.

2.8.4 **Adult Support and Protection (ASP)**

Glasgow City's Adult Support and Protection (ASP) Partnership was externally inspected in 2022, with the Care Inspectorate leading on this scrutiny activity. The Thematic Inspection programme links directly to Scottish Government's ASP Improvement Plan and will help to inform national priorities. Glasgow City's Inspection Report was published on the 4th of October 2022 and provided independent review and assurance of our ASP arrangements. The Report noted that we have robust ASP processes that are effective in mitigating and achieving good outcomes for adults at risk of harm. More specifically, Glasgow City's Inspection determined the following:

- ASP Strategic leadership Arrangements: Very effective and demonstrated major strengths supporting positive experiences and outcomes for adults at risk of harm.
- ASP Key Processes: Effective with areas for improvement. There were clear strengths supporting positive experiences and outcomes for adults at risk of harm, which collectively outweighed the areas for improvement

The Thematic Inspection took place in a context of recovery planning following the pandemic and was hugely beneficial for identifying key strengths and areas for improvement. The Inspection Overview Report (published August 2023) commented on the themes arising from the completed Inspections of all Local Authorities and singled out Glasgow City for praise:

"Glasgow City Partnership annually did around 8500 initial inquiries. It did them promptly, efficiently, and effectively, with management oversight and due governance over decision making. In forty percent of these episodes social work visited the adult."

ASP activity has continued to reflect an upward trend in volume and complexity, with a 23% year on year increase in the number of referrals. This pattern is also noted in national trends regarding increasing referral numbers over the last three years, which appear linked to the ongoing impact of Covid and significant economic challenges. More specifically, the ASP data highlights that Glasgow City received 10,329 ASP referrals during the last year, a rise from 8431 referrals for the previous year.

We have also maintained our major commitment to Training following on from the external inspection process. This has included a Joint Audit of ASP Processes across Social Work. Health and Police systems (December 2022) and subsequent implementation of an improvement plan. This aims to strengthen practice regarding chronology recording, supporting the adult's participation in the ASP process and promote effective joint working throughout the various stages of ASP.

Overall, we have responded positively to the incremental growth in ASP referrals and continue to place emphasis on training, regular audits, detailed improvement plans and collaborative strategic leadership arrangements to support effective practice.

2.8.5 **Justice Social Work**

The justice social work team based at Glasgow Sheriff Court continues to offer bail supervision as a credible alternative to remand in an ongoing effort to address the growing prison population within Scotland. In addition, Electronic Monitoring is now available as a condition of bail which the team are now assessing for as part of their overall bail assessment.

Incentivisation funding from Scottish Government has enabled the recruitment of additional bail staff which has increased staff capacity to provide more bail assessments and offer early and effective support to people subject to supervised bail within the community.

The Glasgow Youth Court is a judicially led initiative which has been supported by Glasgow City Health and Social Care Partnership (GCHSCP) since June 2021. Functioning within the Glasgow Sheriff Court, it operates on a problem-solving basis, covering those aged between 16 and 24-years-old. Where the presiding Sheriff is satisfied, the Glasgow Youth Court utilises Structured Deferred Sentences (SDS), which combines multi-disciplinary intervention and support in the community, with regular court reviews to monitor and encourage young people's progress.

From 2019 to 2023 there has been a reduction in the use of higher tariff orders such as Community Payback Orders for young people aged between 16 and 24 years from 84.4% to 38.5%. Whilst at the same time the use of SDS has increased from 5.5% to 33% a trend which is continuing to rise.

The Children and Young People's Centre for Justice (CYCJ) was commissioned by GCHSCP in 2021 to undertake research into the Glasgow Youth Court, with the purpose of:

- Documenting the implementation, design and operation of the Youth Court
- Evaluating data relating to Youth Court outcomes
- Evidencing how the Youth Court is experienced by a range of key stakeholders.

Full details of the evaluation can be accessed here: (https://www.cycj.org.uk/resource/glasgow-youth-court-full-report/).

A young person's version of the report can also be accessed here: (https://www.cycj.org.uk/resource/glasgow-youth-court-young-persons-report/).

The Sheriff Principal, in conjunction with Justice Social Work, implemented a Women's Problem-Solving Court in Glasgow in January 2023. This Court takes a problem-solving approach to women in conflict with the law and is similar to both the Youth and Alcohol Problem Solving Courts in that it utilises community-based disposals such as SDS to support women to address their offending needs, whilst the court monitors progress and engagement via regular court review hearings.

The new Community Custody unit in Maryhill, the Lillias Centre, became operational in October 2022 and holds up to 24 short and long-term female prisoners. The Social Work Team supporting the Lillias Centre work closely with Prison Health Care and Scottish Prison Service to ensure that women in the service have access to a range of community supports.
The Glasgow Drug Court team has recently established a Women's Clinic that operates from the Tomorrow's Women office. This change to service provision offers women a safe, single-sex space in which they can attend to have their drug testing carried out as well as their health needs assessed, and support offered as necessary.

Providing this more trauma informed environment has led to increased attendance at clinics by women and more meaningful engagement. This ensures that women who are working with the Drug Court team are having their needs met holistically by being offered a range of individual and groupwork support, including the opportunity for mental health intervention via the mental health nurses based at Tomorrow's Women.

Glasgow justice social work rolled out 'Your Voice' in 2022 which is an electronic method of gathering service user feedback about their experiencing of working with justice social work services. This has provided justice social work with a more consistent and reliable method of collecting service user feedback to assist in all aspects of service delivery.

Unpaid work personal placements are recognised as a positive option for those undertaking unpaid work as part of their Community Payback Order. Personal placements provide an opportunity for people to develop new skills within their local communities, work directly with third sector organisations and development employability and training opportunities.

Justice social work have recently developed a personal placement improvement plan to further enhance this aspect of unpaid work, which included the commissioning of a short film to demonstrate the positive impact of community sentences for the judiciary, the public and other stakeholders. The film was developed by the Creative Change Collective with valuable input

from those who have undertaken personal placements and the organisations that have hosted them. The film can be accessed here: https://www.youtube.com/watch?v=h-1rY89uToQ

2.8.6 Homelessness Services

Homelessness prevention activities continue to be a key focus for the service. Throughout 2022/2023, there has been a significant increase in requests for homelessness advice and assistance with initial approaches increasing by over 8% from 10,816 in 2021/2022 compared with 11,713 in 2022/2023. Despite this increase in demand, the number of homelessness applications reduced by over 4% from 7,016 in 2021/2022 to 6,708 in 2022/2023.

In light of the public health emergency, 2021/2022 saw a rapid expansion in the use of temporary accommodation and throughout 2022/2023, the number of households in bed and breakfast accommodation remained stubbornly high. Following the Rapid Rehousing Transition Plan, Homelessness Services have produced a Temporary Accommodation Strategy which sets out the framework to reduce reliance on Bed and Breakfast accommodation with a view to this type of accommodation ending within the lifetime of the strategy.

An action plan has been developed across the City to reduce the number of service users accessing bed and breakfast accommodation. This has seen a development of multi-disciplinary task force to ensure service users within this type of accommodation have a robust care and support plan in place.

In 2022/2023 saw a reduction in the number of social housing lets secured for homeless households however the number of lets secured (2,904) remains higher than pre-Covid levels.

Homelessness Services have continued to roll out the ‘matching’ process with Registered Social Landlords (RSLs) across the city. This approach, which allows Homelessness Services to ‘match’ homeless households with a suitable property. This initiative has seen an increase in the number of lets secured with participating RSLs and a reduction in the number of properties which are refused.

The Prison-based Homelessness Service continue to work with partners within the PHHaB (Pathway to Housing, Health and Benefits) project including Health Services, DWP etc. to ensure that prison leavers are receiving the necessary support they require to be successfully resettled into the community on release. The team have also seen an increase of 26% (from 60 in 2021/2022 to 76 in 2022/2023) in the number of settled tenancies secured for people leaving prisoners.

Homelessness Services continue to work with GHIFT (Glasgow Homelessness Involvement and Feedback Team) to ensure that lived experience is at the core of service provision. GHIFT have assisted Homelessness Services in producing a service-user friendly version of the Temporary Accommodation Strategy as well as assisting in producing an information leaflet for those leaving prison.

Homelessness Services continue to work with Vanguard Scotland to develop a revised approach to the end of tenancy process which seeks to ensure a more efficient, streamlined system which will speed up the resettlement process allowing homeless households to move into settled accommodation more quickly.

The HSCP (Homelessness Services and Children and Families) continue to assist in funding the Private Rented Sector (PRS) Hub which works with households within the PRS who are at risk of homelessness. Due to the pandemic and cost of living crisis, the PRS Hub witnessed significant demand for its service and retained high levels of homelessness prevention throughout.

The HSCP also provided a range of support services to Ukrainian Displaced Households (UDPs) who were resident on MS Ambition during the period it was docked in Glasgow. This consisted of support with health, education and employment, as well as resettlement support. At the end of March 2023, the HSCP worked with partners in the Scottish Government, COSLA, other local authorities and RSL partners to decommission MS Ambition and successfully identify accommodation options. Over the lifetime of the ship's docking in Glasgow, 1,489 UDP households moved onto alternative accommodation.

3. Resources

3.1 Glasgow City IJB delivers a range of services to its citizens and in 2022-2023 had funding of £1.4bn to spend on services. The IJB is operating in an increasingly challenging environment with funding not keeping pace with increasing demand for services and increasing costs linked to delivery. The City already experiences increased demand for services as a result of deprivation, ill health and inequality. However, the scale of inflationary pressures and the cost of living crisis is further exasperating these pressures, having a significant impact on both cost and demand for services.

3.2 The demographic, health and deprivation profile of the city impact on the demand that is experienced in all our services and can often result in higher support levels than experienced in other parts of Scotland. This creates a challenging environment in which to operate, managing demand within the financial constraints, whilst transforming services and delivering on the integration agenda.

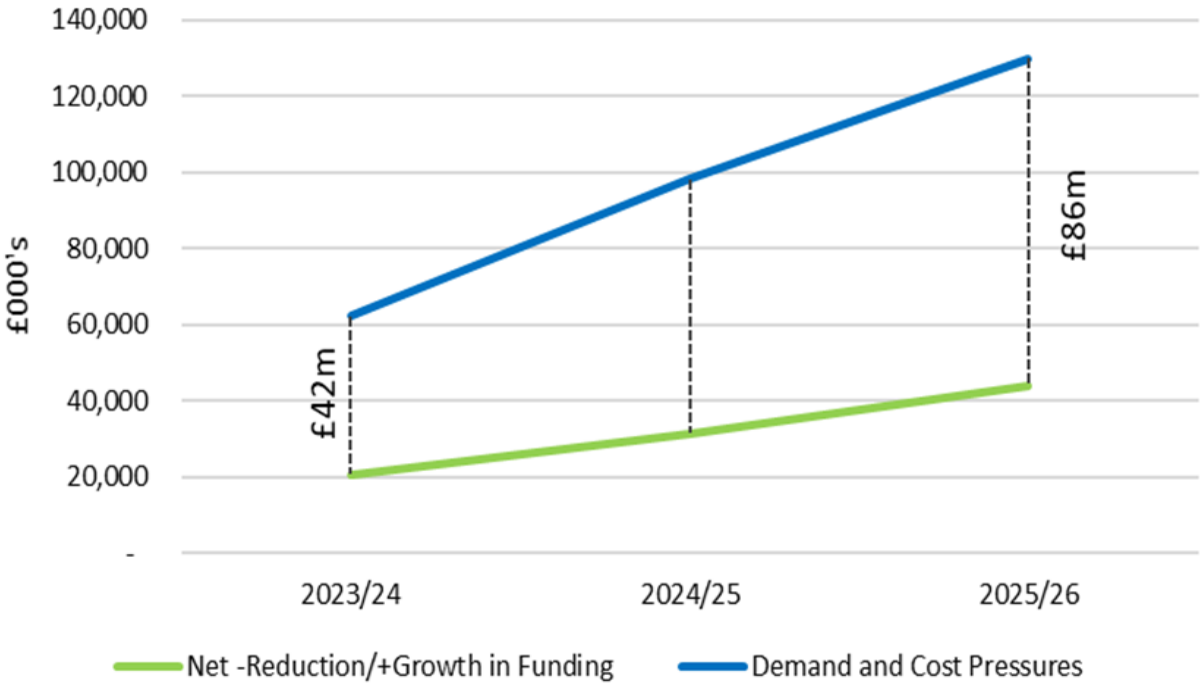
3.3 Our Medium-Term Financial Strategy has 3 core components which collectively support the transformational change required to deliver financial balance whilst delivering safe and sustainable services. This strategy is set out in the diagram below and cannot be delivered without working closely with all our partners and stakeholders to secure a future which is sustainable and meets the needs of our communities. This is underpinned by strategic planning and commissioning, robust financial management, a prudent reserves policy and work force planning to ensure our resources are used in the most effective way to deliver services and deliver the vision for the IJB.



3.4 The outlook considers a range of pressures and uncertainties to assess the likely impact on the IJB's financial position over the medium term. Examples include:

- National commitments such as uplifts for social care providers and policy commitments in relation to Primary Care, Mental Health, Carers, Alcohol and Drug Partnership
- Cost of living crisis resulting in more families in the City living in poverty resulting in increased demand for front line services
- Inflationary pressures linked to pay and contractual commitments and global markets for prescribing
- Continuing legacy of the impact of COVID-19 on people's health, wellbeing and the economic impact including income, employment and housing
- Local pressures linked to demand as a result of demographic, deprivation and health.

3.5 This outlook demonstrates the gap between growth in demand and cost pressures and our forecasted growth in income over the next three years. This will require an additional £86m in savings to be identified to deliver a balanced budget over this period.



3.6 The IJB has approved transformation programmes for Adults, Older People, Children and Families Services and Primary Care. This includes the Maximising Independence Programme which will seek to deliver a sustainable health and social care service for the City which will focus on prevention and early intervention approaches. What this doesn't mean is asking people to live without any support at all or expecting all support to be delivered by members of families or the wider community. It's about living as independent a life as you can, having and making choices about the things that matter to you to live as full a life as possible, with support when you need it. And it's about ensuring we have strong and reliable health and social care not just now, but for future generations too. This involves talking, listening and collaborating to build a sustainable way of supporting people, so that everyone can achieve their full potential for health, well-being and independence. We need to see people as equal partners and experts in their own lives.

3.7 The next three years will be the greatest financial challenge that the IJB has been asked to manage since its inception. Glasgow City IJB is clear about the challenges which are ahead and its aspirations for its services, however we will also need to be realistic about what can be delivered within the funding envelope available. Transformation alone will not address the financial gap and this will require the IJB to prioritise decisions for investment and disinvestment in order to support delivery of the Strategic Plan. This will result in some services being reduced or stopped altogether but is required to enable the IJB to deliver services within the financial envelope provided.

4. Workforce by Service Area

4.1 The Partnership comprises of 10,956 Social Work (Glasgow City Council) and Health (NHS Greater Glasgow and Clyde) staff. Social Work staff account for 6220 posts.

4.2 The breakdown of the Social Work (all Glasgow City Council staff) workforce is:

SERVICE AREA	WTE
Adults	**440**
Children's Services	999
Care Services	**3070**
Older People Services	297
Public Protection and Complex Care	**602**
Resources / Other	812
TOTAL	**6220**

4.3 Workforce Planning

In recovery from the pandemic, service continuity and improvement will be supported by the redesign of services around the needs of our communities to ensure that we have the right capacity, resources and workforce to meet demand.

Glasgow City HSCP Workforce Plan 2022-2025 was approved at Glasgow City Integration Joint Board (IJB) in November 2022. The Workforce Plan takes account of the Scottish Government's requirements in the National Workforce Strategy for Health and Social Care in Scotland and as such, the plan includes our ambitions around recovery from Covid, growth and transformation of services and the workforce.

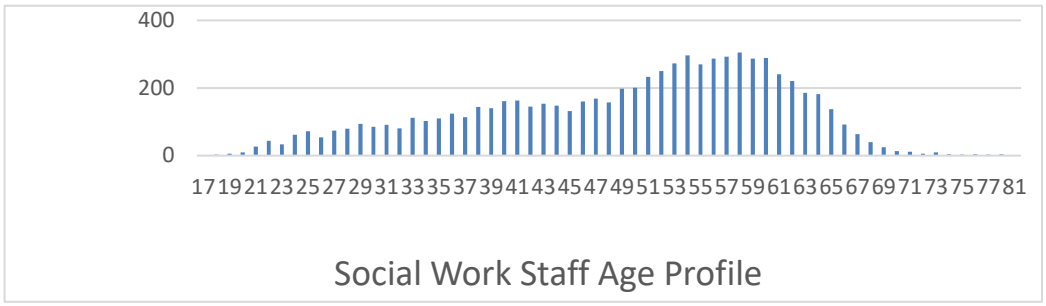
The Workforce Plan includes actions required around the 5 Pillars of the Workforce Journey - Plan; Attract; Train; Employ; and Nurture. Success in achieving these aims is underpinned by the commitment to support and nurture our workforce, looking after mental and physical wellbeing as well as offering roles and development opportunities that staff find rewarding and fulfilling. Governance and review of progress in achieving the actions in this plan are monitored annually by the IJB.

The Workforce Plan strategically aligns to the Glasgow City HSCP Strategic Plan 2023 to 2026 and the 6 Partnership Priorities of the plan.

In addition to the HSCP wide workforce plan, services have monthly meetings that have a more operational focus to meet workforce needs of the service, safe staffing legislation and ensure that recruitment is forecasted and planned throughout the year. This is particularly important for Care Services within the HSCP due to the size of the workforce within the service.

4.4 Workforce Challenges

4.4.1



Age Profile

A significant consideration for Glasgow City HSCP over the next 5 years is the age of the workforce, with the age profile of staff predominantly over 50, and with consideration given to the option where staff can choose to retire and access their pension from the age of 55. We do however continue to have a significant turnover in some service areas excluding people who retire on age.

4.4.2 Sickness Absence

Covid related absences continued to impact significantly on our workforce and fluctuated over 2022/2023 peaking at a rate of 3.6% of the total Council workforce in the period March/April, then peaking at 2.4% in June before maintaining a consistent level of around 0.9% from December to March 2023. The greatest impact of staff absence has been in Older People's Residential Care and Care at Home Services however they have maintained service levels as staff returned and additional staff were recruited. The impact of the pandemic on the workforce has been particularly significant in its effect on staff mental health and wellbeing. Supporting staff in work and to return to work is a priority for the HSCP and will be key to its recovery from the pandemic.

Absence levels remain higher than average in the HSCP and the age profile of our staff must be considered in relation to this particularly when considering the impact, recovery and ability to return to work from e.g. Covid-19, injury or illness which can often take longer when factoring in age and the physically and mentally demanding nature of the role that staff perform.

Whilst staff absence has decreased since peak Covid-19 levels, it remains a significant factor affecting service delivery and continues to impact daily on staffing cover, particularly in Care at Home and Residential Care Services. This often places an over reliance on staff overtime and the use of agency workers to cover statutory services at a significant cost to the organisation. The impact on staff covering absence remains a concern and various wellbeing initiatives have been implemented such as Mental Health Awareness sessions, Time to Talk mental health campaign and ongoing development and promotion of the HSCP Staff Health and Wellbeing page has implemented to support staff.

4.4.3 Recruitment and Retention

The predicted level of age retirals due over the next 5 years means that we continually revise our recruitment and retention strategy to attract staff both nationally and locally, and to make continuing to work for us attractive, more accessible and a better fit with work life balance.
Attracting, recruiting and retaining Social Workers with Mental Health Officer (MHO) status is increasingly difficult and is our most significant challenge. We continually have vacancies and try to attract staff externally recognising that there are a limited number of staff that hold the qualification in the system and who will usually work with another local authority within the backdrop of a national shortage of MHOs. We offer our Qualified Social Workers the opportunity to undertake the Postgraduate Certificate in Mental Health Social Work which prepares experienced staff to undertake the statutory MHO role. However, we have difficulty in attracting staff to undertake this qualification and in retaining the staff who do, as very often staff will leave after gaining the qualification. We continually look for any new or innovative ways to attract MHO staff.

In order to attract Social Care staff, the HSCP ran a number of city-wide events in Autumn 2022 at large venues throughout Glasgow. The events allowed candidates to be interviewed and appointed on the day. This also meant that candidates could provide all information for recruitment checks which allowed start dates to be confirmed, avoiding any delays in recruitment.

Radio, TV and social media campaigns have been used in 2022/2023 to advertise the HSCP and Glasgow as a great place to live and work. The focus is to attract interest in Health and Social Care at all levels. A campaign ran in Scotland and across the UK in September 2022 and into early 2023.

5. Training, Learning and Development

5.1 Learning and Development activity across the HSCP is monitored at the Social Work Professional Governance Board as a standing agenda item where progress on initiatives and programmes is provided, discussed and authorisation provided on the development of new activities.

5.2 Some of the current challenges relate to a backlog of training/courses caused by Covid-19, particularly on the careFirst, iWorld systems and induction programmes for staff.

5.3 Glasgow City HSCP recognises that by ensuring staff have the skills and knowledge to do their job well and by providing opportunities to develop, this will be critical in retaining the skills and values needed in our workforce. It is acknowledged through engaging with staff and trade unions that development of improved career pathway options and succession planning programmes is important to staff. We have suites of courses both mandatory and developmental which we review and adjust as practice develops.

5.4 Our training, learning and education approach is designed to prepare for changes to the work environment brought about by developments in practice, changing legislation, advances in technology and national strategies. Our professional leads and internal training educators/ practice teachers work in partnership with professional bodies e.g. SSSC and colleges and universities and Learning Network West to develop courses and design ways of learning to support staff in their career journey. We provide placements opportunities for HNC (Social Care) students in our Care Homes and have increased our capacity of student Social Worker placements, supported by our own in-house practice teachers which has led to an increase in applications for jobs with us and successful appointments. Newly qualified Social Workers are also supported through mentoring and coaching. A successful Modern Apprenticeship programme in our Older People Day Care Centres continues where trainees develop a blend of on-the-job practical learning whilst gaining an SVQ qualification, with all trainees to date, securing permanent employment at the end of their apprenticeship programme.

We are committed to developing a trauma informed workforce and have now completed a training needs analysis across the HSCP. We are now developing an implementation plan across the City not only with our Social work workforce but with a range of partners who will come into contact with service users who may have experienced trauma in their lives.

5.5 A HSCP Succession Planning Group was created in 2021 in recognition of the need to identify managers of the future and to encourage all staff to access development opportunities and ensure these are accessible. Some key focus areas of the Board and our Workforce Planning actions are:

- Investment in regular protected time for staff development
- Increasing our capacity and opportunity for coaching and mentoring at all levels
- Employees having the opportunity to have career development conversations
- Investment in wellbeing practiced and observed by leaders

6. Looking Ahead

6.1 Social Work Services are now in the recovery phase following the pandemic. Over the last year services have been challenged with the increasing demand for support. This has been across all services with particular increased activity in Adult Support and Protection and Homeless Support.

6.2 Our staff have continued to respond to this demand despite the increasing competing pressures on them. The cost of living crisis has had significant impact on our service users and the request for more practical help and support has increased.

6.3 Social Work Services have been challenged by the reduction in public sector funding and this has led to difficult decisions being taken in relation to the funding of services and the priorities for financial support across all care groups.

We have however been able to maintain and deliver on our statutory responsibilities despite this and our staff have worked tirelessly with service users to ensure we deliver safe and effective services.

6.4 As in previous years I have highlighted that the most important part of the social work services in Glasgow is our staff and I continue to be impressed by the dedication and loyalty they show not only to the organisation but to their service users. I want to thank all of our staff for the continued hard work and their commitment to ensuring Glasgow City deliver high quality social work support.

7. Recommendations

7.1 The Integration Joint Board is asked to:

a) note the report; and
b) note that the Interim Chief Social Work Officer report has been submitted to the Scottish Government.

APPENDIX 1

Terms of Reference

Social Work Professional Governance Board

The Social Work Professional Governance Board will have an overview of professional Social Work practice across the Health and Social Care Partnership. The Board will ensure there is a strong and clear Social Work accountability and assurance framework that promotes reflection and learning from experience, evidence and research of outcome focused Social Work practice across the organisation.

The remit of the Social Work Professional Governance Board is to:

- Maintain an overview of external scrutiny arrangements from regulatory bodies.
- Receive an overview of regulatory bodies inspection reports and approve action plans by Heads of Service in relation to the outcomes of inspection reports.
- Promote and develop Social Work professional practice and identify trends or patterns arising in respect of professional practice.
- Overview the Social Work audit programme for the organisation.
- Approve the action plans developed the Heads of Service in relation to audit reports.
- Maintain an overview of referrals to the SSSC in terms of registration or conduct matters.
- Overview the Social Work Annual Training Plan.
- Monitor service wide performance of and development needs in relation to, practice learning and development
- Approve external research applications.
- Approve revised policy, practice guidance and procedures.

Membership

- Chief Social Work Officer – Chair
- Depute Chief Social Officer – Chair ***/*** Assistant Chief Officer, Public Protection and Complex Needs
- Head of Adult Services
- Head of Commissioning Services
- Head of Older People Services
- Head of Children Services
- Head of Care Services
- Head of Criminal Justice Services
- Head of Homelessness Services
- Head of Organisational Development - Partnerships

- Practice Audit Review Manager
- Assistant Chief Officer - Older People Services
- Assistant Chief Officer - Children Services
- Assistant Chief Officer - Adult Services
- Assistant Chief Officer - Care Services
- HR Rep
- Training and Development Manager
- Social Worker/Team Leader - Adult Services
- Social Worker/Team Leader - Older People Services
- Social Worker/Team Leader- Children Services
- Social Worker/Team Leader – Justice Services
- Caseworker/Team Leader – Homelessness Services
- Representative from Social Work School of Glasgow Caledonia University
- Representative from Care Inspectorate
- Representative from Mental Welfare Commission
- Representative from Strathclyde University
- Governance Support Officer (CSWO, Governance & Practice Audit)
- Support Officer, Business Development

Frequency

6 weekly meetings

Accountability and Reporting Interfaces

The Social Work Professional Governance Board will be accountable to the Integrated Governance Board chaired by Chief Officer of Glasgow City HSCP. The Board will produce a reporting template outlining the key areas for discussion including an overview of Social Work practice and learning for the reporting timescale.

The Adult, Older People and Children Governance Groups will; report any key Social Work issues to the Social Work Governance Board on a regular basis in order that there is an overview of professional practice issues across the organisation.

The professional Social Work Governance Board will have a number of sub-groups which will overview Social Work practice. These will include:

- Locality Social Work Governance Groups in North East, South and North West. Mental Health Officer Sub-Group.
- Care Services Governance Group.
- Training and Development Sub-Group.

These Sub-Groups will be chaired by a relevant Head of Service and will report directly to the Social Work Governance Board.