



Item No. 13

Meeting Date Wednesday 13th September 2023

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

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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:	<p>The quarterly assurance statement is a summary of information that has been provided, and subject to the scrutiny of the appropriate governance forum.</p> <p>The outcome of any learning from the issues highlighted will then be considered by relevant staff groups.</p>
Governance Route:	<p>The matters contained within this paper have been previously considered by the following group(s) as part of its development.</p> <p>HSCP Senior Management Team <input type="checkbox"/></p> <p>Council Corporate Management Team <input type="checkbox"/></p> <p>Health Board Corporate Management Team <input type="checkbox"/></p> <p>Council Committee <input type="checkbox"/></p> <p>Update requested by IJB <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p> <p>Not Applicable <input checked="" type="checkbox"/></p>
Recommendations:	<p>The IJB Finance, Audit and Scrutiny Committee is asked to:</p> <p>a) consider and note the report.</p>

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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:

This report contributes to the Integration Joint Board's duty to have clinical and professional oversight of its delegated functions.

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 June 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 [14 June 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 / Criminal Justice 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 Care Governance Group
 - Sexual Health Governance Group.
- 3.2. The HSCP, through the Integrated Clinical and Professional Governance Board, and the other Governance forums, 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 Multi-agency briefings to disseminate learning from the Adult A SCR are now complete. 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 scheduled for November 2023. 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, and a further review is set for November 2023. The Children 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 a joint publication and dissemination strategy and learning materials.
- 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 Four new learning reviews have been commissioned (one adult and 3 children) and review teams are being 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 MAPPA Glasgow continues to meet National Performance Indicators (NPIs) outlined within the National MAPPA Guidance (2022). NPIs continue to be monitored via the MAPPA Operational Group (MOG) and Strategic Oversight Group (SOG).
- 5.2 Since the submission of the last report, the number of category 1 (Registered Sex Offenders) and category 3 (other risk of serious harm offenders) cases managed at level 2 and 3 have remained fairly static and not significantly changed.
- 5.3 An audit of MAPPA cases remains on-going. Identified learning and good practice is shared amongst MAPPA partners. Each responsible authority distributes the learning and good practice within their organisation.
- 5.4 Following the publication of the Significant Case Review (SCR) on Person H on 6th April 2023, an SCR multi agency implementation group was established. The aim of the group is to give due consideration to the findings and implement good practice, learning points, and recommendations from the Person H SCR. The Assistant Chief Officer for Public Protection and Complex Needs is the Chair of the implementation group.
- 5.5 Police inputting into the Violent and Sex Offender Register (ViSOR) on behalf of responsible authorities ceased on 1st of January 2023, therefore plans have been implemented to support the change in process, which have included increasing ViSOR users and implementing an audit process. A local ViSOR user group has also been established to support users in newly assigned tasks, which will also support consistency of practice.

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5.6 Multi Agency Public Protection System (MAPPS) is scheduled to replace ViSOR in 2025; previously the aim for replacement was May 2024. There remains on-going consultation to support the development of the system. Scottish Government have set up a Scottish MAPPS group, to enable the system to be considered from a Scottish perspective.

6. Self-evaluation Activity

6.1 The ASPC and CPC are awaiting the findings from the HSCP's ASP tripartite and CP audits to inform future self-evaluation activity.

6.2 A Joint Self-Evaluation was undertaken in December 2022 and findings shared at both ASP Committee and a previous report to Committee ([June 2023](#)). The fuller findings of the Joint Self-Evaluation were positive, noting robust evidence of collaborative working between key agencies and information sharing. The views of the adult at risk and carers were considered through all the stages of the ASP process. There was evidence of management oversight related to decision making and risk chronologies were of a good standard. ASP investigations (and related risk assessments) and Case Conferences, effectively determined what needed to be done to ensure the adult at risk of harm was safe, protected, and supported. ASP Case Conferences and related Protection Plans were noted to be of a good standard. The findings help to reinforce many of the positive outcomes from the National ASP Inspection and provide additional assurance and evidence of robust ASP arrangements.

6.3 The Joint Self-Evaluation has also helped to identify key priorities for strengthening including Life Events Chronology recording (quality needs to improve), improving 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 will be progressed via the ASP Committee and related sub-groups.

6.4 Planning is due to commence on the next Joint Evaluation which is scheduled for November 2023. This will involve updating the audit tool and related process and identifying any areas of practice for scrutiny (based on any learning from the previous Joint Evaluation). This reflects an ongoing multi-agency commitment to an annual ASP audit.

7. Assurance Areas

7.1. **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. There are currently no outstanding workforce registration issues.

7.2. **Healthcare Associated Infection** - Matters associated with healthcare associated infection are routinely tabled during the Integrated Clinical and Professional Governance Board. During the last quarter there has been nothing to report in this area.

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- 7.3 **ASP Revised Code of Practice (2022)** - A National Working Group has been set up to help implement the revised version of the ASP Code of Practice. Key changes include the need to apply the three point test from a trauma informed perspective, highlighting the importance of adult participation and the role of advocacy, and further clarity on the role of inquiries and investigations. The role of the National Working Group is to help support local areas to respond to the revised Code of Practice over a two-year period with our staff represented with the four sub-groups looking at Chronologies; Self-Evaluation; Participation and Trauma Informed Practice; and Inquiry and Investigative powers. A Short Life Working Group for ASP has also been set up, overseen by the relevant Head of Service, to help support the transitional arrangements linked to the introduction of Health and Social Care Connect (HSCC) single point of access and work undertaken to better align with the revised Code of Practice.
- 7.4 **ASP Minimum Dataset** - This involves the introduction of new reporting arrangements to the Scottish Government for ASP to help support more accurate benchmarking and identification of trends. The first quarter for submission will be April to June (data submitted early August) looking at a new range of indicators including 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). It is recognised that the first few submissions will involve transitional arrangements as each local authority will have to respond to the new demands. For instance, we will have to amend our systems recordings on eforms to gather this specific data (as previous distinctions were linked to inquiry and investigation stage). Work is ongoing to progress these system changes and staff briefings are planned for late August to promote greater awareness of the dataset. It should also be noted that the new minimum dataset will replace SOLACE and annual returns, in due course.
- 7.5 **Adult Inter Agency Referral Discussion** – a Short Life Working has been set up by the key partner agencies to explore Adult Inter-Agency Referral Discussions (IRD) options. This was also noted as a specific action within our Joint Improvement Plan following the outcome of the recent National ASP Inspection

8. Updates re' Child Protection

8.1 National Guidance for Child Protection in Scotland 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.
- A succession of consultations has taken place with children and families staff from the HSCP representative of the citywide teams across Children's Services staff groups and grades. Heads of Service also attended the consultations
- A working group has been established led by the Principal Officer, Child Protection to take this forward. The outcome will be a robust implementation of updated Child Protection Procedures.
- The working group has 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 Chief Officers Group, Social

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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 made excellent progress with their audit of Child Protection practice, which was approved at the Child Protection Quality Assurance Sub-Group and Child Protection Committee. Stage 2 of the audit has now been concluded, which involved interviews with 12 Qualified Social Workers from each locality. The first draft of an analysis of the information gathered in the interviews has been completed by the Practice Audit Team and will be considered via the next CP Quality Assurance Group.
- A self-evaluation tool has been co-produced by the Monitoring and Evaluation sub-group of the National CP Guidance Implementation Group, which is to be completed in September-October 2023. The tool has been developed to assist in the reporting of the implementation of the revised National Guidance.

8.2 Interagency Referral Discussions (IRD)

- This remains an area of priority for the Child Protection Team along with colleagues from the HSCP and partners from Police Scotland, Health and Education.
- We have concluded the IRD sample along with Police, Health and Education colleagues. This involved sampling 45 referrals through the IRD Triage process, that took place over a four week period in August/September 2022. The final report will be available for circulation when partner agencies have approved this.
- Update of the IRD guidance is currently underway jointly with partners following an agreed piece of audit work. This will reflect developments in practice with regard to IRD, with the inclusion of Education Services in the IRD process. Additionally, the National Guidance sets out an expectation that IRD's will now be held in the context of:
 - CP Pre-birth assessment
 - Accumulation of concern
 - 16 to 17 year old young people
- Glasgow City HSCP, Assistant Chief Officer for Public Protection co-chairs the National Interagency Referral Discussion (IRD) group, and Glasgow has been part of the IRD writing sub-group for the development of multi-agency training for IRD. There is a plan for two pilot training sessions to be delivered to evaluate the course, and Glasgow has been asked to participate in this.

8.3 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

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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.

8.4 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. 10 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 local authority 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 is 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.
- Practitioners appear to be more confident in their assessments in identifying child exploitation and trafficking, and the number of referrals has increased over the second year and includes young people who are sexually and/or criminally exploited.
- The Practice Audit Team is working on an evaluation of the pilot as we are aware, being the only Scottish Authority, that learning from the Ipsos Mori report is likely to be more reflective of the English and Welsh authorities who make up the majority of the cohort.
- In terms of training to the wider staff groups and partners:
 - In year one, we ran awareness raising training sessions to all staff and were able to assist Scottish Fire and Rescue in developing bespoke training for their staff with the assistance of Barnardo's.
 - In year two, we have focused on Deep Dive sessions focussed on Trafficking and Exploitation, which to date have included Ukraine-Spotting the Signs, and most recently Cyber Trafficking.

8.5 Inspection Preparation

- Preparation for the inspection of Children's Services has begun in anticipation of notification for inspection including:
 - Strategic Meeting – Chaired by Assistant Chief Officer, Public Protection
 - 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
April – June 2023**

Service	Number of Significant Adverse Event Reviews Commenced in reporting period (1 April – 30 June 2023)	Number of Significant Adverse Event Reviews Concluded in reporting period (1 April – 30 June 2023)	Number of active Significant Adverse Event Reviews Ongoing as at 30 June 2023
Addictions	6	6	6
Children and Families	0	8	15
Homelessness	0	1	0
Mental Health Services	10	11	52
Older People and Primary Care	1	3	10
Police Custody Healthcare	0	0	0
Prison Healthcare	0	1	11
Sandyford	0	0	2