

To: Leadership Board

On: 14 September 2022

Report by: Chief Officer, Renfrewshire Health and Social Care Partnership

Heading: Adult Social Care: Annual Report 2021/22

1. Summary

- 1.1 Adult Social Work Services were delegated to Renfrewshire Integration Joint Board (IJB) on 1 April 2016. These services are managed through the Health and Social Care Partnership (HSCP).
 - 1.2 This report, together with the scorecard, provides an overview of activity and performance using the most up to date information available.
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2. Recommendations

- 2.1 It is recommended that members note:
 - the contents of this report updating activity and performance of adult social work services delegated to the IJB; and
 - that the six-monthly update report will be presented to the Leadership Board in January 2023.
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3. Background

- 3.1 The list of functions that must be delegated by the Local Authority to the IJB is set out in the Public Bodies (Joint Working) (Prescribed Local Authority Functions, etc) (Scotland) Regulations 2014, and is noted in Annex 2, part 1 of Renfrewshire's Integration Scheme. These include:
 - Social work services for adults and older people;
 - Services and support for adults with physical disabilities and learning disabilities;
 - Mental health services;

- Drug and alcohol services;
- Adult protection and domestic abuse;
- Carers' support services;
- Community care assessment teams;
- Support services;
- Care home services;
- Adult placement services;
- Health improvement services;
- Aspects of housing support;
- Day services;
- Respite provision;
- Occupational therapy services; and
- Reablement services, equipment, and telecare.

3.2 Whilst regular reporting in relation to these services is provided to the Integration Joint Board (IJB), it was previously agreed that regular updates would also be presented to the Leadership Board. This ensures oversight of the key activities and wider context relating to the delivery of these services.

4. COVID-19 Response

4.1 The Omicron variant, whilst less severe than previous variants, was more highly transmissible and translated into a significant increase in infection numbers in Renfrewshire and across Scotland. Over the festive period and into the first few months of 2022, this increased level of infection resulted in significant increases in hospital admissions and in the need for higher levels of staff to self-isolate. This placed increasing pressure on services across the health and social care system.

4.2 Responding to this fast-evolving situation resulted in the HSCP deploying resources where they were needed most taking an informed, risk-assessed approach that adapted to changing circumstances, including:

- Proactive capacity / surge planning for a range of scenarios, to ensure the continued delivery of services to our most vulnerable adults and older people
- Implementation of guidance across all services in line with the latest national direction, including recent guidance on exemptions from self-isolation and care home visiting
- Supporting the continued delivery of the accelerated booster programme at mass vaccination centres and facilitating easy access to vaccinations for frontline staff
- Creating capacity to support seven-day discharge from hospital with twice-daily meetings to facilitate this
- Communicating changes clearly and promptly to all key stakeholders and ensuring there are mechanisms for managers and staff to quickly highlight issues as they arise.

- 4.3 Pressures across the whole health and social care system severely impacted acute hospitals. It is important that people who are no longer in need of medical care are supported to move on to a more appropriate setting.
- 4.4 The Scottish Government invested £15 million for the recruitment of 1,000 health care support workers across health boards. This is to provide additional capacity across a variety of services both in the community and in hospital settings. The local allocation is managed by NHS Greater Glasgow and Clyde and Renfrewshire HSCP received £510,000 in 2021/22 to support the recruitment of 34 health care support worker posts. Recruitment for these posts has been underway since November 2021, however we recognise that this is a challenge both locally and nationally. The HSCP continues to work in partnership with NHS Greater Glasgow and Clyde and Renfrewshire Council to maximise the number of candidates appointed and has undertaken several targeted recruitment events/fayres. These events provide the opportunity for individuals to apply and if successful be interviewed for vacancies. Future events are already in the final stages of planning and will build on the success of the previous events.
- 4.5 In addition, the Scottish Government also allocated additional funding to achieve the key principles of maximising capacity within services, ensuring staff wellbeing, ensuring system flow and improving outcomes for people. In total, Renfrewshire has been allocated £4.2m in 2021/22 and £6.1m in 2022/23 a breakdown of the funding streams is contained in the table below. This is a mixture of recurring and non-recurring funding, with £5.4m from 2022/23 recurring in future years.

<i>Funding Stream</i>	<i>2021/22 Allocation</i>	<i>2022/23 Allocation</i>	<i>Description of funding stream</i>
Interim Care arrangements	£1,323,000	£664,000	Providing interim care solutions for people within residential care until the optimal care and support is available to prevent them being unnecessarily delayed in hospital. People will be supported with their rehabilitation, recovery and recuperation.
Multi-disciplinary teams	£662,000	£1,324,000*	Expanding multi-disciplinary working by bringing together professional staff groups to improve person-centred planning and support.
Care at Home capacity	£2,051,000	£4,115,000	Expanding Care at Home provision to reduce the number of people waiting for a Care at Home service or access to care within their own home.
Wellbeing	£135,836	To be confirmed	Continuing to prioritise staff health and wellbeing in health and social care, primary care and independent providers.
TOTALS	£4,257,836	£6,103,000	

*Indicative allocation still to be confirmed

- 4.6 The HSCP has taken extensive steps to reduce delays in discharge and is performing exceptionally well with the second lowest rate in Scotland.

5. Key Activities

The key activities undertaken during 2021/22 related to the delegated services are detailed in the section below.

5.1 Care Homes

5.1.1 As members are aware, in May 2020, enhanced support for care homes and care at home services was established to ensure that clinical and care professionals from across the HSCP, Renfrewshire Council, NHS Greater Glasgow and Clyde (NHS GGC) and the Care Inspectorate could come together to have oversight across Renfrewshire.

5.1.2 This resulted in the establishment of the Clinical and Care Governance Oversight Huddle and Multi-disciplinary Team which meets jointly on a weekly basis. As new variants arise, the frequency of meetings is stepped up, which was the case during the Omicron outbreak. This ensure that our response is timely and robust, that the necessary resources can be deployed appropriately, and that expert clinical and care support is provided to residents.

5.2 Care at Home

5.2.1 Although our Care at Home services faced significant challenges, the HSCP were able to continue to support existing vulnerable service users whilst remaining responsive to the safe and timely discharge of patients from hospital, the following measures were put in place:

- An increase in operational management cover
- Enhanced overtime rate for front-line staff during the festive period
- Use of external agencies to support the existing workforce
- Wider support from HSCP and Council volunteers

This has resulted in an increase in capacity to deliver vital services and provides a model for future winter planning processes.

5.3 Day Centres and Respite Services

5.3.1 Day centres and respite services have continued to provide support to those in greatest need, supported by welfare calls, community outreach and digital engagement for those not currently attending a centre. Throughout 2021/22, services were provided in line with the Scottish Government's Strategic Framework and guidance.

5.4 Carers

5.4.1 The COVID pandemic meant that many unpaid carers found they were spending more time caring, with less opportunity to get a break. Local and national research highlighted the impact on unpaid carers' mental and physical health.

5.4.2 Despite the challenging and fast-moving nature of the pandemic, the Carers Planning Group progressed the development of a range of services to ensure that unpaid carers received the support they needed, including:

- Moving services and support online.
- Providing technology to carers so they have the opportunity to get online.
- Providing more opportunities for social activities for unpaid carers and the people they care for.
- Setting up deliveries of PPE to carers.
- Increased counselling support, including bereavement counselling.

5.4.3 Due to the pandemic and the impact on the provision of respite, £200,000 of Carers Act funding was not utilised. It was agreed that this resource would be utilised develop new support for unpaid carers, including palliative care, mental health, and reaching out to a wider group of unpaid carers including those from ethnic minority backgrounds.

5.4.4 As the HSCP continues to plan for the future beyond the pandemic, all feedback received and lessons learned during this time will be used to inform our approach to meeting the future needs of unpaid carers.

5.5 Adult Support and Protection

5.5.1 To ensure that people using our services were kept safe from harm during the pandemic, the Renfrewshire Adult Protection Committee (RAPC) met on a regular basis to consider adult support and protection governance from both operational and strategic perspectives, including: the impact of COVID-19 and associated risks and national guidance; specific adult support and protection concerns; and an analysis of data and identification of any actions required.

5.5.2 The Renfrewshire Adult Protection Committee has taken a proactive approach to quality assurance and audit activity. Each quarter a small-scale audit of 30 cases is completed based on an identified theme. This was supplemented with a large-scale multi-agency audit of 10 cases with high levels of interagency referrals which commenced in August 2022.

5.5.3 Demand for AWI reports, which require to be completed by a qualified Mental Health Officer, have risen steadily over recent years (mirroring increases across Scotland). The complexity of cases has increased and may include cases referred following financial harm risks identified through adult support and protection processes. The Council may require becoming involved to pursue the removal of a financial proxy and to pursue alternative financial arrangements to safeguard an adult at risk of harm. In addition, the pressure on request for AWI reports where a delayed hospital discharge is involved has risen sharply and this places further pressure on a limited capacity within the service.

5.5.4 The Adult Protection Committee has also driven forward the following national and local priorities:

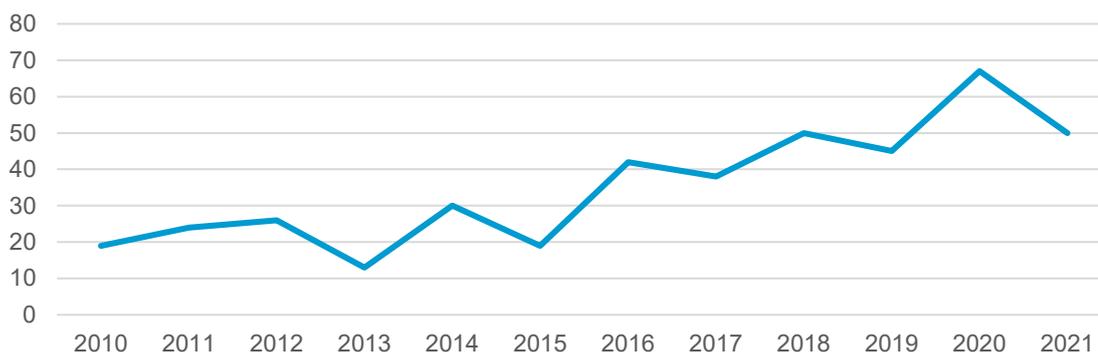
- Working alongside the Institute for Research and Innovation in Social Services (IRISS) to develop a new National Minimum Dataset for Adult Support and Protection to co-design, test and refine a dataset for quarterly indicators.
- Participated in the National Missing Persons Framework Implementation Project to develop a Missing Persons Protocol. Following conclusion of our involvement at a national level, a Renfrewshire's Missing Persons Protocol is now being developed.

- Develop a draft multi-agency Hoarding Policy and guidance which describes what is meant by hoarding; the types of behaviour exhibited and what impact it may be to the individual and those around them. The policy includes a risk assessment to identify the level of risk to the individual and others. In addition, there is clear guidance on what intervention practitioners should consider to mitigate risk.
- As a result of an increase in ASP referrals and large-scale inquiries from care homes a sub-group was established which aims is to take an early intervention approach to minimise potential increasing risk within residential establishments.

5.6 Alcohol and Drugs Recovery

- 5.6.1 The provision of timely, evidence-based treatment and support to individuals attending Renfrewshire Alcohol and Drug Recovery Service (ADRS) continued to be a priority with services remaining operational.
- 5.6.2 The Continuing in Recovery Changes Lives Entirely (CIRCLE) Recovery Hub opened in December 2021. Working in partnership with local people who have lived or living experiences of mental health, alcohol or drug related issues, CIRCLE has been developed to support local people who are on a recovery journey. The service provides a wide and varied programme of activities, aimed at encouraging, involving, and supporting people in recovery.
- 5.6.3 As members are aware, in March 2020 £2m of funding was allocated by Renfrewshire Council to support the emerging recommendations of the Renfrewshire Alcohol and Drugs Commission. Officers worked with partners to bring forward an initial tranche of funding proposals which would target the priorities identified as being most urgent by the Commission. Since this time, the Council and Leadership Board have allocated £1.63 million funding to support a range of projects which will aim to pilot new ways of working across the Community Planning Partnership, with the opportunity to use this learning to transform the way in which people receive support across Renfrewshire.
- 5.6.4 The Programme Board continues to oversee the local partnership response to the Commission, and this is chaired by the Council's Chief Executive. Partners are working very closely to ensure that all of the activities being progressed are joined up and make maximum use of the funding and resources available.
- 5.6.5 In addition, the Programme Board continues to closely monitor suspected and drug-related deaths in Renfrewshire. The most recent data released by the National Records for Scotland reported that during 2021, sadly 50 drug-related deaths occurred in Renfrewshire, this represents a decrease of 25% compared to 2020 (67). However, this is the second highest number since 2010, refer to graph below.

Drug misuse deaths in Renfrewshire, 2010 to 2021



- 5.6.6 We know that drug-related deaths are most common in males (68.4%), and those aged between 45-54 and that opiates or opioids continue to be present in 82% of all drug-related deaths in NHS GGC.
- 5.6.7 The Board also considered the implications of the Scottish Drug Deaths Task Force final report '[Changing Lives](#)'. The report was published on 21 July 2022 and sets out a suite of 20 evidence-based recommendations and 139 actions that they envisage will reduce drug-related deaths and harms and improve and save the lives of people who use drugs. It has been agreed that Renfrewshire's Alcohol and Drugs Partnership will undertake a self-assessment against the relevant recommendations and actions and report this back to a future meeting of the Programme Board.

6 Local Policy Development

6.1 Strategic Plan

- 6.1.1 During 2021/22 Renfrewshire HSCP worked with local partners and representative groups to develop the Strategic Plan 2022-25. Significant engagement was undertaken during the formal public consultation period between 1 December 2021 to 31 January 2022. Following this, the updated draft plan was presented to the Leadership Board on 1 December 2022 and was subsequently approved by Renfrewshire Integration Joint Board (IJB) in March 2022.
- 6.1.2 The Plan proposes that services are shaped to support people in Renfrewshire to live meaningful lives and achieve their hopes and aspirations. A key focus is on supporting each person, rather than focusing on a condition, helping people to live independently and exercise choice and control over the care and support they receive.
- 6.1.3 More recently the Delivery Plan for year one was approved by the IJB, performance monitoring will be embedded with the existing IJB arrangements and performance dashboards will be created for each Care Planning Group.

6.2 Medium Term Financial Plan

- 6.2.1 The Medium Term Financial Plan, for Renfrewshire IJB, outlines the financial challenges and opportunities the HSCP faces over the next three years and provides a framework which will support the HSCP to remain financially sustainable. It complements the Strategic Plan, highlighting how the HSCP

Medium Term Financial Planning principles will support the delivery of the IJB's strategic objectives and priorities.

- 6.2.2 In view of the current scale of uncertainty, a scenario-based approach continues to be adopted, where potential outcomes have been considered over low, medium, high and worse case projected positions. Using this scenario approach, current projections for the period 2022/23 – 2024/25 include a wide range of assumptions in respect of key cost pressures and demand, highlighting a potential budget gap within a range of £37m to £48m for this three-year period. As a result, the HSCP Chief Finance Officer (CFO) recommends that the IJB progresses with a financial planning strategy based on the medium scenario of a budget gap within a range of £13m to £14m per annum, over this three-year period. This assumed budget gap does not take into account potential additional funding for any pressures from either the Scottish Government or our partner organisations. In addition, it is important to note that these projections are prior to any mitigating action being taken.
- 6.2.3 The IJB holds general reserves of £5.8m which equates to circa 2% of the IJB's net budget, including set aside. This is in line with our current policy which proposes 2% as an optimum level of reserves, recognising prudent financial planning and budgetary constraints.
- 6.2.4 The HSCP Chief Officer and Chief Finance Officer will work with IJB members to take forward the Medium Term Financial Strategy to deliver financial balance whilst delivering safe and sustainable services.

6.3 Workforce Plan

- 6.3.1 The HSCP worked with partners across the health and social care system to develop an interim Workforce Plan for the period 2021-22 which had an immediate focus on supporting the health and wellbeing of the workforce during the COVID pandemic.
- 6.3.2 Since this time, the Scottish Government required all HSCPs to submit a draft Workforce Plan 2022-25 by 31 July 2022. This plan sets out the objectives and supporting actions that the HSCP and its partners will seek to deliver over the coming three years to develop a sustainable workforce which provides career choices and opportunities for those who currently work in the sector and attracts people with a range of experiences and skills to work in health and social care in Renfrewshire.
- 6.3.3 An analysis process will take place, following which feedback will be provided by the Scottish Government. The HSCP will then update the draft plan as required, with a final copy to be submitted to the Scottish Government alongside an electronic version published on the HSCP's website. The deadline for this submission has now been extended from the end of October 2022 to the end of November 2022 to reflect the differing scheduling of local governance within NHS Boards and IJBs.

6.4 Wider Strategy Development

- 6.4.1 The Carers and Palliative Care Planning Groups have undertaken extensive preparatory work to develop new Carers and Palliative Care Strategies in advance of them being presented to the IJB later in 2022/23 for approval.

- 6.4.2 The Carers (Scotland) Act 2016 requires Local Authorities to prepare and publish a Carers' Strategy, a Short Breaks Statement and to set local eligibility criteria for carers. To align with the HSCP's Strategic Plan timeframe, these are currently under review and will be presented to the IJB in September 2022 for approval.
- 6.4.3 The Palliative Care Strategy sets out the vision and future direction for palliative and end of life care in Renfrewshire. The vision is to support the national ambition of a future where all people living with a life limiting illness, and their families and carers, have the support they need to live the best possible life and to experience the best possible death. Formal consultation of the draft strategy and action plan is currently underway and the feedback from which will be utilised to develop the final plan.

7 National Care Service

- 7.1 The establishment of a National Care Service (NCS), and associated changes to the broader system, represent one of the most significant pieces of public service reform to be proposed by the Scottish Government.
- 7.2 The Scottish Government welcomed the recommendations made by the Independent Review of Adult Social Care (IRASC) and consulted on proposals to achieve changes to the system of community health and social care in Scotland in the autumn of 2021. Whilst the IRASC focused on adult social care support, many integration authorities have delegated responsibility for a broader remit. The Scottish Government's consultation proposals considered widening the NCS scope to include community health functions, children's social work and social care, justice social work, addiction and rehabilitation and related services.
- 7.3 In June 2022, the Scottish Government published the NCS Bill which will make Scottish Ministers accountable for adult social care in Scotland. The Bill provides the foundation for the NCS and confirms that the fine detail of the new service will be co-designed with people who have direct experience of social care services. Plans have also been published to explain how that collaboration will work. The aims are to:
- support people in their own homes or among family, friends and community wherever possible, with seamless transitions between services;
 - create a charter of rights and responsibilities for social care, with a robust complaints and redress process;
 - introduce rights to breaks for unpaid carers;
 - introduce visiting rights for residents living in adult care homes, giving legal force to Anne's Law;
 - ensure fair employment practices and national pay bargaining for the social care workforce;
 - focus on prevention and early intervention before people's needs escalate; and
 - create a new National Social Work Agency to promote training and development, provide national leadership and set and monitor standards in social work.

- 7.4 The Council will continue to be closely engaged in the development and co-design of the new service which Scottish Ministers have committed to establishing by the end of the current Parliamentary term in 2026.

8 Adult Social Work Performance Overview

- 8.1 Adult Social Work services are managed and monitored via regular internal HSCP professional governance and operational management arrangements, including meetings, case management, and regular service and case reviews. These meetings involving Heads of Service and Service Managers covering a variety of local and national strategic and operational indicators. They allow Managers to scrutinise and discuss performance data, agree remedial action, timescales for improvement, and consider future challenges which may affect services to allow planned actions and mitigation where appropriate.
- 8.2 In addition to internal scrutiny, performance is reported regularly to the IJB meeting, with the scorecard presented twice-yearly. The report charts data for the last three years and, where possible, associated targets, the 'performance direction of travel' and whether the indicator is currently on track to meet target. The reports provide a detailed picture of what is working well, current challenges and intended remedial action where necessary.

The Renfrewshire IJB Scorecard reports on Adult Social Work indicators alongside a variety of both local and national health service indicators. All indicators are reported under the nine national health and wellbeing outcomes.

- 8.3 Current performance (Q4 2021/22) for the 19 adult social care services' indicators is as follows:

Performance Indicator Status		No.
	Target achieved	2
	Warning	1
	Alert	1
	Data only	15

Direction of Travel	
	Improvement
	Deterioration
	Same as previous reporting period

- 8.4 Areas of Strength - The following three indicators are rated green and are achieving target.

Status	Performance Indicator	18/19 Value	19/20 Value	20/21 Value	21/22 Value	Target	Direction of Travel
National Indicator 2: People are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community							
	Percentage of clients accessing out of hours home care services (65+)	89%	90%	90%	90%	85%	

Status	Performance Indicator	18/19 Value	19/20 Value	20/21 Value	21/22 Value	Target	Direction of Travel
	Average number of clients on the Occupational Therapy waiting list	349	315	159	143*	350	

*The number of clients on the Occupational Therapy waiting list has reduced significantly following the implementation of the new social work case recording system which auto-allocates the referrals to the appropriate team upon receipt of the request. As a result, the HSCP will consider including a new local indicator that monitors the allocation to the actual commencement of services, this will be included in future reports to the Leadership Board.

8.5 The following indicator is an amber warning given that it is 1% below target.

Status	Performance Indicator	18/19 Value	19/20 Value	20/21 Value	21/22 Value	Target	Direction of Travel
National Indicator 2: People are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community							
	Percentage of long-term care clients receiving intensive home care	28%	27%	29%	29%	30%	

8.6 Although the following indicator is a red alert, the HSCP continues to closely monitored sickness absence and provide the necessary support and advice to staff to enable them to return to work e.g. our Care at Home Service has secured additional resources to manage attendance, this has been hugely beneficial both to staff and managers throughout the pandemic.

Status	Performance Indicator	18/19 Value	19/20 Value	20/21 Value	21/22 Value	Target	Direction of Travel
National Outcome 8: People who work in health and social care services are supported to continuously improve the information, support, care and treatment they provide and feel engaged in the work they do							
	Sickness absence rate for HSCP Adult Social Work staff (work days lost per FTE)	17.43	18.08	13.50	17.79	Annual 15.3 days	

8.7 In addition, the following 15 performance indicators are for data purposes only:

Performance Indicator	18/19 Value	19/20 Value	20/21 Value	21/22 Value
National Outcome 2: People are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community				
Homecare hours provided - rate per 1,000 population aged 65+	444	414	390	411
Percentage of homecare clients aged 65+ receiving personal care	99%	99%	99%	99%

Performance Indicator	18/19 Value	19/20 Value	20/21 Value	21/22 Value
Population of clients receiving telecare (75+) - Rate per 1,000	40.17	50	46	58
Percentage of routine OT referrals allocated within 9 weeks	52% (Baseline developed)	42%	41%	68%
National Outcome 6: People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and wellbeing				
Number of adult carer support plans completed for carers (age 18+)	93	162	86	148
Number of adult carer support plans declined by carers (age 18+)	78	34	51	36
Number of young carers' statements completed	78	68	49	27
National Outcome 7: People using Health & Social Care services are safe from harm				
Number of Adult Protection contacts* (including AWC) received	2,723	3,106	3,487	4263
Total Mental Health Officer service activity	723	683	627	905
Number of Chief Social Worker Guardianships (as at position)	113	110	115	125
Percentage of children registered in this period who have previously been on the Child Protection Register	24%	11%	29%	30,4%
National Outcome 8: People who work in health and social care services are supported to continuously improve the information, support, care and treatment they provide and feel engaged in the work they do				
No. of SW employees, in the MTIPD process, with a completed IDP	909	1,000	People, Performance and Talent Policy is currently being reviewed and a new indicator will be developed.	
National Outcome 9: Resources are used effectively in the provision of health and social care services, without waste				
Care at Home costs per hour (65 and over)	£26.40	£23.05	£25.71	Information from LGBF - available early 2023
Direct payment spend on adults 18+ as a % of total social work spend on adults 18+	5.88%	4.05%	4.47%	Information from LGBF - available early 2023
Net residential costs per week for older persons (over 65)	£298	£277	£248	Information from LGBF - available early 2023

- 8.8 Following approval of the proposed Council and Community Plans which will be presented to Council on 29 September 2022 a suite of performance indicators, data indicators and new actions will be developed to reflect the new plans.

9. Next Steps

- 9.1 The next performance report on delegated Adult Social Care functions will be reported to the Leadership Board early 2023.

Implications of the Report

1. **Financial** – Although there are no direct costs associated with this report, Section 6.2 provides an overview of the Medium Term Financial Plan, for Renfrewshire IJB including the financial challenges and opportunities the HSCP faces over the next three years.
2. **HR & Organisational Development** – As mentioned in Section 6.3 The HSCP has submitted a draft Workforce Plan 2022-25 to the Scottish Government. This plan sets out the objectives and supporting actions that the HSCP and its partners will seek to deliver over the coming three years to develop a sustainable workforce
3. **Community/Council Planning – none**
4. **Legal – none**
5. **Property/Assets – none**
6. **Information Technology – none**
7. **Equality & Human Rights**
The Recommendations contained within this report have been assessed in relation to their impact on equalities and human rights. No negative impacts on equality groups or potential for infringement of individuals' human rights have been identified arising from the recommendations contained in the report because it is for noting only. If required following implementation, the actual impact of the recommendations and the mitigating actions will be reviewed and monitored, and the results of the assessment will be published on the Council's website.
8. **Health & Safety – none**
9. **Procurement – none**
10. **Risk – none**
11. **Privacy Impact – none**
12. **Cosla Policy Position – none**
13. **Climate Risk** – The HSCP is committed to tackling the climate emergency and actively participates in Renfrewshire's Plan for Net Zero.

List of Background Papers

None

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