

To: Leadership Board

On: 15 September 2021

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

Heading: Adult Social Care – Annual Monitoring Report 2020/21

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 provide 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 performance report will be presented to the Board on 23 February 2022.
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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
- Reablement services, equipment and telecare

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

4. The Impact of COVID-19

4.1 The ongoing pandemic and resulting restrictions have continued to significantly impact Renfrewshire and the rest of the world. The way services and support are provided has continued to be vastly different from pre-pandemic. Partners recognise that COVID-19 and subsequent restrictions have had a significant impact on Renfrewshire's residents and that its effects will continue to be seen in the short, medium and longer term. With a focus now on recovery, The HSCP and partners are working together to support individuals, families and communities across Renfrewshire.

4.2 The Partnership has had to make significant changes over the last year to continue delivering services, while also mobilising the response to the pandemic by:

- Quickly adjusting services to adapt to the COVID-19 environment and providing the best possible support for Renfrewshire communities.
- Responding rapidly to implementing national guidance, which was often updated daily.
- Creating bespoke services to meet new local community needs, such as medicine delivery.
- Establishing and supporting a range of new services such as the COVID-19 Assessment Centre, the COVID-19 Vaccination Programme and testing for staff and care home residents.

5. Key Activities During 2020/21

- 5.1 Our workforce must be commended for being incredibly flexible, dedicated, and resilient throughout the pandemic. We recognise the importance of continuing to provide the necessary advice and support to help staff maintain their physical and psychological health and wellbeing.
- 5.2 COVID-19 has had no bigger impact than it has on care homes. 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 and NHS Greater Glasgow and Clyde could come together to have oversight across Renfrewshire. This resulted in the following arrangements being introduced to strengthen clinical and care governance of care homes and care at home services across Renfrewshire:
- Daily Huddle (more recently moved to twice weekly): the huddle is 'responsible and accountable' for providing oversight, analysis and response to emerging issues; infection prevention and control; and for the clinical and care support provided to service users including testing and vaccinations.
 - Renfrewshire Clinical and Care Oversight Group weekly multi-disciplinary team (MDT) meeting: the group is responsible for analysing all aspects of COVID-19, infection control, testing, training and support; classifying each care home using the Scottish Government agreed rating and completing the local return to the Director of Public Health, NHS Greater Glasgow and Clyde. There is also a requirement for the MDT to escalate issues via the Chief Officer / Director Nursing to the Chief Executives of the Council and NHS respectively.
 - Monthly Care Home Peer Support Meeting (initially held weekly): this meeting provides a forum for clinical and care advice and support to all registered homes in Renfrewshire. This meeting is well attended by all care homes and has been so successful that it is intended this meeting is continued beyond the pandemic.
- 5.3 Care at Home services have continued to provide critical care support to people of Renfrewshire throughout the pandemic. COVID-19 has had a significant impact on Care at Home services when providing support to people within their own homes. Due to the uncertainty and outbreak of COVID-19, some people receiving care chose to reduce the support they received to reduce their risk of infection which contributed to balancing the impacts of reduced staffing capacity due to shielding and self-isolation.

As part of the Older Peoples Services Review Programme, work is underway to identify and implement improvements across Care at Home services whilst incorporating learning from the response and renewal to COVID-19, such as:

- a new fast-tracked recruitment process for Home Care workers.
- introduced a testing programme for staff.
- increased training and awareness of infection control processes.
- commenced staff training programme to meet Scottish Social Services Council (SSSC) requirements.

- provided staff with a new digital communication portal, reducing paper processes, and providing staff instant access to COVID related information and guidance.

The HSCP continues to review the ongoing needs of service users, ensuring that their care requirements are being met appropriately. This may result in changes to the level and nature of services that some individuals receive.

- 5.4 To ensure that people using our services were kept safe from harm during the pandemic response, a monthly (initially held fortnightly) meeting of key stakeholders from the Renfrewshire Adult Protection Committee (RAPC) was convened. This group considered Adult Support and Protection governance from both operational and strategic perspectives, including:
- The impact of COVID-19 on inter-agency service delivery.
 - Risk areas from across all RAPC members, including workforce-related issues.
 - Specific ASP practice concerns or risks arising, and mitigating actions required. Analysis of ASP data and identification of any actions required.
 - Review of national ASP COVID-19 guidance and development of local guidance to supplement this.
 - Specific case discussions. This group, which was supplementary to quarterly RAPC meetings, reported directly to Chief Officers, who met at an increased frequency to discuss issues arising across public protection agendas.
- 5.5 During 2020/21, three Large Scale Investigations (LSIs) were undertaken within care homes in Renfrewshire, as per the Adult Support and Protection (Scotland) Act 2007. These were triggered by concerns raised during Daily Huddles - including COVID-19 Care Home Assurance visits led by the HSCP – and concerns raised by the Care Inspectorate as part of their inspection activity. LSI meetings occurred on a weekly basis with the LSI Teams and the relevant HSCP Head of Service to ensure that appropriate scrutiny of these specific care homes was occurring, alongside the provision of sufficient safeguards and support to the homes. These enhanced governance arrangements for three particular care homes during COVID-19 were introduced due to the identified risks.
- 5.6 In line with national guidance, many of the HSCP building based day support services were closed, however the HSCP maintained regular contact with service users, providing support and advice in relation to COVID-19, addressing social isolation, and signposting to other supports and services.

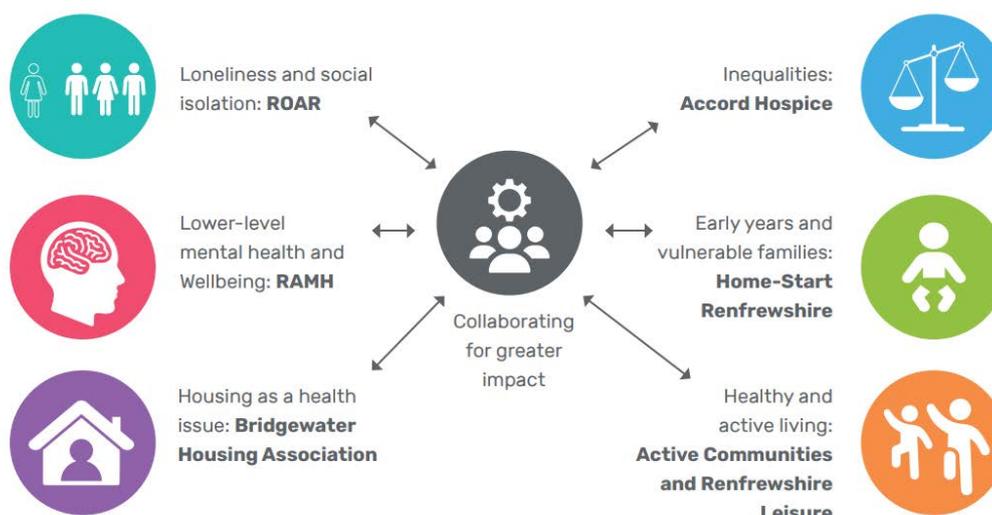
When permitted to do so, the Learning Disability service gradually increased the capacity at day services, albeit at a reduced level, this was undertaken in line with local and national restrictions.

As part of the recovery activity, the HSCP developed an interim hub and spoke approach to day support for older people and adults with a physical disability, which began in April 2021. This approach combines support within the Falcon day centre for those with most critical needs, with community outreach services provided to people within their own homes, delivered alongside ongoing welfare calls as noted above. The model has been created in recognition that it will not be possible to re-open every day care building immediately, and that

buildings will need to operate at reduced occupancy due to infection control and physical distancing requirements.

5.7 The HSCP and its partners in the Strategic Planning Group (SPG) adapted their ways of working with local communities to provide the necessary essential support to vulnerable people. The SPG continued to meet online regularly over 2020/21 and is recognised as a valuable resource in delivering the HSCP's Recovery and Renewal plans. During this time partners agreed a series of six priorities that would help improve outcomes for communities and people who use services, with a focus on prevention and early intervention.

As a result, six sub-groups of the SPG were formed and each priority group was led by Third Sector partners:



The sub-groups have continued to meet and provide an opportunity for both cross-sector working and innovative design and development of community-based health initiatives.

5.8 The provision of timely, evidence-based treatment and support to individuals attending Renfrewshire Alcohol and Drug Recovery Service (ADRS) continued to be a priority throughout the pandemic with services remaining operational. In addition, the following service provision is also available:

- The distribution of Naloxone targeting individuals at risk of an opiate overdose, and their families continued to be driven through ADRS, needle exchanges and local pharmacists. In addition to this, the distribution of Naloxone has been extended as a result of the pandemic to include non-drug treatment services. This means that services, who may come into contact with individuals who use drugs and who may be at risk of overdose, can provide Naloxone kits. This will maximise the availability of Naloxone and add existing supply routes.
- Two Peer Navigators work in partnership with services to connect with individuals who have been affected by alcohol, drugs and mental health.
- Attend Anywhere – Near Me (Video consultation) has been introduced to be available for service users to encourage engagement with services.
- Extended access to residential rehabilitation services.

- Close collaboration with colleagues from the emergency department at the RAH following near fatal overdoses.
- Ensure that rapid restart of treatment is available following relapse.
- Adopted an assertive outreach approach for service users.
- Have a clear pathway in place for those who are released from prison.
- Implement the Drug Deaths Prevention Action Plan including the Medication Assisted Treatment (MAT) Standards with a focus on introducing same day prescribing and choice of treatment using rapid access assessment to opiate substitute therapy.

5.9 During 2020/21 an Alcohol and Drugs Change Programme and Programme Board was established to drive the implementation of the partnership response to the recommendations of Renfrewshire Alcohol and Drugs Commission. The recommendations provide clear direction to community planning partners on the action that must be taken to fundamentally address the impact of alcohol and drug use in Renfrewshire. They are bold and ambitious and focus on what needs to change to support:

- People who use alcohol and drugs.
- Families impacted by alcohol and drug use.
- Young people experiencing issues in relation to alcohol and drug use and mental health issues.
- Local communities that are impacted by alcohol and drug use within their local areas.

Officers have worked with key partners to assess the report findings and have developed an initial high-level action plan which sets out the key actions and activities that partners will progress in relation to all 27 recommendations.

A more detailed update report on the progress made by the Programme Board is also included on the agenda for this Leadership Board.

6. Adult Social Work Performance Overview

6.1 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.

6.2 In addition to internal scrutiny, performance is reported at every Integration Joint Board 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.

6.3 Current performance for the 19 Adult Social Work Services' indicators is as follows:

Performance Indicator Status		No.
	Target achieved	3
	Warning	1
	Alert	0
	Data only	15

Direction of Travel	
	Improvement
	Deterioration
	Same as previous reporting period

6.4 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	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%	85%	
	Average number of clients on the Occupational Therapy waiting list	349	315	159	350	
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	Annual 15.3 days	

6.5 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	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 (national target: 30%)	28%	27%	29%	30%	

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

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			
Performance Indicator	18/19 Value	19/20 Value	20/21 Value
Homecare hours provided - rate per 1,000 population aged 65+	444	414	390
Percentage of homecare clients aged 65+ receiving personal care	99%	99%	99%
Population of clients receiving telecare (75+) - Rate per 1,000	40.17	50	46
Percentage of routine OT referrals allocated within 9 weeks	52% (Baseline developed)	42%	41%
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
Number of adult carer support plans delined by carers (age 18+)	78	34	51
Number of young carers' statements completed	78	68	49
National Outcome 7: Health and social care services contribute to reducing health inequalities			
Number of Adult Protection contacts received	2,723	3,106	3,487
Total Mental Health Officer service activity	723	683	627
Number of Chief Social Worker Guardianships (as at position)	113	110	115
Percentage of children registered in this period who have previously been on the Child Protection Register	24%	11%	29%
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	
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	Information from LGBF - available early 2022

Direct Payment spend on adults 18+ as a % of total social work spend on adults 18+	5.88%	4.05%	Information from LGBF - available early 2022
Net residential costs per week for older persons (over 65)	£298	£272	Information from LGBF - available early 2022

7. National Direction

- 7.1 As reported to Council on 4 March 2021, an [Independent Review of Adult Social Care](#) was published in February 2021 and the Scottish Government subsequently made a commitment to implementing the recommendations of the review, including the creation of a National Care Service.
- 7.2 More recently, on 9 August 2021 the Scottish Government launched the National Care Service consultation and invited responses by 18 October 2021. It is anticipated that new legislation (a bill) will be introduced in the Scottish Parliament by Summer 2022.
- 7.3 The consultation is focused on exploring the suggestions for significant cultural and system change that will need to be supported by primary legislation, with new laws required to implement the scale of change required. At a minimum the new National Care Service will cover adult social care services. However, its scope could also be extended to other groups such as children and young people, community justice, alcohol and drug services, and social work and this consultation sets out proposals for an expanded scope for the National Care Service.
- 7.4 The consultation also includes a number of recommendations for “Improving care for people” and also proposes that Integration Joint Boards (IJBs) will be reformed to become Community Health and Social Care Boards (CHSCBs) and become the local delivery body for the NCS, funded directly by the Scottish Government.
- 7.5 The proposals set out in this consultation paper will have a cost, however, this is seen as investment in society and not a burden. There will be a focus on early intervention and prevention which will avoid the need for more costly action at a later stage.
- 7.6 A report on Renfrewshire Council’s response to this consultation will be presented to full Council on 30 September 2021.

8. Strategic Context

- 8.1 Renfrewshire’s IJB is required by the [Public Bodies \(Joint Working\) \(Scotland\) Act 2014](#) to produce a Strategic Plan on how community health and social care functions delegated to it by Renfrewshire Council and NHS Greater Glasgow and Clyde will be planned and delivered over the medium term (three years). The existing Strategic Plan covers the period 1 April 2019 to 31 March 2022 and the HSCP, on behalf of the IJB, will take the necessary statutory steps to review the plan prior to 1 April 2022. In accordance with the act, the review will consider:
- the national health and wellbeing outcomes;

- the indicators associated with the national outcomes;
- the integration delivery principles; and
- the views of the Strategic Planning Group.

8.2 Nationally the strategic and policy context in relation to health and social care continues to evolve and retains a high degree of uncertainty. The new Strategic Plan will require to align with these and other key transformational change drivers such as the response to and recovery from COVID-19 and the recommendations from the independent review of adult social care.

8.3 Listening to, involving and engaging with our communities will be at the heart of the Strategic Plan. The HSCP will work the Strategic Planning Group (which includes wide representation from Renfrewshire Council services) to ensure that we can harness our collective expertise to truly 'Plan with People'.

8.4 The Strategic Planning 2022-2025 consultative draft will be presented to the Leadership Board on 1 December 2021.

9. Next Steps

9.1 Renfrewshire Council's response to the National Care Service consultation will be presented to Council on 30 September 2021.

9.2 The consultative draft version of the Strategic Plan 2022-2025 will be presented to the Leadership Board on 1 December 2021.

9.3 The next performance report on delegated Adult Social Work functions will be reported to the Leadership Board on 23 February 2022.

Implications of the Report

1. **Financial - none.**
2. **HR & Organisational Development - none**
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 will actively participate in developing Renfrewshire's plan for net zero.

List of Background Papers

None

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