ITEM No ...7......



REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD – 14 DECEMBER 2022

- REPORT ON: CHIEF SOCIAL WORK OFFICER ANNUAL REPORT 2021-22
- REPORT BY: CHIEF SOCIAL WORK OFFICER
- REPORT NO: DIJB83-2022

1.0 PURPOSE OF REPORT

1.1 This report brings forward for information the Chief Social Work Officer's Annual Report for 2021-22, attached as appendix 1.

2.0 RECOMMENDATIONS

It is recommended that the Integration Joint Board (IJB):

2.1 Note the content of this report and the Chief Social Work Officer's Annual Report for 2021-22, attached as appendix 1.

3.0 FINANCIAL IMPLICATIONS

3.1 None.

4.0 MAIN TEXT

- .1 The requirement that every local authority has a professionally qualified Chief Social Work Officer (CSWO) is set out in Section 5 (i) of the Social Work (Scotland) Act 1968, as amended by Section 45 of the Local Government (Scotland) Act 1994. Associated regulations state that the CSWO should be a qualified Social Worker and registered with the Scottish Social Services Council (SSSC).
- 4.2 The CSWO provides a strategic and professional leadership role in the delivery of Social Work services, in addition to certain functions conferred by legislation directly on the officer. The overall objective of the role is to ensure the provision of effective, professional advice and guidance to Elected Members and officers in the provision of Social Work and Social Care services.

The Public Bodies (Joint Working) (Scotland) Act 2014 provides for the delegation of certain Social Work functions to an integration authority but the CSWO's responsibilities in relation to local authority Social Work functions continue to apply to services which are being delivered by other bodies under integration arrangements. Responsibility for appointing a CSWO cannot be delegated and must be exercised by the local authority itself. The CSWO also has a role in providing professional advice and guidance to the Integration Joint Board (IJB).

4.3 National guidance requires that the CSWO produces and publishes an annual summary report for local authorities and IJBs on the functions of the CSWO and that the approved report is forwarded to the Scottish Government to contribute towards a national overview of Social Work services. The information in this report complements other more detailed service specific reports on Social Work and Social Care services which have been reported in other ways. 4.4 As can be seen in this year's report (attached as Appendix 1), Social Work and Social Care services have continued to deliver quality support which improves lives and protects vulnerable people. Alongside responding to many challenges across the wider public sector and Social Work specific landscape services have continued to both respond to both the direct and indirect impacts of the COVID-19 pandemic.

There are a number of highlights in the report alongside a description of ongoing challenges and priorities ahead. Some specific achievements include:

- The Social Work and Social Care response to the COVID-19 pandemic, including supports to vulnerable people, to carers and to the workforce. Across Children and Families Social Work Services data indicates that patterns of referral and response activity are returning to pre-pandemic levels, with fewer extreme highs and lows of demand. In Community Justice Social Work, the service has responded positively to the increase in court business that took place during 2021/22. In adult health and social care, services continue to be at different stages of remobilisation, with some still impacted by national public health guidance / restrictions and enhanced oversight. During 2021/22 all social care packages that were adjusted due to the COVID-19 response were re-started or adjusted back to normal arrangements. The Council's Learning and Organisational Development Service has continued their leading role in responding to the health and wellbeing needs of the workforce and in supporting reflection and recovery from the pandemic period.
- An ongoing range of self-evaluation activities the findings of which have provided assurance about the quality and impact of services and informed improvement activities. For example, quality assurance work undertaken by Children and Families has demonstrated the availability and impact of effective early help to children, young people and families and the proportionate response to risk across child protection arrangements. Self-assessment exercises were completed to inform both the Joint Inspection of Service for Children and Young People at Risk of Harm and the review undertaken by the Dundee Drugs Commission.
- Social work services had a central role in the Joint Inspection of Services for Children and Young People at Risk of Harm, which provided strong external validation of internal self-assessment findings that identified key strengths in relation to collaborative working, workforce and leadership commitment, and the consistency of high-quality support and relationships with children and families both before and through the pandemic period.
- A diverse range of positive collaborations between Social Work and Social Care services delivered by the Council and Health and Social Care Partnership and commissioned services in the third and independent sectors. This includes partnership working in relation to the development of A Caring Dundee 2 (Dundee's Carers Strategy) and linked investment in services, work across the Dundee Partnership to design and deliver the Community Wellbeing Centre and to progress improvements in drug and alcohol services, such as expanded Naloxone distribution. Partnership work was also central to the opening of the Bella Community Custody Unit, the response to Unaccompanied Asylum Seeking Children and people displaced from Ukraine.
- The continued development and implementation of a range of learning and development activities to support the Social Work and Social Care workforce to undertake reflective practice, continuous learning and improvements and provide opportunities to develop leadership skills, enhance professional qualifications and undertake protection duties.
- Positive performance across a range of statutory Social Work functions includes:
 - In Children's Services, the overall number of care experienced children and young people has reduced significantly, and the service has continued to see high levels of engagement with care experienced young people via throughcare and aftercare supports. The length of time children were supported on the Child Protection

Register returned to pre-pandemic levels, as did the number of Child Protection Orders granted.

- In Community Justice Social work, the successful completion rate of Community Payback Orders returned to be above the national average. The number of hours of Unpaid Work imposed by the courts more than doubled in comparison with 2020/21, with many Unpaid Work projects benefiting schools and communities.
- In the Health and Social Care Partnership, although the ongoing impact of the pandemic led to a deterioration in performance against some national indicators for delayed discharge, across the whole year 98% of hospital discharges in Dundee were not associated with a delay. The number of emergency bed days, including those for mental health admissions, continued to reduce from previous years and the Partnership performed well in the Health and Social Care Experience Survey questions related to independent living, having a say in how care is provided and overall quality of care.
- 4.5 Ongoing challenges facing Social Work and Social Care services throughout 2021/22 included the continued impact of the pandemic on service delivery arrangements, workforce wellbeing and the needs of citizens. Retention and recruitment challenges have emerged as a significant risk, including within commissioned services. These are challenges that are shared nationally and there has been a focus both locally and nationally on risk mitigation. For example, during the year there was a focus on investing in the young workforce, reviewing recruitment approaches and developing approaches to succession planning. In common with other public services, Social Work and Social Care were challenged by financial pressures, although additional funding made available to meet the costs of responding to the pandemic provided some assistance with this.
- 4.6 The 2021/22 annual report is also forward looking and identifies the key challenges and opportunities for the coming year across Children's Services, Community Justice and Health and Social Care. The report identified the following improvement priorities to be progressed by Social Work and Social Care services during 2022/23:
 - **PARTICIPATE** in the co-design process for the National Care Service, reflecting local knowledge and experience.
 - **DEVELOP** enhanced ways to co-produce services and supports to ensure that we remain person-centred and responsive to local communities.
 - **SUPPORT** our social work and social care workforce to recover from the impact of the pandemic and to maintain good health and wellbeing.
 - **ENHANCE** our focus on prevention of risk and harm by working collaboratively across the whole GIRFEC pathway for children and young people.
 - **FOCUS** on the continued implementation of Our Promise to Care Experienced Children, Young People and Care Leavers 2019-2023.
 - **FURTHER** progress recovery of Community Justice Services as part of a whole systems remobilisation of community justice services across Scotland.
 - **CONTINUE** to focus on driving forward improvements in mental health and wellbeing and drug and alcohol services through collaborative working, including working with people with lived experience to fully implement existing action plans and consider any emerging challenges.
 - **CONTINUE** work to further roll out our approach to trauma informed practice and leadership and to enhance whole family approaches to protecting people.

- ACCELERATE work to embed personalised approaches across all service areas, including specific work to enhance our approach to outcome-based assessment and supporting people to access Self-Directed Support.
- **CONTINUE** to work with partners across the whole health and social care system, including acute care services, to achieve an unscheduled care response that delivers the right care, in the right place, at the right time, first time.
- **REFRESH** the Chief Social Work Officer Governance Framework to ensure that postpandemic it continues to support proportionate oversight, reporting and continuous improvement in social care and social work services.

5.0 POLICY IMPLICATIONS

5.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

6.0 RISK ASSESSMENT

6.1 This report has not been subject to a risk assessment as it does not require any policy or financial decisions at this time.

7.0 CONSULTATIONS

7.1 The Chief Officer, Chief Finance Officer, Head of Service - Health and Community Care, Dundee City Council Leadership Team and the Clerk were consulted in the preparation of this report.

8.0 DIRECTIONS

8.1 The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	1. No Direction Required	Х
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

9.0 BACKGROUND PAPERS

9.1 The Role of the Chief Social Work Officer – Scottish Government Publication July 2016. Guidance for local authorities and partnerships to which local authorities have delegated Social Work functions. Diane McCulloch Chief Social Work Officer

Kathryn Sharp Service Manager, Strategy and Performance

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Dundee City Council

Chief Social Work Officer Annual Report







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My last annual report had a clear focus on the outstanding role that social care and social work services and professionals had played in responding to the COVID-19 pandemic. I am pleased to say that in reporting on activity over the last 12 months (from April 2021 to March 2022) that, despite the ongoing impact of the pandemic on the population of Dundee, we have also started to see indicators of recovery across social work and social care services.

Across Children and Families Social Work Services, including our Social Work Out-of-Hours Service, our data indicates that patterns of referral and response activity are returning to pre-pandemic levels, with fewer extreme highs and lows of demand. I am assured by quality assurance activity across the service that has evidenced the availability and impact of effective early help available to children, young people and families and of proportionate responses across our child protection arrangements. There has also been a positive reduction in the number of children and young people experiencing care, either at home or in alternative settings. The new Kinship Team has been an invaluable new resource, providing ongoing support for kinship carers of over 400 children and young people. The service has also continued to see high levels of engagement from care experienced young people with throughcare and aftercare supports.

Social work services had a central role in a Joint Inspection of Services for Children and Young People at Risk of Harm carried out last year by the Care Inspectorate and their scrutiny partners. This provided strong external validation of our own self-assessment findings that identified key strengths in relation to collaborative multi-agency working, workforce and leadership commitment and the consistency of high-quality support and relationships with at risk children and families both before and throughout the pandemic period.

In Community Justice Social Work, the service has responded positively to the increase in court business that took place during 2021/22. The proportion of people completing Community Payback Orders remained in-line with the national average position. The number of hours of Unpaid Work imposed by the courts more than doubled in comparison with 2020/21, with many Unpaid Work projects benefiting local schools and communities. Partners celebrated the opening of the Bella Community Custody Unit, demonstrating their commitment to supporting reform in the criminal justice system response to vulnerable women.

Across adult health and social care services a focus remained on reducing unscheduled care and tackling health inequalities. Although the ongoing impact of the pandemic led to a deterioration in performance against some national indicators for delayed discharge, across the whole year 98% of hospital discharges in Dundee were not associated with a delay. The number of emergency bed days, including those for mental health admissions, continued to reduce from previous years. These positive developments reflect the continued remobilisation of social care services and supports and a focus on enhanced capacity in services supporting independent living. Some progress continued to be made in supporting the uptake of Self-Directed Support, with the Health and Social Care Experience Survey evidencing good performance in Dundee in relation to indicators related to support for independent living, having a say in how Care is provided and organised, and the overall quality of care provided.

The Dundee Carers Partnership played a crucial role during 2021/22 in recognising and responding to the needs of unpaid carers. A commitment to engagement and co-production supported the development and publication of A Caring Dundee 2 and agreements regarding the investment of over £1 million of additional resources to support the implementation of priorities from this strategic plan.

In mental health and drug and alcohol services there was continued progress in supporting recovery orientated systems of care and support. Work began on the design and delivery of a city centre Community Wellbeing Centre for those experiencing mental health distress, the Non-Fatal Overdose Team won a COSLA Excellence Award and positive progress was made in enhancing assertive outreach activity as well as in the distribution of Naloxone. In adult support and protection progress was made in supporting a range of partners to appropriately identify and refer adults at risk, with Health and Fire and Rescue Services making particular progress.

Across all social work and social care services there has been a continued commitment to reflective practice, continuous learning and improvement. In protecting people work has been undertaken to modernise case review processes and focus on the dissemination and implementation of learning. The Council's Learning and Organisational Development Service has also worked closely with social work and social care services to support improvement activities, offering opportunities to the workforce to further develop their leadership skills, enhance professional qualifications and undertake protection duties. This service has also had a leading role in responding to the health and wellbeing needs of the workforce and in supporting reflection and recovery from the pandemic period.

Although much has been achieved during the last year, 2021/22 has been a very complex and challenging year for all social work and social care services. Services continue to be at different stages remobilisation, with some still impacted by national public health guidance / restrictions and enhanced oversight whilst others have made significant progress towards recovery. Workforce wellbeing and recruitment and retention challenges that have emerged during the pandemic have been a significant risk across all social work and social care services, including commissioned services. These challenges are shared nationally and social work leaders from Dundee have been engaged in activities through national networks to learn from best practice and develop innovative responses.

In my last report, I reflected that the impact of the pandemic on Dundee citizens has been significant and has compounded existing inequalities and adversities within the city; this year's annual report again emphasises the positive contribution social work and social care services have made to mitigating this impact. As with the rest of Scotland, we continue to face challenges in both our recruitment and retention of our workforce and this will be a priority for us going forward. As we move out of the of the pandemic period, we will take significant and invaluable learning with us, which will continue to shape our delivery models, our approach to staff support and development and our vision for future collaborative service delivery within our wider partnership.

Finally, I would like to express my gratitude and pride in our staff working in social work and social care services across all of Dundee. Their commitment to delivering exceptional, person centred care and support, against what has continued to be both professionally and challenging times, has to be recognised. To do this, while continuing to listen to the voices of those we work with, for and alongside is commendable. I am confident that as we progress towards further change with the introduction of the National Care Service, that the values which are present across our workforce, will continue to be the driving force for change at a local level.



Diane McCulloch Chief Social Work Officer

The Role of the CSWO

The role of the Chief Social Work Officer (CSWO) is outlined in Section 5 (1) of the Social Work (Scotland) Act 1968, as amended by Section 45 of the Local Government (Scotland) Act 1994. The role is undertaken by the most senior registered Social Work manager and has responsibilities to promote leadership, standards and accountability for all Social Work services, including commissioned services. Statutory guidance outlines requirements of the CSWO to:

- Report to Elected Members and the Chief Executive any significant, serious or immediate risks or concerns arising from his or her statutory responsibilities.
- Provide appropriate professional advice in the discharge of the Local Authorities functions as outlined in legislation, including where Social Work services are commissioned.
- Assist Local Authorities and their partners to understand the complexities and cross-cutting nature of Social Work, including corporate parenting and public protection.
- Promote the values and standards of professional Social Work, including all relevant National Standards and Guidance and adherence to Scottish Social Services Council Codes of Practice.
- Establish a Practice Governance Group or link with relevant Clinical and Care Governance Arrangements designed to support and advise managers in maintaining high standards.
- Promote continuous improvement and identify and address areas of weak and poor practice in Social Work services, including learning from critical incidents and significant case reviews.
- Workforce planning, including the provision of practice learning experiences for students, safe recruitment practice, continuous learning and managing poor performance.
- Make decisions relating to the placement of children in secure accommodation and other services relating to the curtailment of individual freedom.
- In co-operation with other agencies, ensure on behalf of the Local Authority that joint arrangements are in place for the assessment and risk management of certain offenders who present a risk of harm to others.

In Dundee, the role of CSWO currently lies with the Head of Service for Health and Community Care (within the Dundee Health and Social Care Partnership). The Head of Service for Integrated Children's Services and Community Justice Social Work undertakes a deputising role as required. The CSWO Governance Framework sets out the ways in which they will discharge the requirements of the role and provide assurances to Elected Members throughout the year.

Overview of Governance Arrangements

The CSWO has direct access to Elected Members, the Chief Executive, Chief Officer of the Integration Joint Board, Executive Directors, Heads of Service, managers and front-line practitioners both within the Council and Health and Social Care Partnership, and with partner agencies in relation to professional Social Work issues. They attend a broad range of Council and Health and Social Care Partnership leadership and strategic partnership meetings with varying terms of reference as follows:

- Reporting to the Chief Officer of the Integration Joint Board (IJB) and regular meetings with the Chief Executive.
- Member of the Integration Joint Board and IJB Performance and Audit Committee.
- Member of the Tayside Clinical Care Professional Governance Forum, alongside CSWOs from Angus and Perth and Kinross.

- Member of Executive Boards which oversee the implementation of local community planning priorities (shared between the CSWO and their depute).
- Member of the Adult Support and Protection (ASP) Committee, providing advice on Social Work matters relating to vulnerable adults.
- Member of the Alcohol and Drug Partnership (ADP), providing advice on Social Work matters relating to substance misuse.
- Member of the Child Protection Committee (CPC), providing advice on Social Work matters relating to children and young people at risk of harm.
- Member of the Dundee Violence Against women Partnership (DVAWP), providing advice on Social work matters.
- Member of the Chief Officer Group for Protecting People, contributing leadership and oversight on all public protection matters.
- Links to the Tayside Strategic Children and Young People Collaborative through the Depute CSWO.

In addition, the CSWO has provided professional advice to a range of enhanced governance and planning arrangements during the pandemic including Dundee City Council Incident Management Team, the Clinical Care Home Oversight Group and Local Resilience Partnership (particularly in relation to Care for People matters).

The CSWO is also supported by a CSWO Governance Group which brings together the Senior Officers (or their representatives) with responsibilities for all Social Work functions across the city, alongside supporting officers. Their main function is to support the CSWO to discharge their statutory duties and to develop, maintain and oversee the implementation of the Dundee City Council Chief Social Work Governance Framework. In 2018, the Group supported the CSWO to develop a Governance Framework that explicitly described the arrangements in place to support and enable the CSWO to carry out their role effectively. This included:

- Professional advice including where services are commissioned;
- Assisting partners to understand the complexities of Social Work;
- Values and standards of Social Work;
- Practice governance;
- Continuous improvement;
- Supporting evidence informed decision making;
- Workforce planning, learning and recruitment;
- Making decisions relating to the curtailment of individual freedom;
- Assessment and management of certain offenders who present a risk of harm; and,
- Reporting significant serious or immediate risks.

Following the pandemic, it has been recognised that there is a need to refresh the framework to reflect changes in approach and learning since March 2020. Some early work has begun, which requires to be completed during 2022/23 to further contribute towards proportionate oversight, reporting and continuous improvement going forwards.

3.1 Overview of Key Performance Information and Service Improvements

Children's Services

Following approval by Elected Members of Our Promise to Care Experienced Children, Young People and Care Leavers 2021-23 in June 2021, developments and trends during the last 12 months of postpandemic recovery show a return to more "normal" business with fewer extreme highs or lows. Upon publication of the plan, the Independent Care Review noted that the Council and partners are very much 'on the journey' in implementing The Promise.

- The length of time children were supported on the Child Protection Register (CPR) returned to pre-pandemic level, with 95% de-registered after less than 12 months (the same as 2019-20 and higher than 2020-21 when it was 84%). During the pandemic, children had been on the CPR longer to retain oversight of risks during the more challenging circumstances. The increase in the proportion de-registered within 12 months indicates that support was effective in keeping children safe from harm.
- The number of Child Protection Orders (CPOs) remains relatively high at 36 but again is the same as 2019-20 and lower than the height of the pandemic in 2020-21 (when it was 44). Regular updates are provided to the Child Protection Committee on the number of CPOs and quality assurance activity has confirmed that they have all been a proportionate response to the nature and level of immediate risk, whilst emphasising the importance of continuing to work with partners to strengthen preventative support.
- The number of children experiencing care at home or away from home has reduced from around 480 in 2020 and 2021 to 435 in 2022. This corresponds with the development of wider preventative support developed in partnership with other services, including the Third Sector. However, it is also subject to several nuances within this cohort of care experienced children and young people, such as the number at home with parents reducing; the numbers in kinship care increasing; and limited changes to the numbers in internal and external foster care.
- School Attendance for care experienced pupils has also returned to pre-pandemic levels with 87.7% attendance in 2021-22 compared with 87.6% in 2018-19 (academic years). Compared to the average of all pupils (88.8%) the gap has narrowed. For children and young people in foster care attendance is on average better than for their peers. Going forwards, the service is focused on further improvements as a key priority, with a recent Zero-based Design project leading to the implementation of 10 further improvement actions.
- There are currently 144 young people receiving aftercare support from the Throughcare and Aftercare Team (very close to last year's 148), including 28 in Continuing Care. This equates to 79% of all young people eligible (young people are under no obligation to continue receiving support from the team) and compares well to the national rate of 67%. It reflects the very high levels of support provided by the team during the pandemic, when face-to-face contact levels with care leavers were consistently much higher than the national average.

JOINT INSPECTION OF SERVICES FOR CHILDREN AND YOUNG PEOPLE AT RISK OF HARM

The Council's Children and Families Social Work service was one of the core agencies praised by Inspectors in their recent "Joint Inspection of Services for Children at Risk of Harm", which was published in January 2022. The Inspectors reviewed 60 files relating to vulnerable children, all of whom had been supported by Children's Social Work teams. In addition, they also undertook various other scrutiny activities, including staff focus groups, staff surveys, consideration of our supporting quality assurance evidence and interviews with Chief Officers. Much of the supporting evidence was provided by Social Work and other Council staff.

The overall finding of the Joint Inspection related to the impact of support and concluded that services were "Good", meaning that strengths clearly outweigh areas for improvement. In their conclusions they noted the strong culture of collaborative working throughout Dundee, with partners demonstrating that they can work together to make improvements to services. They also noted the commitment of staff and senior leaders to improve supports for children, young people and their families. Levels of support were seen to be consistent before and during the pandemic and relationships between families and staff were seen as overwhelmingly positive.

The inspection team also commented on significant investment in Children's Social Work improvement activity and concluded that capacity for further improvement was good. They identified 4 areas for improvement in support for older young people at risk of harm; accessibility of supports for children and young people with mental and emotional wellbeing needs; participation of children, young people, parents and carers in child protection processes and service planning; and measurement of outcomes and impacts. As a key member of the Child Protection Committee, the service is progressing these in partnership with other services.

TRANSFORMING PUBLIC PROTECTION AUDITS

The Transforming Public Protection audits, which focus on the quality of chronologies, assessments, plans and support, have now been completed over several cycles and are fully embedded as normal practice. The audits are undertaken by pairs of managers in the service focussing on key areas of practice and development to ensure appropriate service provision. Reports are completed on a quarterly basis highlighting themes and trends across these key areas.

It was reassuring to note that the strengths and areas for improvement identified in these internal audits were consistent with those of the Joint Inspection team. Considerable progress has been made in the quality of assessments and the workforce reported that they felt confident in this area. Whilst chronologies and plans were also improving, there was a shared recognition that they could improve further alongside an acknowledgement that systems are now in place to make progress here as well.

REVIEW OF ADOLESCENT SERVICE

The Joint Inspection similarly reinforced concerns identified through internal self-evaluation and the findings of Initial and Significant Case Reviews in relation to older young people aged 13-17 years. Whilst a number of improvement actions were already being progressed, it cemented a partnership commitment to review multi-agency support. The Children's Social Work service has therefore since coordinated a collaborative review of approaches, which has highlighted a requirement to:

- reduce the number of case handover points;
- maximise available resources within and between services;
- target services to a high priority group of vulnerable young people;
- develop consistent multi-agency approaches towards thresholds and proportionate support; and,
- continue to develop highly skilled workforce, using a co-located/integrated model as far as possible
- promote improved outcomes for young people and young adults including employability.

Proposals to deliver adolescent services within the context of an "integrated young people's service", with a core remit of "Young People at Risk of Harm" aged 14-21 years are being progressed through relevant channels with oversight from both the Children and Young People Executive Board and the Child Protection Committee.

ADOLESCENT MULTI-AGENCY SENIOR MANAGER OVERSIGHT MEETING

As a more immediate measure in response to case review findings and the areas for improvement confirmed in the Joint Inspection, Children's Social Work has coordinated high-level meetings on the 'critical few' young people considered by partners to present high risks of significant harm to themselves and/or others. This work has been particularly important in the post-pandemic period and includes a focus on young people in or at risk of entering secure care. It has proved to be extremely effective in the risk assessment and care planning of some of our most vulnerable young people.

DOMESTIC ABUSE TEST OF CHANGE

As over 50% of children on the Child Protection Register have experienced domestic abuse, the service is piloting a domestic abuse test of change. This involves a dedicated Team Manager appointed to lead on workforce capacity building in the field of Domestic Abuse, in order to enhance the service's ability to respond effectively to both perpetrators and victims. The post has initially focused on consistent cascading of the Safe and Together model, specialist risk assessment training, improvement to multi-agency risk management processes and full alignment with wider perpetrator programmes and victim support initiatives being progressed across the city.

PAUSE

During 2021-22, we have continued to fund the Pause programme. Pause is run in Dundee by Tayside Council on Alcohol (TCA) and works with women who had had 2 or more children removed from their care for reasons relating to the presence of significant risks to the child. The model of intervention involves an 18-month intensive support programme with each woman to build relationships and help tackle the various issues that had impacted on their lives. The programme has continued to intensively support 21 women throughout 2021-22, with a total of 55 women having now been supported in some way via the Pause programme since its inception in 2019.

PREVENT MULTI-AGENCY PANEL (PMAP)

PMAP is underpinned by UK legislation, the Counter Terrorism and Security Act 2015, in particular and other elements of legislation have a significant impact on PMAP delivery. The first Scottish PMAP duty guidance was published in February 2021 and sets out a comprehensive framework for PMAP delivery. In Dundee we have developed systems and processes to ensure we are well positioned to respond as and when required.

DEVELOPMENT OF A KINSHIP CARE TEAM

A dedicated team has been established to provide targeted support to kinship carers. These include not only carers currently caring for 105 children and young people but also those carers with whom an additional 300 children are living with but are no longer on statutory orders or require direct social work support. Research shows that children who are unable to remain with their birth parents, benefit greatly when cared for by a family member or a close family friend.

This team therefore has a clear focus on all aspects of care-planning related to carers and children's journeys, including assessment; preparation; training; and ongoing support. This team are working in partnership with TCA Kith n Kin Kinship family service through a co-location model and with a focus on enhancing and developing the role of a Kinship Hub. There is a particular focus on separation, loss and other forms of trauma across the extended family, including the impact of substance use.

CHILDREN WITH DISABILITIES

The conversion of Gillburn House from a short-break facility accessed by around 17 families progressed well, with the house presently caring for 4 young people who were at risk of or returned from external residential care. Whilst alternative short-breaks were disrupted during the pandemic, which had a particular impact of children with disabilities due to their increased vulnerability, home based support was provided and community-based support for around 140 families has now also resumed. For children with a disability at risk of harm, a dedicated team coordinates support.

SECURE CARE

Six young people required support in secure care during the reporting period which is the same as 2020/21. We have undertaken an internal audit of all secure care cases in order to apply best practice and Tayside Regional Improvement Collaborative (TRIC) partners are presently finalising a self-evaluation against the new national Secure Care Standards. These have been developed with the close involvement of young people with experience of secure care and place emphasis on the importance of pro-active engagement with at risk young people, including proper notification and explanation of these highly intrusive decisions.

Going forwards, other national and local activity in relation to secure care involves participation in a national Care Inspectorate Thematic Review of the secure care pathway. We have submitted details of 7 young people for possible deeper dive by inspectors, with five of these having been in secure care at some point between March and July 2022 and two where secure care had been considered. The thematic review will last for a year into summer 2023 and the findings will inform further developments both nationally and locally.

PERMANENT ALTERNATIVE CARE AND ADOPTION

In respect of care experienced children and young people who cannot return to their birth parents/ carers and require permanent alternative care or adoption, there was an increase from 14 to 22 new Permanence Orders in 2021-22, 10 of which included authority to adopt. This is again a return to prepandemic levels and is associated with the Children's Hearings returning to normal business and able to make decisions on more cases. In total, 110 children and young people were on Permanence Orders on 31st March 2021. It represents 27% of all care experienced children and young people.

PERMANENCE AND CARE EXCELLENCE (PACE)

To promote appropriate and timely decision making in relation to care experienced children and young people, the PACE project continues into the fourth year with the focus of 2022-23 being the improvement of timescales for obtaining Court Orders to secure children in their permanent homes. The timescales for undertaking rehabilitation assessments has been maintained at over 80% meeting timescales despite the pandemic. The project has now been extended to children who are placed in kinship care with improvement work being undertaken alongside the development of the new Kinship Care Team.

UNACCOMPANIED ASSYLUM SEEKING CHILDREN (UASC)/UKRAINE RESPONSE

In response to the National Transfer Scheme (NTS), a working group involving key partners from the Council, NHS Tayside, Further and Higher Education and the Third Sector was established to plan and coordinate a local approach. Building on the experience gained through the resettlement and integration of foreign nationals arriving in the city through different processes, the group is now well established and has extended its remit to include oversight of the response to the conflict in Ukraine.

In this context, Dundee was well positioned to take the first slot on the new NTS rota in October 2021. Since then, we have welcomed 6 young people through the scheme and accommodated another 2 young people over and above our requirement in order to assist other local authorities. We have also supported another young person who arrived through the spontaneous arrival route.

As all the young people are classed as being supported by the care system, they are allocated a case responsible Social Worker to coordinate their assessment and support. As this represents a significant additional requirement, a dedicated Social Worker and Support Worker model is currently being progressed to support individual young people and continue to strengthen the Council response to UASC overall.

Regarding our wider humanitarian support activities based around our temporary hotel accommodation for families, we are cognisant of the need to support and protect all children and young people, including those who are accompanied. If additional need is identified, staff will follow established processes. We are also developing opportunities for these children and young people, with a member of staff dedicating time to developing a programme of activities which reflect their needs.

The service has also worked in partnership with colleagues from the Health and Social Care Partnership to develop a protocol which outlines arrangements for host families receiving Ukrainian children, young people and parents/carers into their homes. There is also a requirement for a home visit to any prospective host family to ensure the accommodation is suitable and an Enhanced Disclosure screening process for host families. A protocol has been put in place to follow up any concerns or issues arising out of this assessment process.

Following their arrival, to ensure that prospective host families can provide a safe and supportive home for refugees, the service is providing further assistance, including access to appropriate services. Equally, support is available to intervene in the event of any concerns which arise once the refugee has been placed with the host family.

SERVICES FOR CHILDREN, FAMILIES AND VULNERABLE ADULTS IN THE EVENING AND AT WEEKENDS

The social work Out of Hours Service (OOHS) continued to be provided for both Angus and Dundee, with a primary function of providing an immediate social work response to vulnerable children, young people and adults who are in crisis. The service is provided within all relevant statutory, regulatory and policy frameworks. Referrals generally relate to urgent child welfare and protection or adult support and protection concerns; Mental Health Officer attendance requests; information requests and requests for advice or guidance. The service prioritised circumstances where children or adults are reported to be at risk of imminent harm and provision over the past year has included:

- Organising the implementation of care at home services for vulnerable adults.
- Sourcing and supporting the provision of respite care for adults unable to remain at home.
- Implementing and supporting safety plans to allow families to remain at home together.
- Providing guidance and support to stakeholders such as Police, Health and Third Sector.
- Providing financial assistance and support to vulnerable adults and families.
- Providing evening and weekend support to unaccompanied asylum-seeking children.

Whilst the priority of the service is to provide a crisis response, the service also routinely supports the work of daytime staff by undertaking evening/weekend visits to families already receiving support from social work services. This improves the level of support that is provided to service users and ensures that any safeguarding issues are dealt with immediately. During the year to March 2022, the total number of visits to vulnerable service users was 1255, which was a 26% increase on the previous year but is more in line with typical pre-pandemic annual visit numbers.

Community Justice

Partners continue to develop a range of interventions across the criminal justice system in order to ensure that timely, proportionate and effective responses can be delivered. At the start of the system in terms of the involvement of the Community Justice Service, when comparing the first 5 months of 2021 and 2022 the number of people referred by the Crown Office Procurator Fiscal Service (COPFS) for a Diversion from Prosecution scheme has increased from 69 to 75. Diversion cases were managed according to the same risk and need criteria as Orders made in Court, with an agreed level of face-to-face contact.

In relation to Court business, Community Justice Social Work Reports and sentencing decisions:

- In relation to Court Reports, there was a total of 252 recommendations for Community Payback Orders (CPOs), a 37% increase on the previous year. Specifically, CPOs with Unpaid Work and no supervision requirement increased the most, with a rise of 61% on last year. This reflects both an increase in Court business and the greater capacity of the service to supervise a higher number of Unpaid Work Orders as public health requirements continued to relax
- A total of 353 Community Payback Orders (CPOs) were imposed, up from 204 in 2020-21 though still below a high of 532 in 2019-20. Overall, 72% of all Community Payback Orders were successfully completed in 2021-22. This is a 5% decrease on the previous year's figure of 77% but remains an increase from 68% in 2019-20. The national average CPO completion rate has consistently been around 70% over the last 10 years.
- A total of 30,591 unpaid work hours were imposed by Courts in 2021-22, compared with 14,461 in 2020-21. From October 2022, pre-pandemic national timescales for the completion of UPW hours will also return.
- In respect of Drug Treatment and Testing Orders and a CPO with a Drug Treatment requirement, the Court imposed 16 Orders compared with 9 the year before. However, given the profile of often acquisitive substance use related offences this appears to remain relatively low and joint work between the co-located Social Work and NHS Tayside staff at Friarfield House on thresholds for statutory intervention is taking place
- As of 31 March 2022, there were 139 Registered Sex Offenders subject to statutory supervision in the community under Multi Agency Public Protection Arrangements (MAPPA) across Tayside, 52 of whom reside in Dundee.
- There were 7 new Supervised Released Orders (SROs), a reduction from 12 in the two previous years. These orders are imposed for prison sentences of less than 4 years where the person is deemed to require supervision on release
- There were 150 people serving prison sentences of more than 4 years who will be subject to statutory supervision on release, compared with 151 people the year before. The service coordinates throughcare whilst individuals are in prison and on their return to the community. This represents a volume of cases not impacted by the reduction in court business. A high level of monitoring and prioritised service delivery was required to manage and support people released on licence.
- Dundee continues to implement the Whole System Approach, with Adolescent Team workers and Community Justice workers undertaking 16-17-year-old Diversion and compiling court reports for all young people (including those who are care experienced). Two custodial sentences were issued to people aged between 16 and 20 years during 2021/22, compared to four the previous year.

The service continued to receive consistently positive feedback from both the individuals carrying out Unpaid Work and from the recipients. In 2021/22 the Unpaid Work Team carried out work across the City supporting vulnerable groups, community projects and schools. The team was busy constructing raised beds and planters in various locations (Sheltered Housing Complexes, Schools and other Community Areas) for the growing of produce that will benefit those living in the local communities. Other work included the continued support for a local charity shop in removing items they are unable to sell; designing and constructing a chicken run for a local School; painting the perimeter fence at a Day Centre; creating a seating area at a nearby Community Centre; painting play equipment at play parks across the entire city; assisting local allotment associations; regular grass cutting for vulnerable residents; assisting a local charity to move premises while disposing of items they were unable to take; making movable storage boxes for a primary school; helping a local community garden replace existing raised beds with more sustainable beds. The Team also continued with litter picking across various locations.

COMMUNITY CUSTODY UNIT

The Bella Community Custody Unit (CCU) is now open and currently has 8 women in residence, with one recently released on Home Detention Curfew. Two part-time social workers have been employed to provide Prison Based Social Work support for the women.

Initial considerations for the population of the CCU environment worked on the principle that the female population in custody largely consisted of short-term offenders convicted for less serious sentences – public disorder; petty theft and crimes of dishonesty.

However, robust analysis of this data by the Scottish Prison Service identified that 40% of the female prison population were either untried or awaiting sentence; with 31% being Life sentence, life recall or Long-Term Prisoners. This means that only about one third of the current female population in custody are short term – and of that only 17% met the CCU criteria of having minimum 3 months to serve. The Scottish Prison Service are therefore reviewing the criteria for entry into the Bella CCU.

There is ongoing engagement between partner agencies, 3rd sector and voluntary organisations to establish a wide range of support and contacts for the women within the Bella Centre. There have been many visitors to the centre and feedback has been very positive. The women are enjoying their new environment and want to become fully embedded in the local community. Feedback from visitors, staff and women at the centre has been extremely positive.

Adult Health and Social Care Services

In adult health and social care performance has continued to be monitored and scrutinised on a quarterly basis. A number of performance indicators relate to processes and pathways that continue to be affected by the pandemic and therefore caution continues to be applied when undertaking analysis. Throughout the year, as well as monitoring performance across key indicators, we have continued to work across our services to better understanding poor performance against national indicators, particularly those for falls, readmissions and gradings achieved in Care Inspectorate inspections of social care and social work services. This has included further analysis of local data and benchmarking against other Partnerships in Scotland. We have also focused on better understanding national indicators as a single measure in a wider system of health and social care and identifying other measures that might better demonstrate changes in performance and quality.

• In Dundee life expectancy is 74 years for males and 79 for females, whereas in Scotland as a whole it is 77 years for males and 81 for females. Dundee has the second lowest life expectancy in Scotland for males and fifth lowest for females. Life expectancy varies substantially by the level of deprivation in the geographical area of the population and the occurrence of health conditions and disability.

COMMUNITY HEALTH INEQUALITIES

The Partnership's Community Health Inequalities Social Prescribing Service has been responding to increased demand associated with the cost of living crisis. Nursing teams have focused on using their learning from the pandemic to change and improve services, particularly to help them to address unmet health and wellbeing needs including services and support for people who are homeless. Referrals to the Sources or Support Social Prescribing service have seen a steady increase (844 referrals across 4 cluster areas) following pandemic remobilisation, offering a blended approach to patient consultations. Eight link workers and two support workers take referrals from health professionals in a primary care / GP setting for patients with poor mental health and wellbeing affected by their social circumstances. Link workers support patients to access services, activities and organisations that can help tackle the causes and consequences of their distress.

- Locally there has been improved performance in the length of time people spend in hospital when they have been admitted in an emergency. There has been a year on year reduction in the rate from 2015 (142,784) to 2020 (98,945) with the pace of reduction increasing during the years when there were COVID-19 emergency measures. The rate increased slightly to 105,538 during 2021 as hospitals became more accessible again.
- We have reduced the number of nights people are admitted to hospital due to their mental health, by 9,934 since 2015/16. This is a 22% reduction.
- In 21/22 Dundee was the 13th poorest performing Partnership in Scotland in relation to the number of hospital bed days taken up by people who had a delayed discharge who were aged 75 and over. Lost bed days are counted from the day the patient was assessed as medically fit to return home to the date they were discharged. In 21/22, for every 100 people aged 75 and over, 79.9 bed days were lost due to a person experiencing delayed discharge. This is a deterioration on the 2020/21 figure, when there were 32.7 days lost for every 100 people aged 75 and over.
- Despite challenges maintaining good performance against the National Health and Wellbeing Indicator for bed days lost to delayed discharge during the pandemic period, Dundee has continued to perform similar to the Scottish average. Data also shows that 98% of hospital discharges in Dundee were not associated with a delay. A large programme of work is in place across all ward areas in Tayside to roll out and embed the Planned Date of Discharge Policy, which promotes more effective multidisciplinary working and improved discharge planning practice.

DISCHARGE MANAGEMENT

Under the banner of "Home First", the Partnership has developed a single point of referral for Enhanced Community Support and Dundee Enhanced Community Support Acute and are working to develop an Urgent Care Triage tool and common assessment documentation with Scottish Ambulance Service and advanced paramedics to contribute to avoidable admissions.

The redesign of urgent care and the implementation of the Flow and Navigation Centre (FNC) Model has improved decision making support from the Scottish Ambulance Service, Primary Care, Out-Of-Hours, NHS24 and other partners. This is increasingly ensuring that the most appropriate source of care, in the most appropriate place is used to respond to people's needs or that an appropriate digital solution, such as NearMe, is provided.

During 2021/22 all social care packages that were adjusted due to the COVID-19 response were re-started or adjusted back to normal arrangements. Work has progressed to remobilise both day support and respite services and a variety of short-break arrangements have been used in Community Mental Health and Learning Disability Services.

- Dundee has a high rate of readmissions to hospital, where the patient had been discharged within the last 28 days. In 2021 13.9% of people discharged from hospital following an emergency admission, were readmitted within 28 days. Dundee has the third highest 28-day readmission rate in Scotland. We have undertaken significant analysis of readmissions data as they apply to the model of service within Tayside in order to gain better understanding of the underlying causes of high levels of readmission.
- People in Dundee have a high rate of hospital admissions as a result of falls, with a rate of 31.8 admissions for every 1,000 of the 65 and over population. In 2021 Dundee was the poorest performing Partnership in Scotland. An analysis of falls rates by neighbourhoods within localities has been completed to aid planning of improvement actions.

SUPPORT FOR INDEPENDENT LIVING

To support independence at home the Independent Living Review team (ILRT) was set up to review packages of care and support in the community as delays in providing packages of care and support in acute care were causing delayed discharges. In 2021/22, the team provided support to 2,312 service users in their own homes and it is estimated that this service is contributing to an annual saving of almost £1 million.

The Equipment Stores as part of the Community Independent Living service provides prescribed equipment on loan to support independence at home. In 2021/22 the service provided over 22k pieces of equipment with an average of 1.4 days taken to deliver these.

The Partnership has reviewed models of care home-based services, including respite care and intermediate care for people living with mental health challenges. A new unit is now operational within Turriff House Care Home which provides assessment and rehabilitation in a more homely setting whilst improving the long term outcomes for individuals and ensure the correct level of care is provided in an appropriate environment and at the right time. Since the unit reopened last November, 8 people have been admitted under the 'Step Up' pathway and 5 people have been admitted under the 'Step Down' pathway. 4 people have been supported to return to their own home. The Partnership has reduced the number of nights people are admitted to hospital due to their mental health, by 9,934 since 2015/16; this is a 22% reduction.

• The National Health and Care Experience Survey 2020/21 reported that 26.8% of Dundee respondents who provided unpaid care felt supported to continue in their caring role; this is lower than the Scottish average of 29.7%.

SUPPORT FOR UNPAID CARERS

A Caring Dundee 2: A Strategic Plan for Working Alongside, Supporting and Improving the Lives of Carers 2021-24 and an associate Carers Strategic Needs Assessment were developed during 2021/22 on behalf of the IJB by the multi-agency Dundee Carers Partnership. This followed engagement with unpaid carers across the city, especially listening to how the COVID-19 pandemic has impacted on their lives and the lives of the people that they care for. Information from the performance reports of the Dundee Carers Partnership (2017-2019 and draft 2020-2021), as well as a recent desktop review of carers and COVID research and the findings from the Carers COVID Engagement in Dundee have been fully considered in the development of A Caring Dundee 2. A Caring Dundee 2 sets out the approach and actions by which the Dundee Carers Partnership will deliver on their vision and outcomes for carers of all ages who are living in Dundee and who are caring for people in Dundee. It describes how implementation of the Carers (Scotland) Act 2016 will progress further using the learning from carers

experiences and seeking to mitigate the impact of the COVID pandemic on carers in the city as well as continuing to support existing plans for carers.

To support the implementation on A Caring Dundee 2 and duties under the Carers (Scotland) Act the Integration Joint Board (IJB) agreed investments of over £1 million for 2021/22 and 2022/23. Investments, recommended to the IJB by the Carers Partnership, included enhancing the capacity within the NHS Tayside Listening Service, bereavement services and young carers health checks. A number of projects focused on communication, awareness raising and engagement were also allocated funds. Significant investment has been directed to the Health and Social Care Partnership itself to enhance implementation of Carers Act duties, including adult carer support planning and to support joint work with colleagues to improve the implementation of Self-Directed Support.

Within this overall strategic and financial framework, the Young Carer Sub-Group of the Carers Partnership has been developing a range of resources, services and supports to identify and improve outcomes for young carers. A full summary of their activity has been published in their sub-group report. This includes the launch of the 'Are you a young carer?' leaflet and the introduction of 7 Community Learning and Development Young Carer Champions across Youth Work services. Every school across the city now has a link worker from Dundee Carers Centre and a school-based coordinator and there are 24 secondary school Young Carer Ambassadors. A new schools information portal has also been developed as part of the Carers of Dundee website. School based developments have supported the identification of 537 Young Carers, with more than 300 Young Carers receiving support from Dundee Carers Centre.

- Of the people who died during 2021 calendar year, 91.6% of time in the last 6 months of life was spent at home (similar to the 2020 financial year). This is considered to be a positive result (1.5% higher than the Scottish average) and could not be achieved without a strong partnership between acute hospital and community workforce, the third and independent sectors and patients and their families and carers.
- The table below shows the number of people who received Self-Directed Support Options
 1 and 2 in the past five years. The amount spent on delivering services and supports under
 options 1 and 2 has increased considerably from just over £1.8 million five years ago to £5.6
 million in 2021/22. Since the implementation of the Social Care Self-Directed Support
 (Scotland) Act 2013 the number of packages of care for people choosing Option 1 has
 increased year on year. Option 2 increased from £96K in 2015-16 to £1.7M in 2021-22.

	2017-18		2018-19		2019-20	
Option	No. of people	Cost	No. of people	Cost	No. of people	Cost
Option One Total	74	£1,522,411	103	£1,875,293	122	£3,432,428.45
Option One - Adults only	65	£1,413,325	79	£1,640,764	81	£2,701,004.72
Option One - Children only	9	£109,068	24	£234,529	41	£731423.7344
Option Two	39	£287,817	70	£613,366	161	£2,062,732
	2020-21		2021-22			
Option	No. of people	Cost	No. of people	Cost		
Option One Total	143	£3,782,570.43	187	£4,286,293		
Option One - Adults only	88	£2,682,716.27	109	£2,762,147		
Option One - Children only	55	£1099854.159	78	£1,524,145		
Option Two	123	£1,663,544	102	£100,935		

PERSONALISATION OF CARE AND SUPPORT

Encouraging people to have choice and control over the services and supports they receive has continued to be a priority. Self-Directed Support is available to adults and children/families with assessed social care needs. The number of people and families choosing Option One and Option Two is an indicator that people have taken the opportunity for choice and control of their own services. The 2021/22 Health and Care Experience Survey, which is used to report National Indicators 1-9, found that Dundee performed better than the Scottish average in relation to indictors focused on: support to live independently, having a say in how care and support are provided, co-ordination of care and support and the overall perception of quality of care and support. These indicators reflect focussed improvement work that has been progressed over the last two years to enhance the personalisation of health and social care services and supports, as well as the continuous focus on improving the range and quality of supports targeted to enable people to live independently in their own home for longer.

Within Children and Families Services, where there is an assessed need for services for children with a disability, a full discussion with parents and unpaid carers about all 4 Self Directed Support options takes place. Dundee Carers Centre are contracted to provide support to people choosing Option 1. In children's services, 'Option 1' supports continue to increase in number and as a proportion of the total number of services. There has been year on year increase for children with disability opting for Option 1 services.

Mental Health

- There was a total of 97 emergency detentions of people in hospital in 2021/22 (100 in 2020/21) and an average of 98 detentions a year in the last 5 years.
- There was a total of 166 short-term detentions of people in hospital in 2021/22 (155 in 2020/21) and an average of 160 a year in the last 5 years.
- There were 41 Compulsory Treatment Orders in 2021/22 (45 in 2020/21). With an average of 42 Compulsory Treatment Orders in the past five years.
- In 2021/22, 69 Social Circumstance Reports were completed (83 in 2020/21). Of the total, 43 Social Circumstance Reports resulted in someone being subject to a short-term detention (54 in 2020/21) and 27 led to Compulsory Treatment Order (28 in 2020/21).
- There were 13 people who were subject to Compulsion Orders with Restriction and 2 people to Treatment Orders during 2021/22. This has remained stable in comparison with previous years. There were 14 Compulsion Orders (12 orders in 2020/21) and 6 Assessment Orders (no change since 2020/21).
- In 2021/22, there were 44 new Local Authority Guardianship Orders made.

COMMUNITY MENTAL HEALTH SERVICES AND SUPPORTS

Partners have continued to work together to improve the range of services and supports for people with mental health and wellbeing challenges. During 2021/22 work began with stakeholders, including people with lived experience on mental health challenges, to develop the city centre Community Wellbeing Centre that is planned to open in Autumn 2022. This has included workstreams focused on developing pathways and connections, the building facilities and aesthetics and communications and engagement. Since November 2021 a Stakeholder Group has been in operation and has been fully involved in co-producing the service specification for the Centre; with tendering activity to secure a suitable service provider commencing in 2022/23. Alongside the development of the Centre progress has been made in other areas to enhance supports that will ultimately be linked to the Centre once it is operational. This includes developments with the Scottish Ambulance Centre and the appointment of a manager within Penumbra for the Distress Brief Interventions service.

A successful pilot has been undertaken with Scottish Ambulance Service (SAS) and Dundee Health and Social Care Partnership to establish a Paramedic Mental Health Response Vehicle (PMHRV). The PMHRV is jointly staffed by a paramedic and an experienced mental health nurse meaning that they can attend to aspects of physical healthcare as well as conducting a specialist mental health assessment. Following the pilot period, the service is now operating 7 nights a week and during weekend days. Early outcomes indicate that most people have been successfully helped in their own home environment without the need for more intensive mental health assistance. Data from the first few months shows that the number of mental health emergency admissions fell by 51%.

Advanced Nurse Prescribers and Specialist Mental Health Pharmacists have been a positive addition to Community Mental Health Teams, increasing the capacity to prescribe medication and attend to physical aspects of mental healthcare, which supports resources within General Practice. Mental Health and Learning Disability Teams have also benefitted from increased numbers of Social Workers and Support Workers. There are now also General Practitioner Leads for Mental Health in place for each of the three Tayside Partnerships with a role in ensuring that all mental health developments are 'whole system' and cognisant of the specific needs of, and contributions that can be made from, primary care and to contribute to primary care development work and more specialist mental health redesign work. A plan has been submitted to the Scottish Government describing how a share of the national pandemic recovery funding totalling £120m will be used to strengthen mental health and wellbeing responses across primary care.

DEVELOPING OUR STRATEGIC PRIORITIES FOR LEARNING DISABILITY AND AUTISM

During 2021/22 the Learning Disability and Autism Strategic Planning Group, which includes Advocators who are employed to represent the views of people with learning disabilities, reconvened following the pandemic with a focus on co-producing a new strategic plan. The group has planned a range of activities to work alongside both people with learning disabilities and carers and has also been informed by an updated strategic needs assessment. The Strategic Planning Group has recognised that there is evidence from Dundee Carers Partnership COVID Engagement Report and the Dundee Partnership Engage Dundee report that many carers of people with learning disabilities have experienced a negative impact, including the loss of formal and informal supports and services for the person they support. As a response to the priorities for people with learning disabilities set out in Living Life Well, a project team has been established to enable a collaborative approach to developments that require a pan Tayside focus. The overarching focus of the project is Balance of Care/ Right Support, Right Time, Right Place.

SUPPORTING DRUG AND ALCOHOL RECOVERY

During 2021/22 the Health and Social Care Partnership Clinical, Care and Professional Governance Group has continued to maintain oversight of a range of risks associated with the Dundee Drug and Alcohol Recovery Service. Whilst some of these risks relate to clinical functions within the service others include demand in excess of resource and insufficient funding to undertake the redesign of DDARS services. Staff recruitment and retention challenges have also had a significant impact on the service throughout the year.

Over the last 2 years considerable progress that has been made in key areas to reduce harm associated with drug use, including drug deaths. This has included:

- development and evaluation of a multi-agency, rapid response to non-fatal overdose (recently recognised as a sector leading approach in the COSLA Excellence Awards 2022);
- enhanced capacity to delivery assertive outreach services through collaboration with third sector services, Dundee Drug and Alcohol Recovery Service (DDARS) and the SafeZone Bus;
- establishing the Navigator Programme based in Ninewells Accident and Emergency to work alongside medical and nursing teams to offer support to people who have multiple and complex needs, including drug and alcohol use;
- strengthening the approach to reviewing drug related deaths and non-datal overdoses to include early trends monitoring, and commencing comprehensive clinical toxicology testing within NHS Tayside;
- extending the availability and reach of naloxone across statutory services (including the Police carrying naloxone kits), third sector partners and non-drug treatment services. A peer naloxone training and supply project has also been established through collaboration between the Scottish Drugs Forum and Hillcrest Futures;
- increased staffing within the DDARS service, including Non-Medical Prescribing nurses (3 of whom have been placed within the Children and Families Service) and 5 Band-5 nurses;
- progressing the implementation of MAT (Medication Assisted Treatment) standards, with key developments in relation to the agreement of a detailed project plan for a Shared Care Model in Dundee, implementation of harm reduction interventions as part of the treatment process, an

expansion in the role of Community Pharmacies in treatment and care through implantation of an enhanced contract, development of a multi-agency residential rehabilitation pathway with additional funding to support implementation led by a third sector service, and the development and testing of models for independent advocacy;

- agreeing of a clear Tayside wide pathway for the transition of substance use supports for people leaving prison and returning to the community and securing additional resource within third sector services to support implementation over a two-year period;
- enhancing our focus on prevention through the development of an Alcohol and Drug Prevention Framework that will be launched in the summer, alongside participation in the Planet Youth pilot;
- strengthening support for vulnerable families and vulnerable women, including additional investment in Children and Families Service supports to kinship carers, progressing a range of activities to support mainstreaming of gender sensitive services and supports and securing funding over a five-year period to establish a women's hub;
- establishing a peer support programme for Dundee, extending the number of SMART Recovery Groups operation in the city and partnering with national organisations to develop and test approaches to ensure meaningful involvement of people with lived / living experience in our strategic and service improvement activities; and,
- establishing a multi-agency Commissioning Sub-group of the Alcohol and Drugs Partnership, chaired by the Dundee Health and Social Care Partnership Chief Finance Officer, to further strengthen financial governance and develop an investment and commissioning plan.

In 2021 there was a further reduction in the number of drug related deaths in Dundee, from 57 deaths in 2020 to 52 deaths in 2021. There has also been a year-on-year reduction in the number of people experiencing a non-fatal overdose for the last three years, from an average of 11 people per week to an average of 6 people per week.

Adult Support and Protection

Across the Partnership a number of actions have been taken to improve responses to people at risk of harm. This has included introducing new ways of assessing risk of harm to adults who have vulnerabilities and providing support to the workforce to start using the new tools and systems in their practice. The Partnership has also been part of a number of reviews of circumstance where people have experienced harm, including where people have died in fires. Learning about what could be done differently in the future has been shared with the workforce and work is being done to improve the way that Partnership services work with the Scottish Fire and Rescue Service, carers and other services to reduce risks associated with fires.

- In 2021/22, 3,085 adult protection referrals were received which represents a 30% increase on the previous year. Sixty-one of these resulted in an adult protection investigation and 58 initial case conferences were undertaken. Most referrals (1327 – 80%) continue to be made by Police Scotland, although it is notable that referrals from the NHS continue to increase year on year, by 44% compared to last year. It is also notable that referrals from the Scottish Fire Service increased by 90% (97 from 57), which is thought to reflect the awareness raising activity that has taken place during this time.
- Of the 61 investigations undertaken, welfare for adults, including older people, continued to be the highest single area of harm.

To replace the Early Screening Group and to cope with the high volume of referrals a screening pilot was introduced in March 2021 and adopted fully by all teams from October 2021. Of the 3,085 referrals 77% were screened out by team managers before the duty to inquire stage. Proportionally, a similar number of referrals lead to an adult support and protection investigation as in 2020/21 (2.3% to 2.5%) and to case conference (1.9% to 2.0%). The most common outcome for those screened out (54%) was 'Existing support services have been informed of the concern and will manage appropriately (Least restrictive approach)'. The change in approach has allowed council officers to concentrate on those cases which presented the greatest risk of harm. Despite a fewer number being taken to Duty to Inquire a similar proportion of cases went to ASP investigation, Case conference and beyond. In addition to this, work on new risk assessment and chronology templates is planned to roll out to Adult Support and Protection teams in the financial year 2022/23.

TRAUMA INFORMED PRACTICE

A significant amount of work has been undertaken around 'trauma informed practice' including a test of change in care homes, a test of change focused on embedding trauma informed principles, tools and models to existing learning and development activity across the city and a test of change focused on enhancing responses to domestic abuse. The Care Home Team test of change had a focus on trauma principles and aimed to collate stories on the impact of COVID for care homes, residents, next of kins and staff across the city. This work was underpinned by a request from the Care Home Safety Huddle and findings from a National Trauma Deep Dive event for Health and Social Care. A stakeholder engagement and feedback session took place in October 2021 with care homes across the city, followed by an accessible trauma informed survey. Survey data, stories and experiences were then analysed and findings shared with Health and Social Care Partnership and the Care Home Safety Huddle. A Care Home Trauma Deep Dive learning exchange event was used to share local findings, stories, next steps, national and local trauma developments, improvements and resources as well as available supports and offers to the workforce. In Children's and Community Justice Services, staff in the Young People's Houses have initially been prioritised to receive training alongside continued support from Educational Psychology colleagues. All other teams will be receiving training in 2022-23.

ENHANCED CAPACITY FOR RESPONDING TO OUR MOST VULNERABLE CITIZENS

As part of a £270,000 package of support to violence against women services, the Partnership and Dundee City Council supported temporary enhanced capacity in third sector specialist services. This has directly impacted on reduced waiting lengths for access to services. At Dundee Women's Aid waiting times for refuge accommodation reduced from 49 days to 0 days and for outreach support from 102 days to 39 days (1 March 2021-30 June 2021 compared to 1 July 2021 - 31 October 2021). At the Women's Rape and Sexual Abuse Centre waiting times for therapeutic and counselling support reduced from 162 days(end of June 2021) to 28 days (end of November 2021).

Dundee's Housing First Pathfinder has now finished and learning from this has been used to develop a new triage system and better screening within Neighbourhood Services, Housing Options Service. A Housing Options Social Worker has been appointed and will work within the new system until the end of 2022/23.

Protecting People

CASE REVIEW ACTIVITY

Case reviews (to become known as learning reviews) are multi-agency reviews of cases where a person (or people) has died or experienced significant harm or risk of significant harm and there is additional learning to be gained that may inform improvements in the protection of people at risk of harm.

During 2021/2022 Dundee Child Protection Committee (CPC) undertook 2 Initial Case Reviews which did not progress to a Learning Review but did identify common areas of learning that have informed a significant multi-agency development plan around the key themes identified. In November 2021 a Significant Case Review (SCR) report was published in respect of Young Person K. Associated actions and impact are currently being monitored by way of a Case Review Oversight Group with assurance being offered to the CPC and Chief Officers Group accordingly.

During 2021/22 Dundee Adult Support and Protection Committee undertook 2 Initial Case Reviews. One of these did not progress to a Learning Review but did identify specific and common areas for learning which have informed single and multi-agency development plans around the key themes. One of these has progressed to a learning review which is expected to report towards the end of 2022. Associated actions and impact are currently being monitored by way of the Self Evaluation and Continuous Improvement Group with assurance being offered to the CPC and Chief Officers Group accordingly.

In addition, a thematic review was undertaken in partnership with NHS Tayside, Scottish Fire and Rescue Service, Dundee Health and Social Care Partnership and Stirling University. This was in response to 3 reviews undertaken during the previous year.

The Tayside MAPPA Strategic Oversight Group continued to review the action plans for two SCRs, which were published in May and October 2019. The actions from both reviews have now been fully examined by all agencies involved and all improvement actions have now been embedded into normal working practices.

CASE REVIEW DEVELOPMENTS

During 2021/22 the CPC's Case Review Oversight Group has continued to collectively manage the development of findings and recommendations from learning reviews to agree improvement actions and oversees implementation and evidence of impact. This includes matters relating to the distribution of learning to the workforce and other stakeholders. An integrated format for monitoring learning from reviews has been finalised and has been implemented from 1 April 2022 onwards. The Sub-group has also completed work to identify key themes from historic reviews (those undertaken from 2019/20 through to the end of 2021/22): quality of assessment and planning, information sharing, adverse experiences and trauma-informed responses (previously hostile and non-engaging families), responses to young people (16+), and lack of professional curiosity. The next step is to support partners to evidence improvement activity undertaken and the impact this has had.

We have also continued joint work with partners across Tayside throughout 2021/22 to review our approach to case reviews (including single and multi-agency approaches); this has focused on local processes as well as opportunities for joint working. In response to the publication of revised national guidance for child protection learning reviews Angus and Dundee partnered to procure additional resource to revise local protocols, procedures and supporting documentation and to develop a business case in relation to potential future areas of collaboration in the implementation of reviews. The revised local documents are now being shared with local stakeholders for further refinement before being ratified through local Chief Officer Groups.

DATASETS

The CPC, supported by the Data Sub-Group has continued to maintain and further develop the use of the national minimum dataset at a local level, and Dundee has been one of two early adopters of the updated version, which reflects the new CP Guidance, includes more inputs from other agencies (Police, Health and SCRA), and focuses more on earlier processes pre-registration. The CPC receives regular reports from the Sub-group presenting key data and accompanying analysis. During 2021/22 this has continued to support the CPC to identify areas for further analysis and plan improvement activities. One example of this has been continued high figures around domestic abuse resulting in a linked subgroup to further examine the impact on children and young people experiencing domestic abuse and to identify mitigating action: the CEDAR project (Children Effected by Domestic Abuse Recovery) is beginning to have a positive impact on this group of families. The work of the sub-group also led to an increased focus on earlier processes, including Initial Referral Discussions, and on what supports are in place for children and young people who do not progress through child protection processes, or following de-registration; this work now links with the GIRFEC Delivery Group (Getting it Right for Every Child) which focuses on support for named persons to keep children safe; additional support by other agencies is now more easily accessible through FORT (Fast On-line Referral Tracking).

The Adult Support and Protection Committee (ASPC) has continued to develop both the collation of data and its application towards keeping adults safe from abuse and harm across Dundee. The Self Evaluation and Continuous Improvement group scrutinises key performance data and advises the committee of particular areas for further development / explanation. This sub group is chaired by NHS colleagues and is supported by Police Scotland and Dundee City Council. A national dataset has been piloted in other authority areas and Dundee is preparing to adopt this once it is rolled out nationally. Our use of data also informs practice development on a single agency basis, for example the Health and Social Care Protecting People Oversight Group are using the dataset to improve practice. The current focus is on the impact of recently introduced procedures and practice improvements on the quality of assessment and recording.

Learning from arrangements in place in the CPC, the Violence Against Women Partnership (VAWP) now has in place arrangements to collate key data on a monthly basis and monitor trends by comparing to returns from the previous two years. Contributors to this data set are: third sector women's services, housing, police, MARAC (Multi-agency Risk Assessment Case Conference) and Children & Families. Returns are compiled into quarterly reports and discussed at the VAW Scrutiny group. The small group of individuals interrogate the data, identifying new emerging trends, anomalies and areas of further work for the partnership to progress. The Scrutiny Group report is presented at VAWP meetings on a quarterly basis to update the wider partnership. The data set allows the partnership to monitor emerging trends collectively on a larger scale as opposed to only individual service trends. This has improved the Partnerships insight into key issues facing women presenting to the services and commonalities that are surfacing. Through interrogating areas in the data that are underrepresented such as young women seeking support, the Partnership have generated discussions and areas of future work to focus on. Through the Gendered Services group, which sits under the VAWP and Alcohol and Drugs Partnership, a more in-depth data set will be launched in 2022. This will increase the number of indicators being reported on and will give greater insight into key factors impacting women in Dundee.

Dundee has continued to participate fully in the SOLACE dataset established during the pandemic to monitor key data in relation to public protection functions. Information returns have been routinely shared with members of the Protecting People Committees and Chief Officers Group, supplementing other datasets presented to the groups.

SELF ASSESSMENTS – CHILD PROTECTION AND ALCOHOL AND DRUGS

During 2021/22 social work services contributed to multi-agency self-assessment processes undertaken by the Child Protection Committee, to inform the joint inspection, and the Alcohol and Drug Partnership (ADP), to inform the review of progress since the publication of the Dundee Drug Commission report.

The Alcohol and Drug Partnership self-assessment was undertaken between May and July 2021. The multi-agency process included workforce focus groups, lived experience focus groups, a workforce survey, submission of case studies by service providers, a leadership self-assessment and a review of documents and data. Within the process there was a focus both on social work and social acre services for adult drug and alcohol users and also to address risks to children and young people. The self-assessment set out in detail the significant progress that has been achieved across the Dundee Partnership over the last 2 years, progressing the recommendations made by the Commission and implementing the Action Plan for Change in the face of extra challenges presented by the COVID-19 pandemic.

Overall, during the past two years, the ADP has assessed that partners have made reasonable progress in implementation of 12 of the Drug Commission's original recommendations, with partial progress being made against 4 recommendations. Despite the challenges presented by the COVID-19 pandemic during most of this period, the evidence gathered for the self-assessment demonstrates that significant improvements have been made in some areas. This includes the response to nonfatal overdoses and assertive outreach work, extending the naloxone programme, pre COVID-19 introduction of direct access and same-day prescribing, Independent Advocacy, Peer Support programme, developing a gendered approach, progress with trauma-informed approach, anti-stigma work, and improving the governance and function of the ADP. However, the evidence also identified that partners still have significant progress to make in specific areas. These include responding to pressures and capacity issues within treatment services, accelerating progress with whole-system change (including a shared-care model with Primary Care and an integrated approach for substance use and mental health), improving treatment options (including access to residential support), progressing the Dundee Lead Professional model, eliminating stigmatising behaviour from the workforce, enhancing the focus on prevention and the need to improve communications with the workforce and other key stakeholders.

The findings of the self-assessment are currently one of the sources of evidence informing work being undertaken by the Alcohol and Drug Partnership to develop a five-year strategic framework and annual delivery plans for supporting drug and alcohol recovery.

The child protection self-assessment was progressed between July 2021 and October 2022. Similarly to the alcohol and drugs self-assessment, the process included workforce focus groups, evidence gathered from people with lived experience, case studies, and a range of performance information and outcomes from quality assurance activity. The process provided the evidence from which to develop the Child Protection Committee Position Statement that was required as part of the joint inspection process. The Position Statement identified five key strengths:

- Providing the right support at the right time: through our Team Around the Child, MASH (Multiagency Screening Hub) and initial investigation processes we have worked effectively together to ensure a high quality, timeous and effective response to initial concerns. This approach has included a focus on preventing children and young people from requiring formal child protection measures.
- 2. Relationships and engagement with children, young people and families: our workforce has developed the skills and competences required to form trusting and meaningful relationships with children, young people and families.

- **3. Pandemic response:** our pandemic response reflects the excellent collaborative working that happens across our partnership. Our strategic risk register and data have guided a response that prioritised those most at risk, including of hidden harm, and that achieved continuity in terms of the quality of service offered and level of face-to-face contact available to children, young people and families.
- 4. Shifting culture in relation to quality assurance: we have made significant progress in embedding a culture of continuous improvement with routine auditing, data scrutiny and self-evaluation taking place across single agencies. The Child Protection Committee data set has been firmly embedded and is informing priorities and improvement plans. Most importantly, workforce engagement in quality assurance and improvement activity has been significantly enhanced.
- 5. Collaborative leadership: our inclusive approach to leadership has enabled us to develop a robust approach to scrutiny and challenge both within and between the Child Protection Committee and the Chief Officers Group. A consistent focus on a shared vision and key cross-cutting priorities for protecting people has been supported by significant investment of resource to enhance services for children at risk of harm and for their parents/carers.

Four key collective priorities for improvement were also identified: enhancing the voice of children and young people in strategic developments; workforce engagement; supports to young people, including transitions; and, co-ordination of quality assurance activities. The findings of the selfassessment process aligned very closely to the findings published in the join inspection report (set out earlier in this report). This provided reassurance that self-assessment activity had been carried out in a robust, honest and transparent manner.

External Scrutiny

Children's Services

The Coronavirus (Scotland) Act 2020 included provisions which affected the work of the Care Inspectorate in terms of the scale and scope of inspection activity carried out in 2020/21. These changes meant that no inspections were carried out of Children's Services in Dundee during 2020/21 Inspection Year. However, the Inspection process has now resumed and 4 out of 6 of our houses have now been Inspected. Across several Inspection Focus Areas and Quality Themes, our young people's homes and services were mostly graded as Good, with one Adequate and one Very Good. The quality of our relationships with young people in all our houses was noted as a key strength, with the grades listed below:

- Fairbairn Young Person's House, Inspected October 2021
 How well do we support children and young people's wellbeing? 4 Good
 How good is our staff team? 4 Good
 How well is our care planned? 4 Good
- The Junction Young Person's House, Inspected Feb 2022
 How well do we support children and young people's wellbeing? 5 Very Good
 How well is our care planned? 4 Good
- Drummond & Foresters House, Inspected March 2022
 How well do we support children and young people's wellbeing? 3 Adequate
 How good is our leadership? 4 Good
 How good is our staff team? 4 Good
 How good is our setting? 4 Good
 How well is our care planned? 4 Good

This offers a strong foundation on which to continue to demonstrably improve the quality of care and support in all the houses in the post-pandemic period. To this end, the houses continue to be supported by Educational Psychology colleagues on building the capacity and confidence of the teams to respond to young people with considerable adverse childhood experiences. It has also commenced some benchmarking with a house run by a Third Sector organisation which has received an inspection grade of Excellent. Some key priorities going forwards include outcome focused Child's Plans, records of staffing levels reflecting risks and needs and incident de-brief.

Adult Health and Social Care

The inspection of adult services has also not yet returned to pre-pandemic arrangements. The Coronavirus (Scotland) Act 2020 included provisions which affected the work of the Care Inspectorate in terms of the scale and scope of inspection activity carried out in 2021/22. In order to robustly assess arrangements to respond to the COVID-19 pandemic in 2020/21, inspections required to place particular focus on infection prevention and control, wellbeing and staffing in care settings. This focus was extended in 2021/22 to include two elements of the additional key inspection question to augment existing frameworks "How good is our care and support during the COVID-19 pandemic?". A small number of services were also evaluated against key question 1 form the existing framework "How well do we support people's wellbeing?"

To reduce pressure on providers fewer inspections were carried out during the year with 18 services in Dundee being inspected a total of 32 times; those identified as high risk or experiencing a COVID-19 outbreak, received one or more inspections as deemed necessary by the Care Inspectorate. None of the services provided directly by the Partnership were inspected during 2021/22.

5 of the 18 services in Dundee which were subject to a Care Inspectorate inspection last year received grades of 'good', 'very good' or 'excellent'. Of the services that were inspected, 7 of the 18 received no requirements for improvement. One Care Home, Balhousie Clements Park received a statutory notice of enforcement due to poor grades. The requirements listed within the improvement notice were met and a compliance letter sent by the Care Inspectorate confirmed the improvement notice was no longer in force.

	Grade	KQ7 - How good is our care and support during the Covid-19 pandemic?		KQ7 - How good is our care and support during the Covid-19 pandemic?		
		Year 2021-2022 (18 services inspected)		Year 2020-2021 (13 services inspected)		
6	excellent	0	0	0	0	
5	very good	1	5.5%	0	0	
4	good	3	17.0%	3	23.0%	
3	adequate	13	72.0%	10	77.0%	
2	weak	1	5.5%	0	0	
1	unsatisfactory	0	0	0	0	

A summary of inspection gradings for key question 7 is provided below:

There continues to be a joint commitment to continuous improvement and a proactive approach to improving and sustaining quality which involves care providers, the Care Inspectorate and representatives of Dundee Health and Social Care Partnership. This is particularly evident when significant concerns arise. There have been many benefits of such an approach e.g. effective sharing of information, shared agreement about improvement activity required and monitoring of the same until such point concerns have been adequately addressed. This pre-existing commitment and relationships between providers, the Care Inspectorate and the Partnership was invaluable through 2021/22 in supporting providers to respond to the COVID-19 pandemic.

There are robust care home oversight arrangements in place for Dundee, having been established during the pandemic based on national requirements. These arrangements include the Care Inspectorate working alongside colleagues from the Partnership, NHS Tayside and other relevant organisations. This means that information regarding the quality and safety of services shared within the care home oversight arrangements directly informs the Care Inspectorate's risk-led approach to inspections. Where concerns do arise these are addressed with urgency, both through provision of support to the provider and contract monitoring arrangements whilst the Care Inspectorate progress matters as the deem appropriate within their inspection programme. The work undertaken within care home oversight arrangements is included in reports made to Clinical, Care and Professional Governance groups, with any significant concerns being escalated to the Partnership's Clinical, Care and Professional Governance Group.

Dundee Drug Commission and Tayside Mental Health Inquiry

During 2021/22 both the Drug Commission and the Mental Health Inquiry reconvened to assess progress made since their original reports.

The Independent Inquiry into Mental Health Services in Tayside Progress Report, published in July 2021, found a great deal of commitment from staff, partner organisations and others seeking to make a difference for patients and the wider community. In particular the mental health discharge hub and planned local mental health response hubs were identified as positive developments. Overall the review report found that partners across Tayside had responded positively to the original Trust and Respect report and had developed early foundations for developing a new approach to delivering mental health services but that there remains much to do to deliver what is required across the whole system of care and support. Following the publication of the review report the Health and Social Care Partnership has worked with other partners to better prioritise the original Listen Learn Change Action Plan and to develop an implementation plan for Living Life Well.

The Dundee Drug Commission update report was published by the Dundee Partnership on 22 March 2022 (full report available at: https://www.dundeecity.gov.uk/sites/default/files/publications/ ddc review - part 1 - the report - final.pdf). Overall, the Commission concludes that, even when considering the significant impact of the COVID-19 pandemic, the extensive and genuine improvement efforts in Dundee to address drug deaths have not gone far enough, deep enough or fast enough. Despite this overall conclusion, the Commission report does welcome a range of significant developments and recognises that detailed plans have been developed to respond to many of the gaps that they identify within their recommendations. Some of the areas of progress highlighted within the report are which include contributions from social work services include: progress made in relation to rapid responses to non-fatal overdoses, the extension of assertive outreach work and broadening of treatment options offered by the Dundee Drug and Alcohol Recovery Service (DDARS); the implementation of gendered-approaches to service delivery; and, significantly improved engagement with child protection processes. The Commission report also set out 12 further recommendations for implementation over a 5-year period. A number of these areas will require leadership and participation from social work services, including: co-production of a Recovery-Orientated System of Care; a partnership wide approach to tackling stigma; and, the closure of Constitution House and movement of services into multi-agency, community settings. Many of these areas align with the findings of the Alcohol and Drug Partnership's (ADP) own self-assessment.

The ADP, working with the Health and Social Care Partnership, has begun the process of preparing a replacement strategic framework for drug and alcohol recovery. This will replace the ADP's previous strategic plan (2018-2021) and the Action Plan for Change developed in response to

the original report from the Commission. The framework is being developed not only to respond to recommendations made by the Commission over their two reports, but to provide a single, prioritised framework that addresses national policy priorities and local needs. The revised strategic framework and delivery plan are being developed to sit within a wider community planning context that recognises poverty and deprivation and the range of trauma and adversities present across the population that contribute to high levels of drug and alcohol related harm.

Complaints and Compliments

In 2021/22, the total number of social work complaints received was 93, compared with 67 the year before. There were 36 complaints relating to Children's Services, 53 in Dundee Health and Social Care Partnership and 4 in Community Justice. The outcomes were:

- Upheld 10%
- Partially upheld 16%
- Not upheld 53%
- Closed Service Enquiry / Resolved 20%

Most of the complaints related to 'failure to meet our service standards' and 'treatment by or attitude of a member of staff'.

The agreed timescales for finalising investigations was met in 64% of cases, with delays usually caused by the complexity of the complaint and the investigation taking longer than expected.

Given the total number of Social Work service users of over 9,000, the number of complaints is a small proportion however services do endeavour to use complaints to improve practice and service improvements which are made as a result of complaints are monitored.

In addition to complaints, a range of compliments have also been received from service users and some examples are provided below:

From Children's Services and Community Justice

"The social worker undertook a "first class" Joint Investigative Interview, displaying skill and professionalism, which meant there was no need for re-interview and therefore for the child to have to tell their traumatic story again"

(from Police Scotland)

"It has been really helpful having OOHS input at Core Group meetings, this has also been beneficial for the families involved'

"OOHS is an invaluable service providing support for high risk/vulnerable families. Staff are helpful, responsive, enthusiastic and undertake good assessments."

(feedback regarding the Out of Hours Social Work Service)

"I know I could not have made the changes without the supports from NB, I was given encouragement from start to finish'

"New Beginnings are a fantastic team of people, listening to me, supporting me, giving me hope"

"I didn't realise everything I do can have both a positive and negative effect on my baby's brain development, this knowledge helps me to make better choices and decisions that may affect his experiences"

"I didn't think I would get a chance because I have a learning disability, but you took the time to help me learn, thanks"
"My anxieties about having New Beginnings/Social Work involved were greatly reduced after speaking to other parents about how the positive support had made a massive difference to their parenting"

(feedback regarding the New Beginnings Service)

"I've really enjoyed working with [Pause Practitioner], she has helped me start to believe in myself. She is always just a call away whenever I need her. Her support has been great, and I will miss her when our time is over."

"I wouldn't be here without Pause – they have helped me so much and I will always be very thankful"

(feedback regarding the Pause Service)

"For us three guys back at the start this all seemed so foreboding, To my surprise it's been a pleasure and very rewarding. Mentally you have armed us well, I hope you know, So here's a big thank you for everything to our Joyce and Jo." (extract from poem written by Community Justice service user)

"I felt welcomed from the start... They(staff) have helped me feel confident... They (staff) have made me excel...I can't wait for the future "

"'I couldn't fault the placement I was given. Completing my hours gave a feeling of reward, you get a real sense of helping the community ... you're given the opportunity to learn new skills, meet new people ... it was a good experience, it taught me a lot and added a personal journey.' 'You had loads of knowledge of things I needed including the recovery road map."

(feedback from service users undertaking CPO and unpaid work)

From Dundee Health and Social Care Partnership

"Just wanted to thank you so much for an amazingly prompt service. I emailed an order yesterday and my patient CT called today to say it had been delivered. I really appreciate all the help you give us."

(feedback regarding Dundee and Angus Independent Living Centre)

"My elderly stepfather was ill and required hospital admission. Aware that he would be very resistant to this, his doctor recommended care at home by the Dundee Enhanced Community Support Acute Team. This enabled my stepfather to receive the treatment required in his own home. Since he has vascular dementia, the benefits of being treated in familiar surroundings with very little change to his routine made his recovery so much quicker and less distressing for him tn being admitted to hospital. The team kept the family informed at all stages from diagnosis, treatment necessary - including suggestions as to how the family could help in his recoverythrough to his discharge from their care. Since his routine was still in place, he was able to add a little more 'normality' to his daily routine gradually so that when he was discharged from this service he was already back into his familiar pattern of daily life and, unlike returning from previous stays in hospital, was obviously more energised and less time was required for him to recuperate."

(feedback regarding the Dundee Enhanced Community Support Acute Service)

3.2 Ability to Deliver Statutory Functions and Key Risks to Delivery

Children and Young People at Risk of Harm

During the past year, Social Work services in Dundee continued to maintain high levels of contact with vulnerable families, including children whose names are on Dundee's Child Protection Register. Our regular audit activity has provided assurance to managers that levels of contact with vulnerable children and families matched the level of risk. The Inspection of Dundee's services to children at risk of harm also provided evidence about the impact of such high levels of support. It found that children and young people were overwhelmingly positive about the opportunities they had to build strong relationships with key members of staff, with the majority telling inspectors that they had someone they could speak to that they trusted and this was making them feel safer. Inspectors also observed caring, respectful and meaningful interactions between staff and children and young people that they were supporting.

The Inspection report also highlighted the views of parents and carers about the positive relationships that they had with staff members. For the majority of parents, they indicated that these trusting relationships had helped them to be open, honest and had improved communication.

Care Experienced Children and Young People

The Throughcare and Aftercare Team continued to maintain a high level of contact with Care Leavers after lockdown to support welfare and respond to risk of harm. There was further development and enhancement of partnerships to promote the health, education, employability, housing and social needs of Care Leavers. Promoting the uptake of Continuing Care within high quality placements has continued to be a priority for the service to extend the high level of support offered to Care Leavers within familiar settings up until the age of 21.

In addition to this, the Adolescent Services Review team consulted with some older young people involved with the Throughcare and Aftercare Team. The feedback response was they valued the support and opportunities offered to them by staff and felt that their workers cared about them and listened to their views whilst developing their personalised support plans.

Fostering and Adoption

Recruiting Foster Carers for adolescents, large sibling groups and children with complex additional support needs continues to be a challenge and regular Foster Carer recruitment activity and events has been disrupted by the pandemic. However, we have adopted a new approach and embarked on a digital and social media recruitment campaign, advertising through Twitter, Facebook as well as our own adoption and fostering webpage. An external review of the service approach towards the recruitment, support and retention of foster carers will report in December 2022.

Over the past 12 months both the Fostering and Adoption teams have received 37 initial enquiries, leading to 18 formal notes of interest and from this we are currently progressing 11 new assessments of potential carers. Within this period 2 new adoptive households have been recruited. Over the past 12 months our Fostering Resource and Adoption Teams have continued to support 82 approved Foster Care and Adopting Families caring for 110 Young People.

Offenders Assessed as Very High or High Risk of Harm to Others

All MAPPA (Multi-agency Public Protection Arrangements) meetings have continued to take place twice weekly to review all Level 1 and Level 2/Category 3 cases and new referrals. These meetings are multi-agency and are well attended. As COVID restrictions ease, we are hoping to move to a hybrid model of face to face/Teams teleconferencing meetings. MAPPA Operational Group (MOG) and MAPPA Strategic Oversight Group (SOG) have continued throughout 2021/22 by Teams videoconferencing. All individuals on Court Orders had their requirements for supervision delivered through adherence to National Outcomes and Standards, with a mixture of office and home visits. All programme requirements such as Moving Forward Making Changes (work with convicted sexual offenders) and Caledonian Programme (work with domestic abuse convictions) have continued through a mixture of groupwork and one to one sessions. Even with on-going restrictions, it has been assessed that no individual will require extra time to complete their programme.

Workers in the Public Protection Team in Community Justice, work closely with colleagues in the Police to create Risk Management Plans, which identify prevention, support and contingency arrangements for the service users they work with. The Team currently have a service user who has an Order of Lifelong Restriction, who has recently been approved to move to the Open Estate and will soon be granted community access. Alongside the MAPPA arrangements, the Risk Management Plans, where appropriate, are shared with the Risk Management Authority.

Mental Health Statutory Provisions

Mental Health Act work has continued to be prioritised by the Mental Health Officer (MHO) Service. The service has continued to undertake all assessments and provide applications and reports to the legal hearings involved in line with the legislation. The demand for the MHO duties under the Mental Health Act has remained relatively similar to recent years and the service has coped well with this demand.

It was identified last year that there had been a reduction in MHO's within Dundee, however this has improved during 2021/22 with one successful candidate completing their MHO Award, whilst also recruiting an additional MHO into the Partnership's social work teams. 2 successful applicants have commenced the MHO Award that begins later in 2022. We have been able to increase the establishment of the MHO dedicated team by one full time equivalent. This post was successfully recruited to. Unfortunately, due to long term absence and subsequent need to recruit, the Partnership has not fully benefitted from this increase as yet.

A new development within the MHO Service is the establishment and recruitment of 2 part time Recovery Support Workers. The workers are now in post and building their involvement with clients, assisting their recovery whilst in hospital and/or in the community.

Adults with Incapacity and Welfare Guardianship

The request for MHO reports for welfare guardianship applications has continued and remains an area where demand is unable to be met by current capacity. The MHO Service continues to allocate these reports to both MHO's within the dedicated team and those in other substantive posts. As an ongoing response to the high demand and waiting list that has remained significant over the reporting period, we have extended the opportunity for MHO's to undertake this work out with their contracted hours for additional payments. There has only been a limited uptake, but remains an option to help reduce the waiting times for reports. The main response to address this demand and reduce the waiting list, was the establishment of a further MHO post as described above. Due to the reasons indicated above, this has not yet made a significant improvement in our ability to respond to the demand, however, the Service is confident that when the team is at full complement, a positive impact will be apparent.

Adult Support and Protection

The COVID-19 pandemic brought into sharp focus the need to safeguard adults with care and support needs who may be more vulnerable to abuse and neglect as others may seek to exploit disadvantages. As we move forward from the pandemic the partnership continues to offer a similar or enhanced level of oversight regarding these duties.

This has included:

- Additional monitoring and oversight on a multi-agency basis with weekly meetings and data collection and analysis shared across the partnership.
- Updating of operational guidance to accommodate the pandemic situation and restrictions. A comprehensive review of operating procedures is planned in anticipation of revised national protocols.
- Continued development and application of the multi-agency corporate "Risk Register" in respect of Protecting People.
- Greater involvement of the multi-agency workforce in learning from case reviews and the improvement of practice
- Establishment of a multi-agency Self Evaluation and Continuous Improvement Group.
- Establishment of a Citizens Engagement and Consultation Group.
- Establishment of Health and Social Care Protecting People Oversight Group

The number of adult concerns reported to the Partnership was higher than 2020/21 and has seen a return to the trajectory of pre-pandemic levels, although ultimately the vast majority of these (77%) did not meet the definition of an adult at risk. Forty four percent were supported by actions other than adult protection and the remaining 23% were progressed by actions in accordance with the Adult Support and Protection (Scotland) Act.

There has been a focus on developing key areas of Adult Support and Protection, primarily;

- Support and training for the role of Council Officer.
- The piloting of new models of screening and risk assessment.
- The appointment of Nurse Advisors within the NHS Adult Protection Team.
- Revised terms of reference of Adult Support and Protection Committee and induction pack developed for new members.

Carers

Throughout 2021/22 the Health and Social Care Partnership, working alongside Dundee Carers Partnership, has continued to prioritise services and supports to meet the needs of unpaid carers. Carers engagement activities have reinforced the significant impact the pandemic has had on the health and wellbeing of many unpaid carers, who have also been further affected by the cost of living crisis. Multi-agency work to understand these needs and reflect these in an updated Carers Strategy is described earlier in this report. The Health and Social Care Partnership has continued to focus on enhance capacity to fully implement the duties contained within the Carers (Scotland) Act, including a focus on identification and assessment of unpaid carers and the use of Adult Carers Support Plans across Partnership services. The recently agreed Carers Investment Plan includes significant additional resource to support enhanced capacity across Care Management Teams to implement carers assessment and support planning duties. It is anticipated that this additional capacity will be recruited during 2022/23. In 2021/22, the total net Social Work budget of £122,739 was allocated across services as follows:

Service Area	2021/22 Budget £000
Children's Services	£35,158
Community Justice Services	£194 (plus additional Scottish Government Grant Funding of £4,716K)
Adult Social Care Services*	£82,671
Total	£122,739

4.1 Financial Pressures

Children and Families Service – Dundee City Council

In Children's Social Work, in accordance with the principles outlined in the Independent Care Review reports on The Money and Follow the Money, financial pressures continued to be addressed through a range of measures. The management structure was reviewed, partly to explore potential savings and partly to maximise available resources to lead service initiatives and support best practice. A new structure with less cost is now well embedded and it was noted in the recent Joint Inspection of Child Protection that significant investment had been made in service improvements, with good capacity to build on developments.

Under this new structure, further work has included joint coordination of prevention initiatives with Universal Services and the Third Sector to reduce the need for children and young people to receive alternative care, with overall numbers and therefore associated costs going down. It has also included the continued use of Gillburn Road Young Person's House as a residential home as opposed to a short-break facility, with the number of young people with a disability in external residential care therefore also reducing. The implementation of Functional Family Therapy appears to have helped to stabilise the care at home arrangements for a significant number of young people.

Going forwards, the service is currently working with partners on the targeted deployment of additional Scottish Government Whole Family Wellbeing Funding towards prevention. There have been some delays in returning some children and young people from external residential care into appropriate local care arrangements but additional bedrooms in each of the Young People's Houses and the introduction of a waking nights rota is creating the capacity to bring them back. The service has commissioned an external review of approaches towards the recruitment, retention and support of internal foster carers to enhance their capacity and reduce a reliance on external carers.

Adult Social Care Services - Integration Joint Board

The delegated budget to the Integration Joint Board (IJB) to support the delivery of adult social work and social care services continued to be impacted by the COVID-19 pandemic during 2021-22, as well as increasing levels of demand due to changing demographics and prevalence of people with disabilities, mental health and substance use issues. The COVID-19 pandemic has been the biggest public health challenge facing society, including our health and social care system, in our lifetimes. The impact on the health and social care needs of the population, how supports and services are delivered, on health inequalities and on the health and wellbeing of the health and social care workforce and of unpaid carers has been substantial and wide ranging.

Services delegated to the Integration Joint Board formed a critical part of the overall health and social care system, particularly the wide range of community-based health, social care and social work supports and services. Additional funding was made available from Scottish Government to fully cover the additional pandemic response costs.

Where possible, a range of essential, non-COVID services also continued to be delivered, including face-to-face contact on a risk assessed basis to ensure the most vulnerable in the city continue to receive the support they need.

With the backdrop of a significantly challenging overall financial settlement, coupled with the impact

of COVID-19 pandemic, the IJB reported a year end underlying underspend of £7,839k for 2021/22, arising from an underlying underspend of £5,969k in social care budgets and an underlying underspend of £1,870k in health budgets.

4.2 Financial Modelling for Service Delivery

Children and Families Service – Dundee City Council

As part of its overarching Our Promise and the 5 foundations of The Promise strategy, the Children and Families Services continues to progress a range of initiatives designed to transform the way it manages, delivers and commissions services in partnership with all key stakeholders across the care system. This includes work with Universal Services and the Third Sector on enhanced preventative family-based support, with The Alliance on FORT (Fast On-line Referral Tracking) and a volunteer strategy, with the Scottish Mental Health Foundation on an emotional health and wellbeing capacity building model and with the Hunter Foundation and local communities on What Matters 2 U. Further into the care system, the service is applying similar approach in relation to Kinship Care, Internal Foster Care and Young People's Houses. Going forwards, it is similarly working with other services on the deployment of Whole Family Wellbeing Funding (WFWF), which requires partnerships to build capacity and promote systems change in respect of preventative whole family support. Engagement with both partners and communities will form an integral part of the approach. The aim is to maximise all existing resources and ensure support is accessible, meaningful and effective.

Adult Social Care Services - Integration Joint Board

During 2021/22, Dundee Health and Social Care Partnership's operational delivery model continued to embed a model of fully integrated health and social care services to support the delivery of the Dundee City Integration Joint Board's strategic priorities. Service managers have responsibility for both council and NHS services as part of their portfolios with a specific focus on service user categories (e.g. older people, mental health). In order to ensure Dundee Health and Social Care Partnership is able to respond effectively to a range of strategic challenges, including tackling Dundee's substance use problem and prevalence of poor mental health, the service has enhanced its senior management team capacity through the establishment of an additional Head of Operational Services post.

Transforming services is key to the Dundee City Integration Joint Board continuing to improve outcomes for service users and performance and service redesign opportunities connected to the overarching strategic priorities. While some of these transformation plans were put on hold during 2021/22 due to the challenges of responding to the COVID-19 pandemic, the changing nature of the response has required some services to continue to evolve at a quicker pace than under normal circumstances.

Financial plans to support the priorities will be developed alongside the Transformation Plans.

5.1 Workforce Planning

To deliver quality outcomes in social care and social work, it is essential that employees are equipped with the skills and knowledge to carry out their roles competently and confidently. Workforce planning is becoming increasingly complex as new structures and different models of integration progresses.

In Social care and social work in Dundee we are committed to the Fair Work First Commitments, for example payment of the Scottish government Living Wage and would aspire to working towards these recommendations.

We have continued to promote fairer working conditions across our contracted services. A number of good practices have been developed alongside stakeholders (living wage, enhanced weekend and public holiday pay, zero-hour contracts, travel costs, equipment costs, safe recruitment check costs) and these continue to be monitored across providers with the intention to incorporate these principles more fully within procurement frameworks and contractual arrangements.

WORKFORCE OVERVIEW

The social care and social work workforce in Dundee consists of 1377 people employed within Dundee City Council Children (382 people) and Families Service and the Dundee Health and Social Care Partnership (995 people).

Just under 10% of the workforce are aged 30 years or under, with almost 50% being aged 51 years or older. The majority of people, 82%, are women.

5.5% of the social work and social care workforce identify as having a disability and 4.43% identify as being of a black or minority ethnic origin. When comparing the social work and social care workforce information against 2011' census information, it is apparent that the workforce is under-represented across many of the protected equality characteristics. For example, Dundee's population comprises of 10.64% people of black and minority ethnic origin and 31.27% of people who have a disability.

Just over 1% of the workforce are employed on a temporary basis, with the vast majority being permanent employees. During 2021/22 136 people left the social care and social work workforce, with 108 new people joining. Turnover (workforce leavers) was slightly higher in adult social care and social work services than in children's and community justice services. 60% of leavers were aged 51 years or above and only 7% of leavers were aged 30 years or under. Just over 30% of new starts were aged 30 years or under, with 23% being 51 years or older. This turnover pattern provides an indication that some progress is being made in addressing challenges related to the ageing workforce and a desire to increase the young workforce.

During 2021/22, 20% of leavers (29 people) were in frontline operational roles requiring a professional social work qualification (up to Team Manager level), with a significant difference between 14% of leavers in adult health and social care and 40% of leavers in Children and Families. 17% of new starts (19 people) joined the organisation in equivalent role. Overall Dundee Health and Social Care Partnership saw the biggest in-year reduction in this staff group with a net loss of 10 people, whilst Children and Families had no loss/gain.

When excluding COVID related absence, across the social work and social care workforce 20.2 days were lost per FTE (full-time equivalent) during 2021/22 (equivalent to 8.78% of total working days). This is higher than the Dundee City Council figure of 12.11 days (5.67% of total working days). In social work and social care there has been a steady increase in working days lost per FTE throughout

2021/22, to a peak in March 2022 when 2280 days were lost in total across the workforce. This pattern is consistent with the Council workforce as a whole. Across the year 19.18% of days lost in social work and social care related to short-term absence and 80.82% related to long-term absence. This differs from the position for the whole Council workforce, where there was significantly lower proportion of days related to long-term absence (69.88%).

The most common reasons for lost days to absence for the social care and social work workforce in 2021/22: anxiety / stress / depression / other psychiatric illness (47.02%); nervous system disorders (17.69%); infectious diseases (5.87%); injury/fracture (5.66%); and, other known causes (4.36%). There is some variation between these causes of absence and those for the Dundee City Council workforce as a whole; whilst the top 5 reasons for absence were the same, a lower proportion of days lost related to anxiety / stress / depression / other psychiatric illness (40.87%). Considering COVID related absence in the social care and social work workforce, 8.98 days were lost per FTE during 2021/22 (equivalent to 3.9% of total working days). This compared to 6.88 days ((3.22%) for Dundee City Council as a whole. The number of days lost in social care and social work had a significant peak in January, February and March 2022 with the average number of days lost per month being 1460; this was consistent with patterns across the Council as a whole. Over the year, 61.29% of days lost to COVID related absence was short-term, with the remaining 38.71% being long-term. Long-term COVID related absence was notably higher in social care and social work than in the Council as a whole (23.26%).

THE FUTURE WORKFORCE

Employees are at the heart of excellent social work and social care delivery. Changing models and changing pressures will require significant remodelling of the workforce - e.g., the introduction of a National Care Service. This comes at a time when employee resilience is stretched, and change can seem overwhelming. In order to design the workforce of the future we require to profile the workforce, redesign job roles, undertake a skills analysis and work in a much more integrated way. The focus will continue throughout this to be on increasing the wellbeing of employees.

In Social Care there is a commitment to invest in the young workforce which has created opportunities, work placements and training opportunities for apprentices within the City Council and externally, including some of our programmes with Dundee and Angus College and Graduate programmes with the local universities.

We will continue to work in partnership with Dundee City Council's Youth Employability Service to develop our apprenticeship offer across Foundation/Modern and Graduate Apprenticeships. We will also continue to support with Work Experience placements and internships for School/College/University/Employability and the workplace training of students.

RECRUITMENT

Over the past year it had become increasingly challenging to appoint to posts within the Council, particularly posts within social work/care sector. This is not just a local issue and is reflected nationally, with COSLA reporting a significant decrease in the number of candidates applying for local authority posts.

Improving the quality of candidates and ensuring long-term recruitment and retention is included in the People Strategy and we are working with services to develop workforce planning strategies required in the next 5 – 10 years to enable us to plan for the future workforce.

We need to be more ambitious about how we recruit, provide opportunity and reward, with retention of transferable skills and capability linked to broader improvement and change. To do this we are/ have:

- Improving our employer branding to better promote the benefits of working with Dundee City Council.
- Developing the employee experience/journey and marketing Dundee City Council as an employer of choice.
- Widening the scope of advertising to include more specialist on-line social media sites to encourage applications.
- Changed the closing day and time for posts from a Friday at 5pm until Sunday midnight to give maximum time for applicants to apply for posts. We also leave adverts open for a longer rolling period to maximise applications
- Working with Scottish Social Service Council to recruit from a portal they have developed
- Using employer sponsorship in line with government guidance
- Working with colleagues nationally with Myjobscotland to develop and improve the portal to make it more user friendly.
- Developing the Young workforce We have a number of funded programmes in place to support students, internships, graduates and modern apprenticeships. In addition, we are working within schools to update guidance teachers, pupils and parents about the opportunities with Dundee City Council.
- Utilising Grow your own approaches and the intention is to support more employees to gain experience through secondments, projects and service design. We have also supported our employees to gain academic and SVQ (Scottish Vocational Qualifications) qualifications through our own professional development funds and training budgets.
- Maximising strong relationships with higher education through the 3 local Universities and others nationally to create new degrees and qualifications for the future. The local Employability Partnership is closely aligned with the Council People priorities. We work very closely in partnership with Skills Development Scotland and others such as Scottish Social Services Council to develop career routes and occupational standards.
- Developing our existing workforce through effective workforce planning and career planning. This will be further enhanced as we modernise some internal recruitment approaches and the modernisation of more flexible and digital working practices.

5.2 Social Work and Social Care Workforce Development

The Council's commitment to our employees is reflected within Our People and Workforce Strategy 2019–2022 which was relaunched shortly before the COVID-19 pandemic. This includes our approach to Workforce and Succession Planning, Talent Management and Developing the Young Workforce. Within Social Work, there is a culture of shared learning across professional groups and our partnerships.

Despite the challenges of responding to the COVID pandemic, we have continued to invest in and support all areas of workforce learning and development. This has included redesigning delivery and content of core learning to respond to changes in working practice and to incorporate the advantages of new and innovative digital technologies within our learning offers.

Increasingly we are working across Tayside with our partners in local authorities, NHS Tayside and the private and voluntary sectors. We continue to contribute to and build on collaborative approaches to Learning and Workforce Development with key local and national partners. We have an excellent track record of working alongside practitioners and services to identify and develop the learning they need

to practice safely and professionally. This collaborative approach has continued throughout 2020/21 utilising a range of innovative methods and digital tools where appropriate.

CSWO ROLE IN PROMOTING SOCIAL WORK VALUES AND STANDARDS

The CSWO has a duty to ensure Social Work values and standards as outlined in the Scottish Social Services Council (SSSC) Codes of Practice are promoted. For employers, the Codes include such requirements as making sure people understand their roles and responsibilities, having procedures in place relating to practice and conduct and addressing inappropriate behaviour. For employees, protecting the rights and interests of people using services, maintaining trust and promoting independence. This includes the following:

- Recruitment and selection, including checking criminal records, relevant registers and references.
- Induction, training, supervision, performance management and a range of procedures on such things as risk assessment, records and confidentiality.
- Responding to internal or external grievances or complaints about the conduct or competence of staff.
- Ensuring line managers appropriately support staff and progress self-evaluation activities to identify strengths and areas for improvement.
- Ensuring health and safety policies are in place, including risk assessments and controls for identified hazards such as lone working and moving service users.
- Ensuring that staff required to register with the SSSC do so and are supported to meet the learning and development requirements associated with this.

Within the Health and Social Care Partnership Workforce and Organisational Development Strategy a number of guiding principles to support the workforce to deliver on the ambitions of integrated health and social care were adopted. These locally created principles sit alongside existing legislative and clinical, care and professional governance requirements, as well as the SSSC Codes of Practice. The principles include: inclusivity and equality, visible leadership, collaborative co-production and reflective practice. These continue to be relevant and support the broad social work and social care workforce to reflect on shared values, and how these values support professional and compassionate delivery of services across the city.

EMPLOYEE WELLBEING SUPPORT SERVICE

The Employee Wellbeing Support Service was initially established as the local and organisational response to the COVID-19 pandemic and offers support, guidance, and resources to meet individual needs beyond the pandemic. This service aims to promote positive mental health and wellbeing as a priority for Dundee City Council with compassion and self-care at the heart of the service.

Throughout 2021/22 the Employee Wellbeing Support Service continued to support social work- and social care workforce and wider partners to access additional health, wellbeing and psychological support as and when needed.

The service is currently being redesigned to evolve post-pandemic, and to ensure that workforce wellbeing is at the core.

Wellbeing Ambassadors are now in place to offer peer led advice and information to those working across all social work services. We currently have 4 Wellbeing Ambassadors supporting our social work and social care workforce.

TEAM REFLECTION AND RESILIENCE PROGRAMME

The Employee Wellbeing and Support Service work has expanded to offer access to guided and supported reflective spaces for teams as they continue to recover from the impact of the pandemic, using Trauma Informed approaches. These sessions have been accessed by our social care and social work workforce.

"These sessions offered me and my team the opportunity to come together, reflect on the challenges as well as our strengths as a team, what we have learned from each other and lessons from our experience of the pandemic. This has helped us focus on what matters most for us as a team and the children and families we support".

"The programme helped me realise just how challenging our journey has been throughout the pandemic, the value of self-care and looking after and supporting each other"

"The session on window of tolerance helped me reflect and understand my own behaviours and triggers and coping strategies, it was emotional but I learned a lot about myself and how I use some of this to support families"

TEAM REFLECTION AND RESILIENCE PROGRAMME

Trauma Risk management, or TRiM, is a trauma-focused peer support system designed to help people who have experienced a traumatic, or potentially traumatic, event. This new model is now in place and will offer support to members of the social work and social care workforce who experience a potentially traumatic event during the course of their work.

IMPLEMENTATION OF TRAUMA INFORMED PRACTICE AND NATIONAL TRAUMA TRAINING PROGRAMME

In May 2021 a virtual learning and knowledge exchange event was held for Trauma Steering Group members. This provided an opportunity to hear from partners within Dundee and beyond who have already embedded trauma informed approaches, to learn from their implementation journey and to identify how this can inform the Dundee Steering Group's developing implementation plan. Presentations were given by Dundee Women's Aid, Dundee City Council Community Justice, Dundee City Council Educational Psychology, Dundee Drug and Alcohol Recovery Service Psychology, Barnardo's Scotland and Argyll and Bute Council.

In March 2022 Dundee hosted a virtual trauma launch event across the city which included participation from social care and social work workforce. Workforce mapping across the different levels of the National Trauma Training Framework has been undertaken, with a range of national and local resources, toolkits and collaborative opportunities available to our workforce.

DIGITAL SKILLS SUPPORT

As part of our ongoing commitment to upskilling the workforce in respect to digital skills, a number of bite-sized digital skills session were available throughout 2021/22. These sessions were and continue to be led by Digital Champions (champions include social work and social care employees), supported by the Digital Skills Team within Learning and Organisational Development.

As well upskilling the workforce, the Digital Skills Team continue to provide enhanced support and advice to the workforce, developing and delivering a range of information and bespoke learning sessions for employees across Children and Family Service and Dundee Health and Social Care Partnership.

The Digital Skills Team provided critical support and to social workers and social care workforce enabling them to access critical statutory learning on new digital platforms and tools such as MS Teams.

LEADERSHIP DEVELOPMENT

Dispersed leadership remains a key priority for our social work and social care workforce. This year we have piloted a new Integrated manager Programme, bringing together participants from across many functions of adult social work and health. There are plans to further progress this model throughout the latter part of 2022.

CONTINUOUS PROFESSIONAL DEVELOPMENT AND SOCIAL WORK PATHWAYS

We continue to invest in our social work and social care workforce to embed a shared learning culture where best practice is promoted, nurtured and shared across the city. We support and promote a range of specialist modules delivered by the Open University, which can be undertaken as a standalone, enhancing existing practice with the potential to progress onto a sponsored social work professional qualification.

In 2021/22 we recruited and sponsored a further four internal candidates to undertake their professional social work qualification.

We promote a range of specialist and enhanced learning opportunities for employees, which has continued throughout 2021/22. Postgraduate Certificate in Child Welfare and Protection, Adult Support and Protection, Mental Health Officer Award and Practice Learning Qualification remain in place and are currently prioritised in relation to our statutory duties and best practice.

"I completed the post grad cert in both personalisation (self-directed support) and Adult Support and Protection with merit. I really enjoyed the course and have spoken about this a lot with my colleagues encouraging them to apply. It gave me the time to reflect on my own work"

(Social Worker in HSCP)

"I shared papers and ideas which were directly relevant firstly for permanence and then latterly for kinship with the rest of the team(s). It was helpful to update on latest research around assessment and intervention. Beyond this I found the areas around direct work with children and families of particular interest and again shared these with the team. We also discussed the wider themes of relationship based social work practice in an environment which is increasingly constrained by organisational input/output models of working. I benefited from securing the time around the teaching days and using a combination of study days, flexi and leave for the assignments. I enjoyed the course and would recommend it to others."

(Social Worker in Children and families Service undertaking Child Welfare and Protection PG Course)

MENTAL HEALTH OFFICER (MHO) AWARD

We provide a significant investment in developing the MHO workforce across the city. MHO's are social workers with a minimum of two years post qualifying experience who have undertaken an intensive period of study and successfully completed the Mental Health Officer Award (MHOA), thereafter appointed (yearly) to undertake statutory functions within the role MHO by the CSWO.

We continue our membership with the East of Scotland MHO Programme Partnership, financially contributing to a MHO Award Co-ordinator. The Covid-19 pandemic had a significant impact on the delivery of the MHO award for academic year 2020/21. To mitigate risk, Dundee enhanced a proactive award recruitment campaign which commenced in February 2021. Support, mentoring and talent management from the MHO Service has ensured arrangement for both academic years 2021/22 and 2022/23 will be fully utilised to meet workforce demands, with successful candidates already identified and recruitment to undertake the award for both years.

PRACTICE LEARNING OPPORTUNITIES

We have supported ten employees undertake their practice learning qualification in 2021/2022 with University of Stirling and Robert Gordon University. This is a significant investment in our workforce enabling us to offer more practice learning opportunities, develop leadership skills and embed a learning culture throughout the social work and social care workforce.

We have continued to promote and increase practice learning and student placement offers throughout 2021/22 despite the challenges of the pandemic. Learning in practice enables social work students to develop knowledge, skills and experience of working in different social service contexts. It also helps them to apply the learning they have gained at university to the work they are doing in practice, practice learning opportunities can also be valuable learning for a team as a whole.

In 2021/22, we continued to offer practice learning opportunities to students undertaking their social work qualification. As part of our Covid-19 recovery journey, development work was undertaken to increase the number of placements we offer to Universities which included engagement work with practitioners, a Short-Life Working Group and, collaborative work with Dundee University to strengthen relationships between the University and frontline practitioners. Link Worker training via Learning Network West continues to be available to any practitioners who wish to develop their knowledge and understanding of the Link Worker role.

NEWLY QUALIFIED SOCIAL WORK PILOT PROGRAMME

The Scottish Government have commissioned the SSSC to lead on a programme of work to design and test approaches which will support this transition and early career stage development of Newly Qualified Social Workers (NQSW). This will lead to a set of recommendations on how to implement and deliver a sustainable and accessible national approach to a NQSW Supported Year.

In September 2021, we were successful becoming one of the early implementation test sites across Scotland for the next phase of the project. We have focused on developing and delivering a programme which builds on our existing Child Protection and Adult Support and Protection offers for NQSWs, meaningfully engaging with the workforce to co-create a sustainable model of excellence moving forward and influencing the supported year recommendations at a national level.

REGISTRATION OF SOCIAL SERVICES WORKERS

Registration has an important role in improving safeguards for people using services, meeting the requirements of registration also evidences the skills and knowledge of the workforce, ensuring they are qualified and competent.

We continue to offer and significantly invest in a range of learning opportunities, training and accredited qualifications designed to support the social work and social care workforce achieve and maintain the requirements of their professional registration.

We ensure our workforce are fully equipped with the occupational competences to meet management and leadership standards and our statutory requirements. The delivery and access to appropriate registerable qualifications for our workforce remains a key priority.

During reporting period 2021-22, the following registerable qualifications have been achieved by our workforce.

Qualification	Nos completed (2021 – 2022)
Professional Development Award in Health and Social Care Supervision at SCQF level 7	9
Social Services (Children and Young People) Level 4	3
SQA Level 2 Social Services and Healthcare at SCQF level 6	17
SQA Level 3 Social Services and Healthcare at SCQF level 7	6
Unit 24	3
2 Unit Skill Set	12
Mental Health Officer Award SCQF Level 11	1

PROTECTION

Delivering on programmes relating to the protection of children and adults has remained a priority as in previous years. The delivery of learning and training opportunities was significantly impacted by the COVID-19 pandemic. We have adapted, innovated and where appropriate further developed digital resources to mitigate workforce risks, upskill and enhance protection learning and development activity throughout cross cutting protection themes.

A wide range of Dundee and Tayside Partnership wide child and adult protection learning resources and digital workshop were developed and continue to be available for the multi-agency workforce, enhancing knowledge, skills and competence of the wider workforce and for those with specific responsibilities in relation to child protection. Some of the learning resources developed continue to be available and include Child Protection Tayside Professional Curiosity and Challenge, Tayside Chronologies and Significant Events learning resource, Equal Protection from Assault Child Protection resource, Designated Child Protection Worker among others. As well as a range of available digital and e-learning resources, a range of remote live training, learning opportunities and webinars have been available to the social work, social care and wider multi-agency workforce. These webinars, learning exchange events and digital training sessions have included awareness raising of a range of workforce best practice tools developed by the GIRFEC Delivery Group, trauma learning exchange and lunch time learning sessions, a range of thematic protection sessions i.e. self-neglect and hoarding and delivery of a range of workshops sharing learning from initial and significant care reviews across Tayside.

Adult Support and Protection Week

In February 2022, Dundee coordinated a calendar of events to celebrate and promote national adult support and protection day. These activities and events spanned across 2 weeks offering a range of workshops, webinars and learning opportunities for the social work, social care and multi-agency workforce. Dundee and Tayside events ranged from self-neglect and hoarding, adult protection and trauma, adult protection awareness, learning from thematic reviews of fire deaths, investigative interviewing and financial harm awareness.

Development work has continued with practitioners who have specific Council Officer functions under the Adult Support and Protection (S) Act 2007. Our Adult Support and Protection Council Officer training programme was redesigned and adapted and is now delivered on a Tayside wide basis. A further two cohorts were delivered throughout 2021/22. Our Tayside programme is now recognised as a best practice, collaborative national model, endorsed by the National Adult Support and Protection Coordinator.

Key elements of the programme include:

- The development of an ASP learning tool, enabling practitioners to evaluate and track their knowledge, skills and competence against key adult support protection quality indicators.
- Individual learning plans and supervision tool, line manager input and feedback.
- Accessible learning resource which follows the programme.
- Self-directed learning tasks.
- 9 Practice workshops, running over a 6-8-month period.

Newly Qualified Social Worker (NQSW) Child Protection Programme

Dundee and Angus Council continue to work in partnership to deliver an induction process for supporting newly qualified social workers to feel competent, confident and knowledgeable when working with children and families where there are child protection concerns.

This programme was adapted and initially delivered within a digital workshop format in 2020, following on from a cohort previously established before the Covid-19 pandemic.

This innovative programme model is underpinned by three key components

- 1. Access to a digital NQSW learning resource, includes individual competency learning audit tool.
- 2. Practice development workshops, co-facilitated by experienced operational social work managers from Children and Family Service (now delivered remotely).
- 3. The use of an evidence-based augmented reality stimulation (*Rosie-2) immersing NQSWs into a complex home visit navigating through the home exploring practice issues with accompanying research around disguised compliance, professional curiosity, neglect, and other complex harm among other themes.

TURASLEARN

TURASLearn is NHS Education for Scotland's (NES) learning platform. It provides a wide range of educational resources for the health and social care workforce. Dundee City Council, in partnership with Angus and Perth and Kinross Council's, have worked with NES to develop a Tayside learning platform hosted on TURAS. The Tayside portal enables partners from a range of services across the city from including NHS Tayside employees, third and independent sector employees and volunteers' access to a range of protection learning resources previously unavailable to them.

TURASLearn continues to be promoted across all social work and social care services, both with the organisation and with those who deliver services on behalf of or as part of Dundee Health and Social Care Partnership. It has proved to be an invaluable resource to allow the social care workforce to access additional learning and other resources designed to support their own and others health, psychological wellbeing as well as raise awareness of key learning and protection.

At this time, I have identified a small number of improvement priorities that I will seek to support the social work and social care workforce and out partners to progress over the next 12 months:

Challenges for the Year Ahead 6

PARTICIPATE in the co-design process for the National Care Service, reflecting local knowledge and experience.

DEVELOP enhanced ways to co-produce services and supports to ensure that we remain personcentred and responsive to local communities.

SUPPORT our social work and social care workforce to recover from the impact of the pandemic and to maintain good health and wellbeing.

ENHANCE our focus on prevention of risk and harm by working collaboratively across the whole GIRFEC pathway for children and young people.

FOCUS on the continued implementation of Our Promise to Care Experienced Children, Young People and Care Leavers 2019-2023.

FURTHER progress recovery of Community Justice Services as part of a whole systems remobilisation of community justice services across Scotland.

CONTINUE to focus on driving forward improvements in mental health and wellbeing and drug and alcohol services through collaborative working, including working with people with lived experience to fully implement existing action plans and consider any emerging challenges.

CONTINUE work to further roll out our approach to trauma informed practice and leadership and to enhance whole family approaches to protecting people.

ACCELERATE work to embed personalised approaches across all service areas, including specific work to enhance our approach to outcome-based assessment and supporting people to access Self-Directed Support.

CONTINUE to work with partners across the whole health and social care system, including acute care services, to achieve an unscheduled care response that delivers the right care, in the right place, at the right time, first time.

REFRESH the Chief Social Work Officer Governance Framework to ensure that post-pandemic it continues to support proportionate oversight, reporting and continuous improvement in social care and social work services.

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