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3 November 2023

## Members of the Adult Care and Social Work Committee

### Chief Executive's Office

Archie Aitken  
Chief Officer (Legal & Democratic)  
Civic Centre, Windmillhill Street,  
Motherwell ML1 1AB  
[www.northlanarkshire.gov.uk](http://www.northlanarkshire.gov.uk)

Notice is given that a Meeting of the **Adult Care and Social Work Committee** is to be held in the Council Chamber, Civic Centre, Windmillhill Street, Motherwell, ML1 1AB on Tuesday, 14 November 2023 at 14:00 PM which you are requested to attend.

The agenda of business is attached.

### Archie Aitken Chief Officer (Legal & Democratic)

#### Members :

M McCulloch, M Boyd, D Ashraf, C Barclay, B Baudo, G Brennan, B Burgess, A Bustard, J Cairns, T Carragher, K Docherty, W Goldie, L Jarvie, J Jones, M McBride, A McCrory, B McCulloch, R McKendrick, A McVey, N Shevlin, R Sullivan, J Toner, C Williams, N Wilson, G Woods.



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## Agenda

- 1            **Declarations of Interest In Terms of the Ethical Standards In Public Life Etc. (Scotland) Act 2000**
- Operational**
- 2            **Health and Social Care Partnership Strategic Commissioning Plan 2023-26**            5 - 28  
Submit report by the Chief Officer (Performance, Planning and Quality Assurance) setting out the partnership's Programme of Work to support the delivery of the priorities within the Strategic Commissioning Plan 2023-2026
- 3            **Getting it Right for Everyone**            29 - 38  
Submit report by the Acting Chief Officer (Adult Social Work Services) highlighting the principles, aims and objectives of the national Getting it Right for Everyone (GIRFE) Pathfinder process along with the governance arrangements and Project Plan
- 4            **Resilience Response**            39 - 50  
Submit report by the Chief Officer (Health and Social Care Partnership) outlining the Lanarkshire Whole system Operation Flow 2 plans and implementation structures
- 5            **Annual Report of the Chief Social Work Officer**            51 - 138  
Submit report by the Chief Officer (Chief Social Work Officer - Children, Families, Justice and Integrated Services - Education and Families) seeking approval of the Annual Report of the Chief Social Work Officer for 2022/23
- Performance**
- 6            **Annual Performance Report 2022/23 - Health & Social Care North Lanarkshire**            139 - 168  
Submit report by the Chief Officer (Performance, Planning and Quality Assurance) providing the Annual Performance Report - Health and Social Care North Lanarkshire 2022/23
- 7            **Quarter 1 Performance Report 2022/23 - Health & Social Care North Lanarkshire**            169 - 178  
Submit report by the Chief Officer (Performance, Planning and Quality Assurance) providing an update on the performance of key areas of activity within Adult Health and Social Care for the period 1 April to 15 September 2023
- Financial**
- 8            **Revenue & Capital Budget Monitoring Report Adult Social Care Period 6 - 1 April to 15 September 2023**            179 - 190  
Submit report by the Chief Officer (Planning, Performance and Quality Assurance) providing a summary of the revenue financial performance of the Health and Social Care Partnership (H&SCP) - North Lanarkshire (Adult Social Care and Housing) and the financial performance of the Social Work Capital Programme
- Contracts**
- 9            **Contract Award for Vehicles for Health and Social Care**            191 - 200  
Submit report by the Chief Officer (Health and Social Care Partnership) seeking approval for the award of a contract for the purchase of vehicles for Health and Social Care to Suzuki GB Plc

10	<b>Contract Award for Aids for Daily Living</b> Submit report by the Chief Officer (North Lanarkshire Health and Social Care Partnership) seeking approval to award a contract for Aids for Daily Living	201 - 208
11	<b>Contracts Awarded Below Committee Approval Threshold</b> Submit report by the Chief Officer (Assets and Procurement) advising of contracts awarded below Committee approval threshold since the last meeting of the Committee	209 - 212

# North Lanarkshire Council Report

## Adult Care and Social Work Committee

Does this report require to be approved?  Yes  No

Ref MD/MW/GC

Date 23/11/23

## HSCP Strategic Commissioning Plan 2023-26 -Programme of Work

**From** Morag Dendy, Chief Officer / Head of Service (Performance, Planning & Quality Assurance)

**E-mail** DendyM@northlan.gov.uk

**Telephone** 01698 332075

### Executive Summary

The purpose of the report is to set out the partnership's Programme of Work which supports the delivery of the priorities within the Strategic Commissioning Plan 2023-2026.

### Recommendations

It is recommended that the Adult Care and Social Work Committee:

- (1) Note and approve the Programme of Work included in appendix 1, and it's associated scope and timescales for reporting.

### The Plan for North Lanarkshire

Priority	Improve the health and wellbeing of our communities
Ambition statement	(12) Ensure our residents are able to achieve, maintain, and recover their independence through appropriate supports at home and in their communities
Programme of Work	Resilient People

#### 1. Background

- 1.1 The Strategic Commissioning Plan 2020-2023 was approved and published in March 2023 on the assumption that a more detailed Programme of Work would be presented thereafter.
- 1.2 The Programme of Work has been compiled following consultation and engagement with stakeholders across the Health & Social Care Partnership and beyond. It is aligned with the key strategic drivers across both NHS Lanarkshire and North Lanarkshire Council, dovetailing with the developments associated with Operation Flow, the strategic developments in relation to Our Health Together, and the Council's refreshed Programme of Work (as part of the Plan for North Lanarkshire).

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## 2. Report

- 2.1 The Programme of Work seeks to include those programmes and activities which are intended to help transform and change the health and social care system. It is acknowledged that the partnership, and the organisations of which it is comprised, delivers a range of services and supports, many of which are not featured within the overall programme. These services/supports will still be subject to various governance requirements (e.g. financial, performance, quality, etc.) and will continue to feature in reports outside of the Programme of Work.
- 2.2 The Health & Social Care Partnership is seeking to adopt a Learning as Management Strategy (often called Human Learning System) approach, working with partners from Healthcare Improvement Scotland to make learning and experimentation the key force driving our work. While we engage in a range of programmes and redesign activity as part of this overall Programme of Work, we will seek to enact a process of understanding and experimenting with complex systems to try and get those systems to produce a different pattern of results and better outcomes. This approach will be developed and embedded as far as possible within each of the Programme of Work items, to ensure we learn from our tests of change.
- 2.3 The Programme of Work is a comprehensive plan of action for the partnership to deliver against the priorities within its Strategic Commissioning Plan 2023-26. It seeks to deliver programmes designed to transform and reshape health, social care and social work services in North Lanarkshire and meet the ongoing and future needs of North Lanarkshire's communities.

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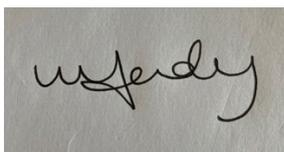
## 3. Measures of success

- 3.1 Embedded learning and experimentation evidenced in our work.
- 3.2 Adherence to programme and project management standards.
- 3.3 Reshaped health and care services in North Lanarkshire that support good outcomes for people.

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## 4. Supporting documentation

- 4.1 Appendix 1: Programme of Work
- 4.2 Appendix 2: Background paper  
<https://mars.northlanarkshire.gov.uk/egenda/images/att100339.pdf>



**Morag Dendy**  
**Chief Officer (Performance, Planning & Quality Assurance)**

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## 5. Impacts

<p><b>5.1 Public Sector Equality Duty and Fairer Scotland Duty</b> Does the report contain information that has an impact as a result of the Public Sector Equality Duty and/or Fairer Scotland Duty? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p> <p>An EQIA has been completed and published in relation to the Strategic Commissioning Plan 2023-26.</p> <p>If Yes, has an assessment been carried out and published on the council's website? <a href="https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments">https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments</a> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.2 Financial impact</b> Does the report contain any financial impacts? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, have all relevant financial impacts been discussed and agreed with Finance? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p> <p>All aspects of the programme of work have been factored into the budget, with robust governance arrangement in place to monitor.</p>
<p><b>5.3 HR policy impact</b> Does the report contain any HR policy or procedure impacts? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, have all relevant HR impacts been discussed and agreed with People Resources? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p> <p>All recruitment activity related to the Programme of Work has been agreed through workforce steering.</p>
<p><b>5.4 Legal impact</b> Does the report contain any legal impacts (such as general legal matters, statutory considerations (including employment law considerations), or new legislation)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant legal impacts been discussed and agreed with Legal and Democratic? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.5 Data protection impact</b> Does the report / project / practice contain or involve the processing of personal data? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, is the processing of this personal data likely to result in a high risk to the data subject? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>

If Yes, has a Data Protection Impact Assessment (DPIA) been carried out and e-mailed to [dataprotection@northlan.gov.uk](mailto:dataprotection@northlan.gov.uk)

Each distinct POW has a DPIA where required.

Yes  No

**5.6 Technology / Digital impact**

Does the report contain information that has an impact on either technology, digital transformation, service redesign / business change processes, data management, or connectivity / broadband / Wi-Fi?

Yes  No

If Yes, please provide a brief summary of the impact?

All related digital activity has been agreed and approved through the relevant channels.

Where the impact identifies a requirement for significant technology change, has an assessment been carried out (or is scheduled to be carried out) by the Enterprise Architecture Governance Group (EAGG)?

Yes  No

**5.7 Environmental / Carbon impact**

Does the report / project / practice contain information that has an impact on any environmental or carbon matters?

Yes  No

If Yes, please provide a brief summary of the impact?

**5.8 Communications impact**

Does the report contain any information that has an impact on the council's communications activities?

Yes  No

If Yes, please provide a brief summary of the impact?

A series of engagement events have focused on the new Strategic Commissioning Plan and the Programme of Work. Information is contained on the HSCP website and within the appendix documents.

**5.9 Risk impact**

Is there a risk impact?

Yes  No

If Yes, please provide a brief summary of the key risks and potential impacts, highlighting where the risk(s) are assessed and recorded (e.g. Corporate or Service or Project Risk Registers), and how they are managed?

All risks have been captured on the risk register.

**5.10 Armed Forces Covenant Duty**

Does the report require to take due regard of the Armed Forces Covenant Duty (i.e. does it relate to healthcare, housing, or education services for in-Service or ex-Service personnel, or their families, or widow(er)s)?

Yes  No

If Yes, please provide a brief summary of the provision which has been made to ensure there has been appropriate consideration of the particular needs of the Armed Forces community to make sure that they do not face disadvantage compared to other citizens in the provision of public services.

**5.11 Children's rights and wellbeing impact**

Does the report contain any information regarding any council activity, service delivery, policy, or plan that has an impact on children and young people up to the age of 18, or on a specific group of these?

Yes  No

If Yes, please provide a brief summary of the impact and the provision that has been made to ensure there has been appropriate consideration of the relevant Articles from the United Nations Convention on the Rights of the Child (UNCRC).

This will be considered and progressed under each relevant POW including but not limited to the CAMHS Recovery & Renewal, the Mental Health & Wellbeing Strategy and the Paediatrics Modernisation POWs.

If Yes, has a Children's Rights and Wellbeing Impact Assessment (CRWIA) been carried out?

Yes  No



**Health & Social Care**  
North Lanarkshire

## **Strategic Commissioning Plan 2023-26**

### **Programme of Work**

## **Introduction**

This document provides an overview of the Programme of Work to deliver the Health & Social Care North Lanarkshire Strategic Commissioning Plan. It sets out the scope and objectives for each of the strands within the programme of work; the workstreams that make up the programme; the proposed governance structure and the duration and reporting timescales for each item.

### **Strategic Commissioning Plan 2023-26**

The Strategic Commissioning Plan 2023-26 approved by the Integration Joint Board in March 2023 sets out 5 key priorities:

- Increased focus on prevention, early intervention and tackling inequalities by working with people and communities
- Do the right thing first time
- Develop and support a workforce for the future
- Improve mental health and wellbeing
- Support people through a whole family approach

All programmes of work link to these priorities, with many contributing to several of the strategic priorities.

The Integration Joint Board is responsible for the strategic planning of the functions delegated to it, and therefore plays a crucial role in the strategic oversight of the entire programme of work and its interdependencies. The programme sets out the timetable for reporting to provide clarity to the Board, the progress reports it can expect to receive and when.

### **Programme Management Approach**

We are putting in place a robust programme management structure to ensure that each of the many initiatives and transformations being developed is fully defined and that there is clarity on the changes and new capability that each will deliver and how this will contribute to reshaping the future of health and care services in North Lanarkshire.

The key principles which will support this programme management approach are:

- Identifying and managing programme interfaces and dependencies;
- Maintaining communications between programmes;
- Establishing adherence to programme and project management standards, including effective, consistently applied approaches to identifying and managing benefits, stakeholder engagement, risk and issue management and monitoring and control;
- Coordinating reporting to the Strategic Commissioning Plan Programme Board, Strategic Leadership Team and IJB on progress and the delivery of benefits.

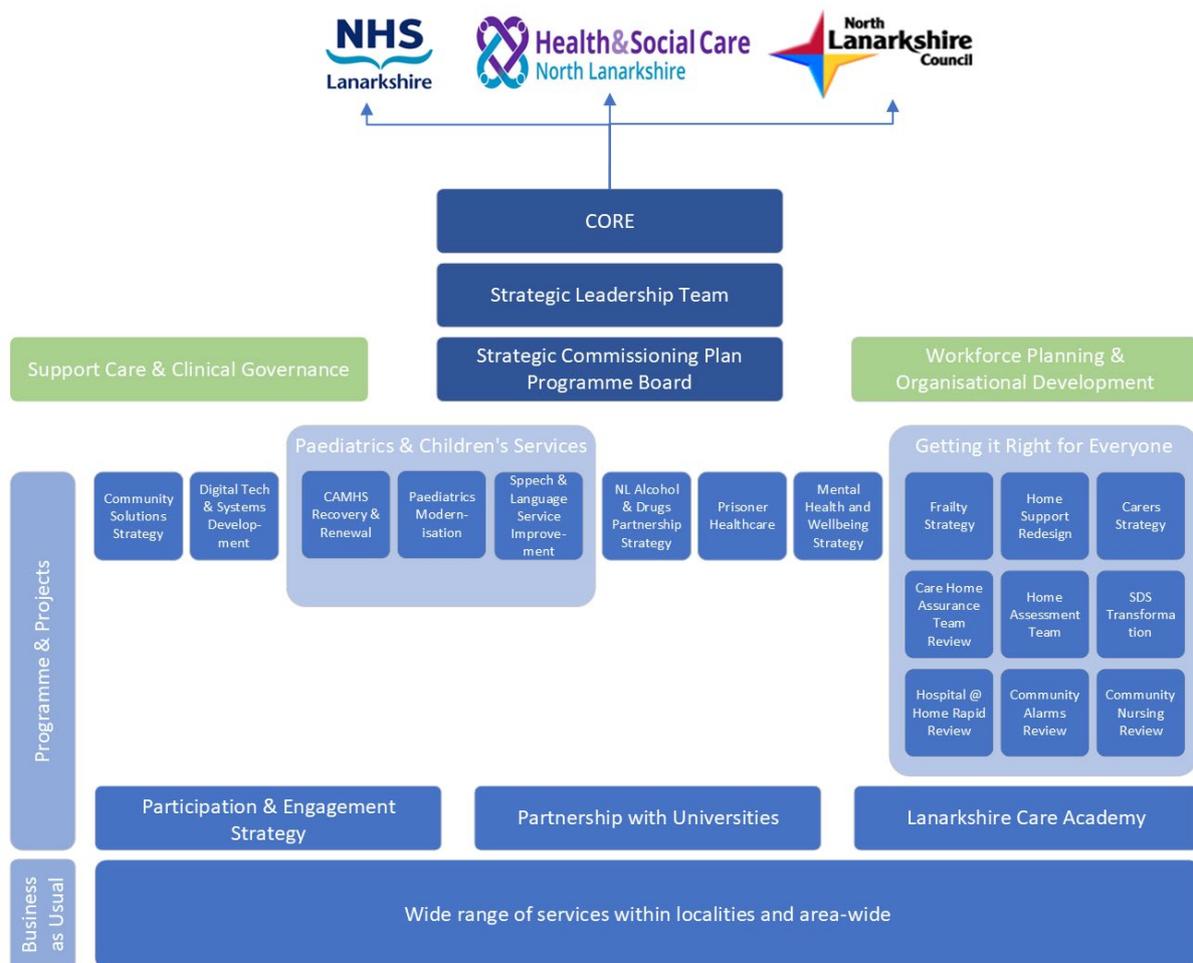
The Programme of Work seeks to include those programmes and activities which are intended to help transform and change the health and social care system. It is acknowledged that the partnership, and the organisations of which it is comprised, delivers a range of services and supports, many of which are not featured within the overall programme. These services/supports will still be subject to various governance requirements (e.g. financial, performance, quality, etc.) and will continue to feature in reports outside of the Programme of Work.

The Programme of Work will continue to evolve and flex during the three year period, and as part of its ongoing review and reporting cycle outlined on page 17 any proposed changes or updates to the programme will be reported via the Integration Joint Board. This will assist in ensuring alignment with the emerging priorities of Operation Flow 3, the Council’s Programme of Work (as part of The Plan for North Lanarkshire), NHS Lanarkshire’s Our Health Together, and any other priorities which may develop in the coming months and years.

### Human Learning System

The Health & Social Care Partnership is seeking to adopt a Learning as Management Strategy (often called Human Learning System) approach, working with partners from Healthcare Improvement Scotland to make learning and experimentation the key force driving our work. While we engage in a range of programmes and redesign activity as part of this overall Programme of Work, we will seek to enact a process of understanding and experimenting with complex systems to try and get those systems to produce a different pattern of results and better outcomes. This approach will be developed and embedded as far as possible within each of the Programme of Work items, to ensure we learn from our tests of change.

### Governance Diagram



## Getting It Right For Everyone (GIRFE)

- As part of a national GIRFE pathfinder programme, to establish a **multi-agency approach of support and services** for older people and adults living with frailty
- To work with Wishaw Locality Planning Group to establish a local pathfinder in to develop and test North Lanarkshire GIRFE model
- To define the person’s journey through **individualised support and services**, respecting the role that everyone involved has in contributing to shared care and **support planning, review and personalised interventions**.
- To create a **single point of access** within localities to ensure holistic assessment of people and coordination of system wide services to support them achieve their outcomes, enable them to be as independent as possible and live their best lives.
- To ensure that, when people are admitted to secondary care (planned or unscheduled) their journey meets GIRFE principles
- To embed a *Home First* approach to enable timely discharge from hospital and prevent unnecessary admission to hospital or premature admission to long term care through the establishment of multi-disciplinary assessment and coordinated care, rehabilitation and support at home or closer to home:
  - Rapid access to the treatment, rehabilitation and support that people require to enable them to return home from hospital at the right time or receive their acute care and rehabilitation at home or closer to home as an alternative to emergency admission to hospital;
  - Time-limited support and rehabilitation to enable an assessment of each person’s immediate and longer-term support needs in their own home, optimising use of personal and community networks and reablement to support recovery and optimise wellbeing and independence;
  - A designated workforce, equipped with the appropriate education, competence and capability, focussed on maximising functional ability in the home environment by providing proactive anticipatory care, timely multi-disciplinary assessment and a rapid community response
  - An agreed care plan based on what matters to the individual and shared decision making;
  - An integrated, multi-agency care coordination and review process
  - Clear pathways and a range of resources to support unpaid/family carers
  - Embedding a technology first approach to promoting independence and connectedness
- To take co-creation approaches to the design of support and services
- To identify if services could be strengthened through a community hub model and, if there are opportunities presented with the implementation of the Newmains & St Brigid’s Community Hub (and linked network of support) as an early adopter.

### Governance

GIRFE Steering Group  
 GIRFE Facilitation Group  
 Wishaw GIRFE Operational Group

### Programme Duration

2023 – 2026

### Reporting Timescales

Annual reporting to IJB (November)

### Current Status

Scoping/programme definition  
 Establishing GIRFE programme organisation and governance  
 Identifying and analysing stakeholders  
 Developing benefits profiles

## Community Nursing Review

- Develop a Vision for Community Nursing in Lanarkshire.
- Map demography, local need and current service provision
- Engage the community, staff and service users
- Develop a revised clinical model
- Develop a workforce plan
- Develop a training and development plan to support the new staffing model
- Review Governance for Community Nursing
- Identify and implement any quick wins
- Implement recommendations of review and monitor impact on patient outcomes

### Governance

GIRFE Steering Group  
GIRFE Facilitation Group  
Wishaw GIRFE Operational Group

### Programme Duration

2023 – 2026

### Reporting Timescales

Annual reporting to IJB (November)

### Current Status

Scoping/programme definition  
Establishing GIRFE programme organisation and governance  
Identifying and analysing stakeholders  
Developing benefits profiles

## Development and Implementation of the Frailty Strategy

- Develop a system wide strategy to prevent and manage frailty at home and in all care settings across Lanarkshire;
- Ensure a flexible and inclusive approach;
- Forecast and undertake capacity planning on a system-wide basis;
- Coordinate agreed changes with related workstreams – e.g. Mental Health, Dementia; Palliative and End of Life Care, Rehabilitation, Falls; TEC;
- Compile system-wide change plans with agreed priorities, programme and resources;
- Plan how to implement the *My Health - My Care - My Home* framework for older adults living with frailty in care homes

### Governance

Our Health Together Frailty Strategy Group

### Programme Duration

2023 - 26

### Reporting Timescales

Annual reporting from November 2023

### Current Status

## Carers Strategy

- Refresh of the Carers Strategy
- Develop a short breaks statement
- Introduce Joint Partnership Statement around Adult Carer Support Plans.
- Explore ways to improve access to Carer budgets linked to low/medium Adult Carer Support Plans and look further develop Anticipatory Care Planning arrangements
- Further development of carers support for Post Diagnostic Support (PDS) for dementia
- Provide better reach to under-represented carers
- Reintroduced Hospital Discharge Carer Payment project following positive feedback.
- To develop and enhance break support options. Expanded carer breather project.
- Increase support to people caring for someone with profound and complex needs. Enhanced funding for PAMIS.
- To introduce additional supports to carers caring for someone with dementia.
- Enhanced support for carers of people with Autism.
- Increased accessibility and availability of Carer Individual Budgets to meet low or moderate caring related need.

### Governance

SCP Programme Board

### Programme Duration

2023 - 2026

### Reporting Timescales

Annual reporting from May 2024

### Current Status

In progress

## Home Support Redesign

- Develop a whole system approach to home support, including the interface with localities, acute, community nursing, independent sector and third sector partners.
- Develop a whole system approach to care and support adopting self directed principles which incorporates Home Support clearly within that.
- Work with the DigitalNL programme to implement the best dynamic scheduling solution, not solely for home support, but fit for purpose for all council services that would need to make use of this resource.
- Develop individualised responses based on individualised budgets via Self Directed Support

### Governance

Home Support Redesign Project Board reporting to the Home Support and Discharge Without Delay Programme Board

### Programme Duration

2023 - 2025

### Reporting Timescales

Annual reporting from May 2024

### Current Status

Timescales for implementation extended due to pandemic.  
Workstreams and delivery plan revised.  
New plan on track

## Development of Home Assessment Team

To enable timely discharge from hospital and prevent unnecessary admission through the establishment of a multi-disciplinary Home Assessment Team that will provide:

- Rapid access to the support that people require to enable them to return home or avoid admission to hospital;
- Time-limited support to enable an assessment of each person's immediate and longer-term support needs in their own home, taking into account and optimising use of personal and community networks;
- A designated workforce focussed on enabling discharge and maximising function in the home environment by providing timely post-discharge multi-disciplinary assessment and a rapid community response
- An agreed care plan; and
- Access to wider services and links to Community Connectors

In Year 2 (2024/25), develop integrated service model of assessment, reablement, rehabilitation and review

### Governance

HAT Steering Group reporting to the Home Support and Discharge Without Delay Programme Board

### Programme Duration

2023 - 2025

### Reporting Timescales

Annual reporting from May 2024

### Current Status

In progress.  
Focus to date on hospital discharge. Scoping underway with H@H leads re admission avoidance pathways

## Community Alarm Service Review

- To agree a vision for North Lanarkshire's Community Alarm and Telecare Services
- To review the current operating model and demand on the service to understand its strengths and weaknesses from the point of view of both service users and staff.
- To engage communities, service users, families, carers and other key stakeholders in the development and appraisal of options for the future service model and develop a business case for the preferred option.
- To empower individuals and communities by involving them in the design and delivery of the services they use.

### Governance

Steering Group to be established reporting to Home Support and Discharge Without Delay Programme Board

### Programme Duration

2023 – 2026

### Reporting Timescales

Annual reporting from May 2024

### Current Status

Scoping/project definition  
Finalising project organisation and governance  
Some work underway in support of Analogue to Digital Transition

## Hospital at Home Rapid Review

- Participation in Operation Flow (Firebreak) with report and data on results of expanding service across 7 days and later into the evenings.
- Winter additionality funded by STAR chamber to expand service into evenings and across 7 days, with improved pathways.
- Bid made for additional funding (permanent) submitted in August 2023, for permanent expansion as above and for a separate (sideways) expansion into Heart Failure services.
- Permanent expansion of current serve into Clydesdale area commenced on 28 August 2023.

### Governance

Unscheduled Care  
Programme Steering Group

### Programme Duration

2023 – 2024

### Reporting Timescales

Recommendations report in  
November 2023

### Current Status

Review of H@H service commenced  
January 2023  
Terms of Reference agreed  
Programme of workshop sessions, data  
gathering/analysis, process mapping and  
scoping of potential developments  
implemented

## Review of Care Home Assurance & Support

Establish and renew arrangements for providing continuing enhanced support to adult and older people's care homes

- Ensure assurance and support to care home sector continues in context of Excellence in Care, including IPC direct Support and embedding of the National Infection Prevention and Control manual
- Oversee whole system support to care homes to improve health and wellbeing of adults living in care homes through implementation of My Health, My Care, My Home – healthcare framework for adults living in care homes and Health and Social Care Standards in Scotland
- Ensure collaborative improvement model is utilised in all developments with care homes
- Ensure systems and processes are in place to share intelligence between agencies to identify and allow support to be provided to care homes at risk.
- Ensure systems and processes are in place to provide immediate response to serious concerns to mitigate risks
- Monitor overall capacity of sector – identify risks and mitigate where possible
- Ensure contingency plans are in place for the sector and regularly updated.

### Governance

Healthcare Quality,  
Assurance & Improvement  
Committee (HQuAIC) (NHSL)

### Reporting Timescales

### Current Status

## Self Directed Support Transformation

*Personalisation : SDS maximising our support and targeting it most effectively*

### Reviewing and redesigning systems and processes

- To review all systems and processes and redesign the process to reflect the principle that self-directed support is everything that we do.
- The new processes will be reflective of a shift towards more local decision making, autonomy and accountability.
- To develop a portal/system that will record provider capacity and allow this information to be shared with frontline workers.

### Public Information and Marketing

- To review and update all current public information and marketing resources thus ensuring that materials deliver a clear, consistent, and meaningful message around SDS that is widely accessible, easily understood, user friendly, transparent, dispels myths and supports informed choice and control.

### Performance Information

- To review current performance information and indicators to allow us to determine what information we want to capture and in what format.
- To devise a mechanism/system as a central point that will allow this information to be collated and presented in a variety of formats.
- To show trends, patterns, and projections.
- To gather feedback and views from those using services or support to shape our plans going forward.

### Complex Care

- Reduce the delayed discharges of people with complex care. Repatriate those people inappropriately placed out-of-area. Review the way services are provided for people with complex care.

### Digital / IT Systems Workstream

- To contribute to the design and implementation of the new information recording system with a focus on how we can record and measure outcomes, impact, and good conversations. The aim is that the new Mosaic system will reflect the self-directed support strategy.

### Reviewing the Guided Self-Assessment

### Training and Development

- Ensure that we have a skilled, trained workforce who are able to deliver a quality service.
- Aim for citizens and partners to have a full understanding of the SDS Transformational Agenda.
- Develop comprehensive training plans for citizens, partners and Social Work staff.

### Coming Home

- Recommendations of Coming Home Implementation Report and the allocation to North Lanarkshire HSCP of funds from the Community Living Change fund, over a three year period (2021-2024), a programme of work is being undertaken to support the strategic objectives of: Reducing delayed discharges of people with complex needs, Repatriate those people inappropriately placed outside of Scotland, Redesign the way services are provided for people with complex needs.

### Local Dynamic Support Register

- Support Local Case Management – a tool used by HSCPs to inform planning and provision for people with learning disabilities and complex care needs.
- National Data Reporting – Create systems and processes to measure progress against the Coming Home vision.

#### Governance

SDS Transformation Board

#### Programme Duration

2023 – 2026

#### Reporting Timescales

Annual reporting from May 2024

#### Current Status

Board established  
Implementation Plan live

## Mental Health & Wellbeing Strategy

The joint strategic aims, aligned with partner organisations, of Getting It Right for Every Person (GIRFEP), a Mental Health and Wellbeing Strategy for Lanarkshire, are to:

- Improve healthcare and wellbeing;
- Strengthen effective leadership and governance for mental health services across all sectors;
- Reduce health inequalities and improve health and healthy life expectancy;
- Support people to live independently at home through integrated health and social care services;
- Provide comprehensive, integrated and responsive mental health and social care services and supports in community based settings;
- Support all children and young people to live as full and healthy a life as possible and to realise their full potential;
- End mental health stigma and discrimination

The aim is that people in Lanarkshire live in a community where everyone understands that there is no good health without mental wellbeing, where we know how to support and improve our own and others' mental well-being and act on that knowledge, and where our mental well-being contributes to a healthier, wealthier, fairer, smarter, greener and safer Lanarkshire for all.

[nhs.uk/mental-health-wellbeing-strategy-2019-2024/?wpdmdl=6621&ind=1570699079112](https://nhs.uk/mental-health-wellbeing-strategy-2019-2024/?wpdmdl=6621&ind=1570699079112)

### Governance

Mental Health and Wellbeing Strategy Board

Mental Health and Wellbeing Exec Group

### Programme Duration

Current strategy 2023-24

New Strategy from 2024

### Reporting Timescales

Annual reporting from March 2024

### Current Status

Existing Strategy nearing the end of its lifecycle.

Refresh underway to develop 2024-29 Strategy which will align with new national Mental Health and Wellbeing Strategy

## Prisoner Healthcare

- Undertake a review of prisoner healthcare at Shotts Prison.
- Develop and implement an action plan to address concerns raised by Healthcare Improvement Scotland in relation to the Prison Health and Wellbeing Standard in the course of the HMIPS inspection of Shotts Prison.
- Establish baseline and monitor action to comply with Medication Assisted Treatment (MAT) Standards in Justice

### Governance

Prisoner Healthcare Programme Board

### Programme Duration

**2023 - 2025**

### Reporting Timescales

Annual reporting from March 2024

### Current Status

- Bringing together existing workstreams - scoping/programme definition underway
- Establishing programme organisation and governance
- Identifying stakeholders and developing comms and engagement plan

## Support the delivery of the North Lanarkshire Alcohol & Drugs Partnership Strategy

- People have early access to support for problem substance use –early intervention strategies will be put in place to prevent problem use with support offered through a range of community-based responses.
- North Lanarkshire Alcohol & Drugs Partnership (NLADP) will facilitate efforts to embed a Whole Systems Approach – including families and a broader range of stakeholders to reach those not already known to services.
- Strengthen the links between physical/mental health & substance use taking a ‘No wrong door approach’ focussed around the needs of the individual and not solely focussed on the substance use or disorder/s. As part of this there should be trauma informed care, and a clear understanding of people’s emotional and psychological needs at the heart of all recovery plans and evidence-based low intensity psychosocial interventions should be routinely available.
- Young people and families receive evidence based, effective education on substances, harm reduction and how to access help when problems develop. Through the provision of effective, evidence-based education both within and beyond school.
- Workforce capability is increased through learning via a strategic workforce development plan including needs analysis to identifying gaps and opportunities to strengthen the workforce knowledge, skills and confidence to respond. Drawing on local experience, knowledge and assets to support quality improvement and best value. A rapid review commissioned by the ADP highlighted trauma informed care and a holistic assessment and careplan as being key to future service provision. There is recognition that there are workforce development needs around delivering psychologically informed and trauma informed care
- People are supported to make informed decisions about their own care through a range of treatment options including residential rehabilitation for all those who will benefit. Including all those who want, and for whom it is deemed clinically appropriate, to access residential and/or community rehabilitation.
- People are supported to remain in treatment for as long as requested – MAT standard 5, individuals are supported to remain in the treatment that is right for them, for as long as they want or need.
- Improved early identification, assertive outreach & increased engagement (MAT standards – opiate/benzo with rapid access) so people at high risk are proactively identified and offered support – MAT standard 3 targeting at-risk groups.
- Overdoses are prevented from becoming fatal – increasing provision of naloxone, strengthening proactive outreach for at-risk groups improving near fatal overdose pathways.
- All people are offered evidence based harm reduction – MAT standard 4. Provision of harm reduction materials such as injecting equipment, BBV and wound care for those who need it.
- People who use drugs have access to information about risks and harm reduction – in person, digital and via phone information on drugs and harm reduction including WAND, EIP and DBST.
- More families are involved in the care and treatment of their loved ones with access to support in their own right – even where their loved one is not engaged with treatment. This includes choice and wider access to opportunities locally for adult family members, young adults as well as children and young people.
- Effective pathways between justice and community services are established including prison through-care and diversion pathways. This will take account of housing, advocacy and connections to the community.
- Less harm is caused by stigma for people who use alcohol and drugs and their families in North Lanarkshire. NLADP will lead on a local stigma plan recognising individuals, families and communities should have access to a range of opportunities to support improved well-being, resilience and reduced feelings of isolation caused by stigma.
- NLADP will develop an alcohol specific framework recognising the impact alcohol has on individuals, families and communities implementing targeted interventions to reduce harm, change attitudes to alcohol consumption and improve health & wellbeing.
- NLADP Drug-Deaths Prevention Action Plan is refined and linked with key outcome areas from DDTF priorities using evidence of based practice whilst targeting those most at risk.

### Governance

NL Alcohol & Drugs Partnership

### Programme Duration

2023 – 2026

### Reporting Timescales

Annual reporting from March 2024

### Current Status

Implementation plans live

## CAMHS Recovery & Renewal

- Review CAMHS referral and assessment pathways and implement the Choices and Partnership Approach (CAPA) service transformation model for CAMHS.
- Full implementation of the national CAMHS Specification to include extension of age range, requirements for eating disorder patients, intensive home treatments and closer working relationships with regional centres for children and young people who require inpatient care and/or additional support due to complex level of support needed (forensic and learning disability).
- Robust planning for transition of care.
- Elimination of long waits for CAMHS.
- Agree a workforce model to utilise the funding provided by the Mental Health Recovery Fund to enable the effective implementation of CAPA
- Implement the Neurodevelopmental Pathway
- Engage all key stakeholders to achieve consensus and clarity and enhance communication of new ways of working across all CAMHS teams and Neurodevelopmental Pathway.
- Delivery of an electronic documentation system that is capable of sharing information across the service and with other partner health care colleagues who are sharing care.
- Delivery of appropriate psychologically informed environments for children, young people and families to be seen.

### Governance

CAMHS Recovery & Renewal Programme Board

### Programme Duration

Under review

### Reporting Timescales

### Current Status

Current Board has been meeting for 18 months. 3 of the 5 work streams are moving towards a business as usual model

## Speech & Language Therapy Service Improvement

Work streams have been established. Work planned to be progressed: -

- Implementation of Trakcare
- Waiting List management processes including support of a Waiting List Initiative that will progress a positive improvement in treatment time trajectory
- Implementation of a clinical documentation platform that is capable of sharing information internally within the Speech & Language Therapy service and with wider health colleagues.
- Development of links with further education to support a positive pathway between NHS Lanarkshire Speech & Language Therapy and associated academic partners.
- Upgrade of Speech & Language Therapy website that will host support materials
- Review of administration process
- Review accommodation against future need
- Engagement and communication process to be established with children, young people and families

### Governance

SLT Service Improvement Steering Group

### Programme Duration

2023 - 2025

### Reporting Timescales

Monthly reports available, annual reporting to IJB from September 2024

### Current Status

- Scoping/programme definition underway
- Establishing programme organisation and governance
- Identifying and analysing stakeholders
- A Steering Group has been established, chaired by the General Manager for Specialist Children's Health Services Unit with oversight from the AHP Director

## Paediatrics Modernisation

### Aim

To review and, where appropriate, redesign Paediatric clinical and service models, including pathways between Community and Acute Paediatrics to ensure an effective whole systems approach.

### Objectives

- Develop a Vision for Acute and Community Paediatrics in Lanarkshire.
- Assess current provision against the Royal College of Paediatrics and Child Health (RCPCH) standards for Short Stay Paediatric Assessment Units.
- Develop models for Acute and Community Paediatrics that keeps the young person at the centre. Use a 3 horizons model to address immediate challenges, while aligning a longer term plan which aligns to the RCPCH standards, setting out workforce, clinical models of care, service models, accommodation, information management, performance management and governance arrangements.
- Engage children, young people and their families, and staff in redesigning services.
- Develop a Transition Programme and Operating Procedures to allow those using Paediatric Services to smoothly transition into Adult Care
- Initial projects for Horizons 1 and 2:
  - o Re-open clinics and out-patient opportunities using a blend of virtual and face to face consultations pending availability of physical space for face-to-face consultations.

### Governance

Paediatrics Modernisation Board

### Programme Duration

2023 - 2025

### Reporting Timescales

Annual reporting from September 2024

### Current Status

Scoping/programme definition underway  
Establishing programme organisation and governance  
Identifying and analysing stakeholders

## Digital Technology & Systems Development

- Deliver and implement the HSCP elements of the NHS Lanarkshire Digital Plan and the NLC Digital NL programme
- Implement Mosaic, the new social work/social care case management system
- Develop and implement project to deliver a new dynamic scheduling tool for care at home services
- Continue support for analogue to digital switchover for community alarms
- Further develop assistive technology offer
- Implement a digital first approach where appropriate. Explore and implement new models of care that enhance pathways and improve access.
- Integration of systems to assist in enabling people to optimise the management of their own health and care
- Joining up systems to ensure appropriate sharing of electronic information
- Use technology to support people to remain well and independent in the place they call home, for as long as possible

### Governance

Various, including:

- NLC Digital NL PoW Board
- New Social Care Management System Board
- HSCP Technology Group

### Programme Duration

2023 – 2026

### Reporting Timescales

Annual reporting from November 2023

### Current Status

## Community Solutions Strategy and Investment Plan

The Community Solutions Programme takes a holistic and integrated approach to health, wellbeing, quality of life and equality encompassing:

- mental and physical health and wellbeing and their connection
- the social, economic, and environmental influences on health, wellbeing, and equality and the actions needed to tackle these

A strategic investment approach prioritises the following in line with HSCNL's ambitions:

- investment in health improvement, prevention, and early intervention activities, which reduce inequalities and protect human rights
- investment in crisis and ongoing support, with a focus on recovery and reablement, self-directed support, and self-management.
- cost-effective, community-based support and services provided by CVS organisations.
- capacity building within the CVS and wider community by supporting key CVS 'anchor' organisations and volunteering to build the community infrastructure and capacity to support provision of good community-based support over time

### Governance

SCP Programme Board

Community Solutions Governance Sub Group

### Programme Duration

2023 – 2025

### Reporting Timescales

Annual reporting from May 2024

### Current Status

## Engagement & Participation Strategy

- Strengthen engagement, participation, and empowerment across communities to develop an integrated service offer that meets needs of communities, with communities directly involved in the delivery of supports and services.
- Develop a host organisation approach to engagement and participation to ensure activity is well planned and co-ordinated.
- Implement a governance structure to support transparency, fairness, and accountability
- Implement a robust monitoring, evaluation, and reporting framework with both qualitative and quantitative measures of success
- Develop a broad approach that works to reach supported people including minority and underrepresented groups.

### Governance

HSCNL Engagement & Participation Group

[NLC Resilient People PoW Board]

### Programme Duration

2023 – 2026

### Reporting Timescales

Annual reporting from May 2024

### Current Status

## Further development of Trauma-informed Practice

- Deliver Trauma Informed Roadmap 2023-25
- Develop a comprehensive local Trauma Plan to ensure that trauma informed practice and systems are embedded
- Implement the Trauma Plan with a focus on creating the culture and conditions to enable staff to respond in ways which recognize the impacts of trauma, promote recovery, prevent retraumatisation and ensure services and supports are accessible and effective to those who need them most
- Leadership: Appoint an elected member as Trauma Champion to support the work of the steering group develop plans for North Lanarkshire becoming a trauma-informed Council to support the fulfilment of the ambition of the Plan for North Lanarkshire and the new Programme of work. Health Board members would assist this also. Likewise further SLT to support the SCP ambitions and embed trauma informed practice across the partnership. Re-refresh governance and membership of the of steering group.
- Workforce Wellbeing: The actions to deliver the NHSL and Council’s Mental Health Strategy for staff are underpinned by the 5 principles of a trauma-informed organisation.
- Workforce knowledge and skills: Each service across the partnership should assess the level at which staff need training and a base line is established in order to update the training strategy for trauma informed practice.
- Experts by experience: Individuals, families and communities drive our approach to becoming a trauma informed organisation using existing structures for participation and engagement and, where possible, develop other opportunities and structures for meaningful participation and aim to embed influence of experts by experience across all service delivery.
- Data and Feedback Loops: Base lines and outcome data for trauma informed practice are integrated and aligned with measures of success within the SCP and the Council’s new Programme of Work.

### Governance

North Trauma Informed Practice Group  
NHSL Implementation Group  
[NLC Resilient People PoW Board]

### Programme Duration

2023 – 2026

### Reporting Timescales

Annual reporting from September 2024

### Current Status

## Staff Health & Wellbeing Programme

- Establish a NL HSCP working group to agree priorities for the staff health and wellbeing agenda for the partnership, whilst aligning with the key wellbeing strategies from our partners (NHSL / NLC)
- Promote wider support services that are available through NHSL and NLC

### Governance

SCP Programme Board

### Programme Duration

2023 – 2026

### Reporting Timescales

Annual reporting from March 2024

### Current Status

- The partnership working group had the first meeting in August 2023
- Both NHSL and NLC have staff health and wellbeing strategies agreed and launched.

## Further Develop Lanarkshire Care Academy

### Care Academy Objectives

#### Evidence

Take an evidence-based approach to identify the short, medium and long term supply and demand profile for the health and social care sector in North Lanarkshire

#### Recruitment

Further develop recruitment strategies with university and college campuses to discover and inspire upcoming talent and generate more qualified applications to fulfil current and future demand needs

#### Reach

Develop a plan to reach and inspire passive candidates or potential career changers and returner, with the right values to take their first steps towards exploring a career in social care. Ensuring an inclusive approach to reaching those who are furthest removed

#### Identity

Build the Health and Social Care Partnership employer identity and improve how the entire reward and compensation package is marketed for all roles

#### Presence

Create a social media strategy to build a stronger online presence around the Care Academy, breaking down any misconceptions around the sector and providing practical tools and resources for people to discover potential future roles

#### Next gen

Inspire the next generation by taking the in-school academy education to the next phase, creating pathways from school to employment and looking at new digital delivery models to inspire young people with the right values to pursue a career in the sector

#### Pathways

Establish career pathways and underpin these with qualifications and development routes, influencing further and higher education strategies to secure and maximise available funding.

#### Governance

Care Academy Steering Group  
[NLC Brighter Futures PoW Board]

#### Programme Duration

2023 – 2026

#### Reporting Timescales

Annual reporting from September 2024

#### Current Status

## Partnership with Universities

- Agree Memorandum of Understanding with the University of Strathclyde, setting out commencement of close collaboration in projects between the partnership (HSCNL) and the university, building on the multiple honorary positions in place with University of Strathclyde and University of Glasgow
- Agree a process for identifying, defining and progressing potential opportunities for engagement through collaboration
- Scope of MoU to include research collaborations, honorary appointments, Graduate Apprenticeships, student placements, jointly funded posts, secondments of staff, student recruitment, student projects, education and continuing professional development and policy and practice.
- Pursue university status for the partnership (HSCNL)
- Develop partnership agreements with Glasgow Caledonian University and the University of the West of Scotland

#### Governance

To be established

#### Programme Duration

2023 – 2026

#### Reporting Timescales

Annual reporting from March 2024

#### Current Status

Memorandum of Understanding has been drafted, with approval being sought from all parties in 2023.

## Reporting Timescales

Date/Timeline	Programme of Work Items for Reporting	
September 2023	IJB signs off Programme of Work	
November 2023	<ul style="list-style-type: none"> <li>• GIRFE</li> <li>• Community Nursing Review</li> <li>• Frailty Strategy</li> <li>• Hospital @ Home Rapid Review</li> <li>• CHAT Review</li> </ul>	<ul style="list-style-type: none"> <li>• Digital Technology &amp; System Developments</li> </ul>
March 2024	<ul style="list-style-type: none"> <li>• Mental Health Strategy</li> <li>• Prisoner Healthcare</li> <li>• Alcohol &amp; Drugs</li> <li>• MAT Standards</li> </ul>	<ul style="list-style-type: none"> <li>• Staff Health &amp; Wellbeing</li> <li>• Partnership with Universities</li> </ul>
May 2024	<ul style="list-style-type: none"> <li>• Home Support Redesign</li> <li>• Home Assessment Team</li> <li>• Community Alarm Service Review</li> <li>• SDS Transformation</li> <li>• Carers Strategy</li> </ul>	<ul style="list-style-type: none"> <li>• Engagement &amp; Participation Strategy</li> <li>• Community Solutions Strategy &amp; Investment Plan</li> </ul>
September 2024	<ul style="list-style-type: none"> <li>• CAMHS Recovery &amp; Renewal</li> <li>• Paediatrics Modernisation</li> <li>• SLT Improvement</li> </ul>	<ul style="list-style-type: none"> <li>• Trauma Informed Practice</li> <li>• Care Academy</li> </ul>
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# North Lanarkshire Council Report

## Adult Care and Social Work Committee

Does this report require to be approved?  Yes  No

Ref RT/MF

Date 14/11/23

## Getting It Right for Everyone (GIRFE)

**From** Raymond Taylor, Acting Chief Officer/Head of Service (Adult Social Work Services)

**E-mail** TaylorR@northlan.gov.uk

**Telephone** 01236 638748

### Executive Summary

This report explains Getting It Right for Everyone (GIRFE), highlights the principles and the aims and objectives of the national GIRFE Pathfinder process. It also presents the governance arrangements and a GIRFE Project Plan with timeline.

GIRFE builds on existing adult best practice and takes the learning from Getting It Right for Every Child (GIRFEC). Additionally, it gives the background and context of integrated working across the North Health and Social Care Partnership and why the GIRFE approach is appropriate to be undertaken. Also, it highlights the local and national strategies and developments aligned to GIRFE to support improved outcomes for people in our communities.

Finally, it explains the integral alignment with the Plan for North Lanarkshire and the Health and Social Care partnership (HSCP) Strategic Commissioning Plan.

### Recommendations

It is recommended that the Adult Care and Social Work Committee:

- (1) Have a further understanding of GIRFE.
- (2) Endorse and agree the GIRFE report content, approach and planned work activity of GIRFE across North Lanarkshire and the HSCP.
- (3) Agree a further update on the progress of the GIRFE work to be brought back to a future committee.

### The Plan for North Lanarkshire

Priority	Improve the health and wellbeing of our communities
Ambition statement	(12) Ensure our residents are able to achieve, maintain, and recover their independence through appropriate supports at home and in their communities
Programme of Work	Resilient People

## **1. Background**

- 1.1 The Plan for North Lanarkshire has a clear focus on improving health and wellbeing outcomes for, and with, citizens across North Lanarkshire.
- 1.2 Health & Social Care North Lanarkshire has a strong track record of integrated working. North Lanarkshire introduced the first multidisciplinary Hospital at Home Team in Scotland and are currently building on our existing best practice in adult services by embedding a Home First approach to hospital discharge through the establishment of a Home Assessment Team. In addition, to this we have implemented Integrated Rehabilitation Teams, along with our addiction teams. Over the past 2 years we have been piloting geriatrician supported multi disciplinary teams within GP practices as highlighted in the recent Chief Medical Officer report. We have a strong third sector which promotes welcoming communities, encourages connections and supports people in a range of ways when they require some assistance.
- 1.3 The Plan for North Lanarkshire also sets out a vision for town and community hubs whereby citizens have easier and earlier access to support and services in their local neighbourhood or town. It takes a place based, whole systems approach that mobilises all assets within a community, promoting equity and increasing people's control over their health and lives.
- 1.4 The NLHSCP Strategic Commissioning Plan further reinforces this by seeking to build on community capacity to take action together through collaboration and partnerships where approaches connect people to community resources and increase active participation through activities and volunteering. Concurrently, several transformational change programmes are underway and a number of these, in particular the refresh of the Home Support Redesign, Home Assessment Team/Discharge without Delay, Integrated Day Services Review, Community Alarm Review, Integrated Equipment and Adaptations Service Review and Community Nursing Review are intrinsically linked to the GIRFE pathfinder project. In addition, NHS Lanarkshire is currently developing a Strategy for Prevention and Management of Frailty as part of NHS Lanarkshire's 'Our Health Together – Living Our Best Life in Lanarkshire' strategy. A key aim of the strategy is supporting older people to remain well and active within our communities.
- 1.5 This GIRFE pathfinder proposal links to a range of national policies including Home First, Discharge without Delay, Realistic Medicine, Self Directed Support, Unscheduled Care and reducing the number of people whose discharge from hospital is delayed. Reshaping Care for Older People continues to influence our local work as does the Health Improvement Scotland Frailty Change Package and national and local Mental Health and Wellbeing Strategies. It is also a priority outlined in the Winter Planning Business Case agreed by the Integration Joint Board in February 2022.
- 1.6 GIRFE will support the person-centred, integrated and multi-agency approach required to support individuals. Within an overarching commitment to self-direction this will improve access and embed practice in shared decision-making and promoting self-determination, encouraging those with lived experience, including unpaid carers and families to be equal partners in their care and support, This is aligned to the Human Learning System approach.

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## **2. Report**

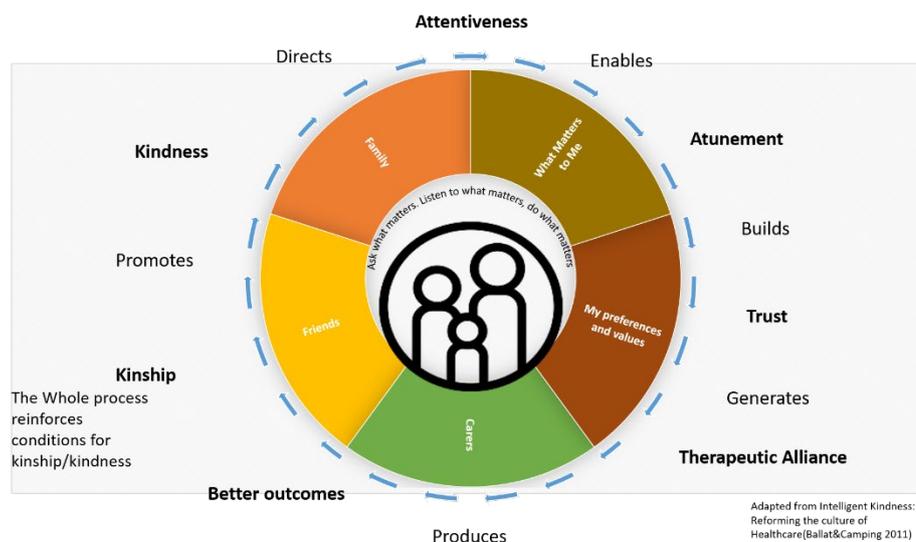
### **What is GIRFE?**

2.1 GIRFE provides a framework and a set of principles for person centred and community centred ways of working as outlined below:

- GIRFE is a proposed multi-agency approach of support and services from young adulthood to end of life care.
- GIRFE will help define the adult's journey through individualised support and services and will respect the role that everyone involved has in contributing to collaborative care and support planning, review and personalised interventions.
- Too often, adults and their families are excluded from assessment and support processes by complex bureaucracy. GIRFE is about providing a more personalised way to access help and support when it is needed – placing the person at the centre of all decision-making that affects them to achieve the best outcomes, with a joined-up, coherent and consistent multi-agency approach regardless of the support needed at any stage of life.

2.2 GIRFE:

- builds on existing adult best practice and Getting it Right for Every Child (GIRFEC)
- provides a national practice model to embed inter-agency working.
- does not replace the framework for Community Health and Social Care Integrated Services but provides a model to deliver the framework that supports person centred outcomes.



## GIRFE Principles

2.3 GIRFE is:

- Focused on individual care needs – it ensures that every person is empowered and involved in multi-disciplinary decision-making and the support available to them.
- Based on an understanding of the physical and mental well-being of individuals in their current situation – it adopts a holistic approach to ensure that individual needs are considered, and that appropriate support is provided while acknowledging that a person's needs will vary over time.

## GIRFE Pathfinder projects

- 2.4 GIRFE pathfinder work will be tested and developed in local areas, with practitioners and with the people the initiative is designed to benefit, to understand how it will be interpreted and implemented in different contexts.
- 2.5 The Pathfinder programme is taking a co-design approach with:
- GIRFE Learning Networks to support a national practice model.
  - GIRFE Design School - a support model which can help teams to come together, get ready for co-design work, and engage people with lived experience on a specific policy area, problem exploration or redesign challenge.
- 2.6 There are 11 place-based pathfinders across Scotland aligned to five thematic areas:
- i. People in prisons
  - ii. People in addiction services
  - iii. People registered at Deep end GP Practices
  - iv. Families with multiple and/or complex needs and young people in transition from GIRFEC to GIRFE
  - v. Older people and frailty

### **Aims and objectives of the North Lanarkshire GIRFE Pathfinder**

- 2.7 To agree a vision for GIRFE for Older People & Frailty in North Lanarkshire.
- 2.8 To establish a multi-agency approach of support and services for older people and adults living with frailty.
- 2.9 To define the person's journey through individualised support and services, respecting the role that everyone involved has in contributing to shared care and support planning, review and personalised interventions.
- 2.10 To create a single point of access within localities to ensure holistic assessment of people and coordination of services to support them achieve their personal outcomes, enabling them to be as independent as possible and live their best lives.
- 2.11 To ensure that, when people are admitted to secondary care (planned or unscheduled) their journey meets GIRFE principles.
- 2.12 To embed a Home First approach to enable timely discharge from hospital and prevent unnecessary admission to hospital or premature admission to long term care through the establishment of multi-disciplinary assessment and coordinated care, rehabilitation and support at home or closer to home:
- 2.13 Rapid access to the treatment, rehabilitation and support that people require to enable them to return home from hospital at the right time or receive their acute care and rehabilitation at home or closer to home as an alternative to emergency admission to hospital.
- 2.14 Time-limited support and rehabilitation to enable an assessment of each person's immediate and longer-term support needs in their own home, optimising use of personal and community networks and reablement to support recovery and optimise wellbeing and independence.
- 2.15 A designated workforce, equipped with the appropriate education, competence and capability, focussed on maximising functional ability in the home environment by

providing proactive anticipatory care, timely multi-disciplinary assessment and a rapid community response.

- 2.16 An agreed care plan based on what matters to the individual and shared decision making.
- 2.17 An integrated, multi-agency care coordination and review process.
- 2.18 Clear pathways and a range of resources to support unpaid/family carers.
- 2.19 Embedding a technology first approach to promoting independence and connectedness.
- 2.20 To take co-creation approaches to the design of support and services.
- 2.21 To identify if services could be strengthened through a community hub model and, if there are opportunities presented with the implementation of the Newmains & St Brigid's Community Hub (and linked network of support) as an early adopter.

### **Project plan**

2.22 Pathfinder activity will be divided into two phases:

#### **2.22.1 Phase 1:**

An Engagement Plan will be developed by each Health & Social Care Partnership for their pathfinder.

Journey Maps, developed from initial Engagement Sessions with service users within each pathfinder, will inform a National Sensemaking Process, which will determine 'How Might We...' statements for the second phase of Engagement.

#### **2.22.2 Phase 2:**

The Engagement Plan will be updated following involvement with the National Sensemaking Process and will detail further engagement sessions with people with lived experience to co-design ideas and concepts.

A further Sensemaking Session will take place following submission of each idea/concept.

2.23 The detailed timeline is as follows:

# GIRFE Timeline



## Project governance

- 2.24 Following a Development Session with representation from both NHS Lanarkshire, HSCP and North Lanarkshire Council, an initial Operational Group in Wishaw locality has been established to ensure the GIRFE principles are incorporated into current workstreams moving forward, with a Steering Group providing overarching guidance and governance for specific GIRFE work activity. The learning from this work will determine further work across the other 5 localities.
- 2.25 A Facilitation team has been established to lead and co-ordinate the GIRFE pathfinder project in North Lanarkshire, linking to all relevant programme and workstreams, and to engage with the national GIRFE learning network and design schools.
- 2.26 The GIRFE Framework is set out in Appendix A.

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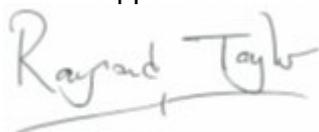
## 3. Measures of success

- 3.1 GIRFE is understood across the HSCP and North Lanarkshire.
- 3.2 GIRFE principles and practice becomes embedded in everyday practice.
- 3.3 The frailty work in Wishaw locality with the learning will support further work across the other 5 localities.
- 3.4 Improved practice and outcomes for both the workforce and citizens.
- 3.5 Coproduction and design of service delivery.
- 3.6 Aligned to the Human Learning System approach.

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## 4. Supporting documentation

- 4.1 Appendix A: North Lanarkshire GIRFE Framework.



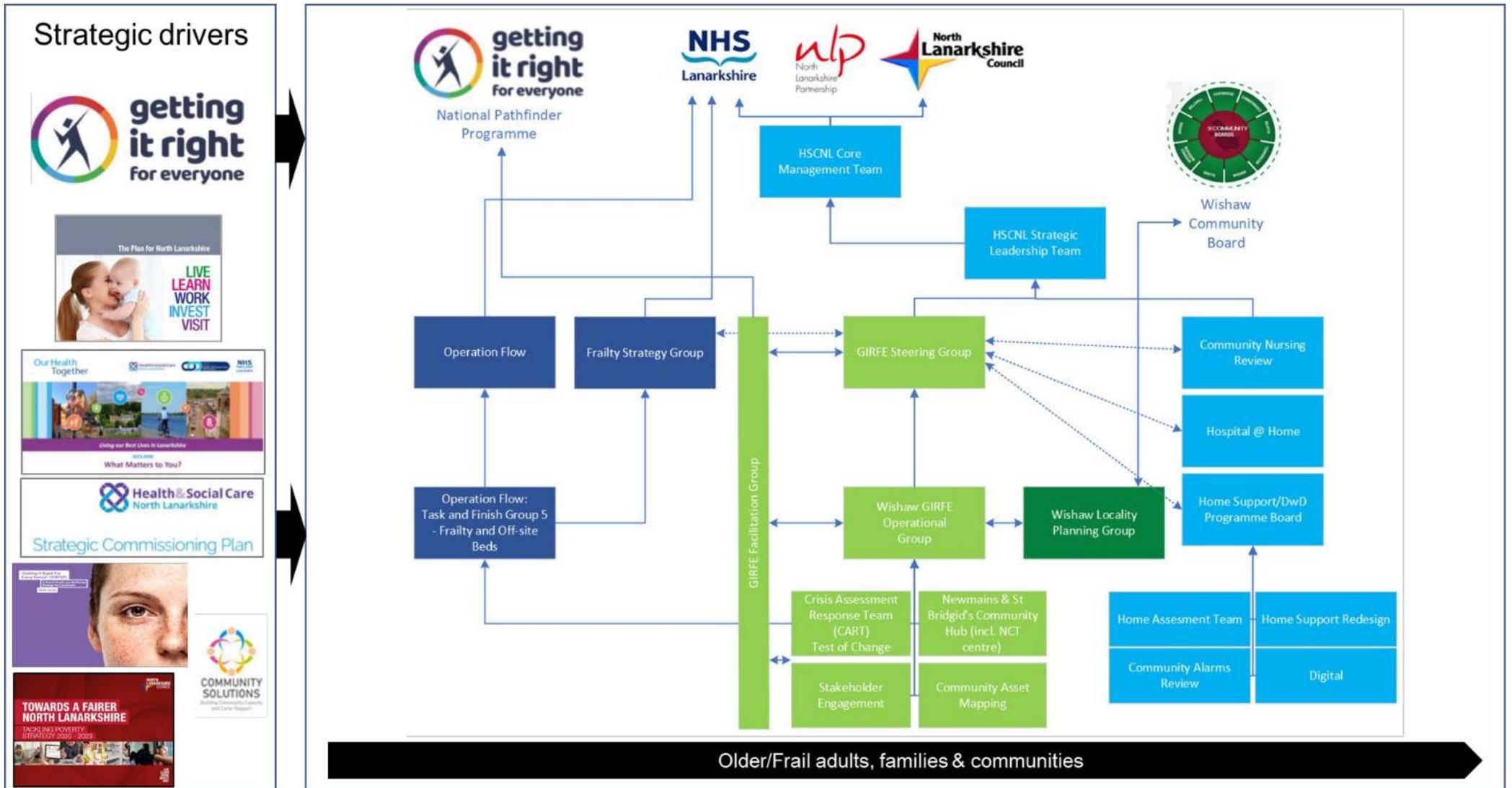
**Raymond Taylor**  
**Acting Chief Officer / Head of Service (Adult Social Work Services)**

## 5. Impacts

<p><b>5.1 Public Sector Equality Duty and Fairer Scotland Duty</b> Does the report contain information that has an impact as a result of the Public Sector Equality Duty and/or Fairer Scotland Duty? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, please provide a brief summary of the impact?</p> <p>If Yes, has an assessment been carried out and published on the council's website? <a href="https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments">https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments</a> Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.2 Financial impact</b> Does the report contain any financial impacts? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant financial impacts been discussed and agreed with Finance? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.3 HR policy impact</b> Does the report contain any HR policy or procedure impacts? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant HR impacts been discussed and agreed with People Resources? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.4 Legal impact</b> Does the report contain any legal impacts (such as general legal matters, statutory considerations (including employment law considerations), or new legislation)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant legal impacts been discussed and agreed with Legal and Democratic? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.5 Data protection impact</b> Does the report / project / practice contain or involve the processing of personal data? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, is the processing of this personal data likely to result in a high risk to the data subject? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, has a Data Protection Impact Assessment (DPIA) been carried out and e-mailed to <a href="mailto:dataprotection@northlan.gov.uk">dataprotection@northlan.gov.uk</a> Yes <input type="checkbox"/> No <input type="checkbox"/></p>

5.6	<b>Technology / Digital impact</b>
Does the report contain information that has an impact on either technology, digital transformation, service redesign / business change processes, data management, or connectivity / broadband / Wi-Fi?	
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If Yes, please provide a brief summary of the impact?	
Where the impact identifies a requirement for significant technology change, has an assessment been carried out (or is scheduled to be carried out) by the Enterprise Architecture Governance Group (EAGG)?	
Yes <input type="checkbox"/> No <input type="checkbox"/>	
5.7	<b>Environmental / Carbon impact</b>
Does the report / project / practice contain information that has an impact on any environmental or carbon matters?	
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If Yes, please provide a brief summary of the impact?	
5.8	<b>Communications impact</b>
Does the report contain any information that has an impact on the council's communications activities?	
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If Yes, please provide a brief summary of the impact?	
5.9	<b>Risk impact</b>
Is there a risk impact?	
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If Yes, please provide a brief summary of the key risks and potential impacts, highlighting where the risk(s) are assessed and recorded (e.g. Corporate or Service or Project Risk Registers), and how they are managed?	
5.10	<b>Armed Forces Covenant Duty</b>
Does the report require to take due regard of the Armed Forces Covenant Duty (i.e. does it relate to healthcare, housing, or education services for in-Service or ex-Service personnel, or their families, or widow(er)s)?	
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If Yes, please provide a brief summary of the provision which has been made to ensure there has been appropriate consideration of the particular needs of the Armed Forces community to make sure that they do not face disadvantage compared to other citizens in the provision of public services.	
5.11	<b>Children's rights and wellbeing impact</b>
Does the report contain any information regarding any council activity, service delivery, policy, or plan that has an impact on children and young people up to the age of 18, or on a specific group of these?	
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If Yes, please provide a brief summary of the impact and the provision that has been made to ensure there has been appropriate consideration of the relevant Articles from the United Nations Convention on the Rights of the Child (UNCRC).	
If Yes, has a Children's Rights and Wellbeing Impact Assessment (CRWIA) been carried out?	
Yes <input type="checkbox"/> No <input type="checkbox"/>	

# Appendix A: GIRFE Framework





# North Lanarkshire Council Report

## Adult Care and Social Work Committee

Does this report require to be approved?  Yes  No

Ref RM/KO/MW

Date 14/11/23

## Resilience Response

**From** Ross McGuffie, Chief Officer North HSCP

**E-mail** Ross.McGuffie@lanarkshire.scot.nhs.uk **Telephone** 01698 752591

### Executive Summary

While NHS Lanarkshire stood down its live Covid incident in January 2023, the impact of the pandemic is still widely felt across the health and social care system as a whole.

In February and March 2023, NHS Lanarkshire undertook a 'Firebreak', with the aim of allowing the three acute sites to decompress, prioritising activity to support the reduction of site occupancy and improve surrounding performance. While the Firebreak was a strong success, reducing site occupancy and delayed discharges and improving front door performance, this was not able to be sustained in the longer term.

Operation Flow 2 has since progressed, supported by nationally agreed funding, to support the implementation of key elements learned from the Firebreak, with the aim of making sustainable changes the whole health and social care system ahead of the inevitable pressures that winter will bring.

A full integrated implementation structure has been developed with the aim of implementing all key areas by the end of October 2023. Recruitment into key new posts may be a challenge over this timeline, but every effort is being made to this.

This paper aims to inform committee of the Lanarkshire whole system Operation Flow 2 plans and implementation structures.

### Recommendations

It is recommended that the Adult Care and Social Work Committee:

- (1) Recognise the whole system Operation Flow 2 plans and implementation structures set out in the report.
- (2) Request future updates on progress.

### The Plan for North Lanarkshire

Priority Improve the health and wellbeing of our communities

Ambition statement	(13) Improve preventative approaches including self-management and giving people information and choice over supports and services
Programme of Work	Resilient People

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## 1. Background

- 1.1 NHS Lanarkshire stood down its Live Covid Incident in January 2023, however, the operational pressures emanating from the pandemic recovery have been pronounced, with NHS Lanarkshire in Black status since 27<sup>th</sup> July 2022.
  - 1.2 Operation Flow was developed to create a 'firebreak' to rapidly reduce hospital inpatient capacity, then creating the staff capacity to work on service redesign to bring the system as a whole back into equilibrium.
  - 1.3 Following the 9-day firebreak, hospital inpatient capacity reduced by around 15% across Lanarkshire, supporting the system to move from black to red status on 6<sup>th</sup> March 2023.
- 

## 2. Report

### Operation Flow

- 2.1 Operation Flow is the whole system strategic planning approach in Lanarkshire aimed at supporting a sustained recovery of the entire health and social care system.
- 2.2 Officers set out the Operation Flow 2 plan and implementation structure, with the aim of having all elements completed by the end of October 2023, ahead of winter.

### Operation Flow 2 Progress Update

- 2.3 Intensive work continues to embed best practice accountability and leadership to deliver our plan. However, we know that new ways of working, and the resource additionally required will take some time to implement the changes and see the sustained unscheduled care performance that is required to improve patient safety and well-being, across our system.
- 2.4 It was disappointing that our performance against the 4-hour standard did not meet our August 2023 trajectory of 70% (65%) despite significant efforts. It should, however, be recognised that many of the additional resources identified through the plan will take some time to get in place, not least due to the current challenges around recruitment.
- 2.5 Consequently, in early September operational and clinical colleagues, from across the system, worked together to develop a recovery plan for with the objective of improving performance against some or indeed all our metrics which are:
  - Weekly 4-hour access performance
  - Weekly number 8 hour waits.
  - Weekly number of 12 hour waits.
  - Acute site occupancy levels,
  - Ward beat rate achieved / week.
  - Discharge lunge use
  - Pre-noon discharge rate
  - Delayed discharges / week (Acute and Community sites)

- 2.6 The recovery actions agreed to be progressed through September include:
- Enhanced duty manager support across our sites to support flow during our vulnerable times which includes the OOHs period and Monday mornings.
  - Increased Senior Clinical Decision Makers within the Flow Navigation Centre (FNC) to support direction of patients to the right service and reduce demand where appropriate.
  - Expansion of Hospital at Home capacity to increase admission avoidance.
  - Focused improvement work to embed the flow foundation bundles across acute and off-site areas.
  - Focused communications by the FNC service team outlining the role and function to ensure shared understanding of the opportunities of this service across our system.
- 2.7 Daily performance metrics for each site have also been implemented which will ensure that we can track day to day improvements or deterioration in performance and the required actions to sustain or improve our metrics.
- 2.8 Within the HSCP, significant progress has been made in creating a more efficient entry point to social care, with Reablement teams now fully ring-fenced to ensure their capacity and Home Assessment Teams expected to be at full capacity by the end of October.
- 2.9 Home Assessment Team capacity has been steadily improving, with the service supporting its 1000<sup>th</sup> discharge in August, with still over 60% of service users requiring no ongoing package of care after 2 weeks of wrap around support and assessment at home.
- 2.10 A test of change around Locality Response has commenced in Wishaw Locality, supporting a multi-disciplinary urgent response to individuals at risk of admission, with the aim of supporting them to remain at home. This has included tie ins with both the Emergency Department and Flow Navigation Centre. The aim is to continue to test the model before gradually rolling out across the five remaining Localities.
- 2.11 Hospital at Home service expansion continues ahead of winter, with the service roll out into Clydesdale Locality taking place in August 2023 and additional capacity being recruited to support extended working hours and increased capacity in the North Lanarkshire service.
- 2.12 Work continues with the development of a Frailty Strategy and the recruitment of Frailty interface teams on each of the three acute sites with the aim of supporting admission avoidance, improved pathways and earlier discharge for frail patients.

### **System Readiness – Operation Flow 2 Power Up**

- 2.13 The primary objective of the task and finish groups in relation to scoping and developing proposals has now been achieved and we are transitioning to our delivery structures to support this work. Some task and finish groups will continue to operate until all our new models of care are developed. However, the majority of the work will be delivered through a hospital sector-based structure to ensure that we maintain a whole system approach. However, we also recognise that there are some elements of our plan that

are pan-Lanarkshire e.g. FNC development and Frailty Clinical Network which will require some flexibility in our approach to support delivery.

- 2.14 We remain committed to launch and implement our Operation Flow 2 Winter Plan from the 1 November 2023. However, we know that creating the right conditions for launch is essential. Consequently, our preparation will include finalising our new care models and ensuring that our workforce is engaged in all elements of the plan and understand their role in its implementation. System readiness is also underpinned by the delivery and implementation of the detail of the site and sector level improvement plans. This focused preparation period - Power up - will run through the month of October.
- 2.15 As a system we agreed several actions that would support testing of new models as well as decompression during the duration of the Power up period, which includes:
  - 2.15.1 Testing of the Rapid Emergency Assessment Care Team (REACT) processes as part of our new Front Door Target Operating Model (see appendix 1) to increase streaming of patients to the right part of our system in UHH and UHW which will help to ensure that processes are tested and staff increase their confidence in initial assessment at the front door (REACT is a model already in place in Monklands and being rolled out across the other two acute sites).
  - 2.15.2 Maximise the availability of a senior clinical decision maker in the Flow Navigation Centre as part of our new care model to support direction of patients the right place and at the right time to ensure new care model is ready for launch on 1 November 2023 (see appendix 2).
  - 2.15.3 Increase Near me consultation and Call before you Convey between Hospital @ Home and the Scottish Ambulance Service to increase efficiency and capacity within the service.
  - 2.15.4 Complete the bed base modelling for UHW and UHH sites to inform future planning and consideration of reconfiguration of our bed base to manage demand.
  - 2.15.5 Undertake focused improvement work within Medicine for Older Adults – UHW to maximise flow across the acute site and off-site beds.
  - 2.15.6 Fast track access to interim care beds at Cumbernauld Care Home to create acute capacity.
  - 2.15.7 Undertake a review of all inpatients categorised as Hospital Based Complex Clinical Care (HBCCC) to determine if appropriately coded and placed or if another care location is more appropriate to meet their needs.
- 2.16 The actions outlined in sections 2.6 and 2.15 are aligned to the site and sector-based improvement delivery plans and the remaining actions being progressed through the task and finish group structures.

### **Learning from our NHS Tayside Colleagues**

- 2.17 Throughout Operation Flow we have embraced learning from across our system to help inform our new models. We were delighted that colleagues from NHS Tayside provided a peer support visit to NHS Lanarkshire to review our new target operating models and winter plans to help determine if there are any further opportunities for improvement and shared learning. The visit took place over the 7 and 8 September 2023 and colleagues spent time on our sites and with teams from across our system.

2.18 We await a formal feedback report however the team provided some initial reflections during the visit and a high-level summary is noted below:

- Extremely supportive of the Senior Clinical Decision Maker workforce model for Flow Navigation Centre to maximise increase direction of patients to the right place, first time.
- Opportunities exist to maximise the use of Near Me to reduce footfall to our front doors.
- Investment in our Frailty Strategy is essential to respond to current and future demand.
- Reconfiguration of our off-site bed estate to maximise system flow for this Winter and beyond.

2.19 We have a whole system Operation Flow – Pause Event scheduled for Friday 29 September where will use the time to reflect on what will be at risk to deliver for Winter 2023/24 and how as a system will be respond to this and what elements of our plan do we need to change based on the learning from the peer review visit by NHS Tayside colleagues. Therefore, further detail of this this learning will be available for a future report.

### **Evaluating Patient Experience and Staff Well-being**

2.20 Understanding the impact of Operation Flow from a patient experience and staff welling-being perspective is key for NHS Lanarkshire’s learning. Therefore, formal evaluation of Operation Flow 2 will commence from the 1 November 2023 in collaboration with colleagues from Strathclyde University. Our findings will be shared with the committee as soon as they are available.

### **CONCLUSIONS**

2.21 There has been a tremendous whole system effort to plan and prepare for implementation Operation Flow 2 at scale and pace.

2.22 Performance remains challenged, however, a range of the identified supports including additional staffing capacity will take time to implement.

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### **3. Measures of success**

3.1 A weekly performance framework has been developed to track progress.

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### **4. Supporting documentation**

4.1 Appendix 1: Target operating model

4.2 Appendix 2: Flow Navigation Centre Changes



**Ross McGuffie**  
**Chief Officer North HSCP**

## 5. Impacts

<p><b>5.1 Public Sector Equality Duty and Fairer Scotland Duty</b> Does the report contain information that has an impact as a result of the Public Sector Equality Duty and/or Fairer Scotland Duty? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, please provide a brief summary of the impact?</p> <p>If Yes, has an assessment been carried out and published on the council's website? <a href="https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments">https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments</a> Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.2 Financial impact</b> Does the report contain any financial impacts? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, have all relevant financial impacts been discussed and agreed with Finance? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p> <p>All financial impacts have already been factored into budgets.</p>
<p><b>5.3 HR policy impact</b> Does the report contain any HR policy or procedure impacts? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant HR impacts been discussed and agreed with People Resources? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.4 Legal impact</b> Does the report contain any legal impacts (such as general legal matters, statutory considerations (including employment law considerations), or new legislation)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant legal impacts been discussed and agreed with Legal and Democratic? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.5 Data protection impact</b> Does the report / project / practice contain or involve the processing of personal data? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, is the processing of this personal data likely to result in a high risk to the data subject? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, has a Data Protection Impact Assessment (DPIA) been carried out and e-mailed to <a href="mailto:dataprotection@northlan.gov.uk">dataprotection@northlan.gov.uk</a> Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.6 Technology / Digital impact</b> Does the report contain information that has an impact on either technology, digital transformation, service redesign / business change processes, data management, or connectivity / broadband / Wi-Fi?</p>

Yes  No

If Yes, please provide a brief summary of the impact?

Increased opportunities to maximise the use of Near Me.

Where the impact identifies a requirement for significant technology change, has an assessment been carried out (or is scheduled to be carried out) by the Enterprise Architecture Governance Group (EAGG)?

No significant technological change, but better utilisation of a platform already in use.

Yes  No

**5.7 Environmental / Carbon impact**

Does the report / project / practice contain information that has an impact on any environmental or carbon matters?

Yes  No

If Yes, please provide a brief summary of the impact?

**5.8 Communications impact**

Does the report contain any information that has an impact on the council's communications activities?

Yes  No

If Yes, please provide a brief summary of the impact?

Information is being shared across several forums including the HSCP Strategic Planning Groups and the HSCP Website.

Understanding the impact from a patient experience and staff welling-being perspective is key, therefore, formal evaluation of Operation Flow 2 will commence from the 1 November 2023 in collaboration with colleagues from Strathclyde University

**5.9 Risk impact**

Is there a risk impact?

Yes  No

If Yes, please provide a brief summary of the key risks and potential impacts, highlighting where the risk(s) are assessed and recorded (e.g. Corporate or Service or Project Risk Registers), and how they are managed?

Ensuring demand can be met. Risks already included on the risk register.

**5.10 Armed Forces Covenant Duty**

Does the report require to take due regard of the Armed Forces Covenant Duty (i.e. does it relate to healthcare, housing, or education services for in-Service or ex-Service personnel, or their families, or widow(er)s)?

Yes  No

If Yes, please provide a brief summary of the provision which has been made to ensure there has been appropriate consideration of the particular needs of the Armed Forces community to make sure that they do not face disadvantage compared to other citizens in the provision of public services.

**5.11 Children's rights and wellbeing impact**

Does the report contain any information regarding any council activity, service delivery, policy, or plan that has an impact on children and young people up to the age of 18, or on a specific group of these?

Yes  No

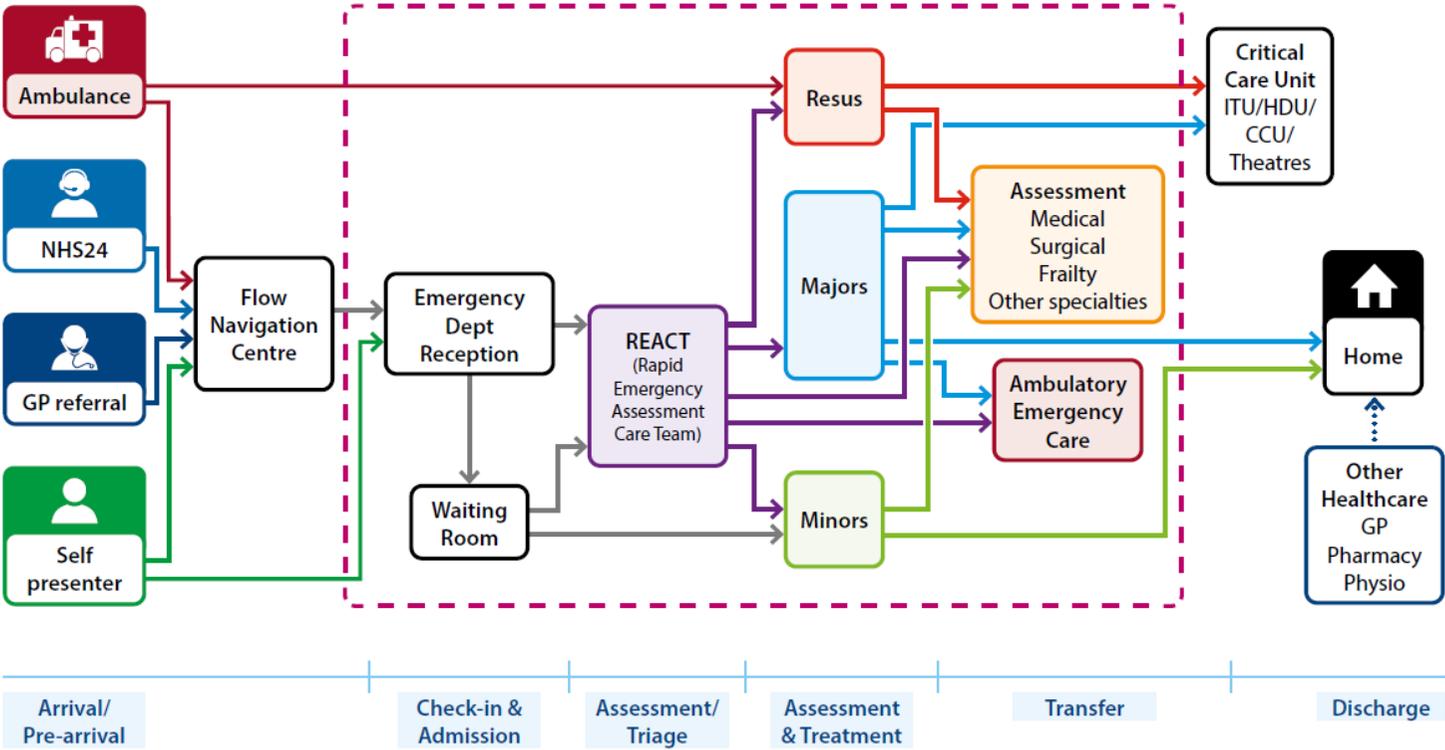
If Yes, please provide a brief summary of the impact and the provision that has been made to ensure there has been appropriate consideration of the relevant Articles from the United Nations Convention on the Rights of the Child (UNCRC).

If Yes, has a Children's Rights and Wellbeing Impact Assessment (CRWIA) been carried out?

Yes  No

Appendix 1: Target Operating Model

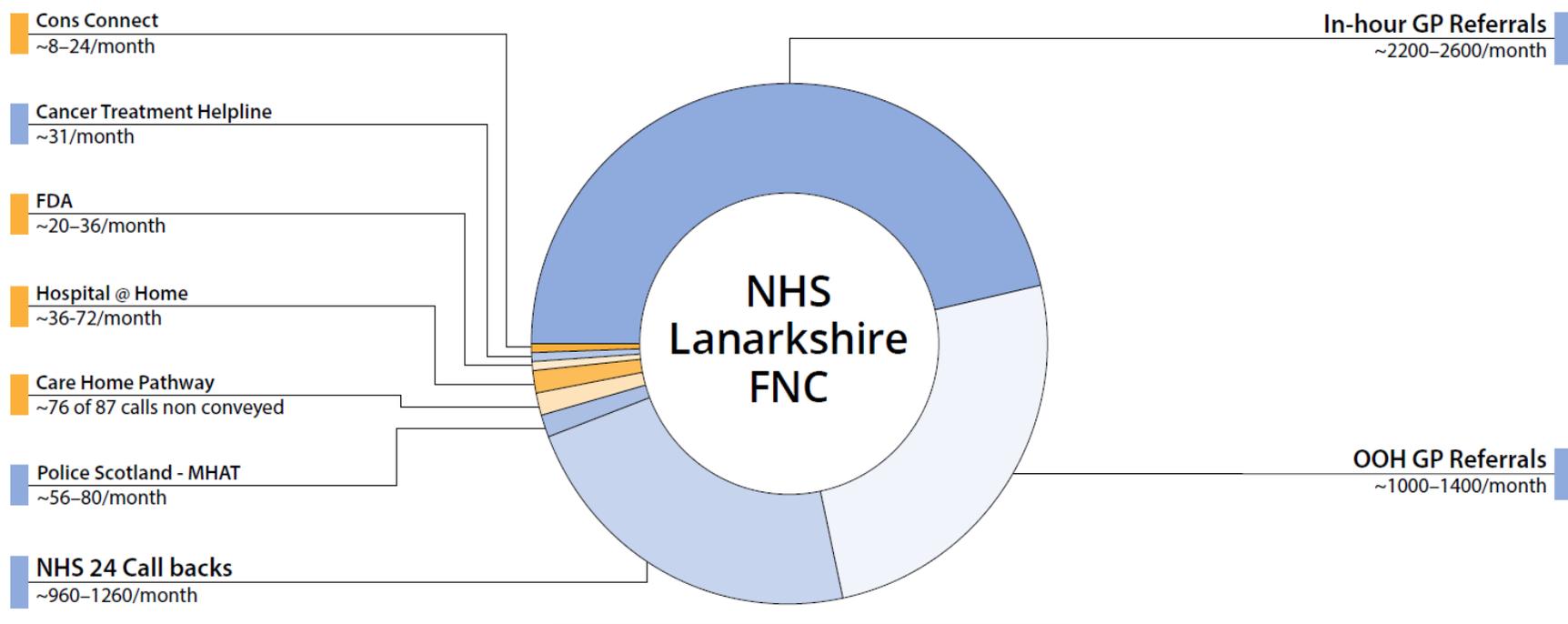
# TARGET OPERATING MODEL



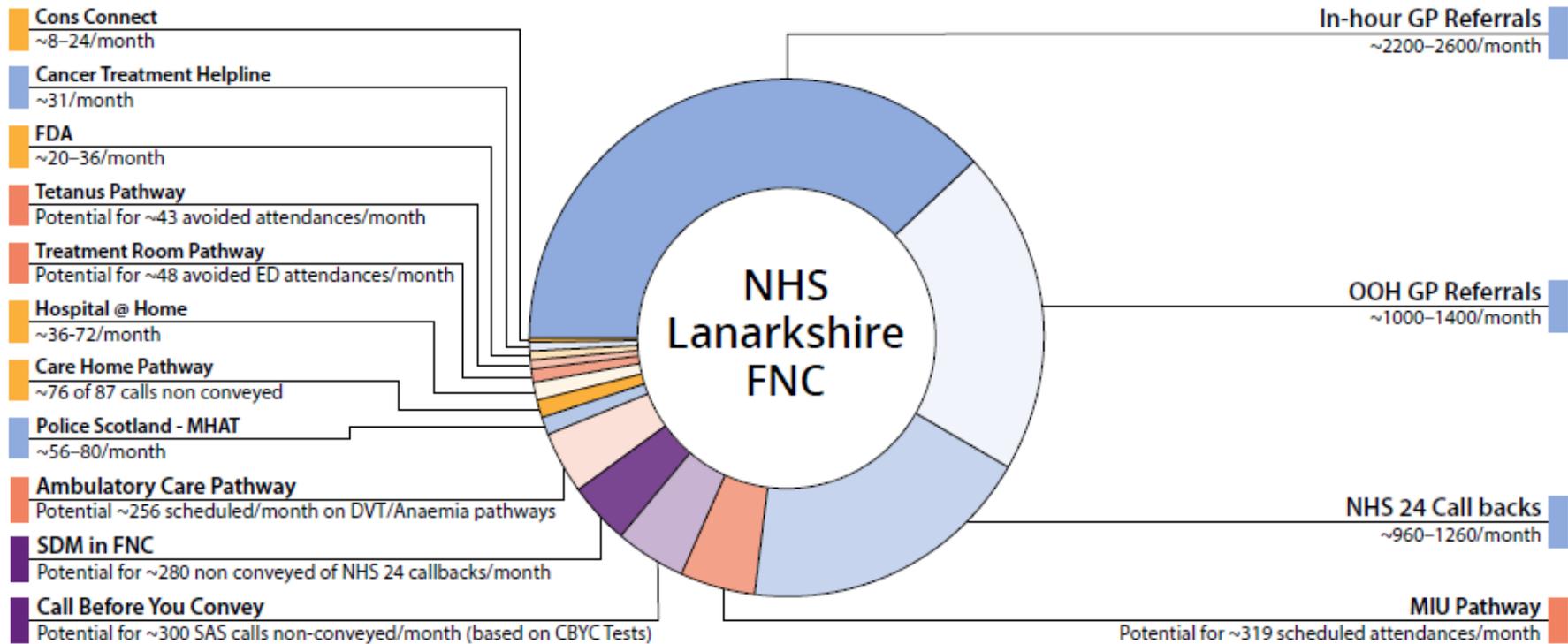
# Flow Navigation Centre

## FNC Pre-Operation FLOW



# Flow Navigation Centre

## FNC Current & Future





# North Lanarkshire Council Report

## Adult Care & Social Work

Does this report require to be approved?  Yes  No

Ref AG/QA

Date 14/11/23

## Annual Report of the Chief Social Work Officer 2022/23

**From** Alison Gordon, Chief Officer (Chief Social Work Officer - Children, Families, Justice and Integrated Services - Education & Families)

**E-mail** GordonAl@northlan.gov.uk **Telephone** 01698 332001

### Executive Summary

In line with Scottish Government guidance the Chief Social Work Officer (CSWO) is required to provide an annual report. This report provides an overview of social work service delivery in North Lanarkshire for the period April 2022 to March 2023 and cover the following areas:

- Governance and accountability arrangements, including partnership working.
- Service Quality and Performance, including service developments.
- Resources
- Workforce
- Future Priorities

The North Lanarkshire CSWO Report 2022/23 is attached as an appendix to this report. The report also reflects social work's contribution to the Programme of Work underpinning the Plan for North Lanarkshire.

### Recommendations

It is recommended that the Adult Care and Social Work Committee:

- (1) Approve this report
- (2) Note that approval of the report will also be sought through the Education and Families Committee

### The Plan for North Lanarkshire

Priority	All priorities
Ambition statement	All ambition statements
Programme of Work	All Programmes of Work

## **1. Background**

- 1.1 The requirement that each local authority appoint a professionally qualified Chief Social Work Officer is contained in Section 45 of the Local Government (Scotland) Act 1994. Statutory Guidance on the role of the Chief Social Work Officer was updated in 2016, to reflect the impact of Health and Social Care integration, extending the responsibilities of the role to provide advice to the Integration Joint Board (IJB). In addition to providing advice both to the Local Authority and IJB in relation to the discharge of statutory social work functions the role continues to carry key responsibilities for professional leadership, values, and standards both for directly provided and commissioned services.
- 1.2 Social Work Services in North Lanarkshire continue to play a lead role in supporting and safeguarding our communities. Adult Social Work and Social Care Services are delivered through Health and Social Care North Lanarkshire (HSCNL) whilst Children, Family and Justice Services are delivered through the Council's Education and Families Service.
- 1.3 The CSWO role requires to be undertaken by one designated individual, delegation of responsibilities is permitted where required by the scale of business. In North Lanarkshire this means that the Chief Officer Adult Social Work Services, routinely exercises delegated responsibilities for decision-making and professional standards within adult services as well as providing support and cover with respect to the wider functions of the CSWO role.
- 1.4 The Annual Chief Social Work Report is intended to provide a key overview of social work service delivery and performance. The Office of the Chief Social Work Advisor (OCSWA) also produces a national report each year which draws on key themes and messages from CSWO reports across Scotland.

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## **2. Report**

- 2.1 Social Work in North Lanarkshire employs around 2,800 staff. In collaboration with commissioned services and 3rd Sector partners with support provided to around 30,000 individuals and families at any one time. Social work also makes a key contribution to wider partnership and community activity.
- 2.2 As illustrated within the report partnership working is fundamental to social at every level and a key aspect of the CSWO role involves developing and sustaining partnership working and relationships across a range of organisations and structures. In addition to the specific responsibilities of the CSWO to the Council and HSCNL, the CSWO holds a key leadership role within several local partnerships as well as contributing to the wider national social work community. Our strong partnership ethos supports well balanced social work, with integrated working arrangements across Health and Social Care, Education and Families and the wider Council.
- 2.3 Income maximisation and tackling poverty continue to be key strands in the delivery of social work and social care in North Lanarkshire. These have become increasingly integrated into day-to-day practice and service delivery and have a strong fit with the core values of social work – promoting independence, self-help, and self-reliance. Equally important and threaded through the activity reflected within this year's report is a commitment to strength, relationship based and trauma-informed practice/
- 2.4 A range of factors including the the legacy impacts of the pandemic, the cost-of-living crisis, the increased demand for social work interventions and support, the increased

number of people who have complex needs and staffing challenges in health and social care, have all meant that meeting demand within available resources has proved difficult, resulting in some elements of performance, notably with respect to care at home being impacted. As the report evidences however, the service has continued to innovate to ensure not only that statutory duties are delivered to a high standard but to improve outcomes and people's experiences of services. Throughout this period we have continued both to retain a strong balance of care across all care groups, supporting individuals to remain within their homes and communities wherever possible and to support and empower individuals and families to achieve positive outcomes.

- 2.5 External scrutiny of social work services is undertaken primarily through the Care Inspectorate and its partner agencies. The final report of the Joint Inspection for Adult Support and Protection was published on 22nd November 2022. The inspection findings are largely positive and recognise the hard work and determination of staff across the partnership over the last two years. The report indicated strong multi-agency arrangements in North Lanarkshire, keeping adults who are at risk of harm safe and protected. A Joint Inspection of Services for Children and Young People at Risk of harm in North Lanarkshire was announced in April 2023 and therefore beyond the period covered in this report but will be reported on separately to Education, Children and Families Committee.
- 2.6 Staff commitment and resilience has continued to be remarkable during these challenging times. A range of initiatives to support staff recruitment and retention against a challenging backdrop is outlined in Section 5 of the attached report. As part of our wider approach to wellbeing, we also continue to have a focus on the wellbeing of staff within day-to-day practice and working arrangements offering a wide range of staff wellbeing initiatives and supports.
- 2.7 Looking forward the report reflects on the opportunities to continue our whole system approach, which includes the continued embedding of the Empowering Cluster's model within Education and Families and the Good Conversations Model and GIRFE within in Adult Services and the opportunities provided through the Council and HSCP's programmes of work as well as reflecting on the continued uncertainties related to elements of nationally driven change in particular the future shape of the National Care Service.

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### **3. Measures of success**

- 3.1 N/A – Annual Report to meet reporting requirement. A range of outcome measures, KPIs and specific service standards are applied across social work services.

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### **4. Supporting documentation**

- 4.1 Appendix 1: Annual Report of the Chief Social Work Officer 2022/23.



**Alison Gordon**  
**Chief Social Work Officer**

## 5. Impacts

<p><b>5.1 Public Sector Equality Duty and Fairer Scotland Duty</b> Does the report contain information that has an impact as a result of the Public Sector Equality Duty and/or Fairer Scotland Duty? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, please provide a brief summary of the impact?</p> <p>No direct impact though the report provides key evidence that the effective delivery of social work services supports the Council in their delivery of Fairer Scotland Duty. As this is a retrospective report no EQIA is required</p> <p>If Yes, has an assessment been carried out and published on the council's website? <a href="https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments">https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments</a> Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.2 Financial impact</b> Does the report contain any financial impacts? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant financial impacts been discussed and agreed with Finance? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.3 HR policy impact</b> Does the report contain any HR policy or procedure impacts? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant HR impacts been discussed and agreed with People Resources? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p> <p>All recruitment is in line with our workforce plans and governed through the appropriate routes.</p>
<p><b>5.4 Legal impact</b> Does the report contain any legal impacts (such as general legal matters, statutory considerations (including employment law considerations), or new legislation)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant legal impacts been discussed and agreed with Legal and Democratic? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p> <p>All statutory requirements are met through the role and function of the CSWO.</p>
<p><b>5.5 Data protection impact</b> Does the report / project / practice contain or involve the processing of personal data? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, is the processing of this personal data likely to result in a high risk to the data subject? Yes <input type="checkbox"/> No <input type="checkbox"/></p>

If Yes, has a Data Protection Impact Assessment (DPIA) been carried out and e-mailed to [dataprotection@northlan.gov.uk](mailto:dataprotection@northlan.gov.uk)

Yes  No

**5.6 Technology / Digital impact**

Does the report contain information that has an impact on either technology, digital transformation, service redesign / business change processes, data management, or connectivity / broadband / Wi-Fi?

Yes  No

If Yes, please provide a brief summary of the impact?

Whilst digital developments are a feature of service improvement and delivery within social work all relevant changes reflected within the report have already been considered through relevant governance processes.

Where the impact identifies a requirement for significant technology change, has an assessment been carried out (or is scheduled to be carried out) by the Enterprise Architecture Governance Group (EAGG)?

Yes  No

**5.7 Environmental / Carbon impact**

Does the report / project / practice contain information that has an impact on any environmental or carbon matters?

Yes  No

If Yes, please provide a brief summary of the impact?

**5.8 Communications impact**

Does the report contain any information that has an impact on the council's communications activities?

Yes  No

If Yes, please provide a brief summary of the impact?

**5.9 Risk impact**

Is there a risk impact?

Yes  No

If Yes, please provide a brief summary of the key risks and potential impacts, highlighting where the risk(s) are assessed and recorded (e.g. Corporate or Service or Project Risk Registers), and how they are managed?

Key risks highlighted within the report are incorporated in relevant risk registers. The report itself is part of a wider framework of reporting which supports the scrutiny of social work services and therefore aids the Council in its duties with respect to the delivery of key statutory functions.

**5.10 Armed Forces Covenant Duty**

Does the report require to take due regard of the Armed Forces Covenant Duty (i.e. does it relate to healthcare, housing, or education services for in-Service or ex-Service personnel, or their families, or widow(er)s)?

Yes  No

If Yes, please provide a brief summary of the provision which has been made to ensure there has been appropriate consideration of the particular needs of the Armed Forces community to make sure that they do not face disadvantage compared to other citizens in the provision of public services.

Where relevant issues are considered in planning for individual's support,

the service will also continue to consider the benefits of enhanced arrangement for groups of service users. An example of this is within our Restorative Justice Service which has both a veteran's group and has also previously contributed through unpaid work to linked community projects.

**5.11 Children's rights and wellbeing impact**

Does the report contain any information regarding any council activity, service delivery, policy, or plan that has an impact on children and young people up to the age of 18, or on a specific group of these?

Yes  No

No direct impact though the report provides key evidence that the effective delivery of social work services supports the Council duty. As this is a retrospective report no CRWIA is required

If Yes, please provide a brief summary of the impact and the provision that has been made to ensure there has been appropriate consideration of the relevant Articles from the United Nations Convention on the Rights of the Child (UNCRC).

If Yes, has a Children's Rights and Wellbeing Impact Assessment (CRWIA) been carried out?

Yes  No

**CSWO Annual Report**  
**2022-2023**

DRAFT

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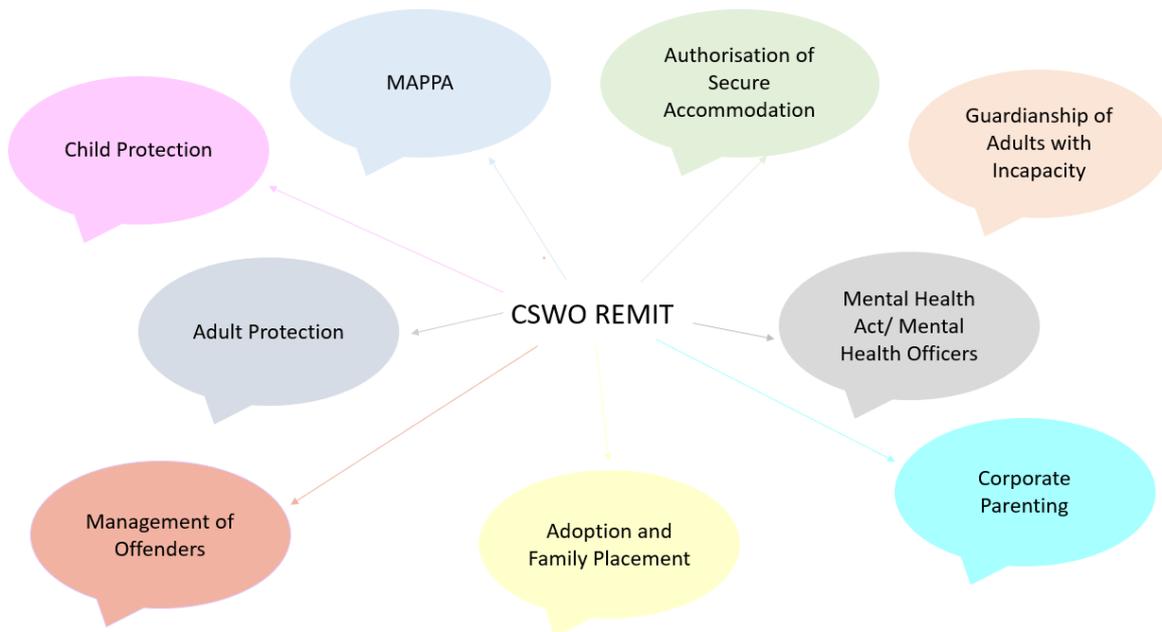
THE CHIEF SOCIAL WORK OFFICER FUNCTION

Every local authority is required to appoint a professionally qualified Chief Social Work Officer (CSWO) as contained in Section 46 of the Local Government (Scotland) Act 1994.

The CSWO provides professional leadership, accountability, and governance, for the delivery of social work and social care services, including commissioned services.

The CSWO also provides advice on social work service delivery and on cross-cutting issues to the local authority Chief Executive, Elected Members and the Integrated Joint Board (IJB) to promote understanding of the range of social work and social care services and the complexities involved in delivering statutory responsibilities which require consideration of need and the management of risk and liberties. The then Scottish Office specifically recognised that the need for the CSWO role was driven by *“the particular responsibilities which fall on social services in that they affect personal lives, individual rights and liberties to an extent that other local authority services do not.”* (Circular: SWSG2/1995 May 1995).

The CSWO also has a direct lead remit for decisions on specific statutory matters including in relation to secure accommodation, adoption and welfare guardianship as illustrated below.



A further aspect of the CSWO role is to inform the delivery of wider services which support or impact on social welfare.

The CSWO role within North Lanarkshire is held by the Chief Officer, Children, Families, Justice and Integrated Practice. The CSWO is supported by the Chief Officer, Adult Social Work Services who holds delegated responsibilities with respect to adult social work and social care, deputises in other areas as required and works alongside the CSWO in relation to the other functions of the role.

In line with Scottish Government guidance the CSWO is required to provide an annual report. This report provides an overview of social work service delivery in North Lanarkshire for the period April 2022 to March 2023 and covers the following areas:

- Governance and accountability arrangements, including partnership working.
- Service Quality and Performance, including service developments.
- Resources
- Workforce
- Future Priorities

The legacy impact of Covid, the continuing cost-of-living crisis, increased demand and challenges around recruitment and retention of staff within the social care and social work sectors have all been significant factors during the past year. These are reflected within the report as are the positive innovations and continuous improvement activity across the service as staff have worked with resilience and commitment to achieve the best possible outcomes for those we support.

I would like to record my thanks and pay tribute to all staff involved in the delivery of social work services in North Lanarkshire for their work over the past year I would also like to thank all internal and external partners, carers, families and communities who have supported us in our work.



Alison Gordon  
Chief Social Work Officer

## 1. GOVERNANCE AND ACCOUNTABILITY ARRANGEMENTS

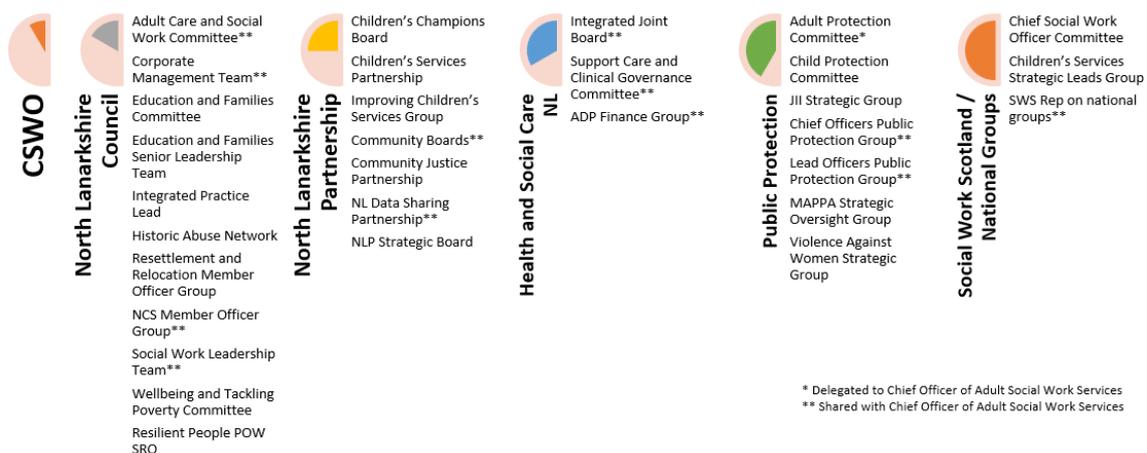
Social Work Services in North Lanarkshire continue to play a lead role in supporting and safeguarding our communities.

Adult Social Work and Social Care Services are delivered through Health and Social Care North Lanarkshire (HSCNL) whilst Children, Family and Justice Services are delivered through the Council's Education and Families Service, with local arrangements continuing to support close working across these areas in both service delivery and planning, particularly in relation to workforce issues and professional development.

Social Work in North Lanarkshire employs around 2,800 staff. In collaboration with commissioned services and 3<sup>rd</sup> Sector partners, we are involved in providing support to around 30, 000 individuals and families at any one time in addition to contributing to wider partnership and community activity.

Progress towards a National Care Service (NCS) is continuing and as reported last year, is likely to involve significant change in the future governance of social work services. A NCS Member Officer Group was stood up by the Council both to inform our response to national engagement on the NCS and to support local planning but was paused in line with the pause on the Bill process.

Partnership working at local level remains fundamental to social work. A key aspect of the CSWO role involves developing and sustaining partnership working and relationships across a range of organisations and structures. In addition to the specific responsibilities of the CSWO to the Council and HSCNL the CSWO holds a key leadership role within several local partnerships as well as contributing to the wider national social work community, as illustrated below:



\* Delegated to Chief Officer of Adult Social Work Services  
 \*\* Shared with Chief Officer of Adult Social Work Services

## 1.1 NORTH LANARKSHIRE COUNCIL AND NORTH LANARKSHIRE PARTNERSHIP

The direction for the council and partners is set out in the Plan for North Lanarkshire. This highlights shared priorities and a long-term vision *and* aspires to inclusive growth and prosperity. The plan aims to ensure that the benefits that this brings reach all our communities, and that there is a much fairer distribution of wealth - [The Plan for North Lanarkshire | North Lanarkshire Council](#)

The plan focuses on:

- improving economic opportunities and outcomes
- supporting all children and young people to realise their full potential.
- improving the health and wellbeing of communities
- enhancing participation, capacity and empowerment across our communities and
- improving North Lanarkshire's resource base

During the reporting period an analysis of the area profile highlighted that North Lanarkshire has seen several successes in its first period, notably a rise average wage to above the Scottish average and a small reduction in child poverty, but there are also challenges. This analysis provided the evidence that informed the direction for The Plan for North Lanarkshire from the period 2023 – 2028. A five-year [Programme of Work](#) which was approved in March 2023, supports the plan and this comprises seven priorities for delivery:

- Transforming Places - To better plan and co-ordinate public and private sector investment to deliver transformational change across town centres and local communities at pace.
- Invest in North Lanarkshire - Accelerated outcome delivery and investment via a more streamlined advisory service and aligned operating model and infrastructure plan.
- Sustainable Futures - Focus commitments to Net Zero Carbon and climate resilience and the associated energy solutions and investments required to make it a reality.
- Resilient People - Deliver whole family support locally, when families need it, in a way that addresses the impacts of poverty and reduces inequality.
- Brighter Futures - Support and improve educational attainment, employment opportunities, entrepreneurship, and volunteering.
- Digital North Lanarkshire - Develop a skilled digital workforce, promote an innovative, sustainable culture and be the Digital Leader for a transformed North Lanarkshire.
- One Service - Ensure services are delivered, regardless of owner, in a streamlined, efficient, and supportive model, with the overall vision of inclusive growth and prosperity for all.

The CSWO, Chief Officer Adult Social Work, Chief Officer Planning, Performance and Quality Assurance and other senior social work managers are actively involved in key areas of this programme, with the CSWO undertaking the role of SRO (Senior Responsible Officer) for the Resilient People Programme. This ensures connections are made across the range of corporate work programmes, in particular those which impact on areas that are important to those who use social work services, for example, employability services, homelessness

prevention and community wealth and capacity building.

As previously reported, from early 2022, the CSWO (Education, Family Justice and Integrated Practice) has also held operational responsibility for Tackling Poverty; Community Learning and Development and Resettlement functions, creating increased opportunities for integrated working in areas closely linked to social work.

The Programme of Work continues to be shaped and overseen by the Corporate Management Team and through the council committee structure with the Adult Health and Social Care Committee and Education, Children and Families Committee having oversight of the delivery of social work.

North Lanarkshire Partnership (NLP) brings together the major public sector agencies in the area along with Voluntary Action North Lanarkshire (VANL) the third sector interface in the area. NLP operates as the overarching framework for partnership working and the priorities for delivery across the partnership are included in The Plan for North Lanarkshire.

The **Children's Services Partnership (CSP)** continues to provide multi-agency governance, strategic planning and direction for children's services in North Lanarkshire. Children's Service Partnership Board membership includes Elected Members and HSCP/NHS Board representation to enhance the coherence of planning across key governance structures. There is also representation of young people through links with NL Youth Council, the Promise Development Team and Champion's Board. Every three years the North Lanarkshire Children's Services Plan is refreshed bringing together improvement priorities for the CSP. The [North Lanarkshire Children's Services plan](#) for this period was published in 2021 and is framed around the foundations of the Promise and UNCRC.

During this period representatives from the CSP reviewed the achievements and priorities of the partnership and undertook work in preparation for the CS Plan for 2023-26. This included a Joint Strategic Needs Assessment and engagement with children, young people, and parents/carers to refresh priorities based on evidence, stakeholder views and experience.

The task groups supporting the delivery of the plan have reported on their achievements for this year. These include:

- Launch of MakeitRight Campaign, a peer education programme to raise awareness of UNCRC.
- Agreement on a revised youth participation and engagement infrastructure.
- Continued development and implementation of the Community Mental Health and Wellbeing Support and Services Framework.
- Planning to enhance our holistic approach to whole family support across the partnership supported by the new Whole Family Wellbeing Fund.
- The established Promise Development Team, young people with lived experience of care, continuing to support the redesign of our care system.
- The maintenance of effective GIRFEC practice for children, young people and families

with improvements to our learning and development offer and our website for families.

- Continued embedding of a contextual safeguarding approach to improve our response to young people at risk of extra familial harm.
- Commitment to creating the conditions for trauma-informed practice as the underpinning approach to support children, young people, and their families.

Full details are in the [CS Annual Report 2022/23](#)

Social Work places a key role in all the CSP priorities with Senior Social Work Managers co-chairing 3 of the 4 task groups and the Partnership's Continuous Improvement Group. The CSWO is lead officer for the CSP and chairs the Improving Children's Services Group which has oversight of the work of task groups together with the '*Scaffolding*' and '*People*' elements of the Children's Services Plan.

The **Community Justice Partnership**, currently also chaired by the CSWO has responsibility for the multi-agency oversight of Community Justice in North Lanarkshire. Due to both the pandemic and the timing of national work on a revised Outcome Performance and Improvement Framework our local NL Community Justice Outcome and Improvement Plan (NL CJOP) was extended to March 2023 and supplemented by annual action plans.

<https://www.northlanarkshire.gov.uk/CHttpHandler.ashx?id=20573&p=0>.

The partnership has over this period benefited from strong collaboration with a wide range of partners and, in particular, has enhanced links with employability services and the NL Alcohol and Drug Partnership, strengthening throughcare and holistic support both for those exiting custody and formal orders and through our pilot Arrest Referral Service. Significant work was also undertaken to update our Strategic Needs Assessment and to engage with communities and those with lived experience to support preparation for our new CJOP: [North Lanarkshire Community Justice Partnership | North Lanarkshire Council](#) .

As previously reported nine **Community Boards** support community leadership, involvement and capacity building. Local outcome and improvement plans (LOIP) guide this work. Social work services play a part in supporting local partnership structures. The CSWO has the role of Community Co-Ordinator for one of the local boards and the Chief Officer Adult Social Work and Senior Managers for Quality Assurance and Strategy & Performance provide links to the Health and Social Care Partnership and its strategic commissioning activity across all Community Boards. Senior Social Work Managers also participate in area-based teams and the sub-groups which support the delivery of the LOIPs.

## 1.2 HEALTH AND SOCIAL CARE NORTH LANARKSHIRE

The governance structure for the partnership is provided by the Integrated Joint Board (IJB) and its Performance, Audit and Finance Sub Committee. The CSWO (Education, Families, Justice and Integrated Practice) and the Chief Officer Adult Social Work Services provide professional social work advice to the IJB. The Mental Health, Learning Disability and

Addictions Partnership Board (chaired by the Chief Officer Adult Social Work Services) and the Frailty and Long-Term Conditions Partnership Board (chaired by the Head of Health) have the role of informing and implementing strategic direction on behalf of HSCNL across their respective areas to promote best practice and guide the access for people to the right support at the right time, and right place.

The Partnership Boards have been in place for several years and as reported previously, are under review as part of the refresh of the Integration Joint Board's new Strategic Commissioning Plan (SCP) 2023-26.

The SCP sets out how the Health & Social Care Partnership plans and delivers services for North Lanarkshire over the medium term and how these arrangements are intended to achieve and contribute towards achieving the national health and wellbeing outcomes. It was approved and published in March 2023, and it will cover the final period of our long-term Strategic Plan 2016-2026 and builds on the work established in our previous Strategic Commissioning Plan 2020-23.

Despite the many challenges faced since March 2020, significant achievement and progress has been made in the last three years. The SCP plan gives an overview of some of these achievements and how they have helped to shape our priorities for the next three years.

In developing the Strategic Commissioning Plan 2023 – 2026 an engagement and consultation process has been undertaken to ensure a wide range of staff, people who use services, carers and partner organisations have had an opportunity to participate in shaping the next three-year's priorities. Several events took place to facilitate discussion in localities as well as targeted groups, Community Board members, elected members, Integration Joint Board members, and the Strategic Planning Group.

The Board approved the draft version of the SCP at its meeting on 30<sup>th</sup> November 2022, subject to final consultation and the draft plan was published online in early December, alongside a survey questionnaire which allowed members of the public and any other interested parties to give their feedback. The feedback from the survey is published as an appendix to the final Strategic Commissioning Plan.

A programme of work is set out within the plan outlining the key work programmes that will be undertaken over the three-year period to meet the key priorities within the Strategic Commissioning Plan.

The [Strategic Commissioning Plan 2023-26](#) sets out 5 key priorities:

- Increased focus on prevention, early intervention and tackling inequalities by working with people and communities
- Do the right thing first time.
- Develop and support a workforce for the future.
- Improve mental health and wellbeing.
- Support people through a whole family approach

The plan is supported by a programme of work which interfaces with the wider Plan for North Lanarkshire and the wider council programme of work.

**North Lanarkshire Alcohol and Drug Partnership** is hosted within HSCNL and has been considerably strengthened over the last two years, co-developing its [2021-2024 strategy](#) around the themes of rights/respect/recovery through engagement with a broad range of stakeholders.

Five ADP sub-groups have been established to develop actions covering: Prevention, Early Intervention and Education; Treatment Care and Recovery; Whole Family Approach; Public Health Approach in Justice and Reducing Alcohol Harms. In line with the cross-cutting elements within these key areas the interface between the ADP, CSP and CJP has also been strengthened and whilst the lead senior officer for the ADP is the Chief Officer Planning, Performance and Quality Assurance both the CSWO and Head of Adult Social Work Services have a role in the wider ADP structure.

NLADP has increased investment across statutory and community sector services to reduce harms from substances for individuals and whole families. The investment is linked to local needs and a commitment to deliver the national drug mission priorities across North Lanarkshire. This includes contextual safeguarding, youth justice, standalone family support provision and justice throughcare support including DTTO and arrest referral which were all established or extended in 2022/23. All the projects and initiatives supported by the ADP can be found on their [website](#) service directory.

### 1.3 SUPPORT, CARE, PRACTICE AND STAFF GOVERNANCE ARRANGEMENTS

The Health and Social Care Partnership's **Support Care and Clinical Governance Committee (SCCGC)** continues to meet on a quarterly basis and is chaired on a rotational basis by the CSWO, Medical Director, AHP Director and Nursing Director.

To maintain coherence in practice and staff governance across all social work functions and care groups, regular **Social Work Leadership meetings** and quarterly **Social Work Workforce meetings** are in place. Our Social Work Solutions forum also meets regularly to discuss and address cross-cutting business issues with social work Chief Officers, Senior Managers and HR Business Partners.

There are a range of processes to support assurance around practice and service delivery across social work services.

The Quality Assurance Team, hosted in Adult Social Work, operates across all social work functions. During 2022/23 capacity within the team was enhanced to support the CSWO with Care Home assurance and to develop and implement an In-House Monitoring Framework to ensure robust, quality service provision. Service responsibilities for the monitoring of the delivery of commissioned services continues. The team reports to the Chief Officer (Planning, Performance and Quality Assurance) and leads on a wide range of other functions critical to the duties of the CSWO. These include regulatory activity, complaints management and

overview, risk management, commissioning and procurement, information governance as well as provider sustainability. Activity is reflected within the [Quality Assurance annual report for 2022/23](#).

Additional arrangements for multi-professional oversight of Care Homes and Care at Home established during the pandemic were reviewed and adapted as the recovery from COVID continued as the year progressed but continue as part of our wider assurance arrangements as outlined below. A Home Care Board continues to oversee the wider redesign of the service, with new Terms of Reference developed.

All Senior Managers within social work undertake regular performance reviews with their teams and support additional audit, development, and review activity to support practice standards, agreeing priorities with the CSWO and Chief Officer Adult Social Work Services. The CSWO and Chief Officer Adult Social Work also maintain an overview of referrals to, and investigations by, Scottish Social Services Council supported by HR Business Partners.

Senior Social Work Leaders were conscious that their visibility as leaders and the opportunity for less formal but direct face-to-face dialogue with staff had been impacted by pandemic. This was addressed through visits by the CSWO and other key managers to teams over the summer of 2022 and beyond and this continues to be a priority looking ahead.

#### 1.4 CARE HOME ASSURANCE

Enhanced clinical and care oversight arrangements for care homes were put in place early in the pandemic to support care home staff to keep residents safe. There has been considerable learning and excellent examples of local partnership working during this time. A review is currently underway of the arrangements in place to ensure continuing enhanced support to adults and older people's care homes. Engagement with stakeholders was scheduled to conclude May 2023 with key areas already identified including the need to:

- Recognise and build on the expertise within the sector.
- Continue collaborative improvement work with providers and home managers.
- Focus on residents having a meaningful quality of life.
- Ensure access to healthcare support when required.
- Support workforce development.

#### 1.5 ENGAGEMENT WITH THE PEOPLE WHO USE SUPPORT SERVICES AND THE COMMUNITY AND VOLUNTARY SECTOR

The CSWO plays a key role in ensuring that people who use and have experience of social work services inform the design and delivery of these services as well as in individual planning. The ultimate accountability for social work services is to the people who use them, their families, and the communities of North Lanarkshire. Examples of co-production in the design of service are reflected throughout this report and ensuring individuals and families, including children

and young people are heard and empowered within individual support planning remains a key area of focus in both out delivery and assurance arrangements.

Our approach is also informed by the wider Council vision as set out in *Delivering for Communities* and the importance placed on the role of Community Boards as outlined in section 1.1 above.

The [HSCC NL Engagement and Participation Strategy 2021-2024](#) was designed to ensure that HSC NL has the right systems and supports in place for effective engagement with, and the participation of stakeholders.

The strategy facilitates the involvement and engagement of people who use services, carers, the community, and voluntary sector, as well as the independent sector and a “strategy into practice” approach has been supported by a Stakeholder Engagement and Participation Strategy, Framework and Working Group.

### Complaints

- Overall, complaint activity rose by 81% from 2021-2022. A significant increase: however, complaints are still slightly less than they were pre-pandemic.
- Overall complaints received for the reporting period totalled 221.
- Education and Families: - 81 complaints were received in relation to Education & Families services this year, 49 received last year, an increase of 32 [65%].
- Adult Social Work Services: - 140 complaints for adult services this year, 73 received last year, an increase of 67 [92%].

It is likely that complaints numbers were suppressed over the pandemic period in part as public expectations were moderated due to the recognition of pressure on services. Similarly it is likely that demand pressures as we emerge from the pandemic have contributed to the rise this year however, the principal reason for complaints continues to include poor staff communication, staff attitudes and quality of service with learning from all social work complaints this year highlighting:

- The importance of good communication.
- The need to ensure that those who use our services, and their carers are informed from the outset where they may need to contribute towards the cost of their care.
- The need to improve information and advice for those who need to contact and seek support from social work services.
- That people have the right to use their Self-directed Support (SDS) individual budgets as creatively as necessary to reach their agreed outcomes if the use of public funds are legal and do not bring the council into disrepute.

As a partnership we are committed to improving learning from complaints which is also one of the key performance indicators that are reportable to the SPSO. We will, over the course of 2023-2024 place further emphasis on identifying and applying learning from complaints,

recording learning outcomes and evidencing subsequent improvements. We will also emphasise the need to ensure that all complaints are dealt with in the identified timeframes, with clear communication of outcomes.

### Compliments

Across social work, seven compliments were made throughout 2022-2023 in relation to complaint handling. All referred to quick actions by responsive staff to provide resolution.

### Care Opinion

Care Opinion a non-profit organisation, funded mainly through subscriptions from health and care organisations, has built a national and international reputation for their innovative and value-led approach to online feedback.

Subscription to Care Opinion locally has given a further platform for people who use social work services to comment on the quality of the service that we provide but may also encourage people to make formal complaints. The usage of Care Opinion has been slow, however, there have been marked increases in comments posted about social care services throughout the period from January 2023 – March 2023. Anecdotal information from our partners in NHS Lanarkshire suggests that in the early stages, uptake can be poor, but that sustained promotion will drive traction and momentum.

There is a Care Opinion implementation group who meet regularly to agree plans for increased promotion and shared learning. To support the use of Care Opinion as a vehicle to promote feedback on services, Quality Assurance revised our Contract Management Framework and requires all contracted providers, through their quarterly monitoring returns, to report on their use and promotion of Care Opinion as a method of seeking feedback.

### Carers

Engagement with carers in North Lanarkshire remains equally critical to service delivery and development and is undertaken through the framework of the Carers Strategy 2019-24 [NL-Carers-Strategy.pdf \(carerstogether.org\)](#) which was developed in partnership with carers with a vision *'to ensure, in partnership, that North Lanarkshire adult carers and young carers are supported, represented and enabled to build resilience, carry out their caring role and to live healthy independent and fulfilled lives'*. North Lanarkshire Carers Together continues to provide an information and advice service but also a network for carers to represent individual and collective issues and to contribute to policy development, service provision and evaluation both locally and nationally, a role which has been particularly valuable and important in ensuring carers voices are heard and challenges understood during and as we emerge from the pandemic period.

**Voluntary Action North Lanarkshire (VANL)** continues to provide the key local interface with the community and voluntary sector in North Lanarkshire and participates as equal partners in the partnership structures described above and in a wide range of linked improvement activity. This has included membership of the Children's Services Partnership Board and the

ongoing involvement and facilitation of endorsed third sector networks linked to the Community Justice Partnership.

VANL have also continued to play a central role in developing voluntary and community sector involvement through community capacity and carers support work as reflected within the Community Solutions Strategy and delivery programme, [Softening the Lines 2018-23](#).

Using 9 thematic leads to guide best practice and 6 locality host organisations to ensure a community led approach a devolved budget of over £1million has been invested yearly by HSCNL in local organisations and community groups. The overarching aims are to prevent isolation and loneliness; to address inequalities using innovative approaches to support people to be more active; and to reconnect people to their communities A supporting commissioning plan and the programme approach have ensured a focus on key outcomes with the budget also helping to secure additional funding and/or in-kind contributions.

The use of Community Solutions model has also been used within Children's Services, aimed at addressing distress and promoting positive mental health. A significant portion of new Scottish Government funding was targeted at early intervention and community support through the Children and Young People's Mental Health and Wellbeing Framework allocated to organisations through VANL to develop new supports in partnership with school clusters, children, young people, and their families.

Engagement, inclusion, and empowerment are embedded in day-to-day practice with a focus on good conversations and strength-based approaches rather than being one off, or episodic events and this approach remains of key importance in social work across all care groups.

## 2. SERVICE DEVELOPMENT, QUALITY AND PERFORMANCE

### 2.1 PERFORMANCE AND IMPACT MEASUREMENT

Whilst measuring impact in the complex context of social work is challenging, there is a robust framework of formal scrutiny, oversight and governance.

For each person supported, positive outcomes are planned for and agreed during assessment; and are subject to ongoing review throughout the person's journey and evaluated using a variety of Social Work practice tools. Use of tools such as the outcome star within various settings allows for the measurement of change at individual level but can also be collated to support evaluation of wider service impacts. Proxy measures may also be used to measure the impact of interventions at both individual and service level whilst case studies/stories and service user feedback can provide depth and an equally valuable picture of how services are experienced and the impact of trauma informed and relationship based practice.

A mix of quarterly, six monthly and annual reporting is in place for social work services including through the Council's Strategic Performance Framework and HSCP detailing key

performance areas such as access, operational performance, workforce, quality and outcomes.

In addition to internal performance management arrangements all Social Work services provide validated performance and activity data to the Scottish Government and the various agencies who have a strategic interest in social work service delivery supporting national indicator sets, such as the Local Government Benchmarking Framework and the Integration Indicators which can then be used for benchmarking purposes.

External scrutiny is provided primarily through the Care Inspectorate's including through regulation of registered services including residential care, care at home and adoption and fostering service and through strategic inspection and thematic reviews. During 2022/2023 a strategic inspection took place with respect to the partnership's delivery of Adult Support and Protection whilst services participated in national thematic reviews in relation to Carer support during the pandemic, support for Children with Disabilities and Secure Care.

## 2.2 SUPPORT TO UNPAID CARERS

Unpaid carers continue to be the main source of support for people, including those who might otherwise need assistance from social work and health services. Supporting unpaid carers therefore continues to be of vital importance.

Over 2022 / 2023 we continued to work with our existing partners as well as developing new initiatives to ensure that the range of support options that help meet unpaid carer needs and outcomes was in line with carer led and carer informed needs, expectations, and outcomes. Some of these approaches were aimed at maintaining carer health and well-being, some at preventative approaches or to help meet anticipated need, and some span all these areas.

Last year's report had a focus on the impacts of the COVID-19 pandemic on unpaid carers. These impacts still had resonance across 2022/23, and many carers continued to provide more care than in pre COVID times.

Recruitment and staff retention issues combined with an increased need for support across social care, social work, and health sectors, both locally and nationally, remained challenging, compounding the issues experienced by unpaid carers. The cumulative impact on carer health and well-being was significant. The National Carer Strategy, launched in late 2022, had its first strand focused on "Living with Covid" and we are developing approaches to meet the aims of that.

Locally, we have three commissioned carer organisations:

- Lanarkshire Carers – Direct Support for Adult Carers.
- Action for Children Young Carers Service – Young Carers Support Services.
- North Lanarkshire Carers Together (NLCT) – Campaigning, information, and representation services.

These are further augmented by a diverse range of other 3<sup>rd</sup> Sector organisations including:

- Voluntary Action North Lanarkshire – Community Solutions Programme
- North Lanarkshire Disability Forum – Community
- Many others who also offered a variety of services including condition specific and/or age-related support organisations.

We continued to work in close partnership with the commissioned carer service organisations as well as funded organisations where there was a direct, or indirect, carer support role. Estimates vary slightly, but approximately 13,000 carers were aligned to carer support organisations in North Lanarkshire or known to Health and Social Care in 2022/2023. The true number of unpaid carers in our area is likely to be significantly higher. Again, estimates vary, but it is considered that the real figure is around 50,000. That means that only one in four to one in five carers is known to us, making advance planning and preventative approaches that bit harder to design and deliver. Work is ongoing to ensure that non-aligned (“hidden”) carers are aware of carer support options and the importance of Adult Carer Support Plans and Young Carer Statements. Our focus continues to be on preventative and/or anticipatory approaches, promoting and supporting self-help and independence as much as possible, and ensuring that carers are aware of sources of help and support and can access these at an early stage, rather than when crisis arises.

During 2022/2023, **914 Adult Carer Support Plans** were progressed by Lanarkshire Carers. In situations where carer need was identified as being significant or critical and unable to be met through the range of carer support options described in this report, **48 individual carer budgets** paid through a Direct Payment were agreed. These individual budgets to support people reflected individual carer circumstances, such as complex care related needs, caring responsibility for more than one person, or the carer’s own health related needs. More commonly carer circumstances were considered within the **2, 375 individual budgets for supported people**, which were agreed during this period. In addition, over **900 small grants for carers** were distributed through Lanarkshire Carers.

In line with the Carers (Scotland) Act 2016 and the North Lanarkshire Carers Strategy the Action for Children Young Carers Service continued to ensure that every young carer referred to the service had a Young Carers Statement (YCS) and a review of this statement where appropriate. Short breaks provision continued to be of high importance with each young carer receiving a short break, and several families received additional short break support. Group work programmes and individual 1:1’s remained the main source of support within the service.

Maintaining young carers' mental health remained a vital part of the work within the service, delivered in partnership with Kooth and other mental well-being organisations. Staff also had a presence in most high schools in North Lanarkshire during this period promoting awareness of young carers needs whilst financial support for young carer families was maximised through continued funding applications through carer partners and the Action for Children fundraising team.

North Lanarkshire was one of a small number of areas across Scotland where in-depth activity

linked to the Care Inspectorate's national *'Inquiry into carer's experiences of social work and social care service delivery'* took place. Findings from this inquiry, released in late 2022 demonstrated that North Lanarkshire was performing relatively well in supporting carers compared to the national position.

Lanarkshire Carers continue to operate a well-established short break service, and this continues to play an important role in supporting unpaid carers in enjoying a break from their caring role. Feedback from carers also highlighted a need for more regular, flexible 'time out' options accessible within their local community. This led to a range of new initiatives including a 'Carer Breather' programme, facilitated through North Lanarkshire Carers Together and introduced in April 2022. Positive feedback from unpaid carers regarding this approach resulted in an extended programme scheduled to commence in April 2023.

Work to meet the requirements of the Carers Act to ensure that unpaid carers were as involved as they wanted to be in hospital discharge arrangements also continued over this period. This included involvement in decision making, as well as support at the point of discharge and beyond. Whilst this approach was welcomed, we continue to be aware through feedback from carer support organisations, advocacy providers, and individual carers that further work will be required in this area, to ensure that no involved unpaid carers are missed from discharge planning.

In response to concerns regarding delayed discharge, we successfully piloted an innovative Hospital Discharge Carers Payment scheme between January and March, where carers were paid a fixed sum of £1000 in lieu of services, to help facilitate hospital discharge. This scheme proved to be a success, and based on carer feedback, as well as that of those being cared for, the intention is to reintroduce the scheme later in 2023.

In response to the most recent Carer Census which identified that Dementia and Autism were the two most prevalent conditions impacting on those supported, we developed a Dementia Link Worker Service and progressed work to enhance support for carers involved in supporting people with autism.

We remain aware also of the diversity and fluidity of the carer population and that despite our efforts some carers remain less visible to services and supports. We continue to innovate and use a range of methods to ensure information and support is accessible, from the more traditional information packs to the launch of a new podcast for carers and support for digital inclusion.

### 2.3 JUSTICE SOCIAL WORK SERVICES

The strategic landscape for community justice social work over this period has been influenced by the new national 'Vision for Justice' published in February 2022 and the new 'National Strategy for Community Justice' published in June 2022 in addition to the continued indirect and direct impacts of the pandemic most notably the related backlogs within the justice system. At a local level additional temporary funding has been provided through Scottish Government to address demand pressures and whilst this has created some challenges

including in recruitment the service has continued to innovate and enhance joint working to improve outcomes.

### 2.3.1 CPO UNPAID WORK

During this reporting period 127,057 unpaid work hours were imposed by Court Services. This constitutes a 64% increase from the previous year 2020-2021. Prior to 1<sup>st</sup> October 2022, individuals made subject to Court mandated Unpaid Work Requirements had the timescale for completion extended by 12 months. This was implemented by the Scottish Government via The Coronavirus (Scotland) Act 2020 in a bid to assist Local Authorities to manage the unpaid work backlog of hours created by the Covid-19 pandemic however as of 1<sup>st</sup> October 2022 the extended timeframe to complete unpaid work ceased and reverted to the 6 months' timeframe. Despite this shift, North Lanarkshire Council during this reporting period delivered a total of 75,465 unpaid work hours. The unpaid work undertaken was a combination of workshops, squad and single placements, home working, individual litter picking and other initiatives.

Despite the national context, the significant rise in the hours imposed and the reduced timescales to complete them, Restorative Justice staff were able to respond innovatively. To absorb the additionality, Justice staff engaged and matched individual needs to a hybrid mix of single placements, squad placements, home working and other activity groups and interventions to the benefit of the local communities. This has reduced the need to request time extensions on an already strained Scottish Court Service.

Examples of unpaid work projects completed in North Lanarkshire are as follows:

Wood Workshop – Items made in our workshop are utilised for various community projects, such as pirate ships for schools and nurseries, benches, and planters for sheltered housing complexes. We also continue to use wooden pallets, in keeping with recycling and cost effectiveness central to our ethos. These are transformed into imaginative play items for school and nurseries, such as trucks, trains, boats and cars.

Bike workshop – Refurbished bikes are donated to community groups, schools, and individuals. Over 115 bicycles were distributed to assist and support individuals within the community to maximise their health and wellbeing. In September 2022 a new initiative was launched to repair bikes for people who struggle financially in the local area.

Laundry workshop – We have continued to work in partnership with the local school uniform banks and community charity groups and shops laundering donated clothes.

Activity groups and Homeworking – In keeping with tackling poverty and our recycling ethos, recycled materials have been used to make draught excluders, rugs for dogs, hand warmers and mental health and anti-bullying plaques for schools, community groups and local walkways. These items were destined for landfill and repurposing items assists to reduce the

council's carbon footprint. as well as providing opportunities for service users who needs may require them to undertake unpaid hours from home.

Squad placements – Projects completed in the local community have included landscaping, groundwork, clearance and building projects. These projects are carried out in schools, sheltered complexes, walkways and community gardens.

Single placements – These are delivered within an array of settings including local churches, allotments, sheltered housing complexes and charity shops.

Home improvement workshop – Teaches skills such as decorating, tiling, and plastering and this will continue to be developed over the next year to include more community projects.

The work outlined above has benefited communities within North Lanarkshire in a range of ways including through environmental projects and support for community groups, with work also supporting active travel and health and well-being outcomes for both unpaid work participants and the community. In addition, there continues to be a focus on reducing waste and the council's carbon footprint and on addressing financial hardship and the cost-of-living crisis both directly through income maximisation for service users and the delivery of support to individuals as well as indirectly through the provision of support and equipment to community and voluntary groups.

During 2022-23 Christmas and New Year meals were provided by local business and were distributed to vulnerable adults and families by Justice staff whilst throughout the year various produce that is grown in our allotments in Wishaw and Coatbridge has been distributed to people in need across the authority. Whilst foodbanks rely on and provide non-perishable food donations, our community allotments supplement this by providing the vitamin and nutrient rich fresh fruit and vegetables.

The examples outlined demonstrate a creative, meaningful combination of approaches to delivering Unpaid Work for the benefit of the North Lanarkshire community fostering a hybrid mix of traditional unpaid work, home working, other activity, anti-poverty, and health interventions. This demonstrates the core values of Community Payback which are reparation, reintegration, and rehabilitation of service users.

Some examples of beneficiary feedback received includes:

*“The Squads carrying out work makes it so much easier for our plot holders and now the private placements have kept the allotments looking good” – Greenlink Allotment Group.*

*“The Restorative Justice Service redeveloped a piece of waste ground, at the back of the veteran's hub in Craigneuk into a fabulous garden area that will improve the mental health and wellbeing of the veterans. This transformation could not have been*

*done without the help of the Restorative Justice Service” – Veterans Community (Lanarkshire) SCIO.*

*“The work was completed to an exceptionally high standard; staff were excellent and kept me right in what to purchase. The place is looking great and finished in time for the tenants to sit out and enjoy the summer” – Sheltered housing staff.*

The following comments were obtained from service users:

*“I loved the healthy cooking group and the allotments. I learned loads about growing and using vegetables and was involved in distributing produce to local sheltered housing complexes”.*

*“My placement in the bike workshop gave me a sense of pride, I fixed and built bikes for those who cannot afford to buy one, whilst learning new skills”.*

*“I learned new skills and knowledge by attending the CPO Connect sessions via the Wise Group, including managing my emotions and addiction awareness”.*

### 2.3.2 OTHER ACTIVITY

Continued use of Scottish Government funding enabled the service to work in conjunction with third sector organisations to support the ‘other activity’ element of unpaid work.

The commissioned third sector organisations and their interventions include -

- CPO Connect - The Wise Group delivered an online programme on a group basis which provides information and awareness raising on an array of topics such as, emotional regulation, mental health and wellbeing.
- Love Learning – Love Learning provided one to one support to address issues, such as registering with a GP, attending appointments, learning basic online skills, literacy and numeracy skills and constructive use of time.
- Creative Change Collective – The Creative Change Collective uses the creative arts to support people to explore and address a variety of current societal issues impacting on their lives. Participants devised songs, poems and scripts and performed them live to an audience.

This ongoing engagement with third sector and creative arts has led to positive feedback from those undertaking unpaid work with individuals reporting an increase in self-esteem and confidence, as well as a reduction in social isolation.

*“CPO Connect allowed me to share my experiences and consider other people’s perspectives, whilst receiving advice and guidance.” Service User Quote.*

Service users are also supported to complete 'other activity' by undertaking offence focused workbooks to explore a wide range of criminogenic needs whilst justice staff utilise online educational courses, parenting courses, employability, and further education resources with service users and facilitate interventions other services such as addiction recovery services, employment support services, mental and physical wellbeing services. Justice staff continue to refer service users to Venture Trust to enhance daily living skills including, problem solving, team working through goal setting, leading to group and individual achievements.

Our Health & Wellbeing Agenda promotes health checks with the Keep Well Nurses, suicide awareness and prevention and mental health support. Additionally, service users have undertaken first aid training as well as having access to interventions which promote positive physical health, this includes healthy eating and exercise.

In November 2022, Community Payback Supervisors were trained in the delivery of Naloxone, a life-saving medication that can reverse an overdose from opioids, including heroin, fentanyl, and prescription opioid medications. As North Lanarkshire Council Unpaid work service operates a 7 day a week service, it is hoped that this intervention may contribute to reducing the national picture of opioid-related deaths. It is anticipated that this will provide a foundation for delivery across the whole of the Justice Service over the coming year, as part of our ongoing commitment to reducing the impact of drug use and reducing preventable drug deaths.

Justice staff have continued to use the Justice Outcome Star a visual and person-centred tool which provides a focus for discussion and intervention. The Action and Support Plan formulation, identifies areas of need which individuals are supported to address, and this is regularly reviewed with the service users.

### 2.3.3 DIVERSION FROM PROSECUTION

In line with the *Vision for Justice* in Scotland the service continues to prioritise the promotion of Diversion from Prosecution. To ensure consistency of practice in this area multi agency briefing events have continued to take place with relevant social work staff, police colleagues within their local police stations as well as the voluntary sector colleagues. Diversion from Prosecution referrals in North Lanarkshire continues to be above the Scottish Average, and the numbers have been consistently high beyond the Covid-19 pandemic as detailed below.

Age Group	No of Reports Sent	Male	Female	Main Recommendation			
				Diversion	NS +ve	NS -ve	Recom Not Recorded
Under 16	0	0	0	0	0	0	0
16 - 17	32	25	7	26	0	5	1
18 - 20	53	40	13	38	1	12	2
21 - 25	17	13	4	4	0	11	2
26 - 30	20	17	3	10	3	7	0
31 - 35	31	18	13	15	2	14	0
36 - 40	28	14	14	21	0	7	0
41 - 45	36	26	10	24	3	9	0
46 - 50	34	30	4	13	2	19	0
51 - 55	13	11	2	8	2	3	0
56 - 60	10	5	5	7	0	3	0
61 - 65	3	1	2	3	0	0	0
65+	4	3	1	1	2	1	0
<b>Total</b>	<b>281</b>	<b>203</b>	<b>78</b>	<b>170</b>	<b>15</b>	<b>91</b>	<b>5</b>

Number of Individuals Commenced									
Age Group	Q1 2022/23		Q2 2022/23		Q3 2022/23		Q4 2022/23		Total Financial Year
	Male	Female	Male	Female	Male	Female	Male	Female	
Under 16	0	0	0	0	0	0	0	0	0
16 - 17	5	1	5	1	9	0	3	2	26
18 - 20	5	3	9	1	6	2	8	4	38
21 - 25	2	0	0	0	1	0	2	0	5
26 - 30	1	1	0	0	3	1	2	1	9
31 - 35	2	0	1	2	1	1	5	4	16
36 - 40	3	3	1	0	1	2	2	2	14
41 - 45	4	6	1	2	5	0	4	1	23
46 - 50	6	2	0	0	2	1	2	0	13
51 - 55	1	2	0	0	4	0	1	0	8
56 - 60	1	2	0	0	0	1	1	0	5
61 - 65	1	0	0	0	0	0	0	1	2
65+	1	0	0	1	0	0	0	0	2
<b>Total</b>	<b>32</b>	<b>20</b>	<b>17</b>	<b>7</b>	<b>32</b>	<b>8</b>	<b>30</b>	<b>15</b>	<b>161</b>

#### 2.3.4 OFFENCE FOCUSED WORK

Offence focused intervention continues to be central to the delivery of Justice Social Work services, regardless of whether that engagement is mandated through Community Payback Order, Statutory Licence, Structured Deferment or Diversion from Prosecution. Social Workers employ a trauma informed approach, considering wellbeing and individual responsivity and support others to recognise the links between wellbeing and risk. Support is provided to address areas of both risk and need. Education, employment, and leisure are key elements of this and remain a key component of ongoing assessment and intervention.

The service also continues to collaborate with Active Leisure to promote exercise and wellbeing for all, with emphasis on the physical, emotional, psychological, and social benefits of exercise. Similarly, collaboration continues with third sector partners to support individuals access employment, education, and training in order that they are supported to achieve and develop their interests and potential.

Collaboration with people with lived experience, including the Recovery Community has further developed and supported individuals develop hobbies, interests and relationships which contribute to their support and wellbeing beyond their experience within the formalised supports of the wider justice system.

Alongside this, specific offence focussed intervention occurs on a one-to-one basis and within groupwork settings and often involves work around managing strong feelings, handling conflict, improving relationships, and managing impulsive behaviour. Service users are supported to develop individual intervention plans, informed by structured assessment, to identify priority areas of need and to collaboratively develop a support plan that can measure progress and outcomes.

In respect of groupwork, more intensive interventions include MFMC (Moving Forward Making Changes) and UP2U (Creating Healthy Relationships). These continue to be delivered through effective collaboration between supervising social workers and programme delivery workers. These are intense and demanding interventions which require a high level of commitment and reflection from participants as they are supported to better understand the connection between their thoughts, feelings and behaviours, and to develop safer, more effective strategies in complex and challenging situations.

Of significance within the past year has been the extension of Structured Deferred Sentence as a disposal option which was extended to Airdrie Sheriff Court in July 2022, building on the positive progress seen at Hamilton and Lanark Sheriff Courts. This extends an opportunity to young people to engage in services effectively and at an earlier stage and provides Court with a viable alternative to imposing a statutory order. Further developmental work has progressed throughout the year and this has included the development of an Arrest Referral service and the development of an Alcohol and Drug Solutions Court. Both will offer real opportunities to

collaborate effectively with partners to offer effective interventions at an earlier stage with a sharp focus on well-being, reducing risk and supporting safer communities.

### 2.3.5 UP2U

The UP2U 'Creating Healthy Relationships' programme continues to be delivered on a one to one and two to one basis to people who are subject to a statutory order because of a domestic abuse offence. The central UP2U team lead on UP2U developments and oversight of the programme across the service and provide the intervention to service users considered to be high risk of further domestic abuse offending. As the courts and parole board have become more familiar with UP2U there has been an increase in the number of conduct requirements and licence conditions mandating service users to complete the UP2U programme.

In March 2023, the first evaluation of the UP2U service commenced and service user feedback was gathered. Most service users have had a positive experience of the UP2U process. Almost all service users consulted felt that UP2U sessions helped them understand how their abusive behaviour could impact their partner and/or their children. Almost all service users found sessions helpful and felt listened to and respected. Other sources of feedback were accessed and reviewed including end of programme reports and end of module reports undertaken by the central UP2U team.

Most participants reported improved relationships with their intimate partners and children due to the new skills learned. For the small number of service users who completed the programme during this period, no reported domestic abuse incidents have been recorded.

The UP2U partner support service is offered to any partner and/or ex-partner of an UP2U participant. All service users who provided feedback reported a greater sense of safety/reduced risk because of being linked with UP2U partner support. Intimate ex/partners of UP2U participants stated that being signposted or assisted to access other services has positively impacted their lives.

Impact statements from women who have accessed the UP2U partner support service include:

*"My partner support worker knows exactly what's going on and I can talk freely...I don't feel blame or shame".*

*"I know what an UP2U safety plan is and was involved in creating this".*

*"I would recommend the partner support service for anyone who's partner is starting the UP2U programme".*

A focus group with partner support staff from across Justice Services was held for this evaluation and similarly identified key strengths in respect of enhanced access to practical and emotional support, safety planning and access to specialist domestic abuse supports. Some challenges were identified in relation to safe meeting spaces and the undermining of work by

some partners It was noted that some women were also wary of statutory services in which case signposting or referral to Aura or Women's Aid services will be offered.

UP2U Family Practice is the non-mandated version of the programme and therefore delivered through children and family social work with the support of the central UP2U team This has been delivered to a small number of families in various localities across North Lanarkshire. expanding access to a behaviour change intervention. The impact of Family Practice has not yet been evaluated and is currently in the early stages of implementation.

### 2.3.6 MOVING FORWARD: MAKING CHANGES (MF:MC)

NLC Justice Services deliver the Moving Forward: Making Changes (MF:MC) programme which is a national intensive cognitive behavioural programme for men over the age of 18 who have committed sexual offences and looks to assist participants address their offending and reduce their risk of reoffending as part of a Court Order or release Licence. The MF:MC programme is currently being revised with the official MF2C pilot launched in July 22 and NLC Justice Services participating. The new programme has been adapted to ensure it is up to date with developing research evidence and, suitable to all settings in which it will be delivered. Involvement in the MF2C pilot meant that 8 key staff had the opportunity to complete the MF2C Pilot Transition Training in May/June 2022. The Programme Delivery Service is currently maintaining delivery of the MF:MC programme to relevant service users, while at the same time 2 service users are completing the pilot MF2C programme. When the pilot has been evaluated and rolled out, we will transition to increasing MF2C delivery while reducing and phasing out MF:MC delivery.

### 2.3.7 WOMENS SERVICES

North Lanarkshire Women's Service was set up in 2014 in response to the Commission on Women Offenders by Dame Elish Angiolini. The service works with women who are involved in the justice system. In the main they are subject to Community Payback Orders with requirements of supervision and/or unpaid work, but also to parole board licences, bail supervision and alternatives to prosecution. We work in partnership with each woman to assess, plan, intervene/support and review their needs to assist them to build on their strengths and work towards achieving their goals and aspirations. Where appropriate the female specific service also allows for female only unpaid work activities.

Most of the women using the service have experienced trauma and much of the work involves supporting them with their emotional and mental health needs with some women facing challenges accessing specialist mental health support. As in other areas of social work multi agency and relational working is key with the following a practice example:

- *A woman subject to CPO with unpaid work was not engaging and refused supports offered. Through persevering and persisting in building a relationship with the woman over a lengthy period the woman accepted a referral to housing and was given accommodation. Work was undertaken to build her confidence in order that she felt*

*able to undertake a placement. The service user completed her unpaid work hours within the Women's Service activity group.*

### 2.3.8 THROUGH-CARE (BRIDGES AND BEYOND)

- The NLC Justice Throughcare service have successfully delivered the Community Bridges Project in partnership with HMP Addiewell for a number of years. The small support team is funded jointly by NLC and the North Lanarkshire Alcohol and Drug Partnership and focuses on the reintegration and support of those leaving custody who are not supported through statutory throughcare arrangements. During this period rough additional funding from the 'No-one left behind' employability fund, the community bridges project has been expanded through the recruitment of a support worker who offers the service in other prisons under the 'Bridges and Beyond' and is in the early stages of planning and implementation. This will enable the service to offer voluntary throughcare and support to more service users who are impact by short term prison sentences and experience a range of wellbeing issues as a result.

### 2.3.9 CHALLENGES

There have remained several challenges impacting on the delivery of justice social work services over this period including:

- Compliance with CPOs – Pandemic related factors such as loss of routine and social isolation have impacted on the compliance of some service users with the conditions of their Community Payback Orders. Staff have addressed this by using motivational interviewing techniques and providing support.
- Staffing - As reflected elsewhere in this report the service has had some difficulties recruiting new staff to vacancies, particularly those temporarily funded by the Scottish Government Covid Recovery Grant. This is a national issue which has impacted both on workloads and on the services' ability to maximise the use of intensive groupwork programmes. In response, managers have continued to support staff and, where required, contingency plans were introduced to support a service wide response to demand challenges for example, report writing rotas, and continuing to enhance the agility and flexibility of the staff group to ensure that teams can work effectively across organisational and geographical boundaries.
- Decline in Wellbeing - We have utilised local authority policies incorporating stress assessments and a range of resources to support staff and service users to address issues including signposting to NHS, voluntary and third sector services as well as North Lanarkshire's Time for Talking Service.

- Cost of living – We continue to support people by referring them to North Lanarkshire Council’s Tackling Poverty Team, the DWP, Social Security Scotland and third sector services with a new pathway to the Tackling Poverty team enabling quicker access to key financial supports. The geography of North Lanarkshire Council can at times require individual service users to travel to identified placements and collection points. This has been difficult at times due to individuals’ financial circumstances. Where possible, adjustments have been made individuals have been matched to a local site placements. Effective collaboration between the Justice service, the Court Social work Service and the Tackling Poverty Team has also resulted in those leaving Court having access to written information and advice covering a range of issues and signposting towards support options, including support with benefits, Housing, Food and Fuel Poverty.

## 2.4 CHILDREN AND FAMILIES SOCIAL WORK SERVICES

### 2.4.1 KEEPING THE PROMISE

Children and Families Social Work has continued to play a key leadership role in the Council’s commitment to keep The Promise. With reference to the [National Promise Plan 21-24](#), we have focused on supporting care experienced children and young people live with or establish links with brothers and sisters, their right to an education and improving support when moving on from care. We have also worked with the wider partnership in developing plans for whole family support to prevent care and reduce families experiencing crises.

A Promise Conference was held on February 2023 which drew attention to, and shared, good practice and areas for development including moving on, working with families impacted by domestic abuse and trauma. The conference programme was co-chaired and co-produced by our care experienced development workers.

Our balance of care data continues to demonstrate a commitment to protect and support children with their families and communities, for example through Family Group Decision making. The provision of flexible and integrated family support also ensured that the number of children cared for in out of authority residential care continued to reduce. We are however beginning to see increased demand in relation to our children’s house in part due to young people presenting with increasing complex needs from within our communities, in part due to a greater number of unaccompanied asylum-seeking children arriving through the National Transfer Scheme and in part also because of our commitment to continuing care for older young people. There was a notable increase in the number of children living with our own North Lanarkshire carers despite a reduction in carer numbers which is due to our carers team working with, and supporting, our carers to look after brothers and sisters to keep them together in North Lanarkshire -

Placement Type	31-Mar-19	31-Mar-20	31-Mar-21	31-Mar-22	31-Mar-23
Foster care (NLC)	119	100	112	94	113
Foster care (Independent)	47	67	61	53	54
Home Supervision	294	298	227	188	201
Formal Kinship Care	296	355	321	307	319
Informal kinship Care	150	153	170	183	190
Residential (NLC)	27	28	27	33	33
Residential (Independent)	12	13	11	11	9
Secure	4	0	2	1	2
Continuing Care	39	45	53	73	70

Continuing to achieve this balance of care is significant as it must also be seen in the context of an increase in demand for children and families social work support in the post-pandemic period as shown in the table below. Although referrals decreased very slightly in 22/23, there has been an overall increase of 13 % since 2019.

Year	Number of Referrals
2022/23	10793
2021/22	10858
2020/21	10253
2019/20	9077
2018/19	9519

There has also been a significant rise (65% 18/19 to 22/23) in child protection referrals as illustrated below -

Year	Number of Referrals	Investigations	% of Referrals Proceeding to Investigation	Number of Investigations that Proceeded to Case Conference	Number Of Registrations from Case Conferences
2022/23	1895	775	41%	264	198
2021/22	1714	754	44%	229	177
2020/21	1482	831	56%	261	199
2019/20	1617	800	49%	339	254
2018/19	1150	642	56%	329	251
2017/18	1030	692	67%	340	252

This is due to our child protection framework supporting increased consistency in practice, recognition of all forms of harm, strengthened by refreshed IRD guidance. While we have not seen a rise in the numbers of children whose names are placed on the Child Protection Register, there has been an increase in registration of older children aged 12 +. What this indicates, in part, is that practitioners, supported by our commitments to keep The Promise and UNCRC and investment in contextual safeguarding, are increasingly focussing on and recognising the protection of older children and their rights. The service has continued to work with the partners in the Child Protection Committee to monitor and understand the relationship between child protection referrals and rates of registration to ensure the right children get the right support when they need it.



## 2.4.2 INVOLVING YOUNG PEOPLE

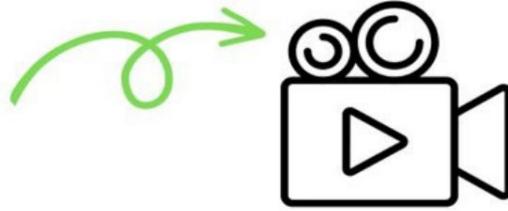
Our team of Care Experienced Promise Development Workers continued to take a key leadership role in the development of social work services, influencing policy and practice and helping us to involve children and young people in the design of our service improvements. Including –

- Our review of services for children in conflict with the law
- Re-design of the materials and approach to pathway planning, now called ‘My Future Plan’.
- A revised framework for family time

Our Champion’s Board has continued to go from strength to strength. We have 3 linked groups the TNT (Today Not Tomorrow), the Mad Middles and Crafty Foxes who ran a development session with the Champions Board that included the Chief Officers Group and elected members. Following work to identify need, TNT were involved in co-producing a bespoke counselling service for care experienced young people and took a lead role in all stages of the process including the formal selection of the provider, working with our procurement team.

our concern is, that by the time an offer of support is received, it's too late





### 2.4.3 A GOOD CHILDHOOD: ACHIEVING A LOVING A CARING HOME

#### Adoption, Fostering, Kinship and Continuing Care

The Children's Carers Service provides support to kinship carers, supported carers of young adults, as well as to adopters and foster carers to achieve permanent loving homes for children and young people into adulthood.

The adoption and fostering service was inspected in January 2023, the following are areas were identified as strengths:

- Children experienced a high level of warm and nurturing care within their families. There were limited moves between caregiving families as plans progressed in a timely manner. The service has consistently performed in the top quartile in Scotland in this area with only 6.9% of children experiencing more than one placement in 2021/22 (latest available data).
- There were strong, positive relationships between adoptive parents and their link social workers. Adoptive parents felt well supported and valued by the service.
- There was evidence of positive outcomes for children. This was supported by good quality assessments of adoptive parents and in the support provided following the placement of children.
- Our planning to achieve permanence for children has continued to improve,
- Children experienced love and compassion from their foster carers.
- Foster carers were well supported and felt valued by their link workers. They had access to a comprehensive training programme and regular support groups.

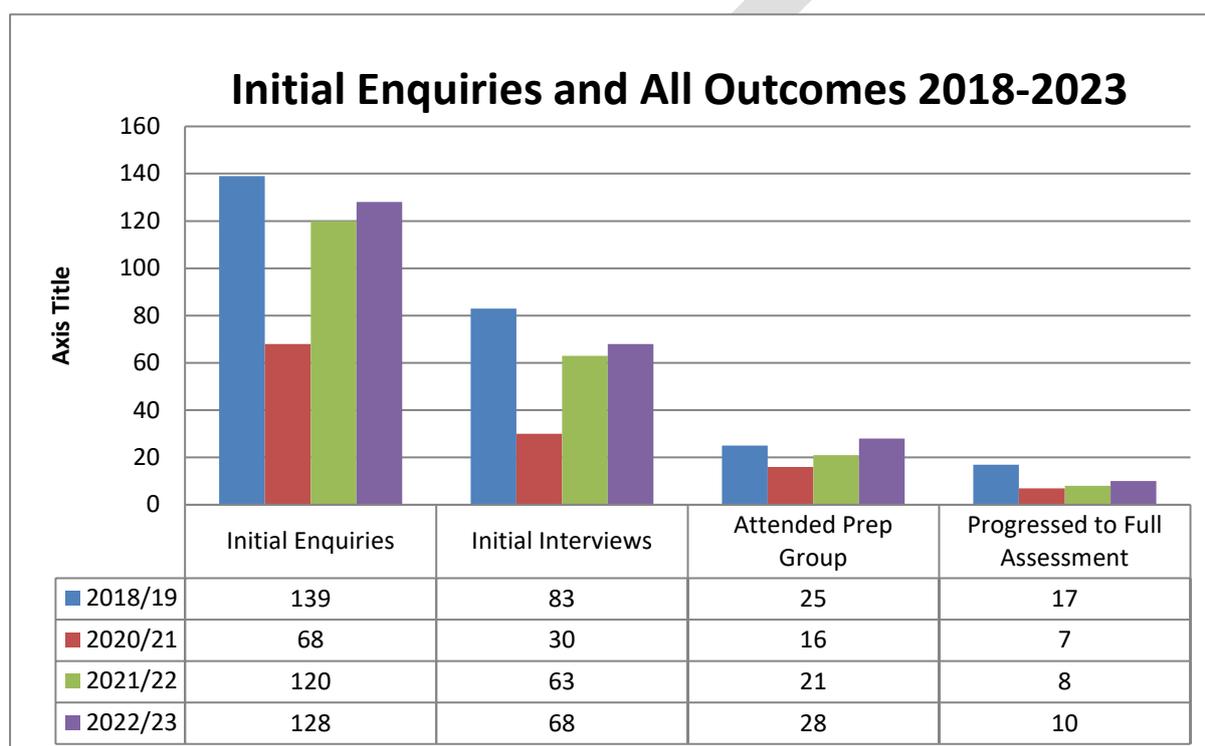
A number of areas for improvement were also identified including the need to ensure more timeous reviews where carers were providing support for children and young people out with their registration (additional children or out with agreed age category).

### Recruitment of foster carers

Significant challenges continued in the recruitment of new foster carers with North Lanarkshire facing similar difficulties to that experienced across Scotland. However, the team worked to develop its local partnerships to have a wider local base in addition to the normal media outlets. Presentations were made to strategic groups as well as articles specifically shared with our health, education, and voluntary sector colleagues.

Enquiries to the service remained relatively high with 120 enquiries made up to March 2021-22 for fostering and adoption however the conversion rate for approval, particularly for fostering was low. The conversation rate from people who attended preparatory groups who then applied decreased to 35.7%.

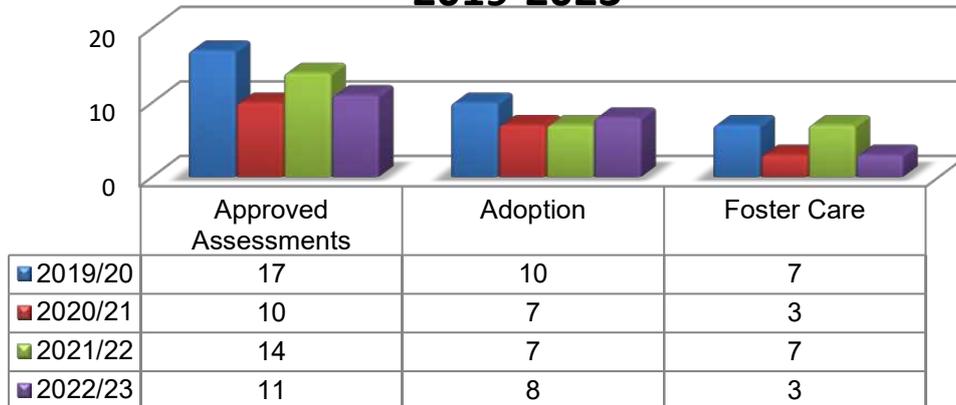
The following table shows the trends between 2018-2023:



Moving forward we will drill down on why the enquires remain relatively high compared to the conversion rate for progressing to full assessment. We will consider how we can strengthen our efforts to discuss in more detail when an individual, family do not progress to full fostering assessment.

Recruitment of adopters remained high, and the service saw a marked increase in the request for post adoption support. The following table identifies the trend for the number of approved assessments, the total and split across adoption and fostering from 2019/20 to 2022/23.

## Approved Assessments by Type of Resource 2019-2023

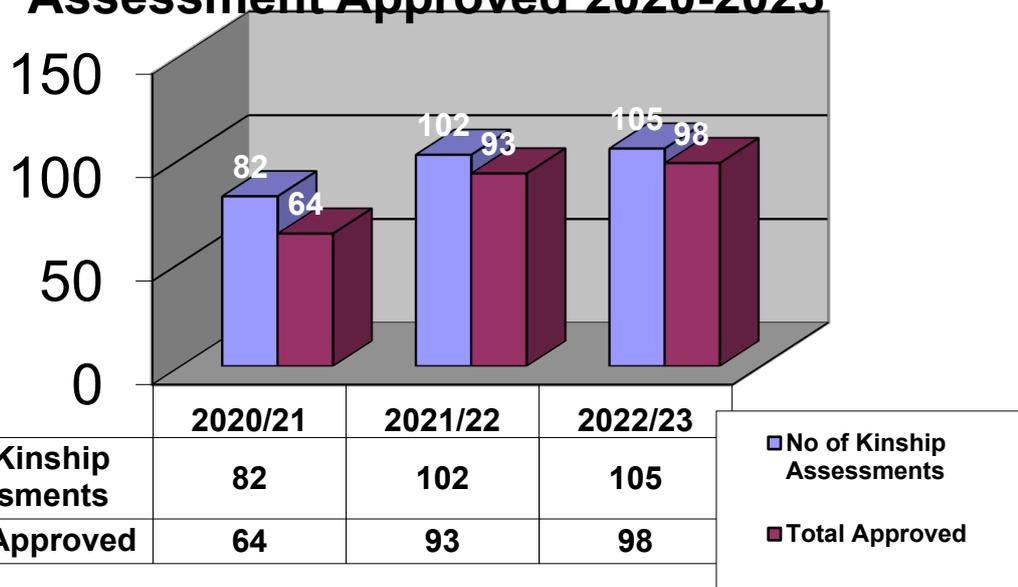


### Kinship

Most children and young people experiencing care away from home are supported through kinship arrangements there was increasing demand for completion of kinship assessments over this period with the team having around 24 ongoing kinship assessments at any given time. Overall, in the past 5 years, there has been a 14% increase in the number of kinship carers.

There also continued to be an increase in new enquiries to the service from families looking to be assessed as kinship carers. The following table highlights, assessment activity in this area with approved assessments increasing by 53% since 2020 -

**Table 4. Number of Kinship Assessment Approved 2020-2023**



The kinship team supported 150 kinship families over the year, with other kinship families receiving support through our localities. Emotional, practical, and financial support was provided to kinship carers on a one-to-one basis to help them in their kinship role and meet the needs of the children placed in their care.

### **Support groups adoption, fostering and kinship**

Providing support to carers of children and young people is recognised within the Promise as critical to improving outcomes and the experience Carer support groups took place regularly, held centrally for fostering and adoption and in seven local areas, for kinship carers with support groups for kinship carers facilitated by the kinship care team and a colleague from Nurture Scotland.

Due to the increasing numbers attending the kinship support groups, the team will be expanding the options available to all carers, and we are now developing a shared training strategy to extend the training available to as many carers as possible.

### **Brothers and Sisters**

Existing North Lanarkshire carers have offered commitment and flexibility to maintain children within their local communities and keep brothers and sisters together.

Development in this area is complex; analysis in March 2022 demonstrated that 65% of children in care were separated from at least one brother or sister. In response to this, the team developed a new strategy, co-led by our care experienced development workers and involving carers, to support brothers and sisters stay together when they need to be cared for away from home. This comprises specific support to carers as well as a focus on recruiting carers with the capacity to look after brothers and sisters together. This led to 86% of children who were required to be looked after in foster placements during this period, remaining with their brother and sisters. There were also two groups of three siblings who have been secured with their adoptive families. In addition, there is an ongoing focus on the assessment and promotion of family time, with the voice of children and parents central to how we can be more creative in our approach, while keeping children safe.

### **National Transfer Scheme (NTS)**

Throughout the year, North Lanarkshire continued to participate in the National Transfer Scheme, (NTS), supporting the organised transfer of unaccompanied asylum-seeking children scheme. All young people who arrived were allocated to Social Work staff via the Resettlement team and benefited from a partnership approach to support. Over the period we supported 11 young people arriving through NTS, the majority placed, at least for an initial period, in one of our children's houses allowing them to build relationships with the staff and the other young people who live in the house leading to learning about each other's cultures, values and others' experiences.

We have also strengthened staff confidence and learning and development around human trafficking and exploitation, which ensured our workforce are confident to address any emerging risks.

The challenges of increasing numbers of children and young people arriving in North Lanarkshire through the NTS scheme during the period of this report has however created additional pressures across our systems, especially in terms of capacity in our 5 children's houses. We remain committed to make sure the children, young people have positive experiences to support them to deal with their trauma and when they can, take advantage of further educational opportunities, keeping their cultural identity as well as helping them to reconnect with their origins and their families. Our children's houses, resettlement team and locality staff have responded well and provided a high-quality level of care and support.

### Children's Houses

In addition to the commitment to unaccompanied asylum-seeking children, our children's houses created stability for 6 young people through continuing care and responded to the needs of 4 children who returned to North Lanarkshire from independent foster placement which had ended in an unplanned way.

Staff have been trained in PPB (Promoting Positive Behaviours), trauma informed practice and contextual Safeguarding which has increased confidence and competence of the residential workforce and will ultimately benefit the young people in our care as staff have better understanding of their needs.

We also had a significant focus on improving recording practice and language in partnership with our Care Experienced Development workers. This led to a positive impact in how we record children and young people's case notes and in how we save photographs and store other positive milestones in our young people's lives.

#### 2.4.4 MOVING ON: SUPPORTING CARE EXPERIENCED YOUNG PEOPLE WHO HAVE LEFT CARE

As at March 2023, 687 young people and adults were eligible for aftercare support, with 259 in receipt of direct social work support. We therefore strengthened the development of our Aftercare Hub and improved the awareness of the rights and entitlements of care leavers and a 'no wrong door' approach. The Aftercare Hub has two social workers and three support workers who can work exclusively with care leavers in need of intensive support across 7 days weeks and supported over 100 care leavers in 2022/23.

A Care Experienced young people Housing Operation Group was established to review the challenges and barriers to young people accessing and sustaining their own home after leaving care. This resulted in a review of the Joint Housing and Education and Families Protocol for Care Leavers. A significant development to support young people leaving care and care leavers accessing accommodation has been the identification of Housing Champions as the main point of contact. This has enhanced the co-ordination of accommodation options through

Housing Services and the youth housing supports and improved communication between services to prepare and plan for care experienced young people to secure and sustain their home in. In recognition of the complex barriers facing young people the Operational group expanded its remit and now comprises Barnardo's, DWP, NLC Revenue and Benefits, Skills Development Scotland, the Tackling Poverty Team as well as care experienced young people.

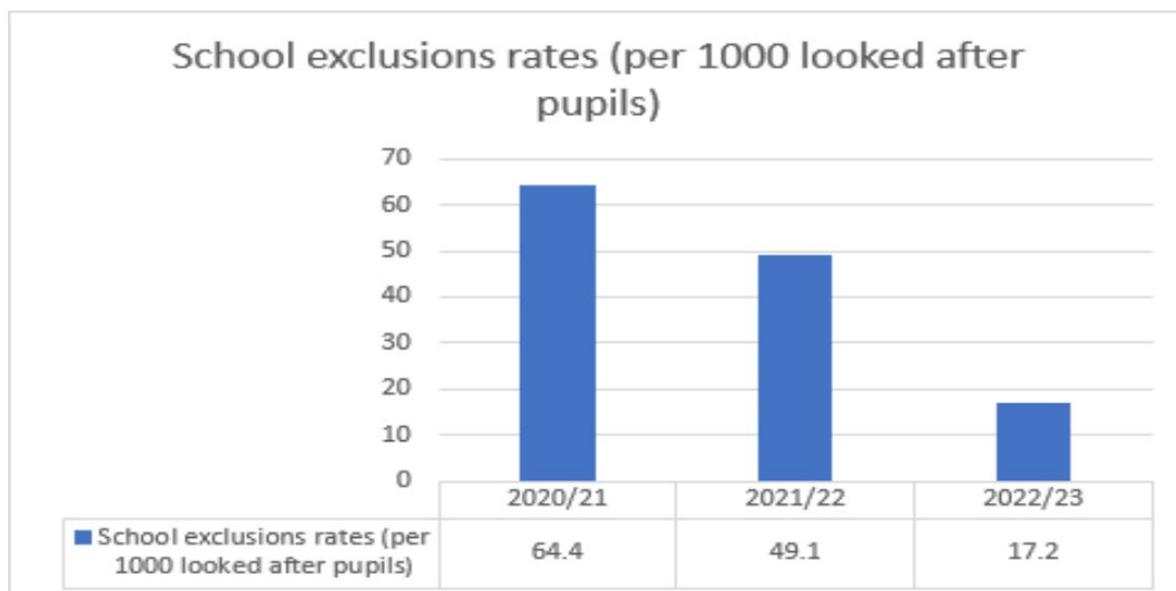
### Lifelong Links

In January 2022, we were able to expand the Family Group Decision-Making (FGDM) team by two social workers through a successful joint application from NLC and the Family Rights Group to the Promise Partnership Fund to implement a Lifelong Links service. This is an approach to support care experienced children and young people reconnect with family and important people when relationships have broken down or been severed through life changes.

Our year one priority was to set up the service focusing on care leavers in the transition out of care and into adulthood to ensure they could reconnect with important people in their network, including brother and sisters, before widening the service to include other young people. Following successful implementation in May 2022, the service worked with 20 young people and adults from 13 to 28 years. Those involved with the service were supported to understand their family background, their care experience and identify the important family and others they want to reconnect with. Early indicators are the service is being received positively and making a difference to the young people, including some reconnecting, and establishing relationships with birth parents, former foster carers and support staff and in so doing strengthening their natural support networks.

### 2.4.5 A RIGHT TO EDUCATION

Our Virtual School, which is an integrated service comprising social work and education staff, has a focus on inclusion, providing bespoke packages of support based on a child's needs, strengths, interests, and future career aspirations. Working in partnership with schools and other colleagues, the Virtual School has been pivotal in reducing exclusions by 89% since its establishment in 2019/20.



In session 2022, 93.3% of relevant young people experiencing care at home achieved SQA passes; Nat 3 and Nat 4. This is the highest level recorded since 2016. 75% also achieved Highers in session 2022. Attainment data for care experienced learners at S4 and S5 has risen across almost all indicators, as shown in the table below. We will continue to build upon this progress by supporting CEYP to gain further qualifications in S6. Since 2019/20 105 CEYP at risk of leaving school without formal qualifications achieved 239 Nat 3 or 4 awards.

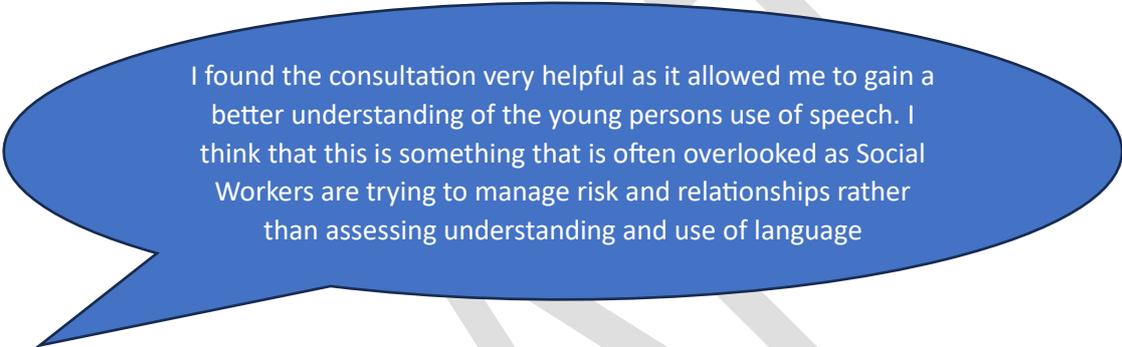
		2018	2019	2020	2021	2022
Stage 4	Nat 3 (+5)	59.6%	48.5%	48.0%	48.6%	67.4%
	Nat 4 (+5)	53.9%	38.2%	39.7%	41.7%	55.8%
	Nat 5 (+5)	15.4%	7.4%	6.9%	9.7%	11.6%
Stage 5	Highers (+1)	18.2%	21.2%	13.8%	22.1%	19.2%
	Highers (+3)	4.6%	7.7%	6.9%	7.8%	11.0%
	Highers (+5)	1.5%	1.9%	0.0%	1.3%	1.4%
Stage 6	Highers (+3)	9.8%	6.1%	10.9%	9.8%	13.0%
	Highers (+5)	4.9%	3.0%	4.4%	8.2%	2.6%
	Adv. Highers (+1)	3.3%	0.0%	2.2%	3.3%	1.3%

#### 2.4.6 YOUNG PEOPLE IN CONFLICT WITH THE LAW/DECRIMINALISATION OF CARE EXPERIENCED YOUNG PEOPLE

In December 2022, we concluded our review of the support that we provide to young people in conflict with the law (youth justice) to ensure that the services we provide meet the outcomes and priorities outlined in Justice for children and young people – a rights respecting approach (Scottish Government, 2021). The review was started from a focus on practice as well as the experiences and outcomes for young people rather than organisational arrangements.

During the period of 2022/23 there was 211 children referred to Scottish Children’s Reporters Administration (SCRA) on offence grounds and 86 reports jointly considered by the Procurator

Fiscal and Reporter. We recognised that we had higher numbers of children referred to the Reporter on offence grounds relative to the national position and that exploitation and other harms are often factors when young people come into conflict with the law. In January 2023, we therefore started a pilot, in partnership with SCRA and South Lanarkshire Council (SLC), for children referred to the Reporter on offence-based grounds. The aim is to improve outcomes for children by increasing their understanding of their rights, improving relationships and family support with the important people in their lives and ensuring orders are the scaffolding of the care plan, To reduce the risk of secure care and remand we enhanced our intensive support to young people through ADP funding and introduced a dedicated speech and language service to assess unmet need and enable young people to exercise their rights in children's hearings (or court) by expressing their views more effectively through bespoke support in communication skills. Speech and Language Therapists provided support to 9 young people and offered specific advice and guidance to their social workers:



I found the consultation very helpful as it allowed me to gain a better understanding of the young persons use of speech. I think that this is something that is often overlooked as Social Workers are trying to manage risk and relationships rather than assessing understanding and use of language

Diversion from Prosecution is a non-conviction disposal. There were 27 diversion reports requested in 2022/23, this was a slight decrease from 2021/22 in which 29 reports were requested. Each of these Diversion reports were completed successfully and the young people were provided with bespoke interventions to address their needs. This disposal was traditionally used for lower-level offences, however, over the course of the year young people were referred by the Fiscal for diversion in more serious situations. In response to these changes the diversion process was enhanced to improve assessment and increase support.

Locally the number of young people either remanded or sentenced to custody has continued to decrease in line with national trends. Nevertheless, there were 25 new admissions to Polmont YOI from North Lanarkshire in 2022/23. Four of these young people were under the age of 18. To support this group of young people, staff from Youth Bridges (part of our intensive service) engage with all young people under the age of 21 who have had their liberty restricted. They will meet with all young people within 3 days of being received into custody and work in partnership with prison, health and other staff to support the young people and arrange family contact prioritising building relationships with young people, so they have a trusted worker to support them through the transition back to the community. With the support of Youth Bridges, nearly 90% of the young people who returned to the community were not involved in further offending and 69% reported a reduction in alcohol and drug use.

Structured Deferred Sentences provide time limited, intensive support that can be delivered with a greater degree of flexibility than statutory Community Payback Orders. This approach

aims to prevent young people being drawn further into the justice system. During the period of 2022/23 there were six young people under the age of 18 made subject to SDS, this had doubled from three the previous year. An SDS court was established in Airdrie Sheriff Court in July 2022.

#### 2.4.7 WHOLE FAMILY SUPPORT AND PROTECTING CHILDREN AND YOUNG PEOPLE AT RISK OF HARM

##### Family Group Decision Making (FGDM)

FGDM is a strengths-based approach to support children remain in their family. This is facilitated through a family led decision making process where a child or young person's family and friends are supported and prepared to come together in a Family Group Meeting to develop a plan which protects and supports the child and or young person.

Through this approach this service continued to make considerable progress in successfully supporting children and young people remain within or return to their family. Over the past year there has been an increase in referrals to the FGDM service, from 58 (2021/22) to 99 (2022/23). During this period 57 families participated in FGDM Meetings and a further 15 families achieved a plan of support without the need for a formal meeting. Of the 57 families' plans 34 children remained with their families or kinship carers or were returned to their families, 7 families identified supports to increase their network of support and 2 families were supported to reconnect and establish a plan of contact. Feedback from children, young people and families has been positive.

No	Circumstances	Outcome
10	Pre-Birth	9 babies' home with parents 1 – baby – friends/family
22	Prevent Accommodation	11 –Home with parents 8 - With family/friends 1- Foster Care
16	Rehabilitation Plan	8 – Returned to parental care 6 – with friends/family 1 – Foster Care NLC 1 -Children's House NLC
7	Family Support	7 – Remained with parents
2	Family Time (Contact) Plan	2 – Reconnected with parents/extended family

Families found this process inclusive, enabling and empowering:



*I am just so happy, my family are finally chatting*



*It was just brilliant. It is really a really worthwhile thing to do. We are now all singing from the same hymn sheet*

### **Intensive Services**

Our Intensive Service provides support to children, young people and their families to reduce the likelihood of a breakdown in family relationships and children being cared for away from home and through additional investment since 2021 the service also supports care experienced young people who have left care across 7 days a week. Support comprises intensive one to one support, parenting and family work, and group work programmes. Over 2022/23 the service provided support to 901 children and young people, representing at 29% increase compared to 20/21. The service provides support to over 30 young people and families each weekend and works closely with the Social Work Emergency Service (SWES) to co-ordinate the response required in relation to any children and families' referrals received at SWES.

### **Joint Investigative Interviews – Implementation of the Scottish Child Interview Model**

The Scottish Child Interview Model (SCIM) is a new approach to joint investigative interviewing (JII) by Police and social work for child victims and witnesses. This approach is trauma informed, maintaining the focus upon the needs of the child in the interview and minimising the risk of further traumatising, whilst seeking to achieve to best evidence through improved planning and interview techniques. Lanarkshire was the first area to implement the SCIM for JII model in Scotland in February 2020. The team have undertaken 1482 interviews utilising the SCIM for JII in the first three years of practice. Between Feb 2022 and Jan 2023 460 interviews were undertaken, with a disclosure rate of 71%. The three areas of highest concern underlying the reason for JII are consistently children experiencing physical abuse, sexual abuse and thirdly, domestic abuse. The data indicates that the age range of children being interviewed is from 3 to over 16 years. As the interviewers have grown in confidence, they have been successfully undertaking increasingly complex interviews involving younger children and children who experience significant learning and or communication needs.

A significant shift in the SCIM approach to interviewing is in the preparation and planning for the interview specific to the child's needs and circumstances. This has been supported across

the local partnership and through contact with families to enable interviewers access appropriate and relevant information to support the interview plan for the child or young person. Feedback from children and their families has been positive about the experience of the interview. Many children reported that they were “scared” or “worried” approaching the interview venue, but on arrival the surrounding were “warm” and “friendly” with lots of “colour” and “pictures”.



#### 2.4.8 GENDER BASED VIOLENCE

Domestic Abuse is a key priority for social work and its partners. In 2022-2023 there were 3221 domestic abuse referrals. Domestic abuse was also the second highest recorded concerns for children at the time of child protection registration. We therefore continued to invest in two key approaches: Safe and Together and Family Practice Up2U.

##### Safe and Together

The Violence against Women Strategic Group and Child Protection Committee have provided direction for the implementation of Safe and Together with social work staff having a key role in embedding the model locally. There are now 527 staff trained in Safe and Together (core and overview), this includes social work, education, NHS, housing and community and voluntary sector.

NLC had support from Improvement Service in 2022 to carry out a Baseline Evaluation of Safe and Together Implementation in North Lanarkshire. The information gathered from this evaluation allowed an Action Plan to be created with a focus on *Communication* of the Safe and Together Model, delivery of *Training* to reach wider groups of professionals, to *Support Learning* into Practice, and How to *Measure* the Change.

There are Safe & Together (S&T) Champions in each of the 6 Social Work teams, Intensive Services and Corporate Parenting and locality managers and practitioners' access and contribute to Safe and Together Case Consultations. Practitioners who are working with families where domestic abuse is an issue, can access support from the Safe and Together champions and Trainers to look at a case through a Safe and Together lens.

Work will continue with the Safe and Together Institute and Improvement Service to support ways in which we can measure change and the impact of the model and its approaches on families affected by domestic abuse. This will include multi-agency case file audits and focus groups with social work staff, trained in the model in their role as the lead professional.

### **UP2U Family Practice Model**

The approach to addressing domestic abuse and tackling its impact on families, is a partnership approach. Social workers as the lead professionals are integral to assessment and planning for families.

As referenced in 2.3.5 above in collaboration with Justice Services, Children and Families, have implemented this model to engage with individuals who are not mandated by the court but who have recognised the need to address their abusive behaviours and its impact on partners and as parents.

The model is a trauma informed, relational based, therapeutic behaviour change programme. with implementation supported by high quality training. It provides a framework to work in partnership with parents and children, young people to address the impact of domestic abuse in their lives. It includes partner support to consider safety planning as well as offering practical and emotional support and includes 1:1 and groupwork support.

The model allows for trusting relationships to be developed which support children/young people and their voice to be heard, led around a family's own experience and support network.

The Up2U Family Practice Model compliments the Safe and Together Model, providing additional tools for social workers and support workers to use, supporting families in the model and approach which best meets their needs.

## **2.5 ADULT SOCIAL WORK SERVICES**

As can be seen throughout this year's report, there continues to be a range of challenges to meet in the delivery of Adult Social Work Services. These include the legacy impacts of the COVID pandemic, the increased demand for support across cared for/ supported people, as well as unpaid carers, recruitment challenges, and the cost-of-living crisis. This report reflects the challenges experienced in sustaining quality care in line with statutory and regulatory requirements as well as work in redesigning and improving services to help progress outcomes for individuals in receipt of support or services.

During 2021/22 investment through the Winter Planning and Enhanced Support funding stream from the Scottish Government was introduced to increase capacity in direct provision as well as to improve assessment capacity connected and aligned through our business plan to local operational and strategic priorities. Whilst some of this investment, for example in the Home Assessment Team (HAT) is beginning to impact positively at service as well as

individual level, the volume and complexity of demand in 2022/23, alongside ongoing workforce challenges continue to create capacity pressures. Specific pressure points continue in areas such as: Support at Home Mental Health Officer capacity and in adult protection. The narrative below provides further detail on service activity, performance, innovation and improvement as well as areas of challenge.

## **EARLY AND PREVENTATIVE INTERVENTIONS – RIGHT SUPPORT, RIGHT TIME**

### **2.5.1 GETTING IT RIGHT FOR EVERYONE (GIRFE)**

Getting it right for everyone (GIRFE) is a Scottish Government multi-agency approach to health and social care support and services. It builds on existing adult best practice, as well as learning from Getting It Right for Every Child (GIRFEC.) It aims to provide a model to deliver the Community Health and Social Care Integrated Services framework which supports person centred outcomes.

In line with practice developments in North Lanarkshire and nationally over the past decade, GIRFE is focused on providing a more personalised way to access help and support when people need it. It aims to place the person at the centre of all decision making that affects them, with a joined-up consistent approach regardless of the support needed at any stage of life.

It is intended that the GIRFE approach will ultimately form the future practice model of all health and social care professionals and shape the design and delivery of services, ensuring that people's needs are met from young adulthood to end of life care. GIRFE is being co-designed by pathfinder projects located in different local authority areas alongside the Scottish Government and will be tested and developed to enable the approach to be more widely interpreted and implemented in wider contexts.

North Lanarkshire Health and Social Care Partnership (NL HSCP) is one of 10 pathfinders with the progression of this work supported by the Scottish Government's GIRFE Design School. North Lanarkshire's focus is on Frailty and Older People with the pathfinder linking to a range of local as well as national aspirations, policies and strategies including: The Plan for North Lanarkshire; the Health & Social Care North Lanarkshire Strategic Commissioning Plan and the Frailty Strategy. It is planned that over the next 12 months, NL HSCP will progress a GIRFE pathfinder initiative in Wishaw. Learning from this will inform a national sense-making process for future expansion of GIRFE across North Lanarkshire and Scotland.

### **2.5.2 MAKING LIFE EASIER**

The Making Life Easier team has two Disability Information Officers and a newly recruited Resource Worker. Making Life Easier (MLE) is an online resource offering all residents of North Lanarkshire the tools to live active and healthy lives, self-manage their health conditions and providing access to direct supports and services.

The team is actively promoting Making Life Easier and the services available across North Lanarkshire through participation in events, presentations to local support groups and most recently with information stalls working in partnership with NL Libraries, University Hospitals, RNIB and St. Andrews Hospice. Whilst new additions to the website include Long Covid Rehab Team and Assistive Technology Team services. Planned development work includes changes to the user journey, simplifying assessment outcomes and an interactive body map.

In 2022/23, 11,566 people in North Lanarkshire used MLE, this is a 43% increase on the previous year. Of these users, 87.7% were new visitors and 1,023 people completed a self-assessment with a further 465 people completing a LifeCurve™ assessment. Making Life Easier continues to be a reliable support for all.

[Making Life Easier website](#)  
[X \(Twitter Account\)](#)

### 2.5.3 ASSISTIVE TECHNOLOGY

The ethos of the team is to **'Think Tech First'** and the ambition is to achieve better outcomes for people and their carers. From the team's inception they have worked tirelessly to promote technology across the partnership. There is a simple accessible referral process and the team assist from advice to installation and instruction in the use of equipment.

During 2022/23 the team has participated in 53 events, meetings and presentations across the partnership and for external agencies and built strong links in locality teams, have been providing a tech advice duty service for Access Social Work and are about to embed the same model into the HAT (Home Assessment Team) to further the 'think tech first' agenda. The aim is that the consideration of a technology solution is at the start of any assessment journey in health and social care North Lanarkshire.

The assistive technology flat remains an innovative project showcasing a mixture of service-provided equipment and mainstream technology, focusing on promoting safety, enhancing wellbeing, and supporting choice for people.

Over the reporting period there have been 406 referrals to the assistive tech team. There has been a marked increase of uptake from other staff members as well as internal and external agencies in visiting the assistive technology flat. This has in turn seen an increased interest in technology and more requests for NLC-provided items. From January to June 2022 to January to June 2023 there has been an increase of 162% in tech flat visits.

An interactive magazine using the Paper Tiger platform to provide more information about the service is accessible via the link below.

[Assistive Technology Team Page Tiger](#)  
[Assistive Technology catalogue Page Tiger](#)

## 2.5.4 COMMUNITY ALARMS

The Community Alarm Service supports vulnerable service users to remain safely in their own homes. providing a service that gives both the service user and their family reassurance that help is always available if required. The service operates 24 hours a day, every day of the year and supports over 7,000 people living within their own homes across North Lanarkshire. A community alarm can consist of a standard alarm base unit and pendant alarm and, depending on the person's level of need, additional devices such as bed and epilepsy sensors, fall detectors and GPS devices can be used to ensure any safety concerns are satisfied.

The Community Alarm Service provides a full call monitoring service with calls received at a central alarm receiving centre where handlers assess each contact to gain insight into presenting issues and needs and risks. These can include matters such as falls, failure to reply to the call handler and activation of smoke alarms with responses including dispatching a home support worker, contacting family/friends to respond, or contacting emergency services.

On average the response teams attend more than 400 service users who experience uninjured falls per month. This is of significant benefit to the Scottish Ambulance Service and the individual, as it minimises the time someone waits for assistance while easing resource requirements for ambulance staff to attend quickly.

Recognising the benefit of high service standards, the team are members of the Telecare Services Association and registered with the Care Inspectorate. The [recent inspection](#) of the service was positive, in relation to the quality of service provided.

### Analogue to Digital

The analogue to digital telecare transition is a major change project with considerable associated challenges for our Community Alarm Service through the transition. This work is progressing and to date 2820 of 6500 Community Alarms have been exchanged with new hybrid Digital Alarms. This workstream will continue over the next 18 months to ensure all our community alarms are replaced prior to the 2025 deadline. The current Alarm Receiving Centre will also be transitioned to a fully digital solution in the next 18 months, bringing with it many benefits including increased resilience, enhanced end user experience and opportunities for proactive person-centred solutions to be implemented.

## 2.5.5 EQUIPMENT & ADAPTATION SERVICE (EAS)

The Equipment & adaptation service, continues to support residents of north Lanarkshire, proving equipment and adaptations. In addition, we provide NHS Lanarkshire equipment pan Lanarkshire. The service has continued to deliver full services despite remaining challenges of waiting list from covid and staff vacancies and have recently appointed to most outstanding posts.

Over the last year 209,837 pieces of equipment were delivered by the service and a total of 3353 adaptations spanning privately owned, public rented and Housing Association properties.

We have recently commenced a review of the service to ensure that we are meeting the future demand needs of service users and their carers'. In addition, we are in the process of purchasing a new computer order system to streamline processes and improve service delivery spanning the Partnerships.

#### 2.5.6 LOCALITY SUPPORT SERVICES

The six Locality Support Services (LSS) provide self-directed, strength-based support to adults who have a disability/long term health condition to have healthy, active, inclusive lives in their communities. LSS use "service last," approach – ensuring that people exercise choice and control over progression to outcomes. Following assessment, LSS provides people with appropriate support to help meet their needs and desired outcomes. The aim is early intervention, to maintain independence and to promote self-management. Reviews take place at least six monthly with the supported person central to the process. The service offers flexible support across 7 days including evenings.

At referral, to minimise reliance on services, people are supported to identify and consider opportunities available to them through natural connections such as family as well as through their local community. Support may be for example, to strengthen connections, provide travel training or budgeting support. Effective community mapping and local area co-ordination has furnished LSS with detailed knowledge of local resources. Sharing buildings has increased opportunities for connection with other team and has benefited partnership working.

Strong links with parents/carers are maintained and LSS work closely with Lanarkshire Carers who progress Adult Carer Support Plans. This includes working with families to access support and forward plan, including to a time when they may no longer be able or around to provide care. This support often includes supporting families to consider support for the cared for person through an individual budget or a carer budget, within the wider approach to Self-Directed Support (SDS).

The Care Inspectorate grades for the LSS's are currently overall 5 (very good) with no areas for improvement or requirements.

#### 2.5.7 INTEGRATED DAY SERVICES

Integrated Day Services for Older Adults have continued to work with an aim to support people with complex support needs to continue to live in their own homes safely, often preventing admissions to hospital. All services have now returned to working as a building-based service and Locality Link community groups are now fully up and running. This support is still reduced for 5/6 services due to non-site interventions from health professionals. Since

returning to full-service the Integrated Day Service has noted an increase in pressures due to challenges in other areas of the system and further review activity is planned to ensure service design meets ongoing need.

## **SUPPORT AT HOME**

### **2.5.8 HOME ASSESSMENT TEAM**

The Home Assessment Team (HAT) has a multi-disciplinary approach to person centered care and consists of Home Support staff, AHP's, Clinical Responders and Social Work staff facilitating 'Home First' principles, enabling people to be supported to return home for a period of assessment. This also reduces the pressures associated with having to make life-changing decisions around longer-term care from a hospital setting.

As reported in the 2021-2022 CSWO report, The HAT soft launch took place in Wishaw on the 25 April 2022 taking referrals from University Hospital Wishaw/ Monklands and on the 15 August 2022 this launch was extended to both University Hospital Wishaw (UHW) and University Hospital Monklands (UHM) considering the North Locality.

By the 26 August 2022, 73 patients in total had been referred to and supported by HAT across Cumbernauld and Wishaw rising to 172 by November 2022 as team capacity expanded through recruitment.

As of 31 March 2023, 442+ individuals had been discharged through HAT from our acute settings across Lanarkshire. All involved have successfully been assessed in their own home. The largest service provided to date through HAT remains our Home Support service with an input of 67%, down 4% from the previous year however most recent North Lanarkshire figures inform us that by the end of the 2-week assessment period input from Home Support in 51% of cases support decreased to zero with a 16% decrease in those who continue to receive a service. A further 30% remained the same with 2% requiring an increase.

As well as continuing to work collaboratively with hospital discharge hubs and clinical teams to support these timely discharges HAT have now begun to work alongside Hospital @Home to develop a pathway to enable people to remain at home or to support avoidable admission due to social/personal care requirements.

### **2.5.9 HOME SUPPORT SERVICE**

The Home Support Service continues to provide care to around 3200 people at home in any one day. The service received more than 3,500 referrals during this reporting period from individuals seeking a Home Support Service. This resulted in nearly 6,000 people accessing the service at some point throughout the year a 10% increase on 2021/22.

The service provides on average 25,500 hours of support on a weekly basis again a 10% increase on the previous year, with around 70% of this provided by NLC in house services. The remaining 30% is delivered by our partners in the independent sector.

As noted in the 21/22 CSWO report maintaining responsive, high-quality support at home for those who require this has continued to present challenges over the past year, due to continuing increase in demand.

As illustrated above work has continued to focus on early intervention and prevention with the Home Assessment Team (HAT) driving a programme of reablement, ensuring that service users potential is maximised, thus reducing the reliance on paid supports with early intervention and technology-based solutions being provided.

Recruitment and retention of key posts within the Home Support Service has remained challenging, resulting in key gaps within each of the locality Home Support Teams impacting on the responsiveness of the service and staff morale Whilst this also reflects national challenges in recruitment and retention in social care and pending ongoing service redesign activity interim actions have been taken to try to address this position as reflected in Section 5 of this report.

As part of a wider review of the Home Support Service it was evident that the new structure and model of service delivery within the partnership did not have the impact expected, with some of the operating difficulties attributed to the current service delivery model. A benchmarking exercise is planned and the learning from this will be incorporated into the workstreams leading on the review of the service.

The current operating model was originally devised in 2018 and implemented in 2020, however the current operational landscape has changed significantly over the last three years and a review of our current operating model has been moving forward at pace, with a new model being devised to address current challenges and provide sustainability. The overall intention is to develop and deliver support arrangements that have a stronger fit with the national personalisation agenda.

Approval was given for the service to move forward with a tender for a dynamic scheduling system which will benefit Home Support workers in the community and for those who schedule the care and support for the wider workforce. In addition, implementation will have a positive impact on service efficiency and improvement.

The service has continued to work with Care Inspectorate colleagues, in delivering improvements within the service. From inspections, several requirements and areas for improvement were identified as consistency and quality of care for some people in receipt of support were impacted by demand and staffing pressures. Whilst strengths highlighted through inspection included good infection prevention and control practices, staff and a supportive management team, gradings in two localities temporarily fell to 'weak' before

being raised to 'adequate' following improvement priorities being met. While progress has been made, significant work is ongoing to work towards restoring the previously high-level grades and to ensure that all those who receive a service have a positive experience,

### 2.5.10 TRANSFORMATIONAL SDS AGENDA

The overarching aim of the SDS transformation in North Lanarkshire is aligned with the intention and values underpinning the SDS Act 2013 - to support and empower people to achieve the outcomes that are important to them, to lead full and meaningful lives, and to participate in and contribute to their communities.

Our approach and refreshed strategy continue to have a sustainable impact in building resilience in the whole system supporting people and communities in North Lanarkshire and upon the strong foundations and value base we have created. Locally, our approach to SDS starts with the person and their personal resources, wider family and friends, community resources and community solutions, as well as targeted supports or services. This approach reinforces that self-directed support encompasses everything available that helps someone live their life and moves away from SDS as being seen solely as an individual budget to our approach to delivering outcomes and social care in North Lanarkshire.

Over the past year, several workstreams were established to take forward the aims of our Transformational Agenda. These workstreams are progressing the development of an updated local SDS Strategy for North Lanarkshire.



The membership of each workstream includes representation from community and third sector organisations, independent care providers, health and education colleagues and carer organisations enabling co-production of the SDS Strategy while also strengthening the key principle of partnership working to promote earlier preventative and proactive approaches to meeting outcomes.

#### Individual Budgets

While there is a focus on preventative and proactive interventions, significant support continues to be provided in North Lanarkshire by way of individual budgets for those with critical or substantial ongoing need.

The number of people receiving an individual budget within the 22/23 year was 2381. With a total of 347 Direct Payments (Option 1). As with SDS budgets noted above, these figures include all children, adults and carers.

Individual Budgets have increased by 56% since last year. A contributory factor to the increase has been the introduction and embedding of the Self-Directed Support with Care at Home Flexible Framework which has seen the move for many people from traditional home support service provision to Individual Budgets, to date a total of 1019.

#### 2.5.11 COMMUNITY LIVING CHANGE FUND/COMING HOME

In line with Scottish Government recommendations made within the Coming Home Implementation Report, and more recently the allocation to North Lanarkshire Health and Social Care Partnership of £1,298,332 from the Community Living Change fund, a program of work is being undertaken over a three-year period (2021-2024), to support the strategic objectives of:

- Reducing delayed discharges of people with complex needs.
- Repatriating those people inappropriately placed outside of Scotland.
- Redesigning the way services are provided for people with complex needs.

This initiative will build on the work already well established in North Lanarkshire and evidenced through our positive balance of care data. North Lanarkshire has the highest proportion of people aged 18 and over with long term needs who receive personal care at home in mainland Scotland and has the lowest placement rate for all adults aged over 18 in Scotland, which is over 30% lower than the Scottish average.

This additional investment has provided an opportunity to review the current situation post-pandemic and compliment the national work being undertaken to develop a dynamic discharge register for those with the most complex needs. A multi-agency team lead by Health and Social Care Partnership has been established and has begun the personal action planning process.

A Coming Home Implementation group has also been established with two subgroups overseeing the individual circumstances and planning requirements and planning the strategic developments required to minimize the risk of people needing to leave the area to receive the support and care they need. For the relatively small number of individuals currently placed out with North Lanarkshire and following appropriate assessment including risk assessments, planning will facilitate appropriate interventions to ensure individuals can come home safely.

#### **STATUTORY INTERVENTIONS:**

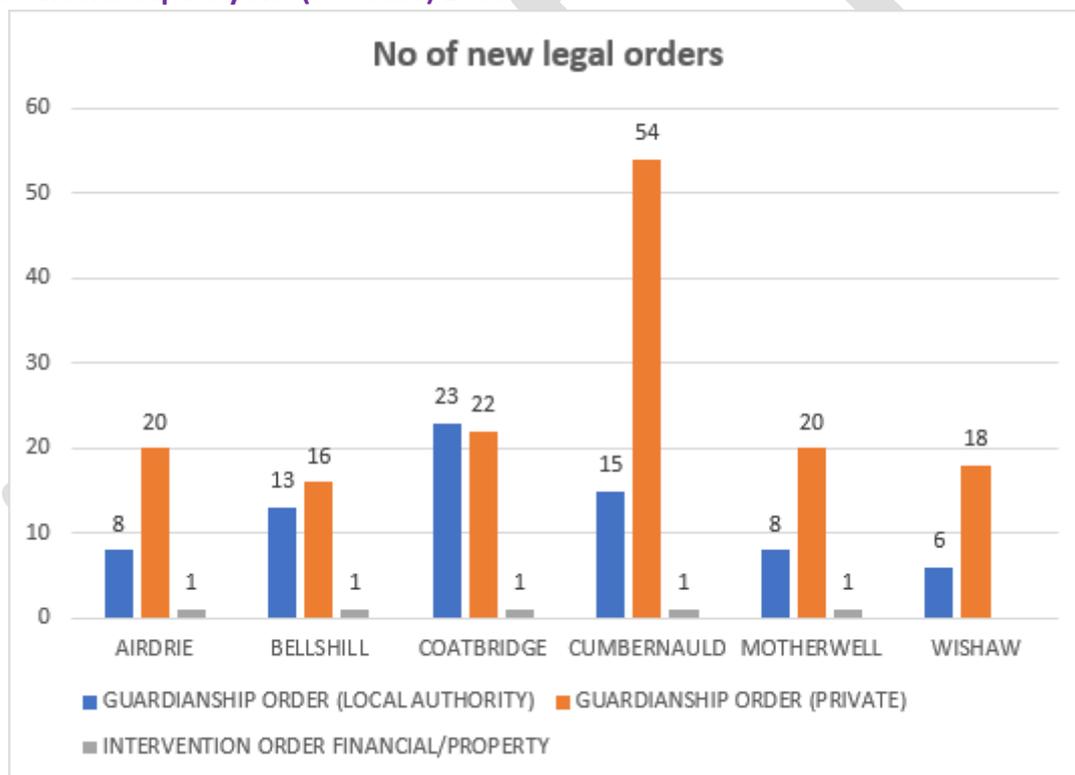
#### 2.5.12 MENTAL HEALTH OFFICERS SERVICE AND ADULTS WITH INCAPACITY ACT (SCOTLAND) 2000

Mental Health Officers (MHO) are social workers with a minimum of two years post qualifying

experience who have gained Mental Health Officer Award (MHO award) Statutory duties for MHO's are set out in the Adults with Incapacity (Scotland) Act, 2000; the Mental Health (Care and Treatment) (Scotland) Act, 2003 [MHCTA]; the Criminal Procedures (Scotland) Act, 1995; Criminal Justice (Scotland) Act 2016 and the Adult Support and Protection (Scotland) Act, 2007. The implications of emergent court judgements emphasising the significance of European Convention of Human Rights and the United Nations Convention on the Rights of Persons with Disabilities in statutory decision making, combine to place heavy demands on the current resource. Additionally, new duties for mental health officers were introduced in the implementation of the Mental Health (Scotland) Act, 2015.

The Chief Social Work Officer holds overall statutory responsibility for the governance and the management of welfare guardianship orders granted to the local authority, and for overseeing the supervision of private guardians in their role and function as welfare guardians. The day-to-day management of these statutory responsibilities are delegated to Mental Health Officers and Social Workers and overseen by managers within adult social work.

### Adults with Incapacity Act (Scotland) 2000



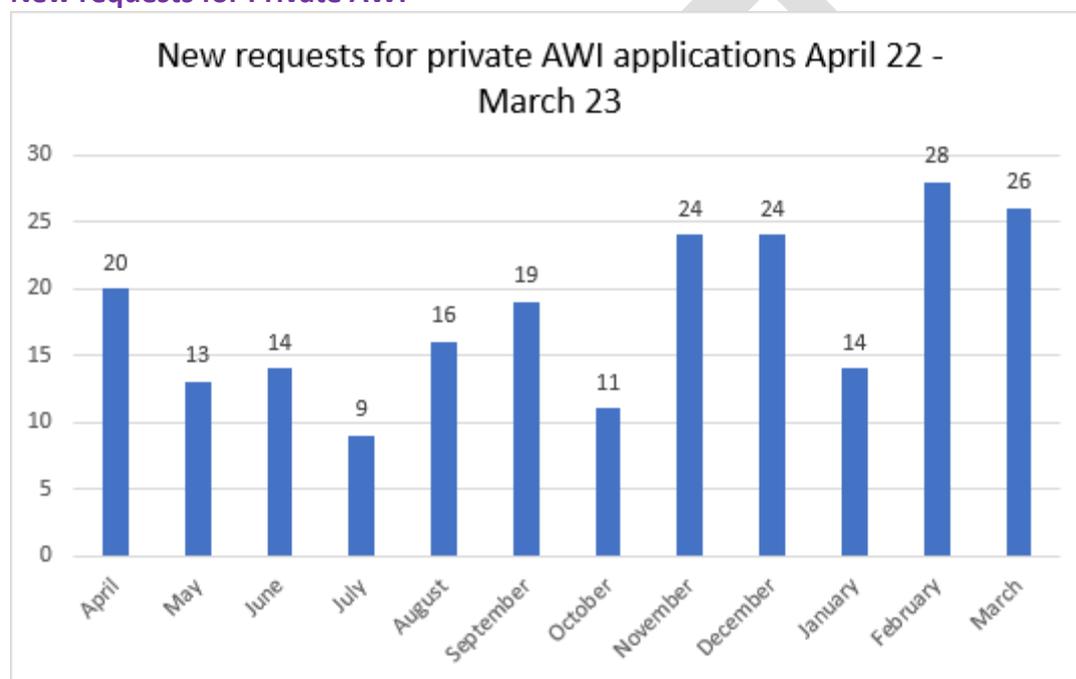
The above chart shows the monthly running total of private and local authority welfare/financial guardianship orders held for individuals in North Lanarkshire over the period April 2022 until March 2023.

The total number of guardianship orders in place in the North Lanarkshire Council area at the end of March 2023 was 1051 with 804 private and 207 local authority orders. The North Lanarkshire total figure constitutes 6.15 % of the national total. The local authority has a statutory responsibility to provide supervision and support to all Private Guardians and to

undertake reviews of how the powers are being used on a regular basis, unless it is formally agreed that this is not required. In relation to local authority welfare guardianship powers, these are also reviewed regularly either by a Designated Mental Health Officer or Social Worker

During this period as referenced in 3.1.6 below, two Large Scale Investigations were undertaken under Adult Protection processes with respect to Care Homes/Establishment for those with complex needs. The co-ordination of these investigations and associated statutory activity, required liaison with home local authorities, to ensure individuals rights were safeguarded and needs appropriately supported. As in the previous year this placed substantial additional demands on North Lanarkshire MHO and social work resources.

### New requests for Private AWI



AWI Orders April 2022 - March 2023

Over the period April 2022 to March 2023, 218 requests were received for Mental Health Officer reports to accompany new guardianship applications. In comparison with the previous year this shows an increase of 83 reports. These applications were inclusive of welfare guardianship orders and renewals both private and Local Authority which is an increase in all applications since the previous year.

### Mental Health (Care and Treatment) Act 2003 and Mental Health (Scotland Act 2015)

National trends for civil detentions under the Mental Health (Care and Treatment) (Scotland) Act 2003 have continued to rise both nationally and locally. In North Lanarkshire there has been a decrease in the number of Emergency Detention Certificates (down 38%) and Short-Term Detention Certificates (down 7.9%), whilst the number of Compulsory Treatment Orders has increased (2%) since the previous year. The total number of supervised Forensic orders has also decreased. We continue to maintain a higher than the national average rate of consent to Emergency Detention Certificates, an area of national focus given the checks and

balance this provides within the system. This year, MHO's have however refused consent to 11 Short Term Detentions, 27 less than the previous year.

Total Emergency Detention consents	[164] 101
Total Emergency Detentions where no consent was sought	[35] 76
Consent refused by MHO - Emergency Detentions	[3] 0
Total Short Term Detention consents	[236] 247
Consent refused by MHO - Short Term Detentions	[38] 11
Total Compulsory Treatment Orders	[186] 191
Total Forensic Report requests	[32] 28
Total Forensic orders supervised (CORO\CO)	[30] 17

2021-2022 data highlighted in red.

### Quality Assurance, Continuous Improvement and Involving Lived Experience

North Lanarkshire Council recognise that, MHO involvement in the social work and care management role of adults with complex needs in relation to decision making capacity and/or or those who experience severe and enduring mental health difficulties, can offer much better outcomes for individuals because of the knowledge and skill base MHOs retain whilst ensuing human rights are central to intervention. Nevertheless, the increasing demand on the service coupled with decreasing numbers of MHO's and the national difficulty around retention and recruitment has necessitated the decision to that MHO workloads are ring fenced and deal with statutory work only. Care management inclusive of SDS has started to be reallocated to locality social work teams from the MHO service. This will be reviewed regularly and when the MHO service is in a better position a move to return to a more holistic approach will be considered.

As part of our quality monitoring approach, we have introduced new arrangements for seeking feedback directly from people who access services and their families/carers, which will help us shape and improve service delivery. We are also introducing self-evaluation and auditing processes for statutory MHO reports and have undertaken a trauma informed walk through of the service to ensure best practice and continuous improvement.

### Service Recovery and Redesign

As discussed in previous reports the pandemic on service required rapid development of remote working and centralising processes across the MHO service. Whilst there has been a return to face-to-face assessments, meetings, and MHO forums we have also continued to benefit from the flexibility remote ways of working can offer service users and staff alike with MS TEAMS and 'Near Me' service. The centralisation of key functions created many benefits

to managing pressures across the service in relation to staffing, workload and sharing knowledge and experience and a centralised priority allocation process continues to be in place as a way of addressing the pressures across the service however in response to concerns that a fully centralized model may inhibit integrated working at local level a survey was conducted across the MHO service and a follow up development day held to discuss findings From the development day an agreed Action Plan was formulated to move towards a Locality Based MHO Service.

To support service recovery and in line with the agreed Action Plan it was identified that recruitment would be integral to this success. Further information on how the service is innovating and using temporary capacity funding to support recruitment and development of MHOs to address capacity issues in the face of a chronic shortage of MHOs nationally is included in Section 5 of this report.

### 3 PUBLIC PROTECTION

#### 3.1 ADULT SUPPORT AND PROTECTION

##### 3.1.1 ASP REFERRAL TRENDS

During this period North Lanarkshire, received 3034 ASP referrals, an increase of 25% compared to 2021/22 (2,434 to 3034). This is the fourth consecutive year that an annual increase has been measured. Referrals from NHS colleagues continue to rise, showing a 23% increase compared to last year from 473 to 583 whilst adult support and protection referrals from Police Scotland have decreased 13% from 380 to 330. Social Work referrals increased 10% from 370 to 408. While Scottish Fire and Rescue increased 30% from 86 to 110.

Care homes were the highest ASP referrer group in 2022/23 with 31% (933) of all ASP referrals received to localities and SWES. This demonstrates a steep rise in referrals from care homes in comparison to 2021/22 measuring a 105% increase from 455 to 933 in part reflecting the challenges in managing increasing complexity of care needs within group living settings. Monitoring and support in this area is provided by colleagues in Quality Assurance. In addition, a pan Lanarkshire task group has been set up by North and South APCs with all care home stakeholders involved and the aim to provide support to care homes to achieve a balanced and consistent approach in relation to ASP referrals and decision making. This will involve undertaking a survey with care home staff on their current level of understanding of ASP and targeting future training needs based on the responses given.

Whilst Police ASP referrals have decreased, Police 'Adult Concern reports' continue to increase. there were a total of 4,009 Police 'Adult Concern' Reports received during this period. Since the same reporting period last year there has been a 3% increase in police 'Adult Concern' reports (from 3885 to 4,009).

In a change from the previous reporting year, Physical harm was the most common referral type (48%) 1442 of all referrals received. In analysing the reason behind the sharp increase in referrals featuring physical harm this can be closely linked to the large number of care home referrals received often resulting from a witnessed/unwitnessed fall of a resident. As noted

above, ongoing work with care homes and key stakeholders in relation to ASP referrals and decision making. Emotional and Psychological harm remains high, measuring (26%) 802 of referrals received.

It has been recognised in research that self-neglect cases can be some of the most complex to manage for practitioners, as they are fraught with issues that cut across ethical, legal and practical considerations. Raising awareness of such issues for multi-agency practitioners has been a key focus within the Multi agency forums and within ASP multi agency training. For this period, there were 278 self-neglect cases which measure 9% of total ASP referrals. Self-neglect referrals continue to rise, referrals have increased 15% in comparison to last year (from 241 to 278).

### 3.1.2 ASP INVESTIGATIONS

There were 399 investigations carried out in 2022-23 which marks an 8% reduction from last year (from 433 to 399). 13% of the total number of ASP referrals received progressed onto a full investigation. This percentage conversion rate has reduced by 5% since the same time last year (from 18% to 13%).

### 3.1.3 CASE CONFERENCES

There were 69 ASP initial case conferences and 117 ASP Review case conferences held for 2022 - 23. This means there has been an 8% decrease in those cases that progress from investigation onto initial case conference (from 25% to 17%).

### 3.1.4 STATUTORY ORDERS

For the period 2022/23, North Lanarkshire Council, as part of Health and Social Care North Lanarkshire implemented thirteen (15) ASP Protection Orders, as follows:

Types of Protection Orders	Number of Protection Orders granted
Assessment Order	0
Removal Order	7
Temporary Banning Order	1
Banning Order	0
Temporary Banning Order with Power of Arrest	4
Banning Order with Power of Arrest	3
<b>Total</b>	<b>15</b>

North Lanarkshire Council's ASP policy and procedures are currently under review. These will be updated in line with new Scottish Government codes of practice. Revised policy and procedures will be built into the new 'mosaic' social work system, the first draft of new procedures is expected November 2023.

### 3.1.5 APPROPRIATE ADULT SERVICES

In January 2020, Appropriate Adults (AA) Services across Scotland became a statutory function via part implementation of the Criminal Justice (Scotland) Act 2016. This now means that a statutory duty is placed upon Police Scotland to request an Appropriate Adult, while the Council has a statutory duty to provide Appropriate Adult Services, and the training of AA's. The Care Inspectorate has the duty to assess the quality of AA Services.

In North Lanarkshire, AA Services are currently arranged, delivered, and fully funded by North Lanarkshire Council. Currently, there are 28 employees trained to perform the AA role whilst balancing the day-to-day commitments across Council Services e.g., Social Work and Home Support Services. Training is outsourced and delivered through partnership with Edinburgh City Council. Another training cohort will take place in October where it is anticipated a further 20 staff will be AA trained. AA service operates within office hours and via SWES.

In 2022/23 the AA service responded to 59 referrals from Police Scotland. On 2 occasions the AA service was unable to provide an appropriate adult to police at the time of the request whilst on 2 occasions police cancelled their AA request.

The primary reason police requested an AA was due to an adult being diagnosed with a learning disability (33 of 59 requests). 28 police requests related to facilitating a victim/witness statement and 22 requests involved multiple police procedure e.g., Police Interview Rights of Suspects (PIROS), Caution, Interview, Charge. The primary crime type AAs were requested to attend involved crimes of indecency (38 from 59).

North Lanarkshire Council have recently recruited a social worker to the adult social work team based in headquarters who will, as a test of change, temporarily lead on and develop the appropriate adult coordinator role. This is in line with local authorities' statutory duty to create a designated post for the appropriate adult service.

### 3.1.6 LARGE SCALE INVESTIGATIONS

An LSI may be required where there is reason to believe that adults who are residents of a care home, supported accommodation, an NHS hospital or other facility, or who receive services in their own home may be at risk of harm due to another resident, a member of staff, some failing or deficit in the management regime, or in the environment of the establishment or service therefore in circumstances where risk may pertain to more than one individual

North Lanarkshire Council commissioned and carried out two ASP Large Scale Investigations (LSI) relating to care homes during this period, one of which was commenced in the previous reporting year.

The first LSI commenced in March '22 and was concluded mid-June '22 in response to several practical and procedural areas within the care home which caused or was likely to cause direct harm to residents. Following evidence gathered by social work and partners, an action plan was developed in conjunction with the care home with the view of reducing risk to residents which was successful in reducing multiple areas of risks for residents and achieving better outcomes in their lives.

The second LSI was commenced in December 2022 and continued beyond end of March 2023. The social work locality response has been timeous and robust and involves a significant resource in investigating harm and coordinating a response to the identified risks. This LSI involves several agencies who continue to implement the agreed protection plan in reducing risk to residents.

It should be noted there is no timescales on how long an LSI should last, the average length of an LSI is between 2 and 4 months however the key outcome for every LSI is that adults will be safer, better supported and enjoying a better quality of life.

### 3.1.7 JOINT INSPECTION OF ADULT SUPPORT AND PROTECTION IN NORTH LANARKSHIRE

The final report of the [Joint Inspection for Adult Support and Protection](#) was published on 22nd November 2022. The inspection findings are largely positive and recognise the hard work and commitment of staff across the partnership over the last two years.

The inspection evaluated local performance against two key questions:

#### **1. How good were our key processes for adult support and protection?**

The inspectors concluded that our key processes for adult support and protection were effective. There were clear strengths supporting positive experiences and outcomes for adults at risk of harm, which outweighed the areas for improvement.

#### **2. How good was our strategic leadership for adult support and protection?**

The inspectors considered that our strategic leadership for adult support and protection was effective and demonstrated major strengths, supporting positive experiences and outcomes for adults at risk of harm.

Key strengths and areas for improvement were identified as follows:

#### **Strengths:**

- Adults at risk of harm had improved safety, health and wellbeing because of the diligent work of partnership staff.
- The partnership conducted initial inquiries into the circumstances of adults at risk of

harm efficiently and effectively.

- Independent advocacy for adults at risk of harm was a key strength for the partnership. Adults at risk of harm derived considerable benefit from the support they got from capable independent advocates.
- The partnership's strategic leaders enabled a culture of strong, credible, strategic partnership working for adult support and protection.
- Strategic leaders initiated rigorous, multi-agency quality assurance and audit work for adult support and protection. This was a key facet of the partnership's convincing capacity for improvement.

#### **Areas for Improvement:**

- 1.a. The partnership should improve the quality of chronologies for adults at risk of harm.
- 1.b. The partnership should improve both the presence and quality of protection plans.
2. The partnership should always hold initial adult protection case conferences promptly when required. The police should attend all initial adult protection case conferences they are invited to.
3. The adult protection committee should consider securing the direct representation from adults at risk of harm and their unpaid carers. Thus, it would benefit from their lived experience of adult support and protection.

Inspectors noted a small number of other areas for consideration by the partnership but also reflected within the report confidence in the partnership's capacity for improvement.

Next Steps: The Partnerships' Inspection Improvement plan has been agreed by the Care Inspectorate who will monitor progress for 1 year. The Care Inspectorate continue to express confidence regarding our proven ability to make improvements.

This report was welcomed as a fair assessment of our practice which largely reflects our own understanding of our position. The findings were reported by the Inspectors as 'strong and sound' for the partnership. Recognition of our clear strengths are welcomed, along with those improvements, which the Inspectorate indicate they are confident of our capacity to meet.

### **3.2 MAPPA (MULTI AGENCY PUBLIC PROTECTION ARRANGEMENTS)**

Justice social work services have a key role in respect to MAPPA arrangements as lead agency for high-risk offenders subject to statutory supervision. As such the service works closely with the council's housing service and other responsible authorities including, Police Scotland, NHS and the Scottish Prison Service to assess and manage the risk posed by sexual, violent and other risk of serious harm offenders.

Whilst activity is operationally managed within relevant agencies. Multi-agency oversight and co-ordination is supported by a small pan-Lanarkshire team and Strategic Oversight Group

(SOG) which is chaired on a rotational basis by North and Lanarkshire CSWOs and the Public Protection Superintendent, Police Scotland. An annual MAPPA report provides information on the ongoing local implementation of MAPPA arrangements, key priorities and activity statistics. The report for 2022/23 will be published on 27/10/23. Add link when available.

Of the 787 individuals in custody or in the community in Lanarkshire subject to MAPPA as of 31/3/23, 54% (425) were the responsibility of North Lanarkshire authorities. Overall, the number of individuals managed under MAPPA have grown significantly since arrangements were established 16 years ago. This slowed during the Covid-19 Pandemic but has increased annually since then, with a 9% growth last year alone. In both North Lanarkshire and pan-Lanarkshire previously there was again a small increase between 20/21 and 21/22 however as in other areas of the justice system it difficult to clearly separate underlying trends from the impact of the pandemic. MAPPA related activity is however a key aspect of justice social work workloads.

In March 2022, MAPPA partners attended a practice event to consider collective practice in terms of Environmental Risk Assessment. This was informed by a recent Significant Case Review from another area where development opportunities had been identified. The event provided opportunity for operational partners to physically meet in a way that had not been possible for some time because of pandemic restrictions. Such was the response to the event that partners have committed to a continuous schedule of themed operational development events, hosted across both North and South Lanarkshire which will contribute to the ongoing strengthening of practice and the establishment and maintenance of key professional relationships.

Whilst the statutory activity above is categorised in distinct strands there is a clear interface across the different areas of public protection requiring joint working across all social work care groups and partnership arrangements. For example, there is an increasing number of older individuals and those with substantial care needs who are managed under MAPPA requiring close working between adult and justice services. There is also a strong interface between justice services and child protection whilst domestic abuse and violence against women link strongly to wider public protection processes. All social work staff are therefore trained and expected to develop core knowledge of the range of protection procedures and responsibilities. Statutory public protection interventions and processes are also part of a wider continuum of safeguarding and community safety activity in which social workers are involved, some of which are reflected in earlier sections of this report. Additional examples of key priority areas for social work and partners where practice is evolving and innovating to strengthen the protection and wellbeing of our communities are detailed within this report.

### 3.3 CHILD PROTECTION

There has been a significant rise (65% 18/19 to 22/23) in child protection referrals as illustrated below –

Year	Number Of Referrals	Investigations	% of Referrals Proceeding to Investigations	Number of Investigations that Proceeded to Case Conference	Number of Registrations from Case Conferences
2022/2023	1895	775	41%	264	198
2021/2022	1714	754	44%	229	177
2020/2021	1482	831	56%	261	199
2019/2020	1617	800	49%	339	254
2018/2019	1150	642	56%	329	251
2017/2018	1030	692	67%	340	252

This is due to our child protection framework supporting increased consistency in practice, recognition of all forms of harm, strengthened by refreshed IRD guidance. While we have not seen a rise in the numbers of children whose names are placed on the Child Protection Register, there has been an increase in registration of older children aged 12 +. What this indicates, in part, is that practitioners, supported by our commitments to keep The Promise and UNCRC and investment in contextual safeguarding, are increasingly focussing on and recognising the protection of older children and their rights. The service has continued to work with the partners in the Child Protection Committee to monitor and understand the relationship between child protection referrals and rates of registration to ensure the right children get the right support when they need it.



In April 2023, the partnership was informed that a Joint Inspection of services for children and young people at risk of harm would take place over the period from April to September 2023. The outcome of this inspection will be reported through committee and within the next CSWO Annual Report

### 3.4 WIDER SAFEGUARDING ACTIVITY

#### 3.4.1 CONTEXTUAL SAFEGUARDING AND PROTECTING YOUNG PEOPLE FROM HARM OUTSIDE THE HOME

The service has continued its work towards embedding the Contextual Safeguarding approach to protect young people who are at risk of harm and or exploitation in the community.

Alongside our bespoke online training module, where approximately 400 staff from across the council have undertaken the two hour learning- we developed a theory of change to illustrate what we want to achieve and identify priorities: [Developing North Lanarkshire's Response to Extra-Familial Risks and Harms - Overview | Rise 360 \(articulate.com\)](#)

The approach has now been strengthened through the embedding of a multi-agency Young People's Safeguarding panel (to coordinate actions to protect young people) and over 2022/23, around 30 young people were considered through this panel alongside discussions about their periphery peers, dynamics of key relationships, safety of places they spend time and key conversations around choice, empowerment, voice and trust. Staff have access to consultations to promote their confidence and to offer containment with the emotional and ethical demands associated with managing complex risks. As a service we have worked to ensure that the trauma young people experience is understood and sensitivities to this are integrated into our practice. The University of Sussex has been researching our work, with early evidence that trauma informed practice is beginning to make a difference. Some key highlights have been that the approach supports workers to:

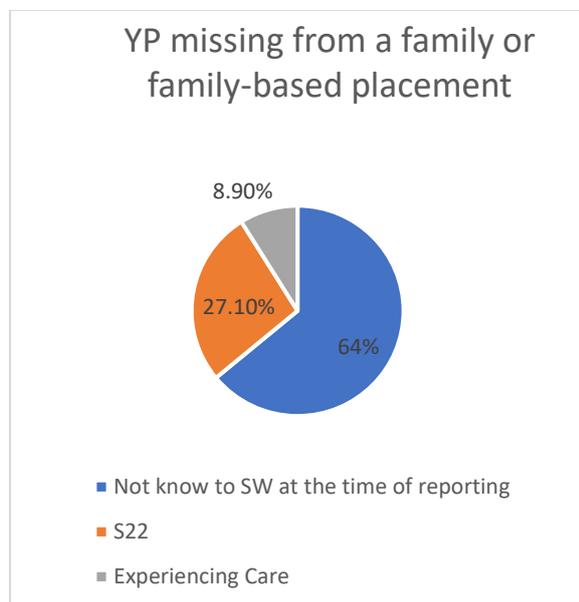
- Prioritise who young people are and what they could be – rather than the risks that they face – when describing them to others
- Identify young people's experiences of trauma and consider these when developing plans to support them and meet their needs.
- Identify services and relationships in community settings that could offer sustainable safety to young people beyond the life of an intervention.

Another key aspect of addressing the harms faced by children and young people in the community is our approach to responding to children reported as missing to the Police. Recognising the importance of early support for children who are reported missing, the social work service continues to lead a weekly meeting to discuss the circumstances of all children and young people reported to the Police as missing. We also continued to commission a dedicated service from Barnardo's to undertake Return Discussions available to all children and young people who are reported missing, regardless how many times, in recognition of the potential harms. The meeting is multiagency and discusses the circumstances of the missing episode and looks at what, if any, additional supports the child, young person or their family may need to prevent further missing episodes.

Although the number of young people reported as missing has continued to rise since 2020 (342 as opposed to 185), there has been a significant change from where the children and young people have been reported missing. In 2020/21 49% of missing episodes were of children living in Children's houses within North Lanarkshire. Last year this reduced to 17%. This change is in part due to the proactive and relationship-based approaches taken by our Children's house staff in collaboration with the police.

Most children and young people reported missing from home are not known to social work services (as seen in diagram below). Over 22/23 167 return home discussions (RDs) were

completed for 115 young people. Of these 79% were not reported missing again following up to 3 RDs. Of note is that 10 children disclosed protection concerns within RDs previously unknown to agencies prompting action such as a child protection investigation, family group decision making or planning for a child’s wellbeing within the GIRFEC pathway.



### 3.4.2 SUICIDE PREVENTION

**During 2022 the Scottish Government and COSLA collaborated in launching a new plan and strategy to tackle suicide in Scotland:**  
[Creating Hope Together: Scotland’s Suicide Prevention Action Plan 2022 -2025](#); [Creating Hope Together: Scotland’s Suicide Prevention Strategy 2022 – 2032](#).

In North Lanarkshire, the Suicide Prevention Partnership Group lead on the local suicide prevention strategy and action plan. This includes a range of awareness raising activities use of online and digital platforms and training across services and local communities.

The table below includes data from 2018 until 31st December 2021, indicating that North Lanarkshire sadly lost 171 people to completed suicides in that period. There continues to be an increase in deaths of younger people under the age of 39: these have mostly been young males. Suicide rates did not significantly vary throughout the lockdown period (2020/2021); however, as we continue to recover from the emotional and fiscal effects of the pandemic there is concern that the cost-of-living crisis may impact an increasing number of individuals mental health and wellbeing with an associated risk of a rise in suicide rates. In this context continuing to review and enhance the local action plan is clearly essential.

### Number of Suicides by Year (2018-2022) - North Lanarkshire

Year	Number
2018	58
2019	57
2020	62
2021	52
2022	50

The local action plan remains framed around the following areas:

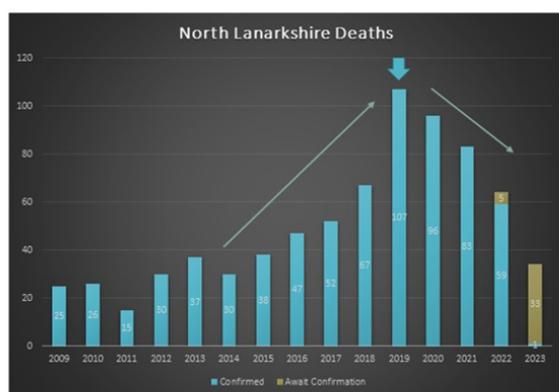
- Reducing the risk of suicide in high- risk groups
- Tailoring approaches to improve mental and physical health in specific groups.
- Reducing access to means of suicide, including identified locations of concern.
- Learning from reviews and investigations into unexplained deaths
- Providing better information and support to those bereaved or affected by suicide.
- Supporting research, data collection and monitoring
- Building community capacity to help reduce the stigma and taboo associated with suicide,

Distress Brief Intervention is now embedded within North Lanarkshire as early connected and compassionate support whilst suicide awareness and prevention training are being delivered across social work, health, education, third sector and voluntary organisations. Within social work a nominated Senior Officer based in Adult Service leads on Suicide Prevention.

### 3.4.3 DRUG RELATED DEATHS

North Lanarkshire continues to have high levels of drug-related deaths as illustrates in the tables below:

#### North Lanarkshire Drug Deaths



- Deaths increased year on year from 2015 to 2019
- Highest number of deaths recorded in 2019 (n=107)
- No. of DRDs have decreased over last 3 years (2020 to 2022)
- 2022 data collection still ongoing
  - 59 confirmed deaths
  - 5 awaiting toxicology/confirmation
- 35 suspected deaths from 1/1/23 to 12/6/23
- Down 22% from the same period last year (12/6/22)

## Demographics

### 2022 DEATHS

(2022 data collection ongoing therefore figures are subject to change)

- 59% Males
- 56% unemployed / long term sick or disabled
- 81% aged 35 and above
- 77% of deaths involved 2 or more drugs
- 41% experienced a previous near fatal overdose

A pan-Lanarkshire multi-agency Drug Death Review Group is in place supported by a drugs death review officer to gather the statistical information to identify patterns working closely with services to look at drug related deaths. This post holder attends all meetings related to drug related deaths, engages with the teams, ADP development officers and information officers.

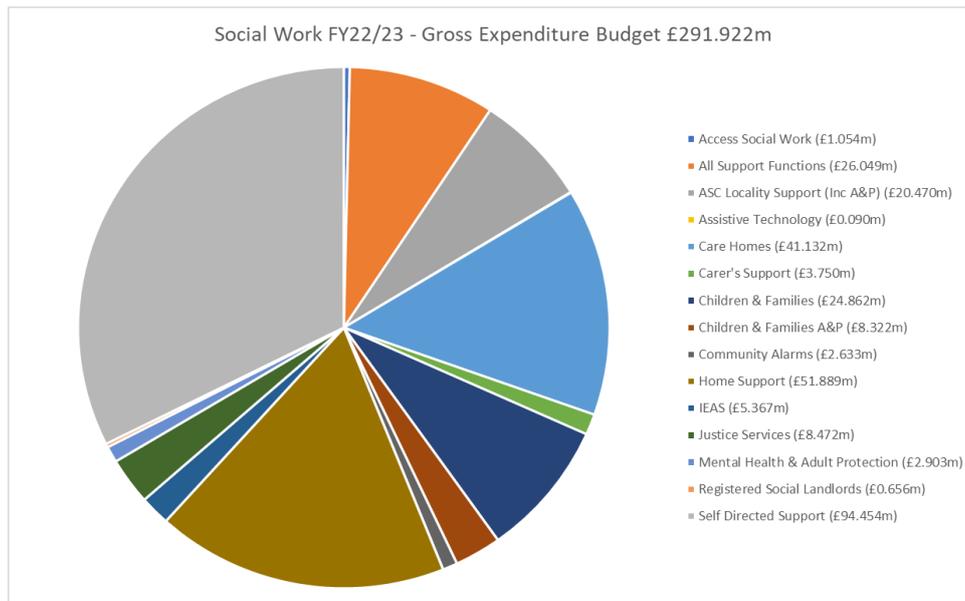
Measures to target drug deaths locally and nationally have been implemented via MAT standards and more recently a newly commissioned service to respond to crisis and assertive outreach has been established. A name has yet to be sought but the initial steering group has met, and a standing operating procedure is being discussed. Including criteria for referral based on risk management.

Whilst reducing drug death is a critical priority actions have the wider aspiration to improve quality, choice and to create connections to keep people safe, well and thriving to realise a North Lanarkshire where:

- Fewer people develop drug and alcohol use.
- People access and benefit from effective, integrated and person-centred support to achieve recovery.
- Children and Families affected by alcohol and drug abuse are safe, healthy, included and supported.
- Vulnerable people are diverted from the justice system wherever possible.
- Less harm is caused by alcohol.

## 4. RESOURCES

For the financial year 2022/23 North Lanarkshire Council had a gross annual social work budget, inclusive of Covid & winter planning funding, of almost £292m. This was allocated as £242m for Adult Social Work and Social Care and £50m for Children, Families & Justice Services. The equivalent funding for the previous financial year was £266m.



During 2022/23 the Scottish Government was in regular discussions with HSCP's with respect to in-year IJB Covid costs. The service recorded a spend of £1.342m which related to partner sustainability payments.

As reported in the 2021/22 report, North Lanarkshire received a share of £300m funding from the Scottish Government to protect health and adult social care services over the winter and to provide longer term improvement in service capacity across health and social care systems. This resulted in circa £7m new recurring investment for the service. A business case was approved of how this would be utilised which highlighted that the majority of this would be used to increase staffing levels in key areas across the service:

<https://mars.northlanarkshire.gov.uk/egenda/images/att97950.pdf>

Unfortunately, there have been recruitment difficulties across the sector therefore some slippage in spend against this business case was reported in 2022/23.

Following council and IJB budget setting processes social work services had a savings target of £2.094m, split £2.025m Adult Social Work and Social Care and £.069m Children and Families, the service achieving 31% of this in year. The shortfall was within Adult Social Work and Social Care and was funded using reserves with the saving expected to be fully implemented in early 2023/24.

In totality Social Work activity during 2022/23 was undertaken within the overall budget resource and resulted in an underspend position.

Within Adult Social Care the underspend was almost entirely because of the recruitment issues, both internally but also within the care at home sector reducing the payments made to these bodies. This is similar overall to the 2021/22 position however due the nature of these underspends they are non-recurring in the long term. Financial pressures are being seen across the following areas:

- Home Support
- Independent Care Homes

- Self-Directed Services
- Integrated Equipment and Adaptation Service
- Family Placements
- Children's Houses

As in the previous year the core Sec 27 grant for the delivery of statutory justice social work services (5.789 m) was enhanced through additional funding (0.920 m) to support targeted government priorities including women's services, structured deferred sentences, diversion from prosecution, PASS and third sector commissioning. Additional funding of 0.953m was also provided to enhance capacity to address pandemic related backlogs within the system and to enhance bail supervision.

#### 4.1 FINANCIAL MODELLING FOR SERVICE DELIVERY

Financial Planning and monitoring continue to be a key responsibility for the management team. The Council's financial strategy includes Service input to four key processes. These are:

- Preparation of detailed single year budget
- In-year budget monitoring and projections
- Preparation of rolling 3-year budgets
- Preparation of a Medium-Term Financial Plan

Alongside this the Council Finance Team works closely with the IJB Chief Finance Officer to prepare a medium-term financial plan for the Health and Social Care Partnership.

In terms of financial modelling the Management Team increasingly take a whole systems approach to delivering new and more efficient operating models which often requires joint working with other Council services and key external partners.

In addition to the wider financial modelling described above, work has also been undertaken to support the business plan for Adult Health and Social Care.

With respect to Children's Services the council and local partnership is one of three areas who have committed to working with the Promise team nationally on 'Human and Economic Cost Modelling', work which is intended to support longer term change both nationally and locally by identifying how money is currently spent and the system changes required to move the balance of spend toward early intervention and family support in line with the aspirations of Christie. Following some early scoping this area of work is now integrated into the 'Resilient People' strand of the Council's Programme of Work.

A significant risk in children's social work is the reliance on a range of temporary funding streams, some 'bid-in' and some, principally partnership monies, allocated via national distribution formulae to support longer-term transformational change and service improvement with none of these strands committed beyond 2025/26. Similarly in justice services there is uncertainty around the level of recovery funding which will continue beyond the current year.

## 5. WORKFORCE

### 5.1 WORKFORCE PLANNING

Workforce planning within social work is integrated thought the social workforce group but informed by the Council's corporate ['Workforce for the Future Strategy'](#), and interfaces also with the wider HSCP workplan.

As reflected in other parts of this report the direct and indirect impacts of the pandemic and cost of living crisis along with underlying demand pressures continue to impact on the ask of the social work workforce over this period. Challenges in the labour market continue to impact on recruitment and retention of staff, North Lanarkshire is not immune to these challenges and whilst many of these also require action at national level, there is substantial work ongoing locally to address key issues and support workforce resilience.

### 5.2 SOCIAL WORK RECRUITMENT AND RETENTION

In February 2023, a report entitled 'Social Work Workforce Sustainability' was tabled at Corporate Management Team. It outlined the range of challenges impacting on the sustainability of the Social Worker workforce and the consequent vulnerabilities with respect to service delivery. The report also set out key proposals to address these challenges, which included a revised and strengthened recruitment model, alongside further work to enhance whole career support and development allied to the wider ambitions of Workforce for the Future.

In relation to recruitment, the service made a commitment to a mixed model of internal and external recruitment, re-establishing the Social Work Trainee Scheme for NLC Social Work staff. The Trainee Scheme has been progressed with 8 successful applicants being offered courses, due to commence from September 2023. Courses vary in length from 12 months to 4 years, depending on applicants' previous educational qualifications. As part of the scheme NLC is also committed to offering rotational experience across residential, day and fieldwork services according to learning needs. In addition to this scheme, we are sponsoring 6 self-funded employees as they complete their Social Work qualification.

External recruitment has also continued with over 60 external appointments made in the last 12 months (since Sept 2022). A commitment to offer permanent contracts whenever possible has continued even if this requires a temporary placement in the first instance. This will be reviewed regularly but it has been agreed on the basis that normal levels of turnover mitigate any associated financial risk. Temporary cover requirements, which exist for several reasons including the movement of Social Workers to temporary promoted opportunities and the creation of temporary funded posts, are being closely monitored. Whilst a temporary opportunity can be appealing to the current Social Work workforce, this can cause issues ensuring backfill for their substantive post. The opportunity for newly qualified Social Workers

to join NLC as Social Work Assistants until their full qualification has been confirmed, has also been utilised. External adverts, through myjobscotland, have been generic and specific. Generic adverts have been developed to attract applicants to NLC with preferences given in relation to the care group they wish to work with. Specific adverts have been progressed for specialist teams, for example, Addiction Recovery Services.

North Lanarkshire continues to successfully recruit Social Workers, including attracting students who have had positive placement experiences with the authority. This has impacted on experience levels and stability at the frontline, for example in Children, Families and Justice alone 48 external appointments were made to the role of social worker over this period, 38 of whom were newly qualified. Whilst these staff bring skills, creativity and commitment to the service, the impact of the pandemic on pre-qualifying opportunities has impacted on learning needs and the changing balance between newly qualified and more experienced workers, alongside an increasing complexity in the demand profile, has created clear pressures with respect to the allocation of work within localities with a requirement to provide more support across teams. Frontline managers continue to monitor caseloads and assist their workers in the prioritisation of their statutory responsibilities. In Justice Social Work a revised structure has allowed for a more flexible approach to the deployment of staff across the authority to support the teams who are dealing with the most urgent and pressing demands and authority wide teams continue to support localities across all care groups. Whilst not favored as a core element of our ongoing workforce strategy, where necessary limited use of agency social workers has also been employed in Adult and Justice services.

A close partnership approach has developed and will be maintained between the service and our HR colleagues in terms of ongoing recruitment strategies. Advertising frequency and dates have been reviewed to streamline processes and quicken the employee onboarding experience. This will continue to be reviewed and improvements made wherever possible. The service also commissioned research into the recruitment of Social Workers from Black and Minority Ethnic Communities. It is hoped that the findings of this research will shape recruitment policies and practices, ensuring they are not just non-discriminatory but anti-racist, to the benefit of applicants from these communities and the service as we endeavor to recruit a more diverse workforce.

To assist in the retention of Social Workers, a regrade was actioned on 1 May 2023. Following a re-evaluation process undertaken during 2022 which recognised the evolution in the social work role in response to both nationally driven expectations, a more complex and integrated service delivery landscape and the need for an empowered workforce. As a result of this NLC Social Workers increased from grade NLC10 to NLC11, moving NLC from 23<sup>rd</sup> place, on a list of 32 Local Authorities, when looking at starting salary, to 2<sup>nd</sup> place. Job Descriptions are being updated and it is hoped that these actions will bring several benefits including reflecting of the professionalism in the role and ensuring NLC's competitiveness in the market.

As outlined in 4.2 below, a commitment to support Practice Learning, the Supported Year in Practice and to both Continuous Professional Development and Health and Wellbeing, are all

critical to longer-term recruitment and retention strategies. This support will continue to be updated and reviewed. Ultimately however action will also be required at national level on social work workforce issues including on areas which create barriers to entry to the profession such as the lack of training bursaries.

Our Senior Practitioner Scheme continues to contribute to retention and the building of a skilled workforce. It allows social workers and occupational therapists to progress to an enhanced salary scale on completion of relevant post qualifying training and commitment to undertake additional responsibilities. The scheme remains a key component of our model, with over 60 practitioners within the service carrying the status alongside tailored work plans identifying their additional contribution to the service. Social workers who meet the criteria have immediate access to temporary Senior Practitioner status, pending a process to confirm status.

Our strong commitment to the provision of Practice Learning as part of Learning Network West has been maintained providing quality learning experiences. The service has benefitted significantly from the input of the students and as noted above this also supports recruitment. Our hubs are currently supporting 25 newly qualified Social Workers, in their first year of employment, in addition to students training to be Social Workers. All student placement opportunities are overseen by a dedicated Senior Officer in our Training and Organisational Development team. Feedback highlights the value of this support to new social workers and students whilst also providing flexibility of deployment to support service needs.

### 5.3 RECRUITMENT AND RETENTION OF MENTAL HEALTH OFFICERS

North Lanarkshire Council remains committed to developing social workers through the MHO Traineeship Scheme, which supports Social Workers in gaining an MHO award. 1 qualification was supported in 2022/23 and 3 Social Workers are undertaking the course in 2023/24. Recruitment is supported from all care groups with colleagues across Education and Families, Adults and Justice Services showing an interest in being considered for the Award. To support a steady flow of candidates to prepare for the opportunity to undertake the PQ MHO Certificate we have also established a temporary social worker (non-MHO) post within our Community Mental health Team. This post will allow social workers to gain knowledge, experience, and suitable expertise to allow them the opportunity to apply for PQ MHO Certificate, hopefully encouraging a smooth pathway from the social worker to MHO role.

Mental Health Officer forums continue every 6 weeks, offering discussion on practice issues, case studies, national reports/guidance and providing feedback to Scottish Mental Health Law Review.

North Lanarkshire continue to offer MHO's the opportunity to obtain, and maintain, Senior Practitioner status and to share their knowledge and experience with MHO and social work colleagues in relation to various aspects of AWI and MH legislation as well as Self Directed Support.

We recognise the breadth of knowledge, experience, and skill across the MHO service and plan to restart consultation sessions regarding human rights, AWI and MH Act as well as establishing MHO champions who have areas of practice interest, in relation to neurodiversity, forensic work, and complex trauma.

Remote external training and development opportunities continue to be available to MHO's, for example via the Scottish Forensic Network, Mental Welfare Commission and MHO community of practice (SASW).

To strengthen the structure a stand-alone Practice Assessor, to support Mental Health Officer training, has been appointed. In addition, a Mental Health Officer post for complex discharge planning has also been added, on a temporary basis, to the NLC structure with a postholder in place. We have also appointed on a Temporary basis a Mental Health Officer within the coming home team in line with Scottish Government proposal in this area.

Since December 2022 we have secured 3 full time MHO and 3 sessional MHO. Currently the Mental Health Service is under review. The return to a locality-based model referenced earlier in this report will also see an expansion of Senior Social Workers/MHOs from 4 to 6.

## 5.4 SOCIAL CARE

As reflected in Section 2.6.9 above there remain significant recruitment, retention, and capacity challenges with respect to the Home Support Service. The roles of Support Officer and Service Delivery Coordinator have been particularly challenging.

A review of Home Support Services is ongoing but considering the current challenges, the decision was taken to redesignate the post of Support Officer to Home Support Scheduler, and the posts of Service Delivery Coordinator to Home Support Team Leader. It is felt that the new designations are more descriptive of the roles and that this may assist in the understanding and expectation of applicants for these posts. Work is also ongoing to ensure Home Support Workers are aligned to appropriate teams, with a focus on re-ablement and Home Assessment Team, to support hospital discharge.

Other areas in which recruitment challenges are also evident include Locality Support Services and some roles within residential childcare, significant factors being wider labour market changes and comparative pay. In addition to wider strategic actions, service areas are themselves active in seeking solutions, for example, locality support services have continued to build links with education, encourage apprenticeship schemes and promote the idea to young people that a career in social care is rewarding and full of possibilities for promotion, further education and development. A group has been set up with a focus on promoting succession planning and preparedness of workers interested in promotion, staff development and the introduction of the principles of creating a working environment that is trauma informed.

## 5.5 ADMINISTRATION AND BUSINESS SUPPORT

The Administration and Business Support personnel within Social Work play a vital role in strengthening service delivery. However, they are currently experiencing difficulties with the substantial challenges in recruitment and staff retention. The volume of vacancies and turnover, especially in primary positions, have had a significant impact on both the service and its workforce. Many staff members are leaving for other opportunities, either within the Council or in the private sector. To address these issues, there are plans in place to conduct a comprehensive review of Administration and Business Support across Adult Health & Social Care, Children & Families and Justice Services. The goal is to implement a revamped Business Support model that enhances efficiency and offers roles tailored to the specific needs of the services, thereby making them more attractive and providing better career advancement prospects for staff members.

## 5.6 CARE ACADEMY

Health and Social Care is the largest employment sector within North Lanarkshire and experienced significant increases in demand and ongoing workforce challenges over the year.

In terms of future workforce planning, through the UK Shared Prosperity Fund, NLC will make further investment in its staff - to support workforce development and give staff the opportunity to develop and further enhance their careers. We have secured £88,000 over the next 2 years, to develop the skills of the workforce within Adult Health and Social Care. This will be delivered in three projects:

### Project 1 – Trainee Social Worker Scheme

NLC has a successful and respected Trainee Social Worker Scheme where we offer opportunities to a small number of staff each year to train in their role to become a Social Worker. The monies received from the UK Shared Prosperity Fund have allowed us to offer staff who are currently on the trainee pathway fully funded qualifications to support them on their journey to becoming a Social Worker. The fund can also fast track students who are already part way through their qualification to achieve it in a shorter timescale and receive a robust and meaningful placement to allow them to train as a Social Worker. More information can be found in the Social Work Student Hub update below.

### Project 2 – Upskilling for Home Care Workers

As part of a commitment to professional development requirements set out by the SSSC, Home Support Workers require to have a basic Health and Social Care Qualification. Recruitment for these roles is difficult and trying to attract already qualified staff is a challenge. To address this challenge, we recruit people who have yet to gain their qualification and fully support them to attain it whilst employed by the Council. The monies from the fund will allow us to put through an additional forty candidates over the next two years who require this qualification for their registration. It also allows us to target Home Care Workers who are keen

to progress in their career further and achieve the next level of qualification, helping us to build a pipeline of talent for the future.

### Project 3 – Home Care Support Officers

Support staff are a vital resource for the Home Support Service. Investment in this group of staff is paramount to ensure we retain them and increase morale within the service. Allowing them access to an early qualification in Health and Social Care can create a pathway to future employment opportunities in the service. The fund allows us to offer up to thirty opportunities across the service for staff to gain a qualification essential to their progression within the service.

The monies from the UKSPF are allowing us to expedite access to qualifications in a Service where it is difficult to recruit and retain staff. It will help to promote a sense of commitment to the development of staff and hopefully lead to greater retention, improved morale as well as a secure pipeline of talent for the future.

## 5.7 WORKFORCE DEVELOPMENT AND STAFF SUPPORT

Getting it Right in Child Protection Course – 17th to 23rd May 15 Social Workers trained.

There continued to be a wide range of learning and development opportunities open to staff over the year, supported and planned both corporately and at service, team and individual level with a focus on alignment to service and corporate ambitions and redesign but also on more specific team and individual development needs, the latter through our PRD processes.

Prior to the pandemic the council invested in LearnNL a cloud-based learning management system designed to support a more inclusive and accessible approach to learning whilst improving digital literacy. Going forward, as part of the Learning and Development Strategy, there will be a fully comprehensive learning and development offer for all colleagues within Children and Families, Justice Services and Adult Health and Social Care. This will include pathways for learning for job roles, highlighting the mandatory and essential training for all jobs within the Service. It will also give access to aspirational learning to support career progression within the services.

In relation to the development of this platform, there has also been ongoing sessions delivered to Adult Health and Social Care service management to highlight the use of Learn NL and its functions as a Learning Management System, using the available functions to record and maintain records in relation to mandatory training. This will be particularly beneficial when determining Care Inspectorate compliance issues or highlighting areas of concern that require attention across the services. Work has also been ongoing in relation to the development of the management toolkit and PRD management for all health and social care staff.

A summary of key activity over the period with respect to Learn NL, Assessment Centre, and training activity to supporting registration and the social care workforce and Post-qualifying Awards is as noted below:

## 5.8 LEARNNL

Total number of activities undertaken on LearnNL including mandatory learning – 11,001  
Leadership Development – 29 activities  
Fundamental Leadership – 5 Influential Leadership – 9

## 5.9 ASSESSMENT CENTRE AND REGISTRATION

The Assessment Centre continues to support SVQ, and PDA qualifications required to meet registration, role and CPD requirements. This is achieved through both in-house assessment and access to SVQs through external providers.

### **Awards completed (2022 – present)**

SCQF Level 6 (SVQ2) – 32  
SCQF Level 7 (SVQ3) – 5  
SCQF Level 9 (SVQ 4) – 1

### **Active Candidates – External Programmes (2022 – present)**

New College Lanarkshire – 20  
West Lothian College – 1

### **Active Candidates – Internal Programmes (2022 – present)**

SCQF Level 6 (SVQ2) – 2  
SCQF Level 7 (SVQ3) – 4  
SCQF Level 9 (SVQ4) – 3

## 5.10 POST GRADUATE OPPORTUNITIES

- Advanced Practice skills – 1 completed 2022
- Postgraduate in Management and Leadership – 1 completed 2022
- Postgraduate in Child Welfare and Protection @ Stirling University – 4 started in 2022 and due to be completed June 2023. A further four will commence September 2023 due to finish June 2024.
- Postgraduate Certificate in Child Welfare – 4 started in June 2022, due to be completed June 2023
- Postgraduate in Adult Support and Protection – 2
- Postgraduate in Contemporary Drug and Alcohol Studies -1
- Exploring the Theory and Practice of Psychological Trauma – 1
- MSc In Leading People Centred Care – 1
- PDA in Health and Social Care Supervision – 1

- MSC Applied Professional Studies Child Protection Module - 1
- Part funding of final year of PHD qualification – 1

### 5.11 PROFESSIONAL DEVELOPMENT AWARD IN PRACTICE LEARNING (PDA PL) SQA LEVEL 11

Over the past five years we have promoted practice learning and successfully built a strong cohort of competent and confident link workers and currently have a waiting list to become a practice educator.

Three social workers are due to qualify as practice educators in 2023 with a further five being put forward for the next cohort starting March 2024.

### 5.12 SOCIAL WORK DEGREE PATHWAY WITH THE OPEN UNIVERSITY

Over the year fifty-five staff members across different Social Work services from admin staff to support workers and managers expressed interested in gaining a Social Work Degree - requiring them to study in their own time and commit to self-funding.

Eight of these staff members were recruited to the Trainee Social Work programme. The qualification for this group is fully funded by the Health and Social Care partnership reserves; four of the trainees are undertaking the fast-track route to qualifying within eighteen months and the remaining four are undertaking the BA degree in Social Work and will qualify 2026/27.

As mentioned above in the UK Shared Prosperity Fund update, a further fourteen members of staff who were already part way through their qualification with the Open University are being financially supported to achieve their modules. These staff are from across Home Support, Justice, Access Social Work and Education and Family support workers. There are six employees completing their last year of the Social Work degree and their first assessed placement was fully funded and due to be completed in July 2023. These six employees will then be progressing onto their final assessed placements starting February 2024 and will qualify around October 2024.

The level of interest in completing social work training from a group of staff across the service whose position provides a good insight into both the rewards and challenges of a career in social work is encouraging and provides a strong base to further expand qualifying training opportunities should national investment in this area be forthcoming to supplement action taken to date.

### 5.13 STUDENT SOCIAL WORK HUB

Between April 2022 to August 2022: thirty-nine student social workers were placed across service users' groups. Thirty-one were placed in traditional placements with on-site Practice Educators and Link Workers. Due to the on-going issues following the pandemic, these

placements were initially more challenging due to remote working and limitations on the office environment. The Hub worked as best it could with the students to still provide meaningful learning opportunities and successfully support them in their placement. Following their final placement in the Hub, twenty-five students gained employment with North Lanarkshire Council and are in post on the newly qualified Social Work supported year.

Our first generic student hub was development as a “*test for change*.” Eight students from Strathclyde University were placed in the hub with an on-site Practice Educator from Talent and Organisational Development. Following a successful pilot, five of the eight students from this hub secured employment with NLC and transitioned onto our NQSW supported year and remain in post to date.

Between August 2022 to March 2023 two generic social work hubs were created - one in the North based at Cumbernauld Locality which had ten students who worked across Airdrie, Coatbridge, and Cumbernauld. The other hub was in the South and worked across Bellshill, Motherwell and Wishaw, this hub also had ten students. A full time Practice Educator was allocated to each Hub to work with the students during this time.

Work was undertaken within the hub by student social workers included kinship, childcare and community care assessment and criminal justice social work reports.

Between August 2022 and March 2023 there were nineteen student Social Workers placed in traditional placements across different service users’ groups. Six of these students were North Lanarkshire Council employees on their first assessed placement which was provided by the Hub.

There are currently another two student hubs which have twenty-two students from external universities with two on-site full-time Practice Educators. These hubs support Community Care and Justice.

In addition, we have again implemented two “*test for change*” sites in progress: one student based within the Virtual/Forest school base in Airdrie and two based in Access Social Work.

#### 5.14 NEWLY QUALIFIED SOCIAL WORK PROGRAMME

North Lanarkshire Council is one of 12 local authorities in Scotland who are working with the SSSC on the early implementation of a support year for Newly Qualified Social Workers (NQSW).

The Grant funding agreed by the SSSC for the year 2022-2023 was £30,000. This amount, along with further internal funding was used to employ a Practice Learning Officer to lead the development and implementation of a supported year for all NQSW recruited to North Lanarkshire Council. This decision was made to promote equality of opportunity across all NQSW employees, promote the consistency of support in adherence with SSSC recommendations, and further promote staff retention.

A consistent and quality induction was a Core Element of the supported year, and the NQSW development lead alongside colleagues from Talent and Organisational Development created a virtual social work induction that was placed on LearnNL. This can be used to update and inform all new employees to North Lanarkshire about the roles, functions, models, and aspirations of social work in North Lanarkshire.

Building on previous Early Professional Development sessions, the NQSW are now encouraged to attend twelve, 4 -weekly face to face sessions where support and learning directly align to the NQSW Standards that quantify the social work registration requirements for the SSSC.

Between April 2022 and March 2023, a total of 40 NQSW were recruited across all social work disciplines. Thirty-five of these had been students on placement at North Lanarkshire Council. All have been involved in the supported year.

Of this number, 3 NQSW have successfully completed the requirements of the supported year to date and have submitted their work to SSSC. A further seventeen will end their supported year by November 2023 with the remainder by April 2024. All have received training in relation to the expectations of the supported year, their Senior Social Workers have also received training in their changed role, as has senior management. As a result, the needs of our NQSW recognised as a priority, and NQSW learning, and development has been a focus of allocations of work, supervision, and training opportunities.

With a further 25 NQSW anticipated to join the supported year after March 2023, the ongoing development of the year remains paramount. Indications are that the NQSW supported year will be ratified by Scottish Government for it to be a mandatory requirement across all of Scotland from October 2024. North Lanarkshire Council are well placed to recruit and retain NQSW because of our current and future development.

#### 5.15 OTHER KEY TRAINING AND DEVELOPMENT ACTIVITIES

March 2023 saw the introduction of a newly established Health and Social Care sub team within Talent and Organisational Development. The sub team was developed due to the recognised needs and ongoing challenges the Adult Health and Social Care workforce continues to face in responding to competing priorities such as the registration agenda, recruitment and retention of staff as well as ensuring that staff have adequate access to learning and development pathways; all in keeping with our workforce development plans.

One of the key priority areas for the sub team is the co-ordination and management of the registration agenda. This area of work will be ongoing as we look at allocation of resources to meet the needs of services to ensure a sustainable and reliable model of delivery; whilst ensuring compliance levels are maintained and improved.

Work has already commenced regarding identifying priority areas of mandatory training particularly in relation to Level 1 Adult Support and Protection training made available for all Home Support staff and Level 2 for Service Delivery Coordinators. This will be a collaborative

effort involving all Adult Health and Social Care Teams throughout the Home Support services and the Adult Protection Committee. Furthermore, during this time priority is given to the delivery of mandatory Infection Control, Moving and Handling and Medication training. As of March 2023, a total of 1989 staff have attended events in relation to these key areas.

As well as the above we have also continued to offer core training in relation to Adult Support and Protection, Council Officer training, Appropriate Adult, Child Protection and Promoting Positive Behaviours. We have also continued with the delivery of essential mental health learning including ASIST, Suicide Alert, Safe Talk, Scottish Mental Health First Aid and Mental Health Stigma Workshops. There are further ongoing developments in relation to the roll out of Trauma Informed Practice.

There are two sessions of the Getting it Right in Child Protection training arranged to take place in May and October 2023. This will result in approximately 40 additional Social Workers being trained in this area. To date 293 people have registered to participate in Understanding Child Neglect eLearning module and 262 people have completed this. There have been 1349 registrations for Child Protection Awareness training and 1136 people have completed. 377 people have registered for Assessment and Planning for Children and Young people and 251 have completed.

In addition to the above mandatory and core programmes we have also commissioned access to widely requested training such as Autism and Neurodiversity, Sensory Impairment Awareness and Dementia Support Skills all of which were delivered using a blended approach of online and face to face learning. Due to the popularity of these courses, we envisage further opportunities to be developed in these areas in the future.

## 5.16 TRAUMA INFORMED PRACTICE

In line with the National Trauma framework, a significant priority continued to be changed to the delivery of social work services across systems and within organisations to improve outcomes for individuals and communities.

Senior leadership in North Lanarkshire committed to organisational change and the development of staff knowledge and skills. This was evident in the transformative change of the Hub implementation plan and whole family support approach based upon meaningful collaboration with people with lived experience of trauma.

To support the implementation of Trauma informed practice, build on, and add pace to the work, the Trauma training programme was integrated into training plans. Furthermore, a Senior Officer was appointed in late Feb 2023. This role supported the vision and actions of the steering group and the implementation of trauma training.

The training plan included all 4 levels of the National Trauma Training Programme. A universal element was also developed. This approach was mandatory for all staff to support understanding of trauma, its impacts and how to reduce re traumatization for people using our services and staff. Further methods and support are planned to be delivered to staff on a phased basis dependent on their service area and role.

## 5.17 LIVED EXPERIENCE

As has been reflected throughout this report, throughout 2022/23, the increased involvement of people with lived experience in influencing and shaping what we do has been very beneficial – across training, development activities and targeted employment of those with lived experience. Further work is planned across the service to enhance engagement with, and the participation of, people with lived experience. Alongside this, we anticipate that joint development sessions alongside people with lived experience for those staff involved in ethical commissioning will help to further embed lived experience into our overall approach.

## 5.18 REFLECTIVE LEARNING: THE SCOTTISH CHILD ABUSE INQUIRY/HISTORICAL ABUSE

Improvement work continues to take account of the reflective learning from the Scottish Child Abuse Inquiry, with many themes aligned with the ambitions of the Promise and associated development work. Both the Inquiry and the Promise highlight the power of language and the importance of robust record keeping, detailing the involvement of services with children and families, often at times of significant and life altering change. A particular focus has been a review the language used and recording practice by staff in in a range of settings to promote record keeping that is rights based, written in an accessible format and is trauma informed. A language leaflet was developed to support the workforce embed the key principles in practice. Records are often accessed by individuals to support their understanding of past events in their life. The service has seen a significant increase in requests for access to records. To increase confidence and competence across the workforce to engage with the requester and to complete the request, a range of development sessions were undertaken. The sessions were attended by 91 workers with follow up forums scheduled for the future.

## 5.19 SUPPORT FOR STAFF WELLBEING

As highlighted throughout this report, staff commitment and resilience has continued to be remarkable during these challenging times. As with any workforce, anywhere, staff are more than just staff, they are people too, with lives and families, and needs of their own. Workplace pressures, issues with staff recruitment and retention, in meeting the very high levels of demand, working within an agenda of significant change and the residual impacts of the COVID pandemic all have a degree of impact on staff well-being.

As part of our wider approach to wellbeing, we continue to have a focus on the wellbeing of staff within day-to-day practice and working arrangements, to manage and thrive. Our service continues to offer a wide range of staff wellbeing initiatives and supports, which helps meet many of the work-based challenges mentioned above. One of our key priorities in 2023/24 is to further embed a framework of well-being at work to ensure all staff have maximum opportunities to flourish, in turn being more equipped to support the people of North Lanarkshire to meet their outcomes.

## 6. LOOKING FORWARD – PRIORITIES FOR 2022-2023 AND BEYOND

As highlighted in previous reports, several interrelated factors including COVID legacy issues, the cost-of-living crisis, the increased demand for social work interventions and support, the increased number of people who have complex needs and staffing challenges in health and social care, all mean that meeting demand within available resources will continue to prove difficult in the forthcoming year and beyond. Challenges in other parts of the public sector, such as the acute health services, can also reasonably be anticipated.

However, within North Lanarkshire this is partially mitigated by a strong partnership ethos, and integrated working across Health and Social Care, the Education and Families Service and the wider Council and Partnership and we will also continue with our whole system approach to help meet these challenges. This includes the Empowering Cluster's model within Education and Families, the 3 Conversations Model in Adult Services and our approach to whole family planning and support, a key part of the Council's new Resilient People Programme of Work and the Health and Social Care Partnership's Strategic Commissioning Plan.

Equally, and both despite and because of, the challenges created by financial restrictions including those of the increasing reliance on short-term funding for transformational activity, we will continue efforts to develop and embed a more strategic approach to investing in prevention to support good lives and our balance of care. This is critical to preventing and mitigating greater need and also to longer term sustainability but will require ongoing facilitation at national as well as local level.

Income maximization and tackling poverty continue to be key strands in the delivery of social work and social care in North Lanarkshire. These have become increasingly integrated into day-to-day practice and service delivery and have a strong fit with the core values of social work – promoting, independence, self-help, and self-reliance. The challenges faced by the people who require our support are significant. The close association across poverty, health inequalities and statutory interventions across all social work care groups and the disproportionate experience of poverty also impacting on unpaid carers mean that tackling poverty in all its forms will continue to be a priority for us.

Workforce pressures and issues in social work and social care continue to need attention at both national and local level to reduce the risk to the delivery of statutory responsibilities to maintain the quality of care and support, and to ensure capacity. Measures set out in this report including most recently the re-evaluation of frontline social work posts should bring some benefit.

Digital developments will continue to be essential and create opportunities for wider engagement. We have invested in an enhanced assistive technology team. Whilst technology can't ever replace face to face human contact, it can play a vital role in offering virtual support, minimizing risk, maximizing independence, and reducing isolation. Our intention ensures that

where appropriate, assistive technology is introduced at the right time, as a preventative or anticipatory support, rather than as a reactive measure.

Our focus on building trauma informed systems and organisations continues, as well as to strengthen practice in this area. This will be fundamental in creating a healthy service which supports staff to deliver excellence for our communities.

As intimated in last year's report, the conclusion of a tender for a new social work case management system was anticipated to be completed early in 2022/23. This process has now concluded, and work is well under to migrate to the new MOSAIC system. Whilst this will require significant transitional work over the coming year it will ultimately more effectively support practice and will enhance performance management information. Work has also progressed towards the introduction of a dynamic scheduling system within Home Support.

As highlighted in last year's report, the context for the delivery of social work services will continue to be impacted by key national policy drivers including the Promise, the yet to be finalised incorporation of UNRC into Scots Law, the Vision and Strategic Priorities for Justice, and perhaps most significantly by the planning and legislative process for the proposed National Care Service which continues to have the potential to significantly change local integration and service delivery arrangements both in respect to Adult and Education and Family Services.

Additionally wider and emerging demands on social work services include the National Transfer Scheme for Unaccompanied Asylum-Seeking Children and, with the resettlement support needs arising from the conflict in Ukraine.

The overall scale of change, alongside the demand and workforce pressures for social work will continue to challenge capacity. Looking ahead there will be a need to maintain the benefits of local best practice and partnership working whilst progressing the system transformation required to address longstanding problems and to support outcomes.

Continued strong leadership will be required to support staff and to balance pressures with core service delivery, and the associated risk to those we support, with the change and improvement capacity required for the scale of envisaged over the coming years.



# North Lanarkshire Council Report

## Adult Care and Social Work Committee

Does this report require to be approved?  Yes  No

Ref MD/RMCG/SF Date 14/11/23

## Annual Performance Report 2022/23 - Health & Social Care North Lanarkshire

**From** Morag Dendy, Chief Officer / Head of Service (Performance, Planning, and Quality Assurance)

**E-mail** DendyM@northlan.gov.uk **Telephone**

### Executive Summary

The purpose of the report is to provide the Committee with the Annual Performance Report – Health and Social Care North Lanarkshire 2022/23.

### Recommendations

It is recommended that the Adult Care and Social Work Committee:

- (1) Review the content of the draft Annual Performance Report 2022/23 - Health & Social Care North Lanarkshire, which is appended to this report.

### The Plan for North Lanarkshire

Priority	Improve the health and wellbeing of our communities
Ambition statement	(25) Ensure intelligent use of data and information to support fully evidence based decision making and future planning
Programme of Work	Resilient People

### 1. Background

- 1.1 North Lanarkshire IJB is required by the Public Bodies (Joint Working) Regulations 2014 to publish an Annual Performance Report by July 31st each year.
- 1.2 The content of the Annual Performance Report is focused on the National Integration Indicators (the Core Suite and Ministerial Steering Group indicators). The purpose of standardising Annual Performance Reports for Integration Authorities in this way is to support Integration Authorities in improving the consistency of reporting for these indicator sets.
- 1.3 The Annual Performance Report 2022/23 - Health & Social Care North Lanarkshire presents the performance in relation to these metrics, alongside performance information relating to inspections carried out by the Care Inspectorate and additional local performance information in the form of the Chief Executive's scorecard. Progress against the National Health & Wellbeing Outcomes is also described in the report. A

section has been dedicated to presenting and describing financial performance for 2022/23.

- 1.4 In order to comply with the requirements to publish the APR by 31st July 2023, a draft version has been available on the IJB website since that date, pending approval by the IJB. This was required due to the timescales imposed on the partnership to produce and publish an Annual Performance Report by 31st July using Public Health Scotland data that is not published on their website until 04th July 2023, as previous publications of the data set are provided to the Integration Authorities for management use only.
- 1.5 Members should note the most up-to-date available has been used in the report, however for many indicators this relates to previous years; NI1 – NI9 are based on the results of the Health and Care Experience Survey, which was last carried out in 2021/22 and for others, 2022/23 data is not yet available. For indicators NI12 – NI16, the performance for calendar year 2022 is presented per the instructions of Public Health Scotland as the 2022/23 data for these indicators has not been validated for publication.

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## **2. Report**

- 2.1 The Annual Performance Report 2022/23 - Health & Social Care North Lanarkshire describes significant progress made in pursuit of the National Health & Wellbeing Outcomes. This progress has been made against a challenging position of recovery and remobilisation of services following the C19 pandemic, which is reflected in the performance in some of the metrics presented in the report. Performance in North Lanarkshire is broadly comparable with similar authorities and the Scottish average in many areas and in those areas where performance improvements are required, this is managed through the performance framework in place within the Health and Social Care Partnership.

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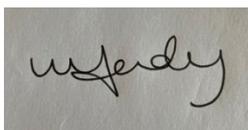
## **3. Measures of success**

- 3.1 The content of the Annual Performance Report is focused on the National Integration Indicators (the Core Suite and Ministerial Steering Group indicators). A framework is in place within the North HSCP to ensure the continual monitoring of performance data and information, and any improvement actions associated with the performance monitoring.

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## **4. Supporting documentation**

- 4.1 Appendix 1: Annual Performance Report 2022/23 – Health & Social Care North Lanarkshire.



**Morag Dendy**  
**Chief Officer / Head of Service (Performance, Planning and Quality Assurance)**

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## 5. Impacts

<p><b>5.1 Public Sector Equality Duty and Fairer Scotland Duty</b> Does the report contain information that has an impact as a result of the Public Sector Equality Duty and/or Fairer Scotland Duty? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, please provide a brief summary of the impact?</p> <p>If Yes, has an assessment been carried out and published on the council's website? <a href="https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments">https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments</a> Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.2 Financial impact</b> Does the report contain any financial impacts? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant financial impacts been discussed and agreed with Finance? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.3 HR policy impact</b> Does the report contain any HR policy or procedure impacts? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant HR impacts been discussed and agreed with People Resources? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.4 Legal impact</b> Does the report contain any legal impacts (such as general legal matters, statutory considerations (including employment law considerations), or new legislation)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant legal impacts been discussed and agreed with Legal and Democratic? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.5 Data protection impact</b> Does the report / project / practice contain or involve the processing of personal data? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, is the processing of this personal data likely to result in a high risk to the data subject? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, has a Data Protection Impact Assessment (DPIA) been carried out and e-mailed to <a href="mailto:dataprotection@northlan.gov.uk">dataprotection@northlan.gov.uk</a> Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.6 Technology / Digital impact</b> Does the report contain information that has an impact on either technology, digital transformation, service redesign / business change processes, data management, or connectivity / broadband / Wi-Fi? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>

<p>Where the impact identifies a requirement for significant technology change, has an assessment been carried out (or is scheduled to be carried out) by the Enterprise Architecture Governance Group (EAGG)?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.7 Environmental / Carbon impact</b></p> <p>Does the report / project / practice contain information that has an impact on any environmental or carbon matters?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If Yes, please provide a brief summary of the impact?</p>
<p><b>5.8 Communications impact</b></p> <p>Does the report contain any information that has an impact on the council's communications activities?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If Yes, please provide a brief summary of the impact?</p>
<p><b>5.9 Risk impact</b></p> <p>Is there a risk impact?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If Yes, please provide a brief summary of the key risks and potential impacts, highlighting where the risk(s) are assessed and recorded (e.g. Corporate or Service or Project Risk Registers), and how they are managed?</p>
<p><b>5.10 Armed Forces Covenant Duty</b></p> <p>Does the report require to take due regard of the Armed Forces Covenant Duty (i.e. does it relate to healthcare, housing, or education services for in-Service or ex-Service personnel, or their families, or widow(er)s)?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If Yes, please provide a brief summary of the provision which has been made to ensure there has been appropriate consideration of the particular needs of the Armed Forces community to make sure that they do not face disadvantage compared to other citizens in the provision of public services.</p>
<p><b>5.11 Children's rights and wellbeing impact</b></p> <p>Does the report contain any information regarding any council activity, service delivery, policy, or plan that has an impact on children and young people up to the age of 18, or on a specific group of these?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If Yes, please provide a brief summary of the impact and the provision that has been made to ensure there has been appropriate consideration of the relevant Articles from the United Nations Convention on the Rights of the Child (UNCRC).</p> <p>If Yes, has a Children's Rights and Wellbeing Impact Assessment (CRWIA) been carried out?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>

# Annual Performance Report 2022/23

Health & Social Care North Lanarkshire



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## 1. Introduction

Welcome to the Annual Performance Report of the North Lanarkshire Health and Care Partnership (HSCP) for the period from April 2022 to March 2023.

This report presents a range of both qualitative and quantitative information, demonstrating our performance in relation to the National Health & Wellbeing Outcomes, National Core Integration Indicators, Ministerial Strategic Group indicators, and local performance measures. The Integration Joint Board receives regular progress reports on performance, and you can find these reports, along with our previous Annual Performance Reports on our website: <https://www.hscnorthlan.scot/>.

The Annual Performance Report provides an opportunity to reflect on the past year and celebrate the accomplishments of North Lanarkshire Health and Social Care services, employees, and partners.

It acknowledges the ongoing collaborative work undertaken with service users, carers, families, and communities to improve on performance. Moreover, it recognises and acknowledges the existing and future challenges that the partnership faces, many of which are influenced by the long-lasting effects of the COVID-19 pandemic.

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*The report presents data and information on performance and describes significant developments in 2022/23.*

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The report presents data and information on performance and describes significant developments in 2022/23. The initial section of the report focuses on statutory reporting of performance information showing a comparison with the Scottish position and a trend analysis is provided to understand the local context for these performance indicators. Regrettably, due to circumstances beyond the partnership's control, we are unable to present a complete picture for some of the indicators and where this is the case, the reasons for this limitation are explained within the corresponding section of the report.

The remaining part of the report provides more information for each of the National Outcomes, highlighting the various advancements and achievements throughout the year 2022/23.

## 2. Measuring Performance Under Integration

Since 2016/17, Integration Authorities have been required by legislation to report on the Core Suite of Integration Indicators within their Annual Performance Reports. These indicators were developed to help Integration Authorities review their progress towards achieving each of the **National Health and Wellbeing Outcomes**<sup>1</sup>, which focus on improving how services are provided and the difference that integrated health and social care services should make for people. The indicators were developed in consultation with a wide range of stakeholders and are intended for consideration within the wider context of health and social care. They help the HSCP identify areas for improvement and assist with strategic planning.

Indicator values are derived from national data sources for each of the 23 indicators to enable comparability between local areas and with Scotland. There are 23 indicators in total, comprising of nine indicators based on the Health and Care Experience Survey and ten other measures mainly using health activity, community and deaths information. The remaining four indicators cannot be reported on as national data is not available or there is not yet a nationally agreed definition.

The nine indicators based on the Health and Care Experience Survey, which has been run every two years since 2009 detail people's experiences of accessing and using various services. The Health and Care Experience Survey (successor to the GP and Local NHS Services Patient Experience Survey) asks about people's experiences of accessing and using their GP practice and Out of Hours services, aspects of care and support provided by local authorities and other organisations and caring responsibilities and related support:

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<sup>1</sup><https://www.gov.scot/publications/national-health-wellbeing-outcomes-framework/>

Scottish Health and Care Experience Survey								
Indicator	Title	NL 2015/16	NL 2017/18	NL 2019/20	NL 2021/22	Scotland 2021/22	HSCNL Trend from Previous Survey	Scotland Trend from Previous Survey
NI - 1	Percentage of adults able to look after their health very well or quite well	91.7%	90.3%	90.5%	87.5%	90.9%	↓	↓
NI - 2	Percentage of adults supported at home who agreed that they are supported to live as independently as possible			77.6%	79.8%	78.8%	↑	↓
NI - 3	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided			71.2%	67.1%	70.6%	↓	↓
NI - 4	Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated			70.2%	66.6%	66.4%	↓	↓
NI - 5	Percentage of adults receiving any care or support who rate it as excellent or good			77.8%	74.0%	75.3%	↓	↓
NI - 6	Percentage of people with positive experience of care at their GP practice	79.3%	75.5%	68.3%	51.8%	66.5%	↓	↓
NI - 7	Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life			75.7%	77.0%	78.1%	↑	↓
NI - 8	Percentage of carers who feel supported to continue in their caring role	41.2%	33.2%	32.6%	25.1%	29.7%	↓	↓
NI - 9	Percentage of adults supported at home who agreed they felt safe			80.0%	79.8%	79.7%	↓	↓

*N.B. Results for 2019/20 and 2021/22 for indicators 2, 3, 4, 5, 7 and 9 are not directly comparable to figures in previous years due to changes in survey wording and methodology.*

	Performance is better than previous reporting period
	Performance is worse than previous reporting period

## National Outcome Indicators – Benchmarking – 2021/22

	Scotland	North Lanarkshire	East Ayrshire	Eilean Siar	Dundee City	North Ayrshire	Inverclyde	West Dunbartonshire	Glasgow City
Percentage of adults able to look after their health very well or quite well	90.9%	87.5%	89.5%	93.4%	88.6%	88.8%	90.1%	89.9%	88.1%
Percentage of adults supported at home who agree that they are supported to live as independently as possible	78.8%	79.8%	76.1%	82.5%	84.0%	81.3%	82.9%	83.2%	80.3%
Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided	70.6%	67.1%	71.0%	72.4%	75.0%	73.5%	66.7%	75.1%	71.1%
Percentage of adults supported at home who agree that their health and social care services seemed to be well co-ordinated	66.4%	66.6%	60.0%	70.8%	77.5%	64.4%	68.6%	77.2%	70.1%
Percentage of adults receiving any care or support who rate it as excellent or good	75.3%	74.0%	79.6%	82.6%	84.1%	75.8%	81.3%	77.5%	74.9%
Percentage of people with positive experience of care at their GP practice	66.5%	51.8%	56.9%	80.2%	66.6%	61.2%	58.7%	64.6%	71.4%
Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life	78.1%	77.0%	75.7%	84.2%	71.5%	77.6%	79.6%	85.7%	79.6%
Percentage of carers who feel supported to continue in their caring role	29.7%	25.1%	27.6%	41.2%	31.0%	30.8%	28.7%	31.7%	33.7%
Percentage of adults supported at home who agree they felt safe	79.7%	79.8%	73.0%	88.0%	77.1%	83.0%	81.9%	87.9%	81.0%

The table above provides a comparison for 2021/22 with North Lanarkshire's 'Family Group' of Integration Authorities for those National Outcome Indicators that are sourced from the Health and Care Experience Survey. The results highlight some areas where improvement might be made, including supporting people to live as independently as possible, health and social care services being well co-ordinated, improving or maintaining quality of life, people having a positive experience of care at their GP practice and carers feeling supported to continue in their caring role.

Use of 2021 calendar year data instead of 2021/22 financial year data for indicators 12, 13, 14, 15 and 16

The primary source of data for these indicators are Scottish Morbidity Records (SMRs) which are nationally collected discharge-based hospital records. Following recommendations made by Public

Health Scotland (PHS) and communicated to all Health and Social Care Partnerships, the most recent reporting period available is calendar year 2021; this ensures that these indicators are based on the most complete and robust data currently available. Figures presented may not fully reflect activity during 2021/22 due to the varying impact of COVID-19 at different points of the pandemic.

## Indicator 20

NHS Boards were not able to provide detailed cost information for 2020/21 due to changes in service delivery during the pandemic. As a result, PHS have not provided information for indicator 20 beyond 2019/20. PHS previously published information to calendar year 2020 using costs from 2019/20 as a proxy but, given the impact of the COVID-19 pandemic on activity and expenditure, PHS no longer consider this appropriate.

Indicator	Title	NL 2017	NL 2018	NL 2019	NL 2020	NL 2021	Scotland 2021	HSCNL Trend	Scotland Trend
NI - 11	Premature mortality rate per 100,000 persons	482	517	515	581	580	466	↓	↑

Indicator	Title	NL 2018/19	NL 2019/20	NL 2020/21	NL 2021/22	NL 2022	Scotland 2022	HSCNL Trend	Scotland Trend
NI - 12	Emergency admission rate (per 100,000 population)	15829	16280	13827	15120	14765	11155	↓	↓
NI - 13	Emergency bed day rate (per 100,000 population)	120784	122569	105484	119150	120073	113134	↑	↑
NI - 14	Emergency readmissions to hospital within 28 days of discharge (rate per 1,000 discharges)	101	106	123	115	114	102	↓	↓
NI - 15	Proportion of last 6 months of life spent at home or in a community setting	89%	89%	90%	90%	89%	89%	↓	↓
NI - 16	Falls rate per 1,000 population aged 65+	22.6	21.3	19.1	20.5	19	22	↓	↓
		NL 2018/19	NL 2019/20	NL 2020/21	NL 2021/22	NL 2022/23	Scotland 2022/23	HSCNL Trend	Scotland Trend
NI - 17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections	76%	83%	80%	78%	77%	75%	↓	↓
		NL 2018	NL 2019	NL 2020	NL 2021	NL 2022	Scotland 2022	HSCNL Trend	Scotland Trend
NI - 18	Percentage of adults with intensive care needs receiving care at home	75%	74%	75%	75%	71%	64%	↓	↓
		NL 2018/19	NL 2019/20	NL 2020/21	NL 2021/22	NL 2022/23	Scotland 2022/23	HSCNL Trend	Scotland Trend
NI - 19	Number of days people spend in hospital when they are ready to be discharged (per 1,000 population)	996	1109	781	821	970	919	↑	↑
		NL 2017/18	NL 2018/19	NL 2019/20	NL 2020/21	NL 2021/22	Scotland 2021/22	HSCNL Trend	Scotland Trend

The data for Indicator NI – 20, Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency is no longer available from Public Health Scotland and has been excluded from this report.

	Performance is better than previous reporting period
	Performance is worse than previous reporting period

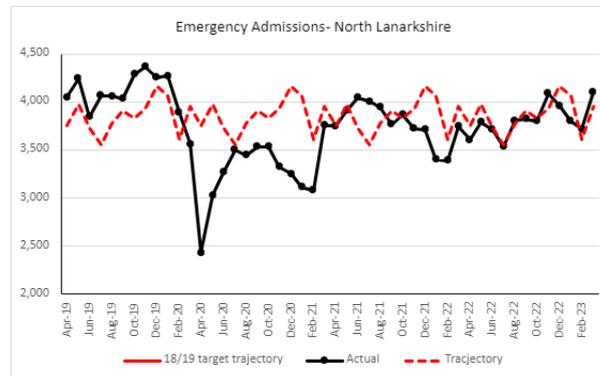
## National Integration Indicators – Benchmarking – 2022

	Scotland	North Lanarkshire	East Ayrshire	Western Isles	Dundee City	North Ayrshire	Inverclyde	West Dunbartonshire	Glasgow City	Latest data
Premature mortality rate per 100,000	466	580	556	428	599	568	509	627	661	2021
Emergency admission rate per 100,000	11155	14765	13437	14667	12795	13312	12378	12744	11079	2022
Emergency bed day rate for adults per 100,000	113134	120073	126277	135776	106307	148978	145349	143361	126318	2022
Emergency readmission to hospital within 28 days of discharge (per 1,000 discharges)	102	114	108	110	140	102	78	85	96	2022
Proportion of last 6 months of life spent at home or in the community	89.3%	89.3%	88.9%	89.6%	90.3%	88.5%	87.7%	88.0%	88.2%	2022
Falls rate per population aged 65+	22	19	18	25	33	19	23	22	27	2022
Proportion of care services graded 'Good' (4) / better in Care Inspectorate Inspections	77.6%	83.0%	75.2%	82.1%	75.2%	80.4%	81.7%	77.0%	71.8%	2022/23
Percentage of adults with intensive care needs receiving care at home	63.5%	71.0%	69.8%	60.3%	60.6%	76.4%	67.6%	71.3%	59.2%	2022
Number of days people aged 75+ spend in hospital when ready to be discharged, per 1,000 population	919	970	654	1229	802	1038	460	1441	976	2022/23

## Measuring Performance Under Integration (MPUI)

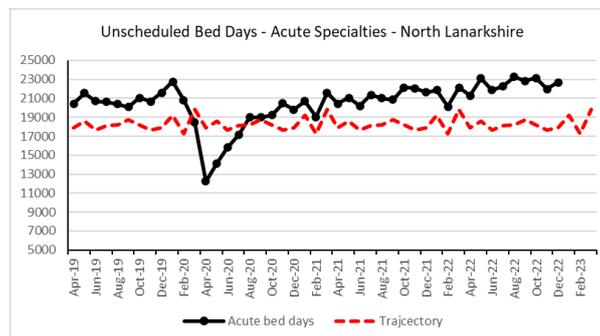
### Emergency Admissions

Based on agreed trajectories, our objective for 2022/23 was to manage the anticipated admissions at the same level as 2021/22. The actual position for 2022/23 was 45,724 emergency admissions which represents an increase of 0.6% from 2021/22.



### Unscheduled Bed Days

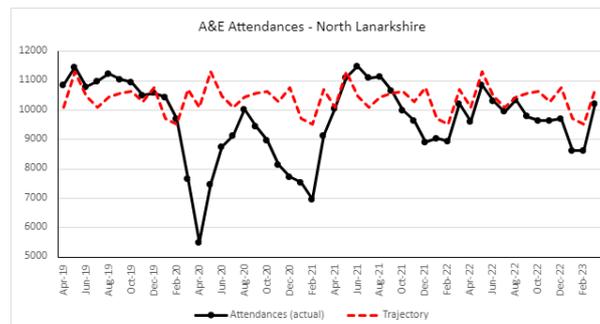
Based on agreed trajectories, our objective for 2022/23 was to achieve a reduction in the number of unscheduled bed days across acute specialties from 254,828 in 2021/22 to 219,249 in 2022/23, a reduction of 14%. The actual position for 2022[1] was 266,609 bed days.



[1] Full financial year figures are not available at time of publication

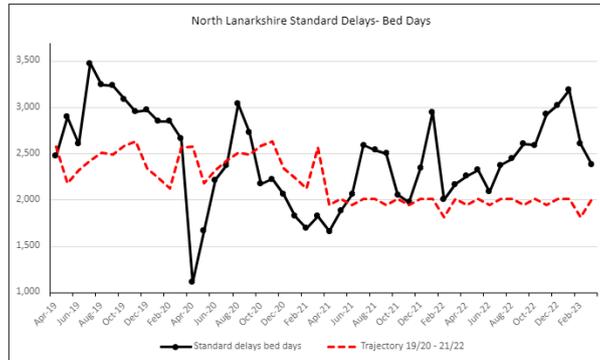
### A&E Attendances

Based on agreed trajectories, our objective for 2022/23 was to maintain the same level of attendances as 2021/22. The actual position for 2022/23 was 117,378 A&E attendances which was 5.7% lower than our planned trajectory.

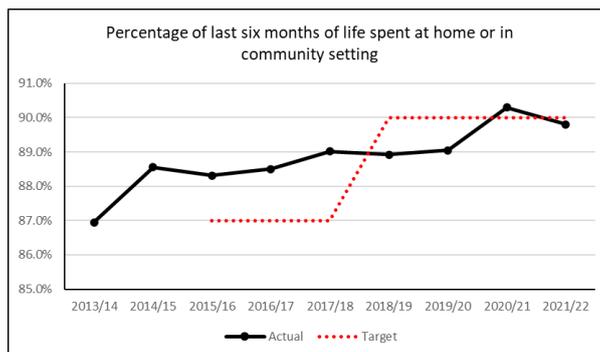


## Delayed Discharge

Based on agreed trajectories, our objective for 2021/22 was to continue our agreed trajectory for reducing the number of occupied bed days due to standard delays, from 26,744 in 2021/22 to 23,725 in 2022/23. The actual position for 2022/23 was 30,839 occupied bed days which represents an increase of 15% from the previous year. The continued pressure on health and social care services continued throughout 2022/23 resulting in the number of bed days due to standard delays remaining beyond our planned trajectory.



## End of Life Care

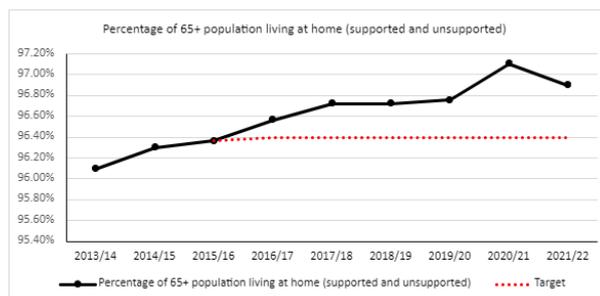


The percentage of the last six months of life spent at home or in community settings has gradually increased since 2015/16, however 2021/22 witnessed a very small reduction.

## Balance of Care

The percentage of people aged 65+ who live at home in North Lanarkshire remains high at 96.9% in 2021/22.

Using benchmarked data from the Local Benchmarking Framework for 2021/22, approximately 68% of older people with long term needs are supported at home. This compares well with the Scottish average and other similar Health & Social Care Partnerships. North Lanarkshire has the fifth highest percentage of all mainland council areas in Scotland.



### 3. Our Progress Against the National Health & Wellbeing Outcomes

National Health and Wellbeing Outcome 1

People are able to look after their own health and wellbeing and live in good health for longer

National Health and Wellbeing Outcome 5

Health and Social Care Services contribute to reducing health inequalities

## Prevention and Early Intervention

*The HSCP believe that our available funding is directed to best effect when it has regard to early intervention and prevention. In 2022/23, the HSCP delivered a range of prevention and early intervention Programmes with a focus on reducing inequalities.*

### Early and preventative interventions – Right Support, Right Time Improving Access to Services

## Healthy Schools

Developed by NHS Lanarkshire's Healthy Lifestyle and Weight Management Service in conjunction with North Lanarkshire Council, as well as input from practitioners and learners, Healthy Schools is an example of health and education services working in partnership to support the future generations of Lanarkshire.

The interactive website, which has been in circulation since 2014 to support education staff and nursery, primary and secondary pupils, was written by teachers from North and South Lanarkshire in conjunction with local NHS and Health & Social Care staff.

In September 2022, the website was re-launched with a new look and design, with updated materials for all levels and now has new resources specifically aimed at S5 and S6 pupils. To mark this, NHS Lanarkshire held an event to showcase it to various stakeholders within Lanarkshire.

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*To mark this, NHS Lanarkshire held an event to showcase it to various stakeholders within Lanarkshire.*

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The Healthy Schools framework supports practitioners across establishments in North and South Lanarkshire to co-design and co-create relevant, appropriate Health & Wellbeing curricula with their children and young people. The Healthy Schools framework provides a 'one stop shop' for practitioners that includes suggested Health & Wellbeing Experiences and Outcomes. Working with this framework will support the delivery of Health & Wellbeing for children and young people across Lanarkshire. This is further supported by additional CLPL, training and support sessions to enhance provision in educational establishments.

The website is available to support children and their families to look after and improve their health and wellbeing by providing a health education framework which can be used by practitioners and teachers. The structured framework contains all the learning & teaching resources and materials

needed to support the delivery of health & wellbeing and helps education staff to plan and deliver individualised health and wellbeing education which compliments existing teaching resources.

## Breastfeeding

The HSCP aim is to make North Lanarkshire a place where breastfeeding is the norm and build a supportive community and environment to encourage more women to feel comfortable breastfeeding for as long as they want, recognising both the short and long-term health benefits of breastfeeding for both mother and baby. The HSCP support breastfeeding as the optimal infant feeding choice for all parents.

NLC continue with work to become the first breastfeeding-friendly council in Scotland; this includes work with schools and designing new community buildings to include breastfeeding facilities. In addition, each Community Board area in North Lanarkshire has a breastfeeding champion in place to support our commitment to improving breastfeeding rates.

In October 2022, Health Visitor and Family Nurse services were again awarded 'Baby Friendly' accreditation from the UNICEF Baby Friendly Initiative. The re-accreditation recognises the high standard of their work supporting breastfeeding and helping parents form close, loving relationships with their children during the critical early years. Health visiting teams work with mothers and fathers, their families and community groups across Lanarkshire to promote the health and wellbeing of children and reduce inequalities from the antenatal period until children start school.

The process of accreditation includes feedback from mothers about their experience of the health visitor service, staff training assessments, and an audit and evaluation of the service. In awarding the accreditation UNICEF commented on the very high standards of care, the extremely knowledgeable staff and their excellent and sensitive communication skills.

## Newmains and St Brigid's Community Hub

The Newmains and St Brigid's Community Hub is a shared campus development that accommodates three independent establishments: Newmains Primary school, St Brigid's Primary school and Newmains Family Learning Centre. The facility was handed over in February 2023 and provides an inclusive learning environment where state-of-the-art facilities are provided for children, young people and members of the community.

The Community Hub, which is the first community hub of its kind in North Lanarkshire Council provides for a focus on health and wellbeing, and links with the wider Newmains community. Families and local groups can enjoy the benefits of the site including the outdoor facilities, which provide enhanced leisure and recreational facilities for all members of the community.

## Engagement & Participation

Community boards are the foundation of the community planning process in North Lanarkshire. In North Lanarkshire nine Community Boards have been established and embedded to support community leadership, involvement and capacity building within their geographical area, focussing activity through a local outcome and improvement plan (LOIP).

The Chief Social Work Officer undertakes the role of Community Co-ordinator for one of the local boards and the Head of Adult Social Work, and the Head of Planning Performance and Quality Assurance provide a link to the Health and Social Care Partnership and its strategic commissioning activity across all Community Boards. Senior Social Work Managers also participate in area-based teams and the sub-groups which support the delivery of the LOIPs

The multi-agency Local Partnership teams were launched to support the development of the community planning agenda within these community partnership areas. The Managers from each of the localities within the Health & Social Care Partnership are key members of these forums, and this offers opportunities to co-ordinate our locality improvement activities across the wider Community Planning Partnership.

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*Community boards are the foundation of the community planning process in North Lanarkshire.*

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A review of participation and engagement was commissioned during 2021/222 and the outputs and recommendations were presented to the IJB in April 2022 as HSCNL Review of engagement and participation structures. Aligned to North Lanarkshire Council's Delivering for Communities report, the HSCP has finalised structural changes, which ensure robust and proactive systems and processes that maximise the use of the Community Boards as the key vehicle for participation and engagement. The Strategic Commissioning Plan and the associated Programme of Work are closely aligned with the Local Outcome Improvement Plans for each of the Community Board areas. Our overall structure for delivery remains with six localities, with three each aligned to a sector (North East and North West), which allows for closer relationship with the two acute hospitals located within North Lanarkshire.

## Living Well in the Community

Living Well in the Community is a multi-professional, cross-sector collaboration of Support Staff, Community Rehabilitation, Nursing, Health Visiting, Mental Health, Care at Home Teams, Equals Advocacy (Third Sector Advocacy Organisation), Frailty Specialists (Secondary Care), Information Technology, Pharmacy, Primary Care and Public Health Scotland.

The team has a preventative approach for older adults in the community who are at high risk of deterioration. The overall aim of the approach is to improve outcomes and move away from crisis intervention as the only option for this cohort of patients. This approach is deployed across three Lanarkshire GP practices; despite the constraints resulting from the C19 pandemic, 62 older adults at high risk of deterioration have been identified and have had person-centred outcomes realised, including supported frailty self-assessments.

The Coatbridge Living Well in the Community team at Coathill Hospital won the 'Integrated Care Award' category at the Scottish Health Awards ceremony in November 2022 in recognition of their work to put the patient voice at the heart of their practice, and the early intervention and prevention work they carry to allow people wanted to spend as much time as possible in the homeliest setting and where possible, to support people to remain at home.

## National Health and Wellbeing Outcome 2

People, including those with disabilities or long-term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community

### Discharge Without Delay (DWD)

Discharge Without Delay is a whole system approach which supports people to be cared for at home (or as close to home as possible), prevents avoidable admissions to hospital and, where hospital admission is necessary, supports timely discharge. This programme was introduced towards the end of 2021/22 and has continued into 2022/23 and beyond as a priority for the partnership.

The Home Assessment Team (HAT) was developed as a new team within North Lanarkshire and was launched in early 2022. The team works collaboratively with hospital discharge hubs and clinical teams to support timely discharge from hospital to enable an assessment of each person's immediate and longer-term needs in their own home. This can include anything from signposting to support from a statutory service and community care assessment.

The Home Assessment Team take a multi-disciplinary approach to person centred care and consists of Home Support staff, AHP's, Clinical Responders and Social Work staff to embed Home First principles to enable people to be supported to return home for a period of assessment. The HAT is receiving an increasingly greater volume of referrals and a Home Assessment Team Development Plan is in place to streamline and reduce duplication of service from the teams working in this area. The dynamic between Integrated Rehabilitation, Hospital Social Work, Home Assessment Team and Reablement has been recognised as allowing an opportunity to provide one seamless combined service. The development plan is currently focussed on services to support discharge, however a second phase is planned looking at the interaction with Hospital at Home and other services placed to support admission prevention and avoidance.

Multi-disciplinary and multi-agency focus groups are planned to look at the available resources and patient/client pathways, which will inform the implementation of the development plan. A governance framework has been developed to support this work, which is overseen by a Programme Board.

### Technology Enabled Care

Additional funding has been allocated directly to Health and Social Care Partnerships to support an increase in the use of Community Equipment and Technology Enabled Care (TEC). In North Lanarkshire, a dedicated TEC Team has been formed to support the use of technology within the HSCP to support individuals within their homes and communities. The focus is on embedding technology into assessment and planning processes; providing training to all staff groups on technology and its use in care and support; supporting with risk assessments; ensuring technology support advice is embedded in SDS; and providing high level data on the technology being used within our communities. Our approach is aligned to the national guidance on the promotion of technology that can be both an early intervention and prevent the need for supporting services to be put in place where a suitable TEC alternative exists.

The HSCP is actively promoting Technology Enabled Care through the TEC Team and the TEC Flat, which is a demonstrator property for those interested in the potential solutions to meet their needs. The TEC Team supports Locality Teams to maximise the use of innovative technology enabled care and to review the support arrangements for existing clients, considering the potential use of technology enabled care solutions to support better and more independent living.

Other initiatives support the wider TEC agenda. Partnership initiatives with carer support organisations have been undertaken to raise awareness of the possibilities that assistive technology can bring; including risk mitigation, remote support, medication prompts, personal locators, and a diverse range of other technology-based solutions. Most items are available, free of charge to the end-user. This enhances our existing Making Life Easier (MLE) initiative, whereby people can self-refer and self-access smaller enabling pieces of equipment.

## Operation Flow and Operation Flow 2: A New Model of Care

2022/23 and in particular, the winter period, was a challenging time for HSCP services, patients and staff. The continued impact of the COVID-19 pandemic resulted in service pressures and ongoing disruption in some service areas. In response to this, the HSCP and partners developed a clear plan to help redesign and rebuild services with the aim of increasing resilience within the service and the wider system, and also to provide a framework for whole system improvement programme.

Operation Flow was deployed, including the successful short term Firebreak in February to March 2023. This realised significant improvement across the Health and Social Care system, including improved opportunities to support people to remain well at home, a reduction in hospital occupancy and length of stay and a very significant improvement in 4 Hour A&E access, and an important reduction in ambulance waits, including 8 and 12 hour delays.

The best practice and lessons learned from Operation Flow have been recorded and shared, however the improvements in flow across the whole system realised during the firebreak were not sustained beyond that phase. The second phase of this work has since been designed and launched in June 2023 as Operation Flow 2, which is a plan for a sustainable and resilient way forward with a clear focus on improving patient and staff experience as well as key performance improvements.

The new programme is focused at improving the system across the full patient pathway from avoiding hospital admission through to discharge and beyond. It is structured in five operational Task & Finish Groups who are responsible for developing and implementing the key changes. These groups are:



The Programme includes three key steps:



Operation Flow 1 involved considerable whole-system development work undertaken jointly by NHS Lanarkshire, Health and Social Care North Lanarkshire, South Lanarkshire Health and Social Care Partnership and Scottish Ambulance Service and this will continue through the duration of Operation Flow 2.

## National Health and Wellbeing Outcome 3

People use health and social care services have positive experiences of those services and have their dignity respected

### Community Solutions

Established in 2012, Community Solutions is a successful, HSCNL cross-sector health and social care investment and improvement programme for North Lanarkshire that is improving people’s health, wellbeing, quality of life and equality by investing in community-led initiatives which build community, family and individual strengths and resources, with a focus on prevention and early intervention. Community Solutions ensures a co-ordinated approach throughout North Lanarkshire, promoting local opportunities and solutions for and with people, avoiding the need for more formal services for longer periods of time.

In March 2022, the IJB approved the Community Solutions Strategy and Investment Plan 2022-25.

The Community Solutions Programme involves all HSCNL partners and also links to the North Lanarkshire community planning partnership – North Lanarkshire Partnership (NLP) and the Children’s Services Partnership. Community Solutions is an effective and active example of co-production: a true partnership between people, communities and services. The range of achievements via the Community Solutions Programme Approach include significant development through local anchor organisations; Support in the Right Direction, Community Connectors and Improving Cancer Journeys.

Community Solutions builds capacity in the wider Health and Social Care System by facilitating the allocation of funding to enable Community and Voluntary sector organisations to deliver support to priority groups, providing information and guidance on key issues such as governance, planning, training, accreditation, finance and evaluation.

The Community Solutions programme also supports development and facilitation of the “first point of contact,” “three conversations” and “social prescribing” approaches to help people express their needs; feel empowered; and access community supports and services as quickly as possible. This

approach is supplemented by supporting digital inclusion to enhance public access to health and social care information and services.

The Community Solutions model has been used in Children's Services to test out new models of support to address distress and promote positive mental health with a significant portion of new Scottish Government funding targeted at early intervention and community support through the Children and Young People's Mental Health and Wellbeing Framework allocated to organisations through VANL to develop new supports in partnership with school clusters, children, young people and their families.

Future investment will be used to continue the community capacity building work already well embedded in the Community Solutions Programme through Voluntary Action North Lanarkshire. The new Improving Lives work stream will see development across a number of key priorities for the Partnership in line with the Strategic Commissioning Plan, and ensure there is sufficient capacity within the community and voluntary sector to respond to demand.

## Self-Directed Support - Transformational SDS Agenda

A notable change during the period is the impact of the transformational SDS agenda, which has an emphasis on building greater community capacity to support earlier preventative approaches and proactive planning so that people can be supported at home as independently as possible, for as long as is appropriate to support better lives.

Self-directed support was introduced in Scotland on the 1 April 2014 following the Social Care Self-directed Support Scotland Act 2013. Its introduction means that people receiving social care support in Scotland have the right of choice, control and flexibility to meet their personal outcomes. Health and Social Care Partnerships are required to ensure that people are offered a range of choices on how they receive their social care support. The self-directed support options available are:

Option 1: Taken as a Direct Payment.

Option 2: Allocated to an organisation that the person chooses and the person is in charge of how it is spent.

Option 3: The person chooses to allow the council to arrange and determine their services.

Over the last 4 years, the number of SDS users and their average budget has been steadily increasing. This is reflected in the rate per 1,000 population of North Lanarkshire SDS users, which has steadily increased each year over the last 4 years. A corresponding decrease in the the number of care at home users has been observed in 2021/22 and this is likely to be linked to the transition from "traditional" care at home towards Self-Directed Support.

SDS 2 (allocated to an organisation that the person chooses and the person is in charge of how it is spent) accounts for over 70% of the North Lanarkshire SDS budget; there has been little change in the percentage breakdowns of SDS option over the last 4 years.

Key priorities for the continued implementation of SDS include enhancing partnership working across the spectrum of community solutions, universal services, third and voluntary sectors and statutory sector. An enhanced focus on Technology Enabled Care, through the dedicated TEC team in the deployment of assistive technology so that people can be supported at home as independently as possible, for as long as is appropriate, whilst minimising risk and reducing reliance on statutory

services. Several posts and initiatives are part funded through Scottish Government monies to enhance SDS.

## National Health and Wellbeing Outcome 4

Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services

### Alcohol & Drugs Partnership (ADP)

North Lanarkshire Alcohol and Drug Partnership (NLADP) is a multi-agency strategic partnership established in 2019 focused on understanding and mitigating the impact of problematic alcohol and drug use in the local area. The purpose of the ADP is to co-ordinate and lead a collective response to tackle harms and improve the lives of people who used alcohol and drugs and those around them. The ADP is made up of key agencies and stakeholders with an interest in tackling harms and improving lives, including agencies that provide treatment and intervention for people experiencing problem alcohol and drug use.

In September 2022, the IJB approved the North Lanarkshire ADP Strategy 2021 – 2024, which draws on the successes, challenges and learning from previous activity. The Strategy was informed by extensive consultation and engagement with service users, representative groups and other key stakeholders to understand the needs, challenges and innovative ideas for change from those living in North Lanarkshire, including many who have been in contact with services for support with substance-related issues.

## National Health and Wellbeing Outcome 6

People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing

### Supporting Unpaid Carers

In 2022/23, North Lanarkshire HSCP has continued to support unpaid carers and develop work with our partners, including Lanarkshire Carers.

To develop an alternative to traditional respite or a cash grant, which often had restricted eligibility criteria, a consultation was carried out with carers to put them at the heart of service design when considering alternative and creative ways to provide a short break. Carers fed back that service providers needed to think creatively and address the need for a break that didn't only take the form of an annual short break, but that was easily accessible in the community, available on a regular basis and more flexible in terms of availability throughout the day.

From these insights, the concept of the Carer Breather was established and funded projects were set up to offer activities such as art therapy, health and wellness activities, holistic support, and groups supporting people caring for loved ones with learning disabilities or living with long term conditions. This service is now supported by NLCT as Carer Support Network Leads within Community Solutions. Carers can now access new services across North Lanarkshire that provide breaks from their caring roles and allow them to take some quality time out for themselves. The Carer Breather projects and pilot Sitter Services were developed directly through listening to the views of carers, and will be

utilising the Carer Pathway Toolkit to engage carers in conversation as part of a light touch early intervention within the local community.

To support this work, the Community Solutions Programme invests in activities in each locality in North Lanarkshire to support the needs of local people and their carers. These activities enable short breaks for carers through a range of local activities. Lanarkshire Carers, North Lanarkshire Carers Together and the Short Break Carer Information Service all provide pathways and support for this work.

### Care Inspectorate Reporting on North Lanarkshire Carers

Independent reporting and evaluation by the Care Inspectorate that took place in June 2022 concluded that Carer satisfaction levels within North Lanarkshire were consistently better than the national average, and in many areas were significantly better than the national average. The evaluation involved conversations/focus group discussion with carers provided rich data for the HSCP and further data and information was provided by the results of a survey that was commissioned to support the Care Inspectorate's evaluation. When looking at carer satisfaction in relation to Adult Carer Support Plans in North Lanarkshire:

- 69% of carers in North Lanarkshire said their ACSP helped them do things that are important to them compared with 42% in Scotland.
- 74% of carers in North Lanarkshire said their ACSP helps make sure that they get the right support to keep caring compared with 54% in Scotland.

There are approximately 14,000 unpaid carers known to carer support services and/or Health and Social Care North Lanarkshire (HSC NL) locally. However, the estimated true figure of unpaid carers locally is in the region of 50,000 to 60,000. This means that only around 1 in 4 or 1 in 5 carers are actually known to us.

The needs of cared for people being supported at home have become increasingly complex over the years. People who may in the past have been supported in institutional or residential care previous, are now, rightly, being supported at home, however this can have an impact on unpaid care givers.

Following implementation of the Carers (Scotland) Act in 2018, we are now seeing an increased Adult Carer Support Plans (ACSP's) by HSCP staff and Young Carer Statements (YCS). A wide range of carer support options have been implemented recently. These include:

- Enhanced funding and extended contracts to the three commissioned local carer organisations
- Enhanced funding for PAMIS family support service., a service which supports families caring for a loved one where there are significant and profound multiple impairments.
- The development of an extended and enhanced Carer Breather programme administered by North Lanarkshire Carers Together
- The development of a Dementia Carers initiative, in recognition of the range of challenges in supporting a family member with Dementia
- The introduction of a Hospital Discharge payment for carers in lieu of services, to mitigate the risk of delayed discharge, and/or delay of support services. Whilst this originally ran as a pilot scheme from January – March 2023, this has recently been reintroduced as of June 2023 to run until December 2023

The HSCP is working with Lanarkshire Carers to look at ways in which individual budgets can be used to help meet caring-related needs that have been identified as low or moderate. Our shared aim is to streamline processes and ensure that carers with this level of need, who may require a budget rather than the range of existing other support options, can access a budget in the easiest way possible. This will help reinforce preventative and/or anticipatory planning.

## National Health and Wellbeing Outcome 7 | People using health and social care services are safe from harm

### Adult Support and Protection (ASP)

A joint inspection of adult support and protection in the North Lanarkshire partnership led by the Care Inspectorate in collaboration with Healthcare Improvement Scotland and Her Majesty's Inspectorate of Constabulary in Scotland was conducted between August and November 2022. The inspection scrutinised the records of adults at risk of harm for a two-year period, August 2020 to August 2022.

The focus of this inspection was on whether adults at risk of harm in the North Lanarkshire area were safe, protected and supported and evaluates the partnership's key processes for adult support and protection, and strategic leadership for adult support and protection.

The inspection identified many strengths in the North Lanarkshire approach, stating that adults at risk of harm had improved safety, health and wellbeing because of the diligent work of partnership staff who conducted their enquiries into the circumstances of adults at risk efficiently and effectively. Independent advocacy for adults at risk of harm was identified as a key strength for the partnership. The partnership's strategic leaders were noted as enabling a culture of strong, credible, strategic partnership working for adult support and protection, with rigorous, multi-agency quality assurance and audit work in place for adult support and protection.

Some areas for improvement were identified, including some improvements to chronologies for adults at risk of harm, improvements to the management of case conferences and representation for adults at risk of harm and their unpaid carers. Action plans are in place to manage the improvements identified from these recommendations.

### Suicide Prevention and Distress Brief Intervention (DBI)

The work undertaken through the Suicide Prevention Partnership Group, which a collective of multi-agency staff that aims to collaborate in the promotion of the national and local suicide prevention strategies, is a key area where the HSCP is working to provide Early Intervention and Prevention. This takes place via a range of activities including awareness raising and training across services and local communities. This group includes representation from NHSL, Education and Justice, Police Scotland, CAMHS, NL Leisure, VANL and the Independent Sector.

The group oversees and supports suicide prevention work in North Lanarkshire, working with partners to develop specific activities around suicide prevention activity and evaluates the impact of suicide prevention work for purposes of quality assurance and review.

## National Health and Wellbeing Outcome 8

People who work in Health and Social Care Services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide

### Staff Health & Wellbeing

Work has continued in 2022/23 with the Health & Social Care North Lanarkshire Health & Wellbeing Group providing leadership and embedding a co-ordinated approach to staff health and wellbeing across the partnership.

### Care Academy

The Health & Social Care Academy is now a mature and established partnership with South Lanarkshire HSCP, New College Lanarkshire and the University of the West of Scotland. The newly published website Prepare to care ([carecareersnl.co.uk](https://www.carecareersnl.co.uk))<sup>2</sup> provides information on care career pathways and Social Care Training opportunities.

The Programme is continuing work against the three priority areas; the younger workforce, adult recruitment and employability, and building capacity and resilience by supporting wellbeing, training, and development across the existing workforce. The links with our education partners at New College Lanarkshire provide pathways to careers in care and The Health and Social Care Academy, based within the Coltness High School campus provides opportunities to learn about health and social care for pupils in S4 to S6, no matter what high school in North Lanarkshire they attend as pupils remain on the roll of their own school however, for any subjects and opportunities relating to health and social care they are transported to Coltness High School. Young people have the opportunity to access health and social care vocational learning pathways, such as Foundation Apprenticeships and Skills for Work courses, all under one roof allowing pupils to gain qualifications as well as work related learning experiences which will assist them in gaining employment in health and social care professions.

Areas covered include Health and Social Care, General Nursing and Allied Health Professions at Levels 4/5 and Foundation Apprenticeship.

### **iMatter staff experience survey.**

The iMatter staff experience survey allows HSCP staff the chance to give feedback on, and be involved in, influencing change and improvement in their workplace. The questionnaire, which is available online and in hard-copy takes just 10 minutes to fill in anonymously, is totally confidential and provides staff and line managers to understand what it is like as an individual at work, in teams and in the wider HSCP and the partner organisations. The information generated by the survey allows the necessary support required to enable employees feel motivated, supported and cared for at work.

## National Health and Wellbeing Outcome 9

Resources are used effectively and efficiently in the provision of health and social care services

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<sup>2</sup><https://www.carecareersnl.co.uk/index.html>

## Financial Year 2022/2023

Financial information is part of our performance management framework with regular reporting of financial performance to the IJB. National Health and Wellbeing Outcome 9 also requires resources to be used effectively and efficiently in the provision of health and social care services. The resources available to the IJB to deliver the delegated functions set out in the Integration Scheme and the Strategic Commissioning Plan are comprised of the financial contributions from North Lanarkshire Council (NLC) and NHS Lanarkshire (NHSL).

The financial position for public services continues to be challenging, particularly in recovering from the Covid-19 pandemic, the inflationary cost pressures and cost of living crisis and the uncertainty around future funding. Notwithstanding these pressures, in March 2023 the IJB agreed a Medium-Term Financial Plan 2023/2026<sup>[2]</sup> to outline challenges and opportunities that the partnership expects over the next three years and to provide a framework which would support the partnership to remain financially sustainable.

*[2] Medium-Term Financial Plan 2023/2026<sup>3</sup>*

## Partner Contributions 2022/2023

The delegated funds for the IJB come from NLC and NHSL. The level of funding available to the IJB is therefore heavily influenced by these organisations' grant settlements from the Scottish Government. The total funding for the IJB in 2022/2023 was £738m.

Included in the funding is a 'Large Hospital Service' (Notional Set Aside) budget totalling £66.858m. This budget is in respect of those functions delegated by the Health Board which are carried out in a hospital within the Health Board area. The Set Aside resource for delegated services provided in acute hospitals is determined by apportioning the hospital expenditure to individual patient episodes, separating out episodes for services delegated to the IJB from those that are not, and assigning these to the relevant IJB based on postcode. The IJB is responsible for the strategic planning of these services but not their operation delivery.

The comparison of funding contributions from the partners over the last three years is illustrated in the table as follows:

Funding	2020/2021	2021/2022	2022/2023
	£m	£m	£m
North Lanarkshire Council	(150.938)	(168.587)	(188.180)
NHS Lanarkshire	(479.101)	(517.779)	(482.813)
Set Aside	(63.066)	(65.164)	(66.858)
<b>TOTAL</b>	<b>(693.105)</b>	<b>(751.530)</b>	<b>(737.851)</b>
<b>Annual (Increase)/Decrease</b>	<b>(54.443)</b>	<b>(58.425)</b>	<b>13.679</b>

## Partner Expenditure 2022/2023

The total cost of services for the IJB in 2022/2023 was £732m. The comparison over the last three years is summarised in the table below:

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<sup>3</sup><https://mars.northlanarkshire.gov.uk/egenda/images/att100330.pdf>

North Lanarkshire HSCP Services	2020/2021	2021/2022	2022/2023
	£m	£m	£m
Social Care Services	189.048	202.610	236.972
Health Care Services	65.557	74.073	74.527
Family Health Services	105.773	109.652	115.625
Delegated Services	1.281	2.207	2.437
Hosted Services	141.034	149.126	159.642
IJB Operating Costs	0.212	0.214	0.247
Prescribing Costs	69.088	68.739	71.332
Covid-19 Costs	21.342	13.412	7.072
Set Aside	63.066	65.164	69.120
Income	(2.507)	(3.800)	(4.717)
<b>COST OF SERVICES</b>	<b>653.894</b>	<b>681.397</b>	<b>732.256</b>

### Summary of Financial Position 2022/2023

Throughout 2022/2023 the Chief Finance Officer's financial monitoring report to the IJB projected an underspend, prior to the transfer of year end balances to reserves.

The year end underspend totalled £35.495m. Adjustments incurred against reserves in 2022/2023 totalled £57.001m leaving a deficit on the provision of services of £21.506m as shown in the table below:

North Lanarkshire HSCP	2022/2023
Final Outturn	£m
HSCP Underspend as at 31 March 2023	(35.495)
<b>Adjustments to Reserves:</b>	
Drawdown of Reserves for IJB Use	31.193
COVID-19 Funding Returned to Scottish Government	25.916
In Year Adjustment	(0.108)
<b>Deficit on Provision of Services</b>	<b>21.506</b>

The following provides a high-level summary of the key pressures and the main reasons why the IJB's final outturn resulted in an underspend against its budget in 2022/2023:

Variance 2022/2023  £m	Main Factors
(17.377)	<b>Employee Costs</b> net underspend is in relation to ongoing challenges in terms of recruitment and retention of staff across all service areas. This underspend also includes Scottish Government funding of £8.270m allocated to help address the current staffing pressures. This funding will be carried forward into 2023/2024 within specific ring-fenced reserves to be used in 2023/2024.
(1.511)	<b>Payments to Other Bodies</b> net underspend is primarily due to the staff shortages and vacancies within the Care at Home sector who provide services to individuals via the self-directed support commissioning framework.
(1.431)	<b>Admin Costs</b> net underspend is ring-fenced funding for carers that will be transferred to a dedicated earmarked reserve to fund carers pressures in 2023/2024.
2.531	<b>Supplies and Services</b> net overspend is due to additional purchases of PPE and staff uniform due to the increase in home support staff and costs associated with winter planning. There has also been additional expenditure in relation to aids and adaptations to meet current demand. £1.550m additional income was drawn down from earmarked reserves to offset some of this overspend and is showing in the over recovery of income.
(13.330)	<b>Mental Health, Alcohol and Drug Partnership and HSCP Planning</b> combined net underspend in non-pays is due to additional funding received from Scottish Government (£13.141m) which will be carried forward into 2023/2024 and allocated against new spending plans.
1.750	<b>Prescribing</b> overspend is due to activity and cost per item being 3.19% higher compared to 2021/2022. Due to the uncertainty around costs and prescribing activity, the volatility experienced within this service is likely to continue for the foreseeable future.
(6.031)	<b>Income</b> over-recovery for Social Care is due to the drawdown of earmarked reserves to offset expenditure relating to winter planning, adaptations, digital and IT and staffing costs.

## Reserves Strategy

The IJB Reserves Strategy 2022/2023 allows for flexibility in terms of potential fluctuations. This allows the IJB to increase contingency reserve balances significantly where resources permit providing future financial resilience for those years where the level of resources available to the IJB may be significantly constrained and will require a draw down from these reserves in order to deliver financial balance.

To protect the financial resilience of the IJB in the context of an increased financial risk profile, the IJB transferred £7.885m from the 2022/2023 in year underspend to contingency reserves. This provides a total contingency reserve of 3% of our financial envelope and aligns to the recommendation in our IJB Reserves Strategy of holding a 3% contingency reserve where possible.

The IJB also has committed actions attached to the Strategic Commissioning Plan and funding is therefore earmarked to specific projects to allow spend to be managed in a way that represents best value for the IJB to achieve its national outcomes. It is also important that in year funding available for government priorities are able to be ring-fenced and carried forward into the following financial

year. As these funding allocations are to meet specific commitments, they must be carried forward to meet the conditions attached to their receipt.

The table below shows the breakdown of the underspend transferred to reserves at year end and approved by the IJB PFA Committee on 21 June 2023:

<b>Analysis of Transfer to IJB Reserves</b>	<b>£m</b>
Ring-Fenced Reserves	21.411
Earmarked Reserves	6.199
Contingency Reserves	7.885
<b>Total</b>	<b>35.495</b>

Further details of the ring-fenced, earmarked, and contingency reserves totalling £97.946m is available at Note 8 of the North Lanarkshire Annual Accounts Unaudited 2022-2023[3] .

### **Risk Management**

In line with the continued and ongoing review of the IJB Risk Register, new and emerging risks or changes in risk level are agreed at each Senior Management Team, IJB and PFA meeting as appropriate. Throughout the year, risk reports provide updates on the management of the key financial risks.

### **Strategic Planning**

The overarching strategic vision and objectives of the IJB are detailed in the IJB Strategic Commissioning Plan 2023/2026[4] which sets out the key outcomes the IJB is committed to delivering with its partners.

The Strategic Planning Group sets out the IJB's approach to engage with stakeholders. Consultation on the future vision and activities of the IJB is undertaken with its Health Services and Local Authority partners with a Programme of Work setting out in detail the commitments that will be progressed over the next three years.

The Medium-Term Financial Plan 2023/2026 outlines the financial challenges and opportunities the HSCP faces over the next three years and provides a framework which will support the HSCP to remain financially sustainable. It complements the IJB Strategic Commissioning Plan, highlighting how the financial plan will support the delivery of the IJB's strategic objectives and priorities.

Our joint focus with all our partners and stakeholders will continue to be ensuring that all resources in scope are maximised to their full potential and health and social care services are efficient, effective, and sustainable for the future.

[3] *North Lanarkshire IJB Unaudited Annual Accounts 2022/2023*<sup>4</sup>

[4] *IJB Strategic Commissioning Plan 2023/2026*<sup>5</sup>

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<sup>4</sup><https://mars.northlanarkshire.gov.uk/egenda/images/att100904.pdf>

<sup>5</sup><https://mars.northlanarkshire.gov.uk/egenda/images/att100339.pdf>

## 4. Looking Forward – Our Next Steps

The North Lanarkshire HSCP draft Strategic Commissioning Plan 2023 – 2026 was approved by the IJB in March 2023 following a final consultation period during the months of December, January, and February 2023.

A Programme of work is set out in detail within the plan outlining the key work Programmes that will be undertaken over the three-year period to meet the key priorities within the Strategic Commissioning Plan. The Programme and the key deliverables will be monitored with regular reports on progress to be made to the Board the relevant Committees. It will be updated on an annual basis to ensure progress with the work and to respond to any new or emerging issues.

The Programme of Work is aligned to the transformational change priorities for the partnership and a whole system approach to delivery of the projects and workstreams reflect the requirement to manage the interconnections and dependencies in a complex system, as well as give clarity and structure to wider partners and stakeholders.

The Plan sets out revised ambitions for the HSCP, which were agreed following consultation with the public and other stakeholders:

*Do the right thing first time*

*Increased focus on prevention, early intervention and tackling inequalities by working with communities and people*

*Develop and support a workforce for the future*

*Improve mental health and wellbeing*

*Support people through a whole family approach*

A project management and data-driven approach will be adopted to ensure progress with the Programme and in order that informed decisions can be made regarding any dynamic changes to the work plan to assist with managing the extraordinary pressures on existing services as a result of demographic growth, the lasting implications of the Covid-19 pandemic and wider financial challenges to the HSCP and the partner organisations. The data collected to support the Programme of work will inform future resource planning and support the work of locality planning groups.

### **Appendix 1 – Summary of Performance against Core Suite of Integration Indicators**

Indicator	Title	NL 2015/16	NL 2017/18	NL 2019/20	NL 2021/22
NI - 1	Percentage of adults able to look after their health very well or quite well	91.7%	90.3%	90.5%	87.5%
NI - 2	Percentage of adults supported at home who agreed that they are supported to live as independently as possible			77.6%	79.8%
NI - 3	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided			71.2%	67.1%
NI - 4	Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated			70.2%	66.6%
NI - 5	Percentage of adults receiving any care or support who rate it as excellent or good			77.8%	74.0%
NI - 6	Percentage of people with positive experience of care at their GP practice	79.3%	75.5%	68.3%	51.8%
NI - 7	Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life			75.7%	77.0%
NI - 8	Percentage of carers who feel supported to continue in their caring role	41.2%	33.2%	32.6%	25.1%
NI - 9	Percentage of adults supported at home who agreed they felt safe			80.0%	79.8%

Indicator	Title	NL 2017	NL 2018	NL 2019	NL 2020	NL 2021
NI - 11	Premature mortality rate per 100,000 persons	482	517	515	581	580

Indicator	Title	NL 2018/19	NL 2019/20	NL 2020/21	NL 2021/22	NL 2022
NI -12	Emergency admission rate (per 100,000 population)	15829	16280	13827	15120	14765
NI - 13	Emergency bed day rate (per 100,000 population)	120784	122569	105484	119150	120073
NI - 14	Emergency readmissions to hospital within 28 days of discharge (rate per 1,000 discharges)	101	106	123	115	114
NI - 15	Proportion of last 6 months of life spent at home or in a community setting	89%	89%	90%	90%	89%
NI - 16	Falls rate per 1,000 population aged 65+	22.6	21.3	19.1	20.5	19
		NL 2018/19	NL 2019/20	NL 2020/21	NL 2021/22	NL 2022/23
NI -17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections	76%	83%	80%	78%	77%
		NL 2018	NL 2019	NL 2020	NL 2021	NL 2022
NI - 18	Percentage of adults with intensive care needs receiving care at home	75%	74%	75%	75%	71%
		NL 2018/19	NL 2019/20	NL 2020/21	NL 2021/22	NL 2022/23
NI - 19	Number of days people spend in hospital when they are ready to be discharged (per 1,000 population)	996	1109	781	821	970
		NL 2017/18	NL 2018/19	NL 2019/20	NL 2020/21	NL 2021/22
NI - 20	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency	20.7%	21.1%	21.6%	N/A	N/A

## Appendix 2 – HSCP Performance Dashboard

Outcome (National Health & Wellbeing)	KPI	Target 2022-23	2022/23 Q1	2022/23 Q2	2022/23 Q3	2022/23 Q4	Current Performance		
1. People are able to look after and improve their own health and wellbeing and live in good health longer	Alcohol Brief Interventions North	1783	32	20	N/A	292	R		
	Alcohol Brief Interventions (all settings) NHSL	7383	406	243	N/A	647	R		
	Cervical Screening	806	73.5%	73.3%	72.9%	72.5%	Y		
	Immunisations - % of 2 year olds	95%	96.4%	95.6%	95.0%	94.7%	G		
	Immunisations - % of 5 year olds	95%	93.9%	93.8%	92.7%	92.2%	Y		
	Addictions - Completed Waits	90%	91.6%	89.9%	89.9%	92.6%	G		
	Addictions - Ongoing Waits	90%	95.9%	91.4%	91.4%	92.9%	G		
	Addictions - Ongoing Waits NHSL	90%	95.5%	91.2%	91.2%	94.2%	G		
	Percentage of people who have completed 6-8 week review	90%	74.0%	74.7%	69.5%	Quarterly/ 1 quarter behind	R		
	2. People, including those with disabilities and long-term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community	Delayed discharge bed days - standard delays	23775 Q1 - 5915 Q2 - 5980 Q3 - 5980 Q4 - 5850	6,680	7,409	8,309	8,178	R	
A&E Attendances - NI Residents		116,456 Q1 - 29,764 Q2 - 29,930 Q3 - 28,806 Q4 - 27,955	30,812	30,100	29,003	Quarterly/ 1 quarter behind	Y		
Emergency Admissions - NI Residents		44,001 Q1 - 10,917 Q2 - 10,932 Q3 - 11,630	11,099	11,129	11,389	Quarterly/ 1 quarter behind	G		
Unscheduled Bed Days - all specialties, NI residents		294,599 Q1 - 75,196 Q2 - 72,801 Q3 - 74,109 Q4 - 72,894	78,473	71,543	71,470	Quarterly/ 1 quarter behind	G		
Inpatient Activity - Readmissions 7 days		8	5.87	5.36	6.59	6.70	G		
Percentage of patients waiting less than 12 months to begin PDS (waiting less than 12 months/total number waiting)		65%	90.1%	98.1%	94.4%	93.6%	G		
Mental Health - bed occupancy rate			77.8%	79.8%	85.0%	91.2%	G		
Assistive Technology - Number Of People With Technology (0-17 yrs)			34	34	33	30	G		
Assistive Technology - Number Of People With Technology (18-64yrs)		1,452	635	629	629	633	G		
Assistive Technology - Number Of People With Technology (65+)			852	853	839	853	G		
3. People who use health and social care services have positive experiences of those services, and have their dignity respected	Reablement - Number Of People Completing Reablement Process	2000 (500 per quarter)	354	678	1049	1418	R		
	Reablement - % Of New or Increased Home Support Packages Which Are Reablement	70%	67.1%	60.6%	55.0%	61.2%	R		
	Reablement - % Of People With No or Reduced Home Support Service Required At End Of Process	70%	56.2%	50.2%	50.3%	56.1%	R		
	Balance Of Care - % Of People (Age 65+)	45%	45.5%	45.4%	43.7%	42.6%	Y		
	IEAS - % Deliveries Achieved Within 7 Working Days Quarterly	80%	66.6%	75.1%	63.4%	51.5%	R		
	18 Week RTT Performance - CAMHS NHSL (NORTH HOSTED)	90%	67.7%	25.4%	19.1%	28.7%	R		
	18 Week RTT Performance - Psychology (NHSL) (NORTH HOSTED)	90%	85.0%	82.8%	85.1%	85.8%	Y		
	Consultant Outpatient WT - Adult Mental Health - 12wks (NHSL) (NORTH HOSTED)	90%*	67.9%	68.8%	63.8%	63.5%	Y		
	Consultant Outpatient WT - Older Adult Psychiatry - 12wks (NHSL) (NORTH HOSTED)	90%*	92.8%	91.1%	80.2%	87.2%	R		
	Consultant Outpatient WT - Learning Disability - 12wks (NHSL) (NORTH HOSTED)	90%*	100%	100%	100%	100%	G		
4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services	Medical Paediatrics WT - 12 wks (NHSL) (NORTH HOSTED)	90%*	55.4%	44.9%	46.4%	49.2%	R		
	Admission to MH Wards: Proportion NHSL Patients	>=95%	94.9%	98.2%	99.2%	98.3%	G		
	MH Podiatry - 12wks (NORTH HOSTED)	90%*	84.6%	85.5%	100%	100%	G		
	Podiatry - 12wks (NORTH HOSTED)	90%*	91.8%	96.3%	99.4%	99.7%	G		
	Podiatry - domiciliary visits - 12wks (NORTH HOSTED)	90%*	75.0%	100%	100%	100%	G		
	SLT - Paediatrics - 12wks (NORTH HOSTED)	90%*	27.3%	20.0%	27.1%	28.8%	R		
	SLT - Adult - 12wks (NORTH HOSTED)	90%*	77.2%	78.2%	81.4%	81.4%	G		
	Dietetics - 12wks (NORTH HOSTED)	90%*	58.5%	66.4%	71.2%	68.9%	G		
	Care Home Placements At End Of Quarter - Per 1000 Popn 65+	24	22.0	22.2	21.5	21.2	G		
	Care Home Placements At End Of Quarter - Per 1000 Popn 75+	50	45.5	46.3	44.8	44.2	G		
5. Health and social care services contribute to reducing health inequalities	Care Home - Average Length of Stay	865	828	939	743	870	Y		
	Number Of People With Self Directed Support	1,000	1,280	1,122	2042	1956	G		
	Number Of People With A Direct Payment	240	298	328	336	359	G		
	6. People who provide unpaid care are supported to look after their own health and wellbeing including to reduce any negative impact on their caring role on their own health and wellbeing	Sustain and embed successful smoking quits, at 12 weeks post quit, in 40% of SIMD areas. (ADP) (NORTH HOSTED)	902	82	304	Quarterly/ 2 quarters behind	Quarterly/ 2 quarters behind	Y	
		Community Alarm Service Users 75 Years And Over Per 1000 Population	Under Review	190.3	189.6	186.9	187.8		
		7. People who use health and social care services are safe from harm	Manual Handling Awareness	90%	93.2%	94.6%	94.3%	97.4%	G
			PAMOVA Training	90%	95.9%	95.3%	95.2%	95.6%	G
			Adult Basic Life Support	90%	85.0%	81.9%	80.5%	85.8%	Y
			Paediatric Basic Life Support	90%	89.9%	88.5%	88.6%	85.8%	Y
			Fire Safety Training	90%	93.3%	95.4%	93.5%	82.6%	Y
Hand Hygiene Training			90%	92.3%	91.6%	90.1%	95.1%	G	
Safe Information Handling Training			90%	93.3%	93.3%	92.5%	93.4%	G	
Child Protection Awareness Training			90%	95.2%	96.2%	95.4%	96.1%	G	
Health and Safety Awareness Training	90%		96.2%	97.6%	97.5%	99.2%	G		
Occupational Health Service Awareness Training	90%		94.2%	97.5%	97.0%	99.7%	G		
8. People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide	Adult Support and Protection Awareness Training	90%	95.6%	95.4%	95.3%	98.1%	G		
	% Of Adult Protection Referrals Passed To Care Team For Investigation		15.0%	17.5%	16.2%	11.7%	R		
	% Of Adult Protection Investigations Going To Initial Case Conference		19.6%	16.3%	14.1%	21.2%	G		
	Adult Protection - % Of Referrals With Decision Within 5 Days	60%	72.8%	76.3%	78.4%	73.4%	G		
	% Of Adult Protection Referrals Which Did Not Go On To Investigation Or Other Service		72.1%	67.4%	69.0%	71.2%	G		
	9. Resources are used effectively and efficiently in the provision of health and social care services	TURAS compliance (NHSL North)	>80%	58%	57%	58%	60%	R	
		Breakeven Position - YTD Variance Including Prescribing (NHSL)	>=0	£2,249m	£3,839M	£6,264M	£12,639M	...	
		Breakeven Position - YTD Variance Excluding Prescribing (NHSL)	>=0	£2,249m	£3,839M	£6,564M	£13,639M	...	
		Sickness Absence (NHSL, North)		5.72%	6.47%	8.31%	7.41%	R	
	Sickness Absence (NLC) - days lost per person		11.82	2.58	5.15	8.56	11.96	R	

### Appendix 3 – Inspection Findings 2022/23

Further information on 2022/23 inspection activity can be found in the HSCP Quality Assurance Annual Report, or more detailed information is available at the Care Inspectorate website: Publications & Statistics (careinspectorate.com)<sup>6</sup>.

#### **Glossary of Terms**

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<sup>6</sup><https://www.careinspectorate.com/index.php/publications-statistics>

# North Lanarkshire Council Report

## Adult Care and Social Work Committee

Does this report require to be approved?  Yes  No

Ref RMcG/SF

Date 14/11/23

## Q1 Performance Report 2022/23 - Health & Social Care North Lanarkshire

**From** Morag Dendy, Chief Officer / Head of Service (Performance, Planning and Quality Assurance)

**E-mail** DendyM@northlan.gov.uk

**Telephone** 01698 858143

### Executive Summary

The purpose of the report is to provide an update to the Committee on the performance of key areas of activity within Adult Health & Social Care for the period 01<sup>st</sup> April 2023 to 30<sup>th</sup> June 2023 (Quarter 1).

### Recommendations

It is recommended that the Adult Care and Social Work Committee:

- (1) Endorse the improvement actions included within Appendix 2 of the report; and
- (2) Note the performance of key areas of activity within Appendix 1 of the report.

### The Plan for North Lanarkshire

Priority	Improve the health and wellbeing of our communities
Ambition statement	(25) Ensure intelligent use of data and information to support fully evidence based decision making and future planning
Programme of Work	Resilient People

#### 1. Background

- 1.1 The Chief Officer has joint quarterly performance review meetings with the Chief Executive of NHS Lanarkshire and the Chief Executive of North Lanarkshire Council. These meetings are supported by a Chief Executive Performance Framework comprising a range of performance measures from across both health and social work systems, including relevant targets and trajectories.
- 1.2 Based on a traffic-light system there are areas for improvement identified within the performance framework each quarter for those that are flagged as Red or Amber. The performance review meetings are used as a means for jointly agreeing corrective actions.

- 1.3 Information from these performance reviews has been supplemented with additional performance information below to offer the committee a wider overview of performance across some key areas of adult social care delivery.

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## **2. Report**

- 2.1 The purpose of the report is to provide an update to the Committee on wider performance of key areas of adult social care delivery, in addition to the performance areas for improvement which have been identified as part of the Chief Executive Quarterly Performance Review for the period 01<sup>st</sup> April 2023 to 30<sup>th</sup> June 2023 (Quarter 1).
- 2.2 The performance data for Quarter 1 and associated trend information is included as Appendix 1.
- 2.3 Areas for improvement and planned actions are agreed and developed on an exception basis (i.e., for those indicators which are amber or red, based on tolerance thresholds). These are detailed as Appendix 2 of this report.

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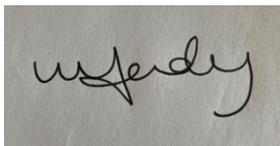
## **3. Measures of success**

- 3.1 Measures of success are contained within Appendix 1 of this report.

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## **4. Supporting documentation**

- 4.1 Appendix 1: Adult Social Care Dashboard
- 4.2 Appendix 2: Areas for Improvement (Quarter 1, April – June 2023)



**Morag Dendy**  
**Chief Officer / Head of Service (Performance, Planning and Quality Assurance)**

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## 5. Impacts

<p><b>5.1 Public Sector Equality Duty and Fairer Scotland Duty</b> Does the report contain information that has an impact as a result of the Public Sector Equality Duty and/or Fairer Scotland Duty? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, please provide a brief summary of the impact?</p> <p>If Yes, has an assessment been carried out and published on the council's website? <a href="https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments">https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments</a> Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.2 Financial impact</b> Does the report contain any financial impacts? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant financial impacts been discussed and agreed with Finance? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.3 HR policy impact</b> Does the report contain any HR policy or procedure impacts? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant HR impacts been discussed and agreed with People Resources? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.4 Legal impact</b> Does the report contain any legal impacts (such as general legal matters, statutory considerations (including employment law considerations), or new legislation)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant legal impacts been discussed and agreed with Legal and Democratic? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.5 Data protection impact</b> Does the report / project / practice contain or involve the processing of personal data? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, is the processing of this personal data likely to result in a high risk to the data subject? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, has a Data Protection Impact Assessment (DPIA) been carried out and e-mailed to <a href="mailto:dataprotection@northlan.gov.uk">dataprotection@northlan.gov.uk</a> Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.6 Technology / Digital impact</b> Does the report contain information that has an impact on either technology, digital transformation, service redesign / business change processes, data management, or connectivity / broadband / Wi-Fi? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>

<p>Where the impact identifies a requirement for significant technology change, has an assessment been carried out (or is scheduled to be carried out) by the Enterprise Architecture Governance Group (EAGG)?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.7 Environmental / Carbon impact</b></p> <p>Does the report / project / practice contain information that has an impact on any environmental or carbon matters?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If Yes, please provide a brief summary of the impact?</p>
<p><b>5.8 Communications impact</b></p> <p>Does the report contain any information that has an impact on the council's communications activities?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If Yes, please provide a brief summary of the impact?</p>
<p><b>5.9 Risk impact</b></p> <p>Is there a risk impact?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If Yes, please provide a brief summary of the key risks and potential impacts, highlighting where the risk(s) are assessed and recorded (e.g. Corporate or Service or Project Risk Registers), and how they are managed?</p>
<p><b>5.10 Armed Forces Covenant Duty</b></p> <p>Does the report require to take due regard of the Armed Forces Covenant Duty (i.e. does it relate to healthcare, housing, or education services for in-Service or ex-Service personnel, or their families, or widow(er)s)?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If Yes, please provide a brief summary of the provision which has been made to ensure there has been appropriate consideration of the particular needs of the Armed Forces community to make sure that they do not face disadvantage compared to other citizens in the provision of public services.</p>
<p><b>5.11 Children's rights and wellbeing impact</b></p> <p>Does the report contain any information regarding any council activity, service delivery, policy, or plan that has an impact on children and young people up to the age of 18, or on a specific group of these?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If Yes, please provide a brief summary of the impact and the provision that has been made to ensure there has been appropriate consideration of the relevant Articles from the United Nations Convention on the Rights of the Child (UNCRC).</p> <p>If Yes, has a Children's Rights and Wellbeing Impact Assessment (CRWIA) been carried out?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>

## Appendix 1 – Adult Social Care Dashboard

PLEASE NOTE FOR ALL INDICATORS UPWARDS ARROWS DENOTE POSITIVE PERFORMANCE

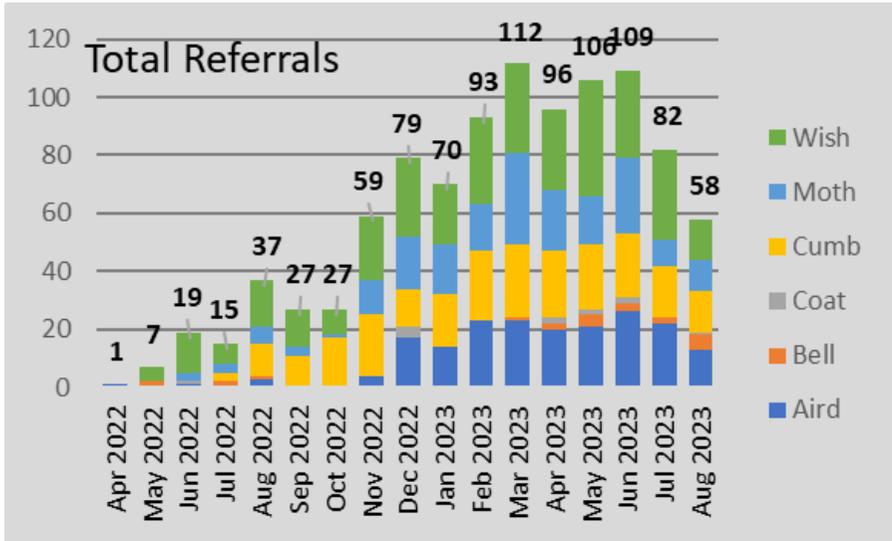
National Health & Wellbeing Outcome	Ref.	KPI	Target 2018/19	2022/23 Q1	2022/23 Q2	2022/23 Q3	2022/23 Q4	2023/24 Q1	Performance Compared to Previous Quarter	Performance Compared to Same Quarter Previous Year	Current Performance
2. People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonable practicable, independently and at home or in a homely setting in their community	2.11	Assistive Technology - Number Of People With Technology (0-17 yrs)		34	34	33	30	28	↓	↓	
	2.12	Assistive Technology - Number Of People With Technology (18-64yrs)	1,452	635	629	629	633	632	↓	↓	
	2.13	Assistive Technology - Number Of People With Technology (65+)		852	853	839	853	818	↓	↓	
	2.14	Reablement - Number Of People Completing Reablement Process	2000	334	666	1049	1418	376	↑	↑	
	2.15	Reablement - % Of New or Increased Home Support Packages Which Are Reablement	70%	67.10%	60.60%	55.00%	61.20%	64.00%	↑	↓	
	2.16	Reablement - % Of People With No Home Support Service Required At End Of Process	50%	26.60%	33.70%	34.20%	28.80%	21.30%	↓	↓	
	2.17	Home Care - No. People 65+ Receiving 10+ hrs Per Week Per 1000 Popn	24	19.9	20	18.1	17.1	15.8	↓	↓	
	2.18	Balance Of Care - % Of People (Age 65+)	45%	45.50%	45.40%	43.70%	42.60%	40.20%	↓	↓	

	2.19	IEAS - % Deliveries Achieved Within 7 Working Days Quarterly	80%	66.60%	75.10%	63.40%	51.50%	47.50%	↓	↓	
	4.3	Care Home Placements At End Of Quarter - Per 1000 Popn 65+	24	22	22.2	21.5	21.2	21.7	↓	↑	
	4.4	Care Home Placements At End Of Quarter - Per 1000 Popn 75+	50	45.5	46.3	44.8	44.2	44.9	↓	↑	
	4.5	Care Home - Average Length of Stay	865	828	939	743	870	832	↓	↓	
	4.6	Number Of People With Self Directed Support	1,000	1290	1322	2042	1956	2070	↑	↑	
	4.7	Number Of People With A Direct Payment	240	299	328	336	359	329	↓	↑	
7. People who use health and social care services are safe from harm	7.19	% Of Adult Protection Referrals Passed To Care Team For Investigation	20%	15.00%	17.50%	16.20%	11.70%	12.40%	↑	↓	
	7.2	% Of Adult Protection Investigations Going To Initial Case Conference	20%	19.60%	16.30%	14.10%	21.20%	20.30%	↓	↑	
	7.21	Adult Protection - % Of Referrals With Decision Within 5 Days	60%	72.80%	76.30%	78.40%	73.40%	76.60%	↑	↑	
	7.22	% of Adult Protection Referrals Which Did Not Go On To Investigation Or Other Service	50%	72.10%	67.40%	69.00%	71.20%	76.60%	↑	↑	

## Appendix 2 – Areas for Improvement

1.	Reablement and associated services	Target 2022/23	2022/23 Q4	2023/24 Q1	Performance Compared to Previous Quarter	Performance Compared to Same Quarter Previous Year	RAG Status
	Reablement - Number Of People Completing Reablement Process	2000 (500 per quarter)	1418	376	↑	↑	
	Reablement - % Of New or Increased Home Support Packages Which Are Reablement	70%	61.20%	64.00%	↑	↓	
	Reablement - % Of People With No or Reduced Home Support Service Required At End Of Process	70%	28.80%	21.30%	↓	↓	
	Balance Of Care - % Of People (Age 65+)	45%	42.60%	40.20%	↓	↓	
	IEAS - % Deliveries Achieved Within 7 Working Days Quarterly	80%	51.50%	47.50%	↓	↓	
<p><b>Narrative &amp; Corrective Action</b></p> <p>It is widely acknowledged that Reablement support provided within North Lanarkshire produces good outcomes for service users completing the Reablement process, however further consideration of performance in this area has highlighted clear recording issues in some localities and teams. In essence, Reablement demand and support is not always being recorded appropriately, with both Cumbernauld and Airdrie identified as not accurately reporting Reablement progress, and there is an undoubted subsequent impact on the data for these performance metrics.</p> <p>The service is now experiencing a delay in Home Support Teams moving service users off of Reablement if it has been identified that a provider may be required for ongoing support should the locality teams not have the resource required. This is mainly due to the directive that an indicative budget requires to be approved and agreed before a service user can be allocated to a provider via the SDS model of support. This is impacting on locality teams taking on additional cases for Reablement.</p> <p>All Reablement teams are highlighting the lack of Occupational Therapy support to Reablement received from each of the locality teams; prior to the creation of IRT, Occupational Therapists worked in partnership with Home Support Reablement teams, with joint screening meetings and home visits accepted practice. All locality teams are reporting that this support is now limited due to the demands on IRT.</p> <p>Locality SDM's have highlighted the significant and sustained vacancies in Reablement teams that are unable to be filled, particularly Home Support Worker vacancies. This is in part due to the current cap on recruitment, which is restricting the number of service users who can be supported at any given time via the Reablement process.</p>							

The expansion of the Home Assessment Team (HAT) and the HAT approach continues to impact on the wider system. The number of referrals per month to HAT continued to increase until March 2023, where it appears to have plateaued and then subsequently reduced in July 2023.



The largest input service for HAT is Home Support (65% of referrals received), followed by O.T. (49%). Both of these figures have remained constant since the start of the service.

Input		Service at Completion	
SW	4%	HS - Reablement	9%
OT	49%	HS - Mainstream	13%
Physio	17%	IRT - Physio	7%
AHP Support Staff	9%	IRT - OT	11%
Home Support	65%	Rehabilitation - Other	1%
CAS	24%	CAS	15%
Technology	4%	Locality SW Referral	1%
Pharmacy	3%	IDS	1%
Com. Nursing Team	10%	LSS	1%
Med. Realignment	2%	District Nurse	7%
		NL Leisure	1%
		Third Sector	4%

846 people were noted as completing HAT, 85% of the total referrals. The locality with the largest number of people recorded at completion stage was Wishaw. Of the 304 showing further service being required, the service with the highest number was C.A.S. with 131 (15% of total completing). With regard to IEAS, a Programme of improvement works is still in progress, with improvements to premises and focussed recruitment activity in progress at the time of reporting. Sustained workforce challenges, specifically recruitment and retention of suitably skilled and experienced IEAS staff have resulted in challenges with the delivery and uplift of equipment.

2.	Adult Protection	Target 2022/23	2022/23 Q4	2023/24 Q1	Performance Compared to Previous Quarter	Performance Compared to Same Quarter Previous Year	RAG Status
	% Of Adult Protection Referrals Passed To Care Team For Investigation	20%	11.70%	12.40%	↑	↓	
<b>Narrative &amp; Corrective Action</b>							

The overall number of AP referrals has increased, which is viewed as a net positive and is actively encouraged by services. However, there is some experiential learning and development required for staff in partner agencies to prevent inappropriate referrals, as there is a high proportion of non-AP and referrals resulting in no further action being submitted. Feedback continues to be provided to partner agencies, including Police and SAS regarding referrals to promote use of the mechanism and encourage continual improvement.

# North Lanarkshire Council Report

## Adult Care and Social Work Committee

Does this report require to be approved?  Yes  No

Ref RM/MD/NL/LH

Date 14/11/23

## Revenue & Capital Budget Monitoring Report: Adult Social Care Period 06: 01/04/2023 to 15/09/2023

**From** Morag Dendy, Chief Officer (Planning, Performance and Quality Assurance)

**E-mail** LynchN@northlan.gov.uk

**Telephone**

Nicola Lynch, Business Finance  
Manager, 07581007187

### Executive Summary

This report provides a summary of the revenue financial performance of the Health & Social Care Partnership (H&SCP) – North Lanarkshire (Adult Social Care & Housing) and the financial performance of the Social Work capital programme.

The report incorporates the period 1 April 2023 to 15 September 2023 (Period 06) and includes projected outturn forecasts for the financial year ended 31 March 2024, with major outturn variances highlighted and explained per the approved Financial Regulations.

H&SCP – North Lanarkshire (Adult Social Care & Housing) has a gross revenue expenditure budget of £254.351m and is currently projecting an underspend of £3.989m. This is a favourable movement of £0.925m and is mainly due to favourable movements in payments to independent care homes and carers budgets, partially offset by increased expenditure projected within employee costs.

The Social Work capital programme has a total budget of £2.188m and is currently projecting a breakeven position.

### Recommendations

It is recommended that the Adult Care and Social Work Committee:

- (1) Acknowledge the revenue financial outturn position,
- (2) Acknowledge the capital financial outturn position,

### The Plan for North Lanarkshire

Priority	Improve North Lanarkshire's resource base
Ambition statement	(25) Ensure intelligent use of data and information to support fully evidence based decision making and future planning
Programme of Work	Statutory / corporate / service requirement

## 1. Background

- 1.1 The Council approved its General Revenue Fund Budget on 23 February 2023, and the Integration Joint Board (IJB) approved its Financial Plan on 22 March 2023. The approved Gross Expenditure Budget for the H&SCP – NL (Adult Social Care and Housing) is £254.351m.
- 1.2 2023/24 is the third year of the Council's five-year capital investment programme. The programme approved funding of £2.200m for Social Work for the current year. Net reprofiling, as well as an adjustment following an update to the Strategic Capital Investment Programme (P&S December 2022 Committee) has resulted in a revised budget of £2.188m, as demonstrated by Appendix 4.

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## 2. Report

### Revenue: Analysis of Significant Variances

- 2.1 Within Employee costs, the Service currently anticipates an underspend of £4.447m. This primarily relates to slippage in relation to the recruitment of posts across the Service.
- 2.2 Property Costs are anticipated to be overspent by £0.173m. This is predominantly due to higher than anticipated spend on Care of Gardens, via the HRA budget, all of which is offset by higher contributions from NLC Housing, shown as income.
- 2.3 Supplies and Services are anticipated to be underspent by £0.112m. This is mainly as a result of lower than expected spend in ICT and other general supplies budgets. This is partially offset by an anticipated overspend in equipment and adaptations.
- 2.4 Payments to Other Bodies and Transfer Payments are detailed in Appendix 2. This expenditure accounts for £153.436m of the annual budget and is forecast to have an in-year net overspend of £1.029m (0.7%). This is primarily in relation to the Care at Home sector who provide services to individuals via the SDS commissioning framework. This projected outturn includes a drawdown of £3m from the social care demand reserve as per the IJB strategy to address demand pressures within the 2023/24 Financial Plan. These projections are demand led and are based on full year costs for both current clients and those anticipated, therefore projections will alter as the year progresses, updates will be provided in future reports.
- 2.5 The Service anticipates a total over recovery of income of £0.036m. An over-recovery of £0.150m relates to Care of Gardens as highlighted in section 2.2, partially offset by an under-recovery of £0.192m which is mainly as a result of lower than anticipated income from charges for Community Alarms and Integrated Day Services.

### Revenue: Earmarked Reserves

- 2.6 The Integration Joint Board have set aside reserves of £35.766m for specific Adult Social Care commitments. It is anticipated that £24.729m of the earmarked reserves will be used during 2023/24, with £11.037m being carried forward to 2024/25, as highlighted in Appendix 3. All expenditure to be met from reserves are excluded from the outturn position.

### **Capital: Analysis of Significant Variances**

- 2.7 The Integrated Equipment and Adaptation (IEAS) capital programme budget funds equipment for individuals and adaptations to properties to allow those individuals to live independently at home. The projection for 2023/24 is currently a break even position.
- 2.8 The programme this year will also include the purchase of equipment to be used by the Equipment and Adaptations Service to wash and disinfect equipment. The costs of this will be offset within the overall council capital programme.
- 2.9 Following on from the pandemic, there are heightened uncertainties in respect of demand and complexity of need and therefore this budget will continue to be monitored closely and any forecast movements will be highlighted in future reports.
- 2.10 Appendix 5 outlines the Service's total capital budget, outturn position and current contractual commitments.

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### **3. Measures of success**

- 3.1 The Service operates within approved budget resources.

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### **4. Supporting documentation**

Appendix 1	Revenue – Subjective Analysis
Appendix 2	Revenue – Payments to Other Bodies & Transfer Payments Analysis
Appendix 3	Revenue – Status of Earmarked Reserves
Appendix 4	Capital – Budget Movements 2023/24
Appendix 5	Capital – Summary Expenditure by Thematic Category



**Morag Dendy**  
**Chief Officer (Planning, Performance and Quality Assurance)**

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## 5. Impacts

<p><b>5.1 Public Sector Equality Duty and Fairer Scotland Duty</b> Does the report contain information that has an impact as a result of the Public Sector Equality Duty and/or Fairer Scotland Duty? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, please provide a brief summary of the impact?</p> <p>If Yes, has an assessment been carried out and published on the council's website? <a href="https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments">https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments</a> Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.2 Financial impact</b> Does the report contain any financial impacts? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, have all relevant financial impacts been discussed and agreed with Finance? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact? The Adult Social Care management team will continue to review and implement management action and initiatives, with the aim of remaining within approved budget resources. This action will include vacancy management, curtailment of non-essential expenditure, and maximising income. This report has been prepared by service-based Finance personnel in consultation with budget managers, in accordance with the Financial Regulations.</p>
<p><b>5.3 HR policy impact</b> Does the report contain any HR policy or procedure impacts? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant HR impacts been discussed and agreed with People Resources? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
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<p><b>5.6 Technology / Digital impact</b>  Does the report contain information that has an impact on either technology, digital transformation, service redesign / business change processes, data management, or connectivity / broadband / Wi-Fi?  Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>  If Yes, please provide a brief summary of the impact?</p> <p>Where the impact identifies a requirement for significant technology change, has an assessment been carried out (or is scheduled to be carried out) by the Enterprise Architecture Governance Group (EAGG)?  Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.7 Environmental / Carbon impact</b>  Does the report / project / practice contain information that has an impact on any environmental or carbon matters?  Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>  If Yes, please provide a brief summary of the impact?</p>
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<p><b>5.9 Risk impact</b>  Is there a risk impact?  Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>  If Yes, please provide a brief summary of the key risks and potential impacts, highlighting where the risk(s) are assessed and recorded (e.g. Corporate or Service or Project Risk Registers), and how they are managed?</p> <p>All activities undertaken by the Council are subject to risk, and in acknowledging the Council's approved Risk Management Strategy, Services manage these as part of their overall corporate and service planning processes. The demands and restrictions resulting from Covid, and the current economic climate has the potential to impact upon the Council's ability to provide quality services within approved budget levels.</p> <p>The Service continues to face increasing demand pressures for provision within the home support, self-directed support and independent care home arenas. To mitigate these pressures the Service reviews and considers data and trends in relation to current and anticipated demand on an ongoing basis to underpin projections of need and cost, and to agree appropriate operational and management action.</p>
<p><b>5.10 Armed Forces Covenant Duty</b>  Does the report require to take due regard of the Armed Forces Covenant Duty (i.e. does it relate to healthcare, housing, or education services for in-Service or ex-Service personnel, or their families, or widow(er)s)?  Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>  If Yes, please provide a brief summary of the provision which has been made to ensure there has been appropriate consideration of the particular needs of the Armed Forces community to make sure that they do not face disadvantage compared to other citizens in the provision of public services.</p>

**5.11 Children's rights and wellbeing impact**

Does the report contain any information regarding any council activity, service delivery, policy, or plan that has an impact on children and young people up to the age of 18, or on a specific group of these?

Yes  No

If Yes, please provide a brief summary of the impact and the provision that has been made to ensure there has been appropriate consideration of the relevant Articles from the United Nations Convention on the Rights of the Child (UNCRC).

If Yes, has a Children's Rights and Wellbeing Impact Assessment (CRWIA) been carried out?

Yes  No

**NORTH LANARKSHIRE COUNCIL**  
**Revenue Budget Monitoring Report - Subjective Analysis**  
**Period 06 (01 April 2023 - 15 September 2023)**  
**Adult Social Care & Housing - INTEGRATED**

CATEGORY [1]	ANNUAL BUDGET [2]	PROJECTED OUTTURN [3]	PROJECTED OUTTURN VARIANCE [4]	% [5]	MOVEMENT [6]	VARIANCE ANALYSIS [7]
EMPLOYEE COSTS	89,175,484	84,727,891	4,447,593 FAV	5.0%	(589,412)	Slippage in relation to recruitment of posts in general across the Service
PROPERTY COSTS	2,817,536	2,991,453	(173,917) ADV	(6.2%)	2,630	Higher than anticipated spend on Care of Gardens (Housing)
SUPPLIES & SERVICES	5,800,839	5,688,666	112,173 FAV	1.9%	81,498	Lower than anticipated spend in ICT budgets and other general supplies, offset by a projected overspend in equipment and adaptations
TRANSPORT & PLANT	1,790,897	1,854,961	(64,064) ADV	(3.6%)	(84,367)	Higher than anticipated costs in staff mileage, coupled with estimated running costs associated with vehicles for the home support service
ADMINISTRATION COSTS	1,301,780	652,577	649,204 FAV	49.9%	578,221	Lower than anticipated spend in Carers budgets
PAYMENTS TO OTHER BODIES	54,989,441	54,647,520	341,921 FAV	0.6%	899,505	Please refer to Appendix 2 for analysis
TRANSFER PAYMENTS	98,446,795	99,818,181	(1,371,386) ADV	(1.4%)	0	Please refer to Appendix 2 for analysis
CAPITAL FINANCING COSTS	0	0	0	0.0%	0	
REVENUE FINANCING COSTS	0	0	0	0.0%	0	
OTHER EXPENDITURE	28,858	17,340	11,518 FAV	39.9%	4,200	Minor underspend in "other" expenditure
<b>TOTAL EXPENDITURE</b>	<b>254,351,630</b>	<b>250,398,588</b>	<b>3,953,042 FAV</b>	<b>1.6%</b>	<b>892,276</b>	
NLC CONTRIBUTION	(190,726,778)	(190,726,778)	0	0.0%	0	
NLC CONTRIBUTION - HOUSING	(1,945,010)	(2,095,010)	150,000 FAV	(7.7%)	0	In relation to higher than anticipated spend on Care of Gardens
NLC CONTRIBUTION - TRANSPORT	(550,737)	(550,737)	0	0.0%	0	
INCOME FROM HEALTH FEES AND CHARGES	(55,964,359)	(55,924,529)	(39,830) ADV	0.1%	(25,890)	
OTHER LOCAL AUTHORITIES	0	0	0	0.0%	0	
BUDGETED USE OF IJB RESERVES	(3,176,336)	(3,176,336)	0	0.0%	0	
OTHER INCOME	(560,243)	(679,046)	118,804 FAV	(21.2%)	31,657	Overrecovery in relation to returned private sectors housing grants
<b>INCOME</b>	<b>(254,351,630)</b>	<b>(254,387,859)</b>	<b>36,231 FAV</b>	<b>(0.0%)</b>	<b>33,154</b>	
<b>NET EXPENDITURE</b>	<b>0</b>	<b>(3,989,272)</b>	<b>3,989,273 FAV</b>	<b>0.0%</b>	<b>925,430</b>	

**NORTH LANARKSHIRE COUNCIL**  
**Revenue Budget Monitoring Report - Payments to Other Bodies & Transfer Payments Analysis**  
**Period 06 (01 April 2023 - 15 September 2023)**  
**Adult Social Care & Housing - INTEGRATED**

CATEGORY [1]	ANNUAL BUDGET [2]	PROJECTED OUTTURN [3]	PROJECTED OUTTURN VARIANCE [4]	%	MOVEMENT [6]	VARIANCE ANALYSIS [7]
SDS Framework 1 & 2	97,732,362	99,087,997	(1,355,635) ADV	(1.4%)	0	Demand led activity.
Independent Care Homes	44,038,741	44,521,265	(482,524) ADV	(1.1%)	531,558	Demand led activity.
Payments to NHS Lanarkshire	2,285,090	2,039,282	245,808 FAV	10.8%	245,807	Position reflects anticipated in year payments
Non Traditional Respite	335,283	104,115	231,168 FAV	69.0%	110,842	Position reflects anticipated Locality demand
Other Local Authorities - General	127,909	81,011	46,898 FAV	36.7%	(1,039)	Position reflects anticipated in-year demand
Voluntary Organisations	5,849,007	5,715,466	133,541 FAV	2.3%	34,756	Position reflects anticipated in-year demand
Payments to Other Bodies - General	860,330	635,712	224,618 FAV	26.1%	47,115	Position reflects anticipated in-year demand
Housing Support (RSL's)	714,433	730,184	(15,751) ADV	(2.2%)	0	Position reflects projected contract levels
Locality Flexibility	218,068	180,628	37,440 FAV	17.2%	33,759	Position reflects anticipated Locality demand
Private Sector Housing Grants	1,152,378	923,242	229,136 FAV	19.9%	(31,984)	Position reflects anticipated in-year demand
Medical Fees	122,635	108,947	13,688 FAV	11.2%	3,689	Position reflects Service's approach to absence management
Agency Fees	0	337,853	(337,853) ADV	0.0%	(74,998)	Position reflects anticipated in year payments
Other	0	0	0	0.0%	0	
<b>TOTAL EXPENDITURE</b>	<b>153,436,236</b>	<b>154,465,700</b>	<b>(1,029,466) ADV</b>	<b>(0.7%)</b>	<b>899,505</b>	

**NORTH LANARKSHIRE COUNCIL**  
**Revenue Budget Monitoring Report - Status of Earmarked Reserves**  
**Period 06 (01 April 2023 - 15 September 2023)**  
**Adult Social Care & Housing - INTEGRATED**

DESCRIPTION OF EARMARKED RESOURCE	Approved Reserve Total	2023/24	2024/25	No Longer Required	TOTAL
Contract Monitoring Staff	160,386	67,108	93,278	0	160,386
22/23 Saving: Muirpark	600,000	600,000	0	0	600,000
Carers Act 2018 - Support	2,700,995	529,000	2,171,995	0	2,700,995
Covid Reserve	750,000	250,000	500,000	0	750,000
Social Care Demand risk	9,536,640	9,536,640	0	0	9,536,640
Tech digital Improvements	566,400	566,400	0	0	566,400
Violence Against Women (Joint Initiative with SLC)	30,000	30,000	0	0	30,000
Increase Advocacy provider	118,208	88,667	29,541	0	118,208
LSWM post	76,635	76,635	0	0	76,635
Discharge to assess/ PDD	304,345	272,254	32,091	0	304,345
Adapations Funding	388,315	388,315	0	0	388,315
Tech Improvements - SWIS	700,000	200,000	500,000	0	700,000
Tech Improvements - Comm Alarms	587,932	210,903	377,029	0	587,932
Tech Improvements - Home Scheduling System	3,775,744	1,000,000	2,775,744	0	3,775,744
Adult Protection Contribution	50,000	50,000	0	0	50,000
MH 2 NL10s	188,924	100,000	88,924	0	188,924
Cost of Living Helpline	574,912	236,325	338,587	0	574,912
HS resilience	3,646,000	3,000,000	646,000	0	3,646,000
Local Gov pay award (cost of 2022/23 pay award in 2023/24)	2,830,443	2,830,443	0	0	2,830,443
Staff Training Academy "grow your own"	1,200,000	1,200,000	0	0	1,200,000
Social Worker Regrading	3,169,000	345,892	2,823,108	0	3,169,000
Building Capacity Funding Across The Ip Sector (part of Business Case)	3,811,684	3,150,751	660,933	0	3,811,684
The Winter Planning & Enhanced supports Business Case					
<b>TOTAL</b>	<b>35,766,563</b>	<b>24,729,333</b>	<b>11,037,230</b>	<b>0</b>	<b>35,766,563</b>

**NORTH LANARKSHIRE COUNCIL**  
**Capital Budget Monitoring Report - Budget Movements 2023/24**  
**Period 06 (01 April 2023 - 15 September 2023)**  
**Social Work Capital Programme**

BUDGET MOVEMENTS 2023/24	£	Period	Division	Thematic Category	Theme
Approved budget (5 year Capital Program, commencing 2021/22)	2,200,000				
Reprofiling from 2021/22	200,000	Included in opening budget	Social Work	Key Ambition	Integrated equipment & adaptations
Acceleration in 2022/23	(11,847)	Included in opening budget	Social Work	Key Ambition	Integrated equipment & adaptations
Updated Strategic Capital Investment Prg (P&S Dec 2022)	(200,000)	Included in opening budget	Social Work	Key Ambition	Integrated equipment & adaptations
<b>REVISED CAPITAL BUDGET 2023/24</b>	<b>2,188,153</b>	<b>0</b>	<b>0</b>	<b>0</b>	

**NORTH LANARKSHIRE COUNCIL**  
**Capital Budget Monitoring Report - Summary Expenditure by Thematic Category**  
**Period 06 (01 April 2023 - 15 September 2023)**  
**Social Work Capital Programme**

Theme	BUDGET	ACTUAL	COMMITTED	UNCOMMITTED	FINAL OUTTURN	OUTTURN VARIANCE
<b>Social Work:</b> Integrated Equipment and Adaptations	2,188,153	707,430	860,996	1,327,157	2,188,153	0
<b>TOTAL</b>	<b>2,188,153</b>	<b>707,430</b>	<b>860,996</b>	<b>1,327,157</b>	<b>2,188,153</b>	<b>0</b>



## North Lanarkshire Council Report

### Adult Care and Social Work Committee

Does this report require to be approved?  Yes  No

Ref: Date: 14 November 2023

### Contract Award for Vehicles for Health and Social Care

**From** Ross McGuffie, Chief Officer (Health & Social Care Partnership)

**E-mail** Ross.McGuffie@lanarkshire.scot.nhs.uk **Telephone:** 07939 280915

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#### Executive Summary

The Adult Care and Social Work Committee (the "Committee") is asked to approve the award of a contract for the purchase of Vehicles for Health and Social Care (the 'Agreement') to Suzuki GB PLC.

The Agreement is for a one-off purchase with all vehicles anticipated to be delivered within three months following formal award of the Agreement.

The value of the Agreement is Two Million, Three Hundred and Seventy-One Thousand, Six Hundred and Thirty-Three Pounds and Seventy-Two Pence Sterling (£2,371,633.72) exclusive of VAT.

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#### Recommendations

It is recommended that the Adult Care and Social Work Committee:

- (1) Approves the award of the Agreement to Suzuki GB PLC. at the value of Two Million, Three Hundred and Seventy-One Thousand, Six Hundred and Thirty-Three Pounds and Seventy-Two Pence Sterling (£2,371,633.72) exclusive of VAT.

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#### The Plan for North Lanarkshire

<b>Priority</b>	Improve the health and wellbeing of our communities
<b>Ambition Statement</b>	(12) Ensure our residents are able to achieve, maintain, and recover their independence through appropriate supports at home and in their communities
<b>Programme of Work</b>	Statutory / corporate / service requirement

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#### 1. Background

- 1.1 Social work has a requirement to purchase 164 cars for their Care in Community team. Requirement for some vehicles to have 4x4 capabilities given the geography and topography of North Lanarkshire and must have a minimum boot capacity of around 289 litres given the

amount of specialist equipment that may be required to undertake required caring duties. Additionally, Some cars will be operated 24 hours while others will be on a regular day shift pattern.

- 1.2 The Council purchases vehicles especially cars on a semi-regular basis via various forms of procurement routes to market, most commonly the Crown Commercial Services (CCS) Purchase of Standard and Specialist Vehicles (RM6244) framework agreement (the "Framework Agreement")
- 1.3 A similar arrangement for the purchase of 29 vehicles for use by Care in Community team was awarded via a direct from, the Framework Agreement on 15 May 2023 at a total cost of £499,990.55 to Suzuki GB PLC. The direct award procurement procedure for these requirements was utilised to expedite the delivery of vehicles prior to autumnal / winter months.
- 1.4 Due to the volume of vehicles still required to be purchased (circa 135), it was agreed that this Agreement would be procured by way of a mini competition from the aforementioned CCS framework agreement to demonstrate best value for the councils outlay.
- 1.5 Given the council's Ambition on Net-Zero for North Lanarkshire by 2030, cars to be supplied within the Agreement are hybrid self-charging cars and consist of a mix of two and four wheel drive.
- 1.6 Vehicles within the Agreement are due for delivery within three months following formal award and will be inclusive of a minimum three-year warranty per vehicle and six months after sales service provision which includes local dealership customer services / point of contact, temporary replacement vehicle(s) if required, and associated training for electric / hybrid vehicles.

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## **2. Report**

- 2.1 A group of technical and procurement representatives was formed to develop and agree the procurement strategy for the Agreement to enable the council to achieve maximum benefit for the requirements.
- 2.2 The initial estimated value of the Agreement dictated that the procurement procedure be undertaken in accordance with the Public Contracts (Scotland) Regulations 2015.
- 2.3 The procurement procedure was undertaken as a mini competition from the Crown Commercial Services (CCS) Purchase of Standard and Specialist Vehicles (RM6244) framework agreement, Lot 1: Purchase of Passenger Cars (including 4x4 variants) (the "Framework Agreement").
- 2.4 Invitation to Tender documentation was issued to four companies appointed to the Framework Agreement following a capability and capacity enquiry with the council receiving three tender submissions.
- 2.5 This recommendation to award the Agreement follows the completion of a procurement procedure where Suzuki GB PLC has been evaluated as demonstrating Best Value for the council.

- 2.6 Appendix 1 confirms the scoring achieved by each tenderer, further details of the procurement procedure is provided in Appendix 2 and the SME status and location of all tenderers is located within Appendix 3.

### **Financial / Budget Consideration**

- 2.7 The pre-tender wholelife estimate budget for the Agreement was £2,500,000.00. Following completion of the procurement procedure, the value of the Agreement to be awarded is Two Million, Three Hundred and Seventy-One Thousand, Six Hundred and Thirty-Three Pounds and Seventy-Two Pence Sterling (£2,371,633.72) exclusive of VAT.
- 2.8 As a result of the procurement procedure, costs associated with the Agreement are considerably lower than the pre tender budget resulting in a circa £128,366 saving.
- 2.9 The costs associated with delivery of the Agreement will be contained within the capital budget for Fleet Services (Community Operations) Vehicle Replacement Programme following the transfer of funding from Social Work.

### **Price Stability**

- 2.10 Prices within the Agreement are fixed and unchangeable.

### **Community Benefits**

- 2.11 The procurement did not include a community benefit requirement given the short timescale of the Agreement however Suzuki GB PLC had to demonstrate their "Social Value" commitments to gain appointment to the Framework Agreement with any community benefits offered to be delivered at a national level as set out within the Framework Agreement.

### **Fair Work**

- 2.12 Within their tender submission to gain entry to the Framework Agreement, Suzuki GB PLC had to demonstrate their commitment to fair working conditions as per the "Social Value" quality evaluation criteria to gain appointment to the Framework Agreement.

### **Contract Management**

- 2.13 Officers from Fleet Services, Community Operations will be responsible for managing the Agreement which will be undertaken in accordance with the contract and supplier management conditions applied within the Agreement.

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## **3. Measures of success**

The Agreement will deliver the following outcomes;

- 3.1 Best Value has been considered to be demonstrated by as the Agreement has achieved a circa £128,366 saving against the pre-tender budget.

- 3.2 The appointment of a supplier who has the experience and capability to deliver fit for purpose vehicles that aids the councils care in the community services; and
- 3.3 The procurement procedure is compliant with the procurement legislation and internal procedures;
- 

#### **4. Supporting documents**

- 4.1 Appendix 1 Summary of Tender Evaluation Process
- 4.2 Appendix 2 Summary of Procurement Process
- 4.3 Appendix 3 SME Status and Location of All Tenderers



**Ross McGuffie**  
**Chief Officer (Health & Social Care Partnership)**

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5. Impacts ( <http://connect/report-template-guidance> )

<p><b>5.1 Public Sector Equality Duty and Fairer Scotland Duty</b> Does the report contain information that has an impact as a result of the Public Sector Equality Duty and/or Fairer Scotland Duty? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, please provide a brief summary of the impact?  If Yes, has an assessment been carried out and published on the council's website? <a href="https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments">https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments</a> Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.2 Financial impact</b> Does the report contain any financial impacts? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant financial impacts been discussed and agreed with Finance? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.3 HR policy impact</b> Does the report contain any HR policy or procedure impacts? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant HR impacts been discussed and agreed with People Resources? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.4 Legal impact</b> Does the report contain any legal impacts (such as general legal matters, statutory considerations (including employment law considerations), or new legislation)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant legal impacts been discussed and agreed with Legal and Democratic? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?</p>
<p><b>5.5 Data protection impact</b> Does the report / project / practice contain or involve the processing of personal data? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, is the processing of this personal data likely to result in a high risk to the data subject? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, has a Data Protection Impact Assessment (DPIA) been carried out and e-mailed to <a href="mailto:dataprotection@northlan.gov.uk">dataprotection@northlan.gov.uk</a> Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.6 Technology / Digital impact</b> Does the report contain information that has an impact on either technology, digital transformation, service redesign / business change processes, data management, or connectivity / broadband / Wi-Fi? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, please provide a brief summary of the impact?  Where the impact identifies a requirement for significant technology change, has an assessment been carried out (or is scheduled to be carried out) by the Enterprise Architecture Governance Group (EAGG)?</p>

	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
<b>5.7</b>	<b>Environmental / Carbon impact</b>			
	Does the report / project / practice contain information that has an impact on any environmental or carbon matters?			
	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	If Yes, please provide a brief summary of the impact?			
	North Lanarkshire Council's ambition is to commit to net-zero by 2030, the cars being supplied as part of this agreement are hybrid self-charging cars which will replace an ageing fleet thus supporting the council's aims towards net-zero.			
<b>5.8</b>	<b>Communications impact</b>			
	Does the report contain any information that has an impact on the council's communications activities?			
	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	If Yes, please provide a brief summary of the impact?			
<b>5.9</b>	<b>Risk impact</b>			
	Is there a risk impact?			
	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	If Yes, please provide a brief summary of the key risks and potential impacts, highlighting where the risk(s) are assessed and recorded (e.g. Corporate or Service or Project Risk Registers), and how they are managed?			
<b>5.10</b>	<b>Armed Forces Covenant Duty</b>			
	Does the report require to take due regard of the Armed Forces Covenant Duty (i.e. does it relate to healthcare, housing, or education services for in-Service or ex-Service personnel, or their families, or widow(er)s)?			
	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	If Yes, please provide a brief summary of the provision which has been made to ensure there has been appropriate consideration of the particular needs of the Armed Forces community to make sure that they do not face disadvantage compared to other citizens in the provision of public services.			
	The Framework Agreement has conditions within encouraging all appointed suppliers and their supply chains to "to sign the Corporate Covenant, declaring their support for the Armed Forces community by displaying the values and behaviours set out therein via the <a href="#">Armed Forces Covenant pledge</a> ."			
<b>5.11</b>	<b>Children's rights and wellbeing impact</b>			
	Does the report contain any information regarding any council activity, service delivery, policy, or plan that has an impact on children and young people up to the age of 18, or on a specific group of these?			
	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	If Yes, please provide a brief summary of the impact and the provision that has been made to ensure there has been appropriate consideration of the relevant Articles from the United Nations Convention on the Rights of the Child (UNCRC).			
	If Yes, has a Children's Rights and Wellbeing Impact Assessment (CRWIA) been carried out?			
	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

## Appendix 1 – Summary of Tender Evaluation Process

Final Rank	Tenderer Name	Total Tender Score (%)	Recommended for Award
1	Suzuki GB PLC	100.00%	Yes

Despite three tender submissions being received, two were considered non-compliant. One tender was considered non-compliant as documents submitted were incomplete and they failed to respond to the Councils communications on multiple occasions whilst the other tender was considered non-compliant as they failed to provide a price for all vehicles required.

## Appendix 2 – Summary of Procurement Process

	Response			
<b>CPT Contract Reference Allocated:</b>	NLC-CPT-22-161			
<b>Procurement Procedure Utilised:</b>	Mini Competition			
<b>Governing Legislation / Regulations:</b>	Public Contracts (Scotland) Regulations 2015			
<b>Date Contract Strategy Approved:</b>	08 September 2023			
<b>Framework Owner:</b>	Crown Commercial Services			
<b>Framework Title:</b>	Purchase of Standard and Specialist Vehicles			
<b>Framework Reference Number:</b>	RM6244			
<b>Lot Reference / Title:</b>	Lot 1: Purchase of Passenger Cars (including 4x4 variants)			
<b>Number of Companies Invited to Take Part:</b>	Four (4)			
<b>Date ITT Published:</b>	07 September 2023			
<b>Tender Platform Utilised:</b>	PCS-Tender (PCST)			
<b>Tender Return Deadline:</b>	12 Noon, 03 October 2023			
<b>Number of Tenders Received:</b>	Three (3)			
<b>Tenders Received from SME's:</b>	Zero (0)			
<b>Tenders Received from NLC Based Tenderers:</b>	Zero (0)			
<b>Number of Non-compliant Tenders:</b>	Two (2)			
<b>Number of Compliant Tenders:</b>	One (1)			
<b>Number of Recommended Tenderers:</b>	One (1)			
<b>Basis of Award:</b>	<b>Quality:</b>	40%	<b>Price:</b>	60%
<b>Evaluation Team:</b>	Officers from Fleet Services (Community Operations) and the Corporate Procurement Team			
<b>Anticipated Start Date of the Agreement:</b>	20 November 2023			
<b>Total Agreement Period (Months):</b>	Three (3)			
<b>Awarded Value of the Agreement:</b>	£2,371,633.72			

**Appendix 3 – SME Status and location of all Tenderers**

<b>Name of Tenderer</b>	<b>Size of Tendering Organisation (Micro, Small, Medium or Large)</b>	<b>Location (Local Authority / Council Area)</b>
Kia UK Limited	Large	Surrey
Suzuki GB PLC	Large	Buckinghamshire
Toyota (GB) PLC	Large	Surrey



# North Lanarkshire Council Report

## Adult Care and Social Work Committee

Does this report require to be approved?  Yes  No

Ref RM Date 14/11/23

## Contract Award for Aids for Daily Living

**From** Ross McGuffie, Chief Officer, North Lanarkshire Health & Social Care Partnership  
**E-mail** Ross.McGuffie@lanarkshire.scot.nhs.uk **Telephone** 01698 752594

### Executive Summary

The Adult Care and Social Work Committee (the “Committee”) is asked to approve the award of a contract for Aids for Daily Living (the ‘Agreement’) to NRS Healthcare Limited.

The Agreement is for a period of 30 months with no option to extend. It is anticipated to commence on 01 December 2023.

The maximum value of the Agreement is Two Million Five Hundred Thousand pounds Sterling (£2,500,000.00) exclusive of VAT.

### Recommendations

It is recommended that the Adult Care and Social Work Committee:

- (1) Approves the award of the Agreement to NRS Healthcare Limited at the maximum value of Two Million Five Hundred Thousand Pounds Sterling (£2,500,000.00) exclusive of VAT.

### The Plan for North Lanarkshire

Priority	Improve the health and wellbeing of our communities
Ambition statement	(12) Ensure our residents are able to achieve, maintain, and recover their independence through appropriate supports at home and in their communities
Programme of Work	Resilient People

#### 1. Background

- 1.1 North Lanarkshire Council works in partnership with NHS Lanarkshire to fund the Aids for Daily Living (ADL) and purchases aids for daily living on behalf of both organisations. ADL provides specialist equipment and housing adaptations that support people to live independently in their own homes.

- 1.2 The service covers the North Lanarkshire area for equipment and adaptations requests from North Lanarkshire and the whole of Lanarkshire for NHS Lanarkshire requests.
- 1.3 Equipment and adaptations are recognised as a very cost-effective part of an integrated community care service. Provision of relatively low-cost equipment can prevent accidents in the home which can result in significant costs to health and social care services and are detrimental to the individuals' health and wellbeing.
- 1.4 The supply of this equipment fully supports Health and Social Care North Lanarkshire's ambitions to enable its residents, of all ages and disabilities, to remain within their own homes and to support their independent living and social inclusion for as long as possible. The proposed contractual arrangement will support Health and Social Care North Lanarkshire to fulfil its statutory duties under a range of legislation and the Scottish Government's National Guidance on the provision of equipment and adaptations.
- 1.5 The requirements within the Agreement are currently under contract via a framework agreement for the supply and delivery of Aids for Daily Living. This framework agreement incorporates 8 Lots covering a wide range of items and products with several suppliers appointed. This arrangement is due to expire on 30 September 2023 with the Agreement detailed within this report due to supersede it.

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## 2. Report

- 2.1 A group of technical and procurement representatives was formed to develop and agree the procurement strategy for the Agreement to enable the council to achieve maximum benefit for the requirements.
- 2.2 The initial estimated value of the Agreement dictated that the procurement procedure be undertaken in accordance with the Public Contracts (Scotland) Regulations 2015.
- 2.3 The procurement procedure was undertaken as a "Direct Award" from the Yorkshire Purchasing Organisation (YPO) framework agreement for "Health & Social Care Equipment and Associated Services – 1061, "Lot 1 – Health & Social Care Equipment & Associated Services" (the Framework")
- 2.4 Following the justification detailed and appraised within the associated contract strategy document, the "Direct Award" procedure was the only available call-off option as the Framework only has a single supplier appointed, NRS Healthcare Limited. The Framework is considered to demonstrate Best Value to the council as Framework rates are continually monitored by YPO. Additionally, the Agreement is considered to be a 'strategic' procurement solution for all health & social care equipment as all the council's core stock is available via this single supplier. Using a single supplier will improve efficiencies in our service in many areas:
  - 2.4.1 **Invoicing** – Instead of invoices from multiple suppliers, a single supplier can consolidate all our expenditure into one monthly invoice.
  - 2.4.2 **Space** – A single supplier can assist with stock management. With all supplies held externally by the supplier, this will free up space that can be used for stock that is fast moving, knowing other items can be delivered timeously.
  - 2.4.3 **Deliveries** – With a single supplier, should anything go awry with the couriers deliveries etc., we will just have one point of contact to speak to enable swift resolution.

- 2.4.4 **Consistency** – Consistency of product, price and service is something that companies with a single source supplier always benefit from. With a single source supplier, we can have peace of mind that products are being sourced competitively and has the same quality and service.
- 2.4.5 **Time** – The processes and procedures applied within the Agreement will help save huge amounts of time being saved whether its for the accounts team, warehouse staff, purchasing or admin teams. In this way, each department directly benefits from a single source supplier.
- 2.4.6 **Management Information and Data** – By using a single source supplier, it will be a lot easier to get the data we need and obtain accurate reports. Instead of having to compare different suppliers and expenditure, which may be difficult with multiple suppliers or if the correct data isn't being recorded, we and /or our supplier will be able to get the data we need to be able to forecast, report and create further efficiencies.
- 2.4.7 **Cost Controls and Savings** – Using a single source supplier can save money through distribution, time saved and efficiencies created, but also in the cost of the goods we buy. The supplier would also offer stock holding to keep non-core products or products that have a longer lead time in stock, meaning further savings. By knowing exactly what everything costs from our supplier we can control these costs over the term of the Agreement.
- 2.5 The tender received from NRS Healthcare Limited underwent appropriate appraisal to ensure it was complete/compliant with the council's requirements and demonstrated best value.
- 2.6 Further details of the procurement procedure is provided in Appendix 1 and the SME status and location of the tenderer is located within Appendix 2.

### **Financial / Budget Consideration**

- 2.7 The pre-tender whole life estimate budget for the Agreement was £2,500,000. Following completion of the procurement procedure, the value of the Agreement to be awarded is Two Million Five Hundred Thousand Pounds Sterling (£2,500,000) exclusive of VAT.
- 2.8 The costs associated with delivery of the Agreement will be contained within the Revenue and Capital budget for Health and Social Care.

### **Price Stability**

- 2.9 Pricing for the agreement term will be fixed until 31 March 2025. Subsequent to that initial period, there is provision within the Agreement for NRS Healthcare Limited to request one price review. It will be at the sole discretion of the Council whether to accept or reject any pricing amendment proposed.

### **Community Benefits**

- 2.10 The council is committed to maximising the delivery of community benefits. The procurement included a community benefit requirement, this approach is designed to deliver local community benefits where possible.

2.11 Within their tender, NRS Healthcare Limited committed to deliver the following community benefits within the Agreement:

<b>Community Benefit Type</b>	<b>Offering</b>
Educational Visits	2
Educational Workplace Visit	2
Financial Support for a Community Project / Organisation	4
Non-financial Support for a Community Project / Organisation	2

2.12 The community benefits delivered as part of the Agreement does not include the creation of jobs or apprenticeships.

### **Fair Work First**

2.13 Fair working practices was not assessed within the procurement procedure given the direct award approach however NRS Healthcare Limited confirmed within their tender submission that they are an Accredited Living Wage Employer and have various policies in place to support their staff.

### **Contract Management**

2.14 Officers from the Equipment & Adaptations Service, Health and Social Care will be responsible for managing the Agreement which will be undertaken in accordance with the contract and supplier management conditions applied within the Agreement.

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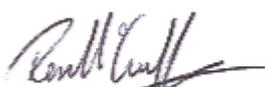
## **3. Measures of success**

- 3.1 The Agreement will deliver the following outcomes:
- 3.2 the appointment of a supplier who has the experience and capability to deliver a high quality and responsive service for the Councils aids for daily living.
- 3.3 that best value is both demonstrable and achieved as per condition 2.4 above.
- 3.4 the procurement procedure is compliant with the procurement legislation and internal procedures.
- 3.5 the Agreement secures community benefits; and
- 3.6 performance is proactively managed against several Key Performance Indicators.

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## **4. Supporting documentation**

- 4.1 Appendix 1: Summary of Procurement Process
- 4.2 Appendix 2: SME Status and Location of All Tenderers



**Ross McGuffie**  
Chief Officer, Health and Social Care

## 5. Impacts

<b>5.1 Public Sector Equality Duty and Fairer Scotland Duty</b> Does the report contain information that has an impact as a result of the Public Sector Equality Duty and/or Fairer Scotland Duty? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, please provide a brief summary of the impact?  If Yes, has an assessment been carried out and published on the council's website? <a href="https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments">https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments</a> Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>5.2 Financial impact</b> Does the report contain any financial impacts? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, have all relevant financial impacts been discussed and agreed with Finance? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?  All finances have been agreed and are contained within agreed budgets.
<b>5.3 HR policy impact</b> Does the report contain any HR policy or procedure impacts? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant HR impacts been discussed and agreed with People Resources? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?
<b>5.4 Legal impact</b> Does the report contain any legal impacts (such as general legal matters, statutory considerations (including employment law considerations), or new legislation)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, have all relevant legal impacts been discussed and agreed with Legal and Democratic? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide a brief summary of the impact?
<b>5.5 Data protection impact</b> Does the report / project / practice contain or involve the processing of personal data? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, is the processing of this personal data likely to result in a high risk to the data subject? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, has a Data Protection Impact Assessment (DPIA) been carried out and e-mailed to <a href="mailto:dataprotection@northlan.gov.uk">dataprotection@northlan.gov.uk</a> Yes <input type="checkbox"/> No <input type="checkbox"/> <input checked="" type="checkbox"/> revision in progress
<b>5.6 Technology / Digital impact</b> Does the report contain information that has an impact on either technology, digital transformation, service redesign / business change processes, data management, or connectivity / broadband / Wi-Fi? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, please provide a brief summary of the impact?

<p>Where the impact identifies a requirement for significant technology change, has an assessment been carried out (or is scheduled to be carried out) by the Enterprise Architecture Governance Group (EAGG)?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>5.7 Environmental / Carbon impact</b></p> <p>Does the report / project / practice contain information that has an impact on any environmental or carbon matters?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If Yes, please provide a brief summary of the impact?</p> <p>The stores have robust recycling process in place and links are underway with NRS to review these to ensure best practice on recycling is maintained.</p>
<p><b>5.8 Communications impact</b></p> <p>Does the report contain any information that has an impact on the council's communications activities?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If Yes, please provide a brief summary of the impact?</p>
<p><b>5.9 Risk impact</b></p> <p>Is there a risk impact?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If Yes, please provide a brief summary of the key risks and potential impacts, highlighting where the risk(s) are assessed and recorded (e.g. Corporate or Service or Project Risk Registers), and how they are managed?</p> <p>There would be a risk if a contract is not awarded as requirement would mean we would purchase off contract to meet our statutory duties, which would more than likely increase costs. Financial governance is all in place.</p>
<p><b>5.10 Armed Forces Covenant Duty</b></p> <p>Does the report require to take due regard of the Armed Forces Covenant Duty (i.e. does it relate to healthcare, housing, or education services for in-Service or ex-Service personnel, or their families, or widow(er)s)?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If Yes, please provide a brief summary of the provision which has been made to ensure there has been appropriate consideration of the particular needs of the Armed Forces community to make sure that they do not face disadvantage compared to other citizens in the provision of public services.</p>
<p><b>5.11 Children's rights and wellbeing impact</b></p> <p>Does the report contain any information regarding any council activity, service delivery, policy, or plan that has an impact on children and young people up to the age of 18, or on a specific group of these?</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If Yes, please provide a brief summary of the impact and the provision that has been made to ensure there has been appropriate consideration of the relevant Articles from the United Nations Convention on the Rights of the Child (UNCRC).</p> <p>If Yes, has a Children's Rights and Wellbeing Impact Assessment (CRWIA) been carried out?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>

## Appendix 1 – Summary of Procurement Process

<b>CPT Contract Reference Allocated:</b>	NLC-CPT-23-006
<b>Procurement Procedure Utilised:</b>	Direct Award From Framework Agreement
<b>Governing Legislation / Regulations:</b>	Public Contracts (Scotland) Regulations 2015
<b>Date Contract Strategy Approved:</b>	24 August 2023
<b>Framework Owner:</b>	Yorkshire Purchasing Organisation (YPO)
<b>Framework Title:</b>	Health & Social Care Equipment and Associated Services
<b>Framework Reference Number:</b>	1061
<b>Lot Reference / Title:</b>	Lot 1 – Health & Social Care Equipment & Associated Services – Direct Award
<b>Date ITT Published:</b>	24 August 2023
<b>Tender Platform Utilised:</b>	PCS-Tender (PCST)
<b>Tender Return Deadline:</b>	12 Noon, 04 September 2023
<b>Number of Tenders Received:</b>	One
<b>Tenders Received from SME's:</b>	Large
<b>Tenders Received from NLC Based Tenderers:</b>	None
<b>Number of Recommended Tenderers:</b>	One
<b>Assessment Team:</b>	Officers from Social Work and the Corporate Procurement Team
<b>Anticipated Start Date of the Agreement:</b>	01 October 2023
<b>Total Agreement Period (Months):</b>	30
<b>Awarded Value of the Agreement:</b>	£2,500,000.00

**Appendix 2 – SME Status and location of all Tenderers**

<b>Name of Tenderer</b>	<b>Size of Tendering Organisation (Micro, Small, Medium or Large)</b>	<b>Location (Local Authority / Council Area)</b>
NRS Healthcare Limited	Large?	Leicestershire



## **2. Report**

- 2.1 In accordance with GSCO 21.10, this report summarises the contract awards since last committee, specifically for the spend range:
- over £50,000 but below £500,000 for supplies or services; and,
  - over £500,000 but below £2,000,000 for works.
- 2.2 If you require further information regards the contract awards reported, please refer to the lead service area / chief officer detailed in the appendix.
- 

## **3. Measures of success**

- 3.1 All requirements contracted contribute to either the council's programme of work and/or fulfil a statutory requirement.
- 3.2 All contract awards secure best value for the council in accordance with their evaluation criteria.
- 3.3 All necessary diligence has been undertaken in the evaluation and appointment of contractors.
- 3.4 All contract awards are logged in the council's contract register.
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## **4. Supporting documentation**

- 4.1 Appendix 1 – Summary of contracts awarded.



**James McKinstry**  
**Chief Officer (Assets and Procurement)**

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## **5. Impacts**

- 5.1 Impacts considered as part of the contract award procedures are recorded in the individual contract award reports held by the lead service area.

## Appendix 1 – Summary of Contracts Awarded

<b>Contract</b>	<b>Ref</b>	NLC-NTP-23-038				
	<b>Title</b>	Signs of Safety Approach				
	<b>Classification</b>	Services - Social & Specific				
	<b>Lead Service Area / Chief Officer</b>	Social Work / Alison Gordon				
<b>Competition</b>	<b>Governance by Value</b>	Lower Threshold Regulations				
	<b>Procurement Route</b>	Health and Social Related Services, Award without Advertising				
	<b>No. of Contractors invited</b>	1				
	<b>No. of Bids Received</b>	1				
	<b>Award Criteria</b>	Award decision consistent with the provisions of the procurement reform Act and best-practice guidance				
	<b>Evaluation Scores</b>	<b>Successful</b>	*Not applicable	<b>Others</b>	*Not applicable	
	<b>Comments</b>	*No evaluation scores recorded; service decision on contractor selection was made in conformance with the guidance for award of contracts for Health and Social Related Services				
<b>Award Details</b>	<b>Value</b>	£95,000				
	<b>Contract Duration</b>	1				
	<b>Contractor Name</b>	Leigh Taylor Limited				
	<b>Contractor Size</b>	SME				
	<b>Contractor Location</b>	Edinburgh				
	<b>Status - Payment of Living Wage?</b>	Yes				
	<b>Status - Living Wage Accredited?</b>	No				
<b>Impacts</b> <i>this section highlights which impacts were considered for this contract award procedure</i>	Public Sector Equality Duty and Fairer Scotland Duty <input checked="" type="checkbox"/>	HR Policy Impact <input type="checkbox"/>	Data Protection Impact <input type="checkbox"/>	Environment / Carbon Impact <input type="checkbox"/>	Risk Impact <input checked="" type="checkbox"/>	Children's Rights and Wellbeing Impact <input type="checkbox"/>
	Financial Impact <input checked="" type="checkbox"/>	Legal Impact <input type="checkbox"/>	Technology / Digital Impact <input type="checkbox"/>	Communications Impact <input type="checkbox"/>	Armed Forces Covenant Duty <input type="checkbox"/>	
	Further details regarding these impacts can be obtained from the Lead Service Area / Chief Officer					

<b>Contract</b>	<b>Ref</b>	NLC-CPT-21-140				
	<b>Title</b>	Making Life Easier web-solution for Social Care				
	<b>Classification</b>	Services - Standard				
	<b>Lead Service Area / Chief Officer</b>	Social Work / Maria Williamson				
<b>Competition</b>	<b>Governance by Value</b>	Higher Threshold Regulations				
	<b>Procurement Route</b>	Framework Call-off, Direct Award				
	<b>No. of Contractors invited</b>	1				
	<b>No. of Bids Received</b>	1				
	<b>Award Criteria</b>	Framework, Best Value Assessment				
	<b>Evaluation Scores</b>	<b>Successful</b>	*Not applicable	<b>Others</b>	*Not applicable	
	<b>Comments</b>	*No evaluation scores recorded as this is a single contractor framework				
<b>Award Details</b>	<b>Value</b>	£291,269				
	<b>Contract Duration</b>	4 years				
	<b>Contractor Name</b>	Adl Smartcare Ltd				
	<b>Contractor Size</b>	SME				
	<b>Contractor Location</b>	Sheffield				
	<b>Status - Payment of Living Wage?</b>	Yes				
	<b>Status - Living Wage Accredited?</b>	No				
<b>Impacts</b> <i>this section highlights which impacts were considered for this contract award procedure</i>	Public Sector Equality Duty and Fairer Scotland Duty <input checked="" type="checkbox"/>	HR Policy Impact <input type="checkbox"/>	Data Protection Impact <input type="checkbox"/>	Environment / Carbon Impact <input type="checkbox"/>	Risk Impact <input checked="" type="checkbox"/>	Children's Rights and Wellbeing Impact <input type="checkbox"/>
	Financial Impact <input checked="" type="checkbox"/>	Legal Impact <input type="checkbox"/>	Technology / Digital Impact <input checked="" type="checkbox"/>	Communications Impact <input type="checkbox"/>	Armed Forces Covenant Duty <input type="checkbox"/>	
	Further details regarding these impacts can be obtained from the Lead Service Area / Chief Officer					