



## ***Social Policy, Policy Development and Scrutiny Panel***

West Lothian Civic Centre  
Howden South Road  
LIVINGSTON  
EH54 6FF

27 October 2017

A meeting of the **Social Policy, Policy Development and Scrutiny Panel** of West Lothian Council will be held within **Council Chambers, West Lothian Civic Centre** on **Thursday 2 November 2017** at **9:30 a.m.**

For Chief Executive

### **BUSINESS**

#### **Public Session**

1. Apologies for Absence
2. Declarations of Interest - Members should declare any financial and non-financial interests they have in the items of business for consideration at the meeting, identifying the relevant agenda item and the nature of their interest.
3. Order of Business, including notice of urgent business and declarations of interest in any urgent business
4. Confirm Draft Minute of Meeting of the Social Policy, Policy Development and Scrutiny Panel held on Tuesday 12 September 2017 (herewith).
5. Chief Social Work Officer's Annual Report 2016-2017
  - (a) Presentation by Jane Kellock, Head of Social Policy
  - (b) Report by Head of Social Policy (herewith)
6. Edinburgh, The Lothians and Scottish Borders Multi Agency Public Protection Arrangements (MAPPA) Annual Report 2016-2017
  - (a) Presentation by Tim Ward, Senior Manager - Young People and Public Protection

(b) Report by Head of Social Policy (herewith)

7. Update on Macmillan @ West Lothian Project - Report by Head of Finance and Property Services (herewith)
8. Consultation on The Continuing Care (Scotland) Amendment Order 2018 - Report by Head of Social Policy (herewith)
9. Self-Directed Support Policy - Report by Head of Social Policy (herewith)
10. Alcohol Diversionary Activities - Report by Head of Social Policy (herewith)
11. Social Policy Contract Activity Update - Report by Head of Social Policy (herewith)
12. Workplan (herewith)

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NOTE **For further information please contact Elaine Dow on 01506 281594 or email [elaine.dow@westlothian.gov.uk](mailto:elaine.dow@westlothian.gov.uk)**

MINUTE of MEETING of the SOCIAL POLICY, POLICY DEVELOPMENT AND SCRUTINY PANEL of WEST Lothian COUNCIL held within COUNCIL CHAMBERS, WEST Lothian CIVIC CENTRE, on 12 SEPTEMBER 2017.

Present – Councillors Angela Doran (Chair), George Paul, Charles Kennedy, Dave King, Sarah King, Dom McGuire and Damian Timson

Apologies – Bridget Meisak, Voluntary Sector Gateway West Lothian

1. DECLARATIONS OF INTEREST

Councillor King declared a non-financial interest as an appointed member of West Lothian Integration Joint Board.

Councillor Paul declared a non-financial interest as an appointed member of West Lothian Integration Joint Board.

The clerk advised that there was a dispensation in the Councillors Code of Conduct for membership of Integration Joint Boards (IJB) so that councillors, as voting members of the IJB, did not have to declare an interest when discussion on general health and social care issues arose.

2. MINUTE

The Panel confirmed the minute of the Social Policy PDSP meeting held on 29 June 2017 as being a correct record. The minute was thereafter signed by the Chair.

3. NATIONAL STATISTICS PUBLICATION: CHILDREN'S SOCIAL WORK STATISTICS SCOTLAND 2015-16

A presentation was given by the Senior Manager, Young People and Public Protection providing information on the Children's Social Work Statistics which included children and young people who were formally looked after by the local authority, under child protection measures or in secure care.

The Panel was given information on how children became looked after or subject to Child Protection measures. Details of the types of placements available were provided and a breakdown given on the number of placements in West Lothian. The Corporate Parenting Plan in West Lothian sought to:

- improve the quality of care and care planning;
- improve health and wellbeing;
- support learning and raising attainment;
- support employment, training and positive destinations; and

- provide high quality through, continuing and after-care.

Following conclusion of the presentation the Panel considered a report (copies of which had been circulated) by the Head of Social Policy providing details of the National Statistics Publication, Children's Social Work Statistics Scotland 2015-16, which was attached as an appendix to the report.

The Senior Manager then responded to questions from members of the Panel. In response to a question relating to the number of children on the Child Protection Register in West Lothian being lower than the national rate, he advised that this could be due to the early intervention work carried out to support and protect children and young people in West Lothian. More detailed information could be provided to a future meeting of the Panel if required. The Senior Manager undertook to provide members with information following the meeting relating to what was being done in West Lothian to reduce the length of time children were being looked after in the longer term. He also agreed to provide details of the number of referrals received for children from affluent areas compared to more deprived areas in West Lothian.

In conclusion, the Children's Social Work statistics for Scotland Bulletin highlighted that in many aspects the figures for West Lothian did not vary greatly from the national averages. West Lothian has adopted an early intervention and prevention approach and continues to work with partners to ensure that children and young people have the best start in life and ready to succeed.

It was recommended that the Panel notes the performance of West Lothian Council in comparison to national figures and the national statistics in relation to:

- children and young people who were looked after;
- child protection; and
- secure care.

#### Decision

1. To note the contents of the report; and
2. To note that the Senior Manager undertook to provide information to members of the Panel following the meeting relating to the length of time children were being looked after in the longer term and information relating to the number of referrals received for children in affluent areas compared to more deprived areas in West Lothian.

#### 4. ALCOHOL DIVERSIONARY ACTIVITIES

The Panel considered a report (copies of which had been circulated) by the Head of Social Policy providing details of the applications submitted

for Alcohol Diversionary Funding. Five applications for funding were submitted for consideration, which were attached as appendices to the report, and were received from:

- Armadale Youth Space;
- Booze You Looze;
- Craigshill Off Beat;
- Blackburn Initiative; and
- Diversionary Football Project.

The Senior Manager, Community Care Support and Services, advised that the applications submitted have met the West Lothian Alcohol & Drug Partnership (ADP) Joint Commissioning Plan outcomes as assessed by the Alcohol Diversionary Fund (ADF) Subgroup meetings on 14 August and 23 August 2017.

The Senior Manager then responded to questions from members of the Panel.

The Panel was asked to note the applications submitted for Alcohol Diversionary Funding which were intended to be submitted to Council Executive for approval.

#### Decision

1. To note the contents of the report and the applications submitted for Alcohol Diversionary Funding; and
2. Agreed that the report be forwarded to Council Executive for approval.

#### 5. REPORT ON CARE INSPECTORATE INSPECTIONS FOR CHILDREN & FAMILIES SERVICES APRIL 2016-MARCH 2017

The Panel considered a report (copies of which had been circulated) by the Head of Social Policy providing details of the inspection grades achieved by Children & Family services during the period April 2016 to March 2017. A breakdown of the grades achieved by the services over the past year following their inspections was attached as an appendix to the report.

The Senior Manager, Young People and Public Protection, explained that one of the ways the Care Inspectorate checks services was to carry out inspections. The inspector could visit without advising service's staff in advance or on a planned, announced basis.

The quality inspection reports from the Care Inspectorate of Services for Children and Young People showed that all areas assessed were awarded Grades of '4 Good' or above, with 50% of areas assessed awarded Grades of 5 'Very Good' and 14% awarded Grades of '6

Excellent’.

In conclusion, it was noted that this was a positive performance which demonstrated the continuing hard work and commitment on the part of staff delivering some of the most challenging services in social work.

It was recommended that the Panel notes the performance of Children and Families Services inspected by the Care Inspectorate between April 2016 and 2017 and recognised the high standards and positive inspection reports achieved.

#### Decision

To note the contents of the report.

### 6. JOINT INSPECTION OF SERVICES FOR CHILDREN AND YOUNG PEOPLE

The Panel considered a report (copies of which had been circulated) by the Head of Social Policy providing details of the findings of the Joint Inspection of Services for Children and Young People by the Care Inspectorate. The Services for children and young people in West Lothian joint inspection report was attached as an appendix to the report.

The Senior Manager, Young People and Public Protection, advised that the inspection process that was undertaken in West Lothian was robust and intensive and had taken account of the full range of work undertaken with children, young people and families locally. As part of the inspection process the planning and delivery of services for children and young people were evaluated against nine quality indicators. The findings indicated that West Lothian has had a very positive inspection.

The Senior Manager then responded to questions from members of the Panel. In response to a question relating to the initial responses to concerns raised about the safety and wellbeing of children and young people, he confirmed that plans to introduce a shared electronic system were expected to improve sharing information between police, social work and health services which would improve the inter-agency referral discussions process.

It was recommended that the Panel notes the findings of the recent joint inspection of services for children and young people in West Lothian.

#### Decision

To note the contents of the report.

### 7. HEATHERFIELD NURSING HOME

The Panel considered a report (copies of which had been circulated) by the Head of Social Policy advising of the application of an enhancement in the quality element of the National Care Home Contract Fee to

Heatherfield Nursing Home who has been awarded a Grade 5 by the Care Inspectorate in the category Quality of Care and Support. A copy of the care service inspection report for Heatherfield Nursing Home was attached as an appendix to the report.

The report recalled that in April 2007 the National Care Home Contract for Older People Care Home was implemented in West Lothian and across Scotland. The aim of the contract was to provide a consistent approach to the quality of care and a national fee for the provision of Older People Care Home beds in the private sector.

A key performance indicator in the contract for 2016-17 was the use of the quality assurance framework currently in use by The Care Inspectorate.

In June 2017, Heatherfield Nursing Home was awarded QAF Grade 5 in the category Quality of Care and Support, QAF Grade 4 in the category Quality of Environment, QAF Grade 4 in the category Quality of Management and Leadership and QAF Grade 5 in the category of Quality of Staffing. The National Care Home Contract required West Lothian Council to apply the enhancement under the quality element of the contract. The enhancement for Heatherfield Nursing Home calculated to an additional £3 per week per resident backdated to 26 June 2017, which was the date of the inspection.

The Panel was asked to note the application of enhancement in the quality element of the National Care Home Contract fee to the private provider.

#### Decision

To note the contents of the report.

#### 8. RESPONSE TO THE SCOTTISH GOVERNMENT CONSULTATION ON DRAFT REGULATIONS UNDER THE CARERS (SCOTLAND) ACT 2016

The Panel considered a report (copies of which had been circulated) by the Head of Social Policy providing details of the proposed response by the Council to the Scottish Government's Consultation on draft regulations under the Carers (Scotland) Act 2016. The Carers (Scotland) Act 2016:- Consultation on Draft Regulations was attached at appendix 2 to the report.

The report explained that The Carers (Scotland) Act 2016 (the Act) would be effective from 1 April 2018 and contained a range of statutory duties in relation to supporting adult and young carers. The Act mainly imposes duties on local authorities and Integration Joint Boards but also imposes some on Health Boards. The Act applies to adults', older people's and children's services. The aim of the Act was to support adult carers to continue to care, if they so wished, and to have a life alongside caring and to enable young carers to have a childhood similar to their non-carer peers. Details of the Carers (Scotland) Act 2016 – Proposed Regulations were outlined within the report.

The Draft West Lothian Consultation Response was attached at appendix 1 to the report, which reflected the position outlined in the report and was required to be submitted by the closing date of 24 September 2017.

It was recommended that the Panel note and consider the proposed West Lothian Council response to the Scottish Government consultation on draft regulations under the Carers (Scotland) Act 2016 which was intended to be submitted to Council Executive for approval and submission.

#### Decision

1. To note the contents of the report; and
2. To agree that the report be forwarded to the Council Executive for approval.

#### 9. WORKPLAN

A copy of the workplan was circulated which formed the basis of the Panel's work over the coming months.

#### Decision

To note the workplan.





## **SOCIAL POLICY - POLICY DEVELOPMENT AND SCRUTINY PANEL**

### **CHIEF SOCIAL WORK OFFICER'S ANNUAL REPORT 2016-2017**

#### **REPORT BY HEAD OF SOCIAL POLICY**

##### **A. PURPOSE OF REPORT**

This report provides the Panel with the opportunity to comment on the Chief Social Work Officer's Annual Report. This report provides an overview of the statutory work undertaken during the period 2016 -2017.

##### **B. RECOMMENDATION**

It is recommended that the Panel :

1. note the contents of the Chief Social Work Officer's annual report for 2016 - 2017;
2. note the submission of this report to the Scottish Government Chief Social Work Advisor
3. note that the report will also be submitted to:
  - a) Health and Care Policy Development and Scrutiny Panel – 2<sup>nd</sup> November
  - b) Council Executive - 14<sup>th</sup> November and
  - c) Integration Joint Board – 5<sup>th</sup> December

##### **C. SUMMARY OF IMPLICATIONS**

<b>I Council Values</b>	<ul style="list-style-type: none"><li>– Focusing on our customers' needs</li><li>– Being honest, open and accountable</li><li>– Providing equality of opportunity</li><li>– Developing employees</li><li>– Making best use of resources</li><li>– Working in partnership</li></ul>
<b>II Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)</b>	No new implications; Equality Impact Assessments will be applied to specific commitments where appropriate.
<b>III Implications for Scheme of</b>	None

### **Delegations to Officers**

<b>IV</b>	<b>Impact on performance and performance Indicators</b>	All activities and actions have performance indicators and targets applied.
<b>V</b>	<b>Relevance to Single Outcome Agreement</b>	None
<b>VI</b>	<b>Resources - (Financial, Staffing and Property)</b>	All commitments are consistent with the Council's budget decisions.
<b>VII</b>	<b>Consideration at PDSP</b>	None
<b>VIII</b>	<b>Other consultations</b>	None

## **D. TERMS OF REPORT**

### **Background**

The legislation governing the delivery of Social Work Services requires the Chief Social Work Officer to exercise a general level of oversight.

The Scottish Government published national guidance for local authorities on the appointment and responsibilities of Chief Social Work Officers, including related reporting arrangements. The arrangements in West Lothian are consistent with this guidance.

### **Service Overview**

The role of the Council's Social Work Services is to support, care for and protect people of all ages, by providing or purchasing services designed to promote their safety, dignity and independence, and to contribute to community safety by reducing offending and managing the risk posed by known offenders.

Services are delivered within a framework of statutory duties and powers imposed on the Council. Services are required to meet national standards and to provide best value. Where possible, services are delivered in partnership with a range of stakeholders, including, most importantly, people who use them.

### **Chief Social Work Officer Duties**

The role of the Chief Social Work Officer is to provide professional governance, leadership and accountability for the delivery of social work and social care services, whether these be provided by the local authority or purchased from the voluntary or private sectors.

In addition, there is a small number of duties and decisions that relate primarily to the curtailment of individual freedom and the protection of both individuals and the public, which must be made either by the Chief Social Work Officer or by a professionally qualified social worker to whom responsibility has been appropriately delegated.

The Council's scheme of delegation provides for senior social work staff to make certain decisions on behalf of the local authority in the following areas:

- Adults with incapacity;
- Mental health;
- Adoption
- Secure accommodation and emergency placement of children.
- Protection and Risk Management:
  - Child Protection
  - Adult Protection
  - MAPPA

### **Chief Social Work Officer Report**

The Chief Social Work Officer Report provides an overview of the role and responsibilities of the Chief Social Work Officer and outlines the governance arrangements that are in place in West Lothian. The report highlights Council's statutory duties, the decisions that are delegated to the Chief Social Work Officer and gives a summary of service performance.

## **E. CONCLUSION**

The delivery of social work services is challenging and in light of the current economic situation the importance of delivering vital services to the most vulnerable and marginalised in our community will test our capacity, creativity and commitment over the forthcoming year. It is essential to continue to develop and improve our services while constantly seeking to become more efficient. Social Policy is well placed to address these challenges and will continue to contribute significantly to the delivery of positive outcomes for the people of West Lothian.

## **F. BACKGROUND REFERENCES**

None

Appendices/Attachments:	Appendix 1: Chief Social Work Officer's Report 2016/2017
	Appendix 2: Elected Member Briefing Note – Chief Social Work Officer
Contact Person:	Jane Kellock Head of Social Policy
Tel	01506 281920
Date:	2 <sup>nd</sup> November 2017



# Chief Social Work Officer Annual Report

01/04/16 – 31/03/17

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## **1. Chief Social Work Officer's Summary of Performance- Key challenges, developments and improvements during the year**

In 2016-2017 Social Policy has continued to operate in an increasing complex environment facing both financial and demographic pressures. Major policy developments such as increased personalisation of services, increased focus on prevention and early intervention and increased focus on joint working aim to improve outcomes for people who use services and their families; however, these bring considerable organisational and financial pressures to bear on the service.

A range of measures were implemented during 2016-2017 to ensure that the planned reductions in budget allocations were taken forward. The identification and removal of lower value activities was central to making sure that the impact on care was not a negative one, but one that allowed for service improvements.

Working in a climate of constrained public spending is a huge challenge for a demand led service such as Social Policy. Along with reduced funding, teams are also faced with an increasing cost of service delivery through factors such as inflationary pressures and an increase in the demand for services due to an increasing population, and increased complexity of need. In West Lothian, the increase in costs is particularly influenced by both the growing elderly and young populations.

In West Lothian health and social care services are well advanced in applying a much greater focus on prevention and early intervention, including building capacity within communities to help people maintain their independence wherever possible. It is recognised that for such a model to be successful resources will be required to be moved upstream and that interventions must be early enough to optimise the opportunity for success. The systems and processes set up for measurement have enabled the West Lothian Community Planning Partnership to make informed decisions about costs and benefits, enabling a greater number of individuals to experience more positive and fulfilling lives and thus mitigate to some extent against future pressure on reactive, high-tariff services.

Social Policy services have continued to have an awareness of the effect that the welfare reform legislation is having on a growth in demand for services, as the impact of the reforms take hold. Alongside this, the personalisation of services is being applied across all areas underpinned by legislation and policy directives.

The council's aim is, and always will be, to ensure that West Lothian continues to be a great place to live, work, visit and do business. To achieve this aim, the council will continue to prioritise funding services that have the most significant and positive impact on the community.

Social Policy continues to seek areas and opportunities to move resources upstream or to identify existing service gaps that if measures were put in place would lead to

improved outcomes and reduce social inequalities across all life stage groups. In 2016-17, the service achieved a number of important successes, which include:

### **Services to Adults and Older People:**

- Following extensive assessment of needs, developed a series of Commissioning Plans covering all major care groups
- Implemented Project Search, a one year programme of work training for people with learning disabilities and/or autism, with 12 trainees currently benefiting.
- Developed and implemented a new supported living care model at Rosemount Gardens, Bathgate, a new 30 tenancies housing complex. The new model promotes independence with greater personalised support keeping older people connected with their local community.
- Successfully negotiated the introduction of the Living Wage with providers of social care services.
- Significantly increased the number of people taking up personalised options under Self-directed Support.

### **Services to Children, Young People and Families**

- Successfully launched the West Lothian Public Protection Committee.
- Commenced a Public Social Partnership Approach to supporting short breaks for parents with children with disabilities.
- Completed extensive partnership training in the 'Safe and Together' model, a programme for better interventions around domestic abuse.
- Successfully piloted the Young Almond project, targeted at teenage girls vulnerable to sexual exploitation.
- Commenced expanding options for family based care with the introduction of Family Group Conferencing.
- Strong levels of engagement and success with the Psychology of Parenting Project (PoPP)

### **Criminal and Youth Justice Services**

- Early and Effective Intervention (EEI) continues to increase numbers involved and maintain low levels of re-offending
- Achieved implementation of a new partnership through the Safer Communities Strategic Planning Group for the national Community Justice redesign which has transferred responsibilities from Community Justice Authorities to Community Planning partnerships.
- Completed a successful WLAM (West Lothian Assessment Model) assessment achieving improved scores.

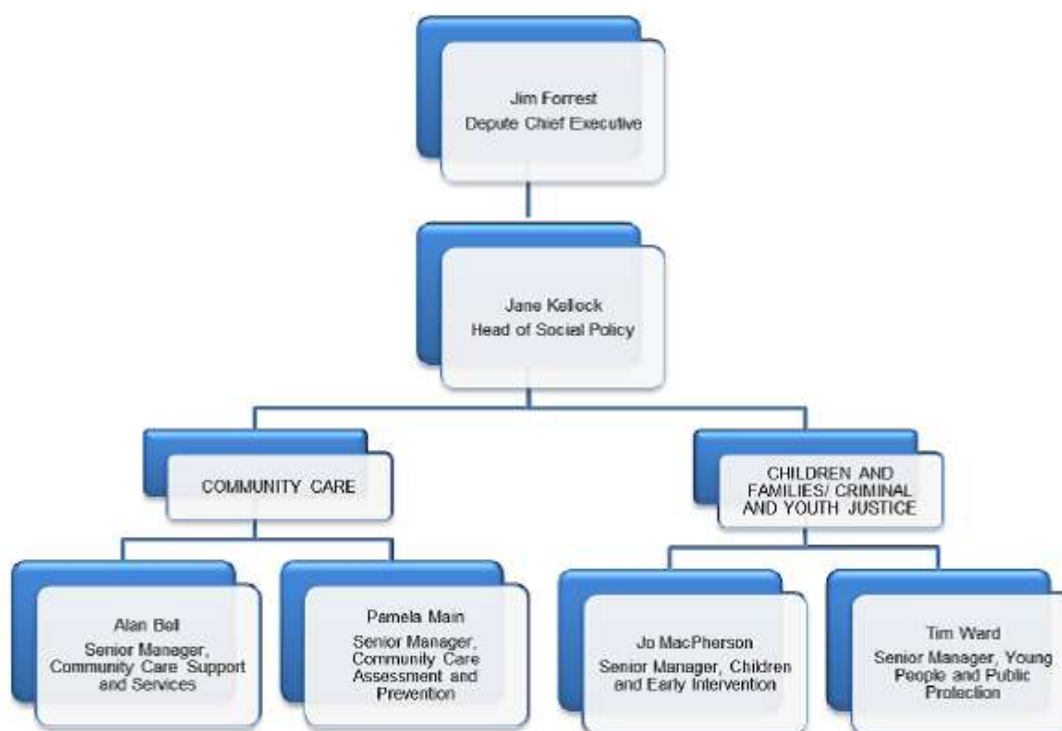


## 2. Partnership Structures/Governance Arrangements

### Service Context

Social Policy is part of the Health and Social Care Partnership directorate and has the responsibility for the operational delivery of health and social care services including children and families, community care and criminal justice services. The management structure is outlined below:

Figure 1 West Lothian Health and Social Care Partnership Management Structure



Social Policy encompasses a wide range of services planned for and delivered to a large number of people with a spectrum of differing needs and works towards achieving the council's strategic aims, in particular:

- Delivering positive outcomes and early interventions for early years
- Improving the quality of life for older people
- Minimising poverty, the cycle of deprivation and promoting equality
- Reducing crime and improving community safety
- Delivering positive outcomes on health

The service contributes to a series of joint plans with key partners including:

- West Lothian Children's Services Plan
- Joint Learning Disability Strategy

- Reducing Reoffending Strategic Plan
- Joint Physical and Complex Disability Strategy
- Joint Mental Health Plan
- West Lothian Integration Scheme
- Integration Joint Board Strategic Commissioning Plan

### Partnership

Social Policy has a key role to play in the wider Community Planning process especially where there is a focus on the needs of vulnerable or disadvantaged people and makes a significant contribution to partnership working by its continued input to the Integration Joint Board, Integration Strategic Planning Group, Children and Families Strategic Planning Group and Safer Communities Strategic Planning Group, all of which sit within the West Lothian Community Planning Partnership. In addition, the Chief Officers' Group oversees the work of the Public Protection Committee and has responsibility for ensuring that their agencies, individually and collectively, work to protect the children, young people and vulnerable adults of West Lothian.

**Figure 2 Strategic Planning Structure**



### West Lothian Integration Joint Board

The Integration Joint Board has responsibility for the governance of the range of health and social care functions including all Social Policy services delivered to adults and older people, plus domestic abuse and health improvement functions. The functions that have been delegated to the West Lothian IJB are set out in the West Lothian Integration Scheme ([West-Lothian Integration Scheme.pdf](#)). The Integration Joint Board Strategic Plan 2016-19 is currently subject to its first annual review.

### West Lothian Children and Families Strategic Planning Group

The West Lothian Children and Families Strategic Planning Group oversees the development of the Getting It Right For Every Child (GIRFEC) framework across West Lothian and has responsibility to enact the range of duties of the Children and Young People (Scotland) Act 2014, including the development of a joint Children's Services Plan, a Corporate Parenting Plan and to oversee the implementation of the Named Person services for West Lothian. Currently, children's services across the

West Lothian Community Planning Partnership are subject to joint inspection, with a report expected to be published in 2017.

### **West Lothian Public Protection Committee**

The Public Protection Committee has oversight of the areas of Child Protection, Adult Protection, Multi-Agency Public Protection Arrangements (MAPPA) and Violence Against Women and Girls. The Committee works alongside other key groups including Children and Families and Safer Communities Strategic Planning groups and the Integration Strategic Planning Group to work towards better outcomes for the most vulnerable populations in our society.

### **Community Justice**

New Community Justice arrangements came into place in April 2017, with oversight across the partnership services involved in the delivery of Community Safety and the compliance with multi-agency Criminal and Youth Justice arrangements.

We will continue to work closely with key partners in the West Lothian Community Planning Partnership to share information which will enable us to identify those most at risk and to intervene to prevent harm.

### **Locality Planning**

Locality planning contributes to the successful delivery of services at a community level. The Health and Social Care Partnership has established two locality groupings, East (incorporating the ward areas of Linlithgow; Broxburn, Uphall and Winchburgh; Livingston North; Livingston South; East Livingston and East Calder) and West (incorporating the ward areas of Bathgate; Armadale and Blackridge; Whitburn and Blackburn; Fauldhouse and the Breich Valley) with the aim of joining up health and care services ever more closely within communities. Locality focussed plans for the east and west of West Lothian will be developed in 2017-18.

### **The Role of the Chief Social Work Officer**

The Chief Social Work Officer (CSWO) in West Lothian is the Head of Social Policy and is responsible for monitoring all social work service activity across the council.

Monitoring is in place to ensure that agreed targets are being met, professional standards are maintained and reports to outside agencies reflect the true position of services either provided directly or purchased by the Council. The CSWO is a member of significant decision making teams and groups, both within the Council and in multi-agency settings, providing reports to and receiving reports from them, and having the opportunity to contribute to decision making as appropriate.

The CSWO is required to report annually to the council and the arrangements set out here will form the basis of the content of the annual report.

Significant case reviews: the CSWO will sign off all significant case review reports across Social Policy.

External audits and inspections: the CSWO is the lead officer for all social work related audits and inspections, and needs to be notified of any related issues as they arise. In general, the external body will communicate directly with the CSWO. The CSWO must be informed of any requirements imposed by the Care Inspectorate on any of the council's registered services (adults or children), or on any registered service purchased by the council on behalf of service users or delivered within West Lothian to vulnerable clients.

Human resources: the CSWO needs to be aware of any matters which may impinge on 'Safer Recruitment' practices within the council. The CSWO will be involved in all instances where referral of a staff member to the Scottish Social Services Council on conduct issues is being considered; or where referral of a member of staff to the Central Barring Unit (Protection of Vulnerable Groups legislation) or the Disqualified from Working with Children List is being considered.

Senior meetings within the council or with partner agencies the CSWO is a member of the:

- Corporate Management Team
- Modernisation Board
- West Lothian Health and Social Care Partnership Senior Management Team
- Social Policy Senior Management Team
- West Lothian Integration Joint Board
- West Lothian Integration Strategic Planning Group
- Community Safety Strategic Group
- Children and Families Strategic Planning Group
- Community Justice Authority Board
- Protection of Vulnerable Groups (PVG) Referral Panel
- Chief Officers Group
- Public Protection Committee
- Reducing Reoffending Committee
- Edinburgh, Lothian and Scottish Borders Strategic Oversight Group

The CSWO also attends:

- Full Council Meetings as required
- Council Executive Meetings as required
- Council Executive Management Team as required
- Social Policy, Policy Development and Scrutiny Panel
- Health and Care Policy Development and Scrutiny Panel

There are three types of specific reporting:

1. Regular, planned reports relating to statutory decision making.
2. Regular, planned reports relating to performance, outcomes and trends.
3. Critical incident reports, where the CSWO will need to know of events so that appropriate decisions can be made, action taken, and where necessary, information relayed to other bodies.

### **Planned Reports: Statutory Decision Making**

Delegated statutory decision making: the CSWO must monitor the statutory decision making, which has been delegated to managers across the Council. This will be achieved in two ways:

1. By regular summaries of the activity; and
2. By sampling of a number of cases on an agreed and regular basis.

The main areas for monitoring are listed below. There are some less frequent statutory decisions, which are delegated and these will be discussed with the relevant managers in order for a mutually agreeable system to be developed.

Complaints: the CSWO receives regular reports on Social work complaints, the outcomes and actions taken as a result if the complaint is upheld.

Secure accommodation authorisations: a three monthly report will be provided to the CSWO by the relevant manager, summarising the decisions made in that period and indicating the reasons for the decisions.

Emergency movement of children subject to a supervision requirement: a quarterly summarised report will be submitted.

Adoption and fostering: the CSWO retains an oversight of decisions through delegated authority to the senior managers for Children & Families.

Mental Health Officer decisions: the relevant managers will submit quarterly reports to the CSWO, summarising the decisions made in that period.

Adults with Incapacity Act decisions: the relevant managers will submit quarterly reports to the CSWO, summarising the decisions made in that period.

Multi-Agency Public Protection Arrangements (MAPPA): the relevant managers will submit quarterly reports to the CSWO in relation to all high and very high risk offenders; the CSWO is required to attend MAPPA Level 3 case conferences.

### **Planned Reports: Performance, Outcomes and Trends**

There are performance reporting arrangements in place across the council, covering a wide range of services and activities. In addition, a range of standards, auditing arrangements and performance management requirements have been developed to monitor and promote best practice. Reports on these will be considered regularly by the CSWO as Head of Service or delegated manager. Pending the finalisation of these, the CSWO or delegated manager will consider the following:

- Unallocated cases: a monthly summary report on unallocated cases in both children's and adult services. This will include sampling of cases, as necessary.
- Non-implementation of children's hearings decisions: as for unallocated statutory cases.
- Non-compliance with other statutory requirements (adults and children): as above. Operational management responsibility for social work service delivery (with the exception of criminal justice services) rests with relevant managers in Community Care and Children and Families, and all of the above is their routine management responsibility.

These arrangements are not intended to create additional performance information, but to allow the CSWO to review information that is routinely used by operational managers.

### **Critical Incident Reporting**

These reports are required so that the CSWO can make a judgment as to whether additional measures need to be put in place, and whether outside agencies need to be informed. This is intended to be a helpful process, by which the CSWO can offer advice and support to lessen the impact of serious incidents, both on the council as a whole and on individual staff at a stressful time.

- The CSWO must be informed at the earliest possible time of the death of, or serious harm to, a child looked after by the council; on the Child Protection Register; receiving a service from the council; or referred for a service, but awaiting allocation. This will take the form of a written report detailing the facts of the incident and the actions put in place.
- The CSWO must be informed of the death of, or serious harm to, an adult subject to a statutory order under the mental health legislation; in residential or supported accommodation, whether provided or purchased by the council; receiving a service; or referred for a service, but awaiting allocation. This will take the form of a brief report detailing the facts of the incident and the actions put in place.

- The CSWO must be informed of any potentially adverse media attention to social work services. A verbal report from the communications team is required at the earliest opportunity.
- The CSWO must be informed of serious adverse staffing matters, such as the suspension of a member of staff, which may attract media interest or where the continued running of a service is under threat. This will take the form of a verbal report from the senior manager responsible for the service.

### **Significant Occurrence Notification**

Both Community Care and Children and Families operate a significant occurrence notification procedure. All of the above incidents would result in a notification under these procedures, however, there will be other examples covered by the procedures. For consistency, the CSWO should be copied in to all significant occurrence notifications.

### **Corporate Governance**

West Lothian Council, has adopted the Charter Institute of Public Finance and Accounting (CIPFA)/ Society of Local Authority Chief Executives (SOLACE) framework and has developed a Code of Corporate Governance in which each principle has a number of specific requirements which have to be met for the council to show that it complies with the Code, and for each of those requirements a responsible officer in the council has been identified.

In West Lothian it is recognised that good governance is not merely an auditing requirement; it is crucial for effective public services and achieving the social outcomes which are the council's objective.

### **Customer Engagement**

Social Policy actively engages customers and potential customers in the delivery and redesign of services to ensure that these are accessible and focused on their needs and preferences.

### **Children's Services**

<b>Customer Group</b>	<b>Survey Method</b>	<b>Frequency</b>
<b>Service Users</b>	Survey	Annual
<b>Service Users</b>	Consultative Forums	Quarterly (carers) Monthly (LAC)
<b>Partners/key stakeholders</b>	Early Years event	Annual
<b>Having Your Say</b>	Looked After Children's forum	Monthly
<b>Service Users</b>	Viewpoint	Monthly

### Community Care

Customer Group	Method	Frequency
All Disability Groups	Disability Equality Forum	Quarterly
Older People Service Users	Survey	Annual
	Seniors Forum	Quarterly
Learning Disability Service Users	Survey	Annual
	Learning Disability Service Users Forum	Quarterly
Physical Disability Service Users	Survey	Annual
	Physical Disability Service Users Forum	Quarterly
Adult Protection Service Users	Safe and Sound Adult Protection Forum	Quarterly
Mental Health Service Users	Survey	Annual
	Mental Health Service Users Forum	Quarterly

### Criminal Justice and Youth Justice

Customer Group	Survey Method	Frequency
Service Users	Survey	Annual
Partners/key stakeholders	Survey	Annual
Unpaid Work Recipients satisfaction feedback	Survey	Ongoing but reported/collated annually
Unpaid Work Consultation	Focus group	Annual



### 3. Social Services Delivery Landscape

West Lothian is in Central Scotland, has a population of about 180,130 (National Records of Scotland 2016 mid-year estimate), accounting for 3.3% of Scotland's total population. It covers an area of 165 square miles, two thirds of which are predominantly used for agriculture and a tenth of the area is taken up by urban development.

In the east-central band there is a large shale oil field, whilst the area in the west is dominated by Scotland's central coalfield. Both of these natural resources were greatly exploited in the 19th and early 20th centuries and contributed to the development of a number of West Lothian's communities. The rapid development of these 'boom' communities meant the loss of these industries was felt heavily, and this legacy has resulted in some small but prominent concentrations of deprivation.

West Lothian has undergone significant change over the last ten years in demography, physical environment and its economy. These changes have presented opportunities and challenges for West Lothian's communities and the organisations that deliver services in the area.

West Lothian has been one of the fastest growing parts of Scotland and is predicted to continue this trend. By 2039 the population of West Lothian is projected to be 192,523, an increase of 8.6% compared to the 2014 population. The population aged under 16 in West Lothian is also projected to increase by 7.7% over the 25 year period, however the biggest area of growth is in the older population, it is projected that between 2012 and 2037 West Lothian will see an 89.9% increase in the over 65 population with an increase of 140.2% in the population aged over 75. Historically population growth has been greatest in Armadale, Bathgate, Broxburn and Livingston, with population decline evident in Polbeth and Whitburn and some of the smaller villages; future population growth will be concentrated in the core development areas.

#### Inequalities

- West Lothian has 239 datazones, 16 of which fall within the worst 15% of the Scottish Index of Multiple Deprivation
- The most recent child poverty statistics show that 22.8% of children in West Lothian are living in poverty
- 24% of children in West Lothian live in low income working households, compared to 25% for Scotland and GB
- An estimated 17.6% of West Lothian working residents earn below the Living Wage.
- Approximately 8,100 West Lothian working households receive Working Tax Credit
- Youth unemployment in West Lothian stands at 4.2%, which is greater than the Scotland rate (3.7%) and the Great Britain rate of 2.9% (At 31<sup>st</sup> March 2017)

### **Impact of the Economic Downturn**

Prior to the economic downturn, the percentage of West Lothian households that were in poverty was relatively stable, however in the last few years this has begun to change. This is a trend that is evident at both a local and national level. Recent analysis of the income domain of the Scottish Index of Multiple Deprivation (SIMD) indicates that there has been an increase in income and employment deprivation in the most deprived SIMD zones in West Lothian. The continuing economic downturn and political changes, mainly around welfare reform, have increased employment deprivation, financial hardship and homelessness, particularly in already deprived areas where there is less resilience. This has served to increase the inequality gap in West Lothian, Scotland and the UK.

### **Commissioning**

Building on the experience of the former Community Health and Care Partnership a strategic approach has been taken to commissioning and there is commitment to working with partners to:

- Commission services which focus on prevention and early intervention
- Empower people to live independently through applying the principles of personalisation in the way in which we commission services.
- Undertake appropriate consultation and involvement with service users and their carers to achieve their agreed outcomes when commissioning services.
- Engage positively with providers of health and social care services in the public, voluntary and private sector.
- Adhere to relevant procurement legislation and guidance and ensure that services are commissioned in a way that is fair, transparent and open;
- Ensure that quality, equality and best value principles are embedded through our commissioning processes.

Commissioning is an ongoing and evolving process and our approach is based on an annual Analyse, Plan, Do and Review cycle

### **Strategic Commissioning Plans**

The Public Bodies (Joint Working)(Scotland) Act 2014 placed a duty on Integration Authorities to develop a 'strategic plan' for integrated functions and budgets under their control. In compliance with this requirement strategic commissioning plans have been developed for all adult care groups. These strategic commissioning plans incorporate the important role of informal, community capacity building and asset based approaches, to deliver more effective preventative and anticipatory interventions, in order to optimise wellbeing and the potential to reduce unnecessary demand at the 'front door' of the formal health and social care system.

Strategic Commissioning Plans are in place for:

- Substance Misuse Services
- Adults with Learning Disabilities
- Adults with Physical Disabilities
- Mental Health
- Older People.

### **Contract Monitoring**

Contract monitoring and review is a fundamental function in the commissioning of social care services. It is required to evidence best value to the council and its regulators as well as ensuring the delivery of outcomes for vulnerable people living in West Lothian.

A comprehensive Contract Monitoring Framework is in place to provide a consistent approach to the monitoring of externally purchased care and support services. It is recognised that due to the impact on the quality of life, health and wellbeing of services users and their carers, the procurement of care and support service requires specialist consideration in order to ensure a focus on outcomes. The framework incorporates best practise for the monitoring and review of social care contracts.

### **Services for Children and Young People**

Part 3 of the Children and Young People (Scotland) Act 2014 places a duty on Public Bodies to ensure that the local planning and delivery of services is:

- integrated,
- focused on securing quality and value through preventative approaches and
- dedicated to safeguarding, supporting and promoting child wellbeing.

In West Lothian we recognise that investment in our children and young people is one of the most valuable long-term investments that can be made. By investing shared resources in the delivery and development of services focused on prevention and early intervention we can ensure that children's needs are met at the earliest opportunity and are supported to achieve their potential. Partners in West Lothian have worked together to develop the West Lothian Children's Services Plan 2017-2020. This plan outlines the work of the West Lothian Children and Families Strategic Planning Group and follows an outcome based approach to planning as led by the West Lothian Community Planning Partnership.

The development of the Children's Services Plan and also the Corporate Parenting Report and Plan 2017- 18 marks the start of a comprehensive review of partnership service planning and delivery for children's services which will result in further refinement to the plans and the development of a strategic commissioning plan for children's services.

The strategic commissioning plan for children's services will follow the same approach as that taken for the commissioning plans for adult care groups and will be underpinned by:

- Survey data collected as a result of engagement in the Scottish's Government's Realigning Children's Service Programme
- Strategic Needs Assessments focused on:
  - Early Intervention and Prevention and
  - Looked After Children and Young People
  - Community Justice

The Joint Inspection of Children's Services Report published in August 2017.

## 4. Finance

The total net expenditure for Social Policy in 2016/2017 was £95,644,000. Within West Lothian there is a growing population which brings demographic pressures. This is particularly true in Older People services.

### Areas of pressure include:

- External Placement for Looked After Children
- Kinship Care
- Care at Home for Adults – Particularly Specialist Care for Learning Disability
- Care at Home for Older People has also seen significant growth.
- Residential Care for Older People.

In common with Social Services across Scotland the council is operating within the constraints of Public Sector funding and as such is required to deliver savings on an annual basis.

### Savings

Social Policy delivered £2,251,000 of savings in 2016/17. The council continues with its ambitious project management approach to ensuring a break even budget is achieved at the end of each financial year. Plans have been developed to make further efficiencies over the course of 2017/18 these have been subjected to public consultation and political and will be progressed to ensure that the council continues to deliver a balanced budget position.

Through the Life stages approach the council has been in the vanguard of changing the focus from crisis management to prevention. Through implementation of the Health and Social Care Change Fund and the Early Years/ Early Intervention Change Fund the council in partnership with Community Planning partners is now well advanced in applying this approach to service design across the whole of Social Policy with a continuing focus on prevention, including building capacity within communities to help people maintain their independence wherever possible. The Community Empowerment (Scotland) Act 2015 required Community Planning Partnerships (CPP) to prepare and publish a local outcomes improvement plan (LOIP), setting out the local outcomes the CPP will prioritise. The West Lothian CPP Board agreed that what was the Single Outcome Agreement met the requirements outlined in the Act and, as such, agreed to adopt this as its Local Outcomes Improvement Plan ([West Lothian Local Outcomes Improvement Plan 2013-2023](#)).

## 5. Service Quality and Performance including delivery of statutory functions

Performance during the year is monitored and reported using the council's performance management system, Covalent. The Social Policy Management Plan outlines how services contribute to delivering these outcomes. There is alignment between Management Plans, Activity Budgets and services, providing a link between resources, performance targets and outcomes.

This information is reported annually to the Social Policy, Policy Development and Scrutiny Panel.

The service performance is monitored on a monthly basis by the Head of Social Policy at the Senior Management Team meeting.

### **Social Policy Management Plan 2017 – 2018**

The Social Policy Management Plan is the key document that details the strategic direction for service delivery, plans to improve outcomes and services. The Management Plan does not stand alone but is part of a wider planning and service development approach that has involved both the production of 3 year Service Statements covering all services within Social Policy and wider Joint Plans with a range of partners including:

- Integrated Children's Services Plan
- Joint Learning Disability Strategy
- Reducing Reoffending Strategic Plan
- Joint Physical and Complex Disability Strategy
- Joint Mental Health Plan
- West Lothian Integration Scheme
- Integration Joint Board Strategic Commissioning Plan

Social Policy also contributes to, and as a service is aware of, the benefits of the wider Community Planning process especially where there is a focus on the needs of vulnerable or disadvantaged people. In developing this Management Plan the need to ensure consistency with Single Outcome Agreement objectives continues to be a focus.

The [Social Policy Management Plan 2017-18](#) details priorities for 2017/18 and the key actions that the service will take to address these.

Social Policy continues to make a significant contribution to the preventative agenda by the work being taken forward by the West Lothian Community Planning Partnership (CPP). The service continues to seek areas and opportunities to move resources upstream or to identify existing service gaps that if measures were put in place would lead to improved outcomes and reduce social inequalities across West Lothian.

## Regulation, Inspection and Improvement Activity Inspection of Registered Services

During the inspection year 2016/2017, all of West Lothian Council's services received the minimum level of inspection:

### ■ Children and Families

The quality inspection reports from the Care Inspectorate of Services for Children and Young People show that of all areas assessed 100% were awarded Grades of '4 Good' or above.

	QUALITY OF CARE & SUPPORT	QUALITY OF ENVIRONMENT	QUALITY OF STAFFING	QUALITY OF MANAGEMENT AND LEADERSHIP
<b>WHITRIGG</b>				
<b>JULY 2016</b>	5 VERY GOOD	NOT ASSESSED	5 VERY GOOD	NOT ASSESSED
<b>TORCROFT HOUSE</b>				
<b>MAY 2016</b>	5 VERY GOOD	NOT ASSESSED	NOT ASSESSED	4 GOOD
<b>LETHAM HOUSE</b>				
<b>MAY 2016</b>	4 GOOD	NOT ASSESSED	4 GOOD	NOT ASSESSED
<b>WHITDALE FAMILY CENTRE</b>				
No inspection during the period				
<b>ADOPTION SERVICES</b>				
<b>DECEMBER 2016</b>	5 VERY GOOD	NOT ASSESSED	4 GOOD	NOT ASSESSED
<b>FOSTERING SERVICES</b>				
<b>DECEMBER 2016</b>	5 VERY GOOD	NOT ASSESSED	4 GOOD	NOT ASSESSED
<b>THROUGH CARE AFTER CARE</b>				
<b>NOVEMBER 2016</b>	5 VERY GOOD	NOT ASSESSED	NOT ASSESSED	5 VERY GOOD
<b>LIVINGSTON FAMILY CENTRE</b>				
<b>DECEMBER 2016</b>	6 EXCELLENT	NOT ASSESSED	NOT ASSESSED	6 EXCELLENT

■ **Adults and Older People**

The quality inspection reports from the Care Inspectorate of Services for Adults and Older People show that of all areas assessed 100% were awarded Grades of '4 Good' or above with 56% being awarded 5 Very Good or 6 Excellent.

	QUALITY OF CARE & SUPPORT	QUALITY OF ENVIRONMENT	QUALITY OF STAFFING	QUALITY OF MANAGEMENT AND LEADERSHIP
<b>WHITDALE HOUSE</b>				
<b>NOVEMBER 2016</b>	4 GOOD	4 GOOD	NOT ASSESSED	NOT ASSESSED
<b>WHITDALE DAY CARE</b>				
No Inspection during the period				
<b>LIMECROFT CARE HOME</b>				
<b>AUGUST 2016</b>	4 GOOD	4 GOOD	NOT ASSESSED	NOT ASSESSED
<b>LIMECROFT DAY CARE</b>				
<b>MARCH 2015</b>	5 VERY GOOD	NOT ASSESSED	5 VERY GOOD	6 EXCELLENT
<b>BURNGRANGE</b>				
<b>SEPTEMBER 2016</b>	5 VERY GOOD	NOT ASSESSED	4 GOOD	NOT ASSESSED
<b>CRAIGMAIR</b>				
<b>DECEMBER 2016</b>	4 GOOD	4 GOOD	NOT ASSESSED	NOT ASSESSED
<b>BURNSIDE RESPITE</b>				
<b>JANUARY 2017</b>	5 VERY GOOD	NOT ASSESSED	4 GOOD	NOT ASSESSED
<b>DEANS HOUSE</b>				
No Inspection during the period				
<b>HOLMES GARDENS DAY RESOURCE</b>				
No Inspection during the period				
<b>HOUSING SUPPORT CARE AT HOME</b>				
No Inspection during the period				
<b>ADULT PLACEMENT SERVICE</b>				

<b>JANUARY 2017</b>	6 EXCELLENT	NOT ASSESSED	NOT ASSESSED	6 EXCELLENT
<b>PATHWAYS</b>				
No Inspection during the period				
<b>HOUSING WITH CARE</b>				
<b>JANUARY 2017</b>	5 VERY GOOD	NOT ASSESSED	5 VERY GOOD	NOT ASSESSED
<b>SUPPORT AT HOME SERVICE</b>				
<b>SEPTEMBER 2016</b>	5 VERY GOOD	NOT ASSESSED	NOT ASSESSED	NOT ASSESSED

Inspection reports are analysed and action plans to address any recommendations produced by the relevant service. These are routinely reported to elected members who have the opportunity to scrutinise progress.

Despite the above external scrutiny, responsibility for the quality of service delivery rests with the council and not with external scrutiny bodies. The council's social work services have a range of internal mechanisms to monitor the quality of provision and any improvement activity required. These include:

- Direct supervision of front-line practice by senior practitioners and team managers
- Individual reviews of care plans and packages by case managers
- Analysis of social work complaints
- Monitoring of service level agreement and contracts for the purchase of care
- Regular case file audits
- An annual programme of quality assurance, reviews of teams and services
- Routine performance monitoring
- Self-evaluation through Customer Service Excellence/ West Lothian Assessment Model
- Monthly Covalent Performance Reporting

### **Joint Inspection of Services for Children and Young People**

In 2016/17 services for children and young people in West Lothian were subject to inspection by the Care Inspectorate. The inspection focused on how well services in West Lothian were working together to make a positive difference to the lives of children, young people and their families.

In order to reach confident conclusions the inspection team undertook a range of activities to collect evidence, these activities included:

- the analysis of inspection findings of care services for children and young people and findings from relevant inspections carried out by other scrutiny bodies
- the review of national and local data relating to children and young people
- the review of self-evaluation work undertaken by the partnership, and the evidence that supported it



- reviewing a wide range of documents provided by the partnership
- conducting a survey of staff with named person and lead professional responsibilities
- meeting with children and young people, parents and carers in order to hear from them about their experiences of services and what difference they think the support they have received is making
- speaking with staff at all levels across the partnership, including senior officers and elected members and large numbers of staff who work directly with children, young people and families
- reviewing practice through reading records held by services for a sample of the most vulnerable children and young people and
- observing key interagency meetings.

As part of the inspection process the planning and delivery of services for children and young people were evaluated against nine quality indicators, the results of the evaluations are detailed below.

How well are the lives of children and young people improving?	
Improvements in the wellbeing of children and young people	Very Good
Impact on children and young people	Good
Impact on families	Good
How well are partners working together to improve the lives of children, young people and their families?	
Providing help and support at an early stage	Good
Assessing and responding to risks and needs	Adequate
Planning for individual children and young people	Good
Planning and improving services	Good
Participation of children, young people, families and other stakeholder	Very Good
How good is the leadership and direction of services for children and young people?	
Leadership of improvement and change	Very Good

**Scale:**

Excellent	Outstanding, sector leading
Very Good	Major strengths
Good	Important strengths with some areas for improvement
Adequate	Strengths just outweigh weaknesses
Weak	Important weaknesses
Unsatisfactory	Major weaknesses

The Inspection Team highlighted a number of strengths, in particular:

- a coherent shared vision to tackle inequalities, supported by a range of approaches and a commitment by partners to realign resources in order to achieve this;
- robust performance monitoring, management and reporting processes
- effective community planning arrangements, supported by strong leadership and robust governance across strategic groups
- innovative and effective early intervention and prevention programmes and services
- meaningful consultation, collaboration and inclusion of children and young people in policy and service development.

It was recommended that partners in West Lothian should ensure that:

- quality assurance processes led to sustained improvement in the quality of assessments, children's plans and integrated chronologies
- staff understand and implement the processes for initiating, undertaking and recording inter-agency referral discussions and that a single quality assurance process is agreed and applied
- child sexual exploitation policy is reviewed and updated and practice is improved to ensure that vulnerable young people are kept safe
- sustained improvements are made to educational attainment of looked after children and outcomes for care leavers.

An Improvement Plan is now being developed to address the areas highlighted in the Inspection Report.

### **Delivery of Statutory Functions**

The council's scheme of delegation allows senior social work staff to make certain decisions on behalf of the local authority in the following areas:

- Mental health
- Adoption
- Secure accommodation and emergency placement of children
- Protection and Risk Management:
  - Child Protection
  - Adult Protection
  - MAPPA

Details of the annual monitoring in these areas are included in the subsequent paragraphs.

#### **Mental Health**

Section 32 of the Mental Health Care & Treatment (Scotland) Act 2003 places a statutory duty upon local authorities to appoint a sufficient number of Mental Health Officers (MHO) within their area to discharge the functions of Mental Health Officers under the:

- Mental Health Care & Treatment (Scotland) Act 2003

- Criminal Procedures (Scotland) Act 1995
- Adults with Incapacity (Scotland) Act 2000

The additional and more recent Adult Support and Protection (Scotland) Act 2007 has also brought significant additional duties and responsibilities for all council staff including MHOs

A duty Mental Health Officer is available 24 hours a day across the whole council area; MHOs undertake the full remit of work under the Mental Health Care and Treatment (Scotland) Act 2003.

Part of the work and responsibility of a Mental Health Officer is work emanating from the Adults with Incapacity (Scotland) Act 2000. Under the Act the council has a protective function towards those adults who lack capacity. The largest area of work for MHOs under the 2000 Act falls within Part 6 of the Act namely Intervention Orders and Guardianship Orders.

Since the introduction of the 2000 Act the trend in Guardianships has changed significantly and the number of applications granted by the Sheriff Courts continue to rise year on year. With the predicted rise in population, and particularly for the over 75 age group, the increase in applications before the Courts is expected to grow.

The following table indicates assessments undertaken under the Adults with Incapacity (Scotland) Act 2000

	2014/15	2015/16	2016/17
New Guardianships granted	(Private) 40 (local authority) 9	(Private) 40 (local authority) 9	(Private) 50 (local authority) 20
<b>total</b>	49	49	70
Existing Guardianships	(Private) 197 (local authority) 43	(Private) 235 (local authority) 48	(Private) 215 (local authority) 52
<b>total</b>	240	283	267
New Intervention Orders	(Private) 2 (local authority) 2	(Private) 3 (local authority) 1	(Private) 1 (local authority) 4
<b>total</b>	4	4	5
Power of Attorneys granted	1311	1418	1307

The following table indicates assessments undertaken under the Mental Health (Care & Treatment) (Scotland) Act 2003

	2014/15	2015/16	2016/17
Emergency Detention Certificates – Sec 36	62	66	75
Short term Detention Certificates – Sec 44	158	156	166

Compulsory Treatment Orders (new applications)	33	44	57
Assessments (Sect 86, 92, 95)	325	335	338

### **Adoption**

This legal process breaks the tie between a child and his/her birth family and recreates it with adoptive parents. The table below details the children registered for adoption or permanent fostering and those who have been matched with adopters.

	2015/16	2016/17
Children registered for adoption	7	5
Children registered for permanent fostering	9	14
Children matched with adopters	6	9

West Lothian's performance in relation to timely reviews, decisions on permanence and efficient implementation of these decisions is a key priority for services within Children and Families. An Achieving Early Permanence Monitoring and Review Group is in place with the aim of identifying barriers to achieving early permanence for looked after and accommodated children either through a timely return home or through identifying alternative legal routes. The information gathered from case reviews is used to improve services and to better support staff. The group also monitors the process of achieving permanence legal orders for the children who have been registered at Panel.

### **Secure Accommodation of Children**

In very limited circumstances, when children are considered to present a serious risk of harm, either to themselves or to others, the Chief Social Work Officer may authorise their detention in secure accommodation. These decisions must be confirmed by a Children's Hearing and must be kept under close review. Courts also have the power to order the detention of children in secure accommodation.

Emergency placement of children is subject to statutory provisions: Children's Hearings may impose conditions of residence on children subject to supervision requirements. Only a Children's Hearing may vary such conditions. The local authority must ensure that these conditions are implemented. If a child who is required to reside at a specified place must be moved in an emergency, the Chief Social Work Officer may authorise the move, following which the case must be referred to a Children's Hearing.

The total number of Children Looked After in West Lothian at 31/03/2016 and 31/03/2017 by statute and length of time under statute is detailed in the table below:

Statute	Age (years)											
	Under 1		1 - 4		5-11		12-15		16 +		Total	
	As at 31 March 2016	As at 31 March 2017	As at 31 March 2016	As at 31 March 2017	As at 31 March 2016	As at 31 March 2017	As at 31 March 2016	As at 31 March 2017	As at 31 March 2016	As at 31 March 2017	As at 31 March 2016	As at 31 March 2017
Supervision Requirement at Home	2	2	25	23	43	42	45	46	4	6	119	119
Supervision Requirement away from Home (excluding a Residential Establishment)	17	19	71	70	110	126	66	82	17	24	281	321
Supervision Requirement away from Home (in a Residential Establishment but excluding Secure)	0	0	0	0	4	7	35	32	6	13	45	52
Supervision Requirement away from Home with a Secure Condition	0	0	0	0	0	0	1	0	0	2	1	2
Total	19	21	96	93	157	175	147	160	27	45	446	494

## Protection and Risk Management

The assessment and management of risk posed to individual children, adults at risk of harm and the wider community are part of the core functions of social work.

The effective management of risk depends on a number of factors, including:

- Qualified, trained and supported staff, with effective professional supervision
- Clear policies and procedures and use of agreed or accredited assessment tools and processes
- Consistency of standards and thresholds across teams, service and organisational boundaries
- Effective recording and information sharing
- Good quality performance management data to inform resource allocation and service improvement
- Multi-disciplinary and inter-agency trust and collaboration.

Reflecting the importance of joint working, the following multi-agency mechanisms are well established in West Lothian:

- West Lothian Chief Officers Group
- West Lothian Public Protection Committee
- Reducing Reoffending Committee

The Chief Social Work Officer is a member of each of the above committees. Membership of the Chief Officer's Group allows the Chief Social Work Officer to have an overview of related risk management activity, both within the council and across agency boundaries.

Each of the areas of Public Protection has a performance framework in place with regular reporting to the Public Protection Committee, Chief Officers Group and Community Planning Strategic Group.

The Chief Social Work Officer also chairs Critical Review Team meetings. Critical Review Teams are multi-agency teams of people of required seniority who meet as and when required to offer direction and guidance in complex cases (for those aged 15+).

A summary of the volume of protection related activity is detailed below:

#### **Children at risk**

	<b>2014/15</b>	<b>2015/16</b>	<b>2016/17</b>
Child protection referrals	573	427	461
Joint Investigations	265	137	168
Initial Child Protection Case Conferences	133	77	108
Inter-agency Referral Discussions	529	535	665
	<b>2014/15</b>	<b>2015/16</b>	<b>2016/17</b>
Children on Child Protection Register	126	104	72
Children looked after at home	128	115	119
Children looked after away from home	308	336	375

The Quality Assurance and Self- Evaluation Sub Committee is currently undertaking an audit of those cases subject to an Initial Child Protection Case Conference that did not result in the child being placed on the Child Protection Register.

#### **Domestic Abuse**

West Lothian Domestic and Sexual Assault Team (DASAT) offers a unique framework of integrated services, housed within local government, responding to both domestic abuse and sexual assault.

- **The Court Advocacy Service**

The Court Advocacy Service works closely with the Procurator Fiscal's Officer to deliver a high quality service victims of domestic abuse involved in the court process. The service received 841 referrals during 2016-2017. Evaluations from service users informed us that 99% felt safer due to court advocacy intervention.

■ **Living in Safe Accommodation (LISA)**

The LISA service aims to keep women and children safe in their own homes and provide multiple housing options to support women.

In 2016/17 the LISA project supported 129 women. In 40% of the cases, the project has supported women to remain in their own homes and prevented them from preventing women from moving into temporary accommodation. This is an increase from 2015/16 when 30% of women were support to remain within the family home.

■ **West Lothian CEDAR Project**

This project is based on the national CEDAR programme principles designed to address the serious childhood adversity created by domestic abuse, and mainstreamed and delivered by the Domestic and Sexual Assault Team (DASAT) in conjunction with the Children and Young Peoples Team (CYPT). There are 26 staff members from across West Lothian Council who are trained to deliver the CEDAR Project.

In 2016-17, West Lothian CEDAR delivered 2 programmes consisting of 4 children's groups supporting 26 children and 2 women's groups supporting 20 women, all reporting significant qualitative outcomes for their families, such as improvements in their child's:

- Relationship with their parents
- Ability to understand and express feelings
- Ability to express anger in a healthy way
- Understanding of family situation
- Self esteem

In 2016/2017 a specialist CEDAR programme for teenage girls was piloted offering both the recovery model and targeted preventative work in relation to positive choices and keeping safe.

**Adults at Risk**

	2014/15	2015/16	2016/17
Adult Protection referrals	297	411	436
Inter-agency Referral discussions (IRDs)	184	119	76
Adult Protection Case Conferences (this includes Adult Protection Case Conference Reviews)	74	79	89

There has been a year on year increase in the number of Adult Protection referrals recorded due to the action taken by Social Policy managers and operational staff to consistently record Adult Protection concerns /Adult Protection referrals prior to screening each one. This is positive and better reflects the 'front end' of Adult Protection activity.

In contrast the number of IRDs held reduced from this and last year. It is thought this may be reflective of proportionate multi-agency decision making at Investigation Stage on how best to proceed with each case. A commitment and investment has been made by each core agency to move to a new Pan-Lothian E-IRD system by December 2017 in recognition of the limitations of the current E-care IRD database.

Of those IRDs held in 2016/2017, 26 cases proceeded to an Adult Protection Case Conference. More than one Adult Protection Case Conference Review was held for some of these cases. The number of Adult Protection Case Conference Reviews held and the frequency of these meetings being held is proportionate to providing adequate support and protection to each adult at risk.

#### Offenders in the Community subject to Statutory Supervision at 31 March 2016

	At 31 March 2015			At 31 March 2016			At 31 March 2016		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Community Payback Orders with a requirement for supervision	339	37	376	286	40	326	295	56	351
Community Payback Orders with a requirement for unpaid work	380	38	418	316	39	355	311	51	362
Drug treatment and testing orders	17	3	20	8	2	10	20	4	24
Number of individuals subject to Statutory Through Care	152	5	157	161	3	164	174	3	177

The figures detail new order that have been put in place during the period April 2016 to March 2017 and does not reflect existing orders that can be in place for up to 3 years.

The management of dangerous sexual and violent offenders in the community is one of the highest priorities for criminal justice social work and police working together. Housing and health services also play a significant role in the detailed multi-agency procedures, which are followed in West Lothian. This activity requires to be reported to Scottish Ministers.

When subject to statutory supervision on release from prison, such offenders require to comply with any conditions attached to their release. They are subject to as close monitoring and control by social work, police and health as legal circumstances allow. If the offender breaches the conditions of release, or re-offends, they may be subject to a recall to prison, either by Scottish Ministers or the Parole Board.

Multi-Agency Public Protection Arrangements (MAPPA) are defined in legislation and national guidance and currently apply to the management of all registered sex offenders. These arrangements are well established in West Lothian with the number of MAPPA cases assessed as high or very high risk during the period April 2016– March 2017 being 6. This represents a 35% decrease on the previous year but is still an increase in relation to figures for 2014-2015 when 2 cases were assessed as high or very high risk.



## **Improvement and Performance Activity**

### **Contract Monitoring**

Contract monitoring and review is a fundamental function in the commissioning of social care services. It is required to evidence best value to the council and its regulators as well as ensuring the delivery of outcomes for vulnerable people living in West Lothian.

The purpose of this Contract Monitoring Framework is to provide a consistent approach to the monitoring of externally purchased care and support services across Social Policy. It is recognised that due to the impact on the quality of life, health and wellbeing of services users and their carers, the procurement of care and support service requires specialist consideration in order to ensure a focus on outcomes.

The contract monitoring framework aims to ensure that service users receive the highest quality of service, which demonstrates value for money, meets contractual standards and is continuously improved.

### **West Lothian Assessment Model**

The West Lothian Assessment Model is the council's self-assessment framework which helps services to ensure that they provide good quality and improving services to the people and local communities in West Lothian.

West Lothian Council recognises that there is always a way to make better and more efficient services for the people we serve, balancing quality of service provision with value for money. As a result of this commitment, our services are some of the highest performing in Scotland.

The West Lothian Assessment Model (WLAM) helps the council to do this by providing a consistent and challenging set of questions or statements that services will use to identify their strengths and weaknesses and importantly, it also provides a structure for improvement.

Services are assessed using evidence, performance information and feedback from customers, partners, stakeholders and staff, to answer a set of questions or statements, in order to identify:

- Where the problems in the service are
- How customers, employees, partners and stakeholders feel about the service
- How the service performs and how this performance compares to others
- Where things can be improved

Self-assessment is an important part of the council's improvement strategy, as it encourages innovation from within and involves our strongest asset in the process, our people.

Social Policy has 3 WLAM Units within the service, Children and Families, Community Care and Criminal and Youth Justice. All of the Social Policy WLAM units have demonstrated an improvement after each cycle of assessment as highlighted by the increase in WLAM score across the service.

## WLAM Scores

WLAM Unit	Cycle	WLAM Score	Change
Children and Families	2011/13	395	+87
	2014/17	482	
Community Care Services	2011/13	367	+89
	2014/17	456	
Criminal and Youth Justice	2011/13	463	+25
	2014/17	488	

### Investor in People (IIP)

West Lothian Council has been recognised as an Investor in People (IIP) since 2001. Recognition is reviewed every three years to ensure that the council continues to meet the standard and also to assess current practice against the broader IIP framework, which has three levels of recognition (bronze, silver and gold).

Following the IIP review concluded in 2014 West Lothian Council successfully achieved Investors in People Gold. This was in the context that only 2% of all organisations with IIP recognition had achieved IIP Gold. This was a significant milestone for the council and a testament to the council's strong leadership, positive culture and our dedicated employees.

In 2015 West Lothian Council was the first local authority in the UK to achieve Investors in Young People in 2015 and did so at Gold level.

### Customer Service Excellence (CSE)

The Customer Service Excellence (CSE) standard tests those areas that are a priority for customers, with particular focus on delivery, timeliness, information, professionalism and staff attitude. There is also emphasis placed on developing customer insight, understanding the user's experience and robust measurement of service satisfaction.

Customer Service Excellence is designed to operate on three distinct levels as:

- A driver of continuous improvement
- A skills development tool
- An independent validation of achievement

In 2016 West Lothian Council retained the Corporate Customer Service Excellence (CSE) Standard. The CSE assessment report provided a positive evaluation of the council's approach to customer focused service delivery.

### European Foundation for Quality Management (EFQM)

The European Foundation for Quality Management (EFQM) excellence model is a quality model designed to help organisations recognise areas of strength and identify recommendations for improvement and is used by organisations across Europe.

The Recognised for Excellence scheme awards those organisations achieving over 300 points (out of 1,000) in an EFQM assessment and has three levels of recognition, 3, 4 and 5 star. Quality Scotland administers the recognition scheme in Scotland and the national EFQM affiliate. As well as the 3 to 5 star recognition, the highest scoring organisation of the year is awarded the Scottish Award for Business Excellence.

■ **West Lothian Council**

The council has previously won the award in 2009/10 after achieving the highest overall score in Scotland and remains the only council to have won the award corporately.

In March 2016 council underwent EFQM assessment and was awarded EFQM Recognised for Excellence 5 Star on the basis of a score within the banding of 550 to 600 points.

This was the only 5 Star award in 2016 and consequently the highest score in Scotland, and as such the council was also the overall winner of the Scottish Award for Business Excellence.

The council also achieved one of four Good Practice Awards; Leading with Vision, Inspiration and Integrity.

The key strengths that were highlighted by the EFQM assessment team included:

- Dedicated and achieving employees; the customer focus of council staff, their positivity and pride in what their services contribute to the West Lothian community was an area that the assessment team highlighted as a key organisational strength.
- Delivering for customers; the way that the council has developed a strong understanding of local community and different needs through a wide range of consultation and engagement approaches and how it has used this information to redesign and improve services were evident to the assessment team.
- Future strategy; effective and integrated corporate and financial planning offers a clear, sustainable strategy for the future and ensures that there is focus on the eight corporate priorities across the council and resources are aligned appropriately.
- Strong and effective governance; the council and partnership governance structures and scrutiny processes ensure that effective controls and robust scrutiny are in place to monitor performance and progress in the priorities and outcomes.

The EFQM award also demonstrates a continuing focus on business improvement and ensures that all areas of the council build on their strengths to attain even higher levels of excellence.

#### ■ **West Lothian Health and Social Care Partnership (HSCP)**

In 2016, the West Lothian Health and Social Care Partnership (HSCP) achieved Recognised for Excellence 3 Star Assessment. This is a first in Scotland for an organisation of its type.

The Ready for Excellence assessment feedback report will allow the partnership to focus on areas for improvement and development to support the further transformation of health and social care services.

### **Complaints**

Prior to the introduction of the new Social Work Model Complaints Handling Procedure in April 2017, complaints in 2016-17 fell into one of the following two categories:

#### ■ **Statutory Complaints**

A Statutory Complaint made in reference to any of the following issues as they relate to the discharge of social work service functions in respect of an individual client according to legislated power and duties:

- Failure to discharge such functions
- Delay in discharge of such function
- Failure to properly assess the needs of clients and their carers during the discharge of such functions
- Failure to give due consideration to the needs and wishes of individual clients and their carers when making decisions about service provision
- Failure to follow social work services procedure when making a decision or delivering a service in relation to an individual client
- Failure to give due consideration to social work service guidance when making a decision or delivering a service in relation to an individual client
- Providing a service that quantitatively or qualitatively fails to meet the reasonable expectations of a client
- Poor attitude and performance of staff in discharging their duties.
- Failure to properly investigate complaints, advise clients of their rights or respond within identified timescales in relation to complaints

#### ■ **Council Complaints**

- Any complaint made which did not fall into the category of a statutory complaint

The council's social work services are required by statute to report annually on statutory complaints received from service users, would-be service users, their carers and representatives.

### **2016/17 summary**

The council is committed to improving social work services to the people of West Lothian and recognises that complaints are an important source of customer feedback. The following table sets out the number of complaints received during the year.

Community Care	60	18 upheld, 17 partially upheld
Criminal Justice	6	2 upheld, 1 partially upheld
Children and Families	41	3 upheld, 17 partially upheld
Total	107	

### **Complaints Review Committees**

If a complainant was not satisfied with the service's response, s/he may have requested that the case be heard by a Complaints Review Committee.

The Social Work Complaints Review Committee, an advisory committee of the council, existed prior to April 2017 to examine, objectively and independently, facts presented by the complainant and social work services in relation to a complaint or the circumstances in which a complaint has been submitted.

This was an additional safeguard to ensure that the needs and wishes of the complainant were fairly considered and the complaints properly investigated.

Social Policy adopted the new Social Work Model Complaints Handling Procedure as of April 2017. This procedure is published on the council's website.

Processes are in place to ensure any learning from complaints which have been upheld is applied as appropriate.

### **User and Carer Empowerment**

Social Policy services continue to work in partnership with other agencies, service users and their carers to ensure that the support and care services provided are as person centred and flexible as possible. It is anticipated that an increasing number of people will seek control of their own care and support provision by accessing Direct Payments or other Self Directed Support options.

The Social Care (Self-directed Support) (Scotland) Act 2013; which came into effect on 1st April 2014, is a key building block of public service reform and is part of the nation Self-Directed Support Strategy 2010-2020. The key focus of the strategy is to empower people to have more say in the decisions that affect them both as individuals of social care services and as members of their communities.

Social Policy is committed to the principles of Self Directed Support and recognises that when people have more control over how they live their lives and any support they may require, they are likely to achieve better outcomes.

The recent Audit Scotland Self-directed Support 2017 progress report looked at the progress being made in implementing Self-directed Support and the findings reflect our experience

locally. In West Lothian we have made good progress but we recognise that there is still work to be done

Social Policy values the role that carers play within West Lothian and in particular how they enable the people they care for to enjoy a quality of life and independence that would otherwise not be possible. However, we recognise that without appropriate support there can be a cost to the carer in terms of their own health and well-being. In recognition of this, Social Policy and key partners are working together to identify how best the statutory and the voluntary sector could support carers in their caring role and ensure compliance with the requirements of the implementation of the Carers (Scotland) Act 2016.

## 6. Workforce Planning and Development

Workforce development needs to reflect both national and local objectives to ensure West Lothian's social service workforce remains fit for purpose in an ever changing landscape. There is a continuing need to equip staff with the knowledge and skills to be able to provide flexible and good quality services which adapt to changing demographic and service user needs. The increasing demand for services coupled with continuing financial restraints will require transformational change necessitating strong and adaptable leadership.

Ongoing development of the West Lothian Health & Social Care Partnership will drive workforce development to focus on integrated learning approaches to enable the best use of workforce development resources across the Partnership. These approaches will be informed by the new National Health & Social Care Standards Scotland which will be implemented in April 2018.

To ensure that the workforce is supported to continue to have the necessary skills and knowledge to meet these challenges, the Social Policy Learning & Quality Assurance Team will focus on work to deliver on the following key themes:

- Continued support to meet the Scottish Social Services Council's (SSSC) registration requirements which will encompass one of the largest services areas to date with the Support at Home Workforce registration which opens in October 2017
- collaborative working across the Council to ensure the best use of training resources to meet the Council's main objectives
- continued work to embed the Integrated Dementia Learning/Training Pathway which reflects the objectives outlined in the Scottish Government's latest Dementia Strategy 2017-20
- the continued development of a blended approach to learning with an extended e-learning menu which will include new modules for those working with individuals with Dementia and Social Work Complaints
- the continued development of the Social Policy Scottish Vocational Qualification (SVQ) Centre to continue to deliver new Professional Development Awards as they become available
- to support managers in identifying learning needs through the new Appraisal, Development and Review process to ensure that identified learning needs area addressed
- the targeting of our resources to ensure mandatory and necessary training is paramount alongside the ongoing development of our in-house learning provision

It is anticipated that the necessary service re-structure and re-design to meet the challenges faced by Social Policy, will require to be supported by responsive and innovative learning approaches alongside a focus on core business to re-fresh and continually develop practice which will include:

- Social Policy wide Induction programmes that will ensure a co-ordinated and supportive approach for Social Policy Managers
- Embedding personalised approaches
- Assessment and report writing

- Risk assessment, risk enablement and risk management
- Care & support planning
- Developing chronologies
- Post Graduate Certificate in Adult Protection
- Evidenced-based investigations
- Leadership & management training

The Learning & Quality Assurance Team will continue to support managers in the ongoing registration and re-registration of our workforce by undertaking a monitoring role to ensure our continued compliance with our regulatory body Scottish Social Services Council (SSSC).



## 7. The Challenge Ahead

The West Lothian population is changing. We have the highest percentage of children under 15 in Scotland at 18.9%. The population of under-15s is projected to increase by 7.7% between 2012 and 2037. We are seeing an increase in the numbers of children who are Looked After, and increase in the complexities of need across the children and families population and also for adults with disabilities, those with mental health problems, those with substance issues and those suffering domestic abuse. There is a growing demand to meet the needs of children who have suffered neglect and childhood trauma, and who have resultant behavioural issues.

We know that there is an increase in need in our older population with a projected increase in the over 65 population of 90% between 2012 and 2037, and a 140% increase in the over 75 population. Across the same time period, we will see a 4% decrease in the working age population and significantly, an 8% decrease in the age group providing most of the unpaid care in West Lothian. Compounding the issue, it is becoming increasingly clearer that public sector funding across Scotland will be constrained over the next five-year period.

Simply put, if we carry on delivering services in the same way, we will fail to meet basic demands within the available funding. The challenge ahead will be to transform the way that we deliver social work and social care services in a measured and robust fashion, ensuring that our service offer meets core needs in line with legislative duties, is fair and equitable and is delivered in partnership with other key stakeholders so as to ensure seamless and safe care to those with priority needs.

Within this agenda, there is the opportunity to modernise social care services in line with a change in customer expectation, shifting towards family and community based care, greater personalisation and choice, and increased use of technology ensuring that people can live in their own homes with less risk. This all requires a radical look at the function of social work services and how the skills, roles and responsibilities of our workforce are aligned to new models of delivery.

Meeting the challenges ahead will require transformational leadership and whole system innovation across Social Policy's management team. The role of the Chief Social Work Officer will be significant in embedding improvements into social work practice and leading on the transformation of culture, system and practice. The Chief Social Work Officer will continue to play a key role in ensuring the council priorities are met, and that the most vulnerable people of West Lothian are protected and empowered to live a safe and fulfilling life.



ELECTED MEMBER BRIEFING NOTE

# Chief Social Work Officer



# What is the purpose of the briefing note series?

The Improvement Service (IS) has developed an Elected Members Briefing Series to help elected members keep pace with key issues affecting local government.

Some briefing notes will be directly produced by IS staff but we will also make available material from as wide a range of public bodies, commentators and observers of public services as possible.

We will use the IS website and elected member e-bulletin to publicise and provide access to the briefing notes. All briefing notes in the series can be accessed at [www.improvementservice.org.uk/elected-member-guidance-and-briefings.html](http://www.improvementservice.org.uk/elected-member-guidance-and-briefings.html)

## About this briefing note

Elected members are a key group of influential individuals with whom chief social work officers want, and need, to work effectively together.

The purpose of this briefing note is:

1. To advise elected members of the role and functions of the chief social work officer.
2. To support partnership working between the chief social work officer and elected members.
3. To support the elected members to fulfil their duty under [Scottish Government guidance](#) to “satisfy themselves that the chief social work officer has appropriate access and influence at the most senior level and is supported to deliver the complex role described in this guidance”.
4. To support elected members to implement the recommendations and address the issues raised in the Audit Scotland report ‘[Social Work in Scotland](#)’ (2016).
5. To continue to promote an effective working relationship between elected members and chief social work officers.

# What is the issue and why does it matter?

Current delivery models for social work and social care services are not sustainable. The [Audit Scotland 2016](#) report states that “services are facing significant challenges, including financial pressures caused by a real time reduction in overall council spending, demographic changes and the cost of implementing new legislation and policies”. The report concludes that, if councils and integration authorities continue with the same methods of service delivery, additional spending of £510 – £667 million by 2020 will be required: a 16 – 21 % increase in funding.

Elected members are key decision-makers for social work and social care services on behalf of their constituents and will want to maintain a good understanding of, and effective scrutiny of, these services in order to ensure councils meet their statutory responsibilities, despite these pressures. Elected members must maintain oversight of social work and social care services regardless of local governance arrangements, for instance, through the frameworks of integration authorities or delegated services.

One of the most important ways of achieving this is through their working relationship with the council’s chief social work officer.

## Local Authorities

Elected members have specific legal responsibilities to ensure that their councils are well governed, deliver Best Value and adopt sustainable policies and practices. This includes seeking assurance about the quality and effectiveness of the commissioning, planning, delivery and evaluation of social work and social care services, a role undertaken in partnership with, and with support and challenge from and to, the chief social work officer.

The chief social work officer is a role required in each local authority by Statute and cannot be delegated to integration authorities or other agencies. The chief social work officer is accountable to elected members through local governance frameworks and is a role for which the council retains statutory responsibility.

The chief social work officer must be:

- a qualified social worker, registered with the Scottish Social Services Council
- designated as a ‘proper officer’ of the local authority
- of sufficient seniority and experience in both the operational and strategic management of social work services.

In practice, the role is usually held by a Director or Head of Service who often carries management responsibilities for a range of services, for example, adult social care, children’s services and/

or criminal justice services. The chief social work officer role is distinct from the post holder's operational management responsibilities.

It is important, therefore, that elected members are clear about the role and function of the chief social work officer, as distinct from the post holder's service management responsibilities.

## Integration Authorities

Elected members may wish to refer to the relevant [briefing note](#) for further information on their responsibilities in relation to the integration of health and social care.

The Public Bodies (Joint Working) (Scotland) Act 2014 provided for the delegation by the local authority of certain social work services to an integration authority. Each area has developed local arrangements in order to discharge this requirement. Irrespective of which services in the council or in the integration authority the chief social work officer may manage, the chief social work officer must be a non-voting member of the integration authority.

The role of chief social work officer is distinct from that of chief officer of the integration authority.

The chief social work officer undertakes the role across the full range of local authority social work functions, irrespective of the range of operational management responsibilities within their job description. For instance, the chief social work officer may be a Head of Children's Services where children's services are not delegated to the integration authority, or may be a Head of Adult Social Care where services for adults are delegated to the integration authority. In both scenarios, the chief social work officer role requires the chief social work officer to maintain a governance, quality and professional leadership role for all social work services, both in the integration authority and in the council.

The variation in arrangements across 32 local authorities has created a complex landscape for elected members and chief social work officers to navigate in seeking to ensure the oversight of social care and social work services.

## The Chief Social Work Officer's perspective

The role of chief social work officer, as leader of the social care and social work profession, involves:

- The provision of professional advice in the discharge of the local authority's statutory functions as outlined in the Social Work (Scotland) Act 1968
- The provision of strategic and professional leadership in the delivery of social work services
- The assistance to local authorities and their partners in understanding the complexities and cross-cutting nature of social work services and the key role social work plays in contributing to a wide range of local and national outcomes
- The support of overall performance management and the management of corporate risk

These functions apply in respect of both council and integration authority services.

### Issues raised by the [Audit Scotland report](#): 'Social Work in Scotland' (2016)

The Audit Scotland report highlighted many challenges in relation to the delivery of social care and social work services and set out a number of issues in relation to the leadership and scrutiny role of elected members.

The report concluded that it is important that elected members:

- Assure themselves that service quality is maintained and that risks are managed effectively
- Initiate a wider conversation with the public about service priorities and managing people's expectations about social work and social care services in terms of future affordability
- Ensure that chief social work officers have the seniority and the capacity to enable them to fulfil their statutory responsibilities effectively
- Develop longer term financial strategies for social work services delivered by both councils and integration authorities
- Manage the risk inherent in the complexity of new governance arrangements and take responsibility for remaining informed, irrespective of whether or not they are members of the relevant council committee or integration authority
- Ensure they remain accessible to the chief social work officer
- Ensure they scrutinise reports by chief social work officers, demonstrating constructive challenge, questioning and support as required

### Issues raised by the complex nature of the chief social work officer role

Elected members should note the complexities involved in the role of chief social work officer between ensuring professional advice-giving at 'arms-length' (as chief social work officer) and taking operational decisions (as within the substantive post). These two elements can be conflictual.

For example, operational decisions may be taken on the basis of budgets and performance expediency, and advice may be given on the basis of risk, ensuring quality and maintaining professional standards. Operational service structures may reflect financial constraints, however, may leave the service vulnerable in terms of management oversight or sufficient staffing resource, thereby failing to ensure staff are enabled to undertake their work to acceptable professional standards, possibly leaving service users vulnerable.

In other cases, operating procedures may inadvertently fail to take account of acceptable professional standards: procedures which encourage expedited hospital discharge without due regard for an individual's care beyond the point of discharge may leave already vulnerable individuals more so; or eligibility criteria which reflect budgetary constraints but which could potentially leave individuals in need without an appropriate level of service.

Understanding the complex nature of the role will support both integration authorities and councils to aspire to provide high quality services.

It is recognised that, although individual elected members and chief social work officers may change, excellent future working relationships will be built from a clear understanding of the requirements in relation to the respective duties of each.



# What does this mean for elected members?

The following suggestions may strengthen the effectiveness of the working relationship between elected members and chief social work officers:

- Structured local and national dialogue should continue between elected members and chief social work officers, including discussion of the opportunities to address any gaps in understanding and opportunities to come together to further effective partnership working
- Joint training and development opportunities should continue to be implemented involving elected members and chief social work officers, both locally and nationally
- Councils and integration authorities are encouraged to develop clear, explicit and transparent written protocols on the ways in which the chief social work officer should discharge his/her function according to local governance arrangements

# What does good practice look like in this area?

Good practice is demonstrated by the following:

- A shared understanding of the complexities and cross-cutting nature of social care and social work services and of what makes a difference to those using these services
- The chief social work officer and elected members mutually support and hold each other to account, for the benefit of those using services
- The chief social work officer annual report is used as a tool from which councils and integration authorities can learn in order to develop services which meet the needs of local people and communities both now and in future
- The chief social work officer, elected members and partner agencies demonstrate true partnership working by challenging and supporting each other to make effective decisions which are strengths-based, based on an assessment of risk, set in the context of human rights, delivered to the highest standards of quality and delivered with joint accountability
- There is a shared understanding of transparent processes evidenced by all members of councils' and integration authorities' governance arrangements
- Individuals demonstrate a commitment to the joint design, planning, commissioning, delivery and evaluation of social work and social care services which meet the needs of local people and which evolve over time to reflect changing circumstances

All of these would enable the local authority and the integration authority to give the highest degree of assurance of the efficacy of social care and social work services locally both now and in future.

# Summary

Both chief social work officers and elected members have duties to oversee effective, professional and high quality social care and social work services delivered to the highest of professional standards.

Governance frameworks in local authorities and local integration arrangements require the participation of both the chief social work officer and elected members to provide accountability for these services. It is, therefore, vital that these individuals work together in partnership.

In summary:

- The chief social work officer is a role and function, rather than a specific job description. It is interpreted and enacted differently across each of the 32 local authorities
- The chief social work officer role extends beyond the operational management responsibilities held in parallel by the chief social work officer. The implications of this complexity and the opportunities and limitations it presents need to be understood by councils and integration authorities
- The chief social work officer role applies to the professional leadership of, and accountability for, all aspects of local social care and social work services – elected members must ensure they are familiar with the role and the spheres of influence of their local chief social work officer
- Improved understanding of the chief social work officer role is beneficial to elected members in discharging their responsibilities effectively in local authorities, in local integrated arrangements and to chief social work officers in being supported and challenged by elected members
- The Audit Scotland report (2016) will be of interest and assistance to elected members in scrutinising social care and social work services and in ensuring councils and integration authorities discharge their statutory responsibilities
- Partnership working between elected members and the chief social work officer is an essential component of the effective delivery of shared responsibilities

## Further support and contacts

The chief social work officer in your local area can be contacted as per local protocols for elected members.

Social Work Scotland is the professional leadership body for the social work and social care profession in Scotland. Social Work Scotland influences and advises on the development of policy and legislation in relation to social work and social care and supports the development of the social work and social care professions.

Further contact with Social Work Scotland in relation to this briefing:

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Sept 2017





**SOCIAL POLICY - POLICY DEVELOPMENT AND SCRUTINY PANEL**

**EDINBURGH, THE LoTHIANS AND SCOTTISH BORDERS MULTI AGENCY PUBLIC PROTECTION ARRANGEMENTS (MAPPA) ANNUAL REPORT 2016-2017**

**REPORT BY HEAD OF SOCIAL POLICY**

**A. PURPOSE OF REPORT**

The purpose of this report is to provide the Panel with an overview of the Edinburgh, the Lothians and Scottish Borders MAPPA Annual Report 2016-2017

**B. RECOMMENDATION**

The Panel is asked to:

1. Note the contents of this Report.
2. Note that any issues will be taken forward by the Offender Management Committee.

**C. SUMMARY OF IMPLICATIONS**

- |                                                                                                                       |                                                                                                                                                                                                                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>I Council Values</b>                                                                                               | <ol style="list-style-type: none"><li>1. Focusing on our customers' needs</li><li>2. Being honest, open and accountable</li><li>3. Making best use of our resources</li><li>4. Working in partnership</li></ol>                                                                                     |
| <b>II Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)</b> | In line with council obligations under the Management of Offenders Act 2005.                                                                                                                                                                                                                        |
| <b>III Implications for Scheme of Delegations to Officers</b>                                                         | None.                                                                                                                                                                                                                                                                                               |
| <b>IV Impact on performance and performance Indicators</b>                                                            | <p>Potential to impact upon:</p> <p>PPH_002 % of initial MAPPA Risk Management Plans in place within three days of notification of sentence/release from custody</p> <p>PPH_004 % of MAPPA Level 2 and 3 cases where Risk Management Plan was assessed through audit as being good or excellent</p> |

	PPH_005 % of sex offenders charged with a further sexual or violent offence during the previous quarter
	PPH_006 % of cases subject to recall
	PPH_011 % of MAPPA 3 cases reviewed no less than once every 6 weeks
	PPH_012 % of MAPPA level 2 cases reviewed no less than once every 12 weeks
	PPH_013 % of Level 2 and 3 MAPPA meetings where disclosure was considered and the decision was recorded in the minutes We live in resilient, cohesive and safe communities
<b>V</b>	<b>Relevance to Single Outcome Agreement</b>  People most at risk are protected and supported to achieve improved life chances
<b>VI</b>	<b>Resources - (Financial, Staffing and Property)</b> None.
<b>VII</b>	<b>Consideration at PDSP</b> None.
<b>VIII</b>	<b>Other consultations</b> None

#### **D. TERMS OF REPORT**

The MAPPA Annual Report is completed as a requirement of the Strategic Oversight Group (SOG) under the obligations of Section 11 of the management of Offenders etc (Scotland) Act 2005. The report is intended to provide an insight into the working of MAPPA across Edinburgh, the Lothians and Scottish Borders. It details the achievements in developing practice and statistical information regarding the management of offenders. MAPPA is co-ordinated by a central unit, while the practical management of offenders remains the responsibility of the Responsible Authorities at local level.

##### Overview and Statistical Information

Through the facilitation of MAPPA partner agencies share information, assess risk and make effective plans to manage people, from all social, economic and cultural backgrounds, who have been convicted of sexual offending. The aim is to reduce the likelihood of reoffending and research indicates re-offending rates in this group remain consistently low.

As at the 31.03.17 there has been a 1% decrease on the 2015-2016 report of 690 to 684 Registered Sex Offenders (RSO's) managed under MAPPA. Over the course of this annual reporting year there has also been a reported decrease of approximately 6% (791) managed at Level 1; 18% (65) at Level 2; and 65% (3) at Level 3. Those offenders who present the highest management of complexity are managed at Level 3. This year for ninth year in a row, there were no cases of a L3 offender being convicted of further violent or indecency crime.

All of the statistical information is presented at an Edinburgh, Lothian's and Scottish



Borders level and no figures are presented for West Lothian alone.

Roles and Responsibilities outline the requirements for Responsible Authorities as follows:

The Police enforce the notification and compliance requirements of offenders subject to registration (RSO). Policing activities include preventative/monitoring strategies, investigation, prosecution and the development of risk management plans to mitigate or reduce risk. Police Scotland is the lead responsible authority for those community based sex offenders who are not subject to any other form of statutory supervision.

Local Authorities are the responsible authority for those offenders who are subject to statutory supervision. The Criminal Justice Service work alongside Police, Housing, Children and Families services and Adult Social Care services developing appropriate risk management plans whilst monitoring compliance to court and or licence conditions. The service can request additional requirements or conditions be placed on orders and licences by the courts and parole board i.e. attend counselling or treatment programmes to monitor and address risks identified to offending behaviours.

Within each Local Authority a Sex Offender Liaison Officer (SOLO) or Lead Officer acts as a single point of contact for information relating to registered sex offenders and they chair Risk Management Case Conferences.

The SOLO within housing is responsible for offenders' access to suitable housing and liaising with Registered Social Landlords to identify positive housing solutions which contribute to public protection. The housing SOLO contributes to Environmental risk assessments and provides information on the ongoing management and monitoring of the risk of the offenders as tenants having regard to community safety.

NHS Lothian is the Responsible Authority for mentally disordered restricted patients. NHS Lothian now has a Director of Public Protection, designated consultants for MAPPA (consultant forensic mental health clinicians) and a MAPPA health liaison officer who attends all L2 meetings. This is to ensure appropriate information sharing and joint working between NHS Lothian and other MAPPA agencies.

The NHS also fund The Serious Offender Liaison Service (SOLS) who provide a specialist clinical consultation service, training, assessment, clinical supervision and treatment to support Criminal Justice Social Work and the Police to manage serious violent and sexual offenders in the community. A consultant clinical psychologist from the learning disability service and a nurse consultant from the vulnerable children and young people service attendance at MAPPA L2 meetings, and the associate director of nursing attend L3 Multi Agency Public Protection (MAPP) meetings.

Community Interventions Services for Sex Offenders (CISSO) provide community based group treatment programmes and individual interventions addressing the behaviour and attitudes associated with sexual offending. Programmes include the accredited Moving Forward: Making Changes and a closed group service for internet offenders. The service also provides court assessments, case manager sessions and training in risk management tools and programmes to support criminal justice staff working with sexual offenders.

Keeping Children Safe encourages parents, carers and a guardian of children under 18 years of age to seek information on a named person who they may have concerns has convictions for sexual offences against children.

During 2016-17 Edinburgh, Lothian and Scottish Borders received 22 applications for information.

Developing Practice includes the training and promotion of MAPPA via a number of awareness training days across Edinburgh, the Lothians and Scottish Borders. Forums included the City of Edinburgh Violence Against Women Partnership, Midlothian Federation of Community Councils, West Lothian council wide staff training.

The Strategic Oversight Groups hosted a multi-agency workshop to provide an overview of developments in research findings and to consider what the differences are between various subtypes of internet offenders to staff and managers who will be involved in the management of these offenders.

Sexual Offences Prevention Orders (SOPO.) This is an order granted by the Court. It places conditions on an offender's behaviour, provides power of arrest if breached and enhances the role in managing such offenders. Following changes in Legislation Police Scotland may now apply to the Court at the point of sentencing for conditions to be placed on the Court Order for example, inspection of internet accessing devices. The report notes that for some offenders the existence of a SOPO provides structure to their daily life through which they are able to avoid further offending. On 31<sup>st</sup> March 2016, there were 76 SOPOs across the Edinburgh, Lothian and Scottish Borders.

Strategic Overview Arrangements details the following groups and their role:

Edinburgh, Lothian and Scottish Borders – Strategic Oversight Group (SOG) ensures the sharing of best practice and learning from significant case reviews. The group provides a strategic lead for developing multi-agency policy and strategy in relation to shared priorities with regard to the management of offenders.

Edinburgh, Lothian and Scottish Borders – MAPPA Operational Group supports the SOG group. The remit of the group is to share learning, develop best practice and where relevant ensure consistency of practice.

Offender Management/Reducing Re-offending Committees monitor the performance and quality of local service delivery; they provide strategic direction to local member agencies and develop local policy and practice. The committees include representatives from all key agencies ensuring effective communication across public protection.

NHS Lothian Public Protection Action Group. The main aim of the this group is to ensure NHS Lothian discharges its responsibilities for MAPPA, child and adult protection and provides a forum for developing good practice in relation to the management of high risk offenders within the health care setting.

## **E. CONCLUSION**

The Edinburgh, Lothians and the Scottish Borders MAPPA Annual Report has been produced as required by the Strategic Oversight Group. It continues to offer an opportunity for MAPPA to be accountable to the local community for the management of sexual offenders and restricted patients.

## **F. BACKGROUND REFERENCES**

None.

Appendices/Attachments: Appendix 1 – Edinburgh, The Lothians and Scottish Borders Multi Agency Public Protection Arrangements (MAPPA) Annual Report 2016-2017

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Date of meeting: 2<sup>nd</sup> November 2017



# MAPPA

Edinburgh, the Lothians and Scottish  
Borders Multi-Agency Public  
Protection Arrangements

ANNUAL  
REPORT  
2016-2017

# **MAPPA**

**Edinburgh, the Lothians and Scottish  
Borders Multi-Agency Public  
Protection Arrangements**

## Contents

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# 1

# Foreword

**MAPPA**

Edinburgh, the Lothians and Scottish  
Borders Multi-Agency Public  
Protection Arrangements



Multi Agency Public Protection Arrangements (MAPPA) are a mechanism through which agencies can discharge their statutory responsibilities more effectively and protect the public in a co-ordinated way. The purpose of MAPPA is to help reduce the re-offending behaviour of sexual and violent offenders to protect the public from serious harm.

Agencies across Edinburgh, the Lothians and Scottish Borders work in partnership to manage those individuals who present the highest risk of harm to our communities. The strength of the partnership between prison, police, health and local authority has continued to grow over the ten years since the introduction of MAPPA.

Since 31 March 2016, the management of high-risk violent offenders has been integrated into MAPPA. Violent offenders present a greater risk of re-offending, which poses a significant challenge to agencies in working with this group to reduce the serious risk of harm they may present.

Re-offending by people managed under MAPPA remains low and this reflects the work we do together. Our utmost priority is to keep the public safe, particularly the most vulnerable members of our communities.

**Michelle Miller**  
**Chair Edinburgh, the Lothians and**  
**Scottish Borders**  
**Strategic Oversight Group**

# 2

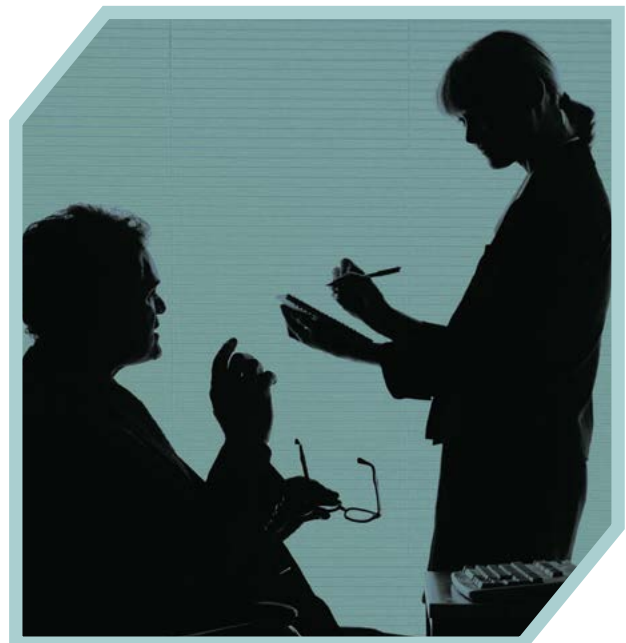
## What is MAPPA?

### Multi-Agency Public Protection Arrangements in Edinburgh, Lothian and the Scottish Borders

Multi-Agency Public Protection Arrangements (MAPPA) provide a framework to manage the risk posed by registered sex offenders and restricted patients (mainly violent offenders, with a small number of sex offenders). On 31 March 2016, the Scottish Government published new MAPPA Guidance. This guidance reflects the new risk of serious harm category, for offenders who by reason of their conviction are subject to supervision in the community, and are assessed by the responsible authorities as posing a high or very high risk of serious harm to the public, which requires active multi-agency management at MAPPA Level 2 or 3.

# MAPPA

Edinburgh, the Lothians and Scottish  
Borders Multi-Agency Public  
Protection Arrangements



MAPPA bring together professionals from the police, social work, housing, health and the Scottish Prison Service in Edinburgh, the Lothians and Scottish Borders. These agencies are known as the 'responsible authorities'. While the arrangements are co-ordinated by a central unit based in Edinburgh, the practical management of offenders remains the responsibility of these agencies at local level.

Community Justice Authorities ceased to exist on 31 March 2017, however, MAPPA continue to operate under the Management of Offenders etc (Scotland) Act 2005 and the boundaries previously covered by the Edinburgh, Lothian and Scottish Borders Community Justice Authority will remain. The area covered by our arrangements incorporates the local authority areas of the City of Edinburgh, East Lothian, Midlothian, West Lothian and the Scottish Borders, representing a mixture of urban and rural areas.

The responsible authorities represented are:

- » The City of Edinburgh Council
- » East Lothian Council
- » Midlothian Council
- » West Lothian Council
- » Scottish Borders Council
- » Police Scotland
- » Scottish Prison Service
- » NHS Lothian
- » NHS Borders

There are three MAPPA management levels to ensure that resources are focused where they are needed most to reduce the risk of harm. Over the course of this annual reporting year, we managed 859 registered sex offenders under MAPPA; 92.08% (791) at Level 1; 7.56% (65) at Level 2; and 0.34% (3) at Level 3. Those offenders who present the highest complexity are managed at Level 3. This year, for the ninth year in a row, there were no cases of a Level 3 offender being convicted of further Group 1 (violence) or Group 2 (indecent) crime.

Over the past year, there have been 68 MAPPA Level 2 and Level 3 meetings across Edinburgh, the Lothians and Scottish Borders. Each Level 2 meeting considers a number of offenders, whereas Level 3 meetings are unique to that offender.

The 2016/17 MAPPA National Annual Report provides a picture of the main national developments in relation to MAPPA and can be viewed on the Scottish Government website under recent publications.

# 3

## Roles and Responsibilities

**MAPPA**

Edinburgh, the Lothians and Scottish  
Borders Multi-Agency Public  
Protection Arrangements

The responsible authorities for each area are required to involve other key agencies in the management of offenders. This is an important part of MAPPA, involving the exchange of information and drawing on the collective knowledge and expertise of numerous agencies. The roles and responsibilities in relation to MAPPA in our local area are outlined below.

Police Scotland is responsible for the enforcement of the notification and compliance requirements of the Sexual Offences Act 2003 (sex offender registration), and for policing activities, including risk assessment, preventative/monitoring strategies, coupled with investigation and prosecution of any registered sex offender who re-offends. Responsibilities include: maintaining an accurate record of those offenders resident in each local authority area subject to the notification requirements; the creation of risk management plans to mitigate or reduce risk; making enquiries where such persons fail to comply with the requirements placed on them; managing sex offenders whose current behaviour is of concern. Police Scotland is the lead responsible authority for those community-based registered sex offenders who are not subject to any other form of statutory supervision. These duties are carried out in partnership with all responsible authorities and 'duty-to-cooperate' agencies.

The local authority is the responsible authority for registered sex offenders who are subject to statutory supervision. The Council's criminal justice social work service is responsible for the supervision of such offenders, but housing, adult social care and children and families services also play a key role in the management of sex offenders in the community.

Criminal justice social work makes a significant contribution to public protection by supervising and managing registered sex offenders in accordance with the requirements of MAPPA and other public protection-related legislation.

Social workers supervise offenders on community payback orders and prisoners who have been released subject to formal supervision. Social workers are required to use accredited risk assessment tools, and in collaboration with other agencies, develop plans for the risk management and supervision of offenders. Social workers can request that additional requirements or conditions be placed on orders and licences by the courts and the Parole Board. These requirements and conditions can range from restrictions relating to accommodation and employment, to instructions to avoid certain locations or victims, or to attend counselling or treatment programmes. These requirements and conditions allow social workers to monitor and influence aspects of offenders' behaviour, as breaches of requirements or conditions can lead to the court or Parole Board returning the offender to custody.

Each local authority in Edinburgh, the Lothians and Scottish Borders has a Sex Offender Liaison Officer (SOLO) or Lead Officer, in the criminal justice social work service, who acts as a single point of contact for information relating to registered sex offenders. They are responsible for chairing risk management case conferences and liaising with other agencies as appropriate.

Local authority housing SOLOs are responsible for offenders' access to housing, which includes accessing temporary accommodation and identification of suitable permanent housing.

Registered social landlords, as 'duty to co-operate' agencies, work with the local authority housing SOLO to identify positive housing solutions, which contribute to public protection.



The role of the housing service is to contribute to the responsible authorities' management of risk through:

- » providing suitable accommodation
- » contributing to environmental risk assessments to ensure accommodation is appropriate
- » liaising with the responsible authorities regarding the ongoing management and monitoring of the risk of the offender as a tenant, including any tenancy moves or evictions
- » having regard to community safety and having in place contingency plans for when a property is no longer suitable and/or the offender's safety is at risk.

The local authority is responsible for ensuring the development of a strategic response to the housing of sex offenders. However, in any local authority area there is likely to be a multiplicity of housing providers, and local authorities must involve and consult registered social landlords in their area when developing their strategic response.

It is the responsibility of the local authority to provide an initial single point of contact for accommodation requests from other responsible authorities. This single point of contact is the housing SOLO, whose role involves:

- » identifying the most appropriate housing provider, following risk assessment
- » ensuring that when an appropriate housing provider has been identified, they are included by the responsible authorities in liaison arrangements relevant to the identification of appropriate housing and the management of risk
- » liaising pro-actively with responsible authorities and housing providers regarding ongoing risk management and community safety issues.

NHS Lothian continues to play an important role in MAPPA locally, as the responsible authority for mentally disordered, restricted patients, and in fulfilling its wider duty to cooperate in the management of registered sex offenders.

NHS Lothian and NHS Borders have a public protection structure (including child protection, adult protection and MAPPA), which is the responsibility of the Nurse Director at Health Board Level. In addition, NHS Lothian now has a Director of Public Protection, designated consultants for MAPPA (consultant forensic mental health clinicians) and a MAPPA health liaison officer. This is to ensure appropriate information sharing and joint working between NHS Lothian and other MAPPA agencies. The aim of the structure is to provide governance for NHS Lothian's contribution to MAPPA and to ensure health issues that arise in relation to MAPPA cases (including mental health, physical health, staff and patient safety, and information sharing) are dealt with appropriately. The Director of Public Protection attends all Level 3 Multi-Agency Public Protection Panel (MAPPP) meetings, as does a consultant. A consultant and the health liaison officer attend all Level 2 MAPPA meetings in the NHS Lothian area.

Additional funding from NHS Lothian has allowed the Serious Offender Liaison Service (SOLS) to continue to provide specialist clinical consultation, training, assessment and clinical supervision to support the management of serious violent and sexual offenders being managed in the community. Examples of recent engagements include a presentation to the Scottish Parliament Justice Committee on Domestic Violence, a presentation to the National Strategic Oversight Group on internet offenders and presenting on domestic violence at the NHS Lothian public protection conference. The service has also been involved in delivering a number of training events, which focused on internet offenders, assessment of sexual offending and assessing risk of domestic violence. Attendance at MAPPA meetings remains one of the core duties of this service.

NHS Borders also makes an important contribution to MAPPA. A consultant clinical psychologist from the learning disability service and a nurse consultant from the vulnerable children and young people service attend all Level 2 meetings, and the associate director of nursing attends all Level 3 MAPPP meetings.

### **Community Intervention Services for Sex Offenders (CISSO)**

This service continues to support the risk management of partner agencies through the delivery of community-based group treatment programmes and individual interventions, addressing the behaviour and attitudes associated with sexual offending. In addition, staff provide assessments and offer advice and consultation to criminal justice social workers in Edinburgh, the Lothians and Scottish Borders. CISSO is moving into its fourth year of delivering the accredited group work programme Moving Forwards: Making Changes (MFMC). The team provides five weekly MFMC groups, four during the day and one in the evening. CISSO has continued its collaboration with the forensic learning disability service and one of the groups is open to offenders with a learning disability. Over the past year, 50 men were involved in MFMC group work. This experience will help inform an evaluation of the MFMC programme, which is scheduled for the coming year. The project has also been actively involved in national meetings that support the implementation and on-going development of the MFMC programme. Since the introduction of MFMC, CISSO has experienced an increase in demand for individual work with men to support the work they do in the group. The service is currently evaluating how it should focus its resources to bring best value in promoting effective interventions. This has included consulting with partner services around how the service supports the provision of

Court assessments and case manager sessions. CISSO has continued to receive a high number of referrals for internet offenders. Over the past year, the project has been involved in conversations, both locally and nationally, with a view to developing a clearer framework for assessment and intervention with this client group. It continues to run a programme specifically for internet offenders. This is a closed group and the programme is 18 sessions long. This group is run on a bi-annual basis and gives places to 16 men per year. The project offers training courses for local criminal justice staff on working with sexual offenders, including introductory days; a 3-day case management course for MFMC; and skills based training to consolidate learning on the case management and risk assessment courses. Delivery of national training in the use of RM2000 and Stable/Acute07 risk assessment tools is also part of the service provided.

### **Keeping Children Safe**

The Community Disclosure Scheme provides that parents, carers and guardians of children under 18 can ask for information about a named person who may have contact with their child if they are concerned that he or she might have convictions for sexual offences against children (e.g. if a parent wants to find out more about a new partner). Police officers discuss the concerns of the applicant in a face-to-face meeting and offer advice and support.

In this reporting year, police in Edinburgh, Lothian and Scottish Borders received 22 applications under this scheme.

Further information can be found at: <http://www.scotland.police.uk/keep-safe/safety-advice-jj/children-and-young-people/child-protection-keeping-children-safe/>



# 4

## Achievements in Developing Practice

**MAPPA**

Edinburgh, the Lothians and Scottish  
Borders Multi-Agency Public  
Protection Arrangements





## Training and Promoting MAPPA

During this reporting year, we have held a number of multi-agency training events.

In June 2016, Scottish Borders Council hosted a multi-agency awareness training day, aimed at staff who may only have limited contact with sex offenders. This event promoted information sharing and understanding in relation to the management of registered sex offenders under MAPPA.

Also in June, the MAPPA Coordinator delivered a training event for staff new to the role of chairing MAPPA meetings. In August 2016, the MAPPA Coordinator delivered a presentation on MAPPA to the City of Edinburgh's Violence Against Women Partnership. The aim was to increase awareness of the new serious risk of harm category, which will manage offenders presenting a high risk of serious harm in a domestic violence setting. In September 2016, Midlothian Council hosted a multi-agency MAPPA presentation to local councillors, to ensure elected representatives were fully briefed on developments in practice and local performance.

Also in September, the MAPPA Co-ordinator and Service Manager for Criminal Justice Social Work in Midlothian Council delivered a presentation on MAPPA to the Midlothian Federation of Community Councils.

In March 2017, West Lothian Council hosted a multi-agency MAPPA awareness-training day to promote information sharing and understanding of the management of registered sex offenders for staff who do not work routinely with sex offenders.

Also in March, Scottish Borders Council delivered a training session with input from a member of the Community Intervention Services for Sex Offenders (CISSO). The topic was 'Internet Offending – The Scale of the Challenge' and staff from all disciplines of social work attended.

Also in March, the Edinburgh, Lothian and Scottish Borders Strategic Oversight Group hosted a multi-agency half day workshop, aimed at staff and managers who will be directly involved in the management of people who have been convicted of offences relating to the possession of indecent images of children. The aim of the workshop was to provide an overview of developments in research findings and to consider what the differences are between the various subtypes of internet offender.

## Developing the use of Sexual Offences Prevention Orders (SOPO)

The SOPO is an order granted by the Court. It places conditions on an offender's behaviour, provides a power of arrest if breached and enhances the police role in managing such offenders. SOPOs could initially only contain prohibitive measures, however, a change in legislation in November 2011 allows for these orders to contain positive obligations as well as prohibitions.

For some offenders, the existence of a SOPO is enough to provide structure to their daily life, through which they may avoid further offending. On 31 March 2017, there were 76 SOPOs in place in our area.

# 5

# Strategic Overview Arrangements

**MAPPA**

Edinburgh, the Lothians and Scottish  
Borders Multi-Agency Public  
Protection Arrangements



### **Edinburgh, Lothian and Scottish Borders – Strategic Oversight Group**

This group is responsible for the overview and co-ordination of the Multi-Agency Public Protection Arrangements, ensuring the sharing of best practice and learning from significant case reviews. The group also provides a strategic lead for developing local multi-agency policy and strategy in relation to shared priorities regarding the management of offenders.

### **Edinburgh, Lothian and Scottish Borders – MAPPA Operational Group**

This multi-agency operational group supports the work of the Strategic Oversight Group. Its remit is to share learning, develop best practice and ensure consistency of practice.

### **Offender Management/Reducing Re-offending Committees**

These committees monitor the performance and quality of local service delivery; they provide strategic direction to local member agencies; and develop local policy and practice. These committees include representatives from all key agencies, a number of whom are also members of the local child and adult protection committees, ensuring effective communication across public protection.

### **NHS Lothian Public Protection Action Group**

The main aim of this group is to ensure NHS Lothian discharges its responsibilities for MAPPA, and for child and adult protection. This group provides a general forum to discuss important practice issues, in addition to developing good practice in relation to the management of high-risk offenders in the health care setting.



# 6

# Statistical Information

Unless stated, the statistics recorded are  
for the reporting period 1 April 2016 to  
31 March 2017.

## MAPPA

Edinburgh, the Lothians and Scottish  
Borders Multi-Agency Public  
Protection Arrangements



**Table 1: General**

REGISTERED SEX OFFENDERS (RSOs)		No.
<b>a) Number of:</b>	<b>I.</b> per 100,000 population on 31 March	69.66
	<b>II.</b> at liberty and living in the area on 31 March	684
<b>b)</b> The number of RSOs having a notification requirement who were reported for breaches of the requirements to notify		49
<b>c)</b> The number of "wanted" RSOs on 31 March		0
<b>d)</b> The number of "missing" RSOs on 31 March		0

**Table 2: Civil Orders applied and granted in relation to registered sex offenders**

THE NUMBER OF	No.
<b>a)</b> Sexual Offences Prevention Orders (SOPOs) in force on 31st March	76
<b>b)</b> SOPOs imposed by courts between 1st April and 31 March	39
<b>c)</b> Risk of Sexual Harm Orders (RoSHO) in force on 31 March	15
<b>d)</b> Sex offenders convicted of breaching SOPO conditions between 1 April and 31 March	11
<b>e)</b> Number of people convicted of a breach of RSHO between 1 April and 31 March	0
<b>f)</b> Foreign Travel Orders imposed by the courts between 1 April and 31 March	0
<b>g)</b> Notification Orders imposed by the courts between 1 April and 31 March	5

**Table 3: By MAPPA Level between 1 April and 31 March**

REGISTERED SEX OFFENDERS (RSOs)		No.
<b>a) By MAPPA Level between 1 April and 31 March;</b>	<b>I.</b> Level 1 – Routine Risk Management	791
	<b>II.</b> Level 2 – Multi-agency Risk Management	65
	<b>III.</b> Level 3 – MAPPP	3
<b>b) Convicted of a further Group 1 or 2 crime;</b>	<b>I.</b> MAPPA Level 1	18
	<b>II.</b> MAPPA Level 2	0
	<b>III.</b> MAPPP Level 3	0
<b>c) Returned to custody for a breach of statutory conditions (including those returned to custody because of a conviction of Group 1 or 2 crime)</b>		11
<b>d) Indefinite registrations reviewed under the terms of the Sexual Offences Act 2003 (Remedial) (Scotland) Order 2011 between 1 April and 31 March</b>		26
<b>e) Notification continuation orders issued under the terms of the Sexual Offences Act 2003 (Remedial) (Scotland) Order 2011 between 1 April and 31 March</b>		20
<b>f) Notifications made to Jobcentre Plus under the terms of the Management of Offenders etc. (Scotland) Act, 2005 (Disclosure of Information) Order 2010 between 1 April and 31 March</b>		202
<b>g) Number of RSOs subject to formal disclosure</b>		0

Table 4: Restricted patients

RESTRICTED PATIENTS (RPs):		No.
<b>a) Number of RPs;</b>	<b>I.</b> Living in the area on 31 March	35
	<b>II.</b> During the reporting year	41
<b>b) Number of RPs per order</b>	<b>I.</b> CORO	32
	<b>II.</b> HD	1
	<b>III.</b> TTD	8
<b>c) Number within hospital/ community;</b>	<b>I.</b> State Hospital	9
	<b>II.</b> Other hospital no suspension of detention (SUS)	21
	<b>III.</b> Other hospital with unescorted SUS	6
	<b>IV.</b> Community (Conditional Discharge)	8
<b>d) Number managed by category on 31 March (does not include patients from Lothian in the State Hospital)</b>	Level 1 – Routine agency risk management	33
	Level 2 – multi-agency risk	2
	Level 3 – MAPPP	0
<b>e) Number of RPs convicted of a further crime of Group 1 or 2 crime</b>	<b>I.</b> MAPPA Level 1	0
	<b>II.</b> MAPPA Level 2	0
	<b>III.</b> MAPPP Level 3	0

RESTRICTED PATIENTS (RPs):		No.
<b>f) Number on suspension of detention;</b>	<b>I.</b> who did not abscond or offend	21
	<b>II.</b> who absconded	1
	<b>III.</b> who absconded and then offended	0
	<b>IV.</b> where absconding resulted in withdrawal of suspension of detention	1
<b>g) Number on conditional discharge;</b>	<b>I.</b> who did not breach conditions, not recalled or did not offend	7
	<b>II.</b> who breached conditions (resulting in letter from the Scottish Government)	1
	<b>III.</b> recalled by Scottish Ministers due to breaching conditions	0
	<b>IV.</b> recalled by Scottish Ministers for other reasons	1

**Table 5: Statistical Information –  
other serious risk of harm offenders**

SERIOUS RISK OF HARM OFFENDERS:		No.
a) Number managed between 1 April and 31 March	1. MAPPA Level 2	4
	2. MAPPA Level 3	0
b) Number of offenders convicted of a further Group 1 or 2 crime	1. MAPPA Level 2	0
	2. MAPPA Level 3	0
c) Number of offenders returned to custody for a breach of statutory conditions (including those returned to custody because of a conviction of Group 1 or 2 crime)		0
d) Number of notifications made to DWP under the terms of the Management of Offenders etc (Scotland) act, 2005 (Disclosure of Information) Order 2010 between 1 April and 31 March		0

**Table 6: Registered sex offenders managed  
in the community under statutory conditions  
and/or notification requirements on 31 March  
2017**

CONDITIONS	Number	Percentage
On statutory supervision	228	33.33
Subject to notification requirements only	456	66.67

# MAPPA

Edinburgh, the Lothians and Scottish  
Borders Multi-Agency Public  
Protection Arrangements



**POLICE  
SCOTLAND**  
Keeping people safe  
**POILEAS ALBA**







## **SOCIAL POLICY - POLICY DEVELOPMENT AND SCRUTINY PANEL**

### **UPDATE ON MACMILLAN @ WEST LOTHIAN PROJECT**

#### **REPORT BY HEAD OF FINANCE AND PROPERTY SERVICES**

##### **A. PURPOSE OF REPORT**

The purpose of this report is to update the Social Policy, Policy Development and Scrutiny Panel (PDSP) on the performance of the Macmillan Cancer Information and Support Project.

##### **B. RECOMMENDATION**

It is recommended that the Panel notes:

1. The terms of the report.
2. The project's performance in its first year of operation as detailed in the Annual Report for the period April 2016 to March 2017.
3. The successful completion of the Macmillan Quality Information and Support Service Standard at level 4, the first project in Scotland to achieve this award.

##### **C. SUMMARY OF IMPLICATIONS**

<b>I Council Values</b>	Focusing on our customers' needs; being honest, open and accountable; providing equality of opportunities; making best use of our resources; and working in partnership.
<b>II Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)</b>	None.
<b>III Implications for Scheme of Delegations to Officers</b>	None.
<b>IV Impact on performance and performance Indicators</b>	The project will impact positively on a number of indicators contained within the anti-poverty strategy.
<b>V Relevance to Single Outcome Agreement</b>	SOA 5: People most at risk are protected and supported to achieve improved life chances. SOA 7: We live longer, healthier lives and have reduced health inequalities.
<b>VI Resources - (Financial, Staffing and Property)</b>	£700,000 funding from Macmillan Cancer Support for the period 2016 to 2019.
<b>VII Consideration at PDSP</b>	An initial report was considered by the Social Policy PDSP on 8 January 2015. The PDSP

agreed that the report should be forwarded to the Council Executive with a recommendation that the proposed project be approved. Council Executive approved the proposed project at its meeting on 27 January 2015.

## **VIII Other consultations**

The project bid was undertaken through a working group consisting of NHS professionals, and West Lothian Council services such as: Advice Shop, Libraries and Customer Information Service, alongside current services users and volunteers. Legal Services and the Financial Management Unit have endorsed the recommendation to accept the offer.

## **D. TERMS OF REPORT**

### **D.1 Background**

176,140 people live in West Lothian. Of this population, 3,567 people are on the cancer disease register. The cancer incidence in West Lothian (at 448 per 100,000 population) is significantly higher than the Scottish average (421 per 100,000). Latest figures available for cause of death within West Lothian show that 30.7% of male deaths and 31.6% of female deaths are related to cancer.

Analysis shows that the incidence of cancer diagnosis is greater in some communities than others with Armadale, Blackburn, Fauldhouse, Winchburgh, and Whitburn being particularly affected. All available evidence suggests that the number of people living with cancer is likely to double by 2030. Not only will more people experience a cancer diagnosis, but many more will survive cancer and live longer. Cancer therefore represents a major public health issue in West Lothian and there is wide ranging evidence which shows that those diagnosed with cancer and their families need additional support of a non-clinical nature. In particular:

- Almost 25% of people diagnosed with cancer have no support available from friends or relatives during treatment and 18% of those who are isolated have become so as a result of their cancer diagnosis, simply losing touch with social contacts or, sometimes, due to an inability to meet the financial costs of keeping up relationships.
- Cancer often has serious financial implications. 30% of people with a cancer diagnosis experience a drop in income, with one in three stopping work permanently or temporarily. It is also common to incur increased outgoings, which may include the cost of hospital appointments or increased living expenses.
- People living with cancer need information to help them make informed choices and take ownership of their medical condition. The Healthcare Quality Strategy for NHS Scotland (Scottish Government 2010) recognises that high quality support and information is essential to assist patients in decision making and managing their illness.

## **D.2 Macmillan @ West Lothian**

Macmillan @ West Lothian Cancer Information and Support Service is a partnership between Macmillan Cancer Support and West Lothian Council. It aims to ensure that anyone affected by cancer in West Lothian has access within their local community to quality cancer information and emotional and practical support. A network of Information and Support hubs have been established within partnership centres and libraries across West Lothian, offering service users informal support regarding the non-clinical aspects of living with cancer. These hubs are open on a drop in basis, providing a listening ear, an information library comprised of Macmillan information materials and signposting and referral to relevant services where appropriate.

The Annual Report (Appendix One) evidences the progress of the project over the first year of operation. Drop in services have been located in Bathgate Partnership Centre, Strathbrock Partnership Centre and Fauldhouse Partnership Centre. The West Lothian Cancer Information and Support Service previously under NHS management became part of the Macmillan @ West Lothian project in January 2017. A refresh of the service, including a redesign of the Macmillan space, is currently being undertaken. An additional drop in service will open in the new Blackburn Partnership Centre in late 2017. Care is taken to ensure that drop in spaces are comfortable and welcoming. They are Macmillan branded and designed in conjunction with Partnership Centre staff and service users to blend with the environment, providing a multi - purpose space which can be used by the community when services are closed. In 2017/18 un-staffed information points will also be established in community venues across the county offering cancer related information and signposting to information and support drop in hubs.

Volunteers provide the day to day running of the project, supported by staff. At the time of writing, 14 volunteers are active within the project. All volunteers have completed a comprehensive two day introductory training course, developed by Macmillan Cancer Support and delivered by project staff. Volunteers can also access ongoing Macmillan training to further develop their skills and knowledge base. Between May 2016 and March 2017, volunteers worked in excess of 700 hours and 112 support service sessions were delivered, with 266 attendees.

The Macmillan @ West Lothian Advisory Group provides valuable support to project staff. Members include Macmillan Cancer Support, West Lothian Council staff, project volunteers, Carers of West Lothian and Cancer Support Scotland.

Partnership Working is key to the success of the service. Many people affected by cancer (patients and families/carers) report emotional concerns throughout the cancer journey: at the point of diagnosis, during and after treatment. Service users may be referred to Cancer Support Scotland, who provide up to six sessions of free, skilled counselling at Bathgate Partnership Centre, Strathbrock Partnership Centre and Carmondean Connected, and complementary therapy at Carmondean Connected.

Financial issues are a major concern for many service users and the project works closely with the Advice Shop's Macmillan Benefits Team to address these issues. Drop in benefits advice runs alongside the information and support service. Support regarding potential benefit entitlement is available as well as housing and money advice, tapping into wider Advice Shop services, in addition to Macmillan's Financial Guidance Team, who offer specialist help in relation to mortgages, insurance and pensions. The project also signposts and refers customers to other Macmillan services, Carers of West Lothian, council customer service staff and local support groups.

Macmillan Cancer Support has its own quality assurance scheme; Macmillan Quality in Information and Support Service (MQUISS). It provides detailed guidance on developing, delivering and improving information and support services and meeting the changing needs of people affected by cancer. MQUISS has 12 interlinked 'quality areas' looking at all aspects of a well-managed service. The staff team has undertaken the relevant assessment, evaluation and audit of standards and the service has achieved the MQUISS award at Level 4; the first Cancer Information and Support Service in Scotland to do so. Work to obtain the Macmillan Volunteer Quality Standard will also be undertaken this year in conjunction with the renewal of the Advice Shop's Volunteer Friendly Award.

### **D3 Analysis of Reach May 2016/March 2017**

This period saw 266 attendances, 50% of whom described themselves as a person with cancer. 45% identified as a family member or carer of a person with cancer. 42% of attendees visited the service for someone to talk to, 38% wanted help with benefits and welfare advice while 43% were seeking information about local services. As a result 120 visitors were signposted or referred to benefits advice, 46 were referred/signposted to other Macmillan services and 66 visitors were referred or signposted to local agencies and partners, including Cancer Support Scotland.

## **E CONCLUSION**

Good progress has been made in the first full year of service delivery, developing drop in services in three partnership centres, redesigning Carmondean Connected and developing effective partnerships which allow service users to access a range of services. An additional support hub will open in Blackburn shortly, taking the number of drop in services to five, rather than four as originally agreed with Macmillan Cancer Support. Support hubs are now open every day of the working week across West Lothian, allowing visitors to access support in the local community when they need it. This achievement would not have been possible without the support and dedication of volunteers.

## **F BACKGROUND REFERENCES:**

None

Appendices/Attachments: One

Appendix One : Macmillan @ West Lothian Annual Report 2016/17

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Donald Forrest  
**Head of Finance and Property Services**

2 November 2017



## Macmillan @ West Lothian

# Annual Report

## 2016/17



**WE ARE  
MACMILLAN.  
CANCER SUPPORT**





# Welcome

## Welcome to Macmillan @ West Lothian's first Annual Report.

This has been an exciting year for the project: recruiting staff and volunteers; installing two new information and support hubs; beginning the task of refreshing Macmillan @ Carmondean Connected (and laying the foundations for two further hubs opening in 2017/18 at Fauldhouse and Blackburn Partnership Centres) promoting the service, working with partner organisations and most importantly welcoming service users to our hubs. We have been overwhelmed by the response to the service from people who want to volunteer with us, partners and local organisations who want to work with us and service users who have visited the service. We would like to express our heartfelt thanks to everyone involved in helping us to get the project off the ground over the past year.

## Aims and Objectives

Our aim is to ensure that anyone affected by cancer in West Lothian has access within their local community to quality cancer information and emotional and practical support.

We do this by:

- Providing a comfortable and welcoming environment within our Information and Support hubs which offer service users informal support regarding the non - clinical aspects of living with cancer.
- Recruiting, training and supporting a team of volunteers who deliver the service.
- Offering high quality information to anyone affected by cancer, signposting and referring to relevant services where appropriate.
- Producing and maintaining an information resource.
- Establishing a network of partnerships which offer additional resources to clients.



***“Giving your time to make life better for other people is the best reward.”***

## Our Service

The service began in August 2015, when the first member of staff came into post. Followed soon after by the appointment of the Development Worker, with the first support hub opening in Bathgate Partnership Centre.

Our support hubs are located at:

### Bathgate Partnership Centre

- Opened 30 May 2016
- Opening times Monday 10am – 1pm, Thursday 1pm – 3pm
- Working in partnership with Cancer Support Scotland and Macmillan Benefits team offering weekly counselling and benefits advice



### Strathbrock Partnership Centre

- Opened 18 January 2017
- Opening times Wednesday 1pm – 3pm, Friday 10am – 12.30pm
- Working in partnership with Cancer Support Scotland and Macmillan Benefits team offering weekly counselling and benefits advice

### Carmondean Connected

- West Lothian Cancer Information and Support Centre came under the auspices of Macmillan @ West Lothian in January 2017.
- Opening times Wednesday 11am – 1pm, Thursday 10am – 12pm
- Working in partnership with Cancer Support Scotland and Macmillan Benefits team offering weekly counselling and benefits advice



# Volunteers

## **Our volunteers provide the day to day running of the service.**

This year we have recruited 13 volunteers and provided Macmillan core training to 15 people. Our wonderful volunteers have worked in excess of 700 hours and delivered 112 support service sessions.

In preparation for their role, all volunteers attend two days of accredited core training before commencing volunteering in our support hubs. In addition to core Macmillan training, our volunteers have accessed Macmillan and West Lothian Council ongoing training and attend monthly team meetings.

Guest speakers are present at each team meeting and presentations have been delivered by some of our partners including, Cancer Support Scotland, Macmillan Helping Matters, Carers of West Lothian, West Lothian Macmillan Benefits Team and WLC Council Information Service.

Some volunteers have also had the opportunity to visit the Macmillan Support Line office in Glasgow to hear about the national telephone support service available to anyone affected by cancer.





# Volunteer stories

## Aldyth's story

*“ When I retired I was wanting to find a volunteering opportunity that I would find worthwhile, both for my own benefit and that of the local community. I hadn't got round to looking at what opportunities were available, when I saw an article in the local paper about a new Macmillan support service being set up in West Lothian. As I had cancer 10 years ago, I immediately thought that this would be of interest to me and that my own experience would help me to understand some of what others might be going through and enable me to provide support.*



*I started training with the second phase of the project at the end of November 2016. The training was excellent, I really enjoyed meeting the other volunteers and Joanne and Rosie, who were setting the service up.*

*I started in January 2017, wondering how much of my training I might remember. It is normally busy on the day I volunteer in Bathgate and the 3 hour session flew by. It is really satisfying being able to refer people onto services that they have real need of, especially benefits advice and counselling services. Sometimes they pop back to see us after their referral and it is great to see the difference in the service users after they have received the help they need. Sometimes you can see that a great weight has lifted for them. They still have a lot of troubles, but their journey has been made a bit easier. Many of our service users appreciate being able to drop by for a cup of tea and a chat and it is lovely to be able to see how they are from time to time and help them along. Overall it is a very rewarding experience.*”

## Jean's story

*“ I came to Macmillan Volunteering in Spring 2016 following my husband's death the previous summer from prostate cancer. I have also had many relatives and friends who have had cancer, some of whom have survived and others who did not. I also worked as Care Manager in the Palliative Care Unit in Aberdeen so knew the value of the Macmillan Service and how people feel better when they receive good information and support.*



*Our brilliant project staff at Bathgate Partnership Centre have built up a great team with their enthusiasm and commitment to the service and the volunteers. We always have access to excellent training. It is lovely to also meet other local service providers and hear about their work so we can signpost people who visit our drop-in sessions. It has also been good to meet the other volunteers in our team, making new friends in the community.*

*The people who use our service give me great satisfaction with their obvious appreciation of our help. They often arrive appearing apprehensive and upset but generally leave feeling relieved, smiling and appreciative of our support. Knowledge plus a listening ear is Power!*”

# Analysing our reach

## Attendances



**266**  
**attendances**  
from people affected by cancer  
between April 2016 and March 2017



**50%**  
of those attendances were by people  
who describe themselves as a  
person with cancer



**Almost 45%**  
described themselves as a family  
member or carer of a person with  
cancer

## Reason for attending



**42%**  
of those who visited the service  
came for someone to talk to



**38%**  
wanted help with benefits  
and welfare advice



**43%**  
wanted to find out about  
other local services

## Help given



**120 visitors**  
were signposted to or referred for  
benefits advice



**46 visitors**  
were referred/signposted to other  
Macmillan services



**66 visitors**  
were referred/signposted to local  
agencies and partners, including  
Cancer Support Scotland

## How visitors found out about the service

**Used before 76**  
**Just passing 20**

**Family/friend/colleagues 32**  
**Healthcare professional 18**  
**Online 21**

**Other 75**  
**Unknown 24**

# Service User Stories

## Elaine's Story

*“ In May 2015 I got diagnosed with Non-Hodgkin's Lymphoma. I had no clue what to do, who to talk to what I could claim; my husband was doing everything for me. He came home from shopping one day and said he had seen the Macmillan sign in the window of Bathgate Partnership Centre and he suggested I pop in to see what help I could get. I was really withdrawn and isolated at this point; no confidence to talk, rarely went outside with my husband doing most things for me, I used to worry about everything.*



*My husband and I walked down to the Macmillan drop-in and after a brief chat and a cup of tea the volunteers made a referral to the benefits team as most of my benefits including disability benefits had been affected, with the worst loss being my mobility car. Over the course of the next year the benefit team member was able to secure all the benefits including an increase and back payments but most of all, my lifeline which was getting my mobility car back.*

*You can tell the volunteers what you can't sit and talk to family about as you don't want to worry your family and it is all private. I am now more positive and worry less. I still need support so will continue to come. Every time I am down the street I think, I wish the Macmillan was open so I could pop in.*

*During visits for my benefits to be sorted out my confidence increased and a referral to counselling was made to Cancer Support Scotland. The Counsellor Service was brilliant, really, really good; I received six sessions initially, extended to another six, which are ongoing. The counselling really helped with personal stuff. I still pop in to the drop in after counselling for a coffee and a chat; you can chat about anything I want to talk about. They are all really nice and they go out of their way to help and listen to what I am saying.*

*My family has also been supported and the information provided in the form of leaflets, books and website information has allowed them to feel less anxious, and as a result we are a lot closer than we've ever been. We are now as a family able to talk about my cancer openly.*

*If I was to sum up the service it would be "Life saving".*



## Heather's Story

“ My husband had just been diagnosed with pancreatic cancer. I had got a house move within the same week. I came to the partnership centre to speak about the house move. I told them about my position as well, and they told me about the Macmillan service. I came in, not knowing what to expect but I thought I've got nothing to lose.

When I came in, it was like just being able to speak freely to someone; they gave so much help. I had forms to deal with because our situation financially had changed. We had to claim benefits - it was a nightmare when I looked at the forms and I got a lot of help with that. I was offered counselling, which I felt I needed and it's definitely helped me and also, complementary therapies which has been a great bonus.

I've got the number for the Macmillan Support Line that you can phone up, which I have done when I've not known where to go and I spoke to the support workers who put me on to a nurse and got a lot of help; they were excellent and helped me put my mind at ease.

Whenever you don't want to put things on your family you know that the Macmillan volunteers at the partnership centre are here. You can come down twice a week and speak to them and just air your views. They make you feel so welcome, give you a cup of coffee and you can relax and chill, tell them your worries, you can even have a laugh and different things. That all makes a difference and I can't thank them enough for the help that I've been given. In all, I could never have got through what I've got through without the Macmillan help.



## Learning and development for volunteers.

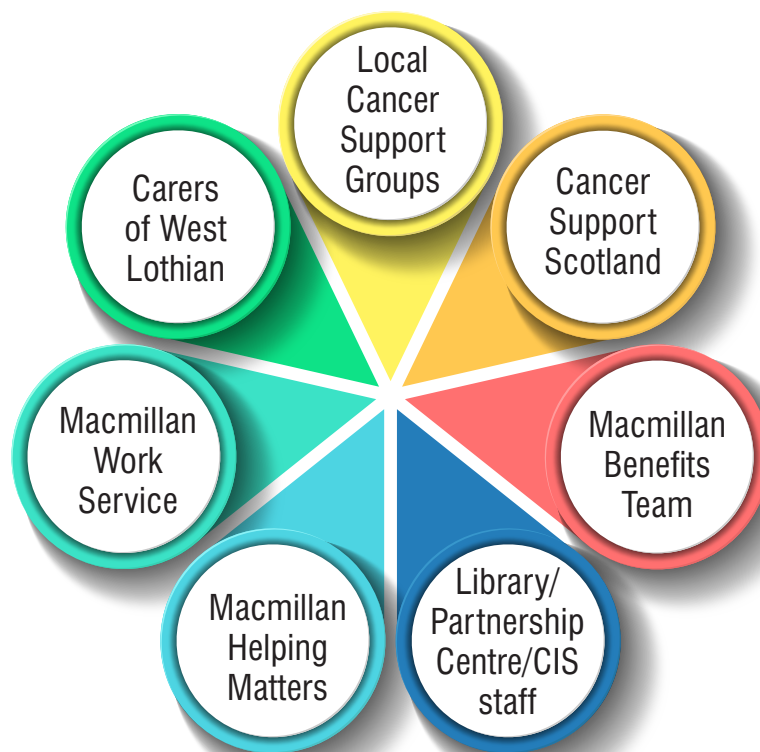
We want our volunteers to make the most of their time with us which is why we provide various learning and development opportunities.



# Partnership Working

The Macmillan @ West Lothian Advisory Group provides valuable support and advice to the project. Members include Macmillan Cancer Support, West Lothian Council staff, Marie Curie, Carers of West Lothian and Cancer Support Scotland. We also work closely with other Macmillan and Council services. Partners attend our monthly team meetings to give a talk on the services they offer as part of our ongoing development programme for volunteers.

Partnership working is key to providing signposting, referrals and local support to service users. We have developed partnerships with:



## **Cancer Support Scotland, Madaline Alexander, Operations and Service Manager**

Extending our partnership with Macmillan Cancer Support and now with West Lothian Council, has been incredibly positive for Cancer Support Scotland. The team of staff and volunteers are extremely dedicated to providing the best possible service for people affected by cancer. This has enabled us to provide our counselling and complementary therapies in West Lothian. We are excited to continue with this partnership and be a part of this fantastic work in the coming years.”

## **Anne-Marie Vance, Neighbourhood Manager, Bathgate Partnership Centre**

West Lothian Libraries are delighted to be working in partnership with Macmillan Cancer Support to provide information & support services in 3 out of our 14 Libraries. Both partners

are keen for this partnership to grow and by the end of 2017 the Macmillan spaces will have increased to include a further 2 Libraries within West Lothian. The aim of the partnership is to provide information in a non-clinical, informal setting to anyone affected by cancer. Finding out you or a loved one has cancer can be a difficult time and the service is there to support people in the community. It provides information, emotional support and access to other services including complementary therapies, counselling and benefits advice. The partnership is working well and is being well received by the community. It also promotes the libraries as a place to source information on health and wellbeing and the hope is that it will increase library membership within the community.

### **Denise Arbiter, Senior Adviser, Age & Illness Team, Advice Shop**

Since May 2016 the Macmillan Benefits Team has covered sessions in Bathgate Partnership Centre and this has proven really successful for the customers. Out of 51 seen at the drop in hub, 35 have been referred to the benefit team, and 16 signposted. Benefits advice is now also available at all drop in sites. Clients have been returning to use both drop in and benefits services and get one to one help with any issues that may arise, no matter how often. This joined up service helps streamline the advice available for people who are in a distressing situation. In many cases customers big worries include 'how will I cope financially?'. One service user commented recently that she had hardly slept for worry before visiting Macmillan. When the Benefits Team assisted her to resolve issues with her claim for Employment Support Allowance she told us she would not have known how to take on the DWP and that Macmillan had provided a fast resolution to her problem.







## Raising Awareness in the Community

- 63 raising awareness events from stalls to talks and awareness sessions for staff have been held this year.
- It has been a priority to engage with staff in our drop in venues and have completed 13 awareness sessions for staff in Bathgate Partnership Centre and Strathbrock Partnership Centre.
- We have provided information stalls within GP practices and at St John's Hospital, and aim to build on and develop further links with health staff in coming years.
- We have had a presence in supermarkets, shopping centres, sports centres and community venues.
- We have attended a wide range of community events from the Memory Walk to Silver Sunday, West Lothian Milan group and West Lothian College Health Fair.
- We have worked with a local Breast Cancer Care volunteer to deliver Breast Aware Sessions to council staff during Breast Cancer month in October and provided promotional material during West Lothian Council Healthy Working Lives Week.

## Contact

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**SOCIAL POLICY - POLICY DEVELOPMENT AND SCRUTINY PANEL**

**CONSULTATION ON THE CONTINUING CARE (SCOTLAND) AMENDMENT ORDER 2018**

**REPORT BY HEAD OF SOCIAL POLICY**

**A. PURPOSE OF REPORT**

To inform the Panel of the proposed response by West Lothian Council to the Scottish Government's Consultation on the Continuing Care (Scotland) Amendment Order 2018.

**B. RECOMMENDATIONS**

It is recommended that the Panel note and consider the proposed West Lothian Council response to the consultation by the Scottish Government in relation to the Continuing Care (Scotland) Amendment Order 2018 which is intended to be submitted to Council Executive for approval and submission.

**C. SUMMARY OF IMPLICATIONS**

<b>I</b>	<b>Council Values</b>	Focusing on our customers' needs.  Being honest, open and accountable.  Making best use of our resources.  Working in partnership.
<b>II</b>	<b>Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)</b>	The key risk is that should demand increase for continuing care that the funding allocation would be insufficient.
<b>III</b>	<b>Implications for Scheme of Delegations to Officers</b>	None.
<b>IV</b>	<b>Impact on performance and performance Indicators</b>	None.
<b>V</b>	<b>Relevance to Single Outcome Agreement</b>	None
<b>VI</b>	<b>Resources - (Financial, Staffing and Property)</b>	£166k per annum from Scottish Government
<b>VII</b>	<b>Consideration at PDSP</b>	None

**VIII Other consultations** None.

## **D. TERMS OF REPORT**

### **Background**

#### **Continuing Care**

The Children & Young People (Scotland) Act 2014 created the new provision of Continuing Care (Part 11). The Act places a duty on local authorities to provide care leavers, whose final placement was 'away from home', with a continuation of the kind of placement and support they received prior to their ceasing to be looked after. Young people aged 16-18 years old can request continuing care, whereby they can remain in their care placement until their 21<sup>st</sup> birthday.

Effectively it offers eligible young people who were born after 1 April 1999, who are at least aged sixteen and whose final looked after placement was in foster; kinship or residential care with the same accommodation and other assistance as they were provided with immediately before the young person ceased to be looked after.

The young person is therefore entitled to remain in their care setting up to their twenty-first birthday where they cease to be looked after by a local authority.

Part 11 of the 2014 Act reflects the philosophy of care set out in the Scottish Government's Staying Put-Scotland guidance of October 2013. This stressed the importance of encouraging and enabling young people to remain in safe, supported environments until they are better ready to make the transition into independent living.

#### **The Consultation**

This is the third in the series of annual amendments to the original Continuing Care (Scotland) Orders 2015. This amendment, which will come into force on 1 April 2018, will further increase the upper age of young people who will be eligible for continuing care to twenty years of age.

This approach of annual amendment was agreed during the development of the Children and Young People (Scotland) Act 2014, to ensure the original cohort of 16 year olds would continue to be eligible as they increase in age until entitlement to Continuing Care encompasses all care leavers in kinship, residential and foster care from age 16 to their 21<sup>st</sup> birthday.

#### **West Lothian Council's submission**

The draft response supports the proposed extension, as stated during development of the 2014 Act, to further increase the higher age limit for persons eligible for continuing care from nineteen to twenty years of age from April 2018. This will ensure that the current cohort of young people continue to be eligible for continuing care as they increase in age until the duty extends from 16 to 21 years of age.

The draft response notes that it is expected that there will be an increase in demand for continuing care support going forward. The Scottish Government currently allocates £166,000 per annum to support the implementation of continuing care. It is the view of West Lothian Council that this provision is under-funded by the Scottish Government and will ultimately result in a budget pressure. It is likely that each annual amendment to the Order will result in increased pressure on this budget.

The response therefore asks that the implementation of Continuing Care be fully funded by the Scottish Government.

## **E. CONCLUSION**

In West Lothian we recognised that care leavers have poorer outcomes than the average population, in terms of education, employment, and physical and mental health. Their needs are complex, reflecting backgrounds of trauma, loss and instability. We support the aim of Continuing Care, which is to provide young people with a more graduated transition out of care, reducing the risk of multiple simultaneous disruptions occurring in their lives while maintaining supportive relationships.

## **F. BACKGROUND REFERENCES**

**Appendices/Attachments:** Appendix 1 – Consultation Documentation  
Appendix 2 – Proposed Response

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01506 281235

Jane Kellock, Head of Social Policy

**Date:** 2<sup>nd</sup> November 2017



# **Consultation on the Continuing Care (Scotland) Amendment Order 2018**



T: 0131-244-3507  
E: louise.piaskowski@gov.scot

To:  
All Corporate Parents  
Stakeholder Representatives

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16 October 2017

Dear All,

**CONSULTATION ON DRAFT SECONDARY LEGISLATION AMENDING THE  
CONTINUING CARE (SCOTLAND) ORDER 2015**

I enclose a draft version of The Continuing Care (Scotland) Amendment Order 2018, which is the most recent in the series of planned annual amendment Orders, for your information and to invite any comments.

This draft Order will further increase the higher age limit for persons eligible for continuing care from nineteen to twenty years of age from April 2018 to ensure that the current cohort of young people continue to be eligible as they increase in age, until the duty to provide continuing care extends to all persons eligible from 16 to 21 years of age. This order will be made using powers inserted into section 26A of the Children (Scotland) Act 1995 by Part 11 of the Children and Young People (Scotland) Act 2014 ("the 2014 Act").

The Explanatory Notes that accompany the draft Order explain the provisions and are in line with our policy intention, stated during development of the 2014 Act, of increasing the higher age limit on an annual basis. I have also provided a summary in Annex A as a reminder of the provisions included in the 2014 Act and what is set out in secondary legislation.

The consultation is available on the Scottish Government website here:  
<https://consult.scotland.gov.uk/children-and-families/continuing-care-amendment>.

Please send any comments using the website or by email to me at [looked\\_after\\_children@gov.scot](mailto:looked_after_children@gov.scot) by **Monday 13 November 2017**. Unless you state otherwise your response will be made public but if you ask for your response not to be published we treat it as confidential.

You should be aware that the Scottish Government is subject to the provisions of the Freedom of Information (Scotland) Act 2002 and must consider any request made to it under the Act for information relating to responses made to this consultation exercise. Please do not hesitate to contact me if you have any questions.

Yours sincerely,

Louise Piaskowski  
Policy Officer

## ELIGIBILITY FOR CONTINUING CARE FROM APRIL 2017

### The Children and Young People (Scotland) Act 2014:

Section 67 of the 2014 Act inserts a new section 26A into the Children (Scotland) Act 1995 in relation to continuing care. Continuing care is defined in new section 26A(4) of the 1995 Act as meaning the same accommodation and other assistance as was being provided for the eligible person by the local authority, immediately before the person ceased to be looked after.

New section 26A(1) provides that the local authority's duty to provide continuing care applies where an eligible person ceases to be looked after by a local authority. New section 26A(2) defines "eligible person" as a person who is at least 16 years of age and is not yet such higher age as may be specified by Ministers by order. New sections 26A(5) and (7) detail when the duty to provide continuing care does not apply and ceases to apply respectively. New section 26A(6) provides that a local authority's duty to provide continuing care lasts, subject to section 26A(7), until the expiry of such period as may be specified by Ministers by order. Subsections (9) and (11) to (13) make further provision as to orders which may be made by Ministers.

Part 11 of the 2014 Act also reflects the philosophy of care set out in the Scottish Government's 'Staying Put-Scotland' guidance of October 2013. This stressed the importance of encouraging and enabling young people to remain in safe, supported environments until they are better ready to make the transition into independent living.

### The Continuing Care (Scotland) Order 2015:

Article 2 specifies a higher age of 17 years of age for young people to be eligible for continuing care. In line with discussions during the Bill development process this upper age limit will extend annually to ensure this cohort continue to be eligible as they increase in age until the duty to provide continuing care extends to care leavers aged from 16 to 21 years of age.

Article 3 specifies the period that the local authority's duty to provide continuing care in terms of new section 26A(6) of the 1995 Act lasts is from the date on which the eligible person ceases to be looked after until the date of their 21st birthday.

Articles 4 and 5 cover assessment of eligible young people to ensure that continuing care would not significantly adversely affect the welfare of the young person. In a similar way to the Support and Assistance of Young People Leaving Care (Scotland) Regulations 2003 and associated guidance on Supporting Young People Leaving Care in Scotland, the local authority must carry out a welfare assessment of the eligible person as soon as reasonably practicable before the person ceases to be looked after by them. They also must carry out a welfare assessment of eligible persons receiving continuing care at intervals not exceeding twelve months starting from the date the person ceases to be looked after. Such welfare assessments are to be carried out in accordance with articles 6 and 7.



Articles 6 and 7 make general provisions about welfare assessments and set out the issues to be taken into account by a local authority in completing a welfare assessment, which includes considering each of the matters listed in the Schedule, and lists the range of persons whose views they may seek in that connection. These are currently drafted to complement the provisions in the Support and Assistance of Young People Leaving Care (Scotland) Regulations 2003 and associated guidance on Supporting Young People Leaving Care in Scotland. They emphasise the importance of seeking and recording the views of the young person and other relevant people in reaching agreement about the welfare status of the young person. This is set out in more detail in the Guidance on Part 11, which was published on 3 November 2016 and can be found at: <http://www.gov.scot/Publications/2016/11/4644>

### **The Continuing Care (Scotland) (Amendment) Order 2016:**

This Order increased the higher age limit for eligible persons in section 26A(2)(b) of the Children (Scotland) Act 1995 to eighteen years of age. This means that from 1 April 2016 the duty on local authorities to provide continuing care under section 26A of the 1995 Act was to a person who is at least sixteen years of age and who had not yet reached the age of eighteen.

### **The Continuing Care (Scotland) (Amendment) Order 2017:**

This Order increased the higher age limit for eligible persons in section 26A(2)(b) of the Children (Scotland) Act 1995 to nineteen years of age. This means that from 1 April 2017 the duty on local authorities to provide continuing care under section 26A of the 1995 Act was to a person who is at least sixteen years of age and who had not yet reached the age of nineteen.

### **The Draft Continuing Care (Scotland) (Amendment) Order 2018:**

This Order increases the higher age limit for eligible persons in section 26A(2)(b) of the Children (Scotland) Act 1995 to twenty years of age. This means the duty on local authorities to provide continuing care under section 26A of the 1995 Act will from 1 April 2018 be to a person who is at least sixteen years of age and who has not yet reached the age of twenty.

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DRAFT SCOTTISH STATUTORY INSTRUMENTS

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**2017 No.**

**CHILDREN AND YOUNG PERSONS**

**The Continuing Care (Scotland) Amendment Order 2018**

*Made* - - - - 2018

*Coming into force* - - 2018

The Scottish Ministers make the following Order in exercise of the powers conferred by section 26A(2)(b) of the Children (Scotland) Act 1995<sup>(1)</sup> and all other powers enabling them to do so.

In accordance with section 26A(12) of that Act, the Scottish Ministers have consulted with each local authority and such other persons as they consider appropriate.

In accordance with section 26A(11)(b) of that Act, a draft of this instrument has been laid before and approved by resolution of the Scottish Parliament.

**Citation and commencement**

**1.** This Order may be cited as the Continuing Care (Scotland) Amendment Order 2018 and comes into force on 1st April 2018.

**Amendment of the Continuing Care (Scotland) Order 2015**

**2.—**(1) The Continuing Care (Scotland) Order 2015<sup>(2)</sup> is amended as follows.

(2) In article 2 (eligible person: specified age)<sup>(3)</sup>, for “nineteen” substitute “twenty”.

---

(1) 1995 c.36. Section 26A was inserted by section 67(1) of the Children and Young People (Scotland) Act 2014 (asp 8). Section 26A(13) contains a definition of “specified” for the purposes of section 26A.

(2) S.S.I. 2015/158.

(3) Article 2 is amended by S.S.I. 2016/92 and SSI 2017/62.

**Revocation of the Continuing Care (Scotland) Amendment Order 2017**

**3.** The Continuing Care (Scotland) Amendment Order 2017(4) is revoked.

St Andrew's House,  
Edinburgh  
Date

*Name*  
Authorised to sign by the Scottish Ministers

---

(4) S.S.I. 2017/62.

## **EXPLANATORY NOTE**

*(This note is not part of the Order)*

This order amends article 2 of the Continuing Care (Scotland) Order 2015 (S.S.I. 2015/158) with the effect that the higher age limit for “eligible persons” specified for the purposes of section 26A(2)(b) of the Children (Scotland) Act 1995 (“1995 Act”) is twenty years of age (increased from nineteen). This means that an “eligible person” for the purposes of the duty on local authorities to provide continuing care under section 26A of the 1995 Act is a person who is at least sixteen years of age and who has not yet reached the age of twenty.

## **Responding to this Consultation**

We are inviting responses to this consultation **by Monday 13 November 2017**.

Please respond to this consultation using the Scottish Government's consultation platform, Citizen Space. You view and respond to this consultation online at <https://consult.scotland.gov.uk/children-and-families/continuing-care-amendment>. You can save and return to your responses while the consultation is still open. Please ensure that consultation responses are submitted before the closing date of Monday 13 November 2017.

If you are unable to respond online, please complete the Respondent Information Form (see "Handling your Response" below) and send it by post to:

Louise Piaskowski  
Scottish Government  
Care and Protection Division  
2A-North  
Victoria Quay  
Edinburgh  
EH6 6QQ

## **Handling your response**

If you respond using Citizen Space (<http://consult.scotland.gov.uk/>), you will be directed to the Respondent Information Form. Please indicate how you wish your response to be handled and, in particular, whether you are happy for your response to be published.

If you are unable to respond via Citizen Space, please complete and return the Respondent Information Form attached included in this document. If you ask for your response not to be published, we will regard it as confidential, and we will treat it accordingly.

All respondents should be aware that the Scottish Government is subject to the provisions of the Freedom of Information (Scotland) Act 2002 and would therefore have to consider any request made to it under the Act for information relating to responses made to this consultation exercise.

## **Next steps in the process**

Where respondents have given permission for their response to be made public, and after we have checked that they contain no potentially defamatory material, responses will be made available to the public at <http://consult.scotland.gov.uk>. If you use Citizen Space to respond, you will receive a copy of your response via email.

Following the closing date, all responses will be analysed and considered along with any other available evidence to help us. Responses will be published where we have been given permission to do so.

## **Comments and complaints**

If you have any comments about how this consultation exercise has been conducted, please send them by email to [looked\\_after\\_children@gov.scot](mailto:looked_after_children@gov.scot) or by post to:

Louise Piaskowski  
Scottish Government  
Care and Protection Division  
2A-North  
Victoria Quay  
Edinburgh  
EH6 6QQ

## **Scottish Government consultation process**

Consultation is an essential part of the policy-making process. It gives us the opportunity to consider your opinion and expertise on a proposed area of work.

You can find all our consultations online: <http://consult.scotland.gov.uk>. Each consultation details the issues under consideration, as well as a way for you to give us your views, either online, by email or by post.

Consultations may involve seeking views in a number of different ways, such as public meetings, focus groups, or other online methods such as Dialogue (<https://www.ideas.gov.scot>)

Responses will be analysed and used as part of the decision making process, along with a range of other available information and evidence. We will publish a report of this analysis for every consultation. Depending on the nature of the consultation exercise the responses received may:

- indicate the need for policy development or review
- inform the development of a particular policy
- help decisions to be made between alternative policy proposals
- be used to finalise legislation before it is implemented

While details of particular circumstances described in a response to a consultation exercise may usefully inform the policy process, consultation exercises cannot address individual concerns and comments, which should be directed to the relevant public body.



## CONSULTATION ON THE CONTINUING CARE (SCOTLAND) AMENDMENT ORDER 2018

### RESPONDENT INFORMATION FORM

**Please Note** this form **must** be completed and returned with your response.

Are you responding as an individual or an organisation?

- ☐ Individual  
☐ Organisation

Full name or organisation's name

Phone number

Address

Postcode

Email

The Scottish Government would like your permission to publish your consultation response. Please indicate your publishing preference:

- ☐ Publish response with name  
☐ Publish response only (without name)  
☐ Do not publish response

#### Information for organisations:

The option 'Publish response only (without name)' is available for individual respondents only. If this option is selected, the organisation name will still be published.

If you choose the option 'Do not publish response', your organisation name may still be listed as having responded to the consultation in, for example, the analysis report.

We will share your response internally with other Scottish Government policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for Scottish Government to contact you again in relation to this consultation exercise?

- ☐ Yes  
☐ No

## CONSULTATION ON THE CONTINUING CARE (SCOTLAND) AMENDMENT ORDER 2018

### QUESTIONNAIRE

Q1. Do you agree with the intention, as was stated during development of the 2014 Act, to increase the higher age limit for persons eligible for continuing care from nineteen to twenty years of age from April 2018 to ensure that the current cohort of young people continue to be eligible as they increase in age until the duty to provide continuing care extends from 16 to 21 years of age?

Q2. Do you have any other comments on this consultation on the Continuing Care (Scotland) Amendment Order 2018?





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## Draft Response

### Question 1

**Do you agree with our intention, as stated during development of the 2014 Act, to further increase the higher age limit for persons eligible for continuing care from nineteen to twenty years of age from April 2018 to ensure the current cohort of young people continue to be eligible as they increase in age until the duty to provide continuing care extends from 16 to 21 years of age?**

### Response

In West Lothian we are supportive of the proposed increase in higher age limit for young people eligible for continuing care from 19 to 20 years of age from April 2018. We believe that this will ensure that the current cohort of young people continue to be eligible for continuing care.

West Lothian Council supports the aim of Continuing Care to provide young people with a more graduated transition out of care, reducing the risk of multiple simultaneous disruptions occurring in their lives while maintaining supportive relationships.

However, it should be noted that it is expected that there will be an increase in demand for continuing care support going forward. The Scottish Government currently allocates £166,000 per annum to support the implementation of continuing care, however it is the view of West Lothian Council that this provision is under-funded by the Scottish Government and will ultimately result in a budget pressure. It is likely that each annual amendment to the Order will result in increased pressure on this budget.

We therefore ask that the implementation of Continuing Care be fully funded by the Scottish Government





## **SOCIAL POLICY POLICY DEVELOPMENT AND SCRUTINY PANEL**

### **SELF-DIRECTED SUPPORT POLICY**

#### **REPORT BY HEAD OF SOCIAL POLICY**

##### **A. PURPOSE OF REPORT**

The purpose of this report is to:

- Provide the Social Policy Policy Development and Scrutiny Panel with a further element of the progress of the Self-directed Support (SDS) implementation
- Seek the support of the PDSP to implement the proposed SDS policy.

##### **B. RECOMMENDATION**

It is recommended that the Social Policy PDSP:

- Notes the contents of the proposed SDS policy, which is intended to be submitted to the Council Executive for approval and
- Supports the implementation of the proposed SDS policy.

##### **C. SUMMARY OF IMPLICATIONS**

<b>I Council Values</b>	<ul style="list-style-type: none"><li>• Focusing on our customers' needs</li><li>• Being honest, open and accountable</li><li>• Providing equality of opportunities</li><li>• Developing employees</li><li>• Making best use of our resources</li></ul>	
<b>II Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)</b>	<b>Social Care (Self-directed Support)(Scotland) Act 2013</b>	which came into effect on 1 April 2014
	<b>Policy on the application of hourly rates for the purchase of registered agency services under Self-directed Support (SDS) option 2</b>	
	National Eligibility Criteria	
<b>III Implications for Scheme of Delegations to Officers</b>	None	
<b>IV Impact on performance and performance Indicators</b>	None at this time	
<b>V Relevance to Single Outcome Agreement</b>	Older people are able to live independently in the community with an improved quality of life	

	We live longer, healthier lives and have reduced health inequalities
<b>VI Resources - (Financial, Staffing and Property)</b>	The core budgets which relate to Self-directed Support eligible care and support have been identified for adults and older people and children with a disability. This proposed policy is designed to further support the equitable allocation of resources irrespective of the SDS option chosen.
<b>VII Consideration at PDSP</b>	N/A for this report
<b>VIII Other consultations</b>	Legal Services  Financial Management Unit  25 September 2017 Report to Audit Committee on the Audit Scotland Self-directed Support 2017 Progress Report

## **D. TERMS OF REPORT**

### **D.1 Introduction**

The Social Care (Self-directed Support) (Scotland) Act 2013 (the Act) came into effect on 1 April 2014. The Act makes legislative provisions relating to the arranging of care and support in order to provide a range of choices to individuals as to how they are to be provided with their support. The Act introduces the terminology of Self-directed Support (SDS) into statute and places a range of legal duties on local authorities.

The statutory duties within the Act include giving people assessed as eligible for support the choice of the SDS options:

- Option 1 – Direct Payment – a cash payment for the provision of support
- Option 2 – Individual Budget – the person selects their support and the council makes the arrangements
- Option 3 – council arranged support – the council selects and arranges the support
- Option 4 – a combination of the above

### **D.2 SDS Policy in West Lothian**

The recent Audit Scotland Self-directed Support 2017 Progress Report contained a number of key messages and recommendations which were reported to the Audit Committee on the 25 September 2017.

Included in the recommendations from Audit Scotland was;

- a need for local authorities to ensure that SDS is reflected in all policies and guidance
- A need for local authorities to provide clear guidance to enable effective discussion with staff and supported people and carers on the balance between innovation, choice and risk and local policy.

To date, West Lothian has not had a policy on SDS, favouring instead the embedding of the principles of SDS and the need for flexibility through our social work practice and supervision model.

The Audit Scotland progress report highlights the need for greater choice and control by supported people and their carers but also highlights the need for social work staff to feel empowered to make decisions with people.

The proposed SDS Policy provides West Lothian with a framework that will demonstrate the commitment to SDS for supported people and their carers; and will also provide social work staff with a framework to ensure that resources are applied in an equitable and consistent manner.

The SDS policy will better equip social work staff, increase their confidence and enable a greater focus to be placed on helping people choose the best option and support.

## **E. CONCLUSION**

The implementation of a policy framework for West Lothian will provide social work staff, supported people and their carers with a clear framework, and will ensure that SDS is formally adopted within the council's policies demonstrating West Lothian's strong commitment to the effective implementation of the 2010-2020 SDS strategy.

## **F. BACKGROUND REFERENCES**

Social Care (Self-directed Support)(Scotland) Act 2013  
Audit Scotland Self-directed Support 2017 Progress Report

Appendices/Attachments: Appendix 1 – (Proposed) SDS Policy

Contact Person: Pamela Main, Senior Manager, Community Care Assessment and Prevention  
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Jane Kellock, Head of Social Policy

2 November 2017





## **West Lothian Health and Social Care Partnership**

### **SELF-DIRECTED SUPPORT (SDS) POLICY**

Developed : 1 October 2017  
Approved : xxxxxx  
Review date : xxxxxx + 1 year

## Contents

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## 1. Introduction

The Social Care (Self-directed Support) (Scotland) Act 2013 (the Act) came into effect on 1 April 2014. The Act provides for assessing the needs of people and allowing a wide range of choices in how that care and support is provided to people.

## 2. Self-directed support (SDS) – definition

Self-directed Support (SDS) describes the ways people and families can have informed choice about the care and support provided to them. It improves people's outcomes by giving them greater choice and control over how their support needs are met and by whom.

## 3. Background and context

West Lothian Council has various duties including to:

- have regard to the principles of involvement, informed choice, collaboration, dignity and participation when carrying out its functions
- allow a person to be involved in the assessment process and provision of their support or services
- provide assistance to people thereby enabling them to express any views about the SDS options and to make an informed choice when choosing an option for SDS
- offer the person a choice, once their needs have been assessed, of the four SDS options for how the support or services will be provided and signpost them to sources of information and additional support as required
- inform the person of the relevant amount that may be available to meet their assessed needs and outcomes, taking into account any assessed personal contribution as defined in any relevant Council policies on contributions and charging
- respect the person's rights to dignity and participation in the life of the community in which they live
- take steps to promote the availability of the SDS options
- promote a variety of providers and types of support, in so far as is reasonably practicable

## 4. The four SDS options

Option 1	Direct Payment. A person chooses to receive a cash payment and uses this to arrange their own support
Option 2	A person chooses how their support is provided and the Council arranges it and manages the budget
Option 3	A person asks the Council to choose and arrange the support that is right for them
Option 4	A mix of options. This option lets a person pick the parts they want to decide about and the parts they would like to leave to the Council

## **5. General Principles**

- 5.1 The Social Work (Scotland) Act 1968 requires the Council to ensure resources are available to meet assessed eligible needs to a standard which will satisfy the Council the person's needs are being met.
- 5.2 Not everyone who asks for social care or support is assessed as eligible to receive it. Following assessment the Council is required to take account of the National Eligibility Criteria Framework. This has four levels of risk: critical, substantial, moderate and low. These all ensure services and support are provided equitably and to those with the greatest needs.
- 5.3 The Council supports people to retain or regain as much independence as possible. We will build on the person's capabilities and community capacity to achieve personal goals before considering formal care. This will be considered in the context of eligibility for services and support.
- 5.4 Where SDS Option 1 (a Direct Payment) is to be used to employ a family member this is not meant to replace an informal network or support provided to the person from the wider family or the community. The Council recognises the important role of unpaid carers, who are in some cases family members.
- 5.5 Any budget agreed to meet assessed eligible needs shall be comparable with that which would otherwise be spent by the Council to directly provide those services or support, and of an equivalent standard.

## **6. Assessment and Pathway to SDS**

### **Referral**

- A worker will analyse the person's situation along with information provided from family or the person etc, and decide if a more formal assessment is merited or whether advice, information or signposting to services or activities will be sufficient to meet the person's needs.

### **Assessment**

- If required an assessment will involve a worker assessing the situation to jointly identify needs and outcomes for the person. The worker will assess what informal or community supports are in use and how to promote independence as far as possible.
- The worker will adopt a strengths based approach, drawing on the person's capabilities and their networks, to work alongside any statutory services or support. A financial assessment (including income maximisation) may also be offered.
- If appropriate, a Child's Assessment will follow the national GIRFEC (Getting It Right For Every Child) practice model using the national wellbeing indicators.

- If a person is assessed as eligible for social care services or support the Council will advise of the relevant budget (after any assessed personal contribution) that will be made available.

### **Eligibility**

- The social care system has a finite amount of resources available. It is necessary to prioritise resources to provide care for those most in need. This is done through applying eligibility criteria that prioritises risk.
- Assessed eligibility may not result in the provision of statutory or funded services or supports, and identified needs and outcomes may continue to be met through informal or voluntary means.

### **Care and Support Planning**

- The worker will inform the person of the SDS options and plan with them how their assessed needs and outcomes will be met.

### **Monitoring and Review**

- The Council has a duty to undertake regular reviews, the frequency is dependent upon personal circumstances. A review will ensure the person is achieving the outcomes agreed in the support plan and where appropriate agree new ones. Based on the review the budget available, and the services and supports to meet needs and outcomes may be increased or decreased.
- A review or re-assessment can be requested by the person at any time, if circumstances change.

## **7. When SDS may be unsuitable or does not apply**

- 7.1 The Council has the discretion to not immediately offer a person the choice of the four SDS options and to defer that when:
- emergency care is required e.g. for a person in crisis
  - short term interventions are required e.g. for the immediate few weeks after hospital discharge or during reablement or targeted parenting programmes; or
  - a person is at immediate risk and the protection of the vulnerable person is the primary focus
- 7.2 For people living in housing with care, sheltered housing or assisted living / shared living models where the care or support they require is available within that setting the Council will consider that provision and may determine this to be sufficient to meet the person's needs. If that support or care is part of the person's housing choice and/or tenancy agreement then any assessed eligible need will be met through SDS option 3. It will not be possible for the person to receive alternative provision of care via other SDS options while living within that housing and having access to that that support/care.

7.3 The 2013 Act does not apply to services provided under a Compulsory Treatment Order in terms of the Mental Health (Care and Treatment)(Scotland) Act 2003 and treatment and testing orders made under the criminal justice system.

7.4 The 2013 Act excludes:

- The provision of long-term residential or nursing care by means of option 1, a direct payment
- Persons who have been assessed as lacking capacity having access to option 1, a direct payment. If a Power of Attorney or Guardianship Order is in place for the person they may select SDS option 1, a direct payment on the person's behalf.

## **8. The Allocation of Resources**

8.1 The Council uses resource allocation systems for the calculation of the amount of money that may be available to meet assessed needs and outcomes.

8.2 The allocation of resources is aligned to the council's budget strategy and budget setting processes. It sets aside the amount available to deliver social care services to those most in need based on agreed eligibility criteria.

8.3 As the assessment process progresses the council will consider the informal and community based supports and the support of natural networks (friends and family) already available to the person. Where appropriate we will also discuss the use of available technology as part of support planning.

8.4 We will take account of any benefits available to the person, and the impact this has on meeting assessed needs.

8.5 Notification of the relevant amount that may be available enables the person to choose their SDS option and begin their care and support planning. A budget is only confirmed once the co-produced care and support plan is finalised and agreed.

8.6 Any agreed budget must be utilised to meet assessed needs and outcomes. It cannot be used for other supports, unless specifically agreed with the Council. For example, if an assessed need relates to meeting outcomes under 'meeting personal needs and looking after myself', then the budget amount allocated for this must be used for personal care needs. It cannot be used for tasks associated with other areas of an assessment, such as socialisation or transport.

8.7 If a person wishes to purchase services at a higher cost than the budget they have been assessed as eligible to receive they may choose to pay the difference. The Council will only agree to this where the service the person wishes to use is legal, safe and able to meet the assessed needs and outcomes. The Council will also ensure the service level for the user remains consistent with the care plan. The Council reserves the right to redirect payments or services if the person's or another's contribution to services/support will have an adverse or detrimental impact on the person, their network or needs.

- 8.8 A review of needs and progress towards achieving outcomes may result in a decrease from any previously advised relevant amount or agreed actual budget.
- 8.9 If the SDS option chosen by a person is subsequently withdrawn by the Council due to misappropriation of funds (option 1) or failure of the service or support chosen by the person (option 2) the Council reserves the right to request the person to make alternative provisions to meet their needs. In practice this is likely to be through option 3. Appropriate notice with reasons shall be provided by the Council to the person before this takes effect.
- 8.10 The Council shall not offer SDS options if it is likely to put the person at risk. This determination rests with the assessor as part of their professional assessment.

## **9 Complaints**

- 9.1 Any person who is not satisfied with the level of resources they have been allocated should discuss this with their worker. In the event these discussions do not resolve the issue a person may instigate a complaint under the Council's Social Work Complaints Procedure.

## **10. The wider legislative and policy context**

This policy complies with the following core legislation which continues to be the legal basis for assessment in respect of the Social Care (Self-directed Support)(Scotland) Act 2013:

- Section 12A of the Social Work (Scotland) Act 1968 – duty to assess an adult's need for care and support
- Section 12AA of the Social Work (Scotland) Act 1968 – the basis for the assessment for carers of adults
- Section 22 and 23 of the Children (Scotland) Act 1995 – the legal basis for support to children
- Section 24 of the Children (Scotland) Act 1995 – the basis for the assessment for carers of children
- The Carer's (Scotland) Act 2016
- Self-directed Support (Direct Payments)(Scotland) Regulations 2014 – this policy does not seek to replicate the content of the statutory guidance accompanying the 2013 Act

This policy should be read in conjunction with the following:

- Application of hourly rates for the purchase of registered services under SDS option 2
- <http://www.gov.scot/Publications/2014/04/5438/downloads> Scottish Government Guidance







## **SOCIAL POLICY - POLICY DEVELOPMENT AND SCRUNITY PANEL**

### **ALCOHOL DIVERSIONARY ACTIVITIES**

#### **REPORT BY HEAD OF SOCIAL POLICY**

##### **A. PURPOSE OF REPORT**

The purpose of this report is to inform the panel of the application submitted to the Alcohol Diversionary Fund and to seek agreement that funds are released to undertake the activities detailed within the application.

##### **B. RECOMMENDATION**

It is recommended that the Social Policy PDSP notes the application submitted to the Alcohol Diversionary Fund that is intended to be submitted to the Council Executive to agree the release of £4,000 to support the application made by Deans Community High School.

##### **C. SUMMARY OF IMPLICATIONS**

<b>I Council Values</b>	Focusing on our customers' needs; being honest, open and accountable; making best use of our resources; working in partnership
<b>II Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)</b>	None
<b>III Implications for Scheme of Delegations to Officers</b>	None
<b>IV Impact on performance and performance Indicators</b>	Reduction in the number of underage drinking and antisocial behaviour calls registered with the Community Safety Unit.
<b>V Relevance to Single Outcome Agreement</b>	People most at risk are protected and supported to achieve improved life chances.  We live longer, healthier lives and have reduced health inequalities.
<b>VI Resources - (Financial, Staffing and Property)</b>	The budget for 2017/18 is £100,000
<b>VII Consideration at PDSP</b>	None
<b>VIII Other consultations</b>	Livingston North Local Area Committee on 21 <sup>st</sup> September 2017 ADP Alcohol Diversionary Fund Sub-Group on 10 <sup>th</sup> October 2017

## **D1 TERMS OF REPORT**

### **Background**

A new governance process for the Alcohol Diversionary Funding was approved by the Council Executive on 21<sup>st</sup> January 2014, placing the responsibility for this funding within Social Policy.

The report submitted and approved by the Council Executive, referenced both the Social Policy PDSP and Council Executive role within the new process.

The application detailed in this paper has met the West Lothian Alcohol Drug Partnership (ADP) Joint Commissioning Plan outcomes as assessed by the Alcohol Diversionary Fund Subgroup meeting on 10<sup>th</sup> October 2017.

## **D2**

### **CURRENT POSITION**

There is one application recommended by the ADP Alcohol Diversionary Fund Subgroup. Brief details are:

<b>ADP Partner</b>	<b>Project Name</b>	<b>Funding Request 2017/18</b>
Deans Community High School	Friday Night Project	£4,000

### **E. CONCLUSION**

The Social Policy PDSP is asked to note the ADP Subgroup recommendations for Alcohol Diversionary Funding and to agree that the application proceeds through to the Council Executive.

### **F. BACKGROUND REFERENCES**

None

Appendices/Attachments:

Appendix 1 – Application form for “Friday Night Project” Deans Community High School

Contact Person: Alan Bell, Senior Manager, Community Care Support and Services  
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Tel: 01506 281937

Jane Kellock, Head of Social Policy  
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Date of meeting: 2<sup>nd</sup> November 2017



# Application Form

The West Lothian ADP Youth Alcohol Diversionary Fund application form is split into several sections covering different aspects of your initiative or project. Please take some time to ensure the main points are covered in the appropriate place.

Section 1 – Submission details	
ADP Partner	Deans Community High School
Name of Key Contact	PC Paul Corner
Project Title / Name	Friday Night Project
Have you applied for funding for this same initiative before?	Yes
<i>If so, an evaluation must have been carried out AND attached before completing the following sections</i>	

Section 2 – The Project	
What outcome targets are set for the project?	<p>The Friday Night Project (FNP) was started in September 2011 by Lothian and Borders Police in partnership with Deans Community High School in response to concerns about young people in the area engaging in under age alcohol consumption and other risk behaviours particularly on Friday evenings.</p> <p>The project operates at Deans Community High School on alternate Fridays 19:00 – 21:00 providing a range of activities for young people including arts, crafts and music lead by school volunteers and senior students.</p> <p>The Friday Night Project also promotes physical activity by offering a variety of sports delivered by community sport coaches, senior pupils and in partnership with local community</p>

	<p>sports clubs.</p> <p>Between 20 and 30 S5 students receive a Personal Development Certificated Award due to attending and leading activities fortnightly</p> <p>In addition, these senior students, sports coaches and staff are offered training opportunities in health &amp; well-being or governing body qualifications to enhance their own personal development by working with vulnerable students from the local community.</p>
What ward areas will the project cover?	<p>The majority of attendees are from the Livingston North Ward, however we also have attendees from Livingston South and Livingston East as well as areas outwith Livingston. On average, 150 young people attend. Those who attend include young carers, looked after children and children classed as being vulnerable. We have had students from outside West Lothian on several occasions.</p>
Who are the intended beneficiaries of the project?	<p>The intended beneficiaries of this project are all of the attendees and the S5 Personal Development class. The project ran very successfully in 2016-2017 attracting, on average, approx. 150 young people per fortnight offering a diverse programme of activities.</p> <p>Notable features of the project were successes in attracting so many young people known to be vulnerable from the Livingston North ward.</p> <p>The project relies on school and community volunteers as well as senior school pupils to ensure sustainability in this project for the foreseeable future.</p>
Which of the National Outcomes does the project cover?	<p>The Friday Night Project achieves the following outcomes in the West Lothian Council Single Outcome Agreement 2013-2023:</p> <ul style="list-style-type: none"> <li>• Outcome 2 2 – We are better educated and have access to increased and better quality learning and employment opportunities.</li> <li>• Outcome 6 – We live longer, healthier lives and have reduced health inequalities.</li> </ul> <p>The Friday Night Project achieves the following outcomes in the West Lothian Education Services Management Plan 2016-2017</p> <ul style="list-style-type: none"> <li>• Priority 3 – Improving attainment and positive destinations for school children.</li> <li>• Priority 7 – Delivering positive outcomes on health.</li> </ul>

<p>What local priorities/ outcomes does the project cover?</p>	<p>The Friday Night Project achieves the following outcome in the West Lothian Education Services Management Plan 2016-2017:</p> <ul style="list-style-type: none"> <li>• Priority 3 – Improving attainment and positive destinations for school children</li> <li>• Priority 7 – Delivering positive outcomes on health.</li> </ul> <p>The Friday Night Project achieves the following outcomes in the West Lothian Active Strategy 2</p> <ul style="list-style-type: none"> <li>• Outcome 1 – Encourage and enable the inactive to become more active.</li> <li>• Outcome 4 – We improve our active infrastructure – people and places.</li> <li>• Outcome 5 – We support wellbeing and resilience – people and places.</li> </ul> <p>The Friday Night Project achieves the following outcome in the Curriculum for Excellence achieved through the Certificated Qualification:</p> <p><b>Experiences and outcomes:</b></p> <p>The following are some of the experiences and outcomes relating to the Friday Night Project. These experiences are taken from the Health and Wellbeing experiences and outcomes. They were identified when organising a Glow Meet with the feeder primary schools which were conducted in March 2016. These were led by the S5 Students from the Friday Night Project Personal Development class on the activities and benefits of the Friday Night Project.</p> <p>The Glow Meet is part of Deans Community High School's policy of developing and improving the P7 to S1 transition.</p> <p><i>Through taking part in a variety of events and activities, I am learning to recognise my own skills and abilities as well as those of others.</i></p> <p><b>HWB 1-19a</b></p> <p><i>Within and beyond my place of learning I am enjoying daily opportunities to participate in physical activities and sport, making use of available indoor and outdoor space.</i></p> <p><b>HWB 1-25a</b></p> <p><i>I recognise that each individual has a unique blend of abilities</i></p>
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	<p><i>and needs. I contribute to making my school community one which values individuals equally and is a welcoming place for all.</i></p> <p><b>HWB 0-10a / HWB 1-10a / HWB 2-10a / HWB 3-10a / HWB 4-10a</b></p> <p><i>I understand that my feelings and reactions can change depending upon what is happening within and around me. This helps me to understand my own behaviour and the way others behave.</i></p> <p><b>HWB 0-04a / HWB 1-04a / HWB 2-04a / HWB 3-04a / HWB 4-04a</b></p> <p><i>I value the opportunities I am given to make friends and be part of a group in a range of situations.</i></p> <p><b>HWB 0-14a / HWB 1-14a / HWB 2-14a / HWB 3-14a / HWB 4-14a</b></p>
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## Section 2 – The Project

<p>How does the project meet the Equalities and Diversity Agenda?</p>	<p><b>Equality is relevant to us all. Addressing discrimination and promoting equality are everyone's core business (West Lothian Council).</b></p> <p>Central to the council's policy is the prevention of discrimination, victimisation and harassment; particularly in relation to the following protected characteristics:</p> <ul style="list-style-type: none"> <li>age;</li> <li>disability;</li> <li>gender reassignment;</li> <li>marriage and civil partnership;</li> <li>pregnancy and maternity;</li> <li>race;</li> <li>religion or belief;</li> <li>sex;</li> <li>sexual orientation</li> </ul> <p>The above West Lothian Standard is important to those running The Friday Night Project. They ensure it is fully inclusive and staff, volunteers and student helpers all receive training in relation to diversity in accordance with West Lothian Council's policy.</p>
<p>How does the project demonstrate positive engagement with the local community?</p>	<p>Throughout the year specialist workshops were invited such as West Lothian Drugs and Alcohol Service or Youth Action to educate and promote the issues associated with drugs and alcohol.</p> <p>Community sports clubs are also invited to promote local community sport to encourage young people to get active</p> <p>The project also continues to maintain close liaison with the Council Community Youth Services (Livingston North Youth Providers Forum) and other youth workers to avoid duplication of effort and ensure developments are co-ordinated in partnerships.</p> <p>So far, we have provided the following activities provided by outside agencies and Community Sports Clubs:</p> <ul style="list-style-type: none"> <li>• Linlithgow Fencing Club</li> <li>• Burn it Bootcamp</li> <li>• Black Diamonds Cheer and dance club</li> <li>• West Lothian Handball Club</li> <li>• Linlithgow Judo Club</li> <li>• Inflatable Night – parent of students</li> <li>• Hearts FC Football Coaching</li> <li>• Scottish Fire and Rescue service</li> <li>• Livingston and West Lothian Hockey Club</li> </ul> <p>Other activities delivered by staff, volunteers of the project as well as 5th and 6th year students have included:</p> <p>Football, gymnastics, drama, chill out zone, nails art, and music workshops, table tennis, volleyball, basketball, badminton, Hockey,</p>

	American Pool, arts and crafts.
How will your project be advertised/ publicised?	Through the S5 Personal Development Class, posters around school, and school, assemblies. Word of mouth continues to be the best form of advertisement encouraging students from other schools and other areas of Scotland to attend. The project is also advertised on the school website.
Explain what is new and innovative about this project?	<p>The Friday Night Project has gone from strength to strength over the years and its success has been down to a number of key contributors:</p> <ul style="list-style-type: none"> <li>• Core school volunteer commitment</li> <li>• Community and school club links</li> <li>• Pupil led</li> <li>• Utilisation of Deans CHS facilities including access to the music department classrooms</li> <li>• Evidence that consumption of alcohol has been reduced as a result of the Friday Night Project</li> <li>• Evidence that the quality of relations between the young people and school staff has improved as a result of the Friday Night Project</li> <li>• The project has been nominated for and won Two West Lothian Council Stellar Awards (Team of the Year 2012/Peer Support 2013) and commended for the West Lothian Council Celebrating Success (Healthier and Greener Category).</li> <li>• 26 students from the Personal Development class completed the Eclipse introduction to Peer Education which included basic counselling, working in groups and child protection.</li> <li>• 12 students from the Personal Development class completed their Basic First Aid Training.</li> <li>• 26 students from the Personal Development class achieved received their Personal Development Qualification.</li> <li>• 18 S3-S6 completed their "Basketball Getting Started" qualification with Basketball Scotland.</li> </ul>
Is this a short term or long term solution/intervention?	<p>This project has now been running for seven years and has grown in popularity. Police, school staff, partner agencies and locally elected members are aware of the popularity and success of this project and all agree it is a major contributing factor to the reduction to youth calls, antisocial behaviour and the consumption of alcohol by young people. . We aim to continue to run the Friday Night Project fortnightly based at Deans Community High School from 19:00 – 21:00 during the school academic year.</p> <p>To continue to offer a FREE-OF-CHARGE Friday Night Project</p>



	<p>provision.</p> <p>We will continue to work in partnership with key agency staff within West Lothian Council.</p> <p>We will use the Friday Night Project as a platform to engage and educate young people of the importance of keeping themselves and others safe.</p> <p>The Friday Night Project promotes physical activity by offering a variety of sports delivered by community sport coaches, senior pupils and in partnership with local community sports clubs.</p>		
<p>Please give an outline of the project that will be undertaken including how the project need was identified and its relevance to the West Lothian ADP</p> <p>(maximum 500 words)</p>	<p>The overall purpose of the Friday Night Project is that young people will be diverted from drinking alcohol and being involved in risk taking and other anti-social behaviours. Young people will develop the skills, knowledge and support to help them make positive choices about their approach to alcohol and keeping themselves safe. They will also take part in constructive activities and develop healthy interests and relationships with others which they can pursue on a regular and on-going basis in a safe, controlled environment.</p> <p>In addition to ongoing informal discussions (ABI's) that are designed to help reduce alcohol consumption and risk taking behaviour, the activity programmes will include several events specifically designed to educate young people on harm and risk associated with alcohol consumption.</p> <p>These will include workshops and sessions led by WLDAS and Do More Drink Less and Police Scotland Officers as well as quizzes, games and handouts.</p> <p>Information and reinforcement on the positive health benefits of avoiding alcohol consumption will be provided as part of some activities led by sports coaches, visiting clubs and youth workers. Leadership training for volunteers and sessional staff will include alcohol education and interventions. The young people who volunteer on the project will provide alcohol education as peer educators of slightly younger pupils.</p>		
Project Start Date	<b>Sept 2017</b>	Project End Date	<b>June 2018</b>

### Section 3 – Resources

How much are you applying for the Fund?	£4,000
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What is the total cost of the project?	<p>Total projected costs for 2017-2018 = £4,690.00</p> <p><i>Breakdown as follows:</i></p> <p>4 X Specialist workshops = £1000.00</p> <p>3 X Child Protection Training for volunteers = £90.00</p> <p>3 X First Aid Training for volunteers = £90.00</p> <p>8 X national governing body qualifications = £360.00</p> <p>New sporting and equipment cost = 1500.00</p> <p>2 X Inflatable evenings = £900.00</p> <p>30 X volunteer polo top uniforms = £750.00</p>
What other funding sources have you obtained, including in-kind / matched funding?	<ul style="list-style-type: none"> <li>• 6 school volunteers per fortnight X 2.5 hrs X 19 weeks = 285 hours</li> <li>• Full access to facilities at Deans Community High School</li> <li>• Lead partner agency support – Lothian Border Police X 2.5hrs X 19 weeks = 47.5 hours</li> <li>• 20 senior school pupils per fortnight X 2.5 hrs X 19 weeks = 950 hours</li> <li>• 4 other senior school pupils per fortnight X 2.5 hrs X 19 weeks = 190 hours</li> <li>• Community Sport Input</li> <li>• Specialist West Lothian council input – WLDAS, Youth Action</li> <li>• West Lothian resources such as material and equipment</li> <li>• West Lothian administration and marketing</li> </ul>
What staffing resources are required to deliver the project?	This project is delivered by all on a volunteer basis.
What partner organisations are involved and what will be their contribution?	<p>The Friday Night Project is well supported by school volunteers and is effective in engaging with young people.</p> <p>The new school pupil volunteers will work closely with community volunteers with a view to develop their confidence to lead sessions in the future.</p> <p>The project lead is responsible for between 20 and 30 S5 students Personal Development Certificate. The main driver for promoting, developing and leading the programme</p> <p>Throughout the year specialist workshops were delivered by West Lothian Drugs and Alcohol Service and Do More Drink Less to educate and promote the issues associated with alcohol</p> <p>A variety of sporting qualifications will be provided by Active Schools West Lothian to enhance the leadership skills of the coaches and school volunteers.</p>
Highlight how applicants will work together to reduce duplication of service and	Deans Community High School will work with West Lothian Council services to provide the best service for young people. For example, The Friday Night Project is represented at the Livingston North Youth Providers quarterly meetings and provide regular updates at this forum

resources.	and invite other council services users to get involved.
Please provide evidence of how this project demonstrates preventative spend?	The requested funding of this project (£4,000) is a considerably lower sum of money than the cost of tackling and responding to increased youth calls, anti social behaviour and consumption of alcohol by young people by Police, health and social policy and other partner agencies. This demonstrates excellent value for money in preventing all the types of behaviours and issues listed above.

Section 4 – Monitoring and Evaluation	
How will you evaluate this project?	<p>Staff will regularly review the following and are able to detail that the following objectives are being met:</p> <ul style="list-style-type: none"> <li>• The number of young people attending on a fortnightly basis</li> <li>• Young people are more aware of risk and issues associated with alcohol and drugs misuse</li> <li>• Young people gain confidence</li> <li>• Young people increase their confidence</li> <li>• Young people join/attend community sport clubs</li> </ul>
What monitoring data will be collected for the project?	<ul style="list-style-type: none"> <li>• Registration is taking on a fortnightly basis at the start of each session</li> <li>• School noticeboards will be updated regularly by the school pupil volunteers</li> <li>• The number of ABI's (Alcohol Brief Interventions) will be recorded</li> <li>• Regular contact between the project and the Police Public Protection Unit takes place to establish if any of the attendees of the project are referred for alcohol consumption, anti-social behaviours and risk taking behaviours</li> <li>• School volunteers will have a number of opportunities to attend specialised training courses</li> </ul>
What outcomes will you achieve?	<ul style="list-style-type: none"> <li>• Attendance both in school and in the project</li> <li>• The % of young people who attend who state that they have reduced their alcohol consumption</li> </ul>

	<ul style="list-style-type: none"> <li>• The % of young people who report an increase in confidence</li> <li>• The % of young people who report an increase in their skills development and relationships with peers</li> <li>• The % of young people who state that they have enjoyed the project and are likely to take part in the future</li> </ul>
What impact will the project have?	As above
Note any possible barriers or threats.	None known

### Section 5 – Validation

This part of the application verifies that all partners are happy with the content and intention contained within the application. For electronic copies received without a signature, the funding panel will assume that all the relevant permissions/approvals and evidence have been sought and attached by the applicant.

#### Signed on behalf of the project

<b>Name</b> Paul Corner	<b>Organisation</b> Police Scotland	<b>Position</b> Police Constable
<b>Signed</b> [REDACTED]	<b>Date</b> 5/7/17	<b>Telephone number</b> [REDACTED]

### Section 6 – Your Organisation

ADP / CPP Partner	Deans Community High School
Name of Key Contact	PC Paul Corner
Position in Partnership/ Organisation	School Liaison Police Officer
Correspondence Address	C/o Deans Community High School, Eastwood Park, Livingston

**DATA LABEL: PUBLIC**

Post Code	<b>EH54 8PS</b>
Tel Number	<b>[REDACTED]</b> <b>[REDACTED]</b>
Email Address	<b>[REDACTED]</b> <b>[REDACTED]</b>
Website	

Section 7– Evaluation (POST PROJECT)	
ADP Partner	<b>Deans Community High School</b>
Name of Key Contact	PC Paul Corner
Tel Number	██████████
Project Title / Name	<b>Friday Night Project</b>
Was the strategic outcome(s) met?	
How do you know you effected change ?	
What quantifiable outcomes were there?	
What evaluation method did you use?	
Was it value for money?	
What barriers did you face?	
What lessons were learned?	
Has this alleviated the problem or does this issue still exist? What will be the long term solution?	

**DATA LABEL: PUBLIC***For Office Use Only*

<i>Reference Number</i>	
<i>Date Received</i>	
<i>Form of Submission</i>	<input type="checkbox"/> <i>Email</i> <input type="checkbox"/> <i>Post</i>
<i>Checked for Completion by</i> <i>(all relevant information is included in form)</i>	
<i>Date Summary Completed</i>	
<i>LAC meeting date</i>	
<i>LAC decision</i>	<input type="checkbox"/> <i>Progress</i> <input type="checkbox"/> <i>Unsuccessful</i>
<i>Op ADP date</i>	
<i>Op ADP recommendation</i>	<input type="checkbox"/> <i>Progress</i> <input type="checkbox"/> <i>Unsuccessful</i>
<i>Final Outcome post Council Executive</i>	
<i>Date Evaluation Received (post project completion)</i>	







## **SOCIAL POLICY – POLICY DEVELOPMENT SCRUTINY PANEL**

### **SOCIAL POLICY CONTRACT ACTIVITY UPDATE**

#### **REPORT BY HEAD OF SOCIAL POLICY**

##### **A. PURPOSE OF REPORT**

In accordance with the Council's Standing Orders and West Lothian CHCP's Health, Care and Support Services Procurement Procedures this report provides an update on contracting activity for the provision of care and support services for the period 1 April 2017 to 30 September 2017.

##### **B. RECOMMENDATION**

It is recommended that the Social Policy PDSP:

1. Notes the contacting activity for the provision of care and support services for the period 1 April 2017 to 30 September 2017.
2. Recognises the on- going development of clear contractual agreements between the council and providers of care and support services.

##### **C. SUMMARY OF IMPLICATIONS**

<b>I Council Values</b>	<ul style="list-style-type: none"><li>• Focusing on our customers' needs</li><li>• Being honest, open and accountable</li><li>• Making best use of our resources</li><li>• Working in partnership</li></ul>
<b>II Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)</b>	European Union Treaty Principles, European Procurement Directives, Public Contracts (Scotland) regulations 2006, West Lothian Council Standing Orders, Social Policy Procurement Procedures.
<b>III Implications for Scheme of Delegations to Officers</b>	The Depute Chief Executive (CHCP) has delegated powers for the contracting and commissioning of Part B services.
<b>IV Impact on performance and performance Indicators</b>	None
<b>V Relevance to Single Outcome Agreement</b>	All contracts have outcome measures consistent with the Single Outcome Agreement

	commitments for the provision of care and support services
<b>VI Resources - (Financial, Staffing and Property)</b>	Provision within the 2017/2018 revenue budget
<b>VII Consideration at PDSP</b>	Social Policy Contract Activity Report dated 25 May 2017 contained the activity for the period 1 October 2016 to 31 March 2017.
<b>VIII Other consultations</b>	Legal Services, Financial Management Unit and Corporate Procurement Unit are all represented at the Contracts Advisory Group (CAG).

## **D. TERMS OF REPORT**

Under the council's Health, Care and Support Services Procurement Procedures the Head of Social Policy is required to report bi-annually to Social Policy PDSP on the care and support contracts awarded or extended within this period and any general update on contract activity. There is also a requirement to report bi-annually on contract performance.

### Contract activity

Appendix 1 details the Social Policy contracts which have either been awarded or amended under the guidance of the Social Policy Contracts Advisory Group.

### Contract performance

A total of fifteen providers (from a total of eighty four) attracted a risk score which required more intensive monitoring as follows;

- Red (high risk) – one provider with a high volume of reported incidents continued to be managed through adult support and protection protocol. Two others was monitored on a regular basis through performance reporting and meetings.
- Amber (medium risk) – twelve providers. Four providers operate under a framework which continues to underperform in relation to delayed discharge and timing of pick-up of packages in the community. Six providers assessed as higher risk due to concerns about financial risk. One providers where contract award is within the last six months which automatically generates a higher risk rating and one other which may be affected by service change.

## **E. CONCLUSION**

The report provides an update for the period 1 April 2017 to 30 September 2017 on the council's contract activity for the provision of care and support services in West Lothian as required under Council Standing Orders and Procurement Procedures.

## **F. BACKGROUND REFERENCES**

- Council Executive: Social Policy Procurement Procedures 3 May 2011

Appendices/Attachments:

Appendix 1 – contracts awarded during period 1 April 2017 to 30 September 2017

Contact Persons:

Alan Bell, Senior Manager Community Care Support and Services

[Alan.bell@westlothian.gov.uk](mailto:Alan.bell@westlothian.gov.uk)

Tel 01506 281937

**Jane Kellock**

**Head of Social Policy**

Date: 2<sup>nd</sup> November 2017

**SOCIAL POLICY CONTRACT ACTIVITY UPDATE 1 April 2017 to 30 September 2017**
**Appendix 1**

<b>Provider</b>	<b>Total Contract Value</b>	<b>End Date</b>	<b>Comments</b>	<b>CAG Meeting Date</b>
Thera Scotland	£35,000	21/6/2020	New contract	
Leonard Cheshire	£2,133,076	30/9/18	Direct Award	13/6/17
Scottish Huntington's Association	£42,063	31/3/21	Renegotiated contract for 3 year period.	13/6/17
Food Train	£440,200	31/3/20	2 year extension	25/7/17
Cyrenians	£537,768	30/7/19	Direct award	25/7/17

### Social Policy – Policy Development and Scrutiny Plan – Workplan

Title	Responsible Officer	Date of PDSP	Reports to be finally submitted
January 2018			
Alcohol Diversionary Fund Applications	Alan Bell	11 <sup>th</sup> January	
March 2018			
Alcohol Diversionary Fund Applications	Alan Bell	8 <sup>th</sup> March	
Children's Social Work Statistics Scotland	Jo MacPherson	8 <sup>th</sup> March	
April 2018			
Contract Activity Report	Alan Bell	26 <sup>th</sup> April	
Social Policy Management Plan	Alan Bell	26 <sup>th</sup> April	
Alcohol Diversionary Fund Applications	Alan Bell	26 <sup>th</sup> April	