DATA LABEL: Public

# *Health and Care Policy Development and Scrutiny Panel*

West Lothian Civic Centre
Howden South Road
LIVINGSTON
EH54 6FF

27 May 2021

A meeting of the **Health and Care Policy Development and Scrutiny Panel** of West Lothian Council will be held within the **Webex Virtual Meeting Room** on **Thursday 3 June 2021** at **2:00pm**.

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 the Panel held on 29 April 2021 (herewith).

5. Herbert Protocol - report by Head of Social Policy (herewith).

6. West Lothian HSCP ACAST Pilot with Police Scotland - report by Nick Clater (herewith).

7. Performance Report - Annual Indicators - report by Head of Social Policy (herewith).

8. NHS Lothian Board - report by Depute Chief Executive (herewith).

9. Social Policy Management Plan 2021-2022 - report by Head of Social Policy (herewith).

10. Workplan (herewith).

---

NOTE **For further information please contact Lorraine McGrorty on 01506 281609 or email lorraine.mcgrorty@westlothian.gov.uk**

MINUTE of MEETING of the HEALTH AND CARE POLICY DEVELOPMENT AND SCRUTINY PANEL held within WEBEX VIRTUAL MEETING ROOM, on 29 APRIL 2021.

Present – Councillors Harry Cartmill (Chair), George Paul, Pauline Clark, David Dodds, Damian Doran-Timson, Bruce Fairbairn, Andrew McGuire, Pippa Plevin (Joint Forum of Community Councils) (substituting for Ann Greechan)

Apologies - Ann Greechan (Joint Forum of Community Councils Representative)

1. DECLARATIONS OF INTEREST

There were no declarations of interest made.

2. MINUTES

The panel approved the minute of its meeting held on 18 February 2021 as a correct record.

3. THE DEVELOPMENT OF HOME FIRST - NEXT STEPS

The panel considered a report (copies of which had been circulated) by the Depute Chief Executive providing an overview of the work underway to progress the integration of community services as outlined in the Older People's Commissioning Plan and in line with the Home First principles.

It was recommended that the panel:

1. note the work underway to progress the integration of community services as outlined in the Older People's commissioning Plan and in line with Home First principles

2. note the commencement of planning to reconfigure the community bed base.

Decision

To note the terms of the report.

4. MARKET FACILITATION PLAN

The panel considered a report (copies of which had been circulated) by the Depute Chief Executive informing of the updated IJB Market Facilitation Plan. The plan offers a basis for collaborative working between the West Lothian Health and Social Care Partnership, service providers, service users, carers and other community stakeholders in the delivery of health and social care services across West Lothian.

It was recommended that the panel note the contents of the Market

Facilitation Plan 2019-2023, which had been updated following review.

Decision

To note the terms of the report.

5. PERFORMANCE REPORT

The panel considered a report (copies of which had been circulated) by the Depute Chief Executive reporting the current level of performance for the quarterly indicators up to quarter 3 of 2020-21 that support the Corporate Plan and are the responsibility of Social Policy and reportable to the panel.

It was recommended that the panel note the performance information and determine if further action or enquiry is necessary for any of the performance indicators in the report.

Decision

To note the terms of the report.

6. INTEGRATION JOINT BOARD MINUTE

The panel considered a report (copies of which had been circulated) by the Depute Chief Executive updating on the business and activities of West Lothian Integration Joint Board.

It was recommended that the panel note the terms of the minutes of West Lothian Integration Joint Board dated 19 January 2021 and 18 March 2021 detailed in the appendices with the report.

Decision

To note the terms of the report.

7. NHS LOTHIAN MINUTES

The panel considered a report (copies of which had been circulated) by the Depute Chief Executive updating on the business and activities of Lothian NHS Board.

It was recommended that the panel note the terms of the minutes of Lothian NHS Board dated 9 December 2020 detailed in the appendix to the report.

Decision

To note the terms of the report.

8. HEALTH AND CARE PDSP TIMETABLE 2020/21

A timetable of meetings had been circulated for information.

Decision

To note the timetable of meetings.

9. HEALTH AND CARE PDSP WORKPLAN

A workplan had been circulated for information.

Decision

To note the workplan.

DATA LABEL: PUBLIC

West Lothian Council

**HEALTH AND CARE POLICY DEVELOPMENT AND SCRTINY PANEL**

**HERBERT PROTOCOL**

**REPORT BY HEAD OF SOCIAL POLICY**

## A. PURPOSE OF REPORT

The purpose of this report is to inform the Health and Care PDSP with information regarding the Herbert Protocol.

## B. RECOMMENDATION

The panel is asked:

1. To note the Herbert Protocol is an aid to assist Police enquiries in the event of a missing person.
2. To note Police Scotland's J Division including West, Mid and East Lothian and Scottish Borders are participating in the initiative.
3. To note the Herbert Protocol will be launched on 31 May 2021 to coincide with Dementia Awareness week.

## C. SUMMARY OF IMPLICATIONS

| | | |
|---|---|---|
| I | **Council Values** | Focusing on our customers' needs; being honest, open and accountable; providing equality of opportunities; developing employees; making best use of our resources; working in partnership |
| II | **Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)** | Social Work (Scotland) Act 1968<br><br>Community Care and Health (Scotland) Act 2002<br><br>Data Protection Act 2018 |
| III | **Implications for Scheme of Delegations to Officers** | None |
| IV | **Impact on performance and performance Indicators** | None |
| V | **Relevance to Single Outcome Agreement** | Delivering positive outcomes on health<br><br>Improving the quality of life for older people |
| VI | **Resources - (Financial, Staffing and Property)** | None |

**VII Consideration at PDSP** None

**VIII Other consultations** None

## D. TERMS OF REPORT

### D.1 BACKGROUND

The Herbert Protocol is a national scheme which encourages carers, family and friends to collate useful information on one form, which can quickly be accessed and then used in the event of a vulnerable person going missing. The initiative is named after George Herbert, a War veteran of the Normandy landings, who lived with dementia and sadly died while he was 'missing' on his way to visit his childhood home.

Police research shows that fatalities decrease significantly when a person is found within 12 hours of the 'last time seen'. Delays in initiating a search can be affected by several factors:

- The time it takes for the family/caregiver to notice or realise the person is missing
- The time it takes to contact the police
- The intimal police response
- The time it takes to gain the information about the person and intelligence about where they may have gone (this will inform the search parameters
- The time that police take to initiate a formal planned search
- The time it takes to commence the search

When someone with dementia goes missing, the safeguarding clock is ticking. The Herbert Protocol can help reduce delays in mounting an effective search response.

### D.2 THE PROTOCOL

The protocol consists of a simple form that contains valuable information about the person that can be passed to the police at the point they are reported missing.

Information gathered can include but not limited to the individual's personal details and photograph, description, medical information, personal circumstances. It is also helpful to record work history, favourite places, hobbies and living patterns. Often people with dementia are found heading towards places which have a particular significance to them.

The Herbert Protocol form should be completed by the individual(s) who know the person best. This may be either a care provider, a family member, a close associate, or in some cases by the person themselves. In a care setting, the care provider should seek permission from either the person at risk or their next of kin. If this isn't possible then the care provider should make a 'best interests' assessment. The form should be updated on a regular basis, whenever there is a change to the person's circumstances.

The form should be kept in a safe place within the care setting, but where it is easily accessible and can be found quickly. A common place for the protocol and similar forms to be kept is behind the person's front door or attached to their fridge. It is only necessary to provide the form to the police at the point the person is reported missing.

If the individual is reported missing, the form can be passed to the police saving valuable time and will greatly reduce stress associated with trying to recall detailed information in an emergency.

The protocol form is included in Appendix 1.

## D.3 DATA PROTECTION

In the event of a missing person, the information provided on the from will be recorded by police officers on police systems in order to trace the individual, it will be used for no other purpose and can be handed back or destroyed. The police may share information with statutory agencies who have support, welfare or health responsibilities such as:

- Local Authority Health and Social Care services
- NHS
- Scottish Fire and Rescue Service

The information provided will be processed on the basis of public task and substantial public interest in safeguarding in accordance with the General Data Protection and the Data Protection Act 2018.

## E. CONCLUSION

The introduction of the Herbert Protocol within West Lothian will assist Police Scotland reduce the time taken to commence a search for a missing person with dementia promoting a positive outcome for the individual and their family.

The launch of the protocol will coincide with Dementia Awareness week on 31 May 2021.

## F. BACKGROUND REFERENCES

Police Scotland
Age UK
Alzheimer Scotland

Appendices/Attachments: Appendix 1 - Herbert Protocol form

Contact Person: Pamela Main, Senior Manager, Older People's Services
pamela.main@westlothian.gov.uk
Tel 01506 281936

Robin Allen, Senior Manager, Adult Services
robin.allen@westlothian.gov.uk
Tel 01506 281851

***Jo MacPherson, Head of Social Policy***

Date of meeting: 4th June 2021

**Appendix 1**

Herbert Protocol Form

OFFICIAL SENSITIVE: POLICE ONLY

POLICE SCOTLAND
POILEAS ALBA

## Herbert Protocol

**The Herbert Protocol** is an information gathering tool to assist the Police to find a person living with dementia who has gone missing, as quickly as possible. **If you are concerned about a person living with dementia and believe they are missing, this is an emergency and you must dial '999'.**

This form is designed to be completed by a family member / friend / neighbour / carer, with copies of the form being held by all relevant people. It is a good idea to fill this form in after diagnosis so you are prepared. Keep it as up-to-date as possible. If you have answered 'Yes' to any of the questions, please give details.

| Photographs | |
|---|---|
| **Ideally provide facial close up and a full length picture.**<br>**Please cross this box if you consent to having this picture / these pictures put on social media in the event of the person going missing.** | ☐ |

| Picture 1 | Picture 2 |
|---|---|
| | |

OFFICIAL SENSITIVE: POLICE ONLY

OFFICIAL SENSITIVE: POLICE ONLY

| Personal Details | | | |
|---|---|---|---|
| **Full Name** | | | |
| **Known as / Preferred Name** | | | |
| **Current Address** | | | |
| **Current Telephone Number** | | | |
| **Date of Birth and Age** | | | |
| **Race / Ethnicity** | | | |
| **Is English their first language?** (if no, confirm language spoken) | Yes ☐ | No ☐ | |

| General Description | | | |
|---|---|---|---|
| **Height and Weight, Build** | | | |
| **Hair Colour** | | | |
| **Wig / Hair Piece?** | Yes ☐ | No ☐ | |
| **Wears Glasses?** | Yes ☐ | No ☐ | |
| **Facial Hair?** | Yes ☐ | No ☐ | |
| **Any Other Identifying Features** (e.g. tattoos, scars, etc.) | | | |

| Medical Information | | | |
|---|---|---|---|
| **Has a dementia diagnosis or has memory problems?** | Yes ☐ | No ☐ | |
| **Any know risks?** (e.g. aggression, suicidal, depressed, alcohol) | Yes ☐ | No ☐ | |
| **Any mental health issues?** (e.g. anxiety, depression) | Yes ☐ | No ☐ | |
| **Other health issues?** (e.g. diabetes, etc.) | Yes ☐ | No ☐ | |
| **Takes medication?** (if yes, please specify) | Yes ☐ | No ☐ | |
| **Are they at any risks without it?** | Yes ☐ | No ☐ | |
| **Is there a visual, hearing, communication or speech impairment?** (if yes, please specify) | Yes ☐ | No ☐ | |
| **Any mobility issues?** (e.g. uses a stick, falls, breathlessness) | Yes ☐ | No ☐ | |

OFFICIAL SENSITIVE: POLICE ONLY

4

| | |
|---|---|
| GP Contact Details | |

| Personal Circumstances | | | | |
|---|---|---|---|---|
| Lives alone? | | Yes ☐ | No ☐ | |
| Lives with others? (if yes, please state who) | | Yes ☐ | No ☐ | |
| Name of Next of Kin / Carer | | | | |
| Previous Addresses (indicate if childhood address) | 1. | | | |
| | 2. | | | |
| | 3. | | | |
| Name and Place of Schools Attended | | | | |
| Most Significant Job | | | | |
| Phone | Uses a mobile phone? | Yes ☐ | No ☐ | |
| | Mobile Phone Number | | | |
| | Network Provider | | | |

| | |
|---|---|
| Any phobias that may affect them? | |
| How might they react if worried / frightened? | |
| Anything that might relax or calm them if they are distressed? | |

| | | | |
|---|---|---|---|
| Access to money? | Yes ☐ | No ☐ | |
| Carrying cash? | Yes ☐ | No ☐ | |
| Bank Card? | Yes ☐ | No ☐ | |
| Which bank and branch are visited? | | | |





| | | |
|---|---|---|
| Places of Work (please include addresses) | 1. | |
| | 2. | |
| | 3. | |
| Favourite Places | 1. | |
| | 2. | |
| | 3. | |
| Hobbies (e.g. fishing, parks visited, etc) | 1. | |
| | 2. | |
| | 3. | |

| | |
|---|---|
| Regular Patterns / Places Visited (e.g. appointments, chemists, shops, pub, church, clubs, etc) | |
| Regular or Favourite Holiday Spots | |

| Travel Patterns, Past and Present | | | |
|---|---|---|---|
| Buses? | Yes ☐ | No ☐ | |
| What routes and bus numbers? | | | |
| Have they got a bus pass? | Yes ☐ | No ☐ | |
| Trains? | Yes ☐ | No ☐ | |
| What stations and routes? | | | |
| Access to a vehicle? | Yes ☐ | No ☐ | |
| Car / Motor Bike / Mobility Scooter? | | | |
| Vehicle Registration and Description | | | |

| Contact Details of Family / Friend / Carer / Support Worker | | |
|---|---|---|
| **Name** | **Relationship** (e.g. wife, son, carer, etc.) | **Contact Telephone No.** |
| | | |
| | | |
| | | |
| | | |

| Additional Useful Information |
|---|
| **Include when and where last seen, a description of clothing or any other information you feel may be relevant to assist Police** |
| |

**DATA LABEL: PUBLIC**

West Lothian Council

**HEALTH AND CARE - POLICY DEVELOPMENT AND SCRUTINY PANEL**

**WEST LOTHIAN HSCP ACAST PILOT WITH POLICE SCOTLAND**

**REPORT BY NICK CLATER.**

## A. PURPOSE OF REPORT

To inform the Health and care PDSP of the recent pilot project between the HSCP Acute Care and Support Team (ACAST) and Police Scotland and its findings.

## B. RECOMMENDATION

It is recommended that the Panel notes the contents of the report.

## C. SUMMARY OF IMPLICATIONS

| | | |
|---|---|---|
| I | **Council Values** | – Focusing on our customers' needs<br>– Being honest, open and accountable<br>– Providing equality of opportunity<br>– Developing employees<br>– Making best use of resources<br>– Working in partnership |
| II | **Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment.** | Mental Health (Care and Treatment) (Scotland) Act 2003<br><br>Adult Support and Protection (Scotland) Act 2007 |
| III | **Implications for Scheme of Delegations to Officers** | None |
| IV | **Impact on performance and performance Indicators** | All activities and actions have performance indicators and targets applied. |
| V | **Relevance to Single Outcome Agreement** | None |
| VI | **Resources - (Financial, Staffing and Property)** | N/A |
| VII | **Consideration at PDSP** | N/A |
| VIII | **Other consultations** | N/A |

## D. TERMS OF REPORT

### D1 Background

It is set out with both the West Lothian HSCP strategic plan 2019-2023 and the West Lothian Mental Health Strategic Commissioning Plan 2019-2023 that those in Mental Health crisis in the community will be able to access the right care and support at the right time. The HSCP Mental Health Management team strive to ensure this principal is delivered through service development across both community and inpatient services.

**D2** The Acute Care and Support Team (ACAST), based within St John's Hospital are the emergency psychiatric assessment service that carry out both scheduled and unscheduled clinical assessments for Mental Health. Approximately 2000 Unscheduled Mental Health assessments are carried out every year by the team. Scheduled assessments can come from a range of referral sources including GPs, Community Mental Health Teams and Police Scotland.

**D3** Due to the complex nature of the care and support required for an individual in crisis, Police Scotland previously would bring an individual showing signs of distress to the Emergency Dept. within St Johns. Police Officers would then wait until the individual was seen by ACAST to ensure the safety of the patient. This practice although effective and putting the patients safety first resulted in Police officers spending long spells in St Johns and less time visible in their community.

**D4**

### The pilot project.

In June 2020 as West Lothian began to emerge from the first COVID-19 lockdown, ACAST and Police Scotland worked to create a direct referral route to ensure individuals in high levels of distress in the community could be seen in a timelier manner. As a result of this change a pilot project was launched to measure the success of Police Scotland Officers referring directly through ACAST on a dedicated phone line. This phone line would be managed between 9am and 5pm as the out of hour's process was deemed to carry a higher level of risk. This not only ensured that Officers could take the individual directly to ACAST within St Johns, Officers would then be back out service their communities if the risk was deemed appropriate to be managed by the ACAST service.

### Findings.

In April 2021 Police Scotland contacted ACAST to share their findings after the first 10 months of the pilot project. Police Scotland believe that around 40 days of policing time have been saved through the new process which has been described as a great success across our local policing teams.

In May 2021 Management from the HSCP Mental Health team, alongside the ACAST service have met with Police Scotland to discussed the findings and have agreed to implement the service change permanently.

### Next steps.

The HSCP Mental Health Management team are keen to share the success of the pilot project to support other local authorities and have been doing so through an upcoming press release and continued knowledge exchange. The ACAST service is also due to move to 24 hour assessment later this year where the pilot success will be considered more widely across our service.

## E. CONCLUSION

The West Lothian ACAST service within the HSCP has worked with Police Scotland to ensure those in the community experiencing high levels of distress can been seen by the appropriate mental health service in a more timely manner. As a result of the pilot project between June 2020 and April 2021 Police Scotland have estimated around 40 days of policing time have been saved due to the change. Please note the contents of the report.

## F. BACKGROUND REFERENCES

Appendices: N/A

Contact Person: Nick Clater
General Manager
West Lothian HSCP Mental Health
Nick.Clater@nhslothian.scot.nhs.uk

Date: 6th June 2021

**DATA LABEL: PUBLIC**

West Lothian Council

**HEALTH AND CARE - POLICY DEVELOPMENT AND SCRUTINY PANEL**

**PERFORMANCE REPORT – ANNUAL INDICATORS**

**REPORT BY HEAD OF SOCIAL POLICY**

## A. PURPOSE OF REPORT

To report the current level of performance against the annual indicators in the Corporate Plan which are the responsibility of Social Policy and reportable to the Policy Development and Scrutiny Panel.

## B. RECOMMENDATIONS

It is recommended that the Panel note the performance information and determine if further action or enquiry is necessary for any of the performance indicators in the report.

## C. SUMMARY OF IMPLICATIONS

| | | |
|---|---|---|
| I | **Council Values** | • Focusing on our customers' needs<br>• Being honest, open and accountable<br>• Providing equality of opportunity<br>• Developing employees<br>• Making best use of resources<br>• Working in partnership |
| II | **Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)** | In compliance with the Code of Corporate Governance |
| III | **Implications for Scheme of Delegations to Officers** | No implications. |
| IV | **Impact on performance and performance Indicators** | This report is an evaluation of current/historic performance |
| V | **Relevance to Single Outcome Agreement** | The indicators support the outcomes in the Single Outcome Agreement |
| VI | **Resources - (Financial, Staffing and Property)** | N/A |
| VII | **Consideration at PDSP** | N/A |
| VIII | **Other consultations** | N/A |

## D. TERMS OF REPORT

### D1 Background

The Policy Development and Scrutiny Panel (PDSP) oversee and challenge council performance. They are a key element of the scrutiny of performance by elected members and form part of the council's wider scrutiny and public performance reporting arrangements. To support this, each PDSP is allocated areas of the Corporate Plan, strategic priorities and key council performance indicators, relevant to the focus areas of the Panel. They receive both quarterly and annual performance reports.

### D2 Annual Performance Report

The annual performance scorecard report for the Social Policy PDSP contains a range of relevant service performance information for scrutiny. A summary report of the11 performance indicators in the Health and Care PDSP scorecard is contained in Appendix 1. The scorecard report contains the most up to date annual data.
The 11 performance indicators are categorised as follows:

| Summary of Performance Indicator status (RAG) | |
|---|---|
| Status (against target) | Number of PIs |
| Green | 7 |
| Amber | 1 |
| Red | 3 |
| Unknown | 0 |

The RAG status is against the performance target that has been set by the service in consultation with the relevant stakeholders.

Each indicator in Appendix 1 is accompanied by trend chart commentary, which provides an explanation of the current performance levels (against the target). This information also highlights any performance below target and outlines the measures that our services are taking to improve their performance.

### D3 Amber and Red Performance Indicator

**P:SPCC001_6a.7 Percentage of respondents who rated the overall quality of Learning Disability (adults) service as good or excellent**

***Current performance – 90.33%***
***Target – 90%***

The target for 2019/2020 was reviewed and set at 99% to reflect the service commitment to maintaining excellent standards.

The target for 2020/2021 is lower than expected due to closures of units and changes in service delivery due to COVID 19 this has resulted in less surveys being returned. This target should be reached in 2021/2022 as services begin to become back on track.

**CP:SPCC014_6b.5 Percentage of Occupational Therapy assessments allocated within 6 weeks of referral**

***Current performance – 36%***
***Target – 70%***

Performance from 1 April 2020 has been challenging for the service as a result of the pandemic. OT staff were redeployed to frontline services responsible for delivery of direct care and home visits were ceased as a result of Covid 19 guidelines.

In 20/21 there were 748 referrals which is a reduction on the previous year of 1376. 13% of cases were allocated within 7 days with 23% allocated within a 6 week period. 64% were out with the OT standard of allocation within 6 weeks.

Staff have now returned to their positions and any vacant posts have been successfully recruited. As a result the service has seen a significant increase in cases being allocated within timescales. Post Covid the service anticipates a significant improvement for the following year 2021/22 on these outcomes. As a result the target percentage of 70% set form the previous year will remain the same.

The target for this performance indicator is to achieve 90% by 22/23 and this was set in the development of the council's Corporate Plan. A target of 90% is consistent with Scottish Government access to treatment targets for health and social care and will be maintained for 2019/20

**P:SPCC025_9a.1c Average annual cost per person receiving community based Learning Disability services. –** ****Note Current figures not available for 2020-21***

***Current Value* £37,074.00**
***Target* – £37,239.00**

This service area has been experiencing financial pressure for some years due to increased demand on the service. This reflects demographic changes and also changing public expectations. Although expenditure per person increased again in 2019/20, which is reflective of the longer-term trend of increasing cost, year-on-year, the service has seen some success in relation to the delivery of strategic plans that have introduced different models of care, in particular promoting tenancy-based support. This is in-line with the Health and Social Care objective to shift the balance of care towards community-based services.

Historically, the number of service users in this group has remained relatively static, however because there is a relatively low number of people covered by this indicator, small changes in the numbers of service users can result in fluctuations in the trend when cost is expressed as an average. It is likely that the average cost will increase as the service continues to works toward the Health and Social Care objectives relating to Shifting the Balance of Care in favour of community-based services.

The annual target for 2020/21 will be set to reflect the allocated budget and the known trend for the service having increasing spend in this area. This has been informed by a number of factors including; known service pressures, estimated demographic changes, inflationary increases and adjustments for any cost implications associated with revised models of care.

**P:SPCC041_6b.4 Percentage of complaints received by the Community Care Service that were upheld or partially upheld against the total complaints closed in full.**

***Current performance – 72.2%***
***Target – 40%***

There is a significant month on month variation in performance during the reporting period. However, there has been no change in, procedure or approach and it is concluded that this reflects simply the diversity of complaints received.

The number of formal Social Work complaints is relatively small (from 2 to 11 per month over the last year) so performance expressed as a percentage tends to appear as a very wide variation.

The target for quarter 4 will remain at 40% to demonstrate our commitment to improving customer care through the improvement actions in individual complaints

## E. CONCLUSION

The performance scorecard shows that the majority of indicators are achieving targeted levels of performance. Where performance is not at the expected level details are provided in section D.3 to advise the Panel of the improvement action taken by services to improve performance.

## F. BACKGROUND REFERENCES

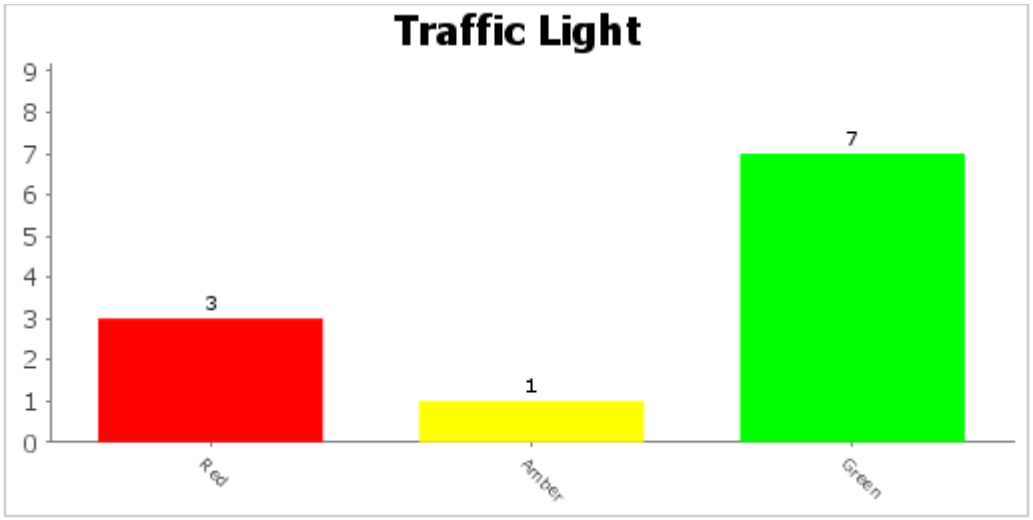
**None**

| | |
|---|---|
| Appendices/Attachments | Appendix 1 – Social Policy PDSP Performance Scorecard Report |
| Contact Person: | Pamela Main, Senior Manager, Older People's Services<br>pamela.main@westlothian.gov.uk<br>Tel 01506 281936<br><br>Robin Allen, Senior Manager, Adult Services<br>robin.allen@westlothian.gov.uk<br>Tel 01506 281851 |
| | Jo Macpherson<br>Head of Social Policy |
| Date: | 3rd June 2021 |

# _05 PDSP - Health and Care  PIs - ANNUAL

Data Label : OFFICIAL

**Report Author:** Darren Burnside
**Generated on:** 19 May 2021 09:22
**Report Layout:** .NEW. PDSP_PIs_All(Detail)_Grid

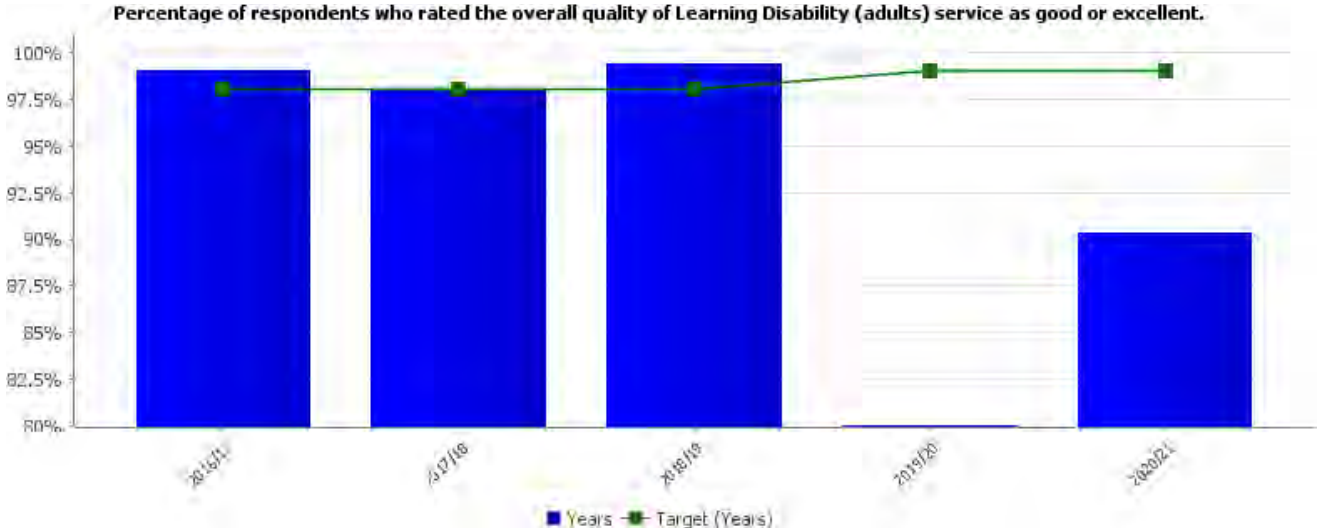


***Note*****
***Figures from Finance for the following PI's are currently not available for update:***
***P:SPCC024_9a.1a, P:SPCC025_9a.1c,***

***The following Customer Satisfaction PI's***
***P:SPCJ011_6a, PSPCC009_6a.7 & P:SPCC011_6a have been delayed due to COVID19 and should be back on track for 2021-22***

***The following PI have not been made available as yet on the Care Inspectorate database:***
***P:SPCC002_6b.5***

| | |
|---|---|
| **PI Code & Short Name** | **P:SPCC001_6a.7 Percentage of respondents who rated the overall quality of Learning Disability (adults) service as good or excellent.** |
| **Description** | The Service conducts an annual customer survey. This performance indicator measures the overall quality as good or excellent using a survey designed for the particular needs of this group of service users. This indicator records the percentage of service users who consider the service provided as good or excellent. Customer insight into the overall quality of the service is a good measure of the effectiveness of the service. |
| **PI Owner(s):** | zSPCC_PIAdmin; Karen Love |



| | |
|---|---|
| **Last Updated:** | 2020/21 |
| **Status:** | |
| **Current Value:** | 90.33% |
| **Current Target:** | 99% |
| **Red Threshold:** | 90% |
| **Amber Threshold:** | 94% |
| **Categories:** | PDSP_Health & Care; PDSP_Social Policy; PPR Public Performance Reporting |

**Trend Chart Commentary:**

Customer satisfaction for 2018/2019 has improved on the previous year and has remained consistently high over many years.

Performance trends reflect the continued commitment of the teams to provide excellent customer care and personalised services for the needs of people with Learning Disabilities.

In 2018/2019 298 surveys were issued with 166 returned. The service will endeavor to improve the number of responses to this survey in 2019/2020 through changes to the survey activity from within the social work practice team; the slight dip in performance in 2017/18 is reflective of the impact that one or two survey respondents can have on the performance of this indicator due to the sample size.

The target for 2019/2020 has been reviewed and will be set at 99% to reflect the service commitment to maintaining excellent standards.

The target for 2020/2021 is lower than expected due to closures of units and changes in service delivery due to Covid 19 this has resulted in less surveys being returned. This target should be reached in 2021/2022 as services begin to become back on track.

| | |
|---|---|
| **PI Code & Short Name** | **P:SPCC002_6b.5 Percentage of Care Inspectorate Inspections undertaken within Registered Learning Disability Services graded good or above.** |
| **Description** | The Care Inspectorate, the external body responsible for auditing the quality of care services, inspects registered care services annually. Grades can vary from 1 - 6 (1 being unsatisfactory and 6 being excellent). This indicator reports the percentage of grades of 4 (good) and above. The Grades measure how well the Service is doing against National Care Standards. |

**PI Owner(s):** zSPCC_PIAdmin; Karen Love

| | |
|---|---|
| **Last Updated:** | 2019/20 |
| **Status:** | |
| **Current Value:** | 100% |
| **Current Target:** | 100% |
| **Red Threshold:** | 90% |
| **Amber Threshold:** | 95% |
| **Categories:** | PDSP_Health & Care; PDSP_Social Policy; PPR Public Performance Reporting |

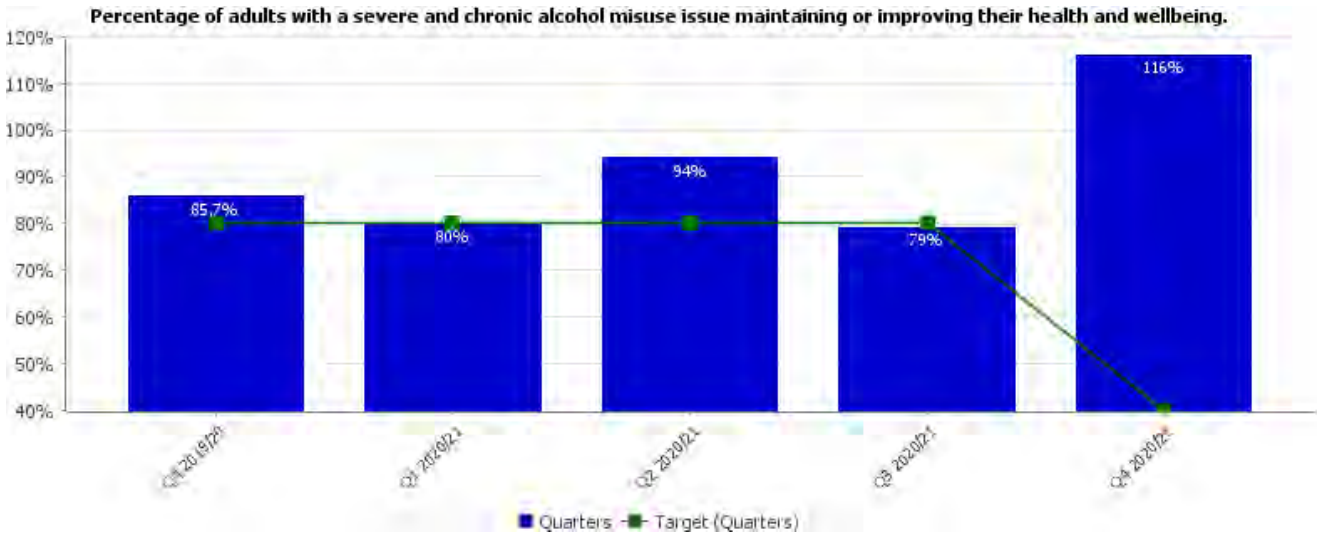
**Trend Chart Commentary:**

The long-term trend in this area is for continued and sustained high-levels of performance. The performance in 2019/20 is again, extremely positive. The percentage of inspections graded good, or above was 100%. This is reflective of the high standards of care, service delivery and commitment to excellence in these services.

The 2018/2019 performance continues to reflect high standards of care with all services scoring 'Good' or above in all assessed categories reflecting high standards of care and full compliance with action plans agreed with the care inspectorate. The result for this indicator has been 100% in every year since 2014/15; all Care Inspectorate Inspections carried out since 2014/15 within Registered Learning Disability Services have been graded Good, or above. The target for 2019/20 will remain 100% to reflect our ongoing commitment to high quality and caring services.

Note that for services deemed to be low risk level (Grades 4 or more), the regular inspection frequency is now 1 in 36 months. There may still be unscheduled inspections of the service.

| | |
|---|---|
| **PI Code & Short Name** | **P:SPCC006_9b.1a Percentage of adults with a severe and chronic alcohol misuse issue maintaining or improving their health and wellbeing.** |
| **Description** | West Lothian Alcohol and Drugs Partnership (ADP) commissions a range of services for adults with severe, long standing alcohol problems to support them to maintain or improve their quality of their physical and mental health. Many of the adults concerned are seriously affected physically and mentally by prolonged alcohol misuse; this measure is designed to capture the effectiveness of interventions. Improvement is measured using a standard assessment tool. The targets for recovery within treatment contracts are based on benchmarking data from the National Treatment Agency for Substance Misuse. |
| **PI Owner(s):** | zSPCC_PIAdmin; Nick Clater |



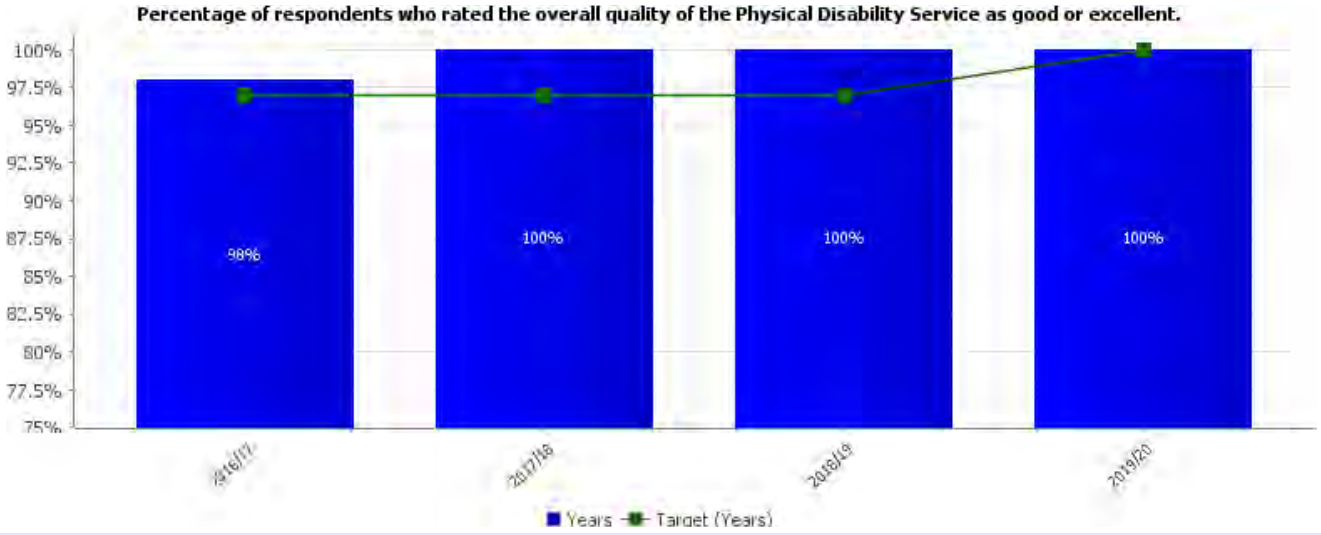

| | |
|---|---|
| **Last Updated:** | Q4 2020/21 |
| **Status:** | |
| **Current Value:** | 116% |
| **Current Target:** | 40% |
| **Red Threshold:** | 65% |
| **Amber Threshold:** | 75% |
| **Categories:** | PDSP_Health & Care; PDSP_Social Policy; PPR Public Performance Reporting |

**Trend Chart Commentary:**

The result for Quarter 4 us 116%. The result for Quarter 3 was 79%. The Quarter 2 result for 2019/20 is 94%. The result for Quarter 1 was 80%. This shows above target performance of this service in protecting those whose health is at risk because of alcohol use. The performance of this indicator has been above the set target since 2017/18. This is a very challenging client group to work with as these adults are seriously affected physically and mentally by prolonged alcohol misuse and the rate of success in treatment and support has to be viewed in that context. It is to be expected that there will be fluctuation in performance from quarter to quarter and this can be seen in the performance; there is not a clear trend in one direction. The assessment tool measures physical and psychological health, personal safety, relationships, housing, work and financial and many of these factors can be determined out with the person and services control.

The target of 80% is based on benchmarking data from the National Treatment Agency for Substance Misuse.
The Quarter 4 result is expected end of April 2021.

| | |
|---|---|
| **PI Code & Short Name** | **P:SPCC009_6a.7 Percentage of respondents who rated the overall quality of the Physical Disability Service as good or excellent.** |
| **Description** | This indicator measures the overall quality of physical disability services. The survey relates to the activity of the service team who carry out assessments and the team who provide day services. It measures the percentage of respondents who rated the overall quality of the service as good or excellent. The survey is issued annually to service users and the returns collated by a central team within Social Policy. The results are used to determine where improvements can be made to the service. |



| | |
|---|---|
| **Last Updated:** | 2019/20 |
| **Status:** | |
| **Current Value:** | 100% |
| **Current Target:** | 100% |
| **Red Threshold:** | 85% |
| **Amber Threshold:** | 92% |
| **Categories:** | PDSP_Health & Care; PDSP_Social Policy; PPR Public Performance Reporting |
| **PI Owner(s):** | zSPCC_PIAdmin; Karen Love |

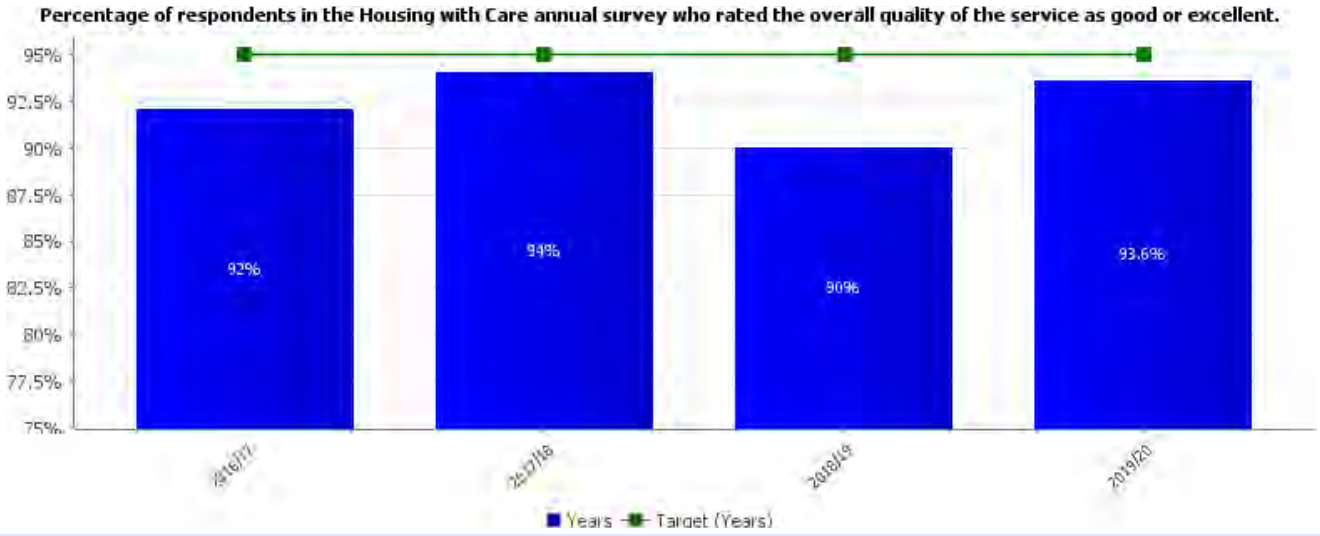
2019/20 and 2018/19 performance maintained the 100% rating of the previous year. As the sample sizes are relatively low in comparison to the number of service users, one or two survey returns can have a marked impact on the result. This can be seen in 2016/17 and 2014/15 where small numbers of survey returns have resulted in the slight reduction in the performance of this indicator.

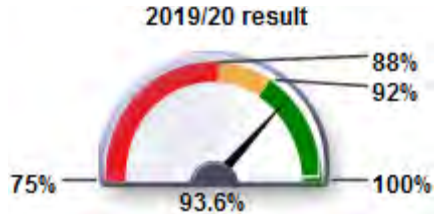
The service is committed to sustaining very high standards of satisfaction and will support this by; reviewing customer comments and suggestions; collating improvement actions from complaints and regularly reviewing care plans in consultation with service users and their carers.

The target for 2020/21 will be set at 100% to reflect the ongoing service commitment to excellent standards in customer care.

| | |
|---|---|
| **PI Code & Short Name** | **P:SPCC011_6a.7 Percentage of respondents in the Housing with Care annual survey who rated the overall quality of the service as good or excellent.** |
| **Description** | The Housing with Care service conducts an annual customer survey, which is issued to service users and returns collated by a central team within Social Policy. This performance indicator measures the levels of satisfaction using a survey designed for the particular needs of this group of service users. This indicator records the percentage of service users who consider the service provided as good or excellent. The results are used to identify where improvements can be made to the service. |

| | |
|---|---|
| **PI Owner(s):** | zSPCC_PIAdmin; Ailsa Sutherland |




| | |
|---|---|
| **Last Updated:** | 2019/20 |
| **Status:** | |
| **Current Value:** | 93.6% |
| **Current Target:** | 95% |
| **Red Threshold:** | 88% |
| **Amber Threshold:** | 92% |
| **Categories:** | PDSP_Health & Care; PDSP_Social Policy; PPR Public Performance Reporting |

**Trend Chart Commentary:**
The long term trend is for consistently high performance in this area.

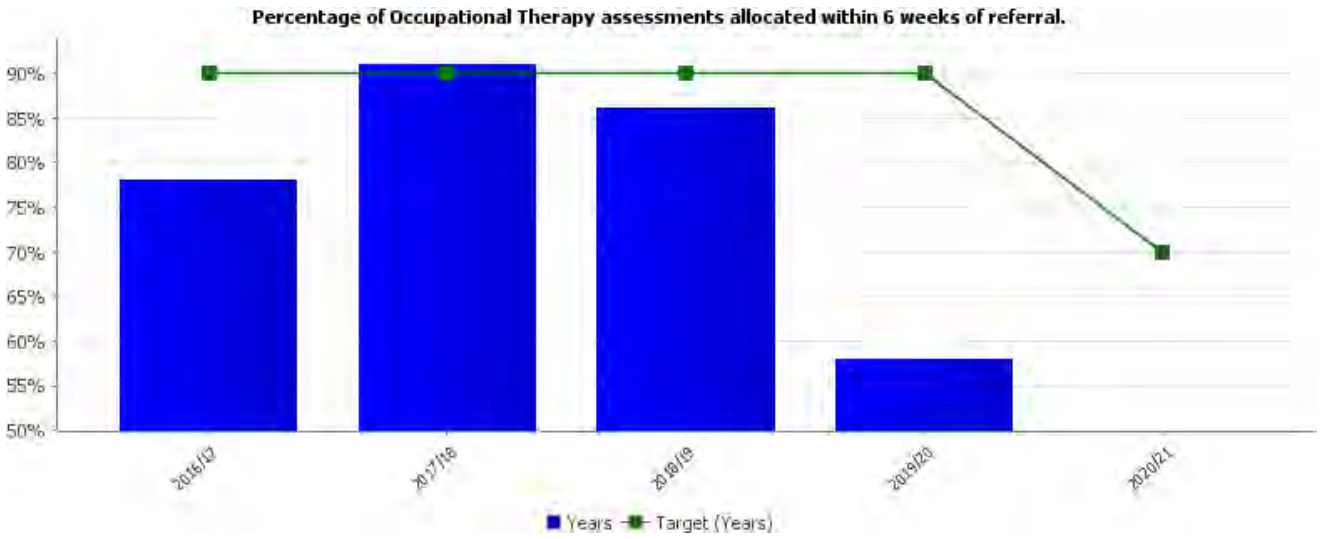
In 2019/20 93.6% rated the service excellent or good, which is an improvement from the previous year. There was also an improvement in the response rate, which is indicative both of the high standards of service and engagement with service users.

There are 7 housing with care developments and all tenants are requested to contribute to the survey, total 177 tenancies. There was a response rate 55% (98 surveys returned) and the scoring was 58% excellent and 32% good. In 2017/18 there was a 2% increase to 94% on the previous 2016/17 satisfaction scores and in comparison to this in 2018/19 we have experienced a reduction of 4% in this area achieving 90%

It has been highlighted that over the years the tenants needs have increased with particular reference to dementia and this may explain a reduction in completed surveys.

There were only 4 comments provided and they were all related to information sharing with 2 reflecting the tenant's view that information regarding the service provision was limited.
There is an ongoing review of housing with care services related to the Transforming Your Council budget savings over the next few years. Consultations with tenants will be planned and at this time clear information and interaction from all tenants and their families will be essential. It is anticipated with this level of engagement will support the development of service delivery which will aim to improve on the response rate and the scoring.
Target performance for 2020/21 will remain at 95% which is considered realistic for a service of this nature.

| | |
|---|---|
| **PI Code & Short Name** | **CP:SPCC014_6b.5 Percentage of Occupational Therapy assessments allocated within 6 weeks of referral.** |
| **Description** | Occupational Therapy service has a service standard which indicates that referrals requesting Occupational Therapy assessment will be allocated within 6 weeks of receipt of referral. This indicator measures the percentage of assessments allocated within this target schedule and the data allows the service to understand how efficiently the assessment process is working.<br>This performance indicator is part of the performance scorecard for the council's Corporate Plan and will contribute to priority 6 which is delivering positive outcomes on health. |
| **PI Owner(s):** | zSPCC_PIAdmin; Ailsa Sutherland |




| | |
|---|---|
| **Last Updated:** | 2020/21 |
| **Status:** | |
| **Current Value:** | 36% |
| **Current Target:** | 70% |
| **Red Threshold:** | 60% |
| **Amber Threshold:** | 69% |
| **Categories:** | CPPR Corporate Plan Public Performance Reporting; 6. We live longer, healthier lives; PDSP_Health & Care; PDSP_Social Policy; PPR Public Performance Reporting |

**Trend Chart Commentary:**

Service performance for the year 2020/2021 in respect of overall allocated referrals totals 748 which is 628 less than the 2019/2020 year. Allocated cases within a 7 day period equates to 97 which is 12.97% of the overall number. Allocated cases over one week- and up to six weeks equates to 175 which is 23.40% of the overall number. Total allocations over the six week period equates to 476 cases which is 63.64% of the overall number.
performance from 1 April 2020 has been challenging for the service under the covid 19 pandemic. Staff were redeployed to more front line services and home visits were not able to be carried out under the covid 19 guidelines. More recently, the service is now fully staffed and we have already seen a significant increase in allocated cases as covid 19 guidelines change, allowing strategies to be put into place to progress with service delivery. It is acknowledged overall that percentage values are down form teh previous year, but this is understandable due to the unforseen changes based on the covd 19 pandemic. As a result the target percentage of 70% set form the previous year will remain the same.

Overall performance for the year 2019 / 2020 has dropped 27.64% from the previous year. The trend value for the year 2019/2020 is 58.36% from 803 allocated cases up to a 6 week wait period. The total allocated cases over the year equates to 1376 where 573 cases were allocated on a wait period over 6 weeks. The tentative outcome of these results are likely due to varying reasons.

. The new ASCET duty team were unfamiliar with the requirements in progressing occupational therapy referrals therefore the wait list numbers increased significantly as most were established as 'Critical or Substantial'.
. A new OT duty system was established as a mitigation strategy to the above point. However due to the success of this, numbers of contacts to the service have again increased with an average contact rate of around 450 per month. Under Covid 19 restrictions since March 2020 this has decreased to 175.
. The lengthy eligibility and contributions assessment process equally continues to have an impact on numbers seen in a month versus staff resource. Therefore, a new initiative has been proposed to the duty system in the coming year in an attempt to positively balance this out. To allow time for this new initiative to develop the target for the coming year will reduce to 70%.

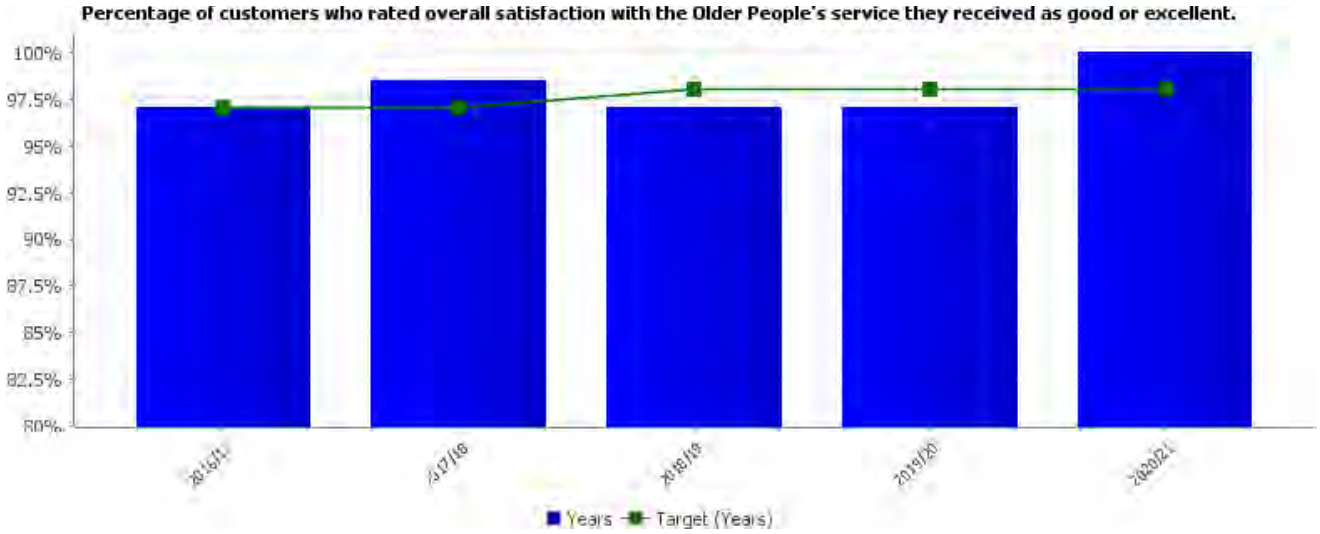
Performance for 2018/2019 has dropped by 5% from the previous year. There is a trend value of 86% where there were 2034 cases allocated. The likely outcome of these results were due to the new eligibility process and managing this. This has had a significant impact on staff managing the through put and case load management. Presently we are trialling a new management structure and mitigation strategies to progress these contacts so that a wait time of 6 weeks can be met in the coming months. This is being managed by trialling an early intervention process and also looking into prioritising the structure of the assessment allocations. The OT service has benchmarked with other local authorities including Peebles and this has provided information on another strategy that we could implement in the future.
Performance in 2017/2018 has returned to just above target level having seen a drop in 2016/2017. A range of improvement actions were developed and implemented last year related to case management and supervision with the aim of restoring performance to the target level.

Performance dipped in 2016/2017 because of a reduction in capacity which required a review of systems and supervisory processes to be implemented.

The target for this performance indicator is to achieve 90% by 2022/23 and this was set in the development of the council's Corporate Plan. A target of 90% is consistent with Scottish Government access to treatment targets for health and social care and will be maintained for 2019/20.

| | |
|---|---|
| **PI Code & Short Name** | **P:SPCC017_6a.7 Percentage of customers who rated overall satisfaction with the Older People's service they received as good or excellent.** |
| **Description** | Older People's service conducts an annual survey of all its customers. This indicator measures the percentage of respondents who rated the overall quality as good or excellent. This survey relates to the activity of the service teams which carry out assessment for Older People's services. Satisfaction with the overall quality of the service is an important indicator of effectiveness and customer insight is used to inform service improvements. |

**PI Owner(s):** zSPCC_PIAdmin; Gerard Cunniffe



| | |
|---|---|
| **Last Updated:** | 2020/21 |
| **Status:** | |
| **Current Value:** | 100% |
| **Current Target:** | 98% |
| **Red Threshold:** | 88% |
| **Amber Threshold:** | 92% |
| **Categories:** | PDSP_Health & Care; PDSP_Social Policy; PPR Public Performance Reporting |

**Trend Chart Commentary:**

Levels of customer satisfaction are consistently high, exceeding 95% for each for the years from 2016/17 to 2020/21. Performance in 2020/2021 increased to 100%, an increase from 97% as recorded in 2019/20. This was against a target set at 98% for the year 2019/2020. The increase of 3% needs to be read in the context of the pandemic as a reduced number of customer surveys was sent out by the service teams that carry out assessment for Older People Services.

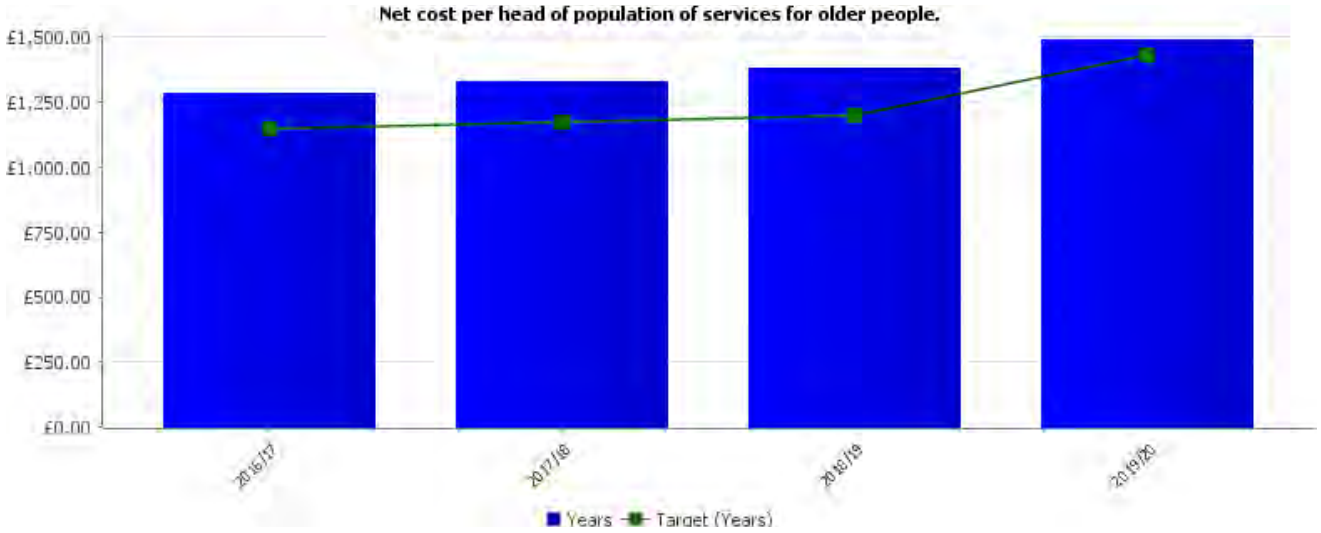
An action plan was deployed during 2019/2020 to inform staff within the service teams of a trend in reduction in responses and the importance of ensuring customers are given the opportunity to comment on the services. Part of this action plan included the introduction of a monitoring process in the recording system to allow managers to be able to provide data in relation to the numbers of surveys being distributed.

Performance in relation to overall customer satisfaction in Older Peoples Services compares well with that of the other Community Care Services. There are four services within the Community Care group, with performance ranging from 92% to 100% over the 5 year period 2016/17 to 2020/21.

The service is committed to sustaining very high standards of satisfaction and will support this by; responding to customer comments and suggestions; collating improvement actions from complaints and regularly reviewing care plans in consultation with service users and their carers.

The target for 2021/22 will be set at 100% to reflect the service commitment to excellent standards of customer care.

| | |
|---|---|
| **PI Code & Short Name** | **P:SPCC024_9a.1a Net cost per head of population of services for older people.** |
| **Description** | Average annual cost per person of services for people aged 65 and over. The scope of this indicator covers a range of services including Care at Home, Care Homes, Housing with Care, Occupational Therapy, and Assessment and Care Management. The cost per person is calculated by dividing the cost of the services in scope by the estimated 65+ population. |
| **PI Owner(s):** | zSPCC_PIAdmin; Rachel MacKay |



| | |
|---|---|
| **Last Updated:** | 2019/20 |
| **Status:** | |
| **Current Value:** | £1,493.14 |
| **Current Target:** | £1,432.00 |
| **Red Threshold:** | £1,000.00 |
| **Amber Threshold:** | £1,100.00 |
| **Categories:** | PDSP_Health & Care; PDSP_Social Policy; PPR Public Performance Reporting |

**Trend Chart Commentary**

West Lothian has one of the lowest costs yet is consistently assessed as one of the highest quality for all social care categories. The cost per person is calculated by dividing the cost of the services in scope by the estimated 65+ population (using data from the National Registers of Scotland).

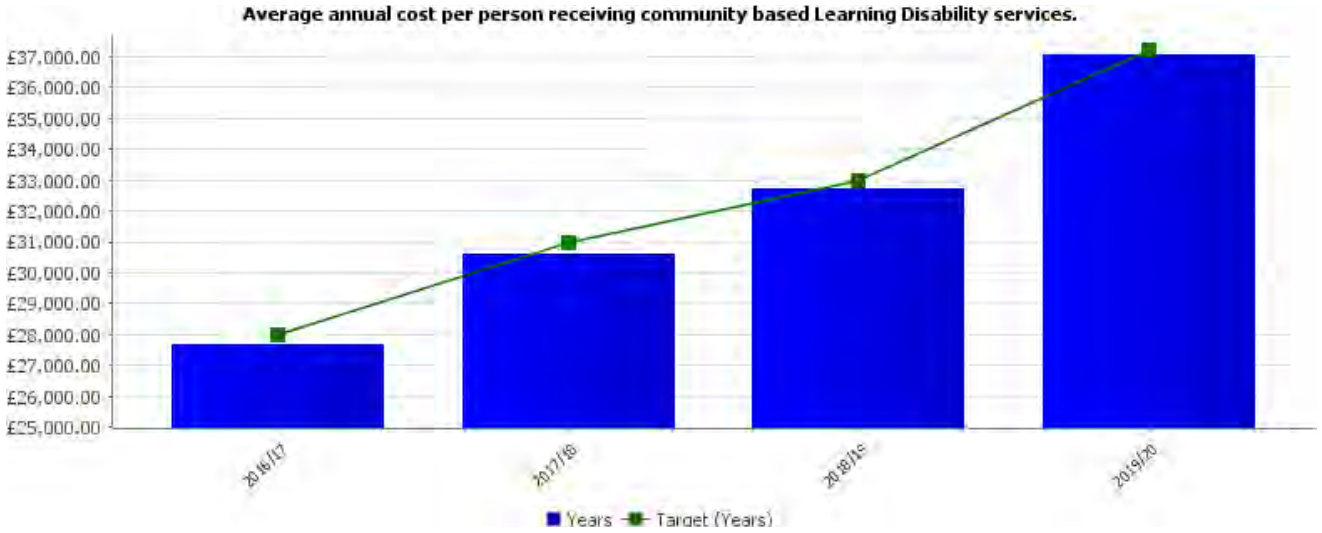
The longer term trend is for an increase in the cost of these services per head of population and in 2019/20, there was again an increase from the previous year. In 2019/20, the cost was £1493.14 per head of population, which is an increase from 2018/19, when the cost was £1378.

More people are living longer with multiple physical and mental health conditions and often complex care and support needs. Ensuring that people whose needs are increasingly complex can be supported safely at home requires enhanced care services, which can increase the average cost per person.

The 2020/21 activity budget, divided by the forecast population will allow us to set a target for 2020/21.

Benchmarking comparisons are subject to time delay in the publishing of data; the average expenditure on social care services to older people (65+) in Scotland in 2014/15 was £1,400 (source CIPFA)

| | |
|---|---|
| **PI Code & Short Name** | **P:SPCC025_9a.1c Average annual cost per person receiving community based Learning Disability services.** |
| **Description** | This indicator measures the average annual cost of services to people with a Learning Disability by dividing the total cost of services to this user group by the number of people in receipt of a service. This information is used to monitor cost trends in the service to evaluate and inform service planning. |
| **PI Owner(s):** | zSPCC_PIAdmin; Robin Allen |



| | |
|---|---|
| **Last Updated:** | 2019/20 |
| **Status:** | |
| **Current Value:** | £37,074.00 |
| **Current Target:** | £37,239.00 |
| **Red Threshold:** | £36,000.00 |
| **Amber Threshold:** | £34,000.00 |
| **Categories:** | PDSP_Health & Care; PDSP_Social Policy; PPR Public Performance Reporting |

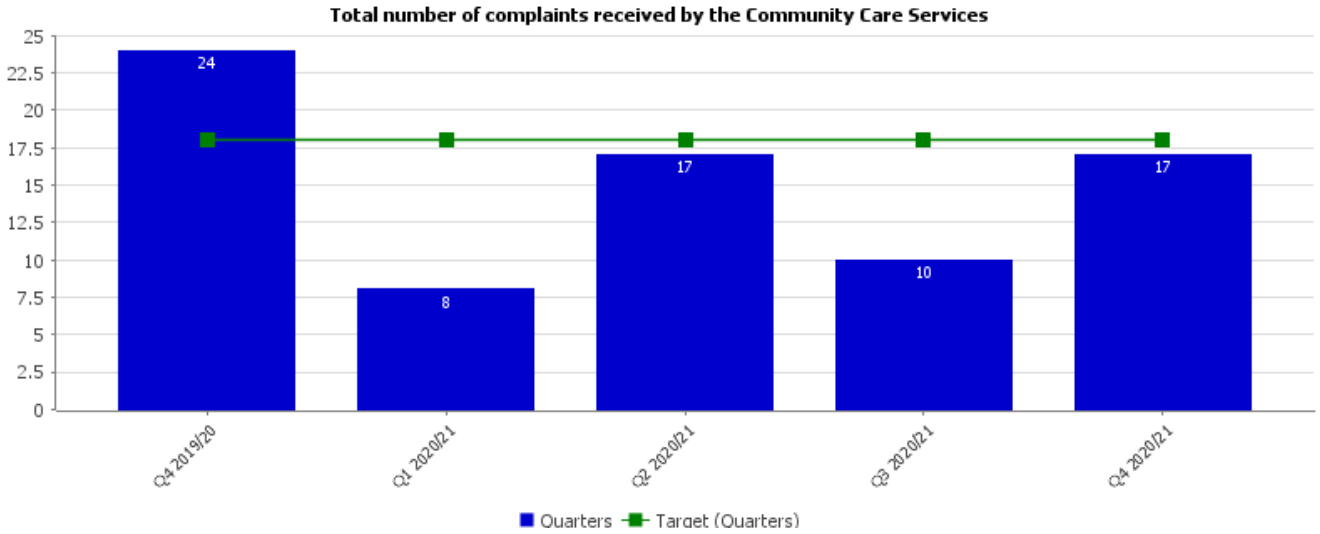
**Trend Chart Commentary**

This service area has been experiencing financial pressure for some years due to increased demand on the service. This reflects demographic changes and also changing public expectations. Although expenditure per person increased again in 2019/20, which is reflective of the longer term trend of increasing cost, year-on-year, the service have seen some success in relation to the delivery of strategic plans that have introduced different models of care, in particular promoting tenancy based support. This is in-line with the Health and Social Care objective to shift the balance of care towards community based services.

Historically, the number of service users in this group has remained relatively static, however because there is a relatively low number of people covered by this indicator, small changes in the numbers of service users can result in fluctuations in the trend when cost is expressed as an average. It is likely that the average cost will increase as the service continues to works toward the Health and Social Care objectives relating to Shifting the Balance of Care in favour of community based services.

The annual target for 2020/21 will be set to reflect the allocated budget and the known trend for the service having increasing spend in this area. This has been informed by a number of factors including; known service pressures, estimated demographic changes, inflationary increases and adjustments for any cost implications associated with revised models of care.

| | |
|---|---|
| **PI Code & Short Name** | **P:SPCC038_6b.3 Total number of complaints received by the Community Care Services** |
| **Description** | This indicator measures the total number of complaints received by Community Care. It is the total number of complaints received by Community Care at stage one (complaints that the council aims to deal with within 5 working days) and those received directly at stage two (more complex complaints that the council aims to deal with within 20 working days). The information is recorded on the council's Complaints Records Management system which allows systematic performance reporting and analysis of trends. Complaint outcomes are analysed to inform improvement plans. |
| **PI Owner(s):** | zSPCC_PIAdmin; Pamela Main |



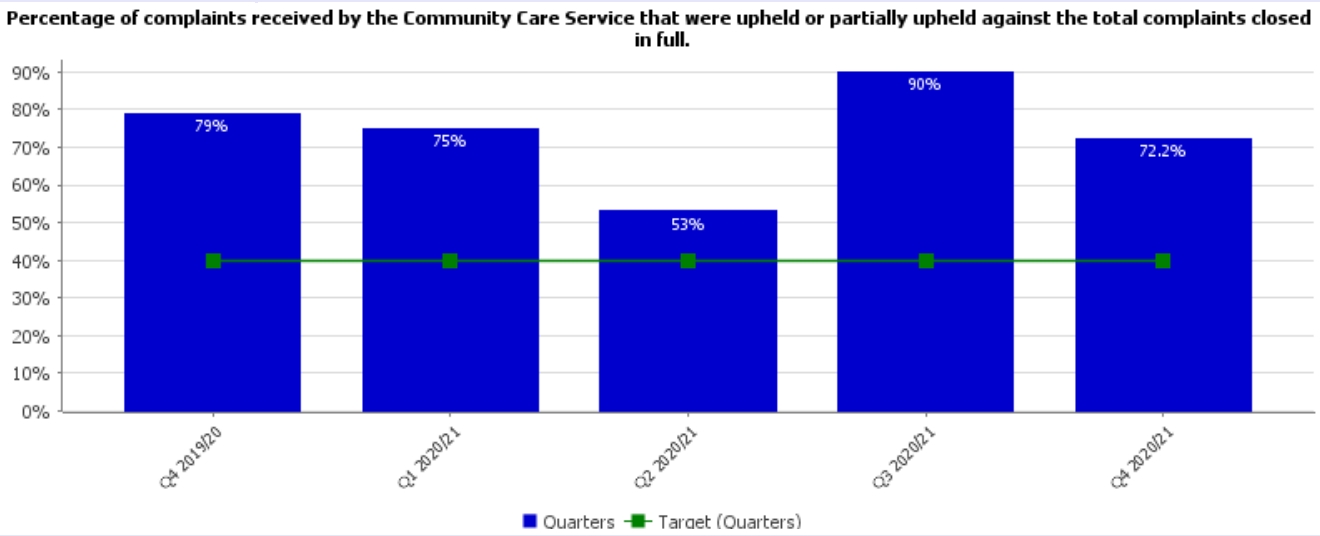
| | |
|---|---|
| **Last Updated:** | Q4 2020/21 |
| **Status:** | |
| **Current Value:** | 17 |
| **Current Target:** | 18 |
| **Red Threshold:** | 19.8 |
| **Amber Threshold:** | 18.9 |
| **Categories:** | PDSP_Health & Care; PDSP_Social Policy; PPR Public Performance Reporting |

**Trend Chart Commentary:**

The number of complaints received by Community Care Services are few but highly variable within a small range. Complaints are systematically analysed both at an individual and aggregate level to inform trends and areas for improvement but it has not been possible to identify any consistent trend which would inform variations in performance. Where individual complaints are upheld or partially upheld, the service ensures that required improvements are identified and implemented.

In 2020/21, performance has been variable but better than the target of 18 per quarter; there were 8 complaints in Q1, 17 in Q2 and then a reduction to 10 in Q3 and 17 in Q4.
The performance target will be set at 12 for the next quarter to reflect a variable but downward trend in the number of complaints overall.

| | |
|---|---|
| **PI Code & Short Name** | **P:SPCC041_6b.4 Percentage of complaints received by the Community Care Service that were upheld or partially upheld against the total complaints closed in full.** |
| **Description** | This indicator measures the total number of council complaints received by Community Care which were upheld or partially upheld, as a percentage of all complaints received. Complaints are recorded on our Customer Relationship Management system, including the outcome. This system provides the service with reports detailing the amount of complaints that were upheld and partially upheld. This information can be used to understand the effectiveness and efficiency of our services, how our staff are performing, the relationship between the service and the client and also an opportunity to identify any areas where improvements could be made to the way the service is delivered to customers. |
| **PI Owner(s):** | zSPCC_PIAdmin; Pamela Main |



| | |
|---|---|
| **Last Updated:** | Q4 2020/21 |
| **Status:** | |
| **Current Value:** | 72.2% |
| **Current Target:** | 40% |
| **Red Threshold:** | 44% |
| **Amber Threshold:** | 42% |
| **Categories:** | PDSP_Health & Care; PDSP_Social Policy; PPR Public Performance Reporting |

**Trend Chart Commentary:**

There is a significant month on month variation in performance during the reporting period. However, there has been no change in, procedure or approach and it is concluded that this reflects simply the diversity of complaints received.

The number of formal Social Work complaints is relatively small (from 2 to 11 per month over the last year) so performance expressed as a percentage tends to appear as a very wide variation.

The target for quarter 4 will remain at 40% to demonstrate our commitment to improving customer care through the improvement actions in individual complaints

DATA LABEL: PUBLIC

West Lothian Council

**HEALTH AND CARE POLICY DEVELOPMENT AND SCRUTINY PANEL**

**NHS LOTHIAN BOARD**

**REPORT BY DEPUTE CHIEF EXECUTIVE**

## A. PURPOSE OF REPORT

To update members on the business and activities of Lothian NHS Board.

## B. RECOMMENDATION

To note the terms of the minutes of Lothian NHS Board dated 3rd February 2021 in the appendix to this report.

## C. SUMMARY OF IMPLICATIONS

| | | |
|---|---|---|
| I | **Council Values** | Focusing on our customers' needs<br><br>Being honest, open and accountable<br><br>Working in partnership. |
| II | **Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)** | Council requires the activities of certain outside bodies to be reported to elected members on a regular basis, as part of its Code of Corporate Governance. |
| III | **Implications for Scheme of Delegations to Officers** | None. |
| IV | **Impact on performance and performance Indicators** | Working in partnership. |
| V | **Relevance to Single Outcome Agreement** | We live longer, healthier lives. |
| VI | **Resources - (Financial, Staffing and Property)** | None. |
| VII | **Consideration at PDSP** | Regularly reported to Health & Care PDSP for noting. |
| VIII | **Other consultations** | None required. |

## D. TERMS OF REPORT

On 29 June 2010 the Council Executive decided that the activities of certain outside bodies should be reported within the council to ensure all elected members are aware of the business of those bodies and to help to ensure their activities are more effectively scrutinised.

In accordance with that decision the business of Lothian NHS Board was to be reported to this meeting by the production of its minutes. The relevant documents are produced in the Appendix to this report.

## E. CONCLUSION

This report ensures that members are kept appraised of the activities of Lothian NHS Board as part of the council's Code of Corporate Governance.

## F. BACKGROUND REFERENCES

West Lothian Council Code of Corporate Governance.

Council Executive, 29 June 2010

| | |
|---|---|
| Appendices/Attachments: | Appendix 1 Minutes of the meeting of NHS Lothian Board held on 3rd February 2021 |
| Contact Person: | Allister Short, Depute Chief Executive<br><br>allister.short@westlothian.gov.uk |
| CMT Member: | Allister Short, Depute Chief Executive |
| Date: | 3rd June 2021 |

**LOTHIAN NHS BOARD**

Minutes of the meeting of Lothian NHS Board held at 09.30am on Wednesday 03 February 2021 using Microsoft Teams.

**Present:**

**Non-Executive Board Members:** Ms E Roberton (Chair); Mr M Hill (Vice-Chair); Mr M Ash; Mr M Connor; Dr P Donald; Cllr G Gordon; Ms C Hirst; Mr A McCann; Mrs A Mitchell; Mr P Murray; Mr W McQueen; Cllr F O'Donnell; Cllr D Milligan; Mr T Waterson; Dr R Williams; Ms K Kasper; Ms N McKenzie; Mr J Encombe and Prof. S Chandran.

**Executive Board Members:** Mr C Campbell (Chief Executive); Ms T Gillies (Executive Medical Director) and Professor A McMahon (Executive Director, Nursing, Midwifery & AHPs – Executive Lead REAS & Prison Healthcare).

**In Attendance:** Mr J Crombie (Deputy Chief Executive); Mrs J Butler (Director of HR & OD); Mrs J Mackay (Director of Communications & Public Engagement); Mr P Lock (Director of Improvement); Mrs J Campbell (Chief Officer, Acute Services); Mr C Briggs (Director of Strategic Planning); Mr C Marriott (Deputy Director of Finance, NHS Lothian); Mr A Short (Chief Officer, West Lothian HSCP)(from 11:35am); Mr A Mackenzie (Psychiatry CT3, NHSGGC, C Hirst Paired Learning Partner); Ms Leigh Brown (Senior Charge Nurse, RIE – Shadowing Mr Waterson); Mr A Payne (Head of Corporate Governance) and Mr C Graham (Secretariat Manager)

**Apologies for absence:** Ms F Ireland (Non-Executive Director); Ms K Dee. (Interim Director of Public Health and Health Policy) and Mrs S Goldsmith (Director of Finance).

## 102. Declaration of Financial and Non-Financial Interest

102.1 The Chair reminded members that they should declare any financial and non-financial interests they had in the items of business for consideration, identifying the relevant agenda item and the nature of their interest.

102.2. Cllr Gordon declared that he was Chair of the Edinburgh International Conference Centre which will be used as a mass vaccination centre.

## 103. Chair's Introductory Comments

103.1 The Chair welcomed members and guest to the meeting and the Board passed its congratulations to Mr Lock on the birth of his daughter.

103.2 The Chair also welcomed new Board Members - Ms Nancy McKenzie, Mr Jock Encombe and Professor Siddharthan Chandran to their first meeting. The Board noted that this would be Cllr O'Donnell's final meeting as she would be stepping down from the Board on 23 February 2021 and wished her all the best in her new role.

**Items for Approval**

103.2 The Chair reminded those present that the Board agenda was made up of two separate sections. The first was the section for approval commonly referred to as "the consent agenda". The Chair reminded members that they had the opportunity to advise in advance if they wished matters to be moved out of this section. There had been no such requests.

103.3 Minutes of Previous Board Meeting held on 09 December 2020 – Minutes were approved

103.4 Finance & Resources Committee Minutes – 25 November 2020 – Minutes were noted

103.5 Healthcare Governance Committee Minutes – 10 November 2020 – Minutes were noted

103.6 Audit and Risk Committee Minutes – 23 November 2020 – Minutes were noted

103.7 Staff Governance Committee Minutes – 21 October 2020 – Minutes were noted

103.8 Edinburgh Integration Joint Board Minutes – 27 October 2020 – Minutes were noted

103.9 West Lothian Integration Joint Board Minutes – 10 November 2020 – Minutes were noted

103.10 East Lothian Integration Joint Board Minutes – 29 October 2020 – Minutes were noted

103.11 Midlothian Integration Joint Board Minutes – 08 October 2020 – Minutes were noted

103.12 Appointment of Members to Committees – The Board agreed to:

- Re-nominate Martin Hill as a voting member of Edinburgh IJB for the period from 1 March 2021 to 31 July 2023.
- Re-nominate Bill McQueen as a voting member of West Lothian IJB for the period from 1 April 2021 to 31 January 2022.
- Re-nominate Angus McCann as a voting member of Midlothian IJB for the period from 4 April 2021 to 31 August 2023.
- Appoint Councillor George Gordon as the Chair of the Pharmacy Practices Committee.
- Appoint Vinny Bilon, David Massie and Gordon Stuart as 'contractor pharmacist' members of the Pharmacy Practices Committee.

103.13 Review of Terms of Reference of the Finance and Resources Committee – The Board agreed to approve the revised terms of reference of the Finance & Resources Committee.

103.14 Update on the Epidemiology of COVID-19 in Lothian - The Board Agreed to note the report briefing on the current trends around COVID-19.

**Items for Discussion**

**104. Board Chair's Report – January 2021**

104.1 The Chair briefed the Board on recent events and pieces of work that she had been involved with this included induction meetings with the new Board members and fortnightly meetings with public health minister.

**105. Board Executive Team Report – January 2021**

105.1 The Board received the Board Executive Team report and there was discussion on the following specific sections:

- **Recovery Plan** - Mrs Mitchell asked about the timescale for recovery. Mr Campbell confirmed that recovery would probably take a couple of years this would be to clear the backlog, whilst recognising NHS Lothian's disadvantaged starting point in comparison to other boards, in terms of capacity and the lack of infrastructure even before the pandemic to meet demand.

  Cllr Milligan asked about services in the post pandemic period. Mr Campbell stated that there would be changes to how services were provided. Ideally this would be the separation of elective and emergency services, but this would not be totally achievable. In the wider context the use of single room accommodation would be looked at to make sure infection control standards could be more easily complied with. There is a need for a national strategy for recovery and this had been articulated to Scottish Government.

- **Staffing levels at St John's Hospital** – Prof. McMahon stated that there remains a challenge around recruitment and retention of staff. There were currently 7 beds closed at St John's Hospital so that safe staffing could be in place, however this increased pressures. West Lothian College were providing assistance in some support roles. The sustainability of the workforce model was being reviewed to see if the skill mix could be adapted for wards moving forward.

- **Recruitment of Clinical Educators** - Professor McMahon reported that support to care homes continued and that with funding now in place recruitment of 6 clinical educators and 5 tissue viability nurses was underway. The appointment of an Associate Director for Infection Control was noted.

- **Matter of Focus Midlothian** – Mr Campbell confirmed that this was a new tool being introduced by Midlothian IJB and that he would ask the Midlothian Chief Officer to provide further information on this to the other IJB Chief Officers as part of a wider roll out.

- **2021/22 Objectives** – The Board noted that the Corporate Management Team had held a session to develop a first draft of the objectives and that engagement with the Board, on these objectives, would take place once

these had been checked and formatted.

- **New Whistleblowing Standards** – Mrs Butler reported that the implementation of the standards was on track, for directly employed staff, from 1 April 2021. Arrangements for independent contractors were more challenging and this had been fed back to the Scottish Government. Ms Kasper added that the first Non-Executive Director Whistleblowing Champions Network group would meet tomorrow with the aim to have the conversation around this challenge and to work behind the scenes on how best to approach this.

- **Virtual/Scheduled Minor Injury Assessment Activity** – noted that levels were likely to have been low due to the soft launch to the national communications while processes are tested and workforce at NHS24 and board flow centres are expanded. Lothian had advertised the new pathways for patients locally but there was opportunity to build on this and make access easier. Part of the anxiety around this was the significant pressure this could place on the workforce system and it was noted that NHS24 had struggled to get staff in place for a harder launch. It was hoped that over time the number of people with a scheduled appointment for A&E would increase whilst A&E would remain open for blue light cases. The Board noted that Mr Campbell was the co-chair on the national group and that the evaluation relating to paediatric attendances was currently ongoing.

- **Flu Vaccination** – Noted that there had been very few flu admissions this year and low prevalence within the community.

- **Response to the Edinburgh Poverty Commission** – Noted that the Executive Leadership Team response to the Edinburgh Poverty Commission was submitted in December 2020 and gave NHS Lothian's commitment to work with partners on strategies to end poverty in Edinburgh by 2030. A new NHS Lothian wide group would be established to consider a range of issues including employability, procurement and NHS Lothian's role as an anchor institution. This work would include the four IJBs as part of a joined-up approach.

- **Testing Expansion Programme** - Dr Donald asked about testing results and the impact on staffing and services. Mr Briggs stated that a detailed report could be developed and reported to the upcoming Planning, Performance and Delivery Committee in March. Mr Briggs added that the Lauriston East Hub testing facility was now open and that the lab would significantly add to the capacity to run symptomatic and asymptomatic testing of the general population. Staff testing was being successfully rolled out to all patient facing staff directly employed by NHS Lothian and the Scottish Government were likely to announce the expansion of this to GP practices later today.

**106. Opportunity for committee chairs or IJB leads to highlight material items for awareness.**

- **Finance and Resources Committee –** Mr Hill reported that the committee was continuing to scrutinise the response to the Royal Hospital for Children and Young People audit recommendations, and looking to strengthen governance and senior responsible officer management arrangements around this and for future projects. A detailed report would go to the next Finance and Resources Committee. The committee had also been discussing Scottish Government advice that there would be no additional new capital funding of large projects in Scotland over the next 5 years. Consideration was being given to how this impacted the ambitions of the Board; the need to look at more innovative solutions to problems other than capital investment and the continued push to regularise NHS Lothian's NRAC position.

**107. Vaccination Programme Update**

107.1 Mr Briggs introduced the report updating the Board on the Covid Vaccination Programme. Mr Briggs outlined the following figures for Lothian as at 9pm on 02 February 2021, according to the national vaccination management tool:

- **55,845** citizens had received a jab.
- **27,721** over 80s have been vaccinated by GPs – this was over and above the vaccination management tool figure above.
- **5604** over-75s had been vaccinated by GPs.
- The gross number was therefore **89,170.**

107.2 The Board noted that the paper suggested the adult population of the Lothians to be 807,746. This figure cannot be assumed to only be Lothian residents, however, as staff will travel from outside the Lothians to work here.

107.3 Mr Briggs also confirmed that:

- 42,756 staff had been vaccinated, including unpaid carers, social care and NHS Lothian staff
- 92% of care home residents had received their first vaccination. 7% could not receive their vaccination due to being Covid positive, and 1% refused the vaccination.
- All eligible patients in our HBCCC facilities had been vaccinated.

107.4 The Board noted that in relation to vaccination clinics the centres at Edinburgh International Conference Centre and the Royal Highland Showground were now open and that Health and Social Care Partnership colleagues were taking forward the local clinics. Mr Briggs reported that vaccine wastage was running at around 1.5% and this was better than the national assumption of 5%.

107.5 The Board recognised the challenges in relation to public perception of the pace of vaccination. The suggestion that Lothian was lagging behind other boards was not warranted. The national vaccination management tool does not currently reflect the activity performed by GPs, leading to the reported figures for NHS Lothian to be understated.

107.6 Other challenges were noted in relation to vaccine supply; the visibility of this; the balance between vaccine for 1st and 2nd doses and the need to have phased opening of mass vaccination centres so that the workforce can be confirmed.

107.7 The Board noted that the mechanism in Lothian was not the same as other parts of Scotland. In Lothian 75 to 79-year olds and the people who are Extreme Clinically Vulnerable were being vaccinated through GP practices. The 70 to74-year olds were going through the mass vaccination centres. It was noted that there were schedules for all age groups but there remained concerns around vaccine supply.

107.8 In relation to the 2nd doses for staff and staff who missed 1st doses, Mr Briggs confirmed that the intention had always been to run 1st dose staff vaccines up to 31 January 2021, due to the challenges with moving to mass vaccination centres and vaccine supply. The Board noted that staff had been given notice about 1st dose staff programme closing and staff, sites and teams had been asked to identify people missed or any urgent cases. There would now be a system of transferring 1st dose staff appointments from the staff programme into the mass vaccination centres, with the plan for 1500 to 2000 staff per week through the centres over 10 weeks. The final communications around this would be going out today.

107.9 Mr Briggs highlighted that the Scottish Government guidance around who were eligible staff for vaccine was very broad and open to different interpretations. It would be easy to place a large part of the general population into these groups. Therefore, NHS Lothian had developed some principles around eligibility, which it was hoped to agree with the four local authorities.

107.10 The Board discussed the need for improved systems around data reporting, given it was likely that this would not be a one-off vaccination programme and there needed to be confidence in the data being provided. It was noted that the aligning of GP systems with boards had been an ongoing issue for some time. There was also a need to improve confidence in national planning assumption modelling as this had an impact on vaccine supply management.

107.11 Dr Williams reminded the Board of the incredible achievement to get the vaccination programme up and running, and recognised the extraordinary efforts made by colleagues. He highlighted that before 1 February there were no mass vaccination centres in existence. Dr Williams noted that the process for volunteering appeared to be a national process rather than a local one. He suggested that a local approach may have been more efficient and effective. Mr Campbell confirmed that there would be a review of lessons learned at some point which would inform future vaccination programmes.

107.12 Cllr O'Donnell asked about vaccination roll out in East Lothian. It was noted that the addition of mass vaccination centres at Queen Margaret University (from 10 February 2021) and East Lothian Community Hospital would substantially increase capacity.

107.13 Cllr O'Donnell also asked about impact on health Inequalities. Mr Briggs suggested that a report be brought to a future Board meeting from Public Health colleagues, but he was not aware of any inequality around vaccine supply in East Lothian. The Community Hospital had already carried out a substantial amount of staff vaccinations.

107.14 Mrs Mitchell raised the visibility of vaccine supply. The Board noted that visibility was two weeks to one month ahead. Mr Campbell confirmed that Lothian's plan as submitted to Scottish Government had been accepted. However there had now been a request from Scottish Government to accelerate the Royal Highland Showground site to open today rather than the 15 February 2021. This had been done with the caveats that initial military support be provided to cover the gap, and confirmation that additional vaccine supply would be in place given the accelerated rate. The Board noted that the Scottish Government had accepted these caveats and that current vaccine visibility was up to 1 April 2021.

107.15 The Chair welcomed this comprehensive update and the Board expressed its appreciation to all colleagues involved in establishing a successful Covid vaccination programme.

**108. Scheduled and Unscheduled Care Performance**

108.1 Ms Campbell updated the Board on performance for Scheduled Care standards: New Outpatient ('OP'), Treatment Time Guarantee ('TTG'), Diagnostic key test and 31 & 62 Day Pathway Cancer pathways. The report also included the 4-hour emergency access standard and the performance on delayed discharges. The report also covered the ongoing risk to long waits, the impacts of Covid between now and the end of March 21, as well as the positive impact of clinical prioritisation. An update on unscheduled care activity and pressures over the festive and recent periods was also included.

108.2 Ms Campbell presented an update to the Board covering the information outlined in Appendix 1B of the report. The presentation covered the impact of Covid on performance; demand and activity; reducing long waits for the most urgent patients and implications for big services with waits over 52 weeks (ophthalmology, dermatology and oral surgery). It was noted that all new patients were clinically prioritised before being added onto waiting lists and patients receive a letter detailing the evaluation of clinical priority and what this means for their wait.

108.3 There was discussion on vaccine roll-out modelling and the ability of services to reopen; the use of telephone and video consultation options; the extent of which Lothian's challenges were common to other boards and ways of reorganising service delivery and benchmarking; what the future demand profile for NHS Lothian may look like up to March 2022; and alignment with

the national recovery plan. Ms Campbell added that the biggest constraint for outpatient services remained the two-metre physical spacing and the impact that this had on flow and in the clinical areas. This had led to a mixed clinical service delivery model of face-to-face, telephone and video consultations.

108.4 The Board noted that the majority of theatres had now been successfully remobilised but capacity was still down due to required cleaning and fallow time between patients. However, there were a small number of green pathways that allowed fallow time to be reduced but there were restrictions around these. There was ongoing work to look at maximising theatre capacity and the workforce implications around this, but this may require an in-sourced model to allow full exploitation of capacity.

108.5 Ms Campbell confirmed that there was a full programme of work between acute and HSCP colleagues to look at community-monitoring closer to home and other non-acute service options, rather than attending hospital. In relation to additional support measures being put in place to support people where operations were significantly delayed, Ms Campbell stated that orthopaedics colleagues had good links with patients, and were providing advice and support around exercises, pain management and maintaining mobility throughout their wait. Physiotherapy support was also available.

108.6 Dr Donald asked about patient confidence and anxiety about attending hospital slots at Spire Healthcare. Ms Campbell reassured the Board that the Spire facilities had been given to NHS Lothian but the surgeons remained NHS Lothian's staff and the governance arrangements remain the same.

108.7 The Board agreed to the recommendations as outlined in the report:

- Acknowledged the impact of the first and second waves of Covid on OP, TTG and
- Diagnostic performance. The reintroduction of services and screening has not impacted cancer waiting times performance, although some diagnostic capacity remains reduced.
- Take limited assurance that remobilisation will mitigate increasing numbers of long-wait patients for scheduled care and cancer services, against proactively dealing with on-going Covid demand, winter activity and a known backlog of patients from the first wave arising from cessation of routine activity. This will impact on over 52 weeks from January 21.
- Acknowledged that 61.9% of patients were seen within the Treatment Time Guarantee
- (TTG) in November 20 – a month-on-month improvement since August 20. Provisionally, 8,902 inpatients were waiting longer than 12 weeks by the end of December 20.
- Acknowledged that 4-hour Emergency Access Standard performance was 83.4% for December 2020.
- Acknowledged that NHS Lothian has implemented the first phase of the redesign of urgent care programme. This is part of the national roll out of NHS24 providing a national single point of access via 111 from 1 December 2020, for people with non-life

threatening injuries and illnesses to get advice and treatment as close to home as possible.

- Recognised that while the number of delayed discharges have increased since April 2020, numbers are still historically low for Lothian. There has been a 31% reduction of delays in December 2020 compared to December 2019. HSCPs and acute teams continue to work together to improve discharge planning, transfers of care and embedding Home First approach to reduce number of delays and associated occupied bed days.

**109. December 2020 Financial Position**

109.1 Mr Marriott updated the Board on the NHS Lothian financial position at Period 9 and set out the financial impact from Covid-19 to date.

109.2 There was discussion on the core and deficit position; Covid costs and funding; prescribing expectations and the local remobilisation plan. The key risks involved with Covid costs and funding coming forward were currently being worked through. Any impact from EU Exit was still unknown.

109.3 There was also discussion on social care funding; the sustainability of this going forward and the financial consequences of Covid. The Board noted that discissions on the Covid budget for the next financial year remained ongoing with Scottish Government colleagues.

109.4 Mr Murray suggested that social care funding be a priority point for discussion at the Board's Planning, Performance and Delivery Committee when the strategic plan was being revised. There was a clear issue around the ability to sustain strong transformation programmes for the four IJBs. Mr Campbell confirmed this would be picked up for the March session.

109.5 Dr Williams highlighted the implementation of an uplift to the secondary care budget as indicated by the First Minister. Mr Marriott confirmed that national work on this was underway and that a group had been set up to model the impact of this uplift from 8-11%.

109.6 The Board is agreed to accept the report as a source of moderate assurance that the Board will achieve a breakeven position in this financial year.

**110. Corporate Risk Register**

110.1 Miss Gillies introduced the report providing an update on the NHS Lothian's Corporate Risk Register for assurance.

110.2 There was discussion on the Risk Register review and the development of a more agile and responsive mechanism for reviewing risks and ensuring clearer control measures are in place to mitigate risks. The Risk Register would go on a more frequent, meaningful basis to the Corporate Management Team over the coming months as the mechanism is developed and formally written up.

110.3 Mr Murray suggested that rather than having a specific Covid risk, it would be more helpful to understand how Covid was impacting other main risks. Miss Gillies stated that this was part of the evolving thinking of the Covid position, and part of the move to living with Covid and incorporating aspects of that into what is taken on board. There was also discussion on the short term and long-term nursing workforce risks. Miss Gillies confirmed that these were risks that were regularly considered through the Board's Staff Governance Committee.

110.4 The Board recognised the need for a more agile risk management system that can be easily updated to reflect conversations, discussion and progress being made against risks. Miss Gillies added that it was not just agility that was needed but the understanding of what was within the Board's control and where the Board would expect mitigations to be in place.

110.5 The Board accepted the recommendations in the report:

- Accepted the risk assurance table as a summary of all risks including levels of assurance and grading, as agreed by the relevant committee.
- Noted that a high-level review of the risks on the corporate risk register and associated processes had been shared with the Chief Executive to identify the next steps.
- Noted that processes had been put in place to report, review and escalate adverse events relating to the Covid vaccination programme.

**111. RHCYP, DCN & CAMHS Project Update**

111.1 Mr Marriott updated the Board on the status of the project as it approaches final completion. The Board noted that ventilation works would be complete in the coming days ahead of the required independent validation and assurances from the Board's Authorised Engineer and Technical Advisors. The planned move of Child and Adolescent Mental Health services had also gone well.

**112. Any Other Business**

112.1 There was no other business.

**113. Next Board Meeting**

113.1 The next Board meeting would be held on 7 April 2021.

**114. Standing Order 5.23 Resolutions to take Items in Closed Session**

114.1 The Board agreed to invoke Standing Order 5.23 to allow a meeting of Lothian NHS Board to be held in Private. The reason for this was due to the commercial and confidential nature of the business to be discussed.

Chair's Signature ……

Date ……

**Esther Roberton**
**Interim Chair – Lothian**

DATA LABEL: PUBLIC

West Lothian Council

**HEALTH AND CARE - POLICY DEVELOPMENT AND SCRUTINY PANEL**

**SOCIAL POLICY MANAGEMENT PLAN 2021 - 2022**

**REPORT BY HEAD OF SOCIAL POLICY**

## A. PURPOSE OF REPORT

To inform the Health and Care PDSP of the contents of the Social Policy Management Plan 2021 - 2022.

## B. RECOMMENDATION

To note the details of the Social Policy Management Plan 2020 - 2021.

## C. SUMMARY OF IMPLICATIONS

| | | |
|---|---|---|
| I | **Council Values** | – Focusing on our customers' needs<br>– Being honest, open and accountable<br>– Providing equality of opportunity<br>– Developing employees<br>– Making best use of resources<br>– Working in partnership |
| II | **Policy and Legal (including Strategic Environmental Assessment, Equality Issues, Health or Risk Assessment)** | No new implications; Equality Impact Assessments will be applied to specific commitments where appropriate. |
| III | **Implications for Scheme of Delegations to Officers** | None |
| IV | **Impact on performance and performance Indicators** | All activities and actions have performance indicators and targets applied. |
| V | **Relevance to Single Outcome Agreement** | None |
| VI | **Resources - (Financial, Staffing and Property)** | All commitments are consistent with the Council's budget decisions. |
| VII | **Consideration at PDSP** | The management plan is reported on annually to the PDSP. |
| VIII | **Other consultations** | Quality Development Team |

## D. TERMS OF REPORT

As a means of delivering outcomes effectively and efficiently, West Lothian Council has identified Management Plans as an essential driver for the provision of excellent services. As such, they are to be collated and presented at the service group level, which is the collection of WLAM service units under the responsibility of a Head of Service. Containing critical information on the management of each service area, the plan provides an overview of the following:

- The services and activities it has responsibility for and the context in which they are delivered
- The aims and objectives of the services expressed in a way that can be easily understood by elected members, staff, partners and the public.
- How success will be measured, the targets that are to be achieved and the benchmarks of other providers who are considered 'best in class' (along with target-setting and benchmarking rationale)
- The improvement activities that the service is committed to completing in order to change or improve services.

## E. CONCLUSION

The Social Policy Management Plan sets out how the service will drive performance and as such it will be utilised by the management team and stakeholders to assess and gauge performance and improvement. The measures, targets and actions of the plan will be available for management monitoring and reporting on the corporate performance management system (Pentana).

## F. BACKGROUND REFERENCES

None.

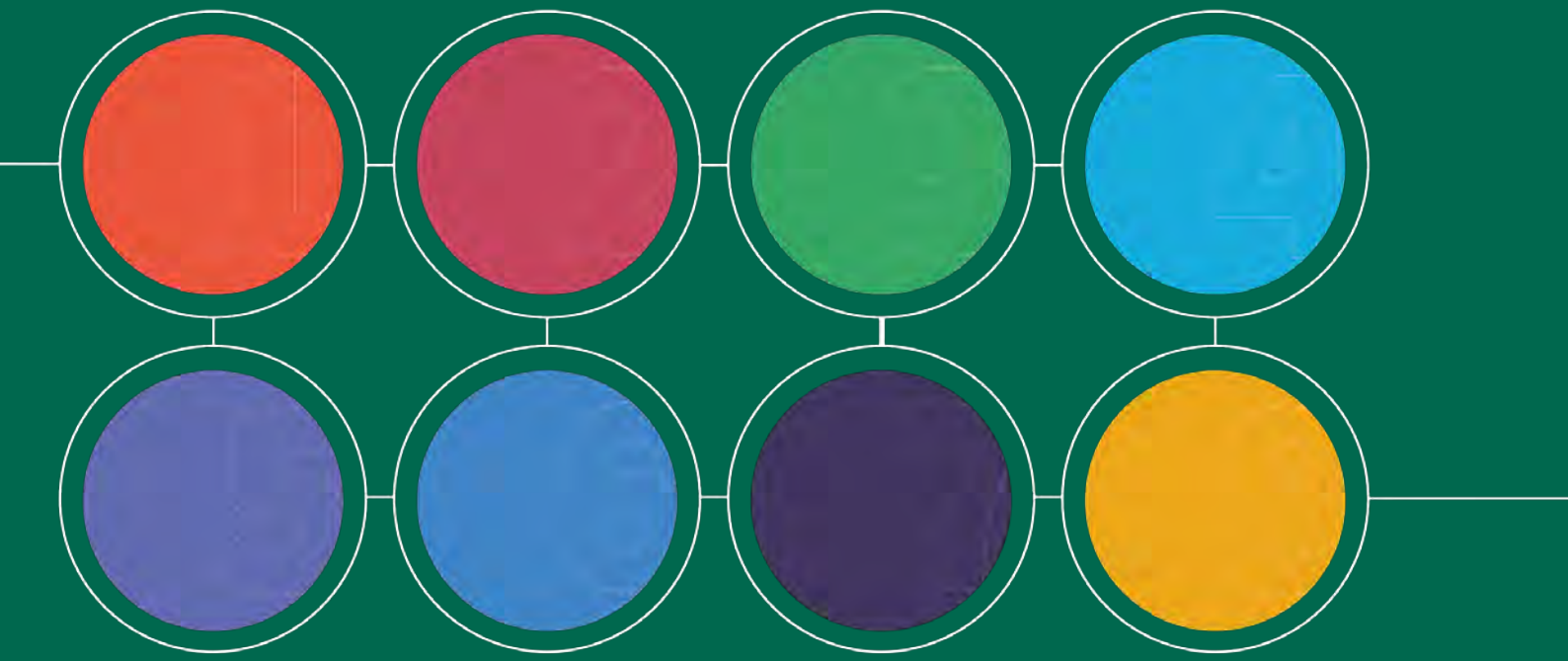
Appendix 1: Social Policy Management Plan 2021 - 2022

Contact Person: Jo MacPherson
Head of Social Policy

Date: 3rd June 2021

Data label: OFFICIAL

# Social Policy Management Plan 2021/22



transforming yourcouncil

West Lothian Council

# An introduction to the Management Plan from the Head of Social Policy

## The Management Plan is a key planning document that will explain how the service will support in the delivery of the council's eight priorities in 2021/22.

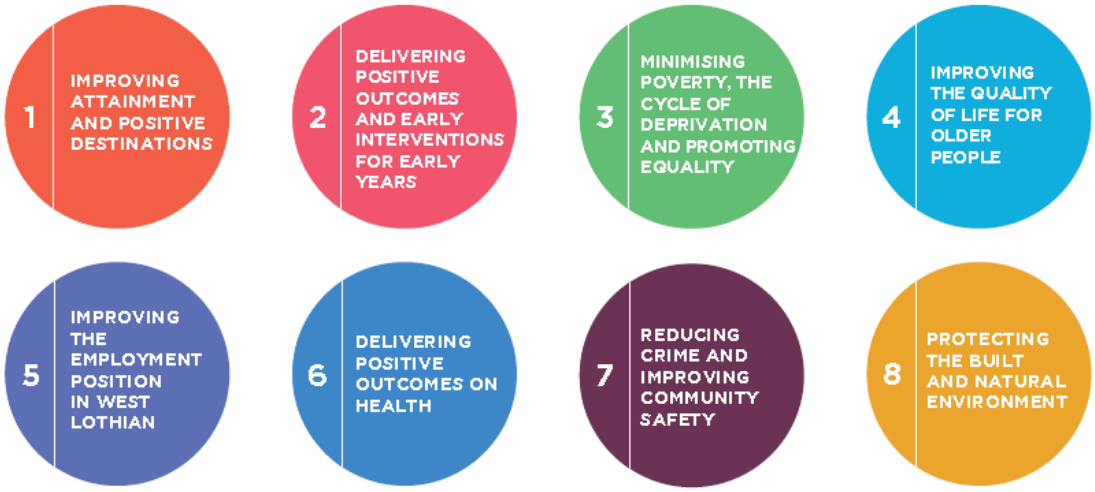
West Lothian Council is one of the top performing local authorities in Scotland, with a strong track record of delivering better outcomes for local people. The council aims to continue to support growth in a thriving local community and, with financial and demographic challenges ahead, will require an effective Social Policy Service to ensure key priorities are met.

In 2020/21 Social Policy faced the unprecedented challenge of responding to the COVID-19 global pandemic. Staff across the Health and Social Care Partnership worked closely with key partners to ensure that essential service continued to be delivered during these unparalleled times.

Transformational change and whole system innovation will continue to be required across Social Policy to meet these unprecedented and ongoing challenges.

Social Policy continues to provide a range of services across all aspects of social work provision focussed on the three main areas of Children and Families, Community Care and Criminal and Youth Justice. Each is designed to contribute effectively to positive outcomes across a number of the eight corporate priorities (see below).

**Corporate Priorities 2018/23 |** The council re-committed to eight ambitious priorities following a large public consultation in 2017/18. We believe these priorities will continue to support improvement in the quality of life for everyone living, working and learning in West Lothian and will be the focus for council services, resources and staff in the next two years.




In support of the Corporate Plan 2018/23 and the eight council priorities we will continue to strive to improve our contribution to the quality and value of council services. In line with the Corporate Plan the service will also be working to implement transformational change through the Transforming Your Council Project.

As well as assuring effective governance and compliance, Social Policy will maintain a clear focus on fulfilling the service's main statutory requirements by providing safe and efficient services. It will work operationally and strategically to deliver high quality care, support and supervision to the most vulnerable members of West Lothian communities.

This management plan fulfils a number of planning and improvement requirements and importantly, it sets out how the service will use its resources to deliver positive outcomes for West Lothian. It is the result of a detailed process to make sure that council services are well planned and managed. I hope that it will help our customers, employees and partners to understand how we will transform our services and continue to deliver for West Lothian.

Jo MacPherson
Head of Service

# Our services

## The services that we will deliver through collaboration with our partners in the Health and Social Care Partnership 2021/22

Social Policy encompasses a wide range of services planned and delivered for a large number of people with a spectrum of differing needs.

The core areas are, Community Care, Children and Families and Criminal and Justice delivered across four main operational services.

- Services for children, young people and families
- Services for people with involvement in criminal and youth justice systems
- Services for adults with additional and complex needs
- Services for older people

Services for mental health and addictions are delivered through integrated teams and management with partners NHS Lothian.

**The key activities of the service are identified in the Management Plan.**


| | | Page |
|---|---|---|
| Community Care | Community Care comprises a wide range of services provided for adults and older people with care needs. Services include Care at Home, Care Homes, Occupational Therapy, Sheltered Housing and Housing with Care, Support for People with Learning and Physical Disabilities, and Support for People with Mental Health Problems and addictions | 12 |
| Children and Families | The primary function of the teams and services within Children and Families is to ensure that children, young people and families can maximise their potential through the identification of additional support services and ensuring that children and young people are safe | 27 |
| Justice Service | The Justice Service is focussed on providing the services statutorily required through legislation for the assessment, supervision and management of offenders. It is also focussed on the development of the 'Whole system approach' supporting young people who are at risk of offending | 37 |
| Developing the Management Plan and reporting progress | The plan supports the overall Corporate Plan and shapes the delivery of key service strategies over the next three years | 42 |
| Social Policy Scorecard 2021/22 | The scorecard focusses on key customer, process, financial and outcome measures for the service | 44 |

# Supporting the delivery of Council priorities

## The service will support the delivery of the Council's Corporate Plan priorities and strategies

The service will make a meaningful and measurable contribution to the delivery of the Council's Corporate Plan 2018/23. As well as developing strategic and commissioning plans, the service's key processes are aligned to the Corporate Plan priorities/enablers and deliverables in the following table.

**Alignment with Corporate Priorities / Enablers**

| Council priority / enabler | Deliverable | Social Policy key activities / processes | Indicator(s) | 2020/21 Performance | 2021/22 Target |
|---|---|---|---|---|---|
| 2 Delivering positive outcomes and early interventions for early years | (P2.1) Providing sustainable models of parenting support work within home, community and education settings. | ◆ Inclusion and Support Service.<br>◆ Family Placement Team<br>◆ Families Together<br>◆ Child Care and Protection Teams<br>◆ Residential Houses | SPCF096_9b_Balance of Care for Looked After Children: Percentage of Children being Looked After in the Community | 92% | 93% |
| 2 Delivering positive outcomes and early interventions for early years | (P2.2) Providing support for vulnerable children and young people to achieve sustainable positive outcomes and destinations in line with priorities in the West Lothian Corporate Parenting Plan. | ◆ Child Care and Protection Teams<br>◆ Child Disability Service<br>◆ Reviewing Officers Team<br>◆ Domestic and Sexual Assault Team<br>◆ Social Care Emergency Team<br>◆ Whole Family Support Service<br>◆ Residential Houses<br>◆ Inclusion and Aftercare Service | SPCF138_Percentage of children involved with the Families Together service who have avoided becoming accommodated who were assessed as being at high risk of being accommodated. | 85% | 90% |
| 3 Minimising poverty, the cycle of deprivation and promoting equality | (P3.6) Contributes to providing a route out of poverty through work and continuing to support those further from the labour market to progress towards work. | ◆ Families Together<br>◆ Aftercare Service<br>◆ Sure Start<br>◆ Youth Justice Team<br>◆ Community Payback Team<br>◆ Support to adults with physical disabilities, learning disabilities and mental health issues<br>◆ Domestic and Sexual Assault Team<br>◆ Community Addictions Services West Lothian | SPCF127_Percentage of young people who are eligible for Aftercare Services who present as homeless | 2% | 2% |

## Alignment with Corporate Priorities / Enablers

| Council priority / enabler | Deliverable | Social Policy key activities / processes | Indicator(s) | 2020/21 Performance | 2021/22 Target |
|---|---|---|---|---|---|
| 4 Improving the quality of life for older people | (P4.1) Through the delivery of the Integration Joint Board Strategic Plan, older people are able to live independently in the community with an improved quality of life. | ◆ Assessment and Care Management Services (including Self Directed Support and compliance with the Carers (Scotland) Act 2016)<br>◆ Facilitating Hospital Discharge<br>◆ Care Homes<br>◆ Housing with Care<br>◆ Day care and personalised support<br>◆ Care at Home and specialist provision | CP:CC017_Percentage of customers who rated overall satisfaction with the Older Peoples service they received as good or excellent<br><br>SW03a_Percentage of People Aged 65+ with long-term care needs who are receiving personal care at home | 97%<br><br>65.7% | 98%<br><br>64% |
| 4 Improving the quality of life for older people | (P4.3) Redesigning services for older people with a focus on supporting those most in need and maximising the use of technology enabled care where appropriate. | ◆ Provision of Home Safety Service and further development of Telecare<br>◆ Reablement and Crisis Care Services<br>◆ Occupational Therapy Service<br>◆ Home Safety and Technology Enabled Care programme | CP:SPCC100_Increasing the number of people aged 75+ supported by technology to remain at home. | 2,553 | 2,755 |
| 4 Improving the quality of life for older people | (P4.4) Developing a more sustainable service delivery model targeted to those most in need with an increased emphasis on reablement to retain or regain independence within their home or community setting. | ◆ Provision of Home Safety Service and further development of Telecare<br>◆ Reablement and Crisis Care Services<br>◆ Occupational Therapy Service<br>◆ Home Safety and Technology Enabled Care programme | CP:SPCC014_Percentage of Occupational Therapy assessments allocated within 6 weeks of referral<br><br>SPCC024_Net cost per head of population on social care services for older people. | 58%<br><br>£1,493 | 70%<br><br>£1,432 |

## Alignment with Corporate Priorities / Enablers

| Council priority / enabler | Deliverable | Social Policy key activities / processes | Indicator(s) | 2020/21 Performance | 2021/22 Target |
|---|---|---|---|---|---|
| 4 Improving the quality of life for older people | (P4.5) As part of the delivery of the Integration Joint Board Commissioning Plan for Older People, the council will focus on:<br>a) Improving dementia care, with particular emphasis on improving post-diagnostic support;<br>b) Expanding use of technology-enabled care to support older people and carers of older people;<br>c) Supporting older people to live at home or in a homely setting for longer;<br>d) Ensuring specialist mental health provision for the over 65's;<br>e) Ensuring support needs of carers are met, particularly carers of those with dementia;<br>f) Developing single points of information for all older peoples' service provision. | ◆ Assessment and Care Management services for older people<br>◆ Reablement and Crisis Care<br>◆ Short Breaks/Respite and Day Care<br>◆ Review Housing with Care<br>◆ Redesign of Post Diagnostic Support Service<br>◆ Provision of Home Safety Services and development of Telecare<br>◆ Review of Care Home Liaison service<br>◆ Older People Acute Care Team<br>◆ Review Access Systems | CP:SPCC101_The number of carers of older people who have an adult carer support plan<br><br>SPCC019_Average number per month of West Lothian patients whose discharge from hospital is delayed. | 145<br><br>3 | 175<br><br>1 |
| 6 Delivering positive outcomes on health | (P6.1) The development of more targeted care at home, the use of assistive technology and provision of reablement will positively contribute to improved outcomes for people. | ◆ Reablement and Crisis Care<br>◆ Home Safety Service and Development of Technology | P-SPCC015_Number of households receiving telecare | 3,681 | 3,750 |

## Alignment with Corporate Priorities / Enablers

| Council priority / enabler | Deliverable | Social Policy key activities / processes | Indicator(s) | 2020/21 Performance | 2021/22 Target |
|---|---|---|---|---|---|
| 6 Delivering positive outcomes on health | (P6.2) Through the delivery of the Integration Joint Board Strategic Plan, increase well-being and reduce health inequalities across all communities in West Lothian. Locality planning will provide a key mechanism for strong local, clinical, professional and community leadership. | ◆ Assessment and Care Management<br>◆ Improve % of Personalised Care Options<br>◆ Develop Core and Cluster Housing Models<br>◆ Access to Employment<br>◆ Community Addictions Services West Lothian | SOA:1307_19_Premature mortality rate per 100,000 | 410 | 411 |
| 6 Delivering positive outcomes on health | (P6.3) Improving our approach to integrated models for mental health services for children, young people and adults recognising the importance of mental health and wellbeing on people achieving positive outcomes. | ◆ Acute Care and Support Team<br>◆ Child and Adolescent Mental Health Service<br>◆ Older People Acute Care Team<br>◆ Post Diagnostic Support (Dementia)<br>◆ Development of Core and Cluster<br>◆ Domestic and Sexual Assault Team<br>◆ Criminal and Youth Justice Service | SPCJ124_9b Percentage of women with mental health issues receiving Almond Project support who report improvement in mental health and wellbeing. | 100% | 100% |
| 6 Delivering positive outcomes on health | (P6.4) Improving support to carers over the next five years through improved identification of carers, assessment, information and advice, health and well- being, carer support, participation and partnership. | ◆ Joint management of the Community Equipment Store<br>◆ Support to adults with physical disability and mental health issues | CP:SPCC101_The number of carers of older people who have an adult carer support plan<br>.<br>SOA1306_17 Percentage of carers who feel supported in their care role | 145<br><br>36% | 175<br><br>46% |
| 6 Delivering positive outcomes on health | (P6.5) Delivering effective and integrated equipment and technology solutions to promote independence, support the ongoing shift in the balance of care, reduce and prevent hospital admissions and facilitate speedier hospital discharge. | ◆ Day care and personalised support plans<br>◆ Occupational Therapy Services<br>◆ Access to Employment<br>◆ Short Breaks from Caring<br>◆ Provision of HSS and development of Telecare | CP-SPCC028_ Percentage of people with a learning disability supported in their own tenancies<br><br>CP-SPCC002 _ Percentage of Care Inspectorate Inspections undertaken within registered learning disability services graded good or above | 56% latest available data 18/19<br><br>100% | 60%<br><br>100% |

## Alignment with Corporate Priorities / Enablers

| Council priority / enabler | Deliverable | Social Policy key activities / processes | Indicator(s) | 2020/21 Performance | 2021/22 Target |
|---|---|---|---|---|---|
| 6 Delivering positive outcomes on health | (P6.6) Improving the health and well-being of service users through rehabilitation and reablement, which will, in turn, have a positive impact on carers. | ◆ Reablement and Crisis Care<br>◆ Joint Management of Equipment Store<br>◆ Development of Independent Housing Options | CP-SPCC015_Number of households receiving telecare | 3,681 | 3,750 |
| 7 Reducing crime and improving community safety | (P7.4) Protecting those in our community who are most at risk by providing effective interventions across the four main strands of public protection; Child Protection, Adult Support and Protection, Violence Against Women and Girls | ◆ Child Care and Protection Teams<br>◆ Prison based Social Work Team at HMP Addiewell<br>◆ Criminal Justice Throughcare Team<br>◆ Domestic and Sexual Assault Team<br>◆ Public Protection Team | SOA1305_04 Percentage of women who report that they feel safer as a result of intervention by the Domestic and Sexual Assault Team | 100% | 100% |
| 7 Reducing crime and improving community safety | (P7.5) Working with our partner agencies to deliver the priorities agreed in the Community Justice Strategy; focused on ensuring that those over the age of 16 involved in the justice system are best supported not to reoffend. | ◆ Youth Justice Team<br>◆ Community Payback Team<br>◆ Unpaid Work Order Team<br>◆ Assessment and Early Intervention<br>◆ Early and Effective Intervention | CP: SPCJ103a Percentage of Early and Effective Intervention (EEI) cases 8 to 17 years who do not become known to the Youth Justice Team within 12 months<br><br>CP:SPCJ144 Percentage of Community Payback Orders supervised by the Criminal and Youth Justice Service with a successful termination | 96%<br><br>83% | 97%<br><br>83% |

# Transforming Your Council

## How Social Policy will transform in the next three years

The council has embarked on an ambitious programme of transformation in order to support the delivery of services that are accessible, digital and efficient. The Transforming Your Council programme is intended to deliver over £65.3million in savings and will fundamentally change the way that council services are delivered.

As a service that supports every part of the organisation and some of our key partners, it is critical that Social Policy is at the forefront of change in the council. Projects designed to deliver budget savings of £12,007 million are being developed and implemented to continue transform the way that we work in Social Policy over the next two financial years. There are anticipated to be areas of growth for Social Policy but these will not keep pace with demographic increases without considerable redesign and organisational change. In 2020/21 efficiencies of £6.654 million were achieved.

**Transformation in the service is grouped around three key themes.**

**Shifting the balance of care for Looked After Children**

The Childrens Services Plan and Corporate Parenting Plan ensure a focus on the provision of support and services for the most vulnerable children in West Lothian.

Develop new models of services to ensure that families are supported at the earliest point and intensive support provided to ensure children at risk of being accommodated (including children with disabilities and social educational and behavioural needs) remain placed within their own families, family networks and communities.

**Digital transformation and new ways of working**

The service will look for opportunities to digitise internal processes, making them more efficient.

New ways to integrate new technology will also be pursued. We will use procurement processes to identify options available in the market as well as maximising the functionality of corporate systems. Social Policy has well established approaches towards commissioning that will support our approach.

**Care for Adults and Older People**

There will be increasing demands on social care services for adults and older people as a result of demographic growth. Eligibility for social care will reflect the needs of our most vulnerable residents. People with lower level needs will be supported to draw on the strengths within their informal networks and their local communities.

Building based services will be reviewed and redesigned to delver new models of care and support . Increased outreach models will be deployed along with our partner providers.

### Engagement methods

Throughout the period of this plan, Social Policy will continue to engage and consult with customers, employees, partners and stakeholders on the effectiveness of the services that we provide and also, any changes that are proposed to the service offered. Details of planned engagement and consultation methods will be provided in the annual update to the Management Plan.

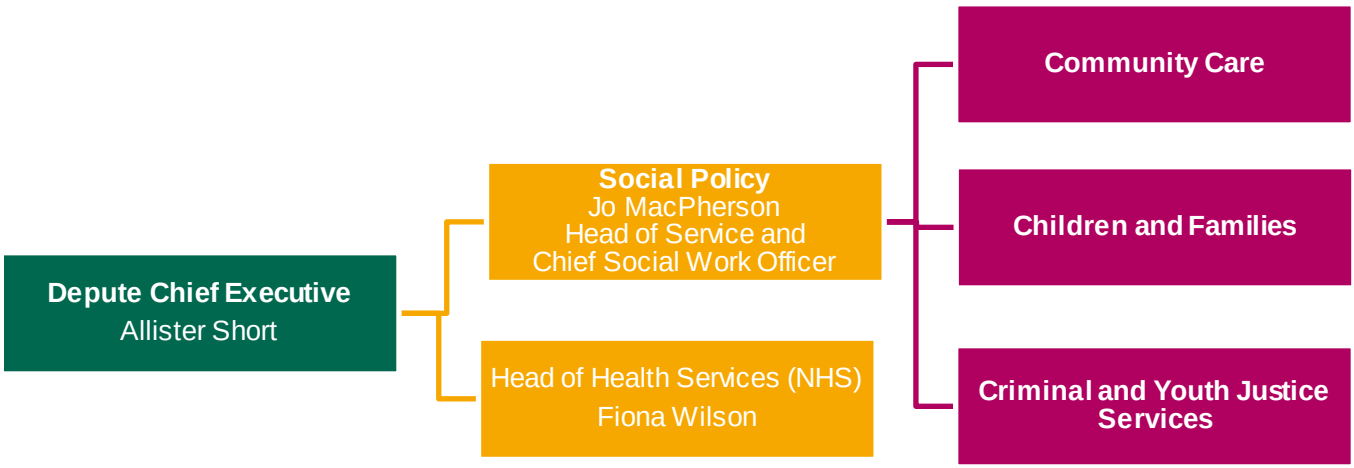
Social Policy will make the following commitments to customers, employees and partners:

- Involve and engage employees, customers and partners in service improvement and transformation activity through a range of appropriate methods;
- Ask customers about the quality and effectiveness of the services that we provide through regular consultation and surveys and use their views to inform decision making in the service.

# Service Activity

The Health and Social Care Partnership (HSCP) is focused on the delivery of integrated health and care services that will improve the wellbeing, safety and quality of life for people living in West Lothian, particularly those most at risk in society.

This includes services for children and families, care for adults and older people and those with disabilities or mental health problems and criminal and youth justice services.




Social Policy comprises of three large services – known as West Lothian Assessment Model (WLAM) units, under the direction of the Head of Service.

The following section provides more information on the activities and resources of each WLAM unit. It should be noted that a new WLAM unit will be developed for the Inclusion and Support Service during the life of this plan.

## Employee Engagement

Social Policy has a total of 1,080.4 (full time equivalent) employees delivering our services.

Motivation and commitment are key drivers of employee performance and the service aims to effectively engage and develop employees through improved communication and increased participation. The service uses the council's employee engagement framework, ensuring that employees have access to the information and support they need to succeed, also that there is constructive, regular two-way communication throughout the service.

The schedule of engagement that will take place in each of our WLAM units is outlined in the table.

**Employee Engagement Schedule 2021/22**

| Employee Group | Method | Frequency | Responsible Officer |
|---|---|---|---|
| **All employees** | Email | Monthly | Head of Social Policy, Senior, Group and Team Managers |
| **All employees** | One-to-ones | Fortnightly / monthly | Head of Social Policy, Senior, Group and Team Managers |
| **All employees** | Team meetings | Monthly | Head of Social Policy, Senior, Group and Team Managers |
| **All employees** | Team Briefings | Quarterly | Head of Social Policy, Senior, Group and Team Managers |
| **All Employees** | Employee survey | Annually | Senior Managers |
| **All employees** | Appraisal and Development Review (ADR) | Annually | Head of Social Policy, Senior, Group and Team Managers |
| **Employee sample** | Employee Focus Group | Annually | Group Managers |
| **All employees** | Management Plan Launch | Annually | Head of Service / Senior Managers |
| **All employees** | Circulation of the Social Policy CMT update report | Monthly | Head of Service |
| **Service management team** | Extended Management Team | Quarterly | Head of Service |

## Risk Management

Risk can be defined as the effect of uncertainty on an organisation's objectives.

The council aims to mitigate risks to its objectives by implementing robust risk management procedures which enable managers to effectively manage their risks.

Significant risks to Social Policy Services' objectives are set out in the council's corporate risk register. These risks are regularly monitored by managers and are reviewed on a monthly basis by the service management team to ensure that appropriate and effective control measures are in place.

Social Policy Services is currently managing the following risks considered to be moderate:

**Service Risks 2021/22**

| Risk Title | Risk Description | Current Risk Score | Traffic Light Icon |
|---|---|---|---|
| CCOP001 Insufficient availability of beds to meet service demands - care homes | Insufficient supply to meet service demands arising from economic imbalance in the local market. Currently this risk is highest in respect of the market pressure related to Older Peoples services and this risk relates specifically to care homes. The risk is also related to pressures around delayed discharge (one of the sources of pressure), also noted as a risk for the IJB (IJB010). The risk is closely monitored by the Social Policy Management Team. | 6 | |
| CCOP002 Insufficient supply to meet service demands - care at home | Insufficient supply to meet service demands arising from economic imbalance in the local market. Currently this risk is highest in respect of the market pressure related to Older Peoples services and this risk relates specifically to care at home. The risk also related to pressures around delayed discharge (one of the sources of pressure), also noted as a risk for the IJB (IJB010) The risk is closely monitored by the Social Policy Management Team. | 9 | |
| CF001 Assault or injury to staff by service user within children's residential houses | Incidents of violence by young people who reside at West Lothian residential units (Torcroft, Whitrigg and Newton) are caused by the vulnerability of the young people who are often impacted upon by their life experiences. This may make them react violently in some circumstances. This can result in situations where young people cannot control their behaviour and can result in hitting out at staff members who have to try and assist them to get themselves back under control. As a consequence, staff can become injured or be affected by violence in a way that means they can become unwell due to the impact the violence has upon them. | 9 | |
| SP011 Injury to or death of a staff member or service user as a consequence of the COVID-19 Pandemic | Injury, including death, of a staff member or service user, including injury arising from professional error. The risk covers all aspects of social work practice involving adults, older people, children and Families and Criminal and Youth Justice in the context of the COVID-19 pandemic. Social Policy provides care, protection and support to a range of people, many of whom can be considered vulnerable. Processes are set up to provide protection as far as possible and a number of controls are set up to ensure processes were as robust as possible. Service users or staff could be vulnerable due to frailty due to underlying health conditions or other risk factors.<br><br>This risk covers COVID-19 deaths. | 9 | |

# Community Care

| | |
|---|---|
| Service manager: | Robin Allen, Senior Manager, Adults Services<br>Pamela Main, Senior Manager, Older People Services<br>Nick Clater, General Manager – Mental Health and Addictions (with a portfolio for Planned Care/Access)<br>Yvonne Lawton, Head of Strategic Planning & Performance |
| Number of staff: | 709.3 (full time equivalents) |
| Locations: | Civic Centre and various care facilities |

## Purpose

Community Care comprises a wide range of services provided for adults and older people with care and support needs. Services include Care at Home, Care Homes, Occupational Therapy, Supported Housing models and Housing with Care and Support for People with Learning and Physical Disabilities. A number of services are delivered in an integrated manner to improve outcomes for services users where possible, these include Mental Health and Addiction Services.

The Integration Joint Board Strategic Plan 2019/23 recognises that both West Lothian Council and NHS Lothian are facing significant financial challenges over the next period. The strategic plan is focused on achieving a sustainable health and care system for West Lothian. This will require transformational change over time in order to improve health and wellbeing outcomes and support the transition to future models of care. The plan aims to ensure that:

- More care and support is delivered at home or closer to home rather than in hospital or other institutions
- Care is person centred with focus on the whole person and not just a problem or condition
- There is more joined up working across professions and agencies
- Citizens, communities and staff have a greater say in planning and delivering health and social care services.

The final report from the Independent Review of Adult Social Care (IRASC) was published on 3rd February 2021. The report contains 53 recommendations which propose significant reform of adult social care in Scotland. The extent and reach of this impact on services in West Lothian will only become known when there is clarity on how and to what timescales the review will be taken forward.

In responding the pandemic, the benefits of our close working relationship with our Independent and Third Sector providers were highlighted and ensured that essential services continued to be delivered during the crisis. In going forward, we will work to build on and further strengthen these robust relationships.

The resilience of our workforce was demonstrated in their flexibility and dedication to ensuring that services continued to be delivered in the most challenging of times.

The COVID-19 pandemic further emphasised the importance of the digitalisation agenda for social work and social care services and has brought into sharp focus the need to modernise some key processes. We have developed different ways of working in response to the pandemic and will capitalise on these going forward.

Social Policy has a lead role to promote, enable and sustain independence and social inclusion for service users and carers. Further development of Self-Directed Support and Market Facilitation will enable increasing numbers of people to have control of their own care and support provision by accessing Direct Payments or other Self-Directed Support options.

Community Care will also continue to have a significant role in the Integration Joint Board (IJB) for health and care, contributing to the strategic priorities set out in the IJB Strategic Plan:

- Tackling Inequalities
- Prevention and Early Intervention
- Integrated and Coordinated Care
- Managing our Resources Effectively

Social Policy actions align with the commissioning plans for each client group that were updated and approved by the Integration Joint Board in January 2020.

## Activities

The main activities of the service during the period of the Management Plan will be:

- Assessment and Care Management Services for adults and older people
- Purchasing of care home placements including respite
- Purchasing of community based care and support services
- Engagement in the Integrated Discharge Hub
- Provision of Care at Home / HomeFirst / Reablement and Crisis Care services
- Provision and management of council owned care establishments, including;
  - Care Homes for older people
  - Care Homes for adults with a learning disability
  - Day care for adults
  - Housing with care
- Joint management with NHS Lothian of the Community Equipment Store
- Provision of Home Safety Services and development of Telecare
- Access to employment
- Short breaks from caring

Business Support Services report through this WLAM area and provide the following activities for all of Social Policy:

- Commissioning plan development, monitoring and review
- Policy and Change management
- Contract tendering and monitoring
- Administrative and clerical support
- Performance and Quality Assurance
- Management and development of the Social Policy Information Management systems
- Complaint handling
- Learning and Development
- Customer engagement

All services are subject to review and redesign in order to reflect Transforming Your Council priorities.

## Key Partners

The service actively works with our partners to plan, design and deliver improved services for our customers. Our key partners include; NHS Lothian, other council services, and the third and independent sectors.

## Customer Participation

The service will actively engage customers and potential customers in the delivery and re-design of services to ensure that they are accessible and focused on their needs and preferences.

**Customer Consultation Schedule 2021/22**

| Customer Group | Method | Frequency | Responsible Officer | Feedback Method |
|---|---|---|---|---|
| **Older People service users** | Survey | Annual | Group Manager | • Survey returns |
| | Senior People's Forum | Quarterly | Business Support Officer | • Minutes |
| **Learning Disability service users** | Survey | Annual | Group Manager | • Survey returns<br>• Feedback to service users via newsletter |
| | Learning Disability Service Users Forum | Quarterly | Business Support Officer | • Minutes |
| **Mental Health service users** | Mental Health Service Users Forum | Quarterly | Team Manager | • Minutes |

## Activity Budget 2021/22

### Community Care – Older People

| Activity Name and Description | | Link to Corporate Plan | Performance Indicator and Target 2021/22 | PI Category | Staff Resource (FTE) | Revenue Expenditure Budget 2020/21 £ | Revenue Income Budget 2020/21 £ | Net Revenue Budget 2020/21 £ |
|---|---|---|---|---|---|---|---|---|
| Older People Assessment and Care Management | To provide assessment and care management services to older people, their families and carers. | 4. Improving the quality of life for Older People | SPCC024 9a1a Net cost per head of population on social care services for older people. (Target £1,493) | WLAM | 58.2 | 2,362,957 | -46,000 | 2,316,957 |
| | | | SPCC018_6b.3 Average number of weeks Older People's service users are currently waiting to be assessed. (Target 1) | PUBLIC | | | | |
| Older People care home provision | Provision of care home placements for Older People. | 4. Improving the quality of life for Older People | SPCC019 9b1a Average number per month of West Lothian patients whose discharge from hospital is delayed (Target 1) | PUBLIC | 177.0 | 24,995,112 | -2,133,000 | 22,862,112 |
| | | | | | | | | |
| Older People community based care and support services | Support activities to enable older people to live independently at home or in a homely setting (includes care at home, respite, day care and other services). | 4. Improving the quality of life for Older People | SPCC152_9a Average annual cost per person receiving community based Older People services. (Target £14,362) | PUBLIC | 235.7 | 23,802,651 | -6,947,322 | 16,855,329 |
| | | | SPCC100_9b.2a The number of people aged 75+ supported by technology to remain at home (Target 2755) | PUBLIC | | | | |
| Occupational therapy | Occupational Therapy and supply of aids and adaptations to service users. | 4. Improving the quality of life for older people | SPCC081 6a.1 Percentage of customers who rated the timeliness of response of Occupational Therapy (OT) services as good or excellent. (Target 90%) | WLAM | 34.1 | 2,466,571 | -1,005,164 | 1,461,407 |
| | | | CP:SPCC014_6b.5 Percentage of Occupational Therapy assessments allocated within 6 weeks of referral. (Target 90%) | PUBLIC | | | | |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Service Support | Provision of management and administrative support. | Enabler Service - Corporate Governance and Risk | Support activities contribute towards the overall performance of the service.<br>Performance is monitored through the indicators for front line activities. | | 37.8 | 1,760,220 | -26,919 | 1,733,301 |
| | **Total :-** | | | | **542.8** | **55,387,511** | **(10,158,405)** | **45,229,106** |
| Time Limited - Covid Funding | Additional cost of sustainability payments and other costs related to Covid-19 | 4. Improving the quality of life for Older People | | | 0.0 | 2,350,000 | 0 | 2,350,000 |
| Time Limited - Food Train | Funding to support Food Train with delivery of food and shopping to vulnerable West Lothian residents | 4. Improving the quality of life for older people | | | 0.0 | 22,000 | 0 | 22,000 |
| Time Limited - Befriending Sevrice | Funding to support OPAL and reduce isolation and loneliness in Older People | 4. Improving the quality of life for older people | | | 0.0 | 30,000 | 0 | 30,000 |
| Time Limited - Community Hub Development Officer | Funding for development of Community Hub | 4. Improving the quality of life for older people | | | 0.0 | 30,000 | 0 | 30,000 |
| | **Total :-** | | | | **542.8** | **57,819,511** | **(10,158,405)** | **47,661,106** |

## Community Care – Learning Disabilities

| Activity Name and Description | | Link to Corporate Plan | Performance Indicator and Target 2021/22 | PI Category | Staff Resource (FTE) | Revenue Expenditure Budget 2020/21 £ | Revenue Income Budget 2020/21 £ | Net Revenue Budget 2020/21 £ |
|---|---|---|---|---|---|---|---|---|
| Learning Disabilities Assessment and Care Management | To provide assessment and care management service to adults with learning disabilities, their families and carers. | 7. Delivering positive outcomes on health | SPCC035 9a1c Net cost per head of population on social care services to adults with a learning disability. (target £153.13) | PUBLIC | 12.6 | 671,076 | 0 | 671,076 |
| | | | SPCC028_9b Percentage of people with a Learning Disability supported in their own tenancies. (target 60%) | PUBLIC | | | | |
| Learning Disabilities care home provision | Provision of care home placements for adults with learning disabilities. | 7. Delivering positive outcomes on health | SPCC002_6b.3 Percentage of Care Inspectorate Inspections undertaken within Registered Learning Disability Services graded good or above. (target 100%) | PUBLIC | 16.5 | 8,186,892 | (787,000) | 7,399,892 |
| | | | SPCC035 9a1c Net cost per head of population of social care services to adults with a learning disability. (target £159.13) | PUBLIC | | | | |
| Learning Disabilities community based care and support services | Support activities to enable adults with learning disabilities to live independently or with family and to support positive life experiences (includes care at home, respite, day care and other services). | 7. Delivering positive outcomes on health | SPCC035 9a1c Net cost per head of population on social care services to adults with a learning disability. (target £159.13) | PUBLIC | 52.4 | 14,837,389 | (3,246,360) | 11,591,029 |
| | | | SPCC028_9b Percentage of people with a Learning Disability supported in their own tenancies. (target 60%) | PUBLIC | | | | |
| Learning Disabilities | Support activities to enable adults | 2. Improving the | SPCC003_9b.1a Number of adults with learning disability provided with employment support. (Target 44) | HIGH LEVEL | 4.7 | 176,497 | 0 | 176,497 |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Supported Employment | with disabilities into employment. | employment position in West Lothian | | | | | | |
| Service Support | Provision of management and administrative support. | Enabler Service - Corporate Governance and Risk | Support activities contribute towards the overall performance of the service.<br>Performance is monitored through the indicators for front line activities. | | 15.1 | 632,443 | (11,875) | 620,568 |
| | | | | | | | | |
| | **Total :-** | | | | **101.3** | **24,504,297** | **(4,045,235)** | **20,459,062** |

## Community Care – Physical Disabilities

| Activity Name and Description | | Link to Corporate Plan | Performance Indicator and Target 2021/22 | PI Category | Staff Resource (FTE) | Revenue Expenditure Budget 2020/21 £ | Revenue Income Budget 2020/21 £ | Net Revenue Budget 2020/21 £ |
|---|---|---|---|---|---|---|---|---|
| Physical Disabilities Assessment and Care Management | Provision of an assessment and care management service to adults with physical disabilities or sensory impairments. | 7. Delivering positive outcomes on health | SPCC036 9a1c Net cost per head of population on social care services to adults (age 18-64) with physical disabilities. (Target £73.91) | PUBLIC | 10.3 | 613,457 | (68,400) | 545,057 |
| | | | SW04 % of adults supported at home who agree that they had a say in how their help, care or support was provided. (Target 79%) | PUBLIC | | | | |
| Physical Disabilities care home provision | Provision of care home placements for adults with physical disabilities. | 7. Delivering positive outcomes on health | SPCC019 9b1a Average number per month of West Lothian patients whose discharge from hospital is delayed (Target 1) | PUBLIC | 0.0 | 2,895,119 | (24,000) | 2,871,119 |
| | | | SPCC036 9a1c Net cost per head of population of social care services to adults with a physical disability. (Target £73.91) | PUBLIC | | | | |
| Physical Disabilities community based care and support services | Support activities to enable adults with physical disabilities to live independently or with family and to support positive life experiences (includes care at home, respite, day care and other services). | 7. Delivering positive outcomes on health | SPCC036 9a1c Net cost per head of population on social care services to adults (age 18-64) with physical disabilities. (Target £73.91) | PUBLIC | 9.9 | 5,227,542 | (315,245) | 4,912,297 |
| | | | SPCC027_9b.2a Percentage of people who have a physical disability with intensive needs receiving 10 hours+ care at home. (Target 30%) | PUBLIC | | | | |
| Service Support | Provision of management and administrative support. | Enabler Service - Corporate Governance and Risk | Support activities contribute towards the overall performance of the service. Performance is monitored through the indicators for front line activities. | | 5.5 | 231,448 | (4,346) | 227,102 |
| | | | | | | | | |
| | **Total :-** | | | | **25.7** | **8,967,566** | **(411,991)** | **8,555,575** |

## Community Care – Mental Health

| Activity Name and Description | | Link to Corporate Plan | Performance Indicator and Target 2021/22 | PI Category | Staff Resource (FTE) | Revenue Expenditure Budget 2020/21 £ | Revenue Income Budget 2020/21 £ | Net Revenue Budget 2020/21 £ |
|---|---|---|---|---|---|---|---|---|
| Mental Health Assessment and Care Management | Provision of an assessment and care management service, including statutory mental health officer service, to adults with a mental health or substance misuse problems. | 7. Delivering positive outcomes on health | SPCC037 9a1c Net cost per Head of population on social care services to adults with mental health problems. (Target £39.71) | PUBLIC | 22.5 | 1,585,288 | (488,226) | 1,097,062 |
| | | | SPCC005_9b.1a Percentage of all clients waiting no longer than three weeks from referral to appropriate drug or alcohol treatment (HEAT A11). (Target 90%) | WLAM | | | | |
| Mental Health care home provision | Provision of care home placements for adults with mental health problems. | 7. Delivering positive outcomes on health | SPCC019 9b1a Average number per month of West Lothian patients whose discharge from hospital is delayed (Target 1) | PUBLIC | 0.0 | 1,594,415 | (660,000) | 934,415 |
| | | | SPCC037 9a1c Net cost per Head of population on social care services to adults with mental health problems. (Target £39.71) | PUBLIC | | | | |
| Mental Health community based care and support services | Support activities to enable adults with mental health problems to live independently (includes care at home, respite, day care and other services). | 7. Delivering positive outcomes on health | SPCC037 9a1c Net cost per Head of population on social care services to adults with mental health problems. (Target £39.71) | HIGH LEVEL | 3.8 | 4,198,503 | (1,709,874) | 2,488,629 |
| Alcohol and Drug Partnership | Partnership support to commissioning of services to | 7. Delivering positive | SPCC007_9b.1a Percentage of adults with substance misuse problems who demonstrate a reduction of harmful use of substances. (Target 40%) | PUBLIC | 7.3 | 1,792,074 | (1,641,544) | 150,530 |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | improve health and wellbeing and reduce health inequalities by reducing tobacco, alcohol and drug use, and substance misuse. | outcomes on health | | | | | | |
| Service Support | Provision of management and administrative support. | Enabler Service - Corporate Governance and Risk | Support activities contribute towards the overall performance of the service.<br>Performance is monitored through the indicators for front line activities. | | 5.9 | 246,130 | (4,620) | 241,510 |
| | **Total :-** | | | | **39.5** | **9,416,410** | **(4,504,264)** | **4,912,146** |
| Time Limited - Counselling | Increased support for independent counselling services for individuals who have experienced trauma relating to violence and abuse | 7. Delivering positive outcomes on health | | | 0.0 | 75,000 | 0 | 75,000 |
| Time Limited - Alcohol & Drugs Team | Enhanced budget provision for Drugs & Alcohol Team | 7. Delivering positive outcomes on health | | | 0.0 | 45,000 | 0 | 45,000 |
| | **Total :-** | | | | **39.5** | **9,536,410** | **(4,504,264)** | **5,032,146** |

## Actions 2021/22

The service will undertake a range of actions to support corporate priorities and objectives, improve services and deliver transformation.

### Community Care Actions 2021/22

| Action | Description | Planned Outcome | Owner(s) | Start | End | Status | Update |
|---|---|---|---|---|---|---|---|
| **Strategic Commissioning Plans:**<br>• **Services for Older People and People Living with Dementia**<br>• **Mental Health Services**<br>• **Physical Disability**<br>• **Learning Disability**<br>• **Alcohol and Drug Services** | Implementation of Strategic Plans for each care group to support the strategic aim of shifting the balance of care in favour of community-based services. | Whole system redesign across health and social care to deliver sustainable and cost-effective community-based services.<br><br>Providing support and services that allow our citizens to live well.<br><br>Increasing Wellbeing and reducing inequalities | Head of Social Policy | January 2020 | April 2023 | Active | Strategic Commissioning Boards are in place to take forward the implementation of each plan. |
| **Royal Edinburgh Campus Modernisation Programme (LD and PD)** | Review of Health and Social Care services which will inform the specification for the design of Health Services currently based on the Royal Edinburgh Campus. | Whole system redesign to deliver sustainable and effective community based services for Mental Health, Learning and Physical Disability groups. The main aim is to enable more complex care to be available and delivered at a local level in line with 'Coming Home' best practice. | Head of Social Policy | March 2015 | June 2022 | Active | • The new build complex care unit for 16 adults with learning disabilities continues to progress. With a completion date of June 2022.<br><br>• In tandem to the build a tender exercise will be undertaken for the delivery of the support service. |

## Community Care Actions 2021/22

| Action | Description | Planned Outcome | Owner(s) | Start | End | Status | Update |
|---|---|---|---|---|---|---|---|
| **West Lothian Carers Strategy** | Implementation of the West Lothian Carers Strategy and Short Breaks from Caring Statement. | Carers feel supported in their care role and involved in the design of services to support the cared for person. | Senior Manager, Older People Services | August 2020 | August 2023 | Active | The strategy was published in published in August 2020. The West Lothian Carers Strategy Implementation Group is in place to implement the strategy. |
| **Care for Adults day Services** | Review of day services for adults with a disability. | Models of day services to allow for greater choice and flexibility. | Senior Manager, Adult Services | April 2018 | March 2022 | Active | Phase 1 of the project is complete and planning for Phase 2 is underway but delayed due to COVID-19 impact. |
| **Care for adults – supported accommodation** | Investment in core and cluster models to enable people to live more independently in their own tenancies. | Reduced number of residential care placements and promotion of independent living options. | Senior Manager, Adult Services | April 2018 | March 2023 | Active | Redesign work is underway in line with the Learning Disability Commissioning Plan. |
| **Care for Adults and Older People – supported accommodation** | Redesign of Housing with Care. | Housing with Care model that allows for greater flexibility and less fixed cost. | Senior Manager, Adult Services | April 2017 | March 2022 | Active | Redesign work is underway in partnership with RSLs. |
| **Recovery following COVID-19** | Ensure services continue to be delivered in line with service user need and capitalise on lessons learned from the pandemic. | Continued positive provision. | Senior Manager, Adult Services<br><br>Senior Manager Older People's Services | April 2021 | March 2022 | New | Services continue to be reviewed. |
| **Review of management and support** | Critical review to ensure that all support functions are adding value to the delivery of social care services. | Streamlined support structure. | Head of Service | September 2018 | March 2023 | Active | Redesign work is underway. |

## Community Care Actions 2021/22

| Action | Description | Planned Outcome | Owner(s) | Start | End | Status | Update |
|---|---|---|---|---|---|---|---|
| **Digital transformation projects** | A programme of activity to ensure that the council is well placed to take advanced of opportunities offered in the digital age. | To deliver improved user-focused digital public services. | Head of Service | April 2018 | March 2023 | Active | Identification of processes underway. Project Team in place and being progressed. |
| **Introducing digital care solutions in Older Peoples Care Homes** | Digital Care Planning including Electronic Medication Administration Record | Automating and simplifying manual recording processes will allow staff to focus more on direct care with service users and improve outcomes. | Senior Manager Older People | March 21 | December 21 | New | Software pilot to start March 21 |
| **Pilot digital solutions in Support at Home service to enable more efficient access to council systems** | Pilot the use of 'netbooks' in Support at Home Services supporting remote access to council IT systems such as My HR and on-line training | Close the digital gap with this large mobile workforce and reduce the need for labour intensive manual returns and processes | Senior Manager Older People | April 21 | July 21 | New | If successful a full business case will be developed for consideration in 2021 |
| **Development and Implementation of Specialist Disability Framework** | Launch of the new Specialist Disability Framework, building local capacity, integration of Positive Behaviour Support (PBS) into existing support services | Adults with a disability have access to high quality responsive care at home services. | Senior Manager Adults | December 20 | July 2021 | Active | The contract will be awarded on 25th March 2021 and will commence on 1st July. |

## Community Care Actions 2021/22

| Action | Description | Planned Outcome | Owner(s) | Start | End | Status | Update |
|---|---|---|---|---|---|---|---|
| **Extension of Discharge to Assess Model** | Extend the current Discharge to Assess Model to include all Adult Services | Adults and Older people are supported to transition from inpatient hospital setting to community setting effectively | Senior Manager Adults | April 2021 | April 2022 | New | This will extend the model currently in place and maximise the use of OTs within the multi-disciplinary team |
| **Implementation of Integrated Joint Stores Technology Project** | The project will review all process and identify where possible technological supports | The service will be more efficient, it will remove duplication and ensure best use of resources | Senior Manager Adults | February 2021 | September 2021 | Active | The review work is underway. |
| **Development health and social care hubs** | Hubs will be established within community settings to support effective conversations about health and social care taking an early intervention approach rather than waiting for people to reach crisis point. | Positive impact on people who will have easier access within their local community to health and social care information and advice and an opportunity to have face to face conversations. | Senior Manager Older people & Senior Manager Adults | May 2021 | March 2022 | Active | |
| **Enhanced quality assurance across adult and older people care home provision** | Investment in an assurance team to support best practice across residential care provision | Continued positive provision and positive outcomes for residents | Senior Manager Older people & Senior Manager Adults | August 2021 | August 2022 | Active | |

## Community Care Actions 2021/22

| Action | Description | Planned Outcome | Owner(s) | Start | End | Status | Update |
|---|---|---|---|---|---|---|---|
| **Maximise recruitment possibilities across adult and older people services** | Ensure workforce planning supports recruitment of staff to key areas of service provision maximising opportunities form national and local recruitment campaigns | Stable and robust workforce | Senior Manager Older people & Senior Manager Adults | March 2021 | March 2022 | Active | |

# Children and Families

Service manager: Susan Mitchell and Tim Ward, Senior Managers
Number of staff: 297.9 (full time equivalents)
Location: Civic Centre and various locations

## Purpose

The Children and Families service comprises a wide range of teams providing interventions for children and their families experiencing a need for support.

The service includes the following teams: Sure Start, Parenting Team, Mental Health and Wellbeing team, school Attendance Improvement Service (AIMS), Child Disability Service, Whole Family Support Service, Child Care and Protection Teams, Duty and Child Protection Team, Inclusion and Aftercare Service, Family Placement Team, Residential Child Care Houses, Children's Rights, Reviewing Officer Team, Domestic and Sexual Assault Team (DASAT), Social Care Emergency Team (SCET) and Public Protection lead officers. The service provides support from pre-birth to age 26 for those who have experienced care.

During 2021-22, the service will be implementing the Inclusion and Support Service to respond more effectively in regard to early intervention and prevention. The service brings together teams from Social Policy and Education to enable a coordinated approach to early intervention and support for young people and their families. It will provide specialist knowledge and expertise in the area of early intervention and prevention and ensure consistency of approach and equity of opportunity across West Lothian. The service will be delivered with a single vision, shared values and purpose, which in turn will strengthen professional links and build capacity through shared knowledge and expertise and will provide a streamlined pathway for families and professionals to access supports to address identified need making efficient use of resources.

The main aim of the service is to ensure that children, young people and their families can maximise their potential through the identification of additional supports. This includes disabled children, young people and their families. We are committed to providing services that are child-centred, developed in partnership with other organisations and with families themselves, that tackle inequalities and are focused on improving outcomes for children. These aims are in line with Getting It Right For Every Child (GIRFEC) principles. We are committed to providing help that is appropriate, proportionate and timely to ensure children and young people have the best start to their lives building on family strengths and promoting resilience. Our service is focused on keeping children safe and teams also provide support through statutory intervention, looked after children services and child protection interventions when these are needed. The service is focussed on minimising the impact of child poverty wherever possible.

In addition to a focus on providing early help and action to prevent difficulties escalating, the service is committed to shifting the balance of care. This means providing support to families and the wider family network to enable them to safety continue to care for children and young people in challenging circumstances. This also means where children or young people require to be accommodated away from home that more use is made of community based resources with less reliance on residential care and far from home placements.

We aim to deliver quality, appropriate and accessible services to meet current demand and also to anticipate and identify future needs and expectations.

In going forward we are using the learning from our response to COVID-19 and are making better use of online supports for parents using parenting groupwork programmes. We are using technology to support contact between looked after and accommodated children and their families to enhance the range of contact arrangements we already have.

## Activities

The main activities of the service during the period of the Management Plan will be:

- Childcare and Protection
  - Child Care and Protection Practice Teams, including Throughcare
  - Child Disability Service
- Residential and Placement Services
  - Services for Looked After Children – Residential Houses and Family Placement
  - Domestic and Sexual Assault Team (DASAT)
  - Public Protection Lead Officers
- Child and Family Support
  - Whole Family Support and Crisis and Intensive Support services
  - Social Care Emergency Team (SCET)
  - Inclusion and Support Service
  - Reviewing Officers Team

All services are subject to review and redesign in order to reflect Transforming Your Council priorities.

## Key Partners

The service actively works with our partners to plan, design and deliver improved services for our customers.

Our key partners include; NHS Lothian, other council services, Police Scotland, Scottish Fire and Rescue Service, West Lothian College, Children's Reporter, third sector providers and private sector providers.

## Customer Participation

The service will actively engage customers and potential customers in the delivery and re-design of services to ensure that they are accessible and focused on their needs and preferences.

**Customer Consultation Schedule 2021/22**

| Customer Group | Method | Frequency | Responsible Officer | Feedback Method |
|---|---|---|---|---|
| **Service users** | Survey | Annual | Business Support Officer | • Reported via performance indicators |
| **Service users** | Consultative Forums | Quarterly (carers) | Team Manager | • Newsletter |
| **Partners / key stakeholders** | Early Years event | Annual | Group Manager | • Newsletter |
| **Having Your Say** | Looked After Children's forum | Monthly | Team Manager | • Group meeting |
| **Service users** | Viewpoint | Monthly | Group Manager | • Feedback Report |

## Activity Budget 2021/22

### Children and Families – Child Care and Protection

| Activity Name and Description | | Link to Corporate Plan | Performance Indicator and Target 2021/22 | PI Category | Staff Resource (FTE) | Revenue Expenditure Budget 2020/21 £ | Revenue Income Budget 2020/21 £ | Net Revenue Budget 2020/21 £ |
|---|---|---|---|---|---|---|---|---|
| Child Care and Protection Practice Teams | Provision of a statutory child care and protection service for children at risk or in need. This includes the Duty and Child Protection team and long term teams for children who are looked after or at risk of accommodation | 1. Delivering positive outcomes and early interventions for early years | SPPPC_100 Number of child protection re-registrations within 12 months of deregistration. (target 0) | WLAM | 70.8 | 3,942,899 | 0 | 3,942,899 |
| | | | SPCF097_9b.1a Number of Children supported in Residential Schools out with West Lothian. (target 16) | PUBLIC | | | | |
| Throughcare and Aftercare | Provision of a statutory Through and Aftercare service for young people eligible for support who were previously looked after or eligible for continuing care. | 1. Delivering positive outcomes and early interventions for early years | CP:SPCF124_9b.1c Percentage of young people eligible for an Aftercare service experiencing one or more episodes of homelessness (target 10%) | PUBLIC | 4.6 | 1,744,171 | 0 | 1,744,171 |
| | | | SPCF100_9b1.b Number of Children in Continuing Care arrangements (target 4) | WLAM | | | | |
| Service Support | Provision of management and administrative support. | Enabler Service - Corporate Governance and Risk | Support activities contribute towards the overall performance of the service. Performance is monitored through the indicators for front line activities. | | 11.0 | 434,741 | (3,936) | 430,805 |
| | | | | | | | | |
| | **Total :-** | | | | **86.4** | **6,121,811** | **(3,936)** | **6,117,875** |

## Children and Families – Looked After Children

| Activity Name and Description | | Link to Corporate Plan | Performance Indicator and Target 2021/22 | PI Category | Staff Resource (FTE) | Revenue Expenditure Budget 2020/21 £ | Revenue Income Budget 2020/21 £ | Net Revenue Budget 2020/21 £ |
|---|---|---|---|---|---|---|---|---|
| Child Disability Service | Provision of statutory services for children affected by severe disability and their families. | 1. Delivering positive outcomes and early interventions for early years | SPCF077 Percentage of section 23 assessments undertaken by the Child Disability Service within 12 weeks of referral. (target 80%) | WLAM | 7.6 | 3,297,468 | (387,000) | 2,910,468 |
| | | | SPCF098_9b.1a Number of Children with a disability in Residential Schools (target 6) | HIGH LEVEL | | | | |
| Family Placement | Provision of statutory and regulated fostering, kinship and adoption services providing support to children who need to be looked after in family settings away from their family or in extended family. | 1. Delivering positive outcomes and early interventions for early years | P:SPCF112_9b Average time taken from point of accommodation of a child to permanent placement decision (target 50 weeks) | PUBLIC | 11.5 | 7,293,904 | 0 | 7,293,904 |
| | | | SPCF105_9b.1a Number of children placed in external foster placements (target 18) | HIGH LEVEL | | | | |
| Residential Care (Internal/ External) | Provision of statutory and regulated residential and residential school service, including secure care, providing support to children who need to live or be educated away from home | 3. Improving attainment and positive destinations for school children | SPCF131_9b.1a Percentage of Children and Young People placed in residential care who have gone on to be placed in external resources (target 10) | WLAM | 38.3 | 7,869,598 | 0 | 7,869,598 |
| | | | SPCF092_9b Balance of Care for Looked After Children: Percentage of Children being Looked After in the Community (target 92%) | WLAM | | | | |
| | Provide high-quality support and services | 6. Reducing crime and | SOA1305_04 Percentage of women who report that they feel safe as a result of | HIGH LEVEL | 15.5 | 738,862 | (157,350) | 581,512 |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Domestic and Sexual Assault Team (DASAT) | to women and children who are, or have, experienced domestic abuse or other forms of gender-based violence. | improving community safety | intervention by the Domestic and Sexual Assault Team (%) (target 100%) | | | | | |
| | | | CF090_9a.1b Cost per domestic abuse referral (Target £185.00) | WLAM | | | | |
| Service Support | Provision of management and administrative support. | Enabler Service - Corporate Governance and Risk | Support activities contribute towards the overall performance of the service. Performance is monitored through the indicators for front line activities. | | 33.0 | 1,165,434 | (13,125) | 1,152,309 |
| | | | | | | | | |
| | **Total :-** | | | | **105.9** | **20,365,266** | **(557,475)** | **19,807,791** |
| Time Limited - Care at Home | Funding to support care at home packages for children with disabilities | 1. Delivering positive outcomes and early interventions for early years | | | 0.0 | 50,000 | 0 | 50,000 |
| | | | | | | | | |
| | **Total :-** | | | | **105.9** | **20,415,266** | **(557,475)** | **19,857,791** |

## Children and Families – Children and Family Services

| Activity Name and Description | | Link to Corporate Plan | Performance Indicator and Target 2021/22 | PI Category | Staff Resource (FTE) | Revenue Expenditure Budget 2020/21 £ | Revenue Income Budget 2020/21 £ | Net Revenue Budget 2020/21 £ |
|---|---|---|---|---|---|---|---|---|
| Public Protection (Leader officers and independent chair) | Provision of professional advisory role to services involved in child protection, adult protection, multi agency public protection arrangements (MAPPA), Violence Against Women and Girls (VAWG) and Counter Terrorism. | 1. Delivering positive outcomes and early interventions for early years | SOA1305_05 Percentage of closed adult protection cases where the adult at risk reported that they felt safer as a result of the action taken. (target 80%) | HIGH LEVEL | 3.1 | 198,813 | (80,113) | 118,700 |
| | | | CF099_9b1.b Number of Children in Secure Accommodation. (target 1) | HIGH LEVEL | | | | |
| Independent reviewing team of childcare protection | Provision of an independent chairing service in relation to child protection and looked after children. | 1. Delivering positive outcomes and early interventions for early years | P:SPCF090 9b.1b Current Number of Looked After Children (LAC) (target 430) | PUBLIC | 5.5 | 308,138 | 0 | 308,138 |
| | | | SPCF074_6b Percentage of Looked After Children reviews completed within statutory timescales (target 80%) | PUBLIC | | | | |
| Social Care Emergency Team (SCET) | Provision of an out of hours emergency social work service to children and adults at risk of harm. | 1. Delivering positive outcomes and early interventions for early years | SPCF145 -9b Number of legal orders obtained out of hours (target 25) | WLAM | 5.6 | 550,109 | 0 | 550,109 |
| | | | SPCF062_9a Social Care Emergency Team cost per head of population (target £3.20) | WLAM | | | | |
| Inclusion & Support Sevrice | Early intervention and prevention to school age children and their families who have | 3. Improving attainment and positive destinations | SPCF137_9b.1a Percentage of parents involved with Positive Steps programme who demonstrate an improvement in mental health (target 100%) | WLAM | 58.6 | 3,320,740 | (76,942) | 3,243,798 |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | experienced adverse experiences and may be at risk without intervention. | for school children | | | | | | |
| Intensive Family Support | | 3. Improving attainment and positive destinations for school children | SPCF139_9b.1c Percentage of families involved with the Whole Family Support service who have demonstrated an improvement in their parenting skills (target 85%) | WLAM | 23.0 | 593,738 | (96,616) | 497,122 |
| | | | P:SPCF138_9b.1c Percentage of children involved with the Whole Family Support service who have avoided becoming accommodated who were assessed as being at high risk of being accommodated (target 85%) | PUBLIC | | | | |
| Service Support | Provision of management and administrative support. | Enabler Service - Corporate Governance and Risk | Support activities contribute towards the overall performance of the service. Performance is monitored through the indicators for front line activities. | | 9.8 | 392,942 | (3,449) | 389,493 |
| | | | | | | | | |
| | **Total :-** | | | | **105.6** | **5,364,480** | **(257,120)** | **5,107,360** |
| Time Limited - Carers | Funding to support unpaid carers and young people. | 7. Delivering positive outcomes on health | | | 0.0 | 25,000 | 0 | 25,000 |
| | | | | | | | | |
| Time Limited - Advocacy | Funding for advocacy services for children | 3. Improving attainment and positive destinations for school children | | | 0.0 | 70,000 | 0 | 70,000 |
| | | | | | | | | |
| | **Total :-** | | | | **105.6** | **5,459,480** | **(257,120)** | **5,202,360** |

## Actions 2021/22

The service will undertake a range of actions to support corporate priorities and objectives, improve services and deliver transformation.

### Children and Families Actions 2021/22

| Action | Description | Planned Outcome | Owner(s) | Start | End | Status | Update |
|---|---|---|---|---|---|---|---|
| **Develop model of intensive and crisis support** | Increase and Improve the level of crisis support to communities out with normal office hours. | Fewer instances of emergency accommodation of children. | Senior Manager, Children's Services | April 2018 | March 2022 | Active | Service successfully piloted and moving towards full implementation. |
| **Reduce timescale for children who are Looked After to achieve permanency** | Use the Permanence and Care Excellence (PACE) Programme in partnership with CELCIS to redesign processes for children to achieve permanency. | More children achieve secure placements in a shorter timescale. | Senior Manager, Children's Services | April 2018 | April 2022 | Active | Redesign will commence post pandemic when systems are operating more normally. PACE programme is in implementation as a test of change. CELCIS have now ceased their involvement. |
| **Shifting the balance of care for looked after children** | Reshape services to ensure children are supported to remain in family based care. | Fewer children are accommodated in residential care placements. | Senior Manager, Children's Services | April 2018 | March 2023 | Active | Redesign in the process of implementation. |
| **Improve Transitions for all young people** | Redesign the transition process as it relates to children with a disability and looked after children. | Improved outcomes for children and young people aged 16 and over. | Senior Manager, Justice and Looked After Children | April 2018 | March 2021 | complete | New transition process for children with a disability is complete and will be monitored on an ongoing basis. |
| **Care for Looked After Children and Children with a Disability** | Reduction in external placements. | More Looked After Children cared for in West Lothian with fewer external placements. | Senior Manager, Justice and Looked After Children | April 2018 | March 2023 | Active | Redesign work is underway. Placement numbers for children with disabilities has reduced. |

## Children and Families Actions 2021/22

| Action | Description | Planned Outcome | Owner(s) | Start | End | Status | Update |
|---|---|---|---|---|---|---|---|
| **Family and Parenting Support** | Review of early years services. | Increased outreach provision to deliver services closer to family's community or home setting. | Children's Services | April 2018 | March 2023 | Active | Redesign work is underway. |
| **SWIFT Replacement** | Procure and implement a replacement for SWIFT, Social Work Information System. | A robust and secure information system is in place. | Senior Manager, Justice and Looked After Children | November 2019 | April 2023 | Active | Procurement options being considered. |
| **Review of Family Placement and Kinship Care Provision** | Undertake service review to ensure that approaches to Fostering and Kinship Care are robust. | Services for looked after children in the community are improved. | Senior Manager, Justice and Looked After Children | January 2019 | March 2022 | Active | Initial scoping has commenced. |
| **Review of management and support** | Critical review to ensure that all support functions are adding value to the delivery of social care services. | Streamlined support structure. | Head of Service | September 2018 | March 2023 | Active | Redesign work is underway. |
| **Digital transformation projects** | A programme of activity to ensure that the council is well placed to take advanced of opportunities offered in the digital age. | To deliver improved user-focused digital public services. | Head of Service | April 2018 | March 2023 | Active | Redesign work is underway. Project Team in place. |
| **Residential Care for children** | Design a model of residential provision that enable more children to remain at home. | A model of delivery that provides better outcomes for children. | Senior Manager, Justice and Looked After Children | April 2020 | March 2022 | Active | Organisational change being progressed. |

## Children and Families Actions 2021/22

| Action | Description | Planned Outcome | Owner(s) | Start | End | Status | Update |
|---|---|---|---|---|---|---|---|
| **Review of Adoption Support and Provision** | Redesign Adoption Services to improve support, increase income and reduce adoption breakdown. | Explore the development of a dedicated Adoption Service. | Senior Manager, Justice and Looked After Children | April 2021 | March 2022 | New | Scoping work completed and further benchmarking taking place |
| **Implementation of 'The Promise'** | Introduce Lead Officer for taking forward service development to reflect national Care review. | Improved level of service | Senior Manager, Justice and Looked After Children | April 2021 | March 2022 | New | Scoping work completed and further benchmarking taking place |
| **Review of Mental health and wellbeing support to children and young people** | Undertake strategic needs assessment to identify how best to deploy support for children. | Improved response in relation to mental health of children and young people. | Senior Manager, Justice and Looked After Children | April 2021 | March 2022 | New | Scoping work completed and further benchmarking taking place |
| **Implement Inclusion and Support Service** | Joint response to early intervention with Education. | Improved outcomes resulting in fewer escalations to statutory services. | Senior Manager, Children's Services | April 2021 | March 2023 | New | Preparatory work complete and staff teams ready to implement |
| **Recovery following COVID-19** | Ensure services continue to be delivered in line with service user need and capitalise on lessons learned from the pandemic. | Continued positive provision. | Senior Manager, Children's Services<br><br>Senior Manager, Justice and Looked After Children | April 2021 | March 2022 | New | Services continue to be reviewed |

# Justice Services

Service manager: Tim Ward, Senior Manager
Number of staff: 73.2 (full time equivalents)
Location: Civic Centre and various locations

## Purpose

The Justice Service is almost entirely focussed on providing services statutorily required for the assessment, supervision and management of offenders and young people at risk of becoming involved in the criminal justice system.

The service has four main aims:

- To assist those involved in offending behaviour to make better choices and lead more positive and productive lives
- To work in partnership to reduce risk of harm to communities
- To reduce the level of re-offending
- To implement the Whole Systems Approach for working with young people who offend.

The service supports offenders to live in the community and works to ensure that the strategic aims of reducing reoffending are achieved. It will play a lead role within the new powers of the Community Planning Partnership in relation to Community Justice, following the cessation of Community Justice Authorities.

During the pandemic Criminal and Youth Justice services engaged in the national Near Me collaborative led by IRISS and also used virtual approaches to undertake statutory reviews and offence focused work.

## Activities

The main activities of the service during the period of the Management Plan will be:

- Re-commencing unpaid work and returning to full service capacity on anticipation of increased number of orders when courts return to normal operations.
  Community Payback, the management of supervision and unpaid work requirements
- Early intervention and support
- Work with young people who offend
- The Almond Project aimed at women who offend
- Managing high risk offenders
- Offender assessment, Court Support, and offering alternatives to prosecution and to custodial remands
- Drug Treatment and Testing Orders
- Prison-based Social Work at HMP Addiewell
- Enhancing Throughcare arrangements for short-term prisoners
- Offender intervention programmes, including a Domestic Abuse Perpetrators' programme
- Multi Agency Public Protection Arrangements

All services are subject to review and redesign in order to reflect Transforming Your Council priorities.

## Key Partners

The service actively works with our partners to plan, design and deliver improved services for our customers.

Our key partners include; other council services, Police Scotland, NHS Lothian, HMP Addiewell (Sodexo Justice Services), Scottish Prison Service, third sector providers, Scottish Government, Scottish Fire and Rescue Service, Department of Work and Pensions, Crown Office and Procurator Fiscals Service, Scottish Courts and Tribunal Service and Children's Reporter.

## Customer Participation

The service will actively engage customers and potential customers in the delivery and re-design of services to ensure that they are accessible and focused on their needs and preferences.

**Customer Consultation Schedule 2021/22**

| Customer Group | Method | Frequency | Responsible Officer | Feedback Method |
|---|---|---|---|---|
| **Service users** | Survey | Annual | Group Manager | • Public performance indicators<br>• Reporting on the council's website |
| **Partners / key stakeholders** | Survey | Annual | Group Manager | • Public performance indicators<br>• Reporting on the council's website |
| **Unpaid Work recipients satisfaction feedback** | Survey | Ongoing but reported / collated annually | Unpaid Work Manager | • Public performance indicators<br>• Reporting on the council's website |
| **Unpaid Work consultation** | Focus group | Annual | Unpaid Work Manager | • Annual report<br>• Report to Policy Development and Scrutiny Panel (PDSP) |

## Activity Budget 2021/22

### Justice Service

| Activity Name and Description | | Link to Corporate Plan | Performance Indicator and Target 2021/22 | PI Category | Staff Resource (FTE) | Revenue Expenditure Budget 2020/21 £ | Revenue Income Budget 2020/21 £ | Net Revenue Budget 2020/21 £ |
|---|---|---|---|---|---|---|---|---|
| Youth Justice | To offer a service to young people charged with offending behaviour with a view to reducing referrals to the Reporter to the Children's Hearing System. To provide a flexible and focused service to young people as a diversion from secure accommodation. | 6. Reducing crime and improving community safety | SPCJ114_9b Percentage of Early and Effective Intervention (EEI) cases 8 to 17 years who do not become known to the Youth Justice Team within 12 months (Target 95%) | WLAM | 10.5 | 494,347 | 0 | 494,347 |
| | | | SOA1304_31 Number of children/young people in secure or residential schools on offence grounds. (target 1) | PUBLIC | | | | |
| Throughcare | Provision of Statutory Justice service for adults serving long term sentences in custody, on release subject to licence in the community and those requesting voluntary Throughcare | 6. Reducing crime and improving community safety | SPCJ083_6b.5 Percentage of new Parole or other Throughcare Licences seen within one working day of release from custody. (target 100 %) | PUBLIC | 6.0 | 346,821 | 0 | 346,821 |
| | | | SPCJ062_9a.1c Cost of delivery of the Criminal Justice Throughcare Service (target £340,000) | WLAM | | | | |
| Addiewell | Provision of Statutory Justice service for adults serving long term sentences in custody at HMP Addiewell | 6. Reducing crime and improving community safety | SPCJ084_6b.5 Percentage of new long-term prisoners contacted within 7 days of notification by Sodexo Justice Services (Addiewell prison). (target 100%) | WLAM | 7.0 | 410,165 | (390,000) | 20,165 |
| | | | SPCJ065_9a.1a Cost of delivery of the prison based social work service at HMP Addiewell (target £310,000) | WLAM | | | | |
| Unpaid Work | Provision of statutory Justice service to individuals subject to | 6. Reducing crime and improving | SPCJ151_9b Average Tonnes of scrap metal recycled by the Unpaid Work Order Team (target 34,000) | WLAM | 8.8 | 403,050 | (133,985) | 269,065 |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | unpaid work conditions of a Community Payback Order | community safety | SPCJ073_9a Number of Community Payback Orders with an Unpaid Work Condition (target 280) | WLAM | | | | |
| Community Payback | Provision of statutory Justice service to individuals subject to supervision requirements of a Community Payback Order | 6. Reducing crime and improving community safety | CP:SPCJ144_9b.1a Percentage of Community Payback Orders supervised by the Criminal and Youth Justice Service with a successful termination (target 75%) | PUBLIC | 21.4 | 992,016 | (329,776) | 662,240 |
| | | | SPCJ063_9a.1a Cost of delivery of the Community Payback Order Service (target £1.44 million) | WLAM | | | | |
| Assessment and Early Intervention | Provision of statutory Justice service to individuals requiring preparation of criminalo justice social work report at the request of a court, provision of court services as required, bail supervision and Diversion from Prosecution | 6. Reducing crime and improving community safety | P:SPCJ148_9b.1a Percentage of Criminal Justice Social Work reports resulting in a custodial sentence of less than 6 months (target 5%) | PUBLIC | 7.5 | 422,793 | 0 | 422,793 |
| | | | SPCJ061_9a.1a Cost of delivery of Criminal Justice Assessment and Early Intervention Service (target £380,000) | WLAM | | | | |
| DTTO | Provision of statutory Justice service to individuals suject to a Drug Treatment and Testing Order | 6. Reducing crime and improving community safety | SPCJ075_9a Number of Drug Treatment and Testing Orders (target 12) | WLAM | 3.5 | 217,557 | 0 | 217,557 |
| | | | SPCJ067_9a.1a Cost of delivery of Drug Treatment and Testing Orders (DTTO) (target £220,000) | WLAM | | | | |
| Service Support | Provision of management and administrative support. | Enabler Service - Corporate Governance and Risk | Support activities contribute towards the overall performance of the service. Performance is monitored through the indicators for front line activities. | | 8.5 | 586,040 | (9,887) | 576,153 |
| | | | | | | | | |
| | **Total :-** | | | | **73.2** | **3,872,789** | **(863,648)** | **3,009,141** |

## Actions 2021/22

The service will undertake a range of actions to support corporate priorities and objectives, improve services and deliver transformation.

**Social Policy Actions 2021/22**

| Action | Description | Planned Outcome | Owner(s) | Start | End | Status | Update |
|---|---|---|---|---|---|---|---|
| **Review of unpaid work activity** | Review and redesign of unpaid work team within Justice Services. | A revised approach to unpaid work activity is in place. | Senior Manager, Justice and Looked After Children | April 2021 | March 2023 | Active | Review has completed and implementation is now progressing. |
| **Unpaid work/ Review utilisation of 'Other Activity'** | Explore possibility of expanding educational and developmental approaches to support completion of unpaid work order hours. | Improved rates of completion of unpaid work. | Senior Manager, Justice and Looked After Children | April 2021 | March 2023 | Active | Review has completed and implementation is now progressing. |
| **Recovery following COVID-19** | Ensure services continue to be delivered in line with service user need and capitalise on lessons learned from the pandemic. | Continued positive provision. | Senior Manager, Justice and Looked After Children | April 2021 | March 2022 | New | Services continue to be reviewed. |
| **Review of management and support** | Critical review to ensure that all support functions are adding value to the delivery of social care services. | Streamlined support structure. | Head of Service | September 2018 | March 2023 | Active | Redesign work is underway. |
| **Digital transformation projects** | A programme of activity to ensure that the council is well placed to take advanced of opportunities offered in the digital age. | To deliver improved user-focused digital public services. | Head of Service | April 2018 | March 2023 | Active | Redesign work is underway. |

# Developing the Management Plan and reporting progress

The Management Plan was developed to support the delivery of the Council's Corporate Plan and to take account of a range of factors that are likely to impact the delivery of council services in the next two years.

## Context

The next two years will be a period of significant challenge for the council with ongoing spending constraints expected to continue. However, the council has clearly defined long term aims relating to the development of high quality services, designed to meet the needs of its customers. These long term aims are captured in the Local Outcome Improvement Plan, Community Plan and in the council's Corporate Plan and together these strategic plans determine the work of the council's services.

The development of the Corporate Plan 2018/23 has been directly influenced by the views of the people living and working in West Lothian, ensuring that all employees are focused on meeting the needs of a growing and vibrant community. The Corporate Plan sets the strategic priorities for the council up to 2022/23 and this will be the continued focus for all council services during the period.

This will help to ensure that we continue to tackle the most important issues for West Lothian. Also, that we invest in and prioritise the services which make the most significant contribution to the achievement of positive outcomes.

### Influences

There will be many internal and external factors which will influence the work of Social Policy. The more prominent include;

- Changes in legislation
- Policy changes
- Demographic changes
- Significant Incidents
- Emergency and Crisis situations
- Poverty

### Planning Process

The Management Plan was developed by the Social Policy Management team, using a range of information to ensure that services, activities and resources are aligned to:

- The council's Corporate Plan and the deliverables for which Social Policy will be responsible for achieving or contributing to;
- Supporting the delivery of the council's transformation programme and Digital Transformation strategy
- Implementing the priorities outlined in the Children's Services Plan 2020/23
- Implementing the priorities outlined in the Corporate Parenting Plan 2020/23
- Implementing the priorities outlined in the Community Justice Strategy 2019/24

- Implementing the priorities outlined in the Violence Against Women and Girls Strategy 2020/23
- Integration Strategic Plan 2019/23
- Integration Participation and Engagement Strategy 2020/23
- West Lothian Autism Strategy 2015/25
- Joint Commissioning Plans in all main operational areas will ensure a clear focus on delivery of Transforming Your Council priorities.

The process and timescales for the development and publication of the management plan is set out, including consultation with the appropriate stakeholders.

| | | |
|---|---|---|
| Corporate Plan | The Corporate Plan is approved by West Lothian Council, setting out the key priorities for all council services for the period 2018/19 to 2022/23. | February 2018 |
| Social Policy Planning | The service management team develop the plan taking account of a range of factors, business requirements and customer needs. | February to March 2021 |
| Executive Management Team approval | The council's executive management team (EMT) will review all service management plans to ensure they are sufficiently focused on corporate priorities. The EMT will also review the plans annually, scrutinising performance and progress in the stated outcomes and actions. | March 2021 |
| PDSP consultation | The Management Plan is taken to the relevant Policy Development and Scrutiny Panel(s) for consultation, providing Panel members the opportunity to shape planning and resource allocation. | April to June 2021 |
| Management Plan launch | The service cascades the plan to Corporate Service employees to ensure that they understand the key priorities and challenges ahead and how they will contribute to successful outcomes. | April to June 2021 |
| WLC website | The Management Plan is published on the council's website to provide detailed information for the public and external stakeholders on council services, resource allocation and performance. | July 2021 |
| Management Plan updates | The Management Plan progress is reviewed by the appropriate PDSP each year | April to June 2021 |

## Continuous Improvement

Social Policy will continue to play a key role in the development and support of high quality customer services. Social Policy will continue to engage with our customers to modernise structures and processes to ensure that they continue to provide the most efficient and effective model for service delivery.

Social Policy is subject to regular scrutiny on at least an annual basis in relation to a significant number of its statutory services across Children and Families and Community Care and Criminal and Youth Justice. During 2021/22 there will be continuous self-evaluation activity and Quality Assurance of Adult, Child Protection and Corporate Parenting processes and approaches.

All three WLAM areas completed WLAM Assessment in 2019, with improvements on their previous cycles.

# Social Policy Scorecard

The service will report on the following key measures of the success throughout the lifetime of our plan (short term trend arrows: 2020/21 performance exceeded the target = ↑ / 2020/21 performance met the target = – / 2020/21 performance was below the target = ↓):

**Indicators**

| WLAM unit / service | PI Code and Short Name | 2020/21 Performance | 2020/21 Target | Performance against Target | 2021/22 Target |
|---|---|---|---|---|---|
| **Community care** | SPCC017_Percentage of customers who rated the overall satisfaction with the Older People's service they received as good or excellent. | 100% | 98% | ↑ | 100% |
| | SPCC038_Number of complaints received by the Community Care Service | 55 | 72 | ↑ | 72 |
| | SPCC024_Net cost per head of population for services for older people | £1432 | £1,432 | – | £1,484 |
| | SW03a_Percentage of People Aged 65+ with long-term care needs who are receiving personal care at home. | 65.7% | 64% | ↑ | 64% |
| **Children and Families** | SPCF001_Percentage of customers who rated the overall quality of Children and Families services as good or excellent. | 98% | 100% | – | 100% |
| | SPCF040_Number of complaints received by the service | 54 | 60 | ↓ | 60 |
| | SPCF060_Net cost of Children and Families services per 1000 of population. | £161,000 | £159,000 | – | £162,000 |
| | SPCF133_Percentage of children on the Child Protection Register who have been on the register for two years or more. | 0% | 0% | – | 0% |
| **Criminal and Youth Justice** | SPCJ001_Percentage of service users responding to surveys who rated overall quality of the Criminal & Youth Justice Service as being 'good' or 'excellent' | 100% | 95% | ↑ | 100% |
| | SPCJ040_Number of complaints received by the service | 4 | 10 | ↓ | 10 |
| | SPCJ060_Net cost of Criminal and Youth Justice services per 1000 of population. | £19,982 | £19,000 | ↑ | £20,000 |
| | SPCJ143_Percentage of Community-based Orders supervised by the Criminal and Youth Justice Service with a successful termination. | 83% | 80% | ↑ | 83% |

This scorecard offers a high-level snapshot of the service performance. More information about the performance of Corporate Services can be viewed via the council's website: www.westlothian.gov.uk/performance

# Social Policy

# Management Plan 2021/22

**April 2021**

For more information:

Email address:jo.macpherson@westlothian.gov.uk

Telephone number: 01506 282194

-

West Lothian Civic Centre
Howden South Road | Livingston | West Lothian | EH54 6FF

## HEALTH & CARE POLICY DEVELOPMENT AND SCRUTINY PANEL WORKPLAN – 2021/22

| | ISSUE | LEAD OFFICER | PDSP DATE | Comments/Notes |
|---|---|---|---|---|
| 1 | Financial Performance Report | FMU | 19th August | |
| 3 | Update report on delivery of Health and Social Care in Prisons in West Lothian | Tim Ward | Tbc | |
| 4 | IJB Annual Performance Report | Yvonne Lawton | Tbc | |
| Reporting Activities of Outside Bodies | | | | |
| 5 | Minutes of Lothian NHS Board | Allister Short | 19th August | |
| 6 | Minutes of West Lothian Integration Joint Board | Allister Short | 19th August | |