

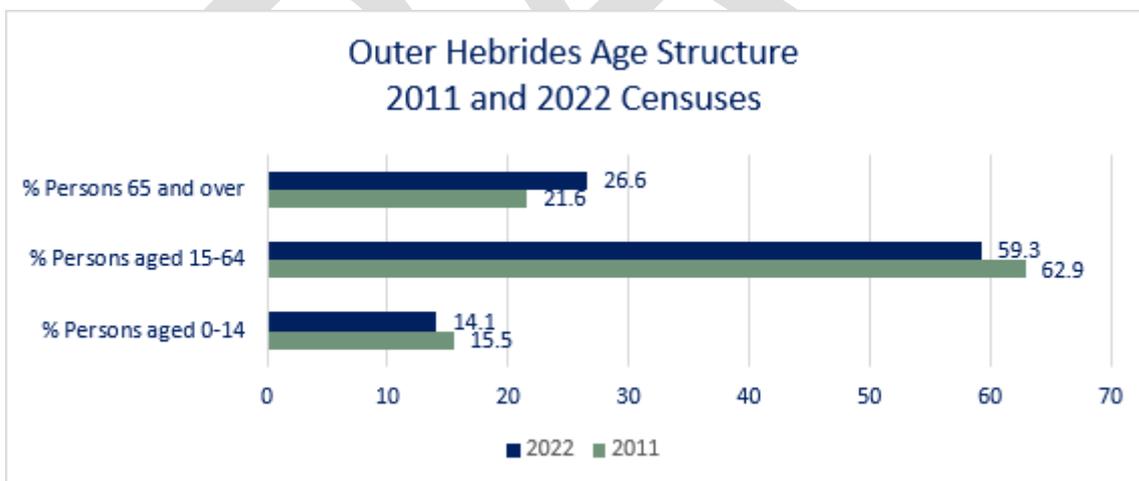
CSWO REPORT 2022-23

WORKING COPY



Governance and Accountability

- 1.1 This is the annual Chief Social Work Officer (CSWO) report for the Outer Hebrides for the period from 1st April 2022 to 31st March 2023.
- 1.2 The Outer Hebrides is made up of the main islands of Lewis and Harris, North and South Uist, Benbecula and Barra. The island chain, which lies off the Northwest coast of Scotland, is some 210 km from Lewis in the north to Barra in the south.
- 1.3 The current population of the Outer Hebrides is 26,200 (rounded to the nearest hundred) as at Census Day 20 March 2022. There was a decrease of 500 persons (1.7%) from mid-2021 to March 2022. However, there has been a 5.5% decrease (-1,500) persons from the 2011 Census to the 2022 Census. The population of the Outer Hebrides continues to experience negative natural change (more deaths than births). Note this is the first Census release and figures have been rounded.
- 1.4 The population is concentrated in Lewis (18,750 approx.), Harris (1,650 approx.), Uists and Benbecula (4,500 approx.) and Barra and Vatersay (1,300 approx.). The Stornoway settlement has a population of approximately 7,280. The remaining population is scattered over some 280 townships with the rural population continuing to have a high proportion of Gaelic speakers. The Gaelic language and culture are important factors in island life. They continue to remain embedded in communities throughout the island chain and are key considerations in the delivery of services.
- 1.5 The 2022 Census shows that the Outer Hebrides has the 3rd highest percentage of those aged 65+ at 26.6% (Argyll & Bute highest at 27.2%), against the Scottish average of 20.1%.



- 1.6 The chart above shows that the percentage of those aged 0-14 has decreased by 1.4 percentage points and those aged 65 and over has increased by 5.5 percentage points in the Outer Hebrides between the two Censuses in 2011 and 2022. This illustrates how much the population has aged over the last 11 years in the Outer Hebrides.
- 1.7 Broad age groups are as follows: 14.1% in the 0-14 year age group while Scotland has 15.3%; 59.3% in the 15-64 age group while Scotland has 64.6%; and 26.6% aged 65 and over while Scotland is 20.1%. The 2018 population projections predict that over the ten-year period from 2018 to 2028 there will be changes in broad age groups as follows:

- 13% decline in the 0-15 years group
- 6% decline in the working age population (the largest percentage decline in Scotland)
- 1% decrease in those of pensionable age (one of 6 areas with a decrease)
- 25% increase in the population of those aged over 75 years.

- 1.8 Whilst we welcome the fact that people are living longer lives, having a projected 25% increase in people aged over 75 in our community coupled with a projected 6% decline in the working age population does present us with major workforce challenges in the years ahead. Considering there are existing workforce challenges in social care, arguably the situation could become critical in the years ahead in terms of service delivery. Making social care a more attractive career choice, better use of technology and the possibility of centralising more services and making them more efficient are possible solutions, as is the expansion of the Housing with Extra Care model of service delivery.
- 1.9 The last of the public health restrictions on people's lives, associated with the pandemic have taken place over this period. Only in health care settings does the wearing of masks continue. As previously reported, the pandemic period positively challenged our working methods with people and each other. At the start of the pandemic one would never have imagined the amount of routine work we are now able to undertake via the use of technology and particularly Microsoft Teams. There are clear advantages to this technology for practitioners covering the vast geography of the Outer Hebrides. That said, there is still an important role for face-to-face interactions and interventions. A core component of a social workers tool-kit is observing and trying to make sense of human behaviour and relationships, which is not always possible sitting in a virtual room, and often more possible when in close proximity. We also must accept that 'things move on', and that as a profession we have to move with the times and if our younger service users are more familiar and comfortable with virtual engagement, then we must listen to them and engage with them on their terms as much as on our own.
- 1.10 At a more strategic level, continued remote working has also allowed more regular participation in national meetings and developments. It is far more efficient to participate in national events and meetings virtually, not having to spend hours travelling or as too often has been the case, waiting to travel. Increased participation has given the Outer Hebrides a louder and more sustained voice on the national scene. We have been able to influence in a way we have not enjoyed in the past. In addition to this, strategic engagement across the Highlands and Islands has increased, where the sharing of practice is a regular occurrence.
- 1.11 Recruitment continues to be difficult, particularly in social care although in Adult Services, there have been difficulties recruiting to social work posts. This has been particularly so in the Southern Isles. This is not simply about a dearth of affordable housing or the expense of living in remote and island areas. It is about demographic changes and a national shortage of suitably qualified and experienced people. During the period of this CSWO report Social Work Scotland published the 'Setting the Bar' research. It is clear from 'Setting the Bar' that there are not enough social workers in Scotland to meet the national demand. A positive development has been the recruitment of 3 trainee social workers in the Outer Hebrides. The interest in these posts was significant and if finances allow, additional trainees will form part of addressing our recruitment challenges.
- 1.12 As Chief Social Work Officer for the Outer Hebrides, I am also Head of Children's Services. This portfolio clearly includes direct responsibility for all social work services for Children and Families Services as well as all associated resources such as Fostering, Adoption and Kinship Care, Children's Houses, supported accommodation for vulnerable young people, the Extended Learning Resource and I have responsibility for the Emergency Social Work Out of Hours Service.

- 1.13 As CSWO I am a member of the Corporate Management Team (CMT) and am a member of the Integrated Joint Board (IJB), which has specific accountability for the delivery of adult social work and social care services ensuring that the statutory duties of the profession are delivered across adult's and justice services. Partnership working takes place with a wide range of multi-agency professionals including the Chief Officer, Chief Executive, Elected Members, health and social care managers and practitioners. There are regular meetings with the Chief Executive of Comhairle nan Eilean Siar and the Chief Officer of the IJB.
- 1.14 I am a member of various key groups and committees within the organisation. Clear governance and reporting arrangements are in place. The CSWO provides professional advice and guidance on all social work matters and provides assurance that social work services are being delivered to the best standards and within the required statutory and policy guidelines. Regular performance reporting around risk management is also provided with the CSWO specifically reporting through the Chief Officers Group for Public Protection. The CSWO is a member of the Adult Protection and Child Protection Committees.
- 1.15 Over the period of this report a key issue for the IJB, Comhairle and NHS Western Isles continued to be consultation on and development of the National Care Service. As was reported last year the impact on staff from the two employers could well be different and the democratic process could lead to different views of the National Care Service being taken by the employing parent bodies. At the time of writing, there is a continued hiatus in the plans for the NCS and while it is proper that this planning is progressed with the utmost care it does leave staff feeling uncertain and possibly unsettled, particularly for Justice and Children's Services. This is a level of complexity which requires careful consideration.

Service Quality and Performance

Child Protection

- 2.1 This reporting period has seen the introduction of the National Minimum Dataset for Child Protection Committees. Improved and more meaningful data has been a service improvement area for some time, so this is a welcome introduction and my thanks go out to Andrew Macaulay for delivering on this. The data will become particularly useful over time, when themes and trends can be identified and responded to. The first report was for May to October 2022. The Audit and Self-Evaluation Group reviewed the data, considered the scrutiny questions and identified the headline messages for the Child Protection Committee.
- There are notable spikes within the figures, however by taking a view over the years of data available, largely our trend lines are relatively stable.
 - There was a significant increase in youth offending referrals to SCRA this year and subsequent interventions are in place with the view to engaging with the young people. Additionally, the Youth Justice Group reconvened it's work under the overview of the CPC.
 - Consistent increase within the Child Protection Registrations, however this can be explained through the number of families on the register remaining relatively low, but larger sibling groups of consistently between two and six families.
 - The reasons for Registration are largely surrounding parental concerns: mental health, alcohol and substance misuse, domestic abuse and neglect. This has been a consistent presence over the span of this data from 2019.
- 2.2 The Second MDS Report covered the period November 2022 to April 2023. Key findings were as followed:

- The figures show a return to our more typical figures of youth offending referrals.
- There's a very varied, but generally lower than the national target (which is 78%) of decisions made within 50 working days by SCRA following referral. The delay in making decisions was affected by social work reports being submitted late. Having been highlighted, there was a sustained improvement in social works being submitted on time, which coincided with staff sickness levels improving.
- The reasons for Registration continue to be largely surrounding parental concerns: mental health, alcohol and substance misuse, domestic abuse and neglect.

2.3 The revised National Child Protection Guidance was launched in Sep 2021, with an initial implementation timeline of 18 months through to April 2023. Due to national challenges and changes within the initial guidance this implementation timeframe was extended to September 2023. Throughout this time the Child Protection Committee (CPC) has been monitoring the progress of its implementation.

2.4 The Scottish Government shared a Self-Evaluation Tool for all CPCs to complete for October 2023, exploring eight key areas of implementing the guidance. These areas are:

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| Key Area 1 | Alignment with GIRFEC and The Promise |
| Key Area 2 | Child Protection Processes |
| Key Area 3 | Workforce Skills and Wellbeing |
| Key Area 4 | Engagement and Involvement of Children, Young People and Families |
| Key Area 5 | Learning Culture |
| Key Area 6 | Multi-Agency Working: Social Work, Education, Health, Police and Third Sector |
| Key Area 7 | Leadership |
| Key Area 8 | Long(er)-term Outcomes for Children and Young People |

2.5 Overall, our level of implementation of the guidance has progressed smoothly and is on track for full implementation within the stated timeframe. The Scottish Government have intimated that there is likely to be annual updates to the guidance moving forwards rather than significant updates every 4 or 5 years. This will mean that our own local documents will need to be flexible to adapt to these changes.

2.6 With reference to local documents, the CPC have been updating the Local Multi Agency Child Protection Guidance document, with the previous version being agreed 2018. This document has involved multi-agency input and is due for launch in November 2023. It will include our newly developed vision statement. The process of creating the vision statement started at the Child Protection Committee Development Day in September 2023, where a range of visions statements were created. These statements will be brought to groups of young people with lived experience to share their views on the visions and select which they prefer.

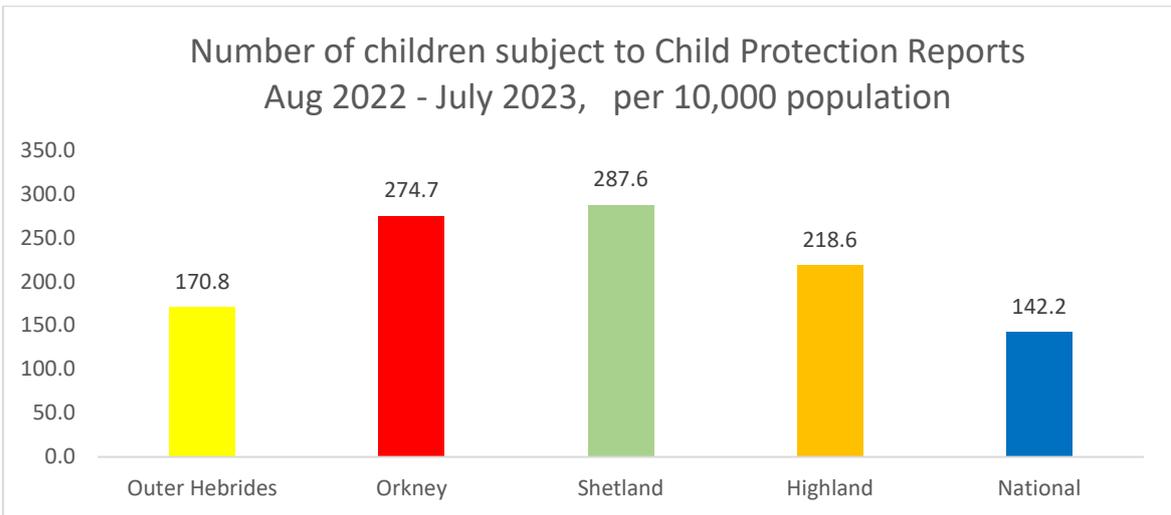
2.7 During 2022/23 we initiated an ongoing schedule of audit and review of Child Protection case work. Audit activity remains more critical than ever as Children's Services have not been inspected since late 2016. The target is to audit three Child Protection Cases on a quarterly basis. This work is undertaken through the Audit and Self Evaluation (ASE) Sub Group of the Child Protection Committee. The professionals involved in the audit of cases are managers from Social Work, Education, Police, Health and SCRA. Over the last 12 months, there have been 10 cases audited. The findings of these audits are tracked and monitored through an action tracking log, and also link in with the Learning and Development (L&D) Sub Group – this group was previously known as the Professional Learning and Communication Group. The audit of the cases concludes with two members of the audit team meeting with the Team Around The Child (TATC) professional group to provide feedback.

- 2.8 The key areas of strength noted are:
- Initial response to risk and need continues to be very good
 - Progression to Initial Referral Discussion is made in an appropriate and timely manner (same day most often)
 - Good level of communication and joint working from operational services
 - Evidence of good working relationships with children and their families
 - Progression to Child Protection Planning Meeting (CPPM) is within timescales
 - Prenatal involvement in CPPM and CP Core Groups is very high
 - Number of children reappearing in the CP Process within 2 years is very low (3 cases in 2 years)
- 2.9 The main areas of improvement noted have been:
- Use of Chronologies
 - Ensure accurate and up to date assessments and plans are shared across relevant partner agencies
 - Initiating Interagency Referral Discussions when a concern arises in a case already open to a service
- 2.10 We have also initiated an audit process for Interagency Referral Discussions to ensure there is oversight and quality assurance of this process. This involves the key agencies from IRD which are Social Work, Police, Health and Education. Each quarter 3 cases are audited. This has been a very informative and reassuring audit process. An overview of the findings of both audits are shared at the Child Protection Committee through ASE reporting. These audits use the Care Inspectorate Quality Improvement indicators, in particular indicator 5 as noted below.

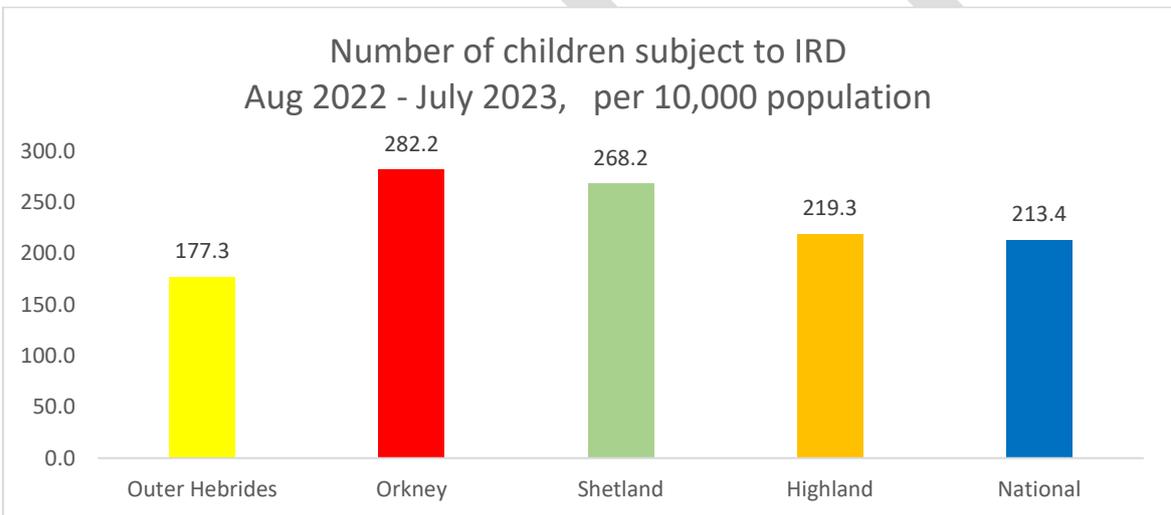
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| How good is our delivery of services for children, young people and families? |
| Delivery of key processes |
| Recognition and response to initial concerns. Assessing risk and need. Care planning, managing risk and effective intervention. Involving individual children, young people and families. |

- 2.11 The Child Protection Committee Improvement Plan (CPC IP), previously referred to as the Joint Agency Improvement Plan (JAIP) was renamed to give clearer ownership of the plan to the CPC. This plan was updated in 2022 and covers the 2023 and 2024 period. The CPC IP has 13 overall Outcomes, that are shared across five groups to progress. These are:
- Violence against Women and Girls Partnership
 - Child Protection Committee (CPC)
 - Audit and Self Evaluation (Sub-Group of CPC)
 - Child Exploitation (Sub-Group of CPC)
 - Learning and Development (Sub-Group of CPC)
- 2.12 Under these 13 outcomes there are 45 specific actions. Over the course of this this year, 21 actions have been completed, across all 5 groups responsible. A number of these actions are new processes or practices being implemented and will continue to be ongoing pieces of work within the multi-agency services. 17 other actions are in progress, with some nearing completion within the next number of months. The majority of other actions are at early stages of change and implementation and therefore are further away from completion, however are progressing. The CPC IP continues to be a standing item at CPC for reviewing its progress and any actions completed etc are updated.
- 2.13 Child protection and justice partners are working in partnership with the Scottish Government to take forward recommendations of the Evidence and Procedure Review 2017 to improve the quality and consistency of Joint Investigative Interviews (JIIs) of children.

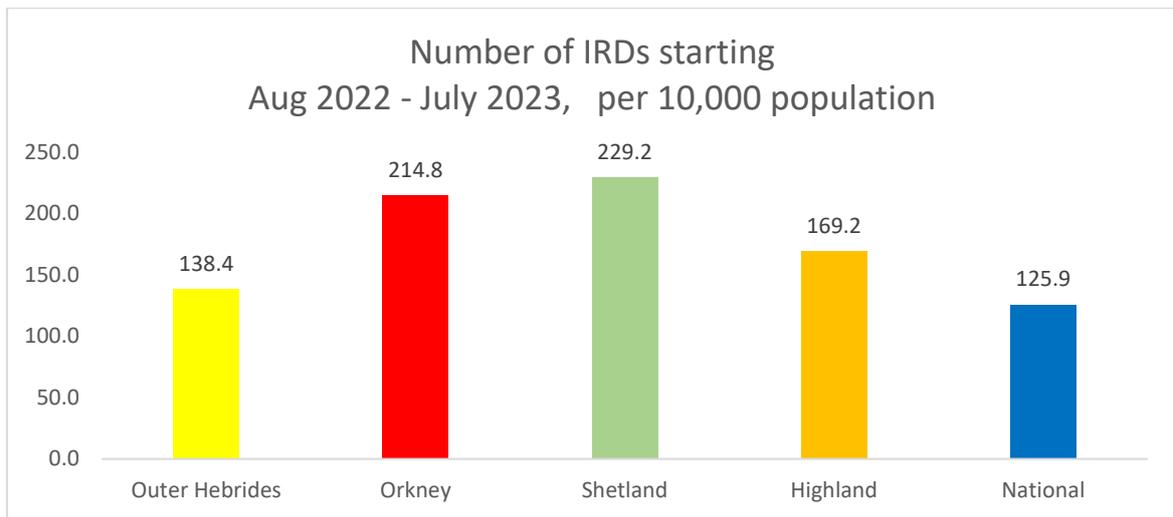
- 2.14 The aim is that JII statements are of a sufficiently high standard that they can be used as Evidence in Chief and contribute to the range of improvements being made to remove the need for children to give evidence in court and so reduce the potential of further trauma for child victims and witnesses.
- 2.15 This led to the development of the Scottish Child Interview Model (SCIM) for joint investigative interviewing and to a new, comprehensive training programme for child interviewers. This new model is now being implemented within the Western Isles with two Social Workers and two Police Officers being trained. It is anticipated that three will complete this training at the end of 2023, with the potential of going live with SCIM interviews from November 2023. Given the number of JIIs being undertaken in the Western Isles – approximately 25 per year - it is anticipated that all of our JIIs will be using the SCIM model. A review of current interview sites used locally will be undertaken although the current facilities used are of a good standard.
- 2.16 Bairns' Hoose is a transformational, whole-system approach to delivering child protection, justice, and health support and services to child victims and witnesses of abuse and harm. The overall vision of a Bairns' Hoose in Scotland is that all children in Scotland who have been victims of or witnesses to abuse or violence, as well as children under the age of criminal responsibility whose behaviour has caused significant harm or abuse, will have access to trauma informed recovery, support and justice.
- 2.17 Locally we've submitted an application to be part of the Pathfinder process. The model that we propose is a three room model rather than the Bairns' Hoose's 'four room' model. The reason for this is that there is little value in having a health room for forensic medical examinations given that locally we have no Forensic Child Protection Paediatric Consultants. This is in line with other areas that have submitted pathfinder applications such as Aberdeenshire and Fife. Within the 'three room' model we will still aim to meet all the values and visions of the Bairns' Hoose model. It is proposed that this would take place in Stornoway and would also enable to opportunity for co-location of staff to take place.
- 2.18 The key values through which this vision will be achieved are that:
- We are child-centred, trauma-informed and respect the rights and wellbeing of the child at all times.
 - We provide consistent and holistic support, which enables children to have their voice heard, access specialist services and recover from their experiences.
 - We aim to prevent children being retraumatised and to improve the experience of the justice process for children and families.
 - We demonstrate connectedness and national leadership to uphold children's rights to protection, support, participation and recovery.
- 2.19 Bairns' Hoose values are founded on Scotland's legislative and policy approach to improve outcomes for children, young people and families - Getting it right for every child (GIRFEC – which we in the Western Isles continue to be committed to deliver. This recognises the importance of early and preventative support, so that children receive the right help, at the right time.



2.20 The above graph shows the number of children subject to Child Protection Reports in the period, which offers some reassurance that our rates are not so far away from the national average. The fact that we are higher than the national average would suggest that our threshold for intervention is that bit lower than in more urban areas.



2.21 The above graph shows the number of children subject to IRD in the reporting period. Whilst it is suspected that the relatively low number of IRD's per 10,000 population is explained by the early intervention and prevention measures taking place, audit activity will be planned for 2024 to offer reassurance.



2.22 The above graph shows the number of children subject to IRD in the reporting period. This figure is more in keeping with the national average, and read alongside the table at 2.19, the evidence is fewer children are subject to repeat IRDs which is a positive trend.

Youth Justice

2.23 The reporting year has seen continued challenges with youth offending and anti-social behaviour, predominately in the town of Stornoway. Both locally and nationally, for this reporting period we have witnessed an increase in both the number of children being referred to SCRA on offence grounds and an increase in the number of offences. Work is underway to better understand the causal factor, including seeking the support of the Children and Young People's Centre for Justice. Locally, the incidents have mainly involved young males many of whom are disengaged from education.

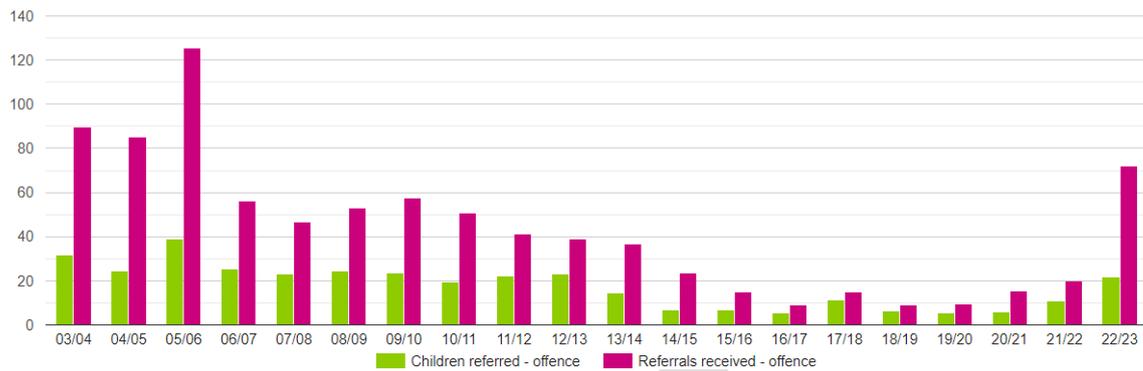
2.24 In response to this, the Youth Justice Group met monthly to review the effectiveness of strategies used and to monitor progress or otherwise with individual children's care plans. Our 3rd sector partners are supporting statutory services with this group of young people although collectively we are struggling to make much progress in this area. A number of them would be categorised as being on the edge of care. What the young people are telling us is that there is a lack of places for them to 'hang out' in the evening or a Friday afternoon and hence, they walk the streets and at times end up behaving inappropriately. We know that there is an abundance of structured activities for many of our young people but, there are sub-groups of young people whose interests fall out-with mainstream activities. The reality is there are less youth club opportunities in Stornoway than in the past.

2.25 Recent initiatives, that have yet to establish themselves are the recruitment of a Youth Justice Practitioner to Children's Social Work and a dedicated Children's Services Support Worker for children on the edge of care (funded by The Promise).

2.26 For the statutory service of Children's Social Work, responding to youth offending, by way of having to write assessments and provide task centered interventions takes up valuable time and resource. As a partnership, too many young people are progressing from low level, very occasional offending behaviours to higher level and more sustained behaviours. We need to review the partnerships preventative and early intervention approaches.

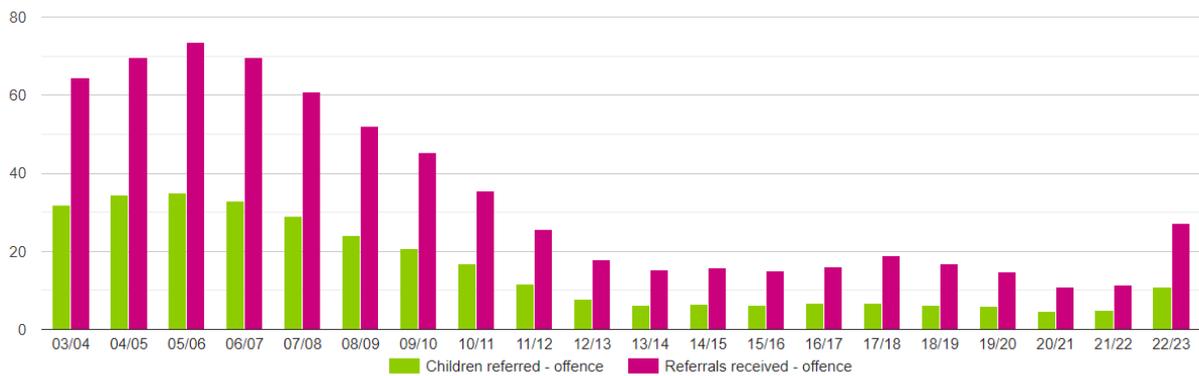
Eilean Siar
Rates (per 1000)

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Scotland
Rates (per 1000)

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Care Experienced Children and Young People/The Promise

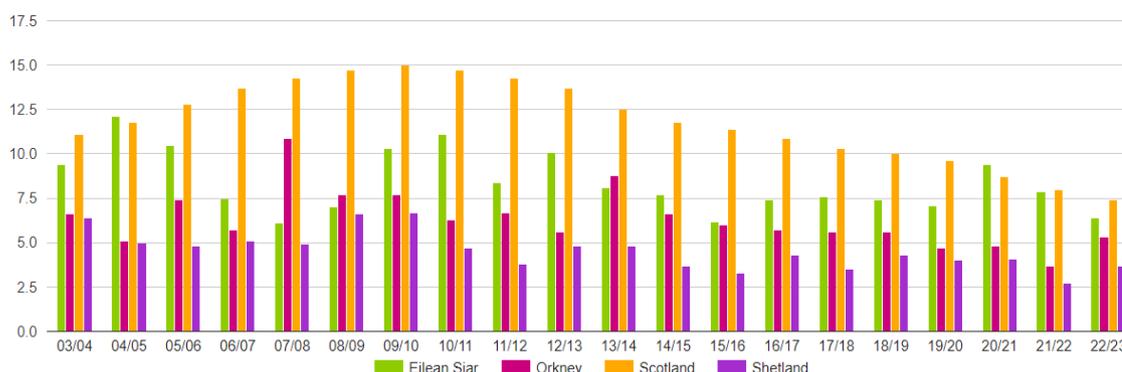
2.27 As part of our journey to Keet the promise, we want to continue reducing the number of children and young people who are living away from their families and for those who do have to live away from their immediate family, then they can live within their extended family/kinship network. And where they can't live within their extended family/kinship network, they live in a family type setting, such as foster or adoptive carers in their own community. We also want to reduce further our use of mainland placements, other than when strictly necessary i.e. secure care. Our approach to this is reflective of 'the fundamentals' of change that The Promise Scotland set out in its Plan 21-24:

- To do what matters to children and families
- To listen and embed what we have heard from children and families
- To tackle poverty and the forces that push families into it
- To respect children's rights, and
- To improve our language

2.28 Over the past 20 years, the average number of children on a Compulsory Supervision Order each year has been 39, with a high of 59 in 04/05 and a low of 26 in 2022/23. Having the lowest number of children on a CSO in 20 years offers some reassurance that we are making progress with Keeping the Promise. Our rates are lower than the national average but higher than Orkney and Shetland, which gives us something to aim for going forward but I feel that our rates are approaching what is realistically possible.

Children subject to CSOs
Rates (per 1000)

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2.29 We have one Children’s House in the Western Isles, that being Hillcrest. Hillcrest has the capacity for 4 placements plus one additional placement for short-breaks. During the reporting period, as a result of reducing the funding to Action for Children, only 3 placements are now funded for, plus the short-break bed, and where social work have to use the 4th placement, savings have to be made elsewhere in the social work budget. The demand for placements has remained fairly consistent over recent years although for 22/23, there has been an increase in demand.

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| Residential (CEYP) 2020/21 | 1188 nights |
| Residential (CEYP) 2021/22 | 1126 nights |
| Residential (CEYP) 2022/23 | 1259 nights |

Children with Disabilities

2.30 The demand for short-breaks and outreach respite remains consistent. Families have to meet either substantial or critical need criteria to be able access these services. There is 1 short-break bed in Hillcrest covering Lewis and Harris and 1 short-break bed in Balivanich covering Uist and Barra. Usage over the past year has been fairly consistent with previous years, although there was a more notable increase on Uist and Barra. The long term ambition of having a stand-alone residential and short-break facility for children with a disability has yet to be realised although during this reporting period, the plan has been rekindled and scoping exercises have taken place in terms of possible sites for building such a resource, and how viable such a resource would be in terms of cost, staffing plus care and educational outcomes.

| | |
|-----------------------------------|--|
| Short-break nights 2020/21 | 192 Lewis and Harris plus 24 Uist and Barra |
| Short-break nights 2021/22 | 197 Lewis and Harris plus 35 Uist and Barra |
| Short-break nights 2022/23 | 183 Lewis and Harris plus 50 Uist and Barra |

Child and Adolescent Mental Health and Wellbeing

2.31 Over the past 12 months, we have continued to see a high uptake of services for children and young people with mental health and emotional wellbeing difficulties. This includes continual usage of counselling services within schools, and counselling services delivered out-with a school setting. Approximately 40 young people per week are utilising the school counselling service alone, and between 25 and 30 children accessing the Wellbeing Workers within schools at any given time. It is possible that there is some cross-over between services working with these children. This level of

engagement has remained consistent year-on-year. Predominantly evidenced is mental wellbeing issues that impact on mental health specifically symptoms of anxiety, and low mood.

2.32 In terms of the Child and Adolescent Mental Health Service (CAMHS), 5% of the CYP population are referred. There has been an overall increase in referrals to CAMHS of 55.9% between 2019 and 2023. Queries looking for neurodevelopmental (ND) assessment or to support already diagnosed ND child have grown from 19.4% of referrals in 2019 to 46.9% of referrals in 2023. School Issues (Avoidance, School Issues, Bullying) as the primary or secondary reason for referral have also increased (23.4% in 2023). The CAMHS team continues to expand with additional disciplines to increase capacity such as a social worker who also delivers on family therapy /interventions to extend provision.

2.33 On a positive note, there have been the following downward trends:

- Suicidal Ideation as primary or secondary reason for referral has reduced significantly from 11.9% of all referrals in 2019 to 6.7% of referrals in 2023.
- Low mood and depression as primary or secondary reason for referral have reduced significantly from 18.6% of referrals in 2019 to 9.1% of referrals in 2023.
- Anxiety and Panic Attacks as primary or secondary reason for referral have reduced from 27.6% of referrals in 2019 to 23.9% of referrals in 2023.
- Social Issues, including friendship problems have reduced from 7.5% in 2019 to 3.3% in 2023.
- Behavioural Issues as a primary or secondary reason for referral has reduced slightly from 10.9% in 2019 to 10.0% in 2023.
- Substance misuse, while small in referral numbers, is becoming more of a prevalent theme within assessment.

Adult Services

3.1 In relation to outputs and outcomes, the matters to highlight are inter linked with positive and challenging workforce issues. At the start of the 2022/23 period, there were significant appointments made in relation to enhancing the workforce and supporting service improvement. Commissioning Services recruited a new service manager and filled three key administrative support posts. The appointments were critical in terms of the team's capacity to support the services, partner organisations and enhancing the offer to individuals and families in relation to Self-Directed Support.

3.2 In relation to Care at Home, a restructure of the service commenced to achieve an enhanced career pathway and additional care and support supervisor capacity was implemented on a fixed term basis to support the service during this transition. In terms of the performance of the service being delivered, a Departmental led survey of all care at home service users produced very positive feedback and this mirrored the independent surveys undertaken by the regulator.

3.3 There was similarly good news in the investment of a related service, the Short-Term Assessment and Reablement Service (START). START, graded at 5 by the regulator, received the commitment of circa £500k growth through the new allocation to Integration Joint Board's for winter pressures. This investment is permanent. Recruitment to the Reablement Worker, Occupational Therapy, Physiotherapy and Community Equipment posts commenced during this period and has limited success due to the well documented recruitment challenges locally and nationally across health and social care.

3.4 2022/23 has included significant scrutiny in terms of the regulatory inspections and the strategic inspection processes for the Partnership. The findings of the regulator inspections have recognised the high level of care and support being delivered to our residents and service users. With START, Grianan Day Care Service and St Brendan's Care Home all received grades of 5 for this aspect of the service. The leadership within the services were evaluated at grade 4 and this 'Good' award.

- 3.5 The improvement activity extending into 2023/24 relates primarily to training and quality assurance audit. Training for the statutory and non-statutory partners engaged in Adult Support and Protection was facilitated within services to embed the use of the procedures and application of timescales ahead of audit and quality assurance work being undertaken.
- 3.6 Towards the end of the reporting period, completion and consolidation of the majority of the actions within the Departmental business plan was achieved. A key action was the commissioning of the new social work records management system. The Eclipse system is now live and central to the plans to support more service improvement activity. The support and input of administrative and systems staff has been invaluable and will help the Department to make best use of the increased functionality of the system.
- 3.7 A high priority and legacy action moving into the next business plan, is in relation to the completion of the Goathill campus and the transition of the residents and workforce to the new buildings. The feedback from those who had the opportunity to visit the care home and the extra care housing ahead of opening was excellent. Public information including drone footage of the campus is being prepared to provide a virtual tour of the services available including the care home, housing, day care. The balance between, personal, communal and activity space provides an ideal setting to enable individuals to have the appropriate services and environment to live their lives as they wish to do so. The benefits of the investment in the campus will provide improved outcomes for residents, families, our collective workforce with the support of the Hebridean Housing Partnership and our partner agencies.
- 3.8 In relation to maximising the ability of commissioned services to perform well, the Carer funding issued on a permanent basis from Scottish Government was utilised in its entirety for adult services investment to sustain and increase the capacity of carer services. This has supported the mainstreaming of services previously resourced on a fixed term basis such as the Western Isles wide Carer Trainers services offering a range of resources and support to family carers. In addition, maximum flexibility has been made of the social care uplift funding to enable the eligible externally commissioned services to receive the funding, directly beneficial to their workforces and thus helping to sustain the vital services they provide.
- 3.9 All on island social care resources are subject to commissioning arrangements and spot purchase is used to enable any capacity to be realised to support individuals and their families either through Self Directed Support mechanisms and residential/nursing care home services. Delayed discharge performance has evidenced periods of improvement but sustaining such improvements is challenging and will require successful recruitment and retention developments to maximise on-island resilience.
- 3.10 A new terms of reference for the Integration Joint Board's Locality Planning Groups was agreed during this period and partial mobilisation of this important interface for the Board and partner organisations has commenced.
- 3.11 Despite the success in some appointments to posts, the greatest challenge facing the Department is recruitment and retention and managing the risk associated with increasing unmet need. The allocation of significant resources such as the Multi-Disciplinary Team and Adult Social Work ring fenced funding from Scottish Government provided an increased establishment comprising of a second Team Leader, 2.4FTE social workers, a trainee social worker. To date the only successful appointment was an internal appointment to one social worker post and the resultant displaced post is vacant. All posts are currently subject to refreshed recruitment processes and incorporated into the Departmental Workforce Plan for 2023/2025.

- 3.12 The improvements to the care at home career pathway and the opportunities to support enhanced workforce capacity and training at Goathill are challenging to realise. The main focus of the development of 2023/2025 Workforce Plan is to contextualise such challenges in partners with others to provide enhanced employment offers for current and potential members of the Western Isles communities. Associated with this is the progression of the National Care Service and reporting to the Social Work and Social Care Board and Integration Joint Board has provided key stakeholders with the opportunity to consider and review national progress within the local context as the associated legislation evolves.
- 3.13 The financial landscape for the Integration Joint Board and the partner organisations is increasingly challenging with the inability to recruit impacting on service capacity to provide timely service interventions when required. Reliance on agency although not at scale across social work and social care is a concern in terms of sustainability, consistency, and affordability. The financial outlook predicts a growing significant deficit. Budgetary monitoring and planning for the Department subject to the governance structures and decision making of the Integration Joint Board. Whilst agency staff are financially an expensive option, the reality is, they can be the difference between someone remaining in hospital and being discharged home.
- 3.14 Public performance monitoring continues through the Comhairle Business Plan reporting process, with operational and strategic risk registered monitored through the Integration Joint Board and the parent organisation processes.
- 3.15 The Integration Joint Board (IJB) received Scottish Government Funding of £248k for 2022/23 to support enhancements to multi-disciplinary teams. This funding is recurring and will be ring fenced, with any underspend rolled forward to the next financial year.
- 3.16 The proposed staffing enhancements at this stage relate to capacity issues within core services subject to additional performance oversight by Scottish Government and the Mental Welfare Commission.
- 3.17 There are legacy capacity issues within the social work service that can be addressed with use of this funding and will thus improve the Partnership's capacity to address and maintain service improvement activity given the core function of social work within MDT activity. Given the timescales for likely recruitment, it is suggested that delegated authority is given to the Chief Officer and Chief Finance Officer to utilise the 21/22 allowance to support interim use of sessional resources within the current and next financial year ahead of permanent recruitment and to shape out a proposal for reablement services across the Western Isles. Other funding made available to the Partnership is being used to extend the commissioning capacity and spot purchase rates for the third and independent sector providers.

Clinical Care and Governance

- 3.18 Key areas of concern in terms of performance within the social work service is the capacity to accelerate and address statutory reviews. At the time of writing, there are 167 due within the following 28 days with 27 assessments pending allocation to a worker. Complex reviews, triaging referrals with Allied Health Profession colleagues, co-ordinating the MDT transition planning and developing the outcome focused commissioning with practitioners requires additional Team Leader Capacity. Multiple attempts have been made to recruit to this post. Currently the Lead Officer Adult Support and Protection requires to support the sole Team Leader for the Assessment and Care Management Service (Uist based) and this depletes the resource available to address the duties associated with Adult Support and Protection, Adults with Incapacity and delivery of statutory Mental Health Officer duties. In addition, the Partnership has limited Mental Health Officer capacity, currently the Lead Officer has access to 1 fixed term MHO; and 3 officers have this qualification but have substantive duties within other aspects of this service. One of these officers is due to retire shortly. It is proposed that a current

0.6 social work practitioner posts is increased to be released as 1.0 FTE and that a new practitioner post is created to supplement the social work capacity in Uist and Barra, currently resourced with 1 FTE post. The risk is too great of restricting recruitment to MHO qualified workers given the market challenges. The proposal is that the MHO qualification is desirable within, with the condition that any successful applicant will undertake MHO training. Separate funding is received to resource MHO training.

Adult Support and Protection

3.19 The joint inspection of the Western Isles Adult Support and Protection partnership took place between 17 October 2022 and 24 March 2023. The inspectorate team scrutinised the records of adults at risk of harm for a two-year period, 17 October 2020 to 17 October 2022. Like all others across Scotland, we faced the unprecedented and ongoing challenges of recovery and remobilisation as a result of the Covid-19 pandemic, which was recognised by the Care Inspectorate. A summary of the strengths identified is as follows:

- The partnership responded well to the demands of the pandemic for adult support and protection.
- In January 2022 NHS Western Isles reconfigured their public protection service, which made a positive strategic contribution to adult support and protection.
- Following the appointment of a new independent convener in November 2021 the adult protection committee established subgroups to support improvement and development.

3.20 Priority areas for improvement

- The multi-agency procedures for adult support and protection did not cover all aspects of adult support and protection or fully detail the statutory duties and responsibilities of each agency.
- The delivery of key processes was ineffective. Investigation, risk assessment and risk management require significant improvement to effectively support and protect adults at risk of harm.
- Delivery and oversight of key processes relied too heavily on a small number of staff. Oversight and business continuity lacked resilience. This needed addressed by the health and social care partnership.
- Adults at risk of harm were ineffectively involved and engaged in operational and strategic adult support and protection.
- There was a lack of multi-agency reporting and governance by the adult protection committee and chief officers' group. Improvement in this area of practice would support more effective delivery of adult support and protection.
- All agencies/partners needed to improve their recording of adult support and protection work. This was particularly relevant for social work as the lead agency.
- A multi-agency audit was planned to support improvement work. This should put feedback from adults with lived experience, unpaid carers, and frontline practitioners at the centre. Findings from the social work audit should be implemented as a priority.

3.21 Priority areas for improvement relating to social work, whether in part or in full were immediately categorised in terms of criticality and those areas requiring an immediate response i.e. risk assessment and risk management were responded to immediately. Our Care Inspectorate Link Inspector was included in discussions surrounding action and improvement plans as was satisfied with the actions taken. The actions taken had an immediate impact in terms of recognising and then responding to risk and need. The Improvement Plan is overseen by the Chief Officers Group with the Head of Partnership Services providing regular updates to the Chief Officers Group. As Chief Social Work Officer, I am satisfied with the direction of travel and have the added reassurance from the Independent Chair of the Adult Protection Committee.

3.22 Table 1 provides details for overall referral numbers, inquiries and investigations over the period 2017-2023.

Table 1

| | <i>Total Referrals</i> | <i>Total Inquiry</i> | <i>Total Investigations</i> | <i>Total Case Conferences</i> |
|----------------|------------------------|----------------------|-----------------------------|-------------------------------|
| 2022/23 | 72 | 46 | 10 | 3 |
| 2021/22 | 102 | 41 | 14 | 1 |
| 2020/21 | 35 | 38 | 5 | 1 |
| 2019/20 | 35 | 40 | 8 | 2 |
| 2018/19 | 39 | 45 | 8 | 1 |
| 2017/18 | 36 | 29 | 4 | 1 |

3.24 As noted in last years annual report, referrals were fairly consistent from 2017 to 2021, following which there was a marked increase in referrals rising from around 35-39 annually to 102 in 2021-22. It was recognised that Adult Support and Protection activity was previously being under recorded and efforts were made to address this. It is encouraging to note that the total number of referrals has fallen but not so far as to suggest a return to under-reporting. The number of case conferences remains low, although for 2022/23 was the same number as Orkney and less than half of that of Shetland.

| <i>Area</i> | <i>Number of Case Conferences</i> |
|----------------------|-----------------------------------|
| <i>Western Isles</i> | 3 |
| <i>Orkney</i> | 3 |
| <i>Shetland</i> | 7 |

3.25 The Audit and Quality Assurance and Learning and Development subgroups continue to meet on a quarterly basis, with the Audit and Quality Assurance Group subgroup meeting monthly Both subgroups feed into the Adult Protection Committee. Recognised areas for improvement and areas of strength that were as follows:

Criminal Justice

| Annual New: | 2021/22 | 2022/23* |
|---|----------------|-----------------|
| Criminal Justice Social Work Report submitted | 96 | 101 |
| Community Payback Orders court reviews | 7 | 17 |
| Community Payback Order | 34 | 47 |
| Statutory Throughcare | 8 | 10 |
| Drug Treatment and Testing Order | 0 | 0 |
| Structured Deferred Sentence | 15 | 27 |
| Diversion from Prosecution | 2 | 6 |
| MAPPA (managed by JSW as at 31st March) | 7 | 10 |

- 3.26 Within Justice Social Work services, the reporting period saw a return to Court activity post pandemic as well as a return to office based and less remote contact activity with those subject to Court orders. Importantly, the backlog experienced through most of the country relating to suspension of Court activity during the lockdown periods, was also experienced locally though recognised at a more manageable level. The backlog in outstanding Unpaid Work hours to be completed was addressed through use of allowing multiple days of attendance where capacity allowed, and it is a credit to staff and those subject to the orders that the backlog was cleared without the addition of any capacity or resource.
- 3.27 A significant challenge for the Justice Social work service through the reporting period was that the core service had a vacancy within the service which normally covered the southern isles, which could not be successfully recruited to. This has meant (and continues) that the social workers within the Lewis & Harris service have had to make arrangements to cover the statutory requirements within that area as well as furnish the Lochmaddy Sheriff Court with reports and supervision of orders for that area. This encompassed travel and logistical issues throughout the reporting year in terms of disrupted travel at times, though it should be recognised that the social work staff covering the area where the vacant post covered included routine overnight stays and significant travel regardless of weather and potential disruption.
- 3.28 The activity throughout the reporting year from Courts has increased from the previous year, explained largely by the resumption of Courts and the backlog of Court cases being addressed. Whilst the number of social work reports to Court were largely static across both periods, the numbers of Community Payback Orders (CPO's) increased significantly. Equally of note, were the number of cases of Structured Deferred Sentences (SDS) put in place by Courts locally, which saw an almost 100% increase from the previous reporting year. This increase was significant against a backdrop of vacancy within the team and reduced capacity, as the SDS often requires regular social work support and intervention along the lines of a low level CPO.
- 3.29 The provision of services to Multi-Agency Public Protection Arrangements (MAPPA) continued throughout the reporting year, and the multi-agency work and sharing of information through this structure is reported to have worked continuously well through the Strategic Groups responsible. Those on orders subject to MAPPA receive intervention from social work on a 2:1 basis continually, therefore the numbers of people subject to those orders does not need to see a large increase in numbers of orders to have a significant effect on the capacity and resources of the service.
- 3.30 Whilst nationally developments have progressed in terms of Electronic Monitoring for Bail, our logistical and geographical challenges have meant there has been necessary delay in order to consider and consult with key stakeholders about what is expected and how this can be delivered locally. On a positive note, the levels of remand from the Western Isles are comparatively low, and therefore the EM for Bail is not at the same level of pressing need as may be required elsewhere. However, work took place in the reporting period in working alongside the local Procurator Fiscal service as well as Court personnel, to ensure that there is a shared understanding of what an 'assessment' for EM Bail will require (if it was required to do a home visit for example then our geography would have a significant impact on production of assessment) as well as the population group the assessment should be targeting. It is anticipated that within the next reporting period these issues will have come to a shared agreement and a service will be in place.

- 3.31 In terms of Community Justice within the reporting period, the Justice Social Work services has contributed to good partnership working within the Outer Hebrides Community Justice Partnership. The partnership delivered a Strategic Needs and Strengths Assessment within the reporting period, which also informed a workshop for partners to identify key priorities. This work underpins the development of a local Community Justice Outcome Improvement plan which will see publication within the next reporting period.
- 3.32 It will be necessary to continue to monitor the long-term impact of Covid-19, particularly in the response to the increased demand for mental health services.
- 3.33 The Outer Hebrides Adult Protection Committee has developed an Improvement Programme since January 2022. The plan identifies those areas where the Committee agree that are priority areas for development. The plan will run from March 2022-2023 – a copy is provided at Appendix 1.
- 3.34 The main outcomes sought through the Improvement Plan are:
- The Adult Protection Committee provides effective leadership and direction in Adult Protection and is accountable for its actions.
 - A learning culture to support continuous improvement is embedded in the APC and promoted across partner agencies.
 - We effectively identify adults at risk, share information timeously and act together to protect them from harm.
 - Collaboration across Public Protection raises awareness of cross-cutting challenges and opportunities for shared solutions in Adult Protection.
 - Adults and their families are supported to be fully involved in Adult Protection decision making processes.
 - Engagement with Adults and communities and raising public awareness.
 - There is evidence of greater public awareness of Adult Protection.

Resources and Finance

- 4.1 The Goathill development and resident transition will be completed in 2023. The new resource will be a significant improvement in environment and integrates residential care with supported accommodation, housing with extra care and specific services such as Alzheimer's Western Isles.
- 4.2 Adult Social Work is fully engaged with the Coming Home agenda and is progressing with the new Dynamic Support agenda, this work will build on the existing process and practice in place through the Exceptional Care Board.
- 4.3 Adult Social Work commissions a range of services from twenty-three external providers in order to provide targeted, specific support to adults in the Western Isles. The work of these providers is directed by individual Service Level Agreements and the providers are required to report back both on activity and quality of delivery. Service user involvement in the commissioning process is being promoted in order to ensure the commissioning is ethical, effective and focused on service user needs. Financial models used in these commissioning processes include grant funding, spot purchasing and use of Scotland Excel frameworks.

- 4.4 Unfortunately, during this reporting period, difficult decisions have had to be made in terms of efficiency savings. Children's Services social work and social care, like all other Comhairle services were asked to make a 5% efficiency saving. We also had to make this very same ask of 3rd sector commissioned services. When inflation is taken into account, the financial reduction was closer to 10% than 5%. As I write this report, Children's Services social work and social care have been asked to consider how to make further efficiency savings for 2024/25 and 2025/26. There are 3 critical questions we need to be asking of ourselves and asking the community, which are:
- What do we keep doing?
 - What do we do differently?
 - What do we stop doing?
- 4.5 As a profession we cannot meet all the current demands within existing resources. On a more positive note, there are a number of examples or short to medium term, ring fenced funds coming from central government, such as Whole Family Wellbeing Fund, The Promise and Trauma Informed Practice and Mental Health and Wellbeing monies. The Alcohol and Drug Partnership has also had an increase in its budget. It is more important than ever to utilise such monies efficiently and effectively, trying to use them in such a way that resolves challenges early and protects statutory services.
- 4.6 Since writing last year's report the 'cost of living crisis' has deepened, acutely impacting on our most vulnerable. Partnership work such as the Child Poverty Action Group has become increasingly vital in protecting people from the worst effects of this crisis. We know that poverty, in its own right or when sitting alongside other adversities, places more children and adults in positions of risk and need.
- 4.7 Children's Services continue to commission Action for Children to provide residential care for care experienced young people and short-break respite care. As reported earlier, Action for Children no longer provide outreach respite due to budgetary constraints. Action for Children do receive funding from other sources i.e. Corra Foundation, SG Mental Health Monies and Alcohol and Drug Partnership to deliver a whole suite of other interventions to children and families.
- 4.8 The Shed also received SG Mental Health monies and Promise monies to support vulnerable children and families, particularly those who are care experienced and on the edge of care.
- 4.9 Who Cares? Scotland and Western Isles Advocacy continue to offer advocacy support to children and adults, although due to efficiency saving, Who Carers? Scotland have cut their input from 5 days to 4 days per week.
- 4.10 In this reporting period, Foyer Project discontinued providing a housing support service with the local authority having to expand its own housing support services to encompass what had been delivered by Foyer Project.
- 4.11 There are a number of challenges and pressures in relation to resources and these include:
- Pressure on care home beds and respite beds which increases the potential for delayed discharge from hospital. Risk Analysis has identified a need to focus on reablement and strong links with the Short-Term Assessment and Reablement Team (START).
 - pressure on care at home packages in Lewis and Harris and again this has an impact on the potential for delayed discharge from hospital. Risk analysis has identified a need to review use of services from external providers and to ensure equity across different geographical areas in the Western Isles.
 - Pressure on short-breaks for children with severe and complex needs as the current demand exceeds available supply.
 - There is either no or very limited foster care availability on Lewis and Barra at any given time.
 - There is no budget for the 4th LAC bed at Hillcrest Children's House.

- 4.12 Comhairle nan Eilean Siar's Social Work budget for 2022/23 was £28.844m. The broad financial breakdown was £24.520m in Adult Care and Older People's Services, £0.477m in Criminal Justice Services and £3.847m in Children and Families Services.
- 4.13 At the end of the 2022/23 financial year the Comhairle services reporting to the Integration Joint Board (IJB) presented an overspend of £115k.
- 4.14 The Home Care Service was underspent by £115k, mainly due to the level of vacancies within this service. The gross saving was mostly offset by agency staffing costs required to ensure continuity of care.
- 4.15 Comhairle Residential Care was overspent by £937k. Staffing pressures and increased utility costs were partially offset by higher than anticipated service user income. The major factor in the over spend is the transfer of £823k to fund the Lewis Residential Care capital project which is allocated against the amount set aside in IJB Reserves in the year-end movement of balances.
- 4.16 Adult Care and Support Services were overspent by £133k. Staffing pressures and use of agency staff to maintain a level of service were responsible for this.
- 4.17 Adult Care Transport was underspent by £65k reflecting reduced fleet charges and external vehicle hires.
- 4.18 The Criminal Justice section reported an underspend of £55k due to staffing vacancies and absence.
- 4.19 At the end of the financial year Assessment and Care Services were overspent of £67k due to higher than budgeted Direct Payments.
- 4.20 Independent Care Homes were underspent by £226k due to higher than anticipated income from service users.
- 4.21 Adult Mainland Placements were underspent by £390k arising from less than anticipated placement costs through the year.
- 4.22 The £192k Management and Administration underspend allocated against the IJB Chief Officer reflects additional Scottish Government funding for Winter Pressures and Provider Support not fully utilised in 2022/23.
- 4.23 Children's Services had an underspend of £403k, which reduced to £91k following the application of the specific carry forward of ring-fenced funding and the Action for Children budget shortfall. The shortfall on this residential contract was met from funding carried forward from the previous financial year and a similar arrangement has been agreed for the funding gap in 2023/24, pending a permanent budget solution.
- 4.24 The service had a number of vacancies, including senior management posts, during the year and this accounted for the majority of the underspend.
- 4.25 In addition to the sums above the Mainland Placement budget was £86k underspent in 2022/23.
- 4.26 Budgets face annual pressure from flat cash settlement figures against a context of pay and general inflation. Also, pressures in SG Settlement within flat cash, regarding funding required to be spent and evidenced for specific purposes, reducing flexibility. Additional pressures on service delivery are most significantly staffing/recruitment ability in front line services such as care at home and residential care.

4.27 In terms of financial models, the authority along with IJB partner attempt to identify savings in order to meet budget resources available.

Workforce

- 5.1 As highlighted throughout this report, and in previous CSWO reports, there are challenges surrounding workforce. We recognise that with an expanding tourism economy, there is more competition than ever before for, what is, a scarce commodity, that being working age people. This will potentially become even more challenging should the economic boom be realised in renewable energy jobs as these will likely be well paid jobs and could be as attractive to local people as to people considering moving to here. Apprenticeships, traineeships, Developing the Young Workforce and other initiatives have all taken place in this reporting period to encourage and support people into social care and social work. These processes are mostly well established although we want to expand the use of trainees going forward.
- 5.2 For social work posts, such is the competition across Scotland, there is a wide variation in salaries paid, particularly in middle and senior management/leadership roles.
- 5.3 I would like to conclude on a positive note by saying over this reporting period, despite all the challenges detailed above, I have had the privilege to meet a number of apprentices and trainees and long serving staff who have reassured me that whilst we have issues of quantity of staff, the quality of the staff we have serving the public is exceptionally high.