

# **Chief Social Work Officer's Annual Report 2022/2023**

## **Dumfries and Galloway Council**



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## 1. Introduction

Welcome to the Chief Social Work Officers (CSWO) annual report covering the period 1<sup>st</sup> April 2022 to 31<sup>st</sup> March 2023. This is my first annual report that I have presented, and it would be remiss of me not to give mention to Lillian Cringles, who has recently retired from CSWO post after almost nine years.

### **Message from Lillian,**

*This will be my last report as the Chief Social Work Officer for Dumfries and Galloway as I will formally retire from my post on the 15<sup>th</sup> of June 2023. 2022/23 has been an extremely busy and challenging time for Social Work Services and trust the information and case studies provided will highlight the range and depth of the service provision.*

*As I reflect on my almost nine years as the CSWO, I am confident we are in a much stronger position now than we were then. I am not here to say that everything is perfect, it is not, we have made so much progress and now, the service are tasked with keeping the improvement journey going. There is no question this has been an incredibly tough journey and, a tough experience personally. I have, however, had the support of my staff who have worked incredible hard to deliver the change programme we desperately needed in 2014. I wish to thank the elected members and colleagues within the wider organisation and colleagues from each of the partnership for their support.*

*As I hand over the stewardship to Stephen Morgan as interim CSWO, I wish to say it has been an honour and a privilege to be the CSWO of Dumfries and Galloway Council and I am sure the service will continue to deliver the very best they can for the citizens of Dumfries and Galloway. I wish you all the very best for the future.*

*Lillian Cringles*

Last year, our report highlighted many challenges presented by the pandemic and the cost-of-living crisis, it is important to acknowledge that these continue to have a significant impact on our communities across Dumfries and Galloway together with the impacts compounded by planning for the humanitarian support response needed for people displaced by the war in Ukraine and to mitigate the impacts of the wider cost of living crisis. In December 2020, the Scottish Government and COSLA published a study examining the pandemic's far-reaching effects which concluded that 'people already suffering disadvantage are being hardest hit'. It has continued to be a significantly challenging landscape for everyone in society, with those who were already disadvantaged continuing to be disproportionately impacted with such economic, policy and societal pressures which are directly related to increasing demand for social work services and other support infrastructure in communities and continue to reflect a growing complexity of needs. From an organisational perspective, this has caused significant pressure on local authority, colleagues in NHS, third sector and other partners.

Over the past 12 months there have certainly been many challenges along the way, yet this is what the task of social work is at its essence – managing and mitigating the competing demands, expectations and risks associated with living in the modern world.

Despite the increasing challenges, the context and the significant uncertainty facing the sector our social work and social care workforce, our carers, communities, and partners across all services have remained committed to providing services to our local people. As ever, my appreciation goes to everyone who works in social work and social care, and those who otherwise support our communities, for all that they have done and continue to do for our children, young people, adults, and families. I remain incredibly proud of the efforts of all staff who have continued to keep the needs of others at the forefront throughout these challenging times.



Stephen Morgan, Interim Chief Social Work Officer



## 2. Purpose and Background

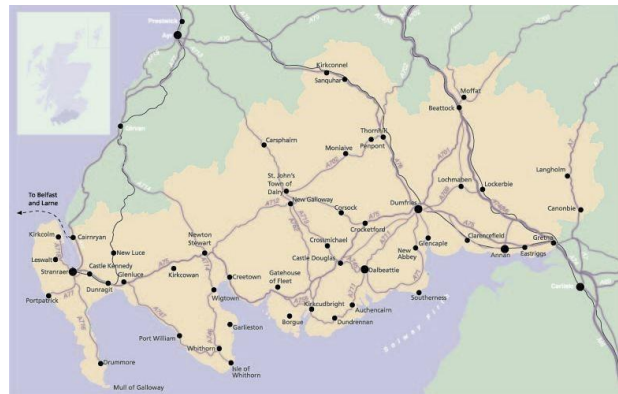
This report is produced to satisfy the requirement to prepare and publish a report in relation to the CSWO's role in professional leadership, oversight of practice, governance, values, and standards as described in national guidance. The report also relates to the specific areas of decision-making and practice where legislation confers functions directly on the CSWO.

My report refers to the contribution of Social Work and social care working in partnership with others in relation to the wider safety and wellbeing of Dumfries and Galloway residents.

## Profile of Dumfries and Galloway

### Demographics

We have a population of 148,290. Between 1998 and 2020, the population of Dumfries and Galloway decreased by 0.3%. Over the same period, Scotland's population rose by 7.7%. Our population is projected to decrease by 5.8% over the next 10 years.



58% of our population are aged between 16-64, which is around 6% less than the Scottish average. The average age is 46 years old. (UK average 40; Scotland 42).

Our demographic is changing. The population aged 65-84 is forecast to increase by 25% by 2037 while the number of children and working age adults is projected to fall. By 2039 it is projected that there will be a 10% decrease in the number of people aged 18 or under.

### Economy

Earnings in Dumfries and Galloway are lower than the national average. In 2021, full time workers received an average of £549.80 per week compared with £622 nationally.

The statistics on poverty in Dumfries and Galloway are stark. Around one in five Dumfries and Galloway residents live in poverty. On the tighter definition of income deprivation, 11.5% of the population are considered income deprived. Some areas within Dumfries and Galloway are amongst the 20% most deprived data zones in Scotland. These are mostly in and around the largest towns – our most deprived areas are Stranraer West and Northwest Dumfries.

The statistics on child poverty are of particular concern: 6,141 children (26.2%) across our region live in households below 60% median income before housing costs. This proportion has increased by 2.8% since 2015, the fifth highest increase amongst Scottish local authorities. 18% of children in the region are reliant on free school meals.

### 3. Governance and Accountability Arrangements

As CSWO, I have a key leadership role within the Council, the Health and Social Care Partnership and, as a member of the Senior Leadership Team of the Council reporting directly to the Chief Executive.

I represent Social Work within key strategic groups including the Children's Services Executive Group, the Children's Services Strategic and Planning Partnership, Corporate Parent Group, Promise Partnership, the Integration Joint Board, the Executive Team of the Health and Social Care Partnership, and a member of the Collaborative Care Home Support Team (CCHST), formally Care Home Oversight Group (CHOG). This allows me to contribute and oversee progress on developments across the Children's Services Partnership and professional oversight to all delegated Adult Services within the Health and Social Care Partnership.

I am a member of the Southwest of Scotland Strategic Oversight group for the Multi-Agency Public Protection Arrangements (MAPPA) which along with chairing of MAPPA Level three cases allows me to ensure that all aspects of Justice services delivery for our highest risk offenders are managed and monitored appropriately.

Public Protection continues to be at the forefront of all that we do to ensure those at risk of harm continue to be supported and protected. I maintain a key role in Public Protection as one of the Vice Chairs of the Public Protection Committee, Independent Advisor to Chief Officers Group: Public Protection, as a member of the Learning Review Case Review Group I work closely with the Independent Chair of our Public Protection Committee who I meet on a regular basis.

Throughout this reporting period, the partnership received four Learning Review Notifications, three from Health, one from Police Scotland. One of these proceeded to a full Learning Review which is being led by Education and will be concluded in 2023/24.

I continue to provide assurance on the quality of Social Work Services across three key committee structures – Full Council, Social Work Services Committee and the council's Area Committees. Adult Services are reported through the Integration Joint Board and the Council's Area Committee structure.

We regularly report to Social Work Committee and the Clinical and Care Governance Committee of the Integration Joint Board on the outcome of external scrutiny of regulated services within Children and Families and Adult Services.

The Social Work Services Strategic Planning Group includes my most senior managers from all areas of service. Our structure ensures that all members of this team are routinely in touch with day-to-day operational practice and able to provide assurance quickly on individual issues as they arise as well as playing their part in the strategic direction of the service. This team is responsible for the recruitment, development, and professional oversight of staff across their functional areas, and for communicating, modelling, and maintaining practice quality and standards across the service. The Strategic Planning Group meet on a weekly basis to provide enhanced leadership, continued presence within each service to support the additional demands on all areas of service.

The Social Work Services Tactical Managers group includes senior operational managers across the service responsible for the leadership and management of frontline staff, and therefore responsible for practice standards and the quality of services delivered. My leadership of this group maintains the key link between operational practice, local and national policy, and the strategic direction of my service.

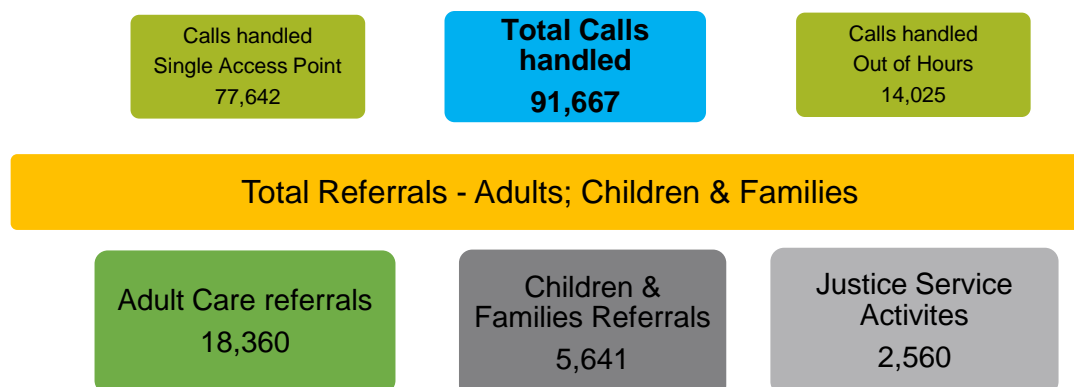
In this reporting period the Strategic Planning Group, has led a range of improvement and assurance activity, evaluation and associated performance reporting, and service initiatives including responding to the ongoing demands, expectations and risks associated with living in the modern world.

This has included:

- Secured funding for the Single Access Point Team from the Council and HSCP approval to continue in its current form.
- As a result of stakeholder engagement, we launched our West OOH Standby Service on 31<sup>st</sup> March 2023. Initially, this will bring together Social Work colleagues in the West of the region responding to emergency situations over the weekends, offer timely support and allow us to pull on resources where necessary to keep vulnerable children and adults safe.
- Development of MOSAIC our management information system, which has increased efficiency and business intelligence to achieve more positive outcomes for service users.
- Overwhelming progress delivering on Our Promise including a significant decrease in the number of children on the child protection register and a decrease on the number of children subject to Compulsory Supervision Orders. Since inception of relationship and strength-based approaches to child and family intervention in 2019, our data shows a peak of 129 children on the child protection register to 27 at the end of this reporting period and 427 children on compulsory supervision to 302, a decrease of 227 children requiring higher cost social work support.
- Securing funding to support the Delivery on Our Promise including the introduction of Virtual Reality Training, training for our staff and carers to build resilience in response to the increasing impact on mental health, trauma and neglect.
- Family Support Team have supported 271 families, with 420 children, equating to cost avoidance of up to £16,800,000 per annum. It should be noted that the issues and needs identified for these children indicates that almost all could enter the care system at some time in their lives if they do not receive effective early intervention.
- Introduction of child protection investigation template to strengthen the quality of our risk assessments for our children and young people, with outcome of audit activity 14 out of 15 rated good and above; and 1 rated adequate.
- Dumfries and Galloway opened their homes and their hearts to those seeking safety and in July 2022, in response to the ever-growing number of Ukraine displaced persons arriving in our region, the Social Work Ukrainian Support Team was developed. Currently there are over 500 Ukrainians living in Dumfries & Galloway within Welcome Hubs and supported by Host/Sponsors. (200 registered Hosts/Sponsors at present).
- Increase uptake on Options 1 and 2 under The Social Care (Self-Directed Support) (Scotland) Act 2013 providing people with more choice and control.
- 24 out of 31 care homes in Dumfries and Galloway have received a Medical eCommerce Gateway Audit and 2 SICP (Standard Infection Control Precautions) Audits. Feedback from care homes has been positive, with many homes adding actions from the audits to their Service Development plans and requesting repeat audits. This work supports assurances around the ICP Standards for Health and Adult Social Care Settings.
- Collaborative work with Health Protection Team (HPT) has involved development of an Outbreak Flow Chart as well as Risk Assessment Meetings to facilitate safe transfer of residents to Care Homes in Outbreak status, where appropriate.
- Proactive engagement and positive feedback from all care homes via range of methods such as, monthly managers meetings, care home visits and short life working groups, with resultant adaptations made to processes and documentation for continuous development and improvement.
- One important area of work we are currently progressing is our engagement and participation with our children, young people, families, adults and service users, invaluable for supporting the development of our strategies and plans including health and wellbeing surveys, #We Care Event and in partnership with The Children and Young People's Centre for Justice engaging and participation activity with children and young people who come into conflict with the law.
- Our recently appointed Deaf BSL Social Work Assistant has been busy facilitating Deaf BSL "clinics" for the Deaf BSL community across the region providing support, information, and guidance on a variety of issues including on access to information, cost of living, employment issues, education, and social care. The clinics are ongoing and proving to be a vital network of support for our Deaf BSL Community.

#### 4. Service Quality and Performance

This has been a busy year given the different level of demands on the service with the level of contact increased as evidenced through the number of calls handled by both Out of Hours (OOH) and the Single Access Point (SAP) Teams.



##### Single Access Point

The current governance arrangements for the Single Access Point team (SAP) were established when the Local Authority developed its support response for people shielding and requiring assistance during the Covid-19 pandemic. This led to the development of a new model for access to a range of services for vulnerable people designed to provide a streamlined single “front door” contact for members of the public, and care professionals. The SAP team has been operating since 2021, and in March 2023 received Council and HSCP approval to continue in its current form.

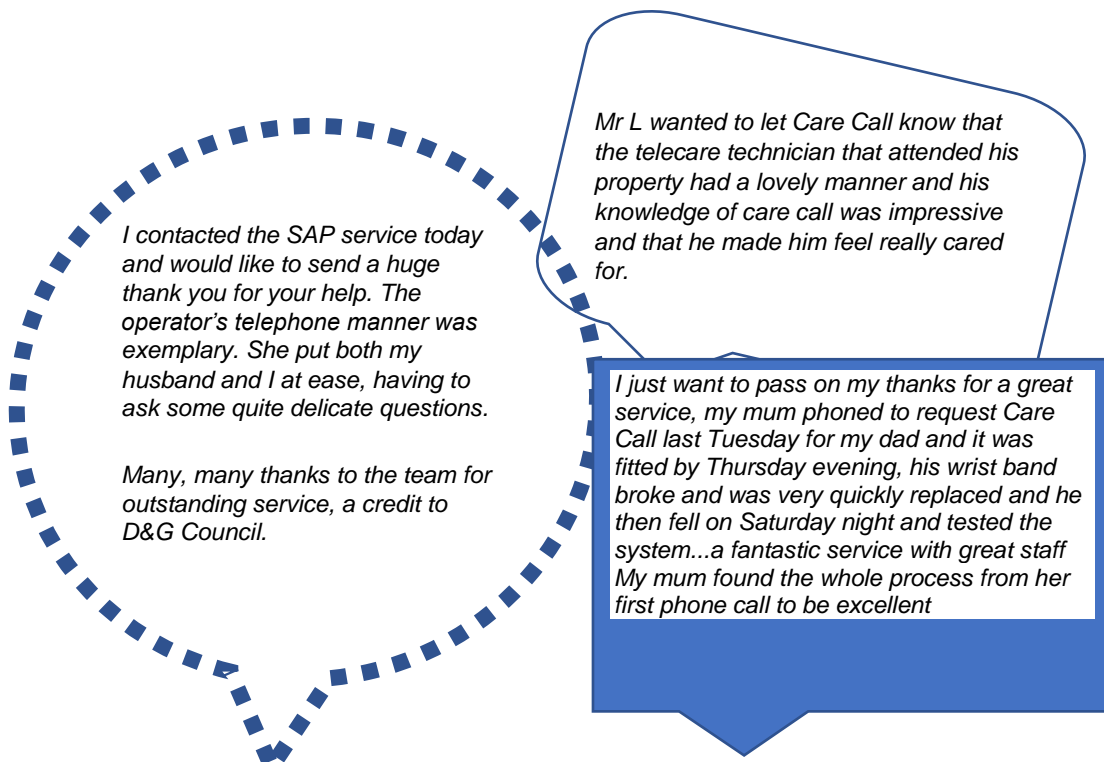
The single ‘front door’ creates a consistent process of triage and directs service users towards short, medium and long-term support. Since its establishment referrals to the SAP have steadily increased, for this reporting period 77,642 calls were handled, which shows an increase of 11% from previous reporting period.

Since its inception the scope of SAP activity has developed to incorporate a range of new tasks and referrals, including the processing of Adult and Child Disability Payments, Hot Meal Provision and ‘Blue Badge’ applications together with single health services such as Physiotherapy, Rehabilitation Occupational Therapy, speech and language and Podiatry. Sensory Support and the Care Call telecare service for the Region has now been aligned with this service, to ensure a more streamlined, easily accessible service.

Providing a 24 hour a day, 365 day a year service helping to maintain the independence and health of our residents in their own homes. These services often prevent or delay admissions to hospital or care homes as well as supporting people on discharge from hospital. We have more than 3,700 clients using a variety of alarms and assistive technology, such as Fall Detectors, bed alarms and door sensors. Most of our clients are elderly, however we also offer services across a spectrum of disorders which includes children. Additionally, Care Call operates the Local Authority Lone Worker Scheme providing monitoring of staff who work alone in the community.

The community alarm services operate across the existing telephone network. In 2016 it was announced that the telecommunications industry would replace all analogue lines and upgrade to digital internet-based infrastructure by 2025. By then, all analogue telephone services will be switched off. Without appropriate change, our most vulnerable members within the region could be left without telecare services. In response to this risk, to achieve digital readiness, we are developing an online portal, with implementation date November 2023 – funding for this project has already been secured.

Feedback from our service users:

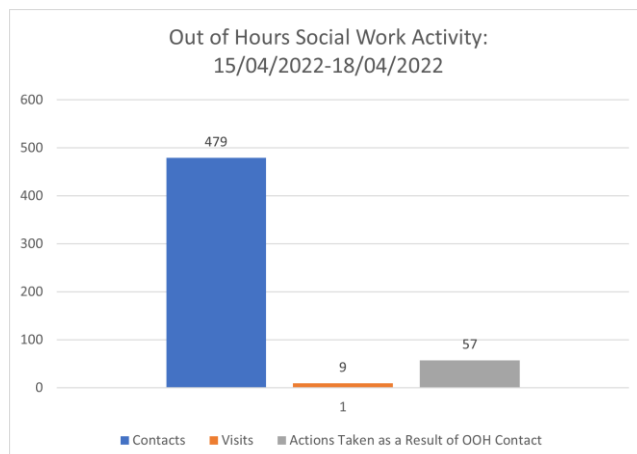


### Social Work Out of Hours Service

Our Out of Hours (OOH) service has its roots firmly placed in all social work statutory functions and legislation across child protection, adult protection, mental health services, and the Council's Homeless duties with the service operating 365 days a year. With 14,025 calls over this reporting period, reflecting an increase from last year.

This year we undertook a review of the service which highlighted the challenges of responding to increasing demand with complex crisis situations. Budget was sourced for the creation of a team manager post to provide an overview of the service and progress future development. This will ensure we meet the challenges to keep our most vulnerable people safe from harm.

The review also provided us with business intelligence to allow us to identify trends and patterns, together with identifying busy periods and ensuring direct coverage of service is sufficient to meet demand over the Easter period.



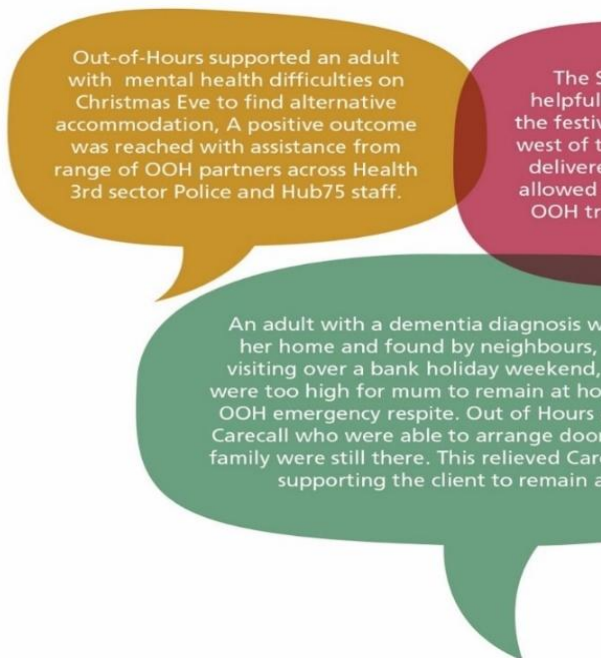


Out of Hours works in partnership with a range of public protection organisations across Dumfries and Galloway including Police, NHS, Scottish Ambulance Service, Council's Resilience Team, Scottish Fire and Rescue service and Third sector. Our work covers several service areas including mental health, drug and alcohol, adults with complex needs, justice services, and children and families. The team has a wealth of experience and practice wisdom across the legislative and operational imperatives to ensure the service runs as successfully and efficiently as possible.

OOH respond to requests from police for appropriate adult, this allows us to support a person's equity of access to the justice system and uphold their human rights. Our appropriate adults are professionally trained to support individuals to understand sufficiently what is happening and communicate effectively in a police investigation, whether they are a victim, a witness, or accused of a crime.

Our service continues to issue food parcels in collaboration with APEX and signposts to other food bank organisations, this allows us to provide and facilitate emergency food parcels to individuals in need across Dumfries and Galloway. Food parcel requests has increased exponentially with the cost-of-living crisis and demand for basic food.

## Collaborative working su



In March 2023, the first edition of the OOH Newsletter was distributed showcasing the work we do, how to contact us, what issues we deal with and who is part of the team. This is one of the ways we are improving the awareness of OOH across our Region.

Our work includes:

- Assessment / welfare responses in relation to vulnerable adults, children and young people including Child and Adult Protection.
- Signposting to other services
- Appropriate Adult / Responsible Adult
- Missing looked after children and young people/adults and placement breakdowns.
- Child Protection Orders
- Support to Carers informal and formal
- Age Assessment of Unaccompanied Asylum-Seeking Children
- Coordination of Mental Health Officer assessments
- Hospital restarts / care package variations
- Emergency admission to Care Home
- Homelessness / emergency accommodation
- Financial advice/ food parcels (confirmed agency to deliver Apex Food Parcels)
- Attendance at Adult / Child Protection Meetings
- Support calls including regular callers.



As outlined above, OOH is the front door response to initial contacts from individuals in relation to concerns about children, young people, and adults. We gather information and follow the pathways and links to other services and / or the team provide an immediate response. The service is supported by effective business systems to ensure the team can focus on their work and minimise duplication. Crucially the service provides a professional response to issues which cannot wait until the next working day by using the least restrictive solution to alleviate immediate risk.

In October 2022 we carried out a stakeholder survey with improvements made from responses as a result “you said we did!”

### Standby Service “*you said we did.*”

From a Police perspective, the stakeholder survey emphasised the limited resources available in the West of the region to respond to crisis timeously.



As a result, the West OOH Standby Service launched on 31<sup>st</sup> March 2023. Initially, this will bring together Social Work colleagues in the West of the region responding to emergency situations over the weekends. This will offer timely support and allow us to pull on resources where necessary to keep vulnerable children and adults safe.

Further feedback from responders contacting OOH describes how the OOH service has provided better communication and responses to complex queries.

## OOH Survey October 2022

The feedback from my carers is that OOH has really improved having it local, with people who know the area and the children and their families makes everything so much easier. On occasions when I have contacted OOH on behalf of my carers I have found it easy to access and staff have rung me back to let me know what's happening.

I work in adult services but made contact as I am a new kinship carer of a looked after child therefore this was more a personal call. I can't remember the name of the person I spoke to but they were fantastic. They were knowledgeable, empathetic, reassuring, reasonable. Whoever you were, thank you so much. You really helped me/us/our situation. Having an OOH service available gives me confidence to continue to deal with the complex situation we find ourselves in.

As set out in my introduction, the existing pressures nationally and locally are impacting on our services, this service is no exception, together with the service expanding including limited resources of foster carers available in emergency situations and the limited demand for accommodation for our homeless service users, staff continue to respond to a wide range of challenging circumstances.

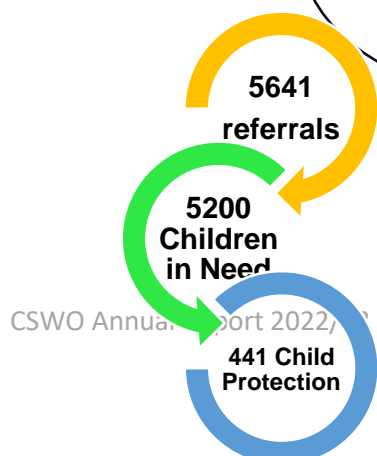
In 2022 we held an open day which proved extremely successful, a similar event is planned for June 2023 and will seek to raise awareness of OOH partners, and offer further networking opportunities, due to the positive feedback received, this will now be a yearly event.

Out of hours provides support to our colleagues in other OOH services such as our Mental Health Officers (MHO). MHO's respond to mental health crisis across the region at any time of the day or night. Recently a colleague in mental health took the time to provide thanks on a particularly complex situation and is one example of a positive collaboration between services.

Following a call out 'This was very reassuring for me. As you will be aware out of hours in the community is a very isolated and at times (like Sunday night) a dangerous place to be on your own. Our joint decision making and your views regarding the service user made the outcome safe and the right think to do.

Big thank you for being there.

[Children and Families Services](#)



During 2022/23 there were 5,641 referrals to Children and Families, reflecting another busy year in which we dealt with some very complex and challenging areas of work. 92% of our referrals were for children to be considered in need with 8% related to children in need of protection, reflecting the impact of our transformation journey through the holistic whole family support agenda.

Like previous years, we experienced significant changes in the workforce across Children and Families Social Work Services with staff moving on, retiring and long-term absences. Considering this I have been working in partnership with our People and Transformation colleagues and our Health and Social Care Partners, delivering on our refreshed workforce plan for our overall service.

This plan sets out a three-year framework for our service, aiming to maximise the capacity, skills, and competency of our workforce, with the intention of increasing the resilience of our service and providing development and career opportunities for our staff across all service areas.

In 2022/23 the number of children referred into the Children's Multi-Agency Safeguarding Hub (MASH) has decreased by 15% compared to the previous year. A total of 934 children were referred into Child MASH with 426 children discussed at Interagency Referral Discussion (IRD). We conducted 226 Child Protection Investigations resulting in 99 Child Protection Planning Meetings; an increase of 14% compared to that of 2021/22. The current year saw no children re-registered within a two year period.

As of 31<sup>st</sup> March 2023 there were 27 children on the Child Protection Register with the most prevalent risk factors being emotional abuse, physical abuse and domestic abuse. A reduction in 48% which again reflects the work of our Holistic Whole Family Support focusing on primarily to provide early support to help families at the earliest opportunities in building community support that enable lasting change and prevent children entering statutory social work. This, together with building relationships with families and helping them intensively in providing the best care to their children that they can. This will help prevent children needing to be cared for by people other than their parents or carers or to be able to return home to their family safely from a placement within kinship or foster carers; and to realise a child's rights, supporting their family, whether it's one they are born into or not, providing the support to families when they need it.

Throughout this reporting period, our Family Support Team have supported 271 families, with 420 children. None of these are currently in the statutory social work system, equating to cost avoidance of up to £16,800,000 per annum. It should be noted that the issues and needs identified for these children indicates that almost all could enter the care system at some time in their lives if they do not receive effective early intervention. It should be noted that not all will be diverted from the system.



# OFFICIAL

**07:00** Phone call to Mum to check in that she is up and prepared for getting Child X (aged 6) to school. No Answer. I try a further 3 times and Mum eventually calls me back at **08:05...**

**Mum** finally calls me back at 08:05, she is in a panic and has slept in. Mum has a 2 year old, Child Y, with development delay and undiagnosed disabilities. It is important that she has breakfast as she is under weight. Child Y's food needs to be blended as she cannot swallow solid food. Mum has no one to help her with the children, she has moved to the area with no family or friends close to her...

I decide to travel the 30 min Journey to help Mum to get Child X to school. Its freezing and I hadn't allowed time to defrost the car! I'm running 10 mins late...

I arrive at the family home at 08:45, Child X has decided he doesn't want to go to school, he has removed his school uniform and curled in a ball on the sofa, he won't move or talk to Mum and I. Mum phoned school and advised them that she is struggling and will have Child X in school as soon as she can...

I return to my car still wet I might dry out by the time I get to my next visit...

I walk with X so that Mum can feed Child Y. It's started to rain/sleet, I get soaked. X takes off on the Spiderman bike, I run after him, now soaked and out of breath!! We get to school, and X is happy to go in...

**Mum** lifts Child X off the sofa he has become extremely distressed and is now hitting, punching, kicking, and biting Mum. He has burst Mum's lip. I advise Mum to give X time, we will stop talking to him to let him calm.

After a while X became curious about my conversation with mum, about what good things are happening in school today. X decided he would go to school as long as he could take his Spiderman bike...

I travel a further 30 mins to meet with a new family that have been referred to Family Support. I plan to introduce myself and discuss what support I am able to offer. I hope to work with the family and help them to identify what is going well and to build on this. We can plan to talk about what we are all worried about and how we can plan to make things better. We can also look at who the family have around them, and who can step in to support the family when I'm not around...

**Mum**, was slightly reluctant at first, she is embarrassed about the family home. She lives with her son and shares a room with her disabled Mum. The family live in a two-bedroom house which is cluttered and untidy. I chat to Mum for a while and she starts to warm to me. She talks about her poor mental and physical health and the effect this has on her son, this makes her feel shame. She thinks family support might be good for the family after all. I leave feeling good about the planned work, and look forward to start building a relationship with the family. Mum is a chain smoker and as I get in the car I realise my clothes (still slightly damp) and hair smell of cigarette smoke. I am conscious about this on my next visit...

**When** I get to the office, I get a phone call from my first visit this morning. Mum is crying and in real distress.

After Child X went to school, the father had come to the home to spend time with Child Y. They have an on off relationship. Today they had argued, and this had resulted in Mum running out of her front door with Child Y in her arms, she slipped as the floor was wet and fell, she thinks Child Y may have banged her head but can't be sure.

Child Y's dad has phoned the police. The police have phoned an ambulance which will take Child and Mum to A&E. Mum has asked me to meet her there for support. I agree to meet them there...

**On** my next visit I check in on a family that are struggling to treat their 4-year-old daughter's head lice. After discussion with her nursery, it is agreed that I will visit the family and demonstrate how to treat her hair.

Child A wants to climb on my knee and leans in close to my own hair to show me her new doll. I think to myself I might need to treat my own hair when I get home. Mum and I successfully treat her hair and Mum is confident to continue with the rest of the treatment.

The family also have a problem with their cat. There had been urine and faeces all over the hall carpet, which the family have now cleaned, and the smell is burning the back of my throat. Dad lifts the carpet and it is left outside, I agree to collect it with a van next week and take it to the local recycling centre.

Still slightly damp smelling of smoke and now cat urine, I travel back to the office in Irish St. I need to record my visits. I look forward to catching up with my colleagues and getting some peer support...

**Child Y's** dad turns up at the A&E waiting room, a member of staff advised me that they were unable to stop him from entering the waiting room and ask me to speak to him.

I speak to Dad; he is calm but upset. I ask that given the physical nature of the argument today, it would be better that he leaves to avoid further upset, I will keep him informed on how Child Y is doing.

Mum is not confident about talking to health staff and asks me to go with her when Child Y is examined. She is checked over by the paediatrician, he is happy that she has no injury...

**Child X** needs to be collected from school and Mum and I are still an hour from his school. School calls me to say that Mum is late, again, to collect Child X. I explain what has happened but school have no facility or staff to stay to look after him. After many phone calls a neighbour agrees to collect Child X from school...

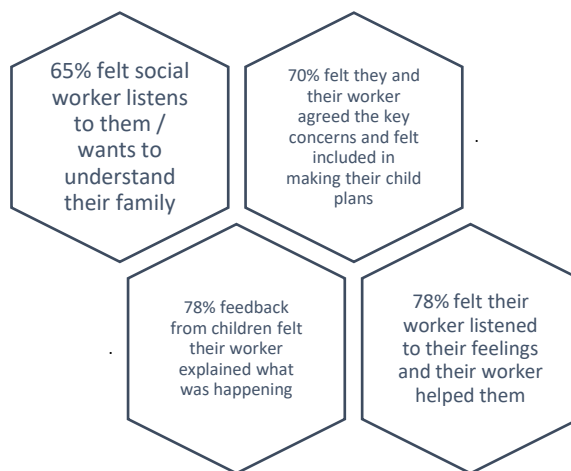
**After** a few hours at the hospital, I return Mum and Child Y home. I help the family settle and make sure that Child X is prepared for school the next day. He has a clean uniform and his school bag is packed. He asks me if his Spiderman bike is ready...

**18:30** I'm home, clothes in the washing machine and I think about dinner, but first a head lice treatment...

Dumfries and Galloway were once again learning partners in the development of the revised National Child Protection Minimum Dataset in Spring 2022, with the Revised Dataset launched in June 2022. We were asked by CELCIS to contribute to a National Masterclass Webinar along with Dundee Council in September 2022, which focused on how we use the data, what this tells us, how we structure the report and how these impact on improvement. All 32 local authorities were invited to access the session which was widely welcomed as an excellent learning opportunity for everyone involved.

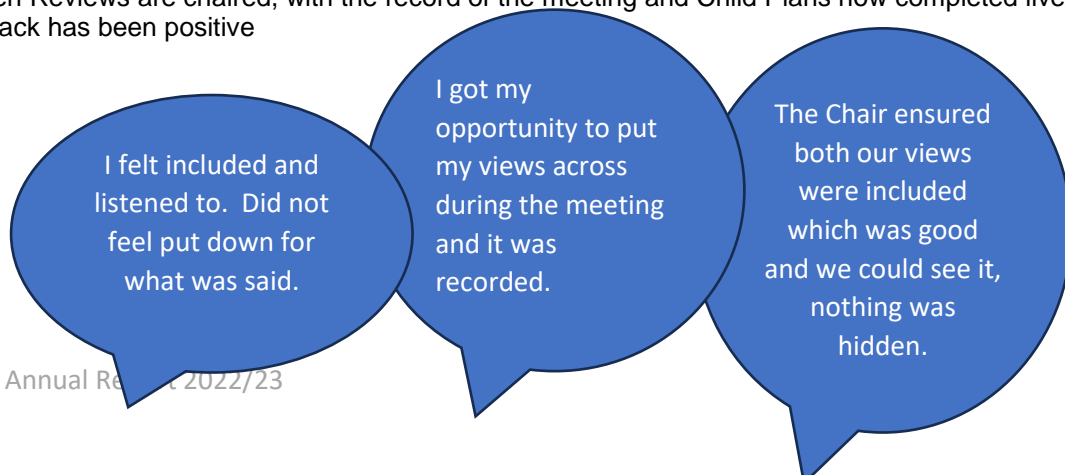
Local scrutiny of our National CP Minimum Dataset identified improvement in our referral pathways to the Children's Reporter. In April 2022 work was undertaken between Police and Children's Reporter to reduce the number of non-offence ground referrals to ensure they were appropriate. Guidance was issued to Police staff and overseen by Police Public Protection Unit Sergeants. This led to a reduction in non-offence ground referrals received by the Children's Reporter with referral figures more stable and in line with national average. Ongoing monthly quality assurance by Police and SCRA is undertaken to ensure referral rates are monitored and any issues highlighted at the earliest opportunity.

As part of our work to implement a Relationship Based approach (Signs of Safety) in Dumfries and Galloway, we have undertaken a total of three audits to inform progress. The most recent audit in 2022 has provided evidence we have worked hard to build relationships with families and to develop plans that keep children safe. We are now confident using tools to work with children and writing child friendly version of plans and can evidence that multi-agency practice has improved. Of 23 parents who feedback on their experiences-



In May 2022, Social Work staff piloted a new Child Protection Investigation (CPI) process which means the CPI is completed timeously and a decision made on relevant information, followed by longer time for initial work with the family. Initial feedback from families, CP Planning Meeting Chair and professionals has been positive and supported decision making at CP Planning meetings. Quarterly Social Work CPI Audits continue to see good or above in the overall quality of practice and decision making at CPI stage which provides assurance to Social Work Managers and PPC.

We have made changes in practice for how Child Protection Planning Meetings and Looked After Children Reviews are chaired, with the record of the meeting and Child Plans now completed live. Feedback has been positive



In Spring 2022, the Pre-Birth Steering Group undertook an audit of Pre-Birth records following the changes made to Pre-Birth Processes in February 2021. The purpose of this was to provide reassurance that the changes to processes were meeting the desired aim of improving practice.

Overall, the self-evaluation concluded that there has been no adverse impact of implementing the new process which was ultimately about improving family's experiences by aligning pre-birth processes with other referral, assessment, planning and child protection processes. There was evidence of real strengths in the involvement of families and our use of language in assessments, the ability of practitioners to assess impact in relation to unborn children and the use of the Signs of Safety assessment and planning framework and tools.

The Pre-Birth Steering Group communicated these findings to frontline staff and developed an improvement plan with links to other improvement activity and planning which they will continue to oversee. The revised Pre-Birth Guidance which includes learning from this self-evaluation was published in Spring 2023.

Our Youth Justice Team continues to be recognised nationally and presented at the June 2022 National Youth Justice Conference on the progress of the Age of Criminal Responsibility (Scotland) Act 2019. Our project, supported through our successful bid to the Promise Partnership – A Good Childhood for investment securing over £99,000 in partnership with Children's and Young People's Centre for Justice to progress the delivery of an ambitious participation and youth justice strategy in Dumfries and Galloway whilst supporting our group of care experienced children and young people, and to embed participation across the youth justice sector.

The National Pandemic and the recovery period of 2022 did evidence that court process decisions have continued to be reached for some children to secure their permanence route and for others there has been a slight delay. While this is not surprising, we are hopeful that we will be able to meet the demands of the children requiring their permanence routes to be secured as quickly as possible and already in 2023, we have seen an increasing number of plans being progressed for children to secure their legal status. I would like to say a huge thank you to our legal advisor Kirsteen MacIntyre who provided legal advice to our panels for many years before leaving the Council in 2022.

#### Case Study

Recently the permanence panel has recommended to approve the match between Child X and his Quarriers carers for either permanence or adoption. Child X has significant and complex needs and requires 24/7 care and frequent hospital admissions, his carers have been commended by both the permanence panel and the SCRA panel on their care for Child X and the inclusion of his birth mother. Carers are intuitive to his needs and can meet these. He is settled within his home, there is structure in his day, and this can vary depending on his health, hospital appointments, and his sleep patterns. Carers ensure that he receives timely medical treatment whilst in their care when he has become unwell. This has included attending multiple hospital appointments and overnight stays over the past year. Carers are skilled and competent, nonetheless they recognise they will need support to care for Child X in the long term to ensure they do not burnout. The children with disabilities team and Quarriers have agreed and identified short break carers to support the carers.

There has been good multi-agency collaboration to ensure all health needs are met and that not only his carers are fully supported but his birth mum too. The children with disabilities team supports his mum to spend time with Child X each month, both thoroughly enjoy their time together and there are lots of belly laughs from them both. Mum is also invited to parents' evenings and all meetings relating to Child X which helps her to be included in his life. The carers also send pictures to mum which is highly appreciated by her carers are keen to reassure Mum at every juncture, as they know she is an important person to Child X, and they are keen to have her in his life. The carers have made a conscious effort to remember special occasions such as mum's birthday and Mother's Day and provide presents, cards and photos which means a lot to mum. Mum describes carers as "his other mums" and is very appreciative of the care he is provided by his carers and the team around him.

Referrals to Children and Families Social Work has increased year on year since 2020, which places an unprecedented demand on Children and Families Social Work teams when supporting children and young people living within their communities. There is a national shortage of foster carers across Scotland – the Fostering Network (A national organisation which offers support to foster carers) recently indicated that there was a national shortfall of approximately 800 foster carers across Scotland. With the introduction of the fostering fee as of 1 April 2022 Dumfries and Galloway Council has begun to seek a positive increase in the numbers coming forward but progress is not immediate due to the recruitment, assessment and approval timescale which takes approximately 4-6 months. Nevertheless, the initial response has been very positive, and numbers are increasing. Due to the continued increasing demand for fostering placements we continue to support 21 children living with external fostering providers. Of the 21 there are 5 siblings' groups (13 children) who can live together.

Over this period, we have increased fostering households from 46 to 54 caring for 83 young people. The Fostering Service continues to be pro-active in recruitment activities to attract new fostering households to join the service and the short to medium term plan will see the number of fostering households increase. Holding 2 preapproval sessions for new foster carers and as a result we have recruited and assessed 13 new foster carers (6 couples + 1 single household) which equates to 7 new fostering households who have now been approved since the fee was implemented on 1 April 2022. In 2022 the service had 7 Fostering households who were deregistered at the Fostering Panel. Feedback from our foster carers tells us that those who were deregistered did so because of one or more of the following:

- Foster Carers wishing to retire.
- Wishing to spend more time with their grandchildren.
- To seek employment or take up an employment opportunity.
- Moving house.
- 2 foster carer households were de-registered as standards were not being met.

There is no doubt the national pandemic has allowed carers the time to reflect and reconsider their life plans moving forward. Our deregistration figures are not surprising in line with our aging profile of foster carers and within the next few years it is envisaged we shall continue to see a small but constant number of foster carers who wish to deregister due to the long-term commitment they have shown to fostering over the years. On a positive note, the introduction of the fostering fee has enhanced the service and encouraged new foster carer households to come on board. It has encouraged other foster carer households to stay and continue to support us caring for our most vulnerable children. Feedback from foster carers has been overwhelming and positively received. The financial support now provided by Dumfries and Galloway Council in terms of the fee, boarding out allowance and mileage does allow them to feel financially supported in their fostering role which makes a significant difference in their day to day lives. Foster carers have told us that this helps them to feel valued and respected caring for children.

Fostering panel activity -

Reasons for Fostering Panel Presentation	No. of Presentations
Foster carer 1 year's review	2
Foster carer 2 year's review	13
Foster carer 3 year's review	6
Update to panel and change of registration	5
New approved fostering households (6 couples one single household in total 13 foster carers)	7
Decision deferred	0
De registration	7
Reconsideration requests	0
<b>Total Presentations</b>	<b>40</b>



For the first time in 2022 we invited foster carers to attend their own Fostering Panel to hear and contribute when Panel members considered the findings of their Foster Carer Reviews. This has proven to be very successful and foster carers tell us that they have found this informative, helpful and allowed them to share directly with panel members their views. This has also allowed panel members to hear directly from foster carers what is working well, what could be better, and it is lovely to hear the positive experiences provided by foster carers for those children and young people they care for. We have also introduced additional training for our carers through virtual reality training, first aid mental health training, safetalk and mindfulness.

There have been 9 Permanence Panels over this period. The Permanence Panel has been very busy this year with an increased number of children's permanence plans being presented to panel. There were 37 presentations to the Permanence Panel and 10 children were both presented and matched with carers. We continue to invite birth parents to attend the Permanence Panel and welcomed 8 birth mothers, 4 birth fathers and 1 grandfather. Feedback from panel members is that the quality of reports is to a high standard both for children being presented, matched and approved as permanent and adoptive carers.

While my Services continue to assess and approve Supported Lodgings Providers and the Supported Lodgings Panels have remained consistent in the presentations and activities throughout this period, overall, these tend to be foster carers who wish to continue to care for the young people in their care post 18 years of age. Work has been progressing throughout this period to develop and promote a Continuing Care Service which will require registration with the Care Inspectorate. While this is being taken forward, we continue to operate our Supported Lodgings Service for those young people who require this.

There were 10 Kinship panels held with a total of 29 presentations to the Kinship Panel throughout this period with 13 new kinship care arrangements approved for a total of 14 children. (8 couples and 5 single carers). There were 12 Kinship Carers de-registered due to children returning to birth parents, death of a grandparent and others moving on to live independently. Kinship Panels throughout 2022 continued to exhibit the good will of friends and family to step in times of family crisis to care for those children most in need. There are occasions when these arrangements are challenging and require due scrutiny to ensure that safe caring arrangements which are in place are appropriate, sustainable and supportive for all who seek to offer kinship care homes. Nevertheless, due to the challenges facing front line social work it is likely there will continue to be a growth in the number of kinship care arrangements as we move into 2023 in line with all other Local Authorities across Scotland. Kinship Carers tell us that they do experience a number of challenges which includes:

- The need for increasing support as their young people becomes teenagers. They describe this as a difficult period and would welcome direct intervention to help support them and prevent future breakdowns.
- The cost of living has had an impact and some kinship families are struggling financially.
- They would like access to support post 18 years for those children who were subject to Residence/Kinship Care Order and are deemed care experienced not care leavers.

Panel Member Training has continued throughout 2022 together with the introduction of a Panel Member Handbook and panel member appraisals. We have tried very hard this year to increase the independence and diversity of all our panels. This has not been without its challenges, but we have enhanced the membership of our panels enabled new panel members a period of induction and observation of panels prior to joining our panels as a panel member. We continue to engage with Barnardo's to enable them to join our panels to represent the views of young people.

We continue to be remarkably busy at Hardthorn Road, our Children's Home, with our young people

#### Case Study from Young Person (YP)

YP arrived at Hardthorn Road to reside. YP is a very energetic young man and plays ice hockey for a local team. He expressed a desire to fill his days when he is not hockey training and looked for other hobbies. Our workers introduced YP to several different activities that he taken to and enjoys – he is now a regular golfer, has weekly lessons, is a member of a local club and has made social connections with the junior team at the club. He has taken up squash at the local club and taken up fishing.

Not only has YP increased his hobbies but also increased his social skills, fitness and overall confidence in the short time he has been residing at Hardthorn Road. With help and support from our staff, he has also been able to gain local employment.

continuing to achieve and prosper during the year.

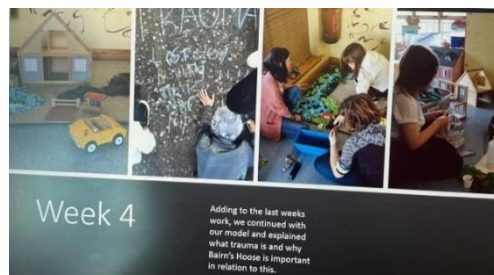
Our Commissioning Service has continued to be busy throughout 2022/23 supporting our existing range of contracts in place to support our most vulnerable young people, with services currently reaching over 1,800 individuals. The services provided across our Region include:

- Short breaks service for children with a learning or physical disability
- Early intervention and prevention including play sessions, food parcels, home cooked meals service, parenting programmes
- Cognitive behavioural therapy sessions
- Mental health advocacy workers in schools
- Outreach support and hospice care to children with life shortening conditions
- Befriending service
- Support and information to young carers and our young care leavers
- Animal Assisted Therapy
- Housing support for young people aged 16 to 25
- Support and counselling to young people affected by rape and sexual abuse

Our team has directly supported over 140 care leavers throughout this period. Again, some great success stories and many achievements over this period from graduating, securing employment, securing tenancy and much, much more.

Bairns' Hoose is a model that Scotland is testing to provide holistic support to children who have been victims or witnesses of abuse or are under the age of criminal responsibility whose behaviour may have caused harm. The model is based on the European "Barnahus" (child house) model.

The vision of a Bairns' Hoose is that: *All children will have access to trauma-informed, recovery, support and justice.* We were successful in a bid to be involved in helping develop the version for children and young people and worked closely with NHS Improvement Scotland and other organisations across Scotland. Our Family Hub75 team worked with local young people to come up with their ideal child friendly standards, with all young people receiving rewards and have national recognition as a group for their time and support. We have been successful in a further bid which we are currently progressing for the printed and digital versions of the Bairns Hoose Standards.



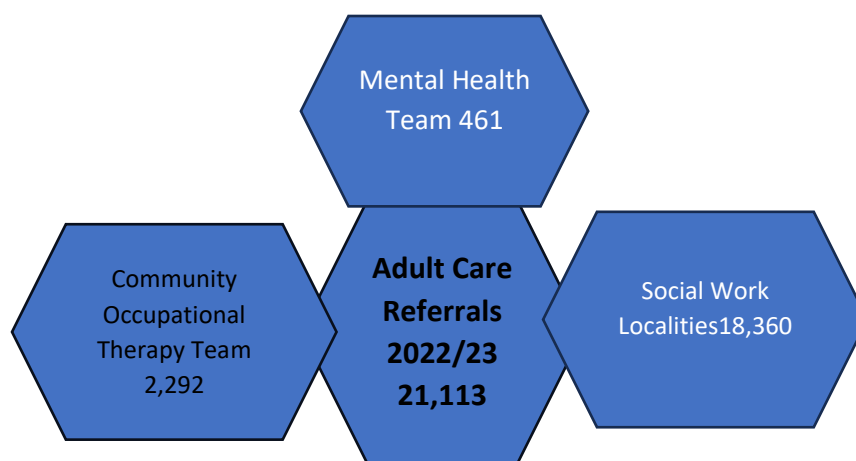
In light of Dumfries and Galloway's response to humanitarian need and providing a route to safety for thousands of displaced people from Ukraine, I have established a generic social work team to undertake a trauma informed approach to practice and work with parents and children who have experienced compounded trauma and war crimes.

In my role as Chair for the Corporate Parent Group, I had the privilege to support the #We Care Event, supporting over 100 care experienced children and young people, giving our young people an opportunity to engage and share their views with us, allowing me to use this information to shape my service.

### [Services for Adults](#)

Adult Care functions except for the Mental Health Statutory Work, Out of Hours Social Work delivery and part of the Single Access Point are delegated to the Integrated Joint Board for delivery through the Health and Social Care Partnership.

The level of demand being experienced across Adult Services has continued to increase year on year. There was a total of 21,113 referrals received during 2022/23 an increase of nearly 20% from the previous reporting period. This increase was in the level of referral to Social Work localities and the Mental Health Team which increased by 21% and 10% respectively compared to previous year, with a slight reduction in the level of referrals for the Occupational Therapy Team.



Adult Support and Protection concerns continue to be screened by our Single Access Point to determine the initial level of concern and the agreed onward route. In 2022/23, the number of adult protection referrals onward into Adult MASH has remained consistent with previous year, with 2,890 referrals screened. The level of demand and complexity in Adult Support and Protection however has increased with 1,338 Adult Support and Protection Duty to Inquires undertaken, an increase of 5% compared to the previous year. The most prevalent risk factors identified as part of the inquiry were psychological harm, neglect, and financial harm.

Following positive feedback from our Joint Inspection of Adult Support Protection and full implementation of the agreed improvement plan and activity, the service has within what is now core business, developments including –

- Updating of Single Agency ASP procedures
- Increase use of ASP Protection Plans
- Improved ASP conference time scales and increased use of core groups.

A total of 158 Adult Support and Protection Investigations were undertaken within the last year, and a total of 52 adults were discussed at Initial Case Conference in the last year compared to 30 in the previous year. This continues to demonstrate, as I detailed last year, a clear focus on resolution through robust inquiry and early intervention to find solutions which avoids the need to use the more formal parts of the process.

Previously, (2021), Iriss were commissioned by the Scottish Government to co-design a new quarterly ASP Minimum Dataset and invited application to APCs/PPCs. Dumfries and Galloway were successful alongside four other core learning partners to co-design an ASP Minimum Dataset prototype and test it over two quarters. The initial testing phase commenced from July 2022 with frequent learner partner sessions held to identify any challenges and improvements to the indicators and supporting guidance. Variations in reporting systems across learning partners and how we

capture data has proved challenging, however local and national sessions with partners to develop clear definitions is providing greater assurance we collect data consistently and accurately.

Scrutiny of our quarterly Adult Protection Performance Report highlighted low number of protection referral from Scottish Ambulance Services (SAS) to Social Work in Dumfries and Galloway. Social Work and Scottish Ambulance Services undertook quality assurance activity in January 2023 to understand and identify any missed referrals to support positive learning outcomes. Findings were presented to the Public Protection Performance, Quality and Improvement (PQI) Sub Committee in February 2023 and was identified as good piece of work which has led to improvement activity within SAS with the report being cascaded to staff and shared with the SAS Mental Health Team. It was agreed this exercise would form part of future self-evaluation and included in PQI Self Evaluation Calendar.

Our adult social work service has spent the past year planning and progressing restructure model of delivery. As part of this a Home Team Pilot was undertaken in the Stewartry. This is a multi-agency team of social work, health and third sector looking at new referrals and best possible outcomes for the person. Evidence is now showing increase in joint working across all agencies, together with the ASP Team working closely with colleagues in police and health and continuing the work undertaken by MASH and the Complex Care Team working closely with colleagues in mental health and our third sector providers.

In addition to the Home Team Pilot, to address current and ongoing pressures on the care at home sector we have introduced a team whose specific focus is working closely with providers and Care Homes to look at availability in these resources and to match this to people who are urgently needing this support.

The move to Options 1 and 2 under The Social Care (Self-Directed Support) (Scotland) Act 2013 provides people with more choice and control and has remained steady and at a fairly low level over the past few years. However, in 2021/22 we had a 22% increase of people who had chosen a Direct Payment under Option 1, and again, at 31 March 2023, we had a further 13% increase of people who had chosen a Direct Payment under Option 1 with a 26% increase on the number of people who chose Option 2 under the Act.

The Mental Health Statutory Team have again experienced an increase in demand of over 10% throughout this period, with a focus on enhancing links and communication with our service users, key partners in health services and locality Social Work teams, with the aim of providing a continuity of service to all stakeholders. A member of the team has recently qualified, with a further three members of the team applying for mental health officer studentship.

#### **Successful transition for a young person**

*M is a young man who is assessed at the severe end of The Autistic Spectrum, coupled with overwhelming OCD/anxiety. Initially he was assessed as requiring a 2:1 in a secure educational/residential establishment due to his level of anxiety and associated aggression. Through very successful joint working with The Children with Disabilities Team, Children with Families Team, our Health colleagues, Third Sector colleagues and his parents, he is now successfully transitioning into his own accommodation with the support of just 1 support worker. He is now a lot less anxious and loves having his "own home". The whole family have been supported throughout the process with positive outcomes for them all. The family had to live separately for a significant period due to his levels of anxiety, however the successful transition into his home, means his mother and other sibling can return to the family home.*



Health and Social Care Partnership (HSCP) were assigned new accountabilities by Scottish Government (SG) in respect of enhanced professional, clinical and care oversight arrangements for care homes from 18/05/20. In response, the Collaborative Care Home Support Team (CCHST), formerly Care Home Oversight Group (CHOG), was established and comprises of a number of stakeholders including Chief Officer for the Health and Social Care Partnership, Chief Social Work Officer, Medical Director, Director of Nursing, Director of Public Health and; Head of Strategic Planning and Commissioning. In March 2023, SG confirmed that funding for CCHST arrangements would remain.

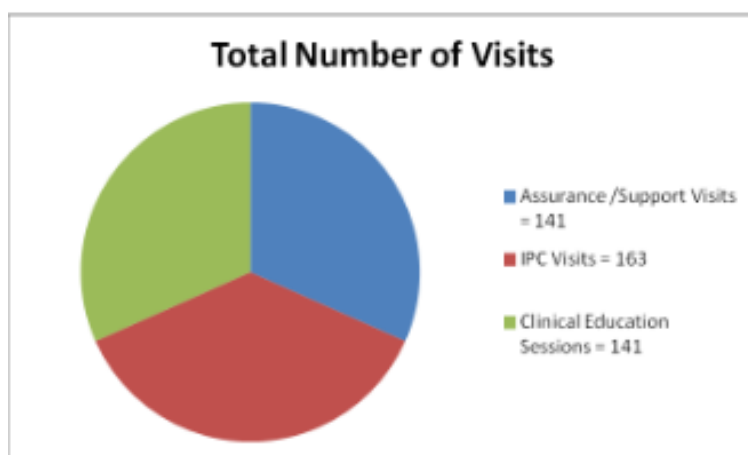
Of note, within Dumfries & Galloway, there are 31 services registered as care homes. The majority of these are older people care homes, however 3 are specialist providers and 2 are respite facilities. All are privately owned organisation except from 1 respite facility which is local authority provision.

Interim Placements within Residential Homes has been introduced to try and support the discharge from hospital for patients waiting on support. This allows patients to be in an environment that offers them care and support while they wait on the resource being available that can support them to return home. One of the key challenges remains with the lack of resources for the provision of care at home, we are continuing to work closely with providers to look at how we can meet peoples outcomes. A new supported Housing complex opened in Dumfries for people with additional needs, this was completed in partnership with Lincluden and Turning Point Scotland. Work continues looking at developing extra care housing across the region. A Residential Home in Nithsdale sadly closed with the loss of 36 beds, this has been particularly challenging as it followed quickly on the closure of Singleton Home.

The Care at Home Tactical Team continues to implement key actions to strengthen the oversight and assurance of the local care home sector including:

- All Care Homes receive an annual Assurance and Monitoring Visit between April to March for each reporting period; this aligns with both assurance functions of the CHTT and Commissioning contract monitoring.
- Trialling joint completion of the RAG Tool with a few local care home managers for a collaborative and transparent approach, with plan to roll this out across the whole region.

There has been significant level of oversight assurance and support locally, with 445 face-to-face visits by CHTT across all care homes throughout this reporting period.



Various elements have proved challenging over this period including cost of living, care home recruitment and retention of staff, over supply/under supply of beds (with the HSCP currently conducting a review of its current community bed base including a review of care home provision, community hospital bed provision and housing with care and support).

There is a large waiting list for care home placements and via the new Community Waiting Time (CWT) Team and existing Commissioning Team, more detailed information is being gathered on the current use and availability of existing care home bed provision. The block purchasing of specific care home beds to be utilised as interim beds is an ongoing area of developmental work for the HSCP. The CWT Team in place reporting weekly to support real time local care home bed availability information to support relevant hospital discharges. Positive feedback received from care homes regarding this reducing workload as they are able to maintain more accurate waiting lists.

Throughout this period, as I mentioned previously, there has been one local care home closure following non-compliance with Improvement Notices via the Care Inspectorate. There has been a total of 6 improvement plans between period of April 2022 – March 2023, which are implemented as result of either weak or unsatisfactory Care Inspectorate gradings, following Large Scale Investigations (LSI) or concerning findings from Assurance and Monitoring Visits. The intensive support required during these has impacted heavily on CHTT workload and ability to undertake other proactive work to help support improvement in overall quality of care with care home providers.

CHTT and Commissioning have worked together to improve data triangulation via joint visits, a shared RAG Tool and combined intelligence log; this enhances holistic overview and reduces areas of overlap / duplication.

Locally implemented Improvement Plan process has supported development of leadership skills within several care homes and enhanced the quality of care for residents. Key to ensuring success, engagement has been required at all levels, including direct engagement with Service Owners. New Improvement and Support Plan template being trialled to further improve the support provision and ability to robustly track evidence.

Development of a Partial Lifting of Suspension of Placements process, linked to evidence gathered via Improvement Plans, to support phased care home admissions via appropriate risk assessment and ongoing monitoring via CHTT & HSCP supports pending ability and decision to fully lift suspension. This supports not only the care home in terms of acknowledged progress and their financial viability, but also has mutual benefits to the HSCP in terms of hospital bed blocking risks. Funding has been secured via Scottish Government TEC programme to support care homes locally to progress with digital care planning. All funding has been distributed to those who applied. It is hoped this will enhance timely data capture and care planning as well as reduce paperwork burdens allowing increased time for direct interactions with residents. Positive feedback has been captured by homes who are further in their implementation journey. In addition to this, work is being progressed to use these systems to effectively share information between the care home and HSCP; but I do acknowledge this is a complex and long-term piece of work.

Continuation of rolling programme of Assurance and Monitoring Visits, with additional support or visits undertaken as necessary, such as follow up visits, training and/or outbreak support. This proactive programme of assurance work considers Infection and Protection Control (IPC) measures, workforce issues, education / training, and wider care and support needs of residents, ensuring a timeous response to any escalating concerns.

Care and Support Services (CASS) has continued to focus on providing Care at Home services to rural and hard to access areas of Dumfries and Galloway with the service reviewing all practice resources used to capture individual outcomes as well as continuation of undertaking reviews and surveys with all service users and staff to help improve practice. From a delivery service the service has continued to see an incremental rise in the number of planned and delivered visits, consistent with the past few years.

Fantastic work continues at our in-house Learning Disability service comprising of 6 Activity and Resource Centres, 2 Housing Support Services with Care at Home and a Respite/Short breaks service for adults.

Our ARCs continue to provide both building and community-based day time support and are located in Annan, Dumfries, Kirkcubbin, Castle Douglas, Newton Stewart and Stranraer. Maximum daily numbers of people supported are set by The Care Inspectorate and varies across locations from thirty

to sixty service users per day. In addition, a complex needs weighting tool is used to help inform safe capacity levels. Some service users choose to attend with their PA's (personal assistants) and attendance patterns are arranged to suit individual need.

Both Housing Support/Care at Home services are in Castle Douglas: Castle Douglas Community Support Service (CDCSS) and Dunmuir Park. Castle Douglas Community Support Service offers community-based support to people in their own homes. This may vary from an hour a week to 24/7 care and support. The office base for the service is based within Garden Hill Primary Care Centre. Dunmuir Park is a purpose-built development of eight individual and one shared house, centred around an accessible quadrant together with a communal space/staff base. It is a modern, attractive and popular development. Also on this site are two adjoining respite/Short Breaks houses known as "The Rowans", which can accommodate up to three people in total in addition to a staff base. The service has successfully maintained effective supports for service users and families.

### Examples to illustrate the above:

**Annan ARC has had major refurbishments over a four-month period. This involved supporting service users through room and routine disruptions together with careful daily planning to avoid people becoming distressed by noise. Good communication with contractors, families and service users kept everyone up to date and provided opportunities for people to ask questions or raise concerns, for example through the "Let's Get Involved" Group.**

***"We have had to focus more on meeting the need of our service users with sensory issues as the noise level has been major factor" (Support Worker).***

**Dumfries ARC** has had a new changing places bathroom installed which is a fantastic resource and is used daily. The service also has a new reception and room changes have benefitted everyone.

**The Stranraer ARC team have been working closely with Health Facilitators, the Community Learning Disability Nurse, paramedics and families to promote access to healthcare and reduce health inequalities. Health Facilitators promote initiatives such as health passports, health checks, easy read documents and a health screening programme for people with learning disabilities.**

**Working closely with colleagues and the family through an Adult Support and Protection Case Conference, the team also supported a young man in need of critical blood tests to cope with this successfully supported by familiar staff and at the ARC. The Case Conference agreed that this approach is an important part of his Care Plan going forward.**

***"That's excellent, I didn't think it would happen, thank you all". (Parent)***

**Wellbeing - L has been supported for many years but has always refused the offer of a health passport, feeling that people would know her private business and talk about her. As surgery was planned, Castle Douglas Community Support Service provided and explained Easy Read versions of General Data Protection Regulation and planned surgery, created life story cards to illustrate benefit of health passport, and involved L in typing up her health passport and choosing what was important to her. L now describes having her health passport as *"Blooming Marvellous"*!**

The Dumfries ARC team have linked in with SHAX Homelessness Support Charity and have 8 individuals and staff volunteering with them four mornings per week. This has been a great success, all who attend really enjoy going and recently received certificates from SHAX recognising their volunteering contribution.



There were 486 referrals to Sensory Support 2022/23, in comparison to 192 for 2021/22, which was impacted by the pandemic given that a range of services throughout this period were reduced including Audiology, Ophthalmology and Low Vision services.

There has been an increase of 3% with 822 people on the local statutory Blind and Partially Sighted register all of whom have been assessed, supported, and provided equipment by the Rehabilitation Officers. Due to our ageing population, we forecast these figures to grow year on year.

I am delighted to have a Trainee Rehab Officer for the Visually Impaired and two new Social Work Assistants, one of whom is Deaf BSL within the sensory support team. Throughout this period developments include:

**Specialist Fire Alarms for Deaf People** - The Senior Social Worker has been working with local Housing, Telecare, local Handyvan Service and SFRS in relation to the Scottish Government Fire Alarm legislation. We are reaching out to those people who have previously had standalone Fire Alarms fitted by the Sensory Support / Telecare teams linked to Deaf Alarms to advise that, as regards to the Fire Alarm legislation and fire alarms systems requiring to be interlinked, we need to look at what is in place and what might need to be put in place as per legislation. This is proving to be a huge piece of work.

**Deaf Awareness Week** - The Senior Social Worker and Social Work Assistant compiled an article for Deaf Awareness Week, this was circulated to all Dumfries and Galloway Council staff. This enabled us to educate staff on deaf issues and introduce staff to the work of the sensory support team.

**Hidden Loss (Sensory Loss is often felt to be a hidden loss and not identified during the assessment process)** - We have written to Care Home Managers across our region asking that they contact us with regard to care home residents who are deaf / hard of hearing and plan to visit Care Homes to look at the extent of hearing loss within the care home and how this is managed. We will be checking individual care plans and asking that hearing loss / hearing aid management is added to care plans as a matter of priority if it has been missed. We are also exploring whether care home staff are trained in deaf awareness and hearing aid management and checking that all homes have the appropriate loop systems in place.



**A case example from our Rehabilitation Officer, Visual Impairment (ROVI) who has been a member of the Sensory Support Team for 10 years and a qualified ROVI since 1995.**

*I have been working with X, a 46-year-old male following a referral (a Certificate of Vision Impairment, CVI) to the Sensory Support Team from Ophthalmology in December 2021. X had been certified by an Ophthalmologist as Severely Sight Impaired (SSI).*

*Part of my remit as a ROVI is to Register people who are certified as Severely Sight Impaired or Sight Impaired. When I receive a CVI from Ophthalmology, good practice is to visit that person at home within 2-3 weeks to discuss the benefits of Registration and Rehabilitation.*

*X had previously refused Registration as had not wanted to accept his sight loss. He had been struggling emotionally and was not seeing anybody apart from his cousin. He had been turned down for PIP and when I first met him, he was very low in mood and staying inside most of the time, only going out and about if accompanied by his cousin. He also expressed that he was at risk in his community due to anti-social behaviour from neighbours. He has a history of anxiety and depression and the thought of appealing against the benefits decision was too overwhelming. "What's the point?" He was socially isolated, living in housing where he felt at risk from neighbours and his mental and physical health was suffering. He had no help apart from a cousin who lived a considerable distance from him and so could not offer consistent support.*

*X eventually agreed to be Registered as Severely Sight Impaired and agreed to a Rehabilitation plan.*

*I have helped him successfully appeal the decision not to award him PIP. We have been having regular Orientation and Mobility training sessions and I have taught him how to use a long cane, meaning he is going out independently and accessing his community. We are now moving onto bus and train travel to help him access opportunities and social connections further afield. He has moved to a new property; I helped with his housing application and viewed the property before he moved in to check that it was suitable. He has improved in confidence and is now looking at finding a job or doing some work-related training. We are continuing with Orientation and Mobility training, meaning that he can now get to places that he needed taking to before. He continues to see his cousin but relies on her far less and is more independent. His mood has improved considerably as has his wellbeing.*

*I am delighted with his progress and determination to succeed despite his sight loss. When you see a person in the community sweeping their cane in front of them or with a guide dog, consider this, it would have taken a lot of hard work on their part to get to this stage in conjunction with the support and assistance of a ROVI.*

*Sight loss is major predictor for depression and anxiety and people with sight loss are at high risk of falls. No one should have to face the trauma of sight loss alone, there are two ROVIs employed by Dumfries and Galloway Council. ROVIs can and do change lives for adults and children with sight loss.*

## **My staff really are superb.**

### Justice Social Work

Our local service planning was shaped by the national review and transformation of the Scottish Justice System with the modernisation of the Scottish Justice system placing a focus on creating

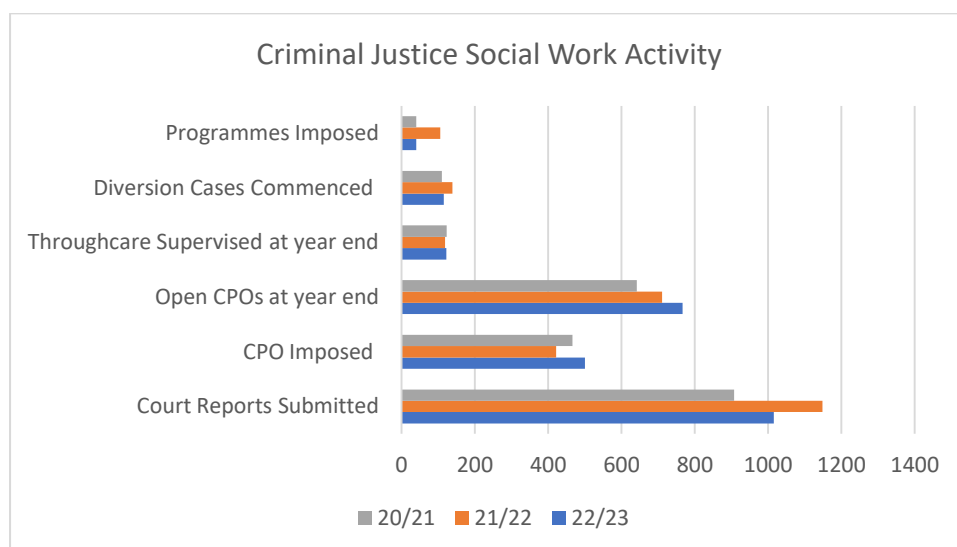
safer communities and shifting societal attitudes and circumstances which perpetuate crime and harm.

Justice Social Work's ability to sustain service delivery remains challenging and the capacity to transform remains limited, partly due to the temporary short-term nature of funding. The focus during this reporting period has been two-fold - sustaining service delivery whilst simultaneously engaging in transformation strategies and activities, together with delivering on our strategic plan. To address these challenges, we have spent time developing the JSW management team and we have continued to embed our quality improvement and performance framework. The main focus has been to ensure staff have the skills in performance management, service design and continuous improvement, and the ability to review the services they provide to service users. Using these skills, they are better able to suggest more streamlined and succinct methods to deliver the Strategic objectives. By empowering our workforce, we will help to encourage an important shift towards a culture of innovation and change.

We have ensured staff have the information and skills to carry out their role in monitoring and reviewing performance. This has been achieved through having clear plans which set out our strategic priorities, well presented reports in an easy-to-understand format.

Similar to all services across Social Work, staffing has been a particular challenge during 2022/23, our current staff demonstrating astonishing resilience, dealing with the constant change and uncertainty inherent to working through unprecedented times. Justice Social Work has experienced a higher than previous rate of staff turnover, resulting in a significant drop in the experience of our Social Workers and consequently capacity in terms of time, knowledge, skill, and expertise has substantially diminished.

Nonetheless, demand upon the service remains consistently high, the following table shows activity across the range of key service areas over the last 3 years.



In respect of the provision of Criminal Justice Social Work Reports, Community Payback Orders and Diversion from Prosecution, Justice Social Work in Dumfries and Galloway has had higher than national average numbers of service users engaging in these areas of work since 2019.

A significant uplift in demand across all services provided in the initial period following Covid 19 lockdown was experienced. Whilst Justice Social Work in Dumfries and Galloway continued to offer service in all areas of work, from Criminal Justice Social Work Reports to Community Payback Orders with Unpaid Work, it would be fair to say that not all other agencies involved in the justice system were able to offer the same level of support. Unfortunately, this reduced provision of services well into the 2022 period which complicated the management of community orders, licences and other responsibilities.

Prison Throughcare responsibilities include the provision of support and management to perhaps the most complex and harmful service users and is undertaken by the most experienced and skilled Social Workers in Justice Social Work. Of note is the general increase in Prison Throughcare releases into the community over the last three years, but also the difficulties this has caused. In light of the Covid 19 concerns within the prison estate, the Scottish Government looked to release as many individuals as possible into the community. This factor alongside limited provision by many other justice services significantly increased the complexity of the Throughcare workers role and it is testament to their skill and experience that management of these individuals remains at a high standard.

Justice Social Work has an active role in the MAPPA processes and in line with the increase of throughcare service users being released into the community saw an increase in the MAPPA management of registered sex offenders. Multi Agency management of individuals has a track record of working well in Dumfries and Galloway, but where Justice Social Work provide lead agency role- this has a significant impact on resources.

### Early Interventions

A clear justice strategy promoted by Scottish Government, has been to prioritise early responses to offending through the use of Diversions from prosecution, Structured Deferred Sentences (SDS) and bail supervision.

During 2022/23, a national thematic review of Diversion from prosecution was undertaken, Justice Social Work in Dumfries and Galloway participated, and whilst the results of the review reflected the scheme across Scotland, we received positive feedback locally for our service delivery:

*When talking about our 'proactiveness' in Dumfries and Galloway, mention was given to the forming of a dedicated team to concentrate on Diversion and impressed by discussions we've started to have with other agencies (e.g. Police) regarding the Diversion process. In terms of direct practice, it was noted that we took a proactive approach to encourage engagement. For example, accommodating people's work commitments and making suitable meeting arrangements. Positive comments were also made on the use of our self-assessment tool with particular mention to "a range of bespoke and individualised interventions"; with interventions often aligned to the circumstances of the charge, which sometimes sees input from us (JSW) and/or signposting to other services. Another positive was our knowledge of the National Guidance (2020) and practice aligned to this, acknowledgement of the challenges of rural social work and the good use of technology.*

In terms of recommendations from the Diversion Review it was pleasing that we've already made changes or are in the process of planning some changes in the areas mentioned. For example, the recommendation to adopt a systematic approach to reporting, recording etc has already happened with staff now using our management information system in a manner we hope to adopt across all areas of JSW activity. We have also started to gather service user feedback, although more work is required to make it as 'systematic' as the recommendation requires. Another recommendation was to improvement on quality assurance processes which is progressing alongside service-wide developments.

For this reporting period, we saw 25 Structured Deferred Sentences with many cases ultimately resulting in admonishment, indicative of successful intervention. This approach is proving effective in helping women address the underlying causes that brought them in to conflict with the law (e.g. low esteem, poor decision making, domestic problems, parenting stressors, drugs/alcohol use).

There were 36 bail supervision cases commenced, a significant increase from previous years, supported by working in collaboration with partner agencies. Our stakeholder feedback again is very positive and validates the role of Justice Social Work taken to establish the scheme across the Region.

The following table sets out the data supporting this narrative ;

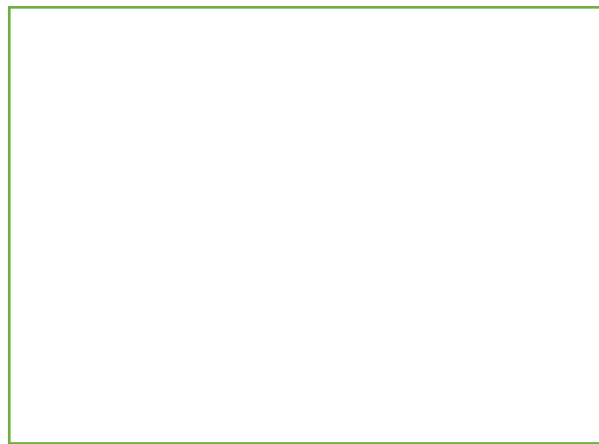
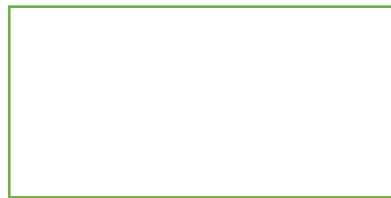
Activity	2021/22	2022/23
Diversion from Prosecution		

- Referrals	223	198
- Assessments Undertaken	185	194
- Cases Commenced	136	115
Structured Deferred Sentence		
- Cases Commenced	9	25
Bail Supervision		
- Assessments Undertaken	23	72
- Commenced	11	36

Of particular note in the last three years has been the increase in demand for early interventions work. This includes Diversion from Prosecution, Bail Supervision and Structured Deferred Sentence. Dumfries and Galloway Justice Social Work established the Early Interventions team comprising staff at various grades in light of the predicted increase in demand for this area of work. In line with Scottish Government policy- there has been year on year increase in demand across these three early intervention types.

#### Unpaid Work

Demand on and delivery of unpaid work in Dumfries and Galloway remains high, with increases year on year. We have continued to develop the range of projects, tasks and activities to provide excellent unpaid work opportunities for service users. This involved re-engagement with some projects which had to be suspended during periods of Covid restrictions. The recipients of the work undertaken by unpaid work continue to express their gratitude, with a number of examples below:



As well as the traditional opportunity for community organisations to request projects to be undertaken by unpaid work, an approach which focuses on the reintegration into communities has also become a very effective way to introduce new ideas and opportunities that can lead to purposeful work experience, volunteering, new skills, and even new employment prospects. There is now a growing portfolio of personal placements with organisations throughout Dumfries and Galloway providing a variety of opportunities for work experience.

Work experience can develop many key skills and create a daily structure that helps to organise and maintain a positive healthy outlook in life. Consistency and building new community relations can be the turning point for some people to become more confident and start a new chapter in their lives. Positive achievements have included individuals' improved self-worth, realising they have many positive attributes and skills to give, in the right supportive environment. Equally there are many new opportunities to learn new skills, undertake training and link in with Health and Wellbeing Projects.

Feedback from one service user is a clear example of the wider benefits unpaid work is designed to achieve:

*'it's strange how getting into trouble has actually changed my life for the better. I have now secured a job through my unpaid work experience. I have a new social group and I have a weekly wage. Life is good'*

We have outdoor gym facilities in both Annan and Stranraer to promote healthy living and positive mental health. These facilities can be used by anyone visiting the units. Growing fresh produce continues to be a popular activity across the region, with fresh fruit and veg available to use in cooking within the unit or to take home to prepare. The increased outdoor spaces at Annan have allowed for a wider range of outdoor activities to take place and the grounds are being prepared for the addition of a community-based facility which may offer teas/coffees and a selection of homemade cakes and scones. It is hoped this facility will be another way in which the Community Payback Units can connect with local communities.



The picture shows some of the grounds at the Unpaid Work Unit at Annan. In the background, behind a crop of potatoes, is one of the poly tunnels used to grow more of our fresh produce; whilst the stone circle in the foreground is an example of the quality of work undertaken by those subject to unpaid work.

### Community Supervision

The numbers of individuals supervised by Justice Social Work who are subject to Community Payback Orders continues to increase. Each individual is assessed to reach collaborative agreement on which areas of their behaviour and lives they should focus on. Examples of such include:

Mr B has been involved in offending for many years, engaging in lots of antisocial behaviour. As part of his Community Payback Order (CPO), he became involved in the Men's Shed in Dumfries as a part of his UPW. He completed his UPW hours, but has continued to attend the Men's Shed; he believes this is because of the positive guidance he receives from that environment enabling him to use his time far more positively and constructively.

Mr A has a history of trauma, significant loss, mental health issues and alcohol use. His relationship had broken down and he had nothing. We assisted him to acquire enough furniture, bedding and kitchen items, to enable him to live and have his children visit. He had been allocated a tenancy and we were able to give him some essential items, including a cot bed. By supporting him, risk was mitigated in respect of his mental health deteriorating and relapse with alcohol use to self-medicate; both significant factors in reducing his risk of re-offending.

Mr C had been a repeat offender being supervised on a post custodial licence. He had disengaged from the world, sat alone in his house, had poor self-care, and no motivation to do anything meaningful. During his period of supervision, which also included participation in offence specific group work programme, he started to turn things around. He managed to gain employment (helped by the Job Centre finding interview clothing for him), he started to take better care of his property, and he started to involve himself in activities with others (playing pool in local pub tournament). He faced setbacks during this time - he was 'let go' by more than one employer once they found out about his



offending history, but he was able to get himself motivated to seek another job. His future certainly seems more positive than previously.

#### Programme Delivery

Higher priority cases often involve the delivery of behaviour change programmes; nationally accredited programmes are delivered by Justice Social Work in Dumfries and Galloway; the Caledonian, for perpetrators of domestic abuse; and Moving Forward: Making Changes (MFMC) for those convicted of sexual offences. Generally accepted as a consequence of Covid lockdowns there has been an increase in domestic abuse cases which, in turn, impacted on the Justice Social Work demand.

Participation and completion of these programmes requires a significant commitment by men as they are supported towards changing their offending behaviours. Comments from men who have completed the Caledonian Programme include:

“Realising the importance of communication skills in an intimate relationship.”

“Learning how to control my anger and emotions better.”

“An understanding that DA happens in many shapes and forms, and that there is more ways to go about things than this.”

“The workers are welcoming and superb at their job.”

“I have found the programme brilliant, much better than I ever imagined. I am now much confident, relaxed, content and ready to start a relationship I feel happy and content.”

To support the work undertaken by JSW to address domestic abuse offending, two of our Senior Social Workers have undertaken the SARA (Spousal Assault Risk Assessment) Training for Trainers which has enabled them to deliver two blocks of in-house training to ensure staff are trained in the use of SARA V3 and its implementation in assessing cases of domestic abuse. This enhances practice and provides a structure for staff who are managing Domestic Abuse cases.

#### Prison and Throughcare

Prison Based Social Work continue to meet all of its core functions linked to the contract between Dumfries and Galloway Council and the Scottish Prison Service at HMP Dumfries. Monthly reviews have recorded well established collaborative working practices with prison staff and partner agencies. Critical support on key areas of managing prisoners during their prison sentence through risk management and addressing need by means of offence focused work remain a priority. Although there are noted demands being placed on the Service due to the increased number of Reports requested by the Scottish Prison Service and the Parole Board for Scotland, Prison Based Social Work continue to meet those challenges.

Key priorities are also being met through the preparing of prisoners for release and working with supports in the community. This is most notable in terms of providing support to prisoners immediately on release, assisting with relevant welfare needs, promoting social justice and addressing public protection issues. Further to this Justice Social Work are working jointly with the Scottish Prison Service, Health Services and third sector agencies through co-ordinating the support of prisoners being released back to Dumfries and Galloway from all prisons in Scotland. The Multi Agency Community Rehabilitation Integration Board (MACRIB) is a long-established mechanism to providing co-ordinating support from Social Work, Housing, Addiction Services, Employability Services and Women's Services.

Service developments during 2022/23 include the introduction of Throughcare Assessment for Release on Licence (TARL), a co-production Report by both Community and Prison Based Social Work. The guidance has been developed over a number of years by experienced justice social work practitioners and managers, including those from Dumfries and Galloway. The key aim of TARL is to improve practice by producing an integrated parole board report for prisoners serving long term sentences. This has been long awaited and commenced in December 2022. Initial feedback suggests

that Reports has been received well by the Scottish Prison Services and the Parole Board for Scotland, with an evaluation of the document proposed for 2024. Further to this we have local representation at a Scottish Government led Justice Throughcare Guidance Reference group, which looks to revise National Objectives and Standards for Throughcare.

### [Community Justice Partnership](#)

As a key member of the partnership, we continue to report through Community Planning Partnership Board on a quarterly basis and remain closely linked with the local Alcohol and Drug Partnership and Public Protection Partnership.

For the last year the Community Justice Partnership has been involved in undertaking a Strategic Needs and Strength Analysis locally. As key partners our Justice Social Work provided data on the services they provide and the numbers being supported to complete their orders, diversionary activities, etc. This has helped the Community Justice Partnership build up a clearer picture of what we need to focus on as a partnership moving forward.

Justice Social Work identified funding to undertake work with people with lived and living experience of justice. The National Strategy for Community Justice also has an aspiration to listen and learn from those who have experienced/are experiencing the justice journey. It also highlights that supporting communities to participate in community justice planning and delivery will lead to more effective services and policies with greater legitimacy.

The refreshed strategy states within National Aim 1 *'In order to understand what is important to our communities and to promote inclusivity, community justice partners should ensure that those with lived experience of the justice system, including victims of crime, have the opportunity to appropriately and effectively participate. Their experience should be represented in order to inform policy development, implementation, and the design and delivery of services.'*

This has been identified as a gap within our own local Community Justice Outcome Improvement Plan (CJOIP). As we began to think about the development of a new CJOIP we had to consider how we capture the voices of those with lived experience and empower them to have the opportunity to help shape services to improve effectiveness. This should ensure better long-term outcomes for people involved in offending behavior, victims of crime and the families of both. Service user involvement is also reflected within the new local Justice Social Work Strategy which at the time of developing this project was out for consultation. As such a Steering Group was established to support development of this work. The group hoped to utilise a peer support/development approach to understand and learn from the local experience of those who have been in, are currently in or have been touched by the justice system. Recognising the regional differences across Dumfries and Galloway we hoped to fund two projects, one East and one West so that different approaches and innovation are encouraged.

Following the procurement process the successful organisations were Summerhill Centre in the East of the region and Apex Scotland in the West. Both projects worked hard to recruit someone with lived experience of justice to take forward the work and has included introduction of a weekly lunch club services by volunteers, completed a 10-week Health and Wellbeing Source, created a Community Warm Space Hub. Both projects reported engaging well with various groups including those undertaking Community Payback with positive feedback - *"I've really enjoyed coming along to these sessions each week, it's helped me understand some of the things a lot better and how I can help myself to overcome some of the problems in my life"*.

The Community Justice Partnership supported colleagues involved in the [Diversion from prosecution: joint review](#). This was a joint review involving HM Inspectorate of Prosecution, HM Inspectorate of Prisons and the Care Inspectorate. Recommendations for Community Justice Partnerships, Police, COPFS and Justice Work were identified, and work has begun locally to address these. CJP recommendations will be included as improvement actions within the next Community Justice Outcomes Improvement Plan.

### [Public Protection](#)

Social Work Service has and will continue to play a lead role in undertaking the statutory duty to protect those who are our most vulnerable and ensure the shared commitment to protect continues to be at the heart of all that we collectively do. I am aware that we would not be able to work to protect those in our communities without continued effective working with our local partners and I thank them and individual staff who work collectively across this agenda.

The Public Protection Partnership (PPP) continue to have multi agency responsibility to ensure effective joint arrangements are in place to manage risk across Adult Support and Protection, Child Protection, and Violence Against Women and Girls (VAWG), meeting statutory requirements. This is undertaken through oversight of the partnership by the Chief Officers Group - Public Protection (COG-PP) and the Public Protection Committee (PPC). As CSWO I continue to attend COG-PP to provide professional guidance, as necessary.

Following publication of the National Guidance for Child Protection in Scotland in September 2021, Dumfries and Galloway developed a local Child Protection Guidance implementation group to take this forward. In February 2023 a Writing Review Group was established to develop Dumfries and Galloway's Multi-Agency Child Protection Guidance and is expected to be completed by the Autumn of this year with multi-agency child protection training programmes and materials being reviewed, aligned and rolled out thereafter.

In July 2022 a further development of the local implementation of the National Child Protection Guidance included the review of the format and facilitation of Child Protection Planning Meetings. Not only did this embrace our Signs of Safety approach but also aimed to strengthen the resources that exist within families to build safety for children who have suffered, or are likely to suffer, significant harm. Implementation for all Initial and Review Child Protection Planning meetings was completed by the end of 2022.

From 1 November 2022, all referrals for young people aged 16 – 17 years at risk are now taken through Child Protection processes, in line with the National Guidance. System changes to embed the new language and terminology in terms of how we record and report on child protection, particularly in respect of impact on/abuse of the child and vulnerability factors, have been made to help with identification of themes and key messages which will enhance our understanding and provide direction on public protection priorities.

Dumfries and Galloway have an established multi-agency Age of Criminal Responsibility Act (ACRA) Steering Group which has ensured that all measures are in place locally for implementation of the Act in 2021. A national multi-agency event took place on 26th January 2023 to reflect on learning from the Act since full commencement and our Locality Social Work Manager who leads on this was asked to present at the National Learning Event in recognition of the work undertaken in Dumfries and Galloway, including our arrangements for early and effective intervention.

Dumfries and Galloway Public Protection week 2023 took place 13<sup>th</sup> to 17<sup>th</sup> February 2023 and marked the third annual Public Protection week'

This was an opportunity for partner organisations to connect with the community and share best practice and knowledge. It highlighted the importance of agencies working together at all levels and coordinating an effective response. A key aim was to ensure everyone was clear about what Public Protection is and what the multi-agency partnership does. Significantly we were able to incorporate an in-person event at HMP Dumfries Prison this year. The week offered 12 online events and 1 in person, with themes across child protection, adult support and protection and violence against women and girls.



As the events were so varied, it not only enabled understanding of how the different themes tied together, it also highlighted the importance of how services across the partnership work together. There was a range of presenters including the Scottish Fire and Rescue Service, HMP Dumfries, Police Scotland, Social Workers, NHS, ADP, Third Sector and Family Support. In total 384 delegates attended the events during Public Protection week. Feedback given by 161 delegates was overwhelmingly positive, including making several of the events accessible to those whose first language is British Sign Language.



One event that stood out due to its incorporation of a lived experience example is the 'Signs of Safety' webinar. This training event showed a video of a couple being interviewed by a Social Worker about their journey with drug addiction, rehab and getting their children back. After the video one of parents appearing during the training session and was a wonderful experience of 'Before' and 'After'.

A short-life working group was established to look at gaining service user feedback more creatively and meaningfully and have this embedded into practice as opposed to episodic occurrences. There have been 25 responses to the initial survey of children and families' experiences of social work services, and a further 7 responses from the new survey implemented in September 2022. Reporting from this will be undertaken in June 2023. Development of a 'you said' 'we did' response so children and families understand what we do with their feedback. The survey was updated in October 2022 to provide more meaningful information on lived/living experiences and will become part of core Child Protection business, the findings will be presented at the CP Scrutiny Group and Performance Quality and Improvement Sub Committee in 2023/24.

Systemic monthly multi-agency quality assurance continues to be undertaken by the Inter-agency Referral Discussion Review Group. The Audit Template for this quality assurance was reviewed in November 2022 to ensure that this aligns with the National Child Protection Guidance and the Care Inspectorate Quality Standards. Over the last year the quality of our IRDs has been in the majority good and above, with continuous improvement around staff training and amendments to our IRD templates, improvements already evident in terms of consistency.

As part of our Public Protection PQ&I Sub-Committee Self Evaluation Calendar we have undertaken a multi-agency child protection self-evaluation which started with file reading in October 2022. This activity has included multi-agency file reading, 85 cases, by file readers from across the partnership. Surveys have been sent to children, young people and families to ask about their experience. It is also planned to undertake staff focus groups and a Leadership Focus group to triangulate findings. We have ensured that staff from across all partner agencies and our families have been kept informed of what we were doing, why we were doing this, and progress so far. The findings will be collated, and the final report will be presented to PQ&I SC in 2023.

In January 2023, at the request of the National Scottish Child Interview Model (SCIM) Team, Dumfries and Galloway social work and police leads hosted a 'Rural Event' for partners from other rural authorities, including highland and island areas, to demonstrate our journey and how we had overcome some of the inevitable obstacles of rural implementation. This demonstrates how we are supporting learning on a national basis. Locally, the SCIM Performance & Quality Group has worked hard to develop mechanisms alongside data capture and analysis to ensure we are continually learning and improving our interviewing practice. This includes interviewer evaluations and feedback from SCRA which details admissibility issues such as visual and audio quality. To ensure we capture

meaningful feedback from children who have been interviewed in a systematic way, we are in the process of transferring feedback arrangements to schools.

The Dumfries and Galloway Missing Persons Protocol was launched in June 2022. It aims to capture what the Missing People Charity promote – prevention, response, support and protect. The aspiration is to build on the existing good work in Dumfries and Galloway by preventing people from going missing in the first place and limit the harm associated with people going missing. Implementation is in its infancy and it is acknowledged that there remain challenges. To support the implementation of the Protocol the Missing Person Operational Group and Missing Persons Steering Groups were established and set with the task of measuring outcomes, how we know we are making a difference, and obtaining “lived experience”. While both groups are reassured missing people in Dumfries and Galloway continue to be well supported during and after a missing episode, we do recognise that there remain challenges in addressing the disconnect between policy and practice. For example, ensuring the tools within the Protocol such as the risk assessment and return discussion templates are tested, remain user friendly and are helpful for those who go missing as well as frontline practitioners. The protocol will be reviewed in June 2023.

The ASP guidance suite was launched on 28<sup>th</sup> July 2022. Work continues towards local implementation and review local policy, procedure, and practice against the enhanced guidance. Whilst we believe that we remain in a good position in this respect, we welcome the opportunity to enhance local practice as a result. The National Guidance Suite has already led to review and changes of ASP training. Including our level 2 Multi Agency Training and our Council Officer training. This includes our 5-day initial training and bespoke sessions with existing council officers. The restructure in adult social work and the expansion of the ASP and MASH team will support this work as we go forward.

The Adult Support and Protection Practice Group continues to meet on a regular basis and has in the past year, completed a number of actions from the Inspection Improvement Plan. This includes embedding developments such as, the hybrid case conference guidance, the implementation of deregistration core groups, encouraging uptake on advocacy, protection plan uses and associated Mosaic change to support this. We have also reviewed and relaunched the ASP Social Work Procedures on the 1<sup>st</sup> March 2023. This group includes front line practitioners and administration support and is invaluable in supporting best practice in ASP.

Through our refreshed Communication Strategy, the Public Protection Partnership acknowledge that it is through effective public, community and staff engagement that can identify all those at risk of harm in our community. We seek to maintain, review, continually develop our communication methods to respond efficiently and effectively when protecting those experiencing or at risk of harm. The Communication and Engagement subcommittee continue to identify and introduce ways of engaging with those we seek to support and protect, as well as being the conduit for effective communication regarding all matters Public Protection. The Public Protection Website continues to be developed and improved and as well as the public facing information, it now includes a section for Continued Professional Development to support staff from across the partnership in their ongoing learning.

Over the last 12 months the public protection partnership has been able to deliver a varied multi-agency training calendar, this includes

- Human Trafficking
- Multiagency Child Protection Training
- Signs of Safety Overview
- Domestic Abuse Overview and Response Training
- Injuries to Non-Mobile Children - Multiagency Training
- Safe and Together Training
- Multiagency Adult Support and Protection
- 5-day Child Protection Training
- Revenge Porn Helpline-Awareness Raising
- Preventing Awareness Training
- Responding to Sexual Violence
- 16 Days of Activism Against Gender based Violence
- Adult Support and Protection Level 2
- Public Protection Week 2023



Considering the cost-of-living crisis and the impact of poverty in Dumfries and Galloway, the Public Protection Committee has agreed to a further review of financial harm strategy and the impact of poverty in our region. It is essential that this strategy remains agile and flexible and continues to be reviewed to ensure appropriate and changing response to new emerging areas of concern.

The Public Protection Team coordinated the multiagency 16 Days of action (25<sup>th</sup> November to 10<sup>th</sup> December) messages and activity including daily information on social media aimed at raising understanding of violence against women which provided a reach of over 250,000.

During this time a violence against women survey was launched with approximately 370 responses from the community, responses identified that there is a varied understanding of the continuum of violence against women reinforcing the need to continue raising awareness.

The roll out of Safe and Together has continued with the multiagency Steering Group chaired and led by my staff. Safe and Together training and awareness raising has continued in the past year to improve the response to domestic abuse. There were two additional overview sessions on Safe and Together in 2022/23 with the aim of increasing understanding of how the approach encourages staff to be more domestic abuse informed (across all agencies). This has involved raising awareness of the principles of Safe and Together:

- Keeping children Safe and Together with the non-offending parent
- Partnering with the non-offending parent as the default position
- Intervening with the perpetrator to reduce risk and harm to children

Due to the need to establish a baseline in practice around domestic abuse, self-evaluation was merged with the Multi-Agency Child Protection Self Evaluation which was taking place. This involved reading the police, health, social work and education records of 18 families using the same Care Inspectorate Tool being used for the overall record reading with additional questions incorporated as agreed by the Safe and Together Steering Group. The period under review was from May 2022 backwards which included a pandemic context and took us up to the beginning of Safe and Together being launched within the region.

Initial findings from the Case File audit confirmed that staff are confident in working with non-abusing parents and developing safety plans to keep them and their children safe, but less confident in working directly with children to support their recovery and with abusing parents in terms of holding them to account in how they have harmed their children. In the period of time covered by the audit there appeared to be an improvement in domestic abuse informed language, and we would expect to see further improvement in the repeat audit following further implementation of Safe and Together.

Multiagency Risk Assessment Conferences (MARACs) have continued to be delivered and are coordinated by my staff. MARACs have been hosted online since early in the pandemic and the model allows access from throughout the region. In this reporting period, there were 13 meetings where 113 cases were discussed; 29% of them were repeats (n33) with 156 children were part of the household.

A VAW Biennial Report was published to provide staff and the public with a greater understanding of the extensive work taking place to prevent and respond to violence against women. From 2023 there will be an VAWG Annual Report published by the Public Protection Partnership.

## 5. Resources

**Children's and Families Services** budget for financial year 2022/23 was £27.3m, with additional funding provided of £2m through policy development funding, covid recovery monies and multiple in-year funding streams.

**Adult Services** budget for financial year 2022/23 was £100.3m, with additional funding provided from the local mobilisation covid recovery funding stream.

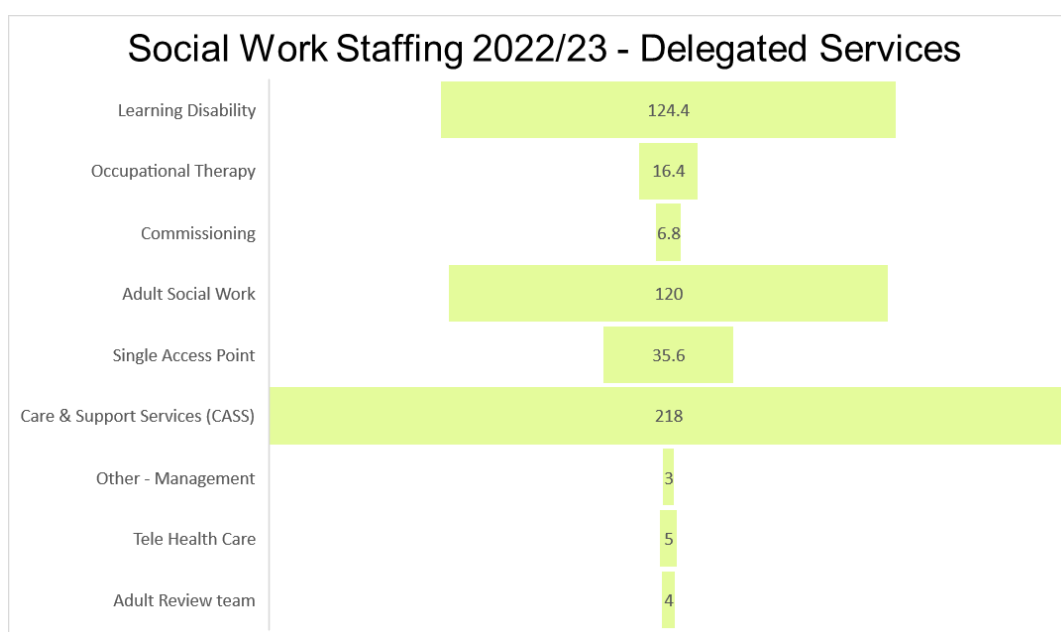
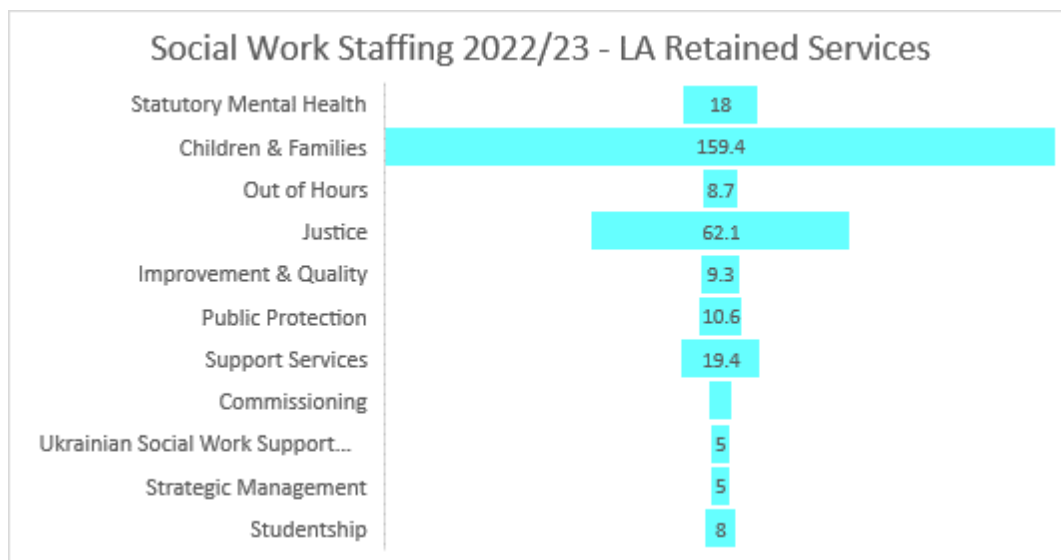
I recognise the current and forthcoming period as enormously challenging due to the extent of public sector pressures and demands across all service areas. This necessitates essential services to be stretched further, while maintaining service quality and coping with increasing levels of complexity and need.

Going forward our challenges remain consistent particularly around impact of cost-of-living crisis, unpredictable pressures on placements (family and residential), inflationary pressures, increasing demand that cannot be funding and core services dependency on non-recurring budgets, with detrimental impact when delivering services within a rural area.

A programme of transformational change across all our services is currently being developed, and this work will continue over the course of 2023/24.

## 6.Workforce

The total staffing full time equivalent for Social Work Services in 2022/23, including support services is set out in the following tables.



The social work and social care workforce are our greatest asset and effective workforce planning is crucial in ensuring we have the right people in the right place with the right skills at the right time to deliver a high standard of care.

A range of workforce planning activities are underway, in partnership with our People and Transformation Colleagues, to ensure that we continue to deliver the objectives of our Workforce Plan and meet the key challenges of recovery, growth and transformation. As we move forward, we will build for growth and transformation, we will continue to work to support our workforce, together with the Health and Social Care Partnership, to increase staffing capacity, develop the skills of our workforce and provide enhanced opportunities for career entry and progression.

Key considerations relating to our social work recruitment and staffing levels include difficulties in recruiting and retaining Social Workers, experiencing high levels of staff turnover and absence, an ageing workforce in specific areas of service, an increasing number of employees who are Carers and require Carers' leave in addition to annual leave entitlement, reduced business and administration support for our front-line teams. A workforce group has been established to identify our future service demands and solutions to the issues together with working closely with our People and Transformation and Health and Social Care Partnership colleagues. We are evidencing more stability in our workforce where permanent funding is secured.

Nationally and locally there has been a significant reduction in the number of students seeking to study social work at traditional 'bricks and mortar' universities. This represents an additional challenge to our recruitment of qualified workers but one we intend to overcome by developing increasing opportunities to 'grow our own' social workers.

In the last year, four studentship candidates have successfully graduated and come into full time practice with us in addition to the nine graduates we recruited after offering them practice placements internally. A further five candidates joined the studentship programme.

We accessed funding to allow twelve of our colleagues to study Open University modules in their own time, bringing them to the point where they would qualify to apply to join our studentship programme. We are working to develop a National Trainee Scheme for postgraduate Social Work students which would further enable our staff to access social work training. Locally we are working with Higher Education providers to provide routes into social care and on into social work for school leavers as well as adult learners and existing staff.

We continue to work closely with the SSSC to develop and implement a Supported First Year in Practice for Newly Qualified Social Workers which we hope will improve retention rates and reduce stress related illness.

We are currently developing our Career Pathway Model which will be introduced in August 2023.

Our challenges aside, I am privileged to lead our social work and social care staff and to recognise the tremendous effort that has been made to support our communities, working with children, families, adults, service users, colleagues, partners and our third sector organisations.

## 7. Conclusion

In conclusion to this year's annual report, as CSWO, I am privileged to have the opportunity to highlight the wide and varied services delivered by social work staff and to recognise the tremendous effort that has been made to support our communities and would like to thank each and every member of staff for their hard work and dedication in exceptionally challenging times.

This report has highlighted the challenges that people who deliver and receive services have experienced over the past year, challenges that have been met head on with remarkable commitment and creativity in ensuring that people in our communities who most need support received it.

I know the coming years will be challenging, we will continue to innovate the way we operate, and confident that Dumfries and Galloway Social Work Services will continue to rise to the challenge.

Thank you.

Stephen Morgan  
Interim Chief Social Work Officer

## APPENDIX 1

## List of acronyms

CSWO	Chief Social Work Officer
D&G	Dumfries and Galloway
SG	Scottish Government
COSLA	Convention of Scottish Local Authorities
NHS	National Health Service
H&SCP	Health and Social Care Partnership
CCHST	Collaborative Care Home Support Team
CHOG	Care Home Oversight Group
MAPPA	Multi-Agency Public Protection Arrangements
SICP	Standard Infection Control Precautions
HPT	Health Protection Team
BSL	British Sign Language
OOH	Out of Hours
MHO	Mental Health Officers
SAP	Single Access Point
CP	Child Protection
CPI	Child Protection Investigation
PPC	Public Protection Committee
COG – PP	Chief Officers Group – Public Protection
MASH	Multi-Agency Safeguarding Hub
IRD	Interagency Referral Discussion
CELCIS	Centre for Excellence for Children's Care and Protection
SCRA	Scottish Children's Reporter Administration
ASP	Adult Support and Protection
PPC	Public Protection Committee
APC	Adult Support and Protection Committee
Iriss	Institute for Research and Innovation in Social Services
SAS	Scottish Ambulance Service
PQI	Performance, Quality and Improvement
CHTT	Care Home Tactical Team
CWT	Community Waiting Time
ARC	Activity and Resource Centre
SFRS	Scottish Fire and Rescue Service
ROVI	Rehabilitation Officer, Visual Impairment
JSW	Justice Social Work
SDS	Structured Deferred Sentences
CPO	Community Payback Order
UPW	Unpaid Work
MFMC	Moving Forward: Making Changes for those convicted of sexual offences
SARA	Spousal Assault Risk Assessment
MACRIB	Multi Agency Community Rehabilitation Integration Board
DA	Domestic Abuse
HMP	His Majesty's Prison
TARL	Throughcare Assessment for Release on Licence
CJP	Criminal Justice Partnership
CJOIP	Criminal Justice Outcome Improvement Plan
COPFS	Crown Office and Procurator Fiscal Service
PPP	Public Protection Partnership
VAWG	Violence Against Women and Girls
ACRA	Age of Criminal Responsibility Act
ADP	Alcohol and Drug Partnership
SCIM	Scottish Child Interview Model
MARAC	Multi Agency Risk Assessment Conferences
SSSC	Scottish Social Services Council



