

Annual Report by Local Authority Chief Social Work Officers

1. Governance and Accountability

The Chief Social Work Officer (CSWO) in Moray is positioned within the Health & Social Care Partnership. Accountability of the CSWO is to the Integration Joint Board (IJB) for adult services and to Education, Communities and Organisational Development Committee/ Full Council on matters relating to children and young people and justice Social Work.

The CSWO meets with the Chief Executive of Moray council on any matters of concern.

The CSWO is a member of the Public Protection Chief Officers Group (COG), the Community Planning Officers Group (CPOG), the Child Protection Committee, the Adult Protection Committee, Girfec Leadership Group, Community Justice Partnership, and Clinical and Care Governance Committee of the Integrated Joint Board.

Internally the quality of social work is assured by Practice Governance meetings. Any issues are reported to the Clinical & Care Governance Committee of the IJB for adults. Posts of Consultant Social Work Practitioner are well established in adult services and also now in children's services. Consultants work with line managers to support social work in complex cases, model best practice and set practice standards in their respective areas. Consultants also undertake practice audits in Adult Social Work.

Within Adult services the dispersal of social work management arrangements means that, other than in Learning Disability, Team Managers, or first line managers are the most senior qualified Social Workers within the management structure. Maintaining Social Work integrity and value within the Integration Joint Board is a high priority for the CSWO.

Potential Delegation of Children and Families and Justice Social Work

A Programme Board to lead and provide strategic direction in relation to the potential delegation and modernisation of Children and Families and Justice Social Work to the Moray Integration Joint Board (MIJB) in line with national policy, legislation and local requirements was inaugurated on 16 November 2020.

The remit of the Board is to provide a joint forum for discussion with key partners and stakeholders to identify risk and issues associated with the potential delegation and to identify key benefits whilst offering support and scrutiny. The proposal must be agreed by Moray Council and then NHS Grampian and MIJB, before submission of a revised Integration Scheme to Scottish Ministers.

Whilst work to consider delegation has commenced, it has been considerably delayed by the public health situation and competing priorities. The Programme Board has received a business case with a benefit realisation plan highlighting risks and issues which has aided the decision to progress with the due diligence required to obtain financial assurance that resources are adequate to allow the delegated functions to be carried out.

The Programme Board continues to meet regularly to progress the proprietary work required in order for a unanimous agreement by NHS Grampian, Moray Council and MIJB.

2. Service Quality and Performance

In Adult Services, there were 2,745 Service Agreements commissioned for 1,546 service users. 88.5% (2,428) of these agreements were for external services with 11.5% (317) for internal services. The total weekly hours show Internal care providers were commissioned for 20.1% of the hours and External 79.9%.

Additionally in 2020/21; 3,283 Support Plan Reviews were completed, 1,659 Review meetings took place and 1,561 Annual Service Package Reviews were done. Additionally 1,412 COVID-19 reviews were completed. This demonstrates the amount of work that continued throughout the Pandemic.

The Community Wellbeing Development Team were successfully awarded 81 iPads with mobile wifi for free as part of the Scottish Government's "Connected Scotland" programme, to support older people becoming digitally connected to help reduce social isolation and becoming more independent through Covid lockdowns. They also created an online platform with local providers to offer physical and mental activities to engage and connect with people to continue to interact and to feel connected.

Self-directed Support

The SDS Team in Moray have been very active in supporting the further development of SDS approaches, not only locally but also contributing to the Scotland-wide agenda.

The team intensively supported Direct Payment (DP) recipients throughout COVID, in particular those employing Personal Assistant's regarding employment law, furlough, implementing the national option 1 and 2 guidance. They also supported employers and their PA's to have access to the necessary PPE to ensure compliance with Public Health Guidelines. Employers and their PA's were also supported through the provision of information around action to be taken in relation to Covid guidelines e.g. what to do when they had suspected or confirmed cases of Covid.

DP recipients did not have their support packages reduced but were supported to look at alternative, creative ways of meeting their outcomes due to restrictions relating to COVID. This resulted in the significant underspend in DP budgets where supported people were unable to access their normal levels of support.

One of the SDS team members was invited to be part of the workshops with Social Work Scotland to support the development of the national SDS Framework Standards which are now approved.

Moray noted their interest to be one of the key stakeholders and entered a successful application to Social Work Scotland. Moray were then chosen as one of three local authority areas to support the further development and embedding of the standards.

One of the SDS team members was also invited to be part of a small group to review the revised PA Handbook which was going web based and more interactive than the previous paper version.

Unpaid carer focus groups were carried out in January 2021 during the second lockdown to gain lived experience of what would support them in their caring role and give them a break both in the current lockdown and beyond.

Due to COVID the SDS team have successfully managed to build closer links with Personal Assistants in Moray, offering them support throughout the pandemic. The team further supported PAs getting access to the vaccine and regular LFD testing.

Commissioning

The Commissioning Team were very active over this time period supporting our external providers. They supported a local care home to open additional beds during the first lockdown period. This development involved four different organisations working closely together to support people in securing early discharge from hospital.

Commissioning staff provided logistic support to the Moray Mass Vaccination programme and set up the infrastructure to support the Mass Vaccination Centres. They also set-up the Moray PPE Hub which was created to manage the receipt and distribution of PPE throughout Moray.

The main focus for commissioning staff throughout the pandemic has been to support providers on a regular basis, in particular, a member of commissioning staff was in daily contact with each residential care home in Moray to offer support and advice. This developed into the Oversight arrangements set-up following Scottish Government guidance.

Children's services have seen improvements in the reduction in numbers of children who are placed outwith Moray, and, with a plan to return children (where that is in their best interests) to Moray where they are currently living outside of the local authority. There is an improvement in reaching permanence decisions through the implementation of Permanence and Care Excellence (PACE) programme. We have also reduced the number of children going into foster care and increased care provision within kinship options. We remain committed to ensuring fewer children require to live apart from their families by developing skills in family work and intensive crisis supports. When more children and young people remain in Moray it will follow that resources must be provided locally. This will be positive for children, their families and the local community.

Within our justice services, the unpaid work element of Community Payback Orders was a problem nationally with lockdown preventing any squads from operating and the backlog of hours continued to increase. There was a positive, however, in terms of the 'Other Activity' element of the Requirement as more flexible and imaginative ways of ensuring this were developed and employed. The Coronavirus (Scotland) Act's 35% reduction in hours in March 2021 enabled some clients to complete their order or reduced the outstanding hours to a more manageable level. Prior to the reduction we had 10,634 hours outstanding. Once the reduction was applied to those eligible this reduced to 6,434 hours outstanding.

Changes in Supervision of orders and licences during the initial lockdown stage provided our service users with more frequent and, often, welfare focused support in response to need. It was surprising to find that some of those who had been avoidant of more formal supervision appointments welcomed the telephone calls and home visits that they received. Keeping staff safe within that was challenging and office contacts were restricted to the 'critical few' high risk cases. The suspension of group work for high risk offenders in response to Covid restrictions and later due to lack of Covid complaint facilities led to concerns and was considered business critical.

3. Resources

During 2020/21 the financial pressures in adult services continued to be in older peoples and learning disability services. Both were overspent by end of year.

Within children's services, there have been significant savings due to a shift in practice and governance and less need for children to have their care needs met outside of Moray. A recurrent saving of £744k was taken. The savings from 20/21 in this service area supported the Moray Council transformation programme. There is a need to reinvest savings to ensure that investment is made in sustaining these changes, which is critical for sustainability and to align to The Promise in ensuring children don't go into care where they don't need to. The savings from 2020-21 were £3 million. This saving was as a result of a number of factors; we had less children requiring out of areas placements, there was also significant savings from the SDS budget, as staff struggled to find local services and options to provide additional support to families, as well as staff being under confident in the use of SDS to support families. Plans are in place for 2021-22 to provide the three conversation model as well as training in the use of SDS, alongside a review of our commissioned services.

4. Workforce

From the most recent information available, 07.12.2020, there are 318 qualified Social Workers employed in Moray. Of these, 14 are managers.

Recruitment and retention of qualified social workers is good. Our turnover is low, as the many Social Work staff will spend their career working within Moray.

We have not encountered any problems in recruiting to frontline social work posts.

The major concern is with the fragility of the Social Work Management and support functions. This led to the decision to draft a Social Work Workforce Plan. This is currently in development.

Recruitment to both Team Management and Service Management positions can be difficult. There is a recognition that we need to better prepare our staff for progression. In response to this we have offered some seconded roles into Team Manager positions in children's services, with coaching provided by the Consultant Practitioners. Within children's services, the management team is less stable with Head of Service and Service Manager positions being interim until a decision is made around how that will look at the point of delegation to the IJB. This can create a sense of the situation being 'temporary' to staff.

Recruitment of Social Care staff has been relatively positive. We were unable to recruit as proactively as we would have liked in 2020, and this has led to some deficits in 2021.

Of concern here would be early attrition of care staff, and retention rates. The decrease in retention, combined with increased demand, led to some significant staffing problems by the Summer of 2021. Most recently resulting in calls for mutual aid when that staffing pressure combined with the consequences of Covid Omnicron.

Staff Development

Staff development was very challenging throughout 2020/21. Social Work training team staff were redeployed to the Grampian humanitarian assistance centre.

Social work staff gradually accommodated to increasing amount of work being conducted virtually. At the beginning of 2021 Moray took part in a pilot development of “Near Me” a digital platform already in use widely within the NHS.

Within children’s services there was a lot of energy placed into ensuring a plan for training and development was created and that staff had appropriate post qualifying training and development opportunities as well as being tightly connected with national policy changes and developments. This created challenges for children’s services as the capacity was limited in being able to develop and deliver in house training due to the redeployment of the training team and staff time being tight due to the additional demands through Covid. We also had an increase in demand for social work services and so the opportunities were limited, but we were able to roll out workshops and the Safe and Together model across children’s services.

The Social Work Leadership group explored the SSSC my badges app and encouraged staff to make use of this to maintain their professional development.

5. COVID 19

April 2020 saw the beginning of the first national lockdown. Social Work/ Care conducted reviews of all Social Care packages at home to maximise available capacity for the anticipated surge of demand resulting from the first wave of Covid.

Many people and families contacted at that time wanted to minimise outside contact and where employed family members were furloughed were able and willing to offer additional support. There was a wave of community support for the Health and Social Care sector that saw people accept a temporary reduction in support, combined with substantial and meaningful increases in volunteer and voluntary sector activity across Moray. Food parcels were handed out to vulnerable people. Families were supported through telephone and doorstep visits, and The Humanitarian Action Centre (HAC) co-ordinated support for those that contacted them with a need for shopping or pharmacy collection.

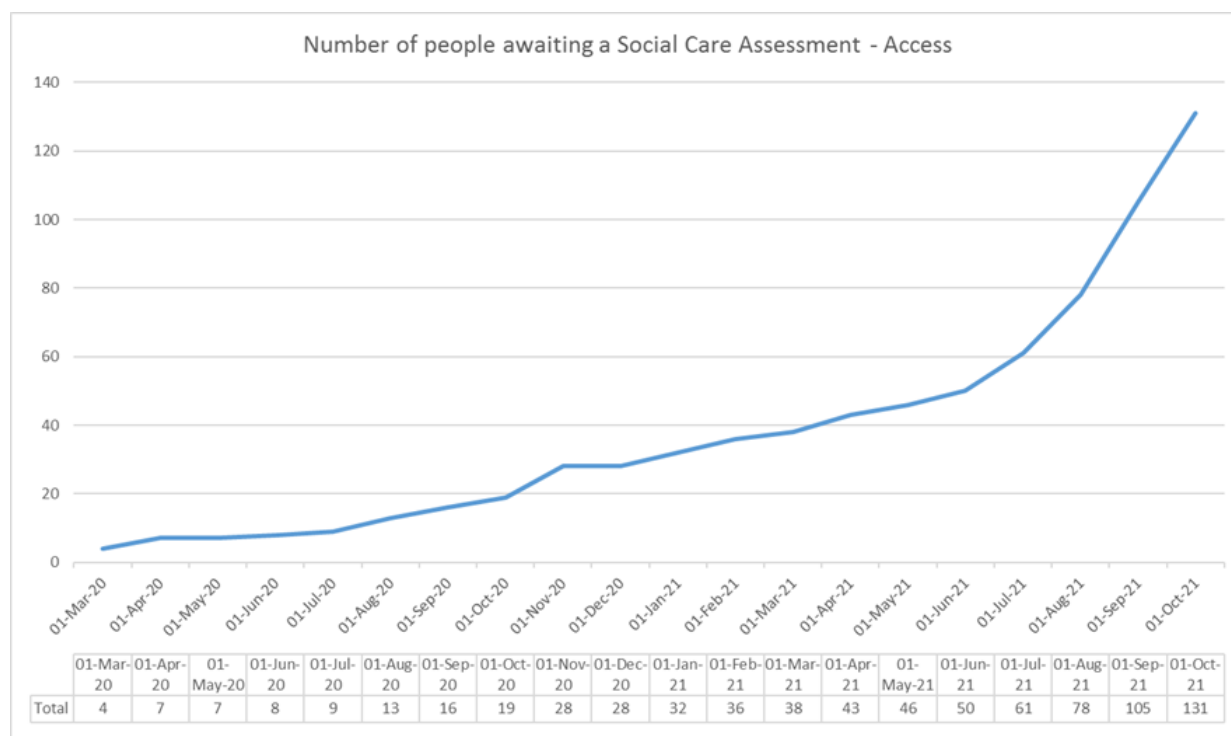
In accordance with Government guidance, day services and routine respite were suspended. Admission to a care home for the purposes of respite was made only in cases of exceptional need.

Across Scotland 731 hospital patients were discharged from hospital to care homes during the period 1st March 2020 -31st May 2020. The context of these discharges was similarly to make available treatment capacity for the anticipated surge of Covid illness. The incidence of Covid in Moray, especially at the early stages of the pandemic, was relatively low. Our care homes had few outbreaks of Covid throughout 20/21 and notably only 3 Covid attributed deaths of care home residents. The stress and strain on both staff and residents of care homes was however very significant, as infection protection and control measures put in place to control the pandemic and protect lives resulted in visiting restrictions, mandatory isolation of residents new to homes and many additional requirements for staff to follow to ensure a safe environment was maintained.

The Scottish Government required each HSCP to establish oversight arrangements for care homes to offer support for these reasons. The Oversight group has representatives from the Director of Public Health, Director of Nursing and Chief Social Worker. Oversight arrangements in Moray have been successful and a high level of engagement maintained since inception. Moray has had no cause for concern about the quality of care provided in care homes throughout the pandemic and have not been

requested by any care home to provide additional staffing to cover staff shortages. I think that the good performance and professionalism of care homes in Moray should be noted.

As the pandemic and the civil responses to this continued throughout 2020 Social Work noted increases in referrals of a particularly complex nature, many where families had been caring for a vulnerable person but no longer felt able to do so. As the number of referrals increased, waiting lists for assessments began. This did not emerge as a significant concern during 20/21, but of note perhaps is the steady build-up of distress in the community. To illustrate, Carefirst records show that there were 4 people awaiting Social Work assessment in March 2020, 9 in July, 28 in November and 38 in March 2021. In contrast the figures for 2021 show 61 in July 21, and 161 in October 2021.



A possible explanation of this is that stress amongst carers and families already high as a result of their experiences in 2020, increased during the second lockdown, and has shown no sign of abating since.

As Health services remobilised, beginning in Autumn 2020, demand, in particular for care at home hours, increased. The pressures of receiving demand from both Community and Hospitals continued through 20/21. This emerged as a critical shortage in the summer of 2021, outside of this reporting period, but important to note, and shows a similar picture to the demand for social work assessment.

Suspended Social Care Services began to remobilise from Autumn 2020. A minimal day care service for learning disability continued to meet the most critical and complex need. Learning Disability Day Services remobilised from October 2020. Limited planned respite resumed in late 2020. Day services for Older People were unable to reopen during 2020/21.

In children's services the Covid Pandemic created the need to implement a number of changes to our systems with urgency. While other support services were closed down, social work across the board had to increase their capacity somewhat and ensure services were delivered without the usual support of partner agencies. Within children's services, services to families, services for children with disabilities and some health services were vastly reduced, increasing the workload for social workers, at a time where there was a lot of anxiety within the workforce about their own health, so this was a

time with many workforce challenges. Our advice to social work staff differed to that of the general advice to the nation of Scotland and this caused confusion and anxiety for staff too. Despite this, improvements were still able to be made and our digital connection with our children, young people and families was accelerated beyond our expectations of what was possible. Within our justice services, this was a much more challenging circumstance, given the restrictions some people had with using digital means of communication and also the restrictions placed on unpaid work services, given self-isolation/ lockdown rules.

Key priorities for recovery within children's services include ensuring we are set up to respond quickly should we have further restrictions and sustain the changes we have made to the day to day work. As with any other social work department, we increased our provision of support to families rather than reduced them and as a priority we will look at staff wellbeing – acknowledging the work the teams have put into trying to ensure children remained in safe environments and families were supported. There was an increase in the need for practical supports as well as a need to respond to the fact that face to face meetings could not take place, as well as trying to support family contact time in a complex and conflicting environment.

We need to ensure we are able to cope with increases in staff sickness going forward as well as the potential impact of Long Covid on staff.

Remobilisation, and the opening of new services to meet the backlog of social care demand was recognised as a key priority by April 2021 in adult services. We prepared for our retendering of care at home services and planned additional homes with support for people with Learning Disability.

The retender for care at home services, was approved by the Integrated Joint Board in March 2021. The retender was for a single external partner to work across Moray, and for the internal service with external partner to adopt an outcome based method of work. This will see care at home practitioners rather than Social Workers agree what level of care at home support is required, and agree with the client and their families how best to deliver this.

Social Workers will subsequently be free to focus on the higher level outcomes that clients and their carers want to achieve. This change supports the recommendations of the Feeley report that was issued in January 2021. To support this change in focus away from care management, Moray are going to engage in a refresh of the three-tier model originally adopted as a Health and Social Care policy in 2014. This refresh will support social workers to consider utilising themselves as a resource for clients and families and will enhance the potential of self-directed support by asking social workers to support their clients to make more creative use of care budgets.

In summary, 2020/21 saw very significant challenges for social care and social work across all client groups. Maintaining staff wellbeing and morale was important throughout this period and continues to be so. It is most important to note though the tremendous efforts and contributions made by all social care and social work staff to support our most vulnerable people in the community.