
Report To:	Inverclyde Integration Joint Board	Date:	27 January 2025
Report By:	Kate Rocks, Chief Officer Inverclyde HSCP	Report No:	IJB/56/2024/CG
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Subject:	Children and Families Service Redesign		

1.0 PURPOSE AND SUMMARY

1.1 ☐ For Decision ☒ For Information/Noting

1.2 Children and Families services in Inverclyde provide a range of supports and services to children, young people, families and carers. The current model of service delivery has adapted over a number of years to changes in demand, including those arising from the Covid-19 pandemic, the continuing impact of the cost-of-living crisis as well as policy and legislative developments in recent years.

1.3 This report provides a summary of activity within a programme of redesign for children and families services in Inverclyde to meet changing needs, promote early help and family support, as well as targeted interventions that balance the needs and risks of children and young people.

2.0 RECOMMENDATIONS

2.1 Members of the Integration Joint Board are asked to note the contents of this report.

Kate Rocks
Chief Officer
Inverclyde Health and Social Care Partnership

3.0 BACKGROUND AND CONTEXT

3.1 Children and Families social work and health services in Inverclyde are provided within a well-established, integrated model of service provision. This has provided opportunities to develop shared ways of working, however the impact of the Covid-19 pandemic on our children, young people, families and communities, as well as the workforce, continues to be evidenced in ongoing high demand for services, alongside the cost-of-living crisis and its significant adverse effect on communities, already struggling with multiple deprivation.

3.2 The changing national policy landscape within which services are provided continues to be shaped by resource pressures and policy developments, including the proposed National Social Work Agency and our commitment to #Keep the Promise.

3.3 Learning from recent years illustrates the compassion and commitment of the workforce as our greatest asset to tackle these challenges. Nevertheless, financial and demand pressures present challenges for the established model of service delivery, balanced with an aspiration for children and young people in Inverclyde. This provides a foundation to develop pathways to access services which can be responsive to a family's unique risks and needs, guided by the following values and objectives:

3.4 Values:

- Listening to children and young people and promoting their participation when we are working with them.
- Focusing on the strengths and assets of families as a starting point to building up a relationship with them.
- Ensuring our children's services workforce understands the impact of trauma and adversity on children and their family's lives and responds in a way that promotes healing and recovery and recognises people's resilience.
- Acknowledging the importance of building strong and meaningful relationships with children, young people and families and working in partnership with the communities they live in.

3.5 Objectives:

(i) Children and young people are safe:

- Work in partnership with parents and carers to keep their children safe.
- Protect our most vulnerable children and young people from harm.

(ii) Care experienced children, young people, and care leavers:

- Deliver on our corporate parenting responsibilities to our care experienced children and young people to keep The Promise.

(iii) Mental and emotional wellbeing of children and young people:

- Respond to the mental and emotional wellbeing needs of children and young people in an appropriate and proportionate way.

(iv) Parents, carers and families:

- Help families and carers give their children the best start in life in a nurturing, safe and stable home environment and sustain this throughout their childhood.

(v) Children with complex additional needs:

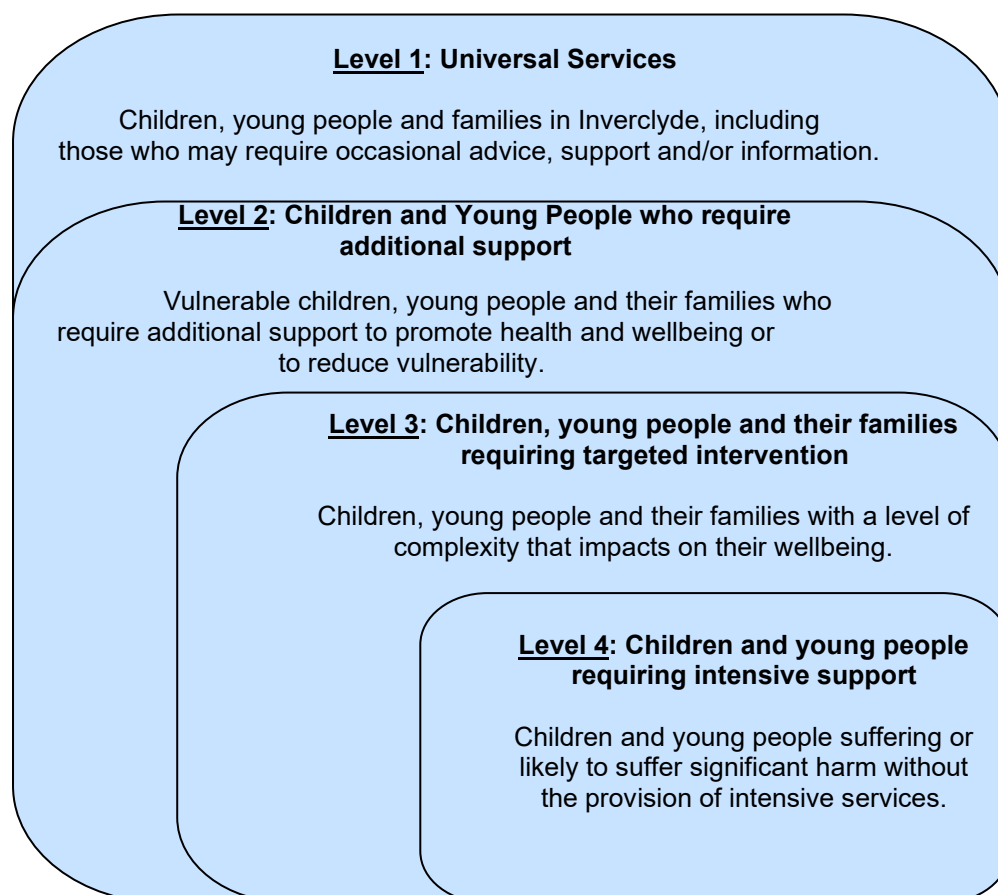
- Ensure children and young people with complex needs are supported to overcome barriers to inclusion at home, school, and in their communities.

- Support young people with their transition into young adulthood.

3.6 Relational practice is integral to this approach, where the focus is on building the capacity of families, so children and young people are sustained with their families, homes and communities wherever possible. Alongside this, a particular priority is enhancing earlier intervention approaches where family capacity can be strengthened within an overall enhanced pathway of assessment, planning, intervention and evaluation. Overall, this approach recognises the capacity of families to change, within the context of strong local communities, which continues to balance the risks and needs of children and young people.

4.0 PROPOSALS

4.1 The model for redesigned children and families' services has been developed around a model of four levels of intervention: the model is based on the work of Pauline Hardiker et al (1991). The diagram below provides a way of thinking through these levels of intervention which are associated to the individual strengths, needs, capacities and risk for children and young people:



4.2 Within this model, the needs of most children and families will be met by universal services. Where some children and young people require additional supports, they will be supported to access these. A smaller number of children and young people, along with their families, who experience greater complexity, will be supported through targeted interventions. Meanwhile, a small number of children and young people with greater complexities would require intensive supports to manage risk, support recover and enhance resilience.

Principles of Redesign

- 4.3 Within the service specification, improving outcomes for children and young people, their families and carers, is underpinned by the following principles:
- 4.4 **Shifting the balance of care:** to reflect differing approaches to intensive supports that reflect the needs of older young people moving towards greater independence and younger children to support them to remain in Inverclyde or return to the local area, reflecting learning from the Promise.
- 4.5 As reported to the previous meeting of the IJB, national benchmarking data illustrated that the care costs faced by Inverclyde are similar to those encountered by other partnerships and fall within national averages. Nevertheless, the average expenditure by Inverclyde over the previous four years on external residential placements has increased from a pre-pandemic level of £1.59 million in 2018-19 to £4.95 million in 2023-24. And represents a significant overspend challenge for the service. There is therefore a need to both increase local capacity so that children can remain in Inverclyde, as well as reducing the future need for placements.
- 4.6 In response, an oversight group, chaired by the Head of Service, including operational social work and finance managers, meets monthly to review progress to support children and young people to return to Inverclyde where this is in their best interests. Progress within the current financial year to reduce the use of external placements, has resulted in a reduction in projected expenditure on external placements by £769,000 to-date. Whilst this activity will continue to identify other opportunities to reduce expenditure, the impact will be mitigated by the need for placements for other children who require to be looked after away from home and will continue to be based on multi-agency assessment of their risks, needs, vulnerabilities and best interests.
- 4.7 In addition, intensive supports across evenings and weekends have been expanded to include young people from the age twelve and on the edges of care as well as supporting young people towards independent living and those who successfully moved on to further education settings outside Inverclyde. The service will further develop our intensive supports to young people including out of hours support, including with third sector partners, such as our partnership with Action for Children's Sidestep Project for young people aged 11-18 years who may be at risk of involvement in serious organised crime, being coerced or manipulated into criminal exploitation.
- 4.8 **Continuing Care:** within the Children and Young People (Scotland) Act 2014, continuing care is defined as where a young person born after 1 April 1999 who is looked after in foster, kinship or residential care chooses to remain in their current care placement until they become 21 years old. When continuing care ends the young person is then eligible for Aftercare support until they turn 26.
- 4.9 Since the last meeting of the IJB, when a detailed overview of children and families placements was provided, further analysis has been undertaken around continuing care, which highlighted expenditure in the past year of around £3.5 million. This is therefore a significant contributory factor to the current children and families overspend (alongside external residential placements), particularly as continuing care is not included in the Scottish Government funding settlement for the provision of social work services.
- 4.10 As reported previously, national benchmarking data illustrates that the average weekly cost per child in Inverclyde is lower than that of the family group and aligns closely with the overall costs in Scotland. More young people are choosing to remain in their current placement, including within our children's houses and fostering placements. This reflects their experiences of being looked after away from home as well as the positive relationships they have developed, however the impact of the duty to provide continuing care means that local capacity for younger children

who require to be looked after continues to be reduced, thereby necessitating use of external placements, thereby compounding the overspend position.

- 4.11 As such, service redesign activity includes the development of our intensive support model for young people and will incorporate existing continuing care, throughcare and after care services for young people as a whole-system approach to supporting positive outcomes for young people as they move towards independence in adulthood.
- 4.12 **Strengthening family capacity:** by developing more diverse, cross-sectoral supports to families at an earlier stage, with third sector partners, families will be strengthened to develop skills to give their children the best start in life and to keep them safe. This will seek to build on an existing early help test of change with a third sector partner where 34 families were supported last year.
- 4.13 Within redesign activity, utilising the Whole Family Wellbeing Fund, the service has focussed on improving how families are identified and supported to access the most appropriate services in relational ways that are timely, sustainable, non-stigmatising and needs-based with a focus on systemic whole family wellbeing. An early help hub has been developed as a pilot, with the aim of improving cross-sectoral, trauma-informed access to services that build capacity in children, young people and families. The hub is being implemented in partnership with Educational Psychology colleagues and a Therapeutic Intervention Worker and an evaluation will inform a model for further roll out.
- 4.14 Other partnership approaches include with Homestart to scale up support to families with at least one child under five years old to access a range of supports including mental health and wellbeing, housing, literacy, nursery engagement and welfare benefits.
- 4.15 A further key partnership is with the Children 1st Family Wellbeing project, co-located with the Request for Assistance (RfA) social work team as the 'front door' to the wider children and families' service. Here, they connect with families to provide additional early help and family support within a relational practice and strengths-based model.
- 4.16 Meanwhile, Family Group Decision Making (FGDM) by Children 1st works with families within a restorative approach, as well as providing financial wellbeing support to maximise their income and address debt concerns. Within the past eight months, nearly £5,000 overall debt has been managed and financial gains of over £200,000 have been achieved for 61 families.
- 4.17 **Increasing fostering households:** where children cannot be looked within their families, we want them to live with nurturing, caring local households. We currently have 26 fostering households registered locally, providing loving homes for 38 children and young people, however there is continuing demand for local placements and nationally, the number of fostering households has reduced by 8% in the last year alone, whilst there were fewer new fostering households approved (178) than in any of the past four years. By shifting the balance of care, we will target increasing our local fostering households within a rebranded, targeted approach with Council and third sector partners.
- 4.18 **Evidence-based approaches:** Inverclyde remains slightly above the Scottish average for the number of children on the child protection register (3 per 1,000 of the population aged 0–15 years compared to the Scottish average of 2.3 per 1,000 of the population aged 0-15 years). In addition to improvement work alongside our partners to support families and carers to access a range of high-quality family and parenting programmes, the service has therefore introduced a whole system 'Signs of Safety and Healing' model.
- 4.19 This is an evidence-based assessment and planning framework that builds on and supports family capacity to provide safe care for children. Benchmarking and assurance activity has

already taken place, and, in November 2024, the first phase of training and implementation commenced. This training will be rolled out across all children & families social workers, managers and will also include key partners in Health, Education, Scottish Children's Reporter Administration and Police Scotland.

- 4.20 **Workforce development:** within this model, new methods of working, including evidence-based practice approaches, will provide opportunities for staff to develop skills and expertise to that builds on established strengths of compassion and kindness, alongside strong community assets. A current example is the implementation of the Lens Project, supported by HSCP transformation funding, where teams developed ideas into action that are making a significant, positive change to the experience of children, young people and families, including creation of the Practice Pad, where young people can develop independent living skills at an earlier stage before they take on a tenancy. In addition, the 'Home from Home' is about to be launched, where families will have an improved environment for family time, where relationships can be strengthened, and professional assessments can be strengthened.
- 4.21 The capacity and experience of our workforce, however, remains key to the redesign of children and families' services. As reported previously, national challenges around the recruitment and retention of social workers continue to be experienced, however within Inverclyde, the redesign will continue to be supported by several initiatives, led by the HSCP learning and development team, to support the recruitment and retention of staff, including:
- **Grow Our Own:** so far, nine paraprofessional staff so far have secured support to obtain a social work qualification over the next 3-4 years.
 - **MSc financial support:** offering financial incentives for candidates who completed their MSc qualification, where the HSCP has reimbursed the final year of fees.
 - **Newly qualified social worker supported year:** Inverclyde is now in the third year of this early implementation pilot in advance of a national launch of the scheme. Local operating procedures have been developed to support all NQSWs and supervisors throughout this supported year as well as creating a NQSW Continuous Professional Learning toolkit, including guidance regarding mandatory learning requirements.

Governance

- 4.22 The above illustrates a number of key changes already being taken forward within the model for redesigned children and families services, however the financial capacity to deliver savings against the current overspend on external residential placements is a core challenge. Governance and oversight by the Head of Service and Chief Finance Officer has been outlined at 4.6, above. This will inform a wider set of targets across the next two years to continue to reduce the expenditure on external placements, as part of a costed model that invests in evidence-based programmes, increases the number of local fostering households and enables the development of intensive supports to families and to young people.
- 4.23 In addition, strengthening governance, oversight and leadership will also be an important aspect of how we move ahead. As such, the realignment of statutory Chief Social Work Officer duties in early 2025 to a distinct, strategic post across the HSCP will provide improved governance of statutory social work services, strategic planning and performance. This will strengthen the development and implementation of service redesign, particularly with the recent appointment of a dedicated Head of Service post for Children, Families and Justice service.
- 4.24 As reflected above, redesigning local services is essential to improve outcomes for our children and young people. Implementing evidence-based programmes to improve assessment and

interventions, intensive, relational support to build family capacity and growing local provision will enable more children to grow up within their families or in a homely environment in their own community, with less need for external community and residential placements. The impact of service redesign will continually be reviewed and assessed from both a financial perspective but also, most importantly, in terms of the impact on the children, young people and families cared for and supported by children and families' services.

5.0 IMPLICATIONS

5.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO
Financial		X
Legal/Risk		X
Human Resources		X
Strategic Plan Priorities	X	
Equalities, Fairer Scotland Duty & Children and Young People		X
Clinical or Care Governance		X
National Wellbeing Outcomes		X
Environmental & Sustainability		X
Data Protection		X

5.2 Finance

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report	Virement From	Other Comments
N/A					

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact	Virement From (If Applicable)	Other Comments
N/A					

5.3 Legal/Risk

N/A

5.4 Human Resources

N/A

5.5 Strategic Plan Priorities

Activity to develop local placement provision will support the progression of the HSCP's strategic objectives.

5.6 Equalities

(a) Equalities

This report has been considered under the Corporate Equalities Impact Assessment (EqIA) process with the following outcome:

	YES – Assessed as relevant and an EqIA is required.
x	NO – This report does not introduce a new policy, function or strategy or recommend a substantive change to an existing policy, function or strategy. Therefore, assessed as not relevant and no EqIA is required. Provide any other relevant reasons why an EqIA is not necessary/screening statement.

(b) Equality Outcomes

How does this report address our Equality Outcomes?

Equalities Outcome	Implications
We have improved our knowledge of the local population who identify as belonging to protected groups and have a better understanding of the challenges they face.	Protects characteristics
Children and Young People who are at risk due to local inequalities, are identified early and supported to achieve positive health outcomes.	Protects communities
Inverclyde's most vulnerable and often excluded people are supported to be active and respected members of their community.	Promotes safety
People that are New to Scotland, through resettlement or asylum, who make Inverclyde their home, feel welcomed, are safe, and able to access the HSCP services they may need.	Promotes inclusion

(c) Fairer Scotland Duty

If this report affects or proposes any major strategic decision:-

Has there been active consideration of how this report's recommendations reduce inequalities of outcome?

	YES – A written statement showing how this report's recommendations reduce inequalities of outcome caused by socio-economic disadvantage has been completed.
x	NO – Assessed as not relevant under the Fairer Scotland Duty for the following reasons: Provide reasons why the report has been assessed as not relevant.

(d) **Children and Young People**

Has a Children's Rights and Wellbeing Impact Assessment been carried out?

	YES – Assessed as relevant and a CRWIA is required.
x	NO – Assessed as not relevant as this report does not involve a new policy, function or strategy or recommends a substantive change to an existing policy, function or strategy which will have an impact on children's rights.

5.7 Clinical or Care Governance

N/A

5.8 National Wellbeing Outcomes

How does this report support delivery of the National Wellbeing Outcomes?

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	Supports wellbeing
People, including those with disabilities or long-term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community	Promotes independence
People who use health and social care services have positive experiences of those services, and have their dignity respected.	Promotes positive experiences
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	Improves quality of life
Health and social care services contribute to reducing health inequalities.	Reduces inequalities
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	Supports people to look after their own health
People using health and social care services are safe from harm.	Keeps people safe
People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	Engages with our community
Resources are used effectively in the provision of health and social care services.	Makes best use of resources

5.9 Environmental/Sustainability

Summarise any environmental / climate change impacts which relate to this report.

Has a Strategic Environmental Assessment been carried out?

	YES – assessed as relevant and a Strategic Environmental Assessment is required.
x	NO – This report does not propose or seek approval for a plan, policy, programme, strategy or document which is like to have significant environmental effects, if implemented.

5.10 Data Protection

Has a Data Protection Impact Assessment been carried out?

	YES – This report involves data processing which may result in a high risk to the rights and freedoms of individuals.
x	NO – Assessed as not relevant as this report does not involve data processing which may result in a high risk to the rights and freedoms of individuals.

6.0 DIRECTIONS

6.1	Direction Required to Council, Health Board or Both	Direction to:	
		1. No Direction Required	x
		2. Inverclyde Council	
		3. NHS Greater Glasgow & Clyde (GG&C)	
		4. Inverclyde Council and NHS GG&C	

7.0 CONSULTATION

- 7.1 Consultation with staff, partners and families will continue to inform the development of the service specification and redesign activity.

8.0 BACKGROUND PAPERS

- 8.1 None.