

## **Item: 11**

**Policy and Resources Committee: 20 September 2022.**

**Chief Social Work Officer's Annual Report.**

**Report by Chief Social Work Officer.**

### **1. Purpose of Report**

To present the Chief Social Work Officer's annual report for 2021/22.

### **2. Recommendations**

The Committee is invited to scrutinise:

#### **2.1.**

The Chief Social Work Officer's Annual Report for 2021/22, attached as Appendix 1 to this report, in order to obtain assurance that social work and social care services are being delivered to an acceptable standard locally.

### **3. Background**

Section 45 of the Local Government etc. (Scotland) Act 1994 requires each local authority to have a professionally qualified Chief Social Work Officer (CSWO). The role is to ensure the provision of appropriate professional advice in the discharge of a local authority's statutory functions as described in Section 5 (1B) of the Social Work (Scotland) Act 1968. The role covers the full range of a local authority's social work functions to provide a focus for professional leadership and governance. The role provides strategic and professional leadership in the delivery of social work services. The Public Bodies (Joint Working) (Scotland) Act 2014 provides for the delegation of certain social work functions by a local authority to an integration authority.

### **4. Delivery of the Role in the Orkney Context**

#### **4.1.**

The Orkney Health and Social Care Partnership integrates services of the Council and the National Health Service (NHS) to provide the best possible community health and care services to residents. Professional leadership roles are required in specific areas including the CSWO, a role vested in a Senior Officer who is a Social Worker within the management structure, in addition to their general management duties. The role of the CSWO is defined in statute and is a "proper officer" in relation to the Council's Social Work function.

## **4.2.**

The CSWO is responsible for specific decisions and will discharge their responsibilities under the Social Work (Scotland) Act 1968 and take the final decision on a range of Social Work matters including the Children (Scotland) Act 1995, the Secure Accommodation (Scotland) Regulations 1996, the Mental Health (Care and Treatment) (Scotland) Act 2003, and the Adults with Incapacity (Scotland) Act 2007. These decisions relate to:

- Adoption.
- Secure Accommodation for Children.
- Emergency Movement of Accommodated Children.
- Certain Community Orders imposed by the Courts on Offenders.
- Guardianship.
- Adults with Incapacity.
- Other statutory decisions required from time to time.

## **4.3.**

The Scottish Government requires the CSWO to produce an Annual Report of service quality and performance and key challenges, including the impact of COVID-19.

# **5. Annual Report**

## **5.1.**

A report on activity related to the role of CSWO for 2021/22 is attached at Appendix 1.

## **5.2.**

The CSWO Annual Report provides a range of activity reporting in respect of the following:

- Children's and Adults' Social Work Services, including Child and Adult Protection, Older People, Disabilities, Care at Home, Workforce.
- Resources.
- Budget.
- Staff Development.
- Implications of COVID-19.

## **5.3.**

The single most significant aspect of the Annual Report, aside from the implications and impact of COVID-19, is the second Progress Review published in May 2022 following the Joint Inspection of Children and Young People in need of Care and Protection in Orkney which took place from August to October 2019. The work on which the Progress Review is based is fully inclusive of this reporting period albeit

publication of the Progress Review report falls within the next reporting period 2022/23.

### **5.3.1.**

The first Progress Review recognised that significant progress has been made, while having much work still to do. It summarised that, despite the initial delay where opportunity for change and improvement was potentially lost, the Care Inspectorate is confident partners have subsequently taken the findings of the Joint Inspection in Orkney very seriously.

### **5.3.2.**

Chief Officers, Senior Leaders and Partnership representatives met in person, with the Care Inspectors to discuss the findings of the second Progress Review from which there were five areas of positive note:

- Leaders were working hard to address the findings of the full inspection and the first progress review.
- Membership of key groups driving improvements had been refreshed and additional capacity and resources had been identified to support change.
- Young people's views were beginning to influence strategic developments.
- Practitioners were similarly committed to improving their own practice and outcomes for the children and families with whom they work.
- There was compelling evidence that what the Partnership has accomplished to date is resulting in increased safety for children and there are early signs of increasing confidence from families.

### **5.3.3.**

There were eight areas of development all of which had been included in the pre-Progress Review Children's Services Partnership Position Statement:

- Develop and implement a clear succession plan, particularly following the anticipated departure of key influential leaders, that ensures the long-term sustainability of the improvements that have been made.
- Sustain the resources needed to implement further changes and improvements against the challenging financial context facing leaders, local authorities, and partnerships.
- Develop and implement a workforce plan that addresses both recruitment and retention issues, reviews multi-agency training, and develops support and supervision for staff.
- Refine the improvement plan to incorporate measurable service developments, so that staff have a clear investment in the plan and are able to see the difference they are making at both an individual and at an inter-agency collaborative level.
- Resolve the replacement or improvement of a management information system within health and social care that reduces barriers to information sharing, improves reporting of outcomes and is in line with staff professional codes of practice and legal obligations.

- Further develop the involvement of children and young people and families in their own plans and processes, such as Team Around the Child (TAC) meetings or reviews, as well as in other groups and participation opportunities.
- Understand children, young people and families' satisfaction with the service they are receiving, including the outcome for them and its effect on their lives, and use this knowledge to refine service delivery.
- Building on what has been achieved, and along with the third sector, create a service culture in which children, young people and families routinely participate and their views help to shape service development.

#### **5.3.4.**

There are no plans for a further Progress Review and the Care Inspectorate require only a further Position Statement at the end of March 2023.

#### **5.3.5.**

It should be noted that the CSWO Annual Report covers the period 1 April 2021 to 31 March 2022 and does not include current progress on the Improvement Plan, which is reported separately to the Integration Joint Board, the Council and NHS Orkney.

#### **5.4.**

The Committee is invited to scrutinise the Annual Report in order to obtain assurance that social work and social care services are being delivered to an acceptable standard locally.

### **6. Human Resource Implications**

The Annual Report from the CSWO details several staffing and workforce challenges which it will be important to address in due course to ensure and safeguard the quality of service provision.

### **7. Corporate Governance**

This report relates to the Council complying with governance and scrutiny and therefore does not directly support and contribute to improved outcomes for communities as outlined in the Council Plan and the Local Outcomes Improvement Plan.

### **8. Financial Implications**

#### **8.1.**

The CSWO discharges their obligations within the funding made available by the Council.

## **8.2.**

There are no immediate financial implications arising from this report, although the Annual Report does refer to the significant and increasing financial challenges facing the Council and other public sector partners in delivering the volume and quality of services required, particularly with an older population that is increasing faster than the national average.

## **8.3.**

Section 5 of the Annual Report covers the budget for the Integration Joint Board, the main heads of expenditure and financial outlook from increasing demographic and other pressures.

## **9. Legal Aspects**

There are no immediate legal implications arising from this report.

## **10. Contact Officer**

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## **11. Appendix**

Appendix 1: Chief Social Work Officer Annual Report 2021/22.

**CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022****1. Governance and Accountability****1.1. Introduction**

I am pleased to present the Chief Social Work Officer's (CSWO) annual report for Orkney Islands Council, for the reporting period 1 April 2021 to 31 March 2022. Due to the publication of findings and important developments, which sit outside this reporting time frame, mention is made of specific work related to the Children's Services' partnership improvement work, which took place during this reporting period. The published findings fall just outside the reporting period and are significant enough to be included.

The CSWO report provides an overview of Social Work and Social Care services, and information on statutory decisions made by the CSWO on behalf of the Council. The role of CSWO has been held by me since June 2020.

For the previous three years there has been a reduced template to enable CSWOs to present shortened reports for local governance structures due to the workload implications caused by the COVID-19 pandemic. This ensures local reporting arrangements continue whilst having due regard to current pressures being experienced across the sector.

**1.2. The Role of the CSWO**

The role of the CSWO was established to ensure provision of professional advice in the discharge of a Local Authority's statutory functions as described in Section 5 (1B) of the Social Work (Scotland) Act 1968. It is expected that the CSWO will undertake the role across the full range of a Local Authority's Social Work functions to provide a focus for professional leadership and governance within these functions. The role provides strategic and professional leadership in the delivery of Social Work services.

There are also certain functions conferred by legislation directly on the CSWO by name and specific statutory responsibilities are discharged by the CSWO, mainly to decisions about the curtailment of individual freedom, the protection of individuals, and the public. This includes, for example, children in secure accommodation and welfare guardianship for adults. These decisions must be made by the CSWO or by a senior, professionally qualified Social Worker, to whom the responsibility has been delegated by the CSWO and for which the CSWO remains accountable.

In May 1995 the then Scottish Office explicitly recognised that the need for the role was driven by "the particular responsibilities which fall on Social Work services in that they affect personal lives, individual rights and liberties to an extent that other Local Authority services do not" (Circular: SWSG2/1995). Every Local Authority must have a professionally qualified CSWO as set out in Section 45 of the Local Government etc. (Scotland) Act 1994. The qualifications are set down in Regulations which state the CSWO must be registered as a Social Worker with the Scottish Social Services Council (SSSC).

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

The overall aim of the CSWO role is to ensure Orkney Islands Council and the Orkney Health and Social Care Partnership, receive effective, professional advice and guidance in the provision of all Social Work services, whether provided directly, in partnership with other agencies, or purchased on behalf of the Local Authority. The CSWO has a responsibility for overall performance improvement and the identification, management, and reporting of corporate risks as they relate to Social Work and Social Care services.

To fulfil these responsibilities, the CSWO has direct access to Elected Members, reporting directly to the Chief Officer, Orkney Health and Social Care Partnership; and wider through the Integration Joint Board; the full Council as required; has direct links to the Chief Executive of the Council and attends the Chief Officer Group (Public Protection).

Elected Members have important leadership and scrutiny roles in Councils and must assure themselves that the quality of service is maintained, and risks are managed effectively. The CSWO provides professional leadership and promotes values and standards of professional practice, ensuring that only Registered Social Workers undertake those functions reserved in legislation and meet the requirements of their regulatory body and the SSSC Codes of Practice.

Any Social Worker or Social Care professional may approach the CSWO for advice. Integration Authorities: The Public Bodies (Joint Working) (Scotland) Act 2014 provides for the delegation of certain Social Work functions by a Local Authority to an Integration Authority e.g., a Health and Social Care Partnership.

In 2016, Audit Scotland noted in its report on Social Work in Scotland, that the role of the CSWO has become increasingly complex with the introduction of Health and Social Care Partnerships. The CSWO's responsibilities in relation to Local Authority Social Work functions continue to apply to functions which are being delivered by other bodies under integration arrangements. The responsibility for appointing a CSWO cannot be delegated and must be exercised directly by the Local Authority itself.

The CSWO is a member of:

- The Integration Joint Board, comprising members nominated and appointed by NHS Orkney and Orkney Islands Council (the CSWO is a co-opted non-voting professional advisor).
- Orkney Health and Social Care Partnership's Senior Management Team comprising the Chief Officer and Senior Managers responsible for delegated health and care services.
- The Chief Officer Group (COG) as an adviser for Public Protection. COG provides leadership, governance and ensures local accountability, for all aspects of public protection in the areas of child protection, adult protection, offender management (Multi-Agency Public Protection Arrangements (MAPPA) processes for sexual and violent offenders), including Multi-Agency Risk Assessment Conference (MARAC) processes in respect of risks of domestic abuse. Linking to

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

Orkney's community planning partnership, the Chief Officer Group is responsible to Elected Members, NHS Board Members and Scottish Ministers.

### 2. Service Quality and Performance

#### 2.1. The Social Work Profession

Social Workers are required to work in the context of legislation, organisational rules, service structures, and hierarchies including Health and Social Care Partnerships. Within this context Social Workers retain significant freedom in their work.

The ways in which Social Workers relate to organisational rules and structures, is a key dimension for them in understanding the discretion and professional scope they hold, to make the best possible decisions in the best interests of the people they serve, often our most vulnerable and marginalised children, adults, and older people.

#### 2.2 Cross Cutting Matters

Improving our approach and practice in public protection is the single most important aspect of cross cutting work across the Social Work service and with our community planning partners in children's and adult's services. Self-evaluation and improvement work has been further progressed during this reporting period.

Recruitment has been a cross cutting matter which is covered in detail under section 4 'Island and Rural Social Work – Key Challenges' below.

There have been issues across Social Work services with the *systems support* resource, of the Social Work management information system, presenting challenges with information management, data collection and analysis.

Service Manager posts were reviewed during the previous reporting period for responsibilities and grading purposes and were up-graded accordingly, in the first quarter of this reporting period.

Following a comprehensive review of Orkney Island Council's structure, significant additional resources were decided upon for Social Work Services amongst other things, which will be fully covered in the next reporting period.

#### 2.3. Adult Social Work

Adult Social Work Services includes adult support and protection, mental health and treatment, services for older people and justice services amongst other things. Orkney Islands Council undertook a substantial review of services and structure throughout much of the reporting period. Proposals were presented to the Council for significant increased resources across all council services including Adult Social Work services which shall be fully addressed in the next reporting period.

#### 2.4. Adult Protection

Adult Support and Protection (ASP) include the:



## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

- Complex and interconnected nature of harm.
- Value of skilled and open-minded practitioners.
- Need to build and maintain respectful relationships.
- Understanding that thresholds are not as clear cut as we might like them to be.
- Realisation that *protecting* means supporting, consistent high quality inter-agency work.
- Recognition that national opportunities for justice, through the court, might still be limited.

There has been continued focus on adult support and protection in this reporting period. The Service Manager (Adult and Learning Disability Social Work) has been working closely with an external Social Work Consultant; the Chair of Orkney Public Protection Committee; the Lead Officer, Public Protection; the Lead Nurse, Public Protection; the Head of Health and Community Care; and the CSWO, as required, on a range of adult support and protection matters.

Additionally, the Quality Assurance Adult Protection Sub-committee considered several Initial Case Reviews (ICRs) for adults. The child protection methodology of Learning Reviews helped guide the process of these adult protection ICRs.

Orkney Public Protection Committee has led on several training and development events, starting with the relaunch of Adult Support and Protection (ASP) Procedures in September 2021 by the Chief Officers Group, followed by a series of events for refresh and introduction to adult protection, some 160 members of staff from across statutory and voluntary agencies have attended and the series continues into October 2022. Specific training was provided to Council Officers and colleagues in Health and Police Scotland, and a course on Defensible Decision Making was provided. Two courses on self-harm, self-neglect and service refusal have been provided. A forum for Council Officers and key colleagues in Health and Police Scotland is being developed. Training on Chronologies of Significant Events took place in January 2022.

The initial course on self-harm and hoarding was joined by colleagues from Western Isles (6) and Shetland (63) with a total of 122 attending, and it is hoped further work will progress with this multi-agency mix of attendance. Further courses on Chairing Case Conferences, older people's harm, trafficking, and financial harm are planned. Further online training for providers and for staff delivering services are planned for later in 2022.

A development day with a focus on 'culture and change' was led for both Adult Protection and Child Protection by the Chief Officers Group. Outcomes from the day have been incorporated into the Adult Protection Improvement Plan. The Improvement Plan became operational and formed the basis of continual service improvement and review activity, supported by the Learning and Development, and Quality Assurance, Sub-committees of Orkney Public Protection Committee.

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

In 2021/22 there were 188 Adult Protection/Police Vulnerable Person Database (VPD) referrals, two less than the 2020/21 reporting period, both periods being a significant increase from the 2019/20 accounting period, possibly related to greater public awareness and an increased focus on service management within Adult Social Work services.

### 2.5. Services provided by Mental Health Officers

As per the previous report, it is noted that with partners in Health, Social Care, Housing, Employment and others, Social Workers play a key role in identifying and accessing local services which meet people's needs at an early stage, helping to improve overall mental health outcomes and reducing the risk of crisis and more costly demands on acute health services.

Due to restrictions of activity related to COVID-19 lockdown measures in 2019/20 and during a large part of 2020/21, there was an anticipated impact on the amount of Mental Health Officer activity. Towards the end of the current reporting period, we have seen an increase in other Mental Health Officer assessment activity due to easing of lockdown measures.

Table 1 below shows activity levels for Guardianship and Intervention from 2018-2022.

**Table 1: Intervention and Guardianship Orders 2018-2022**

Type of Order/Intervention (Guardianship)	2018/19	2019/20	2020/21	2021/22
New welfare guardianship orders where the CSWO is the Guardian.	*	*	6	*
<b>Total</b> orders for which the CSWO is the Guardian.	12	15	22	17
Number of assessments made by Mental Health Officers in relation to applications for welfare guardianship including private and CSWO applications.	6	40	22	16
Number of private Guardians being supervised by Officers of the Local Authority.	95	63	32	54

Note: \*indicates fewer than five.

Compulsory Treatment Orders are intended to create individual measures for the care and treatment of a patient who requires a degree of compulsion to accept these, done by means of a care plan which may specify detention.

Short Term detentions follow an assessment undertaken by a Psychiatrist, to which an MHO must consent, to secure the immediate safety of a patient and lasts 28 days.

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

Emergency detentions are intended to secure the immediate safety of a patient when there is no Psychiatrist available to undertake an assessment for short term detention. They are undertaken by Hospital Doctors or GPs, with consultation with a MHO. These last 72 hours with no right of appeal and generally it is not the preferred option. There were 16 adults detained in this reporting period, 6 females and 10 males, all of whom were transferred to Royal Cornhill Hospital, Aberdeen.

Table 2 below provides activity levels for mental health intervention and orders from 2018-2022.

**Table 2: Intervention and Mental Health Orders 2018-2022**

Type of Order and Intervention	2018/19	2019/20	2020/21	2021/22
Mental health Compulsory Treatment	*	*	6	*
Short-term detentions	*	*	*	*
Emergency detentions	*	7	7	16
Other Mental Health Officer assessments (those not leading to detentions, assessments to extend or vary orders, and social circumstances reports)	5	7	23	62
Mental Health Tribunals	*	*	6	*

Note: \*indicates fewer than five.

### 2.6. Mental Health Officer Activity

Consistently with the previous reporting period, approximately 100 people required support by MHOs within the Adult Social Work staff complement, during the reporting period. There are 4 MHOs including within the reporting period who provide a service 24 hours per day, 365 days per year, in addition to their substantive posts. People who did not require a MHO, were supported by a Social Worker from the Community Mental Health Team.

### 2.7. Adult Social Work Staffing Complement

- 1 FTE Service Manager, Adult and Learning Disability Services.
- 1 FTE Team Manager (Adults).
- 1 FTE Team Manager (Learning Disability).
- 8.4 FTE Social Workers (Adults).
- 2 FTE Social Workers (Learning Disability).
- 2 FTE Social Workers (Community Mental Health Team).
- 1 FTE Support Worker = 2 Part-time posts.
- 2.5 FTE Administration Support.

During the reporting period, there were significant gaps in the two Team Manager posts in Adults and Learning Disability.

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

### 2.8. Criminal Justice

Justice Services continued to deliver on their statutory responsibilities during the reporting year. Duties included preparation of court reports and risk assessments, to aid the Court in making effective sentencing decisions; reducing re-offending and protecting the public through supervision and management of offenders subject to community-based disposals; rehabilitation of offenders subject to custodial sentences; and supporting people subject to Diversion from Prosecution.

The Justice Team completed various reports during the reporting period, which is considered to be representative of the size and nature of previous justice activity in Orkney prior to 2019/20 and the global pandemic.

There was a total of 59 reports completed, the subjects of which comprised 50 males and 8 females, which resulted in 28 Community Payback Orders. Table 3 below provides details of Justice Social Work activity from 2018-2022.

**Table 3: Justice Activity and Child Protection Orders from 2018-2022**

<b>Justice Activity</b>	<b>2018/19</b>	<b>2019/20</b>	<b>2020/21</b>	<b>2021/22</b>
Social Work Court Reports	55	82	30	55
Supplementary Reports and Review	5	*	9	*
Home Leave and Home Circumstances	6	*	*	*
<b>Totals:</b>	<b>66</b>	<b>89</b>	<b>41</b>	<b>59</b>
<b>Community Payback Orders (CPOs)</b>	<b>2018/19</b>	<b>2019/20</b>	<b>2020/21</b>	<b>2021/22</b>
CPOs imposed by the Court	46	59	30	28

Note: \* indicates fewer than five.

The figures for 2021/22 indicate a rise of 16.5% in the number of Social Work Court Reports completed from the previous year. This was an expected rise as the Courts progressed a backlog of cases accrued during the lockdown period in 2020/21, whilst simultaneously dealing with new cases. It is anticipated this trend will continue, at least in the immediate term, as the Courts continue to deal with their backlog with consequential concentrated, increased demand on Justice Services.

### 2.9. Justice Staffing Complement:

- 1 FTE Service Manager.
- 2 FTE Qualified Social Workers.
- 1 FTE Community Placement Supervisor (Job Share).
- 0.17 Part-time Criminal Justice Assistant.
- 1.5 FTE Administration Assistants.

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

Following successful recruitment, one of the FTE Qualified Social Worker posts was filled during the last quarter of this reporting period. This post had previously been filled on a one day per week basis as per a secondment type arrangement.

Due to recruitment challenges for a period of 5 months, the FTE Clerical Assistant post remained unfilled which, like all vacancies, presented an operational challenge for the full and effective delivery of service, which impacted on management time due to cover requirements. The 0.5 FTE Administration Assistant post remained unfilled in this reporting period.

### **2.10. Children and Families Social Work**

Children and Families Social Work incorporates child protection, fostering, adoption and kinship, residential childcare, continuing care, after care, children with disabilities, children's services planning including child poverty action work, amongst other things.

There has been a range of developments in Children and Families Social Work taking place or being developed including:

- Continued work on the extensive Improvement Plan for children in need of care and protection.
- Learning Reviews.
- Planning for and participation in the Care Inspectorate Second Progress Review.
- Partnership self-evaluation activity.
- Staff recruitment including Social Workers and Managers.
- Delivery of training and development.
- Getting it Right planning and development.
- Production of practice procedures and guidance.
- Engagement in the process for the introduction of the new national Joint Investigative Interviewing model.
- Preparation for the introduction of the national Child Protection Guidance 2021.

### **2.11. Child Protection**

As per the two preceding reporting periods, child protection has remained the top priority in Orkney children's services partnership with further development of procedures, protocols, training and development, and continual self-evaluation.

Child Protection activity levels have not fluctuated significantly during the reporting period when considered against the size of our partnership area. However, there was a notable increase in new registrations from six in 2020/21 to 16 in 2021/22 related to the size of family compositions. Registration and De-registration rates remained very close during these two reporting periods. Table 4 below provides Child Protection registration trends from 2019-2022.

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

**Table 4: Registration Trends from 2019-2022**

During the Year	2019/20	2020/21	2021/22
Child Protection Registrations	18	18	21
Children De-registered	5	11	10
New Registrations	14	6	16

### 2.12. Looked After Children

Looked After Children activity levels have seen fluctuations in the number of children Looked After Away from Home between 2019/20 and 2020/22. They went down from 29 to 21, in 2020/21, rising again to 39 in 2021/22.

Looked After at Home figures saw a different pattern, albeit with less numbers, rising from 10 to 15 in 2020/21 and falling slightly again to 13 in 2021/22.

The rise in the number of Children Looked After Away from Home may well be partly related to the impact of COVID-19, and national lockdown measures including school closures.

As we have started to emerge from lockdown measures and partnership working has been improving, we have seen an increasing number of children being looked after away from home which generally signifies the degree of care required in the community away from the immediate family.

Initially COVID-19 related legislation from March 2020 meant only those Hearings required for urgent and immediate protection of a child would be able to take place, and again, now these measures no longer strictly apply we have seen the number of Children Looked After Away from Home increase.

Table 5 below shows Looked After Child levels from 2019-2022.

**Table 5: Trends from 2019-2022**

During the Year	2019/20	2020/21	2021/22
Looked After at home	10	15	13
Looked After Away from Home	29	21	39
<b>Totals</b>	39	36	52

From 2019/20 to 2021/22 we have seen a notable see saw effect on the number of children referred to the Reporter and the number of Children's Hearings held. The number of children referred to the Reporter decreased from 57 to 43 from 2019/20 to 2020/21 and increased again to 69 from 2020/21 to 2021/22.

Equally the number of Children's Hearings held decreased from 83 to 59 from 2019/20 to 2020/21 and increased again to 96 in 2021/22. Table 6 below provides details of referrals to the Reporter, and Children's Hearings held from 2019-2022.

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

**Table 6: Children Referred to Reporter from 2019-2021**

<b>Referrals and Children's Hearings</b>	<b>2019/20</b>	<b>2020/21</b>	<b>2021/22</b>
<b>No. Children Referred to Reporter</b>	57	43	69
<b>No. Children's Hearings Held</b>	83	59	96

### **2.13. Children and Families Staffing Complement**

- 1 FTE Service Manager.
- 1 FTE Operational Manager.
- 7.2 FTE Children and Families Social Workers.
- 1 FTE Social Work Assistant.
- 1 FTE Operational Manager (Fostering, Adoption and Kinship).
- 4 FTE Social Workers (Fostering, Adoption and Kinship).
- 1 FTE Senior Family Support Work.
- 1.9 FTE Family Support Workers.
- 1 FTE Attainment Funded Family Support Worker.
- 4 FTE Administration Assistants (Child Protection, Fostering, Adoption and Kinship).

As part of the Orkney Islands Council review of services and structure, throughout much of the reporting period, a substantial increased resource for Children and Families Social Work Services was agreed including:

- An additional Service Manager (Authority Wide Services).
- 2 additional Team Managers (1 Fieldwork and Authority Wide Services, and 1 Independent Review Officer).
- 2 additional Social Workers.

These additional resources were approved by Council directly prior to local Council Elections in May 2022. Work was progressed on job remits and evaluations, and progress on appointments will be reported in the next CSWO reporting period.

There have continued to be significant, and at times, prolonged gaps in Children and Families staffing, including the Operational Manager, Social Workers across the service, Family Support Workers, and administrative staff.

Locum staff have been employed to ensure the functioning of the service and statutory duties for Child Protection could be met. There was significant staff turnover related to sickness absence, people leaving, short term contracts, retirement, and recruitment challenges.

This has meant, amongst other things, significant challenges associated with workforce stability and the operational delivery of Children and Families Social Work services. These issues were reflected in the Care Inspectorate inspection of 2019 (published

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

February 2020) and the two follow up Progress Reviews of August 2021 and May 2022 respectively.

### **2.14. Out of Hours Service**

The significant challenges with the provision of Out of Hours Social Work services due to staff gaps and absence noted in the previous reporting period have continued into the current period. Vacancy levels have again impacted on the number of eligible staff available to undertake Out of Hours duties, placing an additional strain on the service.

The Working Group formed to consider some of the possible underlying reasons, to make recommendations for developing the service was overtaken by new arrangements. The Chief Officer, Orkney Health and Social Care Partnership, set up new arrangements to review and develop several service areas including Out of Hours Social Work services which shall be covered in the next reporting period.

### **2.15. Partnership Initiatives**

The Orkney Emotional Wellbeing Service led by Action for Children, a national charity supporting vulnerable children, started on 1 April 2021. Engagement followed with different pupil year groups from Kirkwall Grammar School and Stromness Academy, to hear what young people want, and key partners, to establish a good working foundation based on professional relationships.

There is now an established relationship with guidance staff within the secondary schools and within some of the primary schools on the mainland and outer isles.

Action for Children delivered mental health and wellbeing training 'Bouncing Back' sessions to over 200 pupils in Kirkwall Grammar School and Stromness Academy. Plans are well developed for first year pupils to receive Bouncing Back and 'The Blues' programme for older pupils which shall be covered in the next reporting period.

The service seeks to support up to 40 people annually ranging from 8 to 18 years of age, while the whole family approach seeks to ensure the service is 'Getting it Right' for the young person referred and their brothers and sisters. Referrals continue to come from Education Services, Social Work Services and School Nurses. Currently the service is supporting 16 young people from 10 families (snapshot).

Action for Children continue to support the roll out of the Caring for Me Assessment Toolkit (Neglect Toolkit) which is embedded in the Children's Service Improvement Plan as one of five priority action areas.

The Action for Children and the Orkney Health and Social Care Partnership joint grant funding Partnership Drugs Initiative (PDI) for Family Practitioner work (1 FTE and 1 x 17 hours post), focused on vulnerable children, young people and families affected by alcohol or drug use. The service provided youth work in Stromness, on Fridays for 20 young people in partnership with Community Learning and Development staff. There



## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

were one-to-one sessions with young people, and work with Adult Social Work and Housing colleagues to resolve challenging behaviour causing significant disruption in the community.

Due to staff movement, the 17 hours post has been vacant since the end of this reporting period. Action for Children has tried to recruit but has been unable to fill the vacancy and are considering developing it for a care experienced young person, which shall be covered in the next reporting period.

Unfortunately, due to staffing issues and the impact of COVID-19, the partnership work with young people, Orkney Alcohol and Drugs Partnership (ADP) and guidance staff from Kirkwall Grammar School, to develop an on-line tool did not materialise. Orkney Children and Young People Partnership (OCYPP) commissioned the development of a website to provide advice, support, and signposting, for children and young people. The OCYPP directed officers to build an appropriate website, providing the requisite funding for the initial build.

From the beginning, it was considered vital that children and young people were directly involved in development of the website, ensuring it delivered to their expectations. The Chair and Secretary of Orkney Youth Forum were appointed to the Project Team, at the outset, and were instrumental in developing and approving the design and functionality of the website. The website was formally launched on 7 March 2022.

The content of the website has been managed by Orkney Islands Council Communications team and a small project board.

Statutory, third sector, community organisations and groups, provided information for the website, detailing the support and services available to children and young people. The website supports a chat function, allowing users to seek immediate help and support. As awareness of the website and its potential grows, it is anticipated the chat function will become a very important function, requiring suitable staffing to provide the requisite, timely, support, as well as ensuring the website is up to date, reflecting the latest information and support available to children and young people. Adults too will have interest in the information available.

Current activity is focused on developing a Modern Apprentice role in partnership supported with the Communications Team and Orkney College. Once funding has been approved through the OCYPP the successful candidate will manage the content, wider community communication campaigns, improvements, and use of the website.

### **3. Service Improvements in Children's Services: Joint Inspections**

The Joint Inspection of Children and Young People in Need of Care and Protection in Orkney took place between August and October 2019, published February 2020. It concluded that the inspection partners cannot be confident that Orkney Partnership will be able to make the necessary improvements without additional support and expertise.

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

A robust action plan was created to deliver the recommendations from the report and a project management approach was adopted to oversee and drive the work. This included bringing in additional staff resources to provide extra support, experience, and capacity to deliver the identified improvements.

The findings of the Care Inspectorate first Progress Review, published August 2021, was covered in the previous reporting period and the single most significant aspect of children's services in this annual report, aside from the implications and impact of COVID-19, is the second Progress Review published in June 2022. The work on which the Progress Review is based is fully inclusive of this reporting period albeit publication of the second Progress Review falls within the next reporting period 2022/23.

### 3.1. Progress Review Summary

Chief Officers, Senior Leaders and Partnership representatives met in person, with the Care Inspectors to discuss the findings of the second Progress Review, prior to its publication, from which there were five areas of positive note:

- Leaders were working hard to address the findings of the full inspection and the first progress review.
- Membership of key groups driving improvements had been refreshed and additional capacity and resources had been identified to support change.
- Young people's views were beginning to influence strategic developments.
- Practitioners were similarly committed to improving their own practice and outcomes for the children and families with whom they work.
- There was compelling evidence that what the Partnership has accomplished to date is resulting in increased safety for children and there are early signs of increasing confidence from families.

There were eight areas of development all of which had been included in the pre-Progress Review Children's Services Partnership *Position Statement*:

- Develop and implement a clear succession plan, particularly following the anticipated departure of key influential leaders, that ensures the long-term sustainability of the improvements that have been made.
- Sustain the resources needed to implement further changes and improvements against the challenging financial context facing leaders, local authorities, and partnerships.
- Develop and implement a workforce plan that addresses both recruitment and retention issues, reviews multi-agency training, and develops support and supervision for staff.
- Refine the improvement plan to incorporate measurable service developments, so that staff have a clear investment in the plan and able to see the difference they are making at both an individual and at an inter-agency collaborative level.
- Resolve the replacement or improvement of a management information system within health and social care that reduces barriers to information sharing,

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

improves reporting of outcomes and is in line with staff professional codes of practice and legal obligations.

- Further develop the involvement of children and young people and families in their own plans and processes, such as Team Around the Child (TAC) meetings or reviews, as well as in other groups and participation opportunities.
- Understand children, young people, and families' satisfaction with the service they are receiving, including the outcome for them and its effect on their lives, and use this knowledge to refine service delivery.
- Building on what has been achieved, and along with the third sector, create a service culture in which children, young people and families routinely participate and their views help to shape service development.

There are no plans for a further Progress Review and the Care Inspectorate requires only a further Position Statement at the end of March 2023.

As noted above, recruitment and retention of staff, particularly Social Workers, continues to present challenges to operational practice, especially in the development of sustained relationships with children and families. There is nothing short of a national crisis in the recruitment of Social Workers in children's and adult's services.

A partnership approach with the Open University has been considered for the future sustainability of Social Work services in Orkney, supported by the additional resources identified from the Council review of structure and additional money from the Scottish Government, to support an increase in people undertaking Social Work degrees nationally through our universities. This will be more fully reported in the next reporting period 2022/23.

### 3.2. Key Messages

The key Partnership performance messages from the second Progress Review which are consistent with those from the first Progress Review are:

- The Partnership remains committed and serious about the improvements we are making.
- There was compelling evidence that what the Partnership has accomplished to date is resulting in increased safety for children and there are early signs of increasing confidence from families.
- The Partnership has prioritised areas of improvement from the 2020 Inspection and has made considerable further progress since the first Progress Review of August 2021.

### 3.3. Partnership Response

The Partnership is satisfied with the findings of the second Progress Review which, once again, tells us we are *heading in the right direction*. Reassuringly, the second Progress Review is once more reflective of where we believe ourselves to be, underlining the importance of our approach to self-evaluation and continual improvement.

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

The Partnership recognises there is further work to be done and has already started to work on the eight areas of development from the second Progress Review which shall be covered in the next reporting period.

### 3.4. Key Improvement Areas

In addition to the above, our five Key Improvement Areas continue to be:

- ❖ Recognising and responding to neglect.
- ❖ Developing practice supporting Chronologies of Significant Events.
- ❖ Further developing the approach to Initial Referral Discussions (IRDs) for greater consistency.
- ❖ Strengthening the approach to receiving, recording, and responding to the voice of the child, including independent advocacy.
- ❖ Strengthening the approach to receiving, recording, and responding to the views of parents, carers, and families.

The Partnership both recognises and continues working to meet the challenge within Children's Services, of recruitment, particularly Children and Families Social Work which has experienced high turnover rates as per section 2.13. above.

Regarding bullet point three above on Initial Referral Discussions (IRDs), towards the end of this reporting period, considerable work was started on the implications of the introduction of the UNCRC (Scotland) 2021 Bill, national Guidance on Child Protection, social work, and child protection practice, in particular, and amongst many other things, partnership working when conducting child protection IRDs.

The implementation of the UNCRC will require a *fundamental rethink* on children's rights and on how agencies will need to consider how they engage with, and as appropriate, collaborate with children and their families.

### 3.5. UNCRC

The United Nations Convention on the Rights of the Child ([UNCRC](#)) was ratified in 1991 and came into force on 15 January 1992 but has not been incorporated into UK law. Although it declares inalienable rights it does not provide for any mechanism of enforcing those rights in the domestic UK Courts. The UK Government is bound by the UNCRC. The Scottish Government has brought a Bill forward to incorporate the UNCRC direct into Scots Law.

This would give Scottish citizens the right to assert UNCRC rights in the Scottish Courts. It was passed as a Scottish Bill in March 2021 seeking to confer duties on public authorities to be compatible with UNCRC requirements, which would be enforceable in the Scottish Courts.

The Bill (and the general tenor of the UNCRC insofar as duly incorporated by the Bill) expects that local authorities will have in place appropriate and effective policy, practice, and procedure, which are capable of delivering the rights secured by the Bill.

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

The UNCRC places the child at the centre which requires a paradigm shift in approach, viewing the child as an independent person and not an object of concern or protection. There is a fundamental need to accept the child's right to express their views.

Orkney Island Council sought opinion and consultation with a highly experienced Advocate, who provided a comprehensive and detailed opinion, running to 98 pages, on the implications of the legal and practice implications of IRD compatibility with UNCRC amongst other things.

### 3.6 The Child as a Rights Holder

The child is a "rights holder" which in law overrides the right for adults to act protectively when not seeking the views of the child. Like all emergencies, responding to immediate risk which may significantly harm a child is different.

UNCRC gives considerable weight to children as autonomous beings. It is not sufficient to exclude their views by adopting the position "better not to just in case". There must be reasoned decision making based on evidence if children are to be excluded from expressing their views. Uninformed speculation about what is not known or what *might be*, will not do.

This legal opinion states that where there is no material to infer parental harm, the views of the child who wants parental involvement may have *particular* weight. Exclusion would need to be justified on a case-by-case basis. A blanket practice is likely to be unlawful.

The CSWO undertook work on the above and will present a report to the Chief Officers Group (Public Protection) on child protection in context of Social Work services, Orkney IRD Procedure, National Guidance for Child Protection in Scotland and the UNCRC (Scotland) 2021 Bill. The deliberations and outcomes from which will be covered in the next reporting period.

### 3.7. Staff Engagement

The Partnership, led by Chief Officers, met with the Children's Services workforce on 30 May 2022 to discuss the final draft second Progress Review report. There was very good attendance with over 70 people at one point, in reflective discussion, sharing the findings of the review and allowing Chief Officers and leaders to thank the workforce for their efforts and continued contributions.

## 4. Island and Rural Social Work – Key Challenges

As with previous reporting periods, the Orkney Health and Social Care Partnership continues to face three significant barriers and challenges which impact on each other:

- ❖ Recruitment and Retention.
- ❖ Capacity.
- ❖ Funding and Resourcing.

### **4.1. Recruitment and Retention**

Recruitment from within our local communities remains a challenge; due, amongst other things, to population size, varied career choices and the challenges of dual relationships in living in small island communities.

There is now, what can only be described, as a national crisis in the recruitment and availability of Social Workers which is experienced across most of Scotland. As with the previous two reporting periods, these staffing challenges have been intensified by COVID-19 restrictions, particularly in the first part of the reporting period, on staff moving from other geographical locations, and staff being off due to underlying health conditions, or shielding.

The lifting of lockdown restrictions has started to ease some of these challenges but staff absences, particularly in the social care workforce, often related to COVID-19, have created their own challenges in significant gaps and absences in our services.

### **4.2. Capacity**

The capacity of small Councils and Health and Social Care Partnerships can present challenges for undertaking the range and scope of all requirements expected of any such organisations.

As per previous reporting, operating in smaller health and care systems presents challenges and opportunities, which can hinder or enhance innovation and transformation. In Orkney, the small-scale nature, for example, of our operational Social Work services can lead to speedy and effective new service delivery models and practice being introduced and embedded.

Conversely, it means a small number of distinct Lead Officers are involved in delivering a range of diverse and complex change initiatives, including drafting, reviewing, and updating policies, guidelines, protocols, and procedures; new working practices; evidence-based research approaches; new legislation; and social policy changes, while at the same time running safe and effective frontline services, managing increased demand.

As mentioned above, following a comprehensive review of Orkney Island Council's structure, significant additional resources were decided upon for Social Work services which when recruited, these additional posts will make a considerable difference to capacity.

As per the previous reporting periods, balancing strategic planning and operational delivery is a challenge generally and is intensified in rural and island settings particularly when faced with the staffing issues mentioned above.

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

### 4.3. Funding and Resourcing

The challenge facing Social Work and Social Care services relates to the climate of public funding including savings requirements within the context of the 2.1. above mentioned 2016 Audit Scotland report, which highlighted the challenges of available resource and funding set against public demand and expectation.

Successful management of demand, amongst other things, depends on the development of preventative and community-led approaches to ensure support is received in the right way, at the right time, thus reducing the demand for urgent and high-intensity support later.

The Chief Officer, Orkney Health and Social Care Partnership, led the process of reviewing Health, Social Work and Social Care services structures within the context of the Local Authority and Health Board. Amongst other things, children's health services were moved to sit within the remit of the Head of Children, Families and Justice Services which shall be covered in the next reporting period.

As with the previous reporting period, during the COVID-19 restrictions, staff maintained weekly face to face contact with children and young people on the Child Protection Register and undertook risk assessments on families based on immediate need to maintain continuity of care.

Staff teams having adjusted their working practices to an *electronic system* while recognising, like elsewhere in Scotland, that face-to-face contact and interaction is the best means of providing *personalised* Social Work services.

## 5. Resources

The main financial issues reported throughout the year were:

### 5.1. Children and Families

Additional staffing requirements have persisted in this reporting period due to sickness absence within the Children and Families team and the additional work required for the joint inspection improvement plan and the two Progress Reviews. There continues to be additional costs for residential care due to the current Children's House being at full capacity and the need for additional medium-term capacity by means of a temporary children's house and staffing.

This was exacerbated by the need to address (including the need to have discussions in a national context) practice and systems issues with regards to children who have experienced abuse and are subject of the Scottish Legal system. This was highlighted to the Chief Officer Group in a previous Significant Case Review, a CSWO Public Protection Review Activity report; and Care Inspection findings related to the following factors:

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

- The finding of adult centric attitudes across a range of areas including the judiciary and children's Safeguarding amongst other findings – Finding 2 'the rights of the carers took precedence over the rights of the child'.
- Inclusion of same in the Children's Services Improvement Plan.
- The need to highlight and take action to address delays in the court process seeking to protect and safeguard children from familial abuse.

The *overall* above matters were referred by the CSWO to the Child Protection Unit, Directorate for Children and Families, Scottish Government and the Scottish Children's and Young People's Commissioner's Office.

Specific Safeguarder matters were referred to the Scottish Government Team responsible for overseeing the Safeguarders system. Outcomes from this activity will be covered in the next reporting period.

Additional costs relate to the travel and accommodation costs of care settings for children and young people on mainland Scotland which have increased during this reporting period.

### 5.2. Older People

There is a continued reliance on locum staffing due to recruitment issues and long-term sickness absence within residential care homes and supported accommodation. Some of the COVID-19 costs are incurred within these cost centres; all care homes have had COVID-19 outbreaks during the reporting period and COVID-19 continues to impact on staff attendance across all areas. During 2021/22 there has been a gradual return to the provision of day care services, however, social distancing and other precautions are still required such that numbers attending remain below pre-pandemic levels.

It is evident families seeking short breaks are doing so when a crisis point has been reached and significant help is required. Whilst there is no formal evidence, it seems likely this is at least in part brought on by the cessation of short breaks during lockdown. The usage of short breaks will continue to be monitored.

Regarding staff vacancies a recruitment campaign was launched week commencing 18 October 2021 to promote roles within Social Care services. Whilst this did yield some appointments, the outcome was not of a significant magnitude to dispel with agency staff. As noted in previous reports the workforce is ageing and much of the work is physically demanding despite modern day equipment. Workforce planning will remain a key element of activity in the forthcoming year.

### 5.3. Care at Home

The demand for Care at Home continues to grow as the ageing population is continuing to increase and people can remain in their own home. This is in respect of all care at home provision; in-house, third sector and as Self-Directed Support. Once an assessed need has been identified and agreed, budget availability cannot be a deciding factor on provision of service due to the current eligibility criteria.



## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

This demand coupled with the ageing workforce and the impact of COVID-19, and an ongoing vacancy issue has led to the need to support the in-house service with a significant number of locum staff. Scottish Government in recognition of this national issue has provide recurring funding to try to address care at home service provision shortfall. In March 22, the IJB approved in principle the increase in pay scales of Orkney Islands Council's Care at Home staff; this is in recognition of the complexity and autonomous nature of the post and to make Care at Home an attractive career option.

As part of Winter Pressures Planning 2020/21 a Home First Pilot was funded to reduce the pressure on acute beds and reduce demand on Care at Home services. Due to the significant success of this pilot the IJB approved the recurring funding to make this service permanent. This was because people who received the services saw an 89% improvement in their occupational performance using validated outcome measures. In addition, there was a reduction in the number of hours of support required by individuals upon discharge from Home First to Care at Home of 26.4%. Furthermore, several individuals required no continuing care support following their period of reablement. Following that approval permanent appointments to the Home First service are being taken forward as a matter of urgency and will be covered in the next reporting period.

### 5.4. Year End Position

The revenue expenditure outturn statement in respect of Social Care for financial year 2021/22, had a balanced position as shown in Table 7 below:

**Table 7: Indicative Budget to Full Year Spend**

<b>Indicative Budget</b>	<b>Additional Allocations</b>	<b>Full Year Budget</b>	<b>Full Year Spend</b>
<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>
20,699	1,638	22,337	22,337

There was funding carried forward to 2022/23 of £446K in regard to Interim Care and Care at Home Funding.

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

The additional allocations can be broken down as follows in Table 8, budget summary to allow a balanced position:

**Table 8: Budget Summary**

<b>Budget Summary</b>	<b>£000</b>
Original Net Budget	20,698.8
Braeburn Court	452.1
Contingency contribution re overspend	3.9
Social Care Workforce Uplift	112.0
Living Wage	138.8
Mental Health Recovery	15
Whole Family Wellbeing	7
Telecare	4
Outwith Orkney Placements contribution	440.7
Apportioned costs realignment	(44.3)
Flex Fund contribution	63.0
Care at Home Winter	271.0
Interim Care Winter	175.0
<b>Revised Net Budget</b>	<b>22,337.0</b>

At a meeting with the Parties (Orkney Islands Council and NHS Orkney), it was suggested that a three-year savings target be applied which would give the Orkney IJB a set figure to work towards over a three-year period. In total there was a savings target of £4.2 million to be achieved by the end of 2022/23 which was split as follows:

**Table 9: Partner Savings**

<b>NHS Orkney</b>	<b>Orkney Islands Council</b>	<b>Total</b>
<b>£000</b>	<b>£000</b>	<b>£000</b>
2,400	1,800	<b>4,200</b>

Regarding financial year 2022/23 the savings applied from NHS Orkney for services commissioned is now £2.4M. Within the Orkney Islands Council settlement there has been a recognition of the exceptionally difficult second year of the pandemic and the acute pressure services have been under to maintain existing provision, therefore, no efficiency savings were requested in the preparation for setting the 2022/23 budget.

### **5.5 Sustainability Challenges**

Due to medical advances and improved quality of care, individuals who require or are in receipt of care packages to meet their complex care needs (long-term care or continuing care) receive substantial and continuing Health and Social Care provision. This can be the result of chronic illness, disabilities or following hospital treatment. Social Care services have shown an increasing requirement for specialist input as individuals have the rightful expectation to receive care whilst in their own homes.

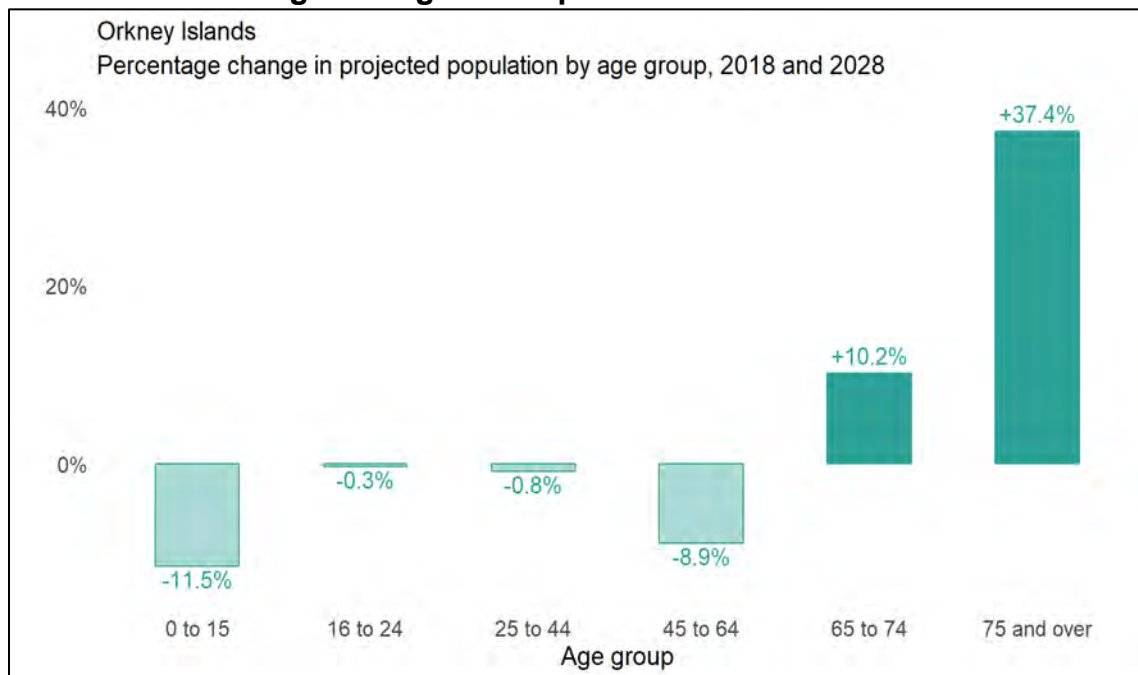
Although this challenge is not unique to Orkney, our older population is increasing faster than the national average. In addition, significant numbers of our working age

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

population are leaving the islands and so fewer people are available to provide the care and support required with the predicted levels of chronic illness and disabilities. People in the older age group are most often in need of Health and Social Care Services.

The National Records of Scotland have produced population projections for Orkney. The graph below illustrates the percentage change in projected population by age group between 2018 and 2028. The 0 to 15 age group is projected to see the largest percentage decrease (-11.5%) and the 75 and over age group is projected to see the largest percentage increase (+37.4%). In terms of size, however, 45 to 64 is projected to remain the largest age group. This will have a significant impact on how we deliver services in the future.

**Table 10: Percentage Changes in Population from 2018 to 2028**



Alongside the challenges, the contribution older people make to our society needs to be recognised. People over 65 years of age deliver more care than they receive – acting as unpaid carers, child minders, and volunteers. Their contribution, as wise, experienced, stable, citizens overall, to our communities and our society as a whole is considerable, providing continuity and stability in our social fabric.

## 6. Workforce

There continues to be significant difficulties in recruiting to, and in retention of, certain posts within our Social Work and Social Care services. With a limited labour pool available and increasing demand, recruitment within our Adult Social Care services and Children and Families Social Work services has been a continual activity. From 2020 continuing into 2021 and 2022, we have needed to recruit locum Social Work and Social

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

Care staff to Orkney for both short and medium periods of time to ensure continuing safe delivery of service.

### 6.1. Staff Development

The pandemic continued to impact the delivery of training in 2021/22. Online training remained the preference where possible. Face-to-face practical sessions continued to be held in small groups only.

One Step 2 Child Protection Training event was held within 2021/22, in January 2022. Due to the continued backlog of this training, it was opened to an unlimited number of participants. Of the 92 booked, 87 attended on the day. Unfortunately dates in May and October 2021 had to be cancelled due to business needs as the co-facilitator was unable to be released due to operational demands. Work is currently underway for this training to be resurrected.

Child Sexual Exploitation Awareness took place online in June 2021, November 2021, and February 2022, delivered by trainers from Women's Aid Orkney, Orkney Rape and Sexual Assault Service, Police Scotland, with support from the Orkney Health and Care Training Coordinator. The trainers mentioned above are trained by Barnardo's to deliver the training. Barnardo's have not directly delivered it themselves since October 2019 prior to the pandemic.

A programme of Adult Support and Protection training commenced in January 2022, with several "Introduction to Adult Support and Protection" online sessions delivered by Alex Davidson, Independent Public Protection Chair for Argyll and Bute.

In March 2022 Hoarding and Self Neglect training was delivered online by Paul Comely, National Adult Protection Coordinator. This multi-agency training included over 120 participants from Orkney, Shetland, the Western Isles, and the Scottish Government. The first of a series of follow-up workshops dedicated to professionals in Orkney will take place in the next reporting period.

Other training delivered to Social Care staff included Basic First Aid, People Handling, Practical Medication Training, Epilepsy Awareness and the Administration of Midazolam, and Caring for Smiles.

All frontline care staff were required to complete NHS Orkney COVID-19 Infection Control PPE Training in addition to the mandatory iLearn course. Care staff are required to complete this training annually to ensure they are alert to any changes in infection control practices.

Studio 3, Crisis Management training, was not delivered during the pandemic as it was not possible to undertake any social distancing in the practical activities, which comprises most of the course.

Where there was a need within care settings for immediate training for staff working with people where there are challenging circumstances, a specially developed low arousal

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

training session (Studio 3 model) was delivered in-house to ensure there was no gap in training for employees with the greatest need for this training.

Mandatory and existing training courses continue to be available for Orkney Health and Care Staff.

Qualification	Number of Sponsored Staff
HNC Social Services	0 (see note)
SVQ 4 Health and Social Care (Adults)	0
SVQ 3 Health and Social Care (Adults)	1
SVQ 3 Social Service and Healthcare (Children and Young People)	0 (see note)
SVQ 2 Health and Social Care (Adults)	24
CPD Leading and Managing Care Services	0
PDA Health and Social Care Supervision	2
<b>TOTAL</b>	<b>27</b>

Note that in the HNC Social Services and SVQ 3 – there were employees from Orkney Health and Care attending the course, but their fees were covered by Student Awards Agency for Scotland (SAAS) funding so while an agreement was in place to sponsor any remaining balance, there was no need to do so.

The following staff training and developments have been completed as part of the Children’s Services Improvement Plan, detailed in Table 12 below:

**Table 12: Improvement Plan Training and Developments**

Date	Purpose and description
30 September 2021	<p><b>Neglect Training – Train the Trainer Session</b></p> <p>Delivered by Action for Children to 8 attendees to improve the sustainability of the training colleagues across the partnership to deliver the Neglect training.</p> <p>Local case studies and learning opportunities were developed, including a video of a learning review.</p>
21 January 2022	<p><b>Multi-agency Step 2 Child Protection</b></p> <p>This event covered topics from the Inter-agency Child Protection Guidance Training previously held on 2 December 2020. The session focused on Child Protection Guidelines and Self-evaluation.</p>

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

Date	Purpose and description
	<p>There were 87 attendees from across Orkney Health and Social Care Partnership including, Health, Education, Social Work, and the Third Sector.</p> <p>The session was recorded and distributed for those who could not attend.</p>
29 January 2022	<p><b>Multi-agency Chronology Training</b></p> <p>The event covered the essential tools required for safeguarding and protecting children from harm. It provided clear account of significant events in a child's life, and the impact these events may have on a child's wellbeing and development. It drew upon the knowledge and information held by all agencies involved with the child and family.</p> <p>There were 103 attendees from across Orkney Health and Social Care Partnership including, Health, Education, Social Work, and the Third Sector.</p>
1 March 2022	<p><b>Neglect Training</b></p> <p>Delivered by Action for Children to eight attendees across the partnership this was a pilot sessions and amendments were made to the content including the addition of a local, ammonized case study.</p>
19 April 2022	<p><b>Age of Criminal Responsibility Act 2019 Training</b></p> <p>The Age of Criminal Responsibility (Scotland) Act 2019 was implemented 17 December 2021, which increases the age of criminal responsibility from 8 to 12 years of age for all children in Scotland.</p> <p>The operational Team Manger attended the Scottish Government five-day training course in Aberdeen, learning about the new SCIM joint interviews, Legislation, Policy, and Initial Referral Discussion.</p> <p>Next steps to provide in-house training to all Children and Families Social Work Staff.</p>
<b>Future Plans</b>	<b>Planned Training</b>

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

Date	Purpose and description
	<p>Further training, which will be covered in the CSWO report for 2022/23, includes:</p> <ul style="list-style-type: none"><li>• <b>Safe and Together</b> - Overview session (200 participants) and Core training (40 Participants – Sept 2022)</li><li>• <b>Blues Training</b> and <b>Bouncing Back</b> training for pupils delivered in partnership with Action for Children in schools initial delivery June/July 2022 more sessions planned October 2022.</li><li>• Three bespoke training videos for staff – Introduction to <b>Paris</b>, record management and case recording – two complete and ready one in development – should align with social work Induction Pack when it is finalised.</li></ul> <p><b>Learning About Neglect Event Series</b> – Four free sessions relevant to all Children and Families staff delivered by CELCIS.</p>

### 7. COVID-19

Feelings of anxiety and fear are evidenced in growing research on the impact of the disease on our people and workforce and we are learning to find ways of managing our resources (our workforce being our greatest asset) in maintaining public services.

Our Partnership experience continues to be encapsulated in themes including communication challenges and changing work conditions, particularly during the early stages of lockdown restrictions, work-related stressors, support structures, personal growth, and individual resilience levels. While some of these factors have undoubtedly been reduced or minimised, with the lifting of lockdown and other restrictions, we are not out of the woods yet as we anticipate some of the continued challenges which lie ahead in the next reporting period.

The impact of COVID-19 on the workforce and services includes the following themes which have been updated since the previous reporting period:

- Staff engaged in meetings via MS Teams, and essential Social Work and Social Care staff attending workplaces and undertaking frontline duties including seeing vulnerable children, young people, adults, and families. This includes short-term redeployment, for example, Social Workers from Fostering and Adoption covering Fieldwork to ensure child protection capability.
- Staff redeployed for emergency responses whilst maintaining statutory service delivery within Scottish Government COVID-19 guidance.

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

- Emergency Hubs staffed seven days a week – staff and volunteers redeployed to deliver services from the Hub. This was not necessary during the current reporting period, but various cover arrangements were required particularly in social care provision.
- Development and dissemination of Interim Inter-Agency Child Protection Guidelines and Child Protection Procedures COVID-19 specific. Direct face-to-face work has continued across public protection activity.
- Staff capacity further stretched within a small system where staff already have multiple roles and responsibilities. Every effort has been made to mitigate this by deployment of locum staff which creates other challenges for continuity of care and instability for the workforce.
- Many staff self-isolated or were shielding which impacted on the remaining staff levels compounded by recruitment challenges. This has continued in this reporting period with new highs in COVID-19 related absences.
- Staff working longer periods without annual leave due to the need to maintain services and cover service gaps. This has continued in the current reporting period with implications of annual leave back-logging.
- Staff feeling tired and at times challenged with service demands in the context of COVID-19 restrictions. This has been noted in current reporting period with emerging evidence of some people leaving the social work profession.
- Some Children and Families staff found the pace of some changes in the Children's Services Improvement Plan had been challenging, including for some, within the context of COVID-19 restrictions. Despite this there was positive feedback from the second Progress Review by the Care Inspectorate and there will be no further progress review thus allowing a more concentrated focus on our continued improvements themselves.
- Caring for People weekly meetings with partners to discuss and co-ordinate emergency responses. Partnership working is usually strengthened by closer working arrangements across most such activities as partners learn about each other's strengths and drawbacks.
- Infrastructure for remote working was limited and had to be rapidly upscaled. There are some outstanding examples of the effectiveness of such working while recognising the limitations of resources and infrastructure on many of our remote islands and communities.
- Development and roll out of a Person at Risk Database for all vulnerable citizens using services. This has developed considerably and holds huge potential which shall be covered in the next reporting period.
- Young People actively engaging with online Children's Hearings. This has been a real benefit of participation and has continued in the early part of this reporting period.
- A very effective vaccination strategy and roll out programme which helped protect front line staff to support our most vulnerable people. This undoubtedly helped protect our people and workforce from some of the worst ravages of the disease while we have experienced new highs in infection rates during the reporting period.



## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

As per the previous reporting period, there were positive factors including faster implementation of new communication systems; for example, MS Teams and laptops for use away from office bases reduced travel requirements, and the ability to communicate with people far away from business offices, across Scotland, the UK, and wider. Working from home arrangements are under regular review with consideration of the needs of the workforce set against the need for effective service delivery. While public services are different in nature, person-centred services require face-to-face engagement and human warmth and contact.

Greater involvement of children and young people in engagement processes which do not involve “in person” interaction, greater teamwork, and reflection, for example, the responsiveness and collaboration in establishing and running the Emergency Hub including volunteers.

Greater reflection on the things which really matter in life, for example, Caring for People and staff going above the call of duty to ensure our most vulnerable people were supported.

### **7.1. Key Priorities for Recovery**

The support needs of Social Workers and Social Care Workers as well as all Health, Education, Police, Third Sector, Private Sector, Local Authority staff, Volunteers, and all Social Care partners, amidst continued and future disruptions caused by the pandemic are extremely important and remain a priority.

Strategies such as mindfulness, hobbies, socialising under the new rules allowed by easing of lockdown restrictions, restricting news and media intake, virtual socialising activities, which can be deployed by health and social care professionals can support their resilience and wellbeing, and can be used to guide future support initiatives. Examples of specific recovery actions include:

- Service Operational Recovery Team weekly meetings – helped to identify priorities for de-commissioning emergency response services, scaling back and opening services in line with Scottish Government COVID-19 advice as the vaccination programme progressed.
- Planned moves of staff back to substantive posts and service locations as services re-opened helped rebuild public confidence.
- Continued delivery of statutory services including Public Protection which had been prioritised throughout the emergency phase.
- Ensuring the “lessons to be learned” to prepare for further emergency responses, should this be required, are effectively managed, and embedded in our routine professional practice which are currently being progressed.

Engaging with our communities and sharing the experiences of how we have collectively dealt with the pandemic, is central to how we continue to work together to effectively support our most vulnerable people.

## CHIEF SOCIAL WORK OFFICER REPORT FOR 2021/2022

Jim Lyon  
Interim Chief Social Work Officer  
Orkney Islands Council / Orkney Health and Social Care Partnership  
**Date:** 1 September 2022.