



Item: 9

Policy and Resources Committee: 26 November 2024.

Chief Social Work Officer Annual Report.

Report by Chief Social Work Officer.

1. Overview

- 1.1. The Scottish Government requires the Chief Social Work Officer to produce an Annual Report of service quality and performance and key challenges.
- 1.2. The Chief Social Work Officer's annual report for 2023/24, attached as Appendix 1, provides a full overview of performance (strengths, areas for development and plans for the future) of all services within social work and social care

2. Recommendations

- 2.1. It is recommended that members of the Committee:
 - i. Scrutinise the Chief Social Work Officer's Annual Report for 2023/24, 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.

3. Child Protection

- 3.1. The Joint Inspection of Children and Young People in Need of Care and Protection in Orkney took place between August and October 2019, with the inspection report published in February 2020. It concluded that the inspection partners could not be confident that Orkney Partnership would be able to make the necessary improvements without additional support and expertise. A robust action plan was created to deliver the recommendations from the inspection report and a project management approach was adopted to oversee and drive the work.
- 3.2. The findings of the Care Inspectorate's first and second Progress Reviews were covered in previous Chief Social Work Officer Annual Reports and acknowledged that progress had been made but there was still work to do. Consequently, the Partnership was advised that there were no plans for a further Progress Review by the Care Inspectorate, and they instead required only a Position Statement at the

end of March 2023. The Position Statement focused specifically on the eight key areas identified by the Inspection Team and provided updates and evidence that the Partnership continues to make progress, while having more work to do, in line with continuous improvement processes.

3.3. In July 2023, the Care Inspectorate provided a response letter to the position statement submitted in March 2023, outlining the following key areas for improvement:

- 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 with 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 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.

3.4. The response letter also outlined that the second progress review concluded that there was compelling evidence that what had been accomplished was resulting in increased safety for children together with increased confidence from families.

- 3.5. They expressed confidence that partners in Orkney had built a momentum from the original inspection that had begun to achieve the cultural change necessary to introduce the required improvements. The Care Inspectorate also outlined that given a number of leadership roles were filled with interim staff and there are difficulties with recruitment and retention of permanent staff, that there is a need to undertake careful succession planning.
- 3.6. The significant investment in Children's Services over the past number of years was deemed reassuring and they outlined the need for this to continue to ensure improvements reached fruition.
- 3.7. Other key themes identified the need for comprehensive training and supervision of staff. The Chief Social Work Officer's annual report, attached as Appendix 1 to this report, provides a full overview of the training offered in this reporting period. It is accepted that this is work in progress and requires further improvement into 2025.
- 3.8. Advice was also given to further enhance the improvement plan to effectively measure and provide evidence of progress, and attention was given to the need for PARIS to be updated. The PARIS system has received notable investment to develop it to meet the full spectrum of children and families' processes and to tell the story of the child's involvement with services and clear rationale for decisions taken. With that said, this continues to be a work in progress.
- 3.9. The letter also outlined the importance of increased voice, choice, participation and feedback from children and their families and the role of independent advocacy. Following some difficulties in securing consistent advocacy in 2023, there has been a marked improvement in 2024, which continues to improve further. At the time of writing over 80% of children on child protection plans actively engage with independent advocacy, which is a significantly high percentage. The service is actively seeking more service user feedback to inform individual care plans and more widely to support improvement in service provision.

4. Adult Support and Protection

- 4.1. The Joint Inspection of Adult Support and Protection (ASP) took place between 31 October 2022 and 11 April 2023. The two key questions the Care Inspectorate posed were:
 - How good were the partnership's key processes for ASP?
 - How good was the partnership's strategic leadership for ASP?

- 4.2. Whilst the inspection findings recognised the significant work already underway and the substantial progress made, and although strengths were noted in respect of collaborative working and innovative recruitment solutions, the overall two-year focus of the inspection was such that the grades awarded were that of weak in respect of the two key questions outlined above.
- 4.3. The inspection did not reveal areas for improvement that the Partnership was not already aware of, and considerable improvement has been underway, supported by external Social Work consultants, the Independent Chair of the Orkney Public Protection Committee, and the Service itself. Resultantly, the Improvement Plan has been submitted and confirmed as acceptable by the Care Inspectorate.
- 4.4. Also since the Care Inspectorate provided their findings, further work has been undertaken to address the areas requiring improvement, which has been progressed via the Adult Support and Protection Sub-committee and the Public Protection Committee, with a significant emphasis on procedural updates, training for the Partnership and community on what constitutes adult support and protection, the protection of adults who meet the threshold for adult support and protection and this has been scaffolded by improvements in seeking the voice and views of service users to inform individual care and protection plans and to inform the development of the service and overarching service provision.
- 4.5. At the time of writing, it is important to share that the Care Inspectorate have recently informed that they will be undertaking a progress review of ASP Services which will commence end of October, beginning of November 2024. The multi-agency Partnership is in the process of preparing evidence for submission. The outcome of the inspection will be known early January 2025.
- 4.6. Public protection remains the top priority in Orkney children's and adults' services, with further development of procedures, protocols and continual self-evaluation being supported, developed and embedded within each of these domains.
- 4.7. While recruitment continues to be a challenge across a number of areas, the teams are embedding updated recruitment and retention strategies. The Lead Officer for Public Protection is also now fully embedded into their role. The Learning and Development Officer post has recently (September 2024) been recruited to. This will drive forward a focus on training and development with the workforce into 2025 and beyond.

For Further Information please contact:

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Implications of Report

- 1. Financial:** 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 in Orkney, that is increasing faster than the national average.
- 2. Legal:** There are no legal implications arising directly from the recommendations contained in this report.
- 3. Corporate Governance:** None applicable.
- 4. Human Resources:** The Annual Report details several staffing and workforce challenges which will be important to address in due course to ensure and safeguard the quality of service provision and support the staff who are employed to feel safe and effective in their roles.
- 5. Equalities:** An Equality Impact Assessment is not required for performance monitoring.
- 6. Island Communities Impact:** An Island Communities Impact Assessment is not required for performance monitoring.
- 7. Links to Council Plan:** The proposals in this report support and contribute to improved outcomes for communities as outlined in the following Council Plan strategic priorities:
 - Growing our economy.
 - Strengthening our Communities.
 - Developing our Infrastructure.
 - Transforming our Council.
- 8. Links to Local Outcomes Improvement Plan:** The proposals in this report support and contribute to improved outcomes for communities as outlined in the following Local Outcomes Improvement Plan priorities:
 - Cost of Living.
 - Sustainable Development.
 - Local Equality.
- 9. Environmental and Climate Risk:** None applicable.
- 10. Risk:** The report refers to public protection and the supports and services the public are entitled to within legislative frameworks. If not provided this poses a risk to the safety of the public, a risk of legal claims being raised against the Council and potential reputational, public trust and confidence risks.
- 11. Procurement:** None applicable.

12. Health and Safety: The Chief Social Work Officer's report refers to public protection matters and duty of care matters from employer to employee, to ensure staff are regulated and trained appropriately to undertake the positions they hold.

13. Property and Assets: None applicable.

14. Information Technology: None applicable.

15. Cost of Living: The report refers to local poverty demographics and the need for statutory services to identify and support those in financial difficulty.

List of Background Papers

None.

Appendix

Appendix 1: Chief Social Work Officer Annual Report 2023/24.

Chief Social Work Officer Annual Report 2023/24 for Orkney Islands Council



1. Governance, accountability, and statutory functions

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 2023 to 31 March 2024.

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. I have held the role since being appointed permanently on 24 April 2024. During the reporting period the role was held, on an interim basis, by Sharon-Ann Paget, Service Manager (Criminal Justice/Public Protection). I would like to take this opportunity to thank Sharon for undertaking the role during the reporting period.

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 and Social Care 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 (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).

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.

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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 Officers Group (COG).

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.

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. The responsibility for appointing a CSWO cannot be delegated and must be exercised directly by the Local Authority itself.

The CSWO should also assist authorities in understanding the key role that Social Work plays in contributing to the achievement of national and local outcomes, to improve performance and management of corporate risks.

The CSWO has a range of strategic responsibilities including oversight of professional standards in Social Work services, as well as undertaking the leadership of the profession through the CSWO function.

Social Work services have a statutory duty to provide care and protection to the most vulnerable people across their local authority area. Access to many services is assessed basis on need, and Social Work staff work in partnership with individuals, carers, families and communities to meet the need within the resources available to the service and partner agencies.

1.3. Local Governance Arrangements

In Orkney the CSWO is a member of:

- The Integration Joint Board, as a 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 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 Orkney's community planning partnership, the COG is responsible to Elected Members, NHS Board Members and Scottish Ministers.

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- The Children's Services Strategic Planning Group.
- The Orkney Public Protection Committee (OPPC).
- NHS Orkney's Extended Senior Leadership Team.

In an Orkney context, the CSWO also undertakes the following duties and responsibilities:

- Chairs the Corporate Parenting and local Promise Board.
- Chairs the Social Work and Social Care Governance Board.
- Acts as the Agency Decision Maker (ADM) for the Fostering, Adoption and Permanence Panel.
- Recipient of all Mental Health and Adults with Incapacity Orders and Guardianship cases.
- Decision maker in relation to Secure Care application for children.
- Representing Orkney Islands Council at a local, regional and national level.

Following the last Strategic Inspection of Children's Services in 2019, the OPPC in consultation with the Care Inspectorate (Scotland's Social Care Regulator) implemented a new structure of Sub-committees, in the hope that this would give a focus to and support the pace of improvement in key areas. Please see the structure outlined in the diagram below:



The Social Work and Social Care Governance Board meets quarterly. The Board has representation from the Heads of Service and Service Managers across the Orkney Health and Social Care Partnership. The Board scrutinises the quality and performance of all Social Work and Social Care Services, with an additional focus on supporting the workforce to feel supported within their roles, through supervision, training and development. Given Orkney's small size, it is important that the Board draws upon all

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available resources and best practice approaches across services to support the collective in providing high quality Social Work and Social Care services to the public.

The Corporate Parenting and Promise Board in Orkney aims to ensure Scotland's Promise to all children and young people is fulfilled, with a particular reference to ensuring that the care experienced children, young people and adults within the Orkney community receive the necessary care, support and guidance to achieve, flourish and reach their full potential in society. The Promise Board comprises professionals across the multi-agency partnership, and crucially is informed by the voice of people who are care experienced.

2. Service Quality and Performance (including challenges and improvements)

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 a level of autonomy in their work, for which organisational structures must ensure appropriate and robust checks and balances are in place.

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 the most vulnerable and marginalised children, adults, and older people.

2.2. Setting a scene in a remote, rural and island context

Before addressing the quality and performance of the Social Work and Social Care services in Orkney, I consider it important to set a scene and shine a light on important local demographics and priority areas requiring further development across the community of Orkney.

2.3. Important demographics to be understood when considering the needs of the local community, in the present and future

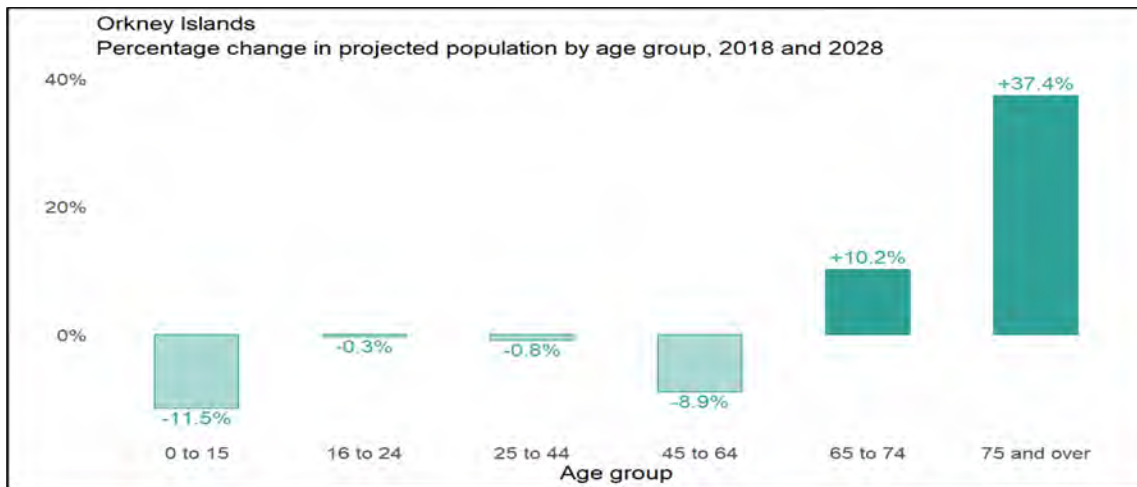
According to figures from the National Records of Scotland (NRS) published in 2022 Orkney's total population is 22,540. Between 2001 and 2021, Orkney's population has increased by 17.3%, the second highest percentage of the 32 local authorities in Scotland. Over the same period, Scotland's population rose by 8.2%. The Orkney Mainland and connected Isles population is 19,752, which is a 19.73% increase since 2001. The ferry-linked Isles population is 2,788, a 2.39% increase since 2001.

Between 2001 and 2021, the 0 to 15 age group saw a decrease of 6.9%, whilst the 75 and over age group saw a huge increase of 72.7%, with those aged 65 to 74 not far behind, at 71.2%.

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Life expectancy at birth, in Orkney, is currently 83.8 years for women and 80.4 years for men, and is higher than the Scottish average for both sexes. These are significant increases from 2001, when life expectancy at birth for women was 81.01 and, for men, 75.9.

By 2037, it is predicted that more than 50% of the population will be 65 or over. As both life expectancy and the proportion of people in Orkney aged over 75 increases, a similarly large increase in the number of Orcadians living with co-morbidities can be expected, meaning there will be a commensurate increase in demand on health and Social Care services, especially care at home and residential care services. It is pertinent that services plan to ensure there is a sufficient workforce within the community to meet the needs of all the population from children to adults and the aging population.



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

2.3.1. Economy

Orkney has a strong economy, with very low levels of unemployment. As of July 2024, according to figures from the Office for National Statistics, 235 people in Orkney are actively seeking employment, representing just 1.7% of the working-age population. By comparison, this figure is 3.3% in Scotland and 4.3% across the UK.

In addition, and contrary to anecdotal perceptions, according to the Annual Survey of Hours and Earnings, the average weekly gross pay in Orkney of £776.20 is significantly higher than the average in Scotland (£702.40) and, indeed, the UK (£682.60).

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Average house prices in Orkney, as of June 2024, are higher than the average for Scotland, at £218,000, versus £192,000, respectively. This represents an increase of 9.5% over the last 12-months, versus 3.65% across Scotland.

2.3.2. Fuel Poverty

Rates of fuel poverty in Orkney are high, with 31% of the population considered to be in fuel poverty, compared with 24% across Scotland. According to Scottish Government, this situation is exacerbated by a high proportion of low energy efficiency dwellings, as well as the lack of mains gas, meaning households must rely on more costly oil and electricity to heat their homes.

2.3.3. Child Poverty

The Orkney Partnership's Orkney Child Poverty Strategy, published in 2022, showed 467 children to be in poverty, with 390 in absolute poverty, representing 13.1% and 10.9% of children, respectively.

2.3.4. Unpaid Carers

In 2022, Scottish Government estimated there were 800,000 unpaid carers in Scotland, including 30,000 young carers in full-time education. Using these figures, it is estimated there are around 3,500 unpaid carers in Orkney, including more than 100 young carers.

It is exceedingly difficult to be sure of the number of unpaid carers, not least because a vast number (around 9 in 10 unpaid carers) are unaware of the support available, so do not identify as unpaid carers.

Around 350 unpaid carers are known in Orkney by people who have contacted the carers support charity "Crossroads Care Orkney" or Social Work for support. Only a small number of those have sought or been given a formal carer's assessment, something they currently need if they are to have a formal Adult Carer Support Plan, or a Young Carer Statement, (if a young person still in full-time education).

It is to be celebrated that Orkney has a high life expectancy and more people are living for longer. As outlined above, planning for future recruitment and retention of staff will be required to ensure there is a sufficient working age population to meet the health and care needs of those who need care, protection and support.

The earnings data suggests higher earnings on average than that of the rest of Scotland and the UK, though it must be understood that the cost of living in a remote, rural island community is higher. There are too many people who experience fuel poverty and child poverty.

Without the support of unpaid carers, the health and social care system would falter. It is vital that we find increased opportunities to identify and support unpaid carers.

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Social Work services and the multi-agency partnership, including the third sector organisations, work steadfastly day in day out to identify those in need and to provide them with the guidance and support they require to enjoy a better standard of life, though as can be seen, there is further work to be done.

2.4. Strategic Priorities of the Health and Social Care Partnership in Orkney

In 2022 the Orkney Health and Social Care Partnership introduced their Strategic Plan 2022 - 2025. The Strategic Priorities were determined through several consultation and engagement exercises, undertaken by multiple statutory and third sector agencies, over several months, and considered within the context of a Joint Strategic Needs Assessment, undertaken towards the end of 2021.

Consistent themes were immediately apparent, with mental health, the plight of unpaid carers, and the challenges faced as we grow old, high on the list of people's concerns. Early intervention and prevention were identified as a key theme, whereby there is an understanding that supporting people at the earliest opportunity, in the right way, by the right people, is key to improved outcomes.

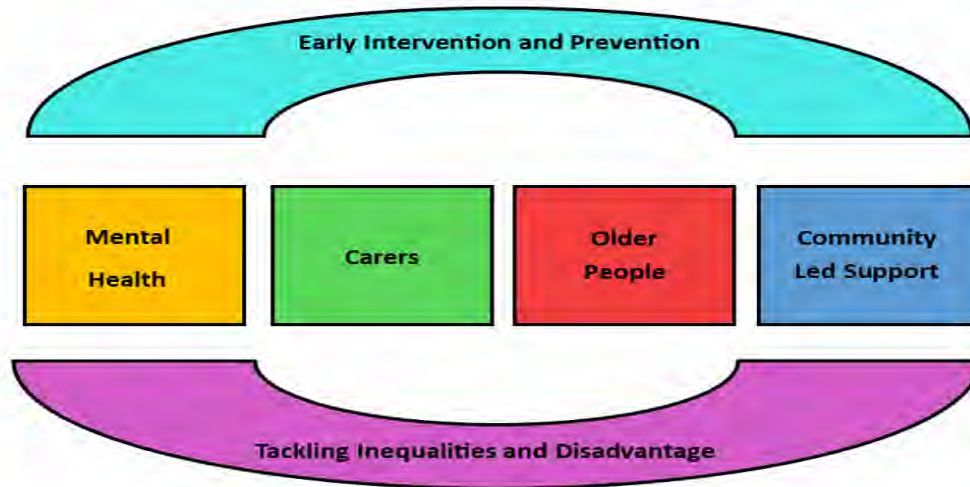
Professional acknowledgment that services must respond to changing public expectation, budgetary challenges, staffing shortages and changing demographics, have resulted in new ideas and innovations in service delivery, such as Community Led Support.

The Priorities must be considered within the broader context and recognition that helping people to maintain their health and wellbeing, providing access to preventative services, and delivering for everyone, regardless of circumstance, will encompass every aspect of strategic planning and service delivery.

It should be noted that no single Strategic Priority sits in isolation; each has a direct influence and effect on all Social Work and Social Care Service Plans/Improvement Plans. This means co-production, across every aspect of service delivery in the Health and Social Care sector (and in public services delivery, in general) is mandatory to successfully deliver upon the stated Strategic Priorities and, most importantly, improve the health and wellbeing of people in Orkney.

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The six key Strategic Priorities agreed are:



2.5. Cross cutting matters

Trauma-informed approaches have become increasingly cited in policy and adopted in practice as a means for reducing the negative impact of trauma experiences and supporting mental and physical health outcomes. They build on evidence developed over several decades. Trauma-informed practice is an approach to health and care interventions which is grounded in the understanding that trauma exposure can impact an individual's neurological, biological, psychological and social development. Trauma-informed practice aims to:

- Increase practitioners' awareness of how trauma can negatively impact on individuals and communities, and their ability to feel safe or develop trusting relationships with health and care services and their staff.
- Improve the accessibility and quality of services by creating culturally sensitive, safe services that people trust and want to use.

It seeks to prepare practitioners to work in collaboration and partnership with people and empowers them to make choices about their health and wellbeing.

In this reporting period, trauma-informed training and development of staff has been a key focus with planning undertaken to ensure the workforce is trauma informed to support interactions and communication with clients and service users, but also to support staff to manage the impact of vicarious trauma. This promotes the foundations of relationship based Social Work practice and strengths based work practice.

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 adults' services.

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The Care Inspectorate undertakes regular inspections of all registered services and indicates a formal assessment of the standard on a graded scale.

The Care Inspectorate grades are:

- Unsatisfactory – major weaknesses.
- Weak – important weaknesses.
- Adequate – strengths just outweigh weaknesses.
- Good – important strengths with some areas for improvement.
- Very Good – major strengths.
- Excellent – sector leading.

The Care Inspectorate generally reviews the following quality indicators when undertaking inspections by assessing:

- How well people's wellbeing is supported
- How good is the leadership of the service?
- How good is the staff team?
- How good is the environment?
- How well are care and support planned?

Self-evaluation and improvement work has been further progressed during this reporting period and will be outlined in more detail below. Several Social Work and Social Care services have been subject to inspection by the Care Inspectorate during the reporting period, which will be contextualised in the relevant service updates throughout the report.

Recruitment challenges are a cross cutting matter which are covered in further detail throughout the report.

There have been further developments across Social Work services with the systems support resource, of the Social Work management information system (PARIS). There is ongoing work to be undertaken in this area to ensure the information management system supports service delivery on the ground and supports Social Workers to accurately record the breath and scope of work they are undertaking.

It is important to recognise and give thanks to the notable contribution that the third sector play locally in providing Social Work and Social Care services within the community.

This report does not detail all the Social Work and Social Care activity within Orkney, but rather serves to provide an overview of services with particular attention to areas of strength and areas identified requiring development, with confirmation of how and when improvement will be achieved.

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2.6. Adult and Learning Disability Social Work Services

Adult and Learning Disability Social Work services includes services for adults, older people and all people with a learning disability. It also supports activity in relation to Adult Support and Protection (ASP) and the legislative duties of Mental Health Officers.

More recently, Children's Services have become more linked and support with the delivery of learning disability Social Work services for children and young people.

2.7. Adult Support and Protection

As reported in the previous annual report, the OPPC has continued to deliver a series of events for refresh and introduction to ASP. The "Council Officer" six day training course ran in January 2024 to ensure that all new permanent Adult and Learning Disability Social Work staff are fully trained and supported to undertake the role. Multi-agency financial harm training took place in September 2023.

Practice Awareness virtual 'drop-in sessions' for Senior Social Care staff and Registered Managers are ongoing, hosted by the Service Manager and the Team Manager for Adult and Learning Disability Social Work.

Chronologies of Significant Events and the accompanying guidance has now been shared to all partner agencies and is now a formal part of the ASP process. The updated Chronologies template has been recognised nationally as a best practice template. Easy read leaflets pertaining to the ASP process are now live and in use.

An Introduction to Trauma-informed Practice presentation has been delivered to the partnership, with staff engaging in relevant training to ensure they are sufficiently skilled in recognising and responding sensitively to trauma.

In 2022/23 there were 261 Police Vulnerable Person Database (VPD) referrals, an increase of 73 and 71 from the reporting periods 2021/22 and 2020/21 respectively. All three reporting periods evidence a significant increase from the referrals received across 2019/20; this is possibly related to greater public awareness following professional and public awareness activity over this period and an increased focus from management within Adult and Learning Disability Social Work services. In 2023/24 there were 235 VPDs submitted to adult services, showing a reduction compared to last year.

In 2022/23 there were 51 ASP referrals, an increase of 20 from the previous reporting period. Of these 51, 21 were male and 30 were female. 23 of the 51 ASP referrals, resulted in investigative powers being utilised. There was a Large Scale Investigation during this reporting period. In 2023/24 there were 68 ASP referrals, an increase of 17 from the previous reporting year. Of these 68 ASP referrals, 38% were male and 62% female and 56% were under 65 years old. There were no Large Scale Investigations during this reporting period.

2.8. Joint Inspection of ASP

The Joint Inspection of the Orkney Partnership took place between 31 October 2022 and 11 April 2023. Records were scrutinised of adults at risk of harm for a two-year period, November 2020 to November 2022. It was recognised that the Orkney Partnership was similar to all others across Scotland and was facing the unprecedented and ongoing challenges of recovery and remobilisation as a result of the COVID-19 pandemic.

The two key questions the Care Inspectorate posed were:

- How good were the partnership's key processes for ASP?
- How good was the partnership's strategic leadership for ASP?

The inspection reviewed processes and systems to ensure that adults at risk of harm in Orkney were safe, protected and supported. These included:

- Staff survey.
- Meetings with frontline staff and with strategic leadership.
- Scrutinising case files of adults at risk of harm for a two-year period.
- Scrutinising supporting evidence and the position statement.

Whilst the inspection findings recognised the significant work already underway and the substantial progress made, the overall two-year focus on the inspection was such that the grades awarded were that of weak in respect of the two key questions. Strengths however were noted and included:

- Partnership staff worked collaboratively to support and protect adults at risk of harm.
- The partnership commissioned an independent evaluation of multi-agency adult support and protection processes in 2021. The findings had provided a baseline for some essential improvements.
- The partnership collaborated with a higher education provider to create opportunities for staff to achieve professional social work qualifications. This was an innovative way to address challenging recruitment issues.

The areas for improvement determined by the Care Inspectorate are set out below.

- Strategic leaders should ensure the delivery of competent and effective adult support and protection key processes for all adults at risk of harm in line with their statutory responsibilities.
- Risk assessment, chronologies, investigations, and protection planning all require immediate improvement.
- Change and improvement following the independent review in 2021 needs to be accelerated. ASP should be a critical improvement priority for strategic leaders across the partnership.

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- The partnership's strategic oversight of progress should be strengthened. Effective governance and quality assurance arrangements are needed to support improvements in practice.
- The involvement of adults at risk of harm at all stages of the ASP process should be improved.
- Strategic planning and decision-making should be informed by the lived experience of adults at risk of harm and their unpaid carers.

The inspection did not in fact reveal areas for improvement that the Partnership were not already aware of and thus the associated Improvement Plan contains work which was already recognised as needed and in the planning process. The Improvement Plan had been submitted to, and confirmed as acceptable by, the Care Inspectorate.

The Improvement Plan is developed across the Orkney Partnership to ensure multi-agency focus upon these areas. The COG has oversight of the implementation and progression of the Plan. Below I have outlined progress achieved in this reporting period.

1. Chronology, risk assessment, investigation and protection planning templates and guidance need to be updated and standardised to ensure a consistent approach from all adult services and partners.

All ASP templates have been standardised and issued with guidance. Staff have been trained on the use of these documents. An audit has been carried out to provide assurance that key processes are being implemented.

2. Ensure effective governance and quality assurance arrangements are in place to support improvements in practice.

A Council Officer learning audit tool has been introduced. The ASP Quality Assurance Sub-group meets regularly to promote improvements in the quality of ASP processes and practice. This group reports to the OPPC.

3. Ensure the involvement of adults at risk of harm at all stages of the ASP process.

Adults at risk of harm are supported to receive the support of Advocacy. Practitioners actively involve adults and their unpaid carers at all stages of the ASP process. Feedback forms have recently been developed to gather the views of adults and their families.

4. Strategic planning and decision making should be informed by the lived experience of adults at risk of harm and their unpaid carers.

Adults at risk of harm and their unpaid carers are sent feedback forms asking for their views on the ASP process. Feedback is reported to the ASP Quality Assurance Sub-group. Consideration is being given as to how to facilitate meaningful involvement of adults and their unpaid carers in strategic planning and decision making.

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5. Strategic leaders need to ensure the delivery of competent and effective key processes. There is a need to develop a clear vision of ASP to focus the partnership and support improved engagement with staff and the wider public.

The Service Manager (Adult and Learning Disability Social Work) has overseen significant improvements in key processes and involved staff in operationalising these processes in a standardised and effective manner. A vision statement for adult support and protection has been launched by the OPPC. Engagement with the wider community is taking place by a range of approaches including a Social Worker being interviewed by BBC Radio Orkney on hoarding as part of National Hoarding Week.

2.9. Services provided by Mental Health Officers

Approximately 120 people required support by Mental Health Officers (MHOs) during this reporting period, an increase of 20 from the previous period. The four MHOs included within the reporting period provide a service 24 hours per day, 365 days per year, in addition to their substantive posts. People who did not require an MHO were supported by a Social Worker from the Community Mental Health Team.

Table 1 below shows activity levels for Guardianship and Intervention from 2019-2024.

Table 1: Intervention and Guardianship Orders 2019-2024

| Type of Order/Intervention (Guardianship) | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 |
|--|---------|---------|---------|---------|---------|
| New welfare guardianship orders where the CSWO is the Guardian. | * | 6 | * | 5 | 7 |
| Total orders for which the CSWO is the Guardian. | 15 | 22 | 17 | 25 | 22 |
| Number of assessments made by MHOs in relation to applications for welfare guardianship including private and CSWO applications. | 40 | 22 | 16 | 20 | 11 |
| Number of private Guardians being supervised by Officers of the Local Authority. | 63 | 32 | 54 | 50 | 52 |

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. There were seven Compulsory Treatment Orders during this reporting period.

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. There were nine short term detentions during the reporting period.

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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 11 adults detained in this reporting period, all of whom were transferred to Royal Cornhill Hospital, Aberdeen.

There were eight Mental Health Tribunals across all sites.

Table 2 below provides activity levels for mental health intervention and orders from 2019-2024.

Table 2: Activity Level for Mental Health Intervention/Orders 2019-2024:

| Type of Order and Intervention (Adults) | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 |
|---|---------|---------|---------|---------|---------|
| Compulsory Treatment Orders | 0 | 6 | * | * | 7 |
| Short term detentions | * | * | * | 20 | 9 |
| Emergency detentions | 7 | 7 | 16 | 12 | 11 |
| Other MHO assessments (those not leading to detentions, assessments to extend or vary orders, and social circumstances reports) | 7 | 23 | 62 | 62 | 56 |
| Mental Health Tribunals | * | 6 | * | * | 8 |

Note: * indicate fewer than five.

2.10. Justice Services Activity

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 representative of the size and nature of previous justice activity in Orkney prior to 2020/21 and the global pandemic.

During this reporting period there was a total of 75 reports completed, and 56 Community Payback Orders imposed by the Court.

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Table 3 below provides details of Justice Social Work activity from 2019-2024.

Table 3: Justice Activity from 2019-2024.

| Justice Activity | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 |
|--|---------|---------|---------|---------|---------|
| Social Work Court Reports | 82 | 30 | 55 | 70 | 69 |
| Supplementary Reports and Review Reports | * | 9 | * | 7 | 5 |
| Home Leave and Home Circumstance Reports | * | * | 0 | 0 | * |
| Community Payback Orders (CPOs) | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 |
| CPOs imposed by the Court | 59 | 30 | 28 | 60 | 56 |

Note: * indicate fewer than five.

The figures for 2023/24 indicate a marginal decrease in the number of Social Work Court Reports completed from the previous year and this is mirrored in the number of CPO's imposed by the Court. This slight reduction in CPO orders is perhaps a further indication that the 53% rise in CPO orders witnessed between 2021/22 and 2022/23 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. The figures have realigned with pre-pandemic levels, and it is anticipated this trend is likely to continue as there is a presumption of non-custodial sentence and greater use of community based disposals. It is recognised that supporting people within their community is both beneficial to the individual and communities. Should this trend continue however, Justice Services will undoubtedly see a parallel increase in resources required across services and the workforce.

Multi-Agency Risk Assessment Conference (MARAC) is established for people who are experiencing high risk domestic abuse. As one of the key multi-agency forums to address domestic abuse in Scotland, MARACs can ensure all victims at high risk of serious harm receive a robust response. There are 12 MARAC areas across Scotland with Orkney being part of the Highlands and Islands operating group which continues to be supported and developed through *Safe Lives*.

In the 12 months from July 2022 to June 2023, 35 MARACs in Scotland discussed 6,216 cases, an increase of 30% (1,292 cases) from the previous year when 28 MARACs discussed 4,924 cases from July 2021 to June 2023. However, although eight MARACs were not in the dataset from the same period last year this resulted in negligible change to the reported data.

Across the 32 local authorities there are several variants in terms of repeat cases, percentage of cases in relation to victim gender and referral route. Records reveal typically most referrals are made by Police however this is not reflected in Orkney

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where between July 2022 and June 2023, out of the 27 cases that were discussed, nine referrals were made by Police with the remaining 16 referrals being made by Third Sector partners, perhaps reflecting an increase in MARAC awareness and understanding of referral pathways and evidence of third sector partners in Orkney providing high level support and intervention for victims of domestic violence.

Multi-Agency Public Protection Arrangements (MAPPA) are a set of statutory arrangements of which the primary purpose is to maintain Public Protection and the reduction of serious harm. The protection of children, adults at risk and other members of the public is paramount. It is a structure by which registered sex offenders, mentally unwell restricted patients and other offenders who, by reason of their conviction, pose a risk of serious harm to the public are managed through the effective sharing of relevant information, and the assessment and management of that risk.

Orkney continues to be part of the Highlands and Islands MAPPA grouping area. The number of individuals managed under the auspices of MAPPA within Orkney remains consistently low. For context, some core figures across the Highlands and Islands for MAPPA are as follows:

- Number of registered sex offenders within the Highlands and Islands area, subject to MAPPA arrangements, on 31 March 2023 (in the community and in custody) was 332 persons.
- Number of Registered Sex Offenders notified to Jobcentre Plus was 38.

The figures above represent an increase from the previous reporting period, this being 228 and 25 respectively however the number of individuals subject to MAPPA arrangements in Orkney has remained relatively static, with the highest number at any one time over the reporting period, being eight.

This year there has been a noted increase in training opportunities for staff relevant to the justice role and risk management, with Social Work staff and supervisors undertaking a variety of training including Trauma awareness training; Child Protection Level 3 training and attendance at National Community Placement Supervisor training.

2.11. Appropriate Adult Service

The Appropriate Adult Service in Orkney has been run as a voluntary organisation for almost 20 years in Orkney. Following a statutory change, since 2020 the service has begun transitioning over to the Local Authority. In Orkney, this transition was stalled by COVID-19, however over the course of this reporting period, further progress has been made and following a recruitment campaign, the number of Appropriate Adults has increased by six individuals. This takes the current compliment to nine Appropriate Adults and a training programme has commenced.

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2.12. 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.

2.13. Child Protection

Child Protection remains a top priority in Orkney Children's Services Partnership with further development of procedures, protocols, training and development, and continual self-evaluation throughout the reporting period.

Child Protection has increased over the most recent reporting period, with 20 new registrations. This is reflective of a change in management and a new focus on:

1. Ensuring all efforts were made by the multi-agency partnership to work intensively with "edge of care" families, to manage risks at home under a Child Protection plan, rather than removing children from parental care and children being placed in Independent Fostering Agencies (IFAs)/residential care placements outwith Orkney.
2. Review of Child in Need cases open more than 6-12 months and escalating cases to Child Protection where positive change had not been achieved in the 6-12 month period.

Table 4: Child Protection Registration Figures from 2019-2024

| During the Year | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 |
|--------------------------------|---------|---------|---------|---------|---------|
| Child Protection Registrations | 18 | 18 | 21 | 12 | 23 |
| Children De-registered | 5 | 11 | 10 | 9 | 11 |
| New Registrations | 14 | 6 | 16 | * | 20 |

Note: * indicate fewer than five.

2.14. Care Experienced Children and Young People

Looked After Children activity levels have seen fluctuations in the number of children Looked After at home and away from home between 2019/20 and 2023/24. There has been a steady decline in the numbers of Looked After Children at home since 2020/21, with the current reporting period seeing the lowest number of Looked After Children at home, over a four-year reporting period. Looked After Children away from home have slightly increased over this reporting period from the last, however, overall numbers of children in care have slightly reduced from last year and significantly reduced from 2021/22. There continues to be a decreasing trend into the 2024/25 reporting period.

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Table 5: Looked After Children Trends from 2019-2024

| During the Year | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 |
|-----------------------------|---------|---------|---------|---------|---------|
| Looked After at Home | 10 | 15 | 13 | 10 | 6 |
| Looked After Away from Home | 29 | 21 | 39 | 33 | 35 |
| Totals | 39 | 36 | 52 | 43 | 41 |

Table 6: Children Referred to Reporter from 2019-2023

| Referrals and Children's Hearings | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 |
|---|---------|---------|---------|---------|---------|
| Number of Children Referred to Reporter | 57 | 43 | 69 | 59 | 68 |
| Number of Children's Hearings Held | 83 | 59 | 96 | 93 | 55 |

2023/24 saw in line with 2021/22, and an increase from 2022/23. However, the note is that large sibling groups or multiple sibling groups or pockets of children who offend together, can often skew figures.

There has been a significant reduction in hearings held in 2023/24. This could be due to children being terminated from Compulsory Supervision Orders (CSOs) and conversion rates of new cases being low.

In addition, we can often see increases in hearings having to be held where court processes take some time and hearings are required every couple of weeks due to interim measures across 66 days. This can often increase hearing numbers, or where hearings must be deferred for further information or where Relevant Persons do not attend. It may be that over the last year we have seen less interim or deferred hearings, and less grounds hearings. We currently have 15 children subject to CSOs in Orkney.

Lack of new cases coming in can be due to several reasons, insufficient evidence, or no need for compulsion and voluntary measures recommended instead. In addition, as above, sibling groups affect numbers.

The significant reduction in hearings held suggests a reduction in the need for compulsory measures, which is suggestive of a positive trend, and possibly an indication that earlier interventions on the continuum of family support are proving successful.

2.15. Service Improvements in Children's Services: Joint Inspections

The last 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. The grades awarded spanned unsatisfactory, weak and adequate.

The key areas for development identified were:

1. Ensuring key child protection processes including inter-agency referral discussions, risk assessments, case conferences and core groups work effectively to protect children at risk of harm.
2. Publishing comprehensive up-to-date inter-agency child protection procedures and training staff on these to clarify roles and responsibilities, and to help staff to be confident in their work.
3. Bringing about a step change in the impact of corporate parenting by delivering tangible improvements in the wellbeing and life chances of looked after children, young people and care leavers.
4. Strengthening key child protection processes, fully implementing the Getting it right for every child (GIRFEC) approach, and commissioning services to meet priority areas of need including therapeutic and family support services.
5. Improving the effectiveness and oversight of the public protection committee in carrying out core functions to protect children and young people.

A robust Improvement 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 and second Progress Reviews were covered in the previous reporting periods. A Position Statement was provided to the Care Inspectorate in March 2023.

In July 2023, the Care Inspectorate provided a response to the position statement. The response letter outlines that the second progress review concluded that there was compelling evidence that what had been accomplished was resulting in increased safety for children together with increased confidence from families.

They expressed confidence that partners in Orkney had built a momentum from the original inspection that had begun to achieve the cultural change necessary to introduce the required improvements.

The Care Inspectorate outlined that, given a number of leadership roles were filled with interim staff and there are difficulties with recruitment and retention of permanent staff, there is a need to undertake careful succession planning.

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The significant investment in Children's Services over the past number of years was deemed reassuring. The Care Inspectorate outlined the need for this to continue to ensure improvements reach fruition.

Other key themes identified was the need for comprehensive training and supervision of staff.

Advice was given to further enhance the improvement plan to ensure we can effectively measure and evidence progress.

Attention was given to the need for PARIS, the computer system, to be further enhanced. The PARIS system has received notable investment to develop it to meet the full spectrum of children and families' processes and to tell the story of the child's involvement with services and clear rationale for decisions taken. At present this remains a work in progress.

The letter outlined the importance of increased voice, choice, participation and feedback from children and their families and the role of independent advocacy. I am pleased to report that after some difficulties in securing consistent advocacy in 2023, there has been a marked improvement in 2024, which continues to improve further. I am pleased to report that recent internal statistics report more than 80% of children currently on child protection plans are engaging with independent advocacy and over 60% of our care experienced children and young people. This is excellent and I would like to thank WhoCares? Scotland who provides our advocacy for children, the Improvement and Reviewing Officer and the frontline Social Work Team for the work they have collectively undertaken to reach this point. The service is actively seeking more service user feedback to inform individual care plans and more widely to support improvement in service provision.

In addition to the role of Chief Social Work Officer, I also hold the position of Head of Children, Families and Justice Services. Permanent recruitment to this role was achieved on 24 April 2024. Prior to this, the role had been held for a considerable period by Interim Personnel. I would like to take this opportunity to thank Maureen Swannie for the dedication and leadership provided to staff and services during the reporting period.

During the reporting period, I occupied the Interim Service Manager (Children and Families Field Work) role.

There is a national recruitment issue in frontline children and families' teams, resulting in a level of dependency on Interim workers. Remote, rural and island complexities exacerbate this challenge further.

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During this reporting period, appointments to Interim Service Manager, Team Manager and Social Worker posts in Children and Families Field Work and Authority Wide Services have allowed us to continue to progress a range of developments in Children and Families Social Work including:

- The Improvement Plan, implemented in response to the Joint Inspection of Children and Young People in Need of Care and Protection in 2019, has now become business as usual.
- An Independent Chair now facilitates all initial and review child protection planning meetings.
- Staff recruitment continues with a dedicated recruitment campaign being developed for Children's Services Social Workers and Managers.
- Our Grow our Own Social Worker Programme continues to provide qualified social workers on an annual basis, across children's and adults services.
- Delivery of training and development continues, with a core focus on trauma-informed practice training and child protection training.
- In the autumn of 2023, Children's Services with support of the multi-agency partnership and the Public Protection team, conducted a comprehensive self-evaluation of our multi-agency child protection procedures (last updated 2020/21). This subsequently triggered a full review of our multi-agency partnership protocols to bring them fully into alignment with the updated 2021 and 2023 national guidance.
- Planning and preparation for the introduction of the new national Joint Investigative Interviewing model (SCIM).
- A new group supervision model within Children's Services was launched in 2024.
- Significant work has been undertaken in this reporting period to review and embed an updated quality assurance framework within Children's Services. This has resulted in the introduction of a new audit framework and accompanying collaborative audit tools. This will support with the measurement of strengths, progress and any continued areas for development.

2.16. Children and Families Authority Wide Services

Children and Families Authority Wide Services have been overseen during the reporting period by two Interim Service Managers (one from April 2023 to March 2024, and the other from April 2024 to present) with responsibility for the following provisions:

- Orkney Fostering Service.
- Orkney Adoption Service.
- Orkney Adult Placement (Continuing Care) Team.
- Through Care / Aftercare Support.
- Children and Young Person Residential Care/Short Break Services (Rendall Road, and Aurrida House),

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Fostering, Adoption, Adult Placement (Continuing Care), Throughcare and After Care services (four social workers on permanent contracts) are the responsibility of one Team Manager which over the reporting period has been filled on an interim basis.

Within Residential Services, Rendall Road and Braeburn Court come under the responsibility of one Registered Manager (32 members of staff including seniors, full time, part time, relief and domestic) and Aurrida House a separate Registered Manager (25 members of staff including seniors, full time, relief and domestic). Both residential provisions have strong, long term permanent managers.

2.17. Fostering, Adoption and Adult Placement (Continuing Care) Services

Orkney Fostering Service has been registered since 21 December 2005 and provides a fostering and family placement service for children and young people aged from 0-18 who are assessed as in need of alternative family care. The service recruits, provides training and supports caregiving families to provide a range of fostering placements to children including permanent, long term, interim and short break.

Orkney Adoption Service has been registered since 21 December 2005. The adoption service provides a service for children and young people, aged from birth to 18 years, and their families who are assessed as in need of this service. The agency recruits and supports adoptive parents to provide families for those children who cannot live with their birth parents or extended family members.

Orkney Adult Placement Service has been registered with the Care Inspectorate since 10 September 2020 and it provides a continuing care service to young people who are living in foster care. This allows young people to remain with foster carers until the age of 21.

These services were inspected towards the end of 2022 and then re-inspected in October 2023 and the tables below highlight that there was no downgrading in any areas with many areas seeing an improvement in grade or remaining the same. Towards the end of 2023 and into 2024 there were clear improvements evidenced in that:

- Children and young people experienced nurturing care from their care givers.
- Foster Carers experienced proactive and reflective support from their supervising social workers.
- The Panel Chair was seen as a stabilising factor with a wealth of experience.
- Adopters were well supported by supervising social workers who offered timely and effected interventions which benefited whole families.
- Young people received proactive support which promoted the development of independent skills at a pace which was right for them.
- There was an investment and a commitment of staff training which was beneficial to the supervising social workers as well as those they support.
- There was a strong focus on leadership within the local authority.

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- Risk was identified well and there was clearer oversight and tracking of permanence planning for children and young people

At the same time, key areas for improvement which needed to be prioritised and taken into improvement planning were:

- Despite there being progress in tracking plans for children, there was still concern around drift and delay and achieving permanence which was also being impacted by the need for need for external services beyond the remit of the social work teams.
- Progress in terms of advocacy for children and young people.
- Although risk was identified, this was not always analysed well with limited information with regards to relevant interventions or strategies to support the management of the risk.
- The temporary nature of leaders created a fragility to the sustainability of improvements.
- *'All departments within the local authority need to be aware of their role within corporate parenting and their responsibility to meet young people's needs holistically'.*

This year, however, has seen further stability and self-evaluation which has allowed for clearer planning and realistic priorities to take forward in 2024/25.

These included:

- Recruitment and retention of foster cares, adopters and panel members.
- Further attempts to recruit permanent staff to the roles of Team and Service Manager.
- Ensure that the training and development of staff, carers and panel members continued to be a priority.
- Ensuring that Supervision continues to take place consistently.
- Embedding the progress made in relation to advocacy with the newly appointed Who Cares? Scotland advocate for Orkney.
- Planning and progression of the Promise Board.
- Continue to progress the permanence planning for children and young people.
- Further development of quality assurance mechanisms and review/update of the Improvement Plan.

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Inspection Grades for Comparison 2022/23.

(Key: **RED** – drop in grade; **AMBER** – no change; **GREEN** improved Grade).

| Fostering Service | 2024 | 2023 | 2022 |
|---|------------------|------------------|------------------------|
| How well do we support people's wellbeing? | 4 (Good). | 2 (Weak). | 2 (Weak). |
| 1.1. Children, young people. adults and their caregiver families experience compassion, dignity and respect | 5 (Good). | 3 (Adequate). | 2 (Weak). |
| 1.2. Children, young people and adults get the most out of life | 4 (Good). | 3 (Adequate). | 2 (Weak). |
| 1.3. Children, young people and adults' health and wellbeing benefits from the care and support they experience | 4 (Good). | 3 (Adequate). | 3 (Adequate). |
| 1.4. Children, young people, adults and their caregiver families get the service that is right for them | 4 (Good). | 2 (Weak). | 2 (Weak). |
| How good is our leadership? | 3 (Adequate). | 2 (Weak). | 1 (Unsatisfactory). |
| 2.2. Quality assurance and improvement are led well | 3 (Adequate). | 2 (Weak). | 1 (Unsatisfactory). |
| How good is our staff team? | 4 (Good). | 3 (Adequate). | 2 (Weak). |
| 3.2 Staff have the right knowledge, competence and development to support children, young people, adults and their caregiver families | 4 (Good). | 3 (Adequate). | 2 (Weak). |
| How well is our care and support planned? | 4 (Good). | 3 (Adequate). | 1 (Unsatisfactory). |
| 5.1 Assessment and care planning reflects the outcomes and wishes of children, young people and adults | 4 (Good). | 3 (Adequate). | 1 (Unsatisfactory). |

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| Adoption Service | 2024 | 2023 | 2022 |
|---|--------------------|-----------------|------------------------|
| How well do we support people's wellbeing? | 4 (Good). | 2 (Weak). | 2 (Weak). |
| 1.1 Children, young people. adults and their caregiver families experience compassion, dignity and respect | 5. (Very Good). | 4 (Good). | 3 (Adequate). |
| 1.2 Children, young people and adults get the most out of life | 4 (Good). | 4 (Good). | 2 (Weak). |
| 1.3 Children, young people and adults' health and wellbeing benefits from the care and support they experience | 4 (Good). | 4 (Good). | 3 (Adequate). |
| 1.4 Children, young people, adults and their caregiver families get the service that is right for them | 4 (Good). | 2 (Weak). | 2 (Weak). |
| How good is our leadership? | 3 (Adequate). | 2 (Weak). | 1 (Unsatisfactory). |
| 2.2 Quality assurance and improvement are led well | 3 (Adequate). | 2 (Weak). | 1 (Unsatisfactory). |
| How good is our staff team? | 4 (Good). | 3 (Adequate) | 3 (Adequate). |
| 3.2 Staff have the right knowledge, competence and development to support children, young people, adults and their caregiver families | 4 (Good). | 3 (Adequate) | 3 (Adequate). |
| How well is our care and support planned? | 4 (Good). | 2 (Weak). | 2 (Weak). |
| 5.1 Assessment and care planning reflects the outcomes and wishes of children, young people and adults | 4 (Good). | 2 (Weak). | 2 (Weak). |

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| Adult Placement (Continuing Care) Service | 2024 | 2023 | 2022 |
|---|-------------------|-------------------|------------------|
| How well do we support people's wellbeing? | 4 (Good). | 4 (Good). | 3 (Adequate). |
| 1.1 Children, young people, adults and their caregiver families experience compassion, dignity and respect | 4 (Good). | 4 (Good). | 3 (Adequate). |
| 1.2 Children, young people and adults get the most out of life | 5 (Very Good). | 5 (Very Good). | 3 (Adequate). |
| 1.3 Children, young people and adults' health and wellbeing benefits from the care and support they experience | 4 (Good). | 4 (Good). | 3 (Adequate). |
| 1.4 Children, young people, adults and their caregiver families get the service that is right for them | 4 (Good). | 4 (Good). | 3 (Adequate). |
| How good is our leadership? | 3 (Adequate). | 2 (Weak). | 2 (Weak). |
| 2.2 Quality assurance and improvement are led well | 3 (Adequate). | 2 (Weak). | 2 (Weak). |
| How good is our staff team? | 4 (Good). | 3 (Adequate). | 3 (Adequate). |
| 3.2 Staff have the right knowledge, competence and development to support children, young people, adults and their caregiver families | 4 (Good). | 3 (Adequate). | 3 (Adequate). |
| How well is our care and support planned? | 4 (Good). | 3 (Adequate). | 3 (Adequate). |
| 5.1 Assessment and care planning reflects the outcomes and wishes of children, young people and adults | 4 (Good). | 3 (Adequate). | 3 (Adequate). |

Overall, the fostering, adoption and adult placement services are progressing on an improvement trajectory. There are several positives to celebrate though there are also clearly defined areas for development, with consistency across the board being a key component to work towards.

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With regard to the Corporate Parenting and Promise agenda, it is important that all multi-agency partners within the partnership understand and implement their responsibilities to our care experienced children and young people, to ensure they are supported to heal from their prior adverse childhood experiences and be provided with the support they require across all areas of their life to grow into independent adults with encouraging life prospects, supported to reach their full potential and to contribute positively to society.

The Care Experienced Children and Young Person's Attainment Coordinator works closely with the multi-agency partnership to ensure a connected and coordinated approach with a key focus in supporting the attainment and achievement of our care experienced children and young people. Notable progress has been made in this space during this reporting period compared to 2022/23. Care experienced children and young people (CYPE) are performing much better in numeracy, literacy, reading and writing.

Tables 7, 8 and 9 below show the narrowing of the attainment gap of our care experienced young people in comparison to their non-care experienced peers across our Primary settings:

Table 7: Percentage of Pupils Achieving Expected Curriculum for Excellence (CfE) levels.

| Percentage of pupils achieving expected CfE levels | | | | | |
|--|------------|------------|-----------------------|------------------|------------|
| 2022/23 | Reading | Writing | Listening and talking | Literacy 3 for 3 | Numeracy |
| CECYP | 43% | 29% | 54% | 27% | 33% |
| All (non CEYP) | 83% | 77% | 89% | 77% | 84% |
| LA Variance/Gap | 40% | 48% | 35% | 50% | 51% |

Table 8: Percentage of Pupils Achieving Expected CfE levels.

| Percentage of pupils achieving CfE levels | | | | | |
|---|------------|------------|-----------------------|------------------|------------|
| 2023/24 | Reading | Writing | Listening and talking | Literacy 3 for 3 | Numeracy |
| CECYP | 59% | 48% | 67% | 50% | 57% |
| All (non CEYP) | 82% | 77% | 89% | 77% | 85% |
| LA Variance/Gap | 25% | 32% | 25% | 27% | 28% |

As shown, over the last academic year, the attainment gap has significantly narrowed.

As the next table shows, across all curriculum areas, the percentage of primary school age care experienced children achieving expected national standards has also risen.

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Table 9: Percentage of CYPE achieving expected CfE levels.

| Percentage of pupils achieving CfE levels | | | | | |
|---|------------|------------|-----------------------|------------------|------------|
| | Reading | Writing | Listening and talking | Literacy 3 for 3 | Numeracy |
| 2022/23 | 43% | 29% | 54% | 27% | 33% |
| 2023/24 | 57% | 45% | 64% | 50% | 57% |
| Improvement | 14% | 16% | 10% | 23% | 24% |

2.18. Throughcare/ Aftercare Support Service

There is one dedicated Social Worker who provides support and advice to young people who may have been care experienced on or beyond their 16th Birthday and need help to prepare to live independently and ongoing aftercare support.

Positive improvements have continued to be made in the care and support offered to those who consent to provision from the throughcare/aftercare service. Having a consistent person who is dedicated to this role, providing support and guidance continued to be a priority in the year 2023/24. Building relationships with care experienced young people, initiating Pathway Plans and reviews ensures that there is a team around the young person to help them achieve positive outcomes such as with key life skills, training and employment. The Council's Improvement and Reviewing Officer exercises a fundamental role in chairing the pathway planning meetings to ensure independent oversight of the progression of the plan.

Progress was made in terms of reconstructing the documentation for the Leaving Care Grant to ensure that all entitlements and remaining balances were tracked. A focus was given to connecting to resources throughout the community for young people such as the Orkney Blide Trust, Relationship Scotland Orkney, Youth Café, Right There and Who Cares? Scotland. During this period significant work has also been undertaken to work with Child and Adolescent Mental Health Services and wider Mental Health Services to encourage and support our young people to attend their appointments and access required emotional wellbeing and mental health supports.

Care experienced individuals are a vulnerable group who have had to deal with significant and multiple challenges in their lives. Transitioning from care is a key period in a young person's life and is often associated with poor outcomes in areas such as health, education, housing and employment. There is substantial evidence on the association between experience of care and homelessness. Housing instability is noted as the most common feature of poor transition into adulthood, which given the shortage of suitable accommodation in Orkney across the board, has required close collaboration with the Council's Housing service. It is therefore important that our care experienced children and young people are prioritised for housing and provided with the necessary education, information, guidance and support to live independently.

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There have been significant achievements and positive outcomes evidenced in many of the young people regularly attending college, school, holding down full and part time employment.

There has been a steady increase in young people engaging with the pathway assessments and development of pathway plans and a recognition that consultation and participation although taking place needed to be further developed and embedded.

Having a clear understanding of the young people who require and who are entitled to support enabled the team to set key priorities moving into 2024 which include:

- A better understanding of the mental health support needs of care experienced young people and the services that need to be in place to ensure best outcomes.
- Ensuring better systems are in place for transition to independent living with a key focus on the corporate parenting responsibilities in terms of housing.
- Moving the Promise Board from the planning stages to implementation which will have a positive impact on the outcomes for young people accessing the services as key stakeholders demonstrate their responsibilities as Corporate Parents.
- Development of Care Experienced forums/panels to fully encompass the need for consultation and participation in service design and delivery.
- Development and update of policy and procedure.

2.19. Residential Care – Rendall Road and Braeburn

Children's Residential Services are situated over two properties in Orkney. The first is a new purpose built, six-bedroom detached property and is registered to accommodate four young people. The second property is a three-bedroom semi-detached house which is registered to accommodate two young people.

The inspection, which was undertaken on 27 October 2022, evaluated the service as adequate and identified that carers were working well to improve the outcomes for children and young people, there were supportive links with education, personal planning for children and young people was good, however, there were areas to address to ensure consistency in quality assurance.

These areas for improvement included training, ensuring consistent trauma informed approaches, ensuring that notifications to the Care Inspectorate were routinely submitted, addressing the over-reliance on relief carers and improvement planning was said to need further development.

The 2023/24 period saw improvements in working with partner agencies including training providers to further ensure positive outcomes for young people along with external managers being committed to accessing resources intended to improve experiences and outcomes for young people.

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The process for admission of young people to the service was developed and it was acknowledged that it would need to be reviewed with any new admissions to ensure fitness for purpose.

The strength of throughcare support was evidenced with young people's views informing decisions about their future. The team ensured that they supported young people to attend regular independent reviews of their care/pathway plans and assured opportunities for young people to flourish, through education, college and work experience. There was a clear focus on raising attainment and ensuring young people's aspirations were at the forefront of their experiences.

A stable group of carers was established who provided consistent and compassionate supports and the implementation of Promoting Positive Behaviour (PPB), including the overall approach of the programme, the principles of safe practice, positive approaches to care, with a strong theoretical foundation of nurture, de-escalation and positive reinforcement, as an appropriate therapeutic intervention framework. The provision has long prided itself on ensuring that the children and young people are afforded individual activities and opportunities to provide a sense of wellbeing and identity and this continued in this period. There were a wealth of complementary school reports and certified achievement for excelling in preferred sports and for others work experience which meant that they could learn more about their own abilities to develop skills for the future.

A focus on health and wellbeing was prioritised which included home cooked foods and a nurturing environment, albeit it was recognised that more structure around mealtimes was needed to embed the importance of developing positive approaches to food preparation and the aspect of living and eating together.

A re-inspection completed on 20 October 2023 affirmed the improvements that had been identified in self-evaluation practices discussed above whilst also highlighting aspects for improvement with the overall evaluation remaining as Adequate.

The key messages from this were:

- The need for more involvement from external managers to improve oversight of the service and to quality assure the experience and outcomes for young people.
- Development planning and self-evaluation remain a priority for improvement.
- Consideration of the need for waking night staff.
- An improvement to the physical appearance of Braeburn as it was seen in need of investment, to bring the quality of furnishings and décor up to an acceptable standard.
- A focus on consultation with the young people and others to influence priorities and service improvement.

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- Ensuring that outstanding requirements from the previous inspection were addressed as although efforts had been made these had not been fully met consistently such as all staff not being trained in PPB approaches and a clear evidence and justification as to why waking night staff were not being used albeit there were no immediate risks identified from not having this in place at the point of re-inspection.

2.20. Respire/Short Breaks Service - Aurrida House

Registered since 1 April 2002, Aurrida House provides respite care to young people and provides services for young people who need support arising from a physical, sensory or learning disability which may include challenging behaviour and complex health needs.

Aurrida House continues to be an excellent resource for children and young people which is reflected within its inspections which was last undertaken in October 2022 with no requirements or areas for improvements made with all three areas for improvements addressed from the previous year.

During the period 2023/24, the service has continued to adopt an approach of self-evaluation to ensure best practice for children, young people and their families. Training opportunities were also identified to support the knowledge and skills required to support the collective group, but also individual complex needs. This included developing skills in communication and improving the working relationships between partner agencies such as Education, Support for Learning, Speech and Language Therapy and the Learning Disability and Autistic Spectrum Disorder Nurse. October 2023 also saw Aurrida House moving from the line management of the All Age Learning Disability Team to Authority Wide services, within the children and families structure.

There was increased capacity within the service during this period which resulted in several referrals being made through the Children and Families Social Work team. Between August 2023 to present, there has been a significant increase in the packages of support that have been put in place. It is important that regular reviews of care packages are undertaken and equity considerations to ensure this finite resource provides for our children and young people who are most in need of support.

Moving into the 2024/25 period there are continued areas for consideration and ongoing work. The family focus registration that has not been utilised since November 2023 is to be reviewed to look at where it may be possible to offer crucial outreach support to children, young people and their families who need support, yet are not able to access Aurrida's respite services directly.

2.21. Family Support Team

The Family Support Team within Children and Families Social Work Services was born out of additional investment following the 2019 Joint Inspection of Children's Services. The Team works closely with the Social Work Team on open cases to the department. The team comprises a Senior Family Support Worker and two Family Support Workers. The Team supports with early intervention and prevention, educational parenting work and a vast array of supports for children and young people to promote their emotional

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wellbeing, confidence and self-esteem. The Team also supervises family time between children and their parents subject to compulsory supervision measures within the Children's Hearing system.

2.22. Out of Hours Service

There continues to be challenges with the provision of Out of Hours Social Work services due to permanent staffing gaps as noted in the previous reporting period. Vacancy levels have again impacted on the number of eligible permanent staff available to undertake Out of Hours duties, placing a strain on the service.

Whilst the Grow Our Own Social Worker programme is to be celebrated, it produces newly qualified social workers who are not eligible to go on the rota until they are one year post qualified and have the required knowledge and skill to undertake the role. This has an additional knock-on effect with regarding number of staff able to partake on the Out of Hours rota.

The Chief Officer, Heads of Service and Service Managers have stepped in and undertake regular shifts on the out of hours rota, which has been supportive.

The Out of Hours Social Work Service is an emergency Social Work service outwith normal working hours, therefore it is crucial that it continues to operate to ensure the care, support and protection needs of the most vulnerable in the Orkney community.

I would like to take this opportunity to express my thanks and gratitude to the Social Work practitioners who partake on the rota to ensure this vital service continues to serve the community.

2.23. United Nations Convention on the Rights of the Child

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. At the time of writing, I can confirm that on 16 July 2024 the UNCRC (incorporation) (Scotland) Act 2024 became Law in Scotland.

The legislation expects that local authorities will have in place appropriate and effective policy, practice, and procedure, which can deliver the rights contained in the UNCRC.

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.

The Children's Services Strategic Planning Group has established a UNCRC sub-group to focus on the review of policies and procedures leading to and following the passing of the Act. This has triggered a review of the local multi-agency voice of the child procedure. Liaison is underway with key stakeholders to ensure updated procedures are compliant with the legislation and to support children to express their views in

decision making forums that affect them; have a diversity of options available to them to express themselves fully; advocacy being offered to all children open to children services; child friendly complaints processes; and confirmation of an independent legal advice pathway should children wish to seek independent legal advice.

2.24. The Child as a Rights Holder

Article 12 of the UNCRC (respect for the views of the child) details that every child has the right to express their views, feelings and wishes in all matters affecting them, and to have their views considered and taken seriously. This right always applies, for example during immigration proceedings, housing decisions or the child's day-to-day home life.

Article 12 also gives considerable weight to children as autonomous beings. It is not sufficient to exclude their views by adopting an adult centric position. 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.

Legal opinion states that where there is no material to infer parental harm, the views of the child who wants parental involvement may have weight. As such, a blanket approach would not be conducive to the child, therefore any variation should be justified on a case-by-case basis.

3. Workforce and Resources

3.1. 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.

3.1.1. 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 crisis in the recruitment and availability of Social Workers, and other professionals, which is experienced across most of Scotland. Some initiatives we have engaged with to try to address our challenges include:

- Registered with the SSSC, return to practice scheme.
- We have noted interest with the NHS Education Scotland National Care Service Directorate migrant worker initiative.

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- Specific recruitment campaigns and encouraging current staff members to share their stories of what it is like to work in Orkney on social media has been developed.
- Orkney has an established grow our own social work qualification route, which produces qualified social workers on an annual basis. At present, on average two sponsorships are offered per year, with the view that upon qualification, the Qualified Social Workers will be recruited and retained within our Children, Adults and Justice Social Work teams.

3.1.2. 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 does however mean 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 and managing increased demand.

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.

As discussed earlier in the report, the Whole Family Wellbeing Fund has been used to promote early intervention and prevention support and a new team hosted by Community Learning and Development colleagues is coming to realisation. This will hopefully support a reduction in the need for involvement from statutory services because children and their families will be able to access support earlier when difficulties and problems are more manageable/easier to overcome, reducing and/or avoiding the need for statutory and crisis response services.

3.1.3. Funding and Resourcing

The challenge facing Social Work and Social Care services relates to the climate of public funding including savings requirements. This can jar between the challenges of available resources and funding versus public demand and expectation.

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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.

Community Led Support has been further developed in this reporting period. Voluntary Action Orkney were commissioned to recruit Island Wellbeing Co-ordinators to the islands within the Orkney community. This project is now successfully implemented on several of the islands. To promote equity across all islands scoping will be required to identify any gaps. This approach to early intervention and Community Led Support has been very beneficial to the communities they serve. The ethos behind the project is to ensure that everyone is treated as equal, and signposted to relevant support services and does not experience inequality or disadvantage because of age, gender, disability, race including colour, nationality, ethnic or national origin, religion or belief, sex, sexual orientation; rurality or for any other reason. It is accepted that further work is to be completed to ensure all inhabited islands have access to an Island Wellbeing Co-Ordinator.

3.2. Resources specific to service area

The main financial issues reported throughout the year were:

3.2.1. Children and Families

Social Work services have been experiencing high levels of vacancies and some sickness absence for a considerable length of time, including key leadership and management roles. Unfilled positions combined with recruitment challenges has resulted in the need to employ agency staff to ensure statutory services continue to be provided to the public.

Most importantly, the statutory requirement to provide Social Work services for children and young people, particularly in the field of child protection, requires the ability to respond to need quickly and the need for experienced and knowledgeable child protection practitioners. Temporary arrangements to ensure this capacity have incurred significant, additional, unfunded expenditure. There are additional costs incurred for agency Social Worker for travel and accommodation, on top of notably higher costs for salary.

Too many children and young people are currently cared for outwith the Orkney community in residential and on foster care provision, totalling 11 children in this reporting period. Outwith residential and fostering provisions cost significantly more than local foster care and residential care in Rendall Road. This puts a significant strain on the budgets. During this reporting period reviews have been underway with all current outwith placements, with the aspiration to return as many children to the Orkney community as possible. This will not only reap a financial benefit, but more importantly, support the young people's sense of identity, belonging and connection with the local people and their community. There are a small number of young people who will not be returned at present, due to health and developmental needs that require specialist

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services not available in Orkney and those who do not at present identify Orkney as their place of identity and belonging.

Work is progressing in a child and families' space to provide more of a focus on self-directed support for disabled children and young people to ensure children with disabilities and their carers are supported and empowered to be as independent as possible and secure more innovative and bespoke support packages in a community context.

A key focus also remains the revision and implementation of a new neuro developmental pathway, to support a single point of entry multi-agency triage. The waiting lists are currently too high, children wait too long to be assessed, though the multi-agency partnership is working hard to resolve this, in preparation for the new and improved pathway.

3.2.2. Adult Social Care Services

Pressure on Adult Social Care services was growing prior to the pandemic; that pressure has continued with increased referrals for all forms of Adult Social Care. A stark example of this is that adults in crisis continue to come forward who for a variety of reasons, have required immediate and unplanned support. People delayed in hospital have been very variable in both number and cause but are often due to the lack of legal powers being in place to enable future arrangements to be put in place. This regularly places undue pressure on hospital services and can occur at any point during the year. Setting aside the legal impediments regarding discharge, work in this area is ongoing regarding other discharge opportunities as it is paramount for both the wellbeing of the individual and the efficiency of the hospital to keep these situations to a minimum.

3.2.3. Older People

There is a continued reliance on agency staffing due to recruitment issues and long-term sickness absence within residential care homes and supported accommodation.

Regarding staff vacancies, recruitment relating to Social Care staff continues to be an ongoing process. Services continually endeavour to recruit and retain staff however as elsewhere in the UK, they are finding it difficult to recruit from a limited available workforce. Services rely at present on the use of additional hours from permanent staff members, relief staff and agency workers to backfill any vacancies they may have. As noted in previous reports the workforce is ageing and much of the work is physically demanding despite modern day equipment. To tackle this, we have embarked upon a recruitment campaign encouraging people to apply and receive a "Golden Hello" or asking Council staff to "Refer a Friend" when they believe they know of someone suited to that form of care. Both financial incentives are in early days.

Orkney has no nursing home provision and it should be noted that therefore both residential care and supported accommodation for adults operate at the top of their licence as we endeavour to keep folks here in Orkney whilst ensuring they receive appropriate care. A consequence of this is that it can be difficult for people with significant dementia whose presentation includes very challenging behaviour to live

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alongside other people with dementia in a small group living setting. This is an increasing occurrence and we are working to ensure that we take a multi-disciplinary approach. To that end we were delighted to welcome the addition of an Admiral Nurse to the staffing complement of Age Scotland Orkney. This post which is part funded by the Integration Joint Board will provide another avenue of expertise where multi-agency planning is required to ensure we can manage these situations in a way that is person centred not only to the individual but to other service users as well.

3.2.4. Care at Home and Telecare/Community Care Responder Services

The demand for care at home continues to grow due to ongoing demographic evidence regarding ageing population and the increased complexity of need of people requiring service provision. This is in respect of all care at home provision in line with all four options of Self Directed Support.

From an in-house care at home perspective the demand for provision coupled with longstanding and ongoing recruitment challenges has meant the need to utilise a significant number of agency staff. However, with the launch of the Golden Hello and Refer a Friend schemes, in July 2024, the vacancy numbers have started to slowly reduce. The service has also reviewed its waiting list and capacity management process which has allowed for a more efficient and effective recycling of capacity as it arises. At the time of writing this report the service has 162 individuals receiving internal care at home provision across mainland Orkney and the Isles. There also remains a focus on individuals within an inpatient hospital setting to ensure, where possible, delayed discharges are avoided as much as possible. However delayed discharges can, at times, remain a challenge for the service given the already aforementioned landscape.

The Telecare/Community Care Responder service also continues to grow not just in numbers of individuals utilising the service but also in the different types of digital solutions being used to support individuals remain at home. At the time of writing this report the service has 841 individuals utilising the Telecare/Community Care Responder service across mainland Orkney and the Isles. The Analogue to Digital project is well under way in Orkney and although the date for switchover has now been delayed until January 2027 the service remains focused on achieving full digital transformation by December 2025. 230 individuals have already been switched over to digital connections which is 27% of the overall total. In addition, Orkney was accredited Bronze status, via the Digital Office, in February 2024 for the work achieved to date, at that time re the Analogue to Digital Switchover. Currently the service is working towards Silver accreditation with the ongoing testing of different suppliers and different pieces of equipment and peripherals.

3.3. Multi-Agency Partnership Initiatives

During this reporting period significant planning and preparation was undertaken regarding the Whole Family Wellbeing Fund and agenda. A decision was taken for colleagues within Community Learning and Development to host a new Whole Family Wellbeing Support Team, to focus on early intervention and prevention support across the continuum of need, support and protection.

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An early intervention and prevention pathway is in the development stages to identify families who need support at the earliest opportunity when difficulties are hopefully lower level and to provide support at a voluntary level, with the hope this avoids the needs for involvement from statutory child protection and looked after/care experienced support services. The ethos of the new team will be to build early connections and close working relationships with children and families to agree a co-ordinated support plan with relationship based, strengths based and solution focused methodologies at the core of all work undertaken.

As reported in the previous report, the Orkney Emotional Wellbeing Service led by Action for Children continues to develop and support young people aged eight to 18.

The charity has a Family Practitioner who focuses on vulnerable children, young people and families affected by alcohol or drug use and is jointly funded by Action for Children and the Orkney Health and Social Care Partnership.

Diversionary youth work sessions continue weekly in the Stromness area, with young people to provide positive stimulation, activities and a drink and snack to avoid negative peer and community related behaviour such as anti-social behaviour. The diversionary youth work sessions are in partnership with the Community Learning and Development staff. These sessions continue to be well attended.

The Alcohol and Drugs Partnership within Orkney continues to commission services to support children and young people and adults by providing advice, guidance, information and education, to more targeted and specialist drug and alcohol support services.

Orkney has an established Suicide Prevention Task Force, comprised of key professionals across the multi-agency partnership. The Task Force, propose strategies and interventions with early intervention and prevention methodologies at the core, to ensure those with emotional wellbeing and mental health difficulties receive the right type of support at the earliest opportunity.

Voluntary Action Orkney, the Third Sector Interface in Orkney, are a core member on the Children's Services Strategic Planning Group and the OPPC. This promotes community partnership working and helps to co-ordinate support for children and their families and identify any gaps/inequality in family support provision across the Orkney community.

3.4. Year End Financial Position

The revenue expenditure outturn statement in respect of Social Work and Social Care for financial year 2023/24, is as shown in Table 10 below:

Table 10: Indicative Budget to Full Year Spend (Orkney Islands Council).

| | Indicative Budget | Additional Allocations | Full Year Budget | Usage of Reserves | Full Year Spend |
|---------|-------------------|------------------------|------------------|-------------------|-----------------|
| | £000 | £000 | £000 | £000 | £000 |
| 2023/24 | 26,460 | 482 | 26,942 | 3,943 | 30,885 |

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The additional allocations can be broken down as follows in Table 11.

Table 11: Budget Summary

| 2023/24 | Budget Summary £000 |
|---|--------------------------------|
| Original Net Budget | 26,460 |
| Apportioned Costs Realignment | (39) |
| Additional Funding to Local Government Pay Settlement | 625 |
| National Trauma Training Programme | 50 |
| Whole Family Funding | 132 |
| Transformation Funding | 6 |
| NHS Orkney Income | (274) |
| Kinship and Foster Care Payments | 50 |
| Other Budget Adjustments | (68) |
| Revised Net Budget | 26,942. |

The outturn position for the Integration Joint Board (inclusive of health and social care) for 2023/24 is an overspend position of £5.609m, namely total spend of £73.221m against the approved budget of £67.612m.

The total overspend position comprises the following:

- NHS Orkney commissioned services - £1.666m.
- Orkney Islands Council commissioned services - £3.943m.

Within services commissioned to Orkney Islands Council, savings for 2024/25 in respect of a reduction in its employer's pension contribution rates (£335k) and a 1% reduction in staff budgets (£216k) to reflect vacancy management have been applied to the budget.

For Orkney Islands Council commissioned services, to assist in achieving balanced budgets for 2025/26, 2026/27 and 2027/28, indicative efficiency targets of £469k, £704k and £938k respectively have been set.

In addition to these budgetary targets, the Orkney Islands Council commissioned services have also been tasked with taking affirmative action to return to operating within its approved revenue budget.

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3.5. Sustainability Challenges

Due to medical advances and improved quality of care, which is to be celebrated, individuals who require or are in receipt of complex care (also known as long term care or continuing care) have substantial and ongoing health and social care needs. These can be the result of chronic illness, disabilities or following hospital treatment. Social care services were previously more general in nature but there is 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. As outlined above, it is predicted that by 2037, 50% of the population will be aged over 65. In addition, a proportion of our working age population are leaving Orkney 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 more likely to need health and social care services. Over the coming years, alongside strategies to support local people to take up professional and caring roles in health and social care, planning will be required within the recruitment and retention strategy to attract professionals and care staff from outwith Orkney to move to and settle in Orkney. Sustainability is key, such an approach will be required if the working age population is to be sufficient to meet the health and social care needs of the population.

4. Staff Development

During this period, training was evenly split between face-to-face practical sessions and online training sessions.

The following staff training and developments have been completed as identified within Strategic Inspection, detailed in Table 14 below:

Table 14: Training and Developments.

| Date | Purpose and description |
|----------------------------|---|
| April 2023 – onwards. | OHAC has continued to provide various essential training programmes for members of staff this year. These training sessions include Basic First Aid, People Handling (inductions and refreshers), Practical Medication Training and Epilepsy Awareness (inductions and refreshers). |
| April 2023 – October 2023. | Child Protection Training (General Contact Workforce) Child Protection General Contact or Level 1 training was delivered to a total audience of 59 multi-agency practitioners. |
| April 2023 – October 2023. | Child Protection Training (Specific Contact Workforce) Child Protection Specific Contact or Level 2 was delivered to a combined audience of 61 multi-agency practitioners. |

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| Date | Purpose and description | | | | | | |
|--|---|--|----|------------------------------------|----|--------------|------------|
| April 2023 – October 2023. | <p>Child Protection Training (Intensive Contact Workforce)</p> <p>Child Protection Intensive Contact or Level 3 was delivered over two 2-day sessions to a combined audience of 23 multi-agency practitioners.</p> <p>This multi-agency session was supported with presenters from Scottish Children’s Reporter Administration, Police Scotland, Children and Families Social Work, NHS Shetland and the OPPC.</p> | | | | | | |
| June 2023 onwards | <p>Promoting Positive Behaviour Training</p> <p>Studio 3, Crisis Management training, has now been replaced by the Promoting Positive Behaviour Training (PPB). This was identified as a suitable replacement to the previous training programme and the first training session took place in June 2023. Since then, the following staff in Orkney Health and Care and Education have completed their PPB training:</p> <table border="1" style="margin-left: 20px;"> <tbody> <tr> <td>PPB training for staff working with adults</td> <td style="text-align: center;">95</td> </tr> <tr> <td>PPB training working with children</td> <td style="text-align: center;">50</td> </tr> <tr> <td>Total</td> <td style="text-align: center;">145</td> </tr> </tbody> </table> <p>Additionally, since June 2023, seven Members of staff from OHAC and one from Education have become Trainers for the PPB programme of training.</p> <p>There are more training sessions planned for later in the year, and the programme will continue to roll out to other Orkney Health and Care and Education staff.</p> | PPB training for staff working with adults | 95 | PPB training working with children | 50 | Total | 145 |
| PPB training for staff working with adults | 95 | | | | | | |
| PPB training working with children | 50 | | | | | | |
| Total | 145 | | | | | | |
| November 2023 | <p>Child Sexual Exploitation Awareness</p> <p>These continued to be delivered by trainers from Women’s Aid Orkney, Orkney Rape and Sexual Assault Service, Police Scotland, and support from the Orkney Health and Care Training Coordinator. Sessions were held in May and September and sessions were attended by approximately 23 individuals in total.</p> | | | | | | |
| 2023/24 | <p>Adult Support and Protection</p> <p>A continuation of last year’s programme. During the year a programme of Adult Support and Protection online training sessions were delivered by the Independent Public Protection Chair for Orkney, Inverclyde and Argyll and Bute. A total of 51 multi-agency staff attended the remainder of the arranged sessions.</p> | | | | | | |

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| Date | Purpose and description |
|-------------------------|---|
| 2023/24 | <p>Adult Support and Protection (Hoarding and Self neglect) This multi-agency training was delivered online to 10 people.</p> |
| 2023/24 | <p>Adult Support and Protection Training (Financial Harm) This multi-agency training was delivered online to 23 people.</p> |
| August 2023 | <p>Trauma Informed Practice – National Education Scotland Orkney Islands Council's Organisational Learning and Development and the OPPC entered into discussions with the NHS National Education Scotland (NES) team to bring all 7 of the Trauma Informed Practice Modules owned and ran by NES into the Council iLearn system. These Modules are:</p> <ul style="list-style-type: none"> • Trauma Skilled Module 1. • Trauma Skilled Module 2. • Trauma Skilled Module 3. • Trauma Skilled Module 4. • Psychological First Aid – Wellbeing of Teams for Managers. • Psychological First Aid – Staff Wellbeing, Taking Care of Yourself. • Psychological First Aid (General). <p>When discussing the modules with the partnership we discovered most third sector and partner agencies were using the NES resources to train their staff upon trauma. It is hoped this will bring consistency of understanding to the partnership and can be used as a baseline to our understanding of trauma. Further reporting upon this development will be available in next year's report.</p> |
| January 2024 | <p>Council Officer Training Specific training was provided to Council Officers, providing several new Council Officers within the Adult Support and Protection Service. This has supported the longevity and sustainability of Council Officer Support now available in Orkney. There are now 11 Council trained Officers including the Through Care/Aftercare and Housing Support Social Work teams.</p> |
| January – February 2024 | <p>Trauma Informed Practice (Epione – Level 2 Trauma Skilled) On the one-day trauma skilled training course, Epione promote that trauma is everybody's business. The course aligns to NES level 2 framework and is designed for all agencies who are</p> |

CHIEF SOCIAL WORK OFFICER REPORT FOR 2023/2024

| Date | Purpose and description |
|--------------------|--|
| | likely to be working alongside people who may have been affected by trauma. A total of 22 multi-agency staff attended this training with future sessions planned for 2024/25. |
| February 2024 | Trauma Informed Practice (Epione- Heal the Healer) Self Care The one-day vicarious trauma and self-care course is led by psychologists who are trained supervisors and promotes the concept that personal and professional wellbeing is central to trauma informed practice delivery. Two sessions were provided with a total of 21 staff attending. Additional sessions are planned for 2024/25. |
| Staff sponsorships | The table below shows the staff sponsored by Orkney Health and Care to undertake a qualification as part of their role (and commenced this qualification between 1/4/23 and 31/03/24) |

Child Protection Basic Awareness and General Workforce training was regularly undertaken by the Learning and Development Officer (Public Protection) since being recruited into post in February 2023 until October 2023.

Notably, Trauma Informed Practice is a national focus with the benefits of successful training in this area being far reaching. Over 2024/25 additional training has been identified to support the partnership to further embed trauma informed practice with reporting to be made available within the next annual updating report.

Other training delivered to Social Care staff included Basic First Aid, People Handling, Practical Medication Training and Epilepsy Awareness. Mandatory and existing training courses continue to be available for Orkney Health and Care Staff.

Specific tea and individual training also continue to be a focus, when necessary, subject to the needs of teams and individual workers training and development needs.

A full training programme with accompanying training calendar is managed by the Learning and Development Officer (Public Protection) and the Public Protection Lead Officer to alert staff across all sections and agencies of training opportunities.

Staff Sponsorships

The table below shows the staff sponsored by Orkney Health and Care to undertake a qualification as part of their role (and commenced this qualification between 1/4/23 and 31/03/24):

CHIEF SOCIAL WORK OFFICER REPORT FOR 2023/2024

| Qualification | Number of Sponsored Staff |
|---|---------------------------|
| HNC Social Services | 4 |
| SVQ 4 Health and Social Care (Adults) | 1 |
| SVQ 3 Health and Social Care (Adults) | 1 |
| SVQ 3 Social Service and Healthcare (Children and Young People) | 3 |
| SVQ 2 Health and Social Care (Adults) | 16 |
| CPD Leading and Managing Care Services | 1 |
| PDA Health and Social Care Supervision | 1 |
| Total | 27 |

5. Looking ahead

Under each service area, I have outlined the planning and next steps for the future. As can be seen, Social Work and Social Care Services across Orkney have much to be proud of, real progress has been evidenced in this reporting period, though we recognise that there is further work to be done.

All staff deserve recognition and praise for the support and services they provide to the community in Orkney.

In this reporting period, services have managed to continue to improve and develop, whilst for many facing significant recruitment and staffing challenges, which should be praised. This demonstrates the tenacity and resilience of the workforce.

Staff and Services continue to be motivated and set aspirational targets, which I am confident will lead to a continuation of service improvement and better outcomes for children and adults across the community of Orkney.