

Notice of Meeting and Agenda



Cabinet

Venue: Council Chambers,
Midlothian House, Dalkeith, EH22 1DN

Date: Tuesday, 16 October 2018

Time: 11:00

John Blair
Director, Resources

Contact:

Clerk Name: Gordon Aitken
Clerk Telephone: 0131 271 3159
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Further Information:

This is a meeting which is open to members of the public.

Audio Recording Notice: Please note that this meeting will be recorded. The recording will be publicly available following the meeting. The Council will comply with its statutory obligations under the Data Protection Act 1998 and the Freedom of Information (Scotland) Act 2002.

1 Welcome, Introductions and Apologies

2 Order of Business

Including notice of new business submitted as urgent for consideration at the end of the meeting.

3 Declaration of Interest

Members should declare any financial and non-financial interests they have in the items of business for consideration, identifying the relevant agenda item and the nature of their interest.

4 Minutes of Previous Meeting

- | | | |
|------------|--|--------|
| 4.1 | Minute of Meeting of the Cabinet of 4 September 2018 | 3 - 10 |
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5 Public Reports

- | | | |
|------------|---|---------|
| 5.1 | Use and Impact of Pupil Equity Funding in Session 2017/18 - Report by Acting Head of Education (Education Interest) | 11 - 20 |
| 5.2 | Child Poverty Act (Scotland) 2017 and Council's Approach - Report by Director Education, Communities and Economy (Education Interest) | 21 - 46 |
| 5.3 | Annual Complaints Performance Analysis for the year 2017/18 - Report by Head of Adult and Social Care | 47 - 60 |
| 5.4 | Inspection of Support service in Cherry Road Resource Centre - Report by Head of Adult Health and Social Care | 61 - 70 |
| 5.5 | Inspection of Midlothian Council Health & Social Care SVQ Assessment Centre - Report by Head of Adult Services | 71 - 74 |
| 5.6 | Inspection of Midlothian Residential Service for Young People - Report by Head of Children's Services | 75 - 90 |

6 Private Reports

No items for discussion

7 Date of Next Meeting

Tuesday 27 November 2018 at 11.00am

Minute of Meeting

Cabinet
Tuesday 16 October 2018
Item No.4.1



Midlothian

Cabinet

Date	Time	Venue
4 September 2018	11.00 am	Council Chambers, Midlothian House, Buccleuch Street, Dalkeith

Present:

Councillor Milligan - Convener	
Councillor Muirhead – Depute Convener	
Councillor Imrie	
Councillor Curran	
Councillor Hackett	

Religious Representatives:

Mr Vic Bourne	

1 Apologies

Apologies were received from Mrs Elizabeth Morton

2 Order of Business

The Order of Business was as detailed on the Agenda.

3 Declarations of interest

No declarations of interest were received.

4 Minutes of Previous Meetings

The Minutes of Meeting of the Cabinet held on 22 May 2018 were submitted and approved as a correct record.

5. Reports

Agenda No.	Report Title	Presented by:
5.1	Appointment of the Church of Scotland representative in Education matters – Report by Director, Resources	Director, Resources
Outline of report and summary of discussion		
The purpose of the report was to advise Cabinet of the appointment of Mrs Elizabeth Morton as the new Church of Scotland Representative in education matters. Following the resignation of the Reverend Ruth Halley, as the Church of Scotland representative in education matters as a result of her move away from Midlothian, the Council at its meeting on 21 August 2018 endorsed the nomination from the Church of Scotland of Mrs Elizabeth Morton of Dalkeith, as their replacement representative.		
The Leader of the Council advised that although Elizabeth was not able to attend today's meeting the Cabinet welcomed her appointment and looked forward to working with her in the future.		
Decision		
Cabinet noted the appointment of Mrs Elizabeth Morton as the Church of Scotland's new representative in education matters.		
Action		
Director, Resources		

Agenda No.	Report Title	Presented by:
5.2	Update on the Children's Services budget position for 2017/18	Head of Children's Services
Outline of report and summary of discussion		
The report provided an update on the Children's Services budget position for 2017/18, and the factors which had contributed to a budget shortfall.		

The report also provided some context in relation to trends and areas of future growth as a result of both legislation and as a result of the rapid increase in the population in particular in relation to young people. Mary Smith was heard in amplification of the report.

Decision

To note the areas of overspend detailed within the report and the cross council approach to addressing this issue.

Action

Head of Children's Services

Agenda No.	Report Title	Presented by:
5.3	Inspection of Midlothian Council Care at Home service	Joint Director, Health and Social Care

Outline of report and summary of discussion

The report provided an overview of the planning in place to meet required actions following a repeat inspection in April 2018 from the Care Inspectorate regarding Midlothian Council's Care at Home service. This subsumed the remaining actions due to be updated for Care at Home quarterly review.

Midlothian Council Care at Home service was inspected in August 2017, and an additional inspection had been undertaken in April 2018, over a period of two weeks by the Care Inspectorate. The recent report had been published on 10 August 2018 by the Care inspectorate and had been distributed to all Elected Members of the Cabinet for their information. The inspection covered three key areas of the National Care Standards attributed to care at home services namely:

- Quality of Care and Support
- Quality of Staffing, and
- Quality of Management and Leadership

Following the recent inspection a report was published that detailed the areas of its findings and outlined areas for recommendation and/or requirements. A revised action plan with specific timescales for completion, had been developed to address all areas for improvement. This action plan was regularly updated, to track and monitor improvements.

The inspection report graded the areas of inspection from 1 (Unsatisfactory) to 6 (Excellent). This inspection report graded the three areas as follows:

Quality of care and support	3	Adequate
Quality of staffing	3	Adequate
Quality of Management and Leadership	2	Weak.

The Care Inspectorate noted that there had been progress made since the last inspection in August 2017, including the service meeting two pre-existing requirements. However, they did not feel it was sufficient to achieve the levels required for next grade. These grades remained the same as the last inspection. The Joint Director, Health and Social Care was heard in amplification of the report.

Decision
(a)To note the content of the report and progress made; and
(b)To forward the report to Performance Review and Scrutiny Committee
Action
Joint Director, Health and Social Care

Agenda No.	Report Title	Presented by:
5.4	SPSO Annual Report on Scottish Welfare Fund Independent Reviews	Head of Customer and Housing Services

Outline of report and summary of discussion

The purpose of the report was to provide an update regarding the Scottish Public Services Ombudsman (SPSO) reviews relating to Midlothian Council's Scottish Welfare Fund appeal cases handled by the SPSO for 2017/ 18 and published in the Annual Report.

The Scottish Public Services Ombudsman (SPSO) acted as the Scottish Welfare Fund (SWF) Independent Reviewer and would look at whether the council had made the decision it should have.

The SPSO available outcomes were to:

- not to change the council's decision
- to overturn the council's decision in part, or in full (i.e. make a different decision) or
- to send the case back to the council to remake their decision.

The report provides information on customer appeals the SPSO received between 1 April 2017 and 31 March 2018 and Appendix 1 to the report provided an account of the appeals data about Midlothian Council that the SPSO had looked at and published on their website in July 2018.

It was notable that there had been a significant decrease in the number of enquiries from Midlothian in the past year and of the 4 cases, one had been partially upheld.

The SPSO full Annual Report across all local authorities was presented in Appendix 2 to the report.

Decision
(a)To note the SPSO Annual Scottish Welfare Fund Independent Review Report 2017/18 as detailed within Appendix 2 of the report and the Midlothian specific outcomes as detailed within appendix 1;and
(b) To refer the report onto the Performance Review and Scrutiny Committee.
Action
Head of Customer and Housing Services

Agenda No.	Report Title	Presented by:
5.5	Diversion of Public Paths at Mauricewood, Penicuik	Head of Commercial Operations
Outline of report and summary of discussion		
The purpose of the report was to request that Cabinet confirm a Public Path Diversion Order under the Countryside (Scotland) Act 1967 for an existing path crossing the site of the new housing development at Mauricewood, Penicuik.		
The report advised that at its meeting on 22 May 2018, Cabinet had agreed to progress with a Public Path Diversion Order under the Countryside (Scotland) Act 1967 for an existing path crossing the site of the new housing development at Mauricewood, Penicuik as detailed in an Appendix to the report. The existing paths would be diverted to accord with the footprint of the site. They would be replaced by a network of paths and footways which would not result in a diminution in the level of public access currently provided by the two existing paths. The report further advised that following a consultation period of 4 weeks, no objections had been received. The Director, Resources was heard in amplification of the report.		
Decision		
To instruct the Director, Resources to confirm a Public Path Diversion Order in line with the process described under Section 2 of the report..		
Action		
Head of Commercial Operations		

Agenda No	Report Title	Presented by:
5.6	Adult Social Care Quarter 1 Performance Report 2018/19	Joint Director, Health and Social Care
Outline of report and summary of discussion		
The Quarter 1 Performance Report 2018/19 for Adult Social Care was submitted. The Joint Director, Health and Social Care highlighted to the Cabinet the progress in the delivery of strategic outcomes and summary of the emerging challenges as detailed in the Report.		
Decision		
To note the report.		

Agenda No	Report Title	Presented by:
5.7	Customer and Housing Services Quarter 1 Performance Report 2018/19	Head of Customer and Housing Services
Outline of report and summary of discussion		
The Quarter 1 Performance Report 2018/19 for Customer and Housing Services was submitted. The Joint Director, Health and Social Care highlighted to the Cabinet the progress in the delivery of strategic outcomes and summary of the emerging challenges as detailed in the Report.		
Decision		

To note the report.

Agenda No	Report Title	Presented by:
5.8	Children's Services Quarter 1 Performance Report 2018/19	Director, Education, Communities and Economy
Outline of report and summary of discussion		
The Quarter 1 2018/19 Performance Report for Children's Services was submitted. The Director, Education, Communities and Economy highlighted to the Cabinet the progress in the delivery of strategic outcomes and summary of the emerging challenges as detailed in the Report.		
Decision		
To note the report.		

Agenda No	Report Title	Presented by:
5.9	Communities and Economy Quarter 1 Performance Report 2018/19	Director, Education, Communities and Economy
Outline of report and summary of discussion		
The Quarter 1 Performance Report 2018/19 for Communities and Economy was submitted. The Director, Education, Communities and Economy highlighted to the Cabinet the progress in the delivery of strategic outcomes and summary of the emerging challenges as detailed in the Report.		
Decision		
To note the report.		

Agenda No	Report Title	Presented by:
5.10	Education Q1 Performance Report 2018/19	Head of Education
Outline of report and summary of discussion		
The Quarter 1 Performance Report 2018/19 for Education was submitted. The Head of Education highlighted to the Cabinet the progress in the delivery of strategic outcomes and summary of the emerging challenges as detailed in the Report. Thereafter the Head of Education responded to questions and comments raised by members of the Cabinet.		
Decision		

To note the report.

Agenda No	Report Title	Presented by:
5.11	Commercial Operations Q1 Performance Report 2018/19	Director, Resources
Outline of report and summary of discussion		
The Quarter 1 Performance Report 2018/19 for Commercial Operations was submitted. The Director, Resources highlighted to the Cabinet the progress in the delivery of strategic outcomes and summary of the emerging challenges as detailed in the Report.		
Decision		
To note the report.		

Agenda No	Report Title	Presented by:
5.12	Finance and Integrated Service Support Quarter 1 Performance Report 2018/19	Director, Resources
Outline of report and summary of discussion		
The Quarter 1 Performance Report 2018/19 for Finance and Integrated Service Support was submitted. The Director, Resources highlighted to the Cabinet the progress in the delivery of strategic outcomes and summary of the emerging challenges as detailed in the Report.		
Decision		
To note the report.		

Agenda No	Report Title	Presented by:
5.13	Property and Facilities Management Quarter 1 Performance Report 2018/19	Director, Resources
Outline of report and summary of discussion		
The Quarter 1 Performance Report 2018/19 for Properties and Facilities Management was submitted. The Director, Resources highlighted to the Cabinet the progress in the delivery of strategic outcomes and summary of the emerging challenges as detailed in the Report.		
Thereafter the Director Resources responded to questions and comments raised by members of the Cabinet.		
Decision		
To note the report.		

Agenda No	Report Title	Presented by:
5.14	Midlothian Council Quarter 1 Performance Report 2018/19	Chief Executive
Outline of report and summary of discussion		
The Quarter 1 Performance Report 2018/19 for Midlothian Council was submitted detailing the delivery of Midlothian Council's priorities through the Community Planning Partnership and the Single Midlothian Plan. The Chief Executive was heard in amplification of the report.		
Decision		
To note the report.		

The meeting terminated at 12.08pm

Use and Impact of Pupil Equity Funding in Session 2017/18

Report by Maria Lloyd, Acting Head of Education, Education, Communities & Economy

1. Purpose of the Report

Pupil Equity Funding (PEF) is additional funding from the Scottish Government's £750 million Attainment Scotland Fund, allocated directly to schools and targeted at closing the poverty related attainment gap. This funding is to be spent at the discretion of Head Teachers working in partnership with each other and their local authority. In 2017/18, Scotland's schools received a share of over £120 million, and in 2018/19 this has increased to over £122 million.

Every council area is benefitting from Pupil Equity Funding and over 96% of schools in Scotland have been allocated funding. Allocations are based on the number of pupils from P1 to S3 who are eligible and registered for free school meals, using the latest available data. In some instances this means schools may have faced significant reductions in their funding allocation in 2018/19. However, Ministers have decided to cap the reduction that any school will face, so that the 2018/19 funding allocation is no more than 10% less than 2017/18. In these cases, a top up has been added to the schools' allocations. 11 Midlothian schools have been subject to this top up.

National Operational Guidance has been published to help schools plan how they will most effectively invest their Pupil Equity Funding allocation to improve the educational outcomes of children affected by poverty.

The purpose of this report is to present findings from a survey of Head Teachers and PEF leads in schools as to how they spent their funding, difficulties faced in spending funding, the range of interventions adopted and the impact on attainment.

2. Background

In Session 2017/18, Midlothian schools received £2,272,800 Pupil Equity Funding. We welcome the commitment to a relentless focus on closing the attainment gap. The Single Midlothian Plan is committed to reducing inequalities. In the Education service, we continue to build on our ambition to create a world-class education system through equity and excellence, and we are relentless in our focus to interrupt the cycle of poverty at the same time as improving attainment overall.

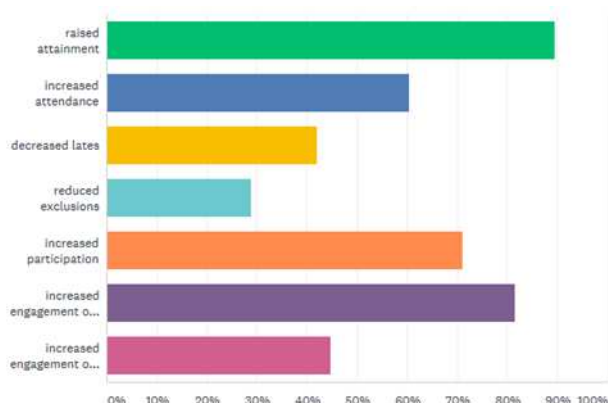
The Education Service has issued the detailed national guidance to schools in order to support schools to use their Pupil Equity Funding to best effect, identifying their 'gap' effectively and planning appropriate

targeted interventions. This guidance continues to promote the following core principles:

- Head Teachers must have access to the full amount of the allocated Pupil Equity Funding.
- The Pupil Equity Funding must enable schools to deliver activities, interventions or resources which are clearly additional to those which were already planned.
- Head Teachers should work in partnership with each other, and their local authority, to agree the use of the funding. Schools must take account of the statutory responsibilities of the authority to deliver educational improvement, secure best value, and the authority's role as employer. Additional guidance from Finance and Procurement will follow, and will be detailed to Head Teachers through Leadership Learning Community Meetings.
- The operation of the Pupil Equity Funding should articulate as closely to existing planning and reporting procedures as possible – e.g. through School Improvement Planning and Standards and Quality Reports
- Parents and carers, children and young people and other key stakeholders should be involved in the planning process.
- Funding must provide targeted support for children and young people affected by poverty to achieve their full potential. Although the Pupil Equity Funding is allocated on the basis of free school meal eligibility, Head Teachers can use their professional judgement to bring additional children in to the targeted interventions.
- Head Teachers must base their use of the funding on a clear contextual analysis which identifies the poverty related attainment gap in their schools and plans must be grounded in evidence of what is known to be effective at raising attainment for children affected by poverty.
- Schools must have plans in place at the outset to evaluate the impact of the funding.

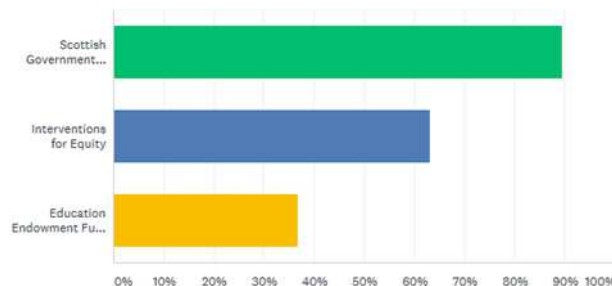
2.1 Midlothian Schools' Use of Pupil Equity Funding

Use of this funding has supported schools to enhance teaching, support and specialist staffing and apply a range of interventions to support learners to attain and achieve, with most schools using it specifically to raise attainment and increase participation, leading to wider achievement.



2.2 Range of Supports in Planning Use of PEF

Schools have been encouraged to be creative in selecting their interventions, ensuring that sustainability is a key factor in planning for the future. A range of supports was used by schools:



Other supports mentioned by schools include professional discussions with Schools Group Managers, collaboration with other schools and other professionals, following up ideas from social media e.g. Twitter and ideas from consultation with stakeholders.

2.3 Range of Interventions

Following consultation, a wide range of interventions was planned, examples of which are outlined below:

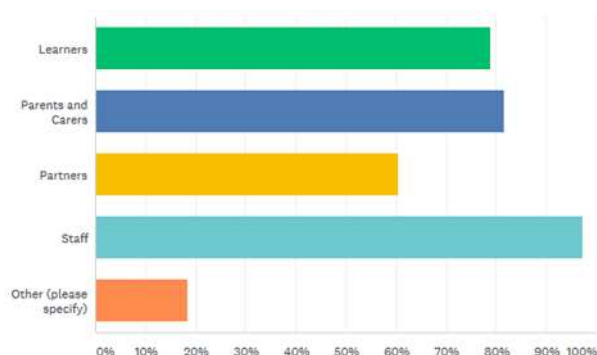
- Raising attainment in reading for targeted learners
- Splitting two large P2 classes into three small P3 classes during session 2017/18
- Support funding of LAAC pupils and pupils with challenging behaviour to access Play Therapy
- Support Health and Wellbeing
- Home School Practitioner 18 hours per week - attendance and family support
- Introduction of Read Write Inc. to all Primary 1 and Fresh Start to targeted learners in P7 and P6
- Learning Assistant for 1-1 literacy support for SIMD 1-3 in P1 and P2 and Fresh Start in P7 and also 1-1 numeracy in P6 and P7
- Mentoring for vulnerable groups
- Improving attendance and lates
- Help with the cost of the school day to enable children to engage with learning more readily
- Healthy snack provided as required to support children's readiness to learn
- Subsidising horse riding for the disabled to develop children's motor skills and ability to co-operate and work together.
- Improving mental wellbeing of pupils
- Extending opportunities for wider achievements
- Improving attainment through staff training & development - teaching core skills and giving effective feedback
- Partnership working - Empowering Families Project and Partnership Coordinator
- Provide Play Therapeutic Support – both a drop-in service, individual/filial therapy, group work and parent/carer/staff consultation
- Differentiated support – creating a Learning Centre within the school, staffed by SfL Teacher and both a full-time and part-time learning assistant, providing

differentiated support to individuals and identified groups

- Funded trips, camps etc. for FME pupils ensuring equity
- Engagement beyond school - raising attainment in targeted group SIMD 2 & 3 'Readiness to Learn'
- STEP Programme to improve physical literacy
- Attainment Champions and Pastoral Mentors
- Increased Learning assistant hours to support most vulnerable P1 and P2 pupils

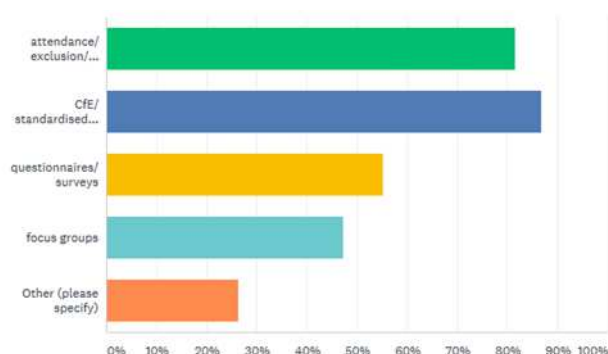
2.4 Consultation

A range of stakeholders was consulted about use of PEF in schools. Our expectation is that 100% of schools will consult parents and carers next session. This formed part of our guidance to schools, and was discussed at our locality SQIP Workshops and Leadership Learning Community Meetings.



2.5 Measurement of Impact

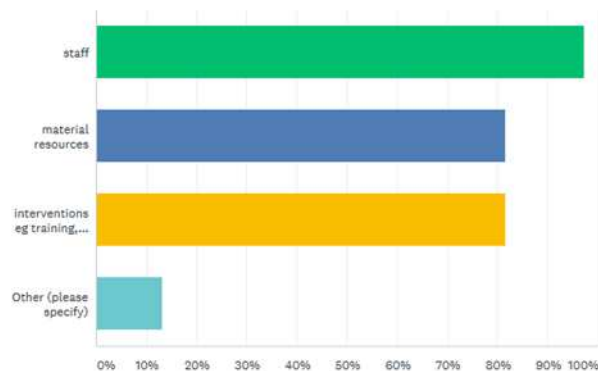
Success of the wide range of interventions applied was measured in a range of ways:



'Other' measurements included use of Boxall Profiles, the Leuven Scale, post-intervention assessments and focused dialogue with learners and partners.

2.6 Range of Resources Procured Through PEF

The largest percentage of funding was spent on staffing, with a range of professionals engaged including; class teachers, Principal Teachers, Depute Head Teachers, Learning Assistants, Partnership Manager, Support for Learning Teachers, Therapeutic Services, Duke of Edinburgh Instructor, other outside agencies e.g. Empowering Families staff.

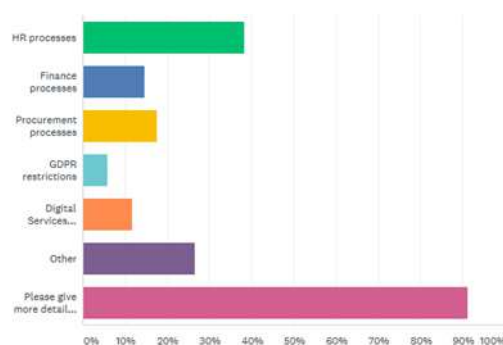


2.7 Barriers to Spending PEF

School staff were asked what barriers they encountered in trying to spend their Pupil Equity Funding. Not surprisingly, as the largest percentage of PEF was spent on staffing, HR processes proved to be the biggest barrier. This was due to several issues. As new posts had been created, such as Home School Practitioner, job descriptions were required which had to go through the job-sizing process. Recruitment procedures followed, with some delays meaning that some staff were not in place until the end of Session 2017/18.

Schools also found that because all PEF funded posts had to be fixed term due to the short-term nature of the funding, they often lost staff to other permanent posts when they were advertised

This exercise also threw up some misconceptions within other directorates of the council. Due to budget cuts, an embargo on non-essential spend was issued to all staff. This could not apply to PEF, however there was concern expressed when orders were placed through PEF that the embargo had been ignored.



2.8 Closing the Poverty-Related Attainment Gap

The table below compares the progress made by learners in SIMD 1-2, 3-8 and 9-10 in Sessions 2016/17 and 2017/18.

	SIMD 1-2		SIMD 3-8		SIMD 9-10	
	2016/17	2017/18	2016/17	2017/18	2016/17	2017/18
P1 L&T	81.34%	87.88%	82.86%	92.67%	93.38%	96.45%
P1 Reading	68.66%	76.52%	75.09%	88.32%	84.11%	91.12%
P1 Writing	68.66%	75.00%	69.67%	84.22%	74.17%	88.17%
P1 Numeracy	73.88%	79.55%	75.34%	87.33%	82.78%	91.12%
P4 L&T	66.67%	77.14%	77.30%	84.91%	90.32%	91.28%
P4 Reading	62.16%	72.14%	74.83%	79.04%	90.32%	85.91%
P4 Writing	51.35%	67.14%	63.27%	76.64%	83.87%	81.21%
P4 Numeracy	65.77%	72.86%	71.80%	79.17%	81.94%	80.54%
P7 L&T	72.28%	68.27%	71.89%	82.90%	86.30%	96.15%
P7 Reading	59.41%	60.58%	72.34%	79.21%	89.04%	89.74%
P7 Writing	42.57%	65.38%	56.36%	75.10%	76.71%	84.62%
P7 Numeracy	45.54%	56.73%	61.54%	74.97%	80.82%	83.97%
S3 L&T	74.39%	77.38%	82.51%	83.89%	93.89%	94.44%
S3 Reading	69.51%	79.76%	81.11%	83.89%	93.89%	92.86%
S3 Writing	68.29%	78.57%	76.47%	80.06%	93.13%	92.86%
S3 Numeracy	78.05%	80.49%	88.53%	87.38%	96.95%	97.60%

In primary schools, for those learners living in SIMD 1 and 2, all measures have increased from last session with the exception of P7 Listening and Talking which has decreased by 4%. For those learners living in SIMD 3-8, all measures have increased from last session. It is clear that more attention is required for those learners in P4 living in SIMD 9 and 10, where attainment has decreased in Reading, Writing and Numeracy, and for S3 learners in SIMD 9 and 10 in Reading and Writing. These will be a particular area of focus and challenge for next session. All other measures have increased.

2.9 Planning for Session 2018/19

In Session 2018/19, the Pupil Equity Fund allocation for Midlothian schools totals £2,273,160.

To further support schools to plan for the use of their new allocations, a Leadership Learning Community Meeting had a key leadership focus of 'Measuring with Meaning', which allowed all Head Teachers to report back to colleagues and partners on the targeted interventions which have had the greatest impact within their contexts and sectors.

Schools have used this knowledge, all appropriate data and related guidance to incorporate their PEF plans into their school improvement plans. As per the national guidance, these will be published on school websites by the end of September 2018.

The Pupil Equity Fund will be reported on quarterly as part of the Education Service quarterly reporting. In addition, the impact of the Pupil Equity Fund will also be reported in the attainment reports which are presented to Council in December and May each year.

We continue to welcome the relentless focus on closing the attainment gap in Education but we recognise that this requires a total Midlothian approach. Therefore we continue to recognise the critical role that other services, including the Community Planning Partnerships and the third sector, play in supporting education to interrupt the cycle of poverty. Schools will continue to plan *in school* and *out of school* interventions across the three themes of learning and teaching; communities and families and leadership. In addition schools must have plans in place at the outset to evaluate the impact of the funding. The following 5 key indicators will be used in order to evaluate impact: attendance, exclusions, literacy, numeracy, health and well-being, attainment measures across the broad general education, engagement and participation.

3. Report Implications

3.1 Resource

The Pupil Equity Fund allocation for Midlothian schools totals £2,273,160. A copy of the school level allocations is included in appendix 1.

3.2 Risk

We continue to welcome the relentless focus on closing the attainment gap in Education but we recognise that this requires a total Midlothian approach. Therefore we continue to recognise the critical role that other services, including the Community Planning Partnerships and the third sector, play in supporting education to interrupt the cycle of poverty. Schools will continue to plan *in school* and *out of school* interventions across the three themes of learning and teaching; communities and families and leadership. In addition schools must continue to have plans in place at the outset to evaluate the impact of the funding. The following 5 key indicators will be used in order to evaluate impact: attendance, exclusions, literacy, numeracy, health and well-being, attainment measures across the broad general education, engagement and participation

3.3 Single Midlothian Plan and Business Transformation

The ambition of the Pupil Equity Fund is already clearly embedded in the Single Midlothian Plan – reducing inequalities. Themes addressed in this report:

- ☐ Community safety
- ☐ Adult health, care and housing
- ☒ Getting it right for every Midlothian child
- ☒ Improving opportunities in Midlothian
- ☐ Sustainable growth
- ☐ Business transformation and Best Value
- ☐ None of the above

3.4 Key Priorities within the Single Midlothian Plan

GIRFEC 5: Our people will be successful learners, confident individuals, effective contributors and responsible citizens.

3.5 Impact on Performance and Outcomes

To close the gap by improving 'attainment versus deprivation' and 'attainment for all' outcomes for children and young people.

3.6 Adopting a Preventative Approach

This report aims to take preventative action in order to interrupt the cycle of poverty by closing the attainment versus deprivation gap and implementing key programmes and interventions which are designed to target support to children and young people from disadvantaged communities.

3.7 Involving Communities and Other Stakeholders

Schools, as part of their planning cycle, will involve communities and stakeholders.

3.8 Ensuring Equalities

The recommendations in this report should continue to promote equity of attainment for disadvantaged children and support the steps being taken towards narrowing the attainment gap by imposing duties on education authorities and the Scottish Ministers in relation to reducing pupils' inequalities of educational outcome together with a duty to report on progress.

3.9 Supporting Sustainable Development

There are no impacts arising directly from this report.

3.10 IT Issues

The national guidance contains further advice on IT stating that: the Pupil Equity Funding can be used to procure digital technologies, including hardware and software, when its allocation and use is particularly focused on supporting children and young people affected by poverty to achieve their full potential. The Scottish Government provides access to a range of national procurement frameworks for the purchase of digital technology products and devices, including a range of desktops, laptops and tablets. The frameworks offer a direct route to market and significant savings against RRP.

To prevent issues arising with compatibility and connectivity, schools seeking to purchase digital technology should do so in close consultation with the IT Department at their local authority.

4 Recommendations

Cabinet is requested to:

- Acknowledge and congratulate school staff and managers for the improvements in attainment of Curriculum for Excellence levels for those pupils in SIMD 1&2
- Note the wide range of interventions adopted and progress made by schools with their use of the Pupil Equity Fund
- Acknowledge the barriers faced by schools in spending their Pupil Equity Funding

- Note that schools will incorporate future PEF plans into their School Improvement Plans and publish them on their school websites as required by the Scottish Government
- Request a further update on progress at via Quarterly reporting cycle.

20th September 2018

Report Contact

Nicola McDowell Tel No 0131 271 3726

nicola.mcdowell@midlothian.gov.uk

Supporting Papers for Pupil Equity Funding:

The school level allocations for the Pupil Equity fund were announced by the Scottish Government on 29 January 2018:

www.gov.scot/Topics/Education/Schools/Raisingeducationalattainment/pupilequityfund.

Operational Guidance from Scottish Government:

www.gov.scot/Topics/Education/Schools/Raisingeducationalattainment/pupilequityfund.

Education (Scotland) Act 2016:

http://www.legislation.gov.uk/asp/2016/8/pdfs/asp_20160008_en.pdf

Child Poverty Act (Scotland) 2017 and Council's Approach

Report by Dr Mary Smith, Director Education, Communities and Economy

1 Purpose

The purpose of this report is to inform the CMT of the Council's reporting obligations in the Child Poverty (Scotland) Act 2017 and provide an update on the Council's approach to reducing the impact of child poverty.

2 Background

The Child Poverty (Scotland) Act

The [Child Poverty \(Scotland\) Act 2017](#) sets out ambitious targets to reduce child poverty. In summary the Act;

- Enshrines in legislation an ambition to eradicate child poverty.
- Reinstates statutory income-based targets to reduce the number of children living in poverty.
- Places a duty on Scottish Ministers to develop a Child Poverty Delivery Plan, and to report annually on their progress towards delivering that plan.
- Places a duty on health boards and local authorities to produce annually a Child Poverty Action Report.

Reporting Requirements

Under the Act Scottish Ministers are required to produce, and report on, their child poverty delivery plan '[Every Child, Every Chance](#)'. The Act places a duty on local authorities and health boards to report annually on the activity we are taking, and will take, to reduce child poverty. In July 2018 the Child Poverty Action Report Statutory Guidance was published. The guidance requires local authorities to prepare and publish Local Action Reports that must include the following:

- Actions taken during the reporting year.
- Measures planned.
- Specific reference to support for pregnant women and families on information, advice and assistance in accessing financial support.
- Specific focus on families whose income is adversely affected because of a protected characteristic.

The guidance outlines the five steps that local authorities and health boards must jointly take to meet the requirements of the Act, these are;

1. Identify local partners.
2. Identify and assess child poverty in the local area.
3. Identify and assess existing action and existing plans that seeks to reduce or mitigate child poverty in the local area.
4. Identify new action to reduce child poverty, or expansions or modifications to existing action to increase impact.
5. Identify and share 'what is working' and 'lessons learned'.

The first report must cover the period 2018/19 and must be submitted by **June 2019**. Local reports will be scrutinised by the Scottish Government and the Scottish Poverty and Inequality Research Unit and reported to Scottish Ministers.

Midlothian's Child Poverty Approach

During 2017 a Child Poverty Plan and Measurement Framework was developed in preparation for the implementation of the Act; in this respect Midlothian is well placed to meet the new reporting requirements. The Child Poverty Plan is overseen by the Child Poverty Working Group and reported to the Improving Opportunities Midlothian Community Planning Group. The Child Poverty Measurement Framework captures the key proxy measures for child poverty reduction – see appendix 1. There are a number of positive and developing areas of practice in Midlothian that are summarised below:

- **Cost of the School Day**

Midlothian Council has been working with National Union of Students Dissertations for Good to research the cost of the school day and the additional barriers this creates for children living in poverty. In response to this research, the Council has secured £80,000 including funding from the Scottish Government to work with children, parents and 11 primary schools in our priority communities to reduce inequalities incurred because of the cost of the school day. Using a participatory budgeting approach, and expertise from the Child Poverty Action Group, to date 1,573 people have decided on how the funding should be allocated in 8 primary schools and £58,404 has been distributed to 50 projects. Examples include subsidies for theatre trips, homework clubs, healthy breakfast clubs and support for parent councils to provide free activities for children and their families. Work in three primary schools is ongoing and a resource pack will be produced to spread the learning across all of the schools in Midlothian.

- **Pupil Equity Funding (PEF)**

In 2017/18 £2,272,800 PEF funding was allocated to schools in Midlothian. This funding was to reduce the attainment gap and interrupt the educational disadvantage that children experience as a result of their families' income. A separate report on the use and impact of this funding is also discussed on Cabinet agenda today.

- **Uptake of Free School Meals, Milk and Clothing Grants**

A short life working group has been established by the Director of Education, Communities and Economy to improve the uptake of free school meals, milk and clothing grants. A number of improvements are planned including the simplification of the entitlement form, online registration, linking school enrolment form with entitlement, increasing parental awareness and using information from Revenues to move towards a model that will enable auto enrolment. There has been some positive progress in Newbattle Learning Community where working with home school practitioners and teaching staff has increased enrolment. Increasing enrolment will benefit children living in poverty and also provides an additional £1,200 of PEF per pupil.

To increase uptake Midlothian Council, in partnership with NUS Dissertations for Good, have undertaken research into free school meals. The research has focused on the perceptions of free school meals in St David's Primary School and barriers to uptake. The findings of this research will inform how we can maximise enrolment and reduce the stigma associated with living in poverty.

- **Child Poverty Innovation Fund**

As part of the Scottish Government's Child Poverty delivery plan they have developed a £1million Innovation Fund in partnership with the Hunter Foundation to support ambitious work to tackle child poverty. A partnership application from Midlothian Sure Start, Scottish Childminding Association and Midlothian Council has received £89, 758 in the first year, which can be extended for up to three years. The project will work with families who access Midlothian Sure Start services and support them into sustainable employment; with a particular focus on careers in childcare.

Next Steps and Areas for Development

In preparation for the Local Action Reports there are a number of areas for development, such as;

- Increasing uptake of clothing grants and free school meals.
- Maximising the impact of Pupil Equity Funding.
- Mainstreaming projects such as reducing the cost of the school day.
- Timely sharing of information between Council departments including revenues, education and housing.
- Introducing a rights based child poverty impact assessment.
- Aligning the Child Poverty Plan and Children's Services Plan.
- Maximising the impact and availability of welfare rights services.

In order to meet the requirements of the Local Action Plan coordinated work will need to continue with information and input from a range of Council and NHS services.

3 Resource

The Scottish Government is providing an allocation of circa. £4,000 to support the production of the Local Action Reports. This is intended to cover the materials and staff time associated with producing the plan.

4 Risk

Child poverty levels in Midlothian and across Scotland are increasing, currently 22.5% of local children live in poverty. The Institute for Fiscal Studies are projecting a 50% increase in child poverty by 2020, so clearly the most significant and likely risk is the increase in child poverty. There is a reputational risk if the Local Action Plan report is assessed as inadequate or ineffective. Support from across the council in a coordinated Local Action Plan will help mitigate the impact of increasing levels of child poverty.

5 Single Midlothian Plan and Business Transformation

Themes addressed in this report:

- ☐ Community safety
- ☐ Adult health, care and housing
- ☒ Getting it right for every Midlothian child
- ☒ Improving opportunities in Midlothian
- ☐ Sustainable growth
- ☐ Business transformation and Best Value
- ☐ None of the above

5.1 Key Priorities within the Single Midlothian Plan (SMP)

The Child Poverty Act and Local Action Plan addresses the key priorities of the SMP in relation to reducing inequalities in economic, health and learning outcomes. Child poverty is assessed by household income, so whilst a range of council services are key to mitigating the impact, child poverty reduction is also dependent on macro-economic factors.

5.2 Adopting a Preventative Approach

There is a body of evidence that shows that reducing child poverty improves children's life chances, such as the Joseph Rowntree Foundation report ["Costs of Child Poverty for Individuals and Society"](#). An effective Local Action Plan will embed a preventative approach to child poverty reduction.

5.3 Involving Communities and Other Stakeholders

The existing child poverty plan has been developed by the Council, NHS Lothian a range of voluntary sector organisations.

5.4 Ensuring Equalities

Reducing child poverty will have a positive impact on reducing inequalities. The Local Action Reports requires the council to provide evidence on the support provided to families whose income is adversely affected because of a protected characteristic.

6 Summary

The new reporting requirements of the Child Poverty Act places significant coordinating and reporting duties on the Council. Midlothian is well positioned to meet the reporting requirements of the Act, and has a number of areas of good practice such as reducing the cost of the school day, increasing uptake of free school meals and established reporting structures.

The existing Child Poverty Plan will support the development of a high quality Local Action Plan. There is an opportunity that the new requirements will speed up the sharing of information and increase collaboration across all departments and stakeholders. The new reporting requirements should be seen as an opportunity to create a renewed sense of urgency to mitigate against the impact of increasing levels of child poverty.

7 Recommendations

It is recommended that Cabinet:

- i) Note the new reporting requirements of the Child Poverty (Scotland) Act. A child poverty Local Action Plan report must be submitted by June 2019.
- ii) Note the good practice that already exists in Midlothian.
- iii) Support the Child Poverty Working Group to work across the authority and with other relevant agencies to develop a new Local Action Plan.

01 October 2018

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Appendix I: Midlothian Child Poverty Draft Plan and Measurement Framework

Midlothian Child Poverty Plan

2017/18 - 2021

August 2017
Version 1

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1. Introduction

More than one in five of Scotland's children are officially recognised as living in poverty (CPAG). This trend is reflected in Midlothian, in 2014 there were 21% of children in poverty after housing costs (AHC) and by 2015 this has risen to 22.5%. It is widely recognised that children living in poverty are at significantly increased risk of poor health and educational attainment. Children do not live in isolation of their families and wider communities. Any approach to address child poverty must widen the lens to include household and community poverty.

2. Background: 2012-17 Child Poverty Action Plan

In 2012 a five year Midlothian Child Poverty Action Plan was developed. The five thematic priorities identified in the Action Plan were:

1. Supporting families who are in or at risk of poverty to cope with and be more in control of their circumstances.
2. Building resilience within local communities, so that vulnerable families feel better supported and able to access services and resources they need.
3. Supporting vulnerable young people to gain easier entry into employment, training or further/higher education.
4. Addressing the inequalities which are the most significant contributing factors toward poverty.
5. Widening access to services through: a) better publicity and: b) better use of community facilities to enable individuals to access support in a non-stigmatising way.

The Action Plan and Strategy Group reflected the aspirations and political will expressed in the Scottish Governments Child Poverty Strategy for Scotland (2011) and also the preceding Child Poverty Act (2010). In 2014/15 the Scottish Government revised the national Child Poverty Strategy and introduced a measurement framework as a way of tracking child poverty over time.

Review of the Action Plan

During 2015/16 Midlothian's Child Poverty Action Plan was reviewed. The review focused on finding out what had been progressed; what data each agency holds in relation to child poverty; what is their agency doing in the targeted areas to address child poverty; examples of good practice and what the gaps are in relation to addressing child poverty. The review found that although some activities had been completed and the five priority areas should stay the same there was limited evidence of impact. The review concluded that there is a need to develop a measurement framework in line with the national approach to child poverty so levels can be tracked over time.

Next steps, 2018-2021 Child Poverty Delivery Plan

Political Context

The Child Poverty (Scotland) Bill was published on the 10 February 2017 and will see Scotland become the only part of the UK with statutory targets to reduce the number of children experiencing the damaging effects of poverty by 2030. The government will publish a three-year child poverty delivery plan by April 2018, which will be updated every five years and annual reports to measure progress. The legislation reinstates income targets as the measure for child poverty.

If passed, the legislation sets an initial target of cutting the number of children in relative poverty to less than 10% by 2030. Relative poverty is based on an income measure that those living in households with incomes less than 60% of the median household income. With child poverty levels in Midlothian in 2016 at 22.5% this is clearly a stretch target. This is at a time when the Institute for Fiscal Studies are projecting a 50% increase in child poverty by 2020 due to an overall downturn in household income.

Child Poverty Working Group

A Child Poverty Working Group has been re-established in 2017 to develop a Child Poverty Delivery Plan for 2018-21. The Delivery Plan will include a measurement framework, an update to the policy context and excerpts from service plans to identify how other services across the council are contributing to the child poverty agenda. Monitoring child poverty trends over time will allow the Community Planning Partnership to identify risks and put in place interventions that will help mitigate the impact of child poverty in Midlothian.

We recognise that reducing child poverty levels dramatically will depend on a range of external factors that the working group will be unable to influence. However the delivery plan will provide an opportunity to identify what we **can** do to reduce child poverty.

3. Child Poverty, Community Planning Partnership

The Community Planning Partnership undertook a review and engagement process in 2015 /16 resulting in changed priorities for the next three years, 2016-19. Taking into consideration evidence about the comparative quality of life of people living in Midlothian, where it is clear that less well off residents experience poorer health, have fewer or no choices in how they use low incomes, and where there is a proven relationship between these factors and their learning; as a result the top three priorities identified for the Single Midlothian Plan 2016-19 are:

- **Reducing the gap in learning outcomes**
- **Reducing the gap in health outcomes**
- **Reducing the gap in economic circumstances**

More widely, the five themes of community planning have agreed shared outcomes to work towards over the next 3 years.

These outcomes are that, by the end of the 2019/20 budget year:

Adult Health and Care

- People are able to look after and improve their own health and wellbeing and live in good health for longer
- People, including those with disabilities/long term conditions or are frail are able wherever possible, to live independently and in their own home.
- Health and Social Care have contributed to reducing health inequalities.
- Unpaid carers are supported to look after their own health and wellbeing

Community Safety

- Fewer people are victims of crime, abuse or harm
- People feel safe in their neighbourhood and homes
- Our communities take a positive role in shaping their future

Getting it Right for Every Midlothian Child

- Children in their early years and their families are being supported to be healthy, to learn and to be resilient
- All Midlothian children and young people are being offered access to timely and appropriate support through the named person service -

<ul style="list-style-type: none"> • All care experienced children and young people are being provided with quality services • Children and young people are supported to be healthy, happy and reach their potential • Inequalities in learning outcomes have reduced
Improving Opportunities for the People of Midlothian <ul style="list-style-type: none"> • Poverty levels in Midlothian are lower than the Scottish average • Midlothian residents are successful learners and young people go on to positive destinations when they leave learning • There is a reduction in inequality in health outcomes • Citizens are engaged with service development and delivery
Sustainable Growth <ul style="list-style-type: none"> • New jobs and businesses are located in Midlothian • Midlothian's economic growth rate consistently outperforms the Scottish average • Midlothian is an attractive place to live work and invest in • The gap between average earnings of those living and working in Midlothian and the Scottish average has decreased • Environmental limits are better respected , in relation to waste , transport, climate change and biodiversity • More social housing has been provided taking account of local demand • Homelessness has reduced and people threatened with homelessness can access advice and support services

Single Midlothian Plan: Child Poverty Performance Indicators

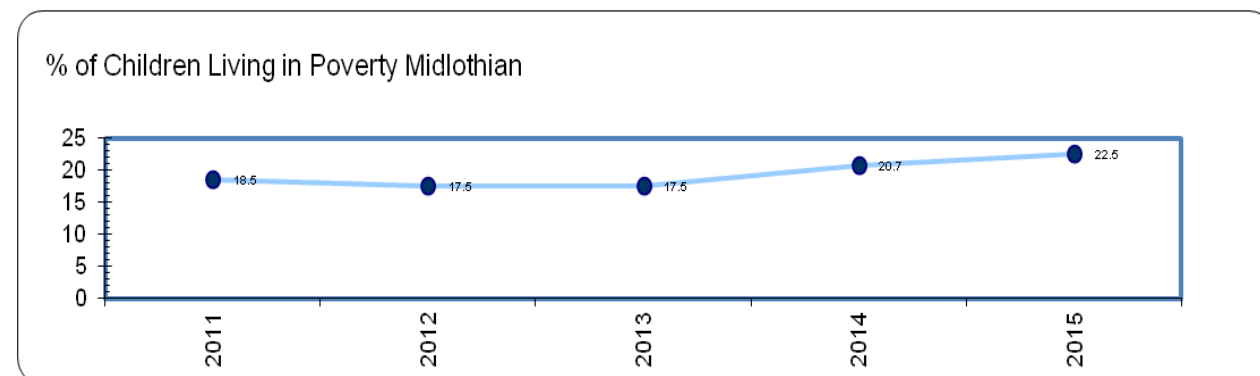
Theme	Actions	Due Date	Performance Indicator	Target	Baseline	Previous Trend Data
GIRFEMC	Complete review of evidence available and establish process to monitor proportion of children achieving expected levels by Primary 1	30/08/18	PIPS score (standardised) for maths for Midlothian P1 pupils at end of P1 year	52.7	Based on 2% increase in score per year	52.0 (11/12) 51.5 (12/13) 51.1 (13/14) 51.7 (14/15) 51.58 (15/16)
		30/08/18	PIPS score (standardised) for reading for Midlothian P1 pupils at end of P1 year	50.8	Based on 2% increase in score per year	51.3 (11/12) 51.5 (12/13) 50.6 (13/14) 49.7 (14/15) 50.79 (15/16)
		30/08/18	Percentage of increase in PIPS score achieved by P1 pupils from SIMD deciles 1 and 2 between entry and exit compared to the Midlothian average improvement.	90%	81.2% (2015/16)	76.1% (2014/15)
GIRFEMC	Establish joint education and <i>raising attainment for all</i> evidence base; establish process to monitor proportion of children achieving expected levels by Primary 4	30/08/18	Percentage of P4 pupils scoring 100 or above in standardised assessments in reading, maths and numeracy	63.6%	61.6% Pupils achieved 100 or above in Granada Learning P4 testing (15/16)	60.5% of Pupils achieved 100 or above in Granada Learning P4 testing

						(14/15)
GIRFEMC	Ensure pupils are secure at First level in reading, writing, listening and talking, maths and numeracy	30/08/18	Pupils achieving First level by end P4 in reading, writing, listening/talking, maths and numeracy	92% of pupils secure at first level	90% of pupils secure at first level	72%
GIRFEMC	Identify the current gaps in educational attainment at individual school level and implement a range of targeted strategies to close the gap	30/08/18	Improvement in the percentage of pupils from SIMD deciles 1 and 2 achieving the expected CfE level by the end of P1, P4,P7 and S3	To be established	Baseline to be established	New measure
IOM	Provide high quality and localised welfare advice and support, targeted at the areas with the highest levels of poverty.	31/03/18	Midlothian Council Welfare Rights Team (WRT) will generate an additional benefit income maximization of £500k per quarter.	£2m	£1.5Million	£1.5million
IOM		31/03/18	Midlothian Citizen Advice Bureaux (CABs) will generate an additional income maximization of £625k per quarter	£2.5 million	£2.5 million	£2.5 million
IOM		31/03/18	Midlothian CABs will provide 125 benefit advice sessions in the 3 targeted areas	125	To be established	New measure
IOM	Reduce barriers to learning by poverty proofing the school day of the 11 primary schools in the priority	31/03/18	Number of schools that poverty proof the school day	11	To be established	New measure

IOM	areas.		Relative to Scotland, Midlothian can demonstrate a 1% reduction in child poverty. Currently the Scottish Average is 22% and Midlothian is 22.5%	21.5%	22.5%	22.5%
IOM	Provide short term support to people experiencing significant hardship. This will include practical interventions including access to food banks; travel vouchers and trial energy vouchers for households experiencing fuel poverty.	31/03/18	Midlothian Foodbank will provide 1,500 – 2,000 people with emergency food supplies	2200	2000	2000
IOM		31/03/18	The number of Foodbank service users using the Foodbank on multiple occasions will be tracked and will demonstrate a reducing trend	From baseline	To be established	New measure
IOM		31/03/18	Provide £5 food vouchers to Foodbank users to purchase fresh food and vegetables from the Toot 4 Fruit Van	300	New service	New measure
IOM	Increase the uptake of benefits such as the Healthy Start vouchers	31/03/18	increase in % uptake	81%	71%	N/a

4. Child Poverty Levels

'After housing costs' (AHC) is a better guide to the number of households who experience poverty. The cost of housing is unavoidable and essential. People's standard of living is dependent on the disposable incomes they have after paying for their housing. Where low incomes entitle people to Housing Benefit it is treated as their income BHC and a rise in this benefit is treated as higher income BHC even though it only reflects a rise in housing costs and not in people's disposable incomes.



In Midlothian there are three communities within which there are concentrations of statistics which place parts of these areas in the top 20% of SIMD. These communities are Dalkeith Central/Woodburn; Mayfield/Easthouses and Gorebridge. However, it should always be noted that the majority of individual families experiencing relative poverty live **outside of areas of multiple deprivation**, which means that it is insufficient to target anti-poverty work solely at the communities named above.

As at 2014 there are roughly 20.8% of children in Midlothian living in poverty. This is slightly lower than the 2014/15 Scottish average of 22% and in 2015/16 that has risen to 22.5%. For the first time Child Poverty Levels in Midlothian have risen above the Scottish Average of 22%.

Child Poverty by Ward

At ward level, the percentages of children living in poverty AHC are:

Ward	Oct – Dec 2013	Oct – Dec 2015	Change
MIDLOTHIAN	21.25%	22.51%	↑
Bonnyrigg	19.52%	22.03%	↑
Dalkeith	26.63%	26.46%	↓
Midlothian East	21.55%	22.51%	↑
Midlothian South	23.82%	26.59%	↑
Midlothian West	16.78%	15.8%	↓
Penicuik	17.90%	21.14%	↑

Poverty indicators in Midlothian

Child poverty is calculated

- As of November 2015, Midlothian's Job Seeker's Allowance Claimant Count was 1.1%, which is less than the average figure for Scotland, 1.7% and the UK-wide average, 1.5%.

- Average weekly earnings for Midlothian residents, both male and female, are currently significantly less than both Scotland and British averages, having risen to meet the Scottish average income in 2010 before dropping sharply in 2011. For all full time workers living in Midlothian, gross weekly pay was £452.20 in 2011, compared with the Scottish average of £490.60 and the British average of £503.10. For women, this drops to £398.70, compared with £441.04 and £446.30 in Scotland and Britain respectively. **We still need to get household income figures.**
- In 2014 50% of all jobs in Midlothian were in the retail, construction, health and social care and education sectors compared to the Scottish rate of 39%. Midlothian has above average employees working in retail and construction sectors.

Midlothian workforce planning study: Final report 1st June 2016, Glasgow University, identified particular areas of concern:

- Educational attainment remains an area of concern for some parts of Midlothian. In particular, school leavers from Newbattle High School and Dalkeith High School continue to be significantly less likely to enter Higher or Further Education than their counterparts from elsewhere in Midlothian and Scotland, and are more likely to remain out of work or training upon leaving school.
- There is a strong correlation between deprivation and teenage pregnancy. In the under 20 age group, a teenage female living in the most deprived area is 4.8 times as likely to experience a pregnancy as someone living in the least deprived area, and nearly 12 times as likely to deliver their baby. (<https://isdscotland.scot.nhs.uk/Health-Topics/Sexual-Health/Publications/2015-07-07/2015-07-07-TeenPreg-Report.pdf>)
- Midlothian has a slightly higher percentage of lone parent households than Scotland, 7.37% Midlothian v 7.15% Scotland. Of the Midlothian households the highest density of lone parent households is in Midlothian South, 8.63%.

5. Area Targeting

Midlothian CPP has identified Dalkeith/Woodburn, Mayfield/Easthouses and Gorebridge as priority areas for the allocation of resources. Additional staffing resources, family learning centres, grant funding and capital expenditure has been committed to these three areas. The work is overseen by the Area Targeting Steering Group and this section will be updated as the work progresses.

6. Impact of welfare reform

Changes made as part of the Welfare Reform Programme including the phased introduction of Universal Credit and the changes to child benefits present additional risks for some of the poorest families in Midlothian. As there is no additional money available for specific work in relation to addressing child poverty, there is a reliance on existing resources to undertake any identified actions to reduce child poverty in Midlothian. It has been agreed that Child Poverty will now be reported to both the Improving Opportunities Midlothian Group and Getting it Right for Every Child.

Midlothian Council Welfare Rights Team delivers complex case, appeals and tribunal support alongside CABs and other MFIN advice Services.

In the inspection areas over the three year period 2013/14 – 2015/16 the Welfare Rights team have provided 929 interventions and assisted local residents to achieve £1,224,785.00 financial gain by ensuring they received the correct welfare benefits.

	2013/14		2014/15		2015/16		3 year total		3 year % breakdown	
	Interventions	Money Earned	Interventions	Money Earned	Interventions	Money Earned	Interventions	Money Earned	Interventions	Money Earned
Dalkeith and District	206	£234,256	70	£178,044	87	£329,674	363	£741,974	16%	14%
Gorebridge and District	141	£197,804	63	£131,148	71	£147,860	275	£482,811	12%	9%
Mayfield/Easthouses	176	£239,205	47	£79,901	68	£148,936	291	£468,043	13%	9%

7. Midlothian Council Grants

From the poverty stream of the large grants the following allocations were made:

Large Grants 2015-18	YEAR 1 15/16	YEAR 2 16/17	YEAR 3 17/18
Dalkeith and District Citizens' Advice Bureau	£148,693	£151,315	£121,690
Midlothian Foodbank, Gorebridge Parish Church	£26,786	£14,881	£11,897
Midlothian Financial Inclusion Network	£17,038	£17,724	£11,751
Penicuik CAB	£212,415	£153,793	£121,690
MARC	£31,216	£24,172	£20,000
Intowork Welfare Rights	£33,727		
Changeworks Resources for Life	£15,143		

2016/17

Of the £40,000 budget allocated to the poverty stream in 2016/17 for small grants, £16,725 was requested and £15,725 was allocated.

Bill Russell Youth Project	raise awareness of and develop the skills to achieve good financial management using the weekly drop in	£1,269
Dalkeith CAB	the Midlothian Travel Facilitation Fund - provide assistance to those experiencing periods of hardship, particularly those having difficulties meeting the necessary transport costs associated with attending welfare advice sessions, jobcentre meetings, medical appointments, job interviews, work commitments or collecting food parcels.	£ 2,800
MAEDT	School uniform bank	£ 2,725
MFIN	Midlothian Fuel Bank Pilot, Funding will be used to supply emergency utility payments to eligible residents in crisis, via 'prepaid' debit cards	£2,930
Midlothian Foodbank	Funding for the assistant foodbank manager's salary to ensure the continuation of the foodbank's service provision	£3000
Penicuik CAB	We want to pilot a 'Write a POA' week, similar to 'Write a Will' week to encourage people to do this, and protect their future finances	£3,000

2017/18

Due to the lack of applications to the stream a paper was put to council suggesting the £40,000 for 2017/18 be removed from the small grant budget and be allocated to the 3 targeted areas and be distributed using a Participatory Budgeting (PB) approach, this was agreed and the money will be allocated early 2017. NHS Lothian has put an additional £10,000 to support a PB project 'Food Glorious Food' in the three priority areas to address areas of poverty and inequalities relating to accessing healthy, affordable, high quality food.

8. Examples of Good Practice

Building on good practice

The following examples of good practice provide some directions for future work.

Midlothian Sure Start

Midlothian Sure Start's model of broad-based support for parents of children between birth and 3 years has achieved excellent outcomes for vulnerable parents, enabling them to build skills and confidence, develop their parenting skills, and move on to positive outcomes. Midlothian Sure Start is aware that there is demand for this type of support for parents whose children have progressed into nursery and school, but currently there is insufficient capacity or funding to effectively develop this.

Family Nurse Partnership

This programme, based on an American model, has been rolled out in parts of Edinburgh and Midlothian and involves intensive, focused home visits for vulnerable teenage parents from early pregnancy until the child turns 2. It involves parenting skills, confidence building, health improvement and education, and support for parents to improve their financial circumstances.

Family Learning Centres

The Woodburn Family Learning Centre opened at the start of 2016. Family resilience is at the heart of the development, families will work in partnership with a team of professionals in early learning and childcare, family support, the health service and third sector. Parents and carers will have access to speech and language therapy for their children. The centre will work in partnership with local parents to design a range of group and adult learning courses. There will be a strong emphasis on encouraging parents' involvement in their children's learning and development. This model will be replicated in Mayfield and Easthouses and the Gorebridge area.

Credit Union

Penicuik Churches Working Together run a satellite office from Penicuik North Kirk for Capital Credit Union. The initiative was in response to a Church of Scotland commission in 2012 which identified 4 priorities; reducing inequality, ending poverty, ensuring sustainability and promoting mutuality. As a member owned, community based, financial organisation they provide a more manageable alternative to pay day loans.

'A good time to be 2'

A good time to be 2 offers high quality early learning and childcare in various settings across Midlothian for eligible 2 year olds. Eligible children will receive up to 600 hours of early learning and childcare in an early years setting. Children benefit from enjoying a range of play experiences and support with the transition to nursery.

Foodbanks

The Trussell Trust Midlothian Foodbank based in Gorebridge provides emergency food to people in crisis. Clients are referred to the food bank by professionals who have identified them as being in crisis. There are additional food banks across the county.

Dalkeith Storehouse

Storehouse is a local charity organised by The Full Gospel Church. Storehouse aims to provide essential supplies to families in crisis in the Dalkeith area to make sure no child or young person in Midlothian goes hungry. Regular, ongoing donations of food, as well as essential

household supplies meet the immediate needs of those in crisis. Storehouse provided thousands of breakfasts and lunches to local children in most need.

Pupil Equity Funding

In February 2017 the Scottish Government announced a £120 million Pupil Equity Funding scheme. Midlothian has 1,894 eligible pupils and schools will receive £2.27 million. The funding should be used on activities and interventions that will lead to improvements in literacy, numeracy and health and wellbeing.

Empowering Families

Empowering Families project is a partnership of 12 agencies who work with families across Midlothian. Its aim is to develop a multi agency, early intervention project to help families make positive changes for themselves to manage their problems better.

Participatory Budgeting

Mayfield and Easthouses Community Chest participatory budgeting initiative held a decision day on Saturday 21st May 2016. 349 residents in Mayfield were the key decision makers in deciding how to spend £30,000 on projects supporting people struggling financially. 17 out of the 31 projects who applied to be part of the process were successfully funded, with most being delivered by locally-based organisations.

<https://pbscotland.scot/blog/2016/5/27/participation-of-midlothian>

Dissertations for Good

Dissertations for Good is an NUS initiative that aims to connect students with organisations to complete research projects into social, economic and environmental sustainability with the end result being a report that is useful for the partnered organisation. Midlothian Council has matched with two Edinburgh University Masters students who are going to focus their research on reducing child poverty. They will work alongside selected schools with a high concentration of pupils affected by socio-economic disadvantage in Midlothian, specifically to identify economic barriers and test interventions that prevent children from poorer families achieving their full potential. Learning from the extensive research from the Cost of the School Day Report the project will test interventions in areas including the cost of school materials, uniforms, and after school learning and fund small interventions that can help remove these barriers. The project will aim to improve wellbeing by removing the stigma that poorer children and their families experience at school. There is an opportunity to develop further student placements to support the child poverty work.

Button Box

The Button Box is a community children's clothing project based in Midlothian. We are working with families across Midlothian to provide free clothing for children age 0-16yrs, we do this through holding regular free community events where all families regardless of their personal circumstances or background are welcome to come along and collect clothing for their growing family. We also work in partnership with early learning and childcare settings, schools, out of school care, local youth organisations and other relevant services for young people to promote the culture of recycling amongst the students, staff and the wider community. To break down barriers for families wishing to donate, we now have a drop off points in a number of areas across Midlothian. The project also has a strong focus on strengthening and building resilience within local communities by providing

opportunities for volunteers to become involved in the project and support families that live in Midlothian.

Lifelong Learning and Employability – Young Mum’s Group

Young mum’s under the age of 20 attending the LLE Mum’s Group are eligible to access EMA for attending 6 hours per week. The group is linked up with Gorebridge Food Bank and all attendees receive free lunch, crèche and bus fares to attend. All participants receive qualifications on completion.

Lifelong Learning and Employability – Pathways

Young people attending LLE Pathways are supported with travel, food and EMA if eligible.

Lifelong Learning and Employability – Newbattle Summer Playscheme

There are 10 free spaces available for young people looked after at home or kinship care.

Lifelong Learning and Employability – Working for Families

LLE have a small pot of money available specifically to support parents of children under 16 and carers of all ages who are moving into employment, training or education. The money is available to support costs such as:

- . A deposit to secure childcare provision to assist the return to work or education or moving from part time to full time employment
- . Help to bridge the gap between coming off benefits and receiving the first wage, bursary etc. e.g. Tesco vouchers for up to 4 weeks to assist with the cost of food and essentials, purchase of bus pass or bus tickets for travel to work or college
- . Some of the upfront costs often associated with moving into paid work e.g. assistance with work clothes or specialist equipment
- . The cost of a PVG certificate or replacement certificates required to prove eligibility to work and/or qualifications e.g. copy of birth certificate, SQA certificates etc

This list is not exhaustive and each case will be assessed on an individual basis. The fund is reserved for those on benefits or low incomes. People can be referred by agencies or can self refer.

MAEDT Clothes Recycling

MAEDT received a small grant to purchase a washing machine, dryer, iron to support. They distributed 450 items out in 4 hours (sold the concept as a recycling project), similar to Gorebridge Food Bank uniform swap idea.

Toot For Fruit

Toot for Fruit is an NHS Lothians health promotion initiative delivered in partnership with the Gorebridge Foodbank. It has a van, and a driver who works to provide access to good quality, low cost fruit and vegetables across Midlothian. The van is on the road three days a week with a focus on areas of deprivation – this can be in terms of income, high unemployment or geography.

Many areas will have no shop or just one shop. Regular customers include many of Midlothian Sure Starts and nurseries, 16 housebound clients and at least 35 other regular customers. The van is also available for one-off events across the area.

Toot for Fruit has strong links to health via the health promotion team and the Joint Health Improvement plan. The initiative has also established key targets in terms of older people and early years. It is currently supporting an initiative enabling people using food banks to access fresh eggs, fruit and vegetables which they would otherwise not be able to obtain.

The scheme has had a positive impact on those supported. One local mum with four children aged from 6 to 13 has struggled because of the change from weekly to monthly benefit payments. She and her kids love the fresh fruit and veg vouchers.

"The kids love the free range eggs, they are fresher and tastier than those in the shops, and now ask for them when I go shopping".

She herself did not buy fruit but has now started to. She likes the bananas and grapes. The Toot-for-Fruit van fruit has changed her eating habits.

She finds it very easy to contact the van. "The driver is very friendly and the kids really like going out to collect their supplies from him. The kids love it. The Toot-for-Fruit van is amazing".

9. Draft Measurement Framework

Indicator	Baseline	Desired direction of travel	Source
Decrease the % of families assessed as homeless or 'at risk' of homelessness	Scotland 0.55% Midlothian 0.60% (2014/15)	Decrease	Housing/ Social Work Contacted Rebecca Fairnie and Angela Harris 30/06/16, asked again on 1/12/16
Reduce the number of sanctions made against claimants with children living in their home		Decrease	DWP – FOI submitted 28/06/16
Reduce the number of households whose combined earnings are lower than 60% of the UK average Increase household earnings across Midlothian	20% of Midlothian employees earn less than living wage compared to the Scottish figure of 19.3% Full time workers in Midlothian earn £497.40 compared to the Scottish average of £527 (2015)	Decrease Increase	NOMIS ASHE (Annual Survey Hours and Earnings) NOMIS
Reduce the number of families dependent on food parcels	In 2015 1002 vouchers were issued for the Midlothian Foodbank covering 1241 adults and 676 children. Top 3 crisis types – Benefit Delays, Homeless, Debt. 60% of vouchers were issued to single people, 18% single parents, 11% families. The first 6 months of 2016, 426 vouchers have been issued, 567 adults, 369 children. The patterns remain the same for crisis types	Decrease	Emailed Janice Burns @ Gorebridge foodbank 30/06/16, info received 04/07/16

	and family types.		
Increase the % of school leavers moving into a positive destination in SIMD 20% zone	Have info for all school leavers – April 2016, 93%	Increase	SEEMIS Matthew Dunn ,got 15/16 have requested 14/15 on 1/12/16
Reduce the number of care leavers assessed as homeless or 'at risk' of homelessness		Decrease	Housing Contacted Rebecca Fairnie and Angela Harris 30/06/16, asked again on 1/12/16
Increase the % of looked after and accommodated young people moving into a positive destination	76% (19 of 25) Care Experienced Young People reached a positive destination (2014/15)	Increase	SEEMIS Matthew Dunn
Reduce the number of unexplained days absence from school	2014/15 91% Secondary attendance 94.51% Primary attendance	Decrease	SEEMIS Matthew Dunn Have asked Matthew to provide this information at SIMD level and per school
Pupils receiving free school meals	Info for 2014/15: 1168 Primary (this excludes P1-P3 as it is an entitlement) 662 Seniors 45 Saltersgate 1,875 TOTAL 14,416 COHORT (13%)	Increase uptake	SEEMIS Matthew Dunn Have asked Matthew to provide this information at SIMD level and per school
Pupils receiving clothing grants	Info for 2014/15: 1187 Primary 676 Seniors 45 Saltersgate 1,908 TOTAL 14,416 COHORT (13.2%)	Increase uptake	SEEMIS Matthew Dunn Have asked Matthew to provide this information at SIMD level and per school

			Do we have data trends?
Crisis grants	2,897 issued 2014/15 857 refused 394 partially granted 1646 fully paid		Rebecca/Angela (any assessment of dependents?)
Community care grants	941 issued 2014/15 255 rejected 461 partial 225 fully		Rebecca/Angela
Number of section payments issued to care leavers and those with dependents	359 emergency one off payments £28,168 in total through 126 clients		Rebecca/Angela MOSAIC
Increase number of Family Nurse Partnership clients becoming economically active		Increase	Val Alexander/Val Waters (NHS) Emailed 28/06/16
Increase the uptake of Early Learning for 2's places	170 places taken, still waiting on number eligible	Increase	Emailed Diane Janczyk on 1/12/16
Educational attainment – reading, writing and numeracy levels for P7s – ON SMP	All P7s 79.4% v target 81% SIMD Level 1 and 2 59.4% v target 62.4%	Increase	SEEMIS Matthew Dunn
Increase number of Modern Apprenticeships for young people (focused on area targeting)	As at 4/7/16 there are currently 290 Midlothian YP employed as Modern Apprentices. Of these 43% are classed as SIMD levels 1 and 2 (17% level 1 and 37% level 2).	Increase	Information from the hub via SDS from Lesley.
Reducing fuel poverty		Decrease	Contact Lesley Kelly, use the information on fuel vouchers – fuel bank trial starts Dec 2016
Access to IT/digital literacy		Increase	
Increase educational levels	39.9% of Midlothian residents have NVQ4s and above compared to 42.5% Scotland	Increase	NOMIS

Toot for Fruit	Monday – 24 customers Tuesday – 26 customers Wednesday – 19 customers Thursday – between 7 and 23 customers					Emailed Janice Burns 06/07/16 and received info
Dental health – proportion of P1 children who have no obvious dental disease – Scottish target 60%	East Loth Edinburgh Midlothian West Loth	2012 73.2% 73.6% 65.0% 65.7%	2014 72.5% 68.6% 68.5% 67.3%	2016 72.4% 73.1% 68.8% 63.7%	Increase	Melissa – Childsmile Programme 4/8/17
Dental health	100% of all Midlothian nurseries currently participate in the toothbrushing programme					Melissa – Childsmile Programme 4/8/17

**Working group members to contribute other measures*

10. References

Child Poverty stats per ward: http://www.endchildpoverty.org.uk/
Child Poverty Strategy for Scotland: http://www.gov.scot/Topics/People/fairerscotland/tacklingpovertyinscotland/CP
Dissertations for Good: http://dissertationsforgood.org.uk/organisation/midlothian-council-reducing-the-attainment-gap-in-education/
Empowering Families: http://www.midlothiansurestart.org.uk/efp.html
Midlothian Profile 2016: https://www.midlothian.gov.uk/download/downloads/id/1285/midlothian_profile_2016.pdf
Participatory Budgeting: https://pbscotland.scot/blog/2016/5/27/participation-of-midlothian
Pupil Equity Funding: http://www.gov.scot/Topics/Education/Schools/Raisingeducationalattainment/pupilequityfund
Scottish Government Child Poverty Bill: http://news.gov.scot/news/child-poverty-bill-published
Welfare reform: the impact on families in Scotland: http://www.cpag.org.uk/sites/default/files/CPAG-Scot-WR-impact-families(Sep16)_1.pdf

Annual Complaints Performance Analysis for the year 2017/18.**Report by Alison White, Head of Adult and Social Care, HSC****1 Purpose and Background of Report**

Changes to social work complaints handling have been brought about through the Public Services Reform (Social Work Complaints Procedure) (Scotland) Order 2016 (<http://www.legislation.gov.uk/ssi/2016/157/contents/made>). These changes include provision for the Ombudsman to consider the merits of social work decisions as part of the Scottish Public Service Ombudsman's (SPSO) independent investigation of complaints.

The purpose of the Social Work Complaints Handling Procedure (SWCHP) is to provide a standardised approach to handling customer complaints about social work services, whether they are provided by local authorities (LAs) or by health and social care partnerships (HSCPs). In particular, the aim is to implement a consistent process to follow which makes it simpler to complain, ensures staff and customer confidence in complaints handling, and encourages identification of, and making best use of lessons from complaints.

The SWCHP requires Midlothian Council to ensure that *'complaint details are analysed for trend information to ensure we identify service failures and take appropriate action, and regularly reporting the analysis of complaints information helps to inform management of where services need to improve'*.

Appendix 1 presents Midlothian Council's first Social Work Annual Complaints Performance Analysis for 2017/18. The report informs how Midlothian has performed during year one of the new procedure. There is no comparative detail since we are in the inaugural years of the procedure, so there is only minimal analysis and discussion. Year one's statistical data, however will be used as a benchmark for forthcoming reports, where the year on year social work complaints data for Midlothian Council will be presented. These future reports will also detail comparative data to the established Local Government Benchmarking Framework (LGBF) family groups; and similarly to all Scottish Local Authority Social Work services when norms are established. This data is determined and then collated by members of the sub-groups of the Local Authority Complaint Handlers Network (LACHN).

The report illustrates a foreword by the Chief Social Work Officer, and includes background detail around the statutory obligations and how they

were brought about. This provides contextual detail that highlights the Acts that apply and how compliance to the procedure is externally monitored. It also focuses on what the emphasis of the procedure is in relation to consistency, coordinated responses, and how providing the data facilitates continuous improvement through benchmarking of performance within and across sectors.

To meet the obligation, local authorities are required to assess and report complaints data against a suite of 8 indicators, and these indicators are the focus of the report. The case studies about the learning and improvements that have occurred as a result of complaints during year one of the new procedure are of particular interest.

CMT were asked to approve publication of the appended annual report, and this is being progressed. Accordingly, the report is attached for the attention of both Cabinet and the ensuing Performance Review and Scrutiny (PRS) members.

2 Report Implications

2.1 Resource

The developing complaints agenda will be subject to ongoing review in terms of the focus and responsibilities of the current Customer Service Improvement Officer role to ensure that the role and outcomes continue to meet the ongoing needs of the Council in relation to complaint handling and reporting.

2.2 Risk

Failure to meet the statutory requirements as they relate to complaint handling and SPSO reporting presents a risk and therefore a commitment to further develop the function seeks to mitigate this.

2.3 Single Midlothian Plan and Business Transformation

Themes addressed in this report:

- ☐ Community safety
- ☐ Adult health, care and housing
- ☐ Getting it right for every Midlothian child
- ☐ Improving opportunities in Midlothian
- ☐ Sustainable growth
- ☒ Business transformation and Best Value
- ☐ None of the above

2.4 Key Priorities within the Single Midlothian Plan

This report relates directly to the key priorities within the Single Midlothian Plan; and the proposed action supports the ongoing improvement agenda across a number of the thematic areas.

2.5 Impact on Performance and Outcomes

The report will provide a number of benefits that includes offering an enhanced understanding of complaints data. The analysis and discussion about what the results could mean, and how they can be used will

complement the wider corporate objective to provide an efficient complaints service. The improvement actions and process changes described in the case studies that have been implemented as a result of complaints are evidence of enhancing delivery and outcomes.

2.6 Adopting a Preventative Approach

The Council is proactively responding to improvement opportunities noted as part of the complaints process.

2.7 Involving Communities and Other Stakeholders

The Council is using the evidence from complaints as another form of customer feedback to learn from and develop services, and to assist in its delivery of services and processes within the divisions.

2.8 Ensuring Equalities

There are no equalities issues that relate to this report.

2.9 Supporting Sustainable Development

There are no sustainability issues with regard to this report.

2.10 IT Issues

More in depth development work whilst still being defined may be requested through a further report. Future development work will be informed by the proposed provision of a new CRM system

Following system training, staff's understanding of the process will make for more accurate reporting.

8 Recommendations

Cabinet are asked to:-

- Note the content of the Social Work Annual Complaints Performance Analysis in appendix 1.
- Note that is being processed for publication.

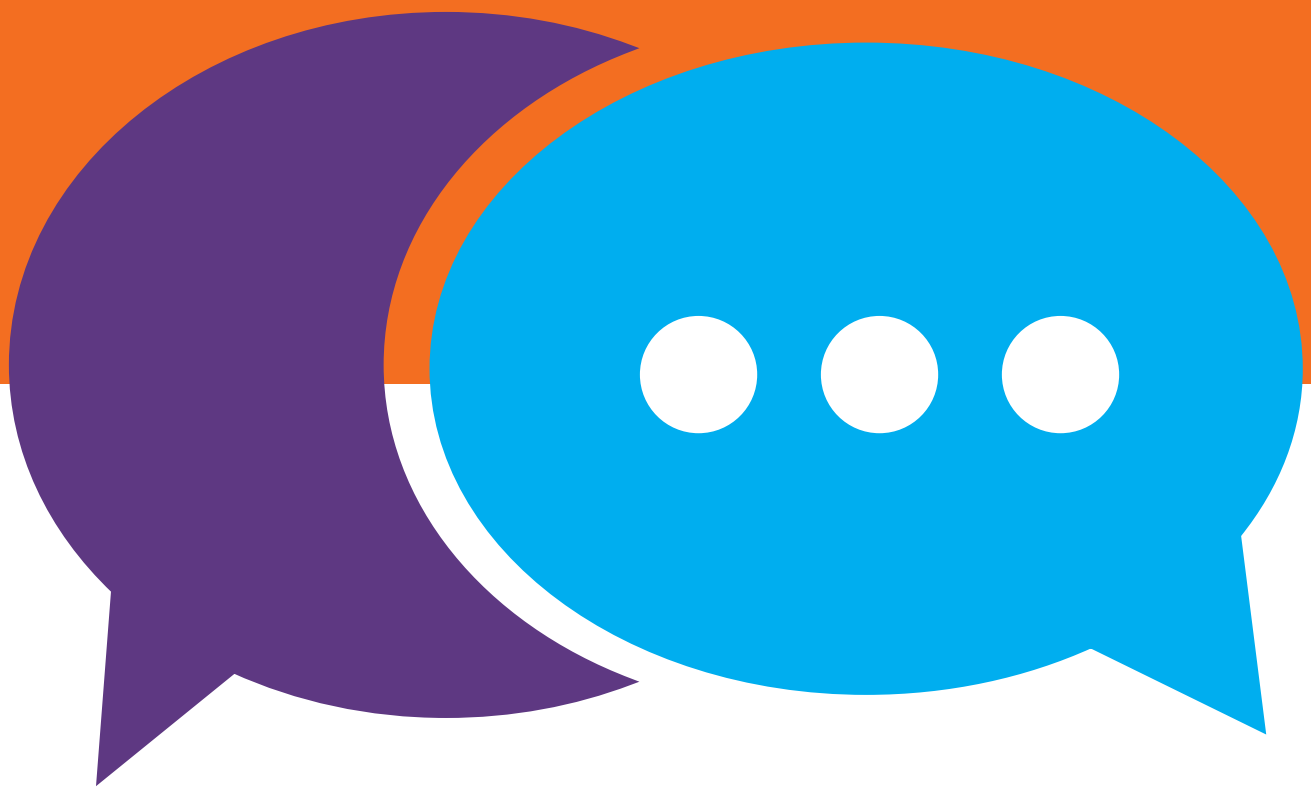
Date 18/09/2018

Report Contact:

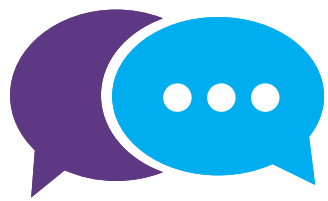
Claire Butters Tel No: 0131 271 6734
Claire.Butters@midlothian.gov.uk

Background Papers:

Appendix 1 - Social Work Annual Complaints Performance Analysis for 2017/18



Midlothian Council Social Work Complaints Performance Analysis **2017/18**



Foreword

As with all Councils in Scotland, Midlothian Council has a new Social Work Complaints Handling Procedure (SWCHP) in place that reflects a robust commitment to valuing feedback from customers.

A year on since its implementation, it is pleasing to present the council's first Annual Social Work Complaints Performance Report. The report provides information on complaints about all social work services delivered either directly by Midlothian Council, or indeed through the Health and Social Care Partnership (HSCP). Midlothian Council also takes responsibility for commissioned services that deliver social care or other services on the council's behalf. While commissioned services are separate from the council and HSCPs, they are subject to control by the council and their services must meet the required standard. Accordingly, there are mechanisms in place to identify and act on complaints handling performance issues with these providers.

Midlothian Council is committed to providing high quality services to communities, but recognises that occasionally things can go wrong. The SWCHP means that staff can directly engage with customers and get the valuable feedback needed to drive service plans. A robust complaints procedure also helps to improve key outcomes that includes: being responsive to the population of Midlothian; and showing transparency, equity and fairness in the distribution of resources.

The data presented has been received between 1 April 2017 and 31 March 2018 and this report is in addition to the way complaints are regularly reported to Heads of Service, the Corporate Management Team and Elected Members.

The report provides the opportunity to share performance with a key focus on continuous improvement as a direct result of the social work related complaints received. The performance indicators that are reported on are standardised across all Scottish Councils, and some case studies are shared that demonstrate the learning and improvement that has taken place.

Going forward, focus will be on achieving a high level of positive outcomes for complainants at the frontline Resolution Stage 1, where the decisions to uphold complaints have successfully helped us to resolve matters early, learn from any mistakes and to enhance our Social Work services and operations.

The council would like to thank the residents of Midlothian for their encouraging support. Please continue this support by providing your feedback on any aspect of Midlothian Council's Social Work services, all of which have contributed to the production of this Social Work Annual Complaints Performance Report.

Alison White

Chief Social Work Officer
Midlothian Council

Background

The Public Services Reform (Social Work Complaints Procedure) (Scotland) Order 2016 (the Order) brought social work complaint handling into line with other local authority (LA) complaints handling, by bringing it under the remit of the Public Services Reform (Scotland) Act 2010 (the Act). Under the Act, the SPSO has the authority to lead the development of model complaints handling procedures (CHPs) across the public sector. The Act took forward the recommendations of the Sinclair Report, which sought to improve how complaints are handled through the development of simplified, standardised CHPs.

Health and Social Care Partnership and Integrated Joint Board complaints are managed using the Scottish Public Services Ombudsman's Model Complaint Handling Process (CHP) from 1st April 2017 and 1st of July 2017 respectively. The introduction of the social work model CHP requires a change to the reporting period for complaints from every 6 months to a quarterly cycle. Compliance is monitored by Audit Scotland in conjunction with the SPSO and is in line with the principles of the Best Value Shared Risk Assessment (SRA) arrangements.

The implementation of the SW Model CHP was timed to coincide with the implementation of the new NHS Model CHP, bringing both social work services and NHS services into line with the existing local authority (LA) Model CHP.

The emphasis of the new SWCHP is on ensuring that customers have easy access to an efficient, customer focused complaints service which responds to their concerns quickly and as close

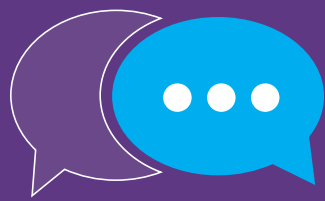
to the point of service as possible. The extension of the approach to social work services will also help local authorities and health and social care partnerships in providing coordinated responses to complaints that cover more than one service. In particular, the aim is to implement a consistent process for organisations to follow which makes it simpler to complain, ensures staff and customer confidence in complaints handling.

An important aspect of all model CHPs is the requirement to learn from complaints. The new social work CHP requires organisations to assess and report their complaints handling performance against the SPSO performance indicators. This will help to facilitate continuous improvement through the benchmarking of performance within and across sectors. Importantly, it will help organisations to use the outcome of complaints to improve service delivery.

What is a complaint?

Midlothian Council defines a complaint as:

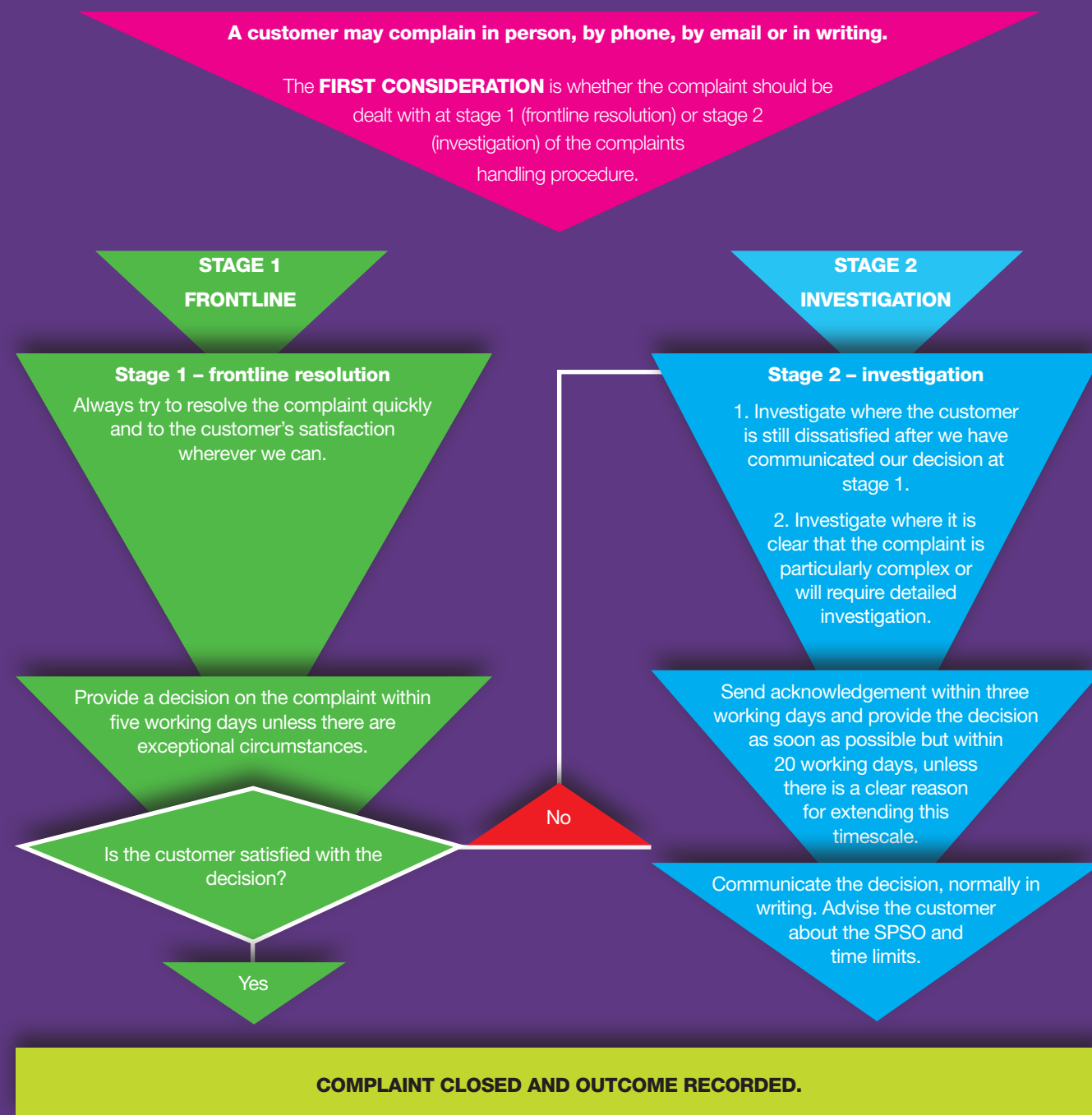
“An expression of dissatisfaction about our action or lack of action, or about the standard of service provided by us or on our behalf”.



Social Work Complaints Handling Procedure

While the SWCHP includes significant information and guidance specific to social work matters, the only procedural difference when compared to the corporate Complaints Handling Procedure (CHP) is that the extension to timescales for stage 1 complaints is different. Figure 1 illustrates a summary flow chart of the complaints procedure. It is the same summary used for the corporate CHP.

Figure 1: Complaints Handling Procedure



Monthly or quarterly:

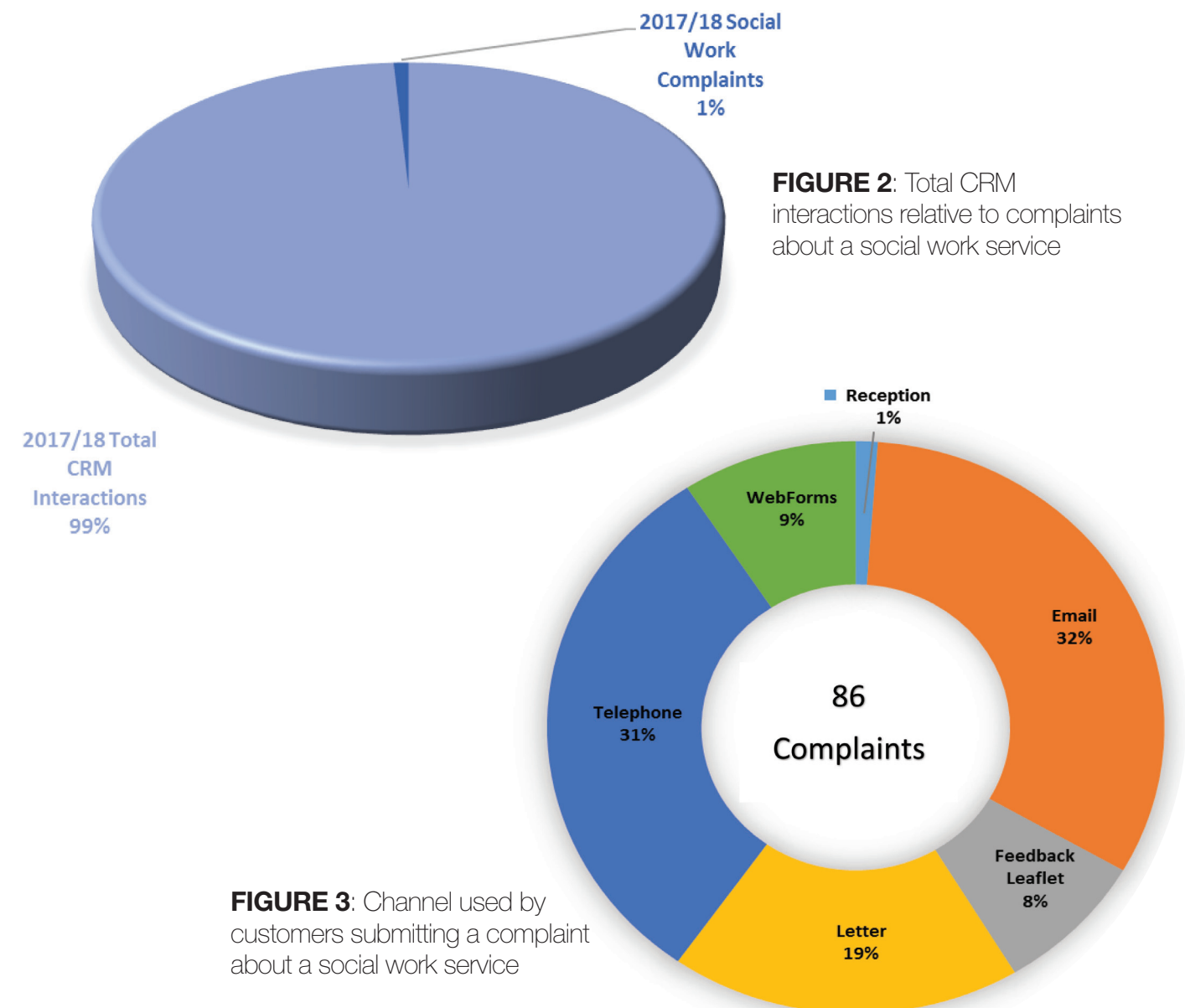
ENSURE ALL complaints are recorded • **REPORT** performance, analyse outcomes
MAKE changes to service delivery where appropriate • **PUBLICISE** complaints performance externally

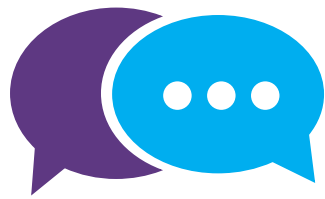
Social Work Complaints Received and Channel Used 2017/18

The number of complaints about social work services that are logged on the Customer Relationship Management (CRM) system are proportionately very little when compared to the overall number of recorded dealings.

With a total of 103,528 interactions on CRM, only 86 related to complaints about a social work service. This equates to just under 1%. The percentage difference relative to the total amount of interactions during 2017/18 is illustrated in Figure 2.

Figure 3 highlights the various channels that customers have used to contact the council with their complaints about Social Work. Email and telephone are the preferred methods with 32% and 31% respectively, followed by letter (19%), webforms (9%), and feedback leaflet (8%). In person at any of our reception points equated to only 1%. The SWCHP is in its inaugural years, and the coming years will bring interesting comparative data that will determine if the work done both corporately and within service areas is shifting in a way that meets the rapidly growing population of Midlothian. Planned development to systems such as Customer Relationship Management (CRM) will support this from an accessibility, recording and reporting viewpoint.





Social Work Related Service Areas

Table 1 illustrates the Social Work service areas and the total number of complaints that have been submitted to each. The data shows that Adults and Social Care have the most with 45 complaints, followed by Children's Services with 33. All the other areas have 1 complaint with the exception of the Community Care Team (3).

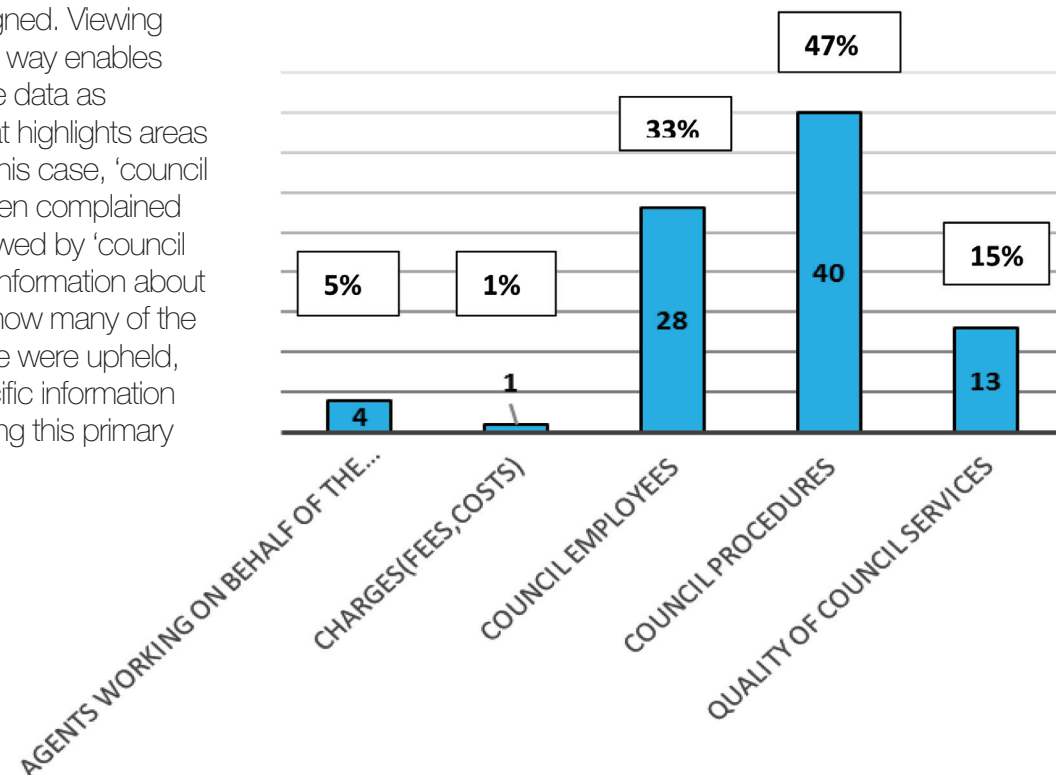
Social Work Service	Complaints
Adult Protection	1
Adults and Social Care	45
Children's Services	33
Community Access Team	1
Community Care Team	3
Criminal Justice	1
Highbank Residential Home	1
Home Care Team	1

TABLE 1: Social Work Service Areas and Corresponding Complaints for 2017/18

Complaint Themes

Figure 4 illustrates the amount and percentage of social work related complaints relative to the themes that they have been assigned. Viewing the information in this way enables the service to use the data as tangible evidence that highlights areas for consideration. In this case, 'council procedures' have been complained about the most, followed by 'council employees'. Further information about outcomes, such as how many of the complaints per theme were upheld, and other more specific information will be viewed following this primary data analysis.

FIGURE 4: Number and percentage of complaints relative to overarching themes



Statutory performance indicators

Midlothian Council assesses complaints handling performance to provide assurance in relation to their performance, to facilitate continuous improvement and to assist in benchmarking performance between local authorities.

Indicator 1 Complaints received per thousand population

Indicator 2 Complaints closed at stage 1 and stage 2 as a percentage of all complaints closed

Indicator 3 The number of complaints upheld/partially upheld/not upheld at each stage as a percentage of complaints closed in full at each stage

Indicator 4 Average time in working days for a full response to complaints at each stage

Indicator 5 The number and percentage of complaints at each stage which were closed in full within the set timescales of 5 and 20 working days

Indicator 6 The number and percentage of complaints at each stage where an extension to the 5 or 20 working day timeline has been authorised.

Indicator 7 Customer Satisfaction statement about the complaints service provided.

Indicator 8 A statement outlining changes or improvements to services or procedures as a result of the consideration of complaints.

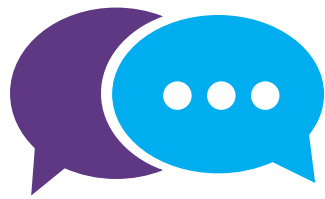
INDICATOR 1 – Complaints Received Per Thousand Population

This indicator records the total number of complaints received at stage 1, or directly at stage 2. The sum is divided by the estimated population size of Midlothian Council. Population size data is a Mid-Year Population Estimate from 2015 obtained from the National Records of Scotland (NRS).

- The population of Midlothian Council is estimated to be 88,610
- Midlothian Council handled 87 Social Work complaints
- This equates to an average of 1 complaint received per 1000 population, or expressed another way, 1 in every 1000 people made a complaint about a social work service

Table 2: Figures for Performance Indicator 1

Complaints received per 1000 population	
Population Total	88,610
Total Number of Social Work Complaints	87
Complaints per 1000 population	1



INDICATOR 2 – Complaints Closed At Stage 1 And Stage 2 As A Percentage Of All Complaints Closed

Table 3: Figures for Performance Indicator 2

Complaints closed		
	No. Complaints	% Total
Closed Complaints Stage 1	37	45.2%
(Closed Complaints at 1st Point Contact)	(+1)	
Closed Complaints Stage 2	27	32.1%
Closed Complaints after Escalation	19	22.6%

Closed complaints are those that have been allocated an outcome and a response has been given to the customer. At time of reporting, no further action was required.

Customers who have undergone the complaints procedure at stage 1, but who remain dissatisfied are invited to **escalate** their complaint to a stage 2 investigation.

- Since it is year one of this report, there is no comparative data, so the current statistics will be an initial benchmark.
- Work that endeavours to increase the percentage of closed stage 1 complaints, currently 45.2%, will be considered since it costs much more to deal with stage 2 complaints compared to stage 1. The SPSO also encourages as early a resolution as possible.
- Although all stage 1 complaints are considered 'early resolution', Midlothian also records the complaints that were closed at the very first point of contact. This enables the council to consider the customer journey, looking at details such as whether these cases are more, or less likely to be escalated to a stage 2 since they more often than not tend to be upheld; and also look into whether those customers tend to be more satisfied than those who have had to wait for an outcome to their complaint for example from a manager or someone within the service. This information will be presented in future reports.

INDICATOR 3 – Complaints Upheld, Partially Upheld and Not Upheld

The Complaint Handling Procedure requires a formal outcome to be recorded against each complaint. The outcomes are categorised as upheld, partially upheld, and not upheld.

Table 4: Figures for Performance Indicator 3

Complaint Outcomes		
	No. Complaints	% Total
Stage 1 Complaints Upheld	5	13.2%
Stage 1 Complaints Not Upheld	11	28.9%
Stage 1 Complaints Partially Upheld	10	26.3%
Stage 2 Complaints Upheld	5	18.5%
Stage 2 Complaints Not Upheld	9	33.3%
Stage 2 Complaints Partially Upheld	10	37%
Escalated Complaints Upheld	3	15.8%
Escalated Complaints Not Upheld	9	47.4%
Escalated Complaints Partially Upheld	6	31.6%

Table 4 illustrates that 5 stage 1 complaints were upheld, which represents 13.2% of all complaints closed at stage 1. Additionally, 11 were not upheld and 10 were partially upheld, representing 28.9% and 26.3% respectively. Of the closed stage 2

complaints, 5 were upheld, 9 were not upheld and 10 were partially upheld. This corresponds to 18.5%, 33.3% and 37%. Lastly, the escalated complaints show that 15.8% (3) were upheld, 47.4% (9) were not upheld, and 31.6% (6) were partially upheld.

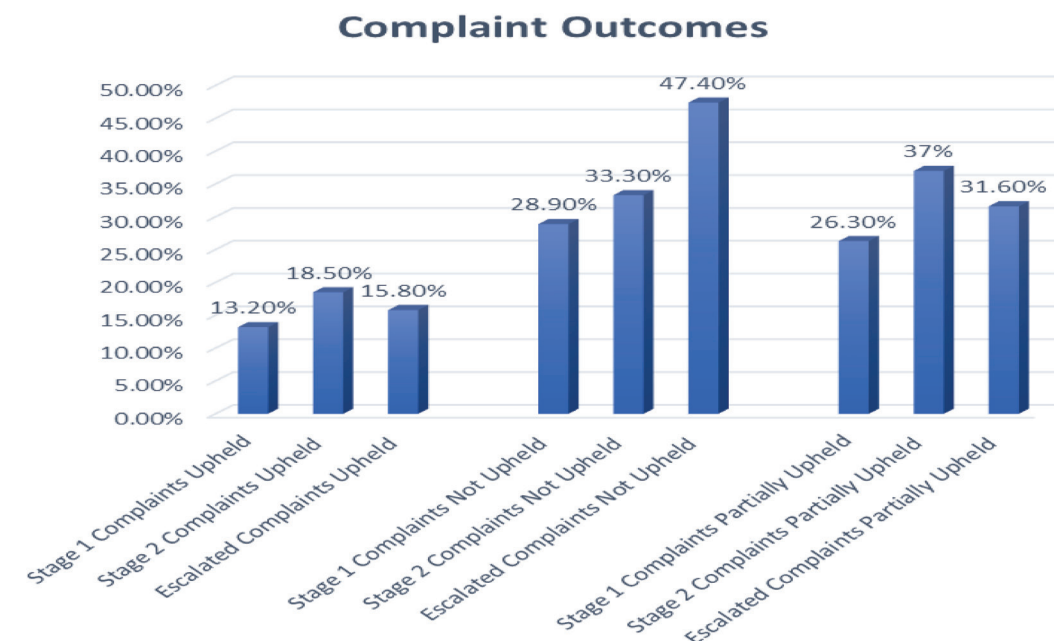
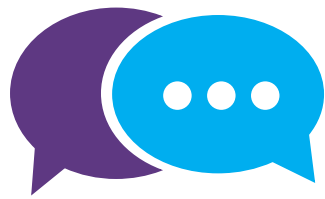


Figure 5: Comparisons for Performance Indicator 3

Figure 5 expresses the data in another way, where each of the outcomes are grouped together, rather than the stage of complaint. This enables the viewer to visually compare the outcomes between each of the stages. This enables consistencies, irregularities, or trends to be identified at a glance before doing further analysis work to gain further insight.



INDICATOR 4 – Average Time In Working Days To Respond To Complaints

This indicator takes the sum of the total number of working days for all complaints to be dealt with and closed at stage 1; at stage 2; and escalated complaints. The average time in working days for a full response to be given is then calculated by dividing the sum by the total number of closed complaints for each stage. Prescribed timescales are 5 days for stage 1 and 20 days for both stage 2 and escalated complaints.

Table 5: Figures for Performance Indicator 4

Average Time in Working Days to Respond to Complaints		
	Target (days)	Average (days)
Stage 1 Average Time in Working Days	5	16.3
Stage 2 Average Time in Working Days	20	16.9
Escalated Average Time in Working Days	20	20.7

Table 5 shows that the average time to deal with stage 1 complaints is 16.3 days. This is well out-with the 5 day target. Work is ongoing to ensure that staff become familiar with the handling of the new procedure. The 'stage 1' process is a new concept to Social Work staff and it is clear that work is required that will enhance understanding. More work is needed to establish the reasons behind these stats. It could be that they should

have been logged as stage 2 in the first instance.

The average time to respond to stage 2 and escalated complaints is 16.9 and 20.7 days respectively. Since the target is 20 days, the results for stage 2 complaints is sufficient, but escalated complaints is not so adequate. Work to ensure that this trend does not continue is ongoing.

INDICATOR 5 – Complaints Closed Against Timescales

This indicator reports the number and percentage of complaints at each stage which were closed in full within the predetermined timescales of 5 and 20 working days.

Also included in these statistics are the cases where an extension has been authorised to the timescales. Table 6 illustrates the results as follows:

- 9 complaints (of 38) were closed at stage 1 within 5 working days. This denotes 23.7%.
- 20 complaints (of 27) were closed at stage 2 within 20 working days. This denotes 74.1%
- 10 complaints (of 19) were closed after being escalated. This denotes 52.6%

It can be seen that improvements are required for all stages that will ensure timescales are met. Training around the procedure and system management is required and following this it is anticipated that next year's statistics show improvement when compared to the current year's data.

Table 6: Figures for Performance Indicator 5

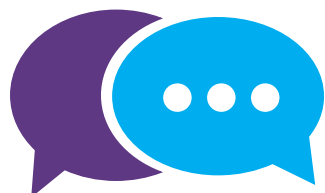
Percentage of Complaints Closed against Timescales		
	Number	Result %
Stage 1 Percentage Closed within Timescales	9	23.7%
Stage 2 Percentage Closed within Timescales	20	74.1%
Escalated Percentage Closed within Timescales	10	52.6%

INDICATOR 6 – Complaints At Each Stage Where An Extension Was Authorised

This indicator looks at the number and percentage of complaints at each stage where authorisation was agreed to extend the 5 or 20 working day timeline.

It does not include complaints that were late but authorisation was not requested and/or logged accordingly.

During the period 2017/18 there were no extensions requested. Correct use of this function might alleviate some of the problems highlighted in indicators 4 and 5 above. Continuing system and procedural training will help to improve these areas and next year's data will substantiate this.



INDICATOR 7 – Satisfaction About The Way Complaints Have Been Handled

Within the Corporate Complaint Handling Procedure (CHP), Midlothian Council has identified the area of satisfaction as one that requires development work. This is due to poor uptake in responding to the questionnaires. The work to review this will also incorporate the Social Work CHP. Within the Local Authority Complaint Handlers Network (LACHN) group, there is a generic questionnaire being developed, and it is anticipated that when the new format is available, Midlothian Council will use this in addition to reviewing the methodology in which they are distributed.

It is expected that this will allow for satisfaction data to be better collated and reported.

Social Work Service Compliments 2017/18

“

We are pleased with the way my grandmother has been moved to the care home of our choice. It was done swiftly and we have found <staff member> to be very helpful, friendly and caring. We wish to thank her and let you know <grandmother> is extremely happy and well cared for, which is a great relief to us all. Kind regards and many thanks.”

“

Today I had <staff member> out to fix my mattress elevator and add a grab rail to it. He is always very polite. He also very nicely made my bed back up and I'm sure he has flipped my mattress for me to save me from doing it. I didn't ask for this but I'm so grateful as it's saved me a massive job. Please can you thank him for me and make sure he knows you know he is one in a million. He's amazing and deserves to be noticed.”

“

Would like to thank <staff member> for the way she helps her get through difficult situations...”

INDICATOR 8

Learning, Changes and Improvements made to Service Areas as a Result of Complaints

Case Study 1

Children's Services

The very sensitive nature of the service, and the challenging discussions that take place between the staff and service users generally occurs during times when there is enormous stress, upset and extreme pressure. A number of complaints that followed these conversations related to the verbally agreed actions that were taken afterwards. It was clear that there had been misunderstandings and/or misinterpretations about processes to follow the conversations, and this happened on more than one occasion i.e. with different cases. It was difficult for the investigator to define whether it was Social Workers not being clear enough in their approach, or indeed if it was due to the service user not processing the information in the usual way due to heightened emotions. It was determined that it was very likely both scenarios.

Improvement Action

In every case, Social Workers are now tasked with providing service users with a written 'Working Agreement', following conversations. This document is a record of the discussion that took place, which highlights the agreed actions. Not only does this provide an auditable record

that includes projected dates, but it also lets service users absorb the information and either ask questions, clarify points, or indeed query anything that they feel does not reflect their understanding. This takes place before the actions are implemented, and has improved communication between users and staff as well as enable further support during the necessary adjustments.

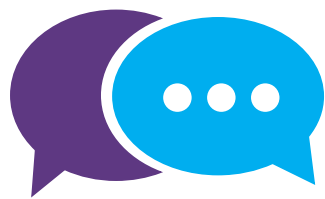
Case Study 2

Children's Services

Social work staff were providing work mobile numbers to families for continuity purposes and to ensure that they could be contacted directly to quickly answer queries. Although intentions were well meant, there were complaints from families who could not get in touch during the weekend, when mobile phones were switched off.

Improvement Action

Staff now provide the Emergency Social Work Services (ESWS) number, as well as the social work landline number, which has an answering service that provides details of the ESWS when the office is closed.



Case Study 3

Children's Services

There have been a number of complaints about Social Workers not returning calls to service users. The issue being that service users were being informed that the message was passed onto the worker and they would be back in touch within a certain timescale. On occasion the worker did not return the call within the specified time for various reasons; not appropriate, out and about so didn't get message, on leave or off sick. This then lead to another call from the service user complaining that no one had been in touch. In order to resolve this issue we arranged for a meeting to agree what would a service user be advised when calling into speak to their worker and what was a realistic timescale in relation to a follow up call and who else should be contacted if worker not around (eg Team Leader).

Improvement Action

There are ongoing meetings between children's services staff and the contact centre staff to enhance our working relationship and to ensure a smooth transition of calls and messages from service users to the allocated worker. There are also regular senior manager meetings to look at how we can continue to improve communication and practice.

Case Study 4

Criminal Justice

An incident occurred where a service user, who was subject to a Community Payback Order and was undertaking unpaid work hours within the community made a rude, dismissive remark to a member of the public who had asked a question. The service user was accompanied by a member of Midlothian Council staff, who was not directly present during the incident. The member of the public mistakenly thought that the service user was council staff and rightly complained.

Improvement Action

Although it was concluded that it was not a member of staff who was rude, the Criminal Justice service

have used the incident as an example during training programmes for staff who have supervisory and mentoring responsibilities. Demonstrating good practice through mentoring will help to ensure service users treat members of the public with respect whilst carrying out unpaid work.

Case Study 5

Adult Social Care

There were recurrent complaints about one of Midlothian Council's care providers. Various improvement attempts were made, but unfortunately development objectives were not met.

Improvement Action

The contract between the council and the care provider was eventually removed. The SW Complaints Handling Procedure provided robust supporting evidence in the decision making process in dealing with this case. Quantitative data could be used to support the outcome analysis.

Case Study 6

Adult Social Care

Following an assessment, and establishing the requirements for 'Care at Home' packages, there have been a number of complaints about unreasonable wait times to implement the necessary care. This is a capacity issue whereby care providers have not been able to meet the demands of the service.

Improvement Action

Issues of capacity within care at home is not purely a Midlothian Issue; however Midlothian Council's Care at Home service is undergoing a fundamental redesign whereby there is a review of service providers in progress, and a project is in progress to promote the care profession, targeting groups such as returners to work and men. There is also an 'E-Frailty' project underway that will direct better primary care pathways for

older people by considering individual frailty rather than chronological age. Working collaboratively with GPs and Health is facilitating the identification of the most vulnerable patients for targeted care. This will assist in the reduction of unplanned hospitalisations and ensures that those who may benefit most are identified for integrated services.

Case Study 7

Adult Social Care

There have been a small number of complaints and issues about use of equipment, recommended by an OT within the home environment. Often these pieces of equipment are critical for the safe handling of service users and the reluctance of the partner to allow the equipment within the home has resulted in Adult

Support and Protection proceedings. There has been some objections to the insistence of the use of equipment. This in turn has resulted in complaints about staff attitude.

Improvement Action

Some work is now being carried out about the best way to provide more emotional support to partners who have been dealing with/doing things a certain way for long periods. Sessions have taken place that recognise the impact of feeling less in control and/or dealing with significant changes within the home, and the consideration that is needed when alterations to the home are underway. This is a small but important factor that counts towards the continual improvement of the service. Number of complaints is being used as one of the impact outcomes that will count towards the measure of success.

DEVELOPMENT

- **Recording the Complaint Data**

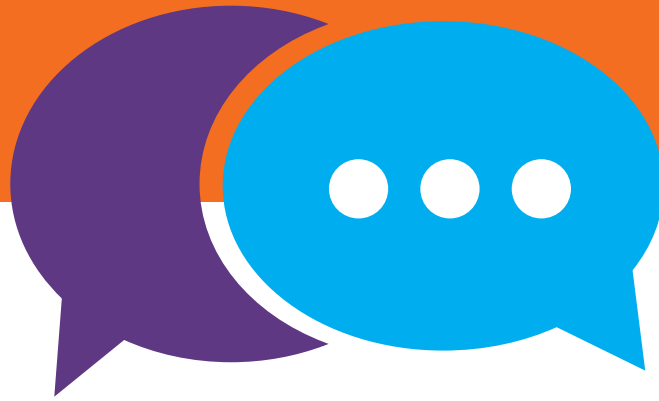
There are challenges in ensuring that all complaints data is captured. Training about the new SW Complaint Handling Procedure is ongoing. There is also continuing system development as the procedure evolves, however development on the current Customer Relationship Management (CRM) system is limited since there is a new CRM in the pipeline. Procuring the new CRM is a lengthy process but when it is installed, full scale training will take place that will refresh learning about complaints.

- **Using Complaints Data to Improve**

Self-evaluation using the social work complaints data is being developed, and the data is being further considered in impact assessments during service/process reviews (i.e. how many complaints before/after any changes that have taken place), and as a quantitative measure of success in outcome reviews.

- **Development of the Quarterly and End of Year Report**

Since this is the first Annual Social Work Complaint Report there is little comparative data. Future reports will illustrate year on year comparisons that will highlight areas that have improved or that require more work, as well as sector norms and benchmarking information.



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Contact 0131 270 7500 or email: enquiries@midlothian.gov.uk



Inspection of Support service in Cherry Road Resource Centre**Report by Alison White, Head of Adult Health and Social Care****1 Purpose of Report**

The report outlines the outcome of the inspection carried out by the Care Inspectorate at the Council's resource centre for individuals with learning disabilities.

2 Background

Cherry Road Resource Centre is a support service for individuals with learning disabilities. It was established for individuals with complex learning and physical disabilities to provide an environment where each individual can develop a programme that is enjoyable, positive and meaningful for them.

2.1 Support services in Cherry Road Resource Centre were inspected over three days and the inspection was completed on 1st August 2018. A copy of the report is attached as an appendix to this report

2.2 Following inspection, Noted below are the evaluations for Support services in Cherry Road Resource Centre:

Quality of Care and Support	6 – Excellent
Quality of Environment	Not assessed
Quality of Staffing	Not assessed
Quality of Management and Leadership	5 – Very Good

The previous inspection grades (16th July 2015) were; Care and support 4 – Good; Environment 4 – Good; Staffing 5 - Very good; Management and leadership 5 - Very good.

2.3 The report noted the following:

- People using the service were extremely pleased with the support they received
- Staff supported people well to maximise their enjoyment and fulfilment with utilising the service
- Excellent outcomes were being achieved
- Staff were very aware of peoples' needs and planned support

There were no recommendations from the Care Inspectorate, however the report identified two areas where the service could do better; recording of staff supervision and management oversight and communication within one of the groups run by the service. Action have been taken to address these areas.

2.4 Conclusion

The Care Inspectorate was satisfied with the work of the team and the support service at this early stage of implementation.

3 Report Implications

3.1 Resource

There are no financial and human resource implications associated with this report.

3.2 Risk

The Care Inspectorate visit a sample of registered services every year to find out how they are performing. A report is published which informs users and carers about the key strengths of the service, its capacity for further improvement and sets out the main points for action.

3.3 Single Midlothian Plan and Business Transformation

Themes addressed in this report:

- Community Safety
- X Adult health, care and housing
- Getting it right for every Midlothian child
- Improving opportunities in Midlothian
- Sustainable growth
- Business transformation and Best Value None of the above

3.4 Impact on Performance and Outcomes

The Cherry Road Resource Centre is service that meets a range of health and wellbeing outcomes for the individuals attending the service.

3.5 Adopting a Preventative Approach

The Cherry Road Resource Centre is service that prevents social isolation for those that use the service and can be a key element in sustaining overall support package for individuals, for example by alleviating carer stress.

3.6 Involving Communities and Other Stakeholders

Copies of the report will be made available to Elected Members, users, carers and other interested parties.

3.7 Ensuring Equalities

The provision of the Cherry Road Resource Centre support service is a measure taken by the Local Authority to address the inequalities faced by individuals with learning disabilities.

3.8 Supporting Sustainable Development

There are no sustainable development implications

3.9 IT Issues

There are no IT implications.

4 Recommendations

Cabinet is asked to note the content and recommendation in the inspection report.

Report Contact: Alison White, Head of Adult Social Care

Tel No: 0131 271 3402

E-mail: alison.white@midlothian.gov.uk

Background Papers:

Cherry Road Resource Centre Support Service

8 Cherry Road
Bonnyrigg
EH19 3ED

Telephone: 0131 561 5402

Type of inspection:

Unannounced

Completed on:

1 August 2018

Service provided by:

Midlothian Council

Service provider number:

SP2003002602

Service no:

CS2003017838

About the service

Cherry Road Resource Centre is run by Midlothian Council and is a purpose built centre which is accessible for people with physical disabilities.

Cherry Road is a resource centre for adults with learning disabilities to access service and facilities, whether within or out with the centre. It is situated within a housing estate in Bonnyrigg close to all local amenities and public transport links.

The use of the building has changed in the last few years and it is now a base for people with more profound disabilities physical & learning disabilities ; an older persons group (The Golden Group) and a growing number of young people needing additional support.

The frequency of our inspections

Support services now receive a Care Inspectorate visit once every three years if they have high grades from their last inspection and are deemed to be low risk. Cherry Road falls into this category.

What people told us

We assessed the responses we received from our pre-inspection questionnaires from people and the support staff. The feedback we received was very positive and many praised the work of the service and the compassion shown by the support staff to meet the care and support needs of people.

We spent time with most of the people using the centre over the course of the three-day inspection. Several people were able to verbally express their views while others through gestures and observing positive interactions with each other and their support staff.

People were seen to be happily engaging in a variety of activities both within the centre.

We spoke with some parents and carers either in person or via undertaking telephone interviews. Again people praised the work of the service and its key strengths which included joint working with other support agencies.

Self assessment

We are not asking services to submit a self-assessment for this inspection year. Instead, we will ask services for their improvement or development plan and discuss any improvements they may have made or intend to make since the last inspection.

From this inspection we graded this service as:

Quality of care and support	6 - Excellent
Quality of environment	not assessed
Quality of staffing	not assessed
Quality of management and leadership	5 - Very Good

What the service does well

The Cherry Road Resource Centre performs to a high standard, meeting the care and support needs of those using the service in a very person-centred approach. This was clearly evidenced through our observation of practice, the documentation we sampled and the feedback we received from supported people and their relatives / carers. We found that the service provided excellent care and support.

People using the service were extremely pleased with the support they received. They looked well and appeared happy.

Staff supported people well to maximise their enjoyment and fulfilment with utilising the service. People benefited from a motivated and committed group of staff, striving to ensure everyone had a positive experience with using the service.

Excellent outcomes were being achieved for several reasons:

- Increase in confidence and participating in group activities.
- Support with literacy and numeracy which lead to one person establishing a penpal relationship abroad.
- The input from various external support services.
- People being involved in the recruitment of the staff, independently facilitated.
- Joint working with outside support agencies.
- Undertaking research projects with universities to support the development of outcomes for people.
- Very positive working relationships with health professionals (occupational therapist, physio, speech and language).

Staff were very aware of peoples' needs and planned support. They had protected time to be familiar and discuss any updates to peoples support plans and risk assessments. We attended a meeting where a health professional gave very detailed information relating to peoples eating and drinking guidelines.

Since our last inspection, the service has undergone a staffing restructure which has provided an enhanced management oversight within the centre, observation of practice and the completion of relevant document which was to a high standard.

Despite already achieving a high standard of care and support the manager was keen to identify ideas for creating further improvement. An improvement action plan was in place and was based around the new Health and Social Care Standards.

What the service could do better

Whilst many staff told us that they felt supported by their manager, this was not always recorded in the form of formal support and supervision meetings. Through our discussions with the manager this was acknowledged and were advised that this would be addressed.

We also identified there was a need to improve management oversight and communication amongst staff within the Golden Group element of the service (separately run from the centre but part of the registered service). Staff agenda meetings were not being held regularly and therefore staff had reduced opportunities to be consulted with and hold practice discussions.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Inspection and grading history

Date	Type	Gradings
16 Jul 2015	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 5 - Very good Management and leadership 5 - Very good
22 Aug 2012	Unannounced	Care and support 4 - Good Environment 5 - Very good Staffing 4 - Good Management and leadership 4 - Good
3 Aug 2011	Unannounced	Care and support 3 - Adequate Environment 4 - Good Staffing Not assessed Management and leadership Not assessed
3 Sep 2010	Announced	Care and support 4 - Good Environment 3 - Adequate Staffing Not assessed Management and leadership Not assessed
12 Oct 2009	Announced	Care and support 3 - Adequate Environment 3 - Adequate Staffing 4 - Good Management and leadership 4 - Good
4 Dec 2008	Announced	Care and support 4 - Good

Date	Type	Gradings	
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	4 - Good

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Inspection of Midlothian Council Health & Social Care SVQ Assessment Centre

Report by Alison White, Head of Adult Services

1 Purpose of Report

This report provides information about the Scottish Qualifications Authority (SQA) Inspections of Midlothian Council's Approved Health & Social Care SVQ Assessment Centre in 2018

2 Background

- 2.1 The Health & Social Care SVQ Assessment Centre was Approved by SQA in January 2017. From 2004-2014 there was a Joint SVQ Assessment Centre with Scottish Borders Council (who made alternative arrangements in 2014). From 2014-2017 Midlothian Council SVQ Assessment Team had a partnership arrangement with VQ Insight for the registration of candidates while preparing all the documentation for approval as a Centre. Since January 2017 a SVQ Management Board has governance of the Centre with representation from Managers in Health & Social Care, Children & Families, Education, Community Justice and Business Support Services.
- 2.2 The Health & Social Care SVQ Assessment Centre has responsibility to ensure it provides SVQs to the workforce required by the Scottish Social Services Council (SSSC) to be registered. This covers Adult & Social Care (350), Children & Families (85) and parts of Early Years Education (currently 140) with annual changes in workforce. These services are inspected by the Care Inspector and the qualifications/training of staff form part of these inspections.
- 2.2 During the first 12-18 months of a SQA Approved SVQ Assessment Centre there are inspections of all the qualification Programmes for which the SVQ Assessment Centre is approved to deliver, plus an inspection of all the Centre's systems
- 2.3 The SQA inspections are known as External Verification visits. In addition to inspecting all teaching and assessment materials the Inspector views all the SVQ Assessors Continuous Professional Development files to ensure that they are up-dating their own knowledge. The Centre is required also to arrange for the Inspector to interview Programme candidates and SVQ Assessors – these are selected randomly by the Inspector. The Centre is usually provided with 6 weeks' notice of Inspection visits.

- 2.4 The SQA Inspections report on: Resources; Candidate Support and Internal Assessment & Verification. Each of the 3 areas have between 2 and 6 sub-categories of compliance criteria to be met. The Inspector reports on compliance using a green, amber or red system of rating outcomes.
- 2.5 The Health & Social Care SVQ Assessment Centre delivers SVQ qualifications Programmes for staff members requiring SSSC registration in Health & Social Care, Children & Families and Education within Midlothian Council.
- 2.6 The SVQ Assessment Centre also delivering the Core Skills required by candidates registered for Modern Apprenticeships within Health & Social Care, Children & Families and Education. Additionally, the SVQ Assessment Centre is in partnership with NHS Lothian to deliver SVQs for young Modern Apprenticeships as part of the developing the Young Workforce.

3 SQA Inspections – External Verification visits January-June 2018

The Health & Social Care SVQ Assessment Centre has been inspected on two occasions in March and June 2018.

Firstly, on March 22nd 2018 all SVQ Programmes relating to care work for Adult & Social Care Services were inspected. These were:

- SVQ Social Services & Healthcare SCQF Level 6
- SVQ Social Services & Healthcare SCQF Level 7
- SVQ Social Services & Healthcare SCQF Level 9/10

Secondly, on June 19th all SVQ Programmes relating to care work for Children & Families Services were inspected. These were:

- SVQ Social Services Children & Young People SCQF Level 6
- SVQ Social Services Children & Young People SCQF Level 7
- SVQ Social Services Children & Young People SCQF Level 9/10

For both Inspection visits the SVQ Assessment Centre received ALL GREEN for all compliance criteria for all areas in each of the qualifications delivered.

3 Report Implications

The SQA Inspections confirm, with confidence, the high standards being achieved by the SVQ Assessment Centre in the delivery of care qualifications to Midlothian Council staff members. The Inspectors who undertook the SQA EV visits both commented positively on the reports from candidates (staff members undertaking qualifications) made about the support they received from their SVQ Assessors.

4.1 Resource

The SVQ Assessment Centre is managed through the Practice Learning & Development Team within Health & Social Care. The Staffing is: 1 SVQ Coordinator and 4 SVQ Assessors. Administrative support is provided through Business Support Services

4.2 Risk

During the first 18 months of the Health & Social Care SVQ Assessment Centre – as part of the Practice Learning & Development team – the Centre has managed to be effective with positive support from Business Support Services (BSS) While there have been challenges working with the centralised BSS compared to a dedicated resource these have been managed.

The success of the first 18 months of operation have presented new demands and opportunities through partnerships in relation to Modern Apprenticeship (MAs - NHS Lothian) and Early Years, Education MAs too. These new opportunities and demands present challenges in terms of support capacity, and therefore risks

The management of the risks is being addressed by:

- Evaluation options
- Financial planning

Consultation

Copies of the Inspection reports have been made available to all members of the SVQ Management Board

Equalities

There are no apparent equalities issues.

Sustainability

The Scottish Social Services Council (SSSC) require most of the Health and Social Care workforce to be registered. In order to be registered staff members require specific qualifications – usually Scottish Vocational Qualifications – for their posts. As the SSSC increase the requirements for registration to more staff groups there is increased demand on the SVQ Assessment Centre to deliver qualifications. The requirement for Modern Apprenticeships to complete SVQs is a further demand on the Health & Social Care SVQ Assessment Centre. See 4.2 re: management of risk

5 Technology issues

There are no Technology issues arising from this report.

6 Recommendations

The Cabinet is asked to:

- Recognise the positive SQA Inspection reports on the work achieved by the Health & Social Care SVQ Assessment Centre in delivering high quality qualifications to Midlothian Council staff
- Recognise the hard work of the Health & Social Care SVQ Assessment Centre, in particular Carol McKay, SVQ Coordinator

September 3rd 2018

Report Contact: Marianne Hughes
Marianne.Hughes@midlothian.gov.uk

Inspection of Midlothian Residential Service for Young People Report

Report by Joan Tranent, Head of Children's Services

1 Purpose of Report

This report outlines the outcome of the above unannounced inspection as carried out by the Care Inspectorate in July 2018.

2 Background

2.1 Midlothian Residential Services consists of two purpose built houses in Penicuik and Dalkeith with a third traditional house in Gorebridge. The houses in Penicuik and Dalkeith have five en-suite bedrooms and are registered to provide care to a maximum of ten young people both male and female aged 10 years to 21 years. At the time of the Inspection there was a time limited variation in place to provide care to one additional young person with severe and complex needs within the house at Gorebridge.

2.2 The Care Inspectorate is the independent scrutiny and improvement body for care services in Scotland. They inspect all registered care services and local authority social work departments on a regular basis to ensure that providers are meeting standards required and are working to improve the quality of care for everyone. Every time they inspect these services they produce an inspection report.

2.3 Based on the findings of this Inspection the Care Inspectorate awarded the following grades:

Quality of care and support	Grade 4	Good
Quality of Management and Leadership	Grade 4	Good
Quality of Environment	Not Assessed	
Quality of Staffing	Not Assessed	

The Inspectors reported that the service's performance across both themes (care and support and management and leadership) was good and demonstrated important strengths.

2.4 The Inspection Team noted the following strengths:

- The service has continued to develop and improve since the last inspection. The Inspectors felt that the team was working more cohesively and that good leadership was supporting the improvement journey.
- Care plans showed good understanding of the current needs of young people and the measures required to promote progress. Plans were written sensitively and conveyed positive regard for the young people. Young people's interests and choices were evident within plans and were used to motivate and encourage. Outcome focused assessment planning was used positively to encourage progression.
- Risk assessments were in place and reviewed regularly. Staff supervision was occurring regularly and records showed positive access to training opportunities.

- There was a clear service development plan in place. The plan was actively reviewed during team meetings, enabling staff to have a good understanding of progress achieved to date and further actions required to support improvement.
- Placing social workers commented favourably about the close working relationships they had with the service and described some of the positive outcomes that had been achieved by and for the young people.

2.5 The Inspection Team reported that the authority could do better in the following areas:

- The service has experienced some staffing fluctuation over the past year especially at senior level, and whilst necessary, the Inspector felt that there could have been more planning and support to young people to prepare for and understand transitions to promote their sense of safety and security.
- The number of locum staff used since the last inspection had increased which has placed additional pressure on core staff in managing the needs of complex young people.
- There is a need to further promote an anti-bullying ethos as there were some incidences of young people being bullied by their peers. Whilst staff are aware of these issues and have tried to support young people, there was a recommendation that more could be done.
- Practice arrangements for medication storage, administration and recording needs to improve and follow procedures and current guidance.
- Notification of incidents to the Care Inspectorate was another area that requires further training and development. Progress in this area shall be considered at our next inspection.

3 Report Implications

The Care inspectorate identified one requirement and two recommendations:

- Requirement:

In order to ensure that medication storage, administration and recording systems are well-managed, the provider must review medication practice to ensure it is compliant with the service's own medication procedure by 30th September 2018.

- Recommendations:

Ensure locum staff have access to relevant information regarding young people's care and safety needs and that we provide regular supervision arrangements.

Enhance safety, security and wellbeing of all young people, an anti-bullying ethos should be further promoted.

3.1 Resource

There are no resource issues arising from this report.

3.2 Risk

The Care Inspectorate regulate all care services in Scotland using the [National Care Standards](#), set out by the Scottish Government, as a benchmark for how each type of service should perform. These standards are the minimum that children and young people should expect when using care services.

If the standards are not being fully met, the Care Inspectorate would note this in the inspection report and require the service manager to address these. The Care Inspectorate could impose an additional condition on the service's registration if the provider persistently, substantially or seriously fails to meet the standards or breaches a regulation. They also have the power to issue an improvement notice detailing the required improvement to be made and the timescale for this.

Monitoring, review and evaluation of progress by officers in Children's Services is the control measure in place to reduce the risk of failure of the care services and to demonstrate their capacity to improve.

3.3 Single Midlothian Plan and Business Transformation

Themes addressed in this report:

- ☐ Community safety
- ☐ Adult health, care and housing
- ☒ Getting it right for every Midlothian child
- ☐ Improving opportunities in Midlothian
- ☐ Sustainable growth
- ☐ Business transformation and Best Value
- ☐ None of the above

3.4 Impact on Performance and Outcomes

Performance and outcomes will continue to be measured through the quarterly reporting, review and evaluation process.

3.5 Adopting a Preventative Approach

The Service will continue to improve its work in line with its improvement plan. The Education, Communities and Economy Directorate will continue to challenge and support the Service in relation to developing and implementing a range of quality improvement strategies.

3.6 Involving Communities and Other Stakeholders

As part of their inspection process the Care Inspectorate spoke with 4 young people during the inspection and informally chatted with other young people during meal times and whilst receiving a tour of each house.

Prior to the inspection taking place, Inspectors received 3 completed Care Standard questionnaires. Two young people reported they were happy with the quality of care received, whilst one young person strongly disagreed.

Copies of the report have been made available to Elected Members, staff and other interested parties.

3.7 Ensuring Equalities

An action Plan has been prepared to address the areas for improvement recommended in the report. The action plan will be screened for equalities implications.

3.8 Supporting Sustainable Development

The Service Improvement Plan allows for sustainable development and improvement.

3.9 IT Issues

There are no IT issues.

4. Summary

Midlothian Residential Services continues to develop new and creative ways to ensure that our young people have a safe and positive experience whilst living in our houses. Whilst overall the Inspection was positive there remains areas for improvement which we shall address via an action plan. The plan shall be shared with all workers and reviewed regularly by senior managers to ensure we are meeting the identified outcomes.

5 Recommendations

Cabinet are requested to:

- Note the content of the Inspection report.
- Pass the report to the Performance, Review and Scrutiny Committee for consideration.
- Pass the report to November Council for noting purposes.
- Acknowledge the continued improvement since the last Inspection and the positive and ongoing work by management and staff connected with the Midlothian Residential Services for Young People.

Date: 2nd October 2018

Report Contact:

Joan Tranent Tel No 271 3721
joan.tranent@midlothian.gov.uk

Background Papers:

Appendix 1 Care Service Inspection Report, dated 19th July 2018

Appendix 2 Actions undertaken

Midlothian Residential Service for Young People

Care Home Service

23 Ladybrae
Gorebridge
EH23 4HT

Telephone: 0131 270 7500

Type of inspection:

Unannounced

Completed on:

19 July 2018

Service provided by:

Midlothian Council

Service provider number:

SP2003002602

Service no:

CS2003011085

About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com

This service was registered with the Care Inspectorate on 01 April 2011.

Midlothian Residential Services consist of two purpose-built houses in Penicuik and Dalkeith, with a third, traditional house, in Gorebridge.

The service is provided by Midlothian Council and is registered to provide a care service to a maximum of ten young people, both male and female, aged 10 years to 21 years across the two purpose-built houses. At the time of inspection, a time limited variation was in place to provide care to one additional young person within the house at Gorebridge.

What people told us

We received three completed Care Standards Questionnaires from young people prior to the inspection. Two young people agreed that they were happy with the quality of care received at Midlothian Residential Services, one young person strongly disagreed.

During the inspection, we spoke with four young people individually and informally chatted with other young people during meal times and whilst receiving a tour of each house. We heard some mixed views about experiences and highlighted some issues to managers during feedback for further reflection.

Comments gathered from young people included:

"For me I would rather be in a different placement because I sometimes get bullied when I'm out (in the community)".

"Some staff are good, good staff don't cross the line with you".

"The mix of other young people is good, I get on with most of them".

"I like my bedroom, I like my own space".

"I don't like it when young people get moved on, they don't really keep in touch".

"I love football, it's great that we have our own team".

"My keyworker is really good, they know me really well. My birthday is coming up and my keyworker will get me surprise presents, but they'll be good surprises, because they know what I like, they know me".

"It would be better if staff knew me better and knew when to step in and support me without me having to ask for help. I get bullied by another young person".

"I'm involved in the Champions Board".

"We're not told when a new young person is coming in, I think we should at least get told their name and whether it's a boy or a girl".

"We can decorate our rooms, we mainly go to IKEA and choose what we want from there".

"Some meals are better than others. We don't really get a choice about food, the shopping just gets ordered and arrives. It would be good to be more involved in shopping and plan our meals, rather than just get told what the menu is after food has arrived".

During the inspection we heard that consultation with young people happens weekly regarding meal choices and food shopping, with a focus on healthy eating. The service should continue to explore ways of promoting participation to ensure all young people feel included and able to contribute to menu planning.

Self assessment

We did not ask the manager to submit a self assessment this year. Instead we looked at the service development plan for evidence of self-evaluation and improvement planning.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	not assessed
Quality of staffing	not assessed
Quality of management and leadership	4 - Good

What the service does well

The service's performance across both themes (care and support and management and leadership) was good and demonstrated important strengths.

The service had continued to develop and improve since the last inspection. We felt that the team was working more cohesively and that good leadership was supporting the improvement journey.

Care plans showed good understanding of the current needs of young people and the measures required to promote progress. Plans were written sensitively and conveyed positive regard for the young person. Young people's interests and choices were evident within plans and were used to motivate and encourage. Where external supports had been identified, the service was proactive in pursuing access for young people which meant they benefited from timely intervention, for example to address mental health concerns. Outcomes focused assessment planning was used positively to encourage progression.

We saw some very positive interactions between staff and young people and heard how relationships had promoted increased confidence and feelings of safety for some young people. The majority of young people were accessing education or work experience opportunities.

Risk assessments were in place and reviewed regularly. Specific young people had more extensive risk assessments in place developed through multi-agency routes to address harmful behaviours. Some risk assessments could be developed further to identify if risks are historical and give insight to frequency of known behaviours to ensure risk reduction measures are appropriate and proportionate.

Young people benefited from the integrated IT system used by the provider which promoted an effective flow of communication between the service and relevant professionals. This meant that information could be shared quickly, particularly during times of concern about behaviours, risk or other vulnerabilities. Use of the MoMo (Mind Of My Own) system helped promote the gathering of young people's views in relation to care planning, meetings and reviews.

We spoke to a number of placing social workers during the inspection who commented favourably about the close working relationship they had with the service and described some of the positive outcomes that had been achieved by and for young people. These included reduction of absconding and increased participation in education as well as nurture of confidence and creativity. Consistency of staff approach, robust care planning and clear boundaries and expectations of young people within each house were cited as factors which helped promote these outcomes. We heard some comments about inconsistency of practice if a young person moved from one house to another within the service and have asked the service to consider ways to ensure continuity of care and support.

Staff supervision was occurring regularly within the records we sampled. We saw some examples of good support and development planning where staff had additional health and wellbeing considerations. This enabled managers to consider the rota and make changes where necessary to ensure the needs of young people and staff could be managed. Team meetings and senior team meetings were scheduled frequently.

Records showed positive access to training opportunities. Staff told us how specific training courses had informed their practice and enabled them to feel more confident in understanding and supporting behaviours arising through trauma and in identifying and reducing young people's risk from sexual exploitation. Staff spoken with showed good understanding of child protection procedures and appeared confident in knowing how to record and report any concerns.

A clear service development plan was in place which had been a focus of a recent development day. The plan was actively reviewed during team meetings, enabling staff to have good understanding of progress achieved to date and further actions required to support improvement.

What the service could do better

The service had experienced some staffing fluctuation in the last year, including at senior level. We could see where changes across teams had been necessary, or inevitable, but felt that there could have been more planning and support to young people to prepare for and understand transitions to promote their sense of safety and security.

The number of locum staff used since the previous inspection had increased and we heard how this had, at times, placed additional pressure on core staff in managing the needs of complex young people. We spoke with managers during feedback about this and have asked the provider to consider ways to reduce this pressure. We have made a recommendation regarding the supervision needs of locum staff on shift and access arrangements for information relevant to the care and safety needs of young people. (See recommendation 1)

During the inspection, we heard about some incidences of bullying of young people by peers, within the service and outwith. Although staff have been aware of some issues and have tried to support young people to feel included and safe, we felt that an anti-bullying ethos should be further promoted. We have made a recommendation about this. (See recommendation 2)

We felt that staff supervision could be developed further to promote greater discussion and reflection regarding practice. The quality of recording could also be improved to ensure appropriate actions are identified and progressed. Some staff felt that sufficient debriefs did not always take place following incidents and we could see some examples where more reflective discussion could have taken place to support staff during these times.

Practice arrangements for medication storage, administration and recording did not always follow procedures set out by the provider or were in line with current guidance. It is essential that medication fridges are free from general food items, are temperature controlled and are checked regularly to ensure medication remains safe to administer. We found some inaccuracies in recording and potential duplication of administration. We have made a requirement regarding medication procedures and practice. (See requirement 1)

Prior to inspection, we spoke with the provider regarding the broad range of incidents that require to be notified to the Care Inspectorate as per the document 'Records that all registered care services (except childminding) must keep and guidance on notification reporting'. We spent time during the inspection looking at accident and incident reports and discussed these with managers to ensure they are fully aware of their responsibilities in submitting relevant notifications in a timely manner. We will consider progress in this area at next inspection.

Requirements

Number of requirements: 1

1. In order to ensure that medication storage, administration and recording systems are well-managed, the provider must review medication practice to ensure it is compliant with the service's own medication procedure by 30 September 2018.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state:

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24)

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11)

And, in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4 - Welfare of users.

Recommendations

Number of recommendations: 2

1. To promote planned and informed care of children and young people, locum staff should have access to relevant information regarding young people's care and safety needs and the provider should review the supervision arrangements for supporting and developing locum staff practice.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state:

'I experience stability in my care and support from people who know my needs, choices and wishes, even if there are changes in the service or organisation' (HSCS 4.15)

'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27)

'I have confidence in people because they are trained, competent and skilled, and are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

2. To enhance the safety, security and wellbeing of all young people, an anti-bullying ethos should be further promoted.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state:

'I am accepted and valued whatever my needs, ability, gender, age, faith, mental health status, race, background or sexual orientation' (HSCS 1.1)

'My human rights are protected and promoted and I experience no discrimination' (HSCS 1.2).

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com

Inspection and grading history

Date	Type	Gradings
1 Sep 2017	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership Not assessed
28 Oct 2016	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership 5 - Very good
23 Nov 2015	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 5 - Very good
28 Oct 2014	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 4 - Good
7 Mar 2014	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 3 - Adequate
23 Sep 2013	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 3 - Adequate
26 Feb 2013	Unannounced	Care and support 3 - Adequate Environment 3 - Adequate Staffing 4 - Good

Date	Type	Gradings	
		Management and leadership	3 - Adequate
17 Aug 2012	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	2 - Weak
12 Jan 2012	Unannounced	Care and support	5 - Very good
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	4 - Good
21 Mar 2012	Re-grade	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	3 - Adequate
5 Mar 2012	Re-grade	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	1 - Unsatisfactory
7 Jun 2011	Unannounced	Care and support	5 - Very good
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	4 - Good
21 Dec 2010	Unannounced	Care and support	5 - Very good
		Environment	2 - Weak
		Staffing	Not assessed
		Management and leadership	Not assessed
18 May 2010	Announced	Care and support	5 - Very good
		Environment	4 - Good
		Staffing	Not assessed
		Management and leadership	Not assessed
10 Feb 2010	Unannounced	Care and support	5 - Very good
		Environment	4 - Good
		Staffing	Not assessed

Date	Type	Gradings	
		Management and leadership	Not assessed
16 Sep 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
31 Mar 2009	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
11 Feb 2009	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 2 - Weak 2 - Weak

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Inspection of Midlothian Residential Service for Young People Report

Report by Joan Tranent, Head of Children's Services

Appendix 2: Actions Undertaken

3 Report Implications

The Care inspectorate identified one requirement and two recommendations:

Requirement

In order to ensure that medication storage, administration and recording systems are well-managed, the provider must review medication practice to ensure it is compliant with the service's own medication procedure by 30th September 2018.

- We are currently fully reviewing our medication policy.
- Storage has been reviewed in consultation with the Diabetic Nurse Team and appropriate storage is now in place.
- New recording system devised in consultation with the Diabetic Nurse team in place and all staff trained. Senior staff auditing at regularly.
- We have had several team training sessions and weekly drop in's from the Diabetic Nurse team.

Recommendations

Ensure locum staff have access to relevant information regarding young people's care and safety needs and that we provide regular supervision arrangements.

- Essential information and what you need to know about me is now stored for each of the YP in the office.
- Regular Locums' are receiving supervision from the seniors and have access to our systems. Less regular locum's receive a full change over, access to the office paper files and a buddying system on shift.

Enhance safety, security and wellbeing of all young people, an anti-bullying ethos should be further promoted.

- We have an anti-bullying strategy which we are currently reviewing.
- Gillian Allan is looking at what education has in place and we will compare.
- I plan to make this a theme of our next full staff development day which I planning for November 2018, to generate ideas from staff.

