



Chief Social Work Officer

Annual Report

2011/12

James Robb
Chief Social Work Officer

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Introduction

Welcome to the annual Chief Social Work Officer report (CSWO) for the year 2011/12. The report is designed to give an overview of social work activity undertaken by the authority including the statutory, governance and leadership functions of the role of the CSWO.

The report is a complementary process to the range of business and service planning being undertaken in specific service areas whose reports are published earlier in the year.

This is a time of considerable change across all council services including social work. There are significant budget challenges to be met and services will continue to have to reshape and modernise as they strive to meet the expectations of service users at a time of restricted budgets. This will inevitably involve change at all levels within the social work service and service leaders know the importance of fully involving and engaging our staff in these processes if we are to achieve the positive outcomes we require.

As part of this reshaping and modernisation both children and families and adult care services have continued to implement the decisions of the service reviews and continue to respond to the expectations around new models of care and prepare for forthcoming legislation such the Integration of Health and Social Care, Self Directed Support and the implementation of a new Children's (Scotland) Act

To assist in these processes the social work service has recognised the fundamental importance of ensuring a continued strong connection and consistency of approach between strategic developments and front line operational requirements. Communication is a key element of this and there is now a well established framework of engagement between senior managers and front line staff through team meetings, newsletters and regular visits to locality offices. This framework complements systems in place to gain the views of service users and these arrangements are extremely helpful in ensuring that the experiences of those at the front line help to inform future policy and service developments.

Since the last Care Inspectorate inspection of social work services, carried out by SWIA in 2010, the social work service have been working with the link inspector on our improvement actions which are detailed in our social work improvement plan. This plan covers the assessment and care management cycle including assessment, risk assessment and outcome focused care planning. This report is monitored by the social work management team on a regular basis and actions and improvements are noted and updated. The current social work improvement plan will be reviewed in early 2013 and will be updated in light of issues identified as a result of our on-going self-evaluation activity.

The future regime in terms of inspection is likely to include a more joined up approach to integrated services and the Care Inspectorate are currently finalising the plan for nationwide proportionate inspections of services which will commence in 2013. It is anticipated Argyll and Bute Council will expect its next inspection in terms of social work services within the next 24 months.

This annual report is structured along the lines of the main service responsibilities within sections in relation to Adult Care and Children & Families/Criminal Justice. The report however is a collaborative venture between staff in all parts of the social work service and it is seen as important that social work retains a composite professional identity if services to family members of all ages are to be delivered in a joined up manner.

James Robb

Chief Social Work Officer

Head of Service – Adult Care

Children and Families / Criminal Justice

Introduction

The management arrangements for the Children and Families/Criminal Justice service are outlined within appendix 1. This structure consists of distinct management responsibilities for key areas of the service, with third tier service managers in place for: Criminal Justice, Early Years, Children & Families Operations and Resources.

The section of the report considers the main areas of activity within each of the service areas.

Criminal Justice

These services continue to be delivered through our partnership arrangements with East and West Dunbartonshire Councils. In addition, the service is part of the North Strathclyde Community Justice Authority along with Renfrewshire, East Renfrewshire and Inverclyde.

From 1st February 2011, Criminal Justice within Scotland saw a major overhaul of sentencing and the most significant change to delivery of services to offenders in decades. Familiar community based sentences such as Probation and Community Service (and less familiar Supervised Attendance) were replaced with one generic community supervision sentence called a Community Payback Order. The new order carries a range of “requirements” including unpaid work, supervision, and treatment for addictions with a focus to reintegrate offenders back into society through reparation and rehabilitation. Supporting this change are new assessments, a new format to Court reports and a suite of new procedures and guidance. The partnership development of paraprofessional staff, supported by SVQ opportunities, has been crucial to help deliver targeted responses to a complex client group.

The preparatory work paid off in that CJ staff in Argyll and Bute have adjusted to the change with considerable success despite having to work between the new and the old systems.

2011/12 saw the first full year of the implementation of the new Criminal Justice Social Work Report and Community Payback sentencing regime. Argyll and Bute CJ services wrote 430 Court reports, resulting in:

- 31 new probation
- 41 new community service
- 15 new supervised attendance, and
- 101 new community payback orders (including an increased use of unpaid work) – **See Appendix 2 for detail.**

As the Courts become more confident and familiar with the new system we are experiencing a greater use of reparative sentencing such as community service and unpaid work. Previous timescales of a year to complete such an order have been reduced to 3 or 6 months depending on the number of hours imposed. Increased numbers and these shorter deadlines to complete unpaid work have been a challenge. Recruitment difficulties led to a reduction in work squads for a period of time and we saw an unavoidable increase in requests for extensions of time to the Court – particularly so in Dunoon and Cowal, our last area to successfully recruit an Unpaid Work officer in

recent months. In other areas, especially in the west we have seen considerable improvements in both completion of orders and positive community feedback for works undertaken.

High risk offenders continue to be managed both within the prison via Integrated Case Management, monitoring an offender's transit through prison and return to the community; and within the community via Multi Agency Public Protection Arrangements (MAPPA). These arrangements are predicated on excellent working relationships with our colleagues within the Police, SPS, Housing, Health and other social work services. Prior to March 2012, throughcare cases (long term prisoners or those to be supervised upon release) were managed through a partnership arrangement with West Dunbartonshire Council. Since March, these cases have been managed locally from within the Argyll and Bute CJ service, which should see an improved interface with local resources and services for these offenders.

Children and Families – Resources

The Children and Families Resource service has responsibility for the provision of high quality care placements for looked after children through the commissioning of placements from external providers and the use of the Council's three children's homes and its fostering and adoption service.

A key focus of this service has been to increase the range of family based care options through greater use of kinship care and fostering. Emphasis has also been given to addressing issues of delay within the care planning arrangements to ensure that children identified to be in need of a permanent placement achieve the security they need as quickly as possible.

During the past year the Independent Reviewing Unit has been strengthened to support the work of two IROs in reviewing Looked After Children's care plans. The Independent Reviewing Service aims to support social workers in drawing up child centred and outcome focused care plans whilst performing a quality assurance role for the wider service.

The service also provides essential support to young people leaving care and making the transition into independence. These responsibilities are viewed very seriously and every young person leaving care will have a "Pathways Plan" which identifies and co-ordinates how the young person needs and aspirations for the future will be best met. The work of the Through and After Care team has been acclaimed by the Scottish Through and After Care Forum as well IRISS(The Institute for Research and Innovation in Social Services).

The service also leads on the Looked After Children's Improvement Plan which this year has placed great emphasis on risk assessment, listening to and respecting children and the launch of Corporate Parenting. Following the publication of the Fatal Accident Inquiry Report in April 2012, a review has been undertaken to ensure key learning is disseminated across Argyll and Bute. A new risk assessment tool has been drawn up by practitioners from across all sectors to ensure there is a consistent and integrated approach to the assessment and management of risk. Renewed focus has been placed on listening to our looked after children and young people, an engagement event has been organised with some of our children and young people for the 23rd November 2012 to listen to their views and experience of the service. Lastly, a Corporate Parenting event called "We can and must do better" has been arranged for the 30th October 2012.

The school hostels also fall within the remit of the service which contrasts with the work undertaken in other parts of the service. It is not always appreciated that children of secondary school age who live on remote islands or in remote rural communities need accommodation close to the school during the weekdays. The hostels provide a convivial atmosphere combined with high quality care for those pupils who cannot go home at the end of the school day.

Children and Families – Operations

This service is overseen by a Service Manager, four Area Children’s Managers and the Children with Disability Manager. The service has responsibility for the assessment and case management of social work through the fieldwork teams based in Islay, Campbeltown, Lochgilphead, Oban, Helensburgh, Dunoon and Rothesay. Key areas of activity for the service are: child protection, looked after children, youth justice, children affected by disability and delivery of integrated children’s services through the Getting It Right For Every Child practice model.

Child protection remains a priority for the Council and its partners and much of the activity in this area is undertaken in conjunction with Strathclyde Police and NHS Highland. The inter-agency nature of the work is directed by the Child Protection Committee (CPC) which provides strategic direction across partners to ensure we keep our children safe.

Analysis of activity shows a significant increase in the number of child protection investigations and the number of children on the register. In June 2011 the Care Inspectorate undertook a child protection inspection across all partners in Argyll and Bute. The inspection evaluations were: -

Children are listened to and respected	Good
Children are helped to keep safe	Good
Response to immediate concerns	Weak
Meeting needs and reducing long term harm	Good
Self-evaluation	Satisfactory
Improvements in performance	Satisfactory

The CPC tasked the Self Evaluation Group to take forward the recommendations of the inspection. Priority has been given to improve consistency of responses to immediate concerns. There have been some successes, for example, the improvement of health staff involvement at the initial investigation, consultation with families is helping us to develop and improve our services and there are a number of policy and practice initiatives to support the improvement journey. However, the partners in Argyll and Bute acknowledge we are on an improvement journey. We know that our staff are committed, hardworking and care deeply about vulnerable children and young people. It is for this reason we strive to do better through understanding the area we need to improve.

Getting It Right For Every Child (GIRFEC) remains the central policy for the development of integrated children’s services across Scotland. Argyll and Bute Children is pivotal to deliver on the GIRFEC vision. Only by working together will we achieve the best for our children and young people. To ensure we deliver the new vision a new structure focusing on children’s life stages has been developed. The new Integrated Children’s Services Plan will be available in 2013.

It is an exciting time for children and families – many changes and opportunities to shift practice to ensure children, young people and their families are at the centre of all we do.

Adult Care Services

Introduction

New Management Structure: (Appendix 5)

The establishment of the new management arrangements for Adult Care has recently been put in place (July 2012) with a move back to a single Area Manager for Adult Care supported by specialist Team Leader posts across older people, mental health and learning disability. This retains the specialism within Adult Care at Team Leader level while empowering the single Area Manager to work across the service in terms of service development, budget and decision making.

The provision of Social Work services to adults continues to be the subject of major change and re-design issues both internally and in partnership with the NHS and other partner providers. The following section provides a summary of the major issues.

Service Reviews:

Older People:

Home Care:

The year 2011/12 has seen the conclusion of the re-design of home care services with the majority of the service, excluding the MAKI area, being externalised with three preferred providers per locality (see appendix 6). The newly commissioned services will begin on Monday 21st January 2013. Council staff have taken the opportunity to take voluntary redundancy and thereafter consider the option of applying for employment with new providers.

Day Services:

Day services were re-designed to focus primarily on the needs of clients with high dependency and dementia. This resulted in services being streamlined in both Oban and Cowal which assisted greatly in evidencing that council day services could be provided in an efficient manner. Consequently, when the service was compared to external providers in a formal tender it was concluded that there was no gain to the council in externalising the service both in terms of quality and finance.

Care Homes:

The future of the council's care homes will be considered by the Adult Care Project Board during the remainder of this financial year and into next. In terms of developing new services, the council has taken the opportunity to work in partnership with NHS Highland and West Highland Housing Association to develop the new Progressive Care Centre on Mull which will see the Dunaros Care Home replaced by modern Extra Care Housing units sited within a joint campus with NHS services. The facility is due to open during November 2012 and provides an excellent example of what inter-agency working can achieve in developing a facility that is fit for the 21st Century

Learning Disability

Day Services:

Day services continue to be re-designed with the focus being on the provision of flexible and outreach services that complement the traditional resource centre facilities. The resource centre service continues to be used to a lesser degree with greater emphasis on proving support to access existing community facilities. When the service was compared to external providers in the Pre Qualifying Questionnaire in advance of the formal tender it was concluded that there was no gain to the council in externalising the service both in terms of quality and finance.

The service will continue to be subject to re-design with negotiations with the unions relating to changes in conditions for staff and more efficient use of the resource centre buildings being the main issues that will be presented to the Adult Care Project Board prior to the end of the financial year 2012/13.

Greenwood Hostel:

After a long planning period working with residents, families, staff and unions, the Greenwood learning disability residential hostel has been transformed. On 14th May 2012, the care home was de-registered by the Care Inspectorate. The adjustments to the model of care and facilities provide smaller shared tenancies for the 6 people who were living there. This was done by remodelling the space into flats, with the same staff now delivering care as Community Workers in a more personal and individual way to these people in their own homes. This service is now registered with the Care Inspectorate as Supported Living. The Registered Manager reports that already the service users are feeling the benefits of moving away from the old institutional model; individuals are widening their horizons and becoming more independent, staff also report a renewed energy and enthusiasm despite the substantial changes. Delivering this has been a huge learning curve for everyone involved and has been achieved by the Manager and her staff working extremely hard and dynamically.

Mental Health

The Adult Care Project Board have agreed that mental health services are to be subject to the same Pre Qualifying Questionnaire/Tender process that Older People and Learning Disability services have gone through. This will proceed during the remainder of the financial year 2012/13.

Reshaping Care for Older People/Change Fund.

The Scottish Government Change fund presented us with an unprecedented opportunity to develop a real and equitable partnership approach with NHS Highland and the Independent and Third sectors. To facilitate this, the first action was to set up a Programme Board with equal representation from all four sectors. This was so successful that we received extremely positive feedback from our Joint Improvement Team (JIT) Supporter (Margot White) on the functionality of the Board and we were privileged to win the Scottish Care Award 2012 for Partnership Working.

Our aim during the period of the Change Fund is to change the way we work with older people and communities, in order to develop sustainable community-based services that will be fit for purpose in a future of changing demographics and increasing numbers of older people. The response we develop to these challenges needs to demonstrate a radical shift away from viewing older people as a drain on resources and via community involvement, self-management and co-production, towards viewing them as asset. Older people are living longer, healthier and happier lives and the Change Fund allows us to develop a mechanism to harness their skills, experience and expertise to enable them to realise their potential and contribute to their community and society, for as long as they want to.

Third Sector partners have invaluable expertise in this approach and in Argyll & Bute they have already expanded Time-banking and befriending to encourage older people to be involved; set up very active 'Grey Matters' groups in a number of areas; supported a group of older people in Campbeltown to open a community shop and helped older people to set up a number of activity groups, including a walking group led by a 79 year-old man, who has recently qualified as a walk leader.

To make the Change Fund work manageable we have split it into 12 work streams all feeding into the 12 core aims, with an emphasis on involvement, self-management, co-production and support for carers. This provides a positive platform for developing a sustainable approach to working in the future.

Dementia Services.

Argyll & Bute Council has worked in close partnership with NHS Highland and Alzheimer Scotland for the last two years, to develop appropriate and sustainable services for people with dementia and their families.

Service development was based on the outcomes of two dynamic conferences held in June 2010, at which people with dementia and their families made clear their need for local, accessible, flexible and multi-disciplinary services.

Adult Protection: Adult Support and Protection (Scotland) Act 2007

The Act provides the framework for the Adult Protection agenda and came into force in October 2008. During 2006/07 a new set of inter-agency procedures were drafted and approved by the Council, NHS Highland and Strathclyde Police for operational use. This resulted in an extensive programme of training across the agencies noted and the voluntary sector in Argyll.

A West of Scotland group of 12 Councils, of which Argyll & Bute is one, subsequently produced a set of procedures that has been in use since mid 2009 and which was updated at the beginning of 2011.

The development of this agenda is ongoing and is subject to scrutiny via the Adult Protection Committee and the Chief Officers Group ; both being attended by senior Council, NHS and Police officers.

Performance Details:

Older People: Free Personal Care

The Council has managed to achieve and sustain significant improvement in the dual agendas relating to the provision of Free Personal Care and Delayed Discharge over the last two years.

The impact of the two-tiered strategy is summarised in the table below:

Summary of Council Waiting Lists:

	MAY 2006	MARCH 2007	DECEMBER 2008	MARCH 2009	MARCH 2010	March 2011	March 2012
FPC Community	145	81	9	17	8	1	0
FPC Self Funding (Residential/Nursing Care)	38	20	14	6	6	0	0
Council Care Home Budget	38	31	7	8	9	0	0
Totals	221	132	30	31	23	1	0

(March 2012 source Pyramid Data from Care Home Placement and FPC Scorecards.)

These figures indicate the ongoing progress that has been made at a time when the requirement for services continues to increase both in terms of numbers, complexity of cases, in terms of physical and mental disability, and an ever growing public expectation of what the service can provide.

Those waiting for services invariably wait no longer than a month for services to be arranged. All clients with essential /urgent needs (Priority 1 on the Council's Prioritisation Framework) are authorised immediately as are those clients with terminal illnesses.

The figures relating to clients who self fund their residential/nursing placements (waiting for the Free Personal Care Allowance) has consistently fallen with those waiting doing so for no longer than the three months period previously agreed at Committee. The comparative figures from 2006 to 2012 indicate a significant improvement in performance during that time.

Delayed Discharge:

Specific targets for the reduction in delayed discharges were set by the Scottish Executive and, accepted by the Argyll & Bute Joint Future Partnership, which were historically met within acceptable limits. However, progress during the latter part of 2005/06 and the early part of 2006/07 was poor.

The Scottish Government set a target of zero against those patients waiting beyond 6 weeks for discharge and an equivalent target of zero for those patients waiting in short stay specialist beds for April 2008. The targets were achieved as noted below.

The challenge continues to be maintaining the figure at zero. This has been consistently achieved during 2010/11 with the exception of December when one client was delayed over the six week period. The excellent performance of the Health and Social Care Partnership is recognised by both the Government and SWIA as a success story for Argyll & Bute and compares favourably with other Scottish councils given the noted success. The Partnership has moved its primary focus onto the total number of delayed discharges and bed days lost as the primary performance indicators in relation to this matter as highlighted in the Adult Care scorecard on Pyramid... Again on both indicators, performance continues to improve

	March 2010	March 2011	March 2012
Beds Days Lost Per month	2115	1256	652
Total Number of Delayed Discharges Per month	33	25	12

(March 2012 data from Pyramid Delayed Discharge Scorecard)

Balance of Care for Older People:

During the year there has continued to be progress in addressing the balance of care issues between those cared for at home and those in residential care homes.

Date	Care in the Community %	Residential care %
Nov 2008	59.4%	40.6%
Mar 2009	62.3%	37.7%
Mar 2010	64.3%	35.7%
March 2011	65%	35%
March 2012	67%	33%

(March data from Pyramid Balance of Care Scorecard)

As noted, the move towards care in the community would appear to be rather slow with improvement in performance being marginal. This is largely explained by historical admissions to care rather than present practice where the in year figure for 2011/12 stands at 81.2% in the community and 18.8% for residential care. The expectation is that this pattern will continue and gradually impact on the total number.

Issues impacting on the balance of care:

- A greater variety of services are available in order to sustain service users at home or in sheltered housing, existing home care services are now supplemented by overnight home care services, greater availability of community nursing services and Telecare.
- Continued reduction in NHS Continuing Care beds for Older People.
- Improved understanding of the options available to sustain service users at home across the various professionals involved; Social Work, Community Nursing and GP's.
- Improved performance management information that assists local managers in driving the agenda with staff across the Council and the CHP.
- Introductions of the Admissions, Transfer and Discharge Protocol. Greater use of the Admissions, Transfers and Discharge Protocol by CHP nursing and Clinical staff.

Unallocated Work and Completion of Initial Assessment

During 2008 there has been significant progress in areas of general performance:

Unallocated work:

31 st March 2008:	294 cases
31 st March 2009:	178 cases
31 st March 2010:	90 cases
31 st March 2011:	24 cases
31 st March 2012:	3 cases

(Data from Carefirst and Pyramid Unallocated Cases)

Assessments outwith target timescale for completion:

31 st March 2008:	242 waiting over 56 days
31 st March 2009:	180 waiting over 56 days
31 st March 2010:	47 waiting over 42 days
31 st March 2011:	30 waiting over 28 days
31 st March 2012:	20 waiting over 28 days

(Data from Carefirst and Pyramid Unallocated Cases)

In both cases, numbers have fallen significantly and in the case of outstanding assessments the target date was also been reduced from 56 to 42 days for completion on 1st April 2009 and more recently to a target of 28 days.

Adult Care: Issues for 2012/13

Joint Working/Integration with the NHS Highland (Argyll & Bute CHP):

Adult Care services are being developed in the context of Joint Working with the CHP both in terms of service delivery and the integration of services and management. This section provides a summary of progress while providing the opportunity to highlight change in the services for the other client groups in Adult Care.

The integration agenda focuses on integration in client service delivery, the development of joint teams, delegated management of single teams and the agreed Partnership governance. As previously reported, the Health & Care Strategic Partnership has integrated a number of services during the previous 5 years as follows:

- Integration of Substance Misuse Teams with the CHP being delegated management responsibility on behalf of the Strategic Partnership.
- Integration of Learning Disability Teams with the Council being delegated management responsibility on behalf of the Strategic Partnership.
- Creation of Integrated Care Teams based in hospitals to assist in providing effective and timeous discharge from hospital and assist in avoiding admission to hospital and residential care homes
- Redesign of Mental Health services in Argyll & Bute. Process being led by the CHP.
- Delegation of the management of Occupational Therapy Services to the CHP.

It should not be assumed the models of integration noted will be sustained as we move into a period of legislative change which is likely to impact on existing governance arrangements while changes in operational practice such as anticipatory care will impact on how staff are organised and managed.

We are now in a period that the national consultation on the proposed statute has been issued and responded to. We await the final detail of the statute but it is expected that the council and NHS highland will agree to an integrated structure with a timescale for implementation of April 2014. While the legislation will primarily focus on older people's services it is more likely that the approach in Argyll & Bute will be to integrate across all of adult care services. In doing so this will impact on the overall management of the Social Work service in relation to the potential integration of child care services and the future role of the Chief Social Work Officer.

Substance Misuse: Development of the Alcohol and Drugs Partnership (ADP)

The ADP in Argyll & Bute has to date failed to work cohesively as a partnership across the statutory and third sector agencies in bringing together a concise and strategic vision for the future of services in Argyll & Bute. A great deal of work has progressed during the last year and the ADP is now on target to produce a strategic service plan for implementation during 2013/14 with the agreement of all partners. This will undoubtedly be a time of change for all parties involved both in terms of challenging historical practice and priorities in order to create a service fit for the future.

Transitions Protocol: Children Affected by Disability

Adult Care services in conjunction with Children & Families services have produced a new joint protocol to assist with the smooth transfer of responsibilities from child care to adulthood. The significance of this change cannot be underestimated both in terms of legal, financial and practice issues in promoting the independence of the young adult. It is invariably a time of anxiety and change for both the adult and their carers and requires clarity and consistency from the Social Work service which the new protocol intends to achieve.

Self Directed Support (Personalisation):

The Self Directed Support agenda marks a step-change in the way care and support services are commissioned. It means enabling people to exercise choice and control over their lives and requires local authorities, including Argyll and Bute, to build community capacity and facilitate access to tailored support options for individuals identified as having eligible social care needs.

Self-directed Support (SDS) is an expression of the principles of personalisation and is the term used to describe how people with social care needs can exercise choice and control over the support mechanisms in their lives. Where people, because of the extent of their needs, require support or services to achieve this, it follows that they should be able to exercise maximum choice and control over the use of resources identified for this purpose to meet agreed outcomes. This requires people to be aware of the financial value of the public funds attributed to meet their needs – known as an individual budget – to allow them to make an informed choice about how that budget is used.

SDS is designed to bring about independence and choice for people with care or support needs; but it does not require them to take responsibility for an individually allocated direct payment. It might involve the local authority arranging and managing the service, following a discussion about the available budget and the form of support required. The option of a direct payment is more specific and involves money being paid by the local authority directly to a person whom it has assessed as needing community care services. The local authority makes the payment instead of arranging services, allowing people to purchase services to meet their own community care needs. Legislation is currently making its way through the Scottish Parliament and it is likely this legislation will place specific duties and responsibilities on Local Authorities with implementation likely by 2014.

Self Directed Support Group

A SDS group has been set up and representatives from the Council, CHP, Third Sector, Voluntary organisations and a service user/carer representation. A series of events have been running initially for staff to consider the principles of SDS and what the term “outcome focused care planning” means for changes in well-established assessment processes and cultures within partnership organisations. These sessions have been delivered in partnership with Scottish Consortium for Learning Disability organisation (SCLD). We have also had a number of workshops with Scottish Personal Assistant Employers Network (SPAEN) exploring the link between Self Directed Support and Direct Payments.

What Next 2012/13

Additional awareness raising sessions are being planned in partnership with SPAEN to build community understanding amongst service users and carers. These will be delivered in seven locations between October and December 2012. There will be a gradual introduction of Personalisation as we identify what works for people in Argyll & Bute. It will also take time to adjust current practice and to enable service users, carers and staff to become familiar with this approach. A regular newsletter will be produced quarterly to keep all stakeholders up to date on the progress we make during 2013/14. It will of course be for service users and carers to decide which way they wish to accept their care/support as we move towards the full legislative implementation of SDS.

Conclusion:

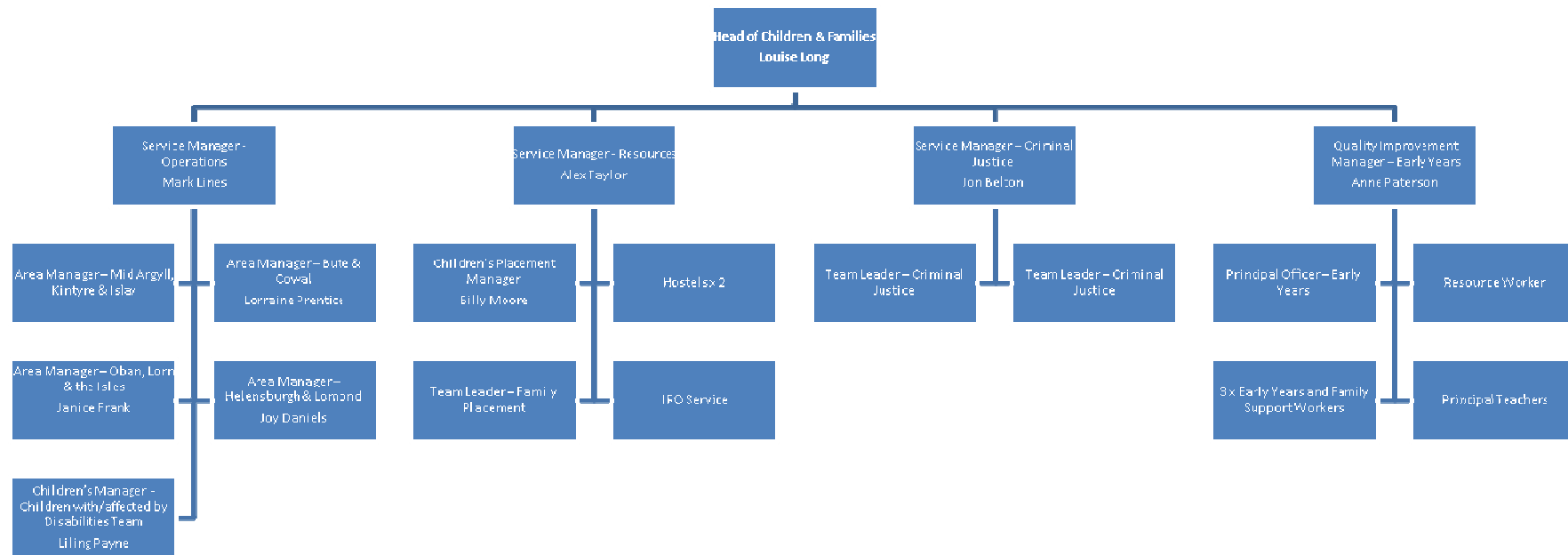
The period of 2011/12 has seen the social work service continue to be subject to change and review in order to meet the twin challenges of limited budget, increased size of client groups particularly across older people, learning disability and children with disabilities and increased service user expectation. During this period the service has continued to develop its approach to meeting the needs of the community within Argyll and Bute with notable achievements being the continued increase in family based placements for looked after children and the maintenance of low numbers of patients affected by delayed discharge.

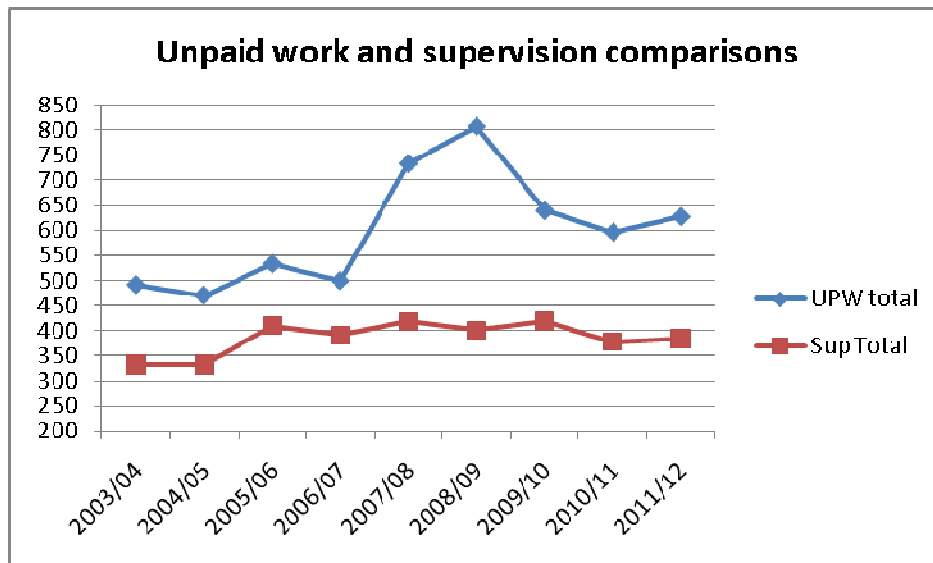
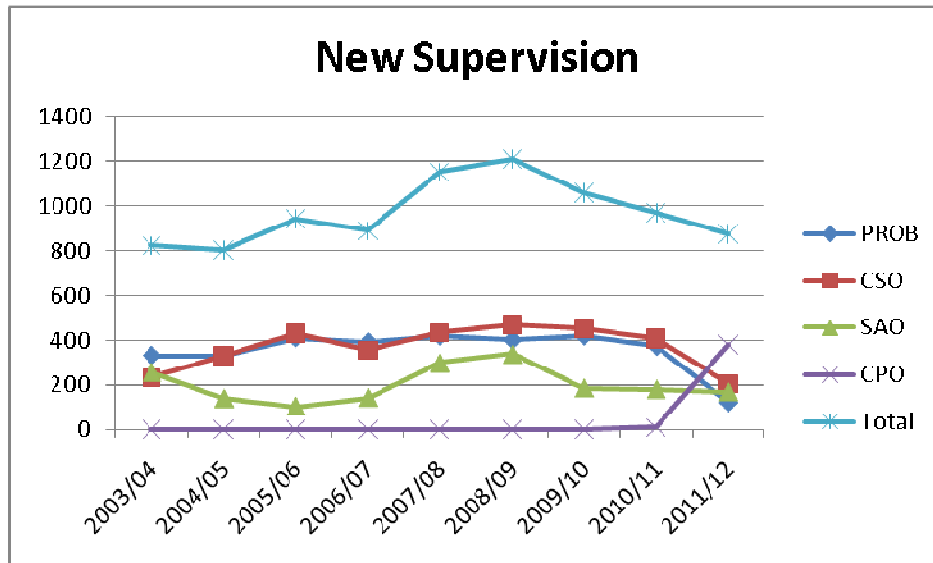
These types of achievement have been underpinned by our approach to service improvement which brings together the key aspects of this: outcome performance; staff and service user feedback, and auditing finance and management information to create a comprehensive approach to improvement.

There are further challenges ahead which will require an ongoing commitment to review and re-design that will result in a fundamental reconsideration of how we deliver services in all aspects of our business. Work is already well underway in many of these areas with significant review activity having taken across the range of services including elderly services and learning disability in adult care and in children affected by disability, early years and children with emotional and mental health needs within children's services. This activity is a core part of the council's modernisation programme and social work is well placed to help the council continue to develop in the years ahead.

James Robb
Chief Social Work Officer

October 2012





Child Protection Statistics 2011/2012

Appendix 3

Number of child protection investigations completed between 1st aug 2011 & 31st July 2012 = 192

Number of children on Child Protection Register as at 31st July 2012 = 48

Category of registration:

Physical Neglect 17 (35%)

Physical Injury 8 (17%)

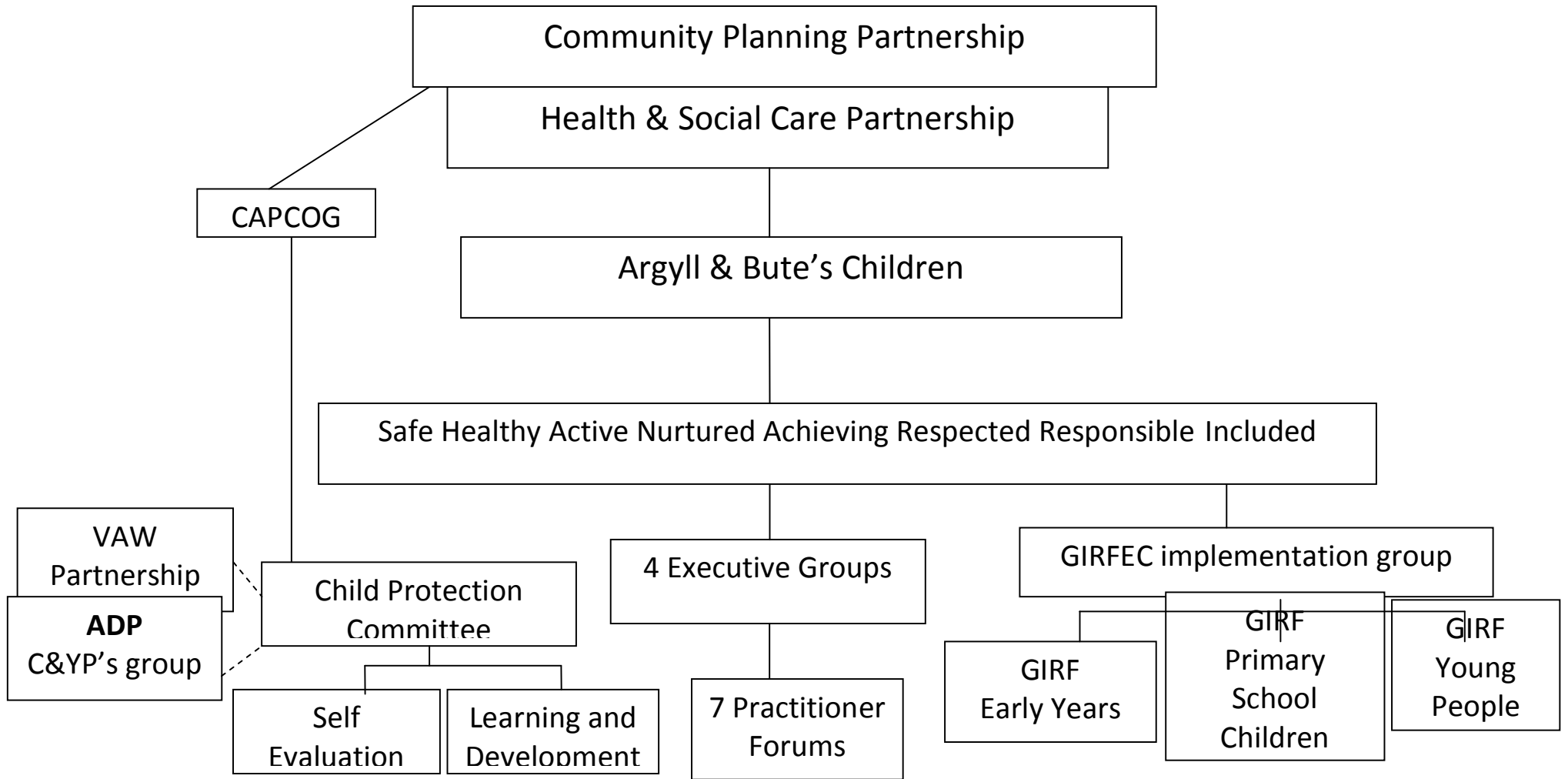
Sexual Abuse 0 (0%)

Emotional Abuse 23 (48%)

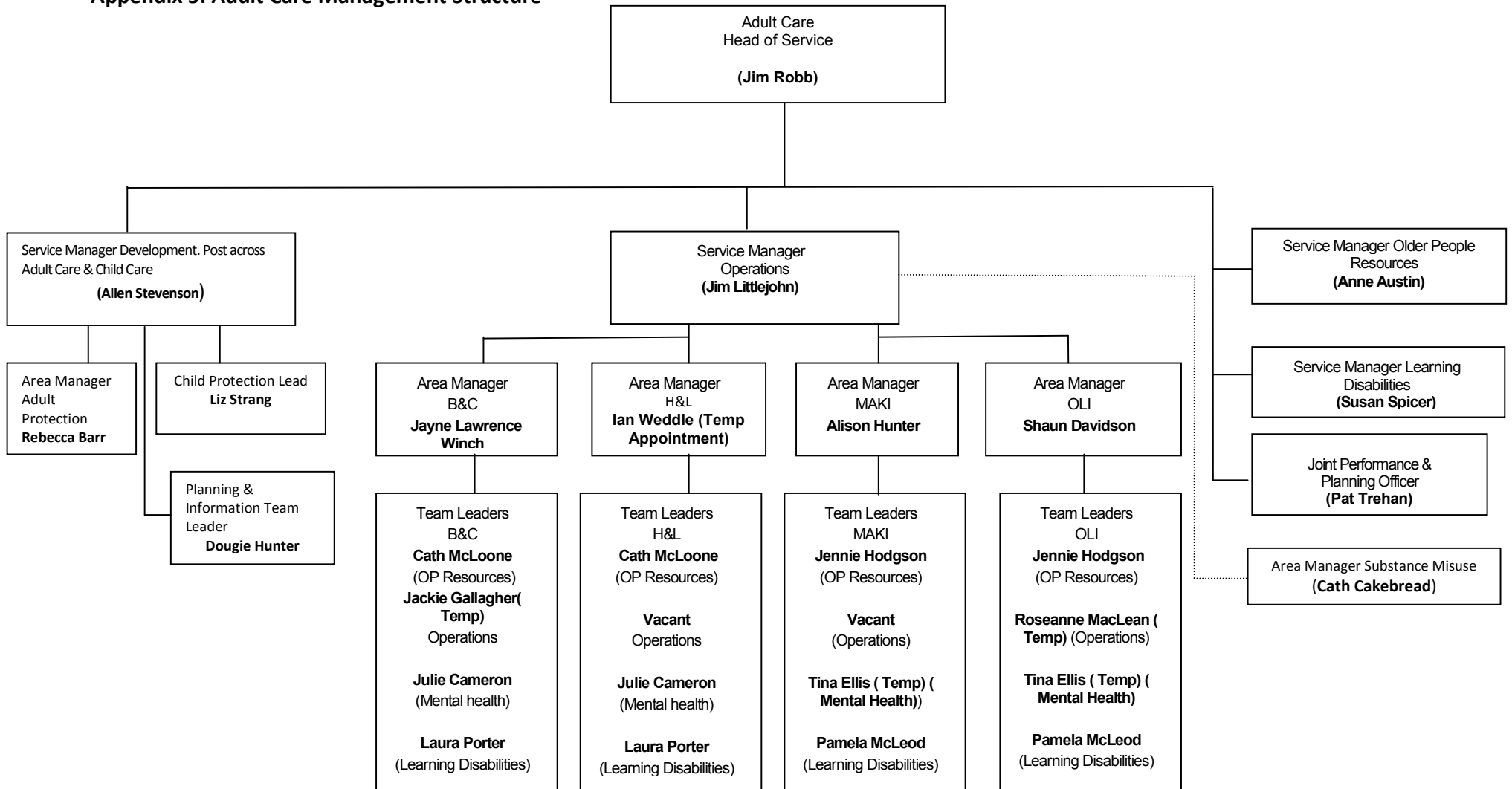
No. of children on register at year end (31st July 2012)

2012	2011	2010	2009	2008	2007	2006	2005	2004	2003
48	39	43	32	43	34	57	39	43	47

Appendix 4



Appendix 5: Adult Care Management Structure



Adult Care Planning Structure

