

Follow-up report for Performance Inspection: Midlothian Council

Introduction

The Social Work Inspection Agency (SWIA) was established in April 2005 to undertake performance inspections of all of Scotland's local authority social work services between 2005 and 2008. Each inspection focuses on the approach to continuous improvement of the local authority.

SWIA subsequently monitors the implementation of recommendations made in performance inspection reports, undertaking a follow-up inspection visit one year after publication.

SWIA uses a six-point scale in its evaluation of social work services. It does not re-evaluate these when completing the follow-up report but does indicate if satisfactory progress has or has not been made for each recommendation. The progress report will also highlight any key issues which have arisen since the inspection.

The inspection of Midlothian Council, in 2008

The main part of the performance inspection took place in May 2008 and the inspection report was published in November that year.

Overall, Midlothian Council social work division performed to an adequate standard in delivering positive outcomes for people who used services. We found performance was good in relation to service users who had mental health problems; throughcare and aftercare services for care leavers and educational attainment of looked after children. People who used the services were mainly positive about the difference these had made to their lives.

We found that most social work staff in Midlothian were motivated and committed. Following the publication of a critical joint child protection inspection report in 2007, the social work division had faced a severe test of capacity and leadership. The response by elected members and senior officers had been one of significant effort. This had led to improvement and a return of confidence across the social work division.

Basis of the follow-up report

The performance inspection report made 17 recommendations, aimed at improving services. This report will describe progress made in relation to each in turn and in

relation to any specific concerns arising or reported on since the original inspection fieldwork. This is based on the following activity* since publication:

- an action plan and two progress reports prepared by Midlothian Council in 2009.
- two monitoring visits carried out by two SWIA inspectors each time in the course of the year.
- a final progress report and supporting evidence prepared by Midlothian Council, submitted to SWIA on 23rd October 2009.
- file reading of 30 records on 26th October by four SWIA inspectors and two local file readers (15 of the records were intended to verify files previously audited and subsequently submitted by the social work division. SWIA was satisfied with the robustness of the results.). The social work division submitted full audits of an additional 58 records.
- a follow-up inspection of Midlothian Council on 9th November, carried out by five SWIA inspectors.

**see Appendix 1 for details of the fieldwork*

Recommendation 1:

The social work division should systematically measure outcomes for all groups of service users and carers. This should include both internal monitoring and external evaluation.

In the performance inspection report, SWIA noted that the social work division collected some outcome information, but this was limited. Midlothian did not routinely measure outcomes for all care groups. The existing system at the time was limited in the outcome performance data which it could provide.

Following the performance inspection, the social work division introduced Phase 1 of a new bespoke management information system, framework i. Staff used this system to record all information and work undertaken with service users.

The service was developing the reporting framework which would systematically aggregate performance monitoring and quality assurance measures. In the meantime, senior managers used a performance management calendar to schedule the monitoring of performance on a monthly basis, with quarterly reports being submitted to elected members

Community care services piloted the UDSET (User Defined Service Evaluation Tool) now known as 'Talking Points'. Although limited, the results were positive. The social work division had decided to roll out this method of measuring outcomes across all services by integrating it into framework i. Existing business processes are due to be redesigned to this end by April 2010.

Internal monitoring had been taken forward through a demanding programme of regular senior manager audits of files (using the full original SWIA template, which includes questions about improvements and independence in the lives of service

users) and team leader practice governance arrangements (using a shortened version of the template). SWIA was able to use the robust results of the full audits in its follow up file reading. The file reading showed that there had been significant improvements across the period 2007 – 2009 in the percentage of files where the service users had become more independent and the service users' circumstances had generally improved. Service users' circumstances had generally improved in 87% of the cases in the 2009 file reading.

Overall, we found that the social work division had made **some progress** in implementing this recommendation.

Recommendation 2:

The social work division should take immediate action to ensure that permanency plans are made timeously and then implemented promptly in order to improve outcomes for looked after and accommodated children and young people.

In the performance inspection report, SWIA noted that looked after and accommodated children (LAAC) had to wait too long for plans to be made about their future care. Where plans had been made, they were not always being implemented quickly enough.

The social work division provided a briefing note in August 2009 which stated that the number of children registered for permanence had risen from 26 to 40 since February 2009. The increase was due to the work on progressing permanency plans leading to new registrations. Three children had since been matched with permanent carers or had potential links. Six children had already been placed and progress had been made on taking appropriate legal steps to secure the children permanently. Six cases had been progressed to pro-active family finding. Eighteen sets of carers were being assessed to become permanent foster carers for the children they were caring for. This work is considered as an ongoing urgent priority by the social work division.

Active management oversight of planning for looked after and accommodated children now took place within a new single overview group to address the drift in care planning. Team leaders told us this group gave them feedback about the assessments and plans and managers told us the group reported upwards to the service management group.

The social work division had introduced an interim permanency policy which included timescales for decision making. Managers had given a clear message to staff that reviews would not be postponed or cancelled and team leaders and front line staff we spoke to during our follow up fieldwork endorsed this.

The agenda and report format for LAAC reviews was amended in order to focus discussion on the progress of planned outcomes at review meetings. These changes were built into framework i.

Training had been provided on a variety of practice areas including the legal framework, kinship care, life story work and family contact arrangements.

Arrangements for quality assurance and monitoring had been strengthened. An internal audit of 145 children's case files was undertaken in 2008. A further review of all looked after and accommodated children's case files was done in early 2009 which focussed on care plans, review arrangements and contact. The findings were fed back to team leaders and an action plan was produced alongside individual case advice. Managers told us that they would continue to monitor progress through audit and governance arrangements.

Overall, we found that the social work division had made **substantial progress** in implementing this recommendation.

Recommendation 3:

The council should take immediate steps to ensure that adult service users assessed as having critical or substantial levels of need should receive the required level of home care and other community care services.

In the performance inspection report, SWIA noted that some service users had to wait a considerable time before a service was provided. There were a number of service users with critical needs who were placed on a waiting list, rather than being provided with a service.

In the context of a challenging budget position for local authorities generally, elected members in Midlothian acted very quickly to prioritise this serious issue. In response to the shortfall in funding to provide care packages for people with an assessed critical or substantial need, the council agreed supplementary funding of almost £0.7m for social work services in 2008-09. The full year effect of this supplementary funding was consolidated into the 2009-10 budget. An additional £750,000 was allocated as part of the 2009-10 budget setting to meet increasing demand.

An analysis of national statistics for home care provision showed sustained high performance of Midlothian in recent years in this area of service delivery, with consequent positive outcomes for service users (also relevant to Recommendation 8).

Senior managers confirmed to us during our fieldwork that community care was now delivering a service to people with substantial needs within the draft national timescale of six weeks (delivery was within two weeks for those with critical needs). This was once the resource panel had agreed to the care package. Managers provided sample minutes from an August 2009 resource panel meeting which showed that critical and substantial cases were not being refused on financial grounds. People only had to wait if there is there was no specific resource available.

From the social work division's audit of community care service delivery, it was confirmed that service user needs were being met within the timescales in the draft national guidance.

Overall, we found that the council had **met** this recommendation.

Recommendation 4:

The social work division should consistently collect and analyse the views from all groups of service users and carers.

In the performance inspection report, SWIA noted that the social work division did not systematically collect the views of users and carers. We did not find much systematic collecting and interpreting of information about service users' experiences.

The social work division provided us with the survey results of 971 questionnaires (based on the SWIA methodology) issued in July 2009 to a range of carers and community care and young people service users. Managers told us that the results were also shared with staff to encourage their contribution to analysis and development of improvement measures. Feedback was also been presented to senior managers. The surveys are to be repeated annually. There was also to be an annual programme of specific consultation exercises regarding service review or potential service redesign.

The analysis of this feedback was provided to SWIA as evidence and was considered by operational teams to address areas for improvement.

There were positive results from service users, for example, about the quality of services and receiving help when needed. Managers were made aware of the need to respond more quickly and with more choice from the results. Many carers agreed that their needs had been assessed and the cared for person had been supported to lead a more independent life. Areas for improvement included access to information and regular reviews.

The Talking Points methodology for seeking user and carer views had been piloted in Midlothian in eight service areas with the intention of adopting the system across all services. A significant development had been the success in aggregating the results for analysis purposes. The project's final report concluded that, in general, service users reported a high level of satisfaction with many aspects of service provision. Action is needed to improve the skills and mobility of service users.

The social work division had an effective structure in place to ensure user/carers representation and feedback from scrutiny panels to planning group meetings

Overall, we found that the social work division had made **substantial progress** in implementing this recommendation.

Recommendation 5:

The social work division should ensure effective communication with staff about strategic and operational planning issues and identify what further steps can be taken to delegate authority to staff.

In the performance inspection report, SWIA noted that staff generally had a clear sense of what they were striving to achieve in their service areas, but were less clear about the plans for social work services in Midlothian overall. A number of staff were less positive about communication and delegation from senior managers.

To address the issue of effective communication, the social work division developed a communications strategy which included commitments to a regular staff newsletter, staff briefings and a strengthening of the supporting staff forum and the council intranet/website.

During our follow up fieldwork we heard from main grade community care staff who told us that managers were more visible and accessible than before and the flow of information was better. They told us that surveys of staff views had been completed and staff have more say in the service. Child care staff were less aware of improvements in communication but we noted that an “open space” consultation event was being arranged in November 2009 specifically for children and families staff.

A local practitioners forum was also created to involve front line staff in promoting good practice and addressing human resource issues. Main grade staff we met during fieldwork told us that this initiative was still at an early stage.

An “Open Space” event took place in the Spring of 2009. This was an event open to all staff to seek their views on how the social work division could better support them. Feedback from those who attended the Open Space event was very positive. People were keen that the event should be repeated. An action plan was developed from this event and more events are planned. Comments from staff were overwhelmingly positive:

“Open, honest discussion and chance to meet colleagues from other areas.”

“Friendly and welcoming atmosphere. Spirit of goodwill and being listened to.”

“Very good for networking with staff from other related services, managers etc – shared development and learning is good.”

The financial scheme of delegation was reviewed and updated during 2009. Adjustments were relatively minor.

Overall, we found that the social work division had made **substantial progress** in implementing this recommendation.

Recommendation 6:

The social work division, in consultation with all relevant organisations, should identify how it can improve its contribution to the effective implementation of the compact with voluntary bodies.

In the performance inspection report, SWIA noted that there was an active voluntary sector in Midlothian but the relationship with the statutory agencies needed to be clearer. We heard that service level agreements were not always in place and grants were often not renewed until well after their expiry deadline.

In recognition of the importance of the voluntary sector to the provision of social work services, the social work division had organised a workshop in conjunction with Midlothian Voluntary Action which has two development officer posts funded by the council. A large number of local voluntary organisations attended the workshop which agreed an improvement plan to strengthen relationships between the social work division and its voluntary sector partners.

The social work division had accelerated the process of reviewing or establishing service level agreements (SLAs) with voluntary sector providers. The contracts register at October 2009 showed, of the overall total of 111 formal purchasing arrangements with the private and voluntary sector, 89 new or reviewed SLAs in place since 2008 and a further 22 in negotiation. SLAs were in place for all voluntary organisations previously grant funded. All organisations had a named officer in the council who was that organisation's main point of contact. This had helped strengthen the relationship and the voluntary sector appreciated this arrangement which facilitated communication with the council.

The social work division had reviewed the structure and remit of the quarterly providers forum and made a commitment to have at least two social work officers attend these meetings. The social work division had established an additional forum for providers of services to people with learning disabilities which had helped in the ongoing work in re-commissioning St. Joseph's residential care home for people with learning disabilities. There was evidence of positive feedback from representatives of the voluntary sector on 'the commitment of social work to fielding high calibre/senior representation at all the local providers meeting'.

The social work division had reviewed the involvement of providers in strategic planning groups and had made a commitment to involve the providers forums in the development of strategies and planning reports. We saw strong evidence of this in more recent plans.

Children and families services had strengthened meetings with the voluntary sector providers under the auspices of Midlothian Voluntary Action. We also noted that the voluntary sector had representatives on the child protection committee, the children's services forum and the social work division had established regular meetings with kinship care groups.

The social work division had also conducted an e-mail questionnaire of staff seeking their views of services provided by the voluntary sector.

Overall, we found that the social work division had **met** this recommendation.

Recommendation 7:

The social work division should take action to ensure information about social work services is more readily available in a variety of formats to all residents of Midlothian.

During the performance inspection, we thought that more information about services could be made available in a range of formats, particularly for deaf people. There was a lack of complete information in leaflet form in area offices.

In response to this recommendation, the social work division developed a communications strategy to improve both external and internal communication. This contained an agreement that all the social work division's policies and procedures should be mirrored in leaflets for the public where relevant.

As part of the strategy information, work was therefore begun on reviewing and updating leaflets. We saw some good examples of revised leaflets. When last reported, 51 such leaflets were in the public domain with a further 21 in draft form. There was a version control group to manage changes in content. A protocol had been developed for the production and distribution of leaflets to ensure appropriate dissemination. During our fieldwork we were told by officers that leaflets were only readily available at one of the two social work centres. When we met with senior managers they confirmed that the next stage would be widespread distribution.

Generally, leaflets were available in standard format but contained a message that they could be provided in different formats on request. The local partnership in practice agreement for people with learning disabilities was available in easy read format. There were plans for all information in the learning disability field on the Midlothian website to be available in this format.

The social work division website pages had been upgraded in terms of content and ease of navigation. When last reported, 22 leaflets were available electronically, with plans for more leaflets as well as policies and strategies. There was still considerable scope for links to information about social work services and other useful sites.

There was a new mental health and wellbeing information website and online directory of mental health services.

In relation to deaf people, specialist services were purchased through "Deaf Action". Their website contained information about available services with a link from the Midlothian site.

This is ongoing work as reflected in a November 2009 version of the social work division's sustainability plan for improvement work associated with the SWIA recommendations in 2009-10. This plan includes a reporting requirement from the

social work division procedures group to senior managers on progress with reviewing and updating all leaflets and improving the website.

Overall, we found that the social work division had made **some progress** in implementing this recommendation.

Recommendation 8:

The social work division should include indicative timescales in its eligibility criteria policy for the receipt of community care services following completion of an assessment.

In the performance inspection report, SWIA noted that there were people with critical and substantial needs waiting for service. Eligibility criteria did not include indicative timescales for receipt of services following an assessment.

Elected members agreed further investment intended to ensure that people in critical or substantial social care need in Midlothian had the required services provided (see also Recommendation 3). We also found clear evidence that the social work division had positively revised the criteria in its eligibility criteria document.

Amongst other documents submitted by the council to SWIA in evidence of its new policy we read a report which went to cabinet in September 2009. It stated that people with assessed critical or substantial need did not wait for services as a consequence of a lack of financial resources. The proposed national standard of delivering services within six weeks would be met, providing the service of choice was available. The standard would continue to be met as long as the current policy of the council was maintained.

Overall, we found that the social work division had **met** this recommendation.

Recommendation 9:

Children and families services should ensure that all plans for looked after and accommodated children are based on sound assessment evidence and are effectively reviewed.

In the performance inspection report, SWIA noted that staff expressed a lack of confidence in areas of assessment work with looked after and accommodated children. This was confirmed during our observations of practice at the time.

Children and families services had improved the integrated assessment template for children and young people following feedback from staff. Stakeholders confirmed that the quality of assessments overall had improved and were more evidence based. This was supported by main grade staff we met.

Managers had given a clear message to staff that LAAC reviews could not be postponed or cancelled. Managers told us they had placed an increased emphasis

on the importance of the first placement review, in order to quickly establish the assessment and planning requirements.

In January 2009 the social work division established a practice standard for contact with all LAAC (i.e. to be seen by their social worker at a minimum of every six weeks). In documentation submitted in evidence, senior management stressed the emphasis being placed on the importance of regular contact with children. This is monitored via the senior management audit/team leader case governance processes and individually at each review.

Overall, we found that children and families services had made **substantial progress** with this recommendation.

Recommendation 10:

The social work division should ensure regular reviews at appropriate intervals of all community care packages which consider the match of provision to the changing needs of the individuals receiving services. Service users and their carers should be involved in these reviews.

In the performance inspection report, SWIA noted that much more work was needed on reviewing the needs of adults and older people. The recommendation was intended to promote the standard of a properly conducted annual review of needs and provision, involving the service user.

A social work division review paper for 2009 submitted in evidence stated that reviews had been completed of all residents in care homes for older people and care homes for people with learning disabilities. In addition all cases of people with learning disabilities in long term community based services had been reviewed.

Main grade staff we met on fieldwork told us that the review team had cleared the backlog of community care reviews. Home care reviews were variable and some could be six monthly.

The reviewing team in partnership with NHS colleagues carried out multi-disciplinary reviews of the health and well-being of all residents placed in two care homes for older people. Through this approach improvements were achieved in the quality of care delivered within the homes.

In future, the dedicated reviewing team will focus on complex care packages for people who live in the community. Each of the care homes was to have a nominated team leader who will coordinate residents' reviews.

During our follow up fieldwork, the community care management team told us that they had approved a review policy. There were three categories related to risk. The council had developed performance management information systems to track if community care reviews were held. Implementation of the new review policy was to commence in March 2010 (to allow for full consultation).

People with different needs will have different types of review, i.e. the reviews for service users with complex needs will differ from those with less complex needs. There will be links with service providers' reviews. Senior managers told us they had to make sure that they were dealing with changing needs so they get the right type of review. They had assigned a manager to implement the new review policy and it would take time to fully implement.

In terms of communication, staff told us they were aware of the intention to change policy in respect of reviews but they were less clear about the nature of the changes.

The management of reviews had been facilitated by the new management information system which provided clear and timely information about review schedules for the allocated worker and, for governance purposes, to the line manager.

Senior managers informed us in their evidence that the new arrangements for reviewing of cases will provide information on the performance of services to resource managers responsible for contract monitoring and quality assurance of services providers.

Overall, we found that the social work division had made **substantial progress** in implementing this recommendation.

Recommendation 11:

To improve the competence and confidence of practitioners in assessing and managing risk, the social work division should urgently ensure all front line staff are appropriately trained and should evaluate the effectiveness of the risk assessment policy, tools and framework.

In the performance inspection report, SWIA noted that a risk assessment framework and policy had been introduced in October 2007, but practitioners told us they had not been fully trained in the use of the tool and had no written guidance to support the evaluation of risk factors.

Following the performance inspection, the social work division reviewed the effectiveness of its risk policy and issued a revised version.

Our file reading in the follow up inspection showed a significant improvement across the period 2007 – 2009. This included a general shift in care plans now mostly addressing risk and need (as opposed to only partially before): 86% which mostly or completely addressed risks in 2009 compared to 72% in 2007.

The social work division delivered a wide range of training to practitioners in the assessment and management of risk. In addition they had worked with partners to deliver multi-agency training in child and adult protection.

Within the social work division, the risk assessment screening tool had been reviewed, revised and integrated into framework i with different models for

community care and children and families services. The use of the tool was mandatory for all ongoing cases and for some new episodes of short term work. All new and existing staff were briefed during 2009 about this tool and the application of the risk assessment policy.

Community care practitioners told us that the amended version was an improvement and incorporated joint improvement team material, making it more robust. All staff had done adult protection training. Staff had met with their line managers to improve the systems.

Children and families social workers told us they were reasonably confident about assessing risk but would welcome more written guidance. Managers have since provided a link to the Edinburgh, Lothian and Borders Child Protection Office risk assessment framework which offers written guidance on the weighting of risk factors.

The children and young person's assessment/plan had been reviewed and revised to incorporate risk assessment for child protection concerns and children's hearings, supported by the resilience matrix. Staff had been trained and team leaders had attended workshops on working with risk.

The social work division had continued to embed quality assurance arrangements to ensure the impact of this training:

- Managers had set up systems to ensure that all relevant staff were trained;
- Feedback was gathered at the time of the training and again after three months;
- There was mandatory line manager approval of the audit tool;
- Two tier auditing arrangements existed through monthly senior manager case file audits and the practice governance tool for team leaders.

Feedback from stakeholders confirmed that, overall, children in Midlothian were safer as a result of the improvement actions taken within the social work division and that the quality and culture of partnership working is much better.

Overall, we found that the social work division had made **substantial progress** in implementing this recommendation.

Recommendation 12:

The social work division should urgently ensure that the threshold for identifying and responding to child protection risks is consistent across front line staff and team leaders.

In the performance inspection report, SWIA noted that there were examples of inconsistent thresholds operating at team leader level. Concerns about children were being referred for conference at different stages by different teams; some requiring an earlier response.

A wide range of training had provided the opportunity for practitioners and team leaders to discuss and agree more consistent thresholds for intervention. Team leaders we met during our follow up fieldwork confirmed this was an ongoing area of development and was further supported by team leader group supervision. Practitioners told us that they were very clear that they were expected to discuss and refer all potential and actual child protection referrals with their team leader without delay.

The differences in response between team leaders at the level below inter-agency referral discussion (IRD) were being addressed through individual supervision and senior managers we met considered that team leaders were much more confident in managing risk and supporting staff to do so. While practice in risk assessment was improving, team leaders acknowledged that there was still more work to be done to increase consistency.

Team leaders were now expected to use the inter-agency referral discussion forum to agree how referrals should be dealt with, thereby increasing the number of multi-agency decisions about action.

The social work division had put quality assurance arrangements in place:

- Two tier auditing arrangements existed through monthly senior manager case file audits (this included information about team leader practice) and the practice governance tool for team leaders;
- Corrective action was discussed in supervision and collective themes were addressed by the practice team manager in the supervision of team leaders; and
- Baseline information on practice standards was available from the audit of 145 case files.

Overall, we found that the social work division had made **some progress** in implementing this recommendation.

Recommendation 13:

The social work division and the council's housing service should ensure effective joint working at all levels to meet the housing needs of those who are vulnerable especially young people who leave care.

In the performance inspection report, SWIA noted that concern about aspects of the partnership between social work and housing. We found housing and social work services were not always working together effectively on the accommodation needs of service users.

Joint protocols had been produced to help social work and housing staff work in partnership when dealing with accommodation issues faced by vulnerable individuals or families. These included protocols for people at risk of eviction and for supporting young people leaving care to better manage their tenancy. A welcome initiative was the deployment of a dedicated housing officer based with the integrated mental

health team. Housing staff were now attending case conferences when people were identified as having housing needs. This closer engagement had led to decisions being reached more quickly than before. The allocation policy for extra care housing for older people had also been revised which took greater account of both the social and accommodation needs of users. Overall, we found the protocols to be comprehensive and detailed as well as reflecting closer joint operational working between social work and housing.

A number of new housing with support initiatives had recently been established or were in the pipeline. This reflected the improvements in partnership working between the two divisions at a strategic level for commissioning services and for reconfiguring the council's existing housing stock, e.g. by tailoring sheltered housing to provide increased care at home models. Housing expertise had contributed to the re-provision and tendering of St. Joseph's care home and in the creation of the integrated housing support and personal care service provided by Trust Housing Association at Loanhead.

We heard from stakeholders that closer working with social work services had not only benefited individuals and families who had accommodation needs but that the council's housing strategy, particularly the homelessness policy, had been influenced by the contribution of social work input.

Better links with social work and housing for securing more appropriate housing for young people leaving care or who had found themselves homeless had been introduced. This had resulted in quicker provision of supported housing arrangements as a more suitable replacement for bed and breakfast accommodation. A new facility at Penicuik providing a temporary accommodation for up to five young persons had opened in May 2009 and this together with the continuing developments to increase the council's register of social landlords meant that young people were now being offered a wider and more appropriate choice of accommodation.

Overall, we found that the social work division and the council's housing service had **met** this recommendation.

Recommendation 14:

Midlothian Council should agree with NHS Lothian and their partners a financial framework to re-provision the services of the St Joseph's care home group and to modernise services for people with learning disabilities.

In the performance inspection report, SWIA noted that the range and quality of services was variable. In particular, the social work division faced major issues in modernising its learning disability services.

Amongst the documents which the social work division submitted to SWIA in 2009, the council's overview of progress report stated:

“The re-provision of St Joseph’s services is at an advanced stage with interviews taking place in October and a recommendation to Council on the awarding of contracts in November.”

We read various reports which stated that the council had given notice to terminate the St. Joseph’s contract in 2010.

During our follow up fieldwork, managers told us that most of the 70 St. Joseph’s residents were to move to their own flat (i.e. tenancy). The reprovisioning plans included some service users remaining in their existing accommodation (if appropriate to their needs and available as a tenancy) while others would move to new accommodation. Managers said this would happen in 2010.

Some of the St. Joseph’s residents were to remain in a registered care home: a small specialist group home appropriate to the assessed needs of service users.

The council and its partners had been able to deliver independent living for the St. Joseph’s residents within the pre-existing finance package. The funding package would include income from welfare benefits including housing benefits and income from Independent Living Fund for individuals who were eligible.

Not all of the 70 St. Joseph’s residents were the responsibility of Midlothian council. Some residents were placed in St. Joseph’s by other local authorities.

The work on re-provisioning St Joseph’s services was very impressive, particularly in managing the complexity and the challenges in engaging all key stakeholders around the task. This was a long term project which would take time to complete but the pace of development was appropriate to needs of service users. The council was convinced they would deliver much better outcomes for the former St. Joseph’s residents and they were putting mechanisms in place to measure this (Talking Points).

Senior managers told us that modernisation of day services was an ongoing exercise with, for example, an employability strategy having been agreed by the council. A capacity planning exercise had also been undertaken jointly with NHS Lothian.

Overall, we found that the council had made **some progress** in implementing this recommendation.

Recommendation 15:

The social work division should give greater priority to the induction of new staff and organise programmes taking into account the diversity needs of those appointed.

During the performance inspection, we found an inconsistent approach to induction training with a corporate programme and a variety of locally based induction programmes for the social work division. This was particularly an issue due to the high level of agency staff employed at that time.

A social work welcome pack was now issued to all new staff. Senior managers put a divisional policy on induction in place. This meant that social work as well as corporate induction was available to divisional staff. A rolling programme of induction sessions had been held for new staff, attended by senior management. In addition, there was specialist induction within service areas.

The new policy on induction emphasised a personalised approach to individual members of staff to ensure that diversity needs were met. This personalised induction was provided by line managers for all new starts and was an ongoing process through the personal development programme. This ensured that any special needs arising from diversity or terms of employment (e.g. locum staff) were addressed.

Induction checklists were used to monitor the implementation of the procedures.

Child care staff we met during our follow up inspection were aware that some staff had had a good experience of induction.

When we met with community care staff, they confirmed that induction was done promptly and senior management were present. This meant that they did not feel isolated. They confirmed that equality issues were covered.

Overall, we found that the social work division had **met** this recommendation.

Recommendation 16:

The council should ensure that full partnership financial management information is developed for all areas of joint working and that appropriate financial monitoring data for partnership arrangements is regularly submitted to elected members for scrutiny.

In the performance inspection report, we noted that financial and budget monitoring aspects of joint working had not progressed to any extent and required to be further developed.

A degree of progress had been made in implementing this recommendation but its full effect will not be realised until well into the 2010/11 financial year.

Senior managers told us that, through being a pilot of the integrated resource framework, a mapping exercise across all areas of joint working was being undertaken with NHS Lothian. A joint financial framework had been concluded between Midlothian Council and NHS Lothian for agreeing the governance and reporting arrangements in respect of each agency's aligned budgets. While it highlighted the staged processes for budgets, financial information and decisions, it did not contain any financial information. Budget spend and financial monitoring for elected members will be available from June 2010 onwards but this will be council information only, with NHS Lothian submitting data at the next quarterly financial monitoring meeting sometime after September 2010. Senior managers expressed

their disappointment at not having made more progress but acknowledged that partners had now begun to focus attention on understanding more fully the importance of seeking agreed financial data in support of joint planning decisions and service improvements.

We encountered some evidence where financial information was being shared and where this had been used by partners to either monitor existing spend on joint service provision or help partners take decisions about new service developments. For example, in community care, partners operated an aligned budget for the rapid response service where shared financial information about invoice payments was regularly discussed. The Midlothian children's services executive group presented detailed financial information at their meetings which allowed partners from education, social work and health agree financial envelopes from specific funding streams to support financial commitments or to redirect monies into new service developments. The budget for the Midlothian and East Lothian Drug and Alcohol Partnership was another example.

Overall, we found that the council had made **some progress** in implementing this recommendation.

Recommendation 17:

The social work division should develop fully worked up commissioning strategies, in active consultation with its strategic partners. It should give early attention to areas where there are major gaps, including older people, people with dementia and people with a learning disability as well as children and families services.

In the performance inspection report, SWIA noted that a strategy for commissioning social work service had been put in place but further work was needed to ensure its consistent application across all services.

The social work division had made a concerted effort to develop jointly commissioned strategies with key partners. Some were being updated while others were at different stages in their production.

The process was well advanced in older people's services where a short term commissioning plan covering the period 2010/11 had been agreed with NHS Lothian. Work had already started in preparing a longer term commissioning strategy to modernise services for older people. A separate dementia strategy had also been agreed with partners.

While the mental health commissioning strategy was currently in its third year of implementation it was recognised that a more comprehensive and updated strategy covering a 5 to 10 year planning cycle was required. Senior staff commented that partners were committed to revisit acute hospital provision and to explore what further opportunities there may be for re-providing more appropriate services in the community. We were told that partners had commenced work in this area.

A capacity planning exercise for people with a learning disability was underway. We were informed that the provision of specialist services for learning disability had the potential to be commissioned in collaboration with neighbouring councils. A range of commissioning options for people with a learning disability will emerge from this process and these should be harnessed to the community based alternatives planned to replace St. Joseph's.

Work had progressed to undertake a needs assessment in substance misuse services with East Lothian Council and thereafter a joint commissioning strategy with health would be concluded.

Staff in social work services and in health commented that good progress had been made with the review of children's services. A draft integrated children's services plan had been produced which brought together all of the main service strands under the one planning framework. As a result of identifying an increasing number of children affected by disability waiting for day and overnight respite services the council had agreed to allocate an additional £288k to meet this growing demand. A commissioning strategy had been prepared and agreed by partners which helped to extend the range of respite provision and increase the number of children able to access services from 55 to 84 between January and October 2009.

We also noted the work underway to monitor and review services contracted with external providers and would expect this exercise to be built into the ongoing review and commissioning of services across all care groups.

In the longer term, senior managers envisaged more radical changes in structure and practice to fully embrace the personalisation agenda through the adoption of self directed care systems such as "in control".

Overall, we found that the social work division had made **substantial progress** in implementing this recommendation.

Conclusion

Summary

Midlothian Council submitted an action plan which addressed the recommendations arising from our performance inspection of social work services in Midlothian.

As a result of implementing the actions, which have been monitored through quarterly meetings, reports and the follow up inspection, progress has clearly been made in many areas of the action plan. Overall progress has been significant with five of the recommendations met in full; seven where progress has been substantial; five where there has been some progress; none where there has been no progress.

During the year after publication of the performance inspection report, the social work division demonstrated through progress reports, supporting evidence and monitoring visits that key milestones of progress had been achieved as follows:

- A new management system to support the systematic measurement of outcomes had been introduced (recommendation 1).
- New management oversight arrangements to improve permanency planning had been put in place (recommendations 2 and 9).
- Further resources had been identified and agreed to reduce waiting lists (recommendations 3 and 8).
- The scope of service user and carer consultation had been extended (recommendation 4).
- The scheme of delegation had been reviewed and amended (recommendation 5).
- More opportunities had been established for better communication and inter-agency working with local voluntary organisations (recommendation 6).
- Information about services had been updated and improved (recommendation 7).
- Care package reviews had been increased and consideration given to sustainability (recommendation 10).
- Practice governance arrangements and training had been put in place to improve risk assessment and management (recommendation 11).
- Progress had been made with child protection training to ensure response thresholds were consistent (recommendation 12).
- Joint protocols between housing and social work services had been developed (recommendation 13).
- New induction materials had been prepared (recommendation 15).
- There had been concerted effort in the development of joint commissioning strategies (recommendation 17)

Areas for further/continued assurance and improvement

There had been substantial progress in respect of seven recommendations. Further improvement work in respect of these recommendations would produce greater effectiveness and sustainability. This can be taken forward through supported self evaluation.

We found that some progress had been made in relation five recommendations. SWIA acknowledges that there will be variations in the scale of action, time, capacity and resources needed to fully address all recommendations. We will review

progress in these matters in future shared risk assessments, and assurance and improvement plans.

It should be noted that all councils, including Midlothian, will be subject to new risk-based and proportionate assurance and improvement assessments by individual scrutiny bodies in the course of 2009/10. This approach will be incorporated into a shared risk assessment, co-ordinated through the local area network.

Ongoing contact between SWIA and the local authority

The performance inspection of social work services in Midlothian evaluated the areas of “leadership” and “capacity for improvement” as “good”. Following our inspection, an action plan was developed to address specific recommendations. While considerable progress has been made with the agreed action plan, it is too early to fully assess how the actions, which have been implemented in 2009 as a result of the inspection, have affected performance outcomes.

At the same time, it is important to acknowledge examples of good practice emerging from the actions which have been implemented, as detailed in this report.

Link inspector activity has included meeting with senior managers in the social work division to discuss self evaluation activity. The future level of link inspector involvement will be determined, in part, by the extent to which the local authority takes up the offer of supported self evaluation.

Dave Rowbotham
Lead Inspector
29.1.10.

Appendix 1

Sessions completed during SWIA visit to Midlothian Council from 9th to 11th November 2009.

Focus groups

09 Nov	Children & Families main grade staff
09 Nov	Community Care and Children & Families first line managers
09 Nov	Older people who use services
10 Nov	People who use services who have learning disabilities
11 Nov	Carers of adults who use services
11 Nov	Community Care main grade staff

Interviews

09 Nov	Chair of permanency panel
09 Nov	CHP senior management team
10 Nov	Child protection lead officers
10 Nov	Planning and performance officers
11 Nov	Finance, commissioning and contracting officers
11 Nov	Authority reporter

Management/social work resources meetings

11 Nov	Director of Social Work and senior managers
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Total sessions = 13