

Angus Council
Annual Report of the Chief Social Work Officer 2014 – 2015

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INTRODUCTION

The role of Angus Council's social work services is to support, care for and protect people by providing or purchasing services designed to promote the dignity, safety and independence of people who use these services, and to contribute to community safety by reducing re-offending. Angus Council has a statutory duty to provide social work services 24 hours each day of the year and these services include the provision of support and protection to individuals from birth to end of life. This duty requires social workers to assess need and risk and to ensure appropriate services are delivered to meet the identified needs and manage risk. Where appropriate, services are delivered in partnership with a range of stakeholders.

Section 5 (i) of the Social Work (Scotland) Act 1968, as amended by Section 45 of the Local Government, (Scotland) Act 1994, requires every local authority to appoint a professionally qualified Chief Social Work Officer (CSWO). The particular qualifications are set down in regulations and require that the post holder is a qualified social worker registered with the Scottish Social Services Council. This is one of a number of statutory requirements in relation to the post holder's roles or duties with which local authorities must comply. National guidance requires that the CSWO reports to elected members on an annual basis. This report is the first report to elected members following the guidance issued last year by the Chief Social Work Advisor to the Scottish Government. The Chief Social Work Officers report for 2012/13 and 13/14 were integrated into the Annual Evaluation report for the People Directorate. However with the development of Health and Social Care Integration it is appropriate that a separate report with a focus on assurance covering all social work services, including those that will come under the responsibility of the Integration Joint Board (IJB), is provided to elected members.

The overall objective of the CSWO post is to ensure the provision of effective, professional advice to local authorities, including elected members and officers, in the authority's provision of social work services. The post assists authorities in understanding the complexities of social work service commissioning and provision, including particular issues such as corporate parenting, child protection, adult protection and the management of high risk offenders. The CSWO is responsible for the professional governance of the following core social work functions:

- assessment of the needs of individuals and families;
- identification of resources to meet assessed needs;
- activity to ensure the protection of children and adults at risk;
- management of assessed risks;
- planning and review of care to ensure that services continue to meet needs appropriately;
- provision of a range of support services to promote independent living in their own homes for frail or vulnerable people;
- provision of substitute care for children and adults of all ages who are not able to live safely in their own homes, families or communities;
- the fulfilment of mental health officer functions;
- recommendations to courts, hearings and tribunals regarding actions necessary to ensure the safety and wellbeing of individuals;
- supervision of community disposals for individuals convicted of offences and the management of risk posed by known offenders; and

- promotion of social inclusion and social justice.

The CSWO has a responsibility to report directly to elected members and the Chief Executive any significant, serious or immediate risks or concerns arising from his or her statutory responsibilities. The CSWO is required to ensure that appropriate learning and development opportunities are in place to support staff to develop the required skills for the complex and demanding tasks that they undertake. Additionally there are a number of specific duties and decisions that relate primarily to the curtailment of individual freedom and the protection of both individuals and the public, which must be made either by the CSWO or delegated to a professionally qualified social worker.

1. ANGUS

Angus is an area of outstanding natural beauty located on the north east coast of Scotland with a mix of highlands, fertile valleys, rugged coastline and historic towns and villages. Angus has a population of around 116,000. The majority of people live in the burghs of Arbroath, Brechin, Carnoustie, Forfar, Kirriemuir, Monifieth and Montrose. Angus is however also an area of contrasts, with high levels of both prosperity and social need. The need for social work services in Angus is diverse and wide ranging. In common with all other local authorities this demand is increasing year on year. More people are living with a disability now than in the past. Longer life expectancy and improved medical treatments are increasing demands on services as more people are requiring support to manage long term health problems and increased frailty. Children and young people are surviving and living longer with more complex needs. The projected increase in demand is accompanied with an increase in complexity of needs. This trend is being compounded by wider issues such as social disadvantage, poverty, neglect, crime and substance misuse.

The creation of the People Directorate is part of Angus Council's response to these challenges, as is the integration of Adult Health and Social Care. These structural improvements need to deliver changes to the way that services are delivered in the future so that services are focused on early intervention and prevention whilst at the same time ensuring that interventions are based on assessed need and professional judgement with resources targeted at those most in need.

2. PARTNERSHIP STRUCTURES/GOVERNANCE ARRANGEMENTS

2.1 Governance Arrangements

The governance arrangements for social work services are integrated into the management arrangements for the People Directorate. The Strategic Director for People Services has a team of 4 Heads of Service for Children and Young People, Schools and Learning, Quality and Performance and Adult Care that are responsible for overseeing the delivery of any social work services within their area. All managers of social work services have both operational management and professional leadership responsibilities for their staff. Access to alternative professional supervision is made available for staff that may have a manager from a differing professional background.

The role of the Chief Social Work Officer lies with the Head of Children and Young People Services. The CSWO has direct access to the Chief Executive, managers and frontline practitioners where necessary. The CSWO also has direct access to elected members in relation to professional social work issues.

The CSWO is required to ensure the provision of appropriate professional advice in the discharge of the local authority's statutory social work duties. This is fulfilled by the CSWO:

- Participating as a member of Angus Council's Corporate Management Team and contributing directly to policy development and financial and budgetary decision making;
- Reporting to the Strategic Director for People Services and to the Chief Executive in relation to Social Work matters;
- Advising Elected Members appropriately on Social Work matters;
- Providing reports on Social Work matters to appropriate Committees;
- Contributing to the Angus Community Planning Partnership arrangements.
- Contributing to the Angus Community Health Partnership governance arrangements through attendance at the CHP Board and the IJB;
- Attending the Tayside Community Justice Authority; and
- Participating in the Angus Executive Group for Public Protection.

The Committee Structure within Angus means that matters relating to social work are considered by both the Children and Learning Committee and the Social Work and Health Committee. The Chief Social Work Officer reports to both these Committee as appropriate.

2.2 Partnership Structures

Robust partnership arrangements are integral to the delivery of effective social work services. Within Angus all our services are developed and delivered within the overarching priorities of the Community Plan. The CSWO attends the Angus Community Planning Partnership, the Children's Services and Learning Partnership and the Community Safety Partnership (Strategy Group). In addition the CSWO is a member of the Shadow Integration Joint Board for Health and Social Care. <http://www.angus.org.uk/tpg.cfm/>

Key partnership activities in the delivery of social work services include:

2.2.1 Health and Social Care Integration

In April 2015 the Angus Health and Social Care Shadow Integration Joint Board (IJB) was established. The work of the Board is supported by the Chief Officer for integration. It is anticipated that the Board will be fully constituted in the autumn of 2015.

A Tayside Clinical, Care and Professional Governance framework has been developed and approved for use by the Shadow IJB. This sets out the role of the Chief Social Work Officer on the Board and in the governance of the delivery of social work services that are included in the scheme of delegation. The Council's scheme of delegation is also currently being reviewed to clearly set out delegated authority arrangements for the Strategic Director for People Services, the IJB Chief Officer and the Chief Social Work Officer.

Health and social care integration, as well as the significant demands made on officer and member time, presents specific risks for the Council. The Angus Health and Social Care Partnership will be a distinct legal body and as such there will be no capacity for Angus Council to independently sanction or veto decisions made by the Partnership. However Angus Council will, with NHS Tayside, remain jointly accountable for the actions of the Partnership and the Council will remain fully liable for the delivery of its statutory duties. Work is currently being undertaken to address these risks to ensure that democratic accountability and adequate strategic and operational control is retained by the Council.

2.2.2 Community Justice Authority

Criminal Justice Social Work Services in Angus are currently delivered within the context of the Tayside Community Justice Authority and the Tayside Criminal Justice Social Work Partnership. The CSWO and the interim Head of Adult Care are officer representatives on the Tayside Community Justice Authority. Angus Council is also a partner in the Tayside Criminal Justice Social Work Partnership which brings together criminal justice social work services from Angus, Dundee and Perth and Kinross to promote a standardised approach to the delivery of services and enhance economies of scale through shared resources. In May 2015 the Scottish Government introduced the Community Justice (Scotland) Bill which provision for the dis-establishment Community Justice Authorities *and* the development of a new model for the provision of criminal justice services based on local delivery.

2.2.3 Public Protection

Within Angus there are well develop partnership arrangements in place through the Executive Group for Public Protection and the respective Adult and Child Protection Committees which oversee the effectiveness and development of child and adult protection. In addition there are also well established MAPPA (Multi Agency Public Protection Arrangements) arrangements for the management and supervision of high risk offenders in the community. These arrangements have been the subject of separate reports to members. <http://www.aapc.org.uk>, <http://www.anguschildprotectioncommittee.org.uk>

2.2.4 Alcohol and Drug Partnership

Established under national guidance, the Angus Alcohol and Drug partnership comprises senior representatives from statutory and voluntary sector organizations with the remit of ensuring the delivery of key outcomes to address substance misuse in Angus. The Angus Alcohol and Drug partnership is currently chaired by a voluntary sector representative. The Chief Social Work Officer is the vice chair. The Alcohol and Drug partnership is required to produce an annual report for the Scottish government. <http://www.angusadp.org.uk/>

2.2.5 Partnership with Service Users, Carers and the Third Sector

The Angus Community Plan and Single Outcome Agreement details arrangements for engaging and involving users, carers, communities and the third sector, as partners in service development and delivery. <http://www.angus.org.uk/pdfs/communityplans/AngusCommunityPlanandSingleOutcomeAgreement2013-2016.pdf/>

3. SOCIAL SERVICE LANDSCAPE/MARKET

As noted previously Angus is an area of contrasts, with high levels of both prosperity and social need. Alongside areas of affluence there are areas of poverty and deprivation with evidence of significant inequalities. The Angus Community Planning Partnership has identified five priorities that will help achieve the vision of '**Angus is a place where a first class quality of life can be enjoyed by all**', these are:

- Prosperous and Fair
- Learning and Supportive
- Safe and Strong
- Caring and Healthy
- Sustainable

There are in place a number of frameworks and action plans to promote economic development and address inequality generally, and health inequality in particular.

Health inequality, in the sense of more years of ill health and earlier death, represents perhaps the most severe effect of inequality on individuals. Reducing it is a key priority for Angus. The Tayside Health Equity Strategy 'Communities in Control', which aims to achieve health equity within a generation, is an important framework for the partnership.

The impact of welfare reform has been felt in Angus. Substantial changes and reduction in eligibility for, and levels of, welfare benefits have had serious implications for Angus residents. Whilst it is difficult to quantify the scale of hardship resulting from these changes they have led to, and will continue to lead to, increased need for benefits advice and advocacy services, money management and debt advice, access to credit, food banks, furniture initiatives, and increased demand on health, social work and housing, services.

The pensionable age population in Angus is expected to see a rise of 31.4% by 2033, most notably in the over 75yrs age group, with only a 2.2% increase in the working age population during the same period. This demographic picture presents service delivery challenges, most notable in increased demands for services and workforce availability. The rural nature of Angus has also presented some challenges in recruiting a suitably qualified workforce to ensure the effective delivery of social work services.

Like other areas in Scotland, Angus faces major social and health challenges in relation to substance misuse. Drug and alcohol dependency is linked to a range of negative outcomes for individuals, families and communities, impacting on health and well-being, poverty, crime, abuse, anti-social behaviour, unemployment, homelessness and mental health. The pressure this creates on public services makes tackling this issue one of Angus' top priorities. Domestic abuse is another of Angus' key areas for priority action. Drug and alcohol misuse, domestic abuse and parental mental health problems are factors in the majority of cases of children requiring to be looked after away from home or who are registered as requiring protection.

Increases in public expectations, underpinned by developing policy and legislation, require whole system changes in social care service delivery. The introduction of self-directed support will see transformational change in the shape of both services and the relationship between service providers and individuals, shifting the balance of power and control towards the individual, and increasing expectations in terms of flexibility, responsiveness, quality and value for money. The introduction of Self-Directed Support has highlighted the need to stimulate the local social care market to respond to the changing needs and aspirations of the people of Angus.

4. FINANCE

The financial environment for local government continues to be challenging with a continued drive to reduce the size of the public sector.

In real terms spend on social work services in Angus has moved from £65m in 2005/06 to £74m in 2012/13. The gross spend on social work services has increased by 14% over these 8 years however over the same time period the total spend across Scotland has risen by 17%.* The increase in social work spend reflect increases in demands and demographic, a range of additional duties and inflationary increases. (Social Work Expenditure and Activity 2005/2006 – 2012/13, Scottish government May 2014)

In terms of spend per head of population Angus is 22 out of 32 local authorities, possibly reflecting the more positive social economic situation in Angus. However in terms of the split in spend between adult care and children services it is concerning to note that there has

been a shift in resources from children's services to adult care contrary to the national picture. As with any statistical information this needs to be seen in light of the context within which the services are operating however it is nevertheless essential that we seek to get the appropriate balance of services across these care groups.

Historically additional funding has been provided year on year for learning disability services to meet the needs of young people with complex needs moving from children's services into adult care although in April 2015 additional resources were also provided for children's services to meet the increasing child protection demands. Within older persons service there has been significant investment in enablement services the results of which are beginning to be seen in a small reduction in the use of residential care for the elderly.

The integration of early years and ASN service with children and family services has allowed closer working and investment in and around early intervention and prevention within children services. The Dartington wellbeing research undertaken in Angus in Sept 2014 will allow more detailed plans to be developed to shift resources to the areas where they will maximise outcomes (See Section 5.1)

Whilst Angus performs well in supporting children and young people to remain living at home or where this is not possible, to use alternative family placements rather than residential care this has a consequence of pushing up the average cost per head of population for looked after children. It also means that only those with the most complex needs move to residential care again increasing the average cost of such placements.

Angus Council, like all other local authorities, are facing significant financial challenges. A series of major service reviews have been initiated, as part of the Transforming Angus agenda, with a view to identifying future savings. One such review is "Help to live at home". The outline of this review is likely to have significant implications for how the council delivers care at home in the future.

5. PERFORMANCE

Angus Council reports statutory and local performance indicators through the Council's Annual Performance Report. This is supplemented at a directorate level by an Annual Performance Report 2015 and quarterly updates to elected members. Reference is made to the People Directorate annual performance report 2015/16 that sets out in detail performance in relation to social work services in Angus.

http://www.angus.gov.uk/meetings/committee/22/social_work_and_health

The outcomes in the Angus Single Outcome Agreement most directly linked to social work services are:

COMMUNITIES THAT ARE LEARNING AND SUPPORTIVE

3. Our children and young people are confident individuals, effective contributors, successful learners and responsible citizens
4. Adults maximise their potential through learning opportunities
5. Individuals and families are involved in decisions which affect them
6. Individuals are involved in their communities

COMMUNITIES THAT ARE SAFE AND STRONG

7. Our communities are safe, secure and vibrant

COMMUNITIES THAT ARE CARING AND HEALTHY

8. We have improved the health and wellbeing of our people and inequalities are reduced

9. Individuals are supported in their own communities with good quality services

During 2014/15 the Council has continued to provide a range of services in pursuit of the above outcomes. Specific issues of note include:

5.1 Children and Family Services

- In 2014/15 the department received 1969 referrals concerning children and young people. Of these 443 required social work intervention with 91% receiving a response and support within 24hrs.
- The numbers of looked after and accommodated children and young people remain stable with 255 looked after and accommodated children on 31st March 2015 compared to 257 at the same date in 2014.
- The percentage of children looked after away from home in family based placements (95%) reflects the strategy of supporting children and young people to remain living at home or in family placements where this is appropriate.
- The service continues to perform well in reviewing the care of looked after children with 90% of reviews being held within the statutory timescales.
- There were 385 child protection investigations in 2014/15 - a decrease from 433 in 2013/14, 70% of which were concluded within 7 days (the standard introduced by the National Guidance for Child Protection).
- 67% of children are considered at a Child Protection Case Conference within 14 days of the investigation being concluded. 89% of children on the child protection register have a child protection plan formulated within 14 days of registration. It should be noted that due to the complexity of the issues involved it is appropriate that some investigations take longer than 7 days to complete.
- During 2014/15, 87% of children named on the Child Protection Register were visited at home minimally every 2 weeks. Where this did not happen alternative arrangements were made to ensure that the specific children were safe.
- A comprehensive audit of cases has highlighted good outcomes for children known to the service.

Key achievements over the past year include:

- A full review of Child Protection Operational Instructions in light of local and national developments.
- The integration of Youth Justice Services with wider support services.
- Further development of processes for the identification and assessment of risks to unborn babies.
- The development of care leaver housing protocol meetings and an agreed protocol with Job Centre Plus to improve supports available to care leavers.
- A review of People Directorate support services for children and families with new integrated Family Support Teams in place from 1 April 2015.
- A Corporate Parenting Board has been established bringing together Elected Members, Senior Managers and looked after children and young people.
- Adapting the Angus wellbeing web so that it can be used by children and young people with additional support needs through the use of symbols.

The Dartington wellbeing research undertaken in Angus in September 2014 will allow more detailed plans to be developed to shift resources to the areas where they will produce maximum benefit. Priorities for future development are: Poor school engagement, early social and emotional development and early initiation of substance misuse.

5.2 Adult Care

- The proportion of older people living in care homes continues to reduce, and exceed local targets (from 23.2% in 2012/13 to 22.3% in 13/14).
- The cost per hour of home care in Angus continues to increase and exceed benchmark figures (from £28.31 in 2011/12 to £31.08 in 2012/13).
- Performance in relation to the prevention of admission to hospital has seen a decline over the past two years. In partnership with health colleagues, we are reviewing the way this service functions.
- Performance in respect of the percentage of Community Payback Orders with condition of supervision successfully completed at termination has remained static with the figure being 72.9% compared to 73% in 2013/14. It is notable that the actual number of orders completed (182 compared to 62 the previous year) is significantly higher although the percentage remains almost exactly the same.
- Almost three quarters of every Community Payback Order issued in Angus is successfully completed.
- 100% (66) of Guardianship application requests during 2014/15 were completed within the national standard of 28 days.
- During 2014/15, 96% of LA welfare guardian supervisions for people with learning disabilities took place within the required 6 monthly timescale (25 people).
- The percentage of people with a learning disability being supported to live in their own accommodation as at April 2015 is 14.37%. (77 out of 536 people).
- 1,003 hours of daytime respite and 2,061 nights of respite have been provided during 2014/15.

Key achievements in adult care services over the past year include:

- A Chief Officer for Health and Social Care Integration has been appointed.
- The shadow Integration Joint Board has been established.
- A draft Integration scheme has been developed and submitted to the Scottish Government for approval.
- Ongoing implementation of Self Directed Support legislation.
- A review of help to live at home, as part of the Transforming Angus programme, has been initiated.

6. STATUTORY FUNCTIONS

There are a number of duties and decisions that must be made by either the CSWO or by a professionally qualified social worker to whom the responsibility has been delegated by the CSWO, and for which the latter remains accountable. These relate primarily to the restriction of individual freedom and the protection of both individuals and the public. This section of this report details these key areas of responsibility.

6.1 Children

6.1.1 Child Protection

Increasingly there are a number of children in need of care and protection. This increase is strongly linked to neglect and lack of parental care and is often associated with parental misuse of drugs and alcohol and domestic abuse. Social work services continue to work

with partners, under the auspices of the Child Protection Committee, to ensure that appropriate arrangements are in place to protect children identified as being at risk.

As at 31st March 2015, there were 67 children on the Angus Child Protection Register, a decrease of 39% (110) from the previous year. On average throughout 2014/15 there were 98.5 children on the Angus Child Protection Register. This figure gives a more accurate reflection of trend. On average for 2013/14 there were 86.9 children on the register therefore showing an **overall increase in the year of 13%**.

During 2014/2015 the following child protection activity was undertaken;

- 587 children were the subject of a child protection referral (increase of 32%);
- 385 children were subject to child protection investigations (decrease of 14%);
- 197 children were subject to an initial child protection case conference (increase of 2%);
- No child protection orders were received (decrease from 20 in 2014/15 and 7 in 2012/2013);
- In Angus in 2013/14, 5.9 of every 1000 children under 16 were subject to child protection registration. This figure represents the highest in Scotland.

The following information gives an indication of the quality of child protection work within the directorate;

- 91% of general referrals concerning children and young people are screened and responded to within 24 hours;
- 100% of CP referrals are screened and responded to within 24 hours;
- 67.3% of CP investigations are completed within 7 days (It should be noted that due to the complexity of the issues involved it is appropriate that some investigations take longer than 7 days to complete);
- 89% of child protection plans that address identified concerns are put in place within 14 days;
- 87% children on the child protection register are visited in their own homes on a fortnightly basis.

The number of child protection referrals has increased significantly over the past five years although figures show a decreasing trend from September 2014. This possibly reflects an increase in the awareness of child protection through partner agencies due to the child protection training delivered at a local level to professionals within these partner agencies. Work is being undertaken in a number of areas to ensure that children access services at an early stage to avoid difficulties escalating into child protection concerns.

As part of its self-evaluation plan the Angus Child protection Committee co-ordinated three stages of case file reading during November and December 2014. The outcomes of this file reading showed that children and young people are well protected when CP concerns are identified. However it also highlighted that there was a need for a clearer focus on outcomes and that there remains a need to focus on early intervention.

6.1.2 Corporate Parenting

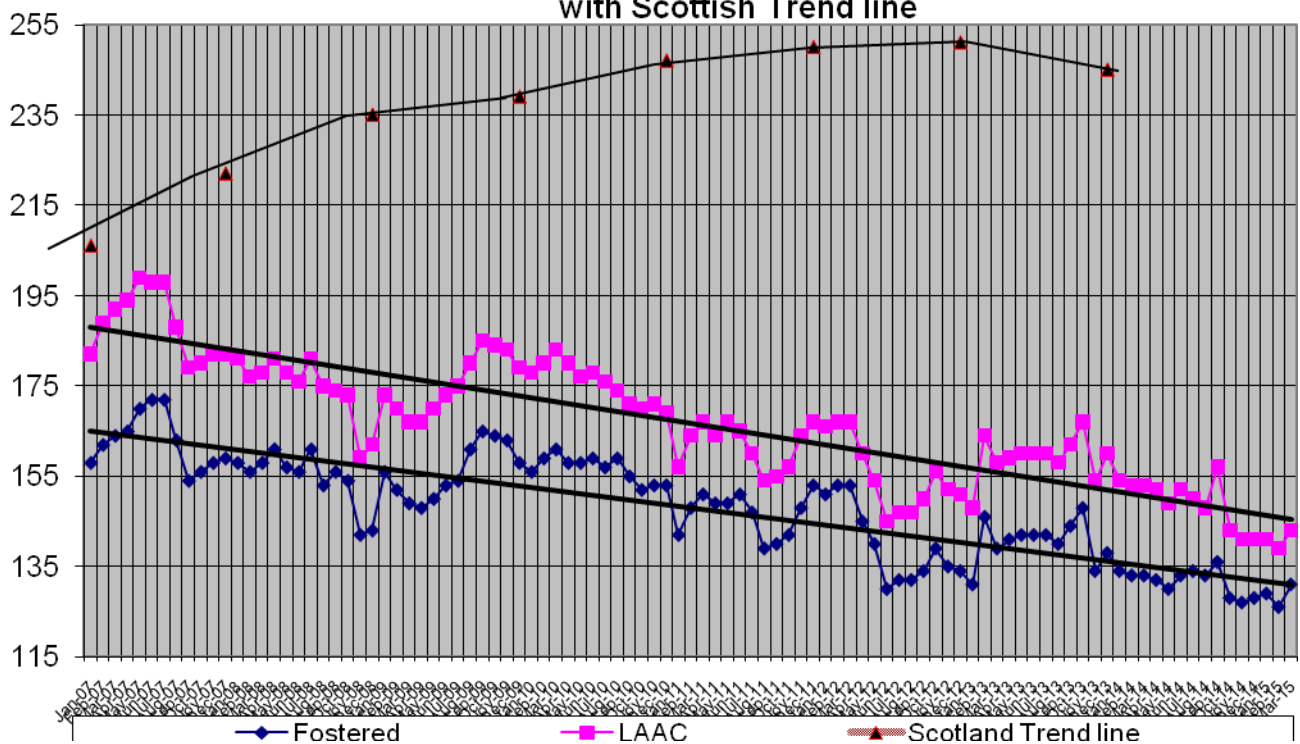
There are a number of reasons why a child may be looked after by a local authority. Most often it is because the child has been abused or neglected by the parents or those with parental responsibility; or the child may have committed an offence. Across Scotland the number of looked after children has increased since 2001. At 31 July 2014 it was at its

highest level since 1981. In Angus, however, the focus on early intervention and prevention has helped reduce the number of children in Angus looked after away from home year on year since from 2007. The chart below details the numbers of children and young people in Angus looked after as at 31 March 2014 in Angus:

	31 Mar 15	31 Mar 14
Total No of LAC	255	257
Home	82	73
Friends/Relatives	32	33
Foster Care	115	122
Adoption	13	9
Residential	13	20

As at 31 March 2015, 95% of our looked after children were in community placements. This placed the Council in the top quartile of Scottish local authorities. It is not always possible, nor in the best interests of the child, to place the child within the local community, however efforts are made to maintain children within Angus. In 2014/15 we placed 95% of our looked after children within the boundaries of Angus.

Angus Children Fostered & Accommodated 2007-2015 Comparison with Scottish Trend line



Kinship Care/Residence Orders

Where a child or young person cannot continue living with their immediate family the first priority for the council is to explore whether they can live with family or friends. In order to support such placements the council operates both a Kinship Carer scheme and a Residence Allowance scheme. As at 31st March 2015 Angus Council was supporting 32 children in kinship care placements and 51 children through residence allowances. A priority for the coming year is to review these schemes in light of the new Children and Young People (Scotland) Act 2014.

Emergency Placement of Children Subject to Statutory Provisions

Children's Hearings may impose conditions of residence on children subject to supervision requirements, and only a children's hearing may vary such conditions. However, if a child, who is required to reside at a specified place must be moved in an emergency, the CSWO may authorise the move. Between April 2014 and March 2015, 22 placements were terminated in an emergency. Fourteen of these placements breakdowns were terminated at the request of the carers and 8 at the request of the child or young person.

Angus Adoption Agency and Fostering Panel 2013/ 2014

The Angus Council Adoption Agency is responsible for all of the council's functions and duties in respect of adoption and permanence. Similarly the Angus Fostering Panel is responsible for the approval and review of all foster carers within Angus Council.

The CSWO is the Agency Decision maker in terms of Fostering and Permanence (Adoption) decisions. This role is delegated to the Head of Adult Care Services to bring a degree of independence from the CSWO's role as Head of Children and Young People Services. The Council's Adoption Agency Annual report sets out detailed information on the adoption and fostering activity over the past year.

<http://archive.angus.gov.uk/ccmeetings/reports-committee2014/childrenlearning/223App.pdf>

The level of business undertaken is summarised:

- 43 panel meetings dealt with 163 cases, contrasting with the average over the last 10 years of 178 cases per year.
- 12 children were registered in 2013/2014 as in need of permanence
- 12 children were matched with adoptive or permanent families
- 13 couples were approved as prospective adoptive families

Private Fostering

Private fostering exists where parents make arrangements with people who are not close relatives and not approved foster carers, to care for their children for 28 days or longer. Local authorities are required to assess, approve and support such arrangements. A public information leaflet is available in council offices and other public venues, outlining parents and carers' responsibilities in respect of private fostering. In Angus there is currently 1 approved private fostering arrangement in place. It is recognised that there may be other arrangements that are not known to the authority and efforts will continue to raise public awareness of this issue.

Secure Accommodation

Children are placed in secure care where there is clear evidence that they present a real and significant risk to themselves or other persons. During 2014/2015 there were 4 children detained in secure accommodation for an average of 115 days each. This number and average length of stay is comparable with previous years. The development of the Council's new residential care facility, Bramble cottages, should see a reduction in the use

of secure care as the council becomes more able to look after young people with such specialist needs in the community.

6.2 Criminal Justice Social Work

Criminal Justice Social Work services play a key role in the management of risk posed by known offenders and the supervision of community disposals for individuals convicted of offences.

6.2.1 Offenders in the community subject to statutory supervision

Offenders in the community subject to statutory supervision are as follows;

- 6 assessed as very high or high risk of sexual violence
- 208 Community Payback Orders (CPO) with supervision requirement (160 in the previous year)
- 311 CPOs with Unpaid Work (UPW) requirement (317 in the previous year)
- 10 equivalent orders made under previous legislation (compared to 11 in the previous year)
- 1 Drug Treatment and Testing Order (3 in the previous year)
- 12 Restriction of Liberty Orders (23 in the previous year)
- 187 Structured Deferred Sentences (SDS)(116 in the previous year), including 151 High Tariff SDS (88 in the previous year)
- 5 Bail Supervision Orders (16 in the previous year)
- 19 Statutory Supervision e.g. life licence, parole, extended sentences, supervised release orders etc. (to 6 in the previous year)

As at 31/03/2015, there were a further 48 offenders in prison who will be subject to statutory supervision on release. Of these 10 have been assessed as very high or high risk of sexual violence.

This represents notable increases in the number of CPO's and the use of High Tariff Structured Deferred Sentences. These have been used to great effect by the Glen Isla team and this accounts for some of the increase however it is our intention to revisit the guidance around recommendation of High Tariff SDS given the resources involved.

6.2.2 MAPPA and MARAC

Multi-Agency Public Protection Arrangements (MAPPA) are defined in legislation and national guidance, and currently apply to the management of all registered sex offenders. These arrangements are well established in Angus and ensure effective joint management for this group of offenders. In Angus MAPPA currently (as at 18/6/15) manages 127 sex offenders (125 registered and 2 unregistered). This represents an increase of 35 for last year. In addition to this there are currently 18 registered sex offenders in custody. In Tayside there are currently 470 sex offenders managed by MAPPA.

Within Angus there are also well developed Multi-Agency Risk Assessment Conference (MARAC) arrangements in places. These aim to ensure the sharing of information to increase the safety, health and well-being of victims/survivors.

6.3 Adults

6.3.1 Mental Health

The Mental Health (Care and Treatment) (Scotland) Act 2003 (MHCTA) places responsibilities on social work in relation to compulsory detention in hospital, or compulsory treatment in the community for people with a mental disorder. Mental Health Officers (MHOs) undertake a range of statutory duties in terms of making and renewing orders, undertaking social circumstance reports and providing reports to the courts and mental health tribunals. These activities relate to the compulsory care and treatment of individuals. In addition MHOs provide advice and support to the wider department in relation to the complex interaction of mental health and incapacity legislation, and in adult protection cases where mental disorder is a feature.

The following activity took place in between 1 June 2014-31 May 2015

Mental Health (Care & Treatment) (Scotland) Act 2003

Orders to extend and/or vary CTOs	45
Emergency detention in hospital	32
Short term detention in hospital	76
Assessment orders	5
Treatment Orders	0
Transfer for Treatment Direction	0

There are a much smaller number of compulsory measures that relate to people who are mentally unwell and who also commit offences. The legislative requirements relating to these are critical and complex. The figures for individuals subject to these measures are below;

Mentally Disordered Offenders – Mental Health (Care & Treatment) (Scotland) Act 2003/ Criminal Procedures Act (Scotland) 1995

Number of Compulsion orders for which the local authority has responsibility	5
Number of compulsion orders with restriction for which the local authority has responsibility	6
Number of Treatment Orders for which the local authority has responsibility	1
Number of Assessment Orders for which the local authority has responsibility	0
Number of Supervision/ Treatment Orders for which local authority has responsibility	0

Total	12
Compulsory treatment orders (CTO) applications	34

6.3.2 Adults with Incapacity

The Adults with Incapacity (Scotland) Act 2000 introduced a system for safeguarding the welfare and managing the finances and property of adults (age 16 and over) who do not have capacity to act or to make decisions for themselves because of mental disorder or inability to communicate due to a physical condition. It allows other people to make decisions on behalf of these adults, subject to safeguards.

Welfare guardianship orders are used predominately for older people or people with learning disabilities. Often they are used to provide care to which the adult cannot consent. Alternatively, welfare guardianship orders can be used to protect the adult from others who put them at risk. The majority of welfare guardianship orders are 'private', whereby an adult with a relevant interest in the subject of the order, and who has no statutory role, is appointed as guardian. All such cases must be supervised by a qualified officer of the local authority. Where there is no such relevant adult the welfare guardianship orders name the CSWO as guardian.

Financial guardianship orders are generally used where the adult; a) has substantial capital and b) cannot manage their estate or is at risk of exploitation by others. Financial guardians cannot be officers of the council. The majority of financial guardians will be family members or lawyers. The increasing use of guardianship creates a particular pressure, not just on MHOs, but also on care management for learning and physical disability, and older people.

The following activity took place in between 1 June 2014- 31 May 2015:

Number of guardianship applications	66
Number of local authority requests for an Intervention Order	1
Number of active guardianship cases	179
Number of private guardianships supervised by local authority	115
Number of guardianships held by CSWO	64
Number of guardianships relating to older people/ adult care	24 (CSWO) + 31 (Private) = 55
Number of guardianships relating to learning disabilities	27 (CSWO) + 60 (Private) = 87
Number of guardianships relating to mental health	13 (CSWO) + 21 (Private) = 34
Number of guardianship relating to Alcohol/ Drug/ Blood Borne Virus team	0

Number of guardianship relating to Children With Disabilities team	0 (CSWO) + 3 (Private) = 3
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Year on year comparison of the activity level around mental health services shows an overall increase in Mental Health Officer activity. It is the responsibility of the Chief Social Work Officer to appoint and ensure that there are sufficient mental health officers to fulfil the Councils statutory duties. Given the difficulties appointing and training sufficient mental health officers an enhance rate of pay (an additional 1 increment) has been agreed for Mental Health Officers with a view to improving recruitment and retention.

6.3.3 Adult Support and Protection

The Adult Support and Protection (Scotland) Act 2007 placed a duty on the local authority to look into the circumstances of adults at risk and to protect adults who, because of a disability, health condition or age are less able to protect themselves or their own interests. The Act also gives powers to intervene where an adult is at risk of serious harm, via protection orders, which are applied for through the court. The following activity took place in 2014/2015:

- 372 adult protection referrals (compared to 345 in 2013/14)
- 56 investigations (compared to 58 in 2013/14)
- 34 initial adult protection case conference (compared to 37 in 2013/14)
- 41 review adult protection case conferences (compared to 55 in 2013/14)
- No protection orders (compared to 1 in 2013/14)

Further information regarding adult support and protection can be found in the Adult Protection Committee’s annual report available at www.aapc.org.uk/.

6.4 Significant case reviews

A particular responsibility of the CSWO is to ensure that significant case reviews are undertaken into all critical incidents either resulting in, or which may have resulted in, death or serious harm. During the course of 2014/15 no significant case reviews were undertaken.

7. CONTINUOUS IMPROVEMENT

7.1 Self Evaluation

A wide variety of self-evaluation activity with a view to ensuring continuous improvements is undertaken across the range of social work services. In general these follow the Care Inspectorate Performance Improvement model. The outcomes from self-evaluation activity feeds into the annual Service Improvement Plan for the relevant service areas which in turn feed into the Service Improvement Plan for the Directorate. Services also contribute to multi-agency self-evaluation activity undertaken under the auspices of the Community Planning Partnership as part of the Integrated Children’s Service Planning and integrated Health and Social Care Planning. The Children and Learning Executive group has in place a rolling programme of self-evaluation against the Care Inspectorate Quality Indicators. As Health and Social Care integration is developed there is a need to ensure that self-evaluation is an integral part of any new arrangements.

7.2 External Scrutiny, Regulation and Inspection

A range of social care services are subject to external regulation and inspection by the Care Inspectorate. These include:

- care at home;
- housing support;
- day services - adult;
- day services – older people;
- adult placement;
- fostering & adoption;
- residential adult services; and
- residential children's services.

7.2.1 Angus Council Regulated Services

The services provided by Angus consistently perform well against the national standards when inspected (Appendix 1). Twelve council social work services were inspected by the Care Inspectorate between April 2013 and March 2014. Each service is graded in up to 4 areas; quality of care and support; quality of environment; quality of staffing; and quality of management and leadership. From an analysis of the grades no significant issues have been identified, with each inspection scoring a good or better. The average score being 4.7 out of 6*.

7.2.2 Wider regulated services in Angus

Service provided by both the third and private sectors in Angus also performs well against the national care standards. Out of the 46 regulated care services in Angus, the average score was 4.4/6*. Of the 96 preschool child care and learning services, including child minders, the average score was 4.6/6*.

*(Excellent – 6, Very Good – 5, Good -4, Adequate – 3, Weak – 2, poor -1)

7.2.3 Strategic Inspection of Integrated Services for Older People.

The Care Inspectorate also undertakes strategic inspections of social work services. In 2013/14 health and social care services for older people were subject to such an inspection. The inspection report identifies many positive aspects of the services provided to older people in Angus. The positive outcomes for the majority of service users are highlighted, along with high levels of satisfaction with the services provided, good partnership working in localities and positive engagement with staff. There are areas for improvement noted in the report, and plans are in place address these. The assessments contained in the report provide a very positive endorsement of our joint provision for older people. A separate report on this inspection was presented to Scrutiny and Audit Committee on 10th March 2015. http://www.angus.gov.uk/meetings/meeting/79/scrutiny_and_audit/

7.3 Commissioned Service

The Council has in place well established systems for monitoring the level and quality of services commissioned from the private and third sector. This includes an identifies lead officer, service level agreements or contracts, and regular monitoring and reporting arrangements (depending on the scale and scope of the services being commissioned).

Details of commissioned services are reported to elected members on an annual basis and authority sought to review or set up service level agreements with providers.

http://www.angus.gov.uk/meetings/meeting/72/children_and_learning

http://www.angus.gov.uk/meetings/meeting/73/social_work_and_health

External placements for children are monitored and reviewed by the Council's Community Assessment and Review Officers. As these officers are arm's lengths from operational delivery of children's service. This provides both scrutiny of the external placement and the in-house assessment and care planning for the child or young person.

External placements for adults, including older persons, are monitored and reviewed by the case responsible care manager. Consideration is being given to the need to establish an arm's length review services for these placements to mirror the arrangements in place within children's services.

Where there is evidence of poor quality or specific concerns regarding an individual placement these are addressed in liaison with the provider until the quality of the placement is resolved.

7.4 Complaints

Complaints, comments and compliments are recorded on the council's complaints system which provides data on the types of complaints customers make about council services. Complaints relating to social work services are recorded and reported separately due to the statutory requirement to have a Complaints Review Committee. During 2014/15 work has been on-going to merge the social work and corporate complaints processes.

In 2014/15, 8 complaints reached stage 2 of the social work procedure. Of these 4 were referred to the complaints review committee, an increase of 2 from the previous year. A further complaint was referred directly to the Scottish Public sector Ombudsman. The most common reasons for complaint are the delay in responding to enquiries and requests and the treatment or attitude of a staff member. We are in the process of establishing systems to ensure we learn from complaints and share that learning across the Directorate where appropriate.

8. PLANNING FOR CHANGE

8.1 The Strategic Direction for the Development of Children's Services in Angus

Key outcomes for children in Angus are detailed in the Angus Single Outcome Agreement and reflect the national Getting it Right For Every Child (GIRFEC) principles. Key strategic priorities for children's services are set out in the Angus Integrated Children's Plan 2013 – 2016. (<http://archive.angus.gov.uk/girfec/ICPlan-17-03-14.pdf>)

Key drivers within children's services at this time include:

- Ensuring that children have access to positive early years experiences that promote their social and emotional development
- Ensuring that children are protected and supported to live within their own home
- Ensuring children and young people, including looked after children and children with additional support needs, are well supported within their own school

- Ensuring that our processes are fit for purpose and promote positive outcomes for all children and young people.
- Ensuring that every child and young person has the best possible start in life.

Central to developing services is well developed information in respect of the needs of children and young people and on the impact of services on outcomes. Angus Council has worked in Partnership with the Scottish Government and Dartington Social Research Unit on a Children's Wellbeing Research Project. This project is providing detailed and reliable information about children's wellbeing at different ages and stages of development. The information from the report is being used to inform the development of the revised Children's Services Plan in Angus.

8.2 Adult Care

As noted previously a key task for the IJB is the development of the strategic plan for the Partnership that will set out the vision, priorities and outcomes for the Partnership and will in effect be the commissioning and delivery mechanism for health and community care services within Angus.

8.2.1 Learning Disability Services

In line with the recommendations of '*The Same as You?*' review, the redesign of learning disability services plans to shift the balance of care from resource centre based models of care to more community based support. Resource centres have developed approaches of supporting service users to access their own communities, to enable them to move effectively into education support and leisure and recreation.

8.2.2 Substance Misuse Services

The Angus Alcohol and Drugs Partnership Strategy for 2013 – 2016 sets out the high level direction and priorities of the Angus ADP namely:

- Closer Integration of Services:
- Recovery:
- Children Affected by Parental Substance Misuse.
- Prevention
- Alcohol
- Outcomes, Performance and Needs Assessment
- Enforcement and Availability

8.3 Autism

A draft Autism Strategy detailing how such services will be developed in Angus has been written in partnership with parents, service users and families. This plan is now in the process of being finalised and will be shared with parents, service users, families and other stakeholders following approval by the Community Planning Partnership.

8.4 Self Directed Support (SDS)

Alongside health and social care integration, self-directed support (SDS) is the biggest change in the delivery of social work services in a generation. Whilst progress in Angus in implementing SDS is advanced compared to other local authority areas, it has not been as

fast would have been wished with fewer than planned assessments having been completed. Progress on implementing SDS with plans as to how to move to full implementation is due to be presented to elected members in September 2015.

9. USER AND CARER INVOLVEMENT

The Angus Community Plan and Single Outcome agreement details arrangements for engaging and involving users, carers and communities engaged as individuals and collectively as partners in service development, planning, delivery and evaluation of services. (<http://www.angus.org.uk/pdfs/communityplans/AngusCommunityPlanandSingleOutcomeAgreement2013-2016.pdf>).

The effective engagement and involvement of communities and service users is at the heart of community planning and the delivery of social work services. The challenge for social work services in Angus is to develop approaches that best suit the circumstances of user groups. The Directorate's engagement strategy sets out the arrangements by which social work services will be designed with and for people and communities so that they reflect local needs and are of the highest possible quality

There is a need to engage with service users in ways that suit them best by utilising a range of methods and activities and by ensuring that staff have a range of skills and experience to design and deliver engagement programmes that suit different needs and outcomes. In practice this means that individual service areas need to have a wide and diverse range of methods for involving service users in planning and developing social work Services.

Some specific examples of consultations undertaken during 14/15 include:

- Consultation with parents whose children were subject to child protection procedures (November 2014). Feedback from this exercise was used to inform the action plan from self-evaluation of practice (case file reading).
- Members of the Adult Mental Health Reference Forum, including service users, carers, third sector providers and statutory providers, were given the opportunity to consider how best to secure service user involvement across the service.
- A questionnaire was sent out to Foster Carers after their Annual Review asking for their views on the process and feedback was given.
- Parent Questionnaires for Looked After Children and Child Protection Case Conferences were issued.

10. WORKFORCE PLANNING/DEVELOPMENT

The provision of high quality, effectively targeted learning and development opportunities continues to be a key driver in achieving improved outcomes for people who use our services. The quality of social work services, irrespective of structural arrangements, is dependent on the confidence and competence of our workforce. At a time of considerable change to professional roles and organisational structures, the leadership role of the CSWO is critical to the development of the current and future social work and social care workforce.

10.1 Social Work and Social Care Workforce Development

All staff within the People Directorate have an obligation to keep themselves up to date with current best practice through involvement in professional learning.

The Directorate workforce development section has continued to offer support for staff development in line with the national, local and departmental priorities.

The specific professional learning activity has included:

- Promoting Excellence Dementia Programme (583 staff members have been trained at level 1, 20 staff are undertaking assessment at level 2; there are now 29 Dementia Champions with a further 19 currently undertaking the Certificate.)
- Newly qualified social work staff orientation
- Coaching & Mentoring – we have staff who are qualified to certificate level in coaching and mentoring
- Open University courses K101/DD101 are supported as routes to further development and to support carer progression for social care roles to social work roles.
- Health and Social Care Academy co-ordination and placement co-ordination
- Supporting Modern Apprenticeships
- Supporting the implementation of GIRFEC
- Supporting the implementation of SDS
- Supporting social work trainees through the Open University BA (Hons) Social Work qualification.

The shadow IJB is now in place and the workforce planning and development activity associated with this agenda now sits with the corporate team who offer organisational development and leadership development support.

As a partner within the Tayforth Learning Network the authority works in partnership with the Higher Educational Establishments that operate within the East of Scotland in the development of practice learning opportunities. As a member of this network Angus Council is required to place around 20 social work student placements each academic year. Pressures on in-house capacity has resulted in a heavy reliance on the use of Independent Practice Teachers and the associated increased use of Link Workers.

The directorate continues to operate a specific recruitment and retention strategy as a local response to the national shortage of qualified Social Workers. This comprises a dedicated recruitment programme, with a guaranteed job interview and extensive post-employment support to maximise recruitment and retention.

In Angus practice governance for social work staff has been supported through:

- The provision of clear practice guidance and operational instructions,
- The development and support of the leadership and management role,
- The use of supervision and management, including the use of standards for supervision and management,
- The use of audit and case review,
- Protecting the Role of the Registered Social Worker in Statutory Interventions.
- The use of self-evaluation and promoting continuous improvement.

10.3 Registration of the Workforce

The following range of staff are required to register with the Scottish Social Services Council (SSSC) and have done so successfully;

- Social Workers
- Social Work students
- Managers of Residential Child Care Services
- Supervisors in Residential child Care Services
- Residential Child Care workers
- Managers of Adult Day Care services
- Managers of Care Home Services for Adults
- Supervisors in Care Home Services for Adults
- Practitioners in Care Home Services for Adults

As registered workers, these staff members are required to comply with the SSSC's 'Code of Practice' that set out the standards and professional conduct and practice required of Social Services Workers. Angus Council, as an employer, is also required to comply with 'The Code of Practice for Employers'.

In Angus we have had a good track record in facilitating access to appropriate SVQ training which facilitates registration. We have developed a partnership approach with Dundee and Angus College to support the delivery of Scottish Vocational Qualifications (SVQs) in Care for staff eligible for registration. We are also building our internal capacity with investment in additional SVQ in Care assessors. This investment will prove invaluable in terms of increasing our capacity to deliver SVQs within the workplace.

10.4 Promoting Social Work Values and Standards

The CSWO also has a duty to ensure social work values and standards. This has been undertaken in a variety of ways most notably through;

- Service Planning
- Workforce Regulation
- Workforce Development
- Inspection & Continuous Improvement Plans
- Statutory Decision Making
- Assessment and Management of Risk
- Consideration of feedback from service users

The vision for social work services is integrated into the wider vision for council services. Staff are encouraged and enabled to participate in the development of service wide plans and in plans for their own areas of service in order to promote wider ownership of this vision.

The **Angus Local Practitioner Forum** brings together frontline practitioners from all fields of practice across the public, private and voluntary sectors and provides a way by which workers are involved in developing practice and influence policy. In addition the different services have established and put in place a range of staff consultation and involvement mechanisms.

11. CHALLENGES FOR THE YEAR AHEAD

The environment in which social work operates reflects the issues faced by our communities and within wider society. Social work services face unprecedented change in the coming years associated with new legislation and policy directions. Specific challenges include:

- **Financial pressures.** We are operating in an increasingly difficult financial climate in which we must strive to deliver services within available budgets whilst promoting and maintaining professional values and standards.
- **Increasing need and public expectations.** We are facing rising public expectations and, in many areas, rising levels of need relating to demographic changes.
- **Legislative changes.** We are facing significant legislative changes, including Self Directed Support, Health and Social Care Integration, the redesign of the Criminal Justice Social Work and the Children's and Young People (Scotland) Act 2014.
- **Delayed discharges.** Angus Council is currently experiencing increased pressure regarding delayed discharges as a symptom of increased demand on provision.
- **Changing how we deliver services.** There is a need to shift the balance of resources across all sectors from reactive responses to proactive early interventions.
- **Implementing and realising the potential of health and social care integration.**
- **Welfare reform.** Due to its incremental nature the full impact of Welfare Reform remains uncertain. There is evidence that the reduction in income has resulted in an increased demand on services including a rise in "discretionary payments".
- **Improving outcomes for looked after children.** The Corporate Parenting Pledge is a clear and succinct statement about the commitments Angus Council and partners make as corporate parents.
- **Self-Directed Support.** Redesigning services to realise the potential and aspirations of Self Directed Support (SDS).
- **The impact of alcohol and drugs on our communities** with implications in respect of not only the individual but also children affected by parental substance misuse, other family members and wider impacts on community safety.
- **Demographic changes** bring resource demands on community health and social care services to meet the needs of very elderly people and people with complex needs who require support to live their lives as independently as possible.

All of the above have the potential to impact on frontline service delivery and a priority must be to continue to support effective frontline delivery of services. Our response to these challenges needs to be focused on achieving positive outcomes for individuals through addressing inequalities in our communities and recognising the interdependence of Social Work and other universal services. The capacity for Social Work to provide an effective contribution to respond to these challenges has been enhanced by the establishment of the People Directorate. This bringing together of universal and targeted services helps remove the barriers that get in the way of providing integrated services so that services can focus on early intervention and prevention.

12. CONCLUSION

As noted at the start of this report the overall objective of the Chief Social Work Officer function is to ensure the provision of effective professional advice to local authorities, including elected members and officers, in the authority's provision of statutory social work duties and to provide professional governance and leadership in the delivery of social work and social care services. This report details the arrangements that are in place within Angus to allow the CSWO to fulfil this role and to offer assurance to elected members as to the governance of statutory social work services in Angus.

In Angus social work services are developed and delivered within the context of the Community Planning Partnership. A wide range of both partnership and single agency self-evaluation activity is undertaken to ensure that services are responsive to the needs of the people who use them and are subject to continuous improvement. There is also evidence from external regulation and scrutiny that care services in Angus are of high quality.

The effective engagement and involvement of communities and service users is at the heart of the delivery of social work services and there are systems in place within Angus for engaging and involving users, carers and communities as partners in the development, planning, delivery and evaluation of services. These arrangements need to be continually developed to ensure their effectiveness, particularly as the council and social work services face difficult decisions in the future about prioritising the use of available resources.

There are well established systems and process in place to ensure that the Council is meeting its statutory duties in the provision of social work services in relation to the assessment, care planning and provision of services to children, young people and vulnerable adults. The CSWO Officer has a range of specific statutory responsibilities, primarily relating to restriction of individual's freedom and the protection of both individuals and the public which must be made either by the CSWO or by a professionally qualified social worker to whom the responsibility has been delegated by the CSWO. The report details a range of information as an assurance as to how these functions are being discharged. The report also details the established systems and process in place to ensure the safety of vulnerable children and the management of those who present risk to others.

It is however recognised that the Council is facing a number of significant challenges in relation to its provision of social work services all of which present risk for the future. Specifically the difficult financial climate and welfare reform poses a risk to the Council's ability to continue to deliver its current range of services whilst promoting and maintaining professional values and standards. There are also risks to the safety and integrity of our current service provision posed by new legislative and policy changes, including Health and Social Care Integration. Such risk needs to be effectively managed into the future.

The work social work staff undertake on behalf of Angus Council is life changing. It enables vulnerable citizens to gain independence, to be safe and to be cared for and contributes to the overall safety and well-being of our communities. Although not often publicly recognised, our staff are skilled, experienced and highly committed to delivering the best possible services to the people in Angus. The continued provision of high quality social work services in Angus is essential if we are to continue to:

- effectively support vulnerable, children, young people and adults;
- promote independence and inclusion;
- protect children and adults at risk; and
- improve outcomes for all the citizens of Angus

The interdependence of social work and other universal services delivered by the Council is, and will continue to be, key to ensuring success.

Tim Armstrong

Chief Social Work Officer, September 2015

Appendix 1- Care inspectorate Grading's 2014/15

Name	Date	Quality of care and Support	Quality of Environment	Quality of staffing	Quality of management and leadership
Accommodation Support MH	14/01/15	VG	Not Assessed	VG	G
Adoption Services	26/02/14	VG	Not Assessed	VG	VG
Fostering Services	30/04/14	VG	Not Assessed	VG	VG
Personal Care and Community Alarm Forfar	23/01/15	VG	Not Assessed	VG	G
Beech Hill House	06/08/14	G	G	G	VG
Klinloch Care Centre	20/11/14	VG	VG	VG	VG
Kinloch Day Care	29/10/14	Excellent	Excellent	VG	VG
Kinnaird Street YPU	15/05/14	VG	VG	VG	G
Seaton Grove	13/02/15	G	G	G	G
Strathmore Centre	23/06/14	G	VG	VG	VG
The Gables	11/04/14	G	G	VG	G
Supported Lodging Scheme	20/02/15	VG	Not Assessed	VG	VG