

**Dundee and Angus Out of Hours Service**  
**Annual Report 2019/2020**

## **1 INTRODUCTION**

This report provides an update to stakeholders on developments in the Out of Hours Service (OOHS) for the period of 1 April 2019 to the end of March 2020. It provides information about the nature and type of work undertaken for each authority and service area and includes a comparison with work undertaken in the previous year.

## **2 AIMS AND OBJECTIVES**

The OOHS' primary function is to provide an immediate Social Work response to vulnerable people who are in crisis. The service is provided within all relevant statutory, regulatory and policy frameworks. It offers a range of assessment and short term care services which are delivered according to identified need and available resources. The key objective of the service is to ensure that those services which are delivered by Angus and Dundee City Council's day time Children and Families' Services and the Health and Social Care Partnerships continue to function out with normal office hours. OOHS works in partnership with key professionals from Health, Police, private and third sector agencies, as well as service users, parents and carers in order to provide an effective and timeous response to all referrals received by the Service.

## **3 SERVICE DELIVERY**

The OOHS covers more than three times the number of hours of operation in a week than any equivalent day time team and provides a generic emergency and crisis response service to two local authorities. At present the shift team consists of a Co-Ordinator who is an experienced Social Worker with post qualifying training in child protection and/or adult support and protection, a Social Worker and a Support Worker.

The team provides a service from 4:45pm until 8:30am the following morning, seven days a week as well as all day at weekends and public holidays. From 12:30am until 8:30am the service is currently staffed solely by a Co-Ordinator working a waking nightshift. Staff employed by the service work flexibly and follow rota patterns of work.

Given the significant changes that have taken place over previous years, both as a result of structural changes and the nature and types of responses required by OOHS, an internal audit of the Service was undertaken in 2019. This identified a steady increase in demand for OOHS which regularly exceeded capacity, resulting in an over reliance on casual/sessional staff in order to meet the needs of service users in both local authorities.

As a result a whole Service Review has recently been completed and proposals are currently being considered in relation to changes in the staffing and rota structure which aim to ensure the most efficient and effective use of resources whilst continuing to meet the demand for both planned and crisis support from the OOHS.

#### **4 NATURE AND TYPE OF WORK**

OOHS staff receive telephone calls, emails or alerts from Dundee City Council and Angus Council staff, members of the public, Police Scotland, health professionals, care agencies or from Dundee City Council staff via the MOSAIC electronic system. These generally relate to urgent child welfare and protection or adult support and protection concerns; Mental Health Officer attendance requests; information requests and requests for advice or guidance. The service prioritises circumstances where children or adults are reported to be at risk of imminent harm.

Once a referral has been received by the service an initial assessment of available information is undertaken in order that an informed, timely and proportionate response can be provided. This can include OOHS staff undertaking a joint investigation with police; visiting the locus in order to assess further; checking systems information; talking to significant family members or carers; liaising with health or other professionals, developing a safety plan; providing appropriate support and generally taking action to ensure the welfare and protection of vulnerable children or adults.

Typical enquiries and referrals may include:

- telephone calls from a parent or carer stating that they can no longer cope with a child's difficult behaviour and requesting that the child is accommodated;
- referrals where an allegation has been made concerning the safety of children;
- requests from police for information or support following their attendance at a home where there are vulnerable children at risk of harm;
- breakdown of a care plan e.g. a sudden illness or hospitalisation of a primary carer;
- children or young people who go missing;
- concerns from care providers;
- notification from hospital of delivery of a baby where there are child protection concerns;
- deterioration of a health condition which triggers a need for additional supports;
- changes to care arrangements;
- a call from someone alleging that abuse has occurred;
- requests from police for social work intervention following police involvement with a looked after child or vulnerable adult.

Wherever possible OOHS staff try to support families to continue to care for their children at home or with relatives where it is assessed as safe to do so. This may require implementation and/or monitoring of safety plans and support with practical resources e.g. transport; assessing the suitability of extended family members or friends to provide short term support and providing support and guidance to parents and carers to continue to care in times of difficulty.

If the OOHS has assessed that additional services would prevent an unplanned and potentially unsuitable placement for an adult and assist them to remain safely at home Social Care Response Services as well as private care providers/voluntary agencies may be contacted to help provide that support by means of welfare checks or provision of personal care. This collaborative approach to supporting families with children or adults in need of care or protection enables vulnerable people to remain safely at home.

In the event that child or adult support and protection concerns are such that imminent action is required to ensure safety and wellbeing, OOHS staff will follow all relevant procedures to take protective action.

Although the first priority of the service is to provide a crisis response, the service also routinely supports the work of daytime staff by undertaking evening/weekend visits to families already receiving support from social work services.

The service receives these referrals and alerts from case-responsible workers where there are risk concerns about children or adults which may require planned monitoring or support out with office hours over a number of weeks.

Planned work referrals from case-responsible teams include:

- rehabilitation assessments;
- monitoring of safety plans;
- welfare and safety checks

These referrals typically involve cases where children are on the Child Protection Register and there are concerns re:

- neglect;
- domestic violence;
- substance misuse;
- poor mental health

In these planned interventions OOHS can monitor the safety of individuals, support families in difficulty, undertake specific tasks and contribute to wider decision-making following observation and assessment of home circumstances or parenting/care arrangements.

In addition to responding to crisis/planned referrals the OOHS acts as a point of contact for Criminal Justice workers in Angus over weekends and public holidays and administers the Scottish Welfare Fund payments on behalf of Dundee City Council during public holidays.

The waking night shift Coordinator also assists in case preparation following subject access requests, monitors and collates statistical data for service reports, completes MOSAIC actions, undertakes petty cash reconciliation, and supports the administration responsibilities for the team particularly rota planning, communications and checking cover arrangements.

They also have responsibility for ensuring that the broad range of information needed for all shift teams is kept up to date, in addition to being a point of managerial contact for adult services where those services do not have immediate access to one of their managers during the night.

## **5 UPDATE ON KEY PRIORITIES IDENTIFIED IN LAST REPORT**

### ***5.1 Concluding the Service Review and implementing any agreed changes and developments arising:***

The review of the OOHS has been completed and proposals have been made in relation to a restructuring of staffing to ensure the most experienced staff are available during evening and weekend shifts. An increase in social work/support work staff is also proposed over weekend hours to ensure the service can meet the high demand for the service at this time. The service will no longer provide waking nightshift cover and the restructuring of the staffing should also decrease the reliance on casual/sessional staff. These proposals are in accordance with the

recommendations of the Service Audit and will incur no additional costs to the service. A Coordinator will remain on call during the night to attend to emergencies and the tasks previously undertaken during night shift hours will be incorporated into the proposed new shift pattern.

### **5.2 Ensuring service users have access to an MHO outwith daytime working hours and progressing consideration of training for OOHS Coordinators in the MHO award as part of core requirements:**

OOHS have continued to ensure they maintain an up to date MHO call out list and there have been very few occasions over the previous year where an MHO has been unavailable when requested. Meetings have also taken place with Learning & Development and Coordinators have been given the option of applying to undertake the MHO award. Unfortunately no current Coordinators have expressed an interest in this training, however this option will remain available and staff will continue to be encouraged to apply.

### **5.3 Further strengthening of the interface between the OOHS and daytime services:**

This is an integral part of service provision with a broad range of methods employed to achieve this e.g. team meeting attendance, shadowing, joint training, attendance at specific case briefings or de-briefs, review meetings etc. In addition regular case discussion between Coordinators and case-responsible social workers is promoted within the referral processes in order to ensure effective communication and relevant sharing of knowledge.

## **6 KEY STATISTICS**

Statistical information is provided in Appendix 1 & 2.

The statistical analysis for 2019-2020 evidences the continued high demand for the OOHS service with only a 4% decrease in the number of telephone calls received by the Service and a minimal decrease of 11% in the number of visits undertaken. This slight reduction in visits may in part have been due to OOHS being unable to undertake the overwhelming demand for planned work submitted by daytime services at certain times throughout the year. The restructuring of staffing proposed in the Service Review will however address this issue and provide more staff during weekend hours in order to meet the increasing demand for planned work referrals.

Further analysis of these statistics identify the difference in demand between local authorities:

### **Dundee** - compared to statistics for 2018/19

- Overall the OOHS responded to 7,409 calls and undertook 1,350 visits concerning Children, in addition to 4,653 calls and 102 visits to adult service users in the Dundee area.
- In comparison with 2018-19 these figures show the number of visits concerning Children remained approximately the same, however there has been a 38% decrease in the number of visits related to Adult service users.
- Overall the number of telephone calls remained the same across both services.

## **Angus** - compared to statistics for 2018/19

- Overall the OOHS responded to 2,887 calls and undertook 365 visits concerning Children, in addition to 1,697 calls and 32 visits to adult service users in the Angus area.
- In comparison with 2018-19 this highlights a decrease of 37% in the number of visits involving Children in Angus and a decrease of 42% in the number of visits involving Adult service users.
- The number of planned work referrals received from Angus also decreased by 24%.
- The decrease in calls has been much smaller with an overall decrease of only 12% in the number of calls relating to Angus Service Users. This includes a decrease of 11% in calls concerning Children and an average 15% decrease in calls concerning adults.

These figures highlight a significant decrease in both the requests for planned work and the level of visits undertaken by the service compared to previous years. This decrease is undoubtedly due to a combination of factors including:

- The periodic inability of the service to accept requests for planned work.
- The higher level of requests for support during weekend hours which is when the service can become overwhelmed and is unable to fulfil all requests.

Both these factors have been addressed within the recent Service Review and the proposed restructuring of the staffing levels within the OOHS will increase staffing levels over weekends enabling the service to meet the high demand for both planned and crisis support.

For April 2019 to end March 2020 the level of input was measured by area/service user group. During this period:-

- 47% of OOHS input was spent dealing with Dundee Children and Families cases
- 25% of OOHS input was spent dealing with Dundee adults
- 18% of OOHS input was spent dealing with Angus Children and Families cases
- 10% of OOHS input was spent dealing with Angus adults

## **7 STAFFING**

The current responsible Senior Manager is Derek Aitken. Theresa Stewart is the current OOHS Team Manager (Temporary).

The OOHS currently has five Co-Ordinator posts, three Social Worker posts and three Support Worker posts. One in each category is a part time post. The staff employed by the OOHS have backgrounds in children and families services, with most having post qualifying Child Protection training. In addition the service employs two Coordinators and a social worker with significant previous experience in Adult Services. All staff are required to undertake regular training in both Child Protection and Adult Support and Protection in order to maintain their knowledge, skills and abilities to ensure they can respond effectively to concerns in relation to both Adults and Children/Young People.

Following the OOHS review it is proposed that the Coordinator posts are reduced to three as Coordinators will no longer be required to work a waking night shift. This allows for an increase in Social Work and Support Work staff to allow the service to meet the higher demands for crisis/planned support during weekend hours. Coordinators will remain on call during night

shift hours to ensure continuity of service and will also continue to undertake quality assurance and other administrative responsibilities during day time hours.

Over the previous year the service has been affected by long-term sickness and other absence. Although temporary arrangements were made to ensure continuity of service this has increased the dependence on casual/sessional staff. The proposed increase in staff following the OOHS Review would also assist in alleviating the reliance on casual/sessional staff during periods of annual leave/sickness absence.

## **8 STAFF DEVELOPMENT AND OVERSIGHT**

In common with other services which operate outside usual working hours, information-sharing, consistency of decision-making, health and safety issues, training and ensuring adequate staffing levels are constant challenges.

In addition, providing a generic social work service which covers two different Local Authorities presents further challenges in ensuring that all staff remain up to date with procedural requirements for all service areas as well as any relevant legislative changes.

At present all permanent OOHS staff undertake relevant regular e-learning, directed study and attend training events to ensure that they remain confident and competent to undertake their roles and ensure that performance standards, legislative and policy requirements and registration requirements are met. OOHS staff regularly shadow other teams and workers e.g. the hospital based team and First Contact.

All OOHS staff also undertake required health and safety training in order to promote and maintain safe working practice. Staff are recognised to be working in situations where their personal safety may be compromised e.g. night time working, visiting service users who may be uncooperative, under the influence of substances, have a history of aggression etc therefore it remains compulsory that all staff undertake training Health and Safety training appropriate to their role. All staff currently comply with the Council's lone working arrangements by liaising with OOHS or SCRS if Coordinators are working alone.

Quality assurance of OOHS input and recording of cases is undertaken daily. The Team Manager and Coordinators deal with questions, feedback or any concerns following Out of Hours intervention. The Team Manager or Co-Ordinators also attend case conferences and review meetings if required.

## **9 LOCATION**

Based in the multi-agency child protection facility at Seymour House, Clepington Road Dundee, OOHS benefits from being co-located with frontline multi-agency response teams.

## **10 INTERFACE WITH DAYTIME SERVICES**

The OOHS is regularly asked to attend and contribute at Child Protection Case Conferences; MAPPA meetings and IRDs and plays a significant role in contributing to care and safety planning for children and adults.

OOHS regularly receive requests for newly appointed social workers, health staff and students in Angus and Dundee to shadow work on an OOHS shift. All feedback from this is highly positive and promotes effective partnership working.

The OOHS provides representation at various strategic and operational meetings: Scottish Out of Hours Forum; Team Manager meetings; business continuity meetings; MHO development meetings and Team meetings in Angus and Dundee.

The OOHS is a partner in delivering the Missing Person Protocol aimed at supporting young people who are reported missing from Residential and Foster Care Placements in Dundee.

## **11 FEEDBACK/CASE STUDIES**

The provision of case studies and feedback has historically always been positive in relation to the OOHS, however given that the previous annual report was only circulated several months ago this has been left out of this year's report.

## **12 KEY PRIORITIES FOR 2020/2021**

- 12.1 Implementing the proposed changes in the Service Review when this is approved
- 12.2 Development of data from Mosaic system, with a particular focus on evidencing outcomes
- 12.3 Continuing to strengthen the interface between the OOHS and daytime services

## **13 SUMMARY**

The Dundee and Angus OOHS has continued to make a significant contribution to ensuring public protection by supporting the work of locality teams and services to ensure that there is a seven days a week service to meet the needs of children or adults at risk of harm. Although statistically there has been an overall decrease in work from the previous year, this reflects the fact that the service has previously been overstretched by the high level of demand for both planned work and crisis intervention.

Given the high demand placed on the service and the financial impact of an over reliance on casual/sessional staff, a whole service review has now been completed and proposes a new staffing and rota structure which will ensure the service has more staff available to meet the high demand during weekend hours. Meanwhile, Coordinators will no longer work waking night shifts which will ensure that the service's most experienced staff are available during the periods of highest demand and will ensure a more effective deployment of staff resources, whilst continuing to provide an efficient and effective OOHS for both Dundee and Angus Council.

Until these proposals are approved and implemented however the OOHS continues to provide an immediate and effective response to all referrals received by the Service and to ensure the continuation of a social work service for both Angus and Dundee City Councils.

## 14 CONTACT DETAILS

For further information on the Out of Hours Service please contact:

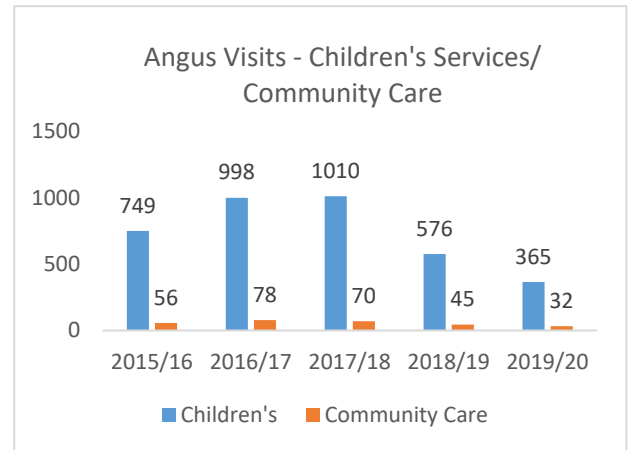
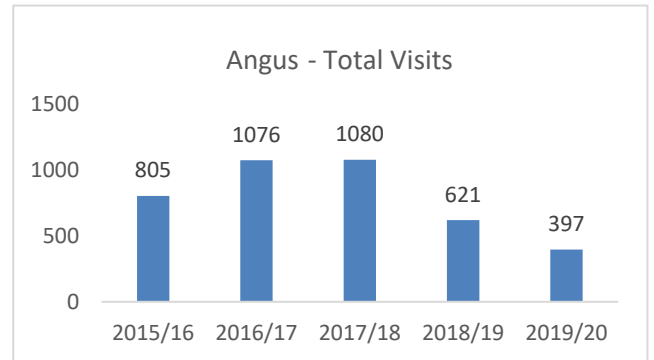
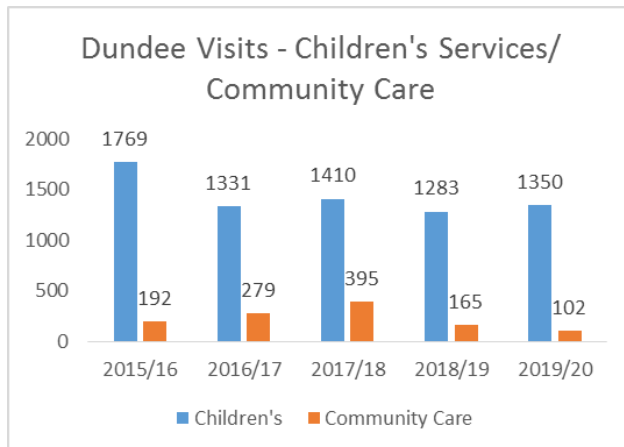
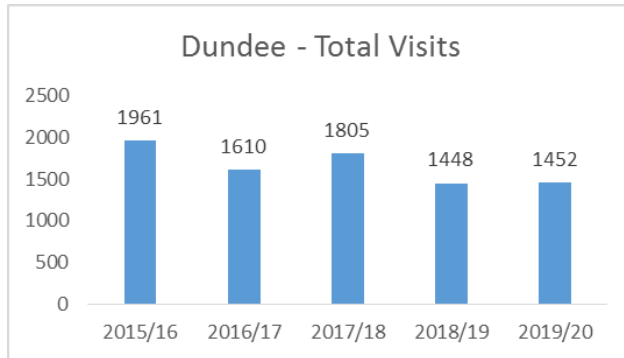
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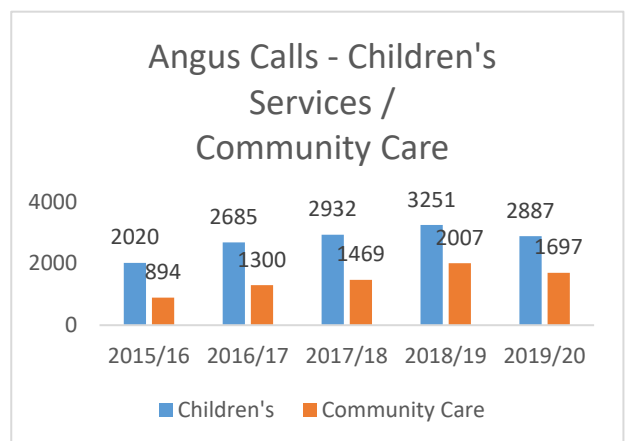
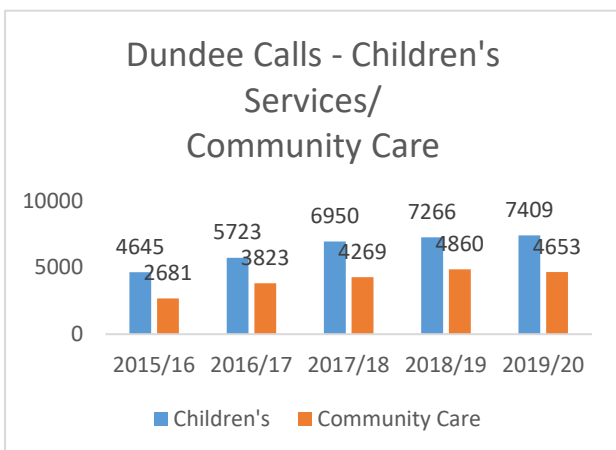
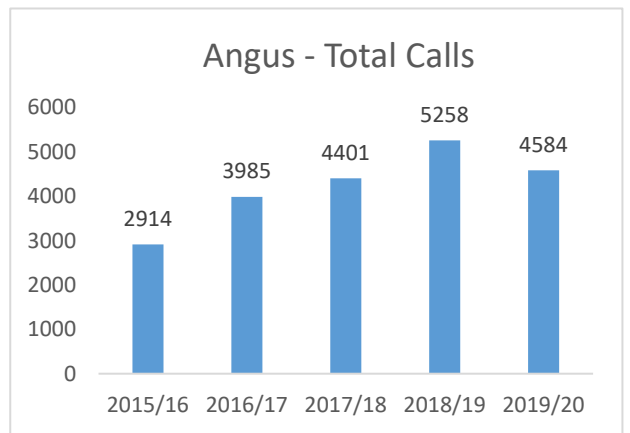
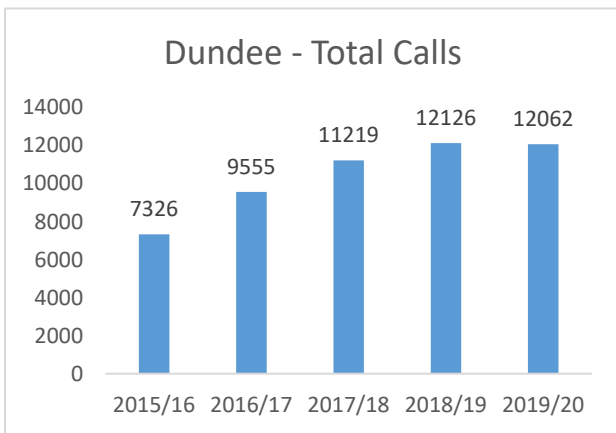
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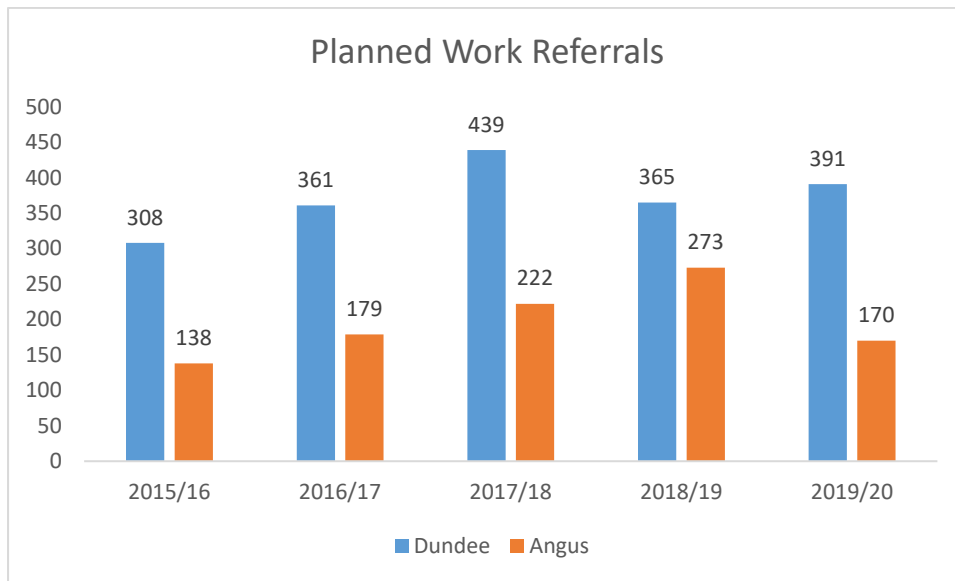
## STATISTICAL BREAKDOWN

### Visits by Area





## Referrals for Additional/Planned work



## APPENDIX 2 – STATISTICAL BREAKDOWN

### Input by Area and Service User Type

