

The background of the slide features a large, light blue watermark of the City of Vancouver's coat of arms. The crest is a shield divided into four quadrants. The top-left quadrant shows a sailing ship on wavy lines representing water. The top-right quadrant depicts a stag's head with large antlers. The bottom-left quadrant contains a beaver. The bottom-right quadrant shows a grizzly bear standing on its hind legs. Above the shield is a crown with four maple leaves. A banner at the bottom of the shield contains the motto "A NE FOR A".

Agenda Item 3

Minute

Draft

FALKIRK COUNCIL

Minute of meeting of the Scrutiny Committee (External) held in the Municipal Buildings, Falkirk on Thursday 30 May 2019 at 9.30 a.m.

Councillors: David Aitchison
David Balfour
Jim Blackwood (Convener)
Niall Coleman
David Grant
Lynn Munro
Depute Provost Ann Ritchie

Officers: Sally Buchanan, Fairer Falkirk Manager
Fiona Campbell, Head of Policy, Technology and Improvement
Joe McElholm, Head of Social Work Adult Services
Mark Meechan, Community Learning and Development Manager
Robin Millard, Head of Design, Roads and Transport
Brian Pirie, Democratic Services Manager
Andrew Wilson, Policy and Community Planning Manager

Also Attending Chief Inspector Damian Armstrong, Police Scotland
Patricia Cassidy, Chief Officer Health and Social Care Partnership
Superintendent Mark Lundie, Police Scotland
Detective Chief Inspector Jim Thompson, Police Scotland

SE1. Apologies

An apology was intimated on behalf of Councillor Black.

SE2. Declarations of Interest

No declarations were made.

SE3. Minute

Decision

The minute of meeting of the Scrutiny Committee (External) held on 7 March 2019 was approved.

SE4. Rolling Action Log

A rolling action log detailing a decision not yet implemented following the previous meeting on 7 March 2019 was provided.

Members of the Committee highlighted that action 423 (Police Scotland to provide a breakdown of road collision statistics by type of vehicle) remained outstanding. The Democratic Services Manager stated that he would address the matter with the local commander. Additionally he confirmed that it was normal practice to indicate in the 'expected reporting data' column to which meeting the information would be submitted. This had been omitted in error for this action.

Decision

The committee noted the rolling action log.

SE5. Falkirk Fire and Rescue Station Access Parking

The committee considered a report by the Director of Development Services providing information on the status of the access from the A9 Roundabout to the rear access to Falkirk Fire and Rescue station parking during Falkirk Stadium events.

The committee had asked for a report, at its meeting on 7 March 2019 (ref SE27), on parking issues around staff access to Falkirk Fire Station following concerns raised by members.

The access road from the A9 roundabout to Falkirk Fire Station was not a publicly adopted road. As such a traffic regulations order for the introduction of parking restrictions could not be made. However following discussions between the Council and the Scottish Fire and Rescue Service advisory yellow lines would be installed by the Council and landowner. This would have no legal standing and could not be enforced.

Following questions Mr Millard explained that the Scottish Fire and Rescue Service could not adopt the road in terms of the current regulations. Although a reactive measure against antisocial parking members expressed hope that the introduction of double yellow lines would have a positive impact.

Decision

The committee noted the report.

SE6. Home Care Inspection Update

The committee considered an update report by the Chief Officer, Falkirk Health & Social Care Partnership on the Homecare Inspection report of 17 May 2018.

The committee had considered on 7 March 2019, a report on the Falkirk Health and Social Care Partnership (ref SE28). As part of the consideration of a homecare inspection report by the Care Inspectorate following an inspection in May 2018 the committee had requested a follow up report on the Inspectorates follow up visit in March 2019.

The Inspection of May 2018 had graded the service as:-

- | | |
|------------------------------|------------|
| a) Care and Support | 2 weak |
| b) Staffing | 3 Adequate |
| c) Management and Leadership | 2 Weak |

The grades had reflected concerns around the continuity of care and around auditing systems. Two requirements had been placed on the service, these were:-

- a) Requirement 1: Care and Support
In order to ensure that people receive the care and support that meets their assessed needs and ensures their health and wellbeing, the provider must develop systems to ensure that the service will be consistent and reliable in who is giving the care. This includes notifying service users in advance of any changes to the staff member or timing of the support.
- b) Requirement 2: Management and Leadership
In order to ensure people's needs are being met and support is being provided safely, the provider must develop and implement internal auditing systems that deliver effective oversight and monitoring of all aspects of the service.

A follow up inspection had taken place in March 2019.

The Inspectorate issued a questionnaire to 100 service users and received 40 written responses. The responses provided evidence of a high score for people reporting that they were very happy or happy with their service. Twenty respondents commented that the consistency of staff had improved. Five respondents reported that they were happy with the service but were still not receiving support from a consistent team. Although the responses showed that there remained further room for improvement, the Care Inspectorate noted that people using the service have improved outcomes, and feel safe, secure and able to build trusting relationships with staff.

As a result of the work undertaken, the service had seen its grades for Quality of Care and Support and Quality of Management and Leadership regraded to 4 - Good as opposed to 2 - Weak based on the previous inspection. These were the only two themes inspected.

The Head of Social Work Adult Services gave a detailed summary of the work undertaken by the service following the May 2018 inspection and highlighted that the move from 2 - Weak to 4 – Good (for management and leadership and care and support) was unusual and an indicator of the good progress made thus far.

Members praised the outcome of the follow up report and the work undertaken by the service. Following a question in regard to the comment by the Inspectorate that 'some anomalies remain' in regard to Homecare shift patterns. Mr McElhom explained the extensive engagement which had been undertaken with staff in regard to introducing what were new terms and conditions. The change had been necessary to ensure that demand could be met and this had required changes to contracts to enable new shift patterns to be introduced. These had largely been completed with the majority of shift patterns changed, but some remained to be agreed. He cited a zero delay in patients leaving hospital due to home care as a sign of improvement.

Patricia Cassidy added that there had been extensive dialogue with staff ahead of the follow up inspection and that a number of innovations – such as mobile phone provision and the introduction of pool cars – had been introduced. She stated that morale had improved and that staff were now better able to do their jobs.

Following a question on the audit framework, and in particular whether the audit outputs were formally considered, Ms Cassidy explained that there were mechanisms for the report to be considered and fed back to the staff. She stated that it was important that complimentary feedback was fed back and staff praised. Both the IJB and its Clinical and Care Governance committee would consider audit reports.

Members asked if the introduction of new shift patterns had seen a reduction in staff absence. Mr McElhom stated that early introductions were positive, with a 5% reduction recorded for the start of the year but it was too early to simply attribute this to the change in shift patterns. There had been intensive and targeted work by managers. He stated that the move to a locality based delivery model would bring benefits with responsibility resting at the local level.

The committee then sought clarification on the arrangements for weekend work and whether the previous model of post workers remained in place. Mr McElhom stated that whole weekend work was a challenge the change in shift pattern would see an improvement. He stated that the management and co-ordination of weekend work remained to be addressed. Traditionally staff had worked Monday to Friday. There was a need to co-ordinate

discharges with the NHS and the key was the integration of services. Patricia Cassidy concurred stating that once integrated the whole system approach would allow better co-ordination of service.

Decision

The committee noted:-

- (1) the Improvements implemented by the service;**
- (2) the Positive Care Inspection Report dated 20 March 2019.**

SE7. Summerford Care Inspectorate Update

The committee considered an update by the Chief Officer, Falkirk Health & Social Care Partnership on the outcome of the Care Inspectorate's follow up inspection of Summerford House which took place between 25 March 2019 – 27 March 2019.

The committee had requested on 7 March 2019 (ref SE28) an update on the inspection of Summerford House which had taken place in March 2018.

An inspection of Summerford House, by the Care Inspectorate, in December 2018 had graded the service as:-

- | | |
|--|------------------|
| a) How well do we support people's wellbeing | 1 Unsatisfactory |
| b) How good is our leadership? | 1 Unsatisfactory |
| c) How good is our staffing? | 1 Unsatisfactory |
| d) How well is our care and support planned? | 1 Unsatisfactory |

The committee had expressed concerns at the gradings and asked for the follow up inspection report to be brought to it for consideration.

The follow up inspection had noted significant improvements and had graded the service as:-

- | | |
|--|------------|
| a) How well do we support people's wellbeing | 3 Adequate |
| b) How good is our leadership? | 3 Adequate |
| c) How good is our staffing? | 3 Adequate |
| d) How well is our care and support planned? | 3 Adequate |

Joe McElhom gave a detailed summary of the findings noting that the improvement in 2 gradings was unusual and showed the scale of the improvement which had been achieved in a short space of time. While grades of 'adequate' were an improvement the service was not content to rest and would continue to introduce improvements. He cited reablement and the need to empower patients as key to further improvement.

Members of the committee praised the work undertaken thus far and acknowledged the improvements as highlighted by the Care Inspectorate. The key, members noted, had been engagement with staff. Ms Cassidy agreed and stated that the model used could be applied elsewhere in the service. Following a question on learning the lessons Ms Cassidy stated that the IJB would be asked to invest in a performance monitoring resource. Capacity had been and remained an issue. The service would learn and improve from this and all inspection reports.

Decision

The committee noted that the Care Inspectorate's follow up inspection of Summerford House found significant improvement in quality of care provision.

SE8. Following the Public Pound - Poverty & Equalities

The committee considered a report by the Director of Corporate and Housing Services providing information under the Following the Public Pound arrangements for the period 1 April 2018 to 31 March 2019 for the Council's outcome to make our area a fairer and more equal place to live.

Funding was provided to four external organisations to provide services which could not readily be provided by the Council. As part of the Following the Public Pound arrangements, reporting statements were prepared by the relevant monitoring officer for consideration by the committee.

The organisations were:-

Organisations	Monitoring Service	2018/19 Funding
LGBT Youth Scotland	Children's Services	£29,750
Falkirk CAB	Corporate and Housing Services	£168,490
G'mouth & Bo'ness CAB	Corporate and Housing Services	£98,360
Denny & Dunipace CAB	Corporate and Housing Services	£92,810
Armed Forces Project - Denny CAB	Corporate and Housing Services	£18,000

The report set out the Council's obligations in regard to equalities and its outcomes set out in the equalities outcomes statement. Similarly the report set out the four key outcomes set out in the poverty strategy 'Towards a Fairer Falkirk 2019-2024'.

The monitoring officers gave an overview of the services provided by each organisation and their respective performances since last reported.

Following an overview of LGBT Youth Scotland's Community Development Project members sought further information on the roll-out of the project beyond Falkirk and Braes High Schools. Mark Meechan explained that the roll-out was limited by capacity but it was intended that the project would be rolled out beyond these two high schools.

Following an overview of the work of the 3 Citizens Advice Bureaux, Sally Buchanan confirmed, in response to a question, that there was some overlap between the services provided by the Council's hubs and the CAB. Currently demand outstripped the services both could provide and it was positive that there was overlap because this offered choice to individuals. Nevertheless it was intended that service provision would be reviewed. In the meantime it was not an issue, she added that a difference was that the aim of the hubs was to be proactive and to prevent by offering advice before an issue became a problem.

Members highlighted the decrease in funding since 2014/15 and asked what impact this had had on service provision. Sally Buchanan stated that one outreach had closed in this period. She added that although the Council's funding had decreased, monies had been provided by the Scottish Government and the Department for Work and Pensions to provide specialist advice. This, which welcome, would not mitigate the impact of the reduction in core funding.

Decision

The committee noted the report and acknowledged progress by the external organisation in meeting Council priorities.

SE9. Police Scotland – Falkirk Area Performance

The committee considered a report by the Director of Corporate and Housing Services presenting the latest performance report on behalf of Police Scotland.

Superintendent Lundie gave an introduction to the performance report highlighting notable areas of specific interest.

The committee then asked questions, highlighting issues in regard to community policing. Following a question on why community officers were not available for community events on Sundays Mr Lundie stated that while

officers were available for local meetings there was also a need to deploy officers into communities and as such there was a balance to be struck. The shift patterns recognised the need for this balance. Chief Inspector Armstrong added that where there were specific issues he would be happy to look at this.

Following a question Superintendent Lundie explained local ward plans and how they related to the Area Plan. The ward plans, he explained, provided focus on location and local priorities and set out what the community expected of the police locally. Given the focus on local delivery the committee asked why police offices were not always staffed and callers were directed to a contact centre based in Edinburgh. Chief Inspector Armstrong stated that footfall at offices had decreased over the years and it was more effective to have officers on the streets rather than in an office. The move to a call centre had been introduced prior to 2013 and was in recognition of the need to optimise resources. He undertook to relay the member in question concerns and comment that this affected public confidence. Superintendent Lundie added that his officers had a good communication system with strong links to councillors and community councils. Feedback suggested that the public was happy with their first contact with the police. He did recognise that some would be disappointed with a telephone conversation. Chief Inspector Armstrong stated that he wanted officers out in the community. Visibility was important. He then stated that the Public Service Team (PST) had been established in the area and explained that this had been proven to be effective. This was a model which was now being trialled nationally. If a call is made to the public 101 number it would be picked up by the PST. An officer from the team would contact the member of the public and would try to address the issue. If this was not possible a call-out could be arranged. This allowed the public expectation to be managed whilst dealing with the issue. The PST was made up of police officers – in the main those on 'restrictions'.

Following comments on the communication between community officers and councillors, Chief Inspector Armstrong explained that officers recognised that different elected members had different preferred means of communication. There seemed to be a breakdown in some cases. Chief Inspector Armstrong undertook to look into the particular issue raised and the broader issue more generally.

The committee then discussed the performance report.

Members highlighted the number of statutory stop and searches undertaken (960). Chief Inspector Armstrong highlighted that in May 2017 a new code of practice had been introduced, and non statutory consensual searches ceased. Searches were now intelligence led. Officers were, he said, trained to explain the reason for searches. The key was that the searches were now solely intelligence led with a 30-40% success rate. Officers provided the public with an information slip after the search which included details on how to complain if they felt the search had been unfair or unwarranted.

Following a question on Operation Willpower and in particular in regard to officers targeting Transit vans Chief Inspector Armstrong and Detective Chief Inspector Thompson summarised local operations to target acquisitive crime. Forth valley was a small division with good road links into and out of the area and consequently the area was targeted by organised crime from outside the area. The targeting of acquisitive crime, including theft of transit vans, was a priority. DNA identification had proved to be invaluable with specialists having to work hard to stay ahead of criminals, who attempted to rid scenes of all evidence.

The committee praised the 'School Squad' initiative and asked for an update on the project. Chief Inspector Armstrong explained the initiative and said that initiatives such as this tended to be effective for limited periods. Schools had engaged with the project which had involved the use of visual aids to address the issue of irresponsible parking in and around primary schools. Schools had engaged with the project and some had asked to purchase their own 'squad'. However Chief Inspector Armstrong stated that the challenge was continued and there was a role for parents and schools and it was important parents took responsibility for safety.

Detective Thompson explained why the detection rate for rape had decreased by 18.1%. This was due to two factors. The first was that around 1/3 were non recent and as a consequence the gathering of evidence was more difficult. Secondly the force took a victim centred approach which meant that if the victim decided at a point, in which was a difficult and traumatic process, to not proceed with the allegation it would not be taken to detection but would be lodged as a reported rape.

Decision

The committee noted the report and acknowledged progress by the external organisation in meeting Council priorities.