

## Scottish Children's Reporter Administration

### Executive Management Team Minute of Meeting held on 9 October 2014

#### **Present**

Neil Hunter – Principal Reporter/Chief Executive

Susan Deery – HR Manager

Malcolm Schaffer – Head of Practice and Policy

Elliot Jackson – Head of Strategy and Planning

Tom Philliben – Senior Operational Manager (South and East)

Alistair Hogg – Senior Operational Manager (North and West)

Maggie McManus – Director of Support Services

#### **1. Apologies**

Ed Morrison – Head of Finance and Resources

#### **2. EMT Development**

##### **(a) Senior Operational Manager**

NH introduced a paper which proposed a review of SOM functions in order to develop and strengthen these in light of 3 years' experience of Localities and 2 years implementation of devolution and empowerment framework. Whilst focussed on the SOM role the review is likely to have implications for other EMT functions and in relation to LMT's. NH emphasised that this was principally a functional review and not a structural review and was aimed at clarifying and strengthening the SOM functions, for which it had been acknowledged there was a lack of common understanding. A proposed timeline was discussed. Key stakeholders were EMT, TP/AH and LRMs as direct reports. NH will lead on this supported by MMcM and reporting to Board Remuneration Committee in December as part of their expanded EMT Development oversight role.

Key points noted were

- Relative immaturity of relationships across the organisational operational structure
- Need for clearer alignment of support to SOM's
- Key components of strategic management in a highly devolved system – performance/mentoring/scrutiny etc.
- Working with ambiguities and uncertainties

**Action** – NH to progress reporting to Board in December via EMT

**(b) EMT development session – key actions**

MMcM circulated a paper in relation to EMT agreed actions which were:

- **Clarifying roles and responsibilities in relation to business continuity approach** – specifically at those sub BCP levels – monitoring/early identification. Agreed that AH/TP would build on the paper already orbiting Operational Group on inter-locality support and define roles and responsibilities at the sub BCP level. The aim of this was to avoid the fragmented approach to early and phased support and intervention that was evidenced in recent operational issues (e.g. Fife)

**Action:-** TP/AH to develop paper and describe roles and responsibilities at different sub BCP levels. November EMT

- **Mentoring to LMT's** – EMT members to pick this up again in support of LRM's aligned to SOM's and apply more consistency around clearer offerings.

**Action** – All – immediate.

**3. Minutes of last meeting**

**(a) Board development day**

Neither Central nor Ayrshire have been able to host a post lunch session – agreed that as the Board development day is scheduled for Ochil – Head Office Managers should be invited to meet the Board (Research/HR/Finance/Practice/Data etc.) and to provide a brief input re role of team. . Central to be rescheduled to April 15, followed by Ayrshire in November 15.

**Action** – MMcM/MS/EJ to feedback and invite Head Office Managers. Immediate.

**(b) ICO – DPA and Information Governance Training –**

With SOM's to follow up. Some technical issues have emerged which are being assessed to give as accurate a picture as possible.

**Action** – TP/AH – immediate and ongoing

**(b) Modern apprentices pay**

Following SCRA Board discussion EMT were tasked with reviewing this again. The options were to progress salary range towards traineeships – this might have the effect of requiring MA scheme to be reviewed in light of more formal approach to terms and conditions. The overall package of support would become less flexible as a result of this formality. It was agreed that this was undesirable and that NH would feedback initially to the Board Chair

**Action** – NH to discuss implications with SCRA Chair – October 2014.

**(c) CHS – shared services and corporate services**

Opening discussion with CHS on future options. CHS are recruiting to the Corporate Services post this week and this would be an important determining factor in scope of future options.

**(d) Children and Families survey**

SG have asked for March 15 for this – MS will feedback to Research team and continue discussions.

**Action-** MS. Immediate

**(e) Managers event**

Date confirmed – EJ/NH to meet with Maryanne to progress. Focus on segment 2 and high priority ‘hot topics’

**Action-** EJ/NH. Immediate

**(f) Corporate Calendar**

Being progressed with MMcl – gives clear overview of what’s being planned across year – EMT/Ops/PQN/PIN etc. and will help with prioritisation.

**(g) Central Locality – office reconfiguration**

TP updated. One – to one discussions had now been completed. The original project plan with a range of options was seen as coherent and remained relevant. However the outcomes of the discussions with individuals had revealed a number of impediments on the basis of financial detriment and carer responsibilities. This has meant that TP could no longer recommend the immediate plan of moving staff from Ochil to Livingston. An approach based on vacancy management would be required and this would be over time as turnover is low. The vacancy management approach to effecting the change would be to cover the gap of

- 3 fte Reporter
- 0.5 LSM
- 1.9 Support

A number of constructive suggestions for changes to working practice had been suggested as a result of staff engagement and these would be pursued by the LMT.

EMT noted the position and supported the approach being taken. The overall objective remains valid and necessary and an alternative approach based on managing vacancies was endorsed. A focus on Locality performance would remain an important element.

A communication plan was in place and would be implemented this week.

#### 4. **Digital Strategy**

EJ introduced. This was an early draft of a strategy in pursuance of the CHS/SCRA Joint Board Business meeting agreement to pursue a single approach for the Hearing System. The timetable for this was end of March 15 for joint sign off of strategy. Good alignment to the recent Justice Board Digital Strategy would be required. EJ and Lorna McNaughton are well positioned on this and NH sits on the Justice Board.

Discussion took place and key points were:-

- Aim 3 of the strategy – CHS and SCRA was the most important but the most challenging aspect in the immediate
- Use of VC – important – but most legally complex – needed pre-dispensation of the child by the Hearing. Similarly relevant persons.
- VC- needs to be reliable and more flexible – alongside secure. Investment in higher spec kit was needed.
- VC – opportunities for defence agents – liaison with SLAB important
- Need to recognise challenges to the strategy and subsequent sign up by panel community (sceptical about SCRA's ability to deliver) – but to approach with a problem solving mind-set
- Strategy and vision needs to be outcome driven, linked to outcomes
- Need for tests of concept and confidence growing measures, taking to scale at the right point
- Timeline – over optimistic – should be to 2017
- Links to integrated corporate services discussions with CHS
- VC and the child – what do we know about interaction
- Need to ensure that as a proposed partnership strategy it needs to reflect the needs of both organisations in future drafts

EMT expressed support for the development of the strategy which was felt to be a cornerstone of the next stage of modernisation of the Hearing System

#### 5. **Property**

##### (a) **Capital budget**

A report from the property team had been circulated offering updates on 3 projects all with consequences for the capital programme

- Stornoway – approach agreed in principle. Increased capital and revenue costs were noted as was phasing The possibility of revenue income from Care Inspectorate was noted. Full Business case to be progressed.
- Perth – needs a clearer approach – the suggestion of capital outlay on an interim contingency to allow restrictions on Kinnoull Street sale to be lifted was not supported at this time. MMcM will feedback to the team.
- Lerwick – agreed (see below)

**Agreed** – to proceed with business case as described for Stornoway.

**Action** – MMcM to feedback discussions on Perth

**(b) Lerwick Business Case**

The current premises were no longer available to SCRA to lease on a single floor basis. Strong interest has been expressed in the premises by another party. The options of alternative premises in the town had been explored and discounted. The cost of the full lease was marginally more than the planned ground floor lease. There is a potential option of leasing the upper floor.

**Agreed-** to move forward with the lease of whole premises at Hill Lane. Submission of business case to proceed.

**6. EMT Xmas Cover**

Proposed arrangements to be with Janis McDougall by 14 October

**Action**

All leave intentions to be submitted by 14/10  
TP/AH/MS to liaise on operational cover.

**7. Support staff training – CMS/NDO's and the 2011 Act**

MS had circulated a summary paper. A number of issues had been highlighted:

- The training had been worthwhile. It was acknowledged that the sessions had been delayed due to diversion of practice reporters to operational priorities
- There had not been full attendance – and a sweep up session may be required
- Experience of support staff in relation to Reporter recording and implications for risk
- Non-Disclosure order practice and variation from practice direction
- A similar exercise should be planned for Reporters – perhaps initially targeted to those identified as being most in need of support and improvement

Discussion took place on the elements of practice direction in relation to non-disclosure notifications. It was recognised that some areas of the country were deviating from what was required. This is in part due to misunderstanding of what the Act says. The issue at hand was the 'page of secrets' where teams had identified possible risks and operational duplication. A risk assessment was required in order to identify what the issues were and what actions could be taken to inform the development of practice direction.

**Action**

- Similar package of training to be considered for Reporters – MS/TP/AH with Practice Team – January 15
- Risk assessment to be prepared in relation to current operational approach to Practice Direction in relation to NDO notifications. This to include engagement with LRM's who have identified risks – MS/TP/AH immediate

- Risk assessment to be discussed at next possible Practice and Quality Network and then to Operational Group for review/decision – MS/TP/AH – as diaried

## **8. Getting it Right in the Hearings System**

MS had circulated a note outlining progress with the Children’s Hearings Improvement Partnership (CHIP) workstream, which he was leading. This was currently being disseminated widely for views/comments/development. It was expected to be completed by March 2015. Training on the approach was required and EMT agreed the following actions:

### **Action**

- To proceed with planning for adequate training on GIRFEC and revised model in mid 2015- MS/CHIP sub group
- That this should be done on an interagency basis, particularly involving CHS – as above
- That resources would be set aside to support the training and provision of materials and venues – as above

## **9. User Support Improvement Programme: CMS – business case**

TM had circulated a business case for the purchase of additional training hardware to support locally delivered training to staff in fulfilment of business plan objectives.

### **Agreed**

EMT agreed the priority of this, the need to improve delivery, noted the recurring and non-recurring costs and approved the business case.

## **9. Any other business**

### **(a) CMS User Interface Plan**

MMcM will chase this with the IT team

**Action** MMcM- immediate

### **(b) IT workplan**

To be carried forward to next EMT. Advice to be sought from EM.

### **(b) Diploma in Advanced Reporter Studies – Accreditation**

MS to pick up concerns over commitment in some areas with TP/AH

**Action** – MS/TP/AH – week beg 20/10

## 10. Risk Register

The strategic risk register was reviewed:-

- **Risk 1** – (safe and effective service) to better reflect workloading analysis in relation to Actions and timescales (MMcM)
- **Risk 2** – (CMS) UI programme to be better described in actions and timescales (see above) (EM)
- **Risk 4** –(Efficiency plans) corresponds to risk 1 – needs clearer linkage and descriptors of the BRP review and Efficiency Plan actions (see Board report – Sept 14) (EJ/EM)
- **Risk 5** – (Lapsed orders) MS had made comments which had not yet been picked up – NH/JMcD

### Action

- Above named EMT members to review and amend specific issues - immediate
- All to review and comments - immediate
- NH to resend RR with note of meeting for comments - immediate