

Argyll & Bute Health & Social Care Partnership

Integration Joint Board

Agenda item:

Date of Meeting: 21st September 2022

Title of Report: Year 2 (2021/22) Annual Review of the Children and Young

People's Services Plan 2020 - 2023

Presented by: Patricia Renfrew

The Integration Joint Board is asked to:

- Note that both NHS Highland and Argyll and Bute Council are jointly and equally responsible for children's services planning
- Note Argyll and Bute's Children and Young People's Services Plan 2020-2023 Year 2 review for the period 2021/22
- Note the submission of the Children and Young People's Services Plan Year 2 review to Scottish Government as per the legislative requirement.

1. EXECUTIVE SUMMARY

- 1.1 The Children and Young People's Service Plan 2020-2023 was approved at the Integrated Joint Board and Community Services Committee in November 2020 https://argyll-bute-girfec.com/wp-content/uploads/2020/12/cysp-2020-14th-dec-digital-version.pdf.
- 1.2 There is a requirement in Part 3 of the Children and Young People (Scotland) Act 2014 to review the report annually and report on the performance and progress to date in delivering the outcomes set out in the plan.
- 1.3 This review considers updates on 2021/22 progress and areas for improvement, provides information on key developments that have taken place since the plan was published and sets out key plans for the year ahead.

2. INTRODUCTION

This is the first annual review of the Children and Young People's Service Plan 2020-2023.

https://argyll-bute-girfec.com/wp-content/uploads/2020/12/cysp-2020-14th-dec-digital-version.pdf. In this review we will report on our performance and progress to date in delivering the outcomes we set out to achieve.

1.2 The review will consider:

- Updates on 2021/22 24 month progress
- Provide information on developments since the plan was published
- Set out key plans for the year ahead

3. DETAIL OF REPORT

The Children and Young People's Service Plan (CYPSP 2020/23) approved in November 2020 by the Integrated Joint Board and Argyll and Bute Council and is set within the context of four strategic priorities and aligned to the eight well-being indicators (SHANARRI). By adopting the Quality Improvement methodology we are able to evidence improvements in practice supporting us to achieve our aim of improving outcomes for children and young people.

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3.1 Improvement and Progress Update Summary

We have made good progress with the short-term outcomes expected at 24 months.

Tables 1 - 4 (pages 3 – 13) provide updates on the 2021/22 Performance Measures under each of the Strategic Priorities.

Quality Improvement projects are still live, however due to COVID and a number of staff changes updates are not currently available for the Year 2 2021/22 report.

Strategic Priority 1 - Getting it Right for Every Child (GIRFEC) Leadership

To help improve the visibility of the Children's Services Strategic Leadership Group, member Profiles have been developed and circulated to all staff groups.

Table	Table 1			
Ot	Outcomes expected at 24 months		Progress update	
	(2021/22)			
1.	Evidence of improvements in GIRFEC practice and delivery of services are embedded in children's services	1.	The improvement work generated through the Argyll and Bute Children and Young People's Improvement Faculty has resulted in improvements in the partnership approach to service delivery leading to better outcomes for children, young people and their families.	
2.	Streamlined systems and process result in partners having the 'One Child, One Assessment and One Plan' approach to service delivery	2.	The replacement of the current Carefirst System with the Eclipse system will provide a fully integrated web-based Care Management system for Children, Families and Social Justice. Eclipse will reduce bureaucracy and support an integrated (HSCP) Child's Plan in practice.	
3.	Feedback on successes and what is not working	3.	Gathering the views of children, young people, parents/families is fundamental and underpins the values and principles of GIRFEC. Staff capacity and COVID have resulted in additional scaling up of the 'What Matters to Me' (WMTM) form allows staff to gather the views parents at Child's Plan meetings. This will be scaled up across all localities throughout Year 3 (2022/23).	

Getting it Right for Every Child (GIRFEC) Leadership Quality Improvement work

Table 1.1				
24 months (2021-22)	Quality Improvement Aims	Quality Improvement Projects		
Partners work collectively to review current systems and processes and reduce bureaucracy	 By 31st August 2021, 75% of audited Child's Plans prepared by multi-agency partners after October 2020 will contain a clear set of SMART outcomes for the young person, based on an up-to-date assessment of risk and analysis of need. By end of May 2021, 95% of Initial child plans where Health Visitors are Lead Professional, will include parent/carer views of their child's plan and they will score 4 or above on a 1-5 rating scale of how engaged and involved they felt in the process" 	Improving the quality of Child's Plans Some Quality Improvement projects have been delayed due to staff changes, it is anticipated this will improve in Year 3 of the Plan.		

Strategic Priority 2 - Early Help and Support

T	Table 2		
Outcomes expected at 24 months (2021-		2021-22 Progress update	
	22)		
1	Ensure early help and support is put in place. Use the Model for Improvement to develop tests of change and ideas to promote and improve child development	Data indicates we have maintained above 90% of children having assessments completed at: 13 – 15 months - 93.6% 27 – 30 months - 92.6% Due to COVID restrictions P1 developmental milestone data has not be obtained	
2	Deliver on key priorities identified in the Child Poverty Strategy	2. The benefits of partnership working have been evident with an increase in client engagement through collaborative working. Where agencies are able to bring their skills and expertise together to provide a holistic approach, vulnerable families are also less likely to be missed. Referrals and support from Health Visitors help with those who would falter at the point of making an appointment. Feedback from advisors ensures that clients who don't engage can be supported to re-engage often at a point of difficult circumstances or crisis. The personal	

3.	Children and young people feel more positive
	about their health, wellbeing and developing
	relationships

- connections made between staff are beneficial ensuring good communication which is vital in delivering a high standard service. Bute Advice Centre has close working relationship with Health Visitors in the Bute & Cowal area and hope to roll out this service across Argyll.
- 3. In the school year 21/22, Health, Education and local 3rd Sector organisations worked in partnership to provide the health improvement programmes Smoke Free Me for P7's and You are Not Alone for S3. The drama productions were presented by video rather than a live play, due to the restrictions of Covid 19. However, these video's were presented in person by a selection of professionals from health improvement, education, school nursing and 3rd sector partners.

Smoke Free - 100% of primary schools were offered the Smoke Free video complete with additional lesson plans, many were also provided with materials that pupils could take way, to supplement what was taught in school. All, teachers who provided feedback said the lesson plans, music and video access were excellent for their students. Not all schools were able to show the drama due to Covid-19 isolation guidance, but all those who did found it very beneficial and relevant.

- **S3** Health Drama 100% of Argyll and Bute Council secondary schools had access to the S3 Health Drama You Are Not Alone by video and all but one high school took advantage of having a showing supported by professionals who provide services for young people. All pupils had the option of asking any questions remotely and in private and feedback was taken on the structure and content of the drama from teachers, partners and pupils. All who fed back were very supportive and felt the content was appropriate and would welcome being part of the work ongoing.
- Ensure breast feeding rates are improved and sustained

a healthy weight

- Children and young people are supported to make good choices with respect to maintaining
- 4. 2021 Breastfeeding rates at 6 8 weeks reached 46.8% in one quarter and remained stable at 44% throughout the year, breastfeeding still remains high with the Scottish average at 6 8 weeks sitting at 32.5%. Key workers and Infant feeding support workers continue to work to promote the benefits of breastfeeding across all agencies.
- 5. Limited progress in 2021/22this was in part due to Covid and also some resource issues. An App has been commissioned and is currently being tested. Plans to increase staff hours to re-establish delivery of virtual group treatment sessions which will work alongside the App.

Early Help and Support Quality Improvement Progress

Table 2.1				
24 months (2021-22)	Quality Improvement Aims	Quality Improvement Projects		
Ensuring relevant assessments at key ages and stages are carried out	Creating communication friendly Early years settings in Bute (Aim in development)	The UPQIC financial improvement project		
Ensure the Child Poverty Strategy is rolled out across the partnership	Increased uptake of financial support following Universal Health Visiting Pathway contacts	AHP Forum - Improve our universal and targeted offer		
	Aim - By Sept 2021, Health Visitor's (HV) in Argyll and	National "Sharing the Ambition" project		
	Bute will have a financial discussion with parents at 80% of contacts on the HV pathway and where a need is	Breast feeding		
	identified 100% will receive the requested money advice and benefit support	Communication Friendly early years settings		
	Data relating to money advice conversations carried out at routine Health Visitor visits in the Bute & Cowal area was gathered to ascertain % of money advice conversations at routine pathway contacts for period Jan to Sept 2021. Data for the same period was also captured which looked at time to the initial money advice prep appointment. (Table was produced and is available). Data notes a sustained improvement with regards to money advice conversations carried out at routine Health Visitor visits in the Bute & Cowal area. Analysis of the data with regards to the total number of visits across the 8 month period notes - 41% achieved the 100% target and 52% at 90% or above. Against the median target wait of 3 days, the data shows that 47% or referrals waited 3 days or less and 53% of referrals waited more than 3 days, the longest wait was14 days.	Supporting vulnerable 2's Some Quality Improvement projects have been delayed due to staff changes, it is anticipated this will improve in Year 3 of the Plan		

Children and young people have a better understanding of what safe and healthy relationships look like	Children, Young people and their families feel supported to adopt healthy lifestyle choices Aim in development)	
Children and young people are able to make informed choices about their dietary needs	Children, young people and their families feel supported to adopt healthy lifestyle choices - AHP Forum (Aim in	
and an analy model	development)	

Strategic Priority 3 - Mental Health and Well-being

Table 3			
Outcomes expected at 24 months (2021-22)	2021-22 Progress update		
Access and support for early help is available and easily accessible for children and young people	Development of the Peri-natal and Infant Mental Health Pathway		
	Peri-natal and Infant Mental Health promotes knowledge and skills in understanding Infant Mental Health and parent-infant relationships. Infant mental health services are aimed at giving every child the best start in life by promoting the wellbeing of infants in the first three years of their development. The Infant Mental Health Pathway relies on the dedication and commitment of a large number of frontline practitioners such as midwives, health visitors and early years practitioners		
	The Perinatal Mental Health Service has been live since December 2021. This service consists of one Trainee Advanced Nurse Practitioner working across Argyll and Bute offering consultation, triage and training. Embedding lived experience into service development to create a new service across Argyll and Bute. Working closely with services in Greater Glasgow and Clyde including the Mother and Baby unit.		
	Infant Mental Health (IMH) - A short life working group has been established involving multi-agency staff, partners and agencies from across Argyll and Bute.		

The group was formed to develop and input into the IMH referral pathway, which has been taken to the PNIMH pathway.

Our children, their nurturing education (OCTNE) has continued to progress successfully with 33% of schools now engaged with this programme. Through engagement with training and use of a bespoke accreditation framework 23 schools have already achieved bronze accreditation (nurture committed), 1 silver accreditation (nurture aware) and 2 gold accreditation (nurture informed). With the addition of two Nurture Teachers (September 2021), the strategy has expanded and is able to offer increased support to education establishments. This expansion is supporting schools to establish targeted nurture interventions for groups of pupils (trauma skilled) and supporting the team around our most distressed young people who are at risk of educational placement breakdown (trauma enhanced). The role of the Nurture Teacher is focused on providing intensive but time-limited support through coaching, consultation and building capacity in staff and schools to make this targeted provision sustainable.

The School Counselling Service provided for children and young people age 10 years and over has continued to progress very positively. The service started on February 8th 2021 with 7.5 fte counsellors and a team leader. Over the last year there have been some changes to staffing as well as short term enhancement through Council COVID Recovery Funding with the current staffing compliment being 8.5fte. Since the start of the service in February 2021 over 500 referrals have been received with an acceptance rate of over 99%. Analysis of referral information shows:

The most common reasons for referral include Anxiety (44%), Depression (25%), Relationships (with parents, carers and peers, 23%), Emotional or Behavioural Difficulties (21%), and Self-Harm (16%)

60% of young people accessing the service report they are female, 34% report they are male and less than 6% describe themselves in another way

72% of referrals come from a professional (including Education, Health and Social

Work). 24% come directly from young people through self-referrals

The average age of someone accessing counselling is 14 and the majority of referrals come from S2-S4

Of those referred, 7.3% Care experienced, 19% receive free school meals, 7.3% Young Carers, 17% with recorded additional support need and 41% with current or previous involvement from an agency beyond education

There has been engagement with young people identifying as LGBTQ+ to consider access and support for early help particular through the school setting. Feedback has included the following:

What support would you like to be available?

'Need to be patient and listen. Lanyards are OK but it depends on the person. Don't say "I understand" because you don't.'

'More obvious things around the school e.g. information posters and FAQs.'

'Some departments have a good ethos, not particularly about LGBTQ+ but kindness in general'.

Have you found it easy to access other support?

'Teachers – some teachers I would trust with my life. Accessed a counsellor but she was not very good. Would struggle speaking with guidance but this is to do with whether the person is seen as trustworthy.'

'Pupils need a clear pathway that is made explicit. Told to go to go to Head of House. Better to say: "go to an adult that you trust" this could be anybody. Need them to listen well and also to remember.'

2. Trauma Service - Argyll and Bute has continue to progress developments as one

Partners feel confident in understanding trauma and how it affects children and young people's lives of three National Trauma Training pilot areas. A number of significant successes have been noted including:

- Strong multiagency commitment, leadership and ownership including the 3rd sector
- Investment of time in ensuring leadership and strategic buy in to support engagement over time
- Strategy built on existing strengths ensuring developments are coordinated with local practice and training including the GIRFEC practice model, existing work o
- Adverse Childhood Experiences and Our Children Their Nurturing Education (OCTNE) in schools
- Building awareness of trauma in to existing training such Child Protection, OCTNE and the PATHS curriculum
- Inclusion of the voice of lived experience
- Flexibility in responding to the impact of the pandemic and moving training online with significant update across services
- Over 83% of all staff working within our schools completed the e-learning modules at the appropriate levels
- High uptake of facilitated on-line trauma skilled training sessions by social work children's services staff
- Strong, consistent communication and update of materials
- A widening focus on staff wellbeing and increasing shared focus on responding to the impact of trauma
- Presentations on progress delivered to national groups including to the Deputy First Minister.

Based on review and evaluation of current progress, the Trauma Strategy group, initially in place to support the delivering of the trauma training programme has been reinvigorated to support the next stage of this work. It is centrally important that staff are not merely trauma informed, but that services, teams and individuals modify practice to ensure the work in ways that are trauma responsive. Multiagency consideration of the key objectives from the CYPSP 2020 - 23 identified core areas for development as we move from delivering training to identifying changes to practice, policy and guidance that will make a real difference to children and young people. With support from the national Children and Young People's Improvement Collaborative (CYPIC), approaches within the Model for Improvement have been

used to identify areas where practice change can be implemented and evaluated. These include: Our Children Their Nurturing Education, exploring the impact of changes to understanding and practice on outcomes for children, young people and families Trauma Enhanced Dyadic Developmental Practice (DDP) training which has continued to be delivered for relevant specialist staff across agencies • Engagement of young people regarding how they would like to give their views around Children's Meetings to ensure they can appropriately influence matters that impact their lives. As a result of this engagement the current Have your say approach is being discontinued and a new approached is being co-produced with young people which will be evaluated moving forward • An A&B Trauma champion has been appointed. Neurodevelopmental Pathway - The Scottish Government Neurodevelopmental Pathway is now available and is being used to shape pathways in Argyll and Bute 3. Implement the standards and pathways of care through considering the effectiveness of current processes including the robust multiagency approach to autism diagnosis. The Child and Adolescent Mental Health Service (CAMHS) are working towards implementing the Scottish Government CAMHS Service Specification. The Scottish Government Neurodevelopmental Service Specification has now been published and colleagues across the agencies are working together to look at how we implement this 4. Who Cares? Scotland continues to provide advocacy to our care experienced children and young people. In 2020/21: 4. Children and young people are routinely using advocacy services • 90 young people engaged with advocacy workers 52 young people accepted the offer of advocacy support (UPDATED FIGURES) FOR 2021/22 have been requested from Who Cares? Scotland) • The service has now expanded to be available to support those attending Hearings Independent advocacy continues to be offered to all children on the Child Protection Register over the age of 5 years

Mental Health and Well-being Quality Improvement Progress

able 3.1				
24 months (2021-22)	Quality Improvement Aims	Quality Improvement Projects		
Trauma training is rolled out across the partnership	Impact of Trauma informed practice (Aim in development) Perinatal mental health	Early Years - Adults responses to children Play pedagogy Impact of Trauma informed practice Trauma informed practice in schools through Our Children Their Nurturing Education		

Strategic Priority 4 - Children and Young People's Voice

Table 4				
Outcomes expected at 24 months (2021 -	2021-22 Progress update			
22)				
Methods to engage children and young people are designed and tested by the Away Team and the Young People's Advisory Group	 By October 2021, 85% of S3 pupils in Oban high will demonstrate an understanding of Argyll and Bute's Children's Service plan and can explain why it matters to them which identifies the improvement in meeting attendance needed to create the right conditions to secure improvements with regards to S3 pupil awareness of the A&B Children's Service Plan. With regards to the baseline question "Do You know about the C&YPSP" analysis notes (another table has been produced) a significant improvement in the understanding of the plan against the baseline score taken ahead of each of the four sessions. The baseline median score presession (0%) above 4, this is offset against a significant improvement in post-session median scores above 4 (50.25%) Conclusion: Against the target of 85% the data noted that 71% of S3 pupil reported a rating of 3 which meant that they knew about the Argyll and Bute CYPSP but I would "need help explaining it". Alongside this 90% of S3 pupil also noted that they could "give one reason why the plan matters to young people". 			

 Invite the Young Peoples Advisory Group to present progress at the Community Planning Partnership 	2.	A presentation on the work of the Young People's Advisory Panel has been delivered to Argyll & Bute's Children Strategic Group and can be delivered to the CCP in year 3
3. The findings of the Independent Care Review are embedded in practice across the partnership	3.	3.1) The 2021-24 Corporate Parenting Plan has been updated to ensure that key themes from The Promise are prioritised 3.2) Multi agency review of all admission to care supported and consideration of findings by the Adult Protection and Child Protection Committees and the Corporate Parenting Board (CPB) led to a joint Promise Partnership bid for an innovative project, across adult and children's services. It is anticipated this will support development of new practice model for supporting families affected by parental mental health and substance misuse 3.3) Adoption of a lexicon of institutional language our young people have asked us to stop using and multiagency work to remove these words and phrases 3.4) Recruitment of a care experienced co-chair for the CPB 3.5) Additional funding for a one-year participation co-ordinator for care experienced children and young people 3.6) Continuing roll out of trauma training to develop a Trauma informed children's workforce and carers

Children and Young People's Voice Quality Improvement Progress

Table 4.1			
24 months (2021-22)		Quality Improvement Aims	Quality Improvement Projects
Young People's Advisory Panel is created		By October 2021, 85% of S3 pupils in Oban high will demonstrate an understanding of	1. Engagement in CSP
		Argyll and Bute's Children's Service plan and can explain why it matters to them	2. "What matters to you?" Parent/child voice
		/isibility of Parent/Child's Voice in Child's Plan (Aim under development)	

3 The focus for year 3 long term performance outcomes include:

Getting it Right for Every Child (GIRFEC) Leadership

- Providing evidence of improvements and embedding the refreshed GIRFEC guidance
- Implementation of the Eclipse system to facilitate more streamlined systems and processes across the HSCP to ensure there is a 'One Child, One Assessment and One Plan' approach to service delivery

Early Help and Support

- Further use of the Model for Improvement to develop tests of change and ideas to improve child development, ensuring early help and support in place
- Supporting families to support a reduction in the number of children and young people affected by poverty
- Developing specific programmes and ideas helps support us to ensure Children and young people feel more positive about their health, wellbeing and developing relationships
- The development of an App to promote healthy eating and assist Children and young people to make good choices with respect to maintaining a healthy weight

Mental Health and Wellbeing

- Children and young people report they are able to access mental health and wellbeing support
- All partners are trauma informed and can demonstrate this in the actions taken to support children and young people
- Standards are improved and robust pathways are in place for children and young people with neuro-developmental conditions
- Children and young people report they are benefitting from accessing advocacy services

Children and Young People's Voice

- Children and young people are engaged and co-designing the next CYPS Plan (2023/27)
- Children and young people are involved in creating the new 2023 27 CYPS Plan
- The lives of care experienced children are improved

4 Key developments and alignment to National Policy

Work is underway to ensure children and young people understand their rights as laid out in the United Nations Convention on the Rights of the Child (UNCRC) which has now been incorporated into Scots Law

The Promise made to care experienced infants, children, young people, adults and their families - that every child grows up loved, safe and respected, able to realise their full potential. It is responsible for driving forward the findings of the Independent Care Review and works with organisations to support shifts in policy, practice and culture so Scotland can **#KeepThePromise**. Key themes from **The Promise** have been prioritised in the Argyll and Bute's 2021-24 Corporate Parenting Plan

5. Conclusion

The year 2 review of the 2020 - 23 CYPSP has highlighted progress to date and some of the quality improvement projects that require to be scaled up throughout year 3. The Quality Improvement faculty requires to be re-established to ensure this work continues throughout 2023/23, further improvements and run chart evidence will be realised in the year 3 report (2022/23) under long-term outcomes.

6.0 GOVERNANCE IMPLICATIONS

6.1 Financial Impact

There are no additional resource implications with the delivery of the plan.

Staff Governance

None at this time.

6.3 Clinical Governance

The Council and NHS Highland are required to report on the progress of the Children and Young People's Services plan as directed within the Children and Young People (Scotland) Act 2014, set out within the supporting Statutory Guidance published in December 2016.

7. EQUALITY & DIVERSITY IMPLICATIONS

The Children and Young People's Services Plan identifies how health and social care services contribute to reducing inequalities, including health and education inequality.

8. RISK ASSESSMENT

There are potential reputational implications for the Health and Social Care Partnership should they fail to deliver the full legislative requirements set out within the Children and Young People (Scotland) Act 2014, Statutory Guidance of December 2016.

9. PUBLIC & USER INVOLVEMENT & ENGAGEMENT

The Children and Young People's Services Plan informs our young people, parents, carers, volunteers and practitioners of the outcomes and actions that all partner agencies have committed to deliver in order to ensure that children and young people living in Argyll and Bute get the possible start in life.

NEXT STEPS

To present the 2020 - 2023 Children and Young People's Service Plan Year 3 report

Patricia Renfrew Senior Manager Child Health and CAMHS

David Gibson Head of Service Children, Families and Justice and CSWO Argyll and Bute HSCP

19th August 2022