# Wellbeing of Children and Young People – Feedback from CPIB Members

## CPIB Meeting, 9th August 2022

**Contents**

# CYP Wellbeing Themes for Feedback

| CPIB Session August 9th | Key Themes | CPIB Member Feedback |
|---|---|---|
| Wellbeing of Children and Young People | • Whole family Support to give families access to the help they need, where and when they need it<br>• Locally based Mental Health and Wellbeing support for children and young people<br>• Reducing and eradicating child poverty<br>• Access to safe and affordable housing, transport and heating for families<br>• Access to physical activity and sport for children and young people to promote active lives<br>• Tackling health inequalities in children, including childhood obesity<br>• Co-ordinated access to food, childcare and activities during school holidays<br>• Improved access to cultural and creative opportunities for children and young people<br>• Opportunities for young people to study, take up apprenticeships, job or work experience, or participate in formal volunteering<br>• Opportunities for children & young people to develop the skills necessary to secure high paying work<br>• Access to support on the impacts of adverse and traumatic experiences | In advance of this session, members are asked to share thoughts on the following:<br><br>• Barriers that are stopping us delivering person led services<br>• Governance and planning arrangements that could be streamlined<br>• Areas where better data sharing is needed<br>• Engaging partners who have a key role to play<br>• Good practice examples of innovative/effective progress from across all sectors (e.g. Public Sector, Third Sector, businesses and communities) (including those emerging from COVID) |

**CPIB Meeting**

**Wellbeing of Children and Young People**

# COSLA Feedback

The information and examples below have been collated from a review of Council Recovery/Renewal plans and CPP Local Outcome Improvement Plans. The information on projects in Argyll & Bute, Aberdeenshire, Dundee and Perth & Kinross have been taken from The Promise annual review.

## Barriers that are stopping us delivering person led services

### Funding

- Ring fencing can make it difficult to progress innovative approaches to delivering services. It is more challenging to link services or join up pots of funding and to demonstrate sustainability of new operating models. A collaborative approach to prioritising resources and commissioning is needed to be able to deliver flexible, responsive local services.
- Lack of funding and under-investment in services means it is difficult to scale up pilot initiatives or test new ways of working / move to a preventative approach due to short-term funding.
- The short-term nature of funding makes it more challenging to maintain a focus on outcomes.

### Capacity limitations brought about by the volume of backlogs

- There is clear evidence that pressures are building on services, with a combination of significant backlogs caused by the pandemic and an increase in demand, for example, in children's mental health services.

### Digital infrastructure

- Issues around digital engagement and inclusion: affordability, skills, connectivity and provision of devices. Councils are choosing to address this problem in a variety of ways. These include working more closely with other public agencies and third sector organisations to improve engagement with individuals who are most likely to be in need of advice.
- Historic policy decisions that were appropriate at the time do not necessarily fit with advances made in technology. Areas face different geographical and market challenges in relation to digital infrastructure which require different and up-to-date responses.

## Areas where better data sharing is needed

Issues around data-sharing, for example, between DWP/HMRC and local authorities and between Social Security Scotland and local authorities. Data helps to increase uptake of other local entitlements and to target information about support to address financial insecurity, helping to address child poverty.

## Good practice examples of innovative/effective progress from across all sectors

### WHOLE FAMILY SUPPORT TO GIVE FAMILIES ACCESS TO THE HELP THEY NEED, WHERE AND WHEN THEY NEED IT

*Shetland Council*

Anchor: Early Help Team

- The Anchor Project provides practical and emotional support to improve outcomes for families. It uses a strength-based model to empower the family to bring about sustainable change. Many of the families supported are not in receipt of benefits they are eligible for nor accessing support, such as counselling, advocacy, employability services, that would benefit them. Many don't have a close support network and have often had bad experiences with existing services.
- Year 2 of the Project began just after the first lockdown. The team and project were redeployed in an attempt to support all families and schools, across Shetland, from Term 1 of the 2020/21 academic year.
- The team was augmented with staff from other Council services, with varied experience and expertise. Awareness was raised through school staff who could signpost and encourage individuals to come forward through their schools.
- The Early Help Team provides a safe space and a listening ear for families with worries about their children's behaviour, concerns about relationships or finances and supports families with grant applications, access to food parcels and signposting to organisations for support with debt, mental health and alcohol dependency. The team also encourages families to have a greater focus on their own support networks.
- A friendly, informal approach has worked really well to engage families. Having a team with wide-ranging experience has also been useful in order to provide holistic support to families and peer-support to colleagues. The team has learned not to underestimate how one conversation with a family or professional may set the ball rolling for greater outcomes over time.

*City of Edinburgh Council*

- City of Edinburgh and Edinburgh Voluntary Organisations Council set up Locality Operational Groups (LOGs) which received, and reviewed referrals from agencies, with a focus on families and children and young people who had not or did not currently meet the threshold for traditional support.
- The LOGs identified a lead agency to engage with appropriate support services to ensure that families received support. Information gathered about emerging needs is shared with the Children's Partnership to assist in planning. This allows key decision makers to have real time information about emerging challenges in communities.
- One example has been digital poverty issues and an increasing recognition of the need for a more joined up City approach to supporting families to have access to and support to manage digital devices.

*Aberdeenshire Council*

'Supporting Local Families' is a service based in Buchanhaven School in Peterhead. It focuses on bringing universal services together to provide early interventions to families by supporting them to develop increased resilience and capacity.

- The project aims to work collaboratively with families to co-design a system of support that is non stigmatising, holistic and builds family capacity and resilience based on strong, trusting relationships with members of the Supporting Local Families Team
- Families that are identified by the school team are invited to participate and Family Link Workers begin by building a trusting relationship with them. Families work with the Link Worker on areas they identify that they would like support to change. This could be anything from financial strategies, education/further learning and/or employment opportunities, mental health, or help with child routines and behaviour.
- Family Link Workers are supported through strong connections with the school nurse, speech and language therapy, clinical psychology, early years practitioners and local police.

## ACCESS TO SAFE AND AFFORDABLE HOUSING, TRANSPORT AND HEATING FOR FAMILIES

*Renfrewshire Council*

Renfrewshire Energy Advocacy Service

- The Energy Advocacy Service provides face to face support to vulnerable householders in their homes to resolve complex energy issues which are not addressed in national service provision. For example debt, disputes with suppliers, meter issues and applications for Warmer Homes Scotland works.

Key Activities

  - Universal referral path through an email portal which all advocates and other relevant staff have access to. The incoming emails are monitored and responded to within 24 hours
  - Self-referral mechanisms where members of the public can contact the team by phone, through Council advice services, Council general contact number and local offices
  - Face-to-face service, visiting people's homes and gaining valuable insight into clients' needs and then offering targeted advice
  - The advocates work in partnership with other service providers such as the foodbank, RSL providers, NHS and social work services. The partnerships with NHS and social work providers such as mental health services has proven to be mutually beneficial and ensured an enhanced service provision to clients
  - The advocates can resolve energy issues that are causing stress for clients with poor mental health and act as a door opening for the mental health officer who can offer support that clients are not otherwise picking up.

Benefits and Impact

The headline benefits are 827 clients visited over a 12-month period which saved over £225,000 for clients. The value of the savings exceeds the cost of providing the service. The greatest benefit arises from the joint working with partner organisations.

Learning

- It is challenging to identify the most appropriate groups within the NHS and Social Work Service that have a client base that would benefit from the advocacy service. The Council has addressed this through ensuring that there is a personal relationship between the service providers, and as quickly as possible demonstrating to all front-line staff the client benefits that can accrue from these partnerships.

*Dumfries & Galloway Council*

- Dumfries and Galloway Council Housing Options and Welfare teams worked with local RSLs to identify tenancies in arrears and then worked together to identify what financial assistance was needed. Partners utilised Scottish Welfare Fund, Discretionary Housing Payments etc to assist with arrears and other essential items.

Key activities

- Financial checks were carried out to ensure full income maximisation, including take up of Free School Meals and Council Tax Reduction
- Any Council Tax arrears were also discussed, with referrals to the debt management service from the local Citizens advice if needed
- For any underlying issues referrals could also be made to Housing Support services or any other support services e.g. employability, mental health or addiction services

Benefits and Impact

- This work started in August 2020 and to date has worked with 1770 customers, identified over £400K in benefits and is estimated to have saved 242 cases potentially progressing to eviction and potential homelessness
- Income maximisation and welfare support (e.g. Scottish Welfare Fund levels) has improved tenancy sustainment and improved working relations with key partners.

Learning

- Challenges include demands on core services, increased customers presenting in crisis, retaining staff due to uncertain funding and a buoyant labour market
- Using discretionary funding available along with welfare advice has been beneficial and will continue.

## TACKLING HEALTH INEQUALITIES IN CHILDREN, INCLUDING CHILDHOOD OBESITY

*Perth & Kinross Council*

Family Focus Team

- The Family Focus Team identified that many of the families with whom they work are living in significant poverty and have often not had opportunities to learn how to make low-cost nutritious meals or did not have the equipment to do so.
- Recognising that cooking and eating together provides an opportunity for parents and children to spend positive time and learn new skills together, the team produced ‘One Pot Surprise’ kits for families and materials to support families to produce low cost and healthy meals.
- Each kit included a hand blender, knife, chopping board, measuring jug, saucepan, dry ingredients for soup and 2 wipe clean recipe cards with clear visual instructions. Fresh ingredients for soup are included along with recipe cards demonstrating adult and child portions and how to make soup that is suitable for babies. Workers were able to talk to families about the nutritious and cost benefits of making soup. Feedback has been that parents appreciate the blender as it enables them to ‘hide’ vegetables in soup.

- Alongside the recipe cards, videos were made to show parents how they can make the soup which is ideal for visual learners and those who may not be able to read or read easily. Some prizes of local shopping cards were organised and families have submitted photos of their home-made soup, showing themselves and their children enjoying making and eating the soup together.

## LOCALLY BASED MENTAL HEALTH AND WELLBEING SUPPORT FOR CHILDREN AND YOUNG PEOPLE

*Dumfries and Galloway Council*

Resilient Youth

- A partnership with the D&G Council youth work service and the 3 YMCAs (Gatehouse, Stranraer & Dumfries) in D&G to support young people during the recovery of COVID to get outdoors and taking part in local activities.
- Young people were supported to take part in volunteering, training, wider achievement and an outdoor activity residential.
- Young people who took part in this programme reported that through taking part they increased in confidence, made new friends and it gave them a feeling of normality after having come out of lockdown which helped to ease their anxiety around taking part in other day to day things like being back at school.

Youth Community Mental Health Project

- Young people's mental health has heightened during the COVID-19 pandemic and additional support is required to reduce the impact on young people and reduce additional pressure being placed on more formal mental health support provided by the NHS.
- The 'Community Mental Health project' sits within Dumfries and Galloway Council's Youth Work Service and is part of a wide range of informal community based and school support for young people throughout the region.
- The service is a partnership project with Educational Psychology and D&G Council's Youth Work Service to provide young people in every ward of D&G with access to low level mental health support and targeted group work programmes.
- The service is based on a successful two-year **'Youth Information in Schools Project'** pilot programme that was delivered from 2018 - 2020 (and has now been extended until July 2023). The project is voluntary for young people to participate in.
- Youth Information Workers delivering the project are qualified to work with children and young people and have successfully completed an accredited counselling skills training course through COSCA (Counselling & Psychotherapy in Scotland).
- The services are targeted at young people who:
  - have concerns surrounding their well-being including mental and emotional health
  - are considered vulnerable
  - are at risk of offending
  - are struggling with a loss/bereavement or significant change.
  - struggling with low self-esteem or confidence.
- Young people may approach the service directly or be referred by a professional or appropriate adult through other projects delivered by the Youth Work Service or through other statutory or voluntary services such as Social Work, Youth Justice or Third Sector Organisations.

Key Activities

- Youth Information Workers offer 1-2-1 support to help young people learn strategies to cope with their difficult feelings. Programmes run weekly for 45-minutes for around 6-12 weeks.
- The service also provides Group Work programmes designed to focus on young people's overall health and wellbeing. This work has a specific focus on targeted or identified groups and the content of the sessions is flexible to the needs of each group. Programmes are run weekly for 12 weeks and examples include Seasons for Growth (Loss and Bereavement), Living Life to the Full (Confidence and Self Esteem) and Your Resilience.

Benefits and Impact

- Through this project young people have shown an increase in confidence, self-esteem and wider wellbeing.

## REDUCING AND ERADICATING CHILD POVERTY

*Angus Council*

Maximise Angus is a collaboration between the Welfare Rights Team and Education and Lifelong Learning which will run for 2 years from early 2022. This is a test of change project with the aim of embedding Financial Wellbeing/Welfare Rights staff into the school setting and focuses on improving uptake of entitlements, providing debt advice and helping families in immediate financial crisis. Referral pathways will be developed with a variety of stakeholders to wider services such as employability, Voluntary Action Angus (VAA) and other council services as appropriate to the individual needs of the family. A similar project, which placed Financial Inclusion Services Officers in Glasgow schools from February 2020 for 12 months, was positively evaluated.

## OPPORTUNITIES FOR YOUNG PEOPLE TO STUDY, TAKE UP APPRENTICESHIPS, JOB OR WORK EXPERIENCE, OR PARTICIPATE IN FORMAL VOLUNTEERING

*Midlothian Council*

- Working with partners such as the DWP, Edinburgh College and the Third Sector to improve employability in their area, with a specific focus on school leavers and those with barriers to employment.
- This work focuses on large public-sector employers offering apprenticeships, training schemes and volunteering opportunities, whilst offering additional support to help others into employment in other organisations.
- A partnership agreement has been signed between Midlothian Council and the Regional Developing the Young Workforce (DYW) board, embedding DYW staff in the high schools working collaboratively with Community learning, SDS, College and employers to increase connections between schools and the labour market.

# Public Health Scotland Feedback

## Purpose

The next Community Planning Improvement Board (CPIB) meeting is taking place on 9 August 2022. The session will focus on examining how the wellbeing of children and young people can continue to be enhanced and promoted through Community Planning, in line with Scotland's Covid Recovery Strategy.

Public Health Scotland (PHS) recognises that a key role for members of the CPIB, both individually and collectively, is to adopt an approach that can be utilised to explore and learn from good practice, exploit opportunities, make improvements and address barriers in order to influence policy, practice and reform of public services at local and national levels, including across those areas affecting children and young people.

In line with this approach, this paper will consider a number of themes that relate to the wellbeing of children and young people, setting out:

- Examples of innovative/effective practice
- Barriers to the delivery of person-led services
- Opportunities for cross-sectoral partnership working

The following sections of this paper outline our strategic, high-level activities with regard to children and young people, and presents both our general commentary on this topic area and our feedback in relation to each of themes on the points set out above.

## Key activity to support the wellbeing of children and young people

Our Strategic Plan 2020-2023[1], sets out improving the wellbeing of children and young people as one of our key priorities. The plan highlights that we will progress activity on this priority by:

- Monitoring the health and wellbeing of children through our national statistics and through children and young people's profiles.
- Working with local and national partners to understand the health and wellbeing needs of children, where there may be differences, and to identify when action or improvements are needed.
- Providing national support to deliver and improve child health programmes locally, including immunisation programmes, health visiting and screening.
- Working with partners, including COSLA, the Improvement Service and the third sector, to support the development and delivery of joint local authority and territorial Health Board Local Child Poverty Action Plans.
- Supporting the health and social care system to use its powers as an employer and procurer of services to improve outcomes for young people and deliver on the Young Person's Guarantee.
- Working with others to identify, develop, evaluate and share actions which work to reduce poverty.

[1] We will soon publish our new 2022-2025 Strategic Plan which continues to articulate our focus on supporting and enhancing the wellbeing of children, young people and their families.

In relation to our strategic focus on place, our work to support children and young people is delivered across all our organisational programmes (such as housing, drugs and alcohol, active travel and safe & clean environments) and embedded across our overarching localised working approaches (such as community wealth building, local public health improvement team support and localised place based working programmes). The detail of this activity can be found in the thematic area section of this briefing.

## High-level commentary

This section provides brief, high-level commentary on some of the factors to be considered by us all when undertaking both strategic and operational activity to improve the wellbeing of children and young people at a local level.

### International and national frameworks

International and national frameworks collectively provide drivers through which to effect whole system change locally and improve outcomes for all children, young people and their families. This is particularly pertinent as Scotland rebuilds from the pandemic and addresses the current cost of living crisis. There are a range of key frameworks that need to be taken into account including, for example, the upcoming refresh of the National Performance Framework and the addition of the Wellbeing Economy Indicator, the Fourth National Planning Framework, the United Nations Convention on the Rights of the Child (UNCRC), and the ongoing developments around Tackling Child Poverty Delivery Plans.

### UNCRC

In relation to the UNCRC and the rights of children, and as many good examples from across Scotland show, CPPs are the most effective mechanism through which young people can participate as active partners in influencing how adults plan and run services for them at a local level. Facilitating youth engagement has already helped to ensure the alignment of child's rights with other important national and local agendas including GIRFEC, The Promise, trauma informed practice, and child poverty. In the context of both public health, and transforming health and care services for the future, we recognise that there is much to learn from young people and will continue to incorporate their voices into our own work, while encouraging others to do the same.

### Scotland 2045 – Fourth National Planning Framework

We recently highlighted our commitment to supporting Scotland's Fourth National Planning Framework and in partnership with national and local partners we look forward to playing a key role in supporting its future implementation. In our submission to consultation on this framework, we urged the Scottish Government to consider extending its scope to include health/health inequalities as key drivers for planning decisions. We believe this is vitally important in helping to pave the way for government's ambitions to be realised in establishing a World Class Public Health System (WCPHS) in Scotland.

**World Class Public Health System**

Population health leadership needs to be practiced by all in the system to effect change and influence those around them to improve population health. We believe a core element in the delivery of a WCPHS is the development of a local public health system where all roles of consituent organisations, incuding the NHS, are understood. A system that works well should be greater than the sum of its parts. CPPs could become the engine room of the delivery of this function in health board areas across Scotland.

## Barriers to person-led services

Improving the health and wellbeing of children, young people and their families requires sustained cross-sector collaboration across local and national systems, informed by data and intelligence on local needs and priorities. It necessitates a public sector that works 'as one', with clear referral pathways and continuous supported offered to those who need it to avoid increasing proliferation and duplication of efforts which often works against a person led service. As a group of partners, CPPs are the key drivers for leading a joined-up, place-based approach to person-led services through both community wealth building and anchor institution models. For example, the change in government policy to increase childcare provision to 1,140 hours provides a significant opportunity for partners, including health, drug and alcohol partnerships, to coalesce around providing joined-up, co-ordinated wrap around services to support children and their families.

In addition, particular in the context of the most recent spending review, current government preferences for short-term, inflexible, ring-fenced funding streams, fragmented across many policy portfolios, is not supportive of a move towards person-led services. This is because it limits the ability of organisations to respond appropriately to emerging priorities; minimises opportunities to consider more innovative approaches to funding; creates barriers to partnership working; and causes problems for the viability of service resourcing. Moving towards a more streamlined, longer-term and flexible approach to funding the public sector would facilitate a more sustainable and impactful whole-system approach, allowing organisations to work more effectively together to tackle issues related to the wellbeing of children and young people.

**Case Study: Children and young people's mental health**

In November 2020, the Scottish Government made £15 million available to CPPs via local authorities to respond to children and young people's mental health issues, with a focus on those brought about by the pandemic. The £15m youth fund will be running again in 2022/23 and an evaluation of the 2021/22 programme will be undertaken in order to draw out any lessons learned.

## Data sharing

The pandemic forced significant progress in data sharing between public bodies, both at a national and local level. For example, we worked with local authorities during Covid-19 to share Test and Protect data concerning households who were required to isolate. There is now an opportunity for CPPs to build on the progress made in data sharing, particularly in relation to data protection requirements that inhibit partners' ability to share intelligence to allow for joined up, wrap around support for young people and their families. Furthermore, we recognise that national support with data/intelligence sharing and data at a local level are required to help inform local action and monitor progress against, for instance, the four child poverty measures which form the national targets. As Scotland's public health agency, we have undertaken significant work in this area, however more national contributions are needed.

We share our national insight into issues affecting children and young people through data and public health evidence and utilise this knowledge to work with partners to help tackle issues at a local level. Our data and intelligence cover topics such as childhood diet and obesity, mental health including CAMHS, childhood immunisation statistics, and early child development statistics. Over the next year we have made a commitment to streamline and modernise our dashboards and reporting to improve user experience, ensuring it is tailored to meet our customer's needs.

In the current context, data sharing and more importantly interpretation of the data at a local level must improve. We have realigned some of our resource to identify capacity that will be used to help the local system in this space.

Our new Localised Working Programme will work alongside CPPs to help them access and interpret data and intelligence in relation to both national and local priorities. As a starting point, our Covid-19 recover priorities in this area will focus on low-income households; good, green jobs and fair work; and children and young people. As part of the phase one implementation of this programme, we have identified three pathfinder sites across Scotland to test this approach (Dumfries & Galloway, Tayside and the Western Isles). In continuing to roll out the programme, we will work with partners as part of an iterative process to learn and continue to develop our offer.

In our delivery plan for 2022/23, we have committed to several actions over the next year in relation to data and intelligence. Key actions include:

- Working with partners to produce a dashboard/composite reporting on children's issues to inform actions to improve children's lives and ensure that this is used to inform changes, through existing national groups and our new Localised Working programme.
- Utilising existing and emerging data and intelligence available on the impact of Covid-19 on children and young people e.g. COVID Early Years Resilience and Impact Study (CEYRIS) to identify and prioritise areas of public health concern for action.

**Case Study: Prioritise child poverty: a data and systems approach**

A set of resources are now available to Scotland's local authorities and wider partners that can help make an impact in preventing and reducing child poverty. Using a data and systems approach, these were developed as part of a pilot needs assessment project between PHS and the Child Poverty Action Group at Inverclyde Council.

The resources include a data spreadsheet that sets out local and national data sources, themed by drivers of child poverty, to help build a comprehensive picture of what child poverty looks like locally. There are also workshop templates, pen portraits of fictional low-income families and information slides on child poverty in Scotland to help councils engage with local service partners who support families.

Using the tools, in collaboration with partners, local areas can increase their understanding about child poverty locally and use this insight to make data-informed decisions about how best to support families and prevent them from being locked into poverty.

The pilot formed part of the work plan of the Local Child Poverty Co-ordination Group – a group of national partners committed to providing support to local authorities and health boards in the development and implementation of their duty under the Child Poverty (Scotland) Act 2017. It was developed in response to feedback from local partners that accessing and using data to understand child poverty locally was a real challenge.

## 1. Thematic areas

This section considers a number of themes related to children and young people, each in turn, and sets out examples of innovative/effective practice, barriers to the delivery of person-led services and opportunities for cross-sectoral partnership working.

It is anticipated that the content of this paper will aid CPIB 'deep dive' discussions on the wellbeing of children and young people and the role of Community Planning in relation to this as Scotland recovers

from the pandemic. Further detail on any of our contributions set out in this paper can be provided upon request.

| Theme: Whole family support to give families access to the help they need, where and when they need it | | |
|---|---|---|
| **Good practice** | **Barriers to delivery of person-led services** | **Opportunities for partnership working** |
| Inverclyde - Public Health Needs Assessment pilot project (as mentioned in case study above)<br><br>The Rapid Action Drugs Alert Response (RADAR) early warning system for drugs deaths which we have co-produced with substance users will let local teams spot risks to substance users and address them faster<br><br>Place Standard Tool | There is a strong consensus for the need for preventative public health action, but a lack of clarity about what that means in practice for different stakeholders across the system<br><br>Short-term, inflexible, ring-fenced funding streams, fragmented across many policy portfolios<br><br>Required investment shift to primary prevention in relation to public health has not taken place<br><br>Lack of joined up, wrap around family support services at a local level. Lots of duplication and fragmentation. Increasingly complex landscape which differs across local authorities | All public sector bodies working in partnership to adopt a public health approach to improving population health and wellbeing<br><br>Investing in data and digital transformation at national and local level. Putting in place data sharing agreements between public bodies across sectors e.g., education and health<br><br>All public bodies to work in partnership with/influence Scottish Government to:<br><br>• Ensure funding prioritises all three levels of public health prevention<br>• Maintaining funding for vital public services beyond health<br>• Maximise the impact of existing public sector funding, e.g. Anchor Institution/Community wealth building duties<br>• Adopting a long-term, flexible, sustainable approach to funding |

| | | |
|---|---|---|
| | Decision-making on provision is not always underpinned by data and evidence. Very restricted to service-based data<br><br>Limited input from service users themselves<br><br>Data is not joined up at a local level across public health agencies. Lack of data-sharing arrangements in place | |

| **Theme: Reducing and eradicating child poverty** | | |
|---|---|---|
| **Good practice** | **Barriers to delivery of person-led services** | **Opportunities for partnership working** |
| By sharing national insight through data and public health evidence, we are working with partners to support the development of child poverty action plans to help tackle issues at a local level<br><br>Inverclyde - Public Health Needs Assessment pilot project (as mentioned in case study above) | There is a strong consensus for the need for preventative public health action, but a lack of clarity about what that means in practice for different stakeholders across the system<br><br>Short-term, inflexible, ring-fenced funding streams, fragmented across many policy portfolios | All public sector bodies working in partnership to adopt a public health approach to improving population health and wellbeing<br><br>Investing in data and digital transformation at national and local level. Putting in place data sharing agreements between public bodies across sectors e.g., education and health |

| | | |
|---|---|---|
| Implementation of the NHS Demonstrator model to support more targeted local Parental Employment aligned to Anchor role as an inclusive and diverse employer<br><br>We are working with Education Scotland to support Head Teachers by developing data toolkits so they can make informed decisions about local service provision | Required investment shift to primary prevention in relation to public health has not taken place<br><br>Lack of joined up, wrap around family support services at a local level. Lots of duplication and fragmentation. Increasingly complex landscape which differs across local authorities<br><br>Weak and varied referral pathways with a lack of continuous support at various public sector touch points. No single point of contact to improve access to support services<br><br>Decision-making on provision is not always underpinned by data and evidence. Very restricted to service-based data<br><br>Data is not joined up at a local level across public health agencies. Lack of data-sharing arrangements in place | All public bodies to work in partnership with/influence Scottish Government to:<br><br>• Ensure funding prioritises all three levels of public health prevention<br>• Maintaining funding for vital public services beyond health<br>• Maximise the impact of existing public sector funding, e.g. Anchor Institution/Community wealth building duties<br>• Adopting a long-term, flexible, sustainable approach to funding<br>• Agreeing a local approach to implementing "every contact counts pledge" to ensure improved access and referral pathways to support services and consider a "Single Point of Contact/Gateway"<br>• Appropriately fund parental learning and skills development to reduce in-work poverty and help improve earnings potential<br><br>Partners working together to utilise the Independent Care Review's blueprint for family support |

| Theme: Locally based Mental Health and Wellbeing support for children and young people | | |
|---|---|---|
| **Good practice** | **Barriers to delivery of person-led services** | **Opportunities for partnership working** |
| Children and Young People Mental Health Indicators – provide information, at local and national level, about mental health outcomes and the determinants of these outcomes. A suite of resources is being built around the indicators. The first phase of resources (published in March 2022) presents the indicator sets and supporting papers. Headline trend data will be published later in 2022<br><br>We supported Scottish Government in the design of the new child health and wellbeing census, which will be a vital tool in monitoring and responding to changes in child wellbeing. Our involvement was to chair a Census "Content Group" with a remit to develop a set of 'recommended' questionnaires. We are now supporting the use of Census data as it becomes available, with work still at the scoping stage<br><br>We have conducted extensive research with parents over the last 2 years on the impact of the pandemic on their children. The data from this has underpinned the COVID Recovery Strategy and been used extensively to design services to meet changing needs | Pandemic impact on NHS capacity to deliver mental health services<br><br>Lack of alignment and clear, streamlined pathways between community supports and services with CAMHS and relevant health and social care partners, children's services and educational<br><br>The prioritisation of prevention and early intervention is not balanced with continued demand for specialist services<br><br>Gaps in the workforce that deliver mental health services for children and young people | Greater collaboration and co-ordination between agencies, including specialist CAMHS, primary care, social work, schools, and the voluntary and private sectors<br><br>Collective opportunity to recognise prevention and the building blocks of wellbeing i.e., education, safe housing, childcare as being key to wellbeing and mental health. Needs to be given more prominence<br><br>Increased scope to influence the design and delivery of workplace mental health support through the national and local refresh of the approach to health and work |

| | | |
|---|---|---|
| Publication of Child and Adolescent Mental Health Services (CAMHS) waiting times to help inform NHS Board service delivery and build a picture across Scotland<br><br>We published a review of the evidence linking mental wellbeing and socio-economic determinants of health. This looked at a range of studies to better understand how socio-economic determinants shape mental wellbeing. It found that higher socio-economic position is linked with better mental wellbeing<br><br>We created a Mental Health Framework in 2021, which focuses our approach to our work around life stages<br><br>COVID-19 Early Years Resilience and Impact Survey (CEYRIS) - findings help to demonstrate that pandemic had a major impact on children's mental health.<br><br>Education Scotland is working with partners, including PHS, to provide Early Learning & Childcare workers with a better knowledge and understanding of the impact of the pandemic on children's mental health and wellbeing | | |

| | | |
|---|---|---|
| We took on the management of a three-year series of work to evaluate Scotland's Perinatal and Infant Mental Health Programme.<br><br>During Covid-19, recognising the importance of safely remobilising and maintaining education provision for children's wellbeing, we prioritised our support to the education sector. We provided evidence, guidance and advice relating to the education sector to support national and local government to manage and mitigate the acute and longer-term impacts of the pandemic. We have also established a system of covid surveillance in schools | | |

**Theme: Access to safe and affordable housing, transport and heating for families**

| Good practice | Barriers to delivery of person-led services | Opportunities for partnership working |
|---|---|---|
| We are working to develop the routine linkage of homelessness data with health and social care data and aim to understand how this data can be used to support better planning and decision-making locally | Poor data sharing between public bodies locally | Better data sharing between public bodies locally would help to plan secure housing destinations |
| Healthy housing for Scotland briefing paper – evidence-based, clearly linking housing to health and wellbeing | Lack of adequate supply of affordable and especially social housing to meet demand, which is being exacerbated by increasing costs in the housebuilding sector | Partners to work together nationally and locally to adopt a whole-systems approach to the Scottish Government's Housing to 2040 policy framework |
| We supported Glasgow City Region (GCR) to secure £347,000 of funding from the Health Foundation's Economies for Healthier Lives programme. This funding will allow them to deliver a project that will build routine assessment of the likely health outcomes into all large capital spend projects across the City Region | Lack of housing has a particularly significant impact on the lives of both care experienced and disabled young people<br><br>Available housing not meeting the needs of children and their families | Key driver of child poverty - Tackling issues with housing helps to address this<br><br>Partners working together to utilise the Independent Care Review's blueprint for family support |
| We have been invited as a partner to support the design and build of Liberton High School | | |

| | | |
|---|---|---|
| We work to support local policy/strategy: For example, by supporting local authorities to use the evidence we publish to do health impact assessments of their Local Housing Strategies and to enhance connections between housing and local public health teams. This support has been requested by local authority colleagues and is provided in collaboration with Scotland's Housing Network. We also support a working group on behalf of the Scottish Health Promotion Managers Network to bring together people from local NHS boards with an interest in housing and to develop an action plan<br><br>We are working to support learning and development in the health and homelessness sectors through the Scottish Faculty for Homeless and Inclusion Health, in close collaboration with third sector partners, particularly Shelter Scotland, as well as frontline health practitioners and experts by experience.<br><br>We are supporting the Scottish Commission for Learning Disability to explore how a rights-based approach to housing would lead to better outcomes for people with a learning disability and to develop recommendations | | |

| Theme: Access to physical activity and sport for children and young people to promote active lives | | |
|---|---|---|
| **Good practice** | **Barriers to delivery of person-led services** | **Opportunities for partnership working** |
| We are currently leading the development of a systems-based approach to physical activity in Scotland. The emerging strategic actions from this work are aimed at increasing population levels of physical activity across the life course. These actions will be applicable in a national and local context and when implemented the aim is to will impact on the health and wellbeing of communities, including children and young people<br><br>Physical activity referral standards -<br><br>We have worked with a range of professionals who deliver, commission, refer and study physical activity referral services to develop Standards for Scotland<br><br>Lothian: Pilot an evidence based training package (HENRY) with family workers/early learning childcare practitioners, across the 4 local authority areas. This 'HENRY approach' brings together support for parenting efficacy, family emotional wellbeing and behaviour change with information | Inequalities in access to opportunities. In particular for children that from lower socio-economic backgrounds, care experienced or disabled<br><br>Variable and inconsistent quality of physical activity referral services in Scotland<br><br>Variable and inconsistent quality of safe and green spaces for physical activity across local areas and geographies in Scotland | Strong leadership is needed at local, regional and national level to ensure the right environments are available for all that promote and support children in being active regularly<br><br>Enabling and supporting health and social care professionals to refer children to local activities which will benefit their health and wellbeing<br><br>Engaging with local partners and communities to co-produce and co-deliver physical activity referral services that meet the needs of local populations<br><br>Building the evidence base on the effectiveness of physical activity referral service<br><br>Promoting continuous improvement and knowledge exchange across physical activity referral services |

| | | |
|---|---|---|
| about nutrition, physical activity, oral health and more | | |

| Theme: Co-ordinated access to food, childcare and activities during school holidays | | |
|---|---|---|
| **Good practice** | **Barriers to delivery of person-led services** | **Opportunities for partnership working** |
| We work with partners to provide leadership and support national, regional, and local coordination of the community food sector. This includes ensuring. community organisations have the expertise should they wish to provide support for food provision during school holidays, and that local authorities are aware that some may be able to provide this service<br><br>We provided evaluation support to the Early Learning and Childcare teams in government, having supported the design and evaluation of the 1140 funded hours and continuing work on out of school care and the Family Wellbeing Fund<br><br>We are working with the Scottish Grocers Federation to increase access, acceptability and affordability of | Childcare is often unaffordable and inflexible for those who need it most<br><br>Provision and availability of childcare services varies significantly between different local authority areas<br><br>Often accessibility issues for children with additional support needs<br><br>Lack of joined up, wrap around family support services at a local level. Lots of duplication and | Greater collaboration and co-ordination between agencies at a local level, including local authorities, social work, schools, and the voluntary and private sectors<br><br>Supporting the delivery of Scottish Government's Good Food Nation ambition<br><br>Delivery of more flexible and affordable childcare solutions for those that need it most<br><br>Deliver integrated, flexible and accessible services that meet the needs of children from low income families, removing barriers to access which are |

| | | |
|---|---|---|
| healthier options within the convenience retail sector in marginalised communities<br><br>Glasgow Pilot: We are working with partners on a whole system, community food nurturing programme with families of pre-school children combining action on food insecurity, healthy eating and physical activity in three Glasgow neighbourhoods<br><br>COVID-19 Early Years Resilience and Impact Survey (CEYRIS) - findings help to demonstrate that pandemic had a major impact on childcare | fragmentation. Increasingly complex landscape which differs across local authorities | context-specific, and shaped by issues such as geographical location, income level, family support, access to transport and the additional support needs of children. Childcare or activities should also be integrated with food and wider family support where possible for households particularly adversely impacted by poverty |

| **Theme: Tackling health inequalities in children, including childhood obesity** | | |
|---|---|---|
| **Good practice** | **Barriers to delivery of person-led services** | **Opportunities for partnership working** |
| Eating Out, Eating Well Framework - We are working with Food Standards Scotland on the development of | Unequal access to healthy and nutritious food – linked to child poverty | Supporting the delivery of Scottish Government's Good Food Nation ambition |

| | | |
|---|---|---|
| this framework. Includes among other things, calorie labelling and a Code of Practice for Children's Menus<br><br>Mandatory calorie labelling –We supported the development of the consultation document with colleagues in FSS and Scottish Government. The consultation opened on the 8th April and closed on 1st July<br><br>Restricting promotions of high fat, salt, sugar food and drink– we are currently working with the Scottish Government and others to draft the consultation document on this framework. We will also publish a rapid evidence review detailing how unhealthy commodity industries respond to the restrictions on marketing<br><br>In July 2019 NHS Health Scotland published of Standards for the delivery of tier 2 (targeted lifestyle interventions usually delivered in groups) and tier 3 (specialist services for more complex cases) weight management services in Scotland for children and young people and for adults. The standards provide a detailed framework to drive forward consistent, equitable and evidence-based approaches across | Required investment shift to primary prevention in relation to public health has not taken place<br><br>Lack of joined up, wrap around family support services at a local level. Lots of duplication and fragmentation. Increasingly complex landscape which differs across local authorities<br><br>Affordability of healthy foods versus unhealthy foods | More to be done to support the creation of healthy food environments which provide children with opportunities to access affordable, healthy, acceptable, and sustainable food which will support health and wellbeing, taking account of the location and density of food outlets in local areas |

| | | |
|---|---|---|
| Scotland in the treatment of higher body weight and associated health risks<br><br>We host a Child Healthy Weight advisor post (funded by SG) to support local health boards and partners to implement the standards and to help facilitate sharing of good practice through a programme of virtual learning and sharing events<br><br>We were commissioned by the Scottish Government to lead on the development of a national core dataset for weight management services, published in October 2019. The core dataset provides a list of data collection criteria and supporting guidance for collecting high quality information that will help to support local evaluation, planning and any future national evaluation of weight management services across Scotland.<br><br>We are supporting work to strengthen early intervention and prevention of childhood obesity in the early years (0-5yrs)<br><br>We have recently produced an internal paper for Scottish Government, looking at childhood overweight | | |

| | | |
|---|---|---|
| and obesity in the context of the Covid-19 pandemic. The paper will be used to inform a submission to Ministers on further or different action which might be needed to mitigate the impact<br><br>We are working with national partners, including Scottish Government, Obesity Action Scotland, Food Standards Scotland, and three local areas, known as early adopters, to testing a whole systems approach to diet and healthy weight across the local population with children and health inequalities at its core | | |

| **Theme: Improved access to cultural and creative opportunities for children and young people** | | |
|---|---|---|
| **Good practice** | **Barriers to delivery of person-led services** | **Opportunities for partnership working** |
| Following £20 million funding from the Scottish Government for the "Summer of Play", we worked with local authorities and partner organisations including sportscotland, Creative Scotland, Play Scotland, Education Scotland and others, to support existing provision of community-based services while also widening access to other local | Inequitable provision based on locality and socio-economic background | Scaling up and extending existing initiatives, giving recognition to the different needs of, and resources within, communities |

| | | |
|---|---|---|
| facilities, such as school estates and local sports facilities. This has been extended during 2022 to enhance play and childcare opportunities | Synergies, ideas, and good practice spanning culture and health policy areas are shared across existing national and local networks, but the approach is often not strategic, and successes can be undermined by the prevalence of short-term project funding | To maximise the potential of interventions, careful consideration should be given to developing the links between formal education, families, and local communities<br><br>Reinvestment and the realignment of funding to ensure equity of access to opportunities for young people across Scotland<br><br>Develop awareness and training for those in clinical and community settings on the efficacy and appropriateness of cultural approaches to support preventative care<br><br>Include culture as a means to support delivery of public health outcomes for children and young people. In particular, this should involve cross working between culture and proactive and preventative care, population health and wellbeing. |

| | | |
|---|---|---|
| | | Ensuring that culture is employed as a key part of delivering Health and Social Care priorities and contributing to an overall wellbeing economy |

| Theme: Access to support on the impacts of adverse and traumatic experiences | | |
|---|---|---|
| **Good practice** | **Barriers to delivery of person-led services** | **Opportunities for partnership working** |
| As the WHO Collaborating Centre for Health Promotion and Public Health Development with a focus on Child and Adolescent Health in the WHO European Region, we provide professional and technical assistance to help to develop and monitor regional strategy, with a particular emphasis on reducing inequalities in child and adolescent health outcomes.<br><br>Producing official statistics on a wide range of topics relevant to ACEs such as maternity care, infant feeding, and early child development<br><br>Collaborative ongoing development of significant new national data assets to underpin monitoring, and health improvement, of child health. In particular, in 2020/21 we progressed the establishment of a national maternity and neonatal data hub, and the Congenital Anomalies and Rare Diseases Registration and Information Service for Scotland (CARDRISS) | ACEs not always seen within the wider context of societal inequalities<br><br>A public health prevention approach is not always taken towards childhood adversity<br><br>Lack of joined up, wrap around family support services at a local level. Lots of duplication and fragmentation. Increasingly complex landscape which differs across local authorities | All public bodies continuing to collaborate across sectors, locally and nationally to advocate for and support actions that will prevent children's exposure to adversity<br><br>Collective opportunity to recognise prevention and the building blocks of wellbeing i.e., education, safe housing, childcare as being key to wellbeing and health. This is the approach that needs to be adopted<br><br>Providing more support for children and families in the very earliest years – for example, through our universal health visiting service |

| | | |
|---|---|---|
| Working through the Scottish ACEs Hub to continue to build the evidence base, support community responses to ACEs and influence prevention in national strategy and policy<br><br>Working with many people and organisations across the UK, such as the Scottish Childhood Adversity Hub, we have produced a report called 'Ending childhood adversity'<br><br>Supporting maternity services. We monitor the health of mothers and babies through the work of the Maternal and Neonatal Hub and other data collections.<br><br>Working on the evaluation of the Perinatal Mental Health Strategy and with Scottish Government to design and initiate the evaluation of Best Start | | Developing our early learning and childcare system to be more accessible, affordable, more flexible, and integrated with school and out-of-school care<br><br>Partners working together to utilise the Independent Care Review's blueprint for family support |

| Theme: Opportunities for children & young people to develop the skills necessary to secure high paying work | | |
|---|---|---|
| **Good practice** | **Barriers to delivery of person-led services** | **Opportunities for partnership working** |
| The root and branch review of Scotland's career ecosystem and the proposals and actions that have followed | Continuing socio-economic attainment gap<br><br>Complex learning and skills landscape with provision not necessarily aligned to economic need | There are many opportunities for partnership working as the Scottish Government undertakes a review of the learning and skills landscape in Scotland<br><br>There are opportunities to ensure that young people with additional challenges and support needs are provided with targeted opportunities via the Anchor contribution from Public Sector and key Business Partners |

| Theme: Opportunities for young people to study, take up apprenticeships, job or work experience, or participate in formal volunteering | | |
|---|---|---|
| **Good practice** | **Barriers to delivery of person-led services** | **Opportunities for partnership working** |
| The Young Person's Guarantee which aims to connect every 16 to 24 year old in Scotland to an opportunity. | Cost associated with specialist and additional support are not always recognised in funding | Public bodies could adopt both a community wealth building approach and Anchor Institution model. This would support organisations to look beyond |

| | | |
|---|---|---|
| This could be a job, apprenticeship, further or higher education, training or volunteering<br><br>The **Project SEARCH** programme delivers in **NHS sites** aims to connect young people who have learning disabilities and additional support needs, with competitive employment | models and don't enable a needs led, person centred approach<br><br>Different elements of funding may sit within different partner budgets with separate outcomes and objectives and prevent more joined up person centred service design | delivery of their core functions and consider how they can maximise their contribution to improving the wellbeing of communities and addressing inequalities. This would include taking targeted action as an employer to support young people's career opportunities<br><br>There is significant opportunity for public bodies to work in particular with colleges, universities and Skills Development Scotland to determine the best way to create opportunities for young people in this space<br><br>There are opportunities through the health and work review, Phase 3 of No One Left behind and the refreshed Fair Work Action Plan to better target and align support for young people with health conditions (including mental health), disabilities and additional support needs with supported employment pathways<br><br>There is increased scope for public sector to work with third sector to deliver more innovative responses providing more flexible support to meet individual needs |

| | | |
|---|---|---|
| | | Work on Anchors provides an opportunity for NHS working with partners to meet the Corporate Parenting responsibilities through exploring family firm approaches<br><br>Engaging with Scottish Government, Education Scotland and key stakeholders on the draft Youth Work Strategy (2022-2027) for publication in late 2022 |

# Police Scotland Feedback

## Police Scotland Methodology

To assess the views of our regional representatives who participate in CPPs at various levels our Partnership Superintendents were asked to individually provide feedback on their experiences. Due to the regional coverage of our organisation, Police Scotland officers were able to provide a view of the varying experiences across the country, therefore may seem contradictory.

Additionally our Specialist Team for Children and Young People within our PPCW Division also provided separate input. This is detailed at the end of this document.

Regional feedback is summarised below.

## Barriers that are stopping us delivering person led services

Our experience suggests that in some places services are being created with only a child focus rather than a family focus. Without a family focus there is a risk that the roots of the problem will not be addressed.

In some locations there have been difficulties in recruitment within some 3rd sector agencies who provide assertive outreach. This may be related to the manner in which 3rd sector vacancies are funded or lack of available trained staff and vetting. This is also reflected of the waiting time to get access to both statutory and some 3rd sector services. This encourages system players to focus on crisis management when the focus should be on crisis prevention. Crisis Prevention should be a golden thread going through all strands of CPP decision making.

An issue has been raised regarding looked after young people and those in temporary accommodation. Transportation for young people to get to school, particularly those most can cause an issue. Like adults, children often have to flee from dangerous situations leaving everything behind. System processes often do not take account of situation like this and still demand ID and proof to access services.

A public health approach to community planning might alleviate some of the health and stigma issues for children. Children attending school hungry or who have an unhealthy diet are easily identified by peers. Although school meals and breakfast are used to mitigate the immediate need they do not mitigate the underlying problem. Taking a family approach, potentially using private sector partners (anchor organisations) CPPs could encourage learning for parents as they may have had limited role models to follow.

In some areas local authorities are funding school trips to outdoor experiences. In other areas there have been trials taking family groups on similar outings (SVRU in Ayrshire and Tayside). Outdoor experiences have a positive effect on relationships and bonding among groups and this is well recognised. In Scotland outdoor instruction has been a profession also decimated by the effects of Covid. To engender a healthier, fitter and more respectful community CPPs could consider the wider cost v benefits of such experiences for young people and their families/communities.

As the attainment gap grows, employers are recruiting from those with much higher qualifications than specified in their adverts. This does not take account of the effort to achieve from those from a

care background or where poverty and long term unemployment have been engrained within a family unit. Our colleges and universities take background into account when considering access, CPPs should involve local employers to participate within the CPP to encourage similar consideration.

## Governance and planning arrangements that could be streamlined

Levels of content in reports, or expectations of such, could be clearer. Time spent reporting, particularly for multi-agency programmes where there are several contributors, takes time away from service delivery.

In some areas CPP chairs have worked hard to align reporting periods with partners however this requires partner co-operation and possibly some consideration of the demands on individual partners on government governance requirements. CPP Chair for North Lanarkshire, Chief Superintendent Alan Waddell, has recently overhauled reporting lines to minimise overlap and time. It has been commented however that people and organisations have personalities, some are more bureaucratic than others and this should be considered when establishing the level of governance required in any specific region.

Comment from one area shows competing demands between CPP reporting, Public/Child Protection reporting and Community Justice reporting. Possibly a best practice organisational chart for the general structure and reporting lines for CPPs would be of benefit. This might be drawn from areas where they have developed streamline governance measures.

## Areas where better data sharing is needed

Earlier indications of household debt might help other services provide help to avoid eviction, fuel poverty and school poverty (lunches and uniforms). In an example recently given, a child was barred from school for failing to pay the fee for their lunches while another person was saved from eviction with debt advice and other support by their LA and then got a £500 bill to cover some of the work the council had done for them. Both these examples show that although a lot of good work goes into helping people, this can be easily undone by not connecting with finance teams. Policing have a similar issues with Fixed Penalty orders not being paid due to debt while we continue to issue them; we have to consider if sending a bill makes things better or worse.

Data sharing was easier under Covid as this was a period declared a 'Public Health Emergency'. Levels of data that need to be shared are often more than is required if we are looking at early prevention. Alternatives are providing signposting information when a situation starts to be of concern and thereafter a move to sharing under 'public task' a person's contact details with partner as the situation worsens. Background details are often not required especially when the sharing agreement specifies the circumstances when details will be passed.

## Engaging partners who have a key role to play

There continues to be some issues relating to access to professionals who are working from home in some areas. Generally though the partners are willing to listen however budget continues to be the stumbling point. Moving away from traditional and process driven methods of working is key to reimaging partner engagement.

It should be noted however that many of those noted by our officers who had key roles to play are often under-represented in CPP and CIB. These included Chamber of Commerce, School and district nursing teams,

## Good practice examples of innovative/effective progress (including those emerging from COVID)

### Let's Introduce Anxiety Management (LIAM) – 8 week programme delivered by school nurses

Children 1st – engaging with you people before mental health referrals are passed to GPs. Helps prioritise the service and gives the young person other options.

Signposting to money advice services and different options for payments of rent arrears etc.

### Community Cooking Classes

Tayside have a Regional Improvement Collaborative with a shared Health & Wellbeing Strategy across all agencies.

Dundee involved in What Matters 2U, with help from The Lens, to ensure funding and support is directed to the appropriate community projects, using an entrepreneurial mind-set

Contextual Safeguarding - Child Protection interventions are traditionally focused on addressing family based or individual concerns, for example parenting capacity or a young person's choices. The contextual safeguarding is an integrated approach which works in partnership with agencies and organisations to identify ways to change social conditions and environments and provide targeted interventions on reducing risks in the community such as parks, communal areas, schools, online etc. Young people are influenced by a whole range of environments and people outside of their family (often referred to as extra-familial harm) i.e. school / college, in the local community, in their peer groups or online. Contextual safeguarding is an approach that looks at how we can best understand these risks, engage with children and young people and help to keep them safe.

## National Children & Young People Dept. – PPCW Division

### Barriers that are stopping us delivering person led services

In Scotland the policy surrounding CYP is moving at a great pace. This is really positive and forward thinking, however the pace of change with significant interoperability, all within existing resourcing levels is challenging. The aspiration within policy and strategic direction is based on a public health approach but most public authorities remain focussed on how they can deliver their aspect of the change.

The value of lived experience in the design of services is now being recognised. However there is still much work to be done to embed participation into public authorities.

### Governance and planning arrangements that could be streamlined

This is probably best answered at a local delivery level.

### Areas where better data sharing is needed

Police Scotland are working to improve the collection and dissemination of the existing data we hold for CYP. Further consideration about the data we hold and other uses is required.

## Engaging partners who have a key role to play

At a national level there is excellent partner engagement for individual thematic work streams, for example for Youth Justice through the National Youth Justice Advisory Group and several associated Working Groups. These work streams will overlap with others highlighting opportunities for joint work but only seen through criminal justice lens. If criminal justice policy was a contribution to the wider wellbeing needs of CYP it could lend itself to better action planning and engagement between partners.

## Good practice examples of innovative/effective progress from across all sectors (e.g. Public Sector, Third Sector, businesses and communities) (including those emerging from COVID)

1. Opportunities for young people to study, take up apprenticeships, job or work experience, or participate in formal volunteering/ supporting those with experience of the care system. This is a priority for PSoS Corporate Parenting Plan. https://www.scotland.police.uk/spa-media/yznj40xs/corp-parenting-plan-2021-24-final.pdf.

With Who Cares? Scotland produced this animation to encourage care experience into our organisation and highlight the work of our care experienced colleagues. Police Scotland - Care Experienced Group - a case study | Corporate Parenting

2. Care experienced young people over represented in the justice system

Evidence provides that children in residential care are over represented in the criminal justice system and have significantly higher incidents of going missing from home than their peers. In 2019, Police Scotland approved a test of change aimed at reducing the criminalisation of children and young people in care of local authorities. The pilot was initially tested in Dumfries & Galloway Division and was used as an opportunity to incorporate the extended adoption of the 'Not At Home' missing person protocol.

The pilot changed the way in police would ordinarily deal with incidents involving children and young people in a residential care home setting. Protocols were put in place to respond differently to behaviours that could be considered as low-level crime and to children missing/not at home. Within strict parameters such behaviours were to be resolved within the house, not reported to police, and even when they were, police had discretion to not record as a crime.

A Strategic group of partners was formed including Police Scotland, Care Commission, Dumfries & Galloway Council, Dumfries & Galloway Health and Social Care Partnership and Care-vision. The strategic group delivered a programme of multi-agency training to police officers, social workers and care staff. The strategic group was supported by Who Cares? Scotland, Centre for Youth and Criminal Justice ICYCJ and CEYP and they all contributed to joint- training, prior to the test of change starting.

The initial test of change ran until 2020 with the recommendation for an additional test of change in a more populated area. This is ongoing in Greater Glasgow.

The key findings of the evaluations from D&G and indications from GG are;

- Multi-agency training has been instrumental in success; highlighted the value of the involvement of CEYP in the training as it provided real life context and effects.
- Social work and care staff highlighted the benefit and value from police building relationships with children and carers, resulting in a more effective partnership, with the young people being the focus;

- Police officers reported a much more effective relationship with staff and a greater appreciation of why young people were in care and the support they could provide;
- Recorded crime of minor nature and missing episodes reduced.

The test of change in Greater Glasgow has been impacted by the pandemic but is now ready for evaluation and next step recommendation are imminent.

Wellbeing of Children and Young People

AUDIT SCOTLAND

# Audit Scotland Response

Members were asked for thoughts on the barriers which are getting in the way of delivering on our collective ambitions in this area, structured around a number of themes.

The text below lists some issues raised in recent audit work relevant to the themes. This includes work specifically related to children and young people and findings that apply more broadly. Some of the issues could sit under more than one of the themes.

## Barriers that are stopping us delivering person led services

- ***Lack of collaborative leadership.*** In the AGS blog on Christie 10 years on he said: *'I am not convinced that public sector leaders really feel accountable for delivering change that demands different organisations work together. There is much talk of collaborative leadership. But in my discussions with public sector leaders, it's clear that too many of them still don't feel truly empowered or sufficiently emboldened to make the changes they think are needed to deliver Christie. Our collective appetite for risk-taking and innovation, and how we hold public sector leaders to account, also needs to shift. If every 'failure' results in hostile media and political scrutiny, we will never encourage creativity, entrepreneurial thinking and risk-taking in how we deliver public services. I'm not suggesting accountability isn't important, far from it. But we have to give our leaders the space, time and incentives to take managed risks'.*

- ***Fragmented systems*** – The 2018 Children and young people's mental health report found complex and fragmented systems that made it difficult for children and young people to get the support they need. In our blog in 2021 we said that the situation remains similar, despite significant investment. In the blog we also said that data also remains an issue. Almost one in four (23.5 per cent) of referrals to specialist CAMHS were rejected in 2020/21. But we still need national data to understand if these children and young people accessed alternative services – and what difference this made.

- ***Silo working*** – the Blog on children and young people who need additional support for learning highlights the importance of services working together around the needs of the child but that this isn't always happening. This is particularly an issue at points of transition for learners across services, eg from primary to secondary school.

- ***Gaps in data on outcomes*** and on the link between spending and outcomes to help target spending and initiatives better, eg findings in our education outcomes. The report says that the focus on exams as outcome from education can risk children and young people not getting the support and encouragement to pursue alternative pathways that may be more appropriate for them.

- ***Lack of data to be able to monitor NPF and wider education outcomes*** set out as national priorities for school education, such as wellbeing and resilience (from the education outcomes report). This has implications for accountability, as well as for monitoring progress and identifying areas for improvement.

- ***Gaps in data, including equalities data*** - Local Government in Scotland Overview 2022 says there is still a lack of data and evidence at local level that would allow councils to fully understand the adverse impacts of the pandemic on different groups within their area and

inform local plans. We will also be highlighting gaps in equalities data in the child poverty briefing.

## Governance and planning arrangements that could be streamlined

- ***Duplication and fragmentation*** - The Interim chair of Accounts Commission blog on Christie said *'There is still much fragmentation and complexity in how services are organised, resulting in duplication and confusion. Yes, services need to be delivered to fit local needs, but good practice from elsewhere is not embraced and adopted enough.'*

- ***Implications of ring-fenced funding*** – The LGO says: While ring-fenced funding helps support delivery of key Scottish Government policies, such as expanding early learning and childcare services, it can constrain a proportion of the total funding and resources available to councils and removes local discretion over how these funds can be used.

- ***Multiple funding streams*** - We are hearing of some concerns in the education and children's services sector around the number and range of pots of money for specific purposes that some in the sector feel could have more impact if used in different ways. (This is anecdotal and not reported in any outputs.)

## Areas where better data sharing is needed

- ***Data architecture and organisational silos*** - The reports on Enabling Digital Government and Digital progress in local government found that better use of data, data sharing and improved data infrastructure are needed across the public sector in Scotland. Digital progress in local government said that *'Organisational and cultural silos are commonplace in councils and are a barrier to collaboration. Technology contributes to this, with councils having different systems across services that do not easily connect and work together. A lack of capacity, particularly in digital teams, is also a barrier to collaboration within councils.'* We have also highlighted this in our reports on health and social care integration.

- ***Local data*** - The LGO highlighted research by the Urban Big Data Centre that found that since the beginning of the pandemic councils have experienced a rapid increase in demand for 'on the ground' information to understand their local communities. But this is hampered by challenges including access to data, a lack of joined-up data, issues with data quality and a lack of analysts to generate intelligence from it.

- ***Child-centred data*** - In the Early learning and childcare follow-up we reported on the lack of good quality child-level data across Scotland, capturing equalities characteristics. This is needed to evaluate the impact of the expansion and to monitor uptake and consider the need for improvements.

## Engaging partners who have a key role to play

### Third sector

- We made a recommendation in the education outcomes report that schools and councils more effectively involve the third sector in local planning to improve longer-term outcomes.

- The LGO raises issues about the sustainability of the third sector. It said: Organisations providing support to children and young people, from early years to youth work services, are also facing barriers to delivering their services. A lack of staff capacity, increased demand, and lack of access to premises to deliver services (of those voluntary sector organisations wishing to access local authority premises 65 per cent say they have no access) is affecting delivery of a range of services.

- In the Early learning and childcare follow-up report we highlighted the potential impact of the expansion in councils' ELC workforce on these private and third sector providers of funded ELC.

### Children, young people, parents and carers

- The education outcome report stresses the importance of schools, councils and the Scottish Government engaging and working with pupils and parents in a meaningful way in planning to improve outcomes.

- The education outcomes report highlights concerns raised by the Children and Young People's Commissioner for Scotland (CYPCS) about children's rights not being always being considered as Covid-19 measures were put in place.

- The blog on additional support for learning highlights the importance of listening to parents and young people. It said: *'It's distressing and frustrating that we repeatedly hear of the barriers that some families fight against to get the right support to help their child to learn. Too often, families are worn down by a prolonged search for the right support, and by having to manage a crisis that could have and should have been avoided. Families are partners with public services and should be regarded as such'.*

### Communities

- In the LGO in May 2022 we said that the early response to Covid-19 showed what could be achieved by working closely with communities and the voluntary sector This momentum may be lost if communities and the voluntary sector are not involved in shaping recovery. Flexible governance and decision-making structures will be needed, as will opportunities for more local participation.

- The Community empowerment: Covid-19 update said that *'Partnerships and the voluntary sector were vital in supporting and empowering people to do this. In areas where existing relationships were stronger, some communities were able to provide a faster and more targeted response, for example in North Ayrshire.'* The briefing paper sets out key learning from the pandemic linked to the Principles for community empowerment[2]. It also included some examples of learning from communities during the pandemic.

[2] Community control; public sector leadership; effective relationships; improving outcomes; accountability

## Good practice examples of innovative/effective progress from across all sectors (e.g. Public Sector, Third Sector, businesses and communities) (including those emerging from COVID)

- The AGS's blog on Christie says: *'Since last March, we've seen public bodies disobeying organisational boundaries and delivering 'Christie' at scale and pace. It's been truly impressive and shows what can be done'.*

- The LGO said that collaborative leadership enabled the response to the pandemic as councils worked with partners, communities and across departments. Exhibit 1 outlines key leadership principles that have been important in the response phase and could further support recovery and renewal.

- The LGO includes a case study on Fife Council's Covid-19 response shows that greater flexibility, trusting relationships, relaxation of bureaucracy and autonomy in decision making enabled the public sector to work with communities and voluntary organisations and deploy support quickly (Case study 6).

- The LGO also includes a case study on Glasgow City Council's work with the Centre for Civic Innovation using data to develop a clearer picture of child poverty in Glasgow.

- In the education outcomes report we welcomed the Covid-19 Children and Families Collective Leadership Group that was established in May 2020. This group involves partners from health, social work and the third sector and considers the needs of vulnerable children and families and the support that is required.

- Scotland's colleges 2022 includes case studies on college support for students in addressing mental health and poverty challenges, and to support inclusion. On average, socially disadvantaged and vulnerable students were less likely to successfully complete their course than their peers (See exhibit 4).

# Improvement Service Feedback

## Introduction

The Covid Recovery Strategy contains a target outcome of improving the Wellbeing of Children and Young People. Some of the key themes identified within this outcome are:

- Whole family Support to give families access to the help they need, where and when they need it
- Locally based Mental Health and Wellbeing support for children and young people
- Reducing and eradicating child poverty
- Access to safe and affordable housing, transport and heating for families
- Access to physical activity and sport for children and young people to promote active lives
- Tackling health inequalities in children, including childhood obesity
- Co-ordinated access to food, childcare and activities during school holidays
- Improved access to cultural and creative opportunities for children and young people
- Opportunities for young people to study, take up apprenticeships, job or work experience, or participate in formal volunteering
- Opportunities for children & young people to develop the skills necessary to secure high paying work
- Access to support on the impacts of adverse and traumatic experiences

The CPIB members committed to establish a short life working group to identify and deliver actions that would make progress against this outcome. In support of this, members of the CPIB were asked to share their thoughts on:

- Good practice examples of innovative/effective progress (including those emerging from COVID)
- Barriers that are stopping us delivering person led services
- Governance and planning arrangements that could be streamlined
- Areas where better data sharing is needed
- Engaging partners who have a key role to play

This document collates feedback received from teams within Improvement Service to answer this request.

## Barriers that are stopping us delivering person led services

- **Resources** – A lack of resources both for reporting and to introduce new policy approaches were highlighted repeatedly. For example, 'Without additional resources and someone to lead on this programme it risks becoming a tick-box exercise. We have a joint plan and there are gaps but not strong momentum around how to address them.' Capacity and pressures of existing service delivery, including backlog from pandemic, mean that simply continuing to deliver the services as they are is a challenge, without looking to make changes. There are instances where senior officers take retirement and their posts are not replaced with staff at the same level due to financial constraints. This results in experience and knowledge being lost.

- **Joined-up Policy** - It is getting better, but a lot of Scottish Government Policy is not joined up, and then any subsequent funding is not joined up. The new National Strategy for Economic Transformation does mention tackling child poverty and the Tackling Child Poverty Delivery Plan has a strong Employment component, so some connections are being made.

- **Lack of funding for Change capacity** - There is no funding available to employ someone to lead on child poverty in the local authorities or NHS boards. Some organisations are lucky enough to have a lead for tackling child poverty which is their only area of focus, but for many it is added onto an existing post, so there is less time dedicated to looking at how to improve services and make them fully person led, and the focus is more on writing a LCPAR. Struggling to recruit into change posts, Councils are competing with private sector salaries and only able to offer short term contracts at lower salaries.

- **Ring fenced funding** - A lot of funding is ring-fenced which makes being innovative with services, joining up pots of funding and linking services difficult, as spending can be quite restricted.

## Areas where better data sharing is needed

PSIF self-assessments have covered a broad number of areas in the last year, one of which was a self-assessment of a Child protection Committee (CPC). One of the main issues that emerged was the need to get better at gathering feedback around the inclusion of children, families and carers subject to child protection processes. Specifically, to improve data gathering around the following:

- Are children's views routinely captured;
- Are children routinely invited to their meetings;
- How many children attend;
- Do children get a copy of their plan.

In addition, the lack of capacity to analyse existing data in order to best service the CPC was highlighted. The PSIF Team liaised with Public Health Scotland to identify possible data analysis support and made the appropriate connections between the local LIST PHS officers and the Chair of the CPC and the CSWO.

- There is a need for improved data-sharing between DWP/HMRC and local authorities – and also between Social Security Scotland and local authorities.
- At the moment DWP/HMRC/SSS can't share income data or data about specific households with local authorities – except for the purpose of administering HC and CTR. So it can't be used – for instance – to increase uptake of other local entitlements such as free school meal, school clothing grants or educational maintenance allowance.
- An example of good practice comes from Glasgow City Council who – in partnership with the Centre for Civic Innovation have got permission from DWP/HMRC to use that household income information for research purposes. The have layered this with SEEMIS data to get a really clear picture of the scale and depth of poverty in the city that goes far beyond what is available from national data.

## Governance and planning arrangements that could be streamlined

- Different pieces of funding have different reporting requirements. Disparate reporting taking time away from people being able to have impact. The reporting burden following the awarding of grants is a time allocation that could be spent in actually delivering the services.
- There are difficulties in delivering long term services with short term funding agreements in place for the third sector. This can result in lack of continuity of funding for services and projects. Staff aren't being retained due to a lack of job security, resulting in loss of skills and loss of relationships that have been built up.
- There is also frustration about lack of investment to allow local areas to take a strategic approach to tackling child poverty / family poverty. Pots or funding directed towards particular initiatives are good – but sometimes they don't fit with what needs to happen locally.
- Providers need to keep chasing money to keep their services going. At the moment there is a requirement to bid for an amount of money. This relies on services identifying issues and bidding for funding to try and resolve them rather than a commissioning function 'procuring' services to fill identified gaps.
- There are local frustrations in relation to Pupil Equity Funding. One lead noted 'this remains under the control of individual Head Teachers and therefore there is little control or influence over how it is spent. It is hard to know if it is being spent in the right way and is linking to broader work in the community. Schools can do what they like where the local authority has to procure things!'
- The LCPAR process is increasingly embedded in a wider strategic framework. Most LCPAR's describe how their work on tackling child poverty links to wider corporate commitments. For example, many have an overarching aim in their Local Outcome Improvement Plan that refers to reducing inequality and/or poverty (some – such as Angus, child poverty specifically) and this forms a strategic link between the LCPAR and the LOIP. Reference is also made, and links drawn to substantive local strategies and action plans including economic development, housing, The Promise and children's services. It can, however, be difficult to discern the extent to which the need to reduce child poverty and the LCPAR process has influence the content of these strategies, and when they are merely being 'name-checked'.
- In general, most local areas have established a multi-agency working group within community planning structures to develop and co-ordinate a body of work to tackle child poverty locally and to publish the annual report. While each area has developed their approach to governance, there are several common challenges to this work.
- Ensuring governance arrangements allow for a strategic and preventative approach to tackling child poverty – the intention behind section 13 of the Child Poverty (Scotland) Act 2017 is that Local Child Poverty Action Reporting Process will be a driver of change and contribute to a reduction in child poverty. However, in order to drive this kind of change locally – and ensure the LCPAR is more than just a list of ongoing activity that would be happening with or without the reporting duty – there is a need for support and 'buy in' at the highest level of a wide range of local partners across a wide range of disciplines. This arguably requires ensuring that the chair of the child poverty working group has enough seniority/ position to influence wider actions of services who are not routinely engaged in the agenda. The need for high level strategic buy in is particularly important in the absence of local action on child poverty specifically (other than through PESF). Ensuring that links are made across a wider range of other agendas.

- Ensuring governance arrangements encourage effective and efficient collaboration on child poverty- identifying the most appropriate sign off route can be challenging – local authorities may not fully understand Health Board corporate structures and vice versa. While each area takes a route that suits the preference of local leaders, the need to co-ordinate sign off routes and committee schedules, can lead to significant delays in the formal sign off of reports. Where territorial health board and local authority areas are not coterminous, the health board is required to sign off multiple reports e.g. NHS Lothian Health Board sign off on West Lothian, East Lothian, City of Edinburgh and Midlothian LCPAR's.

## Engaging partners who have a key role to play

- **Early Learning and Childcare** – Around 70% of all funded ELC is provided by local authorities, with the remainder being delivered by private and third sector nurseries or childminders. Through expansion and in the first year of delivery there has been challenge from certain areas of the private and third sector nurseries in the level of funding they get to deliver on funded hours. This results in significant challenge for council officers. Better engagement is needed with these key partners in a constructive way to evidence how councils are funded and how that funding is passed to the private and third sectors.

- **LCPAP -** While the statutory LCPAR duty falls on local authorities and health boards, a holistic and effective approach to tackling child poverty would by necessity involve a wider range of local and national partners, including CPP, third sector and beyond. It is evident from reviewing LCPARs from year 1-3 that local areas are taking an increasingly strategic approach and employing an ever-wider range of policy levers. However, there is a need for more focus on households with children (rather than the whole population) and – in particular- the 'priority groups' at the highest risk of child poverty. There is also need for further consideration of how the impact of local measure is understood.

## Good Practice Examples

### Early Learning and Childcare Data Sharing Agreement

All children aged 3 and over are entitled to 1140 hours funded early learning and childcare. Some 2-year-olds are also eligible, and the criteria for eligibility is closely linked, though not identical to, the eligibility for free school meals. Uptake of funded ELC amongst the 3+ year-old population is almost universal, and a recent Improvement Service report notes that 87% of those in funded ELC are accessing the full 1140. Uptake amongst the eligible 2-year-old population is lower. Reasons for this have variously been thought to be related to the stigma attached to a targeted offer, or simple unawareness of families that their child is eligible. Councils work to encourage uptake amongst this population, though numbers remain low compared to those children entitled to the universal offer.

Legislation is to be passed later in 2022 which will activate a data sharing agreement between DWP, HMRC and Scottish Local Authorities that will allow councils to know which families in their area have a 2-year-old who is eligible for funded ELC. This will allow councils, for the first time, to actively engage directly with those families who have an eligible 2-year-old, and the Improvement Service is working with councils to understand the practicalities and implications of this new data sharing arrangement.

## Police Scotland and Local Government Collaborative Leadership Programme

The OD Programme Manager is a member of the design and delivery team for the Police Scotland and Local Government Collaborative Leadership Programme. This programme was designed and delivered by Police Scotland, Improvement Service and Collective Leadership for Scotland (located within Scottish Government) and comprised 3 pilots in different locality areas (Aberdeenshire, West Dunbartonshire and West Lothian).

It was introduced to support the development of meaningful collaborative working across public services and to inspire personal development and more effective local partnership and collaborative working. In essence, to enable leaders to work better together, across boundaries, in collaboration. To achieve this requires people to develop particular skills, behaviours, and ways of working and the programme draws from the theory and practice of collective leadership, systems thinking, and wicked issues, all of which are highly relevant to the current context and future challenges of public services in Scotland.

The programme is not just about developing an individual leader, it's about how leaders tackle complex issues by working and leading collaboratively. It brings leaders together from across councils, Police Scotland and also other partner organisations, to work and learn alongside each other.

The learning and work take place in small action inquiry groups, organised around a local place-based issue where each group identifies shared issues affecting their locality to work on. In the pilot areas, many of these issues were related to wellbeing of children and young people.

The benefits of the programme included

- Sharing perspectives and experiences;
- Establishing new relationships and connections or building on existing links ;
- Taking a whole system view towards collaboration;
- Not jumping to solutions;
- Engaging with more people from across the system to explore new and different ways of working and of tackling complex issues.

The programme was well received and work is currently taking place with partners to develop proposals for the further rollout. An independent evaluation was carried out and the report is available here.

## EXAMPLES FROM LOCAL CHILD POVERTY ACTION REPORTS

Local child poverty leads reported that while COVID lockdowns had been extremely challenging for those with a role in tackling poverty, they had also allowed certain barriers and obstacles to reaching families to be side-stepped. The following is an extract from evidence provided by local leads to the Poverty and Inequality Commission via the National Coordinator for Local Child Poverty Action Reports

- Positive impact that relaxation of GDPR had had. One noted, 'we were able to better support families – get money out to them, bypass procurement (which takes too long) and rely on good governance. We were able to make individual client outcomes a condition of grant, which in turn made it easier to build pathways to other services e.g. to tackle fuel poverty/ employability support etc. We could also track families for

multiagency support and engage with willing 3rd sector organisations in a way that we were not able to do previously.'

- The 'cash first' approach taken in many areas throughout the pandemic was seen by some as really empowering for families. 'All the support available has really helped families. There is a real worry that money will dry up and that support will no longer be available. There was a high cash flow to Councils which meant that they were able to help like never before.'
- Example: 'We set up a forum so we could hear directly from families. This impacted the way we work in several ways. Firstly, direct, cash payments for families. Secondly we were more agile and responsive and processed applications and got money out the door much faster. We also found new ways of accessing children who couldn't attend school but were still entitled to financial support with food. '
- Example: We developed a crisis response team with staff and resources from different disciplines. It was a holistic approach which allowed us to refer people to the services they needed. We also used shared funds to pay one week's living wage to those experiencing crisis. People were so grateful for that. Going forward much of this way of working will be lost. I will no doubt have questions to answer about whether those who received support were in the target group for each particular source of funding we drew upon. We had no option at the time.'
- One lead noted that 'many of the things taking place are a short term/medium term response. This is making a difference (devices/payments/vouchers) but need to do more to focus on root causes, drivers and longer term response as these people will 'fall off a cliff edge' when these short term interventions are removed without more consideration and response to fundamental causes.'

Embedding advice in universal services (including schools, early learning and health care settings)

- Maximise Service in Edinburgh – click the link for webinar
- FISO project in Glasgow – Recent SRI research suggests £7 return for every £1 invested and good reach to priority groups.
- **Holistic approaches:** See the Lifting Families Together project in Edinburgh - https://youtu.be/X6oV_ojM5PM. It is a 5-year test of change that seeks to remove silos and develop a multidisciplinary neighbourhood team offering holistic and long-term support for people to lift themselves out of poverty. The Scottish Government has also committed to fund Pathfinder in Glasgow and Dundee (And several areas yet to be identified) to take a more joined up, whole systems approach to tackling child poverty. It is likely that the Improvement Service and other national partners will have a role in supporting this work.
- **Focusing on parental employment:** Fife has co-designed employability services to ensure an adaptive and holistic approach to support for low-income families. More examples of where employability services are contributing to a reduction in child poverty are available in this report from an event which brought local child poverty and local employability leads together to discuss PESF.

## CONTINUED ACCESS TO FREE PERIOD PRODUCTS

Councils are making sure that no young people have to go without access for free period products throughout the COVID-19 pandemic even though usual availability in schools and colleges is restricted.

Argyll and Bute and Aberdeenshire councils have teamed up with Hey Girls to deliver products to people's homes. Pupils just need to fill out an online form that requests chosen package, school, name and delivery address.

Angus Community Planning Partnership is also working with Hey Girls as well as building a physical distribution network of local food shops that are still open.

In Dundee, a free contactless delivery service of period products is available to all citizens. A dedicated phone line and email address, managed by council staff, was established to enable residents to place orders directly, and all those requesting products have received a three-month supply delivered to their homes by the council's third sector partner Dundee Volunteer and Voluntary Action.

East Renfrewshire Council has made period products available through its Humanitarian Food Hub and they can be requested as part of the weekly food bag.

Inverclyde Council has extended its online scheme with partner Hey Girls until 26 June 2020. The successful trial during May saw nearly 400 orders placed. As well as the online delivery service, Inverclyde Foodbank will also continue to receive supplies to add to parcels.

With the free provision of sanitary products via leisure facilities no longer possible, North Lanarkshire Council is distributing free products through partnership working with Community Food and Health Partnership, food banks and community groups.

### TRANSPORT SCOTLAND – TRANSPORT AND CHILD POVERTY BEYOND THE PANDEMIC

Transport provides a critical infrastructure for households when living on a low income and must work effectively for household circumstances to help alleviate poverty.

*Looking forward for solutions*

Evidence clearly indicated that transport could intensify or increase the poverty families were experiencing. At the same time, effective transport systems could help to reduce poverty and improve wellbeing. Several policies and initiatives to support families and young people and tackle the challenges presented by current transport provision were highlighted.

- Discounted or free entitlements for families: The everyday costs of transport were highlighted as a key pressure across the study. In terms of removing this barrier, participants favoured the extension of free travel or discounted travel for low-income families to enable them to access day-to-day services and engage in wider life. This was seen to have benefits for children and young people within the study who faced exclusion from their day-to-day life due to restricted household budgets. One participant suggested the value of having a card for travel similar to the provision offered in the Best Start Food Scheme where the card was pre-paid for use.
- Free times on public transport for families: It was highlighted that at some points during the day, transport services could be less busy and rather than having under underutilised provision, these periods could be offered as a free travel times for families.

### YOUNG WORKERS AND EMOTIONAL WELLBEING AND RESILIENCE

The Emotional Wellbeing & Resilience Project aims to address the impact of trauma and childhood adversity.

The vision of the project is to give children and young people the relationships and connections they need to build their resilience and emotional wellbeing by bringing services and community together to address the impacts of childhood adversity and trauma.

The project has a number of aims, including:

- Awareness: developing trauma-informed organisations and communities that recognise the reasons behind behaviours and address this in a positive manner.
- Relationships: Children and young people have the opportunity to experience and maintain trusting, stable and nurturing relationships.
- Resilience: Support for children, young people and their families to build their resilience to help them achieve the best possible outcomes regardless of the difficulties they may face.
- Co-ordination & Research: knowing how services work together effectively and building on research to identify what can be improved for vulnerable children.
- Equity: to ensure fair and consistent access to opportunities for all children, young people and families.

The project is funded by the Shetland Islands Council and is supported by our partners, NHS Shetland, Voluntary Action Shetland (an umbrella organisation for many in Shetland's third sector), Police and relevant services in the Council.

As the project relates to young people, their input was required in the development of the vision, aims and objectives.

**The challenge**

After securing funding for a project that aimed to address the impact of trauma and childhood adversity, it was important for young people to play an ongoing role in the development of the project. There were a number of challenges to consider, particularly in relation to capacity and commitment within this role. How could we include the voice of young people and who can connect to Shetland's young people, who have the time to engage and were paid for their work? How many was a good number for a team? How much time would they need? How would we support open, respectful, comfortable, safe engagement with the new project workers and our existing teams of professionals?

Another challenge was around how to guarantee that the young people could maintain an impartial status, whilst also ensuring they received the support they needed to engage in a landscape dominated by professionals. This was innovative as no one had done it as directly.

**Outline of activity**

The Emotional Wellbeing and Resilience project officers took the decision, following discussion with project governance, to try to find a way to employ a group of young people. The reasoning behind this idea was that they would become project workers with a remit to participate in a wider group to define the vision, aims and objectives for the project. Then, in the longer term, they would connect with the wider voice of young people in Shetland.

The project created a contract with our local voluntary sector umbrella group (Voluntary Action Shetland) to:

- maintain independence
- provide structure for recruitment and employment
- Provide support to engage in groups
- Provide support to carry out activities
- provide ongoing support.

The objectives of this contract included:

- Identifying and providing local and national training opportunities to enable young people to participate effectively in the decision-making process.
- Identifying the training needs of the strategic group as a whole to enable young people and adults to work together effectively in the decision-making process.
- Providing regular 1-1 and group support for young people.
- Providing on-going support and training to enable young people to participate in full at strategic overview meetings, including planning, preparation, attending and evaluating.
- The young people representing the views of young people from different geographical areas of Shetland and with different social backgrounds. Using the OPEN Project's existing network of young people, involving other third sector organisations and Shetland Island's Council services as the project evolves.
- The OPEN Project working in partnership with the Emotional and Wellbeing Project to ensure the participation of young people in the strategic development of the initiative in Shetland. Working to identify gaps in services, seek solutions to design and develop high-quality support services.
- The OPEN Project working in partnership with the Emotional and Wellbeing Project to ensure the participation of young people in the delivery of agreed activities and tasks.

**Results**

The contract and support have enabled the recruitment and continued engagement of the young project workers. They have been involved in the following actions:

- Participation at Strategic Overview Group meetings, including the development of the project's vision, aims and objectives.
- Created their own Rich Picture. These Rich Pictures attempt to bring everything together that might be relevant to a complex situation, using pictures, diagrams, etc., as opposed to words, where possible. This allows for feelings, opinions, connections and facts to be discovered.
- Collaborated on the logo.
- Designed and delivered workshops at the Festival of Care 2019, on topics of resilience and where young people hang out.
- Researched and provided content for a support information leaflet for young people during the COVID-19 lockdown.
- Designed and carried out a survey about young people's understanding and knowledge of services and how to access them.
- Designed and carried out workshops in schools based on the Festival of Care.
- Designed and carried out focus groups to further explore themes identified in earlier activities.

# TSI Feedback

https://vimeo.com/720190894
https://www.flickr.com/photos/148733934@N03/albums/with/72177720299631491

The above video provides information on the Social Innovation Project which covers the Family Wellbeing Partnership in Clacks – a collaboration between SG, Hunter Foundation, The Lens and Columbo 1400 around transforming children's services and being people led.

This collaboration is supported with a values-based leadership program for managers across the council and elected members and partners like CTSI, HSCP, Police and NHS which has been run by Columbo 1400.

Wellbeing of Children and Young People

Skills Development Scotland

# SDS Feedback

Wellbeing of Children and Young people – deep dive

Feedback and insights have been provided in relation to points shared with CPIB below. We would like to highlight the independent review of Career Services which published its recommendations in February 2022. Many of the questions raised can be aligned to the evidence and insights generated throughout the user-led programme of engagement. They are now progressing a programme of co-design with various agencies and organisations to identify what we should change in relation to services and how we will do that. The Chair and Programme Board will be submitting a system wide service blueprint and implementation plan by the end of the year.

The link to the Microsite with all of the evidence, insights and assets can be found below. I have also provided the 10 recommendations set out within the report as many have a link to the themes being explored by CPIB.

www.careerreview.scot


**In advance of this session, members are asked to consider the Wellbeing of CYP themes and share thoughts re:**

- **Barriers that are stopping us delivering person led services**
    - Lack of integration/alignment across services often means that each service delivers a person centred approach but people experiencing multiple services cannot understand how they connect
    - Needs based approaches often determine the need of the individual without them informing it. We need to balance needs based with asset based approaches to service delivery.

  - Funding and measures are often seen as being too restrictive and not agile enough to respond to changing circumstances, however the approach set out via NOLB seeks to address this through responsive funding.
  - Wellbeing requires a focus on skills, experiences and competencies being developed by an individual rather than a continued focus on their destination. A focus on skills and distance travelled would prioritise wellbeing.
  - Person centred delivery should be seen as being universal – every person is entitled to this rather than those in 'targeted' groups. This means that every channel of service and support needs to address personalisation and not just when a practitioner is in front of them so that we realise a truly blended approach to delivery of public services that meet peoples needs.
- **Governance and planning arrangements that could be streamlined**
  - A wealth of evidence exists on complexity within Scotland in relation to Governance and some of this we have to accept is unavoidable. However, there are many opportunities to streamline this but the focus should also be how agile these structures are
  - Structures often created in response to different factors but layered on top of, rather than rationalising, now would be an opportune time to consider this in the context of NSET, Education Reform, Child Poverty as key strategic and logn term drivers for change.
  - Better integration and alignment across different governance routes and channels needs to be clearer i.e the role and relationship between Regional Economic Partnerships and CPP's.
- **Areas where better data sharing is needed**
  - Scotland has a lot of strengths in relation to data sharing across agencies and authorities, particularly in relation to the 16+ Data Hub. However, the challenge is that data sharing is not lifelong and it often doesn't include sharing of an individuals needs, progress and skills – as defined by them which means a change in practitioner or organisation creates a start/stop scenario for young people.
  - Multiple organisations have data sharing agreements with each other for different purposes and therefore creates a complex web of sharing information that often cannot be used strategically to deliver change, enhancement, improvement or transformation.
- **Engaging partners who have a key role to play**
  - The range of partnerships and engagement is a real strength in Scotland but the complexity of the environment often creates the challenge around progress and impact.
  - Many organisations and institutions use a range of partnership agreements to connect, integrate and deliver better experiences for individuals
  - Great examples of partnership working exist at all levels from CPP structures, to LEP's, to Regional Improvement collaboratives, regional economic partnerships however, the structures often represent vertical integration through the line rather than horizontal integration between these.
- **Good practice examples of innovative/effective progress from across all sectors (e.g. Public Sector, Third Sector, businesses and communities) (including those emerging from COVID)**
  - Development of integrated employability hub in Orkney where all services from SDS, Local Authority, 3rd Sector and Social Security Scotland
  - Dundee Child Poverty pilot

Wellbeing of Children and Young People

solace Scotland

Solace Feedback

Argyll & Bute COUNCIL

# Education: Outdoor Education


**Outdoor Provision – Pan Authority Programme March – June 2021**

With additional monies provided by Scottish Government to assist with covid recovery within Education, Council approved £600k funding to be used towards improving the 'wellbeing' of all pupils within Argyll and Bute with more targeted support on those children and young people requiring more intense support.

In light of this additional funding EMT approved the engagement of Outdoor Learning partners (OLPs) to visit all schools within the Authority and provide them with hands on experience of outdoor learning in its widest sense. This partnership would also provide opportunities for staff to learn some new skills in outdoor learning.

Supporting the provision of Outdoor Education was a priority of Scottish Government and it was important that children and young people were supported going back to school full time due to the amount of face to face learning that had been missed during the last 12 months.

Working with Procurement, Education Services approached all Outdoor Education Providers within the Authority to see if they would support the project and as a result of this engagement, those providers who came forward agreed to work together along with us to pull together a programme in all areas.

Priority over the initial 3 week period was to focus on supporting S1-S3 pupils although not exclusively, this programme ran for 3 weeks from 15th March until 1st April 2021. Discussions were held with Secondary HTs in relation to what support would best fit with their setting and following meeting with the OLPs, dates were set for each school.

The 3 week programme with the secondary schools was very successful, feedback from one secondary school reported 'one young person had never walked up mountain before, which is quite unusual in a place like Argyll and Bute, but all his peers gave him a guard of honour when he reached the summit and the cheers could be heard from afar.'

After the success of the secondary school programme it was agreed that the provision should be rolled out to ALL schools within the Authority no matter how rural the school or how low the numbers. Each primary school were allocated a minimum of 2 days with the days escalating to 5 days for the largest

primary schools. It was agreed that OLPs would work with schools individually to identify those pupils or year groups who would benefit most from the Outdoor Education experience although in most of our smaller primaries, it was the whole school who participated. The programme ran from Easter up until the summer holidays in June.

The programme included initiative games, team building activities, orienteering, bush-craft activities, fire lighting and fire safety, hill walking, outdoor games although there were many more activities.

Some of the comments coming back from schools following their engagement with OLPs were:

'the way the instructors interacted with the children was so positive, encouraging them as individuals and as partners and teams. They got to know the children and developed their trust and helped them to push themselves and take risks.'

'We have just enjoyed 2 days of outdoor learning with Alex and Cake. The children undertook team challenges, practised wood craft skills – using knives, saws, flint and steel, making stick bread, fire pizzas,, orienteering, map work, learning about wildlife, riddles, games, following trails, making dens/teepees and finally a night line activity!'

'the way the instructors interacted with the children was so positive, encouraging them as individuals and as partners and teams. They got to know the children and developed their trust and helped them to push themselves and take risks.'

Some comments from families included:

My children loved the sessions, they have told me I'm to go and see the den up in the woods. I imagine there will be lots of stories about their adventures for a while yet, thank you.'

'Both girls came back from the outdoor sessions buzzing with excitement. Some of the highlights were 'going wild with the charcoal, drinking delicious hot chocolate and building fires' and Sophie reported back yesterday that she 'couldn't believe it when she was trying to find her way around with a blindfold on, and was told there were flying hedgehogs around her head!'

'What a great couple of days.'

'The kids loved making there dens and playing the blind fold game, it's so lovely the children got so much out of these two days thank you.'

'Many thanks for organising these sessions, such fantastic learning including developing staff confidence, knowledge and understanding that we can transfer into our own outdoor learning sessions.'

'I liked the marshmallows'

'It was such fun'

Alongside the Outdoor Education Programme, Education also procured the services of 'The Walking Theatre Company' in Cowal to put on a series of performances throughout Bute and Cowal. The performances all took place outdoors in the playground of the schools and lasted between 60-90 minutes. The performances were all interactive and age appropriate depending on which age group

were watching the performances. Feedback from all schools was that the performances had been excellent.

Children all had the opportunity throughout the day in small groups to listen and take part in the performance. The children were very engaged and listed well to the story.

Some of the comments from the schools were:

'the children loved the costumes, Archie commented "the rabbit wasn't the Easter Bunny because the Easter Bunny is white and that rabbit had a black jacket"'

'The children's level of enjoyment for this performance was clear to see in the days following as some children during freeplay re-enacted the story. Alice sat with a big stick saying "I'm the red Queen, off with their heads". Alia, Rory and Libby 'sneezing' around the playroom towards other children saying "We are allergic to children".

Some comments from staff were:

"Very exciting and great for the imagination"

"Lots of Laughter"

"Amazing, worked well in the small space they had. It would be great to have them again."

"It was the perfect opportunity for staff to observe their children, their interactions and responses"

"The children's behaviour was great"

"Especially engaging from some of our children with ASN who normally find theatre/cinema situations overwhelming. They were totally engrossed the whole session and were relaxed throughout"

"The laughter and imagination was brilliant, lots of fun."

"The children showed amazing listening skills"

The budget allocated to the whole outdoor programme was £200,000 and total spend was £206,09


# Fit like ? Family Wellbeing Team

Aberdeen City Collaboration

## Fit Like? Family WellbeingHubs

- ‘Fit like? Family Well-being Hubs are a group of Services working together with children, young people and families in Aberdeen to support their mental wellbeing.
- We are a range of people from different agencies including: Children1st, Health Visitors, Family Nurses, School Nurses, CAMHS, CLD, Foyer/ADA, Social Work, Education & Educational Social workers
- We all continue to work with within existing working agreements
- We are working together to develop a more streamline support for and with families
- We are a city wide resource with three locality Hubs, Northfield, Tillydrone and Torry

Wellbeing of Children and Young People

solace Scotland

Fit Like Family Wellbeing Team

Offer early help when it is needed and in a way that boosts families strengths & helps people meet their goals.

- Supporting children with worries and distress
- Family finance and benefits
- Family relationships and communication
- supporting parents to cope with daily pressures
- Giving strategies for positive emotional and mental wellbeing
- Helping children and families talk about traumatic things that have happened

Wellbeing of Children and Young People

solace Scotland

## Fit Like Family Wellbeing commitment

- Children and families will receive the right support at the right time:
    - As a result of our continuous commitment to preventative work, meaningful and effective collaboration, sharing of skills, learning together and through multiagency location

- Children and families' rights to individual wellbeing needs will be addressed:
    - Through trusting, respectful relationships and by improving awareness of mental health and wellbeing for all, reducing any associated barriers or stigma

- Children and families will receive accessible and proactive support with their practical and emotional needs:
    - To ensure they have improved physical and mental wellbeing and they are empowered to physically sustain this
- Children and families' voices will be heard
    - And their feedback, along with carefully tracked quantitative data, inform ongoing development of Fit Like Family Wellbeing

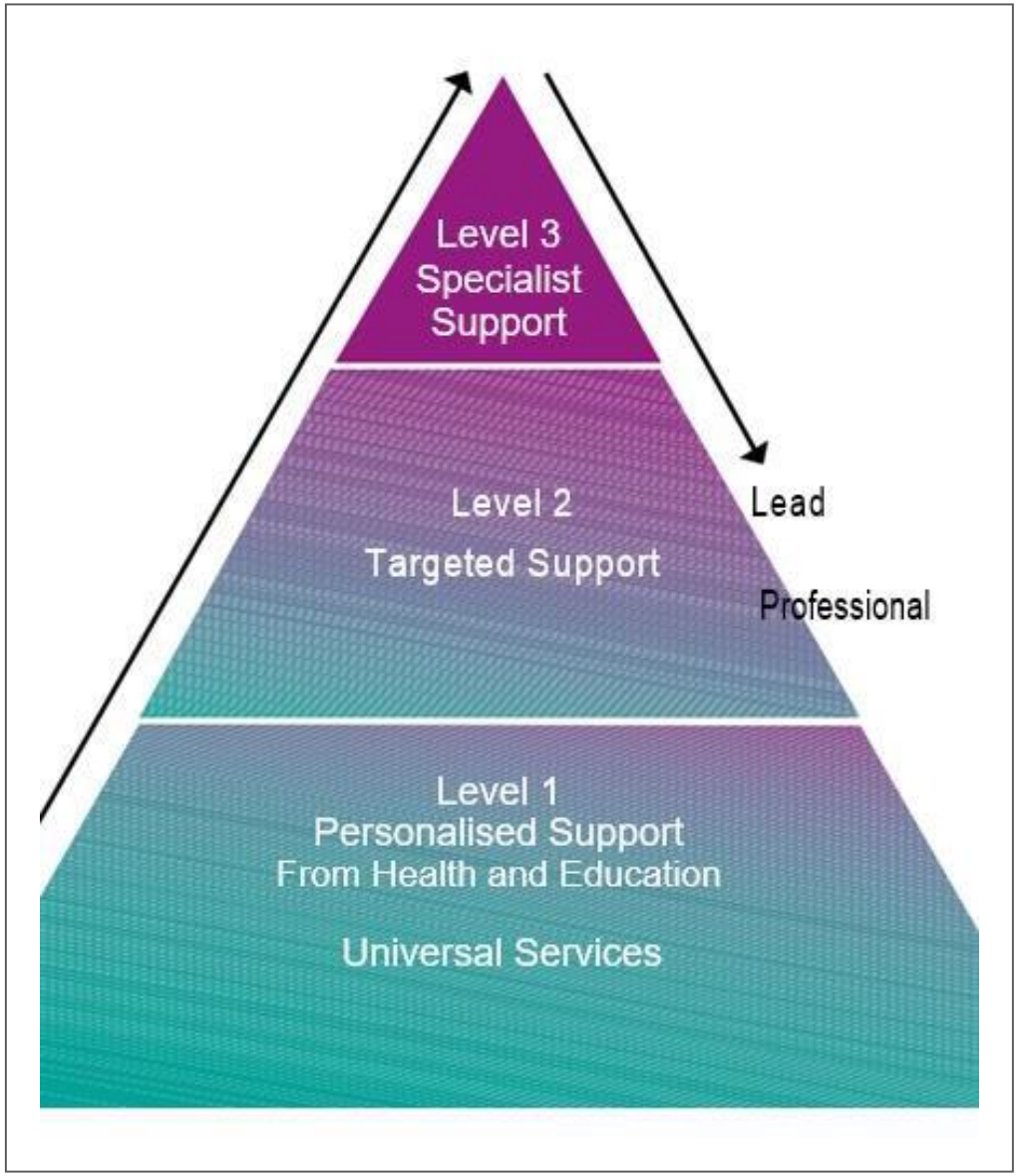
Wellbeing of Children and Young People

solace Scotland

## Fit Like Family Wellbeing Team Ethos

- **Relational** based practice describes a way of being, an underpinning ethos, which enables the building and maintenance of healthy relationships, resolution of difficulties, and repair harm when relationships breakdown.
- **Whole Family Approach:** is a family led strategy, where families set their own goals, use resources, and support networks while strengthening relationships to achieve their potential to have long term sustainable change.
- **Family First Model:** identifies the needs of a family as a whole - as well as the individual issues faced by the people who form that family unit - wrapping bespoke care, support, and assistance around that family to secure positive outcomes.
- **Test Learn and develop: This** approach gives autonomy and permission to staff and the leadership team to be curious and explore opportunities for embedding different approaches, with an evidence base and holding families in mind. This approach allows for creativity around the delivery of support and allows for services to be bespoke and responsive of individual circumstances.

- *Fit Like team offer Tier 2 support for individuals and families from aged  0-18 years old and their families.*
- *Engagement is voluntary and guided by young people and families goals and needs.*
- *Underpinned GIRFEC, The Promise, UNCRC*



# Coexistance - Clarity from the partnerships who does

# what with whom (full/Part aligned)

- Education
- Community Learning and Development
- Childrens'1st
- Social Work (Family Resource Workers)
- Health: Family Nurses, CAMHS, HV, School Nurses

Wellbeing of Children and Young People

solace Scotland

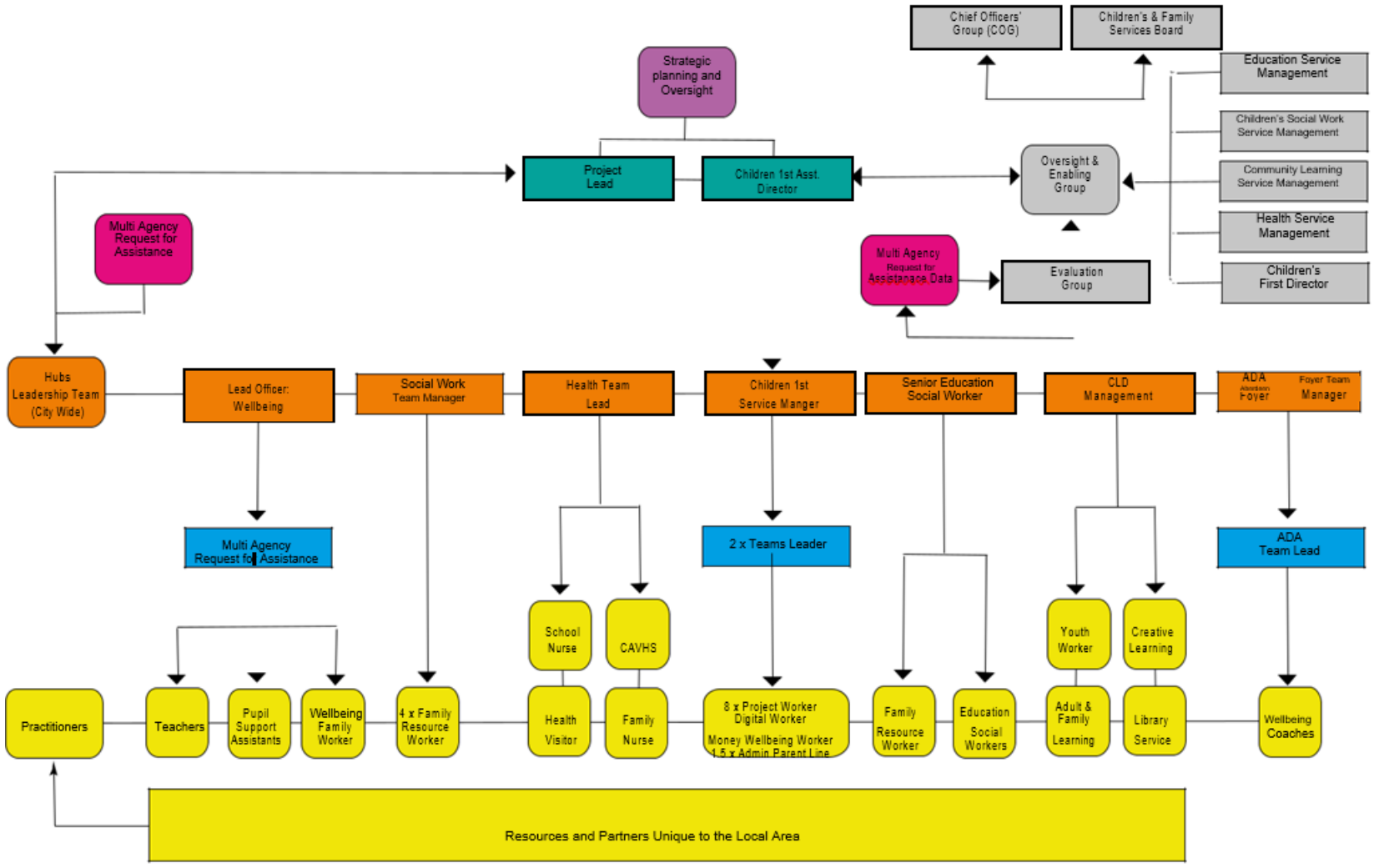
## Leadingthrough systemicchange

- We are aiming to work together in a different way
- It takes time (years) to embed culture change within organisations, we have started this journey in the midst of a pandemic
- We are working across public and voluntary organisations with to develop shared values and aims
- We are bring together 7 agencies (15 different services) as one collaboration to break down barriers to access support
- Finding common ground, common language with shared aims, goals and approaches
- Coordination of integrated early intervention services

Wellbeing of Children and Young People

solace Scotland

# Fit Like Family Wellbeing Team Governance Structure



Wellbeing of Children and Young People

solace Scotland

# Journey from coexistence to co-ownership

Wellbeing of Children and Young People

## Understanding our Roles within the Hubs

Leadership Team: services leads working together as one team

Team leads/Principal Teachers

Key Worker role and responsibility – co- ordination of family support

Staff approach – the Hub approach –

developing a shared language and ethos

Development opportunities within the wider staff team to work together

Wellbeing of Children and Young People

# Co-operation- Sharing information and recognising the mutual benefits of partnership working, pulling collective knowledge and achievement

- Request for assistance
- Family first approach - Initial conversations
- Working with families
- Working with wider systems
- Hub Huddles, sharing, learning and developing packages of support
- Joint Team Meetings and shared learning opportunities
- Project Work

Wellbeing of Children and Young People

solace Scotland

## Data Gathering

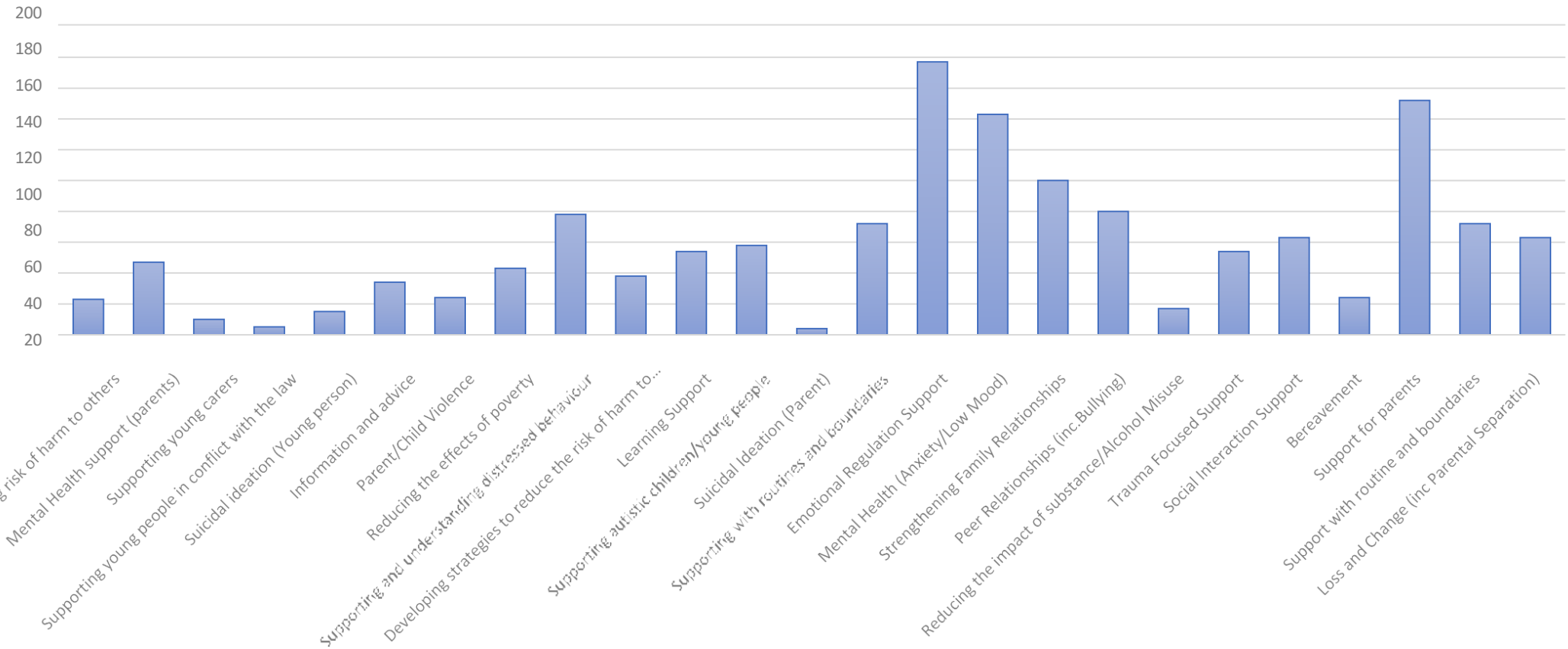
- Collective data gathering is achieved via Microsoft Forms & Power Apps inc: Power BI
- Limitations to interact with the data
- Reliance on staff completing the forms as often a duplication of data reporting/recording
- The following is a snapshot of the 333 Request for Assistance received Jan-June end 2022

Wellbeing of Children and Young People

solace Scotland

# Themes and Data

## Areas of Need known at the point of Request (Jan-July 2022



Wellbeing of Children and Young People

solace Scotland

# ACE's

The following ACES were identified:

- Sexual Abuse 7
- Physical abuse 14
- Domestic Violence 58
- Physical neglect 25
- Verbal abuse 12
- Emotional neglect 49
- Mental Health in the Household 100
- Imprisonment in the family 14
- Poverty/Financial Needs 107
- Separated parents 175

Wellbeing of Children and Young People

solace Scotland

# What's Worked

- **Staff leading on development & relational leadership**: Bring people along with the development, creating a relational leadership stance: Staff aligned to the wellbeing team state that this model 'feels different' that there is a sense of autonomy, a flex and mould to the ever-changing needs of covid and the families that we work alongside.
- Time has been taken to develop a foundation of shared experience, purpose, language, and values. Where individuals have worked together to find solutions and take risks, with a commitment of meeting families where they are at. Staff have developed working relationships with different agency, partners, and professions that they may never have made connections with before.
- There is a sense of shared passion and commitment to the continued development of the family wellbeing team.
- **The uniqueness and skill of the partnership:** Each agency brings with it a uniqueness that adds to the overall development and the direction of travel. Having the balance of Health and local authority along with 3rd sector had created a climate of creativity, shared ownership, and a can-do attitude. The skill collaboration of the teams allows for opportunities of shared learning and expertise along with access to agency resources.
- **The Project Lead role & Leadership:**The project lead role and the neutrality of the role has been key to preventing the drift and agencies defaulting to our siloed working and creating & developing a shared culture.
- The leadership team's partnership has been central to the development of the wellbeing team, this has allowed each agency to have a voice and aid in the development of the partnership. Taking the time to understand different perspectives has aided in this development along with the time commitment.
- **Time to embed and create the culture:** Culture change takes time, years! The development of the team has been at pace to meet the need and develop a shared governance structure. Creating the conditions to truly achieve culture change takes time, consistency and opportunity for growth, based on shared values, common goals and clear purpose.

Wellbeing of Children and Young People

solace Scotland

# Noteworthy findings

- Defining Early Intervention for mental health and wellbeing within the context of current universal and Tier 3 services
- Tier 3 services thresholds and service criteria do not a line
- Over the past 18 months data has ranged from 20-30% of families seeking support from the family wellbeing team are receiving support from CAMHS or awaiting support

## Areas of future need

- Develop partnership working with Adult mental health services to improve holistic family support
- Understanding the remit of the early help model and the interface with CAMHS. CAMHS representation at Request for Assistance Meetings to support escalation to Specialist Mental Health Service
- Shared data gathering and reporting: significant limitations in the current model prevents sophisticated data collection and analysis due to the lack of a shared system- challenges the ability to truly analyse the effectiveness of the model and increases future risk of silo working due to beaurocratic

Wellbeing of Children and Young People

solace Scotland

# WE ASK REFERRERS TO SHARE THEIR EXPERIENCES:

- The responses were positive there were several points that can be drawn as areas of improvement, namely:
- Of the 62 responses
- 70% reported positive experiences of fit Like
- 10% said that it was too early to comment
- 5% provided a mixed review
- 8% were dissatisfied with the service/support
- 6% referred to the complex RFA process naming Autism Outreach and School Nursing services (suggesting confusion)
- 1% did not comment

I strongly believe that of the families I have referred to the Hub, if they had not had the wraparound whole family support given to them via the Fit Like Hubs there would have been a massive detrimental impact on the ability of the parents to parent their children. In this instance it is due to parental mental health issues and the parents having no support, it has been lovely to see the children in these families having someone to support them and bring joy into their lives. This is especially relevant during this pandemic when there has been so much social isolation. I also feel it has been helpful that the FLH worker works with the whole family- it makes a difference for the parents to know who their child is spending time with as opposed to a worker the children see at school who the parents have never met. Due to the amount of expertise available in the Hub this has meant that the family have had the support that fits them as a family. This means that we are getting to the heart of the problem more quickly' (Health Visitor)

*Several universal supports were utilised however young person very resistant to any forms of support and assistance and often resulted in professionals having conversations with parent only, which had little impact on the situation. Parents also resistant to many of the external supports discussed (including Priority Families).*

-hub has supported communication within families and helped re-establish more positive familial relationships - supporting/empowering parents with some of the CYP issues (MH, behavioural issues) which means parents can be a good source of support to their CYP -bridging the gap between home and school -Supporting schools to explore presenting behaviours and providing insights (teacher)

*I have found the hub staff to be very approachable. Interactions have been positive and conversations about families' needs have been helpful. The service has been proactive and responsive to family needs. Families have been positive about the support they have been given and the partnership work and communication has been great (teacher)*

'The Hubs have an impact by offering a multi-agency approach to support a child's need (one stop shop). Being able to provide additional adults to support a child in school, where staffing is stretched has had an immediate impact on the self-regulation of the child' (Teacher 2021)

Really supportive and quick response. Great service for those families that don't want support from social work. Great as a school that there are different agencies to help the families. Have been told on several occasions that social work doesn't have a role to support so it's fantastic that we have the Fit Like hubs. I feel that the families I have referred have had great support. It has also made me aware of the services available'. (Teacher)

'Easy to approach, Easy access to all. Connected to all community resources and knowledge of local resources. More accessible to families. Supporting skills and strengths within the family, rather than specialist treatment approach' (CAMHS)

Wellbeing of Children and Young People

solace Scotland

# The impact of the family wellbeing team from staffs' perspective

*Some of the families that I have supported have felt that they needed that additional adult who can help them seee/try things a little differently and feel that this has helped them move out of a time they've found more challenging.*

The biggest impact I have seen is having the availability of other professional around to support families. Previously it would have been difficult to get other professionals involved without a long waiting list.

I feel the hubs have had an impact as it is not a statutory service, and the families are more willing to engage as it is their choice. Financial support for the families has been excellent

There has been a more positive impact due to services being made aware of critical situations that have been previously dismissed, but through hub support and perseverance have now been listened and acted upon.

*Timely support being offered to families/young people and children which has prevented escalation in their situation/circumstances. Improved relationships and engagement with other services for example education. Families have been able to access services and further specific support that they otherwise would firstly have been unaware of and secondly would not have been confident enough to seek out by themselves. Supporting families using a strength-based approach, support not being time limited and flexible to meet the needs and priorities of the family. Having practical and financial support/advice to reduce some added pressures/stressors away from families has allowed them to be in a better place to focus on family life and relationships.*

The biggest impact is learning about what other agencies do and have a contact them. The Hub Huddles are a great space for sharing cases and getting advice and support. It's good to be able to access additional support from other agencies without waiting for applications to be made. Additional training has been good to access.

Wellbeing of Children and Young People

solace Scotland

# Families Stories


Example 1.pptx


Example 2.pptx