

AGENDA



**Community Planning Improvement Board
Advisory Board Meeting, 15th November, 2pm-4pm
VIA Teams**





Agenda	
1. Welcome and Introductions	2.00 - 2.05
2. Previous Minute & Matters Arising (<i>Paper 2</i>)	2.05 - 2.10
3. SLWG Updates 3.1. Climate Change (<i>Papers 3.1a & 3.1b</i>) 3.2. Financial Security (<i>Papers 3.2a & 3.2b</i>)	2.10 - 2.40
4. CPP's Response to the Covid Recovery Strategy (<i>Paper 4</i>)	2.40 - 2.45
5. World Class Public Health System - Directors of Public Health	2.45 - 2.55
6. Wellbeing of Children and Young People – Deep Dive (<i>Paper 6a & 6b</i>)	2.55 - 3.55
7. AOB & Future Focus for Next Meeting	3.55 - 4.00
8. Close	4.00



CPIB Meeting Minute

9th August 2022, Via TEAMS

Attendance	Greg Colgan, Chair (SOLACE); ACC Gary Ritchie (Police Scotland); Pam Dudek (NHS); Angela Leitch (PHS); Mark McAteer (SFRS); Adrian Gillespie (Scottish Enterprise); James Russell (SDS); Sarah Gadsden (IS); Lesley Kelly (TSI); Anthea Coulter (TSI); David Milne (SG); Simon Mair (SG); Antony Clark (Audit Scotland); Tricia Meldrum (Audit Scotland)
Apologies	Paul Johnston (SG); Sally Loudon (COSLA); Judith Proctor (HSC Chief Officers); DCC Will Kerr (Police Scotland); Ross Haggart (SFRS); Mark McMullen (Scottish Enterprise); Neville Prentice (SDS); Anna Fowlie (SCVO); Liz Manson (CP Managers Network);
In support	Emily Lynch (IS)
Facilitators & Presenters	Agenda Item 6 – Deep Dive into Children & Young People’s Wellbeing: Peter Neild, Barnardos & Nicky MacCrimmon, Marie Dailly, Mark Macdonald & Stuart Fairweather, Dundee City Council

	AGENDA ITEM	Action	Date												
1.	<p>Welcome and introductions</p> <p>The Chair welcomed members to the meeting. A particular welcome was extended to Adrian Gillespie, Chief Executive of Scottish Enterprise on attendance at his first CPIB meeting. The Chair also introduced Peter Nield, Assistant Director of Barnardo’s and thanked him for joining the meeting today to share a presentation on Agenda Item 6.</p>														
2.	<p>Previous Minute and Matters Arising</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  Item 2a - CPIB 12th May 2022 Minute.doc </div> <div style="text-align: center;">  Item 2b - CPIB Strategic Plan 2022-; </div> </div> <p>The minute was endorsed as an accurate record of the previous meeting. Progress on the matters arising were noted as follows:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Action</th> <th>Progress Update</th> </tr> </thead> <tbody> <tr> <td>3: CPIB Strategic Plan i) Incorporate additional support available from PHS ii) Share with DFM, COSLA President & CPP Stakeholders</td> <td>Complete To be sent with SLWG outputs</td> </tr> <tr> <td>5: Strategic Engagement with CR Programme. CPIB Chair to engage in further discussion with CR Programme re. funding allocation during Covid.</td> <td>Ongoing</td> </tr> <tr> <td>6: PHS Localised Working; Invite PHS to provide update at next CPIB meeting.</td> <td>Complete: Agenda Item 3</td> </tr> <tr> <td>7: Financial Security - SLWG to progress work and feedback at next CPIB meeting</td> <td>Complete: Agenda Item 4</td> </tr> <tr> <td>AOCB – Climate Change SLWG to progress work and feedback at next CPIB meeting</td> <td>Complete: Agenda Item 5</td> </tr> </tbody> </table>	Action	Progress Update	3: CPIB Strategic Plan i) Incorporate additional support available from PHS ii) Share with DFM, COSLA President & CPP Stakeholders	Complete To be sent with SLWG outputs	5: Strategic Engagement with CR Programme. CPIB Chair to engage in further discussion with CR Programme re. funding allocation during Covid.	Ongoing	6: PHS Localised Working; Invite PHS to provide update at next CPIB meeting.	Complete: Agenda Item 3	7: Financial Security - SLWG to progress work and feedback at next CPIB meeting	Complete: Agenda Item 4	AOCB – Climate Change SLWG to progress work and feedback at next CPIB meeting	Complete: Agenda Item 5		
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<p>3.</p>	<p>PHS Localised Working</p> <p>Angela Leitch provided an update on the PHS Localised Working offer and the three pilot areas where work is beginning. The localised offer involves a co-ordinated team bringing together PHS data and intelligence to align with data and intelligence held locally to help build a collective picture of trends and patterns within local areas. The PHS localised offer team will tap into evidence of what is working to support practice and will align with central/cross country PHS teams to work with CPPS and across all local agencies.</p> <p>The Board welcomed efforts to bring together the expertise which exists across the country to deliver localised support and to build evidence to support practice. Members noted their interest in seeing the benefit of this work as it emerges.</p>		
<p>4 & 5</p>	<p>SLWG Updates on Climate Change & Financial Security</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  Item 4a - SLWG Climate Change SLIE </div> <div style="text-align: center;">  Item 4b - SLWG CLimate Change Rej </div> <div style="text-align: center;">  Item 5b - SLWG Financial Security SL </div> <div style="text-align: center;">  Item 5a - SLWG Financial Security Re </div> </div> <p>The Short Life Working Groups provided an update on progress identifying barriers and priority actions in relation to Climate Change and Financial Security for Low Income Households. CPIB members welcomed the work to date, and provided the following suggestions to inform the next stage of this work:</p> <p>Climate Change</p> <ul style="list-style-type: none"> - Strengthen links between procurement strategies and the Community Wealth Building Agenda, emphasising the importance of ethical procurement and investment - Give greater emphasis to the potential offered through collective purchasing power of all CP partners to drive meaningful change - Highlight the statutory sectors’ role as Anchor organisations to promote local investment - Emphasise the role of Regional Climate Hubs to reduce fragmentation in funding landscape - Draw on learning from Business Support Partnerships in relation to what has worked/what hasn’t in relation to decluttering the funding landscape <p>Financial Security</p> <ul style="list-style-type: none"> - Give greater emphasis to the role of CPPs in collective funding prioritisation - Draw learning from the PHS Child Poverty Inverclyde pilot in relation to where Child Poverty money is having the biggest impact - Make reference to the SDS 16+ Datahub example which provides an illustration of multiparty data sharing <p>It was agreed the SLWG should reconvene to consider how we might implement and deliver on those actions identified, with a particular focus on what areas can be taken forward within Community Planning, and what areas require support from Scottish Government. This will then be used to inform and shape our next engagement with the DFM and COSLA President.</p> <p>Agreed Actions:</p> <ol style="list-style-type: none"> I. SLWG to reconvene to agree implementation plans for identified actions II. Upon final approval, SLWG Outputs to be shared with DFM, COSLA President and CPP Stakeholders 	<p>SLWG Chair</p>	<p>Sep Nov</p>

<p>7.</p>	<p>Wellbeing for Children & Young People – Deep Dive</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  Item 6a - Wellbeing of CYP - feedback fr </div> <div style="text-align: center;">  Item 6b - Wellbeing of CYP - Scene Settir </div> </div> <p>Peter Nield from Barnardo’s shared a presentation setting out the context, challenges and role for Community Planning in driving better wellbeing outcomes for Children and Young People. As time did not allow for an in-depth discussion during this meeting, it was agreed to make space on the Agenda of the November meeting for members to consider the issues in more detail. This will allow Board Members to share good practice examples from their own sector and highlight those challenges impeding progress in this area. Following this, a SLWG will be set up to agree priority actions to tackle the barriers identified.</p> <p>Agreed Action</p> <ul style="list-style-type: none"> i) Create space on the next CPIB meeting on 15th November for an in-depth discussion on Wellbeing of Children & Young People. 	<p>Chair</p>	<p>Nov</p>
<p>8.</p>	<p>AOCB</p> <ul style="list-style-type: none"> i) Covid Recovery Strategy Simon Mair and David Milne shared an update on work of the Covid Recovery Board, including development of the CRS Outcome frameworks and indicators, and recent Covid Recovery workshops with CP Managers. The evidence emerging from local engagement demonstrates a core overlap in priorities and alignment with overall CRS outcomes and aspirations, albeit the CRS is not necessarily driving this. Barriers in relation to data sharing, funding flexibility, prioritisation and inter-operability have also been identified. <p>The CPIB welcomed the commitment from CRS colleagues to continue to feed in and align CRS work with the work of the CPIB to support a joined-up approach. The Board agreed to ensure ongoing dialogue with the CRS team to continue to make these connections.</p>		
<p>9.</p>	<p>DONM</p> <p>The next CPIB meeting is scheduled for 15th November. The Board agreed to review the agenda for this meeting to ensure sufficient time to capture the discussion on Wellbeing of Children and Young People. The deep dive on Good Green Jobs originally planned for the November meeting will be rescheduled for a later meeting.</p>		
	<p>Close</p>		

CLIMATE CHANGE CPIB SLWG

November 2022

Fragmentation of Funding Landscape – Agreed Actions

National Influence	<p>1. Alignment of national budgets/funding streams Explore with SG how they can consolidate and align budgets and funding streams to minimise the routes the public sector is required to access to obtain funding for Climate work, and also to ensure greater strategic alignment with cost of living crisis and emphasis on investment in people.</p>
Local Action	<p>2. Supporting greater local co-ordination In tandem with our ask of SG to consolidate funding, the CPIB will support progress in local co-ordination by cascading where partners can go for funding, and by using its influence to encourage CPPs and the partners represented on CPIB to look at our own fragmentation to ensure funding flows through to communities in a streamlined manner</p> <p>3. Roll-out of Scottish Cities Alliance Carbon Scenario Tool To improve co-ordination between partners and remove duplication, there would be value in exploring how the Carbon Scenario tool could be used to drive a consistent approach across the PS in relation to joint measurement of progress on the 2045 carbon reduction targets and staff development. The CPIB will ink in with work being led by the IS, SSN and ECCL to develop a Climate Intelligence Service for 32 councils initially, which could support wider roll-out and consistent use of the Carbon Scenario Tool. ACTION: Greg to explore use of Carbon Scenario Tool & Climate Intelligence Service with Angela Scott and report back to CPIB.</p> <p>4. Inform development & implementation of Virtual Climate Agency We will build our understanding of the Climate Agency to identify how CPIB might influence its development and implementation to avoid a narrow focus on one aspect of energy transition. ACTION: SDS to provide a summary on the Virtual Climate Agency for the CPIB ACTION: The CPIB will link in with Roy Brannen, Interim Director General Net Zero, Scottish Government.</p>
	<p>5. Harness Community Empowerment There is a role for the CPIB to use its influence to encourage CPPs and the partners represented on CPIB to harness community engagement to get behind and drive the behaviour shift necessary to deliver change.</p>

Greater strategic co-ordination of Procurement approaches – Agreed Actions

National Influence	<p>6. Encourage a greater focus on sustainability within Procurement Regulation</p> <p>Ask SG how regulation within PS Finance Manual could be used to better offset the drive for best value/lowest costs with the sustainability agenda.</p>
Local Action	<p>7. Work with Scotland Excel to bring greater co-ordination in procurement</p> <p>We will hold a workshop with Scotland Excel to explore how we might bring greater co-ordination across a range of procurement challenges, including:</p> <ul style="list-style-type: none">- Could Scotland Excel can open up their procurement frameworks, is there a fee, and if so, can they absorb it?- How can Scotland Excel work with other procurement providers to reduce fragmentation in procurement (to ensure economies of scale, create sustainable business for SMEs; and help drive sustainability). SDS colleagues will also provide input to this.- What other procurement networks exist, are we using them well enough, how do we support inclusion of a wider range of partners?- What other procurement challenges exist in relation to driving greater co-ordination around the climate agenda, and how can Scotland Excel help?- What other resources and support are available from Scotland Excel to help address procurement challenges? <p>We will ask Scotland Excel to write a paper on current procurement practices and highlight any opportunities to support Community Planning.</p>

Prioritisation of 'Big Ticket' Areas – Agreed Actions

Local Action	<p>7. Encourage greater use of City Deal money to focus on Climate Change</p> <p>Identify commonalities in relation to Climate interventions across City Region growth deals to enable CP partners/partnerships to coalesce behind these areas to deliver greater potential impact. Action: Linda (SDS) to identify the climate actions each City Regional growth deal is targeting funding towards and areas of commonality.</p>
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Sustainable Funding for the Third Sector – Agreed Actions

National Influence	<p>8. Request Scottish Government Funding for Third Sector to support transition to Net Zero</p> <p>Ask SG if there is a pot of money that could be used to support local areas and Third Sector to drive transition to net zero. The approach which has been developed and delivered in Dundee provides a ready-made model which could support rapid wider implementation.</p>
Local Action	<p>9. Promote good practice</p> <p>Subject to identification of funding, CPIB could promote the Dundee approach using its influence to encourage CPPs and the partners represented on CPIB to explore and implement this approach more widely.</p>

Background Material

Reduce fragmentation in the funding landscape

Evidencing the current level of fragmentation within funding landscape

1. Skills & Enterprise funding landscape (SDS Slides 3/4)
2. List of Funding (Dundee)



Action is needed to:

1. Declutter, consolidate and develop a leaner approach to improve access for the public sector, including the Third Sector (*capacity; word of mouth*)
2. Provide greater emphasis on investment in people to ensure we have the right skill sets and working practices (we currently invest in the asset, and underplay investment in people skills, and how to get people working differently)
3. Greater strategic co-ordination between responses to poverty/cost of living crisis and tackling climate change. Need LT strategic funding which reflects that works well for the environment (e.g. better energy efficiency, recycling) also benefits people struggling to live on low incomes. But rent freezes in Emergency Bill mean there is no certainty for housing providers re income, and what impact this has on housing build and standards?









The new **Virtual Energy Agency** provides an opportunity to develop a coherent investment strategy in relation to Climate

(it needs to go beyond the one aspect of transition currently proposed)

Greater use of existing structures/agendas

- Stronger role for Community Planning
 - Co-ordination around carbon trading and offsetting
 - Working with Communities to support behaviour shift
 - To utilise statutory sectors' role as Anchor Organisations to direct private enterprise funds to communities of need
- Regional Climate Action Hubs (greater co-ordination between funders)
- Business Support Partnership (ongoing work to review and declutter PS funding landscape)
- Scottish Cities Alliance (LG skills requirements) & Carbon Scenario Tool
- CESAP Refresh in Spring 2023
- Strengthen Place Dimension within Sustainable Energy & Climate Action Plans & Green Jobs Focus within Regional Skills Investment Plans
- Scottish Communities Climate Action Network to support community led action
- Greater alignment with ambitions set out in the Circular Economy Scotland

UNDERSTANDING THE FUNDING LANDSCAPE RELATIVE TO SKILLS **

	WHAT THIS WILL PROVIDE	Type of investment		
		Economic	Curriculum	Skills
NSET projects – lifetime upskilling and reskilling SG-led SDS-support SFC-support	Investment Mapping in provision of lifelong learning			
Green investment mapping SDS-led	Mapping scale of current/planned investment across sector/regions in Scotland, and impact on demand for green skills			
Heat decarbonisation investment mapping SDS-led	Mapping scale of current/planned investment in domestic/commercial heat decarbonisation in Glasgow & H&I area (TBC)			
Mapping SG investment in green skills SG-led	Overview of SG investment to support green skills			
Mapping of FE/HE provision SFC-led SDS-support	Understanding of the scale and scope of FE/HE provision to support green skills			
Scottish Cities Outlook: Funding & Investment Strategy (Transition to Net Zero) Scottish Cities Alliance	Work to develop funding/investment strategy to support the SCAs Transition to Net Zero Carbon Action Plan: Identifies projects supporting transition to net zero			

**Note: There is some crossover between the research in big ticket areas and research that examines the fragmentation of funding.

UNDERSTANDING THE FUNDING LANDSCAPE RELATIVE TO ENTERPRISE

WHAT THIS WILL PROVIDE

Status

Map out current business support

SE

Mapping funding Opportunity in Scotland: An interactive outline of the funding opportunities by organisation, available [here](#).



Business Support Partnership (BSP)***

Ongoing work to declutter the public sector funding landscape

SE

SDS

Partners

Partnership to develop enhanced, effective & efficient business support system: work to establish/align delivery environment across main economic providers (reviewed 14 products and services to date)



Scottish Business Sustainability Partnership (SBSP)***

SE

Partners

A separate body focused on net zero / climate change: current discussions to bring SBSP closer into the BSP to streamline activity.



Key



Activity is underway.



Activity / discussions at initial stages.

***Note: The BSP is a partnership with SE, HIE, SOSE, Local Government via COSLA, SLAED and Business Gateway, SDS, Scottish Government, and sector specific agencies Creative Scotland and VisitScotland.

The SBSP is a partnership with SE, Scottish Manufacturing Advisory Service, HIE, SEPA, Energy Savings Trust, and Zero Waste Scotland as key partners.

Use & co-ordinate procurement strategies to apply the full collective weight of the Public Sector

Push out existing Procurement Frameworks

Push out existing procurement frameworks (like those in Scotland Excel, and others that are available) to share information/knowledge, expand use and ensure Community Planning partners can tap in.

Ethical Procurement and Investment

- Better/more proactive use of Sustainable Procurement Duty
- Build on Community Wealth Building Agenda
 - Anchor's Progression Framework
 - Progressive procurement pillar for CWB (e.g. Local Supply Chains)
 - CWB Pillar on making financial power work for local places
 - Guidance for CWB/Wellbeing Economy (Social Justice on a Healthy Planet)
 - CWB Bill could seek to focus on local contracting/purchase
 - Utilise SWF funds to promote positive choices in relation to Climate Agenda

Amend procurement legalities to ensure place-based and community-based approaches are prioritised.

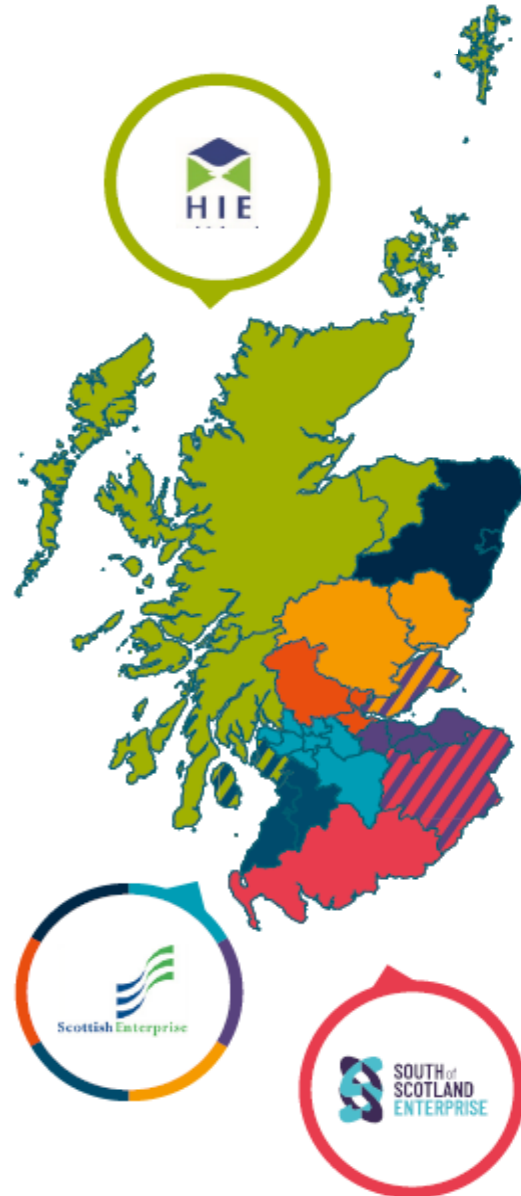
- Build in procurement clauses on subcontracting locally and community benefit
- Impact of Resource Spending Review and the costs associated with achieving net zero outcomes means that without action, there will be a drive away from more costly local supply lines.
- We need to invest in the local market so it grows and can compete on more equal basis.
- Reference examples of Scottish Futures Trust metrics (which stipulate local) driving up costs, and projects are subsequently becoming unaffordable
- To deliver on Climate Change ambitions, a collective understanding is needed that less is going to be delivered. How this links with the targets that SG have set needs further consideration.

Greater Use of Existing Structures

- Collective action between CP Partners, using purchasing power of all statutory agencies to drive meaningful change.
- Greater emphasis on statutory sectors' role as Anchor Organisations to reduce supply chains to promote local investment
- Utilise City Deal and Growth Deals to ensure not only local supply chains are used but also a climate action 'benefit' clause is prioritised, with contractors assessed not only on their community benefit but their climate benefits

Prioritisation of the big-ticket areas by understanding and disseminating what the evidence tells us

- Encourage greater use of City Deal money to focus on Climate Change.
- Make better use of existing governance structures such as City Deals to promote wider public sector alignment around Climate priorities & funding streams. This will allow us to maximise opportunities from collaboration and develop strategic partnerships which deliver more value for money.
- Identify commonalities in relation to Climate interventions across City Region growth deals to enable CP partners to coalesce behind those key areas to deliver greater potential impact



Highlands and Islands

LA	Moray	Highland	Orkney	Shetland	CnES	Argyll and Bute	North Ayrshire
City / Region Deals	Moray Growth Deal	Inverness and Highland City Region Deal	Islands Growth Deal			Argyll Growth Deal	--
Convention	Convention of the Highlands and Islands						
Regional Skills Groups	Highlands and Islands Skills Leadership Forum						

Glasgow City Region Deal

LA	Glasgow	East Ren	Inverclyde	Ren	West Dunb	East Dunb	North Lan	South Lan
City / Region Deal	Glasgow City Region Deal							
Regional Economic Partnership	Glasgow City Region Regional Economic Partnership							
Regional Skills Group	Glasgow City Region Employment and Skills Group							

Edinburgh and South East Scotland City Region

LA	Edinburgh City	East Lothian	Midlothian	West Lothian	Borders	Fife
City / Region Deal	Edinburgh and South East Scotland City Region Deal					
Regional Economic Partnership	No REP					
Regional Skills Groups	Integrated Regional Employability and Skills Board and the Labour Market Analysis and Evaluation Theme Group					

Tay Cities

LA	Dundee City	Angus	Perth and Kinross	Fife
City / Region Deal	Tay Cities Deal			
Regional Economic Partnership	Tay Cities			
Regional Skills Group	Tay Cities Employability and Skills Group			

Forth Valley

LA	Stirling	Clackmannanshire	Falkirk
City / Region Deal	Stirling and Clackmannanshire City Deal		Falkirk Improvement Zone
Regional Economic Partnership	No REP to date		
Regional Skills Groups	None		

South of Scotland

LA	Borders	Dumfries and Galloway
City / Region Deal	Borderlands Growth Deal	
Regional Economic Partnership	SOS Regional Economic Partnership	
Convention	Convention of the South of Scotland	
Regional Skills Group	SOS Education and Skills Strategic Coordination Group	

Ayrshire

LA	North Ayr	East Ayr	South Ayr
City / Region Deal	Ayrshire Growth Deal		
Regional Economic Partnership	Ayrshire Regional Economic Partnership		
Regional Skills Group	Ayrshire Skills Group		

North East Scotland

LA	Aberdeenshire	Aberdeen City
City / Region Deal	Aberdeen City Region Deal	
Regional Economic Partnership	Aberdeen City and Shire Regional Economic Partnership	
Regional Skills Groups	Aberdeen City and Shire Regional Learning and Skills Partnership	

Sustainable funding for the Third Sector.

- Is there a model in the Dundee Climate fund – ***Delivering Community Choices through Participatory Budgeting*** we could use to encourage more to adopt?
- What more could Community Planning and Government do to support third sector /community organisations, and to ensure **sustainable** funding is available?

Delivering Community Choices through Participatory Budgeting

The Dundee Climate Fund aims to involve citizens in developing proposals for and deciding on the allocation of £750,000 which will deliver community-led climate change projects in the city over a four-year period.

Communities decide directly how to spend part of a public budget by identifying and voting on local projects aimed at delivering on the following themes:

- **Energy:** reducing consumption, promoting energy efficiency, use of renewables
- **Transport:** encouraging active travel, decarbonising transport
- **Waste:** reducing waste, recycling, reusing resources
- **Resilience:** improving greenspaces, biodiversity, local food growing
- **Building Capacity:** increasing awareness, engaging communities and young people in climate change.

CPIB SLWG Climate Change, August 2022

Key Areas for Action

Reduce fragmentation in the funding landscape

1. The funding landscape is complex and fragmented, and action is needed to
 - a. Declutter, consolidate and develop a leaner approach to improve access for the public sector, including the Third Sector (capacity; word of mouth)
 - b. Provide greater emphasis on investment in people to ensure we have the right skill sets and working practices (we invest in the asset, and underplay investment in people skills, and how to get people working differently)
2. The new [Virtual Energy Agency](#) provides an opportunity to develop a coherent investment strategy in relation to Climate (and go beyond the one aspect of transition currently proposed)
3. Make greater use of existing forums/structures:
 - a. Stronger role for Community Planning
 - i. Co-ordination around carbon trading and offsetting
 - ii. Working with Communities to support behaviour shift
 - iii. Greater emphasis on statutory sectors' role as Anchor Organisations that should and could do more to direct private enterprise funds to local communities of need/to tackle poverty
 - b. Regional Climate Action Hubs and Co-ordinators
 - i. Supporting greater co-ordination between funders
 - ii. Greater involvement of TSIs to support climate work within communities
 - c. Business Support Partnership (ongoing work to review and declutter PS funding landscape)
 - d. Scottish Cities Alliance (LG skills requirements)
 - e. CESAP (Climate Emergency Skills Action Plan) Refresh in Spring 2023
 - f. Scottish Communities Climate Action Network (supporting community-led action)
 - g. Strengthen Place Dimension within Sustainable Energy & Climate Action Plans & Green Jobs Focus within Regional Skills Investment Plans
 - h. Greater alignment with the ambitions set out in Circular Economy Scotland

Use & co-ordinate procurement strategies to apply the full collective weight of the Public Sector

1. Push out existing procurement frameworks further (like those in Scotland Excel, and others that are available) to share information/knowledge, expand use and ensure Community Planning partners can tap in.
2. Ethical Procurement and Investment
 - a. Better/more proactive use of [Sustainable Procurement Duty](#)
 - b. Build on [Community Wealth Building](#) Agenda
 - Anchor's Progression Framework
 - Progressive procurement pillar for CWB (e.g. Local Supply Chains)
 - CWB Pillar on making financial power work for local places
 - Guidance for CWB/Wellbeing Economy (*Social Justice on a Healthy Planet*)
 - CWB Bill could seek to focus on local contracting/purchase
 - c. Utilise funds such as SWF to promote positive choices (e.g. higher level of funding on spending which reduces emissions, e.g. buying from local second-hand furniture shops rather than new)
3. Amend procurement legalities to ensure place-based and community-based approaches are prioritised.
 - a. Procurement clauses on subcontracting locally/circular economy/additions to community benefit should be built in

- b. Regulations are necessary given impact of Resource Spending Review. Achieving net zero outcomes is costly, and without action, there will be a drive away from more costly local supply lines.
 - c. We need to invest in the local market so it grows and can compete on more equal basis.
 - d. Reference examples of Scottish Futures Trust metrics (which stipulate local) driving up costs, and projects are subsequently becoming unaffordable
4. If we are going to deliver on Climate Change ambitions, a collective understanding is needed that less is going to be delivered. How this links with the targets that SG have set needs further consideration.
 5. Greater use of existing structures:
 - a. Collective action between Community Planning Partnerships, using purchasing power of all statutory agencies in Scotland to drive meaningful change (e.g. in discussions with Utility Companies).
 - b. There should be greater emphasis on statutory sectors' role as Anchor Organisations that should and could do more to reduce supply chains to promote local investment
 - c. Greater use of City Deal and Growth Deals to ensure not only local supply chains are used but also a climate action 'benefit' clause is prioritised, with contractors assessed not only on their community benefit but their climate benefits

Prioritisation of the big-ticket areas by understanding and disseminating what the evidence tells us











1. Improve our understanding of the governance structures and forums needed to promote wider public sector alignment around Climate priorities/funding streams to maximise opportunities from collaboration and develop strategic partnerships which deliver more value for money

Sustainable funding for the Third Sector.

1. Is there a model in the Dundee Climate fund – ***Delivering Community Choices through Participatory Budgeting*** we could use to encourage more to adopt?
2. What more could Community Planning and Government do to support third sector and community organisations, and ensure sustainable funding is available?

APPENDIX

SLWG Climate change – Evidence and material considered

Funding	Dundee mapping of Climate funding streams	 SLWG Climate Change - DCC Feedl
	SDS mapping of funding and investment in enterprise and skills	 SLWG Climate Change - SDS feedb
	Scottish Enterprise feedback on Business Support Partnership	 Business Support Partnership .docx
	SFRS Climate Funding	 SFRS Climate Funding.docx
	SFRS Case Study – Carbon Offsetting	 SFRS - Case Study on Carbon Offsetin
Procurement	Scotland Excel Support for Climate Change & Sustainability	 SLWG Climate Change - Scotland E
	Scotland Excel Analysis of Local Net Zero strategies	 SLWG Climate Change - Scotland E
	SFRS Procurement	 SFRS Procurement.docx
Sustainable Funding for the 3 rd Sector	Dundee City Council	 SLWG Climate Change - Communit
Prioritisation	SDS Research into Big Ticket Skills Issues, Responses & the way forward (slides 4-6)	 SLWG Climate Change - SDS feedb

FINANCIAL SECURITY FOR LOW
INCOME HOUSEHOLDS
CPIB SLWG

November 2022

Making progress in Data sharing

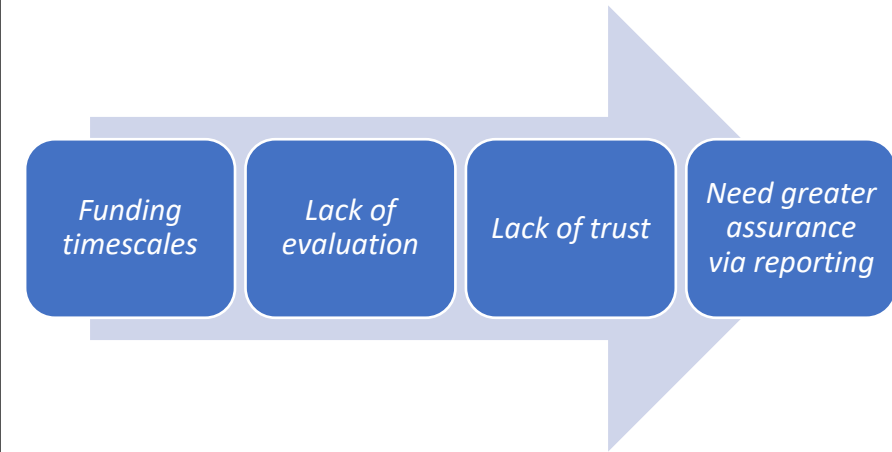
- Focus on key areas, e.g. SSS/DWP
- GDPR - agree national principles and common risk levels
- Integration of IT systems for smoother referral processes
- Replicate local progress in unlocking barriers accessing HMRC/DWP data (e.g. Glasgow)
- Wider application of legal gateways and mechanisms for information sharing developed in SS Pilots
- Corporate access to MOSAIC and ACORN software for Experien/CACI data
- Learning from SAVVI in England, are there levers in Scotland we could make more use of?
- A streamlined data access route for referrals to the third sector, a role for TSIs?
- Supporting Third sector to use Macro/big data
- **PHS Child Poverty – Inverclyde Pilot**
- **SDS 16+ Datahub & multiparty data sharing**
- **Developing a common shared and trusted storage place for data for CP partners**
- **A standardised approach to understanding risk and interpretation of legislation**

Addressing Funding barriers

- Longer-term and more flexible funding, particularly around year-end spending
- Better Evaluation
- Role of CPPs in making joined up decisions **and collective prioritisation** in relation to spend
- Mapping of Child Poverty funding
- **Greater co-ordination in relation to Financial Security/Cost of Living Crisis interventions and events to support a 'Whole System' focus**

Reducing complexity of reporting & governance structures

- Funding drives reporting



- Shift to 3 year Tackling Child Poverty strategies

Data Sharing – Agreed Actions

<p>CPIB/CPP Action</p>	<p>1. National principles on data sharing and risk levels CPIB to develop a set of national principles or framework for what data can be shared and common risk levels in relation to GDPR.</p> <p>2. Promoting good practice CPIB to showcase where progress in sharing data is being made at a local level and explore if there is learning that can be replicated elsewhere:</p> <ul style="list-style-type: none">• Glasgow City Council’s work with DWP/HMRC• Social Security Pilots• P&K & SAVVI’s work on Rural Child Poverty
<p>National Action</p>	<p>3. Seek support for national data sharing principles/risk levels Take data sharing proposals to SG to seek Government sponsorship to bring weight to our collective efforts</p> <p>4. Progress in common platforms and common technology components Ask SG how governance arrangements for HSC Data Strategy & Scotland’s Digital Strategy could be used to prioritise progress in common platforms and common technology components. There is technology available that will connect systems with a view to enable the better sharing of data, but this is expensive and is not being applied in scale. This needs to be a Government priority due to the efficiencies this will deliver, as well as providing a significant enabler to more timely and intelligence based decision making.</p>

Funding Barriers – Agreed Actions

National Action	<p>5. Flexible and multi-year funding Ask SG to give greater emphasis to provision of flexible and multi-year funding so that services can use funding in ways that reflect what is going on in communities. This flexibility is particularly important in relation to tackling the Cost of Living crisis, to ensure funding is targeted where it is most needed. Include a requirement in the funding flexibilities for CPPs to be involved in wider commissioning of work to encourage a whole picture approach to funding services locally.</p>
CPIB/CPP Action	<p>6. Third Sector funding The CPIB will use its influence to encourage CPPs and the partners represented on CPIB to consider how they fund the third sector and provide flexibilities</p> <p>7. CPP Response to current Financial Crisis The CPIB will develop a think piece to influence a conversation at a local level, about how CPPs are going to respond to the current financial crisis, and at a sectoral level within CP partner organisations, recognising this will be a focus for partnerships and partners in the coming period. At a time we should be maximising collective action, there is a real risk partners will draw back due to reducing budgets, and individual governance and accountability to balance finances. The CPIB could use its influence to encourage CPPs and the partners represented on CPIB to step into that bold space locally, to look for solutions in different ways, and commit to wider commissioning of work through the CPP. The think-piece could also promote the use of the CPP self-assessment to help partners think about how they work together differently and pool resources.</p> <p>8. Preparing for the longer term Given the scale of the challenge, it is vital that the CPIB looks beyond this acute period, and to the future, to understand the challenges we are likely to see when we emerge from this financial crisis. Focus is needed on how we prepare for the longer term, and what whole system improvements are needed to make CP better nationally and to ensure we don't lose focus on priorities such as prevention or lose ground on the progress already achieved. The CPIB will keep a watching brief on this as it refreshes its strategic plans.</p>

Evaluation – Agreed Actions

CPIB/CPP Action	9. Promoting links with Academic Partners To promote stronger engagement with our Academic partners to help assess what CPPs are doing and what works, CPIB will share examples of good practice where this is happening effectively and share links of the wide range of Academic partners/resources available. CPIB will also encourage CPPs to think about how they might engage more with their academic CP partners to evaluate impact.
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Reporting/Governance – Agreed Actions

National Action	10. Reducing reporting requirements in relation to Child Poverty Action Reports Take a proposal to SG that instead of annual local Child Poverty Action Reports, local partnerships should be supported to take a strategic 3-5 year approach. Ensure the forthcoming guidance on local CP Action Reports emphasises local flexibility in relation to reporting arrangements.
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CPIB

SLWG on Financial Security for Low Income Households

June-August 2022

EXECUTIVE SUMMARY

1. Data Sharing

How do we address barriers in relation to organisational sharing of population and personal data, building on progress made in overcoming such barriers during Covid? What work is already happening to facilitate data sharing and where might there be opportunities for wider applicability?

Key Points

- I. We need better sharing of data in the following areas: Social Security Scotland entitlement data; HMRC/DWP data on household income; data on lived experience; data on debt to statutory organisations such as council tax/water, housing providers, fuel providers and education; and credit rating information
- II. It would be helpful to agree both national principles for what data can be shared and common risk levels in relation to GDPR. We believe there could be a key role for the Information Commissioner, including a steer on whether the 'public task' designation within the [GDPR](#) could be used collectively for wellbeing
- III. Better integration of data and IT systems is needed to improve referral pathways between health services and income maximisation services in particular, as the current complexity of systems between (and within) organisations prohibits data sharing;
- IV. If barriers are being unblocked in some places to promote better sharing of HMRC/DWP data (e.g. Glasgow), how can we replicate this in other council areas?
- V. Are there wider application opportunities for the legal gateway and appropriate mechanisms for information sharing being developed in the Social Security pilots, i.e. covered on page 6)
- VI. Could we negotiate corporate access to software such as MOSAIC and ACORN for service providers to access useful national datasets held by Experien and CACI?
- VII. Drawing on the learning in England from SAVVI (scalable approach to vulnerability via interoperability), are there levers in Scotland we could make more use of (e.g. Digital Economy Act)?
- VIII. The reliance the statutory sector has on 3rd sector service provision is growing, however with so many local and national organisations (given there are circa 40,000) a streamlined data access route needs to be developed to allow referrals to local and national providers alongside a secure network. Could TSI's play a role here?
- IX. How could we enable the Third Sector to use MACRO/ big data to identify where their services would be most helpful, rather than public bodies commissioning projects from the third sector all over the place?

2. Funding Barriers

How do we address the challenges partners face in relation to funding cycles, ringfencing and reporting to different funders with different timescales?

Key Points:

- I. **Longer-term funding.** Funding timescales are too tight to allow meaningful planning or development of effective projects or services with vulnerable people (including effective recruitment/staff development etc). There are also issues with lack of flexibility to carry forward funding/work into future years.

- II. **Better Evaluation:** These funding timescales undermine meaningful evaluation. The lack of evaluation drives lack of trust, and the need for assurance through disproportionate governance/reporting. Better evaluation requires an investment in transformation however, the funding is not there! In reshaping our system of evaluation to support a greater focus on early intervention and prevention, it is important to recognise that often the 'benefits' of intervention do not fall to the delivery organisation and are captured elsewhere.
- III. **The role of CPPS in making joined-up decisions on spend** should be strengthened to avoid duplication and maximise opportunities to reach those most in need (e.g. ADPs where funding comes through the NHS, but SG look for evidence of partnership approaches and decisions about the use of funding).
- IV. Currently, no **mapping exists on Child Poverty funding**. Our view is that this would not be a useful focus of our resource at this time, particularly given the challenges around ensuring completeness and timeliness. If, however SG produce a mapping in due course, this will be a useful resource.

3. Reporting and governance

How do we reduce the complexity of recording, reporting, and inspection frameworks which create both a burden and lack of clarity in relation to shared outcomes and priorities?

Key Points

- I. The funding drives the reporting. *Funding timescales>lack of evaluation>lack of trust>need greater assurance via reporting*
- II. The administrative task to produce Annual Child Poverty Action Reports is onerous, and undermines delivery, development and evaluation of interventions. A move to a 3-year tackling child poverty strategy would be a more effective and less labour-intensive way of bringing about improvements in this area.

SECTION 1: DATA SHARING

How do we address barriers in relation to organisational sharing of population and personal data, building on progress made in overcoming such barriers during Covid? What work is already happening to facilitate data sharing and where might there be opportunities for wider application?

Key Points

- I. We need better sharing of data in the following areas: Social Security Scotland entitlement data; HMRC/DWP data on household income; data on lived experience; data on debt to statutory organisations such as council tax/water, housing providers, fuel providers and education; and credit rating information
- II. It would be helpful to agree both national principles for what data can be shared and common risk levels in relation to GDPR. We believe there could be a key role for the Information Commissioner, including a steer on whether the 'public task' designation within the [GDPR](#) could be used collectively for wellbeing
- III. Better integration of data and IT systems is needed to improve referral pathways between health services and income maximisation services in particular, as the current complexity of systems between (and within) organisations prohibits data sharing;
- IV. If barriers are being unblocked in some places to promote better sharing of HMRC/DWP data (e.g. Glasgow), how can we replicate this in other council areas?
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- VI. Could we negotiate corporate access to software such as MOSAIC and ACORN for service providers to access useful national datasets held by Experien and CACI?
- VII. Drawing on the learning in England from SAVVI (scalable approach to vulnerability via interoperability), are there levers in Scotland we could make more use of (e.g. Digital Economy Act)?
- VIII. The reliance the statutory sector has on 3rd sector service provision is growing, however with so many local and national organisations (given there are circa 40,000) a streamlined data access route needs to be developed to allow referrals to local and national providers alongside a secure network. Could TSI's play a role here?
- IX. How could we enable the Third Sector to use MACRO/ big data to identify where their services would be most helpful, rather than public bodies commissioning projects from the third sector all over the place?

What data do we want in relation to Child Poverty?

There are two overlapping 'levels' of data that would be useful to better understand and respond to child poverty. Firstly, data and intelligence that helps decision makers understand the scale, nature and location of child poverty at population level. Secondly, data and intelligence about individual children and households experiencing or at risk of poverty to help shape and direct policies and services (e.g. to allow local authorities to contact families known to be at risk of poverty to ensure they are in receipt of all their entitlements).

Social Security Scotland data

Social Security Scotland holds information that could be useful in relation to both of these 'levels of understanding'. In terms of children's benefits, Social Security Scotland delivers the Scottish Child Payment (available to most households with children in receipt of means tested benefits), Best Start Grant and Best Start Foods (available to households with children in receipt of means tested benefits with income below an established threshold), Child Winter Heating Assistance (available to households with a child on the highest rate care component of Disability Living Allowance). Social Security Scotland are also in the process of rolling

out delivery of Child Disability Payment, a payment providing extra money to help with the costs of caring for a child with a disability or ill-health condition. It replaces Disability Living Allowance for children in Scotland.

While Social Security Scotland have committed to moving towards data sharing and automation in the longer term (see page 6) there is a sense that more could be done to ensure relevant information is shared with local authorities. Finding ways of sharing this information effectively with local authorities would enable them to:

- Build a more accurate understanding of the geographical location of poverty/child poverty in their area in order to target resources and plan services more efficiently.
- Identify households that are likely to be eligible for, but not in receipt of local entitlements such as free school meals, education maintenance grants and council tax reduction. In the absence of systems being developed to automate these payments local authorities could still proactively contact these households to make them aware of their likely entitlement.
- Ensure low income households with children were made aware, in a targeted way of the range of wider support they are entitled to. This might include, for example, support through the Parental Employability Support Fund, a funded ELC place for their 2 year old etc. This would not only assist the relevant families but also help the Scottish Government meet many of its stated policy objectives such as reducing child poverty, reducing the gender pay gap and improving child wellbeing.
- Enable local authorities to identify and support families experiencing re-assessment of their entitlements of transitions from one benefit to another (e.g. transitioning from Child Disability Payment to adult PIP)

It would be useful to emphasise the importance of information on lived experience. At a population level, there is a lot of data that is already shared and having more population level data may not necessarily add value to what we know about child poverty in our area. To make a difference to low-income households, it is issues around data sharing at a local/ individual level that will help us more easily join up services across organisations, but national guidance and simplification of processes will be helpful. We are working with the Highland Poverty Action Network to do some work on lived experience which we hope will highlight specific issues for us to address locally.

Data on debt to statutory organisations such as council tax/water, housing providers, fuel providers and even education can give early indication that a situation is getting worse and that extra assistance might be required.

Where do barriers exist in relation to the sharing of this data between partners?

1. GDPR and uncertainty over what information can be shared (within/between organisations)

Work with local child poverty leads suggests that there is some uncertainty about what information local authorities can share internally between social work, housing, homelessness, council tax reduction, housing benefit, education (free school meals, school clothing grant and education maintenance allowance recipients), Scottish welfare fund applicants, crisis grant applicants, etc within GDPR/information governance restrictions. There is a fear generally that if the information hasn't been submitted for the reasons of being able to target advice services, benefits etc. then it can't be used for anything other than those particular purposes. However, in the past the Information Commissioner has said that if services have concerns around welfare, neglect or safeguarding then information can be shared, but this doesn't seem to have been reflected in local approaches, and legal departments tend to be risk averse, so don't look at how this can be done.

A cursory look at information around the [code of practice on the Digital Economy Act](#) and [codes of practice on the Information Commissioners Office](#) website suggest that public services can share information under condition 1 of the public sector delivery power of the Digital Economy Act. Condition 1 is that the purpose is the improvement or targeting of a public service provided to individuals or households, or the facilitation of the provision of a benefit (whether or not financial) to individuals or households. We have not looked into this in any depth and as to whether there are any different Scottish Regulations, but it does seem that the ability is there, but officers are not aware of what can be done (excerpts are set out at [Annex 1](#)).

The level of data sharing and the data shared is often the problem. Agreement to share limited contact details when someone hits a specific limit can allow other organisations to increase targeting of specific services for vulnerable people/families. It is important that we do not overshare and that privacy is respected so sharing does not have to give a detailed reason. Can we negotiate with the data commissioner whether 'public task' designation could/should be used for a wider range of sharing for wellbeing and harm reduction?

2. System Integration - joined up working & referral pathways

The lack of single national systems that talk to each other creates barriers for joined up working and data sharing.

Case Study from NHS Highland

Data sharing is a real barrier in relation to getting referral pathways between health services and income maximisation services. Non-health services also find this an issue. On the whole, our systems are not set up for joined up working and referring people from health to non-health care support. When we have been able to develop such pathways, it seems overly complicated. For example, we were able to do this with the Community Link Worker service but only because we invested in an IT solution that integrated with the GP Vision system.

Given the number of information systems we have to work with, it seems overly complicated to get a 'social' referral integrated within our systems. Without this, it is unlikely that we will get change on the required scale to link people from health into income maximisation services. Multiply this across the numerous partnership systems and the barriers becomes obvious.

As an example, we did some work to try to embed a direct referral route from pregnant women to the council welfare support team through a simple email request embedded within Badgernet. Despite this seeming to happen in other health boards, we consistently received information that this could not be done as the email details would be shared. Referrals can still be made, but only through advising the person to make a self-referral. We know that this results in far fewer people taking up the opportunity to get income maximisation advice. This highlights the differences in interpretation of information sharing guidance and we agree that more needs to be done to get a consistent approach to information sharing within and across organisations.

We have also been working with the Council's income maximisation service to introduce income maximisation workers in GP practices. We have just secured SG funding for this and will be working through the process of how we embed workers in GP practices and systems to make the referral pathway as seamless as possible. We are just starting the work on information sharing agreement.

Anything that would make information sharing more streamlined would be helpful. It takes a lot of time and effort to get individual data sharing agreements in place and although we understand that stringent data protection needs to be in place, there seems to be more than a few examples of where the process gets in the way of helping people get the support they need.

3. Costs associated with accessing national datasets

Companies such as Experian and CACI provide population data that can provide insights to help partnerships understand and respond to their demographic. The software used, MOSAIC and ACORN can be purchased and it would be beneficial if corporate access was negotiated for service providers in Scotland. The data is primarily used for marketing however for that the providers need to know credit ratings (income), age and gender demographics and language to name but a few. It is open data, but with a cost.

Where is work already happening to facilitate data sharing and where may there be opportunities for wider applicability?

1. Social Security Scotland Data

The IS has been working with the Child Poverty Action Group (CPAG) to bring relevant parties (including the Scottish Government, Social Security Scotland, COSLA, North Ayrshire Council and Glasgow City Council) together to discuss the obstacles to sharing information on Scottish Child Payment claimants with local authorities to enable efficient targeting of wider local benefits and supports (such as Free School Meals, School Clothing Grants, Education Maintenance Allowance, employability support, income maximisation advice etc.). This was in response to repeated calls from the Local Child Poverty Leads Peer Support network for more information from Social Security Scotland to allow them to better target services and entitlements.

All parties are currently working to identify a legal gateway and appropriate mechanisms for information sharing to allow for the initiation of pilot initiatives.

Given the range of benefits it delivers Social Security Scotland holds information about which households in Scotland are at highest risk of experiencing child poverty. Sharing this information with local authorities would help to ensure low income households with children were made aware, in a targeted way of the range of wider support they are entitled to. This might include, for example, support through the Parental Employability Support Fund or Whole Family Wellbeing Funding.

The councils in turn could then share relevant information about entitlement to locally administered benefits with Social Security Scotland and could potentially identify where people who have made an application to the Scottish Welfare Fund but haven't applied for Scottish Child Payment.

This would not only assist the relevant families but also help the Scottish Government meet many of its stated policy objectives such as reducing child poverty, reducing the gender pay gap and improving child wellbeing.

Social Security Scotland made a statement in May 2021 about developing automatic entitlement to benefits:

'Social Security Scotland is committed to ensuring that accessing entitlements from other agencies is as seamless as possible for clients.

When clients move to Scottish Disability Benefits our plans will ensure that the entitlements they currently receive as a result of their existing DWP benefits continue, such as Council Tax Reduction and Blue Badge entitlement. We are implementing information sharing processes with the accessible Vehicle and Equipment provider to ensure this is the case. Also, our Certificate of Entitlement for Blue Badge will ensure clients can easily apply for this entitlement too with a certificate from Social Security Scotland which proves their eligibility.

It is our intention to build multiple data sharing solutions, including a Portal, which will enable other agencies to access relevant benefit information which they can then use to determine eligibility for other entitlements such as council tax reduction. This service will also have the capability to broadcast changes to interested agencies, where there is a business justification to do so, in order for them to update any entitlements as a result of a change of circumstances.

Our long term ambition is to make access to other entitlements automatic to clients at the point of benefit award. This would mean, for example, that through information sharing with the relevant agencies, once a disability award has been made by Social Security Scotland, this information can be passed to the relevant agencies to then automatically provide other entitlements that clients are eligible for.

In relation to education benefits, inclusive of Free School Meals, School Clothing Grant and Education Maintenance Allowance, the Scottish Government has committed to exploring how eligibility for the Scottish Child Payment might allow local authorities to automate these entitlements, based on the above approach, following the roll out of SCP to under 16s by the end of 2022.

Scottish Government officials are also actively engaging with DWP on approaches to enable use of existing DWP data held by local authorities for the purposes of awarding education benefits. This work is ongoing in order to determine appropriate regulations to enable this to happen and local authorities / COSLA will be appraised of progress in due course.'

2. HMRC/DWP data

Glasgow City Council has received permission from the UK Government to use DWP/HMRC information relating to household income for research purposes. In response, Glasgow City Council, in partnership with the Centre for Civic Innovation have done an exceptional [piece of work](#), combining DWP/HMRC data with SEeMis data to map the level, location and depth of child poverty across Glasgow. This includes information on how rates of poverty vary across the priority groups. The incredibly rich and granular nature of this household level data has allowed Glasgow to make more informed, evidence based decisions and target its services (Such as FISO) more effectively. However, they cannot use the data to explicitly target individual households and engage directly with them.

In terms of using DWP/HMRC information to proactively contact low income household, some progress has recently been made on this as a result of legislation making its way through the UK Parliament which will allow local authorities to use HMRC/DWP data to identify and contact households which are entitled to but not currently accessing a free childcare place for their two year old. It is intended *“to enable data sharing between HMRC, DWP, the Scottish Government and Scottish local authorities in order to help identify and contact households that are eligible for funded early learning and childcare (ELC) for 2 year olds in Scotland.”*

This raises a question of why such an approach could not be taken (with or without further legislation) to maximise uptake of wider local and Scottish benefits.

3. EVOC:

EVOC is currently working with 10+ organisations across Edinburgh who work in the CYP & Families theme to refresh an existing Data Sharing Agreement (2016) and expand it to include City of Edinburgh Council. DPIAs, followed by TSI supported inclusion of as many third sector agencies as possible within an all-encompassing DSA to cover the breadth of handling personal data (usually manifesting itself in referrals, sharing info for a child's plan) across the NHSL/CEC/Third sector is an example of good practice. There is also liaison with SG re GIRFEC refresh. NHSL and CEC Data Sharing officers engaged and helped EVOC integrate both public bodies into the one DSA through the regional data sharing infrastructure. EVOC anticipate over 40+ signatories from across the third sector by autumn.

An important point to note is that whilst EVOC can do the all of the work to get the 40+ signatories alongside CEC and NHSL, it cannot guarantee their day to day practice as it is their governance and knowledge/skills that delivers on the actions in the DSA. What EVOC can do is require mandatory training before they can sign up and provide a self-audit tool for their practice and policies to improve and be as compliant as is possible.

4. SAVVI

In England there is the SAVVI (scalable approach to vulnerability via interoperability) approach <https://istanduk.org/savvi/> which seeks to identify vulnerable people and households, and then lead a multi-agency, and community response to assessing needs and providing support and interventions. This has developed from the approaches during COVID to share information and target those who needed support. It

seeks to identify the data and standards that can improve how local councils can find vulnerable people and households, using both council data but also exploring data held by Government agencies. They have looked at Information Governance and identified similar issues to those outlined in the rural child poverty workshops that we have undertaken, including around the legal basis for sharing, risk appetites and different interpretations of the legal gateways for sharing data. They have shared DWP templates for accessing data as an example, similar to what Social Security Scotland have suggested be completed for access to the Scottish Child Payment information.

The main barrier which the examples outlined above seem to be focussed on is around information governance. Organisations are not confident about what information they are allowed to share under GDPR legislation and as mentioned before tend to be risk averse in this regard, erring on the side of caution, when they should be focussed on addressing barriers to supporting families with children living in poverty.

The SAVVI project has looked at this in detail, but only in regard to English law. There could be opportunities to use what they have developed and check this under Scots law. There could also opportunities to use the Digital Economy Act to help break down some of the barriers to information sharing.

Following on from IS work with rural local authorities, Perth and Kinross is currently exploring the possibility of working with SAVVI to identify new and existing avenues for data sharing relevant to tackling child poverty.

5. Lifting Families Together Project & Glasgow/Dundee Pathfinders

The Local Child Poverty Action Reports showcase innovative examples of service delivery which rely on a more proactive approach to sharing information about families. See for example, 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 Pathfinders 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.

6. Prioritise Child Poverty: A Data and Systems Approach

Public Health Scotland has developed this tool to support local areas identify relevant data sources and also develop pathways for sharing relevant data between different departments and organisations. It was piloted in Inverclyde and is currently being used to support data sharing in Dumfries and Galloway.

7. Police Scotland – sharing data at a MACRO level

Police Scotland are hosting a workshop with their data and IT specialists and colleagues in Public Health initially to consider how they can share data at a MACRO level. However, data security is of huge importance to partners and levels of data security/risk vary across partners. An agreed common platform needs to be established with risk levels that all organisations can agree on. Once data is shared it can be forwarded to other organisations by the new data owners. Can the public sector as a whole negotiate with the data commissioner whether 'public task' designation could/should be used for a wider range of sharing for wellbeing and harm reduction?

Police have been proactive in working with LA's to create a standardised data sharing agreement that aims to provide as much as they can for normal circumstances, however even this has faced challenges.

8. [PHS Child Poverty – Inverclyde Pilot](#)

PHS created a suite of resources to help local areas better use data to shape local priorities to reduce child poverty. In September 2021 PHS [published](#) a toolkit for local areas with a number of resources designed to support data-informed decisions being made about how best to support families and prevent child poverty. This is the result of a project with Inverclyde Council where we worked together to build up a better picture of what the local child poverty system looked like in Inverclyde, what data was being captured and how it could be used to best support local families. The work helped local partners think about how they might better collaborate, and apply a child poverty lens to local service provision, to prevent and reduce child poverty. The approach, which is brought to life in a [short animation](#), brought together participants from a wide range of local services in Inverclyde with a role to play in the lives of low income families. A range of local authority (and NHS staff) have had a short introduction, via a webinar, to the work that took place in Inverclyde. 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.

9. [SDS 16+ Data Hub](#)

By sharing multiparty data among key partners, SDS provide tailored support to young people when they leave school, specifically those who are not moving on to learning or work. The Data Hub links up the work going on across Scotland to help our young people find positive, sustained destinations after their secondary school education.

Exploring barriers to data sharing

With funding provided by the Scottish Government's Scottish Rural Network, the Improvement Service has taken a design approach to understanding and seeking to overcome some of the key difficulties remote, rural and island authorities face in relation to child poverty data and intelligence. Over the course of four workshops in May and June 2022 (our 'intelligence sprint') the group – which consisted of local child poverty and data leads - identified 20 Draft 'Solutions', many of which are likely relevant to all local authorities and their community planning partners.

While the **draft** solutions are currently being considered by the child poverty and data and intelligence leads involved in the intelligence sprint – and therefore subject to change – all 20 are included in [ANNEX II](#)). **We would ask you not to share these draft recommendations until they have been signed off by the rural leads.**

They include:

- *Establish a multi-disciplinary working group on Tackling Child Poverty through Innovation in Data and Intelligence, chaired by IS/COSLA/academic partners to include, for example, relevant local authorities and health boards, relevant academics (Scottish Policy and Research Exchange, SPIRU, Codeclan, Data Lab, Research Data Scotland), representatives of the Information Commissioner and those with insight/expertise as to private sector use of data sharing legislation. Local government representatives should include those in leadership roles (SOLACE etc.) those with data and analytical expertise, GIS professionals and child poverty policy and delivery leads. The remit of the group would include:*
 - *Investigating the availability, suitability and quality of additional data sources, including private sector data sources, for the purposes of identifying and addressing child poverty.*
 - *Providing information and advice to the Scottish Government and local authorities on the financial, legal, practical and moral implications of accessing these data sources*
- *Engage with Scottish Policy and Research Exchange (SPRE) to bring an academic perspective to the identification of 'trigger point' data and potentially develop algorithms to allow those at risk of child poverty and/or financial crisis to be identified and early interventions made to support the families. The example provided during discussion was the existence of school meal debt.*
- *IS and national Local Child Poverty Peer Support Network should work with the Information Commissioner and SAVVI to compile examples of where data has been shared in an innovative way locally (or between national and local organisations) to contribute to a reduction in child poverty.*
- *IS and/or Public Health Scotland should work with the Scottish Government, Scottish Office of Information Commissioner (ICO), SAVVI and Scottish local authorities to develop a training resource or toolkit on information sharing to prevent and alleviate child poverty, removing confusion around the legislation and showing what can be shared and how.*

Further draft solutions identified in the paper – **and again subject to change** – relate to how data and intelligence can be used to ensure there is a clear, real time understanding of the cost of living for families in Scotland and how we can ensure lived experience intelligence is gathered effectively and reflected in decision and policy making.

SECTION 2 – FUNDING BARRIERS

How do we address the challenges partners face in relation to funding cycles, ringfencing and reporting to different funders with different timescales?

Key Points:

1. **Longer-term funding.** Funding timescales are too tight to allow meaningful planning or development of effective projects or services with vulnerable people (including effective recruitment/staff development etc). There are also issues with lack of flexibility to carry forward funding/work into future years.
2. **Better Evaluation:** These funding timescales undermine meaningful evaluation. The lack of evaluation drives lack of trust, and the need for assurance through disproportionate governance and reporting. Better Evaluation requires an investment in transformation however, the funding is not there! In reshaping our system of evaluation to support a greater focus on early intervention and prevention, it is important to recognise that often the 'benefits' of intervention do not fall to the delivery organisation and are captured elsewhere.
3. **The role of CPPS in making joined-up decisions on spend** should be strengthened to avoid duplication and maximise opportunities to reach those most in need (e.g ADPs where funding comes through the NHS, but SG looking for evidence of partnership approaches and decisions about the use of funding).
4. Currently, no **mapping exists on Child Poverty funding**. Our view is that this would not be a useful focus of our resource at this time, particularly given the challenges around ensuring completeness and timeliness. If however SG produce a mapping in due course, this will be a useful resource.

Has SG undertaken any mapping to understand funding spent on poverty related work?

SG Response (Andrew Fraser, Team Leader, Tackling CP Strategy Unit)

"We have discussed internally the value of producing the type of funding mapping that you've outlined below, however I'm not aware that one is available as yet. My colleague Sarah (in Whole Family Wellbeing Funding policy) is looking to start off work on this over the summer but I don't want to raise any expectations of what we may be able to share in the future and how comprehensive this will be.

In the interim you may find the [first Annex](#) to Best Start, Bright Futures helpful. This sets out a range of funding relevant to child poverty (almost £10bn in 2022-23), however it doesn't specifically outline how funding is delivered or the conditionality attached / reporting requirements. This isn't an exhaustive list and doesn't include all relevant spend e.g. on health services and free prescriptions, or in relation to public contracts which support labour market opportunities.

It may be that additional funding mapping is undertaken as part of local pathfinders, however again I'm not aware of any such work having been completed to date. Any mapping undertaken at a national level would of course miss wider funding in play locally, including funds secured by third sector / other partners or increased targeted investment by local authorities from wider allocations etc".

Examples in relation to the area of financial security where ring fencing has created challenges/had a negative impact.

Improvement Service

The IS posted a query on the Local Child Poverty Action Report (LCPAR) Group KHub site, asking if local authority colleagues could provide any examples where ring fencing has created challenges/had a negative

impact. The only response received is more about how organisations pool budgets, rather than ring-fencing, but it is worth noting.

'The general 'organisational' ring fencing is one of the biggest barriers. Local Authorities generally use their resources for Local Authority projects; NHS for NHS; etc. (I know there are a few exceptions to this) It will probably take long term effort to get more sharing of resources between organisations than we currently have (I think in general the level of this may be increasing - but I've not got any figures to back that up). It's likely to be particularly hard (but also even more necessary to do) for Local Authorities as they see their budgets get thinner and thinner as time goes by.'

Comments from IS interviews with local child poverty leads in Autumn/Winter 2021 included the following:

- *"Health and Education are ring-fenced and we're **incorporating cuts**. We have nothing left to cut, so it's unrealistic to expect us to find new and additional resource for child poverty at the moment"*
- *"We have £98k for tackling period poverty but nothing specifically for child poverty, plus much of our team have been seconded out to process COVID Grants"*
- *"We need additional resource to take child poverty work forward effectively at local level. We also need **additional resource for the actions that we know will be effective locally – or to test what we think will be effective in our area**. Pots or funding directed towards particular initiatives are good – but sometimes they don't fit with what we know need to happen locally. '*
- Particular frustrations around ringfencing PEF. *'At local level there is no transparency about how it is being spent. There is no alignment with the child poverty reporting framework. Head teachers have a budget to take action within the school and it doesn't often reflect the broader work to tackle child poverty. The local authority has a much wider agenda and no specific budget. There needs to be **more transparency but also more direction from a national level about how these strategies fit together.**'*
 - **Example:** *I have people from education come to me looking for budget to promote digital connectivity for pupils and I think 'can't PEF do that? Why can PEF give you a laptop and not make sure you're connected to the internet?'. It's frustrating because we don't have a budget and they do'.*

Third Sector Interface

With regard to funding, TSIs are all currently working on their investment plans for the UK Shared Prosperity Fund, which is due in for 1 August. The UKSPF has an intervention around Cost of Living, and a strand about employability. There is also a pot of funding for Multiply around improving adult numeracy, which includes numeracy upskilling for parents, and managing budgets. The breakdown of available funding for Midlothian is:

UKSPF

22/23	23/24	24/25	SR
£357,295	£714,591	£1,872,228	£2,944,115

MULTIPLY

22/23	23/24	24/25	SR
£185,794	£214,377	£214,377	£614,548

The percentage breakdown between years is the same for all local authorities. As you can see, there is a lot of funding to be distributed in a short period of time this financial year, and the for UKSPF a drop in 24/25. Everyone is realistic about the difficulties of spending the money this year, and aware that there is a shortfall in year two that could be partly met by moving the funding between years. The Government has said that it might be possible to request to reallocate an underspend later in the year. However, this uncertainty makes it impossible to plan and develop effective projects as we need to attempt to spend the money this year, and it is almost impossible in the current climate to recruit to very short-term posts. Working with low income families often requires a period of time to build up trust, whereas we are being given funding to do a short three-month intervention then leave.

There were similar issues with the Community Renewal Fund, with the deadlines being very short, then common-sense prevailing and the deadlines extended. However, if everyone had been realistic from the start, it would have made for better projects as the timescales and staffing could have reflected this.

These are both UK examples, but TSIs are aware from discussions with Council colleagues that there are issues with employability funding being available at levels that are difficult to spend this year, before falling steeply next year. This is a long-standing problem, and whilst everyone acknowledges that this is a huge inefficiency, no-one seems able to address it.

NHS

There are a number of funding issues that make it more difficult to tackle financial security for low-income households. It would be helpful to get a clearer picture in relation to what funding is spent on poverty and across how many different SG departments. 'Bundling' funding targeted at reducing poverty and requiring co-ordinated partnership action at local level to distribute this funding would be helpful in ensuring that funding was targeted appropriately to local priorities. It is also worth noting that there will be funding that is not labelled as about tackling poverty but will have an impact on poverty. For example, some of the funding that goes through HIE, SDS and so on that is about employment and the economy will have an impact on poverty. The Community Link Worker funding which is part of Primary Care Modernisation should also have an impact on supporting patients with financial security.

Funding needs to be channelled through one of the statutory partners, but strengthening the role of CPPs in making decisions about spend and asking CPPs to report on this would help. This has been the case with, for example the Alcohol and Drugs Partnerships, where funding comes through the NHS but more and more, SG are looking for evidence of partnership approaches and decisions about use of funding. The approach with ADPs has driven a focus on outcomes and evidencing impact and this is an area for improvement in relation to CPPs. There needs to be investment in supporting CPPs to develop evidence informed action, performance monitoring and impact assessment. SG are just about to start a review of the Community Empowerment Act. This is where the legislation around community planning sits, and the review may strengthen community planning and CPPs. It will be important to influence this review.

Lack of joined-up working at CPP level on decisions about funding risks duplication of effort and misses opportunities to reach those most in need. We are now seeing this play out with the mental health and young people funding that was channelled through Local Authorities where work is duplicating the work already undertaken by the CPP Mental Health Delivery Group.

The other issue with funding is in relation to rural poverty. SG still uses SIMD as a tool in relation to making decisions about funding and we know this is not sensitive to rural deprivation, particularly in relation to fuel and transport poverty. SIMD is a useful but rather blunt tool and should be used in conjunction with other relevant indicators. Overall, it needs to be easier for CPPs to access funding and it will be helpful to have greater clarity on the role of CPPs in relation to specific funding streams for tackling poverty. There may be

opportunities with the new Shared Prosperity Funding to test out some approaches by placing this funding firmly in the partnership space.

Police Scotland

Getting people into work is a key to improving finance within low income households however some people, particularly those who have been out of work longer term, might need extra help designed to meet their needs. At a meeting of agencies who help re-introduce people to employment they explained 'double funding'. This is when a person joins a back to work course, maybe designed for a single parent, however it is clear that literacy is the underlying need and this would be better suited to another provider with specific skill sets. The person has been signed up to the original 'course' for 12 weeks and cannot swap to the other until their 12 weeks is finished, whether they attend or not. By not attending this can affect their benefits as they seem unwilling to participate.

Another example experienced by policing in a custody setting has seen some people who need help being excluded because they had a birthday the previous week. The 3rd sector funding can be based on such specifics that it unfortunately excludes some people in need.

A final example highlighted that funders can cause damage in local relationships and wasteful expense of public funds. At a community event 2 separately funded 3rd sector organisations both attended to help digitally excluded families by giving out mobile phones, unbeknown to each other. The community soon realised collecting 2 mobile phones each that day and selling them later.

As we move to a more preventative approach, that takes longer to mature and produce measurable benefits, we are curious if whether current funding periods are sufficient. Following on from that it is also a consideration about how we judge success; a move to outcome focussed success measures rather than quantity of service users, might allow the system to achieve more value for money.

The different social security arrangements in Scotland provide extra help for families however the 2 systems of DWP and Social Security Scotland can cause confusion and an added burden of stretched and anxious families (advised by local teams).

Funding comes from so many areas of government and the oversight and evaluation is lacking. An example during Covid saw a variety of 3rd sector organisations getting a share of £750k for a year. This could, with more co-ordination, provided a service for more people for a longer time.

SECTION 3 – REPORTING AND GOVERNANCE

How do we reduce the complexity of recording, reporting, and inspection frameworks which create both a burden and lack of clarity in relation to shared outcomes and priorities?

Key Points

- The funding drives the reporting. *Funding timescales>lack of evaluation>lack of trust>need greater assurance via reporting*
- The administrative task to produce Annual Child Poverty Action Reports is onerous, and undermines delivery, development and evaluation of interventions. A move to a 3-year tackling child poverty strategy would be a more effective and less labour-intensive way of bringing about improvements in this area

National policy reporting frameworks which currently exist in relation to Financial Security in general and/or child poverty (as an example of financial security) and which are causing blockages

Improvement Service

Local Child Poverty Action reports

Under section 13 of the Child Poverty (Scotland) Act 2017, local authorities and territorial health boards are required to produce annual local child poverty action reports highlighting what they have done and what they plan to do to contribute to national child poverty reduction targets.

The duty was placed on local authorities and health boards because there was no legal mechanisms by which the duty could be placed on community planning partnerships.

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.

Leads highlighted that while the annual reporting duty is onerous and 'can feel like it is swamping you', it does help to keep a focus on child poverty and 'being disciplined about monitoring our actions'. One lead noted, 'I think we have made amazing progress over the last few years in terms of more focus on child poverty and finessing our response to address the three drivers'.

The annual nature of LCPA Reporting is proving problematic in some areas, with leads feeling under resourced. They complain that the scale of the **administrative task is overwhelming**. Complaints include:

- 'Governance arrangements are complex and lengthy – often going through Council, NHS and CPP Boards and sometimes others too (HSCP). This leaves little time to develop new work.'
- 'Report writing distracts from other aspects of the work- especially monitoring and evaluation – even though you are aware of how important these aspects are – they draw on the same resources and there isn't enough to do everything (so you focus on the statutory).'

- **Resources:** ‘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.’
- *‘The duty is to provide a report. It’s not a strategy or an action plan – but a report. To me this is an acknowledgement **that we can’t effectively strategize without additional resource to do that properly.** We need additional resource to take child poverty work forward effectively at local level. We also need **additional resource for the actions that we know will be effective locally – or to test what we think will be effective in our area.** Pots or funding directed towards particular initiatives are good – but sometimes they don’t fit with what we know need to happen locally.’*

There is growing consensus among local leads that a three-year tackling child poverty strategy – alongside annual update reports – might be a more effective and less labour-intensive way of bringing about improvements in this area. IS will be engaging with the Scottish Government on this issue in relation to the likely refresh of the existing Guidance on Local Child Poverty Action Reporting in 2022.

NHS

Reporting and governance is one of the greatest barriers to partnership working and having a joined-up approach to any issue. It would be interesting to see this mapped out for poverty/financial security. The cluttered landscape means that we miss an overall partnership approach from CPPs to understand how the different workstreams might best connect and what the overall need is. There is some work to do on understanding how we record impact.

The child poverty plan talks about root causes through three main drivers - increasing income through entitlements, increasing income through work and reducing the cost of living. This might be a useful way to consider actions taken under each of these headings and where we get our biggest return on investment. There may be an opportunity to influence through the SG review of the Community Empowerment Act.

Police Scotland

What do we need to know – who needs to know it – how often to do they need to know.

This need for reporting comes from lack of initial planning to understand and evaluate what works. Does the need to continue to prove worth, after worth has been established need to be done monthly or quarterly?

Annexe 1

1. Information Commissioners Office website case studies:

1.1 Public sector bodies sharing data to provide a co-ordinated approach

Personal information was shared between two councils, their local schools and colleges, housing providers, relevant community organisations, the local job centres and careers service in order to identify young people who already had been or were currently at high risk of disengaging from education, employment or training. By sharing the information, the partner organisations were able to ensure a co-ordinated approach to providing the most appropriate support to the young person to encourage them back into education, work or training.

The partners used a data sharing agreement to set out their purpose, lawful bases and the information to be shared. The agreement included a section on how to handle data subjects' rights, and agreed shared security standards; the partners also updated their privacy notices. To quality-assure their agreement, they shared it with a regional group of data protection practitioners for feedback. A timescale was also set for the partners to regularly review the agreement to ensure it stayed up to date and fit for purpose.

1.2 Sharing data between a local authority and local NHS trust to provide better early help and support to families

Families sometimes have hidden needs so don't receive the support they require from public services – or may be receiving support through one organisation for a specific issue, but have other needs too.

A council worked with an NHS trust to establish a data sharing arrangement between the council and health services to help identify children and families who would benefit from receiving co-ordinated and targeted early help for a range of issues they might be facing.

The data sharing arrangement cross-referenced NHS trust and council caseload data and identified children and families who were being supported by the trust, but not by the council's early help services. These families would then be engaged in wider support to address their needs through the Troubled Families Programme. The data would also be used to understand whether families had in fact benefitted from the support they received and to inform future commissioning of services.

Before sharing data, the two organisations worked together to put measures in place to ensure that the data would be protected and shared responsibly:

A data protection impact assessment, led by the Head of Information Governance and data protection officer (DPO) at the NHS trust, which identified the potential risks to privacy and how those risks would be mitigated.

An operational agreement setting out the arrangements for the exchange of data, under the overarching information sharing framework signed by the trust and the council.

A methodology to make sure the minimum amount of data was shared.

Privacy information.

Organisations involved: Children's public health, Health Visiting, and Child and Adolescent Mental Health Services (CAMHS); the council and local NHS trust.

2. Excerpts from Digital Economy Act Code of Practice for Public Authorities

<https://www.gov.uk/government/publications/digital-economy-act-2017-part-5-codes-of-practice/code-of-practice-for-public-authorities-disclosing-information-under-chapters-1-3-and-4-public-service-delivery-debt-and-fraud-of-part-5-of-the-di#public-service-delivery>

2.1 Understanding the purpose of the public service delivery power

55. Public service delivery is changing, due to increasing acknowledgement that services are more efficient and effective when they are joined up. Joining up services requires the sharing of information. The Digital Economy Act 2017 creates a mechanism for establishing clear and robust legal gateways which will enable public authorities to share relevant information on the individuals and families they are working with in compliance with the data protection legislation. The primary purpose of this power is to support the well-being of individuals and households.

56. The public service delivery power gives you the ability to gain access to the data you need to respond more efficiently and effectively to current and emerging social and economic problems. The power allows ministers in the UK government and, for devolved matters, the devolved administrations to set objectives in regulations. All objectives must meet all of the following conditions which are set out in section 35 of the Digital Economy Act 2017:

- condition 1: the purpose is the improvement or targeting of a public service provided to individuals or households, or the facilitation of the provision of a benefit (whether or not financial) to individuals or households;
- condition 2: the purpose is the improvement of the well-being of individuals or households; and
- condition 3: the purpose is the supporting of the delivery of a specified person's functions, or the administration, monitoring or enforcement of a specified person's functions.

57. For an explanation of terms in the above conditions — for example, “benefit” and “well-being” — please refer to the Digital Economy Act 2017 and its Explanatory Notes.

58. Here is a summary of the initial objectives for which information may be disclosed by specified persons under section 35 of the 2017 Act. For full details of the objectives, see the Schedule to the Digital Government (Disclosure of Information) Regulations 2018.

- Identifying individuals or households who face multiple disadvantages and enabling the improvement or targeting of public services to such individuals or households and providing for the monitoring and evaluation of programmes and initiatives;
- Assisting people living in fuel poverty by reducing their energy costs, improving efficiency in their use of energy or improving their health or financial well-being;
- Reducing water or sewerage costs, improving efficiency in use of water or improving the health or financial well-being of people living in water poverty; and
- Identifying and making contact with vulnerable people who might need help from the authorities in re-tuning televisions in 2018 to 2019 after the 700Mhz band will be used for mobile broadband rather than to transmit digital TV.

Additional objectives can be set by further regulations under section 35 of the Digital Economy Act 2017.

2.3 Using the public service delivery power

73. If your organisation has identified that the sharing of personal data is necessary to achieving a social or economic policy you should check whether the policy aims fall within one of the existing objectives set out in regulations. If it doesn't you should consider whether your purpose for information sharing falls within the criteria in section 35 and should be added as a new objective via regulations (see section 2.3). You should identify which public authority holds the information you wish to access and check whether they are listed on Schedule 4. If the public authority is not listed, it is possible to add them to the Schedule via regulations (see section 2.3). If the public authority is listed you need to carefully consider whether your policy aims are consistent with the objectives described in regulations. Seek legal advice where appropriate. The public service delivery provisions and all chapters in Part 5 of the Digital Economy Act require that processing of information must be carried out in accordance with the data protection legislation.

An illustrative example of an appropriate use of the PSD power:

A local authority wishes to access data held by the local police force and local school to identify whether there are individuals or households who meet the criteria for support under the troubled families programme.

The local authority considers the multiple disadvantages objective and assesses that the objective is consistent with the purpose of the proposed information share. The bodies that the local authority wishes to share data with are also present on Schedule 4.

The local authority has a lawful basis to share data. As the powers are permissive, the local authority will still need to agree with the other bodies to share information for this purpose and draw up an appropriate data sharing agreement.

74. The disclosure of data to achieve a public service delivery objective must only be used for the purpose for which it was disclosed, unless one of the exceptions in section 40(2) of the Digital Economy Act 2017 is engaged - for example, preventing serious physical harm to a person or loss of life. In such instances section 40 permits the specified person(s) to use that information to take action in accordance with the identified exception, using the minimum information required to fulfil that purpose. The exceptions in section 40(2) do not apply to information disclosed by Her Majesty's Revenue and Customs (unless the Commissioners for Her Majesty's Revenue and Customs have provided consent).

ANNEX II

DRAFT Recommendations / Solutions Arising from IS Remote / Rural / Island Child Poverty Data and Intelligence Workshops.

Overcoming barriers to data sharing
<p>1. Establish a multidisciplinary working group on Tackling Child Poverty through Innovation in Data and Intelligence, chaired by IS/COSLA/academic partners to include, for example, relevant local authorities and health boards, relevant academics (Scottish Policy and Research Exchange, SPIRU, Codeclan, Data Lab, Research Data Scotland), representatives of the Information Commissioner and those with insight/expertise as to private sector use of data sharing legislation. Local government representatives should include those in leadership roles (SOLACE etc.) those with data and analytical expertise, GIS professionals and child poverty policy and delivery leads.</p> <p>The remit of the group would include:</p> <ul style="list-style-type: none">- Investigating the availability, suitability and quality of additional data sources, including private sector data sources, for the purposes of identifying and addressing child poverty.- Providing information and advice to the Scottish Government and local authorities on the financial, legal, practical and moral implications of accessing these data sources
Drawing links with ongoing work around innovation in data sharing
<p>2. Identify one local authority and/or health board area to work in partnership with the Improvement Service in order to engage more closely with SAVVI (Scalable Approach to Vulnerability via Interoperability) and the Digital Transformation Framework to explore options for joint work and feed back to the wider group.</p>
<p>3. Engage with Scottish Policy and Research Exchange (Dave Bell) to bring an academic perspective to identify 'trigger point' data and potentially develop algorithms to allow families at risk of child poverty and/or financial crisis to be identified and early interventions made to support the families. The example provided during discussion was the existence of school meal debt.</p>
<p>4. To inform this work, links should be drawn with work being done by the Local Government Digital Office and Scotland Excel in partnership with South Lanarkshire Council – known as the STAMP Project - to understand all the data systems and data sets being used by all local authorities in Scotland. The relevance of this work to tackling child poverty should be made clear and opportunities for this group to contribute to support the work identified.</p>
<p>5. IS and national Child Poverty Peer Support Network should work with the Information Commissioner and SAVVI to compile examples of where data has been shared in an innovative way locally (or between national and local organisations) to contribute to a reduction in child poverty. Examples mentioned to date include Glasgow (data sharing with DWP to map child poverty), Angus (using electoral role data to maximise uptake of CTR single occupant discount) and Shetland (using GIRFEC as a justification for sharing household data to target support effectively through the Anchor Project).</p>
<p>6. Work with the Scottish Government, Scottish Office of Information Commissioner (ICO), SAVVI and Scottish local authorities to develop a training resource or toolkit on information sharing to prevent and alleviate child poverty, removing confusion around the legislation and showing what can</p>

be shared and how. This should draw on existing good practice examples.

7. The Scottish Government should explore the possibility of a Pathfinder with one remote or rural area interrogating how data and intelligence could be used to tackle child poverty more effectively. This might include the provision of additional resource to ensure the relevant local authority / community planning partnership has sufficient capacity to engage with the working group on data and innovation and seek to put identified approaches into practice.

8. The Scottish Government should consider how data sharing could be reflected in a refresh of the Guidance on Local Child Poverty Action Reports.

9. The short life Rural Child Poverty Network which will run throughout late 2022 and into 2023 should engage with Public Health Scotland to build on the Prioritise Child Poverty: A Data and Systems Approach, which could be improved to be more user friendly and intuitive and support local areas. This could include narrowing down sources to those considered most relevant and arranging data sources more clearly by their geography (e.g. grouping household level, postcode, locality, data-zone information together) and links to relevant policy areas.

10. If resources allow, the Improvement Service (IS) should take forward the development of a child poverty mapping tool based on HMRC/DWP Children in Low Income Household statistics and SEEMIS data on uptake of local educational benefits (in the first instance) and develop costed proposals for a range of different functionalities. This would enable all 32 local authorities to see a physical representation of child poverty in their local area at data zone level. Inclusion of SEEMIS data would ensure the resource was more up to date than the current HBAI mapping tool.

11. The IS should facilitate a short life working group to inform the development of this resource.

Understanding and Acting upon the cost of living in remote and rural locations

12. The Scottish Government should support annual research into the Minimum Income Standard in remote and rural areas. As well as contributing to a more comprehensive understanding of child poverty in remote and rural areas such an approach could also inform remote and rural policy more generally, including the development of Island Communities Impact Assessments (ICIAs) etc. In commissioning such research the Scottish Government would need to ensure sample sizes are large enough to reflect variations across different Scottish Government Urban Rural Classifications and household types (potentially including priority households.)

13. The Scottish Government should give consideration to how technology and artificial intelligence might support a more accurate and up to date understanding of how the cost of living varies – both over time and across different geographical locations. Applications/‘apps’ such as Trolley use real time information to compare the cost of a basket of goods in supermarkets across the country. Taking a similar approach – potentially including real time information on the cost of housing, energy and transport in rural settings- would help ensure policy making is informed by a comprehensive understanding of the cost of living.

14. Consideration should be given to funding access to CACI for public sector bodies in Scotland. CACI can provide an insight into ongoing and future increases in the cost of living, transactional data about household spending and provide insights on the likely impact of cost of living increases on financial behaviours across different geographies and ACORN household types. Further discussions with CACI might provide some insight on the specific advantages this could bring in the remote/rural context.

In addition to developing a clearer understanding of the additional cost of living in remote and rural areas, national and local government should embed practices which ensure these differences are taken

into account in policy development and service delivery.
15. The Scottish Government and COSLA should consider the introduction of a remote/rural/island premium for devolved family benefits (such as Scottish Child Payment and Child Disability Payment) and locally delivered benefits (such as School Clothing Grant and Educational Maintenance Allowance.)
16. The public and third sector in Scotland should engage with private sector employers around the adequacy of pay in remote rural areas and explore the feasibility of something akin to a Campaign for Remote Island Weighting to ensure pay is adequate to allow for an acceptable standard of living amongst employees in remote and rural areas.
17. Consideration should be given by both the Scottish Government and COSLA as to how effectively the cost of living is taken into account in relation to the allocation of funding intended to reduce or alleviate child poverty. This might include routinely taking account of child poverty rates adjusted to reflect the cost of living. The existence of such a measure was put forward in a recent Scottish Government research paper which concluded that, <i>“to better understand the impact of the cost of living on rural poverty, it may be useful to conduct further research into the feasibility of applying a rural cost-of-living adjustment to the poverty threshold (currently 60% of the UK median income). Such an adjustment may present a more accurate picture of rural poverty”</i> . ⁱ
Lived Experience
18. If resources allow, the Northern Alliance and Poverty Alliance should work in partnership to compile examples of engagement in remote and rural settings. This would involve working with local child poverty leads and analysing Year 3 and 4 LCPARs to draw out examples of current activity to engage, the reach/scale of engagement, the influence/impact that engagement has had to date, the cost of engagement and the extent to which it is valued and engaged by local decisions makers.
19. Local and national government and the third sector should develop closer links with academia to fill current gaps in engagement with those with lived experience of child poverty in remote and rural settings. Gaps identified through this project include: <ul style="list-style-type: none"> • The experience of households in which someone is disabled in remote / rural areas. • The experience on BME households in remote and rural areas. Often these populations are statistically insignificant at local authority level meaning engagement with those with lived experience is of particular importance.
20. In addition to developing ‘stand alone’ projects or programmes of engagement around child poverty, local authorities and their community planning partners should consider how existing information and processes might be used to better inform planning and decision making. Examples of this might include:
a. Local and national government, the third sector and academia should work together in one local authority area to “mine” the testimonies of lived experience that exist within local authority records, files and data systems. This might involve using anonymised records from social work, education, the Scottish Welfare Fund, housing support, welfare rights teams etc. – to gain an insight into the pressures experienced by those on low incomes in remote and rural areas who may not have the time, inclination or ability to actively engage with local authorities directly.
b. Refreshing local complaints systems to ensure complaints are used to inform future policy design and decision making in relation to child poverty. This should include providing support for those making complaints and ensuring they are given the opportunity to continue to

engage and have an oversight role in relation to any changes that have been made as a result of their complaint.

c. Local government, the Scottish Government and Audit Scotland – for example - should ensure that local government is fulfilling existing duties to engage with its citizens and communities in relation to both Community Planning, the Community Empowerment Act and in meeting Best Value Requirements. The statutory Best Value Guidance, for instance, states that “*A local authority which secures Best Value will be able to demonstrate responsiveness to the needs of its communities, citizens, customers, employees and other stakeholders, so that plans, priorities, and actions are informed by an understanding of those needs an ongoing dialogue with other public sector partners and the local business, voluntary and community sectors consultation arrangements which are open, fair and inclusive.*”

ANNEX III

Notes from SLWG Discussions

Data Sharing

How to address barriers in relation to organisational sharing of population and personal data, building on the progress made in overcoming such barriers during Covid

Issues

- **Landscape Complexity:** We need to understand and recognise the complexity of landscape where organisations are subject to different rules and legislation.
- **Technical:** There are a number of different systems and platforms operating in terms of data sharing (across 32 councils and within other organisations). Third Sector organisations often don't have secure email addresses (although there is work going on via pilots to address this, e.g. exploration of the use of NHS email addresses).
- **Behaviour and Culture:** It is not only system/technical issues, but also an issue of understanding, behaviour and culture, particularly in relation to our approach to legalities. For example, within LG, there are 32 different legal teams and they often take a cautious approach to risk which creates a barrier to overcome. There is an opportunity to get in early on this and educate those who are taking the legal decisions in relation to how this works, why this works and what the legality is in relation to what you are allowed to do. There is also a behavioural element for the wider workforce in terms of whose role it is to share data, and how we shift current thinking to ensure every opportunity counts.
- **Once for Scotland Framework:** there is no targeted 'once for Scotland framework' with a focus on families who are most vulnerable to drive data sharing locally and nationally.

Current work to address data sharing issues

- It is important to ground these in specific examples where we know there are issues, and to explore potential learning in relation to work underway to try and address these. For example, in relation to Child Poverty, we know there are difficulties in data sharing between Social Security, HMRC & LAs. Better sharing of data would enable us to more effectively target support to those families who need it. There is work underway to understand the legalities involved, and to develop a legal gateway for data sharing. This will involve undertaking data protection assessments, and developing business cases and formal proposals for what the data is needed for. There may be valuable learning and resources emerging from this work (and other similar work) which could have wider applicability. There is a clear role for us to flesh out more detail around this.

Learning from Covid – Overcoming the complexity in the landscape

- We can be sharing data, we are just not doing it. During Covid, we did take a step to cross boundaries and work around the complexity to allow us to understand risk. We shared data by asking 'what information do you want?', and then we created it, and stuck a badge on it to convey the data was indicative. This approach helped to cut across the complexity and showed us that there are ways to navigate this, as long as we don't let perfect be the enemy of the good or the helpful.
- If we focus in on 'what information do we want' this will help to drive change. There is a role for us to map what data we want in a specific area (e.g. Child Poverty) and then do a 'deep dive' analysis of where the difficulties/barriers are in relation to sharing this. We should keep this targeted on one area such as Child Poverty, given everyone will have a Child Poverty Action Plan, and this will enable

us to get a good idea of what data is needed, and provides a quick touch point re what's getting in the way and when.

Funding issues

How to address the challenges partners face in relation to funding cycles, ringfencing and reporting to different funders with different timescales

- **Complexity of reporting landscape:** Addressing the current funding complexity requires working across different spheres of Government, across different countries. While half of the funding is available from SG, half is accessed through the UK government (i.e. Shared Prosperity Fund)..
- **Funding Cycles and Timescales:** Excessively short-term funding, rigid sticking to financial year ends, and excessively restrictive criteria,. There is a need to commit to longer term funding. 3 year funding cycles do not provide sufficient security, and previous longer term funding models from the European Social Fund for example should be adopted. Progress is also needed to address the sequencing of funds available e.g. Investing Community Fund and Shared Prosperity Fund.
- **Funding Cycles: Ring-fencing:** Progress is needed to reduce the level of funding which is ring-fenced and to give local areas greater flexibility and choice in relation to how to target this resource to meet areas of greatest vulnerability. Currently local partnerships face significant challenges and expend valuable resource accessing and tying together a large number of often relatively small pots of money. A shift away from this approach is critical to support local empowerment and decision making. It may be helpful to strengthen the evidence base in relation to the impacts of ringfencing, and identify tangible examples to illustrate where the impact has not been helpful.
- However, a specific ring-fenced fund is often a way for the third sector to access statutory funding. For example, a number of third sector organisations in Mid received funding for short-term employability projects because the Council had to spend funding in a tight timescale and on a specific issue. If the funding had been given to the LA to spend as it thought fit, there is nothing to say they would have brought the third sector in. If we are to move on from ring-fenced funding, it needs to be open and transparent, and statutory funding needs to be available at a local level to third sector organisations addressing poverty.
- **Lack of strategic oversight:** There is no strategic oversight in relation to the way money is currently spent on poverty related work and whether it is making a difference. It was suggested that colleagues in SG may have undertaken a mapping on the funding spent on poverty related work, and it was agreed it would be helpful to investigate this in the first instance, to avoid any potential duplication.
- **Evidence of impact:** Greater commitment is needed across funding streams to fund those areas where there is evidence of impact, rather than the 'nice to do'. This requires improvement in our collective approach to evidencing impact, including structures around performance management/outcome setting/ and measurement to understand how we commit the money in ways that ensure it goes to best effect
- **How the funding is used:** Greater focus is needed on what we do with the funding and how we respond.

Reporting & Governance

How to reduce the complexity of recording, reporting, and inspection frameworks which create both a burden and lack of clarity in relation to shared outcomes and priorities

- **Cluttered landscape:** Partners are facing a multiplicity of complex macro-economic issues and emerging policy agendas at the same time currently, and this is reflected in the increasingly cluttered landscape in relation to recording, reporting and inspection which has grown up around this. For example: LOIPS; Locality Plans; Children's Service Plans; Child Poverty Action Plans; The Promise – all have different mechanisms and different reporting requirements which risk overlap and duplication. This creates challenges both in terms of finite capacity of partners, but also makes it harder to work together towards shared outcomes and priorities. It was agreed that to better understand and to evidence the specific issues, there would be value in the group mapping the policy reporting frameworks which currently exist in relation to Financial Security for Low Income Households and identify which are the ones causing blockages.
- **Previous work to 'declutter the landscape':** There should be opportunities to learn from and build on previous work undertaken by PSRB and CPIB (under title of OEPB) to map the cluttered performance reporting landscape and produce recommendations for improvement in relation to performance management arrangements. It was agreed it would be helpful to look at these recommendations in the context of financial security and to modernise and update the recommendations in light of the challenges in this area. There was agreement of the need to guard against the 'one size fits all' approach, maintaining a focus on relevance, and ensuring decluttering doesn't lead to approaches becoming so generalised they are meaningless.

[CPIB Performance Management Good Practice Principles](#)

[CPIB Paper on Performance Management Recommendations](#) – including more detail such as recommendations for Scottish Government

[Findings from previous PSRB and OEPB work to declutter the landscape](#)

- **Understanding Impact:** While we have not 'solved' poverty, it is vital that recording and reporting activity helps us understand if and where we have added value, for example in terms of preventative impact. There may be value in considering a shared outcome framework for anti-poverty work, aligned to Shared Prosperity fund, which would tell us if we are making a difference in the world of poverty. There may be potential learning from an Evaluation Scotland project which identified outcomes and indicators that worked for older people's services and gave people a suite to choose from. <https://evaluationsupportscotland.org.uk/resources/sit-indicator-bank-for-third-sector-outcomes-for-older-people/>
- **Skills/capacity:** Focus is needed to address skills and capacity issues for partners and partnerships to support their approach to recording, reporting, and managing performance. For example, training on developing and using outcomes/measures and exploring areas there may be value in developing a central approach, rather than individual approaches across 32 areas

Barriers we focussed on	The solutions we have opted for
<p>Data sharing</p> <p>How to address barriers in relation to organisational sharing of population and personal data, building on progress made in overcoming such barriers during Covid</p>	<p>Agreed Actions:</p> <ul style="list-style-type: none"> • Group members to map <u>what data we want</u> in relation to Child Poverty, and provide detail on where the barriers exist in relation to the sharing of this data between partners. • Group members to share details of where there is work already happening to facilitate data sharing and where there may be opportunities for wider applicability, e.g. <p>What work is happening currently to facilitate data sharing in the area of financial security?</p> <p>What challenges is this work trying to address? (e.g. Legalities; Behavioural; Technical; etc..)</p> <p>What methods/approaches/templates are being deployed?</p> <p>Is there an opportunity to draw upon this to develop prototypes/wider learning?</p> <p>Are there gaps where focussed work to address the barriers is needed, and not currently happening?</p>
<p>Funding barriers</p> <p>How to address the challenges partners face in relation to funding cycles, ringfencing and reporting to different funders with different timescales</p>	<p>Agreed Actions:</p> <ul style="list-style-type: none"> • COSLA to investigate whether SG has undertaken any mapping to understand funding spent on poverty related work. • Group members to identify any examples in relation to the area of financial security where ring fencing has created challenges/had a negative impact
<p>Reporting and governance</p> <p>How to reduce the complexity of recording, reporting, and inspection frameworks which create both a burden and lack of clarity in relation to shared outcomes and priorities</p>	<p>Agreed Actions:</p> <ul style="list-style-type: none"> • Group members to map the national policy reporting frameworks which currently exist in relation to Financial Security in general and/or child poverty (as an example of financial security) and identify which are the ones causing blockages • Group members to revisit and update elements from previous Performance Management Recommendations in the context of Financial Security for Low Income Households

Community Planning Partnerships Feedback Session - Covid Recovery Programme



improvement **service**

*The 'go to'
organisation for
Local Government
improvement in
Scotland*

Welcome and Introductions

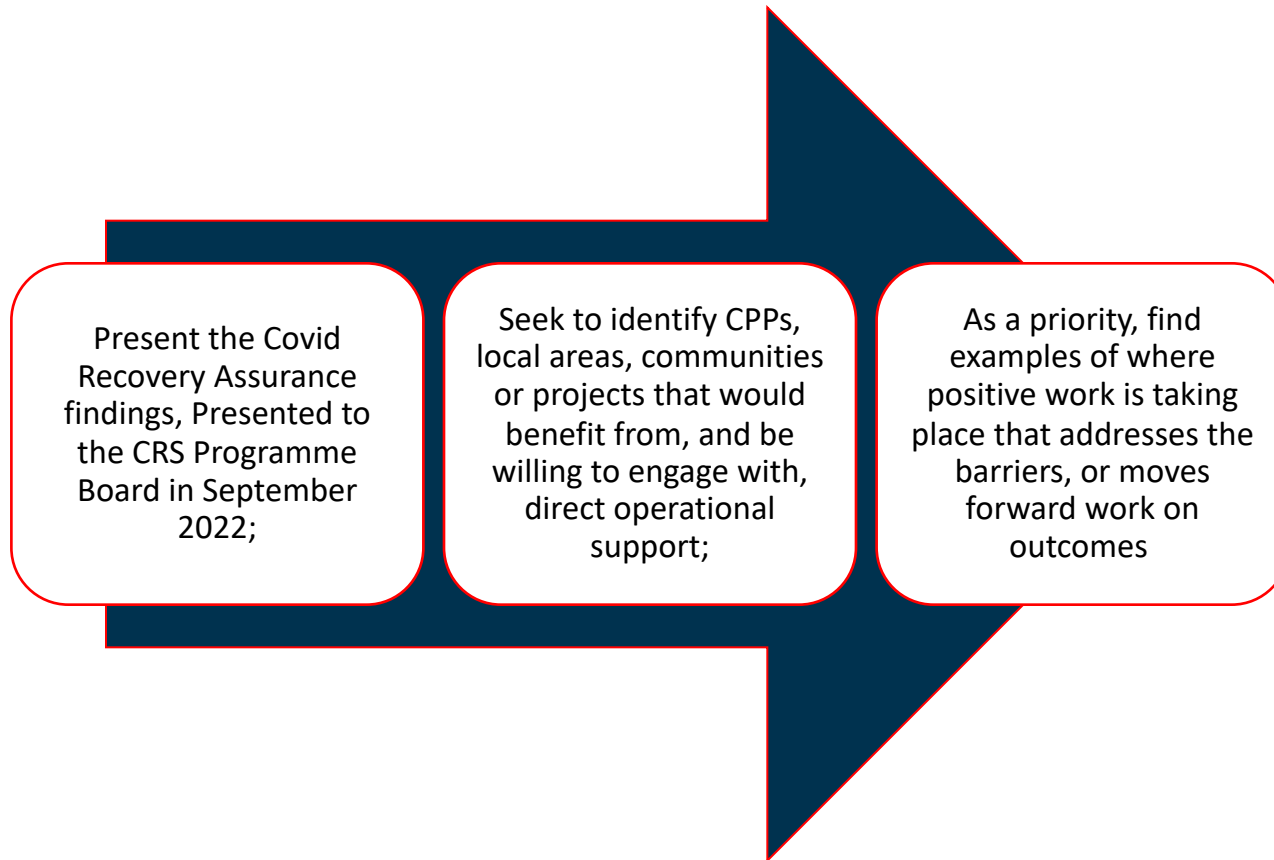
Recovery and Delivery Programme

- Adam Hall, Programme Manager
- Emma Gartshore, Engagement Manager

Housekeeping

- Please keep your mic on mute unless you are speaking
- Use the 'virtual hand' , or chat function if you would like to ask a question
- We are recording this session
- A resource pack will be circulated shortly afterwards

Scope



Assurance Findings – Background

CPP ENGAGEMENT

Through a series of workshops held during June and July 2022, we met with **20 Community Planning Partnerships** to understand;

- **The approaches that were being taken with respect to Covid Recovery;**
- **The impact these had to date and the barriers that were being faced locally, and;**
- **To outline the context of Covid Recovery Strategy**

During these workshops with CPPs, we gathered **over 650 responses** with four key themes evident;

- **National and Local Alignment**
- **Focus of Local Action**
- **Person- Centred Approaches**
- **Barriers and Challenges**

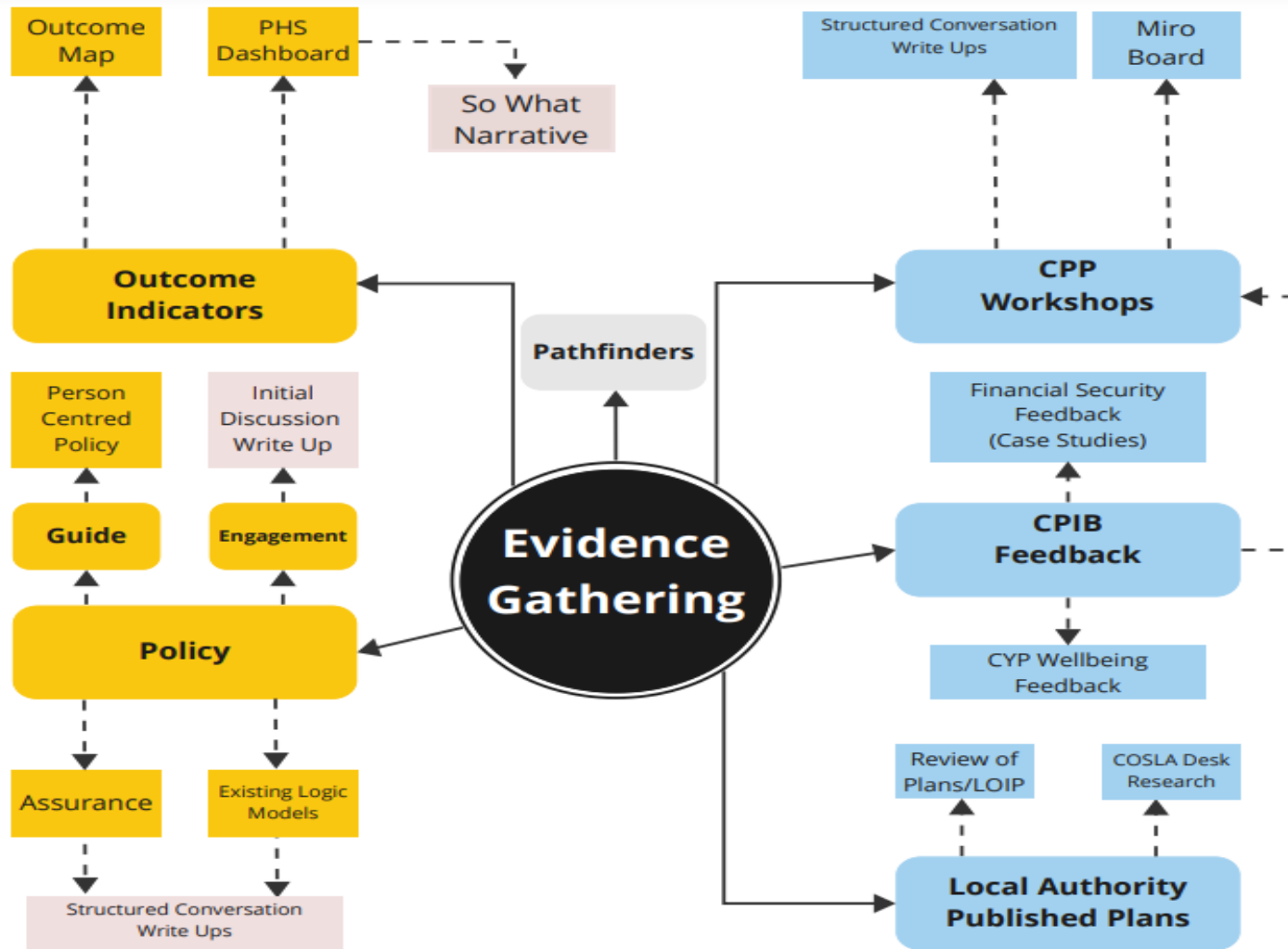
RESPONSE

EVIDENCE

Evidence was also collected from;

- **Structured interviews with officials in 13 Scottish Government priority policy areas.**
- **Information and case studies emerging from recovery strategies and strategic plans from all 32 local authority areas.**
- **The CPIB in relation to the three main Covid Recovery outcomes.**
- **Information and case studies exhibited in 32 local authority LOIPs, council plans, recovery or community plans.**
- **Information on the progress of delivery of actions as collated by Scottish Government internal review process**

Assurance Findings – Sources of Evidence



Assurance Findings – Overview

The findings are supported by evidence from three areas;



Delivery of Actions

How the delivery of actions is observed to be progressing nationally and locally.

Focus on Outcomes and Target Groups

The extent to which activity at a national and local level is focussed on addressing the outcomes and targets groups.

Characteristics of Policy and Public Service Design

What are the characteristics of good person-centred policy design and delivery or service redesign in the context of Covid Recovery, including identifying some existing barriers.

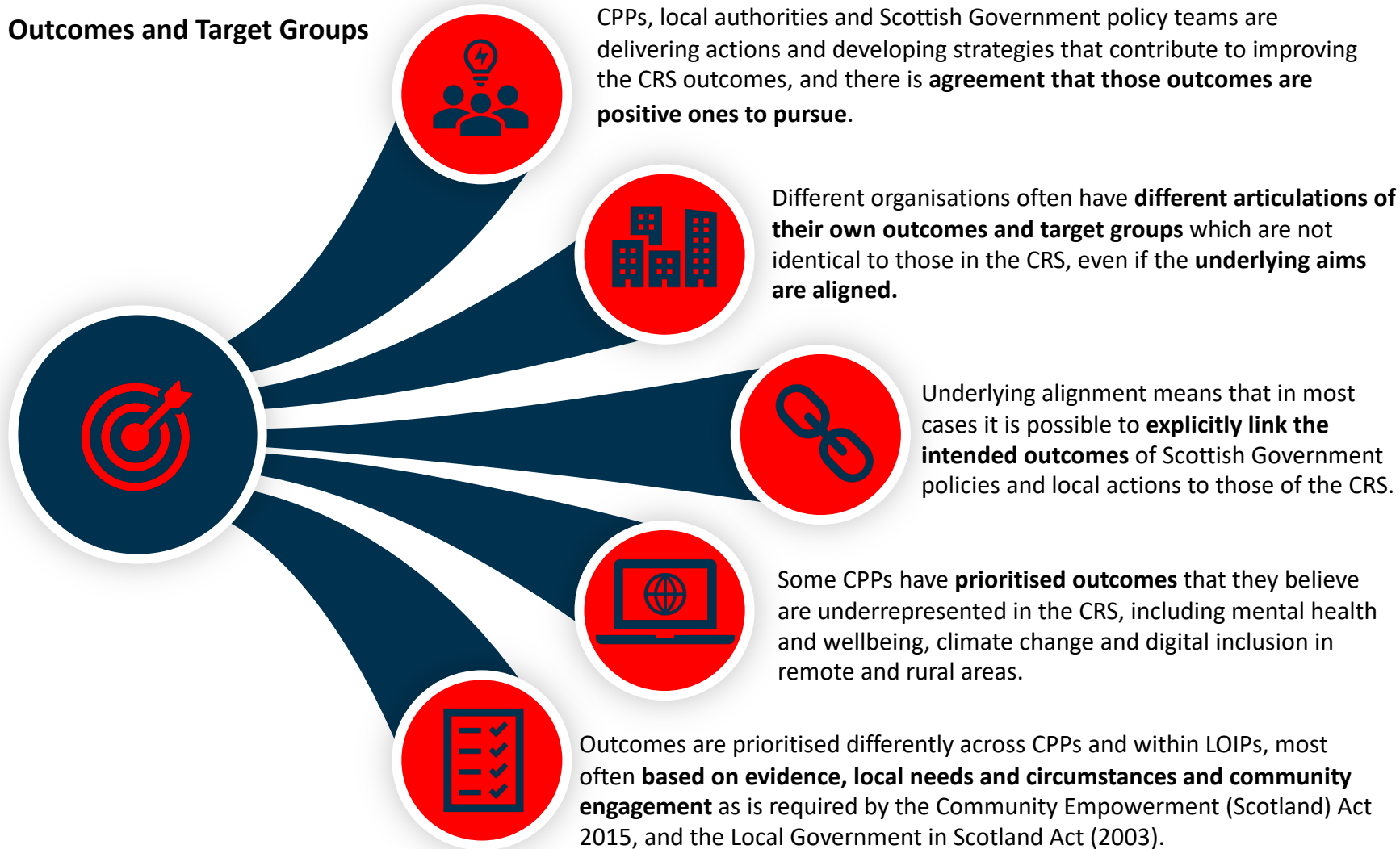
Assurance Findings – What did the evidence tell us?

Delivery of Actions

In addition to actions identified nationally, numerous examples were found of activities that are being undertaken locally that contribute to the CRS outcomes. Additionally, actions being taken on alternative outcomes, such as the move towards Net Zero and improving digital inclusion, which are not overt in the CRS however were found to be local priorities.

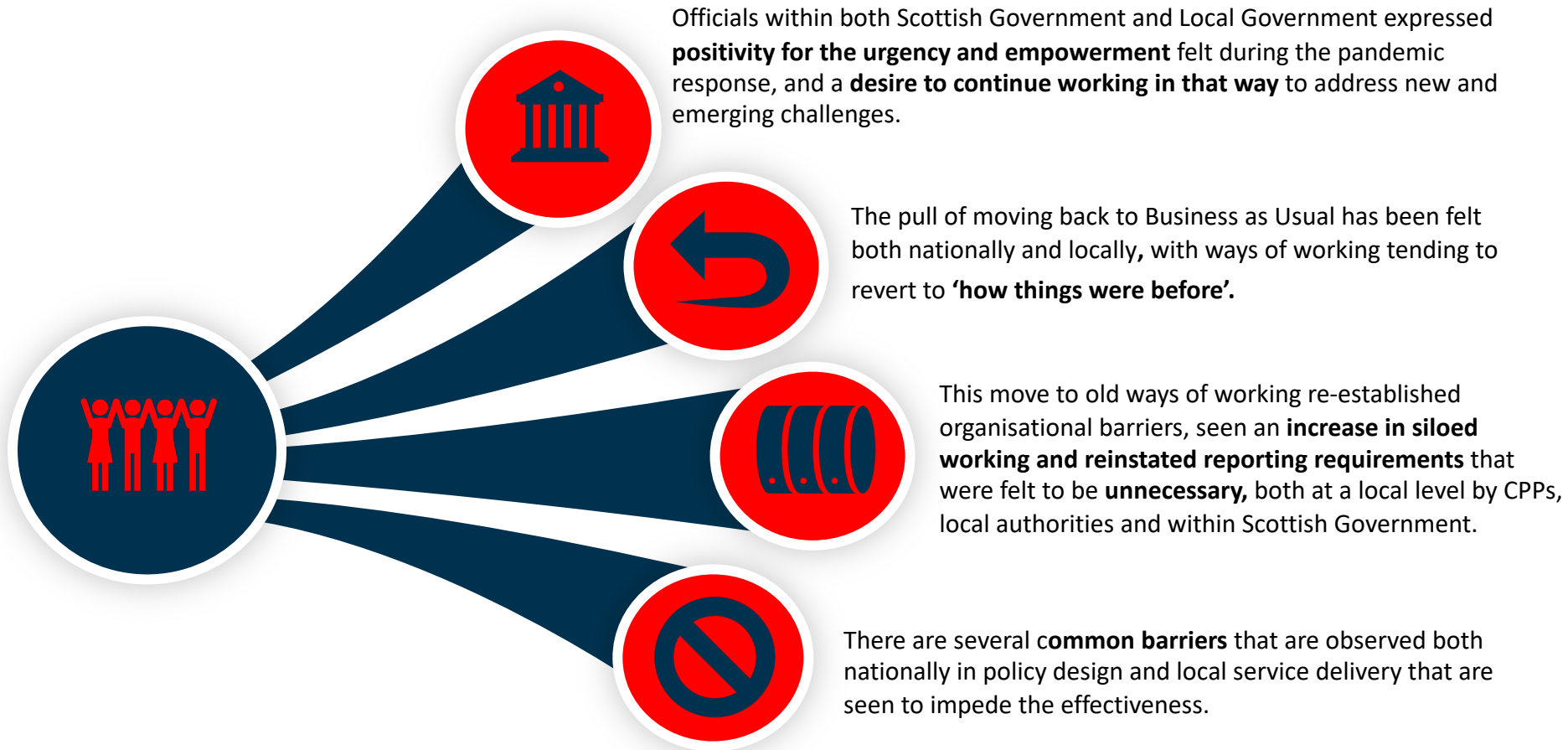
Assurance Findings – What did the evidence tell us?

Impact on Outcomes and Target Groups



Assurance Findings – What did the evidence tell us?

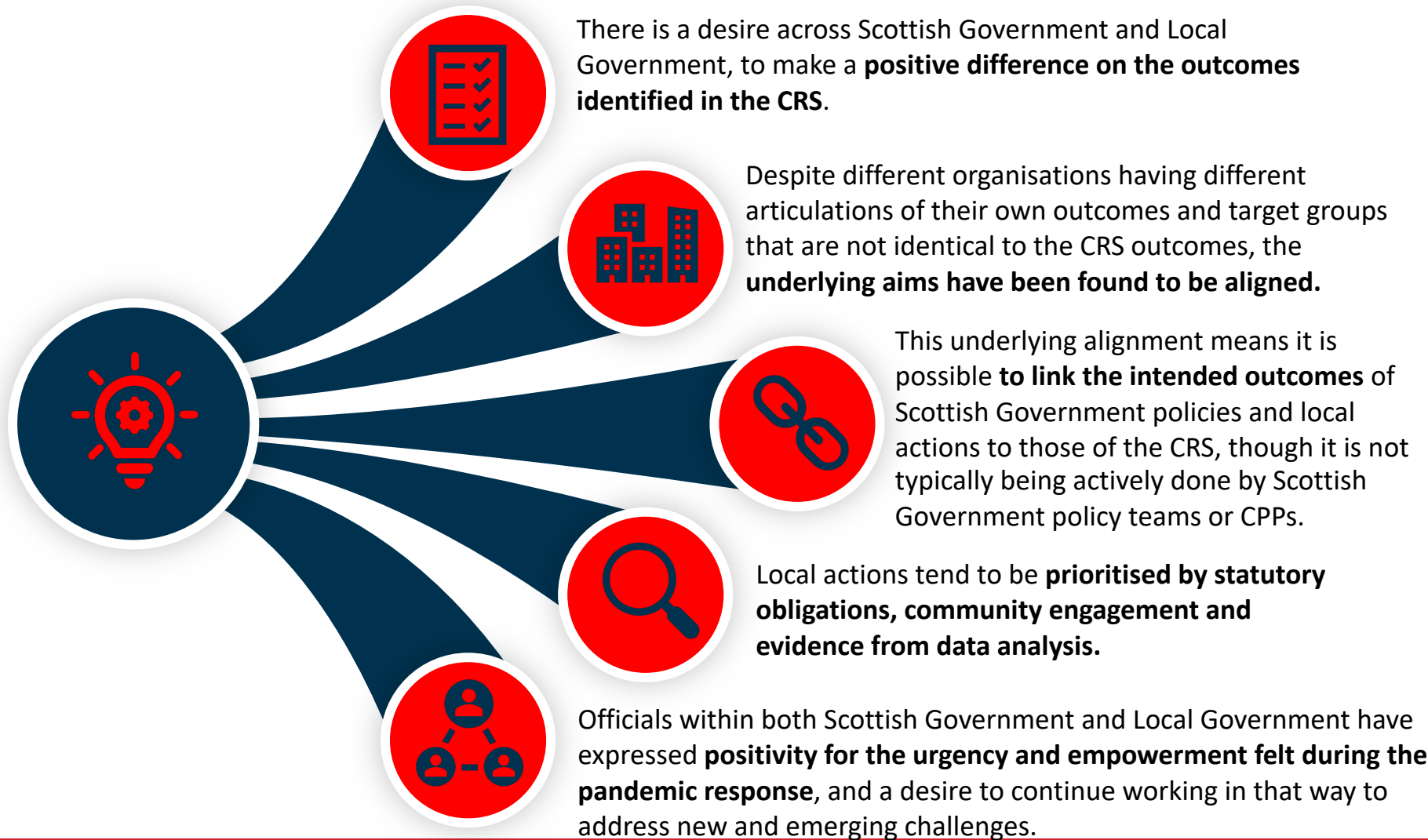
Characteristics of Policy and Public Service Design



Assurance Findings – What did the evidence tell us?



Assurance Findings – Conclusion



Next Steps

Identify any CPPs, local areas, communities or projects that would benefit and be willing to engage with direct operational support.

As a priority, find examples of where positive work is taking place that addresses the barriers, or moves forward work on outcomes.

We will look to meet in person with as many Community Planning Managers as possible to create and build relationships with the aim of identifying Focus Communities.



Susan Webb, Director of Public Health

World Class Public Health System

Exploration

- Over 70 leaders interviewed May-Dec 21
 - Shared outcomes – lack of shared narrative reducing impact
 - Priorities of Priorities – cluttered agenda
 - Community at the centre – shared ambition
 - Dissatisfaction providing energy for change – population health at the centre of service delivery
 - Systems in which people collaborate and learn together
- Sense making – back out to original participants to check themes

Themes

- Requirement for coherent strategic leadership
- Systems Thinking
- Knowledge into action & action into knowledge
- Engagement for empowerment
- Outcomes

Creating Solutions

- *Coherent strategic leadership for population health – who needs to be involved and where do they come together?*
 - **Rationalisation of groups – more to be done?**
 - **Briefings on priorities to inform decision making**
 - **Weekly huddles to join the dots**
- *Community Planning Partnerships are population health partnerships what needs to change at local, regional and national level to make them more effective?*
 - **Localised Working Programme**
 - **SDPH to join CPIB potential to facilitate two way exchange**
- *Knowledge into action – Same deep dives undertaken for PHiSSRG and CPIB in last 6 months – more connects still to be made?*
 - **Public Health Action Teams (e.g. DRD, Mental Health, Child Health, proactive & preventive health care) established – opportunity to support.**
- **Continuous Improvement driven by learning and adaptation**
 - **Human Systems –exploring with HIS**

Observations

- The themes developed by the initial work align to those highlighted by the CPIB
- Initial actions taken by SDPH group outlined
- More to be done and welcome the thoughts of CPIB members

**A World Class Public Health
System for Scotland (WCPHS)
Executive summary**

**Jennifer Champion on behalf of the
Scottish Directors of Public Health**

Publication date: October 2022

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Foreword

Protecting Scotland, Renewing Scotland: The Government's Programme for Scotland 2020-2021 set the challenge of embedding a world class public health system throughout the country. The Directors of Public Health were asked to lead on this work.

Covid -19 has both exposed and exacerbated health inequalities in Scotland. In response, the Scottish Government has committed to a cross government approach to further developing policies to support high-risk groups. Rebuilding Scotland after Covid -19 will require action on multiple fronts including health and social care services, poverty, inequality, early years, mental health, the economy and the environment. To support rebuilding Scotland, we propose action to deliver a World Class Public Health System.

The 10-year vision for population health and wellbeing

To develop a public health system that produces outstanding population health outcomes so that *everyone* is as healthy as they can be, not only having life but having it to the full.

The process

To create clarity on what would constitute a world class public health system, an extensive programme of consultation was undertaken with over 70 senior leaders, opinion formers and stakeholders across public health, health and social care, local authority, third sector and academia between May and December 2021.

Agents for change have been gathered in this process which has stimulated thoughts, enabled their expression and facilitated collaboration across the Public Health System.

The emerging themes from this consultation, provide constructive challenge and reflect the ideas, experiences and views of senior leaders in Scotland. The consensus for change and what that change should be is remarkable; there is a strong collective vision for a World Class Public Health System in Scotland.

The way forward October 2022

Key themes that are **pertinent to all organisations** in the Public Health system and important for developing the whole system are summarised below. Fuller discussions around each of these are available in chapters of the full report.

The vision for a WCPHS is expansive, however 5 key building blocks were identified, and engagement sessions undertaken with organisations in the national Public Health system to co-produce a way forward. Themes particular to an individual organisation from the consultation process were shared with each organisation separately.

Fuller development of a WCPHS will be by forwarding the other actions proposed in the full report and appended here.

The Scottish Government has committed to the development of a WCPHS and now is the window of opportunity to do so. Bold, imaginative, and aspirational leadership from all in the Public Health system should be harnessed to realise this collective vision.

Dr Jennifer Champion
on behalf of the Scottish Directors of Public Health Group.

A World Class Public Health System for Scotland (WCPHS)

Executive Summary

1. The Public Health system

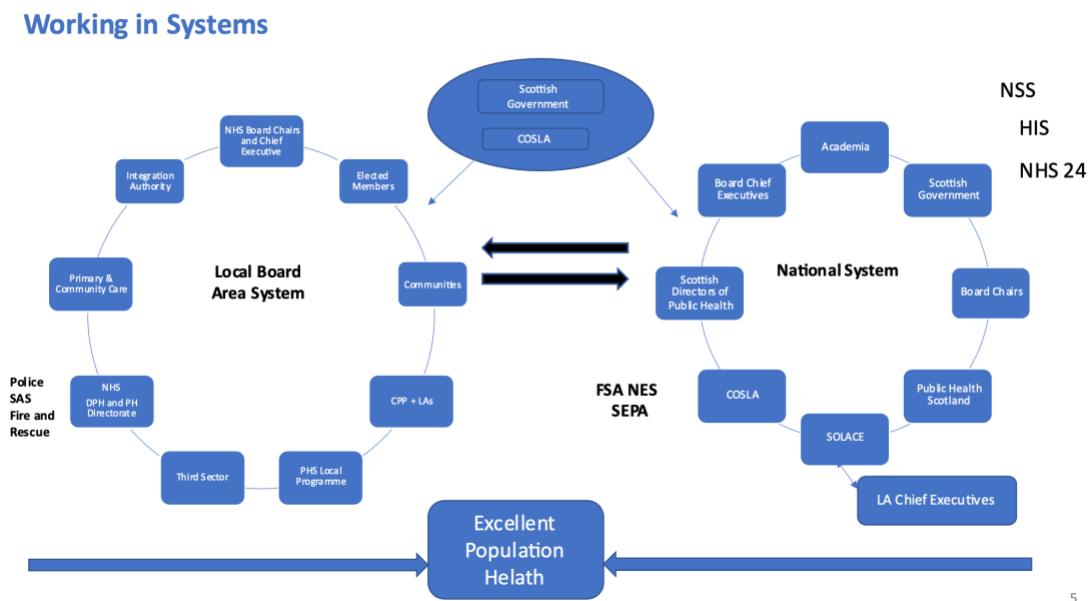
Integrated population health systems are the basis on which a WCPHS will be built. The major stakeholders within **national** (Public Health Scotland (PHS), Scottish Government, The Scottish Directors of Public Health Group (DsPH), Confederation of Scottish Local Authorities (COSLA), Society of Local Authority Chief Executive, National Health service Chief Executives (SOLACE), academia) and **local** (National Health Service(NHS), Directors of Public Health, Integration Authority Chief Officers (Cos), Local Authorities (LAs), Third sector, Public Health Scotland) population health systems are increasingly seeing themselves as part of these systems and seeking to develop working within a whole system approach.

Discussion about the “Fifth Wave” of public health focuses around societies’ increased understanding of health, but it is very evident that there is also a shift in the thinking of public service professionals about their role in population health. Not only are they now seeing clearly that they have an important role but are also seeking to work differently with others to that end. This is an exciting time for public health.

The pandemic has been a tremendous burden, but a positive legacy is the understanding gained of the incredible effectiveness of working together, fluidly across organisational boundaries and the importance of a healthy population in withstanding such challenges.

There is much well-intentioned population health activity across Scotland but coherence across the system is much sought after. Developing a Whole Systems Approach was stated as part of the Reform process and now there is enthusiasm for it.

‘Team Public Health’ need to know each other, and the roles and responsibilities of every major stakeholder in national and local Public Health systems must be defined and understood and the interface between organisations made clear. Multi-organisational collaborative leadership development should occur across the Public Health system; such a unified approach would support whole system working.



2. National and local leadership

2.1. The Public Health in Scotland (PHIS) -Strategic Reference Board and a multiagency Strategic Delivery Board

A need for national Public Health leadership was clearly expressed and subsequent to an interim report in August - *the Public Health in Scotland – Strategic Reference Board* chaired by the Chief Medical Officer was brought together. A multi-disciplinary strategy Board is also sought. These boards would be accountable to the Minister for Public Health.

Representatives of the main stakeholder organisations (PHS, Directors of Public Health, COSLA, Local Authorities, NHS Chief Executives, Chief Officers, Third

Sector, SOLACE, and Scottish Government) in the Public Health System have expressed interest in contributing to a *Multi-disciplinary Strategic Delivery Board*. Their presence is key for co-production of population health strategy and would also ensure that population health is a central thread through all organisations in the Public Health System. All Public service organisations in the system are seeking a population health approach to their work.

2.2. Directors of Public Health

All organisations in the Public Health System recognise that local and national Public Health leadership is needed and that the Directors of Public Health are key in this. Job descriptions should facilitate this contribution. As Executive Directors in the NHS they must work to maximise regional and national objectives. The Directors of Public Health with the support of the NHS Board Chief Executives and the Scottish Government will work to clarify and standardise the Director of Public Health role to include local NHS Board Executive Director functions alongside local team leadership, local health improvement leadership and national public health leadership. This work will consider the support for the Directors of Public Health including training, deputy roles and team resourcing.

2.3. Public Health Scotland

The creation of Public Health Scotland has been welcomed by all in the Public Health System. It is a key organisation for developing collaborative Public Health leadership nationally. It is also acknowledged that the timing for the start of the organisation at the start of the pandemic was challenging but its health protection response in the pandemic has been exceptional.

Public Health Scotland is valued for its ability to provide evidence for best practice and there is enthusiasm to develop its data and information functions. An important future role may be the coordination of learning on the development of local Public Health systems.

3. Developing a culture that enables a WCPHS

Many interviewees stated that we must develop a values-based system that enables a WCPHS. The culture that many leaders in the system grew up in is not the culture that will lead Scotland to have an exemplary Public Health System. There is a deep desire for values that leave behind self-focussed, organisation-focussed behaviour to thinking about what we can achieve together as a system. The values need to be developed by those in the system and then embedded in its processes and procedures and in values-based recruitment, annual objectives and awards for exemplary values-based behaviour.

1. **Population health leadership needs to be practiced by all** in the system to effect change and influence those around them to improve population health.
2. **Across Scotland, there is a culture of inequality between Local Authorities and other organisations in the local population health system** which although generally unspoken of, was frequently mentioned at interview. For example, National political focus tends to lie with the NHS, not the Local Authorities, and the public tend not to recognise and value the role of the Local Authorities whereas the NHS is often celebrated. There is a widely held view that the NHS enjoys better funding and annual uplifts whereas local government income through taxation has been fixed by legislation. Inequality between local government and other organisations in the local system, notably the NHS, is unhelpful for a Whole System Approach and redress for this imbalance is sought. Population health systems must be a genuine 'partnership of equals' between NHS and non-NHS bodies in order to improve population health – with local authorities and the NHS taking decisions together. No single organisation can transform the public's health – it requires all.
3. **Encouraging creativity**, a culture where innovation in all areas - followed by evaluation of practice - is encouraged. System leaders could map decisions with theories of change to make strategic choices explicit.

4. Population health outcomes

There is an agreement that outcomes appropriate to world class population health should be the focus of the Public Health System; the outcomes are what pulls the system together as capacities across it are combined to achieve a shared goal. A suite of outcomes, with datasets is sought on the following:

1. **Population health outcomes and indicators that can be owned by each health board.**
2. **Outcome measures unique to local areas.** There are also outcomes that need to be determined locally, appropriate to the local population specific requirements.
3. **Outcome measures in Health and Social Care.** There is an appreciation that short-term indicators will need to be developed as proxy markers that the actions undertaken are having the intended consequences leading to longer term change.
4. **Outcomes against the named Public Health Priorities.**

5. Performance management of population health

Development of Performance Management of population health by the Scottish Government would ensure busy Executives are able to prioritise it alongside immediate service delivery. There are understood to be benefits in optimising performance management across the Public Health System.

To ensure action, accountability for all outcomes should be clear. Outcomes could be subject to a new method of Performance Management by the Scottish Government, relatable to the National Performance Framework (see below) and have a focus on inequalities.

5.1. The National Performance Framework

There is much support for the principle of the National Performance Framework (NPF) and its cross-party support. There is however a desire to seek greater accountability for its outcomes and to address the systemic barriers that frustrate its aims.

5.2. Quality assurance of the system and practice

All organisations in the Public Health System seek to adhere to the principles of a WCPHS (appendix 1) as well as seeking regular feedback from each other

6. Public Health Priority areas for development

6.1. Health Protection

Health Protection is seen an essential component of a WCPHS that needs further investment.

6.2. Healthcare public health

There is a need to significantly increase capacity in Healthcare Public Health to support the NHS and National Care Service (NCS) to have a population health approach as central to their services. Public Health specialists should increase engagement with Planning nationally and locally.

6.3. Health in all policies

All policies made by the Scottish Government have implications for the health of the population. As such, the Government policies are part of the Public Health System and should ideally support the endeavours of the rest of the system by considering Population health impacts in all policies.

6.4. Public Health Priorities

Public Health Priorities (PHPs) were developed as part of the reform process. Assessing the health of a given population is the starting point for priority setting, resource allocation, design and implementation of interventions and programme evaluation.

As there can only be a small number of key priorities, there must be commitment to frequently review the priorities considering the latest population health assessments.

6.4.1. Public Health Action Teams (PHAcTs)

There is much well-intentioned activity around the present PHPs, but there is a lack of coherence across that activity. A structure to enable effective delivery around priorities was already formed, in the form of Special Interest groups, but it was felt that the groups could be more delivery focused and bring greater coherence across the system. For each PHP, a nationally (PHS/DPH) coordinated Public Health Action Team (PHAcT) should be convened with local Public Health systems and key members of the Public Health national system in attendance. Each PHAcT should have common features, including working to priorities and outcomes with data sets agreed; all actions evaluated to enable the understanding and development of good practice; PHS local will facilitate with Public Health skills and data support; the PHAcT should be performance managed and accountable to the national leadership group.

PHAcTs were described in the interim report and are now in development.

6.5. Emergency priorities and the National Incident Management Team (NIMT) model

The NIMT model has been brought to the fore during Covid and has had widespread support and understanding. Trialling the NIMT approach in other Public Health emergencies was suggested in the interim report. Drug Related Deaths was announced as a Public Health emergency in August 2021, and work to trial the NIMT approach for drug deaths is now underway.

7. Areas for public health development within organisations

7.1. NHS

7.1.1. Population health embedded in the NHS

The Board Chief Executives and Board Chairs now agree that population health should be part of the core business of the NHS. This is potentially transformational. As well as providing treatment services, the role of the NHS in prevention of illness - and thereby lessening demand for services, - and in altering the social determinants of health and decreasing inequalities is clearly recognised. The NHS is now a major partner in the local Public Health System

7.1.2. All services to be assessed and monitored for inequalities

Moving forwards there is an aim for all clinical services to be assessed and monitored for inequalities in access and utilisation and targeted adaption of services/ outreach for certain groups considered. Co-production of services with people with lived experience of inequality is understood to be key.

7.1.3. All services should have a preventative assessment and action plan

A preventative assessment and action plan on every clinical service is also being put forward to embed the population health approach into healthcare.

7.1.4. Develop NHS role as an Anchor institution

The NHS is keen to develop its role as an Anchor institution. Using change theory to state the intended consequence of actions can help make decision-making explicit.

7.2. National Care Service

It was noted by many that the IRASC (Independent review of adult social care) report was very focussed on service delivery with little mention of public health or a population health approach.

Population health approaches must be embedded in a NCS from the start and this will require working at a national level as the NCS is formed and then developed further locally. The approaches suggested to ensure that the NHS becomes a part of the WCPHS should also be taken in the NCS so that the two organisations are in parallel and inter-linked in their population health approach.

Outcomes focussed, beyond health and social care outcomes to population health outcomes

7.3. Scottish Government

A focus on short term process should be balanced with a focus on what preventative and longer-term impact work is being undertaken. Political cross-party agreement on what a WCPHS is nationally and locally would facilitate its development.

Scottish Government finance - some financial policy changes would support the development of a WCPHS, e.g., spending on healthcare should be balanced against preventative spending; Scottish Government regulations of Public Asset spending could enable investing for the longer term.

7.4. Third Sector

There should be an increase in Third Sector collaboration both locally and nationally.

8. Developing a Local Public Health System and governance of local population health

Local partners in many board areas are starting to come together based on a shared ambition for population health. This is an exciting time and there is much creativity and openness to change; new structures and methods and ways of working are being explored. Discussions include structures of strategic and operational groups; priorities, unifying plans; accountability and performance management; clarifying where decisions are made, and where governance is placed. Developing functional local Public Health systems is of key importance and coordination of this work and sharing lessons learned and good practice between board areas is being called for.

One population health plan for a board area. Many consider that there should be one high level population health plan for a board area: not an NHS plan and separate high-level LA/CPP plans. This will require priority setting across the local system, working to cross cutting themes, a focus on outcomes, and clarity around accountability and governance. Of note, there should also be local plans addressing issues specific to local community areas.

8.1. Developing Community Planning Partnerships (CPPs)

It is generally agreed that CPPs should become the engine room of Public Health delivery in board areas. This would require review of their structure, function and support from local Public Health partners.

8.2. Integrated Joint Boards

Integrated Joint Boards (IJBs) need considerable Public Health support to fulfil their stated population health function, and this will increase with the development of an increased remit as part of a new National Care Service.

Many think that a Public Health specialist presence should be statutory on the IJB and that population health understanding in the Health and Social Care workforce

could be supported. The present performance management of Health and Social Care could be re-considered to support the population health agenda.

8.3. Communities

The community is understood as a crucial part of the local Public Health System and development and definition of its roles is enthusiastically sought.

There is much support for a campaign, led by PHS and DsPH to involve the public with population health and increase the population health literacy of Scotland. This would be cognisant of community engagement structures already in place through locality planning.

There is enthusiasm to develop a culture in Scotland where population health is in all educational curricula and careers inductions so that all can understand what part they play in the health of the population and how it could be developed.

8.4. Development of local public health teams

The Public Health team that supports the Director of Public Health's work at board level needs developed to increase support to DsPH to enable a WCPHS. The structure and function of these teams should be developed, and learning should be shared between DsPH. This is an area where the Faculty of Public Health may be involved.

8.5. Public Health Scotland

The Public Health Scotland localised working programme is being developed with the local Public Health System. This potentially includes assistance with strategic data plans and data support and flexible capacity for public health skills (e.g. providing evidence relevant to local situations; conducting needs assessments and evaluation of local initiatives collaboratively). PHS have a data analyst in all IJBs; CPPs would also value support with data collection, management, and analysis.

8.6. Local authorities

Local authorities are key organisations for affecting structural and social determinants of health and are essential to the national and local Public Health Systems. Adequate funding is required to enable public health functions and recruitment of a high calibre workforce. Improving relationships and working between different councils would support a whole system approach.

Combined funding from the Scottish Government for population health activities within a board area - a joint Local Authority and NHS budget - was suggested by several people and could enable more upstream work and facilitate joint decision making in the local system leading to joint accountability.

Environmental Health Officers represent place and environment and their position in the local Public Health system should be strengthened. EHO could have a statutory function to be on CPPs.

Local politicians should be well integrated into a local Public Health System to enable a Whole System Approach.

9. Public Health Workforce

9.1. Public Health Specialists and those with a specialist function

The difference between individuals with specialist training and those with a public health function was raised frequently. Both have key roles to play and it is important that the different skills and expertise of each are understood if the correct balance of skills is to be found across the Public Health system.

Capacity within the specialist workforce will need to increase to support local and national organisations and systems to achieve the voiced aspirations for population health. As well as increasing workforce numbers, optimisation of national, regional and local working is required.

9.2. Wider workforce

There is an aim that the generalist workforce understands how their work relates to population health, primary and secondary prevention and inequalities and how they can alter practice to its benefit. NHS Education Scotland (NES) and PHS are well placed to support workforce development across the whole Public Health system. The role of NES will be important to support consistency and a whole system workforce approach

9.3. Academic Public Health

There is much support for PHS to host a Public Health Academic Hub. This would bring coherence to Public Health academic endeavour to create evidence on actions to affect population health and policy.

The academic hub could lead a strategic review of research and, working with local Public Health directorates, could develop a Public Health research strategy for Scotland. The development of methodologies to assure the strength and validity of evidence for decision-making in Public Health is essential. Local directorates should be involved in research.

10. Data and intelligence

Data and intelligence should be at the heart of the public health approach.

Coherence in IT systems across Scotland to reduce fragmentation and duplication and maximise health impact is sought along with an appreciation of a national responsibility to share data to support population health. A once for Scotland legal obligation between all organisations in the Public Health System to share information which is relevant to improving population health could be considered.

Good data and Public Health analysis of data sets is key for Public Health intelligence and there is a desire to build on the partnership work of the National Data

and Intelligence Network to create shared data resources and improve data access. PHS and a public health specialist should be permanent members of the Data and Intelligence Network.

Information must be readily shared in a WCPHS.

11. WCPHS Principles

Ten principles on which a WCPHS will stand have been developed during this process:

1. A whole system approach with collaborative leadership:
 - a. Understanding what helps and hinders a whole system approach (WSA) is vital. What are the obstacles to WSA? Are there ways of thinking that are unhelpful to WSA? How can they be addressed?
 - b. All parts of the system demonstrate 'Stewardship' of the system and the population's health and not 'Agency'. It is not about institutions; the system exists and works to ensure that people in their place of life can prosper.
 - c. Encompass all public, private, and voluntary entities that contribute to the delivery of essential public health services within a country.
 - d. Those leading nationally are in contact with those on the ground in the system.
2. The drive to world class population health outcomes are what brings the different parts of the system together.
3. Reduction of inequalities is to be considered in every decision.
4. Communities are always involved and empowered.
5. A preventative approach is undertaken.
6. Complex problems are recognised as such and not as complicated ones.
7. Evidence based practice is sought but lack of evidence should not deter peer agreed action.
8. Adaptable and flexible, able to build learning into an ongoing response. Quality assurance is embedded in practice.

9. All actions should be sustainable in recognition that preserving the planet is essential for population health.
10. Optimum use of resources from a population perspective


Wellbeing of Children and Young People – Feedback from CPIB Members

CPIB Meeting, 9th August 2022

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CYP Wellbeing Themes for Feedback

CPIB Session August 9th	Key Themes	CPIB Member Feedback
 <p data-bbox="231 952 391 1030">Wellbeing of Children and Young People</p>	<ul style="list-style-type: none"> • 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 	<p>In advance of this session, members are asked to share thoughts on the following:</p> <ul style="list-style-type: none"> • 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 • 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.



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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 2020-2023¹, 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 constituent organisations, including 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



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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
<p>Inverclyde - Public Health Needs Assessment pilot project (as mentioned in case study above)</p> <p>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</p> <p>Place Standard Tool</p>	<p>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</p> <p>Short-term, inflexible, ring-fenced funding streams, fragmented across many policy portfolios</p> <p>Required investment shift to primary prevention in relation to public health has not taken place</p> <p>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</p>	<p>All public sector bodies working in partnership to adopt a public health approach to improving population health and wellbeing</p> <p>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</p> <p>All public bodies to work in partnership with/influence Scottish Government to:</p> <ul style="list-style-type: none"> • Ensure funding prioritises all three levels of public health prevention • Maintaining funding for vital public services beyond health • Maximise the impact of existing public sector funding, e.g. Anchor Institution/Community wealth building duties • Adopting a long-term, flexible, sustainable approach to funding

	<p>Decision-making on provision is not always underpinned by data and evidence. Very restricted to service-based data</p> <p>Limited input from service users themselves</p> <p>Data is not joined up at a local level across public health agencies. Lack of data-sharing arrangements in place</p>	
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Theme: Reducing and eradicating child poverty		
Good practice	Barriers to delivery of person-led services	Opportunities for partnership working
<p>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</p> <p>Inverclyde - <u>Public Health Needs Assessment pilot project</u> (as mentioned in case study above)</p>	<p>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</p> <p>Short-term, inflexible, ring-fenced funding streams, fragmented across many policy portfolios</p>	<p>All public sector bodies working in partnership to adopt a public health approach to improving population health and wellbeing</p> <p>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</p>

<p>Implementation of the NHS Demonstrator model to support more targeted local Parental Employment aligned to Anchor role as an inclusive and diverse employer</p> <p>We are working with Education Scotland to support Head Teachers by developing data toolkits so they can make informed decisions about local service provision</p>	<p>Required investment shift to primary prevention in relation to public health has not taken place</p> <p>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</p> <p>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</p> <p>Decision-making on provision is not always underpinned by data and evidence. Very restricted to service-based data</p> <p>Data is not joined up at a local level across public health agencies. Lack of data-sharing arrangements in place</p>	<p>All public bodies to work in partnership with/influence Scottish Government to:</p> <ul style="list-style-type: none"> • Ensure funding prioritises all three levels of public health prevention • Maintaining funding for vital public services beyond health • Maximise the impact of existing public sector funding, e.g. Anchor Institution/Community wealth building duties • Adopting a long-term, flexible, sustainable approach to funding • 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” • Appropriately fund parental learning and skills development to reduce in-work poverty and help improve earnings potential <p>Partners working together to utilise the Independent Care Review’s blueprint for family support</p>
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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
<p><u>Children and Young People Mental Health Indicators</u> – 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</p> <p>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</p> <p>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</p>	<p>Pandemic impact on NHS capacity to deliver mental health services</p> <p>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</p> <p>The prioritisation of prevention and early intervention is not balanced with continued demand for specialist services</p> <p>Gaps in the workforce that deliver mental health services for children and young people</p>	<p>Greater collaboration and co-ordination between agencies, including specialist CAMHS, primary care, social work, schools, and the voluntary and private sectors</p> <p>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</p> <p>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</p>

Publication of Child and Adolescent Mental Health Services (CAMHS) waiting times to help inform NHS Board service delivery and build a picture across Scotland

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

We created a Mental Health Framework in 2021, which focuses our approach to our work around life stages

COVID-19 Early Years Resilience and Impact Survey (CEYRIS) - findings help to demonstrate that pandemic had a major impact on children's mental health.

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.

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
<p>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</p> <p><u>Healthy housing for Scotland briefing paper</u> – evidence-based, clearly linking housing to health and wellbeing</p> <p>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</p> <p>We have been invited as a partner to support the design and build of Liberton High School</p>	<p>Poor data sharing between public bodies locally</p> <p>Lack of adequate supply of affordable and especially social housing to meet demand, which is being exacerbated by increasing costs in the housebuilding sector</p> <p>Lack of housing has a particularly significant impact on the lives of both care experienced and disabled young people</p> <p>Available housing not meeting the needs of children and their families</p>	<p>Better data sharing between public bodies locally would help to plan secure housing destinations</p> <p>Partners to work together nationally and locally to adopt a whole-systems approach to the Scottish Government’s Housing to 2040 policy framework</p> <p>Key driver of child poverty - Tackling issues with housing helps to address this</p> <p>Partners working together to utilise the Independent Care Review’s blueprint for family support</p>



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

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.

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
<p>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</p> <p><u>Physical activity referral standards</u> -</p> <p>We have worked with a range of professionals who deliver, commission, refer and study physical activity referral services to develop Standards for Scotland</p> <p>Lothian: Pilot an evidence based training package (<u>HENRY</u>) 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</p>	<p>Inequalities in access to opportunities. In particular for children that from lower socio-economic backgrounds, care experienced or disabled</p> <p>Variable and inconsistent quality of physical activity referral services in Scotland</p> <p>Variable and inconsistent quality of safe and green spaces for physical activity across local areas and geographies in Scotland</p>	<p>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</p> <p>Enabling and supporting health and social care professionals to refer children to local activities which will benefit their health and wellbeing</p> <p>Engaging with local partners and communities to co-produce and co-deliver physical activity referral services that meet the needs of local populations</p> <p>Building the evidence base on the effectiveness of physical activity referral service</p> <p>Promoting continuous improvement and knowledge exchange across physical activity referral services</p>

<p>about nutrition, physical activity, oral health and more</p>		
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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
<p>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</p> <p>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</p> <p>We are working with the Scottish Grocers Federation to increase access, acceptability and affordability of</p>	<p>Childcare is often unaffordable and inflexible for those who need it most</p> <p>Provision and availability of childcare services varies significantly between different local authority areas</p> <p>Often accessibility issues for children with additional support needs</p> <p>Lack of joined up, wrap around family support services at a local level. Lots of duplication and</p>	<p>Greater collaboration and co-ordination between agencies at a local level, including local authorities, social work, schools, and the voluntary and private sectors</p> <p>Supporting the delivery of Scottish Government's Good Food Nation ambition</p> <p>Delivery of more flexible and affordable childcare solutions for those that need it most</p> <p>Deliver integrated, flexible and accessible services that meet the needs of children from low income families, removing barriers to access which are</p>



<p>healthier options within the convenience retail sector in marginalised communities</p> <p>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</p> <p><u>COVID-19 Early Years Resilience and Impact Survey (CEYRIS)</u> - findings help to demonstrate that pandemic had a major impact on childcare</p>	<p>fragmentation. Increasingly complex landscape which differs across local authorities</p>	<p>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</p>
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Theme: Tackling health inequalities in children, including childhood obesity		
Good practice	Barriers to delivery of person-led services	Opportunities for partnership working
<p><u>Eating Out, Eating Well Framework</u> - We are working with Food Standards Scotland on the development of</p>	<p>Unequal access to healthy and nutritious food – linked to child poverty</p>	<p>Supporting the delivery of Scottish Government’s Good Food Nation ambition</p>

<p>this framework. Includes among other things, calorie labelling and a Code of Practice for Children’s Menus</p> <p>Mandatory calorie labelling –We supported the development of the consultation document with colleagues in FSS and Scottish Government. The <u>consultation</u> opened on the 8th April and closed on 1st July</p> <p>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</p> <p>In July 2019 NHS Health Scotland published of <u>Standards</u> 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</p>	<p>Required investment shift to primary prevention in relation to public health has not taken place</p> <p>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</p> <p>Affordability of healthy foods versus unhealthy foods</p>	<p>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</p>
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<p>Scotland in the treatment of higher body weight and associated health risks</p> <p>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</p> <p>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.</p> <p>We are supporting work to strengthen early intervention and prevention of childhood obesity in the early years (0-5yrs)</p> <p>We have recently produced an internal paper for Scottish Government, looking at childhood overweight</p>		
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<p>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</p> <p>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</p>		
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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
<p>Following £20 million funding from the Scottish Government for the “<u>Summer of Play</u>”, 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</p>	<p>Inequitable provision based on locality and socio-economic background</p>	<p>Scaling up and extending existing initiatives, giving recognition to the different needs of, and resources within, communities</p>

<p>facilities, such as school estates and local sports facilities. This has been extended during 2022 to enhance play and childcare opportunities</p>	<p>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</p>	<p>To maximise the potential of interventions, careful consideration should be given to developing the links between formal education, families, and local communities</p> <p>Reinvestment and the realignment of funding to ensure equity of access to opportunities for young people across Scotland</p> <p>Develop awareness and training for those in clinical and community settings on the efficacy and appropriateness of cultural approaches to support preventative care</p> <p>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.</p>
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		<p>Ensuring that culture is employed as a key part of delivering Health and Social Care priorities and contributing to an overall wellbeing economy</p>
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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
<p>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.</p> <p>Producing official statistics on a wide range of topics relevant to ACEs such as maternity care, infant feeding, and early child development</p> <p>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)</p>	<p>ACEs not always seen within the wider context of societal inequalities</p> <p>A public health prevention approach is not always taken towards childhood adversity</p> <p>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</p>	<p>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</p> <p>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</p> <p>Providing <u>more support for children and families</u> in the very earliest years – for example, through our <u>universal health visiting service</u></p>



<p>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</p> <p>Working with many people and organisations across the UK, such as the Scottish Childhood Adversity Hub, we have produced a report called '<u>Ending childhood adversity</u>'</p> <p>Supporting maternity services. We monitor the health of mothers and babies through the work of the Maternal and Neonatal Hub and other data collections.</p> <p>Working on the evaluation of the Perinatal Mental Health Strategy and with Scottish Government to design and initiate the evaluation of Best Start</p>		<p>Developing our early learning and childcare system to be more accessible, affordable, more flexible, and integrated with school and out-of-school care</p> <p>Partners working together to utilise the Independent Care Review's blueprint for family support</p>
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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 <u>root and branch review</u> of Scotland's career ecosystem and the proposals and actions that have followed	Continuing socio-economic attainment gap 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 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 <u>Young Person's Guarantee</u> 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



<p>This could be a job, apprenticeship, further or higher education, training or volunteering</p> <p>The Project SEARCH programme delivers in NHS sites aims to connect young people who have learning disabilities and additional support needs, with competitive employment</p>	<p>models and don't enable a needs led, person centred approach</p> <p>Different elements of funding may sit within different partner budgets with separate outcomes and objectives and prevent more joined up person centred service design</p>	<p>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</p> <p>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</p> <p>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</p> <p>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</p>
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		<p>Work on Anchors provides an opportunity for NHS working with partners to meet the Corporate Parenting responsibilities through exploring family firm approaches</p> <p>Engaging with Scottish Government, Education Scotland and key stakeholders on the draft Youth Work Strategy (2022-2027) for publication in late 2022</p>
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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 reimagining 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 ICYJ 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.

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 empowerment². 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. They 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 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.

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

Career Review Recommendations

<div style="margin-bottom: 10px;">  <p>1. A new career development model A simple model should be established that defines career services, bringing definition to the variety of career services across Scotland.</p> </div> <div style="margin-bottom: 10px;">  <p>2. Developing skills and habits essential for the future world of work Career education and services should be designed to develop, recognise and accredit the skills and habits essential for the future world of work.</p> </div> <div style="margin-bottom: 10px;">  <p>3. Creating person centred career services Individuals should be involved in identifying what they need from career services based on their own circumstances and context, which leads to a flexible and personalised service offer.</p> </div> <div style="margin-bottom: 10px;">  <p>4. Experiential career education There should be dedicated curriculum time for experiential work-related learning in all settings.</p> </div> <div style="margin-bottom: 10px;">  <p>5. Community based services Young people have a right to have to a wide range of opportunities, to experience the workplace and understand what fair work is.</p> </div>	<div style="margin-bottom: 10px;">  <p>6. Exposure to fair work People should have a right to have a wide range of meaningful opportunities to experience work and understand what fair work is.</p> </div> <div style="margin-bottom: 10px;">  <p>7. Digital enablement, empowerment & engagement Enhanced digital services and online tools should be developed that present information about the world of work in an inspiring and accurate way.</p> </div> <div style="margin-bottom: 10px;">  <p>8. Clear roles for the delivery of career services Where appropriate, the roles across career services should be defined, to deliver the career development model in a coherent way.</p> </div> <div style="margin-bottom: 10px;">  <p>9. Strengthening evaluation and continuous improvement The effectiveness and impact of the whole career system should be measured using a suite of outcome-based measures that are integrated in all settings, supporting the delivery of responsive and flexible services.</p> </div> <div style="margin-bottom: 10px;">  <p>10. Creating a career services coalition A coalition should be established that ensures the implementation of the Review's recommendations and the coherence of career services across Scotland, where young people, practitioners, employers and stakeholders are represented.</p> </div>
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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 long 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



Solace Feedback



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 listened 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 Wellbein g 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



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



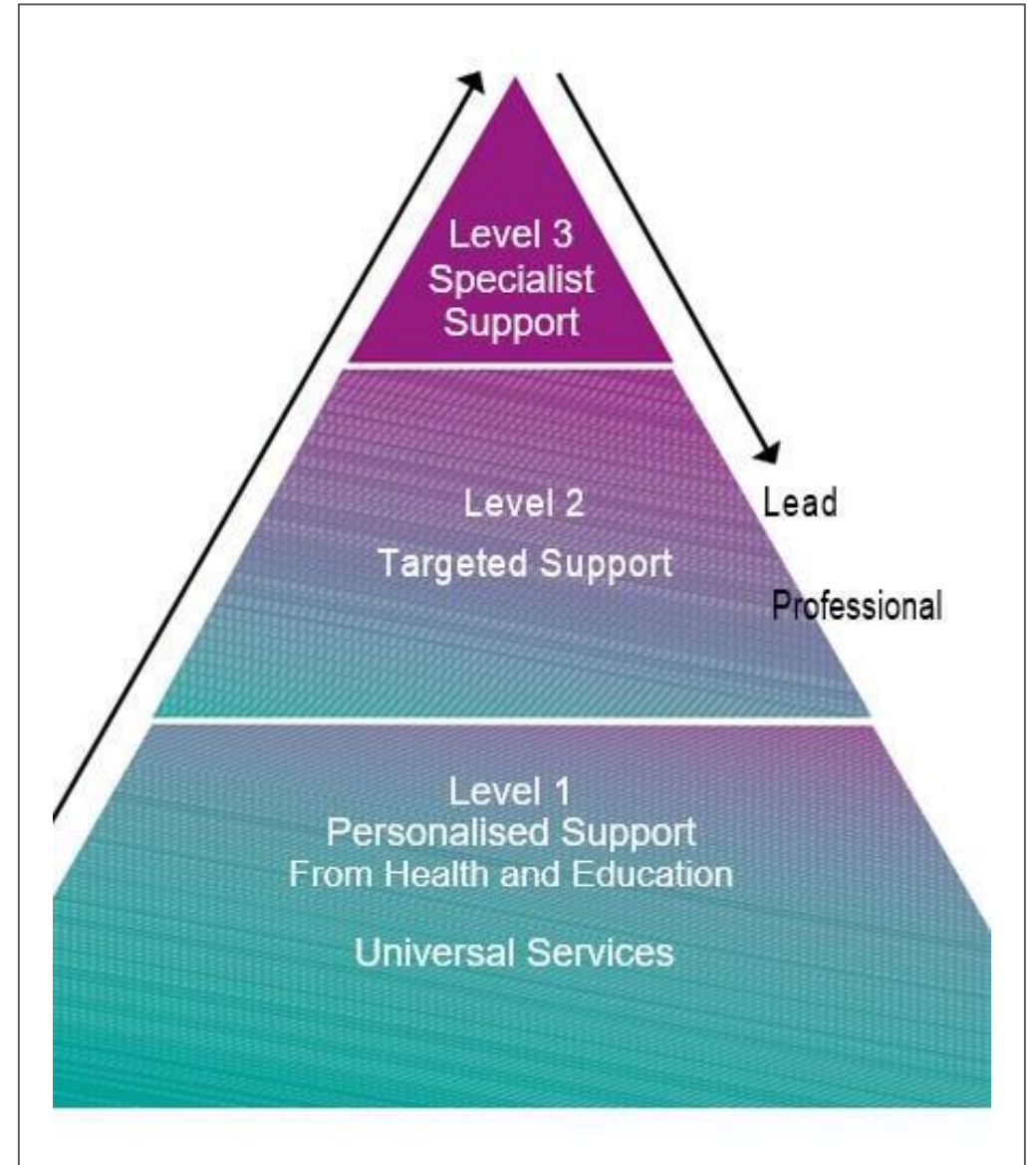
Fit Like Family Wellbeing commitment

- 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

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*



Coexistence - 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

Leading through systemic change

- 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

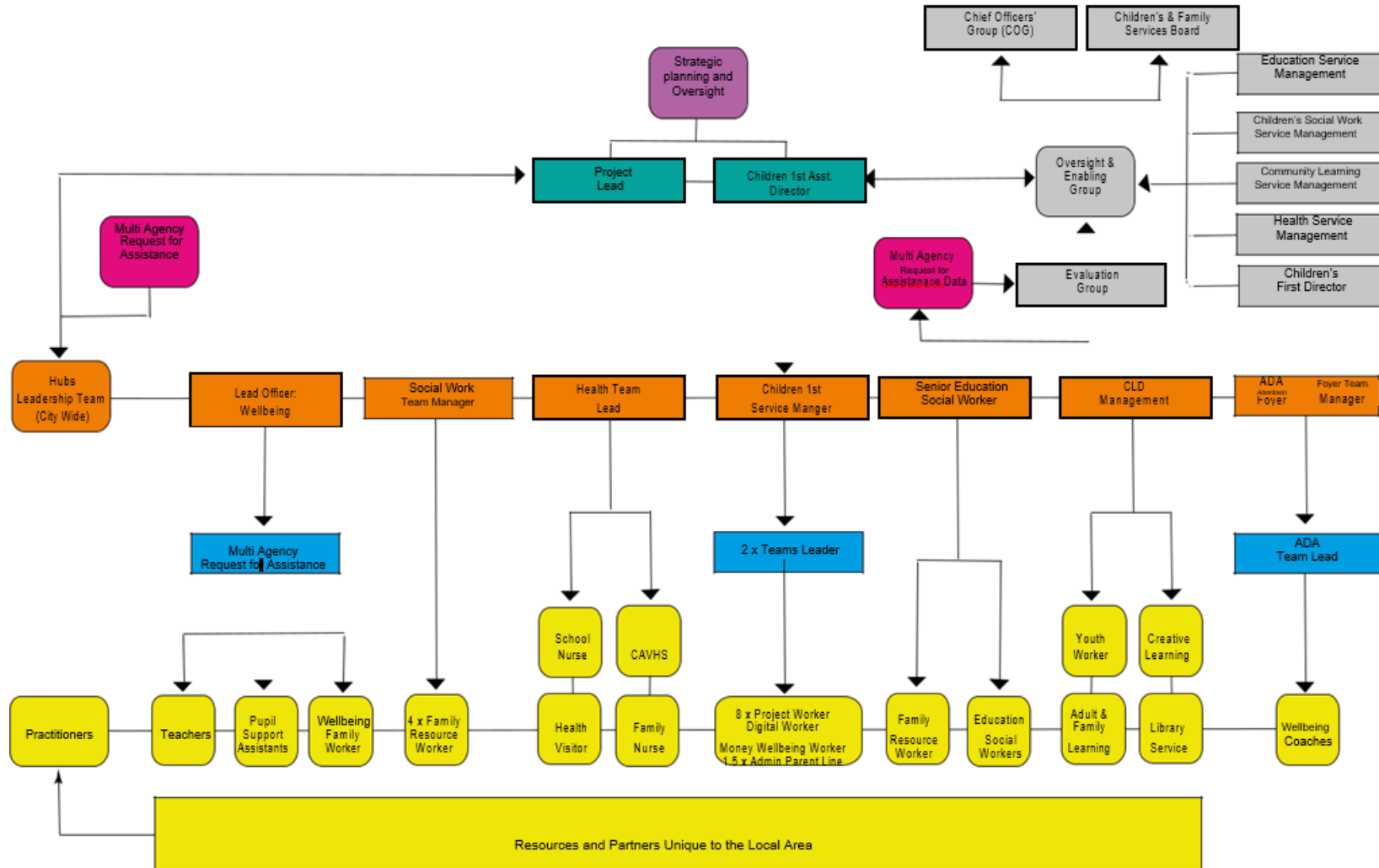




Wellbeing of Children and Young People



Fit Like Family Wellbeing Team Governance Structure





Journey from coexistence to collaboration

Coexistence: clarity
between practitioners
from different agencies
as to who does what and
with whom

Co-operation: sharing
information and
recognising the mutual
benefits and values of
partnership working,
pulling collective
knowledge and
achievement available

Coordination: planning
together, shaping some
roles and responsibilities,
resources and risk taking,
accepting the need to
adjust and make some
changes to improve
services, avoiding
overlapping

Collaboration:
Commitments between
partners, with
organisational change
that brings shared
leadership, control,
resources and risk taking



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



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

05-05-2022



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

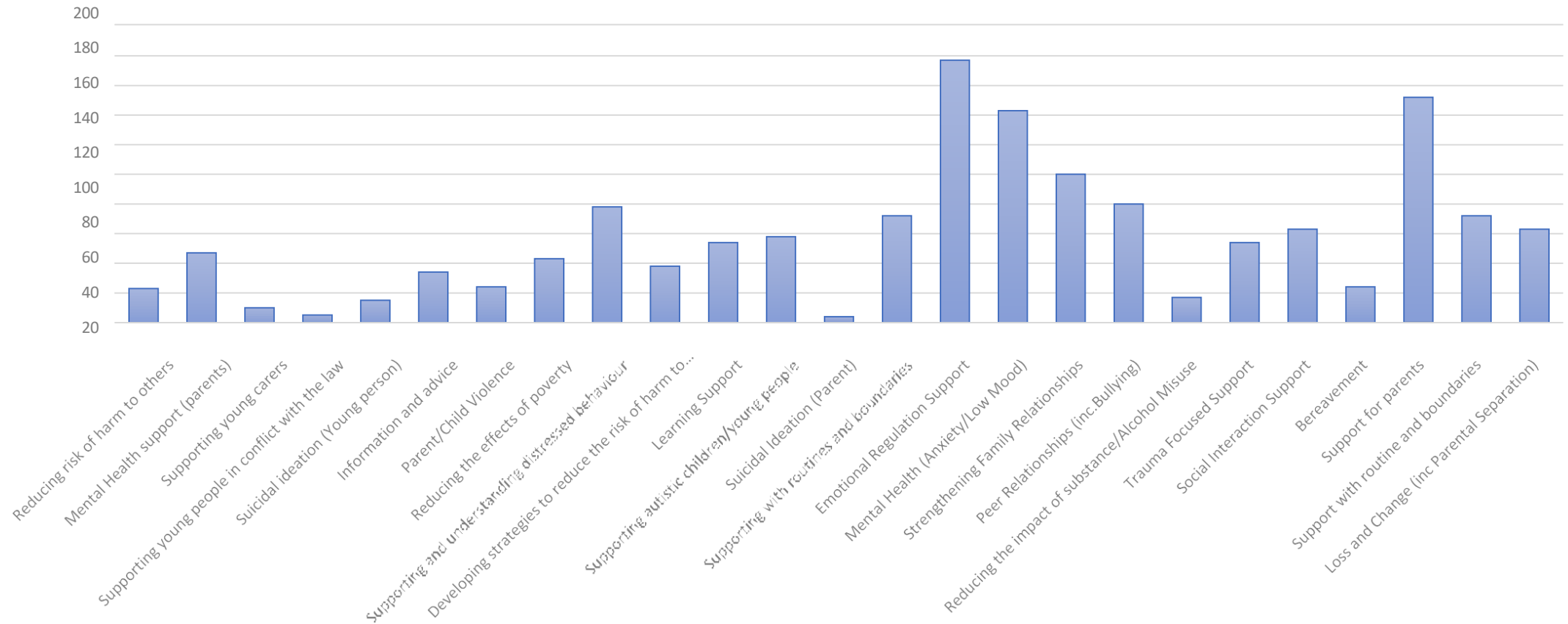
Project Work

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

Themes and Data

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





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



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.

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



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

05-05-2022

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' (CWM-H)





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 see/try things a little differently and feel that this has helped them move out of a time they've found more challenging.

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.

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.

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.

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.



Wellbeing of
Children and
Young People



Families Stories



Example 1.pptx



Example 2.pptx



Community Planning Improvement Board

Children's Services Planning
9 August 2022





the promise
scotland

“It is clear that Scotland must not aim to fix a broken system but set a higher collective ambition that enables loving, supportive and nurturing relationships as a basis on which to thrive”

“Do not look for the place, role and purpose of the current features of the ‘care system’ The Promise sets out an overall view of what the new approach should be”

(Independent Care Review, The Promise, Feb 2020)



So Incremental versus Transformative Change?

Incremental

- Multiple strategic plans and actions
- Partner service consultation
- Focus on specific themes and risks
- Numerous service access points
- Named Person's with competing roles
- Different assessment/care pathways
- Term-time and normal working hours
- Push up the system and incur high cost
- Allow demands to overtake capacity

Transformative

- Single plan with fewer more focused actions
- **Joint partner and community involvement /codesign**
- Shared flexible focus on people's needs
- Standard service information and **access point**
- Support staff to develop capacity to engage
- TATC, IRD, CPCC and LAC are Family Meetings
- Flexible working patterns based on needs
- **Hold at the lowest point and prevent escalation**
- **Reinvest in further prevention and improvement**



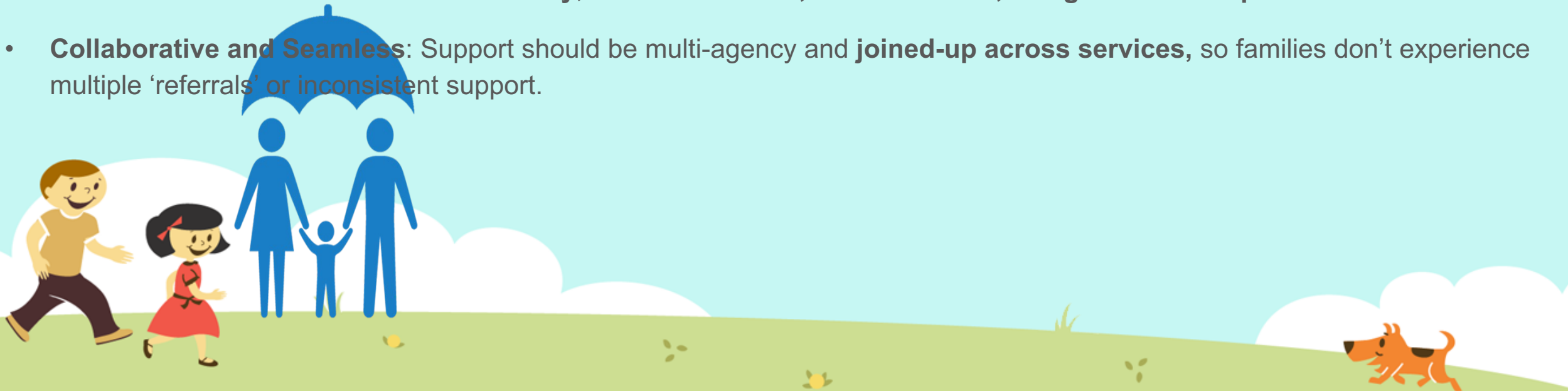
The Promise themes – some key accelerants

- Cluttered and inconsistent
- Complex and variable
- Convoluted and opaque
- Crisis and reactive
- Competitive funding
- Service or professional expertise
- Costly
- ✓ Streamlined and consistent
- ✓ Simple and coherent
- ✓ Understandable and easy to navigate
- ✓ Early identification and access to support
- ✓ Collective funding
- ✓ Collaborate with communities
- ✓ Efficient use of the total resource

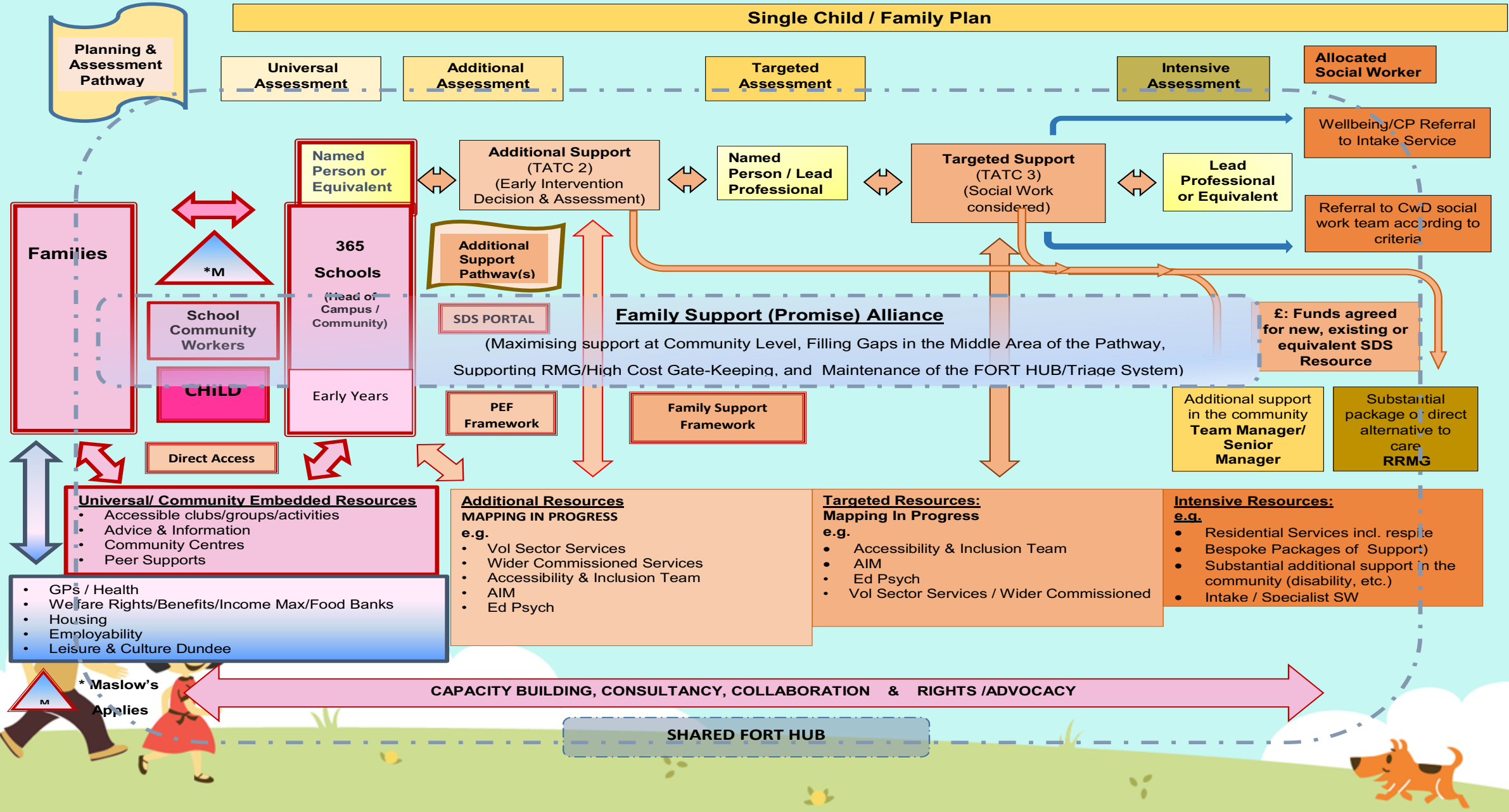


National Whole Family Support Principles, include:

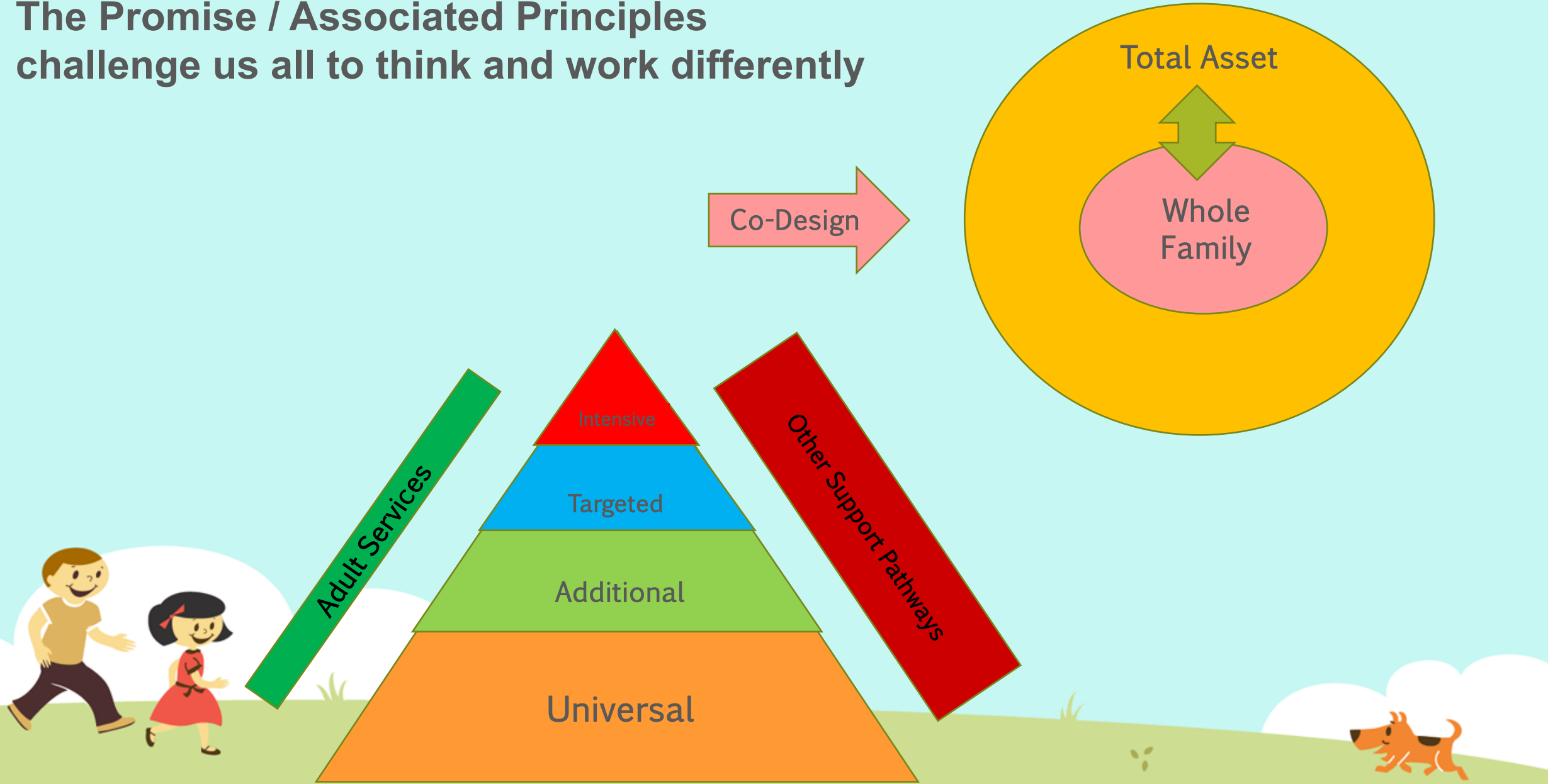
- **Whole Family:** Support should be rooted in GIRFEC and wrapped around about the whole family. **This requires relevant join up with adult services & whole system, place-based, preventive addressing inequalities.**
- **Needs based:** Support should be tailored to fit around each individual family, **not be driven by rigid services or structures.** It should cover the spectrum of support from universal services, more tailored support for wellbeing and intensive support (to prevent or in response to statutory interventions). Creative approaches to support should be encouraged.
- **Assets and community based:** Support should be empowering, building on existing strengths within the family and wider community. Families should be able to **'reach in' not be 'referred to'**. Support must be explicitly connected to **locations that work for local families and the community, such as schools, health centres, village halls and sports centres.**
- **Collaborative and Seamless:** Support should be multi-agency and **joined-up across services**, so families don't experience multiple 'referrals' or inconsistent support.



Child & Family Support Pathway



The Promise / Associated Principles challenge us all to think and work differently



Collaborative Imperatives and Benefits

- Full collaboration enables us to plan/act differently
- Requires commitment to complex adaptive leadership
- Improves relations between partners and communities
 - Helps to understand and maximize the total asset
 - Encourages application of models of change
 - Promotes use of improvement methodologies
 - Points towards the shared use of resources
 - Enhances joint understanding of impact and value
- Drives partners to work in the context of wider system
- Supports approaches to whole families not themes



Stubborn Challenges – multiple and overlapping concerns drive integration



- Deprivation – 2nd
- Domestic abuse – 1st
- Drug deaths – 1st
- Child Protection Orders – 1st
- Imprisonment – 1st
- Care experienced – 3rd



The Money and Follow the Money Escalating Placement Types and Costs

- 450 children and young people currently in care and another 700 receiving SW support
- 28 in external residential costs approximately £5.8m per year or 17% of total £35m budget
- 27 in Young Person's Houses costs £3.9m per year or 11% of total £35m budget
- 98 in external foster care costs approximately £4.9m per year or 14% of total £35m budget
- 120 in internal foster care costs approximately £2.4m per year or 7% of total £35m budget
- 122 in kinship care costs approximately £2.4m per year or 7% of total £35m budget
- 55 at home with family involving no standard annual fees or allowances to carers

Jointly support and hold with families to reduce social and economic costs

Whilst meeting needs, managing risks and acknowledging volatility



Some current system-wide priorities

Columba 1400 FCLAs with leaders and families

Development of integrated support hubs

Volunteer strategy to coalesce and target

CELCIS capacity building work with Named Person's

Trauma responsive practice

Enhanced support to family-based care

Young Carers Strategy

Collective decisions on WFWF funding

The Lens supporting commissioning and co-design

Involves local collaboration



Challenges

Jointly managing funding cuts

Multiple and complex funding streams

Short-term funding

Brexit including reduced labour market

UASC and Ukrainian refugees

Impact of pandemic

Cost of living crisis

Support to parents/carers

Availability of foster carers

National Care Service

Improving outcomes in all family-based care

Require national/local collaboration



Key Questions

What is the role of community planning in realizing the aspirations and principles of the Promise?

What do we need to do differently to embed the Promise / Whole family Support Principles across our services?

What are the barriers? How do we overcome those barriers?

What do we stop doing? What do we start doing? What do we do differently? What are we already doing differently?



CPIB Deep Dive

Wellbeing of Children and Young People

November 2022



Wellbeing of
Children and
Young People

Discussion Questions for Breakout Groups

What is working well in your CP partnership to improve wellbeing outcomes for CYP, with specific reference to:

- **Cross sectoral, high-level transformational initiatives**
- **Examples where you and your partners are working together to do things differently to address the needs of CYP taking a whole family approach**
- **The benefits you are seeing for children and young people**

What are the local and national barriers that are getting in the way?

Plenary Session

- **Commonalities in relation to good practice**
- **Prioritising high level barriers and blockages to tackle**

Next Steps:

Short Life Working Group													
Purpose	To take action on barriers identified												
Membership	CPIB Members												
Commitment	Maximum 2 meetings (2 hours in total) Meeting 1: Agreeing Actions Meeting 2: Follow up to discuss progress												
Recording	<table border="1"><thead><tr><th>The barriers we focussed on</th><th>The solutions we have opted for</th><th>Progress</th></tr></thead><tbody><tr><td>1.</td><td></td><td></td></tr><tr><td>2.</td><td></td><td></td></tr><tr><td>3.</td><td></td><td></td></tr></tbody></table>	The barriers we focussed on	The solutions we have opted for	Progress	1.			2.			3.		
The barriers we focussed on	The solutions we have opted for	Progress											
1.													
2.													
3.													
Timeframe	Report back at next CPIB meeting in February 2023												

CPIB Deep Dive: Wellbeing of Children & Young People

15th November 2022

Discussion Questions

1. What is working well in your CP partnership to improve outcomes for children and wellbeing, with specific reference to:
 - Cross sectoral, high-level transformational initiatives
 - Examples where you and your partners are working together to do things differently in your CPP to address the needs of CYP taking a whole family approach
 - The benefits you are seeing for children and young people
2. What are the local and national barriers that are getting in the way?

Group 1

Facilitator – Marie Dailie (Dundee City Council)

Anna Fowlie (SCVO)

Gregg Colgan (Dundee City Council)

Susan Webb (Directors of Public Health)

Sarah Gadsden (Improvement Service)

Hannah McCulloch (Improvement Service)

Marie Dailie– Deep dive into wellbeing of children and young people. There are very stubborn challenges and big barriers.

What is working well?

Relationships with the third sector

Marie Dailly, Dundee:

Working with the third sector alliance and voluntary sector more broadly. Public bodies are realising don't have the answer to this alone. We need the third sector – particularly if we want to reach people early and take a preventative approach.

Anna Fowlie:

Agree the third sector is a strength to help support children and young people's wellbeing. Poverty, literacy, climate change – there are so many challenges. Some of it will be national third sector organisations but the majority are very small local groups that provide a voice for local people to contribute to our understanding and inform decision making.

Problem: Data

The problem with the promise oversight board is that the data is all over the place. We collect things that we've always collected, only just now starting to collect the data which is REALLY relevant for the people the services are for. We need to keep challenging ourselves to identify the right data sources.

BARRIERS – funding models

Gregory Colgan: What works well is engagement with third sector and seeing those organisations as equals. They bring insight, passion enthusiasm. They need to be on an equal footing but the funding doesn't support that position.

Susan Webb – Integrated Children's services boards and structures beneath them help us get real time feedback from services and from families and children themselves.

BUT – we are in danger of making our children's services arrangements less effective because there are so many projects and programmes coming in and that makes it difficult to keep on top of and report on everything. Need to look at our funding arrangements so we are equal partners and so we can share data more effectively. We're not making the most of it to identify our most vulnerable communities and families.

Marie Dailly – Funding is a perennial issue. Too many different funding streams. Reporting gets in the way of delivery. In Dundee we're looking at Whole Families Wellbeing Fund. We have to be careful that we are also introducing an element of competition which can make the partnership working a bit more difficult and complex.

BARRIER – public sector is slow to react.

Gregory – The council is like a tanker – takes years to turn around. The voluntary sector is a speed boat. It can change and pivots really quickly. We need to learn from them.

BARRIER – Failure to unite behind shared outcomes

Susan Webb. It takes a community to raise a child. How do we allow partnerships to align the outcomes they are trying to achieve for families. Having supported 4 CPPS, one got a bad inspection. When we were being held to account it was made clear that all partners were held to account. Schools aren't just Education. It's everyone's responsibility.

Sarah Gadsden: Children and Young People Wellbeing covers so much. The scale of what we are trying to achieve can be overwhelming. How do we pull out what is going to make the biggest impact? Child Poverty ELC, the Promise. We're working to learn from activity in these areas. How do we support those who are struggling by sharing good practice. A lot of good examples out there. **One of the challenges is to spread the learning and get it to the people who need it.**

BARRIER – Pressure on resources limits capacity for change

Sarah Gadsden: We work very loosely with colleagues on the ground and we hear all the time about the lack of capacity for change. Especially now. Pandemic, cost of living crisis. Capacity and also headspace for transformative change. There is still a focus on fire-fighting, meeting demand. There's a real challenge there in terms of the more transformative work.

Anna Fowlie – Its human nature to focus on immediate need – but we need to think long term and resource preventative interventions.

Marie Dailly – What are the key points for SG on preventative approaches? When staff are swamped. Are there practical things that we can ask for?

Gregory Colgan – We always say ‘ look what we have achieved in COVID’. We achieved a lot BUT climate was deprioritised, so was budgets, employability etc. If we don’t shift to preventative now – what will we be dealing with in 20 years from now?

We need bridging finance to cross over to longer term thinking. Tests of change that show that long term thinking makes savings.

The Promise reminds us that we are talking about real people. We can’t afford to miss this opportunity.

Susan Webb: Mental health is an area where we’ve not focused in a preventative way. We focus on the point of distress. **We’re trialling the 4 pillars approach**. Looking across the piece. So – a model that funding is across the four quadrants. And that will help us be innovative and come up with creative solutions.

Marie Dailly – Money comes in and it is already siloed. But it should just be focused on the determinants rather than particular initiatives. CPPs should have the opportunity to have more say in how the funding is allocated. Taking the different quadrants into account too.

Anna Fowlie – That is right in principal but it is a big ask on SG in practical terms.

Marie Dailly– The whole process is about transformation and challenge – for the Scottish Gov too not just CPP.

Gregor Colgan – The **funding is definitely still too prescriptive**. The SG will say, ‘recruit x number of teachers’ but you might not need that locally – you might need school nurses or support workers. We need to be able to be more responsive to communities.

Marie Dailly – The concordat embodies a lot of these values, but it feels like we’re regressing sometimes.

Group 2

Mark Macdonald, Community Development, Dundee City Council - Facilitator

Anthea Coulter, TSI, Clackmannshire

Valerie Arbuckle, Police Scotland, Partnership Development Manager

Liz Manson, Dumfries and Galloway Council, Community Planning and Engagement Manager – Representative for the CPP Manager Network

Mark McAteer, Scottish Fire and Rescue, Director of Strategic Planning, Performance and Communications.

Mark McMullen, Head of Place and Partnership for Edinburgh South and Forth Valley at Scottish Enterprise.

Marion Lang, observing, SFRS

Miriam McKenna, Improvement Service, Scribe.

Thinking about examples from your sector or local partnership:

a. What's working well and why?

AC: In Clackmannanshire, had money come in from mental health support money in schools. Formed a programme Board with 3rd Sector providers. Didn't want to pin self into one way. Need to explore different approaches. Have used online delivery, had wellbeing co-ordinators within secondary schools and primary, with art and music therapy in primary schools. Seen huge progress, but there's not much beyond school, would then move on to CAMH services, and then onto adult. Identifying need to put more into preschool. Been looking at this for adults. Given money to both of the Home Starts and the development Trusts have come forward to engage with this too. Breast Feeding support – poor rates in Forth Valley – need to change this to ensure bonding with children happens early and acts as an early intervention. Is this where money will disappear?

The funding being flexible was what made it so positive?

Yes – 3 or 4 different online provisions – only one wasn't taken up – going to disinvest in this, and will move over to other areas. All learning together where the issues are. Anthea has been able to bring together a consortium of 3rd sector orgs, to apply for cashback to communities funding, to support children supported by the Promise.

LM: CPP Managers network on Friday, discussed what is working well re CYP and there were 3 areas which emerged consistently across country. Engagement with CYP and involving them in decision making including joint cabinets with EMs, mini-commissions, The Promise featured heavily in this as an inspiration to get some of this underway.

Mental health and wellbeing – seen this shift from SOAs into LOIPs, with mental health and wellbeing having equal billing with physical health – innovative projects, particularly in school, in engaging with young people, and then articulating what would be best for them e.g. counsellors in schools.

Systematic evaluation of the interventions, so building up evidence, e.g. PHS contribution to getting the hard evidence to know what worked and then being able to share that with other places, making sure making the biggest difference that you can.

VA: Been preparing in PS re integration of UNCRC. Helps with engagement with CYP. Have participated as fully as possible with The Promise and have stronger relationships with Who Cares, Scotland? And care experienced young people. Have encouraged employment as officers from that grouping, so have those with lived experience in the organisation.

In Violence Reduction Unit, are trying to re-engage and encourage the Mentors Against Violence prevention, which fell away during lock downs, need for this across whole schools network. School Youth Engagement officers, often funded by local authorities, think this will be a problem re reduced funding in the future.

A division has developed its safeguarding process – traditionally was looking at the child and the family around, but introduced contextual look across community, school etc. to get better response to child's needs and behavioural challenges. Has made a difference in the area where it has been piloted. Will learn from this and expand if it works well.

Mark McMullen – SE step back from direct engagement with YP, but encourage businesses to look at young people's employment, what grants are available, look at corporate responsibilities to play a more active role in a community. Mostly large companies, but some SMEs also do this. SE created opportunities for career ready students to find out what working for SE might be like. Can also provide mentor relationships to companies, through local schools.

More on promotion of jobs and corporate and social responsibility.

AC – that's one of discussions had as part of City Deal this morning- beginning to build, looking at supply chains, meet the buyer etc, but have a critical issue with YP and skills, looking at social enterprise development, sector use and community benefits and matching these. YP often not job ready, but employers need to be trauma informed. Often don't understand that.

MVP a good piece of work, but with pandemic some YP have challenges.

Mark McMul – weighting system for Community Wealth factors within bio tech investment. Need to identify the benefits, especially when right beside area of deprivation. Outreach, how to engage with YP.

Mark McA – tend to set a framework nationally, and say bend that to local need. Have youth engagement scheme – 1 reason to attract YP in to fire service, but also to build capacity and capability for YP. Have mentoring programme. Employability programme – Fire Skills – say to local partners, direct towards more vulnerable CYP, those who have difficult background and bring them into a more disciplined environment – help build their skills to be able to go into employment market. Well received by local partners.

b. What are the barriers?

From TSI network POV, discussion that WFWF has actually only been discussed in a handful of LAs and Third Sector. Not sure if that is why money isn't through yet, plans had to be in quickly, but maybe not dictated enough at national level. Could be red tape.

LM – short term project funding – if find an effective intervention, but then have to fight for long term funding for embedding of the work into ongoing activity.

VA – recognise enforcement of law, but majority of work is about wellbeing and welfare of communities, but may often not be seen as a partner in this. Communication in the could be better shared. Something about prevention and being able to do something on this.

Group 3

Nicky McCrinnon (Dundee City Council) - Facilitator

Neville Prentice (SDS)

Lesley Kelly (MVACVS)

Pamela Dudek (NHS Highland)

Angela Leitch (PHS)

David Milne (SG)

Adam Hall (Improvement Service) - scribe

Neville – SDS:

- Employability partnerships have gone a long way to developing person centred approaches.
- Particular focus on getting young people into employment in these LEPs
- However, challenges remain around data sharing between organisations
- On funding, there are often a very large number of projects/programmes with relatively little funding – do these deliver as effectively and strategically as a smaller number of more well resourced projects?

Lesley – Midlothian 3rd Sector Interface

- Challenges seen recently in recruitment to the 3rd sector.
- Concern that the budget cuts that will be announced in December will reduce this funding further and cause more issues
- Recently have seen budget cuts to CAHMS while seeing increasing waiting lists for those services

Pamela – NHS Highland

- There are good opportunities for collaboration within community groups, IJBs
- However, risks exist due to increased demand on HSC services from young people, particularly on mental health
- The budgetary threat is a real one and is of concern
- Particular issue seen in highland is the impact of hidden rural poverty – not as obvious as in cities, but the poverty is still there and in many ways more difficult to tackle
- CYP interventions need to be a 'Team Game' – the ambition is there for collaborative working, but this is difficult in practice

Angela – PHS

- Challenge of short term, ringfenced funding is prevalent
- PHS have documented and observed areas where there are 20+ pots of different funding for mental health services, all with different reporting requirements – this does not represent a holistic offer of support, and there is danger in dealing with things in a piecemeal fashion

Nicky – Dundee Council

- There exist a large number of very specific interventions for CYP – is this helpful? Or would a more joined up, holistic, single point of access service model be better?

Pamela – NHS Highland

- Agreed – not only from the perspective of the service user, but from a resource perspective – a large number of individuals and organisations can often work with the same individual/families – is this resource-efficient?

David M – Scottish Government

- Ministers are increasingly focussing on the fiscal sustainability of service. How financially sustainable is continued and repeated crisis intervention vs preventative spend? This is where ministers now want to see spend going.

Nicky – Dundee Council

- The complex inspection and scrutiny regime on education and early years puts unnecessary burden on those working with children.
- One issue on the horizon is the scope and scale of the National Care Service – important to understand how this will impact on childrens' services