

The Highland Council

Education, Children and Adult Services Committee – 21 May 2014

Agenda Item	9.
Report No	ECA/06/14

For Highland's Children 4

Report by Director of Care and learning

Summary

This report provides an update on progress made in developing the integrated Children's Service plan.

1. Background

- 1.1 *For Highland's Children - Volume 4* (FHC4) will be the Children's Service Plan for the Care and Learning Service, and will incorporate, as far as possible, the contribution of children's services delivered by NHS Highland.
- 1.2 The plan will identify outcomes for children and their families and improvement priorities for the next five years.
- 1.3 The plan incorporates and builds upon outcomes identified within existing policy commitments of Highland Council, and on the Performance Management Framework developed as part of the partnership agreement which established Highland Council as the Lead Agency for delivering services to children.
- 1.4 *For Highland's Children 4* maintains and develops the themes articulated within *For Highland's Children 3*.
- 1.5 The Scottish Government passed the Children and Young People (Scotland) Bill on 19 February 2014. The Bill places duties on public bodies to coordinate the planning, design and delivery of services for children and young people with a focus on improving wellbeing outcomes, and report collectively on how they are improving those outcomes.
- 1.6 The publication of *For Highland's Children 4* has been delayed, to take account of the report of the Joint Inspection of Services for Children and Young People in Highland, published in April 2014. In particular, the detailed Supporting Improvement Document, which is not a public record, but is an account of findings during the inspection, was only received on 15 April. Accordingly, the various Improvement Groups have had limited time to take account of this, further delaying publication of the final plan, which will now be presented to Committee in August.
- 1.7 It should be noted that the inspection report identified that a particular strength making a difference to children, young people and families in Highland is:
"The commitment to joint self-evaluation and performance management across the children's services partnership is making a strong contribution to service improvement and achieving better outcomes for children. This is reinforced by the highly effective involvement of children and young people in policy and service planning".

2. The Planning and Operational Structure

- 2.1 As set out at the recent members' seminar, *For Highland's Children 4* uses a service improvement model to determine outcomes, identify priorities and quality assure the plan
- 2.2 A leadership group overviews the on-going work of the plan. This group has broad membership, including lead officers from Highland Council and NHS Highland, SCRA and Northern Constabulary. In addition there are staff representatives from NHS Highland and Highland Council, third sector partners and elected members, including the Children's Champion.
- 2.3 To support the improvement model, a number of improvement groups have been established to take ownership of the improvement agenda. These groups address:
- Schools
 - Early Years
 - Child Protection
 - LAC
 - Youth Action
 - Mental Health
 - Additional Learning Needs and Disability
 - Young Carers
 - Play
 - Transitions
 - Public Health and wellbeing
 - Supporting Parents
 - Practice model

3. Self-Evaluation

- 3.1 The leadership group and improvement groups use a self-evaluative approach to identify how well we are performing in relation to the outcomes we seek for children, young people and their families. This approach considers three key questions: "how are we doing?"; "how do we know?"; and "what can we do differently or better to improve outcomes for children and young people?" The process also describes how children and young people, their parents and carers and other stakeholders are consulted with.

4. The Improvement Framework

- 4.1 The achievement of better outcomes for Highland's children, their families and the communities in which they live is the overarching objective for children's services.
- 4.2 The outcomes are designed to consider the ways in which;
- Children and young people receive the help and support they need to optimise their well-being at every stage.
 - Children and young people get the best start in life and enjoy positive, rewarding experiences growing up.
 - Children and young people benefit from clear protocols, procedures and effective systems for recording observations and concerns which take account of best practice in information-sharing.

- 4.3 The outcomes relate to the impact of services on the well-being of children and young people using the SHANARI indicators. It focuses on their experiences and the extent to which their lives and life opportunities will be enhanced to ensure they are;
- Safe
 - Healthy
 - Achieving
 - Nurtured
 - Active
 - Respected and Responsible
 - Included

- 4.4 **Appendix 1** provides detail of the fourteen overarching outcomes. This is the most recent iteration of the model, as the Leadership Group has worked to reduce and rationalise the framework.

5. Improvement Planning

- 5.1 Each improvement group has developed a workplan with a common format. The plans show all current improvement priorities, centred on the key outcomes.

- 5.2 The plans are dynamic and are monitored and updated regularly. Each plan is formally evaluated on an annual basis. Summaries of the improvement plans will be published in *For Highland's Children 4*, and then maintained and updated on the *For Highland's Children Website*

6. Performance Management Framework

- 6.1 The plan provides a performance management framework for monitoring and scrutinising the outcomes. The framework articulates the mechanism agreed for evaluating and measuring outcomes, responsibilities and timescales.

- 6.2 The performance management framework contains a number of quantitative measures built around the fourteen outcomes.

- 6.3 Work is almost complete in developing this framework which incorporates and builds upon outcomes identified within the existing Performance Management Framework developed as part of the partnership agreement. The intent is that the framework developed within FHC4 will replace the existing framework.

- 6.4 **Appendix 2** sets out the Performance Management Framework measures developed to date by stakeholders. Education measures are still to be fully incorporated.

- 6.5 The Performance Management Framework needs to take account of the requirements of NHS Highland from commissioned child health services.

7. Implications

7.1 Resources –

As Committee is aware, there are current budget pressures with regard to additional support needs and out of authority placements, but there will be no new resource issues as a consequence of For Highland's Children 4. The Council has also

committed to a third year of preventative spend on the early years.

7.2 **Equalities**

For Highland's Children 4 will assist the Council to continue to meet its equalities obligations.

7.3 There are no legal, climate change/carbon clever, risk or Gaelic implications arising from this report.

8. Recommendation

8.1 Members are asked to consider and comment on this report, including the proposed performance management framework.

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Date: 9 May 2014

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Key Outcomes

The achievement of better outcomes for Highlands's children, their families and the communities in which they live is the overarching objective for children's services.

The outcomes are designed to consider the ways in which;

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- Children and young people get the best start in life and enjoy positive, rewarding experiences growing up.
- Children and young people benefit from clear protocols, procedures and effective systems for recording observations and concerns which take account of best practice in information-sharing.

The outcomes relate to the impact of services on the well-being of children and young people using the SHANARRI indicators. It focuses on their experiences and the extent to which their lives and life opportunities will be enhanced to ensure they are;

- Safe
- Healthy
- Achieving
- Nurtured
- Active
- Respected and Responsible
- Included

Safe

1. Children are protected from abuse, neglect or harm at home, at school and in the community.
2. Children are well-equipped with the knowledge and skills they need to keep themselves safe.
3. Young people and families live in increasingly safer communities where anti-social and harmful behaviour is reducing.

Healthy

4. Children and young people experience healthy growth and development.
5. Children and young people make well-informed choices about healthy and safe lifestyles.

Achieving

6. Children and young people are equipped with the skills, confidence and self-esteem to progress successfully in their learning and development.

7. Children and young people are supported to achieve their potential in all areas of development.

Nurtured

8. Children and young people thrive as a result of nurturing relationships and stable environments.
9. Families receive support, advice and guidance which is well-matched to their needs and available in ways which helps them to prepare for the various developmental stages.

Active

10. Children and young people are physically active.

Respected and Responsible

11. Children and young people know their rights and are confident in exercising these. They are able to express their views and be involved meaningfully in decisions which affect them.
12. Families are valued as important contributors and work as equal partners to ensure positive outcomes for their children and young people.

Included

13. Children, young people and their families are supported well to develop the strengths and resilience needed to overcome any inequalities they experience.
14. Children, young people and families are enabled to tell us what they think about services and the community in which they live, and improvement is determined with their involvement and by understanding their views, wishes, and expectations

Appendix 2

FHC 4 Outcome SAFE	Measure	Data Source	Frequency	Improvement Group
1. Children are protected from abuse, neglect or harm at home, at school and in the community.	The number of young people in unplanned emergency accommodation will reduce.	CCC	Annually	Child protection
	The number of children on the child protection register who have been registered previously will reduce.	Each data point covers 12 months.	Monthly	Child Protection
	The gap between formal agency recording and self reporting rates from children and young people affected by domestic abuse decreases.	Child concern forms, Woman's aid, Police Scotland and SCRA self-reporting through the lifestyle survey	Every 2 Years	Public Health and Wellbeing
	The gap between reporting of bullying through formal mechanisms and self reported experiences of bullying from children and young people decreases.	School bullying recording and Lifestyle survey	Every 2 Years	Equalities working group
	The number of children and young people who say that they know where to get help from if they are being bullied increases	Lifestyle Survey	Every 2 Years	Equalities Working Group
	The number of children and young people who say that they would tell someone if they were being bullied increases	Lifestyle Survey	Every 2 Years	Equalities Working Group

FHC 4 Outcome SAFE	Measure	Data Source	Frequency	Improvement Group
2. Children are well-equipped with the knowledge and skills they need to keep themselves safe.	Self reported incidence of alcohol misuse will reduce.	Lifestyle Survey	Every two years	Public Health and Wellbeing
	Self reported incidence of drugs misuse will reduce.	Lifestyle Survey	Every two years	Public Health and Wellbeing
	The number of children and Young people displaying sexually harmful behaviour receiving support through the AIM 1 and 2 assessment and Good Lives programme will increase	Youth Action Data Collection	Annually	Youth Justice
	Reduce the number of Road Traffic Accidents resulting in avoidable injuries to children and young people under 17 years	Road Safety unit data	Annually	Road Safety Unit
	Hospital admissions for drug related reasons will reduce	SMRO1	Annually	Public Health and Wellbeing
	Hospital admissions for Alcohol related reasons will reduce	SMRO1	Annually	Public Health and Wellbeing

FHC 4 Outcome Safe	Measure	Data Source	Frequency	Improvement Group
3. Young people and families live in increasingly safer communities where antisocial and harmful behaviour is reducing	The number of children reporting that they feel safe in their community increases	Lifestyle Survey	Every 2 years	Public Health and Wellbeing
	The number of children and Young people reported to SCRA on anti social behaviour grounds reduces year on year	SCRA Data	Annually	Youth Justice
	The number of restorative justice warnings used for Young people who offend increases	Child concern forms – Youth Coordinators	6 monthly	Youth Justice
	Increase the use of diversionary interventions for young people who are at risk of becoming serious and/or repeat offenders.	Youth Action Data collection	Annually	Youth Justice
	The number of young people referred to youth action who have an asset assessment completed increases.	Youth Action Data collection	6 monthly	Youth Justice
	The number of offence based referrals to SCRA reduces	SCRA Data	Quarterly	Youth Justice
	The percentage of 16 to 18 year olds entering the criminal justice service decreases	Youth Action Data Collection	Annually	Youth Justice

FHC 4 Outcome Healthy	Measure	Data Source	Frequency	Improvement Group
4. Children and young people experience healthy growth and development	The percentage of children who reach their developmental milestones at their 27 – 30 month health review will increase year on year	Baseline to be established in December 2014	Annually	Early Years
	The percentage of children who achieve their key developmental milestones by the time they enter school will increase year on year	Annual audit of the Preschool Overview Returns	Annually	ASN
	The percentage of children who reach their developmental milestones at entry to Primary four will increase year on year	Baseline to be established in June 2016	Annually	Early Years
	There will be a reduction in the percentage gap between the most and least affluent parts of Highland for low birth weight babies	ISD	Annually	Early Years
	Improve the uptake of 27-30 month surveillance contact from the baseline of 52% to 95% by march 2016	Child Health surveillance system	Twice Yearly	Early Years
	95% uptake of 6-8 week Child Health Surveillance contact	Child Health surveillance system	Quarterly	Early years
	95% uptake of 6-8 week Child Health Surveillance contact showing no difference in the uptake between the general population and the least affluent parts of Highland.	Child Health surveillance system	Annually	Early years

	95% uptake of 6-8 week Child Health Surveillance contact showing no difference in the uptake between the general population and LAC	Child Health surveillance system	Annually	Early years
	Achieve 36% of new born babies exclusively breastfed at 6-8 week review by March 2017	ISD Validated data	Quarterly	Maternal infant nutrition IG
	There will be a reduction in the percentage gap between the most and least affluent parts of Highland in the number of children exclusively breastfed at the 6 -8 week review.	ISD Validated data	Quarterly	Maternal infant nutrition IG
	Maintain the 95% Allocation of Health Plan indicator at 6-8 week from birth for the general population	Child Health surveillance	Quarterly	Early Years Improvement Group
	Maintain the 95% uptake of primary immunisations by 12 months	CHSS SIRS	Annually	Public Health and wellbeing
	Maintain 95% uptake rate of MMR1 (% of 5 year olds)	CHSS SIRS	Quarterly	Early Years
	Sustain the completion rate of P1 Child health assessment to 95%	CHSS Schools	Annually	Early Years
	The percentage of children with significant ASN having their learning planned for through a child's plan will increase	Annual Audit of child's plans for pupils with level 3 and 4 needs	Annually	ASN
	The number of 2 year olds registered at 24	Child Health	Annually	Public Health and

	months with a dentist will increase year on year	Surveillance – 27 to 30 month review		Wellbeing
	The number of 2 years olds who have seen a dentist in the preceding 12 months will increase year on year.	Child Health Surveillance – 27 to 30 month review	Annually	Public Health and Wellbeing
	The percentage of 5 year olds will have no obvious dental decay will increase to 80%	ISD from National Dental Inspection Programme	By December 2020	Public Health and Wellbeing
	Child Fluoride Varnish Applications Achieve at least 60% of 3 and 4 year old children in each SIMD quintile to receive at least 2 applications of fluoride varnish per year by March 2014	ISD (3 and 4 year olds – HEAT target)	Annually	Public Health and Wellbeing
	All nurseries will participate in the Childsmile toothbrushing Programme with 80% of the roll brushing daily	Childsmile Integrated Monitoring Reports (July – June)	Annually	Public Health and Wellbeing
	90% of children and young people referred for specialist CAMHS (primary mental health workers) are seen within 18 weeks by December 2014.	Service Planning	Quarterly	Mental Health
	95% of looked after children and young people referred for specialist CAMHS are seen within 18 weeks by December 2014	Service Planning	Annually	Mental Health
	The percentage of statutory health assessments completed within 4 weeks of becoming looked	Monthly collation by	Monthly	Looked after Children

	after will increase to 95%	Lead Nurse LAC		
	The percentage of Initial LAC health assessments to be included in Childs Plans within 6 weeks will increase to 95%	Monthly collation by Lead Nurse LAC	Monthly	Looked after Children
	Waiting times for AHP services to be within 18 weeks from referral to treatment by December 2014	Monthly returns made by AHPs	Monthly	ASN
	95% of children will have their P1 Body Mass index measured every year	CHSS Schools	Annually	Public Health and Wellbeing
	Increase the number of S2 young women who receive HPV immunisation to 90% by March 2017	CHSS SIRS	Annually	Public Health and Wellbeing
	The percentage of S2 young woman who receive HPV immunisation will be no different between the most and least affluent areas.	CHSS SIRS	Annually	Public Health and Wellbeing
	The percentage of S2 young woman who receive HPV immunisation will be no different between the general population and the LAC population.	CHSS SIRS	Annually	Public Health and Wellbeing
	Number of staff trained to deliver approved input on sexual health, relationships and parenting increases	Developed by the public health and wellbeing IG	Annually	Public Health and Wellbeing

FHC 4 Outcome Healthy	Measure	Data Source	Frequency	Improvement Group
5. Children and young people make well-informed choices about healthy and safe lifestyles.	The number of hits on pages relating to children and young people on the Substance Misuse Website increases	Substance misuse website	Annually	Health, Wellbeing & Public Health
	The number of children's services staff trained in Brief Interventions and Motivational Interviewing increases.	Youth action data collection	Annually	Youth Justice
	The number of early years providers who offer children healthy snack choices will increase	Feedback from Early Years Census information	Annually	Early Years
	The number of pre school aged children who have access to energetic physical play increases	Feedback from Early Years Census information	Annually	Early Years
	The volume of oily fish, vegetables, fruit and salad used in school meals per pupil increases	Catering Services	Annually	Public Health and Wellbeing
	School meal uptake increases beyond primary 3	Catering Services	Annually	Public Health and Wellbeing
	Self reported incidence of smoking will decrease	Lifestyle Survey	Every two years	Public Health and Wellbeing

FHC 4 Outcome Achieving	Measure	Data Source	Frequency	Improvement Group
6. Children and young people are equipped with the skills, confidence and self-esteem to progress successfully in their learning and development.	The number of LAC who attain qualification in any subject at level 3 or above will increase	PMU	Annually	Schools
	The number of LAC who attain qualifications in English/maths at level 3 or above will increase	PMU	Annually	Schools
	The percentage of young people reporting their learning environment as positive will increase	Lifestyle survey	Every two Years	Public Health and Wellbeing
	The number of Gypsy and Traveller children and young people attending nursery, primary and secondary school, whilst in Highland, will increase.	Interrupted Learning development officers database	Annually	ASN
	The number of Gypsy and Traveller children and young people, and others who experience interrupted learning, attending school for longer, sustained periods of time will increase.	Interrupted Learning development officers database	Annually	ASN

FHC 4 Outcome Achieving	Measure	Data Source	Frequency	Improvement Group
7. Children and young people are supported to achieve their potential in all areas of development.	The percentage of children and young people sustaining full time attendance at school will increase	6 monthly audit of part time attendance in school and nursery	6 monthly	ASN
	The number of young people who are engaged in positive economic destinations will increase.	16+ destination data	Every six months	Transitions
	The number of Looked After Children supported through the Family Firm (Highland Council) scheme increases.	16+ and throughcare and aftercare destination data	Annually	LAC
	The number of Looked After Children supported through the Family Firm (NHS Highland) scheme increases.	16+ and throughcare and aftercare destination data	Annually	LAC
	The number of young people with complex disability tracked post school for 3 years annually increases	Annual update of post school destinations	Annually	ASN
	The percentage of children and young people in schools accessing support from substance misuse workers increases	Youth Action Data collection	Annually	Youth Justice
	The percentage of schools who have developed a positive relationships framework, supported by curricular materials based on rights, respect and wellbeing will increase.	Audit of school policy frameworks	Every two years	ASN
	The gap between the number of Young Carers identified by services and those who self identify will decrease	Connecting carers and YC databases Lifestyle Survey	Every 2 years	Young Carers Improvement Group
	The number of self identified young carers who report they are supported will increase	Lifestyle survey	Every 2 years	Young Carers Improvement Group

	The exclusion rate for Looked After Children will decrease	Annual audit of exclusions	Annually	Looked after Children
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FHC 4 Outcome Nurtured	Measure	Data Source	Frequency	Improvement Group
8. Children and young people thrive as a result of nurturing relationships and stable environments.	The number of children entering P1 who demonstrate an ability to develop positive relationships through nurturing and stable environments increases	Pre school Overviews	annually	ASN
	The drift and delay in the time taken between a child being accommodated and a permanency decision will reduce to 9 months	Exception reporting by Resource Manager Fostering and adoption	Quarterly	Looked after Children
	The number of respite nights provided is sustained	Report on the use of Respite	Monthly	ASN
	The number of respite day hours provided is sustained	Report on the use of Respite	Monthly	ASN
	The number of LAC accommodated outwith Highland will decrease	Care First	Quarterly	LAC
	The number of children who need to live away from the family home, but can be supported in kinship care increases	Care First	Quarterly	LAC
	The number of children where permanence is achieved via a Residence order increases	Care First	Quarterly	LAC
	The number of audits carried out for any LAC who experience 3 or more placement moves in a three month period increases.	Reports to LAC IG	Quarterly	LAC

FHC 4 Outcome Nurtured	Measure	Data Source	Frequency	Improvement Group
9. Families receive support, advice and guidance which is well-matched to their needs and available in ways which helps them to prepare for the various developmental stages.	The number of pregnant women screened for substance misuse who are offered support increases.	SMR4	Annually	Early Years
	The number of pregnant women who are at risk of poor mental health who are offered support increases.		Annually	Early Years
	An increase in uptake of Healthy Start scheme to 85% of eligible beneficiaries by 2016	NHS Intelligence	Annually	Maternal infant nutrition IG
	The number of eligible children supported to take up their early learning & childcare entitlement increases	Childcare database	Annually	Early Years
	The number of staff trained in the use of approved parenting programmes increases	Supporting Parents database	6 monthly	Supporting Parents
	The number of areas producing an annual plan for delivering universal and targeted support to parents increases	Area Management teams	annually	Supporting Parents
	The number of parents attending validated parenting programmes increases	Reports to Area Management Teams on local delivery and evaluation reports	Quarterly	Supporting Parents
	Increase the number of parents participating in a validated parenting course who have 3-4 year olds with severely disruptive behaviour	POPP	6 monthly	Supporting parents
	The number of schools offering sessions and/or	Reports to Area		Supporting

	written information to parents about child development at transition to P1 increases	Management teams	Annually	Parents
	The proportion of families with children under 8 receiving income maximisation advice increases			Public Health and wellbeing

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FHC 4 Outcome Active	Measure	Data Source	Frequency	Improvement Group
10. Children and young people are physically active.	The number of children walking to school increases	Schools hands up survey data. Walk to school week May/Oct.	Annually 6 Monthly	Road Safety Unit
	The number of children cycling to school increases	Schools hands up survey data. Bikeability data.	Annually	Road Safety Unit
	The number of provisions who report that children have daily access to the outdoors increases	Play IG annual survey	Annually	Play
	The number of provisions that are able to provide free access to the outdoor increases.	Play IG annual survey	Annually	Play
	The number of children achieving the recommendation of one hour or more moderate activity on most days of the week (five or more)increases	Lifestyle survey	Every 2 years	Public Health and wellbeing
	The percentage of children receiving 2 hours PE each week increases		Annually	Schools

FHC 4 Outcome Respected and responsible	Measure	Data Source	Frequency	Improvement Group
11. Children and young people know their rights and are confident in exercising these. They are able to express their views and be involved meaningfully in decisions which affect them.	The percentage of views and comments of children and young people with ASN included in a child's plan increases.	Annual Audit of child's plans for pupils with level 3 and 4 needs	Annually	ASN
	The percentage views and comments of children and young people receiving a youth action service included in a child's plan increases.	Youth Action Data collection	6 monthly	Youth Justice

FHC 4 Outcome Respected and responsible	Measure	Data Source	Frequency	Improvement Group
12. Families are valued as important contributors and work as equal partners to ensure positive outcomes for their children and young people.	The number of parents accessing the handling teenage behaviour programme increases.	Action for children and Youth action team	Annually	Supporting Parents
	Family Nurse Partnership fidelity goals will be achieved	FNP returns	Annually	FNP project board
	The number of hits on pages relating to parents and carers on the Highland Substance Misuse Website increases	Substance misuse website	Annually	Health & Wellbeing

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FHC 4 Outcome Included	Measure	Data Source	Frequency	Improvement Group
13. Children, young people and their families are supported well to develop the strengths and resilience needed to overcome any inequalities they experience.	The number of schools with the new equal opportunities policy in place increases	SEEMiS	Annually	ECS Equalities Working Group
	The number of parents/carers who participate in the parent/carer food and health in schools participation programme increases.	Catering service	Annually	Public Health and Wellbeing
	The number of families of children with Additional Support needs supported by Chip+ through the service level agreement is maintained or increases	Chip+ annual report	Annually	ASN
	The number of schools participating in the delivery of Resilient Kids training increases	Training audit from Psychological Services	6 monthly	ASN
	The number of adult and children's services staff accessing the getting our priorities right training increases	Dawn Grant / Donna Munro	Annually	CAPSM
	The number of school staff participation in equality and diversity training increases.	SEEMiS	Annually	ECS Equalities Working Group

FHC 4 Outcome Included	Measure	Data Source	Frequency	Improvement Group
14. Improvement in service provision is determined by the participation of children, young people and families and by understanding their views, wishes, and expectations.	The number of children participating in the Highland Lifestyle Survey increases	Lifestyle survey	Every 2 years	Public Health and Wellbeing
	Evidence of involvement and engagement of Children and Young People and families in Improvement Group activity will be demonstrated year on year	IG leads annual reporting	Annually	All
	The number of consultations with children around their experiences of preschool education and childcare increases	Early Years audit	Annually	Early Years
	The number of children and Young People completing the youth action service evaluation form increases.	Youth Action Data collection	6 monthly	Youth Justice

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