
Report to: Clackmannanshire Council

Date of Meeting: 5 March 2015

Subject: Realigning Children Services - Proposal to Participate

Report by: Chief Executive

1.0 Purpose

- 1.1 The purpose of this report is to inform the Council of the Realigning Children's Services (RCS) Strategic Commissioning Programme and to seek Council's approval for an application to be made to participate in the Programme.

2.0 Recommendations

- 2.1 It is recommended that the Council:
- a) agrees to apply to participate in the RCS Programme;
 - b) recommends to the Clackmannanshire Alliance its participation in the Programme; and
 - b) notes that the financial contribution required from the Council would be sourced from the Council's existing Spend to Save fund.

3.0 Considerations

RCS - Background

- 3.1 The RCS programme aims to support community planning partnerships (CPPs) improve joint strategic commissioning of children's services. Strategic commissioning covers: *"all the activities involved in assessing and forecasting needs, linking investment to agreed desired outcomes, considering options, planning the nature, range and quality of future services and working in partnership to put these in place."* (Source Scottish Government - see briefing for CPPs attached as the Appendix to this report.)
- 3.2 To improve strategic commissioning, the RCS Programme offers to provide CPPs with:
- 1 - an understanding of the wellbeing and the needs of local children and young people

2 - an assessment of the impact and cost of current service provision.

3.3 This is achieved by the following Programme activities:

1) - Mapping of needs via:

- survey of pupils across P5-7
- survey of parents of children aged 0-8
- survey of S4 pupils

2) - Mapping of existing services and associated costs

3) - Identification of gaps in service, service over-provision, provision of unneeded services and associated costs of service provision

4) - provision of a series of reports on children and young people's wellbeing and service use, describing needs and an indication of whether these needs are being met by current service provision.

3.4 The Programme, thus, provides a focused input into CPPs to help them ensure services are appropriate to need and to provide an evidence base for any shift in expenditure towards prevention and intervention. The anticipated core benefits of participation in the Programme are:

- a) the potential for better outcomes for children and their families; and
- b) the potential for better value for money in spend on children's services.

3.5 Additional potential benefits of participation identified by the Scottish Government are that:

- CPPs would be able to use the findings for their duties under the Children and Young People Act 2014 regarding children's services plans and reporting of outcomes (the outputs of the Programme would inform the ongoing review of the local integrated Children's Service Plan which is currently out for consultation)
- CPPs would be able to use some of the work in respect of the needs of and provision for children with complex Additional Support Needs
- CPPs would be able to shape services with users fully consulted, which could also help address some of the potential difficulties in relation to self-directed support.

3.6 The Programme also links well with the ambitions of the Early Years Collaborative, the principles of GIRFEC and the aims of the recently announced Raising Attainment Challenge, which will bring associated funding * to Clackmannanshire.

* The Attainment Challenge Fund was announced on 17 February and will be directed specifically to improve literacy, numeracy, health and wellbeing in primary schools. The Fund is £100m over four years and seven local authorities, including Clackmannanshire, will be the first recipients based on the concentration of pupils living in deprived areas.

3.7 A small number of councils have already participated in the first round of the Programme and applications are now being sought for three CPPs to participate in the next round. Chief officers from Clackmannanshire have discussed the experience of participating with their colleagues in Perth & Kinross Council who have reported a very positive and worthwhile experience with a number of emerging benefits, such as:

- the exercise offered powerful information from children and parents which challenged official data and has promoted reprioritisation of spend
- it highlighted where children in need were not getting the assistance they needed leading to a refocusing of work programmes
- the well-being reports which were produced contributed to the identification of political priorities
- it was a participatory process with much community engagement which provided a focus for action, not just by agencies but by parents and families
- the exercise is facilitating joint commissioning.

RCS - Resourcing

3.8 The Scottish Government provides resource and support in the development of the RCS programme as follows:

- for school based well-being surveys across the local authority schools
- for collection of the evidence and analysis
- for consultancy support to the CPP in respect of strategic joint commissioning.

3.9 Participating CPPs are requested to fund one strand of the overall programme, the community based survey of parents of 0-8 year olds. This funding has been around 45k for those CPPs which have already participated. It is possible the amount for Clackmannanshire, were it to participate, could be less than this given the smaller scale of the area and depending on the outcome of the contract for the tender of the entire programme which the Scottish Government is in the process of commissioning.

3.10 CPPs which wish to take part in the Programme are also expected to make available a programme manager and would be required to provide other staff capacity to progress data collection (e.g. the survey of P5-7 pupils takes place in school).

3.11 The RCS Programme meets the criteria of the Council's Spend to Save fund and any Council contribution would come from that source. It is expected that other CPP partners would also make a contribution to the costs of the parent survey. It is anticipated that any staff capacity required would be provided from within the partners' existing establishments.

4.0 Conclusions

- 4.1 At its budget meeting last month, Council was advised of the need to achieve a sustainable cost base given the financial challenges it faces.
- 4.2 A challenge for many agencies can be decommissioning established services which may not be contributing to the achievement of desired priority outcomes. In addition, a more basic challenge for many agencies can be identifying actual as opposed to assumed need.
- 4.3 Through its survey of service users and its mapping of services, the RCS Programme offers agencies the capacity and opportunity to establish an evidence base to support complex decision-making around investing for better outcomes and decommissioning/disinvesting from services not contributing to those outcomes.
- 4.4 Participation in the RCS Programme also sits well with the refined delivery model Council agreed at its budget meeting whereby public sector partners will be encouraged, through the Clackmannanshire Alliance, jointly to redesign service delivery and jointly to target and resource common priorities. Senior officers from Alliance partners have attended two sessions with the Scottish Government to discuss the Programme and a report similar to this one is being considered by the Clackmannanshire Alliance on 6 March.
- 4.5 The outputs of this Programme will only achieve the aims of improving outcomes and effective targeting resources if the Council, its partners and council services make effective use of the information it provides. The data is the start of the process not the end; for participation in the Programme to be worthwhile, the partners will need to use the results actively to inform policy and, if appropriate, change practice and approach.

5.0 Sustainability Implications

- 5.1 An aim of participation in the Programme is to enable partners to provide effective services which meet need and are financially sustainable. Early intervention and prevention are core elements of the Programme.

6.0 Resource Implications

Financial Details

- 6.1 The costs to the Council could be in the region of 45k which is for the parents survey. This funding would be sourced from the existing Spend to Save Fund. All other parts of the Programme as per paragraph 3.3 of this report would be funded by the Scottish Government.
- 6.2 Finance have been consulted and have agreed the financial implications as set out in the report.

Staffing

- 6.3 The CPP would require to allocate a member of staff to act as Programme Manager; it is envisaged that this would be an existing member of staff.

7.0 Exempt Reports

Is this report exempt? No

8.0 Declarations

The recommendations contained within this report support or implement our Corporate Priorities and Council Policies.

(1) Our Priorities

Our communities are more cohesive and inclusive
Vulnerable people and families are supported
Substance misuse and its effects are reduced
Health is improving and health inequalities are reducing
The Council is effective, efficient and recognised for excellence

(2) Council Policies (Please detail)

Draft Integrated Children's Services' Plan
Clackmannanshire Single Outcome Agreement
Council Corporate Plan

9.0 Equalities Impact

8.1 Have you undertaken the required equalities impact assessment to ensure that no groups are adversely affected by the recommendations?

N/A

10.0 Legality

10.1 It has been confirmed that in adopting the recommendations contained in this report, the Council is acting within its legal powers. Yes

11.0 Appendices

11.1 1 - Scottish Government technical briefing on the RCS Programme

12.0 Background Papers

12.1 None

Approved By

Name	Designation	Telephone
Elaine McPherson	Chief Executive	452002

Approved by

NAME	DESIGNATION	SIGNATURE
Elaine McPherson	Chief Executive	Signed: Elaine McPherson

Realigning Children's Services

THE PROGRAMME

Realigning Children's Services seeks to support local improvement in joint strategic commissioning¹ practice, focusing on improved evidence collection and analysis and a strengthening of partnership working across children's services – from statutory services to voluntary and independent providers of services to those who benefit, the children and their families themselves.

It aims to increase the fit between every child's needs and services provided to meet those at the earliest opportunity. The benefits we hope to realise from this work are two-fold: better outcomes for children and their families and better value for money regarding spend in children's services.

How will we make changes happen?

Realigning Children's Services provides a focused input into CPPs to help and encourage them make tangible, sustainable, measurable improvements that shift their children's services expenditure towards prevention and intervention at the earliest opportunity to improve children's outcomes.

The catalyst for this will be child epidemiological wellbeing/need surveys linked to current service provision to provide a baseline on the fit of services provided to need, help identify specific opportunities for improvement and provide an analytical framework for measurement of improvement. This, combined with a landscaping of currently provided services to children across the CPP and associated spend and purpose, provides a comprehensive, evidenced picture for those with strategic commissioning decision making responsibilities. It will help make rational decisions where services will most benefit from investment and where decommissioning of services ought to be considered.

The programme alongside epidemiological surveying and landscaping of children's services will provide training for those involved in decision making roles in finance,

¹ More information with the definitions used and the scope of the work are available in the Annex

education health and social care as well as those providing children's services from the voluntary and independent sector to consider best practice in relation to the full joint strategic commissioning cycle. The training will be closely focused on the CPPs that will undertake the evidence gathering part of the programme, although any spare capacity may be taken up by other CPPs.

The surveying on behalf of CCPs and the Scottish Government will require full implementation support, but furthermore it is recognised that support will be needed to facilitate CCPs partnership working as well as on-going action learning/improvement methodology evaluation to help identify whether changes have been an improvement or not, and collect learning for the benefit of future candidate CPPs.

The programme will be coordinated centrally from within the Directorate for Children and Families (DCaF) linking closely with adult joint strategic commissioning expertise and the Additional Support Needs policy team. Its role will centre around encouraging the strengthening of partnership working required and provide training on the commissioning cycle.

What is the content of Realigning Children's Services?

The programme exists of the following elements:

- RCS evidence programme
- RCS development programme on strategic joint commissioning
- RCS advisers providing tailored support around interpreting evidence and use of implementation science, and creating conditions and governance structures that aid joint strategic commissioning
- RCS concurrent evaluation to measure impact of the programme on development and implementation of sustainable, evidence-based commissioning strategies and implementation of improvement methodology on children's services where appropriate.

APPENDIX - REPORT REALIGNING CHILDREN'S SERVICES, PROPOSAL TO PARTICIPATE SCOTTISH GOVERNMENT - INFORMATION FOR CPPs

CPPs are expected to benefit from all aspects of the programme, although training and partnership work may need to be tailored to an extent to reflect where local partners are at in terms of adaptive change capacity². Strengthening partnership working and evaluation of change on the ground may be required over a longer period of time, beyond the evidence gathering on children's needs and services landscape. While this support would be provided right away when a CCP enters the RCS programme, there is good reason for a continued relationship for as long as implementation of change takes place. The relationship would end either when the CPP wants it to end or once it is clear from the evaluation that capacity has been built in the CPP both to gather evidence and continue the commissioning cycle.

While there will be peaks and troughs in the intensity of support both by the partnership working and evaluation support consultants, it is thought likely that the need for support will slow down to a natural end within a year. Capacity constraints in the programme mean that the consultants would at most likely be working with 6 CCPs at a given time.

The charting of current children's services provision and associated spend, as well as the epidemiological surveys will have a more distinct time line. It is expected that this gathering of data can be realised within 2 months' time. The work needs to be preceded by an assessment of site readiness by a Scottish Government consultant which looks at acceptance for the work associated with RCS across the CPP and strong governance arrangements in place to support that work going forward. This preparatory work will take potentially a number of weeks up to a couple of months to ensure that relevant people have been approached and have signed up to taking part in RCS.

The Development Programme will be offered in two separate day long slots, to relevant senior managers and cover aspects related to joint strategic commissioning and the RCS programme to help shape a shared understanding of what we attempt to achieve. These should be matched to the CPPs taking part in the programme and only provided to other CPPs if there is unused capacity.

² <http://instep.net.nz/Change-for-improvement/Sustainable-change/Four-views-of-change/Adaptive-versus-technical>

How is the programme resourced in terms of staff?

The overall programme staffing is made up of the following functions.

Team Member Title	Base	Key Role/Deliverable
RCS Programme Manager	SG	Oversee RCS programme, implementation and delivery
RCS Communications Manager/ Programme Support Officer	SG	Develop and implement communication strategy and day to day programme support
RCS Evaluation/Improvement Manager	SG	Develop and implement evaluation of impact of RCS on subsequent commissioning strategy; provide input on all analytical related questions
RCS JSC Development Adviser	SG	Manages CP-SG relationship and responsible for site readiness assesment. Brings expertise around JCS, partnership working and CPPs networks and working practices. Involved in all phases of the delivery of the programme.
RCS Data and Evidence Adviser	SG	Develop and deliver programme of facilitation (development and strategy workshops) for CPPs for each phase regarding data collection and interpretation
CPP Project Manager/lead	CPP	Key contact, manager of LA programme of work, LA delivery
C&F Analysis Survey Project Manager	SG: EAS: C&F Analysis	Oversee RCS data programme delivery, single contract framework manager, oversee data linkage processes

How many CPPs has the programme got capacity to support and in what timescale?

There are two available timeslots in the year in which to carry out survey work, with three local authorities able to take part at one time. Tranches of epidemiological survey work will be carried out in September and March. Funding is available to carry on with this work for another three years, which overall should allow for 18-21 CPPs to have taken part in total by March 2018, including those that are currently taking part in the SRU at Dartington Tranche (Sept 2014).

What does the governance structure of Realigning Children's Services look like?

The Realigning Children's Services Steering Group

To provide an opportunity for senior Scottish Government staff to be updated and to comment and advice the project manager of relevant business that may impact on the work of RCS. Membership includes the Director of Children and Families (SG), Head of Children and Families Analysis (EAS), Chief Social Work Adviser, Head of National Joint Strategic Commissioning Steering Group, Social Work Scotland representative, Association of Directors of Education Scotland representative, Public Health Director, and Deputy Director of Strategy and Performance.

Realigning Children's Services Research Advisory Group

This RAG will oversee the efficient implementation of the contracted surveys. It also oversees the use of survey findings and evaluation of how survey findings result in better children's commissioning. It will have input from the Evaluation and Analytical Support Adviser, the contractor, CPPs taking part, the Programme Manager, and will be chaired by the Survey Procurement and Implementation Manager based in EAS.

Realigning Children's Services Learning Network

This group would be set up with the local partners primarily with the intention to share learning and experiences. The full complement of SG programme support, advisers would be expected to attend, plus key local people driving commissioning forward and strategic partners.

How will we contract the survey?

The Scottish Government's Analytical Services is procuring the surveys to ensure quality control and strategic fit with other survey work via a single supplier framework contract for up to 6 CCP areas. This also ensures data will be comparable. The RCS evidence programme will make use of the local boost option of SALSUS which has comparable data for Scotland going back for 30 years. Alongside that, further data will be collected locally by the preferred provider to cover lower age groups. Once a CCP has identified itself as taking part, a call off contract will be put in place.

What do we expect from CCPs?

While Scottish Government will fund all aspects of the programme apart from the community based surveys, CCPs who wish to take part in this programme are expected to make available a programme manager for the purposes of this work and would be required to provide other staff with the time as necessary to progress data collection.

Clearly this work can only progress with sign off and buy in from senior staff overseeing education, social services and health, as well as elected members, both with regards to agreement to collect the evidence and the commitment to use findings to improve children's services commissioning.

What benefits can be derived from this approach?

- The CCPs can expect to be able to create a comprehensive picture of children's needs on a series of indicators, an indication of whether these needs are likely being met in the current service provision, a charting of service provision and associated costs.
- CCPs will be able to have externally facilitated discussions regarding their findings with consultants to support complex decision making around divesting and investing for better outcomes.
- CCPs will be able to evidence their use of data and analysis for the basis of decision making and ongoing evaluation will allow impact to be shown to elected members and the general public.

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- CCPs will be able to use the findings for the purpose of Part 3 of the Children and Young People Act 2014 regarding children's services plans and reporting of outcomes
- CCPs will be able to relate some of this work in respect of the needs of and services provision for children with complex ASN.
- CCPs through a joint strategic commissioning approach will be able to shape services with users fully consulted, which may help address some of the potential difficulties in relation to self-directed support.

How can I find out more about Realigning Children's Services?

For any further information on any aspect of Realigning Children's Services or to arrange a meeting, please contact:

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Annex A – Background

PART I – JOINT STRATEGIC COMMISSIONING OF CHILDREN'S SERVICES

What do we mean by Children's Services?

1. These are services delivered by the local authority, health board or other service provider that are wholly or mainly for the benefit of children generally, or children with particular needs. The age range is 0-18 and covers pre-birth services, such as maternity services, alongside services provided in a community setting like family support services and some secondary healthcare services. It also includes services that provide children with a home away from home for instance foster or residential care or residential schools. In addition to this range of formally commissioned services it is important to recognise the significant role of informal, community and asset based approaches to delivering local prevention and support. With this, we hope to maximise the potential to increase the capacity of families and parents to nurture and develop confident, healthy and engaged children and young people. These more informal resources are also within the scope of the activity to which the JSC agenda applies.

2. Maintaining and improving the health and wellbeing of children and young people needs joined up services utilising collective expertise and resources efficiently. This requires all those in contact with children to have a clear, comprehensive understanding of the context and content of local services and access to all relevant information.

3. The experiences of children and young people in early life, and even before birth, have a crucial impact on their life chances. Service provision, including clinical service provision, needs to be designed to meet the needs of children for health care, social care and education. It is creative local commissioning that has the potential to generate the greatest economic and public health impact, and this in turn will be dependent on the quality of interaction between all those with a statutory responsibility for and third sector and independent providers of Children's Services.

What is joint strategic commissioning?

4. The term 'strategic commissioning' has been adopted by the Joint Strategic Commissioning (JSC) National Steering Group, a standing group reporting to the Delivery Group of the Ministerial Strategy Group for health and community care, as being:

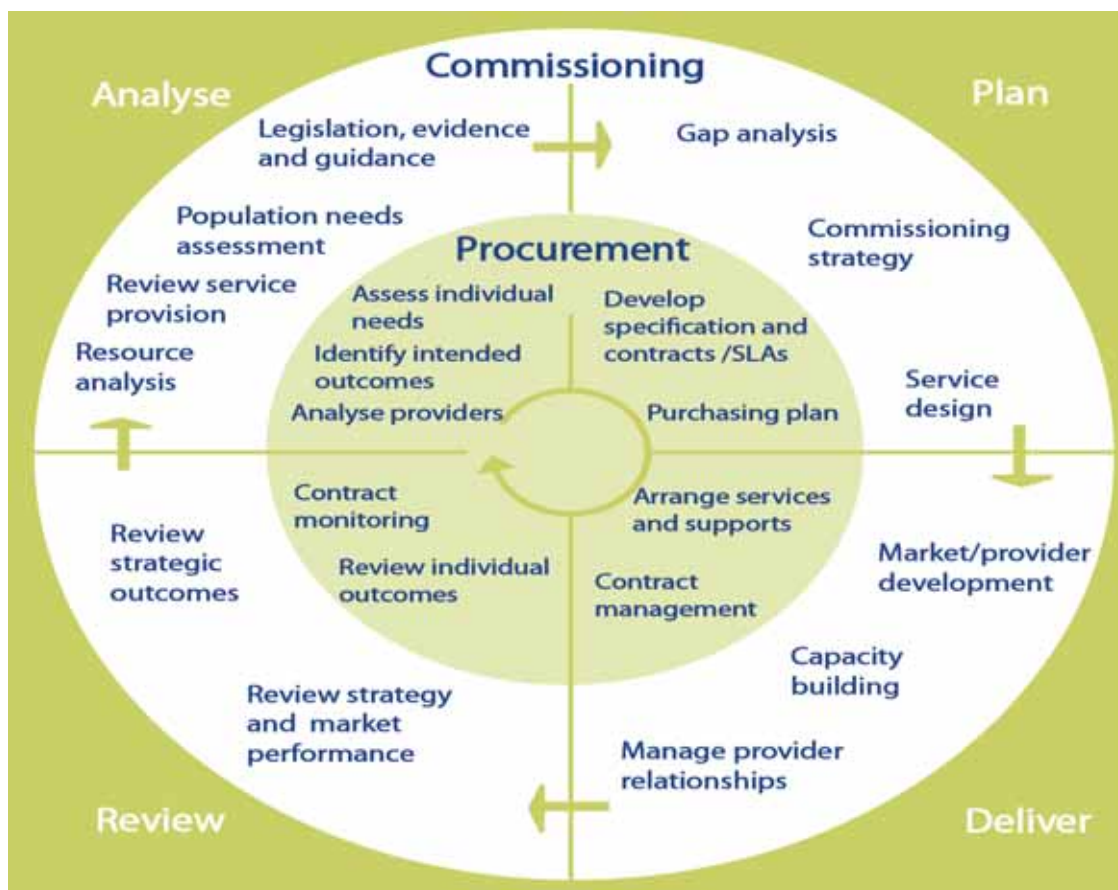
the term used for all the activities involved in assessing and forecasting needs, linking investment to agreed desired outcomes, considering options, planning the nature, range and quality of future services and working in partnership to put these in place.

Joint commissioning is:

where these actions are undertaken by two or more agencies working together, typically health and local government, and often from a pooled or aligned budget.

5. Joint strategic commissioning is thus a complex strategic activity combining traditional disciplines of strategic planning, service design, procurement, internal service planning and performance management, and applying these disciplines in a multi-agency, cross sector environment. Joint commissioning is not simply about contracting between purchasers and providers, but concerns the whole range of ways in which services are developed and secured, including grants, service agreements, voluntary and community contributions and co-production.

6. The model of joint strategic commissioning that has been adopted nationally was originally developed by IPC Oxford Brookes and subsequently used in the SWIA guidance of 2009 and more recently adopted by the JSC National Steering Group. It includes four key aspects of the commissioning cycle - analyse, plan, do and review. The commissioning cycle, which is set out below, provides a coherent model for understanding the processes that are involved in understanding populations, needs, demand and activity, and aligning investment with outcomes. This in turn should allow for evidence based commissioning strategies to be developed.



7. In applying this model to the commissioning of children's services it should be possible to build upon effective partnership working through the use of evidence at both national and local level, to identify where prevention and early intervention opportunities occur across the spectrum of children's services. Through the strengthening of universal service provision and a co-production approach, there is potential to achieve transformational change in both the way services are delivered and provided and the timing of such provision. By strategic partners taking a whole systems approach, the impact of all services and outcomes defined in commissioning strategies can be considered, as well as the impact of decisions taken by one partner upon the demand and supply of services provided by other partners.

8. It is important to emphasise the importance of basing the activity associated with children's services commissioning upon a clear set of core principles which reflect the fundamental values underpinning both wider public services and children's services in particular. In addition, the context of major change across public services through public service reform means that how a JSC approach is developed locally,

must facilitate the development of different ways of interacting with children, their parents and families and of embedding a more mature and collaborative perspective on the contribution of individuals and agencies.

9. Working together in this way to achieve transformational change in the way that Children's services are provided, is therefore essential. The Early Years Framework (2008)³ usefully spelt out the ten elements of transformational change:

- A coherent approach
- Helping children, families and communities to secure outcomes for themselves
- Breaking cycles of poverty, inequality and poor outcomes
- A focus on engagement and empowerment of children, families and communities
- Using the strength of universal services to deliver prevention and early intervention
- Putting quality at the heart of service delivery
- Services that meet the needs of children and families
- Improving outcomes of children's quality through play
- Simplifying and streamlining delivery
- More effective collaborations

10. Most of these elements are fundamental to understanding, developing and delivering on strategically commissioned service provision, and should form part of any consideration of how transformational change can be achieved. The objective of the Early Years Collaborative (EYC) is to accelerate the conversion of the high level principles set out in GIRFEC and the Early Years Framework into practical action. In order to do so it is necessary to deliver tangible improvement in outcomes and reduce inequalities for Scotland's vulnerable children; to put Scotland squarely on course to shifting the balance of public services towards early intervention and prevention by 2016 and sustain this change to 2018 and beyond.

11. The EYC has successfully developed the commitment to deliver this change programme and a strong evidence base about what works to make improvements

³ Early Years Framework 2008 <http://www.scotland.gov.uk/Resource/Doc/257007/0076309.pdf>

has been compiled. What has been lacking up until now is a method by which pockets of excellent practice can be taken to scale to ensure that every baby, child, mother, father and family in Scotland has access to the best supports available.

12. Joint Strategic Commissioning offers a whole system approach to planning and delivering change across the children's services landscape such that the investment needed to deliver the EYC objective can realistically be secured by establishing a robust, whole system approach to planning that will enable investment to become better aligned with the learning that the EYC has delivered and thereby achieve a real difference in the scale and impact of preventative, early interventions.

Current context and drivers for strategic commissioning

13. The public service reform agenda in Scotland provides a strong and consistent message regarding the importance of working much more closely in partnership, to integrate service provision and thus improve the outcomes that are achieved. It also emphasises the importance of shifting investment upstream in order to grow preventative and early intervention approaches and to reduce dependence upon costly acute or crisis intervention resources.

14. The Children and Young People (Scotland) Act 2014 by introducing a duty around joint planning and delivery of services, and a new duty to report on outcomes has given added impetus to embed JSC. Community Planning Partnerships (CPP) are already required to work together to jointly design, plan and deliver their policies and the Act seeks to clarify and embed existing joint working approaches across the public sector, to ensure that those bodies responsible for expenditure, planning and delivery, work together when considering how to improve the wellbeing of the children and young people in their area. The consultation on the Act found high levels of support for this proposal. It was felt that joint working was important to improve wellbeing, and that this duty would help overcome barriers to collaboration, resource sharing and commissioning.

15. The second relevant aspect of the Children and Young People (Scotland) Act 2014 is the duty on relevant public bodies to assist the local authority to report on a common set of high level outcomes for children and young people. This enables the Scottish Government, working in partnership with stakeholders, to set consistent

outcome measures across Scotland. Reporting arrangements will be based on the SHANARRI wellbeing indicators.

16. In this context there is an opportunity for the provisions in the Act and support for JSC to form a 'virtuous circle', with both acting as drivers and enablers. While the legislation will not require partnerships to undertake a JSC approach, if outcomes for children and young people are to be improved it is essential that a JSC approach which facilitates joint planning, budget alignment, delivery and evaluation as a coherent series of activities is embedded within local partnerships core business processes.

17. Local children's services face a particular challenge in their capacity to meaningfully report on both children's needs and outcomes, in such a way that it is useful for commissioners due to information being spread across education, health and social work information systems. Weaknesses and gaps in current information complicate the setting of targets for improvements or identification of appropriate services.

18. Central to the process of JSC is the greater requirement for services to gather evidence – that is, outcomes focused data based around the SHANARRI indicators and child population needs data as opposed to service output data. This will help local authorities meet their duties to report on outcomes, while at the same time enabling feedback into the commissioning cycle by linking investment to outcomes. Guidance will be produced to accompany the duties being introduced by the Act. There is, therefore, currently, real potential to develop a coherent, positive message around the role of JSC.

19. Whilst the emphasis of this paper is upon children's services, it is important to bear in mind that a large number of legislative initiatives are raising expectations regarding the extent and depth of joined up working, personalised responses to individual need and the incorporation of important principles, such as a human rights approach and reduction in health inequalities, in the way that services are planned and delivered, A short list of relevant recent or upcoming legislation that will have a direct bearing upon children's services includes:

- Children and Young People Act (2014)
- Public Bodies (Joint Working) (Scotland) Act 2014

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- Social Care (Self Directed Support) Act 2013
- Community Empowerment (Scotland) Bill
- Human Rights – Scottish National Action Plan
- EU Procurement Directives
- Procurement Reform (Scotland) Bill

20. The particular emphasis upon cross sector partnership working across Scotland's public services means that Local Authority children's services, NHS Boards, third and independent sector providers should all be able to contribute to developing the strategic agenda for children's services. Increasingly, the importance of children and young people and their parents as direct, or proxy commissioners of their own services will require new ways of managing the JSC process to be developed in order to facilitate greater choice and control for the individual. We believe that currently there is a real gap in terms of market development work – through a lack of knowledge on what kinds of services are required and the support to potential external providers to provide those services

21. Issues of inequitable access to services and unexplained variability in their use across and within local, regional or national boundaries, are also likely to become increasingly important considerations in today's influential rights based culture. In particular, attention will need to be paid to the inverse care law, which states "good quality care tends to vary inversely with the need for it in the population served" to ensure that inequalities in outcomes, particularly health inequalities, are addressed.

22. In addition an historical focus upon procurement arrangements has tended to mean that commissioning, the process that determines the services and models that can deliver the best outcomes and offer Best Value, has been relatively undervalued. Instead the mechanics and form by which services are procured or otherwise secured has continued a status quo in the nature of the services in use – regardless of the outcomes achieved. This is at times exacerbated by short-sighted views on costs and benefits where there is a lack of recognition of better value of some very expensive services through its ability to achieve consistently better outcomes.

23. JSC fits well with the overall objective of the Children and Families Directorate - to use a staged intervention approach where families can expect support to be available to them at the earliest opportunity, focusing on family assets to empower them to cope successfully with their particular set of needs. JSC can provide the mechanism to align budgets with the transformation of services and thereby achieve a shift from high cost reactive spend on acute crisis responses by specialist services to lower cost community based approaches and responses through universal services to early identified difficulties or issues, if this is combined with a strong focus on interventions based on consistent evidence of improved outcomes. Putting the child and family at the centre of all levels of decision making around service provision, will achieve the core of the GIRFEC approach:

- builds solutions with and around children, young people and families
- enables children and young people to get the help they need when they need it
- supports a positive shift in culture, systems and practice
- involves working better together to improve life chances for children, young people and families

24. A JSC approach that seeks to shift resources to prevention will enable evidence to shape the component parts of the care pathway or child's journey such as prevention, recognition, assessment and interventions to be better understood by all stakeholders whether in relation to social care, education, additional support needs or health needs or a combination of these. It will facilitate a co-production approach that involves all key partners in the process of identifying potential efficiency savings, disinvestment opportunities or new service models. This will help community planning partnerships better understand what they need to plan for the middle distance and reinforce the benefits of a collaborative approach with neighbouring partnerships, where scale and costs are important considerations. Whether working to prevent or support, a local, cross sector, co-produced approach is necessary for the correct identification of need, coupled with an assessment of how the best personal outcomes and greatest public value can be achieved, particularly in the case of high cost low frequency needs.

25. Given the scope and complexity of a whole system JSC approach, evidence about the benefits achieved is necessarily diffuse and can be long in coming. The impact can relate to improved personal outcomes or improved system outcomes such as better joint working, greater efficiencies, or more effective approaches. Impact will also be reflected across sectors, care groups and pathways. Any related financial benefits may not be immediately apparent or may be reflected in cost reductions or cost efficiencies for different players in the system, and therefore be more or less apparent and significant to any one party.