

Clackmannanshire and Stirling Integrated Children's Service Plan 2015-2018

Consultation and Engagement Report



1 Background

- 1.1 Clackmannanshire and Stirling Community Planning Partnerships agreed to develop a shared Integrated Children's Services Plan, to agree collective outcomes and improvement priorities to better the wellbeing of children and young people across both Council areas.
- 1.2 Partners agreed at the outset that the full involvement of all children and young people, their parents, families, carers and the wider community would be essential in the development and delivery of the plan. Partners also agreed that involvement of all relevant public and third sector organisations was also integral to the achievement of outcomes.
- 1.3 Therefore consultation and engagement on the drafting of the plan was planned from the outset. A multi-agency delivery group was formed to produce the draft plan, and to oversee a comprehensive consultation period co-ordinated through a consultation and engagement framework.

2 Delivery Group

- 2.1 A multi-agency group was responsible for production of the draft plan. This group involved representatives from:
 - Clackmannanshire and Stirling Council Children, Young People and Education Services
 - Clackmannanshire and Stirling Council Social Services
 - Clackmannanshire Council Strategy and Customer Services
 - Stirling Council Communities and Partnerships Service
 - NHS Forth Valley
 - Police Scotland
 - Clackmannanshire Third Sector Interface
 - Stirlingshire Voluntary Enterprise
- 2.2 The group worked with a dedicated consultant to ensure that progress on the plan was prioritised, and input co-ordinated. Involving key partners in this way helped to build ownership and commitment to the plan and its implementation. It also ensured wide ranging input and consultation 'reach' into main organisations.

3 Consultation and Engagement Framework

- 3.1 A consultation and engagement framework was agreed to plan and co-ordinate engagement on the draft plan. The purpose of engagement on the draft plan was agreed as being to:
 - Ensure key partners and stakeholders are informed
 - Engage key partners and stakeholders in ownership of outcomes
 - Encourage comment and input

3.2 The framework also helped partners to communicate a shared set of messages, both internally within their organisations, and externally for children, young people, families and communities:

Organisationally

- Community planning approach- shared outcomes, early intervention, integrating resources
- Partners working together for children, young people, their families and carers, and their communities
- Tackling inequalities is our greatest challenge
- Delivers on Getting it right for every child (GIRFEC) and the requirements of the Children and Young People (Scotland) Act 2014

For children, young people and families

- Partners working together for children, young people, their families and carers, and their communities
- Tackling inequalities is our greatest challenge
- Nurture, respect and be ambitious for the future of our children and young people
- Create the right mix of opportunities for children and young people to become confident individuals, successful learners, responsible citizens and effective contributors
- Improving life through learning

3.3 The key elements of the framework are summarised in table 1 overleaf. The consultation and engagement period ran from 11th December 2014 until 27th March 2015. A common set of resources was agreed for use, to make sure that there was clear evidence of the shared commitment represented by the draft plan.

3.4 Partners were encourage to use the resources internally within their own organisations. Feedback from this internal activity was received from the majority of partners.

3.5 Partners were also encourage to attend the external facing meetings, with communities, service users, third sector organisations, community planning partners and Elected Members. In practice, both local authorities and both third sector interfaces were able to support this part of the consultation and engagement more fully than other partners. Scottish Fire and Rescue Services however, despite not being part of the main planning group, did offer to support the engagement programme, and undertook active internal communications.

Table 1 Consultation and engagement framework summary

Audience	<ul style="list-style-type: none"> • Elected Members • Strategic Leads • Partner agency staff • Communities • Children and young people • Families and carers • Third sector organisations
Resources	<ul style="list-style-type: none"> • Draft plan • Summary easy read version • Online surveys • Respondent Questionnaire • Powerpoint presentation

Methods	<ul style="list-style-type: none"> • Partner websites and intranets • Dedicated email • Facebook and Twitter • Local press • Communities ebulletins • Third sector bulletins • Community Portals • Survey monkey • Elected Member briefings • Partner workshops • Third sector briefings • Community Council meetings • Parents group meetings • Youth group meetings • Public meetings • Staff team briefings- schools, social work, NHS, Fire and Rescue, third sector • CPP task group briefings
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4 Engagement Overview

- 4.1 A summary of specific consultation events and processes is outlined in table 2. In total, 14 events were held, 28 stakeholder briefings took place and 11 information giving and survey opportunities were delivered. 39 on line surveys were completed.
- 4.2 Responses indicate that interest in the draft plan was higher in distinct service user groups than with the general public. For example, third sector organisations that deliver services, and parents with children who use services attended sessions and offered areas of agreement and improvement.
- 4.3 The wider community did not attend public meetings, although on line feedback was used.
- 4.4 Staff within Education Services and Social Services participated most heavily in the consultation; closely followed by community planning partners including NHS Forth Valley, Skills Development Scotland and Scottish Fire and Rescue Services. Third sector partners took time to respond, both individually and co-ordinated via the Third Sector Interfaces.
- 4.5 Elected Members in both local authorities attended briefing sessions and identified improvements they would wish to see prioritised in the final plan.

Table 2 – consultation events and processes delivered

Events	<ul style="list-style-type: none"> • All partner workshops (x3) • Third sector fora (x3) • Public meetings (x4) • Learners event • Parents events (x3)
Briefings	<ul style="list-style-type: none"> • Elected Members (x3) • Corporate Parenting Group • Tackling Poverty and Inequalities Group • Alcohol and Drugs Partnership • Child Protection and Committee voluntary and independent sector sub group • Youth Services (x2) • School staff teams (x5) • ASN Managers

	<ul style="list-style-type: none"> • Youth Justice Team • Criminal Justice Team • Children and Families Team • Community Health Partnership (x3) • NHS Forth Valley strategy and development review groups (x3) • Health Visitors (x2) • GP sub committee • NHS FV Child Protection Department
Information/survey opportunity	<ul style="list-style-type: none"> • Communities ebulletins • Third sector bulletins (x2) • Scottish Fire and Rescue Service website • NHS website • Council website (x2) • Survey monkey • Citizen space • Local press • Facebook

5 Impressions and improvements

- 5.1 Overall, the draft plan was welcomed and well received. The majority of respondents recognised the strategic need for the plan, and supported the partnership commitment it demonstrated. Table 3 illustrates comments received from a range of partners.
- 5.2 Respondents understood the relationship between evidence, outcomes and improvement actions, and agreed that the plan offered a common strategic framework in which to progress collaborative action. The need for strategic commissioning to follow from the framework was raised a number of times. Third sector partners in particular highlighted the importance of shared resourcing of agreed priorities.
- 5.3 Staff teams and third sector organisations were pleased to see good practice recognised, and supported the draft plan as a context for their future operational priorities. The importance of a multi- agency approach was stressed, with a key role for third sector organisations in both strategic planning and commissioned service delivery.
- 5.4 The importance of working with parents, carers, families and communities to build resilience was highlighted, and early intervention and prevention suggested as the most effective way to deliver long term resilience.
- 5.5 There was agreement that shifting to a preventative emphasis was challenging, particularly in the short to medium term when high end, more acute care and support is still required.
- 5.6 Child poverty was raised a number of times. Respondents stated that there is a growing body of evidence that child poverty will rise significantly during the life span of the plan, and that therefore intervention measures must be implemented. Child poverty, reducing inequalities and building resilience were the most common thematic issues raised.
- 5.7 A number of respondents indicated the importance of building employability skills, through raising attainment and sustaining positive destinations.
- 5.8 Stylistically, most respondents requested a shorter final plan, with the inclusion of case studies to better demonstrate meaning.

Table 3- illustrative comments from consultees

Comment	Source
We fully support the plan and would welcome working more closely with all concerned	Third sector partner
I would welcome a transparent commissioning strategy	Third sector partner
Fully agree as long as it is targeted and resources are used wisely	On line respondent
The third sector has a plethora of knowledge, skills and abilities and could be contracted more to work in partnership with Council services	Third sector partner
Partners need to be challenging and supportive of each other	NHS partner
Good to see that prevention and early intervention are embedded in the plan	NHS partner
Really pleased that the work done with parents under the early intervention/prevention strategy has been recognised	Education services partner
Shared resources should follow agreed priorities	On line respondent
Partnership may be challenged in terms of resources	Third sector partner
Child poverty is a big issue for many children growing up in Clackmannanshire and the plan needs to reflect this	Clackmannanshire Elected Members
Plan needs to be more child centred or a children's version available	Social Services partner
Links between adult services and children's services could be more explicit	Social Services partner
Child poverty needs a specific improvement action, especially in- work poverty and low income families	Stirling Elected Members
Lot of work in getting school leavers in to positive destinations but sustaining this proves harder	Skills development partner
Wood Commission Report 'Developing Scotland's Workforce' should be more recognised	Education Service partner

6 Implementation

6.1 Most respondents gave ideas for how the finalised plan could best be implemented. These suggestions provide a rich source of material and will be used for effective action planning, performance measurement and evaluation.

6.2 A number of shared approaches emerged:

- Continually gather and refine evidence and track improvement
- Comprehensively engage the third sector
- Deliver a shared commissioning strategy based on an evidenced knowledge of what works
- GIRFEC should demonstrate senior leadership and buy in
- Governance should be more than just reporting- it should analyse, review, challenge to deliver
- Work with families and communities
- Plan for all children and young people, with a focus on the most vulnerable
- Establish the collaborative gain

7 Conclusion

- 7.1 The consultation and engagement on the draft Integrated Children’s Services Plan was planned and supported in a partnership context. It benefited from a shared set of resources and a range of engagement methodologies.
- 7.2 Inevitably some partners were able to carry more of the workload than others, and some communities, service users and partner organisations were more engaged than others. However the draft plan was welcomed and the priorities agreed. Suggested common areas of rework have been revised in the final version, and the many suggestions for implementation will be used to shape delivery. These are summarised in tables 4 and 5 below.

Table 4- summary key changes

Retained focus	<ul style="list-style-type: none"> • Partnership working • Working with children and young people • Working with families, carers and communities • Importance of third sector as strategic planners and commissioned service deliverers • Early intervention and prevention • Evaluation, monitoring and review • Shared resourcing, following agreed priorities
Increased focus	<ul style="list-style-type: none"> • Child poverty • Employability

Table 5- summary implementation ideas

Priority Area	Ideas “ “
1. Improve support in early years so that all children reach appropriate developmental and social milestones	<ul style="list-style-type: none"> • Increase communication between statutory partners and third sector • Better links between adult and child services • Breakfast clubs for little ones who live in poverty • Spotting health abnormalities sooner • Better links with Social Work and Police at early years • Parenting skills for young parents
2. Ensure that GIRFEC principles and processes are embedded in all partner organisations	<ul style="list-style-type: none"> • Need for GIRFEC training both single and multi-agency • There still needs to be more publicity and information around GIRFEC: what it means and what it is trying to achieve • Better access to information
3. Improve processes for assessing risks to ensure that all children and young people are afforded the protection and support they need when they need it	<ul style="list-style-type: none"> • Risk awareness sessions fundamental – should include internet safety • All schools should have pupil support available at all times • More multi-agency training should be considered to encourage statutory and third sector agencies to work together • Take every report seriously • Need to be better informed about risks around social media • Young people taught how to cope with risks • More people to go to if a problem arises
4. Improve life chances for looked after children and young people	<ul style="list-style-type: none"> • Third sector partners could be contracted to work in partnership with Council services • Basic life skills, mostly at transition points • Low attendance spotted quickly and acted on • More nurturing from teachers
5. Improve health and	<ul style="list-style-type: none"> • Transition planning to remain a priority for children with additional support

<p>wellbeing outcomes for our most vulnerable children and young people</p>	<p>needs</p> <ul style="list-style-type: none"> • Schools to be more multi-agency environments with much improved access to health services/information, especially mental health • All schools should have quiet spaces • Schools should be places where young people can access other services like nurses or counsellors • Schools must teach pupils about PSE and they should bring in other people to support it • Pupils should help design PSE • Tell services when they deliver poor services • More support for disabled children in all schools • Police officers in schools-helpful, identifiable, and approachable • Bigger focus on emotional health
<p>6. Improve outcomes for the lowest 20% of children in nurseries and schools</p>	<ul style="list-style-type: none"> • More work with the family unit to reduce reliance on third sector and Council services • More kinship Parents Projects need to be developed • Free lunchtime/after school clubs • Quick identification and support • Remove stigma
<p>7. Improve the number of positive destinations achieved by our most vulnerable children</p>	<ul style="list-style-type: none"> • Much improved career advice • More investment in children's advocacy • More services for children who have suffered abuse • Needs to have a more holistic approach involving the whole family especially where there are children with additional support needs • More frequent awareness events for all pupils e.g. young carers, autism • Peer mediation • More specialist input e.g. dyslexia • Wide range of support • Less negative reaction to lower attainment

