

# Integrated Children's Services Plan

2015 – 2018



## Foreword

Welcome to the first Integrated Children's Service Plan for Stirling Council and Clackmannanshire Council areas for 2015 – 2018.

Clackmannanshire and Stirling Community Planning Partnerships (CPPs) have taken the decision to produce a single integrated children's services plan. The development of this plan follows on from the progressive action taken to establish shared Education Services and Social Care Services across the two Council areas. The plan meets our requirement under the Children and Young Persons (Scotland) Act 2014 to set out plans for the provision over the period of all children's services.

As Community Planning Partners our vision for children and young people is to work together with them, their families and communities to nurture, respect and be ambitious for their future. We want to ensure our children and young people have the right mix and balance of opportunities to become confident individuals; responsible citizens; effective contributors and successful learners.

As partners we want to build and strengthen the capacity, skills and resilience of communities, families and children. Whilst we intentionally target support to vulnerable children and young people to achieve equality of outcomes and opportunities, our plan is focused on supporting all children and young people to reach their full potential in life

The content of the plan reflects national and local strategic priorities and outcomes. Crucially, it has been aligned to the Single

Outcome Agreement in place for both Council Areas. This is a high level plan that shows how our partnerships are working across both areas

and details how we will collaborate and provide direction, leadership and governance in the delivery, monitoring and review of the plan.

### The partners are:

- ◆ Stirling Council
- ◆ Clackmannanshire Council
- ◆ NHS Forth Valley
- ◆ Police Scotland
- ◆ Scottish Fire and Rescue Services
- ◆ Scottish Children's Reporters Administration
- ◆ Stirlingshire Voluntary Enterprise
- ◆ Clackmannanshire Third Sector Interface



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## 1. Purpose

This joint single plan is for:

- ◆ All children, young people and families living in Stirling and Clackmannanshire Council areas
- ◆ All staff working in agencies that provide services to children, young people and families living in Stirling and Clackmannanshire Council areas

This 3 year plan sets out our vision and also establishes the foundation and direction for future plans. It delivers on our requirement under the Children and Young Persons (Scotland) Act 2014 to set out how services are provided locally in the way which best safeguards, supports and promotes the wellbeing and rights of children and young people. Partner agencies recognise the challenge and step-change needed over the lifetime of this plan to fully implement the Act.

## 2. Values And Vision

Partners are committed to a set of core values and will work together to ensure that:

- ◆ We will put children and young people at the centre of our thinking and action
- ◆ We will listen to children, young people and families and involve them in decisions that affect their lives
- ◆ Children, young people and families will be supported to secure outcomes for themselves

Our vision for all children and young people across Stirling and Clackmannanshire is to work together with them, their families and communities to nurture, respect and be ambitious for their future.

We will progress our vision within the context of our Single Outcome Agreements, with a clear understanding of the inequalities that exist in both our areas. Reducing the polarity of wealth and opportunity is a particular challenge over the lifetime of this Integrated Children's Services Plan, in times of welfare reform and austerity. Our shared aim is to tackle inequalities based on evidence of increasing child poverty and the impact of benefit changes across our

communities. We recognise the importance of connected, informed and evidenced based services for all families, but particularly those who are disadvantaged. This requires a commitment to shift resources to early intervention and prevention. We will target our efforts towards those who are in greatest need, and support them to overcome social, physical, educational, economic and geographic barriers that create inequality whilst ensuring a universal quality provision for all.

We will make sure that the early stages in a child's life are as positive as they can be, with an understanding that positive interventions at this stage can have a substantial impact on how a child grows and develops. At the same time, we will work together to do the best for our children and young people of school age, and as they transition to adulthood.

We recognise our particular responsibility to our looked after children and young people, and we will support and care for them as they grow up and take their first steps towards independence and self - reliance.



We will manage the implementation of our Integrated Children's Services Plan through the Community Planning Structure, and will establish governance and accountability that improves collaboration amongst partners, provides transparency, challenge, accountability and effective use of shared resources. We will particularly prioritise our service delivery towards:

- ◆ Early intervention and prevention
- ◆ More effective partnership working around a smaller number of key outcomes, supported by workforce development
- ◆ Targeting intervention to where there is greatest need and potential positive impact
- ◆ Community and third sector involvement and capacity building

### 3. Context

The State of the Nation Report 2014: Social Mobility and Child Poverty Commission reports that whilst Scotland has lost its place as the country with the lowest levels of child poverty in the UK, 19% of all Scottish children live in relative poverty. This equates to 180,000 children, 30,000 more than the year before. 20% of Scottish children live in absolute poverty, a rise to 200,000 from a figure of 170,000 in 2013. The Institute of Fiscal Studies project significant increases of an additional 50,000 children in relative poverty by 2020. The Child Poverty Map of the UK (Loughborough University's Centre for Research in Social Policy Report, "**End Child Poverty**", August 2014), looks at the extent of child poverty based on disposable income after meeting housing costs – an essential family expenditure – which show, for the first time, the real hidden extent of families struggling to make ends meet. The new statistics highlight the extent to which housing costs push families into poverty. Child poverty campaigners also maintain that UK government tax and benefit policies are set to drive up to 100,000 more children in Scotland into poverty.

The report identifies **Clackmannanshire Council area as having 26% of children living in poverty whilst the figure for Stirling Council area is 17% of children living in poverty. There is a wide variation across Stirling in terms of levels of poverty.** 39% of Clackmannanshire pupils live in the top three most deprived areas and 15% of children live in workless households.

The Child Poverty Strategy (SG 2011) describes how maternal well-being and the social and emotional health and wellbeing of children are often very closely linked to material and social disadvantage and poor educational outcomes. The impact of welfare reforms are far-reaching in terms of drastic reduction in family incomes and the consequences for the physical and mental health of families and children.

As partner agencies we aim to continue strengthening the quality of our universal services and will do so whilst concentrating our efforts and targetting interventions towards addressing the significant health, social and economic factors which exist in both areas. We want our children and young people to experience a healthy, happy and safe childhood, to experience positive learning and development opportunities that allow them to move forward into adulthood with the requisite skills, abilities and ambitions that will serve them and their communities well in the future.

**Factors that influence how we will target our service delivery:****Evidence – Stirling Council area****Pre-birth and early years**

- ◆ Concentrations of very young mothers (16/17) in areas of deprivation.
- ◆ Teenage pregnancy rate per 1000 relevant female population at 3.1 for under 16 year olds and 23.1 for under 18 year olds against a Scotland figure of 6.1 and 31.3 respectively.
- ◆ A higher proportion of under-fives live in our most deprived areas than that of the general population.
- ◆ A growth in around 5% of under threes is expected to 2020.
- ◆ 16% of under 4s live in households dependent on benefits. In Bannockburn catchment this is 24%, in Dunblane it is 3%.
- ◆ 34.2% of babies are exclusively breastfed at 6 to 8 weeks which is above the national average of 26.3%
- ◆ An estimated 19% of P1 children are overweight with a child obesity rate in P1 of 7.6% (Scottish average 9.8%)

**School Age**

- ◆ There are 6585 primary school pupils, 5731 pupils in secondary schools and 23 in special schools and 86 in provisions for SEBN and ASD
- ◆ 2324 children / young people are on staged intervention; 1192 primary, 1132 secondary
- ◆ 500 (4%) pupils are on stage 3 of intervention; 149 (1.2%) are on stage 4
- ◆ Most common factor giving rise to additional support needs is social, emotional and behavioural needs
- ◆ 13.49% of primary school children and 11.17% of secondary school children are registered for free school meals.
- ◆ Overall attainment is above national average although challenges remain for children and young people who live within deciles 1 and 2 by SIMD
- ◆ Primary school attendance (95.9%) is consistently higher than the national average; secondary attendance (92.5% is currently above the national average
- ◆ 6% of 15 year olds are regular smokers (4% decrease from 2010) and 2% better than the Scottish figure
- ◆ 22% of 15 year olds had drunk alcohol in the week prior to the survey, a 10% decrease from 2010, although remains 3% higher than the Scottish figure
- ◆ 22% of 15 year olds reported that they usually drink once per week which shows no change from 2010 and is less favourable than the Scottish figure of 19%.
- ◆ 10% of 15 year olds reported using drugs in the last month, a figure that remains static from 2010 and is comparable with the Scottish figure
- ◆ 12.7% expected increase in under 16s by 2037

## Evidence – Stirling Council area

## Youth transition

- ◆ Overall 91.5% of school leavers enter a positive destination, a rise of 1.6% in comparison with 2012/13. This is 0.8% below the national average of 92.3%. Stirling Council is 23rd of 32 local authorities for the percentage of learners entering a positive destination.
- ◆ The percentage of leavers who are unemployed (seeking employment or training) is 7.2%, 1.5% lower than 2012/13 but 0.9% higher than the national average and is 7th highest of all
- ◆ leavers reported as unemployed seeking employment or training in Scotland this year.

## Child Protection / Looked after children

- ◆ Compared with Scotland, Stirling has a significantly higher rate of child protection referrals with parental alcohol or drug misuse. The rate of children (per 1000) on the child protection register in 2013 was 3.6 against the national average of 2.9.
- ◆ Number of children and young people on the Child Protection Register at November 2014 is 59.
- ◆ Total number of children and young people referred by Police Scotland to partner agencies with Child Concern VPD (Vulnerable Person Database) reports for April to October 2014 was 778
- ◆ Number of Looked after children at August 2013 was 246 which is 1.3% of the 0 to 17 population against a Scottish average of 1.5%

## Evidence – Clackmannanshire Council area

## Pre-birth and early years

- ◆ Concentrations of very young mothers in areas of deprivation.
- ◆ Teenage pregnancy rate per 1000 relevant female population of 6.3 for under 16 year olds and 42.3 for under 18 year olds compared with a rate of 6.1 and 31.3 respectively.
- ◆ The number of children under 5 has risen by 7.5% since 2001.
- ◆ 14 of Clackmannanshire's data zones fall in the 15% most deprived areas in Scotland and 26% of children in Clackmannanshire live in poverty. The highest rates of child poverty are evident in Alloa, Sauchie and Tullibody.
- ◆ Clackmannanshire has the 6th lowest rate of breastfeeding in Scotland (n=39). 19.8% of babies are exclusively breastfed at 6 to 8 weeks compared to the national average of 26.3%.
- ◆ An estimated 20% of children of P1 children are overweight with a child obesity rate of 9.7% (Scottish average 9.8%)

## Evidence – Clackmannanshire Council area

## School Age

- ◆ There are 3935 primary school pupils, 2605 in secondary schools and 24 in special schools and 94 in provisions for SEBN and ASD
- ◆ There are 1084 children / young people on staged intervention; 602 primary, 482 secondary
- ◆ 435 (6.6%) pupils are on stage 3 of intervention; 119 (1.8%) are on stage 4
- ◆ Most common factor requiring additional support are social, emotional and behavioural needs and language
- ◆ 25% of primary school children and 19% of secondary school children are registered for free school meals
- ◆ Overall attainment is slightly below national averages.
- ◆ Primary school attendance (93.5%) is currently above the national average; secondary attendance (97.1%) is currently slightly below national average
- ◆ 8% of 15 year olds are regular smokers which is comparable with the Scottish figure
- ◆ 20% of 15 year olds report drinking in the week prior to the survey which is 1% higher than the Scottish figure
- ◆ 9% of 15 year olds report using drugs in the last month which is comparable with the Scottish figure
- ◆ 9.2% expected decline in under 16s by 2037

## Youth transition

- ◆ Overall the percentage leavers entering a positive destination is 92.8%, a rise of 4.5% compared with 2012/13. This is 0.5% above the national average of 92.3%. Clackmannanshire is 15th out of 32 local authorities for the percentage of leavers entering a positive destination
- ◆ The percentage of leavers who are unemployed seeking employment or training is 6.6%, 2.0% lower than 2012/13. This is 0.33% higher than the national average

## Child Protection / Looked after children

- ◆ Compared with Scotland, Clackmannanshire has a significantly higher rate of child protection referrals and referrals to the Scottish Children's Reporter Administration
- ◆ Clackmannanshire also had the highest rate in Scotland in 2013 of children on the child protection register at 5.4 per 1000 children against a Scottish average of 2.9.
- ◆ Number of children and young people on the Child Protection Register at November 2014 is 44
- ◆ Total number of children and young people referred by Police Scotland to partner agencies with Child Concern VPD (Vulnerable Person Database) reports for April to October 2014 was 669.
- ◆ Number of Looked after children at August 2013 was 186 which is 1.8% of the 0 to 17 population against a Scottish average of 1.5%



## 4. Strategic Drivers

This three year plan has been developed to deliver and contribute towards a range of key local and national strategies, policies and priorities for children, young people and their families including:

- ◆ Stirling and Clackmannanshire Single Outcome Agreement (SOA) priorities.

Community Planning Partners are committed to working together towards the strategic outcomes defined within the Single Outcome Agreements, (SOA) 2013 - 2023.

STIRLING	CLACKMANNANSHIRE
Priority Outcomes:	
<ul style="list-style-type: none"> <li>◆ Improved outcomes in children’s early years</li> <li>◆ Improved support for disadvantaged and vulnerable families and individuals</li> <li>◆ Reduced risk factors that lead to health and other inequalities</li> <li>◆ Improved opportunities for learning, training and work</li> </ul>	<ul style="list-style-type: none"> <li>◆ Our communities are more inclusive and cohesive and our public services are improving</li> <li>◆ Vulnerable people and families are supported</li> <li>◆ Health is improving</li> <li>◆ People are better skilled, trained and ready for learning, training and work</li> </ul>

### ◆ National Policies:

- ▶ **Getting it Right for Every Child.** GIRFEC is a national programme that aims to improve the wellbeing of all children and young people by improving assessment, decision- making, planning and multi-agency working
- ▶ **Early Years Framework (EYF)** is based on the principle that every child deserves the best start in life and the support that enables them to fulfil their potential. Children develop quickly in the early years and a child’s experiences between birth and age 5 have a major impact on their future life chances

- ▶ **Curriculum for Excellence programme** aims to ensure that all children in Scotland develop their capacities as: successful learners, confident individuals, responsible citizens and effective contributors to society.
- ▶ **National Parent Strategy**
- ◆ **NHS policies** including NHS Forth Valley Annual Plan and Local Delivery Plan 2020 (April 2014), CEL 13 Refocusing role of Health Visiting and School Nursing Services (June 2013)
- ◆ **Children and Young People (Scotland) Act 2014**
- ◆ **Council policies** including the Corporate Parenting Strategy and the Autism Strategy (Draft)

## ◆ Corporate Priorities

### Stirling

- ◆ Increasing focus on early intervention to help families in need
- ◆ Improving outcomes for the lowest performing twenty per cent of children in nurseries and schools
- ◆ Providing additional nursery and out of school places throughout Stirling area to support working families
- ◆ Being a good corporate parent
- ◆ Promoting opportunities and support access to physical activity and sport for all

### Clackmannanshire

- ◆ All children in Clackmannanshire have the best possible start in life, focussing particularly on birth to three years, with particular emphasis on the importance of good parenting
- ◆ Our school children are successful learners
- ◆ Our opportunities are not limited by poor health, and people have a good sense of wellbeing
- ◆ Social circumstances for those in most need are improved
- ◆ We actively seek opportunities to better plan and work jointly with partners with a particular focus on efficiency and preventative spends

## 5. How Have We Done

Services across the Community Planning Partnership have developed performance, self-evaluation and audit frameworks and may be subject to external evaluation or scrutiny. Section 1 of the "Supporting Documentation report" provides examples of a range of identified good practice from agencies and services.

### External scrutiny

The Care Inspectorate published separate reports in May 2014 on the outcome of a Joint Inspection of services for children and young people in Stirling and Clackmannanshire. The findings were as follows:

#### Strengths common across Stirling and Clackmannanshire:

- ◆ Staff across all services have a very strong and shared commitment to improving the safety and wellbeing of children. They have developed a positive culture of working together meaningfully to the benefit of children, young people and their family
- ◆ The high quality of support to children, young people and families to improve mental wellbeing to assist them to overcome trauma

Strengths specific to each area:

#### Stirling:

- ◆ Improvements in the educational attainment for children and young people and improving trends in positive destinations for young people leaving school year on year. Gaps are closing between the lowest attainment levels and higher achievers and the educational attainment of looked after children is improving over time.

#### Clackmannanshire

- ◆ The effective use made of community skills and resources to overcome health inequalities and strengthen families such as in Bowmar and Hawkhill in Alloa.

#### Areas for Development common across Stirling and Clackmannanshire:

- ◆ Ensuring that all children and young people are afforded the protection and support they need by improving, as a matter of priority, the process for assessing risks
- ◆ Improving plans for individual children and young people to manage risk and meet their needs
- ◆ Providing all vulnerable children, young people and their families with the help and support they need at an early stage when they are experiencing difficulties
- ◆ Introducing and implementing systematic and robust processes for the joint strategic planning of integrated children's services
- ◆ Providing strong collaborative leadership to increase the pace of change and improvement across services for children and young people

## 6. What We Are Doing

Across the CPPs there are initiatives and developments which demonstrate our shared approach and commitment to early intervention and prevention and targeting support to the areas of greatest need.

The following Case Studies provide good examples of the range of interventions support for children and young people. Section 2 in Supporting Documentation provides fuller information about the range of initiatives and developments across the partnerships.

### Case Study 1 - Parenting

17 year old Sally enrolled with the Family Nurse Partnership when she was 16 weeks pregnant and living with her partner John, age 20 years. The couple met the previous year in a hostel. A pre-birth planning meeting took place at the 28th week of pregnancy. A few days before, John received a four month prison sentence for breaching his probation order.

Sally attended all midwifery appointments and required regular scans due to low BMI. Her baby was small for dates. Sally kept all appointments with her Family Nurse, enjoying the pregnancy facilitators used by the Family Nurse Partnership. During the fortnightly home visits, Sally was helped to understand the impact of smoking in pregnancy particularly in relation to small birth weight and the danger of passive smoking. As a result, Sally decided to stop smoking at 30 weeks gestation and make her flat a smoke free zone. Further scans began to show progress with the baby gaining weight as expected. This continued throughout her pregnancy resulting in her baby being born at full term with a normal birth weight.

Sally's baby is now four months old and continues to thrive, reaching all developmental requirements appropriate to his age. Sally has continued to fully engage with the Family Nurse Partnership programme; there is evidence of strong, secure attachment with both parents. Both parents are able to respond to their baby's cues, in a warm, sensitive, caring manner responding positively to his developmental needs. Both Sally and John are enjoying being new parents and have said without the Family Nurse Partnership involvement, "they would never have known what to do with a new baby".

### Case Study 2 – Young Carers

Ian is a 15 year old who cares for his dad who has chronic bowel disease and mobility issues. He lives with both his parents in a rural area. His caring role had impacted on his school attendance and he came to the attention of Social Work Services. His social worker referred him to Stirling Carers Centre's Young Carers Service. Both SWS and the Carers Centre focused on supports to meet Ian's needs and reach his full potential.

He received a Young Carers Support Plan through which he could discuss his caring role, the impact on his life and identify the outcomes he wanted. The integrated assessment process identified that he worried a lot about his dad's condition and had been bullied at school due to his caring role. Attending the Young Carers Group gave Ian regular respite from his caring role. The Young Carers Services worked with his school to identify supports to improve his attendance and attainment.

Within school Ian received 1:1 support from the Young Carers Education Officer to address his concerns, and to develop appropriate coping strategies to build on his strengths and promote resilience. In addition, his School have an appointed teacher who has taken on the role of their 'School Young Carers Co-ordinator', ensuring Ian, and other young carers, have someone to approach and talk to who has an understanding of their caring roles, and can co-ordinate school supports. The partnership approach has ensured Ian's views were listened to and that his needs were met. Ian is now achieving a higher level of both attainment and attendance. Through partnership support and intervention Ian now feels happier, less stressed, less isolated, more included, and more able to cope in his caring role.

### Case Study 3 – Early Years

Audrey is a young woman who has two children under the age of 5 years and has been struggling to cope to look after her children, and had also been exposed to domestic violence from a previous partner. She was referred to the Multi-agency Early Years Screening group by her Health Visitor for support.

The Screening group agreed a package of support would be put in place and allocated Audrey Outreach Support by her local Alloa Family Centre as well as support for domestic violence through the Domestic Abuse worker at Action for Children. At the first Outreach home visit it became apparent that mum and the children required additional support and a group care placement was also quickly organised for the children to have opportunities to mix and socialise with other children to support their ongoing development. Outreach support was co-ordinated through the staff from both services.

Audrey has been engaging well with services and her children are developing well within their group care placements. Audrey has been able to work with the Domestic Violence worker and the Family Centre Outreach worker whilst her children are in group care and this is enabling her to feel more confident about her abilities as a parent and how she manages the care of her children at home. It is also helping Audrey to understand the impact of the previous domestic violence on her and her children's behaviour.



### Case Study 4 - Esafety

Male pupil at a local High School posted information using social media about a family member. The information was shared with large groups of pupils within the school resulting in the pupil being assaulted by a peer and, latterly, a parent. Subsequently, the pupil failed to attend school. Work was undertaken with the individual concerned along with parents as part of the Esafety partnership strategy to make the internet a safer place for all, recognising rights and responsibilities. The individual initially insisted to school staff and parents he was not the author but after engagement recognised and accepted responsibilities online are the same as in life generally. Work was then undertaken with the school in its entirety with regard to online rights and responsibilities with delivery of workshops and presentations highlighting the power of social media, in particular. This partnership work between the School Based Officer (Police Scotland) and Education staff facilitated a return to school for the pupil concerned.

## 7. Priorities For Improvement

Through our monitoring, review and audit processes, and taking account of strategic and local priorities and the outcome of the most recent joint inspection, we have identified the following 7 priorities for improvement:

1. Improve support in early years so that all children reach appropriate developmental and social milestones
2. Ensure that GIRFEC principles and processes are embedded in all partner organisations
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
4. Improve life chances for looked after children
5. Improve health and wellbeing outcomes for our children and young people
6. Raise the attainment of all children and young people and reduce the gap in attainment
7. Develop our Young Workforce from age 3 – 18 enabling all pathways to lead to positive destinations, in particular, for the most vulnerable.

The action we will take in these specific areas is set out within 4 sets of Single Outcome Agreement priorities for children, young people and their families in place for Stirling and Clackmannanshire (as detailed in Section 4.)

## 8. How We Will Use Our Resources

### Commissioned services

Recent changes in policy and legislation has demonstrated a requirement to deliver services in a different way. Drivers include the implementation of Self Directed Support, Single Outcome Agreements, the forthcoming Integration of Health and Social Care as well as the financial efficiencies required in line with Making Clacks Better (MCB) in Clackmannanshire Council and Priority Based Budgeting (PBB) in Stirling Council.

In line with these policy and legislative changes, the focus of the Commissioning Group, reporting to the Children and Young People's Strategic Partnership Group (C&YPSPG), will be to build on existing partnership arrangements and further develop contract monitoring processes in place for commissioned services.

Feedback from commissioned providers will be used to inform and establish a transparent approach to commissioning services and one that will take account of capacity building issues across partner agencies including the Third Sector. The provision of outcome focused services which support early intervention and prevention, promote independence and increase user choice is the shared aim going forward.

The work of the Group will also include future planning and commissioning in relation to residential and care placement provision.

### Joint Resourcing

The Integrated Children's Services Plan sits firmly within community planning partnership arrangements in both Stirling and Clackmannanshire. It will therefore be taken forward within the governance requirements of the CPPs. Specifically, with regard to resourcing this means our aspiration is that:

- ◆ partners will share budget, investment and resource planning information at an early stage in the decision making process
- ◆ partners will agree how total resources can most effectively be deployed and aligned
- ◆ partners will consider resources in the broadest sense – financial, staff, buildings and other assets – and will bring the totality of that resource, including committed budgets such as education and acute care, to the partnership table
- ◆ partners will collectively resource joint outcomes in the Single Outcome
- ◆ Agreements, including aligning and pooling budgets, and joint commissioning where required

## 9. Delivery, Monitoring And Evaluation Of The Plan

Section 13 provides a diagrammatic representation of the Community Planning Partnership structure. Within the CPP structure, responsibility for planning, oversight, delivery and evaluation of the Integrated Children's Service Plan sits with the Children and Young Person's Strategic Partnership Group (C&YPSPG).

The C&YPSPG is multi-agency with representation from Education Services, Social Care Services, Forth Valley NHS, Police Scotland, Fire and Rescue Services, Housing Services, Stirling Voluntary Enterprise and Clackmannanshire Third Sector Interface. The C&YPSPG will move to a schedule of quarterly meetings once formal approval of this plan is in place. Until then a more frequent schedule of 6 weekly meetings will be maintained to monitor progress during the developmental stage.

The Strategic group is supported in its task by 6 reporting groups:

- ◆ Vulnerable Children and Young People
- ◆ Early Years
- ◆ GIRFEC
- ◆ ICSP/Continuous Improvement
- ◆ Raising Attainment
- ◆ Planning and Commissioning

The reporting groups will provide progress reports to each C&YPSPG meeting. Clear governance and accountability arrangements are in place and the C&YPSPG reports directly to the Stirling Leadership Group and the Clackmannanshire Alliance and will report on all aspects of plan delivery on a 6 monthly basis. The CPP structure diagram lists the areas of reporting responsibility that sit under each of the 6 reporting groups. With regard to the Vulnerable Children and Young People's Group, this includes a reporting mechanism for activities that will be delivered via the Alcohol and Drug Partnership (ADP) Children and Young People's action plan as well as the Child Protection action plan. Development work on a Joint Public Protection Forum is underway which will lead on child protection and other protection responsibilities and issues. There are direct links with the NHS Forth Valley Children and Young Peoples group, which will feed into some of the task groups. Chair of this group is the Director of Public Health for NHSFV.

Communication with the Third Sector takes place formally through the Children and Families Services Forum (CFSF) and the Third Sector will be represented on each of the reporting groups. This ensures that detailed best practise can be shared with the Third Sector as identified in all areas of the C&YPSPG,

and recommendations from the Third Sector will be fed back to the CPP, through the CFSF and each of the reporting groups

The CPPs also oversee action to address child poverty and this provides clear links to, and connectivity with, the Integrated Children's Services plan. The Tackling Poverty and Inequalities Group has two work streams, Financial Inclusion and Local Employment Partnerships (Stirling and Clackmannanshire).

The Continuous Improvement Group will have the lead role to report on performance and to analyse the evidence of the impact of action taken on outcomes for children, young people and families – in essence, what has been achieved and the difference this has made to individuals, families and communities

An overview of progress will be produced on an annual basis with a full mid-term review of the plan and outcomes scheduled at the 18 month point within this 3 year plan (October 2016). The outcome of the mid-term review will have a two-fold purpose:

- (a) Enabling a shift in focus of activities as required through evidence based findings
- (b) Using the outcome to inform the development of the next plan 2019 – 2022.

## 10. Engagement And Consultation Processes

As partners we recognise the need to put into place more systematic and inclusive engagement and consultation across Stirling and Clackmannanshire. Over the lifetime of this plan we will evidence the steps we have taken to and how we have used the view of children, young people, families and staff to better inform future service delivery and our approach to planning.

Early feedback on the construction of this plan was taken through a series of events and meetings with primary and secondary age children and young people. It also included a number of sessions with parents of children with additional support needs. The formal consultation process was conducted throughout January to March 2015 within and across all partner agencies. Sessions were held with CPPs, Elected Members, Community Forums and Open public events as well as on-line survey monkey questionnaire opportunities. This final plan reflects the outcome of these consultation processes and engagement from those working in the third sector who work directly with disadvantaged and disengaged individuals to find out what vulnerable and hard-to-reach children and young people need. A separate full report on the Consultation Process and outcome is available.

### What Works?

Adults being able to listen to us

PALS has been great because you get to get involved with lots and do volunteering work

Young Carers had a residential and I found it really helpful to get time away

### Thoughts for Service Managers

Consistent PSE lessons across schools covering alcohol, sexual health - perhaps delivered by someone other than a teacher

Need for students to have a better awareness of mental health

### What doesn't Work?

Decisions are made about us and without us being involved

Decisions are not explained to us

Going forward we will:

- ◆ Support and develop the use of Viewpoint within schools using wellbeing indicators
- ◆ Build on existing participation and engagement processes in Youth Services
- ◆ Take account of outcomes from engagement and participation established through the Corporate Parenting Action Plan and incorporate these into a wider consultation exercise to which we will commit on an annual basis with children and young people.

## 11. Our Outcomes For Children And Young People

**Improved Outcomes in Children's Early Years (Stirling) Our communities are more Inclusive and cohesive and our Public Services Improving (Clackmannanshire)**

**Priority for improvement 1:** Improve support in early years so that all children reach appropriate developmental and social milestones

Our commitment to partnership work is aimed at providing the most effective means to strengthen the confidence and capacity of all families and carers pre and post-birth. Positive and nurturing early life experiences are key factors in enabling children to set off on a life path that is likely to reduce the need for later and, critically, more expensive interventions.

The Parenting and Family Support Strategy, currently in development, will reflect the full range of services and planned initiatives. The ambition of the Early Years Collaborative (EYC) is to make Scotland the best place in the world to grow up in by improving outcomes, and reducing inequalities, for all babies, children, mothers, fathers and families across Scotland to ensure that all children have the best start in

life and are ready to succeed. Clackmannanshire and Stirling Community Planning Partnerships are fully engaged in the work of the EYC. The Third Sector plays a significant role in early year's provision through local groups and national organisations providing targeted supported, parental advice and the chance to learn new skills, subjects and information. The cross-cutting nature of the partnership to which the local EYC works is based on the recognition that families and communities experience multiple and interrelated barriers to well-being which are required to be addressed collectively. To achieve this, the partnership has adopted a whole systems, intelligence-led approach allowing services to be better focused on prevention and early intervention. Moving forward there will be one EYC across Clackmannanshire and Stirling Councils which we see as crucial in achieving transformational change in the way we deliver services to families and communities.

Based on our Early Years Framework and delivery of the Early Years Collaborative, we will model future developments on the good practice example of multi-agency work already in place with the Early Years Screening Group.



We will ensure similar provision is in place across both Council areas and we will build on the role the Third sector plays with regard to the provision of direct services for children and families.

## Supporting Plans And Strategies

- ◆ GIRFEC Implementation Plan
- ◆ Early Years Collaborative & Early Years Framework (2008) and Strategy
- ◆ NHS Forth Valley Annual Plan and Local Delivery Plan 2020
- ◆ Equally Well (2008)
- ◆ Health for all Children
- ◆ Parenting and Family Support Strategy
- ◆ Child Poverty Strategy (SG2011)
- ◆ Growing Up in Scotland (2013).
- ◆ NHS Forth Valley Nutrition Health Improvement Plan 2015-2017, which has a key workstrand of Maternal health and Early Years

## Supporting Activities

- ◆ Embed GIRFEC across all partner agencies
- ◆ CEL13 Refocusing role of Health Visiting and School Nursing Services
- ◆ Curriculum for Excellence
- ◆ Early Years Screening Group and Early Years Stretch aims.
- ◆ Stirling CPP Tackling Poverty and Inequalities Group and Local Employment Partnerships (Stirling and Clackmannanshire) and parenting, learning and support programmes e.g. Thrive Project in Stirling and community based learning programmes.
- ◆ NHS Forth Valley Infant Feeding Co-ordinator supporting Government target to increase breastfeeding rates
- ◆ Infant feeding training for Midwives and Health Visitors across NHS Forth Valley
- ◆ Childsmile programme from pre-school on

**Outcome 2: Improved Support for Disadvantaged and Vulnerable Families And Individuals (Stirling) Vulnerable People and Families Are Supported (Clackmannanshire)**

**Priority for Improvement 2:** Ensure that GIRFEC principles and processes are embedded in all partner organisations

**Priority for Improvement 3:** Improve processes for assessing risks to ensure that all children and young people are afforded timely protection and support needed protection and support needed

**Priority for Improvement 4:** Improve life chances for looked after children

The wellbeing of children and young people is at the heart of "Getting it right for every child". This approach uses eight areas of wellbeing in which children and young people need to progress in order to do well now and in the future. These are: Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible and Included. The emotional and physical wellbeing of children can be affected by a number of factors including poverty, domestic violence, parental substance misuse and/or mental ill health. Our commitment is to improve partnership work to focus on earlier and better identification of need and risk. Central to this is full implementation of the Integrated Assessment Framework and

National Practice Model. Immediate response to concerns raised about children and young people will continue to be addressed through the strong partnerships with Police, Social Care Services, Health and Education staff. A critical review of our current response to child protection referrals and screening of vulnerable children referrals will be undertaken to ensure our processes and referral pathways are effective. Larbert Police Station also accommodates all public protection units (PPU). The aim is to create a single point of contact for child protection referrals for all agencies to improve communication and promote a common understanding and consistency of response across the two local authorities. An initial Referral Discussions Steering Group has been established to oversee and review our processes to ensure all Named Persons access Vulnerable Persons Reports to review risks and needs. As a means to strengthen assessment of risks and needs we will give priority to improving chronologies ensuring information is integrated from other services including issues relating to parental substance misuse, mental health issues and/or domestic violence.

We are in the process of developing a structure and model for youth justice services. As part of that process, we are exploring a partnership/alliance model between the local authority and the Third sector with the aim of enhancing co-operation, co-ordination and targeting of services.

Our Corporate Parenting Strategy has identified priority actions to improve outcomes and life chances for looked after children and young people. We are taking steps to provide greater support and opportunities for achievement and attainment.

Our Corporate Parenting Strategy has identified priority actions to improve outcomes and we are taking steps to provide greater support and opportunities for achievement and attainment for looked after children and young people. Over the lifetime of this plan we want to see evidence of year on year improvement in targets we have set for looked after children. To further understand the educational experience and attainment of looked after children many of our secondary schools are participating in a joint project with the Centre for Excellence for Looked After Children in Scotland (CELCIS). Recognising Prior Learning (RPL) profiling with an advisor has been seen to increase resilience as well as awareness of skills and potential careers. Test of change methodology will determine the success of this pilot.

We also recognise as partners that we need to do much more to ensure young people participate fully in their pathway planning.

CELSIS is actively engaged with both Councils to progress issues in relation to permanency planning. We intend in the longer term to increase the number of internal foster carers and reduce the need to place outwith the local area and reduce the costs of such placements.. As partners we are very aware of the impact and associated costs of placing younger children in 'out of area' placements. We will carry out an options appraisal to consider scope to develop a more local residential resource that better meets the needs of young people enabling them to maintain family, school and social networks and also supports the transition process back into the community.

## Supporting Plans And Strategies

- ◆ GIRFEC Implementation Plan;
- ◆ Corporate Parenting Action Plan; Joint Inspection Action Plan;
- ◆ Raising Attainment Strategy;
- ◆ Forth Valley Alcohol and Drug Partnerships Strategy and Stirling and Clackmannanshire ADPs Delivery Plans;
- ◆ Stirling's Gender Based Violence Strategy and Clackmannanshire's Violence Against Women Partnership Strategy;
- ◆ NHS Forth Valley Annual Plan and Local Delivery Plan 2020;

## Supporting Activities

- ◆ Stirling CPP Tackling Poverty and Inequalities Group and Local Employment Partnerships (Stirling and Clackmannanshire); Clackmannanshire Community Safety, Support and Advice Services Money Support Worker post in partnership with EYF Multi agency Screening and Review Group (Clackmannanshire);
- ◆ roll-out Raising Attainment for All improvement methodology;
- ◆ work with Local Economic Partnerships to identify, support, track and reviews positive destination opportunities for looked after young people';
- ◆ Implementation of Action 15, Looked after Children and Young People: We can and we must do better Report (CEL 16). Refocusing role of Health Visiting and School Nursing Service.

**Outcome 3: Reduced risk factors that lead to Health and other inequalities. (Stirling Health is improving. (Clackmannanshire)**

**Priority for Improvement 5: Improve health and wellbeing outcomes for children and young people**

Our aim through improved partnership working is to reduce health inequalities between children and young people across Stirling and Clackmannanshire and to improve health and wellbeing outcomes.

Stirling and Clackmannanshire Councils have developed a 10 year Autism Strategy (currently in draft form) to ensure that children and adults with Autistic Spectrum Disorder are supported throughout their whole life journey to lead meaningful lives and are able to experience equal opportunities in terms of their learning, emotional and physical well-being and quality of life.

Children with disabilities face additional challenges in life and the transition from children's services into adult services has historically been the point at which delay or disruption may have occurred. A radical change has been agreed to create an Age Long Disability Pathway offering a seamless journey as a child moves into adulthood. When implemented, this new approach will focus on the child's needs and will not be restricted by service boundaries.

A significant number of Stirling and Clackmannanshire schools have achieved Health Promoting School (HPS) status and our aim is to increase the current level.

All primary schools deliver the "Food for life" programme which is designed to encourage positive attitudes towards food.

Action plans are delivering on the "National Active School Outcomes" to increase the number of children and young people participating in school and community sport. We are increasing capacity through the development of a network of volunteers to deliver sports in schools and the wider community in addition to increasing the amount of leadership opportunities available.

Curriculum for Excellence health and wellbeing framework underlines the importance of a 'health enhancing' school ethos and identifies Mental, Emotional, Social and Physical wellbeing as a key aspect characterised by care, respect, participation, responsibility and fairness for all. It highlights the responsibility of all professionals, partners and agencies working together towards the common goal of improving the health and wellbeing and life chances of children and young people. It describes the importance of embedding health and wellbeing across learning, whether this takes place within the school or other learning environment, at home or in the wider community.

We will tackle health inequalities by supporting and enabling children and young people to make positive choices in terms of their lifestyles which result in improved health and wellbeing outcomes. Our interventions will be targeted towards reducing risk-taking behaviours and the negative impact of obesity, smoking, substance misuse, unsafe sex and unintended pregnancy on young people and their families.

Clackmannanshire CPP's safety strategy priorities include further reducing the probability of domestic abuse through an early intervention and prevention approach including multi-agency staff training and assessing gender based violence training for young people within schools.

LAC Health Team worked closely with partner agencies to develop guidelines which aim to support staff, carers and professionals working with looked after children on a range of subjects. Included within this are Sexual Health and Self-Harm guidelines. Eating well guidelines offer residential carers support and advice for young people in residential care.

Peer Assisted Learners (PALs) are young people supporting other young people of a similar age and background. They encourage positive changes to the lives of young people. PALs are supported by Youth Services and provide the opportunity to learn from the young people they come into contact with and professional workers

### Supporting Plans And Strategies:

- ◆ Autism Strategy (Draft)
- ◆ Age-long Disability Pathway Report
- ◆ Education Service's Health and Wellbeing Strategy and Active School action plans
- ◆ Clackmannanshire Leisure and Sport Strategy 2013-2015
- ◆ Positive Coaching Scotland Strategic Plan;
- ◆ Substance Misuse Framework for Schools;
- ◆ Clackmannanshire Community Safety Strategy
- ◆ Clackmannanshire Violence against Women Partnership Strategy
- ◆ Stirling ADP & Safer Communities Tasking and Co-ordinating Group Action Plan
- ◆ Forth Valley Alcohol and Drug Partnerships Strategy and Stirling and Clackmannanshire Delivery plans
- ◆ NHS Forth Valley Annual Plan and Local Delivery Plan 2020. Health of Looked After Children (HOLAC) Action Plan for LAC Health Team
- ◆ Forth Valley Integrated Carers Strategy 2012 – 2015 and Clackmannanshire and Stirling Action plans.
- ◆ Scottish Fire and Rescue Service Youth Engagement Framework
- ◆ Sexual Health and Blood Borne Virus Strategy – NHS Forth Valley
- ◆ NHSFV Nutrition Health Improvement Plan 2015-2017, which has a key work strand of Maternal Health and Early Years.

### Supporting Activities:

- ◆ Delivery of Curriculum for Excellence
- ◆ ADP 'Hi5' initiative
- ◆ Youth Services Create multi-agency community project and PALs (Peer Assisted Learners)
- ◆ Implementation of Action 15, Looked after Children and Young People: We can and we must do better Report (CEL 16). Refocusing role of Health Visiting and School Nursing Services (CEL 13)
- ◆ Stirling CPP Tackling Poverty and Inequalities Group and Local Employment Partnerships (Stirling and Clackmannanshire).
- ◆ Delivery of Child and Adolescent Mental Health Training
- ◆ Roll out of Supporting Children and Young People in School who Self Harm Guidance
- ◆ Roll out of Relationships, Sexual Health and Parenthood Curriculum Framework
- ◆ Triangle Group for LGBTi Young People Partnership with LGBT Scotland and Youth Services
- ◆ NHSFV Stop Smoking Service for adults and children over 12 years who wish to stop ( includes free Nicotine Replacement Therapy), training to carers and staff working with families on second hand smoke
- ◆ Pre-school and school programmes to support mental health / resilience. Stress control groups run by all partners supporting parents and their children
- ◆ Community Wellbeing Partnership Team Activities



**Outcome 4: Improved Opportunities for Learning, Training And Work (Stirling) & People are Better Skilled, Trained and Ready for Learning, Training and Work (Clackmannanshire)**

**Priority for Improvement 6:** Raise the attainment of all children and young people and reduce the gap in attainment.

**Priority for Improvement 7:** Develop our Young Workforce from age 3 – 18 enabling all pathways to lead to positive destinations, in particular, for the most vulnerable.

There is a need to continue to improve the attainment and achievement of children and young people in Stirling and Clackmannanshire, particularly those from the most disadvantaged backgrounds. Economic, health, and social inequalities in Scotland are all factors in the attainment gap. The life chances of children and young people in Stirling and Clackmannanshire are often determined by their attainment and achievement in early years and at school.

In recognition of the need to break the cycle of disadvantage and to close the attainment gap between high attaining learners and the lowest 20%, Education Services has developed a Raising Attainment Strategy, aimed at improving the outcomes of those children and young people most at risk of not attaining expected minimum levels of attainment and achievement. The Strategy places a strong emphasis on working with partners to support learners at risk of under-performance.

The 'Developing Young Workforce' strategy recommends three key themes for nurseries and schools and these will become key drivers within our schools and nurseries.

- ◆ To further develop links with Forth Valley College and develop vocational approaches to learning.
- ◆ To increase employer engagement, possibly through learning communities.
- ◆ To increase work based and work linked learning opportunities.

All three themes should be developed within the 3 – 18 framework and can be supported within Learning Communities.

'Developing the Young Workforce – Scotland's Youth Employment Strategy' was published in December 2015 with a clear target to reduce 2014 levels of youth employment by 40% by 2021. In aiming to improve the economic picture both within Stirling and Clackmannanshire and across Scotland, the ambition is to go much further than simply returning to pre-recession levels of youth employment. The cost of youth unemployment is significant and although most young people do move into a positive destination there is a complex picture underneath this headline position, and one in which it is apparent that some groups of young people are particularly disadvantaged.

Young people from Scotland's black and minority ethnic community are more likely to experience unemployment. Half of all young people with a declared or assessed disability are in further education 9 months after leaving school. However, by age 26 they are four times as likely to be unemployed as their non-disabled peers. Looked after children are least likely to go into a positive destination after leaving school, 1 in 3 is unemployed 9 months after leaving school.

Within Stirling and Clackmannanshire, we have established a framework for taking forward the recommendations within the 3 key themes and these are now being implemented.

Positive Behaviour Policy asserts good relationships and positive behaviour across whole school communities are fundamental to the successful delivery of Curriculum for Excellence. The values and principles of this policy are set within a restorative approaches framework which focuses on prevention, responsiveness and targeted support and intervention as part of more long term and persistent difficulties.

Guidance is set out in terms of dealing with hurtful and bullying behaviours.

The Shared Education Service has a Staged Intervention/GIRFEC Child's Plan. This sets out the process for identifying, assessing, planning and reviewing how the additional support needs of children and young people will be met. Based on the GIRFEC practice model, the 4 stage approach starts with universal planning and support for all children and young people with a graduated increase in intervention through the enhanced, targeted and intensive stages.

Partners fully understand that education, employment and income are crucial factors in preventing and eradicating social inequality. In the Stirling Council area 9.93% of 16 to 24 year olds are in receipt of out of work benefits and in more deprived areas, youth unemployment can be at significantly high levels. Within Clackmannanshire 15.59% of 16-24 year olds are in receipt of out of work

benefits which is higher than the Scottish average of 12.8.8%. By increasing and strengthening the partnership work between Education Services, Third Sector organisations, Further Education establishments and local businesses, we will widen the range and extent of work experiences and job opportunities for our young people. Providing our young people with access to new experiences and skills development will not only increase their confidence as they go forward in life but also assist them in terms of the choices they are able to make.

## Supporting Plans And Strategies:

- ◆ Shared Education Services Strategic Plan "Improving Life through Learning"
- ◆ Raising Attainment Strategy
- ◆ Shared Education Staged Intervention/ GIRFEC Child's Plan
- ◆ Services Stirling Council's Positive Relationships: Positive Behaviour Policy
- ◆ Corporate Parenting Strategy and Action Plan
- ◆ Autism Strategy (Draft)
- ◆ Transitions Policy (Draft)"
- ◆ Developing the Young Workforce' Scotland's Youth Employment Strategy

## Supporting Activities:

- ◆ Deliver Curriculum for Excellence
- ◆ Embed literacy and numeracy as key components of all areas of the curriculum
- ◆ Roll-out raising attainment for all improvement methodology
- ◆ Work with forth valley college to offer s4 pupils the opportunity to participate in the scots programme
- ◆ Develop a much expanded role for employers in supporting learning pathways in the senior phase (S4-S6)
- ◆ Stirling CPP Tackling Poverty and Inequalities Group, Local Employment Partnerships (Stirling and Clackmannanshire) and Working Age Task Groups for Clackmannanshire CPP.
- ◆ Opportunities for All Partnership activities.

## 12. Associated action, targets and performance

### Outcome 1: All children reach appropriate development and social milestones through improved support in early years

Activity: we will	Evaluation	Reporting Group	Timeframe
Further develop the EYC to deliver progress against the outcomes contained within the Early Years Framework and the national stretch aims, and to align practice with the emerging work on Raising Attainment 5-18	Tests of change are completed and implementation strategies are in place to roll out	Early Years Group	Sept 2015
Prioritise Prevention and Intervention within early years, including the commissioning of a Childcare Sufficiency Assessment, ensuring the range of childcare provision meets the needs of vulnerable children/families especially in communities most in need	Assessment Report on Childcare Sufficiency	Early Years Group	Dec 2017
Develop a multiagency approach to family and parenting support through the implementation of the Parenting and Family Support Strategy	Parenting and Family Support Strategy approved	Early Years Group	Dec 2015
Utilise the evidence produced by the Early Years Collaborative and other evidence based programmes to inform changes to policy and practice amongst partners	Partner agencies demonstrate policy and practice changes informed by outcomes of evidence based programmes	Early Years Group	Dec 2016
Implement 600 hours for all 3 and 4 year olds	Full implementation across Stirling and Clackmannanshire	Early Years Group	Sept 2015
Develop a Commissioning Strategy with regard to services for children, young people and their families and put in place multi-agency joint commissioning arrangements with priorities and resource implications	Complete plan with timescale to support the development of a Joint Commissioning Strategy.  Commissioning Strategy approved	Planning /Commissioning Reporting Group	August 2015
		Planning /Commissioning Group	Dec 2016

Children reach appropriate milestones through improved support in early years:

Indicators	Indicator	Target	Baseline	Reporting Group
Women experience positive pregnancies with improved neonatal outcomes	% of pregnant women in each SIMD quintile booked for antenatal care by the 12th week of gestation	Increase  (National 80%)	83% Sept 2014	Early Years Group
Stillbirth and infant mortality rates are reduced	Combined Stillbirth, neonatal and post natal mortality rates (ISD)	8.2 per 1000 births	NHS Forth Valley 8.6 per 1000 births (2012)  Scotland data 8.4 per 1000	Early Years Group
Maternal nutrition during pregnancy is improved	% take up by eligible women for Healthy Start vouchers	80%	75% Sept 2014 (Forth Valley)	Early Years Group
	% take up by eligible women for Healthy Start vouchers	60%	Data unclear but possibly very low – 20% in 2014	
Children born to teenage mothers have improved life chances	Teenage pregnancy rate per 1000 relevant female population (ISD)	Reduction:  Scotland: Under 16 years: 6.1 Under 18 years: 33.1 (2012)	Stirling: Under 16 yrs: 3.1 Under 18 yrs: 23.1  Clackmannanshire: Under 16 yrs: 6.3 Under 18 yrs: 42.3	Early Years Group
	% eligible teenage mothers registering with Family Nurse Partnership within agreed timescale	90%	On target Dec 2014	Early Years Group
Families of young children are better supported	Families recruited into evidence based parenting course		New measure	Early Years Group
	Families completed the evidence based parenting course		New measure	Early Years Group
	Families reporting positive impact following the evidence based parenting course		New measure	Early Years Group

Children reach appropriate milestones through improved support in early years: (continued)

Indicators	Indicator	Target	Baseline	Reporting Group
Improved nutrition in early years leads to improved health outcomes	% babies exclusively breastfed at time of first visit (10 days)	55% Scottish average 35.4%	Stirling: 39% Clackmannanshire: 23.9%	Early Years Group
	% babies receiving some breast milk at first visit (10 days)	60% Scottish average 48.4%	Stirling: 48.9% Clackmannanshire 31.6%	Early Years Group
	% of infants breastfed exclusively at 6 - 8 weeks review	40%	Stirling: 31.2% Clackmannanshire: 17.8%	Early Years Group
	% babies receiving some breast milk at 6-8 weeks review	60%	Stirling: 41.6% Clackmannanshire: 23.9%	Early Years Group
	% of children having completed 27-30month review.	90% by end of 2016	75% (Forth Valley)	Early Years Group
Children with developmental delay/ additional needs are identified and helped at an early stage	% children attending for 27-30 month review	95%	75% (Forth Valley)	Early Years Group
	% referred children achieving 18 wks RTT for occupational therapy	90%	39.3% (Forth Valley)	Early Years Group
Children have improved dental health	% P1 children with no dental caries	Increase	66% (Forth Valley) Scotland 68.2%	Early Years Group
	HEAT % children in all SIMD quintiles to have 2 fluoride varnish	60%	New Heat Target	Early Years Group
	% targeted children to have at least 1 fluoride varnish applications	100%	88.1% (Forth Valley)	Early Years Group
Young children have improved access to early learning and childcare	Implementation of 600 hours of early learning and childcare	100% of 3 and 4 year olds have access to 600 hours		Early Years Group



**Outcome 2:** Support for disadvantaged and vulnerable children, young people and families is improved

Activity, We will:	Evaluation	Reporting Group	Timeframe
Develop, resource and monitor an action plan which will ensure full compliance of Parts 4, 5 and 18 of the Children and Young People (Scotland) Act 2014. (Named Person Service, Child’s Plan and Promotion of Wellbeing)	Compliance evidenced through case conference /care review documentation	GIRFEC Group	2016
Conduct a critical review of current response to child protection referrals and screening of vulnerable children referrals to ensure processes and referral pathways are effective	Review report considered by the Strategic C&YP Partnership Group and recommendations implemented	Vulnerable Children and Young People’s Group	April 2015
Ensure risk assessment framework, tools and chronologies are fit for purpose and applied consistently across services and supported via training provision that includes processes for escalation of concerns relating to parental substance misuse, mental health issues and/or domestic violence	Evidenced through case conference/review documentation and self-evaluation/audit activity. Training programme for multi-agency managers Number of staff in attendance from partner agencies	Vulnerable Children and Young People’s Group	March 2015
Establish systematic audit and supported/self-evaluation activity with a primary focus on assessment, analysis, planning and management of risk	Audit and self-evaluation reports evidence timely interventions to protect and support children and young people.	ICSP Improvement / evaluation Group	March 2015
Develop a structure and model for Youth Justice Services	Evidence that new model enhances co-ordination and targeting of services	Vulnerable Children and Young People’s Group	June 2015
Full implementation of Corporate Parenting Strategy	Evidence of improvement within Corporate Parenting Action Plan	Vulnerable Children and Young People’s Group	Annual Report
Consider options to develop a more local residential resource for looked after children and reduce the number of ‘out of area’ placements.	Report on outcomes recommendations	Vulnerable Children and Young People’s Group	Vulnerable Children and Young People’s Group

Children and young people are afforded timely protection and support needed through improved processes for assessing risks

Indicator	Target	Baseline	Reporting Group
Number of children and young people referred to the Reporter on non-offence grounds		Stirling: 302 in 2013/14 Clackmannanshire: 217 in 2013/14	Vulnerable Children and Young People's Group
Number of children added to the CP register who have been deregistered in the past two years		New Measure	Vulnerable Children and Young People's Group
Number of children on the CP register as a result of parental substance misuse		New Measure	Vulnerable Children and Young People's Group
Number of children on the CP register as a result of domestic abuse		New Measure	Vulnerable Children and Young People's Group
Number of children on the CP register as a result of parental mental health issues		New Measure	Vulnerable Children and Young People's Group
Number of young people referred to SCRA on offence grounds		Clackmannanshire: 38 in 2013/14 Stirling: 58 in 2013/14	Vulnerable Children and Young People's Group

Looked after children's life chance are improved

Indicator	Target	Baseline	Reporting Group
% children looked after away from home with 3 or more placement moves	Data Only	5% 2013 - Stirling 8% 2013 Clackmannanshire	Vulnerable Children and Young People's Group
% of Looked after Children offered a health assessment within 4 weeks of notification	Increase	92% (2013/2014) – actual number of 204	Vulnerable Children and Young People's Group
Number of LAC at Home referred to LAC Health Team. % of LAC at home who have been offered health assessment	Increase	42 referrals across Stirling and Clackmannanshire in 2013/2014  8 completed	Vulnerable Children and Young People's Group
Completion of assessments on prospective carers within 6 month in line with National Standards	100%	New measure	Vulnerable Children and Young People's Group
Permanency Panels to be held within 12 weeks of LAAC review to refer child for permanence consideration. As a service we will target all 0 – 5 year olds to address drift so as to ensure the best start where rehabilitation is not in the child's interests.	100%	New measure	Vulnerable Children and Young People's Group
All children and young people who have been in Foster Care for 6 months or more should have a clear permanency plan.	100%	New measure	Vulnerable Children and Young People's Group
% attendance of LAC in primary schools	Stirling: 96% Clacks: 95.6%	Stirling: 96% Clacks: 99% (Q2 2014/15)	Raising Attainment Group
% attendance of LAC in secondary schools	Stirling: 88.5% Clacks: 92.5%	Stirling: 90% Clacks: 94% (Q2 2014/15)	Raising Attainment Group

Looked after children's life chance are improved (continued)

Indicator	Target	Baseline	Reporting Group
Exclusions of LAC from primary schools	Stirling: 2 Clacks: 4	Stirling: 3 Clacks: 0 (Q2 2014/15)	Raising Attainment Group
Exclusions of LAC from secondary schools	Stirling: 4 Clacks: 10	Stirling: 2.96 Clacks: 7.84 (Q2 2014/15)	Raising Attainment Group
% LAC Leavers attaining Literacy & Numeracy at National 4 or better		New measure	Raising Attainment Group
% LAC Leavers attaining Literacy & Numeracy at National 5 or better		New measure	Raising Attainment Group
Average Tariff Scores of LAC Leavers	Increase	71 in 2012/2013 – Stirling	Raising Attainment Group
Initial positive destinations of Looked after Children Leavers	Increase	Stirling: 53% Clacks: 54% (2012/13)	Raising Attainment Group
Sustained positive destinations of Looked after Children Leavers	Increase	Stirling: 27% Clacks: 46% (2012/13)	Raising Attainment Group

**Outcome 3:** Health and wellbeing outcomes are improved for children and young people

Activity, we will	Evaluation	Reporting Group	Timeframe
Devise framework for assessment and monitoring of mental health & wellbeing Establish a clear pathway of intervention for children's emotional well being	Robust data from evidenced based programmes demonstrate increase in emotional wellbeing	Vulnerable Children and Young People's Group	December 2016
Implementation of Autism Strategy	Evidence that Foundations Goals have been achieved	Vulnerable Children and Young People's Group	2016
Implement Age-long Disability Pathway	Operational model in place	Vulnerable Children and Young People's Group	April 2015
Develop a nurture strategy & implement associated policy and guidance	Evidenced through action plan	Vulnerable Children and Young People's Group	June 2015
Provide opportunities for learners to improve their health through the provision of high quality physical activities	Evidenced through performance indicators and action plan updates relating to children / young people with ASN	Vulnerable Children and Young People's Group	December 2017
Delivery of Forth Valley ADPs Strategic Plan as it relates to children and young people and those children and young affected by parental substance misuse	Annual Report	Vulnerable Children and Young People's Group	Sept – annual basis.
Delivery of Forth Valley Integrated Carers Strategy	Monitoring reports for Stirling and Clackmannanshire Action Plans – Support to Young Carers	Vulnerable Children and Young People's Group	2015
Roll out of Guidelines in relation to Sexual health and Self-harm	Evidence of training programmes & information sessions for carers and staff	Vulnerable Children and Young People's Group	March 2015

Children’s health and wellbeing outcomes are improved through:

Indicator	Target	Baseline		Reporting Group
% young people reporting smoking tobacco products regularly	Reduce	Stirling: 1% at 13 years 6% at 15 years	Clackmannanshire: 4% at 13 years 8% at 15 years	Vulnerable Children and Young People’s Group
% of young people who are drinking once a week or more	Reduce	Stirling: 4% at 13 years	Clackmannanshire: 6% at 13 years 20% at 15 years	Vulnerable Children and Young People’s Group
% of young people who are using drugs once a month or more	Reduce	Stirling: 2% at 13 years 10% at 15 years	Clackmannanshire: 5% at 13 years 9% at 15 years	Vulnerable Children and Young People’s Group
% children referred CAMHS service identified as having mental health issues requiring specialist support	Annual referral rate 1500	30% seen by primary mental health services		Vulnerable Children and Young People’s Group
Number of programmes of sport and physical activities for children and young people with ASN	Increase	Baseline available from 2015		Vulnerable Children and Young People’s Group
Number of programmes of sport and physical activities for children and young people who are looked after	Increase	Baseline available from 2015		Vulnerable Children and Young People’s Group
HEAT: Number of health weight interventions delivered to children and young people	Scotland target 14, 910 by March 2014	“Max in the Middle and Max in the Class” – Forth Valley has met local target with 40% delivered in targeted areas identified as having most deprivation		Vulnerable Children and Young People’s Group



**Outcome 4:** Raised attainment for all young people leading to positive destinations.

Activity, we will:	Evaluation	Reporting Group	Timeframe
Develop and deliver the Raising Attainment Action Plan	Evidence that Action Plan targets have been met	Raising Attainment Group	2015
Develop and deliver the Young Workforce Scotland's Youth Employment Strategy		Raising Attainment Group	2015

Indicator	Target	Baseline	Reporting Group
Average Tariff Scores for leavers – deprivation decile 1	New Measure	New Measure	Raising Attainment Group
Average Tariff Scores for leavers – deprivation decile 2	New Measure	New Measure	Raising Attainment Group
Average Tariff Scores for leavers – lowest 20%	New Measure	New Measure	Raising Attainment Group
% of leavers who live in SIMD 1 attaining Literacy & Numeracy at National 4 or better	New Measure	New Measure	Raising Attainment Group
% of leavers who live in SIMD 1 attaining Literacy & Numeracy at National 5 or better	New Measure	New Measure	Raising Attainment Group
Initial positive leaver destinations	Increase (National 92%)	Stirling: 91.5%      Clacks: 92.8%	Raising Attainment Group
Follow up positive leaver destination	Stirling: 87%      Clacks: 88%	Stirling: 87.3%      Clacks: 83.1%	Raising Attainment Group

Diagram of CPP Structures



# Children & Young People's Strategic Partnership Group



## Glossary:

**CPP** Community Planning Partnership

**SOA** Single Outcome Agreement

**C&YPSPG** Children and Young People's Strategic Partnership Group

**ICSP** Integrated Children's Services Plan

**SCRA** Scottish Children's Reporter's Administration

**GIRFEC** "Getting it Right for Every Child"

**CEL 13** "Refocusing role of Health Visiting and School Nursing Services"

**TRIPLE P** Positive Parenting Programme

**LAC** Looked after child/children

**TCAC** Throughcare and Aftercare

**EEI** Early and Effective Intervention

**ASD** Autism Spectrum Disorder

**PPU** Public Protection Unit (Police Scotland)

**MAASH** Multi Agency Assessment Screening Hub

**VPD** Vulnerable Person Database

**MARAC/MATAC** Multi Agency Risk Assessment Conference / Multi Agency Tasking and Co-ordinating process

**CELSIS** Centre for Excellence for looked after children in Scotland

**RPL** Recognition of Prior Learning

**SALSUS** Scottish Schools Adolescent Lifestyle and Substance Use Survey 2013

**POPP** Psychology of Parenting Programme

**SIMD** Scottish Index of Multiple Deprivation

**Positive Destinations:** Young People entering further or higher education, training or employment.

