

Children's Services Plans: Promising Planning Examples

February 2018



The National Third Sector GIRFEC project was launched in 2013 to support Community Planning Partnerships (CPPs), Third Sector Interfaces (TSIs) and the wider third sector to embed their role in implementing Getting It Right For Every Child (GIRFEC). The project is a Public Social Partnership (PSP) between a core group of organisations. They include Barnardo's Scotland, Voluntary Action Scotland and the Improvement Service, with support from other third sector partners including Coalition of Care and Support Providers in Scotland (CCPS) and the Scottish Government.

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Introduction

Introduction

... plans should be seen as a part of an ongoing planning cycle rather than an end point in themselves. Therefore, the opportunities for the third sector to continue to work with local partners to review and help improve children's services are ongoing.

The Children and Young People (Scotland) Act 2014, Part 3, required that, by April 2017, all local authority areas, along with the relevant health boards, published a Children's Services Plan¹.

The plans are intended to '*... improve outcomes for all children and young people in Scotland by ensuring that local planning and delivery of services is integrated, focused on securing quality and value through preventative approaches and dedicated to safeguarding, supporting and promoting child wellbeing.*'²

While the plans have now been published, the Statutory Guidance for Part 3 of the Act states that plans should **be seen as** a part of an ongoing planning cycle rather than an end point in themselves. Therefore, the opportunities for the third sector to continue to work with local partners to review and help improve children's services are ongoing. The Guidance lays out requirements for ongoing review, annual reporting and the publishing of a new plan every three years.

This document has been produced to support and encourage the effective collaboration of the third sector and all planning partners in the ongoing development of those Plans. It outlines what is required in terms of the design, delivery and review of the plans, and highlights several useful examples of promising practice across Scotland.

¹Children And Young People (Scotland) Act 2014: Part 3

²Children And Young People (Scotland) Act 2014: Statutory Guidance on Part 3: Children's Services Planning (s.2)

Section 1 lays out the policy and legislative context and provides an overview of the Statutory Guidance on Part 3 as it relates to the third sector. It outlines requirements on planning partners to facilitate and support collaboration with children and families, their representatives, and relevant third sector organisations, in the ongoing development of children's services planning.

Section 2 seeks to aid that process of collaboration by sharing examples of promising approaches to children's services planning from across Scotland which might be of use to third sector organisations and other partners.

The promising practice examples are grouped under a set of four principles for good planning identified by Coalition of Care and Support Providers in Scotland (CCPS) in its #Plan4Children campaign.

These principles are:

- Collaboration with children and young people, their families, communities and service providers in service design
- Providing services that promote prevention and early intervention
- Connecting the outcomes and ambitions of strategic plans to decisions about investment in services
- Taking an accountable and transparent approach

Section 3 of this document contains a list of resources and further information which might be of use to third sector organisations and others in considering how best to feed into and support the process of children's service planning.



Section 1:

Policy and Legislative Context

Section 1: Policy and legislative context

if the aims and requirements of policy and legislation are to be met there will be a need for the community and third sector to work more effectively together, to make the best use of their own resources and seek to be more representative.

Since the establishment of Community Planning Partnerships (CPPs) and processes in the Local Government (Scotland) Act 2003, policy and legislation has gradually moved towards strengthening the involvement of communities and third sector organisations in planning.

Whilst, in general, the legal duty to plan and deliver children's services remains with local authorities, health boards and other statutory agencies, there are now wide-ranging requirements to involve third sector and community partners in the planning of such services.

Taken together, the provisions of the recent legislation listed below, in particular the Children and Young People Act 2014, and the Community Empowerment Act 2015, will place wide-ranging obligations on the public sector in terms of involvement. However, it will also test the capacity of community and third-sector organisations in planning services across a number of service areas, many of which are interrelated. Crucially, if the aims and requirements of policy and legislation are to be met there will be a need for the community and third sector to work more effectively together, to make the best use of their own resources and seek to be more representative.

This presents a challenge for the public sector, communities and the third sector.

This shift is driven by the recognition that services will be better at delivering agreed outcomes cost-efficiently if they are based on the full spectrum of contributions made by the range of partners, and planned in collaboration with children and young people, their families, representatives and third sector service providers. This has become increasingly important within the context of budgetary constraints across both the statutory and third sectors.

This shift is expressed in various policies and legislation and has an important role to play in driving meaningful involvement in the planning of children's services.

The key policy and legislative developments driving this change are listed below:

- **The Local Government (Scotland) Act 2003** sets out duties on community planning partners and introduces the power to advance community wellbeing.
- **Getting it right for every child (GIRFEC 2004)** is the national approach in Scotland to improving outcomes and supporting the wellbeing of our children and young people by offering the right help at the right time from the right people.

- **The Report of the Commission on the Future Delivery of Public Services (The Christie Commission 2011)** has been central to the reform of public services. It highlights the role of early intervention and prevention and recognises that *‘... effective services must be designed with and for people and communities...’*
- **The Children and Young People (Scotland) Act 2014** establishes a new children’s services planning framework which places duties on local authorities and health boards. The Act requires that a Children’s Services Plan is developed in collaboration with children, young people, their families, and community and third sector organisations. (see section 2 below)
- **The Public Bodies (joint Working) (Scotland) Act** outlined the Health and Social Care Integration agenda which some local authority areas extended to include children and young people. The functions include carrying out strategic planning, which suggest implications for how Children’s Services Planning in those included areas will be delivered.
- **The Community Empowerment (Scotland) Act 2015** sets out duties on CPPs to consider which community bodies are likely to contribute to locally agreed community planning priorities. This should include making all reasonable efforts, including contributing staff, funds and other resources as the partnership consider appropriate, to secure the participation of those community bodies, in particular those that represent communities experiencing inequality.

- **Joint Strategic Commissioning.** The Scottish Government aims to ensure *‘Scotland has the right services for children - geared towards prevention and early engagement, tailored to local need, joined up and holistic - through collaborative and evidence based planning and delivery.’*³ To deliver this policy it has funded the Realigning Children’s Services programme to work with *‘..CPPs to support communities to make better decisions using high quality data on local need, to improve the lives of children in their area adopting a joint strategic commissioning approach.’*
- **Article 12 of the United Nations Convention on the Rights of the Child (UNCRC)** requires national and local governments, as duty bearers, to respect, protect and fulfil children’s rights (e.g. under Article 12 every child has a right to express their views and have them given due weight in accordance with their age and maturity). Also, in respect to strategic services planning, consultation with children and young people should provide critical, valuable information about the strengths, weaknesses and gaps in existing service provision.⁴ Under part one of the Children and Young People (Scotland) Act 2014 public bodies are required to report of their progress in implementing children’s rights.

³ <http://www.gov.scot/Topics/People/Young-People/realigning-childrens-services>

⁴ Quoted in Children And Young People (Scotland) Act 2014: Statutory Guidance on Part 3: Children’s Services Planning

- **The Child Poverty (Scotland) Act 2017** sets out targets to reduce the number of children experiencing the effects of poverty by 2030. Under this Act local authorities and health boards will be required to jointly publish annual reports on what they are doing to reduce child poverty in the local area.

The following section lays out the duties placed upon local authorities and health boards to develop a Children's Services Plan and the opportunities this presents for community partners and stakeholders to shape and support service planning.

1.1 Children's Services Planning

The legislative basis for children's services planning is Part 3 of The Children and Young People (Scotland) Act 2014.⁵ Statutory Guidance for Part 3 was issued in December 2016 and the first iterations of Children's Services Plans (the Plans) were required to be in place by 1st April 2017.⁶

This section provides a brief overview of the Guidance, laying out what is required of local authorities and relevant health boards when developing a Plan. It then goes on to highlight the opportunities for, and duties on, third-sector organisations to feed into children's services planning.

⁵ <http://www.legislation.gov.uk/asp/2014/8/contents/enacted>

⁶ <http://www.gov.scot/Resource/0051/00512307.pdf>

Local authorities and the relevant health board are also required to keep the Plan under review (119), and to report on the progress of the Plan annually (128). This too should involve collaboration with the third sector

This section is based solely on a summary of the Guidance and does not seek to interpret or comment on it. Further details on each section can be found in the corresponding references to the Guidance. **All numbers in brackets refer to the relevant section of the Guidance unless otherwise stated.**

1.1.1 Duties on local authorities and health boards

Duty to prepare, report on, and review the Children's Services Plan

The Act requires every local authority and relevant health board to jointly prepare a Plan which will cover a three-year period (39). In doing so the local authority and relevant health board are required to make reasonable efforts to consult and engage with relevant third-sector organisations (see section 1.1.2 below for what might be deemed 'reasonable efforts', and section 2.1 below for examples of such efforts).

Local authorities and the relevant health board are also required to keep the Plan under review (119), and to report on the progress of the Plan annually (128). This too should involve collaboration with the third sector (see section 1.1.2 and 2.1 below).

Aims of the Plan

The Guidance (48) states that the strategic aims of the Plans are to provide ‘children’s services’ which:

- (a) best safeguard, support and promote the wellbeing of children
- (b) focus on early intervention and prevention
- (c) are integrated services from recipients’ point of view
- (d) represent the best use of resources

The Plans should also ensure ‘related services’ support and promote the wellbeing of children (see endnote for definition of terms).

Strategic approach

Part 3 requires local authorities and health boards to take a strategic approach to the design and delivery of children’s services.

The Guidance (24-29) states that, in order to deliver such a strategic approach, children’s services planning should be built upon the ‘analyse-plan-do-review’ cycle of good strategic planning and details various elements in such an approach including;

- a) undertaking a detailed, **joint, strategic assessment** of the current position
- b) identifying and agreeing a manageable number of **priorities**

- c) establishing a clear, ambitious, shared **vision**
- d) developing sets of **outcome indicators**
- e) agreeing what **activities** will deliver that vision
- f) deciding, through a coherent and **transparent process**, how those activities will be resourced
- g) presenting this information for **consultation** with service users, staff, service providers and other stakeholders. Following feedback, publishing a plan.
- h) holding persons to account for delivery of activities, with **governance** over implementation of the plan embedded in existing structures (for example through Community Planning Partnerships);
- i) monitoring progress through a structured process of **review** and refinement, making sure the plan (with its outcomes and deliverables) continues to fit the context (needs, resources, etc.)

This approach should provide **a range of opportunities** to participate in the planning processes for;

- a) service users (particularly children themselves) (91),
- b) service providers (including large and small third sector organisations) (87),
- c) organisations representing the interests of service users and the wider community (86).

While the first iterations of the Plans have been developed, the requirements to report upon and review them will present continuing opportunities for third sector partners and stakeholders to participate in what will be an ongoing process.

The Guidance points out that children's services planning is an ongoing process and that the Plan is therefore to be viewed only as a component of the planning cycle, not an end in itself (27)

1.1.2 Opportunities for third sector organisations to participate

While the first iterations of the Plans have been developed, the requirements to report upon and review them will present continuing opportunities for third sector partners and stakeholders to participate in what will be an ongoing process.

Consulting community and third sector organisations

The Act requires that in developing the Plan the local authority and the relevant health board must consult:

a) organisations which represent the interests of persons who use or are likely to use any children's service or related service in the area of the local authority,

The Guidance (86) states this should be interpreted to mean any community group and third or private sector organisations which seek to represent the views, concerns and wishes of current and/or potential service users. Examples of organisations which might fall into this category are advocacy groups for children with disabilities, youth or pupil councils, kinship carer groups, school parent councils/associations, etc.

it is the variety of third sector and community organisations, some small, some large, which can provide insight on the needs of the local population, and help in identifying the interventions which are most effective at meeting those needs.

b) organisations which provide a service in the area which, if it were provided by the local authority, the relevant health board, any of the other service providers or the Scottish Ministers, would be a children's service or a related service (see endnote ⁱ).

The Guidance (87) states this should be interpreted to mean those community groups and third or private sector organisations which provide services in the local area which are (a) wholly or mainly to, or for the benefit of, children and young people, or (b) capable of having a significant effect on the wellbeing of children. Examples in this category might include residential schools for children with additional support needs, nurseries, drug and alcohol treatment, providers of respite services, fostering agencies, parenting support groups, secure care etc.

Identifying persons to consult

The Guidance (99) states it is important that local authorities and the relevant health board seek out and facilitate the contribution of a wide range of different persons. It notes that it is the variety of third sector and community organisations, some small, some large, which can provide insight on the needs of the local population, and help in identifying the interventions which are most effective at meeting those needs.

It suggests an initial scoping phase would help identify those persons and that the local Third Sector Interface (TSI) or relevant Third Sector Children and Young People forums/partnership groups could play a valuable role in identification of those to be consulted and in coordinating input from across the sector (90).

The Guidance (91) notes that, while the legislation does not specifically require consultation with children, young people and families, that this is good practice, and is in any case effectively required through UNCRC Article 12 which states that every child has a right to have their views heard and considered.

Supporting participation

The Guidance (94&99) explains that a local authority and the relevant health board should, make all reasonable efforts to facilitate the participation and/or contribution of a broad range of third sector organisations in the children's services planning process, providing different types of opportunities (through which to participate or contribute) and, where appropriate, support to enable them to do so.

This is described as being consistent with the duties placed on Community Planning Partnerships under the Community Empowerment Act 2015⁷ which requires that such efforts, '*... should include making all reasonable efforts, including contributing staff, funds and other resources as the partnership consider appropriate, to secure the participation of those community bodies, in particular those that represent communities experiencing inequality.*'⁸

⁷ Community Empowerment (Scotland) Act 2015, Part 2, Section 4(6); and the Statutory Guidance for the 2015 Act.

⁸ Ibid. Section 14.

The process of consultation

The Act does not prescribe the form of consultation to be carried out but the Guidance (93) notes that whatever process is chosen, all public bodies carrying out public or targeted consultations should refer to the National Standards for Community Engagement,⁹ and take the necessary steps to ensure that the process is accessible to the widest number of respondents possible.

Duty to participate or contribute

The Guidance (96-100) describes the duty upon those organisations consulted to meet any **reasonable** request made of them to:

a) participate in the preparation of the Children's Services Plan for the area.

This could entail a wide range of actions, for example, attending a consultation event, or playing an active part in the group responsible for drafting the Plan.

b) contribute to the preparation of that Plan.

An example of this may involve sharing relevant information (i.e. statistics about service use) or carrying out a process to gain the views of services users.

A '**reasonable request**' is defined as one which is **relevant** (in view of the person's function), **practicable** (in view of the person's capacity) and **consistent** with the person's expected level of involvement in delivering the Children's Services Plan. The reasonableness of a request will therefore be determined, in large part, by individual circumstances.

⁹ <http://www.gov.scot/Topics/People/engage/NationalStandards>

Report

A local authority and the relevant health board must, as soon as practicable after the end of each one-year period publish (in such manner as they consider appropriate) a report on the extent to which the services have been provided in accordance with the Plan; and the impacts of those services (128).

The Guidance (130) notes it may be beneficial to align publication timeframes of this annual report with other relevant statutory reports. However, it adds that publication should be seen as a priority, with delay kept to the absolute minimum.

The Guidance (131) notes that while the Act does not restrict the content of the report, it does demand that every annual report includes information about the extent to which the local area is delivering on any outcomes which might be set by Scottish Ministers, and the overarching aims of children's services planning (as set out in section 1.1.1 above).

This duty to report will require local authorities and the relevant health board to have systems in place to collect and analyse relevant information (such as service performance and outcomes for children and young people) (133).

The report should be accessible to key stakeholders (such as children, young people and others with an interest in children's or related services). This is in order to facilitate engagement and accountability (135). Examples of this could include providing a summary document, written in an accessible format for the intended audience.

This cycle, with robust, evidence-based assessments of progress feeding into on-going decision making, is seen as a core component of strategic commissioning.

Review

The Plan must be kept under review to ensure it continues to accurately reflect the local context and is fit for purpose. The duty to review provides a basis on which decisions to alter or adapt service provision can be made. (119)

The Guidance (120) also notes that while the Act does not prescribe timescales for the review that it would be logical to connect the annual reporting requirements with this duty. It also states (136) that linking reporting and review would facilitate engagement with service users and key stakeholders, the feedback from whom could inform whether changes were needed to the Plan itself. This cycle, with robust, evidence-based assessments of progress feeding into on-going decision making, is seen as a core component of strategic commissioning.

The Guidance points out (121) the Act is not prescriptive on the form of the review but states that if it is to contribute meaningfully to the overall children's services planning process, it must:

- a) establish if services are being delivered in line with the Plan's aims and objectives;
- b) ascertain what impact, if any, the services covered by the Plan are effectively safeguarding, supporting and promoting the wellbeing of children; and
- c) identify ways in which either delivery and/or the Plan may be improved (to better meet current aims and requirements).

The views of children, young people and families, and the professionals and volunteers working with them will be particularly valuable in making assessments of progress.

This demands that systems be put in place to regularly collect and analyse information relating to service performance and child wellbeing. Such information should come from a range of sources, and include both quantitative and qualitative data. The views of children, young people and families, and the professionals and volunteers working with them will be particularly valuable in making assessments of progress. Moreover, much useful information will already be stored in the information management systems of children's services planning partners, and by service providers, offering detailed insight into how services are working for specific groups of children (122).

Revise

The findings of a review may suggest that changes are needed in the Plan. Where this is the case, local authorities and relevant health boards are encouraged to take appropriate action and have the power to prepare a revised Plan (123).

Any revised Plan must essentially be treated like a new plan, with relevant organisations being consulted as above (124).

In any case a local authority and the relevant health board are obligated to prepare a new Children's Services Plan for each period of three years following the first period (1st April 2017 to 1st April 2020) (46).

Section 2:

Examples of Promising Planning



Section 2: Examples of promising planning

Following publication of the Children's Services Plans we have worked with partners to identify and share a selection of promising planning examples. We have selected those which may be of use to others seeking to feed into the ongoing processes of children's services planning. Our choice of Plans upon which to focus was shaped largely by our history of involvement in those specific areas and our resultant working knowledge of their development.

The examples used here are grouped under the four principles identified by the Coalition of Care and Support Providers' *#Plan4Children campaign*.¹⁰ These principles are broadly consistent with Part 3 of the 2014 Act.

As the Plans are so newly developed and launched, many of the examples we have identified are best viewed as work in progress, indeed several Plans are described as *Interim* Plans by their authors in recognition of the further work required to fully develop them in collaboration with stakeholders. Therefore, while some examples can be seen to have had an impact, others are inevitably more developmental.

¹⁰ <http://www.ccpscotland.org/hot-topics/pledge/>

the intention in including these examples is to demonstrate what might be of interest to other areas and contexts and generate momentum towards more collaborative planning

In terms of such impacts, several examples below demonstrate that collaborative approaches have already engaged a wide range of people in the formation of the Plans. Similarly, it can be seen where the gathering, analysis and use of a wide range of evidence has been used to assess need and identify agreed outcomes. However, in terms of strategic commissioning of services, the examples we use tend to demonstrate an intent to develop such an approach based upon enabling steps already taken. As such, the ongoing efforts of partners under the four themes are at differing stages of development. This difference is reflected below in the space allocated to each principle.

This is a small selection of the promising work which has gone into children's services planning over the past year or so, included to stimulate thinking and learning. The intention in including these examples is to demonstrate what might be of interest to other areas and contexts and generate momentum towards more collaborative planning. There are many more examples of creative and innovative work and promising planning which will also provide encouragement and innovation in other areas.

2.1 Collaboration with children and young people, their families, communities and service providers in service design

The Christie Commission on Public Service Reform noted of public services that *‘As a whole, the system can be ‘top down’ and unresponsive to the needs of individuals and communities. It lacks accountability and is often characterised by a short-termism that makes it difficult to prioritise preventative approaches.’*¹¹

This was seen not only to lead to the exclusion of people from decisions made about services they use, but also to the inefficient use of resources, duplication of efforts, and interventions based upon partial information. Community and service user engagement and participation is now seen as a fundamental building block in the strategic planning of public services. It is well understood that the development of processes and structures to facilitate engagement will support the delivery of better outcomes more efficiently, and help ensure responsiveness to identified community need.¹²

This has now been given legal basis in the recent legislation (see section 1 above).

¹¹ Key Messages, <http://www.gov.scot/Publications/2011/06/27154527/2>

¹² For further discussion of participation, structures and processes see NTSG Project, Third Sector’s involvement in Children’s Services Planning Infrastructure and Support for Participation

Efforts are therefore required to expand meaningful engagement through capacity building and the development of realistic timeframes.

While there is no single method for ensuring good community engagement, a wealth of guidance and good practice guides are available (see section 3), including the *National Standards for Community Engagement* (fig.1),¹³ and the *Golden Rules for Participation* from the Children and Young People's Commissioner Scotland.¹⁴ In general, it should be recognised that many of those whose views are sought may not currently have the capacity and/or capability to be meaningfully involved in participatory/consultative approaches, or be able to fit in with partners' timeframes. Efforts are therefore required to expand meaningful engagement through capacity building and the development of realistic timeframes.

Figure 1 - The Seven Standards



¹³ Scottish Community Development Centre, <http://www.scdc.org.uk/what/national-standards/>

¹⁴ <http://www.sccyp.org.uk/education/golden-rules>

There are numerous examples of partners facilitating community engagement, and the engagement of children, young people and families in the planning process. Here we highlight a small selection.

Edinburgh

Edinburgh Children's Partnership working with the Children's Parliament ran a project to test a methodology focussed on supporting and sustaining the effective engagement of children and young people in the development and ongoing review of children's services planning.¹⁵ This utilised a human-rights based approach which viewed children and young people as *rights holders*, and adults as duty bearers with a responsibility for safeguarding and promoting those rights. Having been adapted from an earlier project based on different groups of adult rights holders and *duty bearers* this method could also be adapted for groups such as families, and organisations representing children's interests or delivering relevant services.

The project was built around 3 linked events to;

- a) identify what children and young people needed to be healthy, happy and safe, and to live with dignity within their homes, schools and wider community,
- b) identify barriers to that being achieved, and
- c) explore solutions to those barriers.

The first of the three events engaged with children and young people to identify what they felt they needed in order to be safe, happy, healthy etc. and what barriers stood in the way of this. The second event engaged senior members of staff from partner agencies and followed the same approach. The third event brought together both groups of participants to focus on ideas for delivering change and identifying the specific actions adult duty bearers would undertake.

The report on the project noted various impacts including:

- Children and young people reported feeling engaged and listened to.
- Children and young people's capacities were developed.
- The events engaged with children and young people who might not be seen as 'traditional participants'.
- Needs, barriers and solutions were identified and actions and signed up for.
- The outcomes will feed into and shape local planning including the implementation of the Children's Service's Plan, Edinburgh City Vision 2050, Locality Improvement Plans and work around Future Schools'

¹⁵ This was a pilot project funded by the Scottish Government in order to adapt previous work, by the Scottish Human Rights Commission and partners in Perth and Kinross in 2015, designed to develop a participative approach to the promotion of human rights within the area, with a particular regard to community planning. The full report on the Edinburgh project can be accessed here <http://www.gov.scot/Publications/2017/11/8648/0>. The report on the Perth and Kinross project can be seen here [http://www.pkc.gov.uk/media/33971/15-12-16-Item-12-15-581-/pdf/15-12-16_-_Item_12_\(15-581\)](http://www.pkc.gov.uk/media/33971/15-12-16-Item-12-15-581-/pdf/15-12-16_-_Item_12_(15-581)) and the Commission's work can be found here <http://www.snaprights.info/>

A central finding was that ongoing engagement, support and development of personal relationships must be built in to such approaches.

A central finding was that ongoing engagement, support and development of personal relationships must be built in to such approaches. The recommendations included training on children's rights and participation for relevant staff to help ensure such engagement was meaningful and effective.

Learning points included:

- *'...[the] pilot reinforces the need for children and young people to be ready to engage in the process. This does not mean that children or young people who need support cannot be involved, it means that the three-event model works when the children and young people that are involved have had opportunities to build capacity to engage meaningfully.'*
- *'... the success in engaging such a wide range of children and young people ... was as a result of significant work beforehand with the children and young people, where relationships were developed with adults that they grew to know and trust thereby enabling them to participate fully in the events.'*

The report went on to say that the work carried out between the events, including visits to schools, were crucial.

East Lothian

In its vision statement, the East Lothian Children and Young Persons Services Plan makes clear its commitment to engaging with children, families and the wider community in the development of strategies and the rollout of services.¹⁶

This commitment is seen reflected in a range of activities detailed in the Plan including various methods for facilitating and encouraging feedback from children and young people such as:

- *Viewpoint* - a computer assisted interviewing technology as a tool to gain the views of looked after children and young people.
- *Student Evaluation of Experience Survey* - The annual survey seeks views on a wide range of subjects, including community safety, participation, child protection and environmental issues. Among other things the findings are used to inform service planning.
- *Family Led Information Point* - This is a forum for parents and carers who have a child/relative with additional support needs.
- *Child & Adolescent Mental Health Service* - Focus groups and questionnaires for service users are used as part of service review and development.

¹⁶ http://www.eastlothian.gov.uk/downloads/file/12177/childrens_services_plan_2017-2020

This feedback was then used to inform the Plan:

*The views of children, young people and families are gathered in a range of different ways including our Care Experienced Young People's Champion's Board, school student surveys, family feedback and community consultation. We have used the feedback from these consultations to inform some of the actions in... [the Plan].*¹⁷

All of the Planning and Delivery Groups involved in the Plan's development are required to show how they sought the views of children, young people and families, and how such views have shaped decisions and services. This evidence of participation has been built into the strategic reporting cycle.¹⁸

Glasgow

Glasgow's Plan¹⁹ has a central focus on involving the third sector in the planning and delivery of services, and in the development of the Plan.

In order to strengthen the third sector's role in participation in children's services planning and using the draft guidance on Children's Services Planning as a catalyst to form the *Children, Young People and Families City Wide Forum*, which has been established to help coordinate input from across the sector, with a particular emphasis on participation and partnership. This is designed to complement and coordinate other initiatives such as the *GCVS Everyone's Children's Project* and the *Children's Services Locality Groups*, and to facilitate

¹⁷ Pg.6

¹⁸ Pg.25

¹⁹ <http://www.glasgow.gov.uk/CHttpHandler.ashx?id=15283>

strategic representation and city-wide information sharing. The positive relationship with statutory partners is described as a 'open door' with one example being the third sector's involvement in discussions around co-designing services for young people who may need out of authority care, as part of the Transformational Change programme. A number of events have been held including an exploration of how the family support strategy and commissioning process provides opportunities to engage third sector services.

To ensure that representation and communication are as transparent as possible a code of conduct has been drawn up outlining what is expected of those third sector partners taking on representative roles. The approach is to provide third sector organisations across the city with the opportunity to engage to the extent they are able and have capacity to do so ensuring that the door stays open to anyone who wants to be involved. When asked what makes the City Wide Forum a relatively successful model the acting Chair and GCVS Everyone's Children Manager highlighted the following:

- Sign-up from senior managers in statutory and third sector services
- Understanding the complexity of third sector relationships (for example, working in a competitive environment at times).
- Transparency

Trust is the key

- Motivation to see that partnership working is a useful process (it can be a better way of working) – and valuing it!
- Having a value based, principled forum
- Trust is the key

The Children, Young People and Families City Wide Forum has enabled a more coordinated response by the third sector to developments across the city and is highlighted as an opportunity ‘... to improve partnership working on planning, commissioning, design and delivery of services’.²⁰

The approach is now integrated into the Children’s Services City-wide Planning Structure. This will be the formal mechanism for monitoring progress against the key strategic priorities in the Plan.

Renfrewshire

A commitment to develop participation can also be seen in Renfrewshire’s interim Plan:²¹

Our objective is to give expression to the requirements of the new Guidance to engage and consult with the widest range of stakeholders, communities and individuals, and to provide them with an effective opportunity to participate in or contribute to the preparation of the plan.

²⁰ Pg.16

²¹ In recognition of further work to be done to analyse recent data, and to consult with stakeholders, Renfrewshire decided to publish one year interim plan http://www.renfrewshire.gov.uk/media/4076/Interim-Renfrewshire-Childrens-Services-Partnership-Plan-2017-2018/pdf/RenfrewshireChildrensServicesPartnershipPlan-Final_270417.pdf

The Plan aims ‘...to achieve agreement between all planning partners and participants about the priorities for children’s services and the manner in which we will measure outcomes.’

Crucially the interim Plan also recognises that, in order to ensure the effective participation of the third sector in planning processes, there is a need to build ‘... the **capacity** of our new planning partners to increase their participation in the preparation of the plan.’

In particular it notes this ‘... will require us to build strategic commissioning skills and knowledge within these agencies such that they are more able to participate in planning.’²²

Inverclyde

Inverclyde’s approach to the participation of children, young people, families and other stakeholders in policy, planning and service development was praised by The Care Inspectorate in their recent (October 2017) joint inspection.²³ The Care Inspectorate found the extent of participation to be ‘excellent’. In particular they highlighted: the promotion of children’s rights and their meaningful involvement in shaping children’s services; the efforts of staff to empower children, young people and parents in influencing the way services were designed and delivered; the wide range of successful approaches routinely used to consult with stakeholders, whose views were taken seriously and acted upon; partners’ commitment to corporate parenting; and innovative work taking place to apply the UNICEF Rights Respecting School programme in a range of settings including children’s houses.

²² Pg.4

²³ <http://www.careinspectorate.com/images/documents/4102/Inverclyde%20services%20for%20children%20and%20young%20people%20joint%20inspection%20report%20Oct%202017.pdf>

The Care Inspectorate report also referred to this meaningful involvement being very well embedded across services, with vulnerable groups being well represented on the local youth council which, along with school councils, was empowering young people to influence planning, policy and service development. It noted that 'Comprehensive information and data from a number of engagement initiatives, notably #ClydeConversations had informed the children's service plan, ...' The role of third sector organisations, including Barnardo's, Proud2Care and the local LGBTI group was mentioned positively in this regard.

It was noted that a children's rights oversight group was promoting children's rights and sharing good practice and that plans were being taken forward to report publicly on progress in promoting children's rights, in line with the requirements of the Children and Young People (Scotland) Act.

2.2 Providing services that promote prevention and early intervention

It is well documented that prevention and early intervention can help children and young people avoid the more severe impacts of a deepening crisis.

Not only is it better for the child to avoid the potential for deeper personal trauma, but it makes economic sense too. Early intervention can avoid the need to access more specialist and costly support services in childhood and beyond.

The additional cost to services of late intervention is estimated to be substantial with the Scottish Government noting that, *'In the longer term, a failure to effectively intervene to address complex needs of an individual in early childhood can result in a nine fold increase in direct public costs.'*²³ The Christie Commission noted that late intervention might account for 40% of all public spending,²⁴ while a recent report on the costs of late intervention estimates this cost is the equivalent of an additional £290 for each person living in England and Wales.²⁵

²³ <http://www.gov.scot/About/Performance/scotPerforms/outcome/children>

²⁴ <http://www.gov.scot/Publications/2011/06/27154527/2>

²⁵ <http://www.eif.org.uk/publication/the-cost-of-late-intervention-eif-analysis-2016/> Pg.1

*a holistic, robust,
universal offer
is essential in
ensuring people
at the early stages
of difficulty can be
supported.*

This understanding is expressed in the CYP Act 2014 which lays out a duty to shift resources toward prevention and early intervention in children's service planning to ensure *'...that any action to meet needs is taken at the earliest appropriate time and that, where appropriate, action is taken to prevent needs arising.'*

Glasgow

This duty can be seen reflected in Glasgow's Plan which is built upon a series of drivers, the first of which is a *'... focus on transforming services to be more efficient and to make best use of our resources to resolve issues early, so that we can prevent crisis situations occurring.'*²⁶

This theme of early intervention is woven throughout the plan, notably within the third strategic priority, which articulates an ambitious commitment to strengthen partnership work and positive relationships with the third sector to deliver this.²⁷

The Plan notes, there has been a commitment to providing early help through the One Glasgow approach since 2011, with a tiered model targeting families who are 'just coping'. However, the very nature of those 'just coping' means they can be difficult to identify and it recognises therefore that a holistic, robust, universal offer is essential in ensuring people at the early stages of difficulty can be supported.

²⁶ Pg.1

²⁷ Pg.4

One example of this enhanced universal support is seen in an ambitious programme to transform nursery provision into ‘family learning’ provision, offering those with young children a gateway to wider community services, including family support, in partnership with other statutory and third sector providers where appropriate.²⁸

Other clear priorities and planned actions are laid out in respect of *‘Family support and early intervention’*, with a commitment to *‘Continue to work with third sector agencies to improve the range of family support services that are sustainable for the long-term benefit of local children and families.’*²⁹

Inverclyde

Inverclyde’s Plan recognises, *‘...that key to improving wellbeing outcomes means a move to prioritise early intervention approaches’* and that, *‘In times of reduced budgets, prevention, early intervention and sustaining positive change is now more important than ever.’*³⁰

The Plan identifies four key priorities, the first of which is *access to early help and support*. Under that priority the Plan states, in relation to child development, and relationships and attachment, that *‘...our ongoing work is focussed on developing parenting skills to ensure that next generations living in the area are happy, supported*

²⁸ Pg.23

²⁹ Pg.25

³⁰ <https://www.inverclyde.gov.uk/health-and-social-care/support-for-children-families/joint-childrens-services-planning>

and safe. Exposure to high levels of parental stress, neglect and abuse can have a severe effect on the brain development of children and affects them throughout their lives. We have therefore prioritised supporting children in their early years to help build resilience to try to break this cycle.'

The Plan recognises such an approach requires that services and partners are joined up, this has led to a commitment to the mapping of services and referral routes:

*As a first step to achieving this, we recognise that it is important that partners are fully aware of the provision available across the area, and that clear referral routes are in place to ensure appropriate targeting and support is better co-ordinated.'*³¹

Tayside

The Tayside Plan prepared by the *Tayside Children's Services Collaborative* covers the councils of Angus, Dundee and Perth & Kinross, with NHS Tayside. This has a central focus on prevention and early intervention in four of its five priorities and this is threaded throughout the Plan.

A number of planned interventions and approaches have been identified within the Plan which, when realised, should help deliver on those priorities, for example plans to:

³¹ Pp.43-44

- *Develop and implement a Tayside multi-agency framework to prevent and address early initiation into substance misuse, and*
- *Develop and implement a Tayside Mental Health Strategy for children and young people to ensure a focus on prevention, early identification and support.*

The Plan also explicitly states its intent to support the development of prevention and early intervention through an increased allocation of resources ‘... by developing a commissioning strategy which focuses services towards prevention and re-investing savings from fewer reactive and costly interventions. This means gradually re-balancing resources towards the early years; earlier identification of and response to problems; effective support to parents; and supported transitions into adulthood.’³²

As well as shifting resources to early intervention the Plan recognises the need to use a range of collaborative approaches to support this vision by, for example, working ‘..in partnership with Health and Social Care to develop shared evidenced based strategies on a range of key issues such as parenting, mental health and wellbeing and healthy childhood weight. They will focus on prevention, early intervention and tiered responses to needs.’³³

³² Pg.7

³³ Pg.20

Dundee Early Intervention Team

Adding to the evidence of positive impact of collaboration in the delivery of an early intervention approach is the independent assessment of the Dundee Early Intervention Team project (DEIT).³⁴

The project, based upon collaboration and the development of relationships with a wide range of partners, co-located services, and improved referral pathways, was aimed at those who did not meet thresholds for statutory support services. The overarching ethos of the project was one which saw the family as the holders of expertise and solutions and that the team's role was to support and develop this.

The evidence presented demonstrated significant improvements across a wide range of indicators and *'...demonstrates that adults, children and family units reduced the risks they faced and increased their strengths, showing improved relationships both within families and with their wider networks and communities.'*³⁵ In an interview with the team it was noted that survey feedback from other professionals involved with the project estimated a 70% to 95% improvement across SHANARRI wellbeing indicators.

³⁴IRISS, Dundee Early Intervention Team Independent Evaluation Report (May 2017) <https://www.iriss.org.uk/sites/default/files/2017-11/Dundee%20individual%20report%20FINAL%20REPORT%20260517.pdf>

³⁵ Pg.31

The evaluation found that the ‘... *model has demonstrated its credibility as a service, providing valuable support to families at an early intervention stage and adding value to existing support structures in Dundee.*’

However, budget constraints make for an uncertain future for DEIT and many other third sector services. It is vital in the context of tightening budgets that services should be transparently assessed on evidenced impact, and supported where they demonstrate value for money and positive outcomes.

A central finding was the positive role that relationship development could play:

*The partnership developed to deliver DEIT has been a key factor in its success. The structure has enabled staff to support families to engage and access a range of services, both within the delivery partnership and with external agencies. The work done to develop **relationships** with schools and health agencies has encouraged them to take a more holistic view of the needs of those they were working with.³⁶*

East Lothian

The East Lothian Plan recognises that the shift to early intervention and prevention will require a ***culture shift*** across all sectors and a commitment to address the tackling poverty, educational attainment and health inequalities.

Specific examples of collaborative approaches to early intervention include:

- The continuation and expansion of the *Family Nurse Partnership*³⁷ approach to working with young vulnerable parents and the introduction of the Psychology of *Parenting Programme* with parents of children aged under five.³⁸
- Musselburgh Total Place: Family Focus project: began in 2014. This project *sees all partners review their work in supporting families with a view to bringing forward local cross-partner, jointly resourced initiatives to target work with those families facing greatest challenge*. A review of this project has seen a commitment to shift resources towards its activities, specifically the establishment of a Family Focus Team.

³⁷ <https://beta.gov.scot/policies/maternal-and-child-health/family-nurse-partnership/>

³⁸ <http://www.nes.scot.nhs.uk/education-and-training/by-discipline/psychology/multiprofessional-psychology/psychology-of-parenting/psychology-of-parenting-project.aspx>

2.3 Connecting outcomes and investment

The connections between agreed outcomes and investment is central to the successful delivery of children's services. Such connections are grouped under the approach of joint strategic commissioning which is defined as *'...all the activities involved in assessing and forecasting needs, linking investment to agreed outcomes, considering options, planning the nature, range and quality of future services and working in partnership to put these in place.'*³⁹

The CYP Act 2014 introduced a duty around joint planning and delivery of services based upon engagement with children, families, their representatives and wider community groups (see 1.1.1 and 1.1.2 above). This is intended to help drive joint strategic commissioning of services based upon evidenced need and co-production.

The commissioning cycle of *'analyse, plan, do and review'* (Fig.2) is now firmly embedded in strategic planning. It is based upon not only ensuring budgets and services are targeted at delivering agreed outcomes, particularly shifting resources towards prevention and early intervention, but in ensuring these are built upon evidenced and ongoing needs assessments.

³⁹ Scottish Government, RCS-information sheet for Community Planning Partnerships Pg.9, available @ <http://www.ccpscotland.org/news/scottish-government-launches-realigning-childrens-services/>

Figure 2⁴⁰

A previous briefing paper produced by the National Third Sector GIRFEC project summarised this approach:⁴¹

Analyse: understand the current population of children, young people and their families; their needs; preferences and outcomes (the difference they want to make in their own lives.) Understand the total resource available and how it is currently being used.

Plan: work out what activities, services and interventions are needed that will support children, young people and their families to meet those outcomes.

⁴⁰ RCS-Information sheet Pg.9

⁴¹ National Third Sector GIRFEC Project, Collaborative Commissioning of Children's Services

Deliver: procure or purchase the services identified (the cycle then moves to some form of procurement); decommission or reshape services in partnership with providers.

Review: find out how services and interventions are working through monitoring and evaluation data, including conversations with children, young people and their families, and other sources; review whether the children's services plan delivered the agreed outcomes, e.g. were the right services funded; did anything change, etc. And most importantly, adjust the children's services plan to reflect the conclusions, e.g. decommissioning and redesigning services, where necessary.

A broad spectrum of approaches to strategic needs assessments are evident in the Plans including: the use of Scottish Government's Realigning Children's Services programme and its support for Children's Wellbeing Surveys;⁴² collaboration with the Dartington Social Research Unit;⁴³ and the analysis of existing data gathered through a range of partners.

As strategic commissioning is relatively new, examples of it tend to be developmental. The intent to develop commissioning strategies which link investment to outcomes can be seen in several of the Children's Services Plans, some of these are highlighted below.

⁴² <http://www.gov.scot/Topics/People/Young-People/realigning-childrens-services/meeting-childrens-needs>

⁴³ 5 areas used this approach: <https://dartington.org.uk/>

Renfrewshire

A fundamental building block for strategic commissioning is a regional strategic needs assessment. This can support the development of agreed outcomes and the connecting of these to commissioning strategies.

Partners in Renfrewshire commissioned two extensive epidemiological studies in partnership with Dartington Social Research unit through consultations, with children, young people and families in 2011, and again in 2017, with over 10,000 children and young people involved on each occasion.⁴⁴

Findings from the first survey were used to develop a strategic approach to services and to underpin the contents of the earlier Integrated Children's Services Plan (2012-2015). Renfrewshire partners note the 2012 Plan *'...was based on robust survey data about children and young people's key developmental outcomes and established a strategic plan for a preventative, evidence-based approach to meeting needs.'*

⁴⁴Renfrewshire's Interim Plan, op.cit.Pgs.7&12

Our aim is to develop a shared outcomes framework which will see all children's service providers integrating their data and adapting how they collect, track and share data to ensure that we put greater focus on measuring outcomes

The Plan notes that the impacts of this evidence-based strategic approach have been seen to have been positive, as feedback from the Joint Inspection of children's services in December in 2015 rated its performance on improving the lives of children and young people as 'very good'. It went on to note they were delivering '*...improving trends through effective approaches to early intervention and tackling inequalities.*'

The follow up 2017 survey has meant progress against the outcomes agreed for the 2012 Plan could be assessed. However, in order to allow a fully considered analysis of that data, Renfrewshire has decided to publish an interim plan until the full three-year plan is published in April 2018.

In addition to full consideration of the data, the Interim Plan also lays out a commitment to involving third sector organisations and others more fully in the development of the Plan:

*'We want to achieve agreement between all planning partners and participants about the priorities for children's services and the manner in which we will measure outcomes...Our aim is to develop a shared outcomes framework which will see all children's service providers integrating their data and adapting how they collect, track and share data to ensure that we put greater focus on measuring outcomes ...'*⁴⁵

In order to effectively engage the wider sector in the joint strategic commissioning approach the Plan recognises the need to build capacity across the sector, and in particular that:

‘This will require us to build strategic commissioning skills and knowledge within these agencies such that they are more able to participate in planning.’⁴⁶

In recognition of the need for ongoing quality data collection and use, the Plan notes that:

‘Sharing priorities and harmonising data will enable us to develop a ‘data dashboard’ which will show the real-time progress of services towards achieving our shared priorities. A data dashboard will enable the Children’s Services Partnership Plan governance group to adapt activities and refine targets.’⁴⁷

What is described within Renfrewshire’s Interim Plan in relation to strategic needs assessments, ongoing data collection and analysis, and collaboration with supported stakeholders, is specifically designed to strengthen the links between outcomes and investment and we look forward to the further development of this and evidenced impacts.

⁴⁶ Pg.4

⁴⁷ Pg.16

East Renfrewshire

The development of a Family Wellbeing Service in East Renfrewshire was informed by a partnership including GP's, Health & Social Care representatives, Youth Justice and Child & Adolescent Mental Health services (CAMHS), with the programme being delivered by Children 1st. The one year pilot aims to provide support to children and young people experiencing a range of mental health issues and emotional distress and provides referrers (in the main GP's) and families with an alternative to the overstretched services such as Educational Psychology and CAMHS.

The pilot will help East Renfrewshire to determine how they will develop an early response to mental health issues. Gathering information about children and families experiences - and their stories - will inform the delivery of service. The pilot may have started with a discussion with concerned professionals but it will continue based on the feedback and input of the families involved.

The pilot is based on a genuine collaborative development between services and also based on curiosity and empathy about the issue of mental health.

This represents a change in the way improvement is evidenced – a focus on social/relational aspects as experienced by the families themselves rather than purely clinical and numerical outputs.

To date learning from the pilot has highlighted the following:

- It is helpful to have an understanding of need and how it is currently being met or not.
- The pilot came out of recognising a particular challenge
- The model evolved out of understanding this challenge – then sharing this with a wider group of professionals to gain their perspective.

The Scottish Recovery Network (SRN) are carrying out an external evaluation, with a focus on people's stories rather than clinical information, which will include potentially different measures and imperatives. For example, the H&SC Network may be looking at measures such as reductions in CAMHS waiting lists; however the SRN and Children 1st are focusing more on individual outcomes, where the families involved are reporting improvement. This represents a change in the way improvement is evidenced – a focus on social/relational aspects as experienced by the families themselves rather than purely clinical and numerical outputs.

Inverclyde

A data repository has been developed in Inverclyde and shared across strategic services, an analysis of which is presented in Inverclyde Alliance's *Services Strategic Needs Assessment*.⁴⁸ This has formed the basis of an appraisal of the current needs of children, young people and families and is designed to enable more precise targeting of available resources.

⁴⁸ Inverclyde Plan, <https://www.inverclyde.gov.uk/health-and-social-care/support-for-children-families/joint-childrens-services-planning>

The intention is that this will lead to the development of a Joint Strategic Commissioning Strategy ensuring that agencies can work together to deliver the right services and support:

*'We will ... work creatively with all partners across the public, private and third sectors to build variety and capacity in preventative interventions by developing a commissioning strategy which focuses services towards prevention and re-investing savings from fewer reactive and costly interventions. This means gradually re-balancing resources towards the early years; earlier identification of and response to problems; effective support to parents; and supported transitions into adulthood.'*⁴⁹

Various examples of promising practice are listed within Inverclyde's Plan in line with such an approach:

For example, the first priority noted in the Plan, *Our children and young people have access to early help and support*, is supported by intermediate outcomes, including making people more aware of services, and for partners to be better at coordinating support.

⁴⁹ Pg. 30

In order to deliver this, the following actions have been taken:

- *Inverclyde life* was developed in partnership with CVS to connect people to services,
- Mapping exercise of all services providing child care service across Inverclyde by Barnardo's was carried out as part of the process of developing the initial parenting and family support strategy,
- Barnardo's service is the central referral mechanism for access to all parenting programme support.⁵⁰

2.4 Taking an accountable and transparent approach

The requirements of the CYP 2014 Act to engage children, families, their representatives and third sector service providers in the development of Children's Services Plans will require the development of structures of good governance which support and encourage such engagement.

Particular attention should be paid to areas of accountability and transparency so that everyone understands how decisions about services are made, how they can feed into those decisions, how impacts are measured and who is responsible for delivery of agreed outcomes and activities.

⁵⁰ Pgs.43-44

The general principles underlying good governance flow from various sources of guidance and should be reflected in the process of children's services planning (see section 3 below).

These principles include: ⁵¹

- **Clarity of purpose:** all of those involved are clear what the aims of the combined efforts are.
- **Clear on roles and responsibilities:** all involved are aware of governance approaches in their area.
- **Taking Informed, transparent decisions, managing risk and exercising control:** appropriate structures and processes in place to support effective decision making in partnerships.
- **Developing capacity and capability of the group (partnership) so that it is effective:** members' ability to develop their capacity and capability to competently address their roles and responsibilities in children's services planning.
- **Involving stakeholders and being accountable:** involving the right people in decision making, ensuring continuity so that decisions are carried through and that partners are held to account.
- **The importance of integrity:** based on mutual trust and respect.

⁵¹ Good Governance: A Code of Practice for the Voluntary and Community Sector (2010) @ <http://www.rcvda.org.uk/sites/default/files/contentfiles/Code-of-Governance-Full1.pdf>

NTSG Project research

In 2014 the NTSG project gathered evidence in nine CPPs to assess the preparedness, in terms of governance arrangements, of the public and third sectors to work together to plan children's services.⁵²

That research noted the central role of good governance:

Good governance, particularly when working in partnership, is recognised as a key component in ensuring that processes are carried through meaningfully and effectively, involving the right people, in the right way, and working to agreed timescales while being open, honest and accountable.

However, it also highlighted various areas of concerns under each of the principles listed above and found that, in the CPP areas assessed;

- only 36% of third sector respondents were aware of the governance arrangements in their local areas,
- only 33% of third sector partners were certain about their roles and responsibilities within the CPPs,
- many had concerns about both their capacity and capability to effectively contribute to planning,
- significant concerns also came from the third sector that the right people were involved in decision making.

It was clear from this work that much more needed to be done to strengthen governance arrangements within the children services planning process, and that this should form a central part of considerations to ensure effective and sustained engagement.

⁵² Barnados, Snapshot: The role of good governance in developing Children's Services Plans in Partnership Pg.4

East Renfrewshire

East Renfrewshire's Plan lays out a shared outcomes framework. The Plan details clear objectives related to each outcome, along with a range of activities required to deliver each objective.

Crucially it also includes specific data sets and a range of indicators which will be used to measure progress and identifies lead agencies, or departments, responsible for the delivery of those objectives and activities.

The Plan includes a section on the planned spend, breaking down the indicative amounts directed to children and young people's services in order to give as full a picture as possible on the level of investment from different parts of the local authority, the health and social care partnership and other partners.

Oversight of delivery is clear and is the responsibility of the '*...Improving Outcomes for Children and Young People Partnership and an annual report of the plan will be compiled by the partnership and reported through the local community planning governance structures ... Throughout the next three years the partnership will promote the plan, monitor its progress, intervene to resolve any difficulties with its delivery, and publicise its achievements.*⁵³

⁵³ East Renfrewshire Plan, Pg. 15

Renfrewshire

Neighbouring Renfrewshire's Plan also highlighted the need to consider and build the capacity of third sector partners and highlighted their intent to build capacity in the sector to allow for more meaningful engagement in the planning process.

*We have learned that some of our third sector partners need additional support to expand their involvement in the planning of children's services. We will allocate additional resource to support capacity building activity.*⁵⁴

Summary of key points

It can be seen from this snapshot of selected plans that many promising examples of children's services planning exist. Below is a summary of the main ones outlined above, which we believe might prove impactful in delivering positive outcomes for children and young people, and which might usefully be considered by partners.

⁵⁴ Renfrewshire Plan, Pg. 12

Participation

- It is recognised that, in order to effectively participate, children, young people, families and third sector service providers, and those seeking to represent the interests of children and young people, may need support in order to build their capacity to do so.
- Longer-term participatory approaches, backed up by ongoing support and capacity building, should be considered for their potential effectiveness in supporting meaningful engagement.
- Relationships with the people whose views are sought can be central.
- Methods for coordinating participation from the third sector can help to formalise input.
- Training and support for relevant staff on participatory methods and on children's rights is useful in the development and maintenance of effective engagement processes.
- The use of a wide range of methods to gather views and feedback may be most effective.
- A formalised process and reporting cycle which requires evidence of efforts made to gather such views, and the impact of those views on decisions, should be considered.

Prevention and early intervention

- A shift towards prevention and early intervention requires cultural change across all third sector and statutory partners and agencies.
- The establishment of cross-referral and interagency work may help develop such a shift.
- Interagency work is often best established and maintained through strong relationships.
- A commissioning strategy which explicitly seeks to refocus resources to prevention and early intervention would seem to be a fundamental part of this shift.

Connecting outcomes and investment

- The ability of the third sector to engage effectively in a joint strategic commissioning approach may require some capacity building if it is to be strengthened.
- Strategic needs assessments are central and should not be viewed as a one-off event but an ongoing process.

An accountable and transparent approach

- The principles of good governance should be adhered to (see s 2.4 above). Again the capacity of third sector to engage with such process needs to be considered.
- Shared outcomes frameworks, with clear objectives, activities, named responsible people/agencies, timeframes and a reporting framework are crucial elements in good governance approaches.
- Oversight arrangements should be clear and accessible.

**The National Third Sector GIRFEC Project,
February 2018**



Section 3:

Useful resources

Section 3:

Useful resources

1. Barnardos, National Third Sector GIRFEC project resources.
<http://www.barnardos.org.uk/thirdsectorproject/tsp-resources.htm>
2. The Children and Young People's Commissioner, *The 7 Golden Rules for Participation*
These are a set of principles that anyone working with children and young people can use
They help children and young people tell adults about things that are important to them.
<https://www.cypcs.org.uk/education/golden-rules>
3. The Children and Young People's Commissioner's office has produced a range of work that encourages children and young people to participate or provides guidance on how to encourage participation. Useful publications in this area can be found here:
<https://www.cypcs.org.uk/publications/participation>
4. Children's Parliament works across sectors and with a variety of agencies to ensure children's voices are included in their practice and seeks to engage children in a creative exploration of topics that impact upon their lives. Contact them to find out how Children's Parliament can work with you.
<http://www.childrensparliament.org.uk/our-work/>
5. The Children's Rights and Participation team sponsored Children in Scotland to carry out research on the impact of children and young people's participation on policy making at national and local levels. This research focussed on six qualitative case studies, illustrating a range of participation and engagement across Scotland. The conclusions and recommendations will help to support the engagement of children and young people in future policy making.
<http://www.gov.scot/Publications/2018/02/7671>
6. Leapfrog is a research project with very practical outcomes; tools and toolboxes that anyone can use to do more creative and engaging consultation. The tools are not prescriptive formulas or processes, but instead effective ways to do more with less time, transforming activities and workshops to make them better. The toolboxes are collections of related tools that go together well.
<http://leapfrog.tools/tools/>
7. SAMH's Going to Be campaign was launched in May 2017. We can't always prevent young people from developing a mental health problem but we can give them every chance to understand their mental health and normalise help-seeking without stigma.
<https://www.samh.org.uk/documents/welltrained.pdf>
8. Community Planning, *Community Planning Toolkit*. The toolkit provides guidance on the issues to consider when planning and designing community engagement. It focuses on quality and effectiveness, process planning and designing engagement tailored to the particular issue, level of participation to be achieved, timeframe and range of stakeholders affected.
<https://www.communityplanningtoolkit.org/sites/default/files/Engagement.pdf>

9. NHS Scotland, *The Place Standard tool*: The tool lets communities, public agencies, voluntary groups and others find those aspects of a place that need to be targeted to improve people's health, wellbeing and quality of life.
<http://www.healthscotland.scot/tools-and-resources/the-place-standard-tool>
10. The Scottish Community Development Centre, *The National Standards for Community Engagement (2016)* The National Standards for Community Engagement are good-practice principles designed to support and inform the process of community engagement, and improve what happens as a result.
<http://www.scdc.org.uk/what/national-standards/>
11. The Scottish Community Development Centre, *VOiCE*
This is planning and recording software that assists individuals, organisations and partnerships to design and deliver effective community engagement. VOiCE can be used to support a range of participation from overall area regeneration to specific concerns of users of particular services.
<http://www.scdc.org.uk/what/voice/>
12. Scottish Government, *Realigning Children's Services programme*, this aims to improve outcomes for children. The programme sets out to achieve this aim through supporting local improvement in joint strategic commissioning (JSC) practice and, in doing so, increase the alignment between every individual child's needs and the services provided to meet those needs at the earliest opportunity.
<http://www.gov.scot/Topics/People/Young-People/realigning-childrens-services>
13. Scottish Government, *Children And Young People (Scotland) Act 2014: Statutory Guidance on Part 3: Children's Services Planning @*
<http://www.gov.scot/Resource/0051/00512307.pdf>
14. Local Government Benchmarking Framework Overview Report 2016/17 The sixth annual report for the Scottish Local Government Benchmarking Framework reports on how much councils spend on particular services, service performance and how satisfied people are with the major services provided by councils.
15. What Works Scotland is an initiative to improve the way local areas in Scotland use evidence to make decisions about public service development and reform.
<http://whatworksscotland.ac.uk/>

Endnotes

Terminology: 'Children', 'children's services' and 'related services'

'Child', 'children' and 'young people'

The term 'child' or 'children' refers to persons who have not yet attained the age of 18 years.

The term 'young people' is not used in Part 3, but in the context of the Guidance it is used to refer to older children (e.g. 12 - 17 years old) and those adults still eligible to receive a 'children's service' (e.g. care leavers aged 18 - 25 years old). (11)

Services

'Children's services' (41)

This means any service provided in the area of a local authority by a local authority, relevant health board, or 'other service provider' which is provided wholly or mainly to, or for the benefit of;

- children generally, or
- children with needs of a particular type (such as looked after children or children with a disability or an additional support need in learning). Some of the services captured by this definition will be providing services both to children and to those over the age of 18 (such as care-leavers).

'Related services' (42)

This means any service provided in the area of a local authority by a local authority, relevant health board, 'other service providers' or Scottish Ministers which, though not a children's service, is capable of having a significant effect on the wellbeing of children.

The Guidance explains such services includes those delivered by private or third sector organisations on behalf of, or in partnership with, the local authority, relevant health board, 'other service providers' or Scottish Ministers (e.g. a leisure service provided for the local authority by an Arm's Length External Organisation (ALEO) or a disability support service provided on behalf of the relevant health board by a charity).

Children's Services Plans: Promising Planning Examples

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