

Compairteachas Plana
Coimhearsnachd
Innse Gall



Outer Hebrides
Community Planning
Partnership

Integrated Childrens Services Plan 2020-2023



**Outer
Hebrides
Community
Planning
Partnership**

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INTRODUCTION

Failte gu Plana Seirbheisean Chloinne

The children of the Western Isles have been involved in the Dileab project for the last 18 months. Dileab means 'legacy' in English. Through the island's rich linguistic heritage and musical culture they have explored the legacy that has been left to them by generations gone before. A legacy of times shaped by difficulty, setbacks, clearance, survival, working with the elements of land, wind and tide, deeply anchored in place and tradition embodied by these islands. Through this Integrated Children's Services Plan it is the intention to show the legacy that will be left to the island's children of today and with their participation, the legacy they will in turn leave the children of tomorrow. A legacy that will see young people stay and make their homes in the islands as they mature into adulthood.

In October 2016 the First Minister, when setting up the Independent Care Review, made a commitment that Scotland would "come together and love its most vulnerable children to give them the childhood they deserve". Fiona Duncan, the Chair of that Review concluded more than 3 years later that Scotland must "set a higher collective ambition that enables loving, supportive and nurturing relationships as a basis on which to thrive." We accept the challenge of redesigning how we care for, nurture and develop those most vulnerable young people in our communities. The legacy must be that, not only are young people cared for but they are empowered, not only consulted with but they fundamentally participate in formulating the strategic direction of services which are there for their benefit; in other words an approach which reflects the reality of children's rights, and built on embedded principles of Getting It Right for Every Child.

Since the last Integrated Children's Services Plan in 2017 we have seen the passing of the Islands (Scotland) Act 2018 and the promise of a National Islands Plan. These are key pieces of legislation and policy designed to enhance and nurture island life for all our citizens. The wider policy framework including transport, housing, connectivity, education, among other things, are of vital importance to the life chances of our young people.

In recent months children and young people in the Western Isles have experienced the effects of the global Covid 19 pandemic and the 'lockdown' deployed to reduce the infection rate. The Plan has the flexibility to deal with emerging needs and the principles on which it is based remain relevant.

The Outer Hebrides Children & Young People's Planning Partnership is deeply committed to the ideals set out in the Independent Care Review and to ensuring that they are interpreted in a way that delivers in our remote island communities. The Plan we are presenting is not the final word but is part of a developing strategic process.

As leaders we encourage and challenge our colleagues, our third sector partners and our communities to rise to the challenge to allow us all across the Western Isles to work and learn together to support and nurture our most vulnerable children to the best of our abilities.

***Bidh seo mar dhileab againn.
This will be our legacy.***

Malcolm Burr
Chief Executive
Comhairle Nan Eilean Siar

Gordon Jamieson
Chief Executive
NHS Western Isles

VISION, ASPIRATIONS AND PRINCIPLES

Purpose

This is the Integrated Children Services Plan 2020-2023 (ICSP) produced by the Outer Hebrides Children and Young People's Planning Partnership (CYPPP). It sets out our joint vision, our shared priorities and the common outcomes we strive to achieve for children, young people and families in the Western Isles. It is a demonstration by all agencies, professions and staff of our commitment to achieving the best possible outcomes for them.

Our Shared Vision

It is our vision for every child in the Outer Hebrides to have loving, supportive, and nurturing relationships which act as the foundation stone for a sense of safety, healthy development and mutual respect. Young people are able to, overcome barriers and achieve their full potential. We look to create child friendly communities, where children and young people's rights are respected by working in partnership to get it right for all our children and young people, their families and their communities across the Outer Hebrides.

Our High Level Aspirations

Excellent Universal Provision.

We want all of our children and young people to thrive. We want them to be able to live healthy lives and learn across our island communities. The ambition remains for children and young people to become confident individuals, effective contributors, successful learners, and responsible citizens.

Tackling Inequality

We commit to reducing the gap between the most disadvantaged young people and communities and the least deprived. While we know that most of our children and young people do thrive here within our universal provisions, we acknowledge that some children benefit from specialist services and are committed to providing these.

Addressing Depopulation

We strive to make the Western Isles a place where families chose to bring up their children and that young people can stay by choice as a positive destination with the supports and opportunities necessary to achieve independence. Children are able to grow up and stay in their home communities

Improving Physical & Mental Health & Wellbeing

We aim to ensure that all children and young people are supported to maintain good physical and mental health and wellbeing.

The Voice of Children & Young People is Valued

We actively listen to children, young people and families. Ensuring children and young people have a clear voice at the heart of not only their own personal planning but also at the heart of our strategic initiatives.

Children's Rights are Protected and Promoted

We deliver on the provisions of the United Nations Conventions on the Rights of the Child (UNHRC) as incorporated in to Scots Law. We will ensure a rights based approach is taken throughout the strategic and direct work of all partner agencies.

Care Experienced Children and Young People are Loved and Supported

Care experience children and young people experience loving and nurturing relationships as a foundation for improving their experience of growing up and subsequently their adult life.

Early Intervention, Strengths Based, Trauma Aware Approaches

We recognize that investing in preventing challenges escalating requires as much investment of time and finance as dealing with crises. There needs to be a concentration on the strengths and assets of children, young people and their families, with an awareness of adverse traumatic experiences, helping them find solutions that work for them.

Integration & Co-operation

All partners are strongly committed to working together effectively to secure the delivery of efficient, high quality and best value services. The Western Isles will experience the same testing post pandemic environment as all local authorities where transformational changes will be necessary to address new social norms and strained budgets. The remoteness of the Outer Hebrides and our isolated communities dictate that integrated and co-operative practices are essential

'Island Proofing'

We recognize that policy, approaches and solutions developed at a national level will require to be shaped to meet the needs and realities of remote island life. Within our communities different islands may require bespoke approaches. Every effort will be made to ensure the efficacy of approaches across our remote island communities.

Our Core Principles

Early Intervention and Prevention	Responsive	Proportionate	Community based
Rights based	Partnership Working & Integration	Solution Focused	
Building on individual, family & community assets	Flexible	Holistic & rational	
Therapeutic and trauma informed	Non-stigmatising	Patient & persistent	
Child at the centre	Child focused policy	Improving wellbeing & reducing risk	
Participation based on empowerment and agency – giving a voice to children and young people			

This plan is built around core principles, distilled from the Getting It Right for Every Child agenda, the Curriculum for Excellence and, most recently, the Independent Care Review. They guide what we do as a Partnership. They define our ethos and the behaviours we expect of all our organisations and colleagues. They shape a culture where services are delivered 'with' (rather than 'for' or 'to') children and young people, their families and their communities across the Outer Hebrides.

The successful implementation of these policies will have a major impact on community and family wellbeing. We are committed to implementing them together in an integrated, coherent manner and this plan represents the joint framework from which all partners will work together to focus on agreed priorities. We believe that if we consistently apply the same shared approach over time, we will achieve and sustain long-term positive outcomes.

The views and needs of children and young people will be at the centre of all service delivery. We will celebrate the successes of our children and young people and will continue to work with them to build strength and resilience. Our outcomes focus will be to ensure that every child is Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible and Included.

Integrated Children's Services Strategic planning framework

This Integrated Children's Service Plan is based on the legal requirements set out in the Children and Young People (Scotland) Act 2014 and the subsequent Statutory Guidance on Part 3: Children's Services Planning – Second Edition 2020. Within the Western Isles, the Children and Young Peoples Planning Partnership has responsibility for the plan and sits within the framework of the Outer Hebrides Community Planning Partnership. This structure is set out in Appendix 1.

Within the wider context of community planning the ICSP is the main delivery vehicle for the achievement of children and young people's outcomes. The CYPPP will implement a performance and outcomes framework which ensures priorities set out in the plan are reached and that the impact on children, young people and their families can be measured in an effective way that allows reporting on progress against set outcomes.

Key National Strategic Drivers

Getting It Right for Every Child

Getting It Right for Every Child is the Scottish Government's national practice model and has been used, tested and refined throughout Scotland since 2006. It remains the basis for good practice. Getting It Right for Every Child supports families by making sure children and young people can receive the right help, at the right time, from the right people. The aim is to help them to grow up feeling loved, safe and respected so that they can realise their full potential.

The Getting It Right for Every Child agenda continues to expect the CYPPP to deliver better outcomes for children and young people. Getting It Right for Every Child demands that the partnership knows what to do, when to do it, and who else to get involved to deliver it. Action should be appropriate, proportionate and timely.

The Children and Young People (Scotland) Act 2014 & Statutory Guidance on Part 3, Children's Services Planning Second Edition 2020

The Act guidance sets out the strategic aims for a Children's Service Plan. Children's services should be provided in such a way which:

- best safeguards, supports and promotes the wellbeing of children*
- ensures that any action to meet needs is taken at the earliest appropriate time and that, where appropriate, action is taken to prevent needs arising.*
- is most integrated from the point of view of recipient*
- constitutes the best use of available resources*
- that 'related services' are provided in the way which safeguards, supports and promotes the wellbeing of children in the Western Isles.*

The Community Empowerment Act 2015

The Act made significant changes to community planning legislation. Community planning now has a clear statutory purpose focused on improving outcomes. It is explicitly about how public bodies work together and with the local community to plan for, resource and provide services which improve local outcomes in the local authority area, all with a view to reducing inequalities.

The Islands (Scotland) Act 2018

The Islands (Scotland) Act 2018 and the subsequent promise of a National Islands Plan will prove to be both a driver for change and an opportunity to design services which take into account unique island needs.

The Independent Care Review 2020

Throughout the Independent Care Review report principles of early intervention, flexible support, children's rights, participation, trauma informed practice, destigmatising language and decluttering the policy and guidance context are constantly repeated.

Mental Health Strategy 2017 – 2027 – A 10 year vision.

Prevention and early intervention are recognised as the key to minimising the prevalence and incidence of poor mental health and the severity of the life time impact of mental disorders and mental illnesses. Prevention and early interventions must be a focus of activity and funding

- Every child and young person to have appropriate access to emotional and mental well-being support in school.
- Appropriate, evidence-based, parenting programmes should be available across Scotland.
- Evidence-based interventions to address behavioural and emotional issues in children and young people should be available across Scotland.
- Mental health support and treatment for young people involved in offending who have mental health problems should be available across Scotland.
- Mental health training for non-mental health staff should be available across health and social care services.
- Training in first aid approaches for mental health should become as common as physical first aid.

The National Performance Framework 2018



The National Performance Framework sets out the Scottish Governments national purpose, values and outcomes. Our Integrated Children's Services Plan sets out the key elements we are working on over the next 3 years.

Local Strategic Drivers & Priorities

Our local drivers are those strategic priorities for improvement where we believe our collective efforts as community planning partners, working with children, young people and their families, can add most value in improving local outcomes, but particularly in tackling disadvantage and inequalities.

Children and Young People Who are Care Experienced.

Our care experienced children and young people across the Outer Hebrides will be given every opportunity to improve their life experiences and chances and allow them to flourish and develop loving stable long term relationships.

Children in the Early Years of their Lives.

Every child across the Outer Hebrides will have the best start in life. The early years of a child's life has been recognised as one of the most important milestone stages in human development. Getting it right at this stage of a child's life will provide a sound start in life and will form the foundation of future opportunities for the child to grow, achieve and maximise potential.

Children and Young People in Need of Protection and Support to overcome Adverse Childhood Experiences.

Children in the Western Isles will be safe. Those who do suffer from adverse childhood experiences will be supported at the earliest opportunity to overcome these.

Children and Young People who have Additional Support Needs.

Children and young people with additional support needs, their parents and families across will be **supported to achieve their full potential** and supported to overcome barriers that hinder this.

Children & Young People's Mental Health & Emotional Wellbeing

Across the Outer Hebrides we will work to continually **improve our children and young people's mental health and emotional wellbeing**. We will take account of the Mental Health Strategy 2017-2027 and the work of The National Children and Young People's Mental Health Taskforce. We will enhance and further develop support at an early stage to prevent the development of ill health and build resilient children and young people. We will ensure access to specialist therapeutic resources and support when required. There will be a sub-group of the CYPPP holding responsibility for each of these priority areas and for delivering on key outcomes.

We will further look to champion themes of:

- Multi-disciplinary and multi-agency working,
- Children's and young people's rights,
- Participation of children and young people
- Developing further a reflective developmental culture among professionals.

These efforts will run as a vein through the work of the 5 thematic groups. Additionally, it is recognised that poverty is a major factor influencing the life chances of children and young people and the community planning partnership poverty working group will be closely aligned to the ICSP and there will be representation from the membership of the Poverty Group on the Integrated Children's Services Planning Partnership overall steering group.

WHAT DO WE KNOW ABOUT CHILDREN & YOUNG PEOPLE IN THE WESTERN ISLES

Children and young people: their opinion

There is a plethora of statistics which we use to judge what children and young people in the Western Isles need and these are set out below. However the starting point is correctly to note what our young people are telling us. In a 2019 survey of school age pupils there were three clear top priorities:

- The environment
- The personal and social education (PSE) curriculum
- Supports for mental health and well being

This was followed up in Sept 2019 by a further survey of all secondary school pupils exploring their priorities for the PSE curriculum. The top concerns for all age groups were:

- Careers
- Emotional and mental health
- Bullying
- Relationships

Young people in the 15-16 year old age range also identified pregnancy and maternity, substance misuse and race. Their counterparts in the 12-14 year old age category identified social media as a high priority.

These priorities mirror those of the Scottish Youth Parliament. Our two local MSYPs were able to directly present these views to the Education Skills & Children's Services Committee of the Comhairle.

The voice of care experienced children and young people is central to the findings of the Independent Care Review published in February 2020. Indeed the Review was 'driven by an unwavering focus on the voice of care experience'. From listening to those voices the following fundamental messages were derived.

- The balance of power must be upended so that listening to children and young people is always the basis of all decisions made about their lives.
- There must be a focus on building and maintaining life-long relationships – that includes a broader understanding of the risk of not having long term, loving relationships.
- Scotland must parent, not process, children so there is no difference between the lives of children in care and their peers. Care experienced children must not miss out on the kind of childhood that many take for granted and the future that all our young people deserve.
- Families must be kept together wherever it is safe to do so. Families must get the support that is right for them at the earliest opportunity and it must be flexible, consistent, patient and free from stigma. This will mean that more children can live a safe, happy life at home with their families.

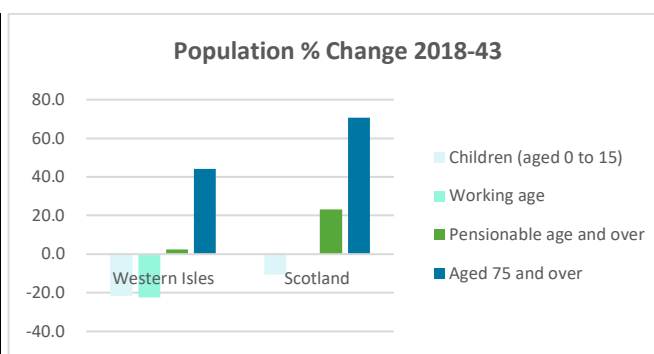
Who Cares? Scotland ran a project called 'Journey's North' aimed at allowing care experienced children and young people in the Highlands and Islands an opportunity to explore their experiences. They identified key themes of:

- De-stigmatisation. They felt there remains a stigma attached to 'being in care' and that they can be judged unfavourably by professionals and the community because of this.
- Children's Hearings are too formal, there can be too many people attending and they questioned the role of lawyers in these meetings. They believed it 'felt like a court'.
- The location of LAC Reviews should be considered more carefully. Having to go to social work offices could be stigmatising as well as practically difficult. Equally attending reviews in schools was also difficult as peers could be aware of the type of meeting taking place.
- Professional language could be difficult to understand and therefore it could be hard to know what was really being said.
- Young people also expressed that at times their views were not being fully taken into account. 'It doesn't matter what we say.'
- Having an independent advocate could help with a sense of confidence in meetings and this was bolstered further with access to groups such as 'Young Islanders'.
- Young people know some of the decision makers and know that they can have meetings with them should they wish. They wanted to know more about the elected members – who they were, what they did and how they could help care experienced young people.

Children and young people: whole population data

Population

In 2019 the **population** of the Western Isles was **26,720** with 13,524 Females and 13,196 Males. **5037 children are aged 0-18**. By 2042 the population is projected to decline to **22,542**. From 2018 to 2043 the 75+ age group in The Western Isles will increase by 44.2% whilst the population aged **under 16 in Eilean Siar** is projected to decline by 21.5%¹.

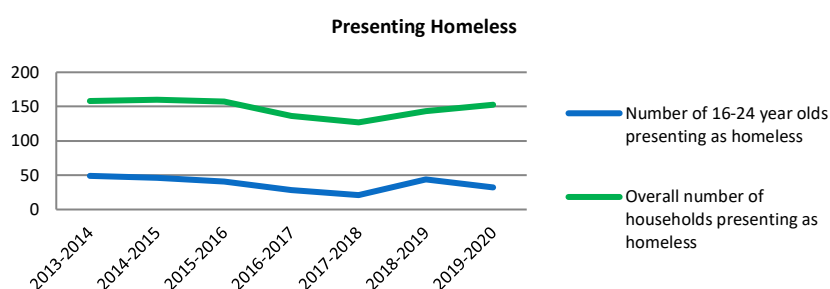


Deprivation

In the Scottish Index of Multiple Deprivation (SIMD) 2020 there are 36 Datazones in the Western Isles. Out of these **27** are in the **15% most deprived** in relation to the **Access domain**². 2 datazones, both in Stornoway West, are also in the **20% most deprived** in relation to the **Crime domain**. There are no datazones in the **20% most deprived** in relation to the any of the other domains.

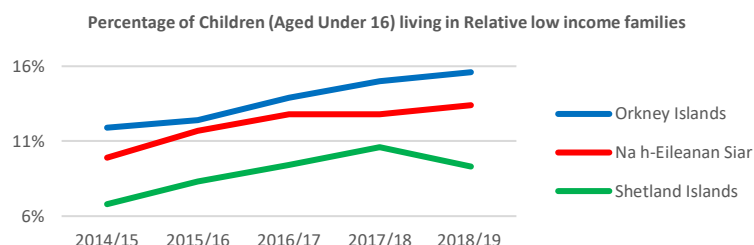
Homelessness

The overall number of **households presenting as homeless** in 2019/20 has risen from 143 to **153**. Out of those the number of **16-24 year olds presenting as homeless** has reduced from 44 to **32**.³



Poverty

The Western Isles has the **highest percentage of households that are fuel poor in Scotland**⁴. **29.95%**⁵ of households in the Western Isles had **children living in Fuel Poverty** in the 3 year aggregate period (2014 to 2016). Despite this level of fuel poverty the **Western Isles has one of the lowest percentages of children under 16 living in Relative Low Income Families** at **13%**⁶ although this has however risen from **10% in 2014/15**.



¹ <https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/population/population-projections/population-projections-scotland/2018-based>

² Scottish Index of Multiple Deprivation

³ Homeless Services, Comhairle nan Eilean Siar

⁴ <https://www.gov.scot/publications/scottish-house-condition-survey-2018-key-findings/>

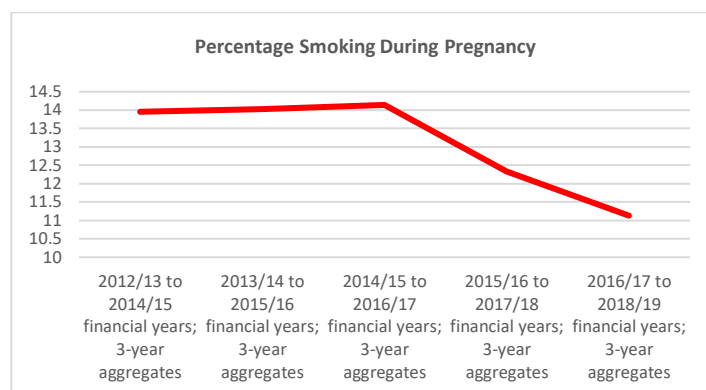
⁵ https://scotland.shinyapps.io/ScotPHO_profiles_tool/

⁶ <https://www.gov.uk/government/statistics/children-in-low-income-families-local-area-statistics-201415-to-201819>

Pre-birth & early years

Smoking in Pregnancy

The percentage of mothers who smoke in pregnancy has declined from 14.14% (in the 2012/13 to 2014/15 3-year aggregate) to **11.13%** (in the 2016/17 to 2018/19 3-year aggregate)⁷.



Live Births

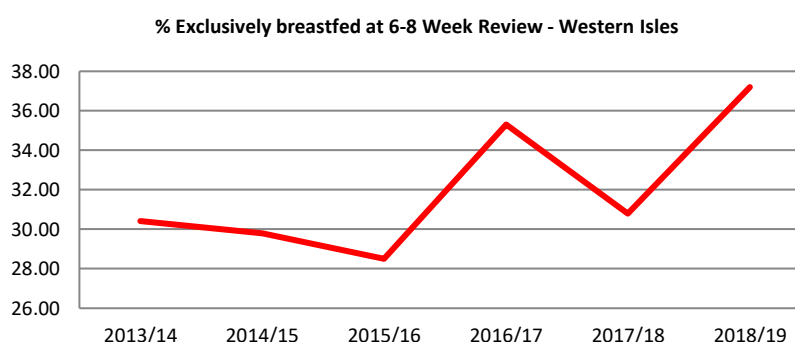
In 2018 there were **206 live births**⁸ which is equivalent to a standardized birth rate of **10.7 per 1,000 population** which was above the **Scottish average of 9.4** and was the joint 10th highest in Scotland. This is a decrease from 11 per 1,000 in 2017.

27-30 Month Review

In 2017/18 the proportion of children where concerns were raised in at least one domain at the 27-30 month review has decreased from 26.9% in 2015/16 to **18.6%**⁹. However this is above the Scottish average of 15.4%.

Breast Feeding

As of the year ending March 2019, the percentage of babies reported by their parent as being exclusively breastfed at 6-8 week review stands at **37.2%**¹⁰ which is above the Scottish average of 32%. The percentage reporting Exclusive breastfeeding at the 6 to 8 week review has increased in the last reporting year.



⁷ https://scotland.shinyapps.io/ScotPHO_profiles_tool/

⁸ https://scotland.shinyapps.io/ScotPHO_profiles_tool/

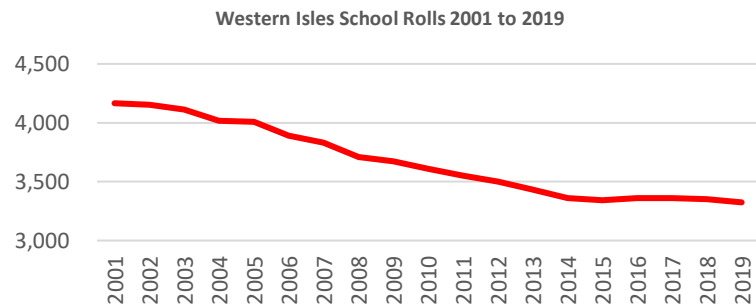
⁹ <https://www.isdscotland.org/Health-Topics/Child-Health/>

¹⁰ <https://www.isdscotland.org/Health-Topics/Child-Health/Infant-Feeding/>

School Rolls

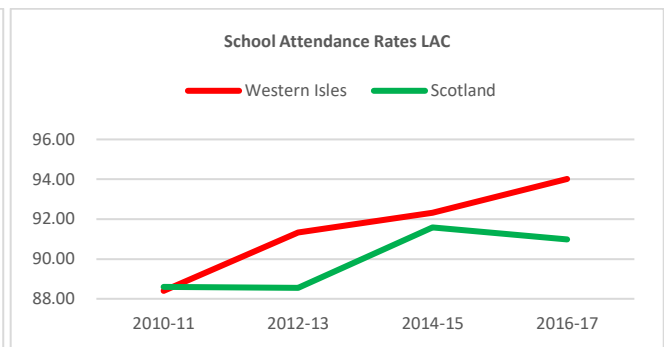
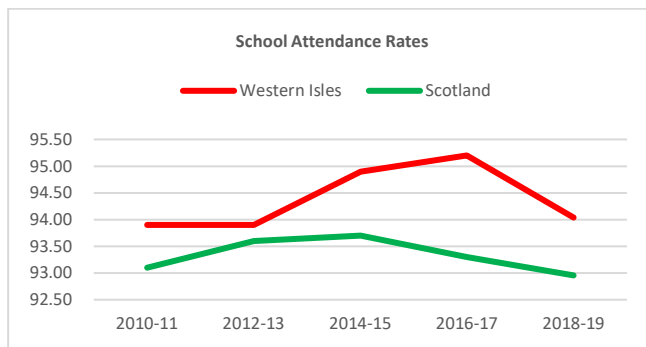
In 2019 the **Primary School Roll** was **1832** and the **Secondary School Roll** was **1492**.

Schools in the **Western Isles** have seen one of the **largest declines in school rolls** in Scotland with a drop of **6.36%**¹¹ (226 pupils) in the period from 2011 to 2019. The rate of decline over the past 5 years has not been as steep as in previous years.

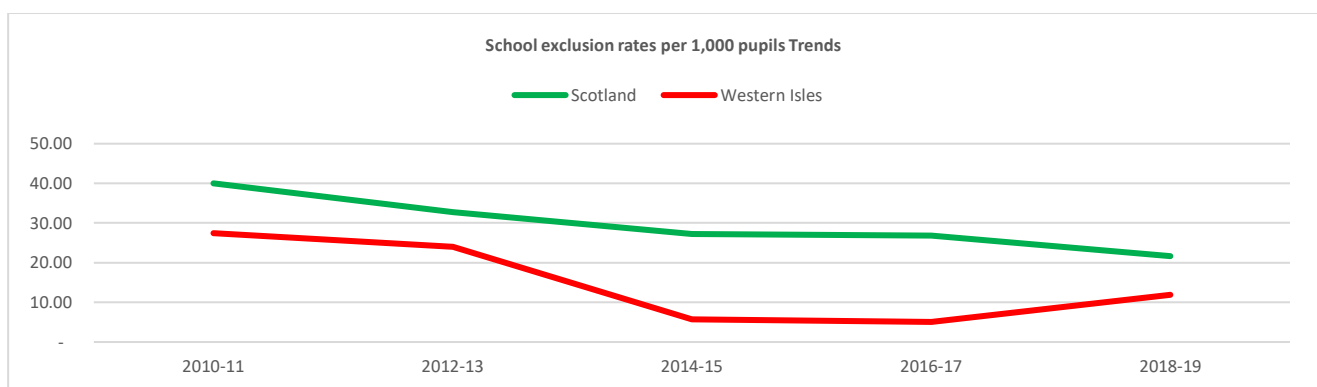


School Attendance & Exclusions

In 2018/19 the Western Isles schools had the **fifth highest attendance rate in Scotland** at **94.03%**¹². **School attendance rates for Looked After Children (LAC)** are the **second highest in Scotland** at **94.02%**¹³ and rates have improved steadily over recent years.



In 2018/19 the Western Isles the **rate of exclusions** has risen to **11.93**¹⁴ per 1,000 pupils however this is still the **sixth lowest rate of exclusions** per 1,000 pupils in **Scotland**. The rate of exclusions has risen from **5.06** per 1,000 pupils in **2016/17** to **11.93** per 1,000 pupils in **2018/19**.



¹¹ <https://www.gov.scot/publications/pupil-census-supplementary-statistics/>

¹² <https://www.improvementservice.org.uk/benchmarking/explore-the-data>

¹³ <https://www.improvementservice.org.uk/benchmarking/explore-the-data>

¹⁴ <https://www.gov.scot/publications/school-exclusion-statistics/>

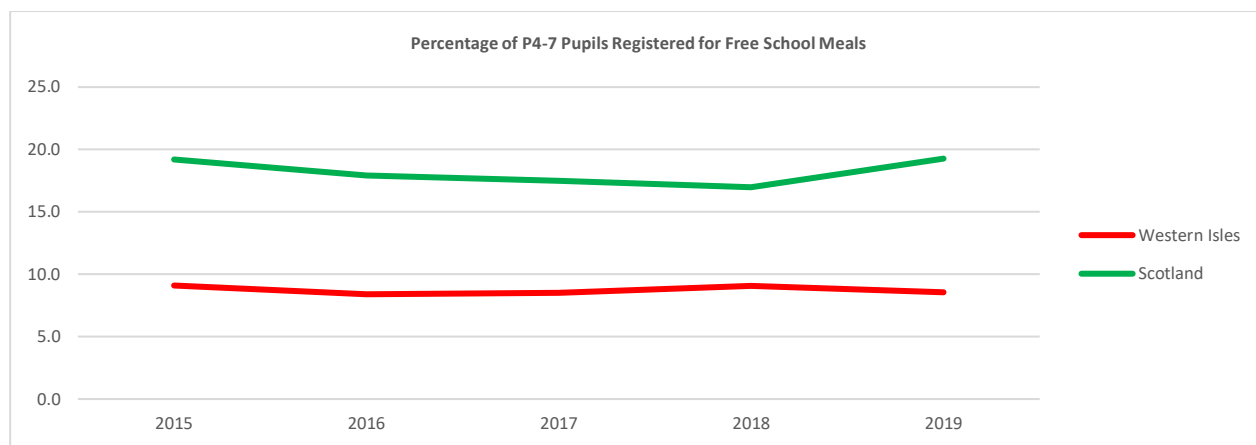
Additional Support Needs

In 2018 the **number of pupils with additional support needs was 1022¹⁵**. In 2019 **24.1% of Primary pupils** in the Western Isles were identified as requiring Additional Support Needs (ASN) and **38.5% of Secondary pupils** in the Western Isles were identified as requiring ASN.

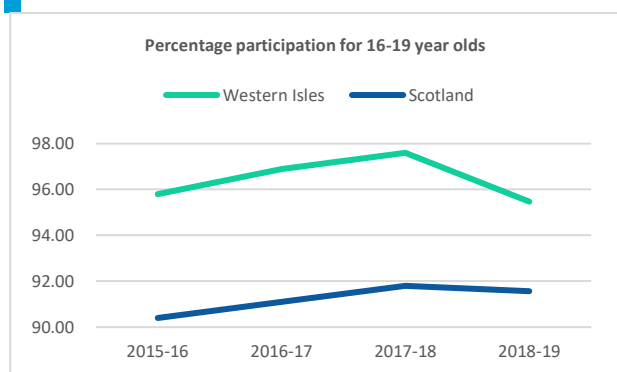
The ratio of ASN pupils vary across different authorities as it is a matter for each authority to define the structure, definitions and thresholds for identification and support for children with additional learning needs. The rate of ASN identification in the Western Isles sits a few percentage points higher than the average nationally but is not excessively high. The Comhairle uses a four-stage scale to categorise assessed learning needs and this approach allows us to provide the right levels of support to each of our children that need it. The first level of this four point scale identified learners that need a small degree of additional support within the normal class setting, without additional external resource. This can mean that statistics indicate a higher identification rate of ASN in Comhairle schools when stage one is included in the statistics.

Free School Meals

In 2019 **8.6%¹⁶ of P4 to P7** children in the Western Isles and **8% of Secondary Pupils** were registered for Free School Meals. These were the **fifth lowest in Scotland** for both P4 to P7 and for Secondary.



Participation Rates



The Local Government Benchmarking Framework figures for 2018/19 shows that **95.47%¹⁷ of 16-19 year olds from the Western Isles were deemed to be participating**. Although the figure has dropped from the previous year this was the **fourth highest in Scotland**.

A young person is deemed to be participating when they are actively engaged with an organisation for the purpose of learning, training, volunteering or work.

¹⁵ <https://www.gov.scot/publications/pupil-census-supplementary-statistics/>

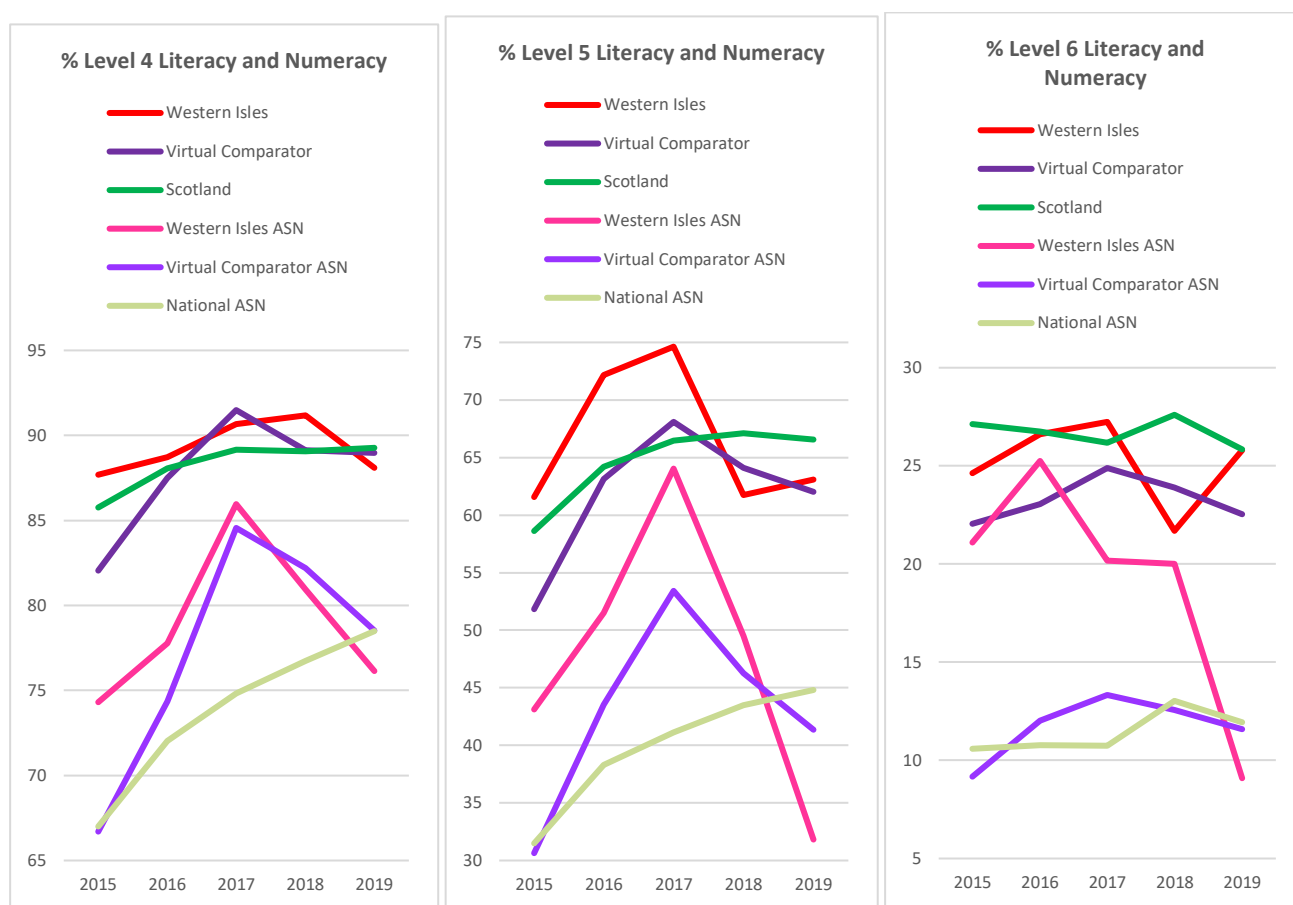
¹⁶ <https://www.gov.scot/publications/school-healthy-living-survey-statistics-2019/>

¹⁷ <https://www.improvementservice.org.uk/benchmarking/explore-the-data>

Leavers Literacy & Numeracy

88.1%¹⁸ of Western Isles School leavers in 2019 **achieved National Level 4 in Literacy and Numeracy**, **63.1% of achieved National Level 5 in Literacy and Numeracy** and **25.79% achieved National Level 6 in Literacy and Numeracy**. **All were lower than the Scottish average**. The percentage of **ASN leavers achieving at each level was also lower than the Scottish average**.

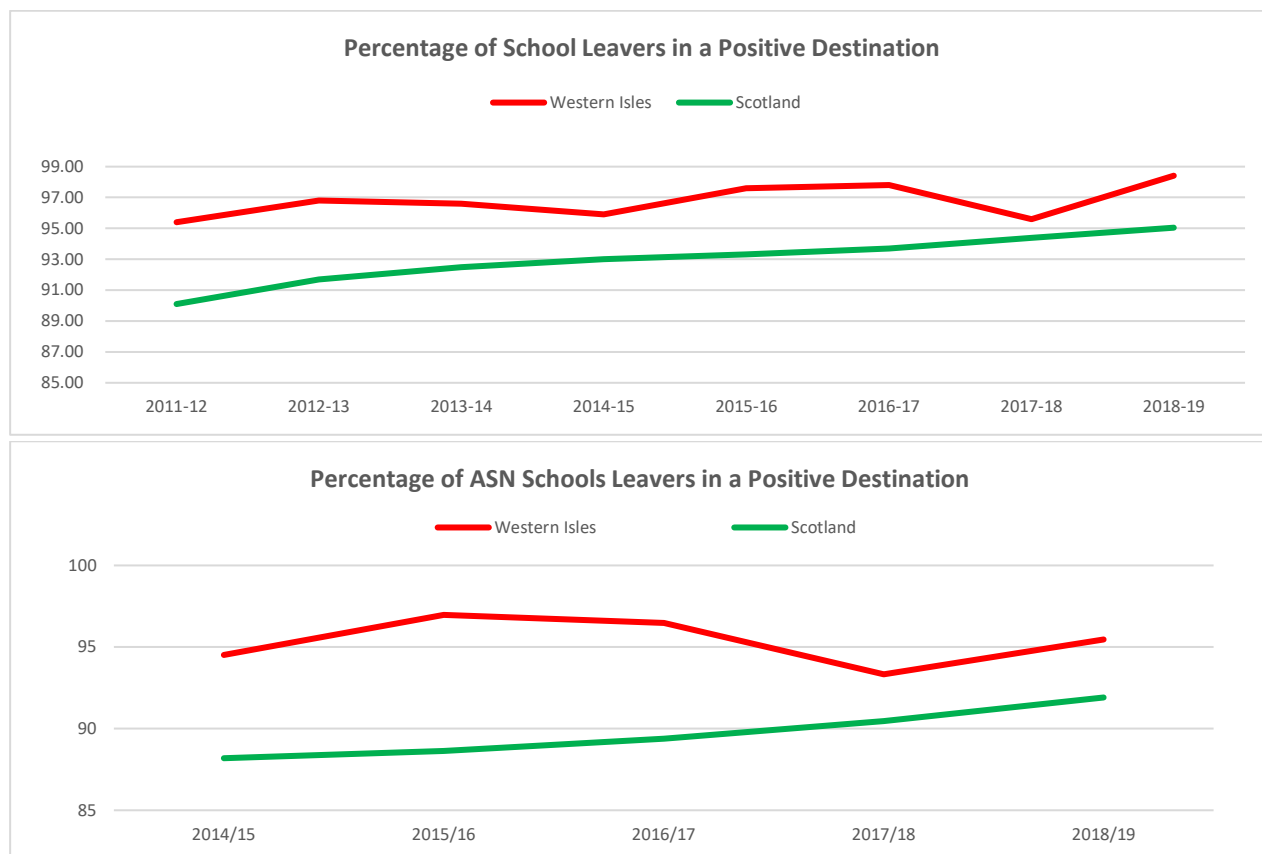
The ASN cohort within each leaver year is small as a proportion of the group and can vary significantly each year in both number and nature/complexity of learner needs within that year. This can result in apparent statistical fluctuation and should be interpreted with some caution. A pupil-level analysis of the data has been undertaken and some of the variation relates to significantly adapted progression pathways that specific ASN pupils required. The statistics referenced above focus on pupils achieving both literacy and numeracy and variation in results across these two curricular areas in the last two years has resulted in a decrease in the number of ASN learners achieving both. To address this change in performance, schools are planning earlier interventions and mapping progression pathways to national awards for pupils with ASN and more frequent and robust tracking is being put in place to be able to chart progress, intervene and provide more support to these pupils where it is required.



¹⁸ INSIGHT

Positive Destinations

Figures for 2018/19 show that **98.4%¹⁹ of School Leavers** from the Western Isles entered a **positive destination** which was the **highest in Scotland**. **95.45%²⁰ of ASN School Leavers** also entered a **positive destination** and this also exceeded the Scottish average. **34.9%²¹ of CnES school leavers** are in an **initial employment destination** compared with **22.9% nationally**.



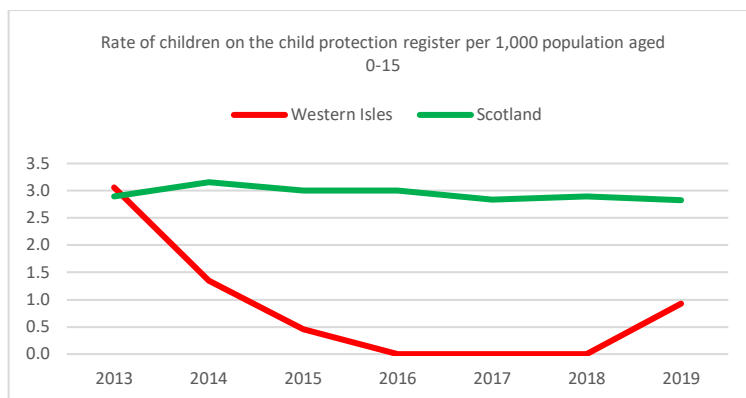
¹⁹ <https://www.improvementservice.org.uk/benchmarking/explore-the-data>

²⁰ INSIGHT

²¹ INSIGHT

Child Protection Investigations and Registration

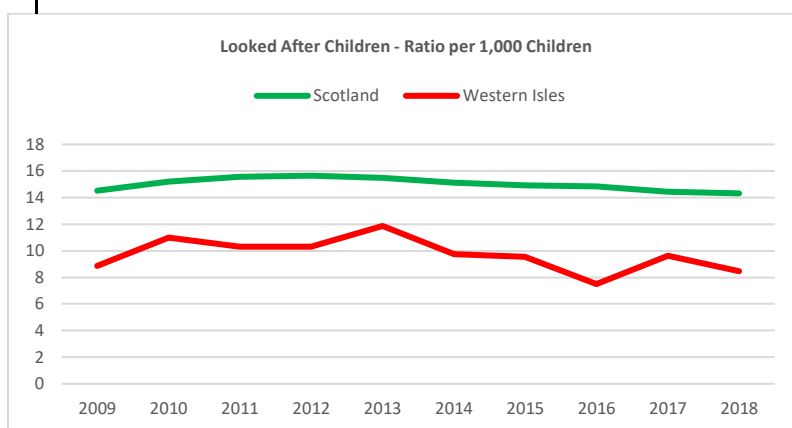
The number of **Child Protection investigations completed** from 1 August 2018 to 31 July 2019 was 44. Our overall numbers are very low with the number of children on the **Child Protection register** as at 31 July 2019 less than 5. This equated to a **rate per 1,000 of the population aged 0-15 of 0.9²²** which was the **third lowest rate in Scotland**. The figures in 2016, 2017 & 2018 are too low to report.



Looked After Children

In 2019 the number of **Looked After Children (LAC)** was 39 which was **0.8%²³** of the 0-17 population. This was the **fifth lowest in Scotland** where the average was 1.4%.

The number of **LAC living with Foster Carers/Prospective Adopters** was 8.



In 2018/19 **23%²⁴**, of those **eligible to receive an aftercare service** in the Western Isles, **were in employment, education or training** which was just **below the Scottish average of 25%**.

²² <https://www.gov.scot/publications/childrens-social-work-statistics-scotland-2018-2019/>

²³ <http://statistics.gov.scot/data/looked-after-children>

²⁴ <https://www.gov.scot/publications/childrens-social-work-statistics-scotland-2018-2019/>

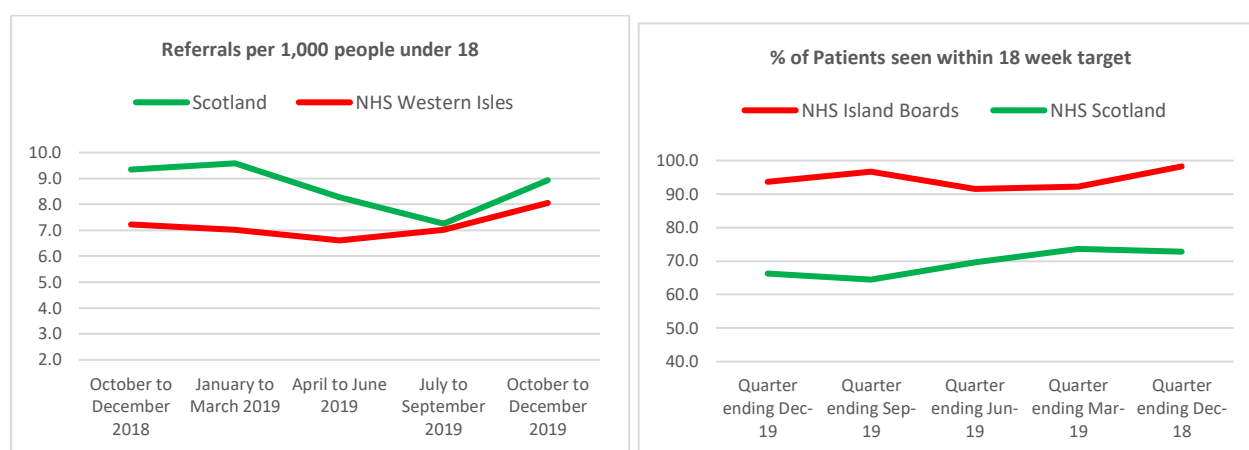
Mental Wellbeing

The average **Warwick-Edinburgh Mental Wellbeing Score for 15 year olds** recorded in the Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) **2018 was 45.9²⁵**. This was **2.55 lower than the score in 2013** and just slightly above the national score of 45.73. The highest possible score is 70.

The survey also asked pupils questions from the 'Strengths and Difficulties Questionnaire' (Robert Goodman, 1997). that lists 25 statements that are grouped into 5 scales -emotion, contact, hyperactivity/inattention, peer relationships and pro-social behaviour. Scores are grouped into bands 'normal', 'borderline' and 'abnormal'* for each scale. **39% of 15 year olds had an overall borderline/abnormal score**. This was **13% more than 2013** and the **same as the Scottish average**.

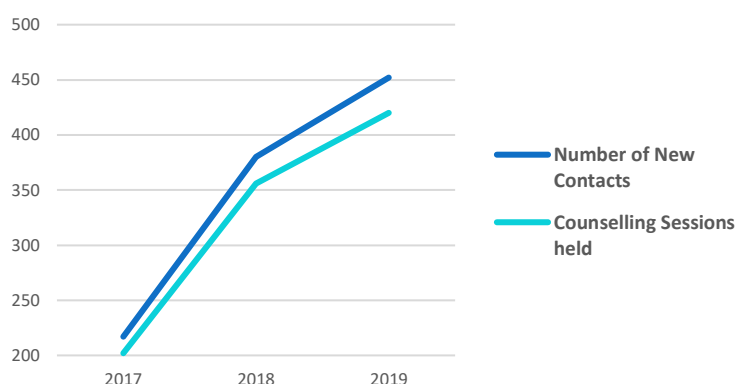
Child and Adolescent Mental Health Service (CAMHS)

In the Western Isles the Child and Adolescent Mental Health Service (CAMHS) referral rate per 1,000 people under 18 in the quarter ended December 2019 stood at **8.1²⁶** and there were 95 cases open at the end of December 2019. The percentage of patients in the Island NHS Boards seen on the quarter to December 2019 within the **18 week target stood at 93.7%** and has been **over 90% for the previous four quarters**.



Counselling Sessions

In 2019 Counselling and Family Mediation Western Isles provided **420 counselling sessions to school pupils in the Western Isles**. The two most frequent issues identified are **anxiety and depression** followed by **abuse and bullying**.



²⁵ <https://www.gov.scot/publications/scottish-schools-adolescent-lifestyle-substance-use-survey-salsus-drug-use-report-2018/>

²⁶ <https://beta.isdscotland.org/find-publications-and-data/conditions-and-diseases/mental-health/child-and-adolescent-mental-health-services-camhs-waiting-times/>

Adolescent Alcohol and Drug Use

In the 2018 Scottish Schools Adolescent Lifestyle and Substance Use Survey²⁷ **22% of 15 year olds** said they had drunk alcohol in the week prior to the survey. This was **an increase of 13% from the 2013 survey** and was **2% above the Scottish average**.

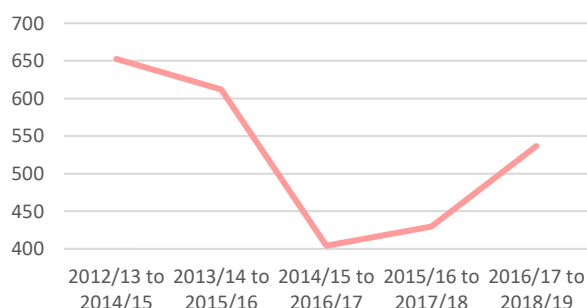
22% of 15 year olds also felt it was “ok” for someone their age to “try taking cannabis to see what it’s like”. This was an **increase of 15% from the 2013 survey** although **still 11% below the Scottish average**. There was an increase in the percentage of 13 and 15 year olds reporting that they had been offered cannabis with a **5% increase in 13 year olds to 11%** and a 21% increase in 15 year olds to 36%. Both are still below the Scottish average. **44% of 15 year olds** also reported that it would be “very” or “fairly” easy to get illegal drugs if they wanted to which was an **increase of 22% from 2013** although this remains 5% below the Scottish average.

Alcohol and Drug Hospital Admissions

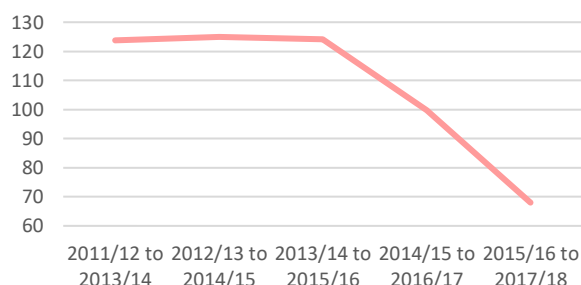
In the 3-year aggregate period 2016/17 to 2018/19 the rate of **Alcohol related hospital admissions per 100,000** for 11-25 year olds stood at **537.04²⁸** and was **increasing**. In the 3-year aggregate period 2015/16 to 2017/18 the rate per 100,000 of **Drug related hospital admissions** for 11-25 year olds stood at **68** and was **decreasing**.



Alcohol-related hospital admissions rate per 100,000
3-year aggregates, aged 11-25 years

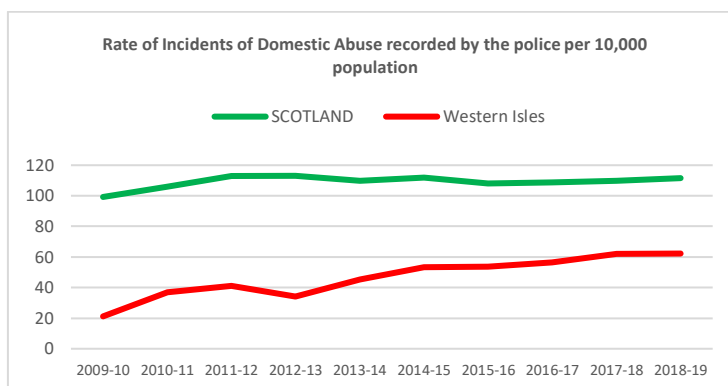


Drug-related hospital admissions rate per 100,000 3-year aggregates, aged 11-25 years



Domestic Abuse

Between August 2016 and February 2017 **the number of domestic violence incidents involving children was less than 20**. The Western Isles has **one of the lowest rates of domestic abuse incidents per 10,000 population at 62²⁹** against a **Scottish average of 112**. However the rate has increased from 34 in 2012/13.



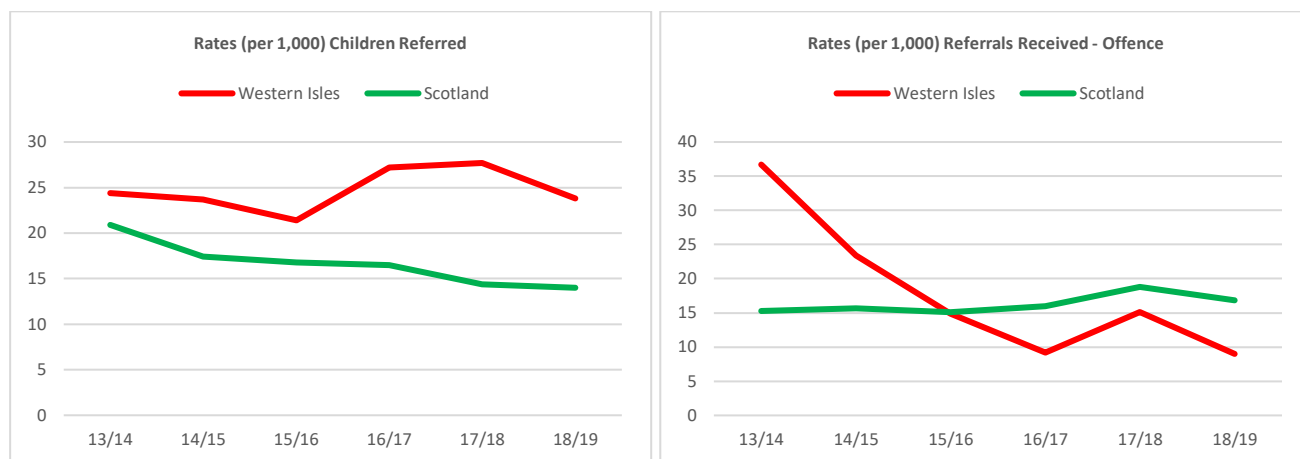
²⁷ <https://www.gov.scot/publications/scottish-schools-adolescent-lifestyle-substance-use-survey-salsus-drug-use-report-2018/>

²⁸ https://scotland.shinyapps.io/ScotPHO_profiles_tool/

²⁹ <https://www.gov.scot/publications/domestic-abuse-scotland-2018-2019-statistics/>

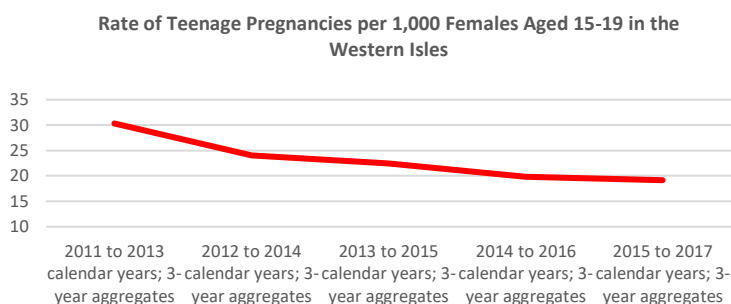
Children's Reporter

In 2018/19 there were **141 referrals³⁰** received by the Children's Reporter. This equates to a rate (per 1,000 children) of **24** for the Western Isles against a **Scottish average of 14**. **87% of the referrals** were received from the **Police** and **9%** were received from **Social Workers**. The average percentages of referrals from the Police and Social Workers **across Scotland** stood at **75% from the Police** and **15% from Social workers**. The rate of referrals in The Western Isles has dropped from 2017/18 to 2018/19 as has the rate of referrals received for offences.



Teenage Pregnancies

The Western Isles has a reducing rate of teenage pregnancies. In the three year aggregate period 2011 to 2013 the rate per 1,000 females aged 15-19 stood at 30.32 and in aggregate period 2015 to 2017 stood at **19.16³¹ per 1,000 females aged 15 – 19**. This and had one of the lowest rates in Scotland.



An audit of Vulnerable Person Disclosure (VPD) forms received during the period 12/10/16 to 12/10/17 highlights **the main areas of concern for families are Alcohol/Drugs Misuse (21%), Domestic Abuse (19%) and Mental Health (15%)**. These three areas account for over 50% of the main area of concern.

³⁰ http://www.scra.gov.uk/resources_articles_category/official-statistics/

³¹ https://scotland.shinyapps.io/ScotPHO_profiles_tool/

What we spend on our Children and Young People's Services

During the financial year 2019-2020 Comhairle nan Eilean Siar spent £44,337,000 on education and children's services. Early years accounted for £2,159,000, ASN for £3,671,000 residential placements on the island cost £567,000 and mainland placements cost £830,000

NHS Western Isles spent £1.6 million on Children's Services. This included £873,000 on Child and Adolescent Mental Health Services, £321,000 on Schools and Health Visiting, £49,000 on Maternal and Infant Nutrition, £103,000 on Alcohol and Drug Partnership and £131,000 contribution towards Action for Children.

The next three years will continue to present a range of challenges. A significant number of families will continue to face hardships created by the current financial climate and the aftermath of the Coronavirus pandemic. This will almost certainly give rise to greater levels of service need whilst agency budgets will continue to face significant pressures. It is envisaged that social and interpersonal issues will increase within the context of the current public health crisis and the aftermath. Demographic pressures continue to result in a struggle to recruit to key positions. We make a commitment to equality, social justice and fairness across our children and young people's services. There will be a focus on removing barriers where they exist and achieving the best outcomes for all children.

ACHIEVEMENTS FROM 2017 TO 2020

Improved outcomes: Positive Destinations

Western Isles have a **high rate of post school positive destinations**.

98.4% of CnES school leavers in positive Initial destination, the highest return in Scotland.

34.9% of CnES school leavers are in Initial employment destination compared with 22.9% nationally

This demonstrates the **commitment of teachers, trainers, schools, the Comhairle and employers** to ensure the positive futures for all young people.

Improved outcomes: Health and Wellbeing

Through our Action for Children partners we have **worked with parents who are pregnant to address attachment, finance, healthy start, substance misuse, diet and nutrition**.

A pre-parenting group for teenagers was established, tackling poorly planned preconception nutrition including: folic acid uptake and achieving a healthy weight prior to the first pregnancy.

Partners in Barra Children's Centre run **regular mum/baby/toddler groups which provide a wide range of pre, ante and post natal inputs**. The weekly Bundles and Bumps group provides support to Pregnant and parents of children under 1 year. The sessions include Baby Massage, nutritional information, the importance of taking recommended vitamins, general exercise and the importance of exercise and wide-ranging general health advice.

Delivered through Action for Children, a **"Vulnerable in Pregnancy" programme was extended throughout the Outer Hebrides**. Referrals come mainly from midwives and social work at the 12-week appointment. The target group is young vulnerable people whose child is at risk of being placed on the Child Protection register. Other referrals involve mental health and substance misuse issues.

To ensure that the expanding team of health visitors were up to date in knowledge and in order to maintain baby friendly award, **health visiting staff completed 2 day UNICEF breastfeeding training**.

Action for children run a **12 week nutrition group programme 3 times per annum for parents and their pre-school children**, supported by qualified, trained staff. Parents are shown how to cook, work to a budget and prepare healthy meals. Each week a lunch is prepared, with parental input then shared with the group. The group takes a holistic approach to wellbeing making sure all aspects of health are covered e.g. mental, physical and emotional.

Healthy Weight programmes are in place for children: HENRY (Health, Exercise and Nutrition for the Really Young) for toddlers and pre-school children and SCOTT for school aged children. These are evidence based, family focused interventions which are delivered on an individual basis rather than in groups due to the small island population and sensitivities around weight.

The provision of a programme of training to **ensure staff and young people are aware of sexual health & Blood Borne Virus health issues**

Delivery through the Alcohol and Drug Partnership of "Safe Spaces" in conjunction with festival providers to ensure vulnerable people are able to be safe at local music festivals and know where to access support if required.

The **provision of educational resources on passive smoking** in venues accessed by parents supported by the implementation of national smoking campaigns that target parents and children locally

The **provision of specialist & topical inputs to support the delivery of Curriculum for Excellence** to increase capacity of the school staff and those working with young people to appropriately address health and wellbeing issues.

There has been a **range of activity to strengthen young people's awareness of their own mental health and that of peers**. Action for Children, in conjunction with schools, has presented the '**Blues Programme**'. Education, Psychological Services and Health Promotion in conjunction with Education Scotland have begun the roll out of the **Mentors in Violence Prevention** programme which is designed to strengthen the 'voice' of young people in making connections and listening to each other.

The Multi-Agency Suicide Prevention Advisory Group has been re-established and developed a 2 year action plan. Key areas of work are: to undertake a review of the multi-agency response to recent suicides and suicidal behaviour, using findings from these incidents and relevant findings from national and international evidence to develop local services and operational guidance to improve the management of those who self harm or are established to be at risk of suicide; To assist in the development of local best practice & operational guidance; To review existing resources and operational practice to better understand if service response and service design has sufficient resilience to meet increased demand.

A Vulnerable Children and Young People at Risk of Significant Harm protocol has been developed. It is now clear that where a child or young person is identified as being vulnerable of significant harm professionals should be 'regularly involved in reviewing and improving practice'.

Training events have taken place for staff within Education, Skills & Children's Services in relation to the Vulnerable Children and Young People at Risk of Significant Harm protocol and the subsequent detailed guidance. Similar events have been held for members of the workforce responsible for child protection. It is now being rolled out across multi-disciplinary partners.

Building on the above protocol, **further multi-agency guidance for staff working with a young person with a specific risk of suicide or self-harm has been developed**. Training led by Educational Psychology, CAMHS and Children's Services has begun to support the implementation of this within schools.

In 2018/19 there were **three half day training events on the 'Risk Assessment Framework'** delivered during this period. 37 members of multi-agency staff benefitted from this training opportunity.

Since 2019, the CAMHS team have gained a **Consultant CAMHS Psychiatrist and this was supported by increased clinical psychology input**.

In 2019 **two substantive pediatricians were appointed**.

Training sessions have taken place with all senior pupils across the Western Isles to raise awareness of how to respond to concerns of suicide among their peers.

Children with additional support needs have benefited from a 3 day sex education training course.

Improved outcomes: children in their early years of life

Successful ongoing implementation of the Early Learning & Childcare Expansion Plan – **54% of eligible children throughout the islands are currently already accessing the full 1140 hour offer.**

Nursery staffing has been increased by 43% so far, with the majority of new staff coming through the Modern Apprentice route. **Feedback from parents is very positive** in terms of the flexibility of nursery opening hours and the savings in childcare costs.

Multi-agency interventions are being put in place at an earlier stage following implementation of the Health Visiting Pathway. There is a multi-agency referral system for the provision of support from a variety of early years services as soon as required (Vulnerable in Pregnancy programme, AfC MIN Group, Family Support, early entry to nursery, Triple P, Mellow Parenting, Speech & Language).

Uptake of funded 2 year old nursery places continues to be high across the islands due to awareness of Health Visitors, DWP, Social Workers and other front-line services

The Psychology of Parenting Project (PoPP) has brought about a **big improvement in the number of Group Triple P courses delivered**, the number of families engaging and staying with the programme and the positive impact reported on children's behaviour and parents' confidence following the course.

Baby massage courses are delivered on all islands by a range of trained professionals. Courses are very well attended and encourage positive attachment and wellbeing.

A system is now embedded in Maternity services **to regularly review all vulnerable parents pre-birth and to arrange targeted support where required** – links to Action for Children and Social Work are working well.

An Emerging Literacy focus has been taken in all nurseries over the last 2 years. **All staff have been trained in the Emerging Literacy approach and its resources**, and all nurseries have undertaken targeted improvement projects to support literacy development based on the needs of the children in that nursery (fine motor skills, oral language etc, listening skills etc).

Mini-Movers sessions are now offered for pre-school children in the Stornoway area at the Lewis Sports Centre, along with pre-school swimming lessons and Motiv8 activities during school holidays has **contributed to providing an increasing number of activities focussed on developing motor skills in under 5s.**

Improved support: vulnerable children, young people and families

There has been a **range of activity designed to strengthen the 'voices' of children involving children's organisations** delivering training and advocacy services to children and young people in need of additional support. Who Cares has been contracted by the Comhairle to provide individual & group support to children and young people who are 'looked after or accommodated'. Uniquely for the Western Isles this also includes children deemed to be vulnerable children.

Developing child assessments and plans being submitted to Child Protection Case Conferences by equipping practitioners with a Parenting Risk Assessment and Risk Assessment Framework.

Training sessions on the needs of vulnerable children who have adverse childhood experiences have been staged at a basic awareness/ general workforce level as groups as diverse as Faith Group Leaders, Catering staff, Youth and Community Groups, Modern Apprentices, Childminders and Playgroup workers have all expressed a need for such training.

Training has now been successfully delivered directly to GP practices to fit in with their protected time for learning and development

There are a suite of GIRFEC policies. These will be further reviewed further and measured against the challenge of the Independent Care Review to ensure we are parenting children and not processing them. It will

be considered if there is a need to further clarify the identification and role of Named Person, Lead Professional, Team Around The Child or Child's Plan.

Bespoke training events have also been delivered in respect of Getting Our Priorities Right addressing children affected by Parental Substance Misuse and Risk Assessment Framework training focusing on the analysis of risk and the formulation of child's plans

There is a considerable increase in web traffic for both the **Information for Parents and Carers webpages (+28%) and Information for Practitioners page (+61%)**. The Training Opportunities page visits continue to increase steadily but at a more modest pace as do visits to the What's New? option.

The Annual Conference for Public Protection has had a particular focus each year: 2017- Adverse Childhood Experiences; 2018 -Improving Lives - Improving Life Chances; and 2019 – Mental Health and Wellbeing with particular focus on Self Harming and Suicidal Ideation. These are well attended with attendance often in excess of 130 practitioners and managers.

The **ever strengthening collaborative work between the Our islands, Our Future alliance** was best exemplified by the Child Protection coordinator being invited to participate in a large Conference event in Orkney where he engaged in the facilitation of group work on the Wellbeing Indicators. Whilst on Orkney he also delivered Joint investigative refresher training to a team of Social Workers which was well received

Regular discussions also takes place with the Child Protection coordinator in Shetland who has participated in work streams of our Professional Learning and Communication sub group.

The Chief Social Work Officer has been integral to **the establishment of a remote local authorities CSWOs group** under the auspices of Social Work Scotland. This is designed to strengthen further the profile of protection and support issues in the Western Isles, Orkney, Shetland, Argyll & Bute and Highland councils, influencing an 'island proofing' of national policy and guidance.

OUR STRATEGIC PRIORITIES

Our strategic priorities are:

- *Children & Young People Who are Care Experienced*
- *Children & Young People in the Early Years of Life*
- *Children & Young People in Need of Protection and Support in Overcoming Adverse Childhood Experienced*
- *Children & Young People Who Have Additional Support Needs*
- *Children and Young People's Mental Health & Wellbeing*

Throughout the planning process we will be adopting the five foundations of the Independent Care Review as relevant to all young people and these will be referenced throughout.

Five Foundations Indicators Key



Voice is being heard



Family are given the means to thrive



Care that builds childhoods for children



People with a relentless focus on relationships



Scaffolding structures that are there to support children and families when needed.

Children & Young People Who Are Care Experienced

'Family is a big thing and it isn't really part of care. This plan should be about how we bring unconditional love into care to make children feel like they belong' : Care Through Our Voices group – March 2020

Outcome: Looked after children and care experienced young people in the Western Isles will be given a voice to fully participate in planning for looked after children and influence policy and procedures.

What we will do:

Support Who Cares Scotland and relevant agencies to ensure looked after children are listened to in all decision making about their care

Support a group of care experienced young people to participate in a meeting with the reporter and panel representative to share their views about attendance at children's hearing, including what has worked well and what could be better

Carry out an annual survey of children and families who attend children's hearings to obtain their views about the information they received for the hearing, how prepared they were, their participation at the hearing and how they were treated at the hearing

Support the 'Care through our voices' group (a group of care experienced adults) to participate in the planning, implementation and monitoring of the actions in the Integrated Children's Services Plan.

Support the 'Care through our voices' group to work with care experienced young people to ensure their participation in the planning, implementation and monitoring of the actions in the Integrated Children's Services Plan



Outcome: Looked after children and care experienced young people in the Western Isles will be supported to stay with their families or maintain relationships with their family as appropriate.

What we will do:

Provide early intervention and intensive family support for families requiring support in the Western Isles

Ensure all support provided to families is trauma-informed and addresses issues around poverty and mental health



Outcome: Looked after children and care experienced young people in the Western Isles will be cared for in a loving home where it is not possible for them to stay with their family.

What we will do:

Have a permanence plan in place for all children looked-after and accommodated in care for over six months which involves placement matching that meets the child's needs

Recruit three additional foster carer placements across the Western Isles

Raise awareness in the community for options for adoption in the Western Isles

Establish 'Housing support' and 'Supported Lodgings' services to increase the options for young people leaving care in the Western Isles

Establish a Continuing Care Policy in partnership with looked after children and care experienced adults

Establish an emergency bed to be available for any potential care experienced young person

Develop supported accommodation options for care experienced young people in Uist and Barra.



Outcome: Looked after children and care experienced young people in the Western Isles will be supported in education, work and the community by people who are willing to listen and be compassionate

What we will do:

Staff supporting looked-after children will be trained in providing support in areas of mental and emotional health. This group will provide strategic guidance to ensure this support is up-to-date and appropriate.

Pupil Equity Funding will continue to be used to provide additional support to looked after children and young people at school in the Western Isles

Education staff supporting looked after children will have the skills, knowledge and understanding to promote and support access to higher education and or further education

Employability staff supporting looked after children will have the skills, knowledge and understanding to promote and support access to employment or employability placements. In addition this group will look into funding specific work placements for looked-after children



Outcome: Looked after children and care experienced young people in the Western Isles will be supported by system of help, support and accountability which is there when needed.

What we will do:

Ensure reviews for looked-after children are child-centred, promote independent living skills and lead to empowering help and support

Review Comhairle Nan Eilean Siar's 'Corporate Parenting Strategy' including use of the term 'Corporate Parenting'

Offer health assessments to looked-after children in a manner that respects their rights as children in terms of how they want their health assessment and reviews to be undertaken.

Provide looked-after children free access to leisure facilities if requested and support to undertaken physical activities as and when appropriate



Children & Young People in the Early Years of Life

Outcome: Improvement in nutrition and healthy weight for children under five

What we will do

Review and improve information currently provided to parents of young children through universal services

Implement Healthy Hebridean Kids campaign to raise parental awareness of the importance of healthy eating and physical activity

Review nursery lunch and snack provision to ensure national nutritional guidelines are met and review Best Foods uptake

Ensure opportunities for access to physical activities for young children are widely shared and known by families throughout the islands



Outcome: Implementation of the Maternal & Infant Nutrition work plan

What we will do:

Raise awareness of the importance of pregnancy planning and nutrition, focusing on first pregnancies and higher risk groups.

Help to embed, in local services, the improvements identified from the QI projects carried out as part of the breastfeeding Programme for Government.

Support the development of training for professionals on children's diet, nutrition and healthy weight.

Support provision of, and promote access to, local weight management support during pregnancy and post pregnancy access to suitable weight management programmes.

Encourage focus on sustainability after initial Baby Friendly Award.



Outcome: Improvement in Parenting skills, capacity and support

What we will do:

Develop a multi-agency parenting strategy to draw together the strands of existing services, identify gaps and improve the offer based on parents needs

Review and develop services available to parents to support positive mental health before and after birth

Further develop awareness of services to increase referrals for parents of children aged 3 to 6 years.

Develop parenting programmes for parents of children aged 6 to 18 years.

Develop targeted support for parents of young children with ASN



Outcome: Improvement in the mental health of parents & young children

What we will do:

Develop supports & resources to help parents to build resilience

Develop therapeutic interventions to support young children, such as provision of Theraplay

Develop an understanding of trauma-informed practice in all front-line workers

Review and develop support available to children who are dealing with bereavement



Outcome: Improve the quality of Early Learning provision

What we will do:

Roll out the Forest Kindergarten approach across all nurseries to ensure all children attend ELC have daily access to high quality learning outdoors and regular access to nature

Embed Emerging Literacy skills and tools in ELC

Embed staff knowledge of new national guidance documents and curriculum developments



Outcome: Improvement in speech & language development for children under five

What we will do:

Embed Emerging Literacy skills and tools in ELC

Further develop and roll-out the 'Get Me Talking' programme through parent & toddler groups

Undertake review with Speech & Language re: current needs



Children & Young People in Need of Protection and Support to Overcome Adverse Childhood Experiences

Outcome: We will develop a collaborative strength based approach to address adverse childhood experiences and continue to raise awareness and understanding about ACEs and their impact on health and behaviour.

What we will do:

We will strengthen work with services that work with adults such as homelessness services, addictions and mental health to raise awareness of ACEs and to ensure that the impacts of parental ACEs on children are considered.

We will develop approaches to understanding adversity and supporting resilience

We will work with early years, school and youth based services to raise awareness of the impact of adversity in the lives of the babies, children, young people and families they work with

We will provide evidence and support work with Community Planning partners to respond to the associated effects, impacts and costs across the life course in different services and settings by awareness raising, development and implementation of trauma-informed/responsive policy and practice

There will be an assessment of skills and training needs across systems, services and teams

We will work towards a shared ethos and language around adversity and how trauma informed approaches can support resilience with individuals of all ages, families and communities



Outcome: Ensure our whole workforce has the adequate skills to be trauma-informed

What we will do:

We will work to detail the knowledge and skills for workers who have a role in providing specialist interventions for people affected by trauma who have complex difficulties.

Our practitioners adopting a holistic approach when working with children, young people and their families, one which recognises the central importance of relationships and a child-centred, trauma informed, rights-based approach

Our focus will be on developing solutions and resilience, building on strengths and being prepared to pre-empt and address potential difficulties

We will look to take a whole-family approach, with all those involved feeling valued and receiving appropriate individual, as well as joint, support



Outcome: Children for whom there is a child care concern get the help they need when they need it.

What we will do:

Review and update all relevant policies as they relate to self-harm and suicidal ideation.

Promote attendance of children at the Speak Out and Stay Safe programme delivered by NSPCC.

Elevating the profile of mental well-being of parents, children and young people by strengthening links between Child Protection Committee and Mental Health Services will be undertaken.

Involvement of young people in planning processes for the CPC will be increased through intensified engagement with Community Learning & Development.



Outcome: Improved understanding about the function of the Named Person, Lead Professional, Team Around the Child and Child's Plan

What we will do:

Develop a suitable training package on the role and interface of Named Person, Lead professional, the advantages of the Team Around the Child and Child's Assessment and Plans.

Working in cooperation with families we will develop a communication plan including leaflets for families explaining the roles and responsibilities of the aforementioned.

Develop a system for auditing child concerns shared with Named Persons from other agencies



Outcome: Staff take appropriate action to ensure that no child or young person is exposed to continued risk of harm.

What we will do:

Continued application of the current Care Inspectorate audit tool for Case Reviews to develop and embed a culture of self-evaluation across the partnership based on a robust method of performance monitoring and improvement measurement, including reviews involving partners.

Develop and implement a consistent approach to inter agency referral discussions (IRD's) to further improve day to day culture and practice improve information sharing improve recording and decision making arrangements.

Adopt and promote the newly developed and endorsed Highland and Island Wide IRD Protocol.

Provide training on the use of Multi-agency chronologies to improve risk assessments and support practitioners to make informed assessment.



Outcome: When plans are required to protect children and young people from harm, high quality, multi-agency, risk and need assessment frameworks and definitions are deployed, taking a holistic approach to reduce risk, meet needs and improve well-being.

What we will do:

Continue to deliver further training on local Risk Assessment Framework.

Develop and deliver training in response to the multi-agency guidance for staff working with Young People at Risk of Self harm and / or Suicide.

Review existing resources and operational practice to better understand if service response and service design has sufficient resilience to meet increased demand.



Outcome: Where children experience neglect it is recognised and responded to quickly.

What we will do:

Where children experience neglect, there will be a comprehensive assessment of the family circumstances and care plan to meet the assessed concerns

Improve the links between neglect and child poverty actions

Explore further assessment of Early Years collaborative working



Outcome: To translate Scotland's National Action Plan to prevent and tackle Child Sexual Exploitation into a local practice guidance.

What we will do:

Develop a preventative, early identification, intervention and supportive approach through the implementation of an OHCSE Action Plan to keep children and young people safe



Outcome: Children who are affected by Domestic Abuse have received appropriate timely and good services.

What we will do:

Translate Equally Safe into a local practice context and to achieve early identification of harm.

Follow up relevant actions arising from the Joint Seminar with the Adult Protection Committee focused on Domestic Abuse.



Outcome: To develop and embed a culture of self-evaluation across the partnership based on a robust method of performance monitoring, data sharing, improvement measurement and audit.

What we will do:

Continue to apply the current Care Inspectorate Audit Tool for case reviews and by developing a robust programme of reviews involving partners.

Establish an appropriate Data Set aligned to the National Minimum Data Set now rolled out across Scotland.

To use SCRs to inform and develop our practices based on the evaluation of findings and develop SMART improvement recommendations for CPC.

Robust and consistent inter agency referral discussions ensure highly effective actions to protect children and young people.

Implement the newly designed Highlands and Islands IRD protocol to further improve day to day culture and practice; improve information sharing, improve recording and decision making arrangements all of which will provide better outcomes for children and young people.



Children & Young People Who Have Additional Support Needs

Outcome: Children with additional support needs (ASN) will have a smooth integrated transition between children's and adult services.

What we will do:

Health protocols to direct the transition from specialist children's services to adult health services will be developed.

Review current strands–health, health pathways–then develop a shared protocol.

Utilise Getting It Right For Every Child to map key transition stages and guidance supported by education and awareness-raising.



Outcome: Children and young people with additional support needs will be supported with mental health and wellbeing by a skilled and knowledgeable workforce.

What we will do:

All staff supporting children and young people with additional support needs will consider the level of skill they require to support their mental health and wellbeing needs. This will be identified in the staff's Personal Development Plan (PDP) and Continuing Professional Development (CPD).

Knowledge and skills will improve through the provision of training which will include

- ***Applied Suicide Intervention Skills Training (ASIST) and SafeTalk***
- ***New to CAMHS--Early Years/School Age***
- ***Scotland's Mental Health First Aid: Young People (SMHFA:YP)***
- ***Low intensity Cognitive Behavioural Therapy (CBT) interventions for anxiety/low mood***
- ***Seasons For Growth***
- ***Cool 2 Talk***
- ***Delivering Sexual Health and Relationship Parent Education***



Outcome: Children and young people with additional support needs will be able to access services, support and information at the appropriate level, as per the health and wellbeing section of Curriculum for Excellence. There will be appropriate information and support to explore relationships and sexual health.

What we will do:

Provide sexual health and relationship training to guidance teachers, Learning Support staff, Public Health Nurses and other relevant staff, in order for them to deliver a comprehensive programme of education for their client group.

Use a range of recognised and evidence based approaches for delivering sexual health and relationship work.

Ensure appropriate literature, social media/digital resources and training materials are available for children, young people and parents (at Child's Plan meetings).

Provide puberty information packs for young people with additional support needs, and if appropriate easy-read leaflets.



Outcome: Children and young people with additional support needs will have increased access to family activities, sports and leisure, and learning opportunities.

What we will do:

Staff in Education and Children's Services (including Sport and Health) will promote and support activities specifically aimed at improving access to arts, sports and learning for children and young people with additional support needs.

Local partners will work together to develop a comprehensive and coordinated approach to the delivery of resources that support early family learning and play, including play@home, ongoing Bookbug implementation, and other information materials including physical activity cards aimed at preschool children.

The staff in sport, leisure and the arts are able to access support which raises awareness of strategies and techniques they can use to include with children and young people with additional support needs.

Training will be provided for staff and volunteers to raise awareness about safeguarding children and young people from sexual harm while participating in recreation and leisure activities.



Outcome: Children and young people with additional support needs will be included, involved and supported to participate in the ambitions outlined in the Active School Action Plan.

What we will do:

Increase opportunities for children and young people with additional support needs to be engaged in physical activity and sporting community links. Increase the number of children with additional support needs who attend physical and sporting activities.

Provide volunteering infrastructure for 'Active Schools' within schools and wider community.

Active Schools will support AHP's to maintain the Activ8 Programme for up to 12 referred ASN primary pupils.



Outcome: Families with children and young people with additional support needs will be supported to live in a home that meets their needs.

What we will do:

Discuss with Housing and highlight to other relevant Children and Young People's Planning Partnership (CYPPP) subgroups as to the pathway that should be followed.

All partners will know how to raise a wellbeing concern related to housing.

Ensure that children have access to environmental assessments from Occupational Therapy when appropriate.



Outcome: Children and young people with additional support needs will have mental health and wellbeing needs met.

What we will do:

Ensure children and young people are included in the Children and Adolescent Mental Health Strategy

Link with Children and Adolescent Mental Health Services (CAMHS) to support staff working with children and young people with additional support needs to ensure their mental wellbeing needs are met.

Ensure children and young people with additional support needs and their families have accessible information available.

Explore current work within all services including education in this area.



Outcome: Children and young people with additional support needs are engaged and their views on how they learn are taken into account

What we will do:

We will ensure that children and young people with additional support needs will be invited onto forums and supported to give their views on Curriculum for Excellence.

Develop tools to use which ensure the views of children and young people with additional support needs for learning are taken into account.



Outcome: Clear strategy and pathways for neuro-developmental concerns

What we will do:

Work with professionals, families, statutory and third sector organisations to gain agreement for and then implement an 'Outer Hebrides Pathway' for assessment and diagnosis.

Facilitate the development of agreed outcome measures.

Develop awareness and capacity of universal and targeted/specialist service practitioners to support children and young people with neuro developmental concerns and their families through training and information sharing.

Consider child or young persons and families experience of assessment and diagnosis.

Organise a Community of Practice, to share good practice and which provides clinicians with access to up to date research and information.



Children & Young People's Mental Health and Wellbeing

Outcome: We will improve the mental health and wellbeing of children and young people through early advice, support and education

What we will do:

Develop and implement an Outer Hebrides Mental Health Strategy for children and young people to ensure a focus on prevention, early identification and support

Improving early access to a continuum of mental health support and emotional wellbeing services delivered through a range of settings including schools.

Develop an evidence based relationships and resilience framework to improve children and young people's mental health and emotional wellbeing.

Complete a mapping exercise of current supports and data to help inform of future improvements.

Raise awareness of good mental health and wellbeing through health promotion

Strengthen service user engagement and participation across children & young people's mental health services



Outcome: Children and young people in the Outer Hebrides will be resilient and able to cope with life's ups and downs.

What we will do:

Review Personal and Social Education (PSE), the role of pastoral guidance in local authority schools, and services for counselling for children and young people and how this links to statutory CAMHS services

Expand infant mental health work including perinatal mental health

Develop a broad PSHE curriculum that engages all children and young people and train staff to support this. We will build confidence and capacity in our children and peer support to be able to identify and respond poor mental health and suicide including the provision of MHFA and ASIST training to senior pupils



Outcome: Children and families have access to good quality, accessible and timely support and services. Staff, children and young people and parents know where and how to access support.

What we will do:

Develop information for practitioners on resources available to them to support children, young people and families' mental health and wellbeing.

Develop info graphic for children young people and families and promote how we can support with mental health and wellbeing.

Promote normalness of stress and how we can manage it best.

Identify/ develop early intervention supports



Outcome: Work with partners to develop systems and multi-agency pathways that work in a coordinated way to support children's mental health and wellbeing.

What we will do:

Develop a workforce that is confident to support children, young people and families, to improve mental health and wellbeing, promote attachment and manage trauma experience.

Staff will understand how to manage stress and distress and particular links to Youth Justice.

Roll out a suite of mental health training for those who support young people in educational settings

Develop tiered learning and development opportunities for all staff and specifically for Named Persons.

We will explore a single point of access and look at the pathways and development plans around this



Outcome: Improve single and multi-agency frameworks for assessment, planning, review and risk management

What we will do:

Equip staff to deal with distress and stress and appropriately support and signpost children, young people and families.

Ensure care pathways include mental health and emotional wellbeing for young people on the edges of and services

We will develop new mental health improvements in primary care pathways; urgent care pathways, and support for children and young people with ASD and mental health issues.



Outcome: Raise capability in universal services to address tier 1 and 2 mental health issues in Outer Hebrides children and young people.

What we will do:

Develop and implement a learning opportunities / training pathway to increase the capacity, confidence and skills of practitioners to support and improve the mental health and wellbeing of children & young people

Extend and further develop programmes of Mindfulness and Resilience for practitioners working with children & young people; with a particular focus on schools.

Maintain delivery of regular mental health training courses: Introduction to Child & Adolescent Mental Health; ASIST, Safe Talk and SuicideTalk;

The delivery and implementation of guidance on self-harm and suicide prevention will be developed for practitioners working with children and young people.



Evaluation

How we will know we are getting it right for children, young people and their families?

Monitoring the implementation of this Integrated Children's Services Plan and evaluating its impact is a key responsibility of all partners in the CYPPP. To support this task each year, through the work of the CYPPP, we will produce an annual performance report to demonstrate progress towards achieving the activities, outcomes and targets we have set.

Each of the planning groups will work to a delivery plan with clear actions and the chair of each group will report directly to the CYPPP on what is being achieved, any challenges that are being experienced, including resource or service gaps, skills gaps and training requirements. The CYPPP will scrutinise performance reports and provide support to the planning groups in resolving difficulties.

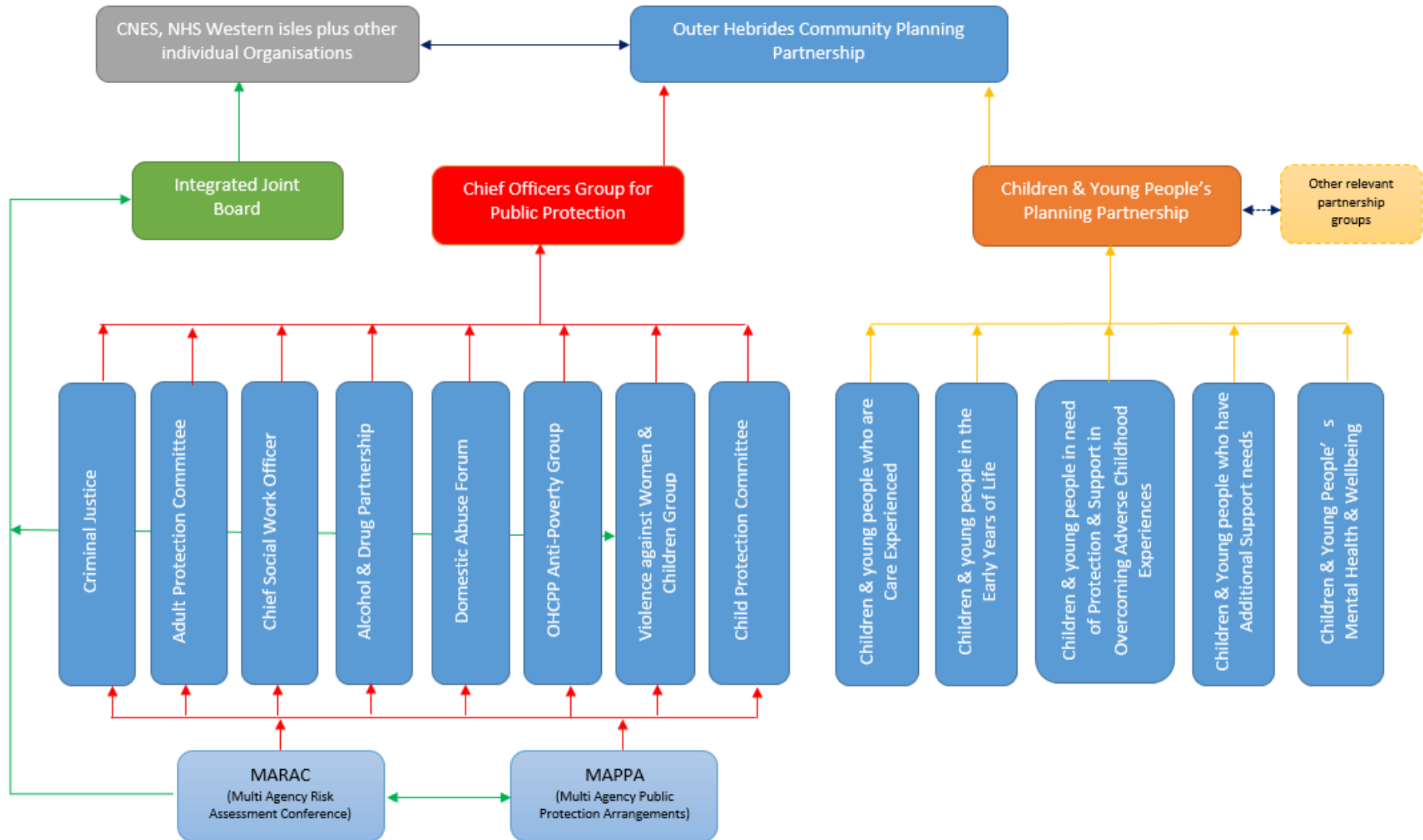
The CYPPP will regularly self-evaluate their effectiveness in progressing towards the outcomes of the ICSP.

During the evaluation process the Integrated Children's Partnership commits to:

- Improving approaches to engage with hardly reached and seldom heard children and young people, their families and their communities. There will be specific concentration on young carers, care experienced children & young people, those with mental health concerns and those with additional support needs.*
- Ensuring there will be an equity of opportunity to engage with the evaluation process throughout all the islands of the Outer Hebrides.*
- Provide high quality participation activities.*
- Explore and address inequalities, power differences and the ability and capacity of our young people to participate.*
- Consistently strive to improve partnerships with parents and our children to be able to shape our school services*
- Engage and support our MSYPs, Young Islanders Group, Care Through Our Voices Group and any other group representing Children & Young People and Care Experienced People.*

This Integrated Children's Services Plan will not remain static for the three years of its currency. We commit to being in an evolutionary process. Substantive changes will result in a new plan being released.

ICSP Governance Structure



Integrated Childrens Services Plan 2020 - 2023

