

Services for children and young people in North Lanarkshire

June 2015

Report of a joint inspection

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Note: where you see terms in this report written in **bold**, you can find an explanation in Appendix 1 or Appendix 3.

1. Introduction

At the request of Scottish Ministers, the Care Inspectorate is leading joint inspections of services for children and young people across Scotland. When we say children and young people in this report we mean people under the age of 18 years or up to 21 years and beyond if they have been looked after.

These inspections look at the difference services are making to the lives of children, young people and families. They take account of the full range of work with children, young people and families within a community planning partnership area. When we say 'partners' in this report we mean leaders of services who contribute to community planning including representatives from North Lanarkshire Council, NHS Lanarkshire, Police Scotland, the Scottish Children's Reporter Administration and the Scottish Fire and Rescue Service.

When we say 'staff' in this report we mean any combination of people employed to work with children, young people and families including health visitors, school nurses, doctors, teachers, social workers, police officers, and the voluntary sector. Where we make a comment which refers to particular groups of staff, we mention them specifically, for example health visitors or social workers.

Our inspection teams are made up of inspectors from the Care Inspectorate, Education Scotland, Healthcare Improvement Scotland and Her Majesty's Inspectorate of Constabulary for Scotland. Teams include young inspection volunteers, who are young people with direct experience of care and child protection services, who receive training and support to contribute their knowledge and experience to help us evaluate the quality and impact of partners' work. Associate assessors are also included on inspection teams. These are staff and managers from services in another Community Planning Partnership area.

A framework of quality indicators was published by the Care Inspectorate in 2014. The indicators in *How well are we improving the lives of children, young people and families?* A guide to evaluating services for children and young people using quality indicators are used by inspection teams to reach an independent evaluation of the

quality and effectiveness of services. While inspectors keep in mind all of the indicators in the framework, we evaluate nine of the quality indicators in each inspection, using the six-point scale as set out in Appendix 2. These nine indicators are chosen for evaluation because they cover the experiences of children, young people and families and the difference services are making to their lives; the outcomes partners collectively are making in improving outcomes for children across the area; and key processes which we consider to be of critical importance to achieving positive outcomes for children and young people. These are leading change and improvement; planning and improving services and involving children and families in doing so; and assessment and planning for children who are particularly vulnerable, including children and young people who are looked after or in need of protection.

2. How we conducted the inspection

The joint inspection of services for children and young people in the North Lanarkshire Community Planning Partnership area took place between October and November 2014. It covered the range of partners in the area that have a role in providing services for children, young people and families.

We reviewed a wide range of documents and analysed inspection findings of care services for children and young people. We spoke to staff with leadership and management responsibilities. We carried out a survey of named persons and lead professionals. We talked to large numbers of staff who work directly with children, young people and families and observed some meetings. We reviewed practice through reading records of a representative sample of the most vulnerable children and young people, taking into account different ages, gender, ethnicity, disability, postcode and legal status. In total we read the records of 109 children and young people. We met with 91 children and young people and 123 parents and carers in order to hear from them about their experiences of services. We are very grateful to everyone who talked to us as part of this inspection.

The Care Inspectorate regulates and routinely inspects registered care services provided or commissioned by North Lanarkshire Council. For the purposes of this inspection, we took into account findings from inspections of all relevant services for children and young people undertaken over the last two years. We also referred to a report of a joint inspection of services to protect children in the North Lanarkshire Council area published by Her Majesty's Inspectorate of Education in March 2011, to consider what progress had been made in the areas for improvement outlined in that report. This report can be found at **www.educationscotland.gov.uk**

While the findings in this joint inspection are based on a statistically representative sample of children and young people, we cannot assure the quality of service received by every single child in the area.

3. The Community Planning Partnership and context for the delivery of services to children, young people and families

The membership of North Lanarkshire Partnership Board includes North Lanarkshire Council, NHS Lanarkshire, Police Scotland, Scottish Children's Reporter Administration, Scottish Fire & Rescue Service, New College Lanarkshire, Jobcentre Plus, Scottish Enterprise, Skills Development Scotland, Strathclyde Partnership for Transport and Voluntary Action North Lanarkshire (VANL) which is the development agency for third sector organisations in North Lanarkshire. In addition to these, a large number of other partner organisations are involved in supporting the Board at a strategic and locality level. There is a strong emphasis on the principle of a joined up approach across all key agencies in recognition of the wide range of issues affecting people's lives.

The North Lanarkshire Community Planning Partnership serves a population of 328,457 and covers an area of 470 square kilometres in the central belt of Scotland. Children and young people aged 0 – 17 years make up 21.7% of the population, with those aged 18 – 21 years making up a further 4.9% of the total population. The 2012 figures from the Scottish Index of Multiple Deprivation (SIMD) show that a total of 100 areas or 'datazones' in North Lanarkshire are amongst the 15% most deprived areas in Scotland. North Lanarkshire's share of Scotland's most severely deprived areas has increased from 2.2% in 2004 to 5.5% in 2012. The recent economic recession has had a major impact in North Lanarkshire with an increase between January 2008 and December 2012 of 128% in Job Seekers Allowance claimants, a significantly higher increase than the Scottish average of 79% (North Lanarkshire Economic Regeneration Strategy 2014-2017). Families in North Lanarkshire live mainly in urban communities with 51% of children and young people aged 0 – 19 years being in households reliant on out-of-work benefits or receiving child tax credit. This is above the Scottish average of 45%. Services for children in North Lanarkshire are organised around six localities: Airdrie, Bellshill, Coatbridge, Cumbernauld, Motherwell and Wishaw. The main administrative centre is Motherwell.



Population of North Lanarkshire

328,457

The North Lanarkshire Community Plan (Single Outcome Agreement) 2013-18 reflects national priorities and identifies the five key themes of Health and Wellbeing, Lifelong Learning, Regeneration, Community Safety and Developing the Partnership. Planning for children and young people is a cross cutting theme within the Community Plan which ensures the interests of children, young people and families in North Lanarkshire are considered within an integrated approach. The strategic priorities detailed in the plan to support children and young people are as follows: improved outcomes for all children and young people; solutions built with and around children, young people and their families; children get the help they need when they need it; and everyone is working together to make sure things get better. Outcomes and milestones in the Community Plan are directly linked to the Improving Children's Services Plan with progress being reported on a quarterly basis through the relevant structures of the Children's Services Partnership. Partners currently have embarked on an ambitious agenda to tackle inequalities in the most deprived locality in North Lanarkshire and this is one example of a commendable shared strategic priority to raise aspirations and address the factors that currently exist to limit opportunities and life chances.

North Lanarkshire, in partnership with South Lanarkshire, became a learning partner in 2010 for the implementation of the Getting It Right For Every Child (GIRFEC) national practice model. The momentum of this has been continued with a clear commitment to full implementation in children's services and recent discussion with the Scottish Government to be a learning partner for the implementation of GIRFEC processes across the voluntary sector.

4. Summary of our findings

How well are the lives of children and young people improving?

Key performance outcomes

Improvements in outcomes that community planning partners have achieved in relation to three themes. These are improving trends through prevention and early intervention; improvements in outcomes for children and young people; and improvements in the lives of vulnerable children and young people.

Performance in improving outcomes for children and young people was evaluated as **very good**. There were many examples of improving trends through approaches to prevention and early intervention and a strong and unified commitment by partners to tackling inequalities and closing outcome gaps. Notably the work commenced in one of the

most deprived neighbourhoods was demonstrating the strong commitment and detailed consideration of a strengths-based approach to tackling inequalities. Outcomes for children and young people were improving across the North Lanarkshire population generally, sometimes against a backdrop of considerable adversity. For vulnerable children including those in need of protection, looked after children and young people and care leavers, there was clear evidence that their life chances were being improved as a result of the effective help and services being provided.

Impact on children and young people

The extent to which children and young people are able to get the best start in life and the impact of services on their wellbeing. It is about how well children and young people are assisted to be safe, healthy, achieving, nurtured, active, respected, responsible and included.

The impact of services on the wellbeing of children and young people growing up in North Lanarkshire was evaluated as **very good**. Children and young people were seen to benefit from services being delivered in a child-centred approach by highly committed staff who knew them well. Children and their families were being helped through the strong drive to reduce inequalities and give every child the best start in life. Children and young people of all ages were offered opportunities to improve their life chances through keeping safe and having a healthy and active lifestyle. There were many initiatives aimed at engaging and including children and their families from the earliest stages in setting down positive habits and patterns for life. They could take part, with relevant support where necessary, in a range of flexible, individualised and family activities through enhanced access to support and facilities within their homes and communities. There was a continuum of learning evident from birth throughout life with sustained work to close outcome gaps and harness potential for change and improvement. Partners were driving an ambitious agenda for North Lanarkshire's children and young people to raise attainments and reduce inequalities, with many tangible results. It was evident that the interests of children and young people were highly valued and their successes widely celebrated. The culture of participation and inclusion of children and young people was strong at all levels and reflected in the shared vision for the workforce. The continued partnership commitment to reduce inequalities should build on the significant progress already achieved and further improve outcomes for all children and young people.

Impact on families

The extent to which family wellbeing is being strengthened and families are supported to become resilient and meet their own needs. It also considers parental confidence and the extent to which earlier help and support has a positive effect on family life.

Impact on families was evaluated as **very good**. The majority of families were being strengthened through their involvement with supportive staff providing appropriate help and support at an early stage. Parental confidence and family resilience was significantly improved by the services and resources available to them. The availability of a wide range of effective supports for families which could be called upon at short notice and could work intensively with children, young people, parents, carers and extended family members was a major strength in North Lanarkshire. Services, including the Social Work Emergency Service covering out-of-hours, were able to offer very individualised support to families at times of crisis or to prevent family relationships from breaking down. Whilst there were a few occasions when support was withdrawn too quickly to ensure progress was sustained, this was greatly outweighed by the accessibility and responsiveness of services and the reassurance that it would be possible to resume an involvement if required.

How well are partners working together to improve the lives of children, young people and families?

Providing help and support at an early stage

How well staff recognise that something may be getting in the way of a child or young person's wellbeing, share relevant information and intervene early to stop difficulties arising or getting worse.

The extent to which services provided help and support at an early stage was evaluated as **very good**. There were notable strengths in the recognition, information sharing and response to concerns at an early stage. Staff across the partnership had a clear understanding of the signs that a child or young person may be in need of support. They shared information timeously and made effective use of the wide range of flexible and responsive resources available. Children and families across all age groups from pre-birth onwards were receiving support which prevented difficulties from arising or increasing.

Assessing and responding to risks and needs

The quality of assessment of risks and needs in relation to three themes. These are the initial response when there are concerns about the safety or wellbeing of children; the effectiveness of chronologies to identify significant events in a child's life and the quality of assessments.

Overall, assessment of risks and needs was evaluated as **good**. While there had been some progress, health services were still not being consistently involved as full partners in decision-making when investigating immediate concerns about children and this was weakening processes designed to ensure children's safety. However, this weakness was ameliorated to some extent by the high quality of assessment in the majority of cases and very strong involvement of children and families in identifying and assessing risks and needs. Some staff were using chronologies well to record the impact of events on the child or young person but their development and use to assist decision-making about intervention now needs to become more firmly embedded and consistent in practice.

Planning for individual children and young people

The quality of children's plans and the effectiveness of arrangements to review them.

Planning for individual children and young people was evaluated as **good**. The majority of plans were of high quality and characterised by important strengths, such as responding to changes in circumstances and managing risk. Nonetheless, it was clear that more work is required to support staff in developing SMART outcome-focused plans to a consistently high standard. More attention is required to addressing health needs within children and young people's plans, particularly those of young people who were looked after and care leavers. Implementing and reviewing progress of children's plans were strong in the majority of cases. In particular, planning to secure nurturing and stable environments for children and young people was working well. This provided a sound basis for continued improvement.

Planning and improving services

The rigour of integrated children's services planning and strategic planning and the extent to which it can be demonstrated to support improvement in the wellbeing of children and young people. It includes a focus on how well partners identify and manage risks to vulnerable groups of children and young people.

We found joint planning and improving of services to be **good**. The Improving Children's Services Plan was firmly based on a strategic needs assessment across the whole area. The variations of needs and challenges within each of the different localities were identified and children's services planning was well integrated with local community planning processes. Partner agencies worked together effectively within appropriate strategic arrangements in identifying need, setting priorities, planning joint responses and monitoring progress made. The Getting It Right For Every Child (GIRFEC) approach had assisted strategic leaders, as well as front line staff, by providing a shared language and child-centred outcome focus. This was clearly demonstrated in both the Single Outcome Agreement and Improving Children's Services Plan. Partners had established a common approach to self-evaluation, based upon an agreed set of quality indicators. The Child Protection Committee had not demonstrated its effectiveness in driving at pace the required improvements previously identified in relation to the follow-up by staff of actual or potential child protection referrals. Child Protection Committee members had recognised the need for a more joined up approach in terms of the early involvement of all relevant staff when assessing initial child protection referrals and sharing early decision-making and planning. However, practice operationally continued to be variable, in particular around the involvement and role of health staff in decision-making. The Child Protection Committee was taking a more rigorous approach to lead on this area of improvement through implementing audit and reporting systems to hold services to account and require more consistent performance across all agencies. The Child Protection Committee had also helpfully reviewed its own structure and governance arrangements.

Participation of children, young people, families and other stakeholders

The extent to which children, young people, families and other stakeholders are involved in policy, planning and service development.

The extent of participation by children, young people, families and other stakeholders was evaluated as very good. There was an embedded culture across the community planning partnership of valuing the contributions of children, young people and families. We found a very strong commitment to ensuring children, young people and families were consulted and had the opportunity to influence policy and planning. This commitment was supported by action to engage and involve children and young people systematically in policy, planning and service development. Young people were able to see where they could influence and make a difference for themselves and other young people. In targeting all children and young people, significant strides had been made to ensure seldom-heard groups also played a pivotal role in developments but where families were learning English as a second language, their participation was less evident. Commitment to participation and engagement was evident in the mind-set of partners, however an overarching strategy specific to children and young people, similar to the participation

and engagement strategy developed by the Child Protection Committee, would provide a valuable baseline and measure of effectiveness across all services for all children in North Lanarkshire.

How good is the leadership and direction of services for children and young people?

The extent to which collaborative leadership is improving outcomes for children, young people and families. It comments on the effectiveness of the shared vision, values and aims, leadership and direction and leadership of people. It also examines how well leaders are driving forward improvement and change.

Leadership of improvement and change was **very good**. Partners had a clear and strong shared vision for all services to deliver the best possible outcomes for children, young people and families. Partnership working was firmly embedded and proving highly effective at almost all levels with clear ownership by staff and consistent promotion of the advantages of joint working. The demographics of the North Lanarkshire area in terms of population size and levels of deprivation meant partners and staff at all levels were clear that the scale of the challenges facing them meant they should harness the greatest potential and achieve the greatest impact through working together and sharing services. There was a maturity of partnership working and a belief that this was simply the way of doing things. There was evidence of many strengths overall and the partners in North Lanarkshire recognised they still have important improvements to make in respect of ensuring consistency of practice in the multi-agency response to child protection issues.

Conclusion

In the course of this joint inspection of services for children and young people and families, the team of inspectors was able to be confident that, as a result of the services being delivered by the Community Planning Partnership, the lives of many children and young people growing up in North Lanarkshire were improving.

Where children and young people were potentially in need of protection, the risks to their safety and wellbeing were being identified in good time and suitable, proportionate action was taken to ensure they and their families received the help they needed. We were confident that services recognised that they could improve some processes further. They had already begun reviewing and taking effective action to ensure that decisions about child protection referrals were suitably shared across staff in health, police, social work and education.

Staff were working hard to improve outcomes for looked after children. We were confident that the needs of children and young people who were looked after and accommodated in children's houses and foster families received close attention and foster carers too voiced their strong appreciation of the supports which were made available to them.

There had been notable improvements in the range of co-ordinated support services put in place for young people leaving care. This was in recognition of their vulnerability at this stage in their lives and to ensure they received the right help and guidance as they moved towards more independent living.

5. How well are the lives of children and young people improving?

Key performance outcomes

This section considers improvements in outcomes community planning partners have achieved in relation to three themes. These are improving trends through prevention and early intervention; improvements in outcomes for children and young people; and improvements in the lives of vulnerable children and young people.

Performance in improving outcomes for children and young people was evaluated as very good. There were many examples of improving trends through approaches to prevention and early intervention and a strong and unified commitment by partners to tackling inequalities and closing outcome gaps. Notably the work commenced in one of the most deprived neighbourhoods was demonstrating the strong commitment and detailed consideration of a strengths-based approach to tackling inequalities. Outcomes for children and young people were improving across the North Lanarkshire population generally, sometimes against a backdrop of considerable adversity. For vulnerable children including those in need of protection, looked after children and young people and care leavers, there was clear evidence that their life chances were being improved as a result of the effective help and services being provided.

How well are trends improving through prevention and early intervention?

The majority of staff in North Lanarkshire considered that partners were achieving improving trends as a result of effective approaches to prevention and early intervention. They believed that services were tackling child poverty effectively and closing outcome gaps and this was able to be seen by inspectors over the course of the inspection. The positive impact could be seen in a range of health and wellbeing measures across the child and young person population.

Assertive and proactive steps by partners included initiating contact to ensure households with children who might be disadvantaged by changes to benefits as a result of welfare reform received their maximum income. Where a few families did not respond to letters about this, home visits were undertaken in an attempt to make sure the poorest and seldom heard families were supported to claim their entitlements. These measures resulted in real monetary gains for a significant number of households with children. Welfare rights income for residents in North Lanarkshire was almost doubled from £15.5m in 2011/12 to £28.6m in 2013/14 following assessment or reassessment of benefits. Some improving trends in child and maternal health were exceeding national HEAT targets, evidenced in relation to those accessing antenatal services. Immunisation rates for children were high and consistently above the national average across all primary and booster vaccinations, ranging from 93.5% to 98.7% compared against a national average range from 92.1% to 98.5%.

Children were receiving fluoride varnishing to prevent tooth decay. There was a significant increase in the proportion of children in North Lanarkshire showing no signs of dental disease when they started school, from 47.4% of children in P1 across Lanarkshire in 2004 to 61.5% at the most recent measure for P1 in North Lanarkshire. Children's weight was being measured at the start of their primary schooling to identify those who were clinically obese or overweight and those who were at risk of becoming overweight. These measures showed some positive trends in that, following small rises in recent years, the percentage of children identified at P1 as being overweight had fallen to 10% in 2012-13, in line with a small national reduction. The percentage of children identified at P1 as being at risk of being overweight was slightly above the national average at 12.4% in 2012-13. This follows a period of 11 years out of the last 12 when results had been consistently lower than the national average.

There were improvements in young people's smoking and drinking habits, although this remained a significant concern. Young people's sexual health was improving through increased attendances at sexual health services. Teenage pregnancies had reduced over the past five years, albeit remaining slightly above the national average and above all but one of the comparator authorities.

A clear and shared focus on attachment and infant mental health training across the services and agencies involved in meeting the needs of vulnerable children had resulted in earlier identification of difficulties, better assessment and closer working relationships, all of which was helping deliver better outcomes for the children involved.

Early years services had an emphasis on early intervention in order to build on parenting skills, including rolling out the **Solihull Approach** parenting programme to be delivered by staff working in a range of services and available to all families across the partnership. This was ensuring a consistent approach by staff involved in helping parents to understand their child's development and behaviour and to improve relationships within

families. Examples of other support introduced for families with young children included Five to Thrive and PATH (Providing Alternative Thinking strategies). The staff making referrals to these services considered them to be responsive and easily accessible with a strong emphasis on building trust to ensure effective working relationships between staff and family members.

Preventative working by a diverse range of resources such as the Strengthening Families Project, Bellshill YMCA and Families First fathers' group were contributing to improved health, wellbeing and confidence in children, young people and families. The development of nurture groups in primary schools was not only improving the social and emotional wellbeing of children in primary 1-3, but had improved early engagement with more seldom-heard families. Where there were particular pressures facing families, for example with a young person's school attendance or a parent's substance misuse difficulties, parents, carers and children could receive specific and targeted help from a range of support services. This help was proving effective in developing the resilience and confidence of children, parents and carers.

Over the last five years, there was an improving trend in the educational attainment of looked after children with twice as many pupils being presented for SQA examinations in 2014 as had been presented in 2009. Partners understood the critical link between maximising time spent in school and improved attainment and had commissioned the Centre for Excellence for Looked After Children in Scotland (CELCIS) to carry out a programme of targeted support for looked after children in P5 and above who were attending the Clyde Valley school cluster. The effectiveness of this approach had been demonstrated in a programme elsewhere in Scotland where additional contact with parents and carers had a positive effect on attendance and attainment.

Preventative work had taken place by the Scottish Fire & Rescue Service in relation to accidental dwelling fires and deliberate fire-raising. Children and young people had been involved in a range of suitable diversionary activities which had impacted positively on fire-related anti-social behaviour, deliberate secondary fires and hoax calls.

Youth offending was on a decreasing trend (down by 43% over the three years to 2014). Early and effective intervention to divert young people at risk of becoming involved in crime or anti-social behaviour was a major contributory factor in achieving this very significant reduction. There were a range of effective activities designed to appeal to young people such as the Friday Night Project, the North Lanarkshire sports scene and Seven Bars. Initiatives such as Stop and Talk, Blue Light Disco and Fire Reach were also helping to share messages about the risks. Where young people came to the attention of police, the use of parental alert letters to inform parents and carers at an early stage meant they could work in partnership with the authorities to be quickly aware of and tackle involvement in anti-social behaviour.

How well are outcomes improving for children and young people?

Improvements were being achieved in breast feeding rates in the under 20's age group, particularly through the involvement of Family Nurse Partnerships. The breastfeeding rate for those enrolled in the Family Nurse Partnerships was significantly higher, at approximately 70%. However, breastfeeding rates overall, at 16% in the year 2013-14, remained below the national average of 27.1%. North Lanarkshire has the second lowest rates of breast feeding in Scotland and, viewed in context of the challenges being faced, the improvements being made for the young mothers noted above are commendable.

North Lanarkshire partners had steadily improved performance in education across the majority of national measures over the period 2008 to 2014. There were improvements in relation to educational attainment, in rates of attendance and exclusions, and in the numbers of young people moving on from school into positive destinations. Mentoring programmes in schools were helping to reduce rates of bullying and exclusions. Figures showed that young people's attainments at the end of S4 at Scottish Credit and Qualifications Framework (SCQF) levels 4 and 5 were better than in comparator authorities. Almost all young people (94.5%) left school with awards in English and Maths at SCQF level 3 or above in 2014. The most significant improvement was at SCQF 6, where the North Lanarkshire Community Planning Partnership, having recognised that almost all performance indicators for attainment were below comparator and national averages, had made this a priority for achieving change and was improving now at a faster rate than its comparators. The partners were determined to continue to improve and reduce the difference in average educational outcomes for children growing up in North Lanarkshire compared with those growing up in other areas of Scotland.

The upward trends in reporting of domestic abuse and increase in substance misuse in North Lanarkshire have brought challenges and significantly impacted on services, children, young people and families. Partners had recognised these impacts and were responsive in developing services to keep pace, ensuring there was a range of measures in place to address the issues and to mitigate against the potential harmful effects for families and individual children and young people. Partnerships such as those with **Motherwell Football Club Community Trust** were playing a significant role in tackling inequalities and raising awareness of child protection in North Lanarkshire. Programmes were targeting not only children and young people, but also their parents in a wide range of activities to improve outcomes in health and wellbeing. Partners recognise the need to devise performance management measures to show how domestic violence is being addressed and how improvements are being secured.

How well are the life chances of vulnerable children and young people improving?

The partnership was demonstrating notable improvements in the life chances of vulnerable children and young people. The range and accessibility of effective early interventions and ongoing support services meant families received help promptly and before difficulties

escalated. As a result there were fewer children on the child protection register than the national average and this was decreasing over time. Where children and young people required consideration of statutory measures of care, there had been steady improvement since 2011 in the number of reports provided to the Children's Reporter within 20 days, taking this above the national average.

Over the last four years there had been a steady reduction in the number of children requiring to be looked after and accommodated away from home. This trend had been supported by the intensive work undertaken by services such as Families First and Community Alternatives to ensure that children and young people were not accommodated unnecessarily. The proportion of North Lanarkshire's looked after and accommodated children and young people being cared for in a family setting in the community rather than in residential care was one of the highest in Scotland for the period 2013/14 and had been consistently higher than the national average since 2003. Only 4.8% of children and young people who required care away from home were in residential placements. Community based family placements were recognised as being significant contributors to positive life chances for children and young people.

Where children required permanent care away from home, more children were benefitting from the provision of a permanent family placement at an earlier stage, with an increasing trend since 2011, up from 36 to 61 placements. There was a reducing trend evident in the average length of time children aged 0-10 years were accommodated, from 678 days in 2012 to 597 days in 2014. This means delays were being reduced for children, who had less uncertainty in their lives and were being matched more quickly to an alternative secure family in which to develop and grow. This increased the chances of these children achieving their full potential in subsequent learning and social development.

For those children and young people eligible for aftercare services, 76% were receiving services in the year 2012/13 as opposed to the Scottish average of 69%. The number of young people remaining in touch with services after leaving care in North Lanarkshire had been above the national average since 2004 with the exception of a fall in the year 2011/12, when the figure was 61%. Support from services including Housing, Barnardo's and Community Alternatives continued to be available to young people up to the age of 21 years. A joint protocol was in place for staff in housing and social work for dealing with young people aged 16 to 18 years to ensure that the accommodation needs of young people were prioritised and received a consistent response. This was in recognition that these young people were considered a vulnerable and potentially high risk group and therefore to ensure their housing needs were addressed proactively. A range of housing support options linked into other services working with young people were improving housing options for care leavers. In the past year, no young person leaving care had moved to a homeless unit and no young person had left custody and been homeless.

Positive policing had resulted in strong, well planned programmes to make improvements in youth disorder across all wards in North Lanarkshire and there was a 43% decrease in antisocial behaviour over the last three years. Where young people became involved in offending, the Whole Systems approach was impacting positively on their outcomes by ensuring co-ordinated multi-agency supports were in place and geared to promoting more positive choices and thereby reducing re-offending.

Impact on children and young people

This section is about the extent to which children and young people are able to get the best start in life and the impact of services on their wellbeing. It is about how well children and young people are assisted to be safe, healthy, achieving, nurtured, active, respected, responsible and included.

The impact of services on the wellbeing of children and young people growing up in North Lanarkshire was evaluated as very good. Children and young people were seen to benefit from services being delivered in a child-centred approach by highly committed staff who knew them well. Children and their families were being helped through the strong drive to reduce inequalities and give every child the best start in life. Children and young people of all ages were offered opportunities to improve their life chances through keeping safe and having a healthy and active lifestyle. There were many initiatives aimed at engaging and including children and their families from the earliest stages in setting down positive habits and patterns for life. They could take part, with relevant support where necessary, in a range of flexible, individualised and family activities through enhanced access to support and facilities within their homes and communities. There was a continuum of learning evident from birth throughout life with sustained work to close outcome gaps and harness potential for change and improvement. Partners were driving an ambitious agenda for North Lanarkshire's children and young people to raise attainments and reduce inequalities, with many tangible results. It was evident that the interests of children and young people were highly valued and their successes widely celebrated. The culture of participation and inclusion of children and young people was strong at all levels and reflected in the shared vision for the workforce. The continued partnership commitment to reduce inequalities should build on the significant progress already achieved and further improve outcomes for all children and young people.

How well are children and young people helped to be safe?

Children and young people were very well supported to learn how to keep themselves safe in their homes, schools and communities through an extensive range of opportunities provided by universal services as well as more specifically targeted activity. For example the Kick-start Theatre Company provided an interactive drama on a variety of community safety messages. Children and their families were supported to be safe in individual work

or through locality programmes within community settings. The self-directed support approach had encouraged parents to provide safe environments for their disabled children to play.

The safety of large numbers of children and young people during the evenings and at weekends was being increased through Police Scotland providing a range of activities in the community with an emphasis on safety, alcohol/drugs and reducing anti-social behaviour. This included Friday Night, Sport Scene and 7 Bars as well as Move the Goalposts. Children and young people's awareness of fire hazards was being increased through targeted work by the Fire and Rescue Service working within North Lanarkshire's most deprived areas.

Children we spoke with in a range of settings across North Lanarkshire demonstrated a good understanding of their wellbeing and **Getting It Right For Every Child** wellbeing indicators. They could describe activities that they had been involved in which had made them more aware of their personal safety. Education Scotland surveys informed that almost all children and young people in schools reported that they felt safe and free from bullying. Vulnerable children who were being looked after in foster and residential care told inspectors that they knew who to turn to if they were concerned about their safety.

Children and young people were learning about their right to be safe and were alert to child sexual exploitation through a range of partnerships between education services and community learning and development and Child Exploitation and Online Protection (CEOP). Other partnership work such as that of the Child Protection Committee and **Motherwell Football Club Community Trust** was delivering a wide range of highly effective and innovative programmes to large numbers of children, young people and their families around risk awareness and keeping safe. Methods of reaching out to large audiences to raise awareness of child abuse included the use of football programmes containing information. Peer education approaches were particularly positively evaluated by children and trials conducted in schools had also informed the planning and design of posters about child abuse. Parents and children were engaged in gatekeeping safety on social media sites through workshops provided by staff in schools. Foster carers too were very well supported to understand online and internet safety to improve the safety of the children and young people in their care.

Effective partnership work with Rape Crisis around sexual stereotypes and the Violence Reduction Unit's Bystander Programme which targets gender-based violence were being piloted in Calderhead High School. Over 30 young people had become mentors. Bullying and exclusions from school had been reduced significantly as a result.

Partners had made particular efforts to reduce the impact of domestic abuse on children and young people through early intervention and wider prevention work in education services. An example was Safer Dads. This is an intensive 17-week programme for fathers and male carers during which professionals worked with men who had been perpetrators

of domestic abuse to help them to understand the impact of their behaviour on their partners and children.

There was evidence that Domestic Abuse Case Conferences and Multi-agency Risk Assessment Conferences were increasing the safety of children and young people living in higher risk domestic abuse situations. The children and young people we interviewed reported feeling safer in new living arrangements as a result of intervention by the staff working with them. Where children and young people were presenting risks to themselves or others through their behaviour, there was a strong emphasis on the importance of staff persisting in their work with young people in assertive outreach programmes such as Community Alternatives. The **Youth Bridges Project** was supporting young people to make a positive transition from custody back into the community.

How well are children and young people helped to be healthy?

Newborn babies were getting a better start in life as pregnant women were accessing antenatal care earlier. Pregnant women, especially those in need of additional support, were being identified by midwives and supported to maintain healthy lifestyles, gain parenting confidence, and establish a suitable home environment. Vulnerable young mothers were receiving intensive support, advice and guidance from the family nurse within the **Family Nurse Partnership** programme. Mothers of those babies within the programme were more likely to feel confident about breastfeeding. More babies in North Lanarkshire would benefit from being breastfed and a range of promotion and support measures was in place in an attempt to achieve greater numbers.

The health and support needs of younger children were being identified more consistently as a result of the application of the nationally agreed (Early Years Collaborative) assessment and screening at the age of 27-30 months. Those young children identified during this screening as requiring additional help were being guided to appropriate supports, for example to access speech and language therapy sessions, at an earlier stage. Reducing obesity in children is a long term challenge in North Lanarkshire, as it is in the rest of the country. Child healthy weight was being assessed as part of the 27-30 month review for all children and action was being taken earlier if children were identified as being outwith a healthy weight range. Staff were implementing a universal assessment of children's health and wellbeing at an even earlier stage, at 12-15 months of age, so that support could be targeted to the most vulnerable children earlier to improve their long term outcomes.

Very young children's health and wellbeing was being effectively supported and monitored by health visitors and First Steps workers. Children attending learning centres were thriving from there being a focus on their health and wellbeing by staff who knew

them and their families well, for example through promotion of dental health, healthy eating and active play.

Young children were enjoying improved dental health. Consistently more young children across all areas in North Lanarkshire had fluoride varnishing of their teeth to prevent future dental caries and increasingly fewer children were having teeth removed as a result of dental caries. The health of almost all young children was being promoted as they were protected from a range of illnesses through participation in national health immunisations programme.

Children and young people were more likely to have their physical, mental and emotional needs recognised as a result of the support, guidance and advice that their parents and carers were receiving on how to access universal and specialist health services. More children were able to access services to improve their mental and emotional wellbeing as a result of the increased investment in Child and Adolescent Mental Health Services (CAMHS) and availability of youth counselling services in schools. Young people aged 16 to 18 years old were supported by the Health Liaison Officer to have better access to mental health and sexual health services. However, a few children and young people were still experiencing delays in accessing help and support for their mental wellbeing when their needs were not being recognised at an early enough stage. Services such as Reach Out were working with children whose parents had mental health difficulties and there was good engagement with this service.

Vulnerable children and young people had their health needs met well by foster carers and kinship carers. These children would benefit from more comprehensive assessments of their health and wellbeing needs, especially those who have suffered neglect.

Young people's sexual health was improving through an increased trend of attendances to sexual health services. Increasingly fewer young people were becoming pregnant as teenagers in North Lanarkshire and there was a continued focus on sexual health and promotion services.

Young people were receiving valuable advice and guidance on how to maintain their own health and wellbeing from a range of trained workers. They could look to suitable role models within services, for example those who were providing coaching in street football and at the Girls Performance Centre.

How well are children and young people helped to achieve?

There was a strong commitment by staff to providing services which enable and encourage children and young people to become successful learners and to become valued contributors to their communities and take appropriate levels of responsibility. Children and young people were achieving well overall. There were examples across

North Lanarkshire Council schools and early learning and childcare centres where children and young people were learning and achieving very well. These could be replicated more consistently across all learning establishments to ensure all children have the opportunity to reach their full potential.

The very youngest children's development and learning was being enhanced within learning centres where they could develop their fine motor skills and co-ordination and learn new skills through play. Small changes to practice through the Early Years Collaborative were helping young children to make the transitions from home to nursery and to school more successfully and confidently. Programmes to support parents, particularly an initiative to support teenage parents, were helping them to return to full time education or training. Children were more motivated to learn as a result of the work of home-link workers and the provision of nurture bases in some schools.

Children and young people's literacy was improving from targeted support provided by teaching and support staff in primary schools. The Active Literacy programme continued to be well recognised nationally and children's literacy was continually improving through the literacy hubs. Partners recognised there was now a need for a similar focus on children and young people's numeracy and numeracy hubs had been set up across the authority. Schools were achieving improvements in children and young people's health and wellbeing through initiatives promoted by the authority Curriculum for Excellence working group on physical education and sport and through involvement in national projects such as Better Movers and Thinkers.

Consistently fewer children and young people were being excluded from school, with numbers declining over the last three years. However, the overall rates were still higher than national averages and **comparator authorities**. Concerningly, for children who were looked after, the rate of exclusions was almost double that for children who were not looked after. A number of the most vulnerable children and young people, including some children looked after at home, were benefiting from action taken through a multi-agency approach to reduce the numbers of days lost in school as a result of exclusion.

Young people leaving school were increasingly successful in accessing positive destinations in suitable further education and training places. Increasingly more children and young people were able to celebrate their success in achievements across a wide range of cultural and sporting activities outwith school, for example undertaking Dynamic Youth Awards and Duke of Edinburgh Awards. Significantly more young people were gaining Saltire Volunteering Awards. Young people with additional support needs from across six secondary schools have benefited from working closely with ENABLE, a charitable organisation supporting children and adults with learning disabilities. A significant majority of these young people have been successful in securing a suitable college placement.

Vulnerable children and young people were being helped to achieve through initiatives aimed at raising the likelihood of their being able to live independently in the community. Looked after young people were supported by the team of Looked After Support Teachers to ensure their learning needs were being actively promoted. The Living Nearby scheme was supporting looked after young people to continue in their education, to have increased confidence and to have greater chances for employment and maintaining successful tenancies. One young person we spoke to told us, "I have a roof over my head so I don't need to worry; I have had support to budget and be independent." Some young people who had been looked after were able to benefit from the opportunity to continue living with dedicated carers in a stable home environment between the ages of 16 and 21 years. These young people were cared for and valued during their transition to adult living. The support they were receiving from professionals was proving very effective in improving their overall life chances.

All young people who were looked after and accommodated were given opportunities to develop appropriate life skills and resilience. They were encouraged by their carers to develop appropriate aspirations and a number went on to access higher education. With the additional support of a job coach, an apprenticeship or the incentive of increased financial contributions, these young people were almost always successful in moving into employment. Young people who had disrupted education were making significant progress with the intensive individualised support they received from the Flexible Learning initiative.

How well are children and young people helped to experience nurturing care?

Children and young people clearly valued the trusting relationships that they had with the adults around them. An overwhelming majority of staff felt very strongly that their service did everything possible to ensure that children and young people thrived as a result of nurturing relationships and stable environments. The overwhelming majority of children and young people we spoke to valued the trusting relationships that they had with adults, some stating that staff would often go above and beyond to support them.

Vulnerable children were thriving from the relationship-building and emotional support being provided in nurture groups and breakfast clubs in schools. Children were guided very well through the support they received when moving between primary and secondary schools. This helped increase self-esteem and improve peer relationships. Increasing numbers of children were able to live within a nurturing environment as a result of valuable parenting support being provided to their parents and carers. More children were experiencing increasingly secure attachments with their parents and carers through programmes such as Roots of Empathy, Mellow Babies and the Young Carers project.

Children and young people were being helped as a result of multi-agency training being provided for their parents using the **Solihull** approach. Infant Mental Health Training

provided on attachment had also been extended to foster carers. The **Strengthening Families** project was very effectively using innovative approaches to promote attachment, including video interactive guidance.

Very young children were benefiting from the nurturing environments provided within the Family Learning Centres where staff knew and valued them and their families very well. Children and young people were being better nurtured within their families who were making use of a wide range of effective parenting programmes such as Safer Care, Safer Dads, Young Mums groups, Incredible Years and Mellow Parenting. Parents valued the support and stated that they were more able to manage their children's behaviour and meet their needs through experiencing a greater understanding of their children's developmental stages. They said that this was helping them to be more confident parents. Staff were helpfully promoting the involvement of extended family members to enrich children's experiences and enhance wellbeing. Befrienders were often used to build relationships with young people and provide a listening ear.

Young people who had had disrupted education were benefiting from the highly effective support given to their families within the flexible learning Initiative. This was allowing them to experience a more sustained, consistent nurturing environment at home.

Some children who had experienced bereavement and loss were receiving valuable direct support. Others were adequately supported by their families who had received advice and guidance from the child's support network.

Looked after and accommodated children and young people appreciated the nurturing environment within their children's houses. They told us that they were given good support to settle in and their relationships with staff were highly valued. Young people had positive experiences of foster care and residential care and some young people returned for visits and kept in touch with previous carers. Considerable efforts were being made to ensure that family contact, including that with siblings, was regular and consistent, even when there was physical distance involved.

The Living Nearby initiative to ensure young people leaving care were provided with a suitable tenancy close to relatives or within the locality of their previous children's house was valued for its helpful and nurturing role when young people moved on. They could continue to visit their previous children's house and return for support when they wanted. They were also encouraged to provide peer support to those young people still living in the children's houses. Children and young people in residential and foster care were kept close to their communities, where possible, so that they could maintain attachments with their families.

In a few situations when children were not returning home, a more timely focus on longer term planning might have enabled these children to be identified as requiring an alternative family at an earlier stage. The length of time during which they experienced

uncertainty about their future might also have been reduced. Managers had recognised the need to improve timescales for progressing permanency planning and had taken a range of actions, including recruiting more potential foster and adoptive families, to increase the likelihood of being able to match children to long term carers at an earlier stage. These children were as a result being better supported to settle and form attachments in their new families.

More information for carers about the availability of practical and financial support would be beneficial.

How well are children and young people helped to be active?

North Lanarkshire partners were encouraging young people and families to take up opportunities to have an active lifestyle. Young people spoke positively about the range of activities they could be involved in. This included: swimming, skate parks, activity holidays, music, dancing, football, and tennis. Young people were appreciative of the free leisure passes which allowed them to access facilities they might otherwise be unable to afford. They were being helped to remain active through access to free swimming during school holidays and discounts on trains and buses for their family to access facilities. For a few children and young people on low incomes, entry fees and transport costs remained a barrier to their being able to fully participate in their chosen interests.

Increasingly a greater number of children and young people were accessing leisure services and a range of recreational activities which helped them participate and be active within their local communities. **Street Football** was a particularly positive example where a valuable regular opportunity to participate in sport was brought into local communities. This was being effectively supported by trained coaches and local police officers. Schools were also positively promoting physical activity for all children and young people through extra-curricular activities such as the sports sessions organised through the Active Schools Team.

Children and young people affected by disability were being enabled to take part in suitable activities through the Active Schools programme. More children and young people with additional support needs were able to participate in sport with the development of a summer school in conjunction with Active Sports.

Young people spoke positively about how they were encouraged and given practical help by staff and foster carers to have an active lifestyle. Most children and young people who were looked after were supported to develop their aptitudes and interests. A few disadvantaged young people would benefit from more encouragement to take up new skills and develop new talents.

How well are children and young people respected?

The strong commitment to young people's interests and culture of respecting their rights was evident amongst strategic leaders across the Partnership. There were many examples of successful approaches to youth engagement and democratic involvement. The recent launch of the Youth Strategy with elected member participation was a particularly positive example where young people witnessed the pledge by elected members to promoting their involvement and participation in matters affecting them. Young people from North Lanarkshire were actively involved in the Scottish Youth Parliament and Youth Forums. Young people were learning more about their own rights and the rights of others through a wide variety of events, for example Moving On: Respectful, Responsible, Resilient 2013 and promotion of the Youth Strategy, Anti-Bullying Policy and Them and Us, the anti-sectarianism strategy.

In schools across the authority, pupil councils were effectively representing the views of children and young people regarding school issues. **Rights-respecting schools** are being actively developed. The use of GIRFEC wellbeing indicators in schools, youth groups and projects was successfully raising the profile of the children and young people's right to be respected. Planning for the wellbeing of individual pupils took account of the extent to which the individual pupil was respected in school and in their wider life experiences.

Almost all children and young people in residential and foster care reported that they were well treated by those caring for them, that they were listened to and their views respected. Care leavers we met spoke of having enjoyed mutually respectful relationships with staff in Children's Houses. Nevertheless, for a few older young people, more independence and privacy would have been welcomed. A few care leavers considered that they could have been treated with more respect and trust when it came to spending money. They felt there was a stigma in not being able to "just go to the shops like your friends", as one young person summarised.

Vulnerable children and young people had appropriate opportunities to express their views. They thought that the staff who worked with them listened and they in turn were able to talk to staff about any matters that concerned them. A range of communication tools such as social media, What I think and the Wellbeing Web were used by staff to support children and young people to be involved meaningfully. Their views could be seen to influence the decisions made about them. This was evident in case records and also several young people described how their confidence and self-esteem increased when their views were respected. For a few children whose first language was not English, more attention to ensuring they had a range of opportunities to continue to use their first language when separated from their birth families would have strengthened practice still further.

Vulnerable children and young people accessing advocacy had their views heard through the Your Voice service although this service was not yet being made available routinely to all young people who may have benefited from independent advocacy. Some children looked after at home and children in kinship care and in receipt of through-care and after-care supports in particular were disadvantaged by having more limited access to such services.

How well are children and young people helped to be responsible citizens?

Children and young people were being successfully encouraged through a range of opportunities and activities to become more responsible and achieve their potential. The majority of children and young people were experiencing improved outcomes as a result of the support guidance and encouragement provided by services.

The well-established systems that supported youth engagement were also encouraging a significant number of young people to become responsible citizens. This included young people elected to the Scottish Youth Parliament, six locality youth forums and pupil councils. There were examples of young people taking responsibility to improve outcomes for their peers, for example through bringing about changes to the eligibility criteria for receiving education maintenance allowance. These changes meant that this weekly allowance could be paid to those who were unable to carry out the usual work requirements because they had responsibilities at home as young carers.

Young people in North Lanarkshire were provided with increasing opportunities to be volunteers. Progression to award schemes, for example the Saltire Awards, was actively encouraged. A positive culture within schools was effectively promoting responsibility through mentoring schemes.

Young people were learning how to be responsible with highly effective support from the Housing Support Service who worked with young people over 16 years of age. Staff were working closely with the young people, supporting and advising on life skills, encouraging them in budgeting, cooking, decorating and providing help to get furniture and essential appliances. Their work was generally supporting young people to establish a home and maintain a successful tenancy.

Prevention-based partnership working in localities with a range of diversionary activities was successfully encouraging more responsible behaviour in young people. Significantly fewer young people were becoming involved in anti-social behaviour and offending had reduced year on year. Activities available included social and sporting programmes and initiatives such as Friday Night Project and Street Soccer NL.

Children and young people who had previously disengaged from education were successfully learning to be more responsible through the highly effective, individualised

and intensive support from the Flexible Learning Team. These young people were learning how to make positive life choices towards reaching their potential. Their support was consistent and available over the school holidays and the improved outcomes for these children and young people were being sustained. Those young people who had been excluded from school previously were highly positive about the celebration of their success at a subsequent awards ceremony.

How well are children and young people helped to feel included?

Children and young people were highly valued as contributors in their communities. There was a very strong culture and commitment from staff to the inclusion of children and young people across all ages. A particular focus on older children and young adults was providing a strong message about the ongoing commitment of staff to supporting young people throughout their lives. Staff recognised the needs of the child or young person in the context of their wider world, adopting a 'whole child' approach.

Within nurseries and schools, children were being actively helped to develop positive relationships with their peers and become more included in activities. There was a wide range of community based resources and activities in which children and young people, including those who were vulnerable or disadvantaged, could become involved. They were assisted to access these opportunities through provision of free leisure passes and assisted funding. A few children needed more support to become meaningfully included in a suitable community group.

Children and young people who were young carers were recognised as requiring additional support to take part in activities in the community. An example of this was in relation to the difficulties young carers faced in terms of being able to access part-time work opportunities outside the home due to their caring responsibilities. As a result, some young carers from households reliant on benefits had been unable to receive their Education Maintenance Allowance. Following a focus on this by young people advocating for a fairer deal for young carers (Motherwell Youth Forum campaigned to the Scottish Youth Parliament and in turn this campaign was adopted as the National Campaign by Scottish Youth Parliament – Care Fair Share) changes were made to ensure the contribution by young carers at home was recognised and they were being paid the allowance.

Children and young people who were unable to live at home reported feeling a strong sense of belonging and inclusion in their alternative living arrangements. Once they moved on, they could continue to be part of their 'extended family' with continued contact and relationships with foster carers and residential staff being actively encouraged and supported. Children were being well supported when moving into placement with a foster or adoptive family through links maintained with the Child and Adolescent Mental

Health Service (CAMHS). Recruitment of foster carers under the refreshed campaign “You can put the colour back into a child’s life” was continuing to be successful in providing carers for children who were deemed hard to place and who had waited longer than others for a placement. The **Self-directed Support demonstration** project had provided a small budget to 45 participating children and young people to enable engagement with this as a first step. The guided self-assessment document clearly articulated the views of all with a children’s workbook to enable the inclusion of the child’s voice. Families had been able to devise their own creative uses for the funding provided to maximise the child or young person’s learning experiences.

Schools working closely with partners such as the charitable organisation ENABLE were supporting young people with learning disabilities to move into suitable further education courses at college.

Impact on families

This section is about the extent to which family wellbeing is being strengthened and families are supported to become resilient and meet their own needs. It also considers parental confidence and the extent to which earlier help and support has a positive effect on family life.

Impact on families was evaluated as very good. The majority of families were being strengthened through their involvement with supportive staff providing appropriate help and support at an early stage. Parental confidence and family resilience was significantly improved by the services and resources available to them. The availability of a wide range of effective supports for families which could be called upon at short notice and could work intensively with children, young people, parents, carers and extended family members was a major strength in North Lanarkshire. Services, including the Social Work Emergency Service covering out-of-hours, were able to offer very individualised support to families at times of crisis or to prevent family relationships from breaking down. Whilst there were a few occasions when support was withdrawn too quickly to ensure progress was sustained, this was greatly outweighed by the accessibility and responsiveness of services and the reassurance that it would be possible to resume an involvement if required.

The majority of parents we met were appreciative of support received and reported positive impact on improving the life chances of their families. Parents whose children attended Family Learning Centres accessed an impressive range of services which enhanced their family life. Young lone parents found invaluable support from One Parent Families Scotland on parenting, finance, sourcing equipment and accessing training.

Programmes such as Confident You, Confident Child, Incredible Years, Roots of Empathy, Active Families, Bouncing Babies, Baby Massage, Mellow Parenting and the Five to

Thrive project made a real difference to families' wellbeing. Significant positive impacts included promoting healthy relationships or attachments between parents and children. Access to literacy courses was greatly helping parents' and children's literacy. Parents were supported well through participating in various groups including Safer Dads, Boys Stuff and Nae Danger where they could explore issues related to parenting and keeping children safe. They reported that this had resulted in them being better equipped to keep their family safer and improved their ability to make sound, reasoned decisions about their children's and their own activities.

Partnership with the Richmond Fellowship has had a significant impact in improving outcomes for families whose children have additional support needs. The high value placed on Early Bird and Early Bird Plus support groups was evident in very high levels of attendance at sessions which were also evaluated highly by parents. Locality-based support groups, such as Hope for Autism, Little Stars and One Stop Shop provided effective help for parents with children who had autism.

Where practice was most effective, parents received helpful information about other community resources which they could access. In a few instances where staff did not always have full knowledge of the resources available in North Lanarkshire, families were not always made aware of all services that were available to them.

Effective multi-agency and partnership working was having a very positive impact on families. Health visitors and early learning staff worked well together and when appropriate involved other services, such as Integrated Addiction Services, Community Alternatives, Families First and Home Support services. Midwives carried out robust assessments with clear planning demonstrated, including pre-birth planning.

Generally there was effective challenge to families which was promoting positive experiences and improvement in family resilience. Occasionally the need for help and support was identified but was not immediately planned for and implemented. In a very few cases when help was given, it was then withdrawn too soon and improvements were not sustained, although services were able to be very responsive in resuming an involvement with a family or offering crisis intervention. Most families were receiving effective, customised interventions which were designed in partnership with family members to improve their own resilience.

Parents appreciated being treated with respect, being listened to and actively contributing to their children's experiences in planning meetings and in putting forward views in coordinated support plans. Most families were supported effectively to contribute meaningfully to their children's plans. As a result of this support, parents felt that they could contribute much more to ensuring positive outcomes for their children. Families clearly were being helped by the very effective support which staff offered and which helped them promote the wellbeing of their children. Together, parents and partner organisations effectively customised support strategies in robust ways which met families'

individual needs and circumstances. Lone parents received great benefit from specially designed support around their needs and those of their children. Effective advice and support for families was also being given in schools.

Foster carers and kinship carers received effective support, including support targeted at building resilience. Foster carers were provided with effective levels of immediate support which was easily accessed as required, including at evenings and weekends, from a range of staff at the Social Work Emergency Service, from intensive support services, Children and Families Teams and the Children's Carer's Centre. Foster carer support groups, and the range of training opportunities available, helped carers acquire the skills and knowledge they needed to support children effectively, and provided a source of personal support from peers. Parents whose children were looked after at home could access a good range of support to improve their interactions with their children.

Operation Dash, a screening process developed by 12 local authorities across the Strathclyde area to provide a collective intelligence and multi-agency response to children and young people considered vulnerable to sexual exploitation, showed good evidence of parental engagement around child sexual exploitation and online protection. The NSPCC Childline Schools Service had also helped families of children in Primary 6 and 7 across North Lanarkshire to be more aware of all forms of abuse, including the possibility of children being subject to grooming for sexual exploitation. The **Motherwell Football Club Community Trust** had a significant impact on families through a range of opportunities for parents and carers to learn alongside children and young people, with topics ranging from child protection to diet and exercise. The Strengthening Our Communities project resulted in families knowing that they were more in control of their future.

The **Strengthening Families** programme, targeting children aged 10-14 affected by parental substance misuse, was highly effective. All families who completed the programme reported improved skills and parental confidence. Family group conferencing successfully shifted responsibility for finding their own solutions to family members with the staff working effectively in partnership with families to secure improvement. As a result, support plans were more creative, imaginative and personalised and had made a real positive difference to outcomes for children.

Independent advice and support helped parents make decisions and take different approaches to their children's care. A few parents whose children had been accommodated would benefit from a designated worker or advocate, to help them understand decisions being made. For adults seeking advocacy, there was high demand on services from other care groups. This meant that on occasions a referral was made to a children's advocate, who would link in with parents as well as the child.

6. How well are partners working together to improve the lives of children, young people and families?

Providing help and support at an early stage

This section considers how well staff recognise that something may be getting in the way of a child or young person's wellbeing, share relevant information and intervene early to stop difficulties arising or getting worse.

The extent to which services provided help and support at an early stage was evaluated as very good. There were notable strengths in the recognition, information sharing and response to concerns at an early stage. Staff across the partnership had a clear understanding of the signs that a child or young person may be in need of support. They shared information timeously and made effective use of the wide range of flexible and responsive resources available. Children and families across all age groups from pre-birth onwards were receiving support which prevented difficulties from arising or increasing.

Most children and families in North Lanarkshire received help from appropriate services being provided at the right time. Multi agency working was effective and staff had trusting relationships. The common language of Getting it Right for Every Child was improving information-sharing and multi-agency working. Requests for help were responded to quickly and appropriately and this had resulted in a stronger focus on earlier intervention. In most cases, named persons were clear about their role and that of others involved in a child or young person's life. They were embracing their responsibilities within a staged intervention approach and were confident about assessing the needs of children and young people and ensuring a suitable, timely and proportionate level of support to prevent difficulties from escalating. While parents and children were not yet all familiar with the concept of a named person and a lead professional, most knew who to contact for help and support when it was needed. In common with many other areas in Scotland, there was not yet clarity in identifying the named person for 16-18 year old looked after young people who were not in school. The role of lead professional was predominantly undertaken by social workers; however there were a few examples of other staff taking on the role. Staff in other services would benefit from support, including training and resources such as administrative support, to take on the role of lead professional, where appropriate.

Early intervention groups such as Multi-Agency Support Teams (MAST) and Health and Wellbeing Resource Teams (HART) functioned effectively and demonstrated helpful multi-agency working and information-sharing. Early identification of need in many instances prevented escalation of issues. A range of flexible early intervention resources was available and staff mostly engaged families successfully, improving parenting

capacity. Where families were already known, services such as Community Alternatives and Families First provided a high level of practical support to families in crisis, both in and out of hours, to prevent breakdown of family relationships and the need for children to be accommodated. They demonstrated persistence when working with families who were reluctant to engage, and worked to develop parenting capacity in families. In a few cases, however, staff were not as prompt as they needed to be to recognise and respond to children's needs or deteriorating circumstances.

Pre-birth planning and intervention were highly effective. Women who were vulnerable in pregnancy received very helpful early intervention and support. A specialist midwife for women affected by substance misuse, co-located with social work, ensured robust links with maternity services across North Lanarkshire. There were examples of effective work at an early stage in pregnancy. Staff in integrated addictions services provided valuable support to pregnant women and their partners and to those who were already parents. They demonstrated a clear understanding and focus on the needs of children affected by parental substance misuse.

Appropriate early and additional support was provided for looked after children in order to improve outcomes. Two nurses for looked after children had been appointed to improve health assessments for children becoming looked after and to ensure appropriate resources for looked after two year olds. Teachers for looked after children worked constructively with the Home School Partnership to identify at an early stage any young person whose attendance or attainment might be deteriorating, in order to provide early support to ensure optimum outcomes. Young people in residential care knew who to approach for help and support. An 'open door' policy allowed those moving on from residential care to return to the children's house for support and advice at the outset of encountering any difficulties.

There was a clear pathway in place to ensure consistency of responses for children affected by domestic abuse. Police concern reports were sent to social work for screening and subsequent referral to a domestic abuse case conference. In a few cases, staff failed to recognise the needs of the child affected by domestic abuse. A more proactive analysis by staff of shared information in domestic abuse cases could be improved in order to improve outcomes for children. Sharing of police domestic abuse concern reports with the named person as well as with social work should lead to help being made available to the family at an earlier stage.

A demonstration project for self-directed support had provided considerable learning that was being used to improve outcomes for children and young people with a disability. A prioritisation framework was being developed to target specific needs at an early stage. The planned further development of self-directed support should enable better access for all children and young people affected by disability.

Family learning centres were rooted in their communities and knew the families well. The First Steps workers in the family learning centres provided effective early intervention. The Community Learning and Development Service was a valuable resource, providing parenting groups and other resources for parents and families. Families and staff in North Lanarkshire would benefit from more being done to help them to know about the Family Information Service. Staff, while being able to describe a number of resources available in their area, appeared to depend mainly on word of mouth and their local knowledge when seeking to identify suitable services available to support children and families.

Assessing and responding to risks and needs

This section examines the quality of assessment of risks and needs in relation to three themes. These are the initial response when there are concerns about the safety or wellbeing of children; the effectiveness of chronologies to identify significant events in a child's life and the quality of assessments.

Overall, assessment of risks and needs was evaluated as good. While there had been some progress, health services were still not being consistently involved as full partners in decision-making when investigating immediate concerns about children and this was weakening processes designed to ensure children's safety. However, this weakness was ameliorated to some extent by the high quality of assessment in the majority of cases and very strong involvement of children and families in identifying and assessing risks and needs. Some staff were using chronologies well to record the impact of events on the child or young person but their development and use to assist decision-making about intervention now needs to become more firmly embedded and consistent in practice.

Initial responses to concerns about safety and wellbeing

Staff recognised and were alert to the possibility of risk and responded to initial concerns effectively in the majority of situations. They shared information promptly to ensure concerns could be fully understood and worked together with each other and families to achieve improvement. The joint inspection of services to protect children in North Lanarkshire in March 2011 had made a recommendation that there was a need to: "Implement plans to fully involve appropriate health and medical staff in planning investigations". Three years later this had not been fully achieved and improvements were still required. The Notification of Child Protection Concern Discussion (NOCPD) which had been established with practice guidance for staff still needed to reflect a more tripartite decision-making process that was recorded and subject to review to ensure consistency in practice. Some staff were undertaking the necessary discussions with

their colleagues in other agencies to ensure a shared understanding and assessment of risks and to agree necessary action prior to commencing a child protection investigation. Others, however, were going ahead with actions without the benefit of information from health records and without seeking the view of health staff in relation to whether or not a child or young person required a medical examination or health assessment. This needed to be more consistent so that decisions about investigations were made only with the benefit of all available information.

The NOCPCD practice guide was aiming to standardise the process of responding to potential child protection concerns for front line staff. Posts had been established in the NHS to take forward the health element of this and there were some examples of good communication taking place timeously between social work and police staff and their child protection advisor colleagues. A shared recording tool across partners to reflect the shared assessment of risks and decision-making and providing clarity about next steps and the role of all partners would further strengthen this process. The guidance would benefit from greater clarity on information-sharing and access to health outwith normal office hours to provide robust health input to decision making, such as medical examination. In a few cases where a child or young person was alleged to have been the victim of physical or sexual abuse, there was not appropriate consultation with health staff or consideration of whether a medical examination should be arranged. Where a child or young person was alleged to have been the victim of abuse, consideration of arranging a joint investigative interview needed to be more consistent as there were a few occasions when staff did not liaise with or involve other partners effectively enough before making decisions about how to proceed.

Appropriate action was taken by staff to ensure a child or young person was kept safe when they were in need of protection. Children were placed with suitable alternative carers when it was assessed that parents could not provide a suitable level of protection or care. A few children and young people continued to live in households where a family member might be deemed a risk to their wellbeing, without a recorded risk assessment to show how staff had arrived at this decision. Swifter, more decisive action could have been taken by staff to protect a few children and young people who had been continuing to live for prolonged periods in adverse living circumstances.

Where a child or young person was unable to remain with parents, staff considered in the first instance whether there were suitable friends or family members with whom the child could stay and carried out appropriate background checks. Staff worked hard to establish and maintain effective working relationships with parents and other relevant family members, seeking their contribution to safety plans, involving them in decision-making and keeping them updated as appropriate.

The quality and use of chronologies

All lead professional records contained a chronology. These were fit for purpose in the majority of cases, with a third needing to be improved. There was evidence in many records that partners had contributed to the lead professional chronology, but often there were gaps in significant information and it was not always evident how effectively chronologies were being used to proactively aid risk assessments by helping staff to identify recurring patterns of behaviour or accumulations of concerns. Some staff used chronologies well to record the impact of events on the child or young person but this needed to be more consistent in practice. Partners recognised that, now chronologies were being more routinely prepared, there was further work to be done on their quality and how effectively they were being used to inform practice.

The quality of assessments

The quality of risk and needs assessments was good or better in the majority of cases. Most children and young people had comprehensive, structured risks and needs assessments and plans. These were child-centred and guided by a comprehensive multi-agency framework for assessment, structured around the national practice model with reference to **SHANARRI** wellbeing indicators, My World Triangle and the Resilience Matrix. A few risk assessments lacked specificity around the nature of risks, how these were going to be addressed and the potential impact on the child if required changes failed to be achieved or if concerns escalated. Assessments of need for a few children and young people could be improved by a more holistic approach to need across all aspects of wellbeing and more attention to identifying specific desired outcomes.

Most assessments contained an analysis of protective factors balanced with actual and potential risks to achieve an overall and rounded weighting of risks to the child or young person. In a few instances, the assessment was generic to the whole family rather than focussing on the individual child or young person's risks and needs. However, in the majority, a multi-agency approach was evident with contributions from relevant parties, including family members. Some made good use of information from parent histories to understand how their experiences contributed to potential risks. Contingency plans were specified in some risk assessments to inform decision-making in the event of required actions not being progressed or followed through, but this needs to be more consistent. For a few children and young people, assessments needed to be updated to reflect changing or escalating circumstances.

The views of children and young people and their parents or carers were reflected in most assessments. It was clear that staff made considerable efforts to elicit the child's views using a range of means.

Planning for individual children and young people

This section considers the quality of children's plans and the effectiveness of arrangements to review them.

Planning for individual children and young people was evaluated as good. The majority of plans were of high quality and characterised by important strengths, such as responding to changes in circumstances and managing risk. Nonetheless, it was clear that more work is required to support staff in developing SMART outcome-focused plans to a consistently high standard. More attention is required to addressing health needs within children and young people's plans, particularly those of young people who were looked after and care leavers. Implementing and reviewing progress of children's plans were strong in the majority of cases. In particular, planning to secure nurturing and stable environments for children and young people was working well. This provided a sound basis for continued improvement.

The quality of children and young people's individual plans

In the majority of case records reviewed, the quality of plans both to manage risks and meet needs was evaluated as good or better with almost a third evaluated as very good or excellent. Partners aspired to having one agreed and shared format for named persons to record an initial child's plan. This initial format could then be expanded and built upon when additional supports were identified as necessary and the plan would become a multi-agency child's plan, thereby streamlining the planning process. They acknowledged that they had more work to do to achieve this although some children's records contained plans in a revised format. Further staff training was in process to improve the quality and consistency of the child's plan and the role of the named person and lead professional within this process.

Most children's plans reduced risks effectively and were responsive to changes in the child or young persons' circumstances. There were many positive examples of plans addressing both short and longer term needs well, giving due consideration to all the wellbeing indicators. Plans for some children and young people with complex needs and who were receiving self-directed support were SMART, outcome focused and recorded imaginatively. Visual representations were used well to make the information accessible to the child or young person. However, plans, particularly for looked after children of school age and care leavers, did not consistently address the health inequalities they experienced. Actions to strengthen mental wellbeing and enable children and young people to make healthy lifestyle choices were not considered systematically with, too often, a focus solely on meeting physical health needs.

The majority of plans set out the desired outcomes for the child or young person. However, a few plans were too generic, expressing outcomes that would be desirable for all children rather than being specific to the risks and needs of a particular child or young person. Staff would benefit from further training in SMART planning to optimise wellbeing and close outcome gaps now that they have become more familiar with the use of personal outcome plans. Plans did not always state what would be different for the child or young person as a result of a proposed action and the timescale in which change was necessary.

The quality and effectiveness of planning and reviewing

We found an appropriate level of partnership working in most of the records we read, however the absence of health and police representation constrained the quality of some multi-agency decision making meetings. Following decision-making at child protection case conferences, multi-agency core groups carefully reviewed plans to protect children, adding more specific details to manage and mitigate risks. Multi-agency meetings usually continued after children's names were removed from the Child Protection Register to ensure that improvements were sustained. Contingency planning was an area where practice had improved significantly, particularly in respect of newborn babies who were at risk. As a result, Social Work Emergency Services were better informed about what to do when plans had to be changed outwith normal office hours. When contingency planning was weaker, staff did not always review and redirect their activities quickly enough when extensive support packages did not reduce risks and better meet the needs of the child or young person. Approaches such as family group conferencing, involvement of Integrated Addictions staff and use of the wellbeing indicators were supporting helpful joined-up approaches to working with families

Having independent chairs for meetings to review the circumstances of children and young people who are looked after and accommodated was widely accepted by staff as having strengthened practice. Chairs got to know children, young people and their families well and helpfully met with them outside of planning meetings to ensure they were well prepared and understood decisions. They helped to ensure that decision-making was transparent and defensible. Some independent chairs were effectively challenging delays in implementing decisions. However, they were not all sufficiently confident about their role and responsibilities for quality assurance across the different partners. Children, young people, parents and carers' views were being sought in most cases and they were being helped by staff to be involved in key processes. The Wellbeing Web, What I Think and Viewpoint were used well to gauge children and young people's views on their wellbeing.

There were notable strengths in transition planning for young people aged 16-18 years, including care leavers, young people affected by physical disabilities and mental health difficulties and those involved in offending behaviour. This was underpinned by a

commitment to sticking with young people and a willingness to work flexibly. It included effective planning with young people through services like Youth Bridges and designated staff attending planning reviews for all school leavers in 2013 to support transitions. However, staff were not always able to identify appropriate resources to help them plan effectively for young people whose lives were at risk of becoming chaotic due to substance misuse or self-harming.

Securing nurturing and stable environments

Persistent efforts to improve the recruitment of foster carers and adoptive parents within the area were successfully expanding family placement options for older children and sibling groups. Prompt decision making was helping to secure permanent family placements for children as quickly as possible. Managers helpfully maintained an overview of planning for this group of children and were able to take remedial action in a few cases where timescales were not met. Targets were being set with the aim of ensuring further sustained improvement.

When parents were opposed to permanency plans, they were not always allocated a worker in their own right. Consideration of this may help to better manage conflict in some cases and further help children and their parents to come to terms with agreed plans.

Supported care placements were helping to improve outcomes by offering young people continuity of family placements with their carers and experiences of family life for some young people post-16. The Living Nearby programme was a major strength in supporting young people leaving care to live independently in their own tenancies close to children's houses and established support networks. If young people were not coping, they were given the option to return to their children's house or a placement with supported carers.

Planning and improving services

This section considers the rigour of integrated children's services planning and strategic planning and the extent to which it can be demonstrated to support improvement in the wellbeing of children and young people. It includes a focus on how well partners identify and manage risks to vulnerable groups of children and young people.

We found joint planning and improving of services to be good. The Improving Children's Services Plan was firmly based on a strategic needs assessment across the whole area. The variations of needs and challenges within each of the different

localities were identified and children's services planning was well integrated with local community planning processes. Partner agencies worked together effectively within appropriate strategic arrangements in identifying need, setting priorities, planning joint responses and monitoring progress made. The Getting It Right For Every Child (GIRFEC) approach had assisted strategic leaders, as well as front line staff, by providing a shared language and child-centred outcome focus. This was clearly demonstrated in both the Single Outcome Agreement and the Improving Children's Services Plan. Partners had established a common approach to self-evaluation, based upon an agreed set of quality indicators. The Child Protection Committee had not demonstrated its effectiveness in driving at pace the required improvements previously identified in relation to the follow-up by staff of actual or potential child protection referrals. The Child Protection Committee members had recognised the need for a more joined up approach in terms of the early involvement of all relevant staff when assessing initial child protection referrals and sharing early decision-making and planning. However, practice operationally continued to be variable, in particular around the involvement and role of health staff in decision-making. The Child Protection Committee was taking a more rigorous approach to lead on this area of improvement through implementing audit and reporting systems to hold services to account and require more consistent performance across all agencies. The Child Protection Committee had also helpfully reviewed its own structure and governance arrangements.

Integrated children's services planning

The Single Outcome Agreement (known in North Lanarkshire as The Community Plan) and the Improving Children's Services Plan both contained common, cross-cutting themes. These themes were apparent within community planning priorities, children's services priorities and key areas for improvement. Outcomes and milestones in the Community Plan were therefore directly linked to the Improving Children's Services Plan in the current period 2012-15. Six local area partnerships and three themed sub-groups were responsible for taking forward the community plan priorities at a locality level. It was clear that the local area partnerships were identifying and responding effectively to issues relating to the wellbeing of children within local communities, for example, multi-agency responses to anti-social behaviour from young people in a particular area.

The **Getting It Right For Every Child** approach, including common language, permeated both plans and the processes they reflect. Notably, in the opinion of our young inspectors, this approach had produced an easily understood and accessible plan which was "...easy to read and understand. The language was clear, not too many abbreviations... We knew what they wanted to do for children and young people in North Lanarkshire."

There were links between planning groups which helped ensure that the needs of children, including vulnerable children, were duly considered when structuring services. Delegated responsibility for developing the Improving Children's Services Plan rested with the Children's Services Partnership. The Partnership had parity of authority with the Child Protection Committee, in order to ensure that the protection of children and young people was an integral element within all children services. Partners had adopted a common approach to self-evaluation. The Children's Services Partnership and the Child Protection Committee had a jointly agreed quality improvement framework, based on an agreed set of quality indicators and themes.

Planning arrangements were well understood and fitted well together to produce a coherent, integrated and effective planning process. The Improving Children's Services Group was the working arm of the Children's Services Partnership and reported quarterly. Children's services planning consisted of a number of locality and themed sub-groups, reporting to the Improving Children's Services Group. Each had an action plan which reflected the priorities and desired outcomes contained in the Improving Children's Services Plan. Action plans were reviewed quarterly by the Improving Children's Services Group and the Children's Services Partnership. An important link with community planning was maintained by a six-monthly update on progress submitted to the North Lanarkshire Partnership Board.

Valuable information was being shared across the areas and groups in a well-understood, standardised way. Locality planning and themed sub-groups presented quarterly progress reports to the Improving Children's Services Group. At the core of this meeting, locality planning and themed sub groups presented quarterly progress reports, based upon their respective action plans. Group chairs produced a report based on a standard format, based on the priorities, desired outcomes and aspects for improvement contained in the Improving Children's Services Plan. Reports were required to provide detail of outcomes and supporting evidence.

Child Protection Committee business planning

The North Lanarkshire Chief Officers Public Protection and Integrated Children's Services Group (COG) held the strategic overview for all public protection matters in North Lanarkshire. This included the work of the Child Protection Committee, Adult Protection Committee, Lanarkshire MAPPA Strategic Oversight Group and Violence Against Women Group. This arrangement ensured that all public protection strategic partnerships were connected, and were owned and accountable to the COG. We were confident that the COG provided effective challenge and support to the Child Protection Committee.

The role and responsibilities of the COG were comprehensively set out in the Child Protection Committee Partnership Working Agreement (revised and dated October 2013).

The structure was working well, with working groups addressing specific areas of the Child Protection Committee remit, including public information, policies, procedures and protocols, and workforce learning and development. Task groups were taking forward specific pieces of work, including consultation with children, parents and carers.

The Child Protection Committee had effective conduits to services and front line practitioners. For example, an identified representative from the Child Protection Committee provided a link with localities, not only communicating issues and developments but also holding an overview of child protection practice and skills development in the localities.

The Annual Report and Business Plan 2014-15 set out what the Child Protection Committee was intending to achieve over the subsequent 12 months, and how, by 2015, it would know if it had succeeded. We considered this to be a clear, concise and attractively presented account of how the Child Protection Committee intended to ensure that children in North Lanarkshire would be safer as a result of their actions. However, the annual report lacked a review of progress made in relation to the previous annual report and business plan for 2013-14; It was difficult, therefore, to fully assess the ongoing effectiveness of the Child Protection Committee through reference to an action plan from the previous reporting cycle. As a result, the Child Protection Committee was less able to demonstrate its role in ensuring timely progress was being achieved against targets in identified aspects of service delivery. For example, Priority 5 for 2014 stated partners would know they had succeeded if, "The evaluation of the initial referral discussion process demonstrated improved outcomes for children at an early stage in the child protection process". Without a linked cycle of reporting, the previous and current plans, although containing many common topics of child protection activity, were not being reviewed together and compared for progress.

Risk management

Recent national reviews have highlighted the need for robust joint risk management processes. This is not unique to North Lanarkshire and requires further national emphasis. In the North Lanarkshire context, we came across examples of corporate risk assessment, both single agency and across the Council, for example the Scottish Fire and Rescue Service-led Lanarkshire area risk register. This had been produced in partnership with a number of agencies including the two local authorities, Police Scotland, Scottish Ambulance Service, NHS Lanarkshire and the Procurator Fiscal service. Further work is required to expand upon joint approaches to strategic risk management.

Participation of children, young people, families and other stakeholders

This section examines the extent to which children, young people, families and other stakeholders are involved in policy, planning and service development.

The extent of participation by children, young people, families and other stakeholders was evaluated as very good. There was an embedded culture across the community planning partnership of valuing the contributions of children, young people and families. We found a very strong commitment to ensuring children, young people and families were consulted and had the opportunity to influence policy and planning. This commitment was supported by action to engage and involve children and young people systematically in policy, planning and service development. Young people were able to see where they could influence and make a difference for themselves and other young people. In targeting all children and young people, significant strides had been made to ensure seldom-heard groups also played a pivotal role in developments but where families were learning English as a second language, their participation was less evident. Commitment to participation and engagement was evident in the mind-set of partners, however an overarching strategy specific to children and young people, similar to the participation and engagement strategy developed by the Child Protection Committee, would provide a valuable baseline and measure of effectiveness across all services for all children in North Lanarkshire.

Where children were younger, there was consultation with children and parents in Early Years services adopting the model, 'consult, plan, do, evaluate' with innovative examples of engaging with younger children and gaining their views through a range of media. For example, the Early Years sub-group, through psychological services, was gaining children's views of the parenting strategy using puppetry and mind-mapping. Nursery children participated in a DVD to promote NHS Lanarkshire's Best Possible Start programme. The Early Years sub-group had set up a steering group to look at how to better engage fathers and, early in its development, they had successfully engaged fathers as members to review services across the area. Fathers involved in the Forest Schools (outdoor learning activities) were now involved in further developing the service.

There was an established participation and engagement structure with an active Youth Council and youth forums linking into local area planning structures and local area plans. This was facilitated by youth workers using various methods, including young people making a music video on sectarianism. Advocacy was strong in supporting and facilitating children and young people to express their views, individually and collectively, and helped more vulnerable children and young people to be consulted and involved. 'Listening tasks' were taking place on key topics including safer internet use, new guidance on foster care and housing legislation.

Partners were open to adapting services based on what young people told them. There were extensive examples of meaningful consultation and involvement leading to positive changes for young people and families. An example was the development and launch of the Youth Strategy where there was involvement of young people from across the area supported by elected members pledging their commitment to deliver on the strategy. Listening to young people had resulted in changes to how some services were delivered, such as the concept of Living Nearby where care leavers had been allocated tenancies close to known and well established sources of invaluable emotional and practical support, whether from extended family members, previous carers or staff and residents in children's houses. This was being further developed with training flats, again led by young people's views of what they would find most helpful. Young people had influenced the development of the High Risk Housing Protocol to consider the needs of all vulnerable young people when matching to suitable accommodation provision. Guidance on the eligibility of young people for Education Maintenance Allowance had been reviewed and amended for young carers following consultation with young people. Some health services were being delivered in a different way to ensure young people could access these through a 'one door' entry system and further developments in this area were being considered.

Participation activity would now benefit from being gathered in a more cohesive and collective way across the partnership. This would provide a stronger sense of what activity was achieving and would have the potential to bring together a more focused approach to the aspects where further attention should be targeted.

The commitment by staff to seeking the views of vulnerable children and young people through the use of tools such as Viewpoint, What I think and The Wellbeing Web was well evidenced in case records. Children and young people we met in the course of the inspection were able to identify these tools as materials with which they were familiar. Findings from previous inspections of children's houses and consultation by regulated services with young people who were looked after and accommodated had identified the need for better engagement and participation between the children's houses to promote a collective voice. The Your Voice advocacy service has been tasked with taking this forward and inter-house meetings have been developed. An advisory group had been created with young people leaving care who were using the services of Barnardo's and this should help influence developments, particularly in relation to corporate parenting, where the young people involved said, "Our focus is to make things better for other young people".

Vulnerable young people have been involved in interviewing residential and health staff and recently began having a role in preparation groups for foster carers - a new development well received in gaining a good sense of the child or young person's experience and perspective. Children and young people recently helped produce a DVD for staff training on outcomes focussed care planning. Health partners had recognised

that they needed to improve how they engaged and consulted with young people and the two looked after children nurse posts recently created have a specific remit to progress this area. A major strength was the extent to which services had embraced co-production with young people. Youth forum representatives had raised the issue of self-harm and were then involved in raising awareness with other young people and identifying what services were available. Young people with experience of being looked after who felt that staff did not always understand or listen to them were now involved in Safe and Sound staff training to provide their perspectives. This had made a significant impact on staff awareness of young people's needs.

For children with complex needs, the work of the **Self-Directed Support** demonstration project was harnessing their and their families' views. There were examples of innovative and creative arrangements personalised to individual needs and families appreciated that they were working in true partnerships with staff. Children and young people with individual budgets had been closely involved in developing and designing the assessment and planning tools.

Young carers had also been involved in raising awareness of young carers' responsibilities and needs with children and young people in schools. Events such as debate nights and health fairs had been co-produced. Young people were supported to attend and represent their area on a national and UK-wide basis at conferences and events such as the Young Carers Festival, Young Carer Conference and the Care Leavers Conference.

7. How good is the leadership and direction of services for children and young people?

This section is about the extent to which collaborative leadership is improving outcomes for children, young people and families. It comments on the effectiveness of the shared vision, values and aims, leadership and direction and leadership of people. It also examines how well leaders are driving forward improvement and change.

Leadership of improvement and change was very good. Partners had a clear and strong shared vision for all services to deliver the best possible outcomes for children, young people and families. Partnership working was firmly embedded and proving highly effective at almost all levels with clear ownership by staff and consistent promotion of the advantages of joint working. The demographics of the North Lanarkshire area in terms of population size and levels of deprivation meant partners and staff at all levels were clear that the scale of the challenges facing them meant they should harness the greatest potential and achieve the greatest impact through working together and sharing services. There was a maturity of partnership working and a belief

that this was simply the way of doing things. There was evidence of many strengths overall and the partners in North Lanarkshire recognised they still have important improvements to make in respect of ensuring consistency of practice in the multi-agency response to child protection issues.

The North Lanarkshire Community Plan 2013-18 was constructed with planning for children and young people as a cross-cutting theme. This was designed to reflect the importance placed by the partnership on ensuring the best possible start in life for all children and young people born and growing up in the area. This vision, together with the strong ethos of partnership working, was clearly owned by staff throughout services who were enthusiastic about the benefits to be derived from working with partner agencies. Elected members were closely engaged with the vision, values and aims for children, young people and families, sometimes helped through direct involvements such as lay membership of the North Lanarkshire Adoption and Fostering Panel, where they saw their role as being to promote and secure the best life chances and outcomes for individual children.

The North Lanarkshire Partnership Board, the Children's Services Partnership and the Child Protection Committee were delivering very well on the Community Plan's key themes, strategic priorities and local outcomes. These priorities were reflected throughout planning and organisational structures with relevant multi-agency action plans and strategies to guide and direct service delivery. The strong collaboration evident across agencies was led by chief officers using a shared approach to considering the totality of North Lanarkshire's resources and who were together shifting these more effectively towards prevention and early intervention.

Leaders were considered by staff to be visible and approachable and in turn staff reported feeling confident and empowered to carry out their work. Morale was high within a culture of collaboration and creative thinking. Innovative approaches included the ongoing commitment to supporting the long term integration of Congolese refugees in Motherwell through the Gateway Protection Programme and the development of self-directed support for children and young people. Both these initiatives require bespoke solutions based on careful consideration of individual needs. Chief officers participated in periodic back-to-the-floor activities to ensure they kept themselves informed and remained in touch with operational or frontline experiences.

The common language of **Getting It Right For Every Child** and shared focus on achieving the best outcomes for children and young people had been welcomed by staff, who considered this to have improved or further strengthened working relationships and recognition of children's needs. Staff were very positive about their own and others' contributions and together strived for excellence in services. Training and materials had included staff working in adult and community services in recognition of the need for a child-centred and multi-agency partnership approach. Ongoing work was focusing on

ensuring there was capacity to fully implement the **Getting It Right For Every Child** practice model across all partners including the **third sector**.

The North Lanarkshire Partnership and Children's Services Partnership demonstrated a strong commitment to continuous improvement with appropriate performance monitoring at different levels. There was a culture of honest discussion and constructive challenge to identify required improvements and then to action these. Identified strategic priorities had related indicators and partners had been endeavouring to identify suitable measures of progress in terms of improved outcomes for children and young people. Delivering on the **Improving Children's Services Plan** was devolved to locality and thematic sub-groups where local and operational issues were best known and understood. Self-evaluation was reported to the Quality Improvement Group on a quarterly basis using the Children's Services Improvement Tool which brought together service specific information about performance in a common reporting framework.

The leadership team was closely engaged with the Early Years Collaborative in North Lanarkshire through monthly meetings with the programme manager and delivery on tests of change was reported to the Chief Officers Group. The strategic priorities for children's services were detailed in the Improving Children's Services Plan 2012-15 and improvements were being driven and reported on effectively through locality and themed sub-groups. Staff considered that leaders were focusing on the right things and heading in the right direction for children, young people and families. They reported that they felt included and engaged in service redesign and development, facilitated to participate and helped to understand where their contribution fitted into overall strategic objectives. In order to promote and build on leadership capacity at all levels, 67 staff from North Lanarkshire had recently attended a Scottish Government improvement coaching 'boot camp', reflecting an investment in continuous learning and improvement that was evident at all levels.

There were many examples of policies, procedures and services being revised and improved as a result of self-evaluation or realignment to strategic aims by partners, although there could be better reflection of this in terms of outcome measures. An example was the change to housing allocations points for applicants who had experienced domestic abuse so that these victims would no longer lose out on valuable points when they moved out of the household they were sharing with the perpetrator. The benefits of this in terms of reduced instances of repeat offences or reduced waiting for rehousing could potentially be captured to illustrate the improved outcomes for those families.

It was evident that considerable effort had been directed to achieving a more consistent involvement of all relevant partners in decision-making around referrals of potential child protection concerns. Staff had researched practice elsewhere and devised a Lanarkshire practice guide. Further refinements to this were necessary and had been scheduled for review. The role of paediatricians in making decisions about whether a child or

young person requires a medical examination and if so, what kind, now require to be strengthened to ensure children's health needs are fully considered, including children who may have experienced neglect. When decisions have been taken in relation to a potential child protection referral, a shared single record of this would ensure greater clarity for all parties. Managers recognised that there was still work to be done to ensure that these critical aspects of North Lanarkshire's multi-agency child protection procedures and arrangements were being carried out consistently and in line with best practice.

The North Lanarkshire Partnership and Children's Services Partnership demonstrated a strong and longstanding commitment to continuous improvement with appropriate performance monitoring at different levels and a culture of discussion and challenge to identify required improvements. Identified strategic priorities have related indicators and partners have been endeavouring to identify suitable measures of progress in terms of improved outcomes for children and young people. Across the Partnership, managers involved in children's services are increasingly being trained in and using a PDSA (Plan, Do, Study, Act) improvement methodology cycle introduced in children's services through the Early Years Collaborative. This enables small tests of change to be evaluated prior to a wider application and encourages the development of creative and innovative practice.

In line with a commitment to tackling inequalities, the North Lanarkshire Partnership identified the Cragneuk neighbourhood as the most disadvantaged in the area. It had been working to identify potential opportunities for change and to find strengths in the community, in partnership with residents, which might be harnessed. This had led to an action plan which should guide a multi-agency approach by partners over a number of years. Commendably, it showed the determination of the Partnership to commit significant resources to serve longer term goals for improving outcomes and life chances where a quick return on the investment is unlikely to be seen. The Partnership had a proven track record of sustained commitment to using a multi-agency approach over a longer term to achieve its aims and this was evident in the Gateway Protection Programme for Congolese refugees who moved to Motherwell in 2007. North Lanarkshire decided to take part in this programme in 2005 and to date remains the only Scottish local authority to do so. The experiences of the refugees were independently reviewed in a recent follow-up when it was concluded that the support they had received in North Lanarkshire was superior to that received by refugee families who were re-settled in England. What is particularly commendable about this programme is the sustained commitment by North Lanarkshire partners to supporting the long term integration of these refugees, notwithstanding that this has been achieved during a time when the recession has meant there were greater challenges to be overcome.

The North Lanarkshire Partnership Board had undertaken self-evaluation activity in relation to its own leadership (when members of the Improving Children's Services Group carried out an evaluation of the effectiveness of leadership performance using the Quality Indicator Framework) and a range of self-evaluation activities had been undertaken

within groups, localities and themes to inform service developments. As a result of some of these activities, it was clear that tangible improvements had been achieved. Examples include addressing previously recognised high risks to vulnerable young people experiencing homelessness with new protocols in place to ensure appropriate accommodation and support; addressing the recognised impact for children waiting for a permanent alternative family with a successful drive to recruit more prospective adopters and long term foster carers; shifting the balance of care towards more family-oriented arrangements for looked after young people. North Lanarkshire partners take seriously their corporate parenting responsibilities and this was reflected in a shared commitment and sustained investment in resources across a range of aspects of the care and learning experiences of children who were looked after. This included directing resources towards supporting families of children looked after at home to avoid relationship breakdowns but also promoting strongly the aspirations and interests of those children and young people looked after away from home. Improvements such as these have enhanced the life chances of vulnerable children and young people in North Lanarkshire and have contributed to the sustained success of partners in moving towards more prevention and early intervention.

8. Conclusion, particular strengths and areas for improvement

In the course of this joint inspection of services for children and young people, the team of inspectors was able to be confident that, as a result of the services being delivered by the Community Planning Partnership, the lives of many children and young people growing up in North Lanarkshire were improving.

Where children and young people were potentially in need of protection, the risks to their safety and wellbeing were being identified in good time and suitable, proportionate action was taken to ensure they and their families received the help they needed. We were confident that services recognised they could improve some processes further. They had already begun reviewing and taking effective action to ensure that decisions about child protection referrals were suitably shared across staff in health, police, social work and education.

Staff were working hard to improve outcomes for looked after children. We were confident that the needs of children and young people who were looked after and accommodated in children's houses and foster families received close attention and foster carers too voiced their strong appreciation of the supports which were made available to them.

There had been notable improvements in the range of co-ordinated support services put in place for young people leaving care. This was in recognition of their vulnerability

at this stage in their lives and to ensure they received the right help and guidance as they moved towards more independent living.

In the course of the inspection we identified these particular strengths which were making a positive difference for children and young people in the North Lanarkshire Community Planning Partnership area.

- **The range of flexible and responsive support services** available to work intensively which are supporting families through prevention and early intervention.
- **Pre-birth planning** with involvement of the integrated addictions service and specialist midwives, which is reducing risks for vulnerable children and making sure they get the best start in life.
- **Improved progression of children's permanence plans** as a result of focussed efforts to improve potential life chances and outcomes for vulnerable children requiring alternative family care.
- **Services available to young people aged 16 and over** which are ensuring they remain in contact with supports for longer and know where to turn when they need help.
- **Locality Partnership working** which is embedded and highly positively regarded across agencies, leading to effective and joined up locality management arrangements.

We are very confident that partners in the North Lanarkshire Council area, through a continuing cycle of systematic self-evaluation, will be able to make the necessary improvements in the light of the inspection findings. In doing so, North Lanarkshire Community Planning Partnership should include the following actions.

- **Ensure a collective responsibility and consistent involvement by police, social work, health and education staff in sharing information and assessing risks relating to referrals of potential child protection concerns (Notification of Child Protection Concern Discussions) and a single record of decision-making.** In March 2011, following the report from the joint inspection of services to protect children and young people in North Lanarkshire, partners agreed to "Implement plans to fully involve appropriate health and medical staff in planning investigations". This has not yet been fully achieved.
- **Develop integrated multi-agency chronologies** to aid staff in their proactive assessment of risk through analysis of recurrent patterns or accumulations of concerns.
- **Ensure health assessments for looked after children and young people** whose health needs could more consistently receive attention within an approach that seeks to optimise their potential wellbeing.

9. What happens next?

We will request that a joint action plan is provided which clearly details how the North Lanarkshire Community Planning Partnership will make improvements in the key areas identified by inspectors. The Care Inspectorate and other bodies taking part in this inspection will continue to offer support for improvement through their linking arrangements and will monitor the Partnership's progress in taking forward its action plan.

June 2015

Appendix 1: Good practice examples

In each inspection we ask partners to nominate some examples of good practice which can be shown to have a positive impact on the lives of children, young people and families. During the inspection, we assess these examples to identify those which we consider would be useful to community planning partnerships across Scotland.

We commend the following examples from North Lanarkshire.

Motherwell Football Club Community Trust

The Motherwell Football Club Community Trust is making a significant contribution to the health, wellbeing and employment opportunities of people in North Lanarkshire. In achieving this, the Trust promotes equality and diversity, by inspiring children and young people to adopt a more positive lifestyle. Using the influence of sport and the standing of the football club in the community, it is able to deliver programmes that address a wide range of issues including sexual health, smoking, alcohol and substance abuse. Partnership working is at the core of its success, based on the collaborative leadership displayed by North Lanarkshire Community Planning Partnership, the communities it serves, and Motherwell Football Club. Based on this partnership, the aims and priorities of the Trust reflect those of the CPP area as a whole.

Opportunities offered by the Trust include diversionary programmes, youth employment courses, health and wellbeing sessions with local primary children, work experience placements with ASN schools, personal development for young people, smoking cessation and alcohol awareness. They are delivered alongside colleagues from relevant partner agencies. Some programmes involve footballers and coaches from Motherwell FC's first team squad as positive role models, delivered from classrooms that have been created with Fir Park Stadium. From this experience, the Trust is able to demonstrate that the use of sport - particularly football – can add value by offering a successful medium for working with children and young people. It has proved to be particularly effective in reaching some families who would otherwise be more difficult to engage.

Programmes are measured against outputs and outcomes agreed with partners. Generally, across these programmes, the Trust can demonstrate a range of positive outcomes, including improvement in BMIs (body mass index), balance, co-ordination, speed, confidence, esteem and body shape. In addition, young people have achieved accredited qualifications across sports coaching, youth leadership, enterprise, and employability.

Strengthening Families Programme

The Strengthening Families Programme (SFP) is an eight-week evidence-based programme for families with young people aged 10-14, which aims to reduce drug and alcohol use, address related problem behaviours and strengthen family relationships. It aims to bring families together through group discussions, games and activities, in order to focus on issues such as managing adolescent behaviour, communication between parents/carers and children, exploring and developing new skills and tools which help family members deal with issues such as peer pressure, substance misuse, making positive life choices and strengthening the parent/carer child relationship through working and problem solving together.

Families receive significant levels of support in order to sustain attendance throughout the eight week period. This includes practical help such as transport and childcare for families with young children. It also involves a 'buddy mentoring' system, providing one-to-one support for young people who may be anxious about participating in the programme. At the end of eight weeks, any ongoing support needs identified during the programme are referred on to appropriate agencies. Young people are offered ongoing mentoring as the programme finishes.

Outcomes are measured from a number of aspects, including self-reporting, as well as input from schools and named persons. Key outcomes for young people include that they now feel their views are more listened to within the home and that they better understood the reasons behind boundaries. Key outcomes for parents/carers include being able to set and stick to boundaries and communicate with their child more effectively. On follow up by facilitators, both parents and young people reported that they had been able to sustain these changes over time.

Youth Bridges

Youth Bridges is an initiative that recognises that young people under 21 years serving short term custodial sentences of under four years are not subject to any form of supervision on release. In response, Youth Bridges at Community Alternatives is a service funded by Lanarkshire ADP which prioritises this group. The service has adopted an 'assertive outreach approach'. This approach recognises the right to decline the service whilst actively promoting the benefits of intensive support and is designed to divert young people away from offending into more positive lifestyles. The service is intended to respond to a wide range of needs. This 'holistic' approach is intended to ensure that young people are not 'referred on' to services; rather the young people's engagement with a range of partners is facilitated by the service and offered in one location.

A support worker and a support work assistant work with young people throughout their period in custody in either Polmont or Cornton Vale. Working alongside prison staff, a community reintegration plan is agreed prior to release. Individual work, family work

and group work is offered. Effective links with a range of partners have been developed, which ensure that some of the disadvantages that young people faced before custody are not compounded on release.

Young people have engaged well with the service since it started in April 2014. Initial findings point to family relationships being supported and strengthened, alcohol and drug issues addressed, offending behaviour challenged, training and employment opportunities accessed, homelessness prevented and underlying disadvantage and trauma understood, with a corresponding improvement in the wellbeing of the young people concerned. For example, positive relationships with the housing service and Passport (Access to Industry) have been established with effective outcomes: no 'roofless' young people on release, and positive training and employment outcomes. Data continues to be gathered in order to measure these outcomes over a longer period.

Appendix 2: Indicators of quality

Quality indicators help services and inspectors to judge what is good and what needs to be improved. In this inspection we used a draft framework of quality indicators that was published by the Care Inspectorate in October 2012. 'How well are we improving the lives of children, young people and families? A guide to evaluating services for children and young people using quality indicators'. This document is available on the Care Inspectorate website.

Here are the evaluations for nine of the quality indicators.

How well are the lives of children and young people improving?	
Improving the well-being of children and young people	Very good
Impact on children and young people	Very good
Impact on families	Very good
How well are partners working together to improve the lives of children, young people and families?	
Providing help and support at an early stage	Very good
Assessing and responding to risks and needs	Good
Planning for individual children	Good
Planning and improving services	Good
Participation of children, young people, families and other stakeholders	Very good
How good is the leadership and direction of services for children and young people?	
Leadership of improvement and change	Very good

This report uses the following word scale to make clear the judgements made by inspectors.

Excellent	outstanding, sector leading
Very good	major strengths
Good	important strengths with some areas for improvement
Adequate	strengths just outweigh weaknesses
Weak	important weaknesses
Unsatisfactory	major weaknesses

The quality indicators framework

What key outcomes have we achieved?	How well do we meet the needs of our stakeholders?	How good is our delivery of services for children, young people and families?	How good is our operational management?	How good is our leadership?
1. Key performance outcomes	2. Impact on children, young people and families	5. Delivery of key processes	6. Policy, service development and planning	9. Leadership and direction
1.1 Improving the well-being of children and young people	2.1 Impact on children and young people	5.1 Providing help and support at an early stage 5.2 Assessing and responding to risks and needs 5.3 Planning for individual children 5.4 Involving children, young people and families	6.1 Policies, procedures and legal measures 6.2 Planning and improving services 6.3 Participation of children, young people, families and other stakeholders 6.4 Performance management and quality assurance	9.1 Vision ,values and aims 9.2 Leadership of strategy and direction 9.3 Leadership of people 9.4 Leadership of improvement and change
	2.2 Impact on families			
	3. Impact on staff			
	3.1 Impact on staff			
	4. Impact on the community			
4.1 Impact on the community		7. Management and support of staff	7.1 Recruitment, deployment and joint working 7.2 Staff training, development and support	
		8. Partnership and resources	8.1 Management of resources 8.2 Commissioning arrangements 8.3 Securing improvement through self evaluation	
10. What is our capacity for improvement?				
Global judgement based on an evaluation of the framework of quality indicators				

Appendix 3: The terms we use in this report

Community planning is a process which helps public agencies to work together with the community to plan and deliver better services which make a real difference to people's lives.

Single Outcome Agreement is an agreement between the Scottish Government and community planning partnerships which sets out how they will work towards improving outcomes for Scotland's people in a way that reflects local circumstances and priorities.

Third sector, also known as the voluntary or community sector, is the term used to differentiate from the public or private sector. Services here are non-governmental and non-profit-making organisations or associations, including charities, voluntary and community groups.

Getting it Right for Every Child is the Scottish Government's approach to making sure that all children and young people get the help they need when they need it. For more information, search www.scotland.gov.uk/gettingitright

SHANARRI health and wellbeing indicators are used across all childcare and social care settings in Scotland. The Care Inspectorate uses them to assess how children are kept safe, healthy, achieving, nurtured, active, respected, responsible and included.

Where two or more agencies or services need to work together to meet a child's needs, a practitioner from one of these agencies will become the **lead professional**. They make sure everyone is clear about their contribution to achieving the outcomes in the Child's Plan, co-ordinating assessment, planning and action and ensuring the support provided is working well.

The Early Years Collaborative was launched by the Scottish Government in October 2012 with the support of NHS Scotland, the Coalition of Scottish Local Authorities (COSLA) and the Police Service of Scotland. It is a multi-agency, local, quality improvement programme delivered on a national scale focusing on the national outcome, 'Our children have the best start in life and are ready to succeed'. For more information, search "Early Years Collaborative" online.

Family Nurse Partnership is an intensive, preventative, home visiting programme delivered by highly trained nurses to first-time teenage parents to give their children the best possible start in life. The programme is delivered from pre-birth to two years old.

The Solihull approach 'Understanding your child's behaviour' is a programme or course which can be undertaken by parents and carers to help them in parenting their children through improved understanding of behaviour and relationships.

Rights Respecting Schools Award (RRSA) recognises success in putting the United Nations Convention on the Rights of the Child at the heart of a school.

Improving children's services plan is for services that work with children and young people. It sets out the priorities for achieving the vision for all children and young people and what services need to do together to achieve these.

The local authority has a duty to carry out a needs assessment for each young person who ceases to be looked after beyond school age, with a view to determining what advice, assistance and support the authority, or services acting on behalf of the authority, should provide. This is known as a **pathway assessment** and the **pathway plan** lays out exactly what support will be provided, and in what way, to meet the young person's needs.

Comparator authorities are authorities which Her Majesty's Inspectorate of Education (HMIE) judge to be sufficiently similar to one another that the performance of an individual authority may be benchmarked against the others. North Lanarkshire has five comparator authorities and these are Clackmannanshire, East Ayrshire, Falkirk, South Lanarkshire and West Lothian.

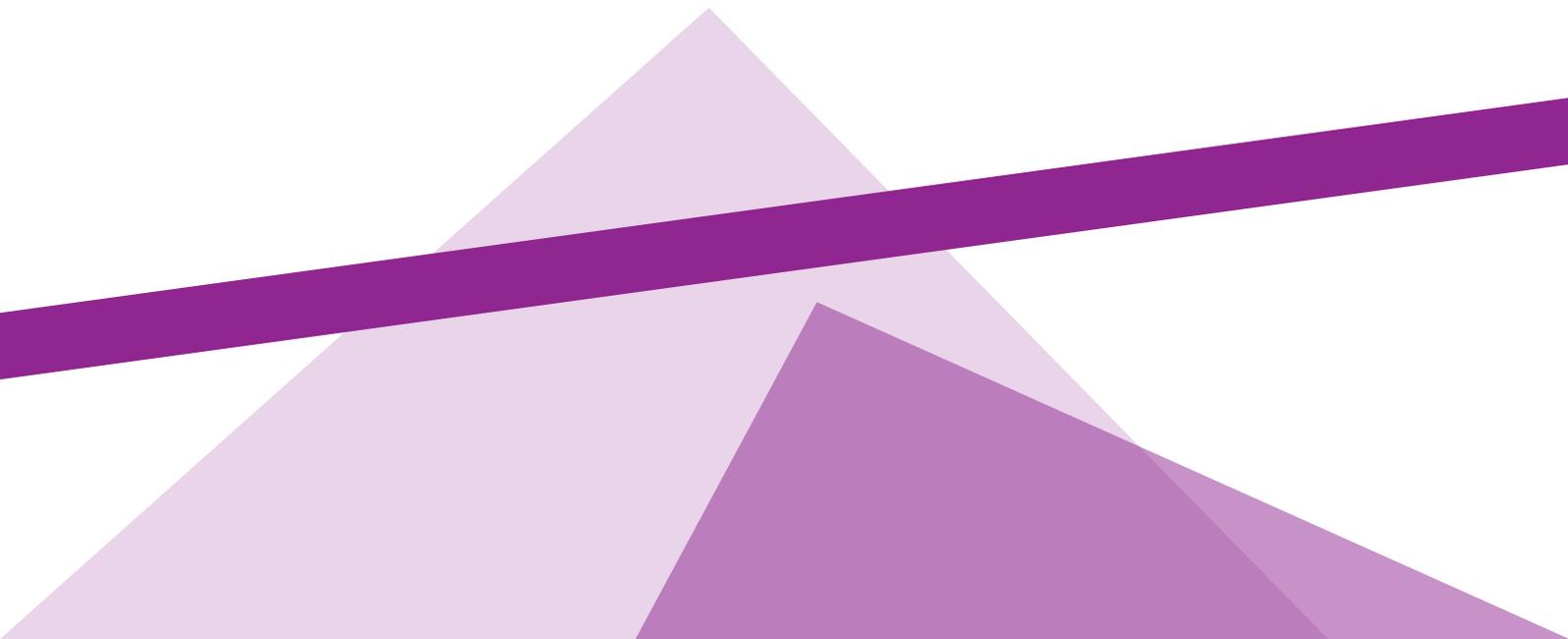
Self-directed Support In 2013 The Scottish Parliament passed a new law on social care support, called the Social Care (Self-directed Support) (Scotland) Act 2013. The Act gives people a range of options for how their social care is delivered, beyond just direct payments, empowering people to decide how much ongoing control and responsibility they want over their own support arrangements. The Act places a duty on councils to offer people choices as to how they receive their social care support.

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