Inverclyde Alliance

PLEASE NOTE VENUE OF MEETING

INVERCLYDE ALLIANCE BOARD

MONDAY 17 JUNE 2019 – 1PM

PORT GLASGOW TOWN HALL, SCARLOW STREET, PORT GLASGOW PA14 5EY

Please note that a sandwich lunch will be provided from 1pm.

BUSINESS

1. **Apologies for Absence**

2. **Inverclyde Cultural Partnership Update and Draft Heritage Strategy**
   Report by Corporate Director Education, Communities & Organisational Development, Inverclyde Council (copy attached)
   NB There will also be a presentation on this item

3. **Minute of Meeting of 18 March 2019** (copy attached)

4. **Matters Arising**

PERFORMANCE MANAGEMENT

5. **Inverclyde Local Outcome Improvement Plan Quarterly Progress Report – June 2019**
   Report by Chair of Programme Board (copy attached)

6. **Locality Planning Update**
   Report by Chair of Programme Board (copy attached)

7. **Inspection of Local Authorities – Community Learning & Development in Inverclyde**
   Report by Corporate Director Education, Communities & Organisational Development, Inverclyde Council (copy attached)

8. **Progress with Actions from the Children's Services Inspection and the Year 2 Delivery Plan for the Strategic Children's Service Plan**
   Report by Corporate Director Education, Communities & Organisational Development, Inverclyde Council (copy attached)

NEW BUSINESS

9. **Programme of Alliance Board Meetings to December 2020**
   Report by Corporate Director Environment, Regeneration & Resources, Inverclyde Council (copy attached)

10. **Young People Representation on Inverclyde Alliance Board**
    Report by Corporate Director Education, Communities & Organisational Development, Inverclyde Council (copy attached)

11. **Local Child Poverty Action Report**
    Report by Corporate Policy, Performance & Partnership Manager, Inverclyde Council (copy attached)

Inverclyde Alliance

12. **Pregnancy and Parenthood in Young People Improvement Plan**
Report by Corporate Director Education, Communities & Organisational Development, Inverclyde Council (copy attached)

13. **Multi-Agency Guidelines for Responding to Self-Harm and Suicide in Children and Young People**
Report by Corporate Director Education, Communities & Organisational Development, Inverclyde Council (copy attached)

14. **Community Safety and Violence Reduction Initiative - Update**
Report by Service Manager, Community Learning & Development, Community Safety & Resilience and Sport, Inverclyde Council and Superintendent D Lang, Police Scotland (copy attached)

15. **Estimated Prevalence of Problem Drug Use in Scotland 2015/16**
Report by Alcohol and Drug Partnership Lead Officer, Inverclyde HSCP (copy attached)

16. **Domestic Abuse (Scotland) Act 2018**
Report by Corporate Director Education, Communities & Organisational Development, Inverclyde Council (copy attached)

17. **NRS Mid-Year Population Estimates (2018) for Inverclyde and Scotland**
Report by Corporate Policy, Performance & Partnership Manager, Inverclyde Council (copy attached)

18. **Date of Next Meeting – Monday 7 October 2019 - 1pm**

Enquiries to - **Sharon Lang** - 01475 712112

Inverclyde Alliance

AGENDA ITEM NO: 2

Report To:	**Inverclyde Alliance Board**	**Date: 17 June 2019**	
Report By:	**Ruth Binks, Corporate Director Education, Communities & Organisational Development**	**Report No:**	
Contact Officer:	**Alana Ward, Libraries, Education Development and Arts Manager**	**Contact No:**	**01475 712347**
Subject:	**Inverclyde Cultural Partnership Update & Draft Heritage Strategy**		

1.0 PURPOSE

1.1 The purpose of this report is to:

(a) Provide the Inverclyde Alliance Board with an update on the work of the Inverclyde Cultural Partnership, and;

(b) Present to the Inverclyde Alliance Board a new Heritage Strategy for Inverclyde, the production of which is a key part of, and has been funded by, the Great Place Scheme.

2.0 SUMMARY

2.1 The Inverclyde Cultural Partnership supports the delivery of the Culture and Heritage priority of the Inverclyde Outcomes Improvement Plan. Membership is drawn from local organisations, groups and individuals with an interest in arts, culture and heritage.

2.2 The Cultural Partnership has identified a range of tasks and priorities to take forward which have been published as a detailed Delivery Action Plan and approved by the Alliance Board. This report summarises recent activity on a number of those workstreams.

2.3 One of those workstreams is the production of a Heritage Strategy for Inverclyde, which is being funded through the Great Place Scheme. The Cultural Partnership has overseen this process and is pleased to present the Heritage Strategy to the Alliance Board for approval.

3.0 RECOMMENDATIONS

3.1 It is recommended that the Alliance Board notes the progress made on current workstreams.

3.2 It is recommended that the Alliance Board endorses the Heritage Strategy for Inverclyde.

Ruth Binks
Corporate Director Education, Communities & Organisational Development

4.0 BACKGROUND

4.1 The Inverclyde Outcome Improvement Plan (IOIP) focuses on Environment, Culture and Heritage as one of its priorities:

'Inverclyde's environment, culture and heritage will be protected and enhanced to create a better place for all Inverclyde residents and an attractive place in which to live, work and visit.'

There are two partnerships which support the delivery of this priority: the Environment Partnership and the Inverclyde Cultural Partnership. The Cultural Partnership focusses on the arts, culture and heritage element of this priority. Membership is drawn from organisations, groups and individuals with an interest in arts, culture and/or heritage, and meets every six weeks, where possible in buildings which are part of Inverclyde's heritage, across the three Community Planning Partnership localities. The Partnership seeks to engage with local community groups within the localities, with an interest in arts, culture and heritage and will map its work against the ongoing development of locality plans.

4.2 Since the last meeting of the Alliance Board, the Inverclyde Cultural Partnership has met once, on 10 April 2019. This meeting had a single-item agenda and was held to review and discuss an early draft of the Inverclyde Heritage Strategy (please see below for more information).

4.3 **Workstream Updates**

Great Place Scheme

Evaluation: The National Lottery Heritage Fund have appointed the Audience Agency as external evaluators of all of the Great Place Scheme projects across the UK; the Audience Agency have further confirmed that they will produce one in-depth case study from the 9 Scottish projects and that they wish to focus on the Inverclyde project.

Heritage Strategy: A key focus of the Great Place Scheme project in recent months, more information below.

John Galt Visit: The Heritage Outreach Officer has been working with North Ayrshire Council to support a visit to Inverclyde on Wed 1 May by individuals from Guelph (Ontario, Canada) with an interest in author, entrepreneur and political commentator John Galt (1779 Irvine – 1839 Greenock). Galt founded the town of Guelph in 1827. The Canadian guests will be welcomed by the Heritage Outreach officer and the Inverclyde Tourist Group at Notre Dame High School, where they will be joined by S2 pupils for a morning performance of *John Galt and the Instant City*, a piece of musical theatre written in commemoration of Galt's 240th birthday. The party will then travel to the Municipal Buildings for a light lunch with Provost Brennan, and a tour of the buildings by the Tourist Group, to the Watt Institution to see mineral specimens and papers relating to Galt, and onwards to Inverkip Street Cemetery where Galt is buried, Westburn Street where there is a plaque to mark his place of death, the John Galt Memorial Fountain on the Esplanade, and the Burns Room at the Custom House.

Recruitment: the Heritage Outreach Officer has been appointed to another role within the Cultural team, and therefore recruitment for a replacement will start shortly.

Arts and Creativity Strategy

As noted previously, Creative Scotland have funded a 0.4 FTE Arts Co-ordinator for the area who is based at CVS Inverclyde with input from Inverclyde Council's Cultural Services team. The post-holder started work in March 2019 and is tasked with facilitating collaboration, co-ordination and communication between all with an interest in arts in the area, as well as producing a tangible action plan for the Arts and Creativity Strategy. Activities, meetings and actions so far include:

- Meetings with local artists and arts organisations; Riverside Inverclyde; Inverclyde Community Development Trust; the Wyllie Foundation; Creative Scotland; the Watt Institution; National Lottery Heritage Fund
- Joined Cryptic Sonica Festival and Surge outdoor arts director bursary (Kayos) up with *Galoshans* as new partners for 2019
- Supported RIG Arts with *Galoshans* 2019 Creative Scotland application

James Watt Bicentenary

James Watt Book Launch: Following publication of a new book "The Power to Change the World: James Watt – A Life in 50 Objects" by Dr Malcom Dick and Kate Croft, a launch will be held from 11am on Sat 1 June at the Beacon Arts Centre. Dr Dick will give a short talk, followed by Q&A and signing. The Curator of the McLean Museum has contributed a number of chapters to the publication.

Virtual Watt Walk: A video promoting the project is being circulated to all schools to encourage take-up.

When **A**rt **T**ells **T**ales: Intergenerational project creating music and art inspired by James Watt is ongoing. The Heritage Outreach Officer and McLean Museum Curator are developing a bid to Museums Galleries Scotland Festival Fund for a final exhibition and performance in August to coincide with the bi-centenary. This will likely be at the Beacon as it is now unlikely that the Watt Institution will be open by August.

Academic Dinner: This is in the process of being arranged for Wednesday 20 November 2019, to be held in Greenock Town Hall and hosted by Professor Colin McInnes, the James Watt Chair in Engineering Science at the University of Glasgow.

Watt Tartan: The James Watt Commemorative Tartan has now been officially registered and has gone into production.

4.4 **Heritage Strategy**

The successful bid to develop a Heritage Strategy for Inverclyde was awarded to a collaboration led by Jura Consultants working with icecream architecture. The study commenced in December 2018 and had a number of phases including desk-based research; staff and stakeholder consultation; and public engagement. The consultants have now produced a draft Heritage Strategy for Inverclyde which the Cultural Partnership have had an opportunity to see and comment on, and feedback received has been incorporated into a further draft, which is presented as an appendix to this report.

The Strategy presents an overview of heritage in Inverclyde; strategic priorities and opportunities; mapping of heritage sites and buildings; comprehensive information on the staff, stakeholder and public consultation carried out; a vision, aims and objectives, and a leadership framework for heritage in Inverclyde; a delivery model; and an implementation strategy.

5.0 PROPOSALS

5.1 It is proposed that the Alliance Board notes the progress made in the various Inverclyde Cultural Partnership workstreams.

5.2 It is proposed that the Alliance Board endorses the Inverclyde Heritage Strategy 2019-29.

6.0 IMPLICATIONS

6.1 Legal: There are no legal implications arising from this report.

Finance: There are no financial implications arising from this report.

Human Resources: There are no human resources implications arising from this report.

Equality and Diversity: There are no equality and diversity implications arising from this report.

Repopulation: Culture, arts and heritage are useful ways in which to raise the profile of Inverclyde, and can attract people to visit the area.

Inequalities: The Cultural Partnership will map its activity to the three Community Planning localities, and will engage with groups in these areas.

7.0 CONSULTATIONS

7.1 Significant public consultation was carried out prior to the production of the Inverclyde Heritage Strategy. More details are contained within the Strategy document.

8.0 LIST OF BACKGROUND PAPERS

8.1 Inverclyde Heritage Strategy 2019-29 (Appendix 1).

APPENDIX 1

Inverclyde Heritage Strategy: *Contents*

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All images sourced and provided by Inverclyde Council unless otherwise stated
Researched and compiled by

Jura CONSULTANTS icecream architecture

Inverclyde Heritage Strategy: *Foreword*

As Chair of Inverclyde Alliance, the Inverclyde Community Planning Partnership, I am delighted to introduce *Inverclyde's Heritage Strategy 2019-2029*.

Inverclyde Alliance's *Outcomes Improvement Plan 2017-2022: Moving Forward Together* identifies three strategic priorities for the area, one of which - Environment, Culture and Heritage – recognises that a thriving culture and heritage offer can have a positive impact on the physical, mental and social wellbeing of residents of all ages, as well as contributing to social and economic regeneration, promoting tourism, and making Inverclyde a more attractive place to live, work and visit.

Commissioned by the Inverclyde Cultural Partnership, one of the Outcomes Improvement Plan delivery groups, the Strategy has been prepared in consultation with community groups and organisations with an interest in culture and heritage, as well as with Inverclyde's communities. In order to celebrate and promote our unique culture and heritage, a vital part of the strategy is to ensure it is available to all and to provide the community, including our children and young people, with opportunities to engage, volunteer, and learn new skills.

The Strategy comes at a time when the public sector is facing unprecedented financial challenges, and this will require us to work closely with a wide range of partners from the public, private, and third sectors to achieve the Strategy's ambitious vision, aims and objectives and the strong, sustainable infrastructure required to ensure that heritage is in the best possible position to build civic pride and social capital. The Strategy will therefore serve as a framework for partners with an interest in culture and heritage to share, learn and collaborate.

The Strategy is both backwards and forwards looking in its understanding of heritage, acknowledging that heritage does not simply exist in the past but provides a sense of enduring continuity helping us to make sense of today and to make decisions about how things should be in the future. It will help to ensure that Inverclyde's unique culture and heritage is preserved for present and future generations.

Stephen McCabe
Chair, Inverclyde Alliance Board
Leader of Inverclyde Council

1.0 The Heritage Strategy: *Introduction*

A titan of industry and trade, place of spectacular natural beauty, magnet for immigration, launchpad for the Scottish diaspora and birthplace of internationally renowned individuals whose legacy is still felt today, Inverclyde has a profound and significant heritage.

Inverclyde's History – A Summary

Inverclyde is steeped in centuries of maritime and industrial endeavour. Over the course of the 18th, 19th and 20th centuries Inverclyde's coastal settlements became world leaders in shipbuilding. Shipbuilding became a mainstay of the regional and national economy and gateway to the British Empire, North America and the Caribbean. The success of shipbuilding on the Clyde led to a rich heritage in trade, emigration and war – all relating to a much wider heritage of national and international significance. Post Second World War, an era of socio-economic ascendancy turned to decline, with competition from overseas leading to restructuring and eventually closure for many of Inverclyde's shipyards. The electronics industry emerged in the wake of shipbuilding and Inverclyde became part of 'Scotland's Silicon Valley' – Silicon Glen. However, electronics was never to replicate the peak of the shipbuilding era eventually declining in the early 2000's.

Inverclyde's history has not only played out along its coastal region. Before the dominance of the shipbuilding and maritime industries, one of the main economic activities in the region was agriculture. Inland, multiple farms nestled around the villages of Kilmacolm, Houston and the River Gryffe with strong commerce links to the towns along the Clyde. Today, the popular Kilmacolm Agricultural Show, now in its 183rd year, celebrates the region's agricultural heritage with demonstrations of Clydesdale horses making the historic journey up the hill from Port Glasgow to Kilmacolm.

Inverclyde as a regional entity is relatively new, redefined from the former governance of Renfrewshire in 1975, within which Port Glasgow, Greenock and Gourock were different boroughs. Each had a strong sense of place and identity derived, to a large extent, from the industries, occupations which defined the roles each settlement played in the area's rise to industrial pre-eminence rather than one regionally defined sense of self.

1.0 The Heritage Strategy: *Introduction*

Study Background

Inverclyde has a rich and unique heritage, intrinsically important to the sense of place and identities which are felt locally. However, heritage engagement falls short.

The Royal Society for the encouragement of Arts, Manufactures and Commerce (RSA) Heritage Index for Scotland ranks Inverclyde third out of 32 council areas for the quality of its industrial heritage. However, the region is ranked 13th for its community activity and engagement with heritage. Similarly, despite the strength of Inverclyde's natural heritage assets, Inverclyde is ranked second lowest in Scotland with regards to accessing its landscapes and wild spaces.

In a region which continues to be affected by a number of socio-economic challenges, heritage engagement has been identified as a key lever for regeneration. Inverclyde Council and its community planning partnership partners (the Inverclyde Alliance) are committed to improving the wellbeing and quality of life for residents and aim to do this through a partnership approach between public, private and third sector bodies with community support at its heart. The Inverclyde Alliance has set three strategic priorities for 2017–2022:

1. **Population** – Inverclyde's population will be stable and sustainable with an appropriate balance of socio-economic groups that is conducive to local economic prosperity and longer term population growth
2. **Inequalities** – There will be low levels of poverty and deprivation and the gap in income and health between the richest and poorest members of our community will be reduced
3. **Environment, Culture and Heritage** – Inverclyde's environment, culture and heritage will be protected and enhanced to create a better place for all Inverclyde residents and an attractive place in which to live, work and visit

These priorities should not be viewed in isolation but as inter-related. Heritage engagement can have profound impact on all three. As priority three alludes, how we conceive of heritage is key for unlocking its potential. Heritage should not be defined as a singular sector but as a component part embedded within a wider and multifaceted cultural tapestry. The natural synergy between arts and heritage is acknowledged in Inverclyde's Arts and Creativity Strategy (2017). The Heritage Strategy builds on and complements this, seeking to harness the reciprocity and unlock the wider benefits of cultural engagement.

'A thriving arts, culture and heritage offer can have a positive impact on the physical, mental and social wellbeing or residents of all ages, as well as contributing to social and economic regeneration, promoting tourism, developing local talent and innovation, and making the Inverclyde area a more attractive place to live, work and visit.' Inverclyde Council Corporate Plan 2017-2022.

The Inverclyde Heritage Strategy was commissioned by Inverclyde Council, working through the Inverclyde Cultural Partnership, a body of the Inverclyde Alliance formed to take forward priority three above. The group emerged from Inverclyde's Place Partnership (which commissioned the Arts & Creativity Strategy). The Inverclyde Heritage Strategy is funded by the Inverclyde Great Places Scheme and produced by Jura Consultants and icecream architecture.

1.0 The Heritage Strategy: *Introduction*

Study Objectives

The Inverclyde Cultural Partnership's vision for the future is of a strong, sustainable heritage infrastructure operating across the public, private and third sectors. Achieving fluid engagement partnerships both within the sector and in cross-partnership initiatives, and growing the heritage sector capitalising on underused tangible and intangible assets are core objectives. A key area of focus is also determining the role for Inverclyde's principal heritage asset, the Watt Institution, set to reopen in Autumn 2019.

Defining Heritage

This Strategy adopts a broad definition of heritage to include:

the built environment (such as historic buildings and monuments); artefacts and materials (from museums and archival collections to online resources); natural heritage (such as landscapes and wildlife); and intangible heritage (local stories, traditions and practices).

The Strategy is both backwards and forwards looking in its understanding of heritage, acknowledging that heritage does not simply exist in the past but provides a sense of enduring continuity helping us to make sense of today and to make decisions about how things should be in the future. Heritage can be accessed as much through the contemporary experiences of life in Inverclyde today as it can by focussing on a particular period from the past.

Study Methodology

Our study methodology is based on a combination of desk-based and primary research. A total of 797 individuals including representatives from heritage groups and organisations, local councillors, schools and youth groups and local residents have participated in our consultation programme sharing their views on the meaning, value and role of heritage in Inverclyde today and the opportunities moving forward.

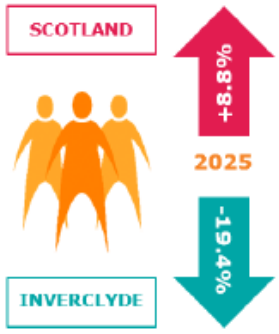
2.0 Inverclyde Today: *Overview*

Location

Inverclyde's landscape is characterised by spectacular scenery, outwardly along the coast enveloped by the Clyde and inwardly by the Clyde Muirshiel Regional Park. The majority of the region's settlements are positioned along the boundary edges, the largest on the banks of the River Clyde. As well as the outstanding scenery, the region benefits from efficient transport links to Glasgow and Edinburgh by road and rail (the former accessible within half an hour), rendering it a popular choice for commuters, particularly those who work in the Glasgow area.

Demographic

With a population of approximately 79,000, Inverclyde is one of Scotland's smallest local authorities. Greenock is the largest settlement and administrative centre (54%), followed by Port Glasgow (18%) and Gourock (13%). Considerable de-population has occurred in recent years, a trend which is projected to continue at an accelerated pace (projected decline by -19.4% from 2012 to 2037, compared with average growth of +8.8% across Scotland).

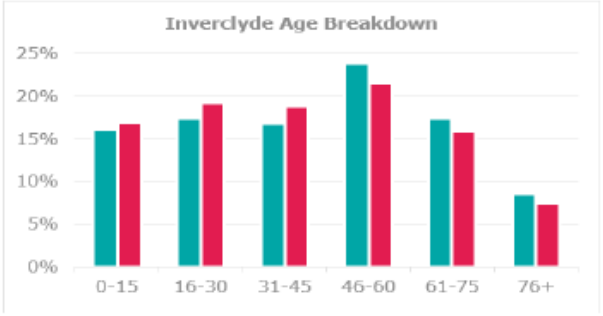


Compared with the national average, Inverclyde has a lower proportion of children and young people (up to 30 years), and a higher proportion of older people (aged 61+).

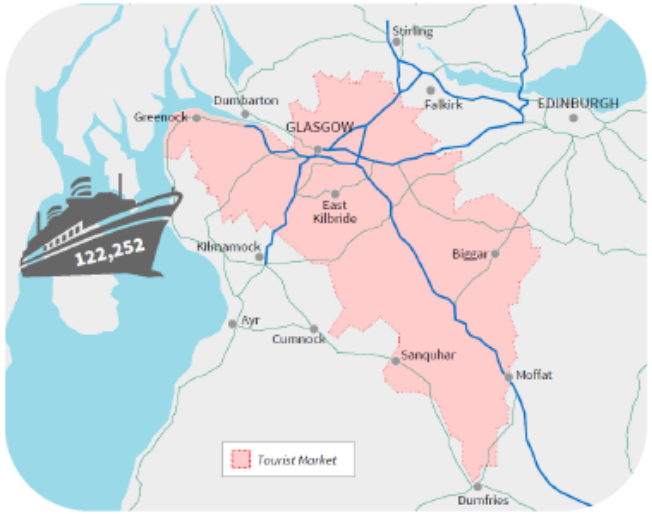
Visitor Market

The visitor market for Inverclyde can be categorised into three market segments: local market, day trip market and tourist market.

- Local Market: Inverclyde resident population (79,000)
- Day Trip Market: Those who live further afield but within a reasonable proximity with potential to visit Inverclyde as part of a day trip neighbouring local authorities including Renfrewshire, West Dunbartonshire and North Lanarkshire.
- Tourist Market: Visitors staying away from home for one or more nights either in Inverclyde or nearby with potential to visit. We have quantified this as approximately half of the Greater Glasgow and Clyde tourist market, excluding City of Glasgow – 218,000 – and cruise ship passengers docking in Greenock -122,000.



Source: Mid-Year Population Estimates, Mid-2017, nrscotland.gov.uk



2.0 Inverclyde Today: *Overview*

Today Inverclyde's economy is heavily reliant on the public sector. Inverclyde was affected particularly badly by the recession of 2008-2013. Whilst there has been a gradual improvement in the local economy over the past five years, a gap in terms of the socio-economic position of Inverclyde and the rest of Scotland remains.

Deprivation is high in a number of areas. In 2012, 40% of all datazones in Inverclyde were amongst the 15% most deprived in Scotland. Deprivation is particularly high in areas of Greenock and Port Glasgow.

One in four children in Inverclyde live in poverty.

LIFE EXPECTANCY AT BIRTH (2014-2016)
75.6
(Scotland: 77.1)

EDUCATIONAL ATTAINMENT
NVQ4+ (HND+): 38.3%
(43.9% Scotland)

Small and relatively narrow business base, with a reliance on a small number of larger employers, fewer high level jobs and over-reliance on the public sector for employment

UNEMPLOYMENT 2017/18

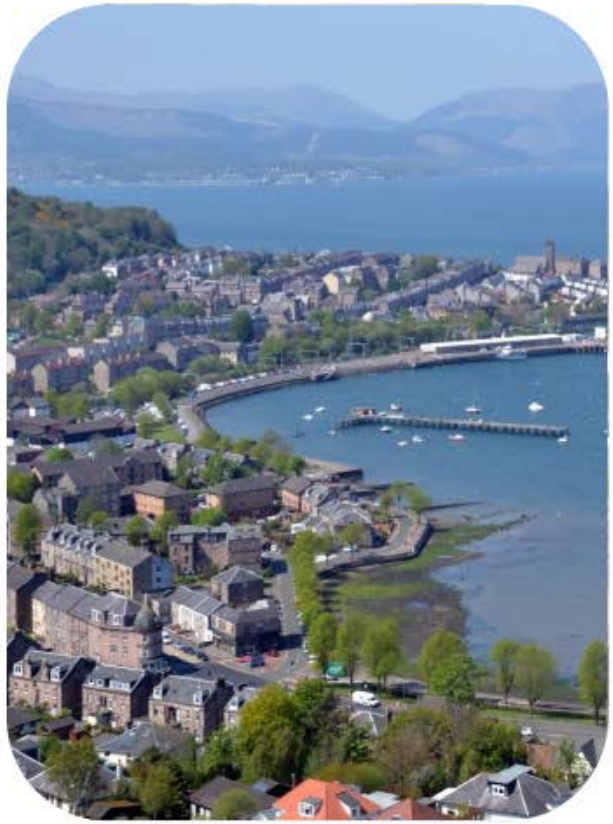
SCOTLAND	INVERCLYDE
4.1%	5.3%

UNIVERSAL CREDIT CLAIMANTS 2018

SCOTLAND	INVERCLYDE
2.7%	5.4%

GROSS ANNUAL SALARY

£27,397	£24,531
Scotland	Inverclyde



Sources: Inverclyde Economic Development & Regeneration Single Operating Plan; Office for National Statistics, Nomis, Labour Market Profile – Inverclyde; Inverclyde Council Corporate Plan 2018/22

A range of strategies, initiatives and programmes are currently under development or in place to address the challenges faced by the region, utilising the area's key assets to grow the economy and stimulate socio-economic change making Inverclyde a better place to live, work, study and visit. Education has been a key priority for Inverclyde Council. Over the past 12 years the Council has invested more than £270 million in its schools estate and is well on its way to achieving its objective that 'by 2020 every child in Inverclyde will be educated in a brand new, or fully refurbished, educational establishment' *(Inverclyde Alliance Outcomes Improvement Plan 2017-2022).*

3.0 Inverclyde's Heritage: *Strategic Priorities and Opportunities*

Inverclyde Council are committed to making Inverclyde a successful place to live, work, study and visit. Heritage has been identified as a key driver in achieving this and, as a result, a number of strategies, initiatives and programmes are currently under development or in place which seek to explore the ways in which Inverclyde's key heritage assets can grow the economy and stimulate positive socio-economic change.

Three sectors have been identified as of particular importance to help grow Inverclyde's economy *(Inverclyde Economic Development & Regeneration Single Operating Plan 2016-2019)*:

- Marine and engineering
- Financial and business services
- Leisure and tourism

Inverclyde's leisure and tourism sector is identified as an emerging strand of the economy with considerable growth potential. Cruise ship tourism is one specific and important strand of this. Greenock is a gateway for substantial volumes of cruise ship passengers. However, with many by-passing Inverclyde on arrival and instead participating in daytrips further afield, the economic benefit to Inverclyde is not maximised. The Heritage Strategy has a role to play in addressing this and other challenges facing the sector in order to unlock the growth potential

Looking forward, the Glasgow and Clyde Valley City Deal offers an enormous opportunity for Inverclyde. The deal will provide £1.1billion in grant funding across eight local authorities over the next 20 years. The funding will support projects aimed at creating employment, improving transport networks, delivering regeneration and development projects and encouraging private sector investment. One of the Deal's signature projects is the £14 million expansion of Greenock's Ocean Terminal increasing capacity to more than 100 cruise ships per year with upwards of 150,000 passengers. The new iconic facility will also deliver a new heritage attraction – featuring a museum displaying works by renowned local sculptor George Wyllie. This development alone brings considerable potential to impact on Inverclyde's cruise and wider tourist/ day trip markets. Fundamental to success for the Glasgow City Region Partnership is collaboration between the local authorities, working together with Scottish and UK Governments, related agencies and the wider business community (*Glasgow City Region Economic Action Plan, 2017*). It is important to understand the potential for Inverclyde's heritage

Moving beyond the regional, there are two key national initiatives which provide strategic opportunities for *Inverclyde:*

Each year **VisitScotland** announce a marketing theme for promoting the uniqueness and abundance of Scotland's assets which make up its overall visitor experience. This offers attractions and local heritage bodies an opportunity to capitalise on and enhance their offer in line with the national tourism agenda. The upcoming **Year of Coasts and Waters 2020** provides a key strategic opportunity for Inverclyde to promote it's distinctiveness as an area from which the large majority of its heritage and culture has stemmed from the River Clyde.

Inverclyde is well placed to benefit from **National Lottery Heritage Fund** support. The new Strategic Funding Framework 2019-2024 identifies Inverclyde as one of Scotland's two 'target areas' (the other North Lanarkshire) on the basis of level funding received to date (or lack thereof) coupled with scale of deprivation. The Heritage Fund also has a renewed focus on landscapes and nature, and community heritage. Inverclyde has much to offer in both of these areas. Finally, the Heritage Fund is set to launch various small time-limited campaigns such as capacity building, organisational resilience, digital capabilities, wellbeing, dynamic collections, and place –all directly relevant to Inverclyde as it looks to grow and enhance its heritage sector.

4.0 Mapping Inverclyde's Heritage: *Designated and Undesignated Heritage*

An appraisal of Inverclyde's heritage assets has shown the area to be rich in tangible evidence of it's history and past prosperity. Whilst modest in number compared to other Local Authority areas in Scotland, the following designated and non-designated assets collectively contribute to the history and unique character of Inverclyde as a post-industrial area with a strong heritage of trade and goods production.

Locally and Nationally Designated Assets

- 248 statutory Listed Buildings under the Planning (Listed Buildings and Conservation Areas) (Scotland) Act 1997. These are primarily located within Inverclyde's town and villages. 25 are graded as Category A deeming them of national or international importance, including Gourock Ropeworks in Port Glasgow and the Custom House and Sugar warehouses in Greenock.
- 31 Scheduled Monuments under the Ancient Monuments and Archaeological Areas Act 1979.
- 8 Conservation Areas under the Planning (Listed Buildings and Conservation Areas) (Scotland) Act 1997. These are:
  - Greenock - Cathcart Square/William Street and West End
  - Inverkip
  - Gourock - West Bay and Kempock Street/Shore Street
  - Kilmacolm - The Cross and South East
  - Quarriers Homes
  - Five of these, excluding Kilmacolm (The Cross) and the two Gourock CAs, have an Article 4 Direction under the Town and Country Planning (General Permitted Development) (Scotland) Amendment Order 2011. Only Greenock (West End) CA has a full Character Appraisal.
- 3 Gardens and Designated Landscapes at the Ardgown, Finlaystone and Duchal House Estates
- 7 SSSIs at Coves Community Park Local Nature Reserve, Dunrod Hill, Knocknairs Hill, Renfrewshire Heights, Renfrewshire Heights Special Protection Area, Shielhill Glen and Wemyss Bay Woodland.
- 2 internationally designated Special Protection Area/RAMSAR (wetlands of international significance) sites.
- Inverclyde has no designated historic battlefields.

Buildings at Risk

At present, 14 of Inverclyde's Listed Buildings have fallen into disrepair to the extent that they are deemed "at risk" of loss by Historic Environment Scotland. These include three Category A listed assets, two of which are of significant tangible evidence to Inverclyde's industrial past: the James Watt Warehouse and Scott's Dry Dock and Outer Basin, both in Greenock. The former Broadfield Hospital in Port Glasgow, deemed important for it's architectural significance, is the third.

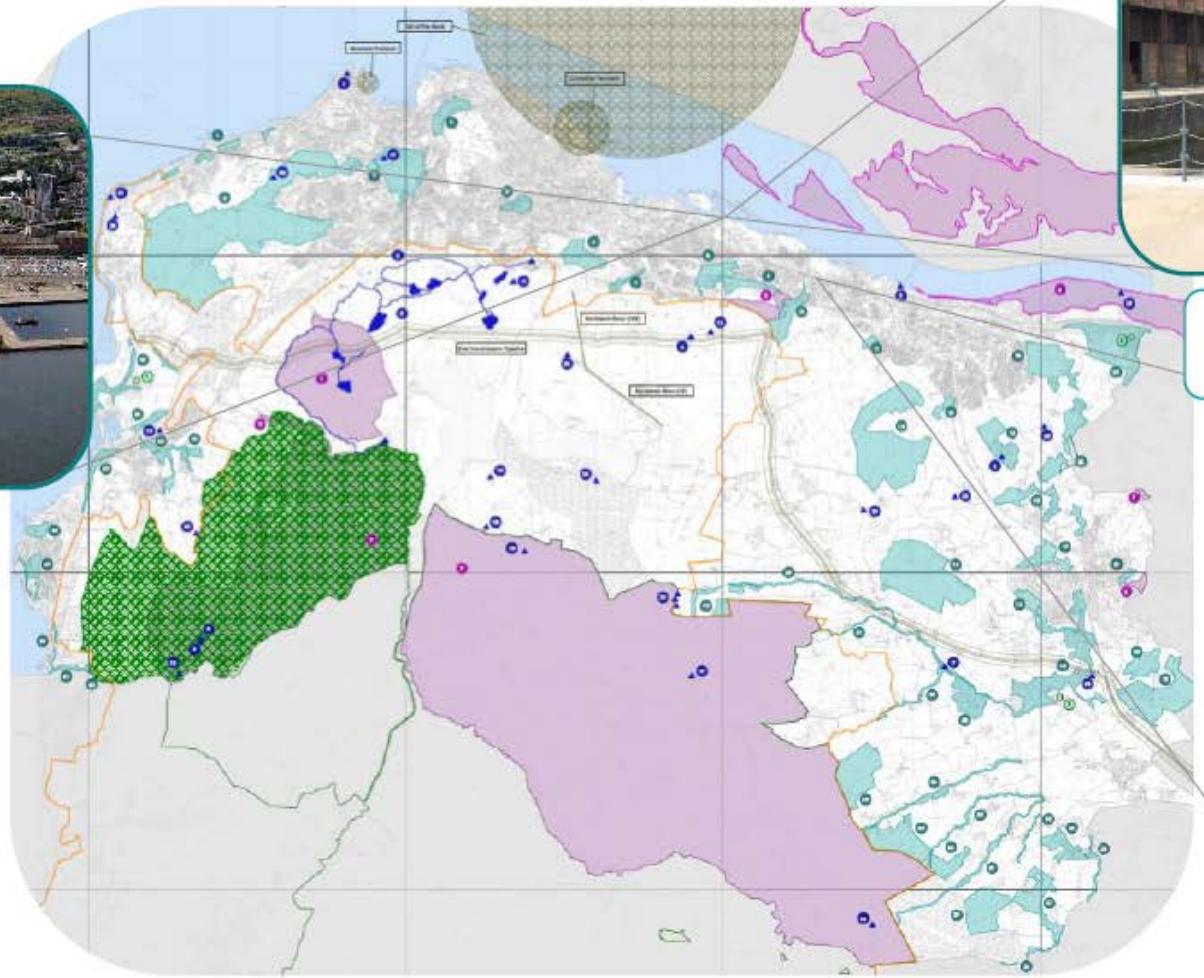
Non-designated Assets

Alongside the statutory designated assets Inverclyde Council has non-statutory designated 52 Local Nature Conservation Sites (LNCSs) and 33 Tree Preservation Orders (TPOs) (protecting individual trees and entire woodlands deemed of importance). Both LNCSs and TPOs do not meet SSSI standards but have been identified by Inverclyde Council as locally important natural heritage at risk of being damaged by development.

4.0 Mapping Inverclyde's Heritage: *Designations and Buildings At Risk (Category A)*

Scott's Dry Dock and Outer Basin, Greenock

James Watt Warehouses, Greenock



Former Broadfield Hospital, Port Glasgow

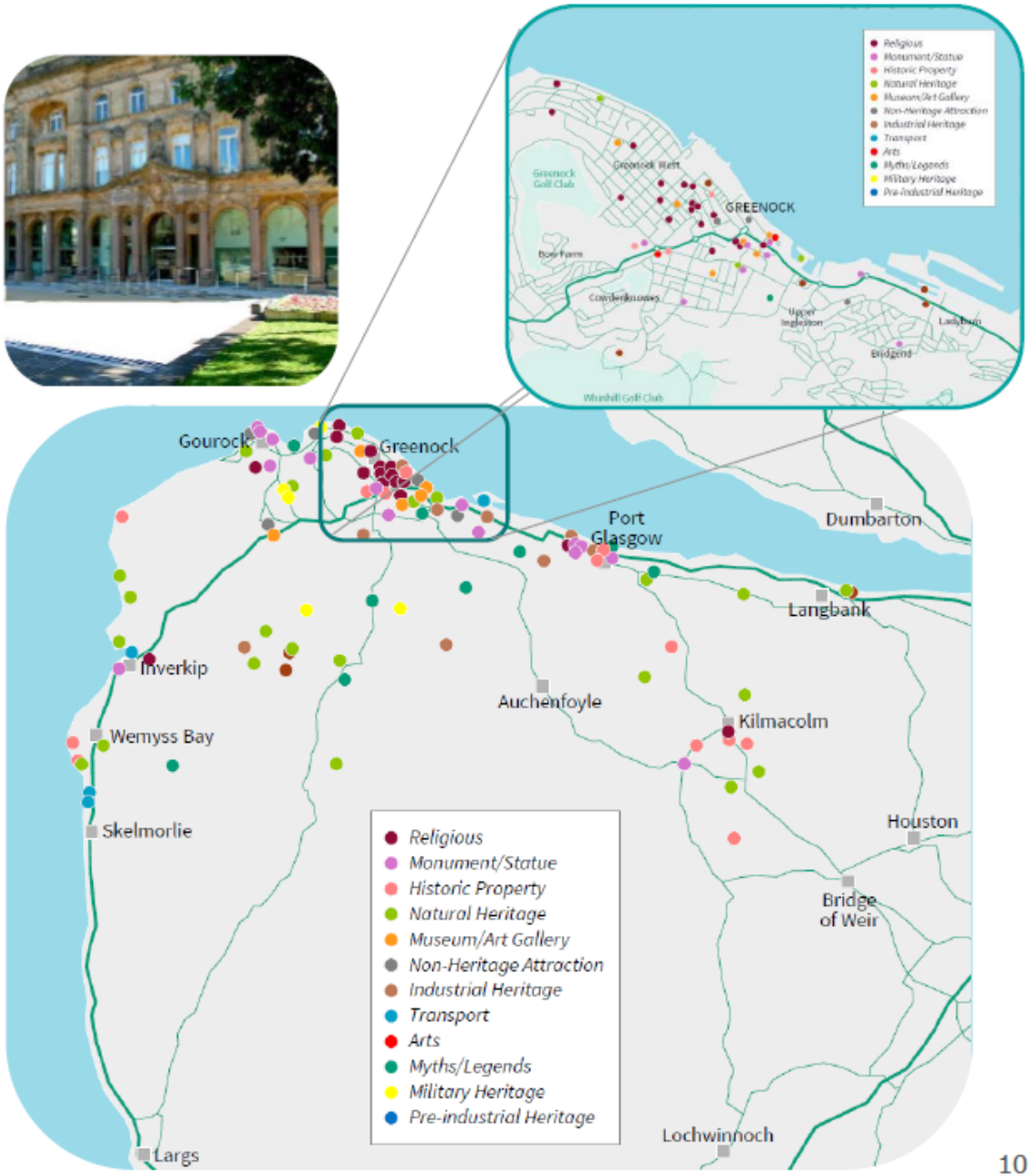
- SITES OF SPECIAL SCIENTIFIC INTEREST (SSSI)
- LOCAL NATURE CONSERVATION SITES (LNCS)
- SCHEDULED MONUMENTS
- GARDENS & DESIGNED LANDSCAPES

- SPA (Renfrewshire Heights)
- SPA / RAMSAR Site (Inner Clyde Estuary - Inverclyde part)
- Clyde Muirshiel Regional Park
- West Renfrew Hills Local Landscape Area

4.0 Mapping Inverclyde's Heritage: *Natural, Cultural and Built*

Whilst Inverclyde has a wealth of tangible natural, cultural and built heritage assets, a limited volume have been developed primarily for the purpose of visitor engagement. The following conclusions are therefore drawn from an assessment of those assets which are accessible to the public. This includes both visitor attractions and those not necessarily marketed as, or available to visit as, "attractions" but which contribute to Inverclyde's overall built historic environment. With this in mind, Inverclyde's heritage assets are:

- Predominately located along the coast in the vicinity of Inverclyde's principal settlements, particularly within Greenock (see map). This is likely due to the historic reliance upon the River Clyde as a key economic driver for the region.
- Wide-ranging in their type and purpose. Natural heritage assets, historic buildings (religious buildings in particular) and monuments make up the majority of the heritage 'offer' across Inverclyde. Geographically, the Clyde Muirshiel Regional Park dominates as the region's largest asset.
- Largely related to the region's past as a place of industry, ship-building and trade. Many assets related to this past activity currently lie unused/abandoned, such as the James Watt Warehouses and Gourock Ropeworks. There may be opportunities going forward to utilise some of these buildings for heritage engagement activity.

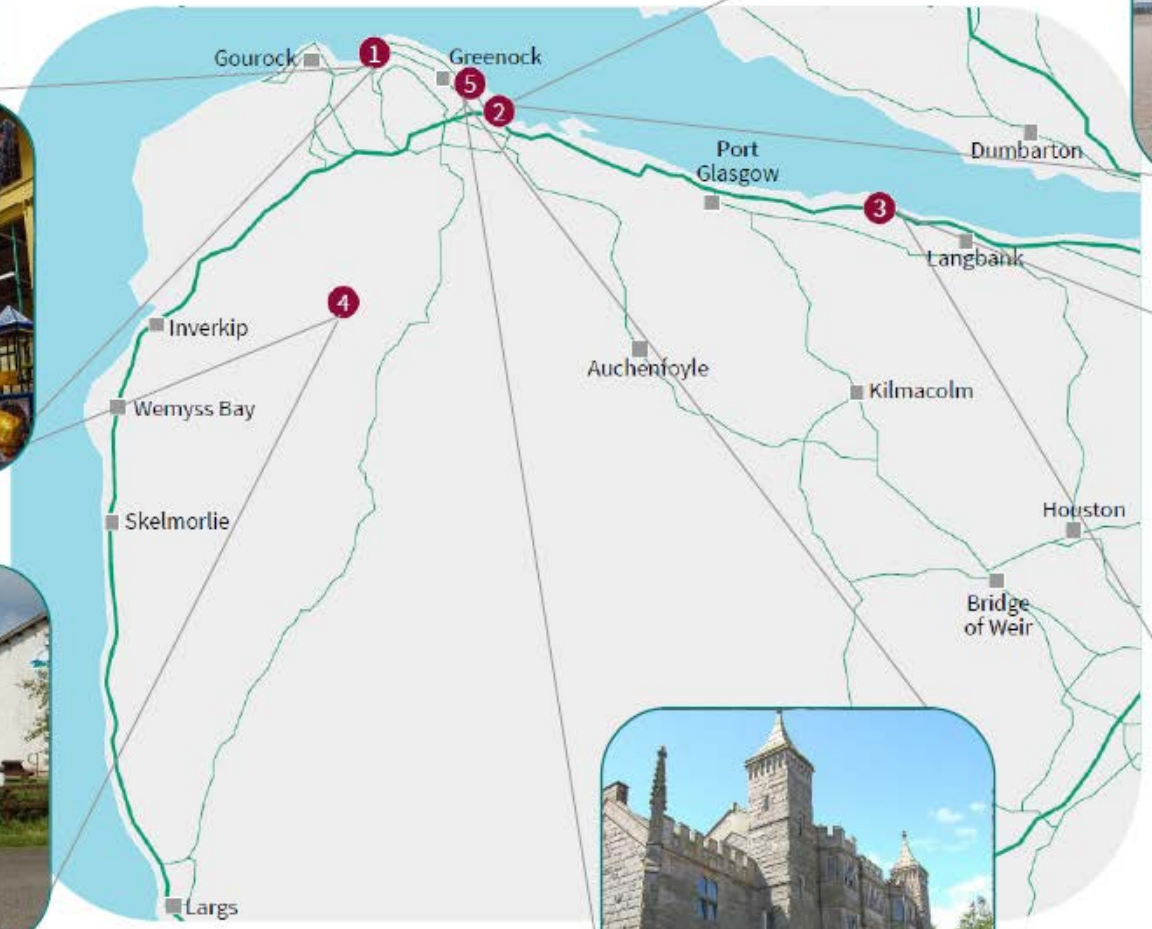


4.0 Mapping Inverclyde's Heritage: *Top Five Visitor Attractions*

The map below shows Inverclyde's top five performing attractions, including those non-heritage or arts related. Natural heritage aside, leisure focused attractions consistently attract more visitors each year than Inverclyde's heritage assets. Fun World is the top performing attraction. Other popular attractions such as the Beacon Arts Centre and Gourock Outdoor Pool are arts/heritage attractions with a strong leisure focus.

1. Fun World Leisure, Gourock
116,230 visitors**

2. Beacon Arts Centre
94,030 visitors*



3. Finlaystone Country Estate
75,000 visitors*

4. Clyde Muirshiel Regional Park, Greenock Cut Centre
69,876 visitors*

5. McLean Museum and Art Gallery and Watt Library
30,000 – 40,000 visitors and 15,000 visitors respectively***

*2017 figures. Source: Moffat Centre Visitor Attraction Monitor 2016/17
** data from 2016 (2017 figures not published)
*** Inverclyde Council. Numbers before closure.

4.0 Inverclyde's Heritage *Stories, Traditions and Events*

A 2015 report conducted by Edinburgh Napier University, 'Living Culture and Tourism in Scotland', assessed the shared intangible heritage of Scotland and the potential to capitalise on these for economic benefit through tourism. As one of the four study areas, Inverclyde was highlighted as having strong cultural resources and an established tourism network but with limited cooperation between these and as such, as having no single cultural practice defining it. It does however, share a number of living traditions with the rest of Scotland which are practised in various forms across the nation.

Regional and Local

- Traditional Crafts – Inverclyde rose as an important **shipbuilding industry** in the 18th century.
- Goods Production and Trade - As Inverclyde grew pre-eminent in the ship-building industry so too did its role as a trade centre, producing and distributing goods across the UK and the world. This included textiles and paper, iron and steel, sugar, cured fish, and whisky.
- Food & Drink - Companies including Tate and Lyle (**sugar**), and Lawson's (**lemonade**) have been contributing to the food economy of Greenock as far back as the 1820s.
- Literature – noteworthy authors from Inverclyde include George Blake, John Galt and WS Graham.
- People - Influential people from Inverclyde include James Watt, William Quarrier, Henry 'Birdie' Bowers and George Wyllie, Chippy McNish, Highland Mary, and Stanley Spencer amongst others.

National

- Storytelling – Stories of witchcraft, mermaids, "impish" creatures and children's games.
- Hogmanay – including the traditions of "first footing" and the singing of Burns' *Auld Lang Syne*.
- Food – Established cafes and restaurants serving local food such as Café Continental, Gourock (est. 1899) and Buchanan's Sweets, Greenock (est. 1856).
- Arts & Crafts – including, for example, contemporary stained glass artist Alec Galloway, artist and industrial designer Dugald Cameron and artist Alison Watt.
- "Going Galoshans" - A piece of folk theatre traditionally performed at Halloween which today takes the form of 'guising' or 'trick or treating' across the rest of Scotland.
- Traditional Music – The Inverclyde Folk Club meet every week, and have done since 1990, to celebrate and perform a variety of traditional folk songs.
- Dialect - Inverclyde falls into the 'Central Scots' group of dialects.
- Waulking Traditions – including the Greenock based *Sgioba Luaidh Inbhirchluaidh,* a woman's waulking group who regularly perform publically.
- Dancing and Choral Singing – 'Inverclyde Voices' are one of the region's largest choirs, with over 100 member.
- Burns Clubs - The first ever Burns Club, also known as the 'Mother Club', was formed in 1801 by the Greenock Ayrshire Society and continues today.

Events and activities also help to bring to life, sustain and fuel Inverclyde's heritage and traditions, retaining its relevance and engaging new audiences. Examples of these include:

- Gourock Highland Games
- Port Glasgow and Kilmacolm Agricultural Show
- Inverkip and Wemyss Bay Gala Day
- Galoshans Parade
- Various music, theatre and arts performances held across the region's various venues.
- Burns Celebration events held by the Greenock Burns Club and Gourock Rotary Club.
- Scotland's Boat Show, Kip Marina
- Various talks delivered across Inverclyde celebrating the region's local history.
- Events relating to local nature and wildlife such as those organised by the Clyde Muirshiel Regional Park.
- World War Commemoration events.
- Family focused events.

Images sourced and provided by Inverclyde Council unless otherwise stated

4.0 Inverclyde's Heritage:
Role of the Council

The Watt Institution incorporating the Watt Library (built 1832-1837) and the McLean Museum and Art Gallery (built 1876) play an important role in the cultural life of Inverclyde. The Grade A Listed complex is designed in the Gothic Revival style, with modern extension added in 1958 to accommodate the art gallery. The complex is home to a highly significant and diverse collection of local material from the Inverclyde area as well as artefacts from an array of cultures across 3,000 years of human history. Headline collections include Egyptology artefacts; British and Scottish fine art including works by the Glasgow Boys and Scottish Colourists; rare books collections and an extensive local history and archive collection. Historically the complex has drawn 45,000 – 60,000 visits per annum.

The complex has been closed for refurbishment since December 2016. The £2 million will deliver essential structural maintenance, introduce a lift rendering the art gallery DDA compliant and, for the first time, will enable internal access between the McLean Museum and Watt Library. There will be limited impact on the visitor experience in terms of collections displays or visitor facilities.

A temporary pop-up facility on Greenock's Cathcart Street has enabled the Council to continue to deliver heritage and library collections. The Heritage Hub featured a selection of museum and library collections with computer terminals and activity programme displays. The focus was predominantly local history. The Heritage Hub closed in December 2018. From July 2017 to August 2018 the Heritage Hub attracted approximately 19,300 visitors. This is approximately 37% of the volume of visits achieved by the Watt and McLean in 2015/16.

- Roughly half of Inverclyde's heritage assets are owned by the local authority. These include 4 of the top 5 attractions: McLean Museum and Art Gallery and Watt Library, Beacon Arts Centre, Greenock Cut Centre and Gourock Outdoor Pool. A large majority are commemorative statues and memorials owned by Inverclyde Council.
- The Museums and Libraries service seeks to "make a significant contribution to the lives of the people of Inverclyde through the delivery of high quality cultural, learning, information and leisure services and opportunities." These are provided through a network of six branch libraries and the Watt Institution (incorporating the Watt Library and the McLean Museum and Art Gallery).

Image source: Jura Consultants

4.0 Inverclyde's Heritage: *Stakeholders*

Inverclyde's heritage sector has a wide range of active groups and stakeholders with a variety of interests, concerns and aims, many of whom have become more active since the closure of the McLean Museum and Art Gallery and Watt Library. The groups listed below are a select few of those who are working to fill gaps in demand, provide a community and/or visitor service and promote a positive perception of the region. In some cases, this is achieved through close-working and cross-sectoral partnerships, although many work in isolation.

THEME OR SITE SPECIFIC

Inverclyde has an array of theme or site specific organisations which together with the Council-run facilities make up the rich tapestry of the region's heritage offering. This includes organisations which run specific attractions, deliver heritage related engagement and important conservation activity.

EXAMPLES

- Historic Environment Scotland
- Greenock Philosophical Society
- Inverclyde Tourist Group
- Greenock Burns Club

NETWORKING

Inverclyde has a number of organisations seeking to provide networking opportunities and support for third sector parties and those in unemployment. These provide a service primarily attempting to fill the gap in demand for volunteers across Inverclyde's heritage sector.

EXAMPLES

- Inverclyde Heritage Network
- Inverclyde Tourist Group
- Inverclyde Community Development Trust
- CVS Inverclyde

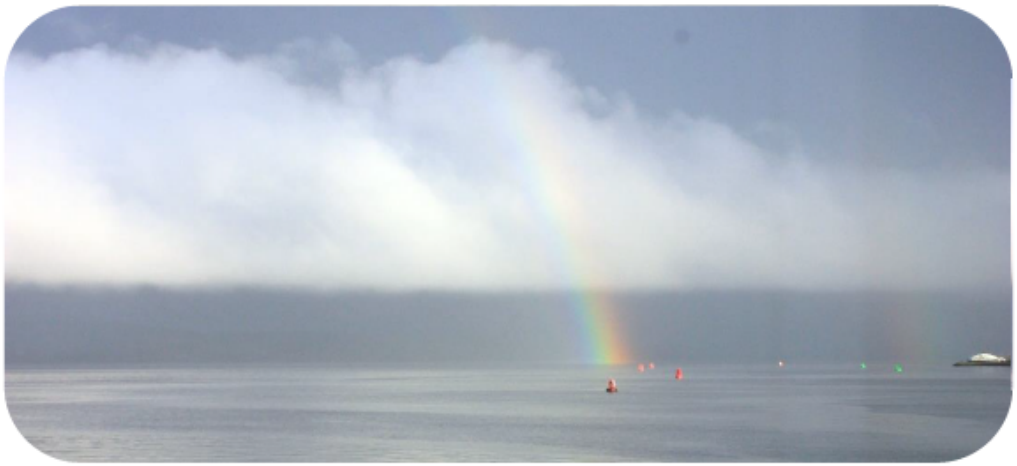


Image source: Icecream Architecture 2019

PRIVATE BUSINESSES

Private businesses and organisations play a significant role in plugging gaps in heritage demand in Inverclyde through the provision of services related to the ongoing physical, economic and social regeneration of the area. Many of these relate to capital works, regenerating historic buildings and finding uses for these buildings which provide some degree of community benefit and/or aid in improving the social and economic welfare of the region.

A small number of other private businesses serve the current demand for leisure, tourism and hospitality in Inverclyde, although not all are located within Inverclyde itself (e.g. the PS Waverley).

EXAMPLES

- Riverside Inverclyde
- Waverley Steam Navigation Company Ltd
- Ardgowan Estate and Distillery
- Finlaystone Country Estate

CROSS-SECTORAL

Inverclyde's arts offer is strong, with venues such as the Beacon Art Centre and the Albany Arts Centre along with a multitude of practicing local artists, groups and classes across the region ensuring its success. There is direct relevance between the region's arts offer and its heritage engagement potential, and a number of organisations and partnerships are working across and within both the arts and heritage sectors, both to make heritage relevant to Inverclyde's communities today and to celebrate and present Inverclyde's past. This is serving to address a gap in demand for creatively-led heritage engagement across the region.

EXAMPLES

- RIG Arts
- Inverclyde Cultural Partnership (specifically through their arts and creativity strategy)
- Wishes (Women's Initiative for Socialising, Health, Education and Skills) Inverclyde

5.0 Consultation: *Methodology*

A programme of consultation took place across a five week timeframe from late January to early March 2019. This aimed to build on the study team's desk based assessment of Inverclyde's heritage, gaining a more nuanced understanding of what are considered to be the key assets, perceived value and role of heritage as well as opportunities and challenges moving forward.

A total of 797 people were consulted over the course of the consultation period.

Image sources: Icecream Architecture 2019.
Bottom right: Inverclyde Council, February 2019

Workshops

Involving elected councillors and senior departmental Council staff members; heritage groups and organisations from across Inverclyde; and Watt Institution staff

58 people engaged.

On-street Public Engagements

x 6

Taking place in Kilmacolm, Port Glasgow, Greenock, Gourock, Quarriers Village and Wemyss Bay Station

5 x sessions, 443 engaged (183 active engagement)

Meeting & Interviews

Held with a variety of groups representing a range of heritage interests, businesses and target audience demographics (including five sessions with schools and young people).

238 engaged (203 actively engaged)

Light Website

Total of 58 survey responses across local residents, businesses and visitors to Inverclyde.

5.0 Consultation: *Key Findings*

The consultation process highlighted a complex and nuanced relationship between Inverclyde's population and 'their' heritage. Key findings are summarised below. See Appendix B 'A Future For Heritage Inverclyde' by Icecream Architecture for more details.

As summarised in the diagram below heritage is conceived and regarded in a number of ways by Inverclyde's population and heritage stakeholders.

The following key findings from the consultation demonstrate in more detail the different perspectives on heritage across Inverclyde and the reasons given by certain audiences on why the find engaging with Inverclyde's heritage particularly challenging:

- Most people were familiar with the term 'heritage' as something related 'history' or the 'past'. Some also recognised that it is also about 'culture' and 'community'. People generally found the concept of 'intangible heritage' harder to grasp. Most children and young people were not sure what the word meant, but understood it well when explained.
- Regardless of place, most expressed a sense of pride to be from their town or village. mostly from a sense of belonging to the community, although few specifically mentioned heritage as a reason. There was a shared view throughout each community that more could be done to celebrate the heritage of the region.
- There are active groups within each of Inverclyde's communities who are passionate and knowledgeable about heritage and who wish to preserve it and share it. They deliver a range of heritage work, often engaging local people, and are eager for increased support, co-ordination and resources to continue this.
- Young people commonly claimed to know little to nothing about their local heritage. Local history is rarely taught in schools and there is a lack of consistent opportunities for schools in Inverclyde to engage with heritage. Primary aged children were interested and excited to learn about local history topics and had a wealth of ideas for heritage projects that could be developed for families. Secondary aged students claimed to find heritage less interesting or relevant to them, but would be interested in a number of arts and social activities which could engage them with heritage.
- A number felt that the current offer of heritage opportunities were not accessible to them. For example, workers supporting people with mental/physical support needs explained that many clients would love to talk about the past and listen to/ share stories but few heritage groups or individuals are willing to facilitate this, perhaps due to stigma or in confidence associated with working with disability. Similarly, a lack of opportunities was identified for older, and often socially isolated, men compared to a higher number of craft and bingo activities which may appeal more to women. Professionals in the region also felt that there was little on offer for those who work during the day and do not necessarily fit into targeted demographic groups.
- Sections of communities, typically those of an older demographic, whose lives have been severely affected by the loss of industry, hold negative perceptions of heritage due to its association with a traumatic and drawn-out 'laying off' process and their subsequent painful memories.
- Discussions also highlighted limited resonance with the notion of Inverclyde's heritage. Heritage tends to resonate primarily at a settlement rather than regional level. This is summarised overleaf.

5.0 Consultation: *Key Findings*

Nuances in the sense of place which is felt and the ways in which heritage resonates across Inverclyde's settlements are summarised below. See Appendix B 'A Future For Heritage Inverclyde' by Icecream Architecture for more details.

- **Proud** to be from Gourock
- **Knowledgeable and protective** about local key heritage assets
- **Passionate** about archiving the past
- **Irrelevant:** most people come for a 'nice day out,' not for heritage
- **Left out:** most investment is in Greenock
- **Appreciative** of local natural heritage
- **Frustrated** by lack of commemoration and disappearance of old heritage sites
- **Concerned** about heritage being overlooked
- **Nostalgic**

- **Proud** to be from specific communities in Greenock
- **Aware** of the huge amount of heritage
- **Inspired** by Dundee and cultural regeneration elsewhere
- **Optimistic** about local developments
- **Let down** by perceived missed opportunities
- **Under appreciated** for some local and voluntary efforts
- **Saddened** by painful memory of industrial decline
- **Not invested** in their heritage
- **Uninterested** - health/economic situations a higher priority
- **Concerned** about the past being forgotten
- **Unconfident** due to stigmas surrounding Greenock
- **Nostalgic**

- **Proud** to be from Port Glasgow
- **Hopeful** that retail investment will bring opportunities
- **Let down** by perceived missed opportunities
- **Ignored:** Greenock has more cultural activity
- **Disappointed** in lack of local heritage venue
- **Loss,** having watched the dismantling of industry
- **Undervalued/under-promoted** for potential
- **Isolated** (in upper Port Glasgow) from opportunities
- **Nostalgic**

- **Proud** to be from Inverkip
- **Aware of** heritage potential
- **Proactive:** a strong community who self organise and are open to new ideas
- **Disconnection** between the past and the present as new families move in
- **Concerned** about heritage loss

- **Proud** of local heritage in Kilmacolm
- **Knowledgeable** about key heritage assets
- **Protective** of local heritage and culture
- **Proactive** about recording local heritage
- **Detached** from the heritage focus in the region
- **Overlooked** by regional heritage funding
- **Nostalgic**

- **Proud** to be from Weymss Bay
- **Unique:** the village offers opportunites to people with specific heritage interests
- **Forgotten** as a part of Inverclyde
- **Disconnection** between people living and people working in the area
- **Under appreciated:** underpromoted
- **Transient**, a 'pass through place'

- **Rich** in tangible heritage assets such as architecture
- **Out of touch** with intangible heritage assets
- **Distant** from regional cultural and heritage offer
- **Awkward** due to controversies regarding the past

6.0 SWOT Analysis: *Strengths*

- There is a wealth and range of tangible and intangible heritage assets that are characterised in particular by the spectacular natural heritage and built historic environment.
- Tangible and intangible heritage fuel a distinctive localised sense of place and pride felt by individual communities across the region, giving Inverclyde a diverse array of different points of interest spread widely geographically. Heritage narratives also relate to a series of overarching themes, industry and trade in particular, with sub themes including shipbuilding, sugar and engineering and James Watt as a key personality. These themes offer a common thread between Inverclyde's localised heritage and identities and strands of national and international significance and renown.
- The Greenock Cut Visitor Centre, Watt Institution and Finlaystone Country Estate are the top performing heritage attractions. The Watt Institution is recognised due to the range and significance of its collections – considerably greater than many typical local authority museums/ galleries. Past heritage focussed events have also attracted high volumes of engagement. The Tall Ships' visit to Greenock is claimed to be 'one of the best' heritage experiences in recent history.
- The new George Wyllie exhibition, proposed as part of the new Ocean Terminal development will add considerably to Inverclyde's visitor attraction offer amongst day trippers and tourists, helping to capitalise on opportunities with regards to the cruise ship market.
- Inverclyde has a strong arts offer and a growing arts network. There is a strong and proven synergy between arts and heritage engagement. Community arts projects commissioned as part of the demolition of Greenock's Broomhill flats and subsequent build of the Broomhill Gardens and Community Hub are strong examples of this. The Beacon Arts Centre is an important focal point for arts activity.
- Inverclyde's people are a key asset, not only the prominent personalities from the past but people today who share their knowledge, memories and skills through storytelling and reminiscing, making artefacts and memorabilia available by collecting, archiving and digitising. Significant historical events (such as the rise and fall of shipbuilding as an industry) are still in living memory amongst older generations and there is an appetite to share them.

> *"Heritage? Well you're right amongst it here!"* – Inverclyde Resident, Quarriers Village On-street Consultation, March 2019

- There is a high volume and wide range of heritage organisations who are passionate and actively involved in heritage and community engagement.
- There is support demonstrated by community groups, local businesses, heritage organisations and Council officials for the potential contribution of heritage in Inverclyde moving forward. There is a popular view that 'more should be made of the heritage' although there are a number of barriers to address in achieving this.
- Inverclyde has accessible to a sizeable potential market, particularly in the day trip area, served by efficient and regular transport links.

> *"I remember the old railway [and] coming down to Gourock on a bike to fish off the pier. My father took all the German prisoners up to Lyle Hill during the war."* – Inverclyde Resident, Gourock On-street Consultation, March 2019

Image Source: Icecream Architecture 2019

6.0 SWOT Analysis: *Weaknesses*

- There are a number of barriers limiting and in some cases preventing engagement with heritage:
    - Lack of understanding/ awareness
    - Negative perceptions towards heritage and/ or preconceived ideas about who heritage is for
    - Financial pressures limit ability to access heritage
    - Social isolation
- Sense of place is often settlement specific rather than relevant at a regional level. Thus heritage is perceived, felt and valued by many primarily at a settlement-level. The notion of 'Inverclyde's heritage' has limited resonance. Where Inverclyde as an entity is recognised there are often negative perceptions attached.
- Limited and/ or ineffective promotion of the region as a destination. Lack of collective identity contributes to this – if an authentic common sense of place and self is not felt and shared amongst locals, it cannot be communicated externally. Lack of 'headline' visitor attractions also factors.
- Despite Inverclyde's wealth of heritage assets, there is a limited volume of visitor attractions and limited spread geographically.
- Underperformance of Inverclyde's key heritage assets, including the McLean Museum and Art Gallery, despite the volume and significance of its collections. Amongst locals there is a perception that 'it's not for me' due to the imposing/ intimidating building or, amongst those who have visited, that there is nothing new to see. Whilst the Greenock Cut Visitor Centre achieves a higher visit volume, limited investment in the visitor offer constrains its ability to achieve more. Leisure attractions currently draw more visits than heritage (e.g. Funworld family play centre).

"We used to go all the time, now families are going to Glasgow and Paisley for the museums."
— Broomhill Knit and Natter Group Member, March 2019

- Fragmented sector with limited communication and collaboration between heritage organisations and cross-sectoral bodies. Whilst many are passionate and self-motivated to deliver their own activities there is a tendency to operate in isolation.
- Limited resources to address weaknesses and take advantage of opportunities, particularly in terms of engaging with under-represented audiences facing particular barriers to participation. Barriers are acknowledged but there is limited capacity to address these.

"History is not in the minds of young people"
– Inverclyde Resident, Greenock On-street Consultation, March 2019

6.0 SWOT Analysis: *Opportunities*

- Use heritage engagement, specifically through formal and informal learning opportunities, as a lever to create a more positive sense of place and enhance civic pride leading to destination development and socio-economic regeneration.
- Explore and better present under-represented stories authentic to Inverclyde and its settlements, positioning these within wider, regional overarching narratives utilising key themes as hooks/ entry points for locals and visitors alike.

Regional Themes

- Shipbuilding and industrial heritage
- The River Clyde
- James Watt
- Immigration and emigration
- Slavery
- Military and maritime history
- Archaeological heritage
- Traditional food/ drinks

Localised Themes

- Gourock: CND Heritage, Gaelic and Irish Heritage
- History of Wemyss Bay Station
- Inverkip: Smuggling, Witchcraft
- Kilmacolm: Agriculture
- Quarrier's Village: Architecture, Emigration
- Greenock: Sugar industry, Burn's Clubs

- Extent and scale of unused/ under-utilised historic properties that could attract funding if the right use/ development opportunities are found. Consultees considered Newark Castle, Dutch Gable House, Quarrier's Village and the Custom House to have untapped potential (amongst others). Retail space, such as empty units in the Oak Mall and Port Glasgow's High Street, could become valuable space for heritage activity/ displays building on the success of the Heritage Hub on Greenock's Cathcart Street.

"I would like to see more people coming into schools and teaching kids more about their heritage. This would be really useful as it would teach kids from an early age about their heritage and it may also help them to be more interested and involved in their community."–
Young person responding to online survey, March 2019

- Harness the passion, expertise and resources of heritage and arts organisations across Inverclyde to widen the benefits delivered and impact achieved.
- Develop a more coordinated, accessible and stronger cultural sector by aligning heritage initiatives with arts initiatives and developing activities that capitalise on the synergies between the two.
- Achieve greater penetration of the day trip market (population of approximately 400,000) by developing Inverclyde as a destination. Heritage can play a key role in this.
- Potential of the new Cruise Ship Terminal to offer tourism growth opportunities, particularly in relation to the cruise-ship market (122,000).

"Let the young ones see what this town did!"–
Inverclyde Resident, Greenock On-street Consultation, March 2019

6.0 SWOT Analysis: *Opportunities and Threats*

- Partnership development as critical for achieving potential. There are multiple layers to this:
    - Coordination and collaboration between the various heritage-related groups and organisations across Inverclyde. The Council has a key role to play, through a reimagined Watt Institution.
    - Further collaboration between arts and heritage groups.
    - Development of cross-agency partnerships in order to achieve wider socio-economic outcomes such as health and well-being and ultimately social cohesion. Partnerships with education and health related Council departments/ services are highlighted in particular.
    - Cross-boundary partnership development – looking beyond Inverclyde to consider opportunities for thematic promotion and product development with organisations and attractions in other nearby local authorities.
- Capitalise on NLHF priority campaigns and Inverclyde as a target area to unlock funding.
- Capitalise on VisitScotland's Year of Coasts and Waters 2020 and Year of Storytelling 2022 to enhance funding applications.

Threats

- Continued deterioration of built heritage – there are many listed and non-listed buildings which are in need of repair across Inverclyde.
- A lot of heritage assets have already disappeared without any commemoration and often the sites are unrecognisable – this poses a challenge in being able to successfully interpret this heritage. It is important to think creatively about how to interpret heritage within the regeneration processes.
- Demographic changes pose a risk to retaining heritage knowledge and expertise. Already in Quarrier's Village there is a disconnect between tangible and intangible heritage – most children/ workers who grew up there have moved away and there is little in the way of aural histories passed down.
- Loss of motivation and support amongst the community and strategic stakeholders owing to a lack of visible action.
- Expectations surrounding the redevelopment of the Watt Institution and the expansion of Ocean Terminal are high. There is a risk of disappointment if expectations are not met.
- Failure to address barriers to heritage engagement. Key barriers include income and access; lack of awareness; perceptions that 'heritage is not for me' and in some cases negative associations specifically due to the trauma and pain of the loss of industry. For some, a sense that in an area facing severe deprivation challenges that there are more pressing issues to be addressed. Heritage is not universally viewed positively and approaches to celebrating and promoting it should be mindful of this.
- Inaction would fail to capitalise on the opportunity to help address profound socio-economic challenges.
- Population decline and wider socio-economic challenges risks losing people and skill-sets vital for increasing heritage engagement
- Increasing competition from neighbouring local authorities drawing audiences elsewhere who may have considered visiting and spending money in Inverclyde.

7.0 Strategy Strategic Framework: *Vision, Aims and Objectives*

The Inverclyde Heritage Strategy aspires to achieve the following **vision by 2029**:

Inverclyde's heritage is a source of knowledge and pride across the region and is employed at every opportunity to support our diverse community's social, cultural and economic wellbeing

Aims

- Inverclyde's heritage is captured, conserved, protected and enhanced
- Inverclyde's heritage is valued, appreciated and instils a sense of pride and belonging amongst residents
- Inverclyde's heritage offers opportunities for participation to all, inspiring and sustaining meaningful heritage engagement over the long-term
- Inverclyde's heritage encourages more people to visit, stay longer and spend more across the region
- Inverclyde's heritage sector is strong and sustainable, underpinned by an ethos of collaboration and co-ordination across the public, private and third sectors and integrated within Inverclyde's wider cultural sphere, harnessing the synergy and reciprocity with the arts.

Objectives

1. To ensure that Inverclyde's heritage assets are well cared for, looked after and protected.
2. To identify and pursue opportunities that capitalise on underused and/or underappreciated heritage assets.
3. To improve perceptions and reshape attitudes towards heritage by encouraging local communities to "rediscover" their heritage on their terms; fostering positive relationships and a renewed sense of relevance.
4. To celebrate heritage at both a local and regional level – relating the distinctiveness of Inverclyde's settlements to the overarching narratives the region shares.
5. To engage more people and a more diverse range of audiences in participating and volunteering in heritage, including young people, socially isolated older people and those unable to engage in heritage activity through economic circumstance and/or disability.
6. To sustain and create new opportunities for employment and skills development.
7. To develop and promote Inverclyde's unique attributes creating a distinctive and authentic destination which appeals to both day trippers and overnight tourists.
8. To strengthen existing and create new partnerships with stakeholders who share our objectives:
    - within Inverclyde's heritage sector;
    - between the heritage sector and organisations in other sectors operating in Inverclyde;
    - with other national stakeholders.
9. To maximise the use of current resources and capitalise on funding opportunities.

7.0 Strategy Strategic Framework: *Leadership Framework*

To ensure that the objectives of the Heritage Strategy are met and the actions put forward in the Implementation Strategy are successfully delivered, we have developed a **Leadership Framework**.

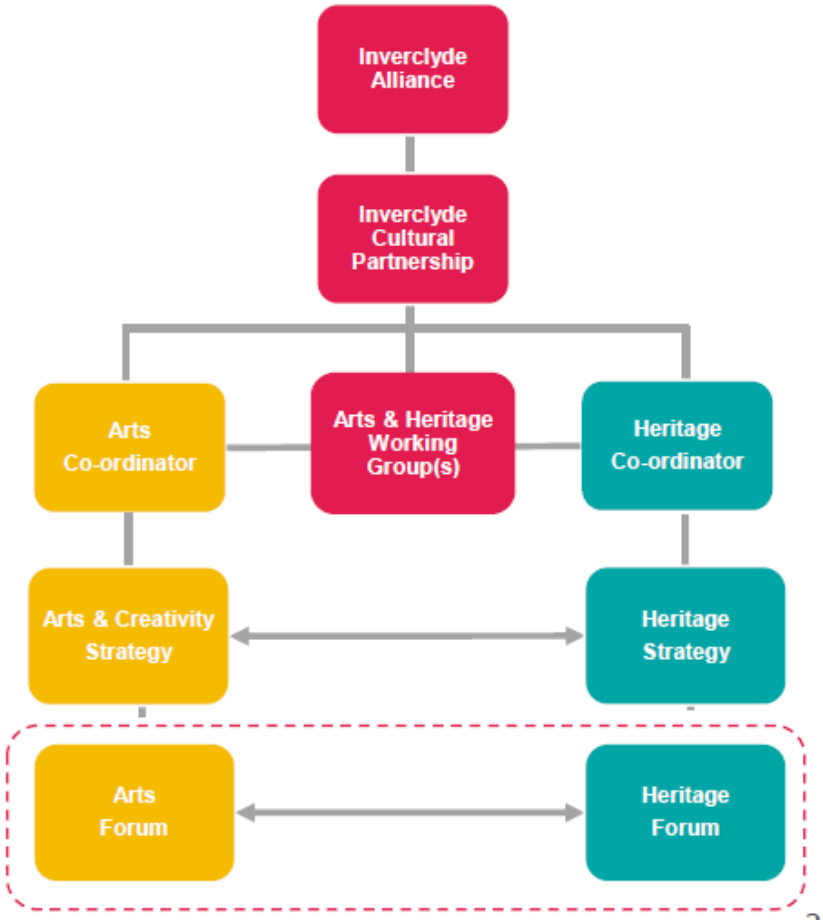
The Leadership Framework sets out the structure by which key decisions concerning Inverclyde's Heritage will be made. Overseen by the Inverclyde Alliance, delegated to the Inverclyde Cultural Partnership, the Leadership Framework advocates a partnership approach whereby the sector collectively decides which actions should be taken and to identify the key organisations/ individuals which are best placed to take them forward. Participation of Inverclyde Council is critical for the success of the Leadership Framework, however responsibility for its implementation and driving forward the Heritage Strategy cannot rest on the Council alone. A partnership approach with the third sector is essential.

This ethos of partnership extends beyond the heritage sector. Acknowledging the synergies between the two, the Heritage Strategy is conceived as a companion to the Arts & Creativity Strategy. The vision articulated in the Arts & Creativity Strategy is as follows:

- Inverclyde is known locally and globally as a Creative Place. Creativity is vibrant, visible and a significant source of pride for local people.
- The arts are a core driver for regeneration and contribute positively towards a sustainable increase in local economy and employment, underpinned by the work of every sector within the local authority.
- Creativity is a critical tool for imagining and communicating a unique and innovative identity for the area. This identity makes meaningful connections between the rich heritage, environmental and social assets of the area.
- Everyone in Inverclyde has equal access to the arts. The arts are inclusive and people are empowered and confident in engaging creatively with the present and future of their local community.
- The arts are respected as a vehicle for achieving positive wellbeing for local people and local places, in terms of health, education and stewardship of the environment.

The Leadership Framework establishes a governance and delivery mechanism that reflects the interdependencies between the Strategies and strives to establish a thriving cultural sector by realising them in tandem. The overarching objective is to achieve a self-sustaining Leadership Framework which delivers arts and heritage initiatives in response to the needs of the sector in partnership with arts and heritage stakeholders.

The following diagram sets out the Leadership Framework:



7.0 Strategy Strategic Framework: *Leadership Framework*

The Inverclyde Alliance, working through the Inverclyde Cultural Partnership, are responsible and accountable for the implementation of the Heritage Strategy (as per the Arts & Creativity Strategy). In practice it is likely that a variety of Working Groups or Task Forces are set up to implement specific actions (see Implementation Strategy for suggested actions). The Working Group/ Task Force would include representatives from the Inverclyde Cultural Partnership as well as other stakeholders from the sector with a particular strategic interest or expertise in relation to the specific task. The Working Groups are thus an opportunity for the wider sector to directly participate and deliver heritage initiatives.

Working Group members from the wider sector would be drawn from the Heritage Forum. The Heritage Forum provides an arena for representatives across the heritage sector to come together to share experiences, identify and discuss opportunities, and collaborate to tackle the challenges which affect organisations at the frontline of delivery. The aspiration is that the Heritage Forum is representative – reflecting the diverse range of heritage assets and interests from across Inverclyde. Participation would not require an excessive commitment of time, but continued attendance is key for momentum and continuity in delivery. The Forum would meet at an agreed frequency as appropriate throughout the year, perhaps quarterly or biannually depending on issues and activities, and would be chaired by the Inverclyde Cultural Partnership.

Where relevant, the Heritage Forum could include attendees from, or meet alongside, an arts equivalent body thus ensuring coordination between the actions delivered under the remit of both the Heritage and Arts & Creativity Strategies.

The Forum approach is a key mechanism underpinning the Leadership Framework providing a voice from the frontline of heritage sector delivery and a mechanism to communicate and prioritise the issues to be addressed by the Strategy. The Heritage Forum together with the Working Groups/ Task Forces ensures that stakeholders from across the heritage and arts sectors have an opportunity to influence the direction of travel at both the decision making and implementation stages. It allows for sector-led solutions rather than imposing actions from the top-down. Embedding opportunities for active participation in this way should encourage buy-in, ownership and, as benefits are realised, continued commitment from Inverclyde's heritage sector fuelling the partnership relationships which are key to this self-sustaining Leadership Framework.

Increasing participation and engagement amongst young people in Inverclyde is a key objective of the Heritage Strategy. In order to change young people's perceptions towards heritage, actively involvement in the decision making process is key. The Leadership Framework offers this opportunity through both the Heritage Forum and Working Groups approach. In setting up the Heritage Forum a concerted effort to involve young people should be made.

An integrated cultural forum bringing together representatives from arts and heritage may be the key to achieving this initially given the considerable involvement of young people in arts and drama groups. Attempts should also be made to involve at least one young person on every Working Group which is formed to address specific issues.

In the short term, support will be required to set up the Leadership Framework, involve the relevant stakeholders, establish the necessary partnership relationships and build capacity within the sector. In order to achieve this we recommend the creation of a time-limited, externally funded, Heritage Coordinator post, the counterpart to the recently appointed Arts Coordinator and who would build on the platform established by the Great Places Scheme Heritage Outreach Officer (in post until 2020).

It is recommended that the post is established as part of a sector-wide capacity building exercise during years 1 to 3 of the Heritage Strategy. The Implementation Strategy sets out the core capacity building tasks which should be delivered by the Heritage Coordinator in order to set up the self-sustaining Leadership Framework (see Actions 7-14). Funding for the post and these core tasks could form a single funding application to organisations such as the National Lottery Heritage Fund where capacity building is a key area of focus. The Heritage Coordinator would be directly accountable to the Inverclyde Cultural Partnership.

7.0 Strategy Strategic Framework: *Role of the Watt Institution*

A repositioned Watt Institution with a stronger, more community focused role will play a central part in the delivery of Inverclyde's Heritage Strategy, for the greater benefit of the cultural sector in Inverclyde as a whole and for the social, economic and destination development of the region.

This is not to say that the cultural sector and the development of the region could not function or happen without the Watt Institution. Rather, the inclusion of the Watt will strengthen the mechanisms of a proficient and self-sustaining cultural sector.

The diagram to the right illustrates this concept with the Watt Institution supporting the cultural sector as a key provider of resources, expertise, activities and engagement initiatives. The objective is for each partner to realise the reciprocal benefits of a collaborative approach serving to strengthen and enhance the cultural sector as a whole in consequence. With the involvement of enough partners a snowballing effect can occur aiding the wider socio-economic development of Inverclyde as a thriving place to live, work and visit. Collaboration, with the Watt Institution as a central cog in the cultural sector machinery, is key to unlocking the potential of broader/wider heritage engagement across Inverclyde.

The Watt Institution is instrumental to the success of the Inverclyde Heritage Strategy. The role which it has is wide-ranging, multifaceted and will vary in form depending on the particular partners and initiatives being delivered. The proposed overall remit of the Watt Institution is summarised to the right.

Role of the Watt Institution

W.1 Custodian of collections for the region
W.2 Sharing collections and lending more to local/regional/national organisations
W.3 Sharing expertise of staff with sector to build capacity across sector
W.4 Training library staff on other headline heritage and info available
W.5 Providing learning and training support for Inverclyde's education providers
W.6 Disseminating heritage sector information to the wider community
W.7 Co-ordinating networking events for heritage sector
W.8 Sharing best practice with the sector
W.9 Developing relationship with regional and national partners
W.10 Attracting visitors and signposting to other sites and locations
W.11 Applying for joint funding applications for museum and heritage sector enhancements

Through all of these roles, the Watt Institution will be supported by the wider cultural sector including the Inverclyde Cultural Partnership, and buoyed by the positive eventual social, economic and destination developments of the region. See Section 9.0. for specific actions which should be implemented by the Watt Institution in order to reposition it in this way. The relationship of the Watt Institution with other heritage stakeholders is explained below.

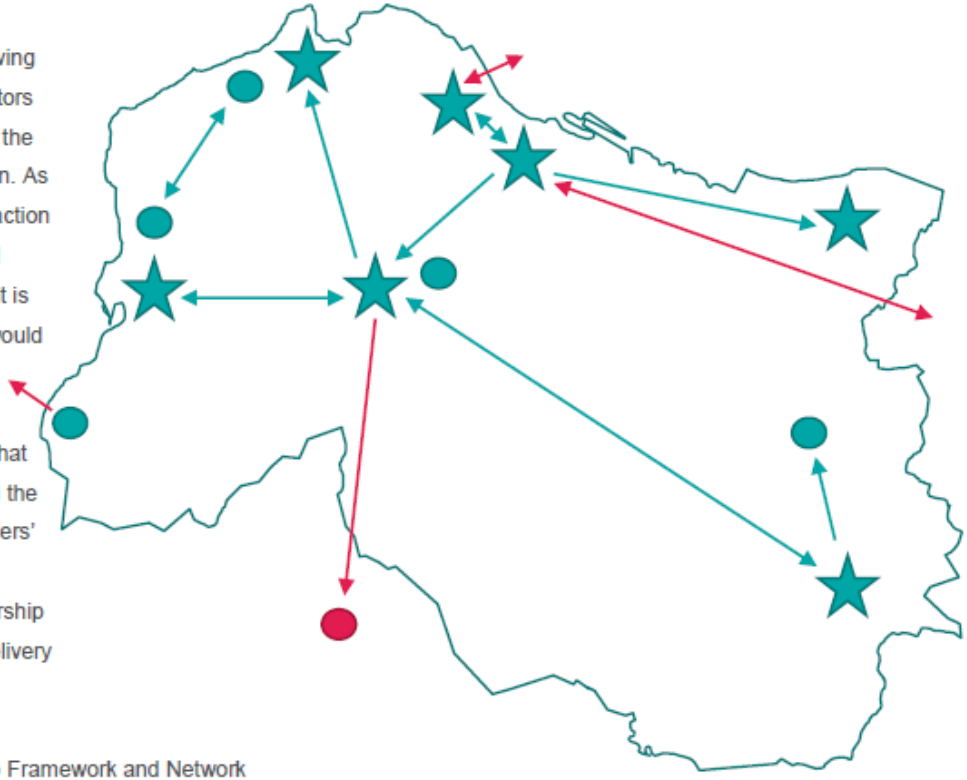
7.0 Strategy Strategic Framework: *Partnership and Service Delivery Model*

The number and diversity of stakeholders in Inverclyde's heritage sector coupled with ongoing budget pressures to deliver more with less resource means that a single partnership delivery model is not feasible. As such, we have conceived of a network approach to service delivery, whereby heritage assets and organisations come together to deliver particular actions as determined through the Leadership Framework. Roles as either primary or secondary nodes on the network would be adopted, with each node potentially sharing resources, materials and/ or expertise with others across the network to deliver the common goals. All assets would adopt a signposting role creating a series of 'entry points' for locals and visitors alike, and facilitating the movement of audiences between assets and across the region.

Conceptually the 'network' at large includes all of Inverclyde's heritage assets/ organisations. The network becomes an active delivery model when partners endorse, implement and uphold a collaborative approach, assuming their role as a primary or secondary node and delivering associated actions that maximise the reciprocal benefits. Looking beyond Inverclyde, key nodes would seek to establish similar partner relationships with national organisations. This is illustrated in the diagram.

Roles and relationships across the heritage network will be defined through the Leadership Framework. The Heritage Forum, comprised of stakeholders from across the sector, is an important bridge between the decision making processes and the Heritage Network as a delivery mechanism.

The Heritage Network can be activated in various ways involving different actors or the same actors in different roles depending on the objective or initiative in question. As the region's main heritage attraction with the expertise and financial support of Inverclyde Council, it is likely that the Watt Institution would assume a primary role in the majority of delivery networks. However, this does not mean that the Council is singularly driving the strategy forward. Without partners' participation and continued commitment neither the Leadership Framework nor the Network delivery model are possible.



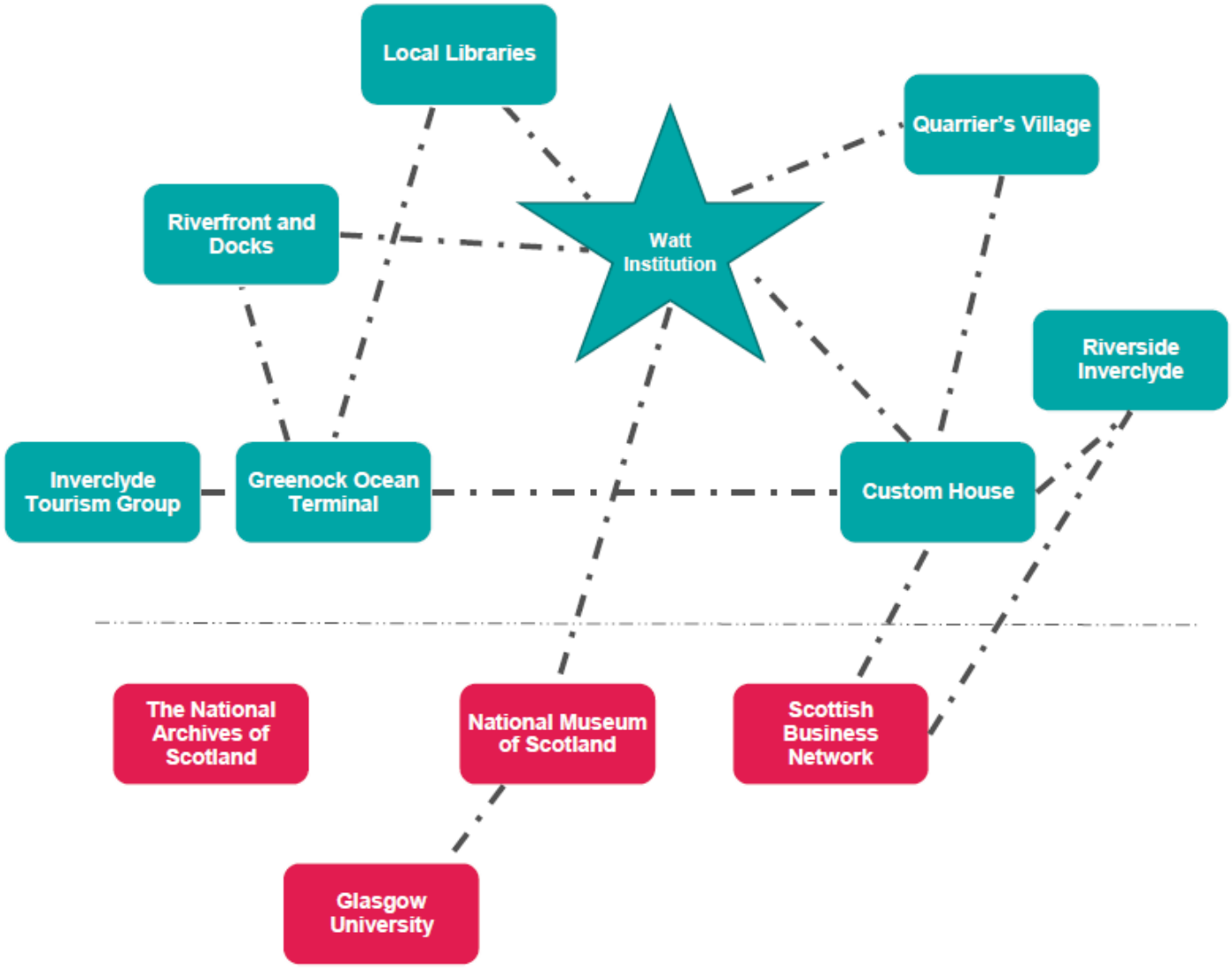
Fundamentally, the Leadership Framework and Network delivery model sets out the mechanism for decision making and taking forward actions but affords the flexibility for the sector to determine how this is done and by whom. As well as working in partnership, organisations will also continue to pursue their own projects and individual funding applications. The Heritage Strategy through the overarching vision, objectives and points of contact with the sector at large it creates will ensure that all action ultimately works towards common overarching goals, is coordinated and supported by a strong strategic rationale subscribed to across the sector at large.

Amongst the wide range of initiatives the heritage network will uphold, thematic programming is likely to be a key feature. We have devised an examples of a possible thematic network, based on one of several key themes the consultation process highlighted as relevant at a regional level (Emigration and Immigration) placing select regional (teal) and national (pink) heritage assets and organisations within a network of resource sharing, partnership and support. The box in orange summarises the list of potential activities and engagements which could be facilitated through the network. See overleaf.

7.0 Strategy Strategic Framework: *Partnership and Service Delivery Model*

- Themed temporary exhibition and programming at the Watt Institution (displaying own collections and potentially those on loan from regional and/ or national partners)
- Outreach programming delivered by Watt Institution staff with partners at locations across Inverclyde
- Sharing collections to create 'pop-up' exhibitions (e.g. at local libraries)
- Training library staff to deliver genealogy classes
- Regularly updating Inverclyde Tourism Group on activities and programming at the Watt Institution
- Watt Institution collections inspire artistic response (e.g. play at The Beacon, sculpture design with local artists)
- Signposting between all assets
- Themed coastal trail (digital or other media)
- Themed festival with programmes/ activities at each node on the network

Service Delivery Model: Emigration and Immigration

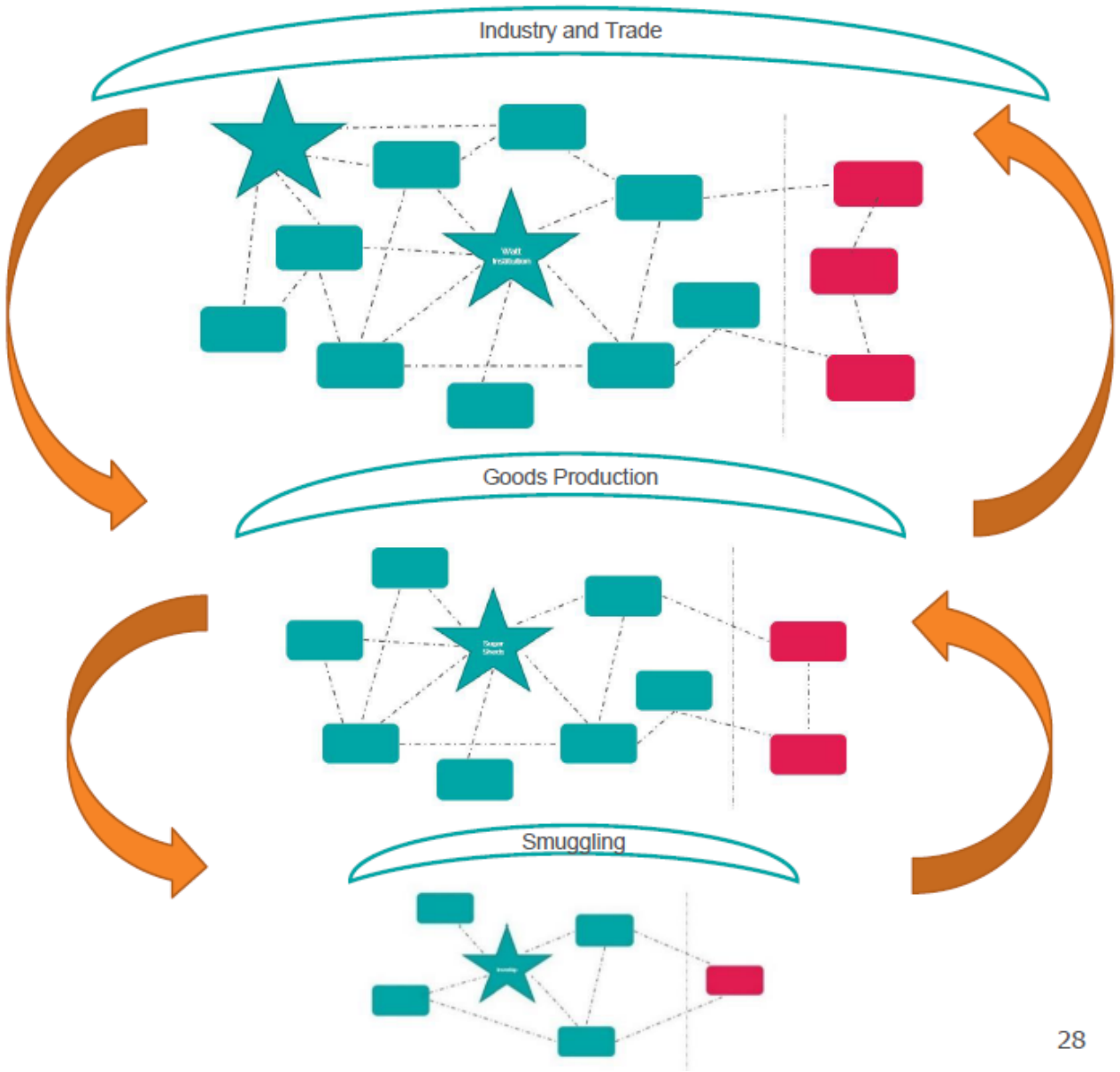


7.0 Strategy Strategic Framework: *Partnership and Service Delivery Model*

It would be remiss to view each network in isolation. Inverclyde's heritage (and arts) themes and network partnerships do not, and could never, sit apart from one another - as they are interdependent and work alongside each other as components of Inverclyde's unique heritage 'whole'. As such, one thematic network partnership may lead to the development of another, involving new members of the wider network and connecting with new, related themes, including those which are more settlement specific. This network approach thus allows both a top-down and bottom up approach, placing the authentic heritage narratives at a settlement level within their wider regional context. This approach is critical for enabling local communities to 'rediscover' their heritage and relate to it on their terms and creating an authentic platform for Inverclyde as an enhanced destination.

The diagram demonstrates one example of this, illustrating how the Inverkip specific theme of 'Smuggling' could be it's own, individual network and would link, through the top-down and bottom up network approach, to the larger thematic network of 'Goods Production' and in turn, the wider, regional thematic network of 'Industry and Trade'.

Bottom-up and Top-down Approach to Thematic Networking: Smuggling, Goods Production and Industry and Trade



8.0 Implementation Strategy

The Implementation Plan sets out the actions required to achieve the Heritage Strategy Vision, Aims and Objectives over the next ten years (by the end of 2028). Actions are grouped by delivery period as follows:

Strategy Duration	10 years	2019 - 2028
Short-Term Actions	Years 1, 2, 3	2019, 2020, 2021
Medium-Term Actions	Years 4 and 5	2022, 2023
Long-Term Actions	Years 6, 7, 8, 9, 10	2024, 2025, 2026, 2027, 2028

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
1	Agree and adopt strategy.	An agreed way forward which will be championed by Inverclyde Alliance, Inverclyde Council, the wider heritage sector with opportunities for cross-sectoral participation.	Time	2019, Q2 (Apr – Jun)	Inverclyde Alliance with Inverclyde Cultural Partnership	All
2	Develop and implement a **communications strategy** as part of the launch of the Heritage Strategy, reminding or revealing for the first time in some cases, the rich and diverse heritage of Inverclyde to its communities and setting out the aspiration and action plan for the future. The communications strategy will encourage stakeholders and the wider community to commit to delivering the Strategy, developing a database of contacts and mechanism for continued engagement going forward.	Generation of widespread awareness of the Heritage Strategy, motivating and enabling commitment and participation amongst stakeholders in the cultural sector and local residents alike.	Time Budget for publication	2019, Q2-Q3 (Apr – Sept)	Inverclyde Cultural Partnership	5, 8
3	Identify a strategic owner for Heritage within Inverclyde Council. It is suggested that this is the Head of Culture, Communities and Education Resources.	Designation of an individual within the Council staff structure to deliver the Heritage Strategy in partnership with the Inverclyde Cultural Partnership.	Time	2019, Q2 (Apr - Jun)	Inverclyde Alliance to approve appointment	All

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
4	Establish a heritage advocacy role within the elected member structure. This individual would ensure that considerations for heritage and maximising its impact are a part of strategic planning and decision making across the Council's remit (e.g. health, education, planning).	Establishment of a mechanism to achieve cross-sectoral approaches that will maximise heritage engagement and associated socio-economic benefits.	Time	2019, Q3 (Jul – Sep)	Inverclyde Council to approve appointment.	All
5	**Confirm or revise proposed Leadership Framework and Network Delivery Model** in response to decisions taken concerning the relationship between the Heritage and Arts & Creativity Strategies. Consider joint arts and heritage Forum and Working Groups. Consult with the sector to determine the optimum way forward and canvass willingness to participate. Devise a strategy to maximise the participation of **young people** in both the Heritage Forum and Working Groups. **Thereafter create and coordinate the proposed Heritage Forum**. Initial frame of reference would be produced to encourage interest in the concept. The detailed terms of reference and role for the Forum would evolve out of discussions with members. This may result in joint funding applications	Effective decision making and delivery structures to support and sustain the Heritage Strategy over the next ten years and beyond. Maximising of synergies between arts and heritage. Decision making and delivery structures which encourage 'buy in' and participation from the sector at large and key audience groups, young people in particular.	Time	2019, Q3 (Jul – Sep)	Inverclyde Alliance with Inverclyde Cultural Partnership. The Great Place Scheme Project Officer would play an important role consulting the sector.	8

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
6	Appoint a **Heritage Coordinator**. A time limited post, the Coordinator would be responsible for networking with partners across the sector encouraging their participation in the Heritage Strategy, specifically: • Facilitating the Heritage Forum – which would meet at an agreed frequency as appropriate e.g. monthly, quarterly depending on issues and activities. This should take place in different locations across Inverclyde. • Supporting the formation of Working Groups formed to develop and deliver specific initiatives. • Working with the sector to deliver capacity building initiatives (see Actions 7, 8 and 9). • Establish mechanisms for monitoring and evaluation in line with Inverclyde Cultural Partnership practices. Funding for the post could be part of a capacity building application. The National Lottery Heritage Fund (NLHF) continues to support capacity building as part of its main Grants for Heritage programme, and it is an area of particular focus over 2019-2021.	Building interest, participation and capacity in order to achieve a self-sustaining Leadership Framework and effective partnership delivery model over the medium to long-term. Seamless transition between the Heritage Outreach Officer and new Heritage Coordinator thus maintaining and building momentum.	Time to develop funding application. Funding to pay for post. An approximate budget of £250,000 should be considered for the post and associated activities. All costs are subject to funding bids.	Develop funding application(s) in 2019 Q4 (Oct – Dec). Submit funding application(s) in 2020 Q1 (Jan – Mar). three year post duration from 2020 Q2 (Apr – Jun) to 2023 Q1 (Jan – Mar).	Inverclyde Cultural Partnership to identify lead applicant and develop agreement between the partners in terms of where the Coordinator would be based and how the post-holder's time would be split across the key task areas.	All

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
7	**Capacity and Skills Audit** – assessing existing and gaps in terms of governance, staff and volunteers across all heritage and arts organisations (willing to participate). The Watt Institution is a key partner in lieu of its role as primary hub in a more connected heritage network. An approach should also be made to primary and secondary school head teachers in order to ascertain where and how local history currently features within the curriculum as well as the appetite to expand teaching in this area. The study would include an analysis of key training needs and an action plan for delivery over the remainder of the Heritage Strategy life-span. A more focussed short-term delivery plan would be implemented by the Heritage Coordinator with partner support.	An understanding of key skills development requirements in order to build capacity across the sector thus enabling a self-sustaining leadership framework and an effective Heritage Network delivery model capable of taking the Heritage Strategy forward over the medium and longer term. Involving schools at this early stage is key to engaging children and young adults, key target groups for the Strategy.	Funding to conduct audit and deliver immediate training requirements. Allow budget of approx. £50,000. All costs are subject to funding bids.	Funded as part of capacity building application (action 6). Conduct audit 2020 Q2 (Apr – Jun) to Q3 (Jul – Sep) Deliver training 2020 Q4 (Oct – Dec) to 2021 Q1 (Jan – Mar)	Overall responsibility of the Inverclyde Cultural Partnership, potentially delegated to a Working Group. Managed by the Heritage Coordinator. Watt Institution staff are a key contributor.	8
8.	Prepare an **Interpretation Strategy** in order to: • Identify key heritage themes and stories involving communities from across Inverclyde • Identify ways to thematically link heritage stories between different settlements/ areas/ assets	An authentic 'bottom up' understanding of Inverclyde's rich heritage and a means to convey and engage audiences with this at a range of levels, from settlement specific to overarching regional themes.	Funding to appoint interpretation and consultation specialists. Budget of approx. £50,000. All costs are subject to funding bids.	Funded as part of capacity building application (action 6).	Overall responsibility of the Inverclyde Cultural Partnership, potentially delegated to a Working Group. Managed by the Heritage Coordinator. Watt Institution is a key contributor.	2, 3, 4, 5, 7, 8

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
8	• Conduct an audit of existing methods of interpretation, specifically themed trails and pathways connecting settlements • Determine methods of interpretation that will encourage and enable participation amongst local residents and visitors. This could include trails (signage, digital, online), events such as festivals, branding or marketing initiatives. Creative methods, involving artists and artistic responses is likely to be a key feature. Outputs: • Develop **headline messages about Inverclyde's heritage and a sector overview summary** that shows where people should go to access specific types of heritage collections and information now. These heritage guides should be published and circulated amongst partners and the community • Determine action plan for delivering recommendations.	Raising awareness and understanding of the heritage sector and improving connectivity across sites and organisations (cross-sector). Setting up an action plan for future initiatives and projects. Key point where arts and heritage initiatives can coalesce.		Deliver strategy 2020 Q4 (Oct – Dec) to 2021 Q2 (Apr - Jun) Heritage guides to be completed by end of 2020.		
9.	Review **Collections Acquisitions and Storage Policies** at: • Watt Institution • Other arts and heritage organisations which actively produce/ collect/ store (physically or digitally) • From this: • Clarify the collections held and associated activities undertaken by organisations across Inverclyde Develop a **centrally accessible database** which details what is held, where it is held and legal obligations. From this identify which items at risk of decay, those which could be made available for loans, research etc. and the terms that would need to be satisfied. Identify priority actions such as digitisation needs, physical storage requirements etc. Discuss actions at Working Group meetings.	A collaborative approach encouraging signposting, sharing expertise, information and (where possible) collections and highlighting training requirements. Recommendations streamlined included within the Interpretation Strategy.	Funding for collections/ digitisation professional expertise required to set up the database. Allow budget of £50,000. All costs are subject to funding bids.	Funded as part of capacity building application (action 6). Conduct review 2020 Q4 (Oct - Dec) to 2021 Q2 (Apr – Jun) Develop database 2021 Q3 (Jul – Sep) to Q4 (Oct – Dec)	Responsibility of the Inverclyde Cultural Partnership, potentially delegated to a Working Group comprised of representatives from the Cultural Partnership and others from the sector with particular expertise in this area. Managed by the Heritage Coordinator. Watt Institution staff are a key contributor (see Action 15).	1, 3, 4, 5,

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
10.	**Working Group established to deliver the recommendations of the Interpretation Strategy.** It is anticipated that area-wide approaches to interpretation such as **trails** and **festivals** will feature in the Interpretation Strategy. The Working Group, comprised of representatives from the Inverclyde Cultural Partnership and the sector more widely (it is strongly advocated that this includes those active in both the arts and heritage sectors), would assume responsibility for developing the recommendations in more detail and preparing funding applications. Where relevant, actions should be coordinated with the festivals and events being developed through the ICP Outcome Delivery Plan by the Festival & Events Sub-group. *Example Actions* *Developing a festival with an overarching theme such as 'Innovation and Engineering', with different organisations across Inverclyde (drawn from the Heritage and Arts Forums) encouraged to develop a proposal for how they would interpret and celebrate the theme at their asset, attraction or in their locality. The overarching theme would provide the umbrella identity and the Working Group would establish how to activate the Network delivery model between partners.*	A plan for taking forward the recommendations of the Interpretation Strategy and a Working Group with the appetite and expertise to do so. Coordinated and where possible integrated arts and heritage festival and events programmes across Inverclyde.	Working Group members' time. Funding to deliver pilot events/ initiatives. Funding required is dependent upon the recommendations pursued.	Working Group established after completion of Interpretation Strategy, 2021 Q2 (Apr-Jun) to Q3 (Jul - Sep) Take forward initial recommendations over 2021 and 2022. This could include seeking funding for pilot events. 2022 is VisitScotland's Year of Scotland's Stories. At the core of the Interpretation Strategy is identifying and conveying authentic heritage themes which resonate with local residents. Storytelling is fundamental to this. Funding applications could be prepared in summer 2021. There is also an opportunity to capitalise on NLHF funded opportunities with Inverclyde as a target area. A specific campaign focussing on digital will be active from 2019-21.	Responsibility of the Inverclyde Cultural Partnership and delivered by the Working Group. The Heritage Coordinator would participate and provide support developing funding applications.	1, 3, 4, 5,

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
10.	*Festivals should capitalise on national funding initiatives such as Visit Scotland's 'Year of…' campaigns and/or become an extension/ satellite to existing successful and relevant festivals e.g. Glasgow Science Festival.* *Develop themed interpretive trails – another mechanism for showcasing tangible and intangible heritage and wider landscapes across Inverclyde as a means of delivering storytelling and encouraging exploration.*					
11.	Create a **Landscape Conservation and Enhancement Working Group** tasked with identifying specific opportunities in relation to Inverclyde's natural heritage. The results of the Interpretation Strategy may help to guide decision making if, for example, recommendations are made for trails across sections of the landscape. Initiatives should also be matched with funding opportunities and considered in light of other applications which are being developed across the region.	A strategic approach to enhancement of Inverclyde's natural heritage assets within a wider heritage development strategy that minimises conflict for funding and maximises chance of success.	Working Group members' time	Working Group established by 2021 Q3 (Jul – Sep), after completion of the Interpretation Strategy and Working Group for this has been set up.	Inverclyde Cultural Partnership to oversee formation of the Working Group. Working Group members to comprise representatives from the Inverclyde Cultural Partnership and from the Heritage Forum.	1, 2, 7, 9
12	Create a **redundant heritage assets Working Group** tasked with taking a strategic approach to the revitalisation of redundant and under-used assets. This Working Group would be tasked with: Conducting a scoping exercise to identify derelict and underused assets	A strategic approach to the development of redundant and under-used assets that is transparent and deliverable.	Working Group members' time. Funding to deliver Options Appraisal/ Feasibility Studies.	Working Group established by 2021 Q3 (Jul – Sep), after Capacity and Skills Audit and associated training is delivered. Funders such as NLHF and the	Responsibility of the Inverclyde Cultural Partnership working with Inverclyde Council's Environment, Regeneration and Resources Directorate. Delivered by the	1, 2, 6, 7, 9

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
12.	• Determining priority assets to focus on to identify new uses • Identify 'next steps' such as key assets which would benefit from options appraisal/ feasibility study • Identify how funding could be obtained for next stage studies • There are a number of buildings which have emerged as significant such as the 'Sugar Sheds' and 'Dutch Gable House' – this process will objectively and comprehensively assess all assets, involving the public and sector in order to determine those which should be prirotised. The aspiration should not be to develop a public use/ benefit for all assets but to determine the optimum way forward. In some instances (sensitive) private development may be the best option. Membership of this Working Group should reflect the range of issues that need to be explored. It should include representation from the Inverclyde Cultural Partnership and Inverclyde Council's Environment, Regeneration and Resources Directorate.		Depending on the complexity and sensitivities Cost per study could range from £10,000 to £30,000. All costs are subject to funding bids.	Architectural Heritage Fund provide support for such studies. Funding opportunities should be explored in 2021 Q3 (Jul – Sep) to Q4 (Oct – Dec). *Options Appraisals/ Feasibility Studies delivered in 2022-23 – see Action 16 below.* Priority assets Options Appraisals/ Feasibility Studies completed by 2023 Q1 (Jan – Mar) - before the end of the Heritage Coordinator post funding.	Working Group with support from the Heritage Coordinator.	

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
13.	**Develop a Digital Assets Database** – building on existing digitisation and archiving activity (such as that being delivered by the Inverclyde Heritage Network) to establish a centralised database cataloguing all assets with copyright free usage for members of the Heritage Forum. This database would not replace the Council's internal Past Perfect resource. The purpose is to document the array of artefacts and materials across Inverclyde and provide a single entry point for interested parties to access that information. Opportunities to provide training in digitisation should be explored as part of the database development, adopting a 'train the trainer' approach in order to spread skills development opportunities as widely as possible. The Digital Assets Database builds on the Capacity and Skills Audit (Action 7), the Interpretation Strategy (Action 8) and the Collections Policies Review (Action 9). Developing the database provides interpretive content to implement the Interpretive Strategy recommendations (Action 10).	Resource sharing and positive promotion of Inverclyde's heritage assets. Sector skilled in digitisation.	Working Group to take forward the initiative. External advice to identify necessary software and cataloguing. Funding to set up database and deliver training. Budget TBC (dependent on the requirements). All costs are subject to funding bids.	Consultation and planning in 2021 Q3 (July - Sept) to Q4 (Oct – Dec). Potential funding application during this time. There is potential to capitalise on funding opportunities such as the NLHF digital capabilities campaign (2019-2021). *Delivery in 2022-23 (see Action 18)*	Responsibility of the Inverclyde Cultural Partnership, potentially delegated to a Working Group. Managed by Heritage Coordinator. Input from groups across the sector, including the Inverclyde Heritage Network. Watt Institution staff are a key contributor (see Action 15).	1, 2, 4, 6, 8

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
14.	**Monitoring and evaluation** – incorporate metrics for measuring progress and impact of Heritage Strategy actions within an overarching ICP Self-Evaluation Strategy. Utilise the consultation data collected as part of the Heritage Strategy research to inform the baseline, conducting additional quantitative research where necessary. At the end of 2021 conduct a formative assessment in order to determine progress made and enable more detailed planning for the next phase of the Heritage Strategy implementation.	A robust evidence base concerning current views towards heritage, engagement with heritage and barriers to participation across Inverclyde. An integrated strategy for monitoring and evaluating arts and heritage engagement.	Time	Identify information gaps and conduct research to compile robust baseline by end of 2019. Methods of monitoring and evaluation to feature for all actions where there is a resource or physical output (e.g. evaluation of training programmes, monitoring use of database etc.).	ICP self-evaluation sub-group with support from Arts Coordinator and Heritage Coordinator.	All

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
MEDIUM TERM (2022, 2023)						
15.	**Operational Leadership Framework** with clearly defined structure and opportunities for participation through the Heritage Forum and Working Groups approach. The Network Delivery Model has been activated and benefits of this approach are apparent encouraging new partners to participate. By this point there is no need for an externally funded post (Heritage Coordinator) to facilitate the Framework or Delivery Model.	Self-sustaining Leadership Framework and Network Delivery Model. Participation from new partners, including cross-sectoral and regional partners.	Time to facilitate and attend Heritage Forum and Working Group meetings.	Continue to operate over 2022 and 2023 (no funding required).	Inverclyde Cultural Partnership. Watt Institution remains critical to an effective Network Delivery Model.	8
16.	**Conduct Options Appraisals/ Feasibility Studies for priority redundant heritage assets** (implementing recommendations from Action 12).	An understanding of the optimum way forward for priority redundant/ under-utilised heritage assets.	Funding to appoint external experts to deliver robust and objective assessment. All costs are subject to funding bids.	Funding obtained as part of Action 12.	Inverclyde Cultural Partnership delegated to Redundant Heritage Assets Working Group.	1, 2, 9

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
MEDIUM TERM (2022, 2023)						
17.	Take forward any **capital projects** resulting from Redundant Heritage Assets Assessment (Action 12). Given that Inverclyde is an NLHF target area, there should be an aspiration to take at least one capital project forward to the funder over the medium to longer term (additional to the capacity building related funding application outlined in Action 6).	Sustainable redevelopment for at least one of Inverclyde's significant and at risk heritage assets. Creating both use and non-use value from redundant heritage asset/s adding to the quality of the historic environment and sense of place and pride it espouses.	Working Group time and commitment. Support from property owner (if not already represented in Working Group). All costs are subject to funding bids. Budget for professional expertise to develop funding application.	Submit NLHF Development Stage application in 2022/23. Project delivery timetable dependent on asset which is to be redeveloped and nature of the interventions	Inverclyde Cultural Partnership with Working Group,	1, 2, 9
18.	**Digitisation Training Delivered and Digital Assets Database Operational** (developed as per Action 13). Note that this database will be separate from the existing Past Perfect system utilised by the Museum and Library service. The new digital assets database will encompass the artefacts and materials available by other groups, charities and individuals across Inverclyde. Key information from Past Perfect would be incorporated to provide a comprehensive picture.	Resource sharing and positive promotion of Inverclyde's heritage assets. Sector skilled in digitisation.	Funding to set up database and deliver training. Budget TBC (dependent on the requirements). All costs are subject to funding bids.	Funding secured as per Action 13. Database developed and training delivered from 2022 to 2023 Q1 (Jan – Mar) whilst Heritage Coordinator is in post.	Inverclyde Cultural Partnership with relevant Working Group. Support from Heritage Coordinator. The Watt Institution will be a key partner (Action H).	1, 4, 5, 6, 7, 8, 9

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
MEDIUM TERM (2022, 2023)						
19	**Further embed heritage protection within planning framework** and pursue the idea that every capital development project should include a heritage element e.g. interpretation, heritage inspired public art, the naming of streets or sites, public engagement activity etc., interpretation/ commemoration for all historically significant buildings and public realm.	Heritage is remembered, visible and celebrated. Enhanced sense of relevance and pride felt amongst local residents towards their heritage.	Time	Policy in place by 2022-23.	Inverclyde Alliance with Inverclyde Council Environment, Regeneration and Resources Directorate. The Council's Heritage Advocate (Action 4) will be an important enabler.	1, 2, 3, 7
20	Building on the results of the Capacity and Skills Audit and associated Training (Action 7), groups across the sector will have developed **new engagement opportunities for school pupils**. Rather than being a defined programme delivered solely by one organisation (although the Watt Institution will play a key role – See Action J), enhancing engagement opportunities for school pupils will be adopted as a collective ambition, taken forward by individual organisations in line with their own objectives and aspirations. The Leadership Framework through the Heritage Forum provides the space for organisations to share their plans and coordinate both funding	More opportunities for school pupils to learn about their local heritage. New opportunities which excite and inspire young people about heritage encouraging life-long appreciation. A strategic approach which assists cultural organisations to access funding and maximise the positive impact generated.	At a strategic level, time and commitment to the Leadership Framework and participation at Heritage Forum events. Applications would be developed by organisations individually in order to access necessary funding.	Funding applications made after the completion of the Capacity and Skills Audit and associated Training. Focus on delivering new schools programmes across 2021, 2022 and 2023.	Heritage Forum members.	3, 5, 9

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
MEDIUM TERM (2022, 2023)						
	applications and activity delivery in order to minimise conflict and realise reciprocal benefits. Developing an education focussed network delivery model will assist organisations to establish how their individual aspirations can support and benefit those of others and will be an important development planning tool.		Seminars on how to write effective funding applications could be delivered through the Heritage Forum by members who have skills and experience in this area.			
21.	**Use of community centres and libraries as heritage engagement centres** to provide additional locations where heritage activity can take place (especially in communities where there is no dedicated heritage hub). Library staff would support increasing the profile of heritage and could provide advice and support to people undertaking heritage activity / research. Arts and other creative responses and programming could assist libraries and community centres as they seek to engage more audiences. Members of Inverclyde's creative community should be involved in the development and delivery.	Increased heritage engagement amongst locals including more diverse audiences currently prevented from participating due to actual and/ or perceived socio-economic or cultural barriers. Enhanced sense of relevance and pride felt amongst local towards their heritage. Volunteering/ skills development.	Budget to develop displays Training for Library staff All costs are subject to funding bids.	Library staff included in Capacity and Skills audit (Action 7) 2020 Q2 (Apr – Jun) to Q3 (Jul – Sep). Training and piloting delivered in 2020/21 in readiness for roll-out across Inverclyde in 2022-23.	Led by Libraries, Education Development and Arts Manager with input from Watt Institution staff.	3, 4, 5, 9

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
MEDIUM TERM (2022, 2023)						
22.	**Mainstream an annual Inverclyde Heritage Festival** (anticipating the results of the Interpretation Strategy, Actions 8 and 10). Festival theme to be recognisably 'Inverclyde' with scope for settlement/ asset specific interpretation and celebration. Partnerships should be developed with cultural sector organisations from across Inverclyde and cross-sectoral delivery partners such as those in education and health and well-being.	Engagement from locals and visitors. Enhanced sense of relevance and pride felt amongst local towards their heritage. Increased profile and appeal of Inverclyde as a destination. Volunteering/ skills development.	Funding to deliver festival. Partner and volunteer time input. All costs are subject to funding bids.	Festival development in 2020/21 leading to delivery in 2022. Specific timing to be funding or partner dependent. Funding opportunities for 2020 'Year of' is £10,000 - £50,000 through EventScotland.	Inverclyde Cultural Partnership delegated to Festival Working Group (potentially merging with ICP Outcome Delivery Plan Festival & Events Sub-group).	3, 4, 5, 6, 7, 8, 9
23.	**Development of a Heritage Brand for Inverclyde.** Positioning the region's rich and diverse range of heritage under a collective 'umbrella' will enhance awareness and promote engagement. This is a particularly effective tool for promoting Inverclyde as a visitor destination. There should be a website to communicate the brand and function as an 'access' point to the region's heritage allowing those who access it to compile their own routes and itineraries etc. The ways in which heritage is presented should draw from the findings of the Interpretation Strategy (Action 8) ensuring an 'authentic' narrative	A tool for promoting and communicating the breadth of heritage creating a single point of access. Using heritage as a key means to enhance Inverclyde as a visitor destination. Consistency in cross-sectoral messaging in order to maximise the appeal of Inverclyde as a destination.	Funding to appoint brand/ marketing consultants Funding to develop website and other brand-related resources. All costs are subject to funding bids.	Partnership involvement is critical for success, involving all with a vested interest in destination development e.g. Inverclyde Alliance, Inverclyde Council, Riverside Inverclyde, VisitScotland etc.	Inverclyde Alliance	4, 7, 8

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
	MEDIUM TERM (2022, 2023)					
	with a consistency in how heritage resonates locally with how it is presented externally. The Inverclyde Alliance Local Outcome Improvement Plan suggests that plans are underway to develop a brand for Inverclyde more widely. Heritage-specific branding should fit within this wider brand identity. Arts should also feature within this. The role for further developing Creative Inverclyde such that it sits as the counterpart to a Heritage Inverclyde should be considered.	Encouraging more cruise ship passengers to remain in Inverclyde and increased penetration of the day trip market as initial audience development targets in the medium term.		A Working Group should be formed in 2022 aiming to launch the brand by the end of 2023.		
24.	**Monitoring and Evaluation** – formative assessment of progress made over the first five years of the Strategy relative to the baseline position and phase 1 formative assessment (Action 14). This could be achieved via a survey with the sector, distributed across the Heritage Network via the Heritage Forum. Ideally the results would be incorporated within wider ICP Self-Evaluation assessment.	Understanding of progress made, new issues/ challenges which have arisen, potential new opportunities. Determining actions that will enable Strategy objectives and aims to be met over the remaining duration of the Strategy. Continuing to promote cross-sectoral approach to cultural engagement.	Time from Working Group to develop and analyse survey. Depending on expertise of WG, potential need for external evaluator support.	Evaluation completed by the end of 2023.	Inverclyde Cultural Partnership self-evaluation sub-group	All

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
LONG TERM: 2024, 2025, 2026, 2027, 2028						
25.	**Continuation of Leadership Framework and Network Delivery Model**	Self-sustaining Leadership Framework and Network Delivery Model. Participation from new partners, including cross-sectoral and regional partners.	Time to facilitate and attend Heritage Forum and Working Group meetings.	Continues to operate over 2024 – 2028	Inverclyde Cultural Partnership. Watt Institution remains critical to an effective Network Delivery Model.	8
26.	**Response to findings of mid-strategy evaluation**	Determining actions that will enable Strategy objectives and aims to be met over the remaining duration of the Strategy. Continuing to promote cross-sectoral approach to cultural engagement.	Challenges and remedies discussed. Potential issue of updated Heritage Strategy.	Modifications to strategy determined in 2024.	Inverclyde Cultural Partnership self-evaluation sub-group	All
27.	**Continued capital project(s) development** including: • Securing funding for project(s) which are mid-development (Action 17) and moving into delivery • Developing funding applications for new capital projects (informed by Action 16). Note that the current NLHF Strategic Funding Framework runs to 2024.	Action plan developed that will see sustainable redevelopment of priority heritage buildings. At least one project proceeding to delivery phase, with other projects in planning.	Project-specific Working Group(s). External support to develop funding applications	Capital project one delivered by 2027 Continue to match projects identified as a result of Action 16 to funding opportunities.	Overall responsibility depends on asset ownership.	1, 2, 9

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
LONG TERM: 2024, 2025, 2026, 2027, 2028						
	• Continuing to conduct Options Appraisals/ Feasibility Studies (Action 16) as appropriate	Creating both use and non-use value from redundant heritage asset/s adding to the quality of the historic environment and sense of place and pride it espouses.	and other studies may be required. Full funding for first capital project(s) secured.			
28.	**Continued development of the Heritage Brand for Inverclyde**, taking advantage of new opportunities as Inverclyde's market grows.	Developing Inverclyde as a destination requires more than heritage, with arts and other recreational activity playing an important role as well as accommodation supply and other infrastructure. Concomitant development of all destination components will enable significant enhancement of Inverclyde as a tourist destination.	Coordinated development and promotional messaging.	Partnership involvement is critical for success, involving all with a vested interest in destination development e.g. Inverclyde Alliance, Inverclyde Council, Riverside Inverclyde, VisitScotland etc. Continued over 2024 – 2028	Inverclyde Alliance	4, 7, 8

8.0 Implementation Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
LONG TERM: 2024, 2025, 2026, 2027, 2028						
29.	**Summative Strategy Evaluation** – as part of wider ICP Self-Evaluation Assessment.	The evaluation is a means to: • Understand the impact of the Heritage Strategy relative to vision, aims and objectives • Understand the collective impact with the Arts & Creativity Strategy and other ICP initiatives • Highlight key lessons learned • Inform next steps for continuing cultural engagement in Inverclyde	Time and potentially external expertise	Conducted in 2029	Inverclyde Alliance	All

9.0 Watt Institution Action Plan

An outline Action Plan for the Watt Institution is set out below. The Action Plan for the Watt Institution envisages a mixed model in terms of funding and service delivery is essential in order for the Watt Institution to maintain and enhance its role at the heart of Inverclyde's heritage sector. With a funding mix comprising reduced core funding, where increased support is sought from national bodies, and where there is greater reliance on partners and stakeholders to access funding and deliver initiatives, there is an opportunity to recast the role of the Watt Institution, to reshape its activities and to introduce new and creative ways of working. The below sets out key actions for the Watt Institution in order to achieve this. These actions cannot be viewed in isolation but are embedded within the overarching Heritage Strategy Implementation Plan. Where relevant, actions for the Watt Institution are correlated with those identified for the sector at large as detailed in the Implementation Plan above.

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
A	Implement **staff review** in order to determine: i. Suitability of existing posts (role, FTE etc) in order to deliver the services of the now integrated Watt Institution ii. Any new roles and/ or rationalisation of existing roles which may be required. With the Watt Institution as a primary hub in a much more connected heritage network, outreach activity and partnership liaison is a critical component of the Watt Institution's role going forward. Adequate staff resource in this area is essential. iii. Skill gaps and training requirements in light of i and ii. Exercise is a pre-curser to the wider sector Capacity Skills Audit and Training exercise (Activity 7). It is essential that in advance of this the revised Watt Institution staff structure is in place with staff fully trained in their respective positions.	Watt Institution staff structure is compatible with the needs of the now integrated museum and library and staff are equipped to deliver services required. Watt Institution staff are equipped to participate in the wider sector Capacity building exercises (Activity 7).	Staff time	Conduct review 2019 Q3 – 4 Posts created/ rationalised and necessary training delivered 2019 Q4 – 2020 Q1	Libraries, Education Development and Arts Manager with Inverclyde Council Human Resources	

9.0 Watt Institution Action Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
B	**Develop partner relationships and implement expanded outreach programme** across Inverclyde. It is envisaged that as a result of Action A there will be a dedicated **Outreach post** and associated budget for outreach activity within central library and museum funding allocations. This post-holder would build on the relationships developed by the Great Places Project Officer and would lead on the planning and delivery of outreach activities and initiatives. Initially outreach output is likely to be modest however as the Network Delivery Model is developed and activated and other sector-wide initiatives gather momentum (and crucially funding) outreach activity will expand (see Activity C below). Types of activity which should be considered for the short term and/ or planned over the medium term should include: • Collections boxes • Temporary or pop-up exhibitions with other attractions, community centres, libraries or vacant shop premises as per the Heritage Hub (where security and environmental requirements allow)	Demonstrable commitment to the sector and audiences that the Watt Institution seeks to reposition itself at the heart of a more connected cultural sector Changing perceptions towards heritage and facilitating engagement with under-represented audiences particularly young people, socially isolated older people and those unable to engage in heritage activity through economic circumstance and/ or disability.	Review of existing Council revenue funding to appoint Outreach Officer Sector-wide impact can only be achieved by pooling resources and expertise between Heritage Forum partners. Buy-in and commitment from the sector is essential for achieving the stated outreach objectives.	Watt Institution Outreach post in place before end of 2020 Q1 (and in advance of appointment of Heritage Coordinator – proposed for 2020 Q2) Outreach activity planning and budgeting for year 1 and longer term aspirations for outreach established by end 2020 Q1	Appointment led by Libraries, Education Development and Arts Manager. For activities implementation, input from Heritage Forum partners is essential.	2, 3, 4, 5, 6, 8, 9

9.0 Watt Institution Action Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
B	• Activity programming which takes place at attractions or during events/ celebrations across the region. • Workshops delivered with schools across the region • Projects with local communities exploring 'their heritage' and how this links with the Watt Institution collections • Programming which reaches under-represented audiences should be a focus. The Outreach post-holder should be in place ahead of the Heritage Coordinator and would provide support to the Heritage Coordinator in determining and delivering outreach components of the capacity building exercises. It is recommended that the Outreach post-holder is in place and has clarity on the Watt Institution's priorities and resources in advance of the appointment of the Heritage Coordinator (Action 6). There would be a close working relationship between the Watt Institution Outreach Officer and the Heritage Coordinator:					

9.0 Watt Institution Action Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
C	Decision making and planning for outreach will form a part of a wider **activity programming process** for the Watt Institution, determining its aspirations and priorities and balancing programme delivery on-site with that which is delivered elsewhere. As a key cog in the Heritage Network Delivery Model, in parallel with this internal planning process the Watt Institution should also scope out **opportunities for collaborative initiatives with regional and national partners**, defining the support required from a partner and beginning discussions to progress specific projects. This could include but not be limited to borrowing items for exhibition, joint programming, participation in regional, national or thematic events, joint marketing campaigns and so on. Joint funding applications may result from these discussions. Discussions would take place at Heritage Forum meetings and subsequent Working Group meetings.	Clarity on internal audience engagement and programming priorities Facilitating a partnership approach to heritage engagement initiatives maximising the audience reach and benefit achieved.	Attendance and participation at all Heritage Forum meetings and all relevant Working Group meetings.	Internal priorities established by end of 2019 (in parallel with staff structure review and appointment of Outreach officer) 2019, Q3 (Jul – Sep), Watt Institution is a key contributor leading to the confirmation and implementation of proposed Leadership Framework and Network Delivery Model (Action 5). Partnership activities and potential funding applications discussed from 2020.	At a strategic level, the Inverclyde Council representatives in the Inverclyde Cultural Partnership. Support would be provided by the Great Places Project Officer and, once in post, the Watt Institution Outreach Officer.	8

9.0 Watt Institution Action Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
D.	Watt Institution staff will identify **thematic links between its collections and exhibitions and offers provided at other sites and organisations across Inverclyde**. Linkages will be promoted and capitalised upon to maximise sharing of audiences. This may include the creation of display boards in the Watt, trails, leaflets, activities and so on. To feed into Watt Institution activity planning and budgeting, within which outreach is anticipated as a key area of focus (Action B).	Enhanced awareness of and increased engagement with Watt Institution collections helping to address several socio-economic and cultural barriers to participation. Enhanced awareness of and increased engagement with other heritage assets/ collections across Inverclyde. Partnership development that will lead to future collaborative initiatives. Activity programme that reflects aspirations of the Watt Institution whilst firmly embedded in the shared, collective strategy for the sector.	Staff time to establish thematic links. Consultation as part of Interpretation Strategy funding. Budget to develop resources.	Thematic links should be identified in advance of the Interpretation Strategy (Action 8, late 2019 into 2020) using the development of the Strategy for further consultation/ discussion and piloting (2020 Q4 – 2021 Q2). Continue to develop methods of engagement in response to the findings of the Strategy and incorporated with the resultant action plan (2021). Use as a basis to inform Watt Institution activity planning and budgeting over 2020, 2021 and beyond.	Led by Libraries, Education Development and Arts Manager with input from Watt Institution staff, including the Outreach Officer.	3, 4, 5, 7, 8, 9

9.0 Watt Institution Action Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
SHORT TERM (2019, 2020, 2021)						
E	**Review Watt Institution's loan policy** and confirm artefacts which can be shared and conditions of this. Make collections status and availability information available to partners to make it easier for community organisations and others to borrow objects, subject to meeting all collections management and protection requirements (part of Action 9 above).	Greater access to and use of the Watt's Institution's collections by the wider community.	Staff time	Conduct review 2020 Q4 (Oct - Dec) to 2021 Q2 (Apr – Jun) after completion of Interpretation Strategy (Action 8) and as potential partner initiatives are being discussed (Action C).	Libraries, Education Development and Arts Manager	1, 3, 4, 5,
MEDIUM TERM (2022, 2023)						
F.	The Watt Institution would be a key partner in the **creation of a digital database,** sharing information pertaining to its collections and a key **participant in the associated digitisation training** (Action 17). With a 'train the trainer' approach, Watt Institution staff would share their skils with other across the sector in line with its role as a primary hub in the Network Delivery model. **Delivery of digitisation training and creating digital database** (Action 17) – the Watt Institution is a key delivery partner.	Resource sharing and positive promotion of Inverclyde's heritage assets. Watt Institution staff skilled in digitisation and in a position to train others.	Funding to set up database and deliver training. Budget TBC (dependent on the requirements). Watt Institution staff time as participants.	Funding secured as per Action 12. Database developed and training delivered from 2022 to 2023 Q1 (Jan – Mar) whilst Heritage Coordinator is in post.	Watt Institution staff presence on Working Group and training participants.	1, 4, 5, 6, 7, 8, 9

9.0 Watt Institution Action Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
MEDIUM TERM (2022, 2023)						
G.	**Training** for Watt Institution staff delivered as part of staff organisational integration and staff re-structure exercise (Action A) **rolled out to library staff across Inverclyde** as heritage engagement becomes a core feature of community centres and libraries across the region (Action 19). Training needs are identified as part of the Capacity and Skills Audit (Action 7).	Increased heritage engagement amongst locals including more diverse audiences currently prevented from participating due to actual and/ or perceived socio-economic or cultural barriers. Enhanced sense of relevance and pride felt amongst local towards their heritage. Volunteering/ skills development.	Staff time to devise and deliver training programmes	All training delivered by end of 2022.	Led by Libraries, Education Development and Arts Manager with input from Watt Institution Staff.	3, 4, 5, 9
H	Continued **expansion and development of Watt Institution outreach programming**, including delivery of partnership initiatives developed during the initial years of the Strategy (see Actions B, C and D) for which funding has now been secured.	More people engage with heritage Engaging with under-represented audiences particularly young people, socially isolated older people and those unable to engage in heritage activity through economic circumstance and/ or disability. With the delivery of partnership initiatives the reciprocal benefits of the Heritage Network and Heritage forum are realised helping to fuel its continuation.	Staff time to develop programmes in partnership	Initiatives contingent upon successful funding applications.	Inverclyde Cultural Partnership assume ultimate responsibility for setting up the Working Groups and approving actions that lead to and arrangements underpinning partnership funding applications. Support from Heritage Cooridnator is also key. Watt Institution has a responsibility to participate in meetings and commit to supporting the Leadership Framework and Delivery model. Outreach Officer time will be key.	3, 5, 6, 8, 9

9.0 Watt Institution Action Plan

	Action	What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
MEDIUM TERM (2022, 2023)						
I.	**Internal Monitoring and Evaluation** – Watt Institution specific formative assessment, with more specific and detailed metrics than that conducted for the Strategy overall (Action 22). This could be achieved via a series of surveys (with visitors, non-visitors, staff and volunteers). Coordination with Strategy focussed monitoring and evaluation activity is key.	Determining progress against internal aims and objectives. Setting targets and budgets for the coming years.	Watt Institution staff time. Coordination with Heritage Strategy evaluators.	Evaluation completed by the end of 2023.	Led by Libraries, Education Development and Arts Manager in coordination with Inverclyde Cultural Partnership self-evaluation sub-group.	All
LONG-TERM (2024 – end 2028)						
J.	Continue to deliver training, engagement activity and other support as the **core node in the Network Delivery Model**. In line with this continued reciprocal benefits are realised. By this point external partnerships should be developed (if not already in place) including with other local authorities and national organisations – particularly as Inverclyde develops as a visitor destination.	The Watt Institution cemented as the core node in Inverclyde's heritage network.	Effective partnership agreements and pooling resources	Sustaining the Network Delivery Model is adopted as a core Watt Institution strategic objective. Where appropriate formal partnership agreements made.	Head of Culture, Communities and Education Resources	2, 3, 4, 5, 6, 8, 9

9.0 Watt Institution Action Plan

Action		What do we want to achieve?	What is required? (Resources)	When and how will we get there? (Funding and Timetable)	Who will take responsibility? (Owner and Contributor)	Relevant Strategy Objective(s)
LONG-TERM (2024 – end 2028)						
K.	**Internal Summative Evaluation**	Determining progress against internal aims and objectives. Setting targets and budgets for the coming years.	Watt Institution staff time. Coordination with Heritage Strategy evaluators.	Completed in 2029	Led by Libraries, Education Development and Arts Manager	All

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INVERCLYDE ALLIANCE BOARD

MONDAY 18 MARCH 2019 – 1PM

BROOMHILL GARDENS AND COMMUNITY HUB, 46 MEARNS STREET, GREENOCK

Present: Councillors S McCabe (Chair), L Quinn, E Robertson and D Wilson (for G Brooks), (Inverclyde Council), Mr M Newlands (Scottish Enterprise), Mr P Zealey (Skills Development Scotland), Mr I Bruce (CVS/I3SF), Chief Superintendent G Crossan and Chief Inspector S Wright (Police Scotland), Group Manager D McCarrey (Scottish Fire and Rescue Service), Ms A MacPherson (NHS Greater Glasgow & Clyde), Mr A Comrie (Strathclyde Partnership for Transport) and Ms S Rae (West College Scotland).

In attendance: Mr A Fawcett, Mr S Allan, Ms R Binks (for Item 12 onwards), Mr S McNab, Mr G McGovern, Ms L McVey, Mr I Hanley, Mr H Scott, Ms G Baxter and Ms S Lang (Inverclyde Council), Ms S McAlees, Ms H Watson and Ms M McConnachie (Inverclyde HSCP).

Apologies for absence: Councillor G Brooks, Ms S Cairns (Scottish Government), Ms S Kelly (Skills Development Scotland), Ms K Wallace (Scottish Natural Heritage), Mr S McMillan MSP and Ms L Long (Inverclyde HSCP).

FINDINGS OF REPOPULATION STUDY AND ACTION PLAN

There was submitted a report by the Corporate Director Environment, Regeneration & Resources, Inverclyde Council on the progress made by the Repopulation Group with regard to the Repopulation Action Plan, funding allocations and the wider regeneration strategy. The report advised that a draft report by EKOS Consultants had been considered by the Repopulation Group on 25 January 2019 and that this set out the social economic profile of Inverclyde in respect of demographic trends, the labour market, businesses, input and output, workforce skills, the housing market etc. as well as the strategic and policy context with regard to the implications of depopulation, national performances and the wider strategic environment.

It was noted that the key emerging themes were improving marketing and communication, growing the housing market, achieving growth in the private sector, driving the concept of Inverclyde as "region for people", improvement of infrastructure and branding Inverclyde as a centre for culture and leisure.

Copies of the action plan which sought to deliver a number of initiatives across marketing, growing the housing market, growing local jobs and enabling infrastructure, creating a place for people of all ages and creating a centre for culture and leisure, were circulated at the meeting.

Mr John Kelly, Director, EKOS and Mr Scott Allan, Corporate Director Environment, Regeneration & Resources, Inverclyde Council made a presentation to the Board on the Repopulation Study (Appendix 1) then answered a number of questions from members, Mr Allan advised the Board that a report would be submitted to the Council's Environment & Regeneration Committee in May 2019 seeking approval for expenditure against the £500,000 allocation to repopulation within Earmarked Reserves.

Decided: that the work of the Repopulation Group be noted and that the action plan circulated be endorsed for detailed consideration by the Repopulation Group.

LOCAL OUTCOMES IMPROVEMENT PLAN ANNUAL REPORT 2018

There was submitted a report by the Chair of the Programme Board appending the finalised version of the Inverclyde Local Outcomes Improvement Plan Annual Report 2018 which sought to highlight progress in achieving the ambitions of the Inverclyde Alliance throughout

2017/18 using performance data, examples of activity from the priority outcomes and an update in respect of locality planning to demonstrate how the Alliance is working together to improve local outcomes.
The Board heard a presentation by Mr Ian Hanley, Corporate Policy Officer, Inverclyde Council (Appendix 2) and Mr Hanley then answered a number of questions from members.
Decided: that the development of and progress made in the Inverclyde Local Outcomes Improvement Annual Report 2018 be noted.

MINUTE OF MEETING OF 10 DECEMBER 2018

The minute of the meeting of 10 December 2018 was submitted and approved.

MATTERS ARISING

There were no separate matters arising.

INVERCLYDE ALCOHOL AND DRUG PARTNERSHIP ANNUAL REPORT 2017/18 PROGRAMME FOR GOVERNMENT 2018/19: ADDITIONAL INVESTMENT AND SERVICES TO REDUCE PROBLEM DRUG AND ALCOHOL USE – INVERCLYDE ALCOHOL AND DRUG PARTNERSHIP (IADP)

There was submitted a report by the Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership informing the Board of the IADP Annual Report 2017/18, including Scottish Government feedback, and additional funding allocated by the Scottish Government to ADPs from the Programme for Government 2018/19 to reduce problem alcohol and drug use.
Decided:
(1) that the contents of the IADP Annual Report 2017/18 and the Partnership's progress towards meeting Ministerial priorities for ADPs be noted;
(2) that the Scottish Government's feedback on the ADP's Annual Report be noted;
(3) that future ADP Annual Reports be submitted to the Alliance Board;
(4) that the Scottish Government Investment Programme to reduce problem alcohol and drug use be noted:
(5) that it be agreed to receive details of future Inverclyde ADP investment plans for spend related to the additional annual investment allocation of £280,477 awarded until 2020/21; and
(6) that there be a full presentation to the October meeting of the Alliance Board on the work of the ADP and that this include information on gambling addiction in Inverclyde.

LOCALITY PLANNING UPDATE – MARCH 2019

There was submitted a report by Chair of the Programme Board providing an update on the progress made in taking forward Locality Planning in Inverclyde.
Decided:
(1) that the progress made and issues identified in taking forward locality planning in Inverclyde be noted;
(2) that it be noted that the Locality Planning Strategic Implementation Group will oversee the development of the Locality Plans and the formation of locality groups which will link into the work of the Community Engagement and Capacity Building Network (CECBN) and the Aspiring Communities projects; and
(3) that an update report on Locality Planning, including schematics and detailed governance arrangements, be submitted to the next meeting of the Alliance Board.

INVERCLYDE AUTISM STRATEGY – PROGRESS TO IMPLEMENTATION

There was submitted a report by the Head of Inclusive Education, Culture & Communities, Inverclyde Council on the progress made in the implementation of Inverclyde's Autism Strategy 2014 and advising of the decision to move to a direct contract award model in order to deliver the strategy outcomes.

Decided:

(1) that the progress made to date in the implementation of Inverclyde's Autism Strategy be noted;

(2) that the change to the funding model to be used to achieve the stated Autism Strategy outcomes be noted; and

(3) that members consider their commitment to raising awareness of autism and to the training of frontline staff as outlined in Appendix 1 of the report.

INVERCLYDE CULTURAL PARTNERSHIP UPDATE – MARCH 2019

There was submitted a report by the Head of Inclusive Education, Culture & Communities, Inverclyde Council providing an update on the work of the Inverclyde Cultural Partnership.

Decided: that the progress made towards the outcomes set out in Inverclyde's Cultural Partnership Delivery Plan be noted.

DRAFT INVERCLYDE HSCP STRATEGIC PLAN 2019-2024

There was submitted a report by the Corporate Director (Chief Officer), Inverclyde Health & Social Care Partnership appending a draft of the second Inverclyde Health & Social Care Partnership (HSCP) Strategic Plan covering the timeframe from 2019 to 2024.

Decided: that the draft Strategic Plan 2019-2024 appended to the report be noted.

DRAFT LOCAL CHILD POVERTY ACTION REPORT TEMPLATE

There was submitted a report by the Corporate Policy, Performance & Partnership Manager, Inverclyde Council seeking approval of the draft Local Child Poverty Action Report template.

Decided:

(1) that approval be given to the themes and detail of the draft Local Action Report template appended to the report; and

(2) that the finalised Child Poverty Local Action Report 2018/19 be submitted to the June meeting of the Board for approval prior to its submission to the Scottish Government by 30 June 2019.

COMMUNITY SAFETY AND VIOLENCE PREVENTION INITIATIVE

There was submitted a report by the Service Manager, Community Learning & Development, Community Safety & Resilience and Sport, Inverclyde Council and Superintendent D Lang, Police Scotland setting out the partnership brief for a proposed area-based Community Safety and Violence Prevention Initiative in Inverclyde and seeking agreement from the Alliance Board to proceed with its implementation.

Decided:

(1) that approval be given to the development of an area-based Community Safety and Violence Prevention Initiative with Police Scotland and Inverclyde Council as lead partners;

(2) that delivery, monitoring and evaluation of the initiative be through the Inverclyde Community Safety Partnership; and

(3) that the initiative be delivered over a nine month period from 1 April 2019 followed by critical evaluation and full post-project evaluation within 12 months of completion.

DEVELOPING PARTICIPATORY BUDGETING IN INVERCLYDE

There was submitted a report by the Head of Inclusive Education, Culture & Communities, Inverclyde Council providing an update on the progress of the Phase 1 Participatory Budgeting (PB) model pilot previously agreed to develop approaches to support decentralisation of budgets and enhance community empowerment. The report also advised of the outcome of the public consultation events to support the award of grants to community groups from both the Community Fund (£350,000) and Community Initiative Fund (£100,000) through the agreed Community Choices Framework developed as Phase 1 of the Inverclyde Participatory Budgeting model.

Decided:

(1) that the contents of the report be noted and that the intended actions be approved;

(2) that the consultation, communications and engagement methods, audiences and key approaches outlined in the report and the timetable for voting through the proposed scrutiny events be noted;

(3) that the planned release of funding to the community through the Participatory Budgeting process after voting events in March 2019 be noted; and

(4) that a further report be submitted to the June meeting of the Alliance Board.

DATE OF NEXT MEETING

It was noted that the next meeting of the Alliance Board would take place at 1pm on Monday 17 June 2019 within Port Glasgow Town Hall and that this would include a presentation on child poverty.

APPENDIX 1

Inverclyde Re-Population Strategy

Inverclyde Alliance
18 March 2019

ekos
Economic and Social Development

Format of Presentation

- Background and context
- Inverclyde demographics
- Economic profile
- Inverclyde benchmarking
- Stakeholder perspectives
- Strategic framework
- Outcome Themes
- Action Plan

ekos
Economic and Social Development

Background and Context

- Issue is not new – long terms trends
- Role of Alliance - priority issue
- Research approach
  - Desk based – Inverclyde Baseline
  - Engaged with over 100 individuals across a wide range of organisations
    - Alliance members
    - Council officials and elected members
    - Education sector
    - Other public sector
    - Community sector
    - Employers;
    - Young people;
    - Developers/ investors.
- The overarching objective - an Inverclyde Repopulation Strategy and Action Plan that will halt the decline in population in the short term and engender an increase in population in the longer term.

ekos
Economic and Social Development

Inverclyde Demographics

- Health warning
- Where we are now
- Past trends
- Future projections
- Components of change
  - Migration
  - Birth rate
  - Mortality
- Implications for Inverclyde

ekos
Economic and Social Development

Economic Profile

- Economic activity
- Employment
- Business base
- Economic output
- Workforce and skills profile
- Regional assets
- Inverclyde housing market
- Implications

ekos
Economic and Social Development

Benchmarking Inverclyde

- Performs well in terms of:
  - perception of community, local services and schools;
- Medium well in terms of:
  - qualifications; employment/economic activity and GVA per worker
- Less well in terms of:
  - business density, levels of start-up and private sector jobs

See full Benchmarking RAG Report

ekos
Economic and Social Development

Stakeholder Perspectives

- Complex – no single driver or solution
- Strengths
  - Community
  - Education
  - Environment
  - Culture and leisure
  - Some sectors
- Key challenges
  - Housing mix
  - Types of jobs
  - Private business
  - Social trends
  - Views and perception
- Other Key drivers
  - Transport and infrastructure
  - Land and Property
  - Public sector leverage
- Range of solutions proposed

ekos
Economic and Social Development

Re-Population Strategy

- Strategic Priorities
  - Reversing demographic trends
  - Improving the image
  - Mix of housing
  - Growing private sector jobs
  - Regional and local approach
  - Securing funding
  - Spatial priority – East Greenock/Port Glasgow
  - Leveraging the public sector
  - Maximising leisure and culture
- Broad Operating Principles
  - Inclusive approach
  - Multi partner
  - Allow time
  - Clear role for private sector
  - Development and delivery stages
  - Managing expectations – prioritising
  - Monitoring

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Economic and Social Development

Strategic Outcome Themes

- OT 1: Marketing and communication
- OT 2: Growing the housing market
- OT 3: Growing local jobs
- OT 4: A place for people of all ages
- OT 5: Supporting and enabling infrastructure
- OT 6: A Centre for culture and leisure
- Cross Cutting Themes
  - CT1: Monitoring
  - CT2: Governance and delivery
  - CT3: Funding the Action Plan

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Economic and Social Development

Re-Population Action Plan

Actions	Allocation	Potential Partners	Year 1 Outcomes
OT 1: Marketing and communication activity			
1. Develop place promotion branding under the 'discover Inverclyde' theme being developed by the local area tourism partnership group 'Tourism Inverclyde' and expand the focus on Inverclyde as a place to visit, live and do business and support events. 2. Seek out opportunities to lever in additional support including financial and logistical from partners to promote Inverclyde's place offer. 3. Support tourism and visitor development in Inverclyde to encourage increased day visitors in line with Glasgow City Region tourism targets 4. Actively seek out high profile, cost effective promotional advertising, sponsorship and marketing opportunities to position Inverclyde as a positive destination for visitors, residents and business. 5. Create and implement a developer engagement plan to support growth in the housing market. 6. Create and deliver a business growth marketing campaign focussed on Inverclyde to supplement existing national Business Gateway promotional activity.	£160K	• Inverclyde Council • Inverclyde Tourist Group • Discover Inverclyde • Inverclyde Alliance • Talent Scotland •	• Marketing & communications plan completed and approved with funding in place and approved • Individual campaigns launched end year 1 • Developer/ investor engagement programme completed
OT 2: Growing the housing market			
1. Develop a private housing strategy with targets 2. Review private housing land supply 3. Identify development opportunities East Greenock / Port Glasgow - Eastern Gateway 4. Recruitment to communications team leader position including remit to fulfil the local developer/investor liaison contact role	£90K	• River Clyde Homes • Inverclyde Council • Private house builders	• Housing strategy with identified sites/ annual targets • Private sector confirmed interest and engagement • Development briefs for priority opportunities • Local masterplans completed
OT 3: Growing local jobs			
1. Increased resources for council business development support (including business gateway) for local SMEs growth 2. Complete review of public sector opportunities in terms of employment; procurement; community benefit; and local physical assets 3. Inverclyde enterprise Initiative - high growth start programme.	£100K	• Inverclyde Council • Business Gateway Service • Chamber of Commerce • Employer organisations	• New business service with business plan approved and funding secured. • Public asset policy developed, approved and with action plan
OT 4: A region for people of all ages			
1. Strategic skills investment plan and actions. 2. Work with DYW to expand education / business links. 3. Review option of a relocation office to provide support to those moving into Inverclyde 4. Work with HSCP to review opportunities for older workers	£50K	• Skills Development Scotland • West Scotland College • DYW Group • Inverclyde Education Service • Employability Service	• Local Skills Investment Plan developed and agreed • Associate action plan with funding commitments • Feasibility study into relocation office completed
OT 5: Enabling infrastructure			
1. Progress studies in partnership with trunk road authority in terms of accessibility. 2. Review business property portfolio and identify opportunities for small business. 3. Close working with the college to increase college roll in support of repopulation principles	£30K	• Inverclyde Council Roads/Property • SPT • Scot Rail • Transport Scotland	• Local Transport Action Plan - business cases developed • Business property review completed and launched • College Access Plan
OT 6: A centre for culture and leisure			
1. Review opportunities for increasing employment in culture and leisure sector and align the strategy and culture and leisure offer in line with repopulation aspirations and marketing activity at OT1.	£50K	• Inverclyde Leisure • Discover Inverclyde • Inverclyde Alliance	• Review of opportunities completed/ plan signed off and funded • Associated Action Plan

Additional Requirements

- The key outputs will be a series of strategies, action plans and business cases fully developed, costed and with identified funding sources ready to be delivered in Year 2.
- An additional £20k should be allocated to develop a detailed funding review of all potential future funding sources.

APPENDIX 2

Inverclyde Local Outcome Improvement Plan

Annual Report 2018

Report to Inverclyde Alliance Board
Monday 18th March 2019

Inverclyde Alliance

Presentation Outline

- Background to Inverclyde Local Outcome Improvement Plan
- Annual Report design
- Performance Management
- Progress on the three outcomes
- Locality Planning
- Questions for the Inverclyde Alliance Board

Inverclyde Alliance

Background to Inverclyde Local Outcome Improvement Plan

- The Community Empowerment (Scotland) Act 2015 provides a statutory duty to produce a local outcomes improvement plan (LOIP) which sets out the local outcomes which the CPP will prioritise for improvement.
- The LOIP identified three strategic priorities that the Alliance Board focuses on:
  - Population
  - Inequalities
  - Environment, Culture and Heritage
- A requirement to publish annual reports which, respectively, describe progress made towards ambitions in the LOIP.

Inverclyde Alliance

The Three Strategic Priorities

Population

Inverclyde's population will be stable and sustainable with an appropriate balance of socio - economic groups that is conducive to local economic prosperity and longer term population growth.

Inequalities

There will be low levels of poverty and deprivation and the gap in income and health between the richest and poorest members of our communities will be reduced.

Environment, Culture and Heritage

Inverclyde's environment, culture and heritage will be protected and enhanced to create a better place for all Inverclyde residents and an attractive place in which to live, work and visit.

Inverclyde Alliance

Background to Inverclyde Local Outcome Improvement Plan

- The Community Empowerment (Scotland) Act 2015 provides a statutory duty to produce a local outcomes improvement plan (LOIP) which sets out the local outcomes which the CPP will prioritise for improvement.
- The LOIP identified three strategic priorities that the Alliance Board focuses on:
  - Population
  - Inequalities
  - Environment, Culture and Heritage
- A requirement to publish annual reports which, respectively, describe progress made towards ambitions in the LOIP.

Inverclyde Alliance

Annual Report Design

- A review of the Strategic Needs Analysis
- Each Summary Chapter
  - Brief Highlight of performance measures
  - The approaches deployed
  - What will be different for communities in 10 years?
  - A commentary of activity in the previous year
- Locality Planning progress
- Performance Measures update

Inverclyde Alliance

Performance Measures

Total Population of Inverclyde

78,760

This is a decrease of 0.5%from the previous year (2016)

Satisfaction with Inverclyde as a place to live (perception based)

74%

A decrease of1% from the previous Citizens' Panel Survey in 2016.

Average gross weekly wage

£549.60

This is an increase on the previous year and above the Scottish average of £547.40.

Total Cruise Ship arrival and passengers

61 ships and 126,232 passengers

An increase in both from the previous year.

Percentage of the population with no qualification

12.2%

A reduction from the previous years figures in 2016 and the lowest ever percentage since recording began in 2004

Number of Children provided with a free meal during school holidays

1518

Free meals provided during spring/summer/autumn 2018 holidays. An increase from 2016 and 2017

Total Amount of Derelict Land

155.27ha

A reduction from 155.96ha from the previous years data in 2016/17

Deliberate Secondary Fires

340

A reduction from 557 in the previous year (2016/17)

Cultural Engagements (perception based)

87%

Cultural engagements by adults in the previous year. This is down from 91% in the 2016/17 year.

Population Outcome

Total Population of Inverclyde

78,760

This is a decrease of 0.5%from the previous year (2016)

Civilian-in-Migration

1518

A small reduction of in-migration compared to 1530 in the previous year (2016/17). The first time since 2013/14 that in- migration exceeds out-migration

Civilian-Out-Migration

1508

A reduction in out migration compared to 1586 in the previous year (2016/17)

Satisfaction with Inverclyde as a place to live

74%

A decrease of1% from the previous Citizens' Panel Survey in 2016.

Satisfaction with neighbourhoods as a place to live (perception based)

86%

An increase of 5% from the previous Citizens' Panel Survey in 2016.

Average gross weekly wage

£549.60

This is an increase on the previous year and above the Scottish average of £547.40.

Total Cruise Ship arrival and passengers

61 ships and 126,232 passengers

An increase in both from the previous year.

Percentage of Business Gateway start-ups per 10,000 population

12.8

Below the Scottish average of 16.6 and a reduction from the previous year rate of 19.2 (2016/17)

Inverclyde Alliance

Population Outcome

- In 2018 The Population Partnership commissioned a study that supports the development of a repopulation strategy for Inverclyde.
- The Population Partnership has identified opportunities for population through the Eastern Gateway Strategic Regeneration Forum.
- As part of the Glasgow City Region City Deal Inverclyde Council and Peel Ports are delivering a joint venture aimed at increasing the number of cruise ship visitors to Scotland.
- Inverclyde is currently benefitting from significant investment in new affordable housing which will address the housing priorities in our area.

Inverclyde Alliance

Inequalities Outcome

Percentage of the population with no qualification

12.2%

A reduction from the previous years figures in 2016 and the lowest ever percentage since recording began in 2004

Number of Children provided with a free meal during school holidays

1518

Free meals provided during spring/summer/autumn 2018 holidays. An increase from 2016 and 2017

Increase in Life Expectancy Rates for males and an increase in Life Expectancy for females in least deprived areas

Male Least Deprived/Most Deprived and Female Least deprived all increase from previous results in 2011/15, reduction from 77 years to 76.8 years for Female most deprived

Percentage of workless Households in Inverclyde

20%

Defined as where no-one aged 16 years and over is in employment. These members may be unemployed or economically inactive. This figure is from 2017 and is reduction from 25.1% in 2016.

Percentage of people 16-64 who are unemployed

5.5%

Figure based on April 2018 an increase from the previous year (4.3%)

Percentage of households estimated to be in fuel poverty

38%

A year on year reduction from the previous two periods (2012/14 & 2013/15) but above the Scottish average of 31%.

Inverclyde Alliance

Inequalities Outcome

- In October 2018 an ‘Inverclyde Every Child, Every Chance’ poverty event was held attracting 103 delegates from Inverclyde Council, Inverclyde HSCP and third sector organisations.
- The Inverclyde Child Poverty Action Group established in 2018 seeks to be a champion of child poverty and will oversee the actions, development and implementation of the Inverclyde as well as to oversee funding to mitigate child poverty in Inverclyde.
- In September 2018 the Inverclyde Council Education & Communities Committee supported a commitment to roll out the provision of free sanitary products.
- The Inverclyde Regeneration and Employability Partnership has prioritised a need to engage with the workless households to ascertain what their aspirations are, what support they require and the barriers to employment.

Inverclyde Alliance

Environment, Culture & Heritage Outcome

Percentage of people cycling (perception based)

24.2%

This is a reduction from 25.9% in the previous years data in February 2017

Deliberate Secondary Fires

340

A reduction from 557 in the previous year (2016/17)

Total Amount of Derelict Land

155.27ha

A reduction from 155.96ha from the previous years data in 2016/17

Cultural Engagements (perception based)

87%

Cultural engagements by adults in the previous year. This is down from 91% in the 2016/17 year.

Percentage of adults within 5 minute walking distance to nearest useable greenspace (perception based)

58%

A reduction from 68% from the previous years data in 2016.

Inverclyde Alliance

Environment, Culture & Heritage Outcome

- The introduction of an Active Travel Strategy in Inverclyde which sets a vision of making active travel a realistic, convenient choice for making every day journeys in Inverclyde.
- The use of funding from the Smarter Choices, Smarter Places programmes that has resulted in the opening of the Bothy which provides cycling and walking activities to local residents and visitors.
- The creation of a Cultural Partnership which will co-ordinate the delivery of the Inverclyde Cultural Strategy.
- A £200k HLF award to deliver *Stories Frae the Street*

Inverclyde Alliance

Locality Planning

- Inverclyde Community Planning Partnership is required by the Community Empowerment (Scotland) Act 2015 to produce Locality Plans for the areas of Inverclyde experiencing the greatest inequalities.
- In **Port Glasgow** residents from Port Glasgow in recovery or living with Dementia wanted to have a resource within their area.
- In **Greenock East & Central** Your Voice and CVS organised and facilitated a series of engagement events between Dec 17 and Mar 18
- In **Greenock South and South West** Activ8ourplace is a project funded by the Aspiring Communities Fund for the European Social Fund and the Scottish Government.

Inverclyde Alliance

Going Forward

- Sections 8 and 12 of the 2015 Act require the CPP to publish annual reports which, **respectively, describe progress made towards ambitions in their LOIP** and locality plans. Progress reports should provide communities with **an assessment of progress that is accurate and current**. The annual progress report on the LOIP should also **include an assessment of how the CPP and community planning partners have participated with community bodies during the reporting year, and how effective that has been in enabling community bodies to shape and influence community planning** (s.8(2)(b) refers).
- Most of the work in 2018 can be described as 'planning'. The Partnership Action Groups have identified a need for an evidence base which has resulted in the completion of or commissioning of studies. It is anticipated that during 2019 the Partnership Action Group will begin to create improvement action plans.
- An opportunity to review performance measures

Inverclyde Alliance

Inverclyde Alliance

AGENDA ITEM NO: 5

Report To:	**Inverclyde Alliance Board**	**Date:**	**17 June 2019**
Report By:	**Aubrey Fawcett Chair of Programme Board**	**Report No:**	
Contact Officer:	**Louise McVey**	**Contact No:**	**01475 712042**
Subject:	**Inverclyde Local Outcome Improvement Plan Quarterly Progress Report June 2019**		

1.0 PURPOSE

1.1 The purpose of this report is to provide the Alliance Board with an update on the progress that has been made in implementing the Local Outcome Improvement Plan (LOIP) 2017-2022.

2.0 SUMMARY

2.1 The Community Planning element of the Community Empowerment (Scotland) Act 2015, places a statutory responsibility on the Inverclyde Alliance to develop a Local Outcome Improvement Plan (LOIP). The Inverclyde Local Outcomes Improvement Plan was approved by the Inverclyde Alliance at its Board Meeting on 11 December 2017.

2.2 The 2015 Act requires Community Planning Partnerships to annually review and report on progress towards their LOIP and locality plans, and keep the continued stability of these plans under review.

2.3 The 2018/19 annual report was approved by the Inverclyde Alliance Board in March 2019 and it highlights progress in achieving the ambitions of the Board throughout 2017/18, using performance data, examples of activity from the priority outcomes and an update in regard to locality planning to demonstrate how we are working together to improve local outcomes.

2.4 Based on the evidence and cross priority outcomes the Partnership Action Group leads have taken the opportunity to meet to discuss action within localities, to share outcome planning and funding opportunities.

3.0 RECOMMENDATIONS

3.1 It is recommended that the Alliance Board:
a. notes the progress that has been made towards continuous improvement in achieving the LOIP priorities.
b. agrees that the Environment Partnership leads on the strategic theme of Greenspace and the subsequent actions.

Aubrey Fawcett
Chair, Programme Board
Chief Executive, Inverclyde Council

4.0 BACKGROUND

4.1 Inverclyde's LOIP was formally approved by the Alliance Board at its meeting on the 11th of December 2017. The LOIP contains three strategic priorities; Population; Reducing Inequalities and Environment, Culture and Heritage.

4.2 The 2018/19 annual report was approved by the Inverclyde Alliance Board in March 2019 and it highlights progress in achieving the ambitions of the Board throughout 2017/18, using performance data, examples of activity from the priority outcomes and an update in regard to locality planning to demonstrate how we are working together to improve local outcomes.

4.3 Two of the strategic priorities within the LOIP will be delivered by the Population Partnership and the Environment and Cultural Partnerships.

4.4 The reducing inequalities priority will be delivered through the Locality Planning process and a Strategic Implementation Group has been established to oversee this process. Further detail of the progress made with regard to locality planning is the subject of a separate report on the agenda of this meeting.

5.0 Partnership Action Groups - Updates

5.1 **Lead Officers Group**

The lead officers from three of the priority groups have taken the opportunity to meet and discuss cross cutting themes and funding opportunities that would impact on achieving the Inverclyde Outcome Improvement Plans. It was agreed that the lead officers should prepare and develop a project proposal that is ready for any funding opportunity that may arise from external organisations and partners. Preparing a project proposal in advance of funding becoming available would enable consultation and engagement with local communities, services and organisations to ensure that it meets the needs and expectations of the communities and organisations. The group will meet again to plan and cost a proposal that will be ready for future funding opportunities.

5.2 **Population Partnership**

The Repopulation Group has prepared an action plan to progress repopulation in Inverclyde including specific proposals against the budget allocation on £500,000 towards repopulation from earmarked reserves. The report by the consultants was circulated to the Alliance Board and sets out the social economic profile of Inverclyde in respect of demographic trends, labour market, businesses, input and output, workforce skills, housing market etc. It also sets out the strategic and policy context with respect to the implications of depopulation, national performances and the wider strategic environment.

5.3 The key findings which emerged from the study was the need to improve marketing and communication, grow the housing market, achieve growth in the private sector, drive the concept of Inverclyde as a region for all people, improve infrastructure and brand Inverclyde as centre for culture and leisure. There were specific concerns around the fragmented nature of marketing and the mixture of messages from different sources.

5.4 The action plan seeks to deliver a number of initiatives across marketing, growing the housing market, growing local jobs and enabling infrastructure, creating a place for people of all ages and creating a centre for culture and leisure. The various actions require partnership working but will be led by the most relevant individual or organisation. The action plan describes the specific actions with associated timescales and includes a budget allocation. In line with the priorities identified by the Group the most significant allocation is towards marketing and communication activities. It is significant to note however the overlap with the work of the cultural partnership and the need to capitalise on culture and leisure activities in respect of regeneration.

5.3 **Environment Partnership**

The Environment Partnership has identified actions within the Inverclyde Active Living Strategy

(2017-2022) previously endorsed by the Inverclyde Alliance. The Environment Partnership seek the agreement of the Alliance Board to lead on the strategic theme on Greenspace and actions in respect of:

- The Greenspace resource is improved within areas of greenspace to better facilitate activities such as walking, cycling and community gardens
- Inverclyde residents and visitors value and use areas of greenspace for health promoting activities
- Inverclyde residents and visitors make regular use of greenspace for commuting, play and leisure activities
- Residents and visitors to Inverclyde are aware of the greenspaces in their areas and know how to access them

The Community Empowerment (Scotland) Act 2015 (The Act) Part 9 places a duty on every local authority to produce a food-growing strategy which must be published by 1st April 2020 that is within two years of Section 119 of The Act coming into force.

Part 9 of The Act lays a number of statutory duties on local authorities including:

- a requirement to have regard to any guidance issued by Scottish Ministers about the carrying out of functions set out in Part 9 of The Act (including the Food-growing strategy guidance and any other statutory guidance issued by the Scottish Ministers to local authorities regarding sections of Part 9;
- a duty to maintain an allotments waiting list;
- when certain trigger points of demand are reached, a duty to take reasonable steps to ensure: (1)that the number of people on a waiting list for an allotment does not exceed half the total number of allotments owned and leased by the authority; and (2) that a person on the list does not wait more than five years for an allotment;
- a requirement to make allotment site regulations;
- a duty to develop a food-growing strategy. This includes the identification of land for allotments and other community growing and describing how the authority will meet demand for such land; a duty to produce an allotments report for its area each year. This includes such matters as the location and size of each allotment site and the number of allotments on each site.

Whilst the Environment Partnership acknowledges the legislative drivers of The Act are with Inverclyde Council, there is consensus within the Partnership that the creation and delivery of the food growing strategy should be delivered in a partnership approach. This fits with the Scottish Government guidance which highlights 'Local authority officers should, in preparing the authority's food growing strategy, engage with a wide range of stakeholders' the guidance includes a list of appropriate stakeholders from public sector, community led organisations with an interest in food-growing and those community members with an interest in food-growing.

5.4 **Cultural Partnership**

An update on the work of the Inverclyde Cultural Partnership and the draft Heritage Strategy for Inverclyde will be the subject of a separate report on the agenda of this meeting.

6.0 IMPLICATIONS

6.1 Legal: none at present
Finance: none at present
Human Resources: none at present
Equality and Diversity: none at present
Population: Ppopulation remains a key priority within the Inverclyde Outcomes Improvement Plan.
Inequalities: the Locality Partnerships will be working specifically to tackle inequalities on a geographic basis.

7.0 CONSULTATIONS

7.1 n/a

8.0 LIST OF BACKGROUND PAPERS

8.1 n/a

Inverclyde Alliance

AGENDA ITEM NO: 6

Report To:	**Inverclyde Alliance Board**	**Date:**	**17 June 2019**
Report By:	**Aubrey Fawcett Chair of Programme Board**	**Report No:**	
Contact Officer:	**Louise McVey Corporate Policy, Performance and Partnership Manager**	**Contact No:**	**01475 712042**
Subject:	**Locality Planning Update**		

1.0 PURPOSE

1.1 The purpose of this report is to update the Inverclyde Alliance Board on the progress that has been made in taking forward Locality Planning in Inverclyde.

2.0 SUMMARY

2.1 The Community Empowerment (Scotland) Act 2015 places a statutory requirement on the Inverclyde Alliance to develop locality plans with the communities of Inverclyde that experience the greatest inequalities. It also requires Community Planning Partners to demonstrate that they are making a significant difference to the lives of their residents through the planning and delivery of better outcomes and the involvement of community bodies at all stages of community planning.

2.2 The Strategic Needs Assessment, carried out in 2017, alongside the community feedback from the 'Our Place Our Future' engagement provided quantitative and qualitative evidence of need and the issues of greatest importance to residents. This, in turn, helped to identify the outcomes that need to be improved in order to reduce the inequalities that exist in our areas of greatest deprivation, i.e. Port Glasgow, Greenock East and Central and Greenock South/South West.

2.3 In addition to the original 3 Locality Plans for the areas noted in 2.2, work has now commenced on informing the locality plans for the remaining three localities i.e. Kilmacolm & Quarriers, Greenock West and Gourock and Inverkip and Wemyss Bay. The focus will be on building capacity within communities to enable them to use their own assets and skills to address local challenges and any issues that may contribute to inequalities.

2.4 The Public Bodies Joint Working (Scotland) Act 2014 specified that Health and Social Care Partnerships should set up two or more localities to enable service planning at local geographies within natural communities with the aim of improving health, meeting demand on services and addressing the widening gap in health inequalities. The Inverclyde HSCP has recently developed a new Strategic Plan (2019-24), which is based on engagement, consultation and participation. This has resulted in the HSCP aiming to develop six locality planning groups, in line with the same localities agreed by the Inverclyde Alliance. The localities map for Inverclyde is attached as Appendix 1.

2.5 All Integration Joint Boards are required to establish a Strategic Planning Group (SPG) with

Public Bodies. The Inverclyde SPG has been established for some time and in line with statutory guidance, includes representation from within the partnership. The Corporate Director (Chief Officer) was nominated to chair. The Strategic Planning Group has responsibility for governance and accountability for the emerging locality planning groups until they are established and delivering local outcomes. Progress reports from the SIG regarding locality planning will be provided to each meeting of Inverclyde Alliance and the IJB to ensure they meet their respective legislative requirements.

2.6 In addition, Inverclyde HSCP has appointed a manager from Argyll and Bute HSCP on a one year secondment, to assist in taking forward locality planning until 31 March 2020. The remit of the seconded Localities and Engagement Officer includes supporting the establishment and development of six Locality Planning Groups in line with legislation and locally agreed strategies.

2.7 Locality Planning is one of the key areas for development within the CLD 3 year Strategic Plan 2018-2021 and a recommendation from the recent HMIE Inspection (Jan 2019). Inverclyde Council Community Learning and Development Service (CLD) have committed an officer to work in partnership with the Community, HSCP Localities and Engagement Officer and Inverclyde Alliance Policy Officers to develop community led locality groups within the six locality areas. Support has been offered from third sector organisations to engage communities in discussions and to bring people together across the six locality areas.

2.8 In order to ensure a wide representation of community members, promotional work of the events within neighbourhoods will begin in June and continue into July and early August 2019. Engaging localities in this process has been challenging in the past, therefore it is important to give the time leading up to the event, to engage people in the process and to ensure ongoing participation as the locality groups develop. Throughout the participation and engagement stage, officers will be identifying and encouraging community champions and volunteers to take a joint co-chair role in the locality planning groups. The outcome will be that the community within each locality will create and lead a clear action plan with vision and outcomes which will be embedded in future processes.

2.9 Inverclyde Alliance and the HSCP are committed to supporting locality planning and preparatory work is underway to organise six community- led development days, planned for the end of August 2019. These sessions will bring together a range of community individuals and groups to build their capacity and capability, to progress key priorities which will enable the development of the locality action plans, in line with the Community Empowerment (Scotland) Act 2015 and the Public Bodies Joint Working (Scotland) Act 2014.

2.10 After the development days in August the locality action plans will be collated, reviewed and prepared and the results reported back to the community for clarification and approval. Continuous engagement with the localities will keep communities updated on progress and create ongoing participation in locality planning. The final six action plans will be reported to the Inverclyde Alliance Board on 9 December 2019. The expected outcomes from the Action Plans include a shift towards communities becoming more proactive and empowered in their community/locality, the creation of more people interested in participating and increased local capacity to develop and manage locality community projects.

2.11 A process map outlining the stages that have been taken and will be implemented over the next two months is included in Appendix 2 and the timeline for progressing this is attached as appendix 3.

3.0 RECOMMENDATIONS

It is recommended that the Alliance Board:

a. Notes the progress in developing locality planning groups and the delivery of locality action plans.
b. Notes that the Locality Planning Groups once established and action plans

developed, will be governed by the Strategic Planning Group which will provide progress reports to Inverclyde Alliance and the IJB as part of the performance management framework.

c. Remits it to the leaders of each of the Partnership Action Groups to provide updates on community- led locality action plans back to their strategic groups.

Aubrey Fawcett
Chair of Programme Board

4.0 BACKGROUND

4.1 The Community Empowerment (Scotland) Act 2015 places a statutory requirement on the Inverclyde Alliance to develop locality plans for the communities of Inverclyde that experience the greatest inequalities and for Community Planning Partners to demonstrate that they are making significant difference to the lives of their residents through the planning and delivery of local outcomes and the involvement of communities bodies at all stages of community planning.

4.2 Analysis of the data in the Inverclyde Strategic Needs Assessment showed that the areas of Inverclyde suffering the greatest levels of inequality are Port Glasgow, Greenock East and Central and Greenock South/South West. However, work has now commenced on informing the locality plans for the remaining three localities. The focus will be on building capacity within communities to enable them to use their own assets and skills to address local challenges and any issues that may contribute to inequalities.

4.3 The Public Bodies Joint Working (Scotland) Act 2014 specified that Health and Social Care Partnerships set up two or more localities to enable service planning at local geographies within natural communities with the aim of improving health, meeting demand and tackling the widening gap in health inequalities

4.4 All Integration Joint Boards are required to establish a Strategic Planning Group (SPG) with Public Bodies. The Inverclyde SPG has been established for some time and in line with statutory guidance, includes representation from within the Partnership and local communities, the Corporate Director (Chief Officer) was nominated to chair. The SPG is accountable to the Integration Joint Board for the delivery of the Strategic Plan. Once the Locality Planning Groups are established and plans in place, the SPG will consider how they support the governance to Inverclyde Alliance and the IJB ensuring they meet their respective legislative requirements.

5.0 PROGRESS TO DATE

5.1 Inverclyde Alliance is committed to the development of community-led locality action plans in partnership with communities, through co-production and asset based community development. Work with communities has been ongoing via Aspiring Communities funded activity, which is being used to inform the Locality Plans for Port Glasgow, Greenock East and Central and Greenock South and South West. This is in addition to the large scale community engagement survey, 'Our Place, Our Future', which fed into the strategic priorities in the Inverclyde Outcome Improvement Plan. The feedback from 'Our Place Our Future' has been has been broken down to locality level to provide a more detailed picture of community need and aspiration.

5.2 A discussion with members of the South/South West Locality took place in December 2018. Tthis discussion gave Inverclyde Alliance partners and communities the opportunity to clarify priorities within the South/South/West locality as previously highlighted in the Our Place Our Future consultation carried out during 2017.

5.3 Initial conversations with communities have highlighted the difficulties in engaging on large, complex issues, such as inequalities. Communities are far more likely to engage if there is a specific topic or concerning issue for them.

5.4 Locality Planning is one of the key areas for development within the CLD 3 year Strategic Plan 2018-2021 and a recommendation from the recent HMIE Inspection (Jan 2019). Inverclyde Council Community Learning and Development Service (CLD) has committed an officer to work in partnership with the Community, HSCP Localities and Engagement Officer and Inverclyde Alliance Policy Officers to develop community-led locality groups within the six locality areas. Support has been offered from third sector organisations to engage communities in discussions and to bring people together across the six locality areas.

5.5 Inverclyde HSCP will be subject to a Strategic Inspection for Integration within the next eighteen months. A robust locality structure that ensures all of the population is involved in

supporting transformation in Health and Social Care will form part of the inspection.

5.6 In addition, Inverclyde HSCP has appointed a senior manager from Argyll and Bute HSCP on a one year secondment, to assist in taking forward locality planning until 31 March 2020. The remit of the seconded Localities and Engagement Officer includes supporting the establishment and development of six Locality Planning Groups in line with legislation and locally agreed strategies.

5.7 Preparatory work is underway to organise six community- led locality planning development sessions, planned for the end of August 2019. It is anticipated that these sessions will bring together a range of community individuals and groups to build their capacity and capability, to progress key priorities which will enable the development of the locality action plans, in line with the Community Empowerment (Scotland) Act 2015 and the Public Bodies Joint Working (Scotland) Act 2014.

5.8 In order to ensure a wide representation of community members, promotional work on the events within neighbourhoods will begin in June and continue into July and early August 2019. Engaging localities in this process has been challenging in the past, therefore it is important to give the time leading up to the event, to engage people in the process and to ensure ongoing participation as the locality groups develop. Throughout the participation and engagement stage, officers will be identifying and encouraging community champions and volunteers to take a joint co-chair role in the locality planning groups. The outcome will be that the community within each locality will create and lead a clear action plan with vision and outcomes which will be embedded in future processes.

5.9 After the development days in August, the locality action plans will be collated, reviewed and prepared and the results reported back to the community. Continuous engagement with the localities will keep communities updated on progress and create ongoing participation in locality planning. The final six action plans will be reported to the Inverclyde Alliance Board on 9 December 2019. The expected outcomes from the Action Plans include a shift towards communities becoming more proactive and empowered in their community/locality, the creation of more people interested in participating and increased local capacity to develop and manage locality community projects.

5.10 The locality group's membership should include the community, voluntary and third sector organisations and appropriate officers from the Inverclyde Alliance to ensure that the three priorities are being achieved for the area.

5.11 A process map outlining the stages that have been taken and will be implemented over the next two months is included in Appendix 2 and the timeline for progressing this is attached as Appendix 3.

6.0 IMPLICATIONS

6.1 **Legal:** none at present

Finance: none at present

Human Resources: none at present

Equality and Diversity: Engaging with people who have protected characteristics will be part of the engagement processes.

Repopulation: Engaging local people in the development of the locality plans and developing plans that will help to make positive differences to areas in Inverclyde will encourage people to remain in the area and could help to attract people from other areas.

Inequalities: The locality plans will focus on tackling inequalities in the areas experiencing the

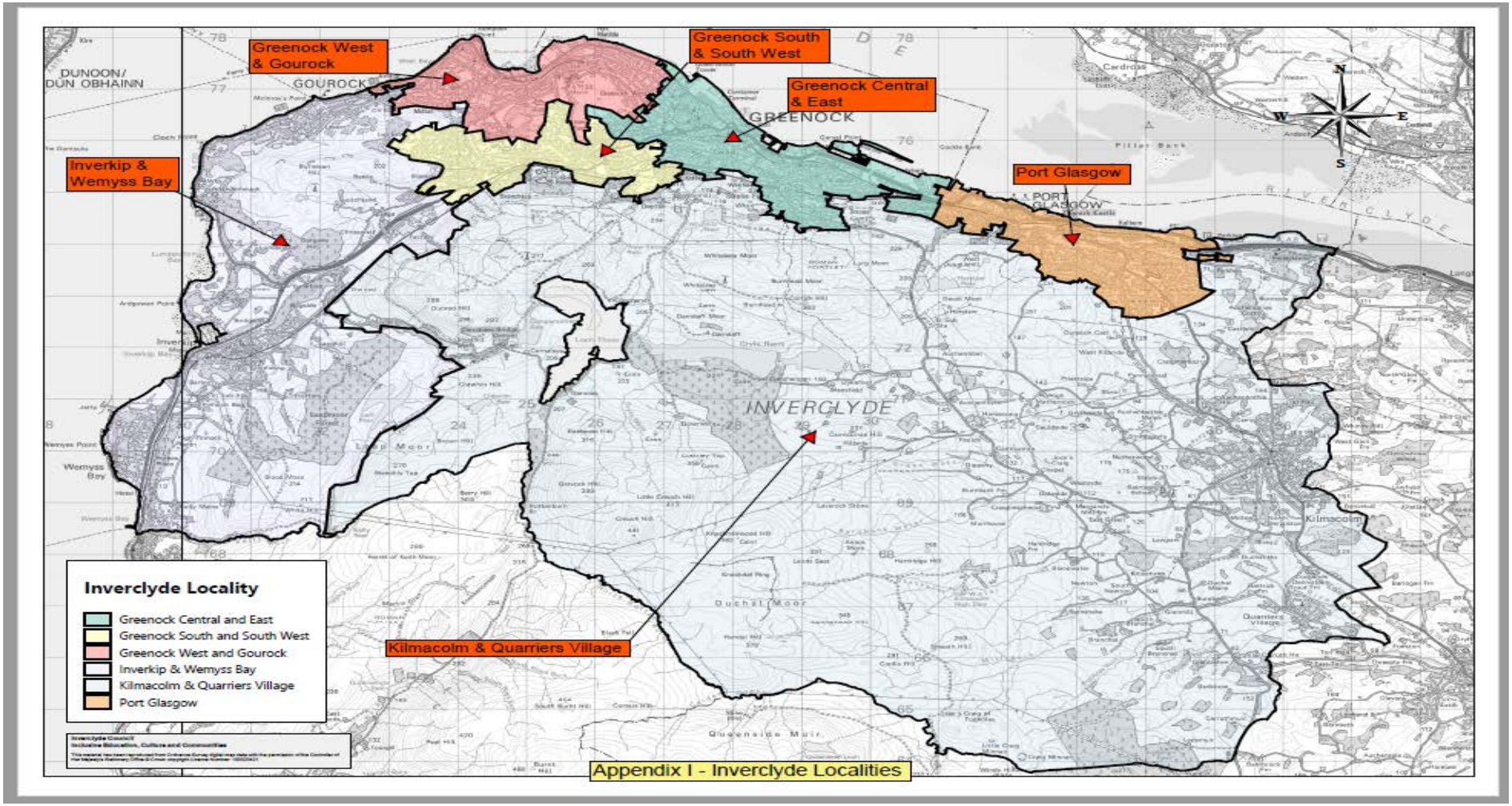
greatest inequality of outcome.

7.0 CONSULTATIONS

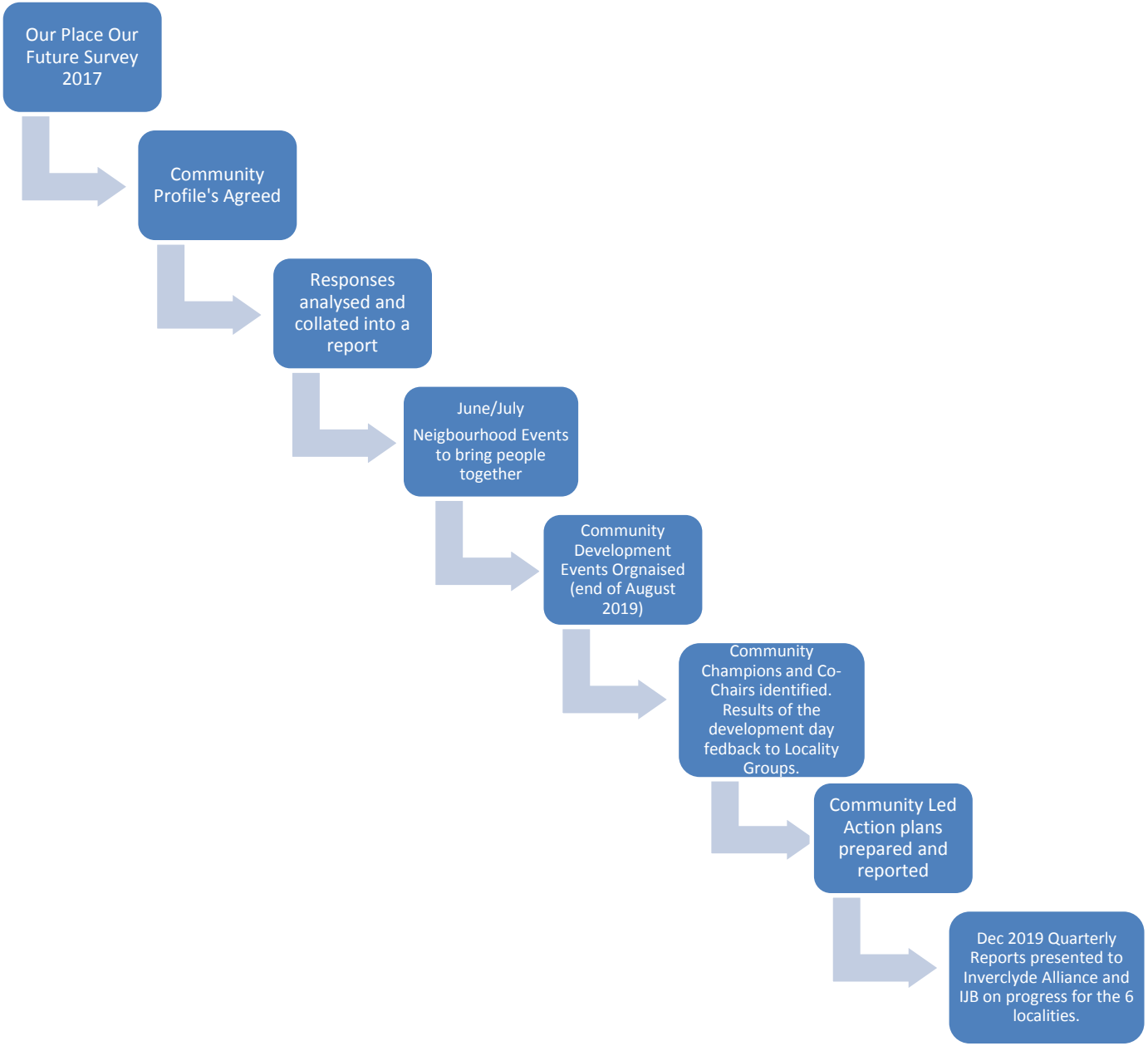
7.1 The Strategic Implementation Group was involved in the work outlined above. The members of the Community Engagement and Capacity Building Network were also involved in the development of this work.

8.0 LIST OF BACKGROUND PAPERS

8.1 Inverclyde Alliance Board 1 October 2019; Locality Planning Update
Inverclyde Alliance Board 10 December 2019; Locality Planning Update
Inverclyde Alliance Board 18 March 2019: Locality Planning Update


Greenock West & Gourock
Greenock South & South West
Greenock Central & East
Inverkip & Wemyss Bay
Port Glasgow
Kilmacolm & Quarriers Village
DUNOON/ DUN OBHAINN
GOUROCK
GREENOCK
PORT GLASGOW
INVERCLYDE
Kilmacolm
Inverclyde Locality
Greenock Central and East
Greenock South and South West
Greenock West and Gourock
Inverkip & Wemyss Bay
Kilmacolm & Quarriers Village
Port Glasgow
Appendix I - Inverclyde Localities

Process Map/Timeline to Implement Locality Planning 2019



Appendix 3

LOCALITY PLANNING GROUPS (LPGs) TIMETABLE

Date	**Regular Business**
June/July / August	Information/Communication (visual) agreed and engagement and discussion with existing Neighbourhoods and community events in each LGP, encouraging a range of individuals and groups to come together. Electronic and Social Media opportunities expanded and explored to encourage new people and groups to become involved and engaged in the locality planning process.
August 2019	Community Celebration- LPG development sessions in each locality – Establish LPGs, membership and agree Terms of Reference Celebrate the assets of the community, publicise the community profiles (Public health profile, Socio-economics profile, other key documents & Strategies)
September 2019	LPG continued community support development, engaging, participation and planning Draft indicative Local Action Plan Review support available including all place work, profiles ,plans Other information / resources
October 2019	Review and progress Local Action Plans Support capability and capacity development of LPG
December 2019	Review and progress Local Action Plans report to Inverclyde Alliance
January 2020	Review and progress Local Action Plans with Communities/Locality Groups to Strategic Planning Group
February 2020	Review and progress Local Action Plans with Communities/Locality Groups
March 2020	Review and progress Local Action Plans with Communities/Locality Groups – actions / improvements for 2020 onwards

Inverclyde Alliance

AGENDA ITEM NO: 7

Report To:	**Inverclyde Alliance Board**	**Date:**	**17 June 2019**
Report By:	**Corporate Director Education, Communities and Organisation Development**	**Report No:**	
Contact Officer:	**Hugh Scott, Service Manager**	**Contact No:**	**01475 715450**
Subject:	**Inspection of Local Authorities – Community Learning and Development in Inverclyde**		

1.0 PURPOSE

1.1 The purpose of this report is to inform the Inverclyde Alliance Board of the recent Education Scotland Inspection of Community Learning and Development, focusing on a two-phased approach - Strategic and Place Based inspections.

2.0 SUMMARY

2.1 Community Learning and Development (CLD) was inspected in a two-phased approach under the new Education Scotland model of 7 days inspection, with two days strategic leadership focus and five days community based inspection between January and February 2019.

2.2 The inspection focused on progress being by made Community Learning and Development (CLD) partners in contributing to current and evolving national policy objectives such as closing the poverty-related attainment gap; prevention; reducing social isolation; tackling health inequalities; and empowering communities.

2.3 The report published on 11 March 2019 outlines the major strengths within practices and interventions that are having significant improving outcomes across the community in Inverclyde.

2.4 Education Scotland notes that the evidence and evaluation indicate that Community Learning and Development (CLD) in Inverclyde is making good progress in improving learning, raising attainment and closing the poverty-related attainment, empowering communities.

2.5 The report also noted that Leaders across Inverclyde Council demonstrate strong leadership for CLD, and that embedded vision, values and aims are well understood across the senior leaders, elected members and partners.

2.6 It is recognised that there is a strong culture of partnership working evident amongst partner working in CLD activity. It is engaging in the Scottish Attainment Challenge, work in schools is becoming more embedded, especially in the field of family learning approaches and this is starting to lead to improvement and better engagement with parents.

2.7 The report acknowledges the strong commitment to continuing professional development through regular time set aside to help staff develop their practice. There is very good access to training and development opportunities and staff are highly motived across the CLD sector.

3.0 RECOMMENDATIONS

3.1 It is recommended that the Inverclyde Alliance Board:

(i) Acknowledges the positive inspection outcome of the Strategic Inspection of Community Learning and Development including the place-based part of the inspection within East and Central Communities of Greenock.
(ii) Notes the improvement actions recommended by Education Scotland.
(iii) Notes that Inverclyde is performing well nationally when compared with other local authorities inspected to date.

Ruth Binks
Corporate Director
Education, Communities and Organisational Development
Inverclyde Council

4.0 BACKGROUND

4.1 Community Learning and Development provision provided by the local authority and sector partners is normally subject to formal inspection by Education Scotland on an 18 month to 2 year frequency basis. The inspection model has evolved over the last few years and over the 24 months there has been a move away from the "learning community" inspection which previously took place and focused around the catchment area of Secondary Schools.

4.2 The new inspection model takes places within the context of the Requirement for Community Learning and Development (Scotland) Regulation 2013 and the Strategic Guidance for Community Planning Partnerships: CLD (2012) and now takes the form of a two-phased approach with the inspection team working with local authorities and CLD partners to focus on:

- "How good is the strategic leadership of the community learning and development"?
- "How good is the learning and development in defined local community"?

4.3 **Scope of New Inspection Model**

The Scottish Government National Performance Framework sets out the strategic objectives for all the public services, including these delivering CLD and as such the focus for the inspection is detailed as follows:

- Improved life changes for people all ages through learning, personal development and active citizenship
- Stronger, more resilient, supportive, influential and inclusive communities

Inspection activity also focuses on the following current and evolving policy contexts:

- Closing the poverty-related attainment gap
- Early intervention and prevention
- Learning journey and youth employment
- Reducing social isolation
- Tacking health inequalities
- Empowering communities

4.4 The inspection itself incorporated key council services and partners who are involved with the following:

- Community development (building the capacity of communities to meet their own needs, engaging with and influencing decision makers)
- Youth work, family learning and other early intervention work with children, young people and families
- Community-based adult learning, including adult literacies and English for speakers of other languages (ESOL)
- Learning for vulnerable and disadvantaged groups in the community, for example people with disabilities, care leavers or offenders
- Learning support and guidance in the community

4.5 Inspectors were also keen to check progress against the CLD partners' Strategic Plan for Inverclyde 2018-2021, including assessing how the plan was formulated by the partners as to how national priorities are being delivered at the local level.

5.0 CURRENT PROVISON

5.1 Community Learning and Development has received a very strong positive report from Education Scotland which outlines significant progress in key areas and interventions. In many cases these have been described as major strengths.

5.2 The report noted that governance arrangement are clear and generally understood by staff and partners, CLD partners are appropriately represented on the Strategic Implementation Group, reporting arrangements are robust and change is managed well.

5.3 The Community Learning and Development 3 year Plan (2018-2021) links well to Local Outcomes Improvement Plan (LOIP) and is based on effective analysis of the Inverclyde's population.

5.4 Community groups and organisations across Inverclyde East / Central are confident, active and skilled and provide a range of good quality provision for local people. Members demonstrate a strong sense of place and high levels of resilience.

5.5 The report acknowledge that learners are well supported to progress their learning and achieve their goals, family learning work in primary school is helping adults and children to gain awards, improve confidence and apply their learning in other settings. King's Oak Primary School provides outstanding learning opportunities.

5.6 Youth Workers have involved young people routinely in the design of their learning programmes and relationships with staff are of high quality, with young people benefiting from safe and accessible learning places to meet and learn together. Examples include the Recruit Programme, The Duke of Edinburgh Award, and Inverclyde Pride Group (LGBT).

In assessing the quality indicators, Education Scotland graded the key indicators as follows:

- Improvement in performance — Good
- Impact on the local community — Good
- Delivering the learning offer with learners — Very Good
- Leadership and Direction — Very Good

5.7 The report lists a number of points which are key strengths of CLD in Inverclyde:

- Strong partnership working in relation to the Attainment Challenge
- Community Planning partners' understanding of the essential role of CLD
- Strong culture of mutual support amongst organisations and groups
- Strong and effective leadership for CLD
- Evolving youth voice

5.8 The following areas for improvement that might continue to improve our work are:

- Implement locality planning
- Improve joint self-evaluation across strategic partners in CLD
- Implement the CLD plan with focus on outcomes

6.0 IMPLICATIONS

6.1 **Finance**

None.

6.2 **Legal**

None.

6.3 **Human Resources**

None.

6.4 **Repopulation**

None.

6.5 **Equality and Diversity**

The inspection note the work of the CLD Partnership in respect of The Inverclyde Pride Group (LGBT)

6.6 **Inequalities**

The inspection report notes the work in respect of the CLD Partnership helping to reduce inequalities.

7.0 CONSULTATIONS

7.1 Various consultations have been carried out in relation CLD 3rd Year plan 2019-2021.

8.0 BACKGROUND PAPERS

8.1 None.

APPENDIX

Education Scotland
Foghlam Alba

Community learning and development in Inverclyde Council

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For Scotland's learners, with Scotland's educators

Contents

1. Context 1
2. How good is the strategic leadership of community learning and development? 1
3. How good is the learning and development in this community? 2
4. What happens at the end of the inspection? 3

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1. Context

Community learning and development (CLD) partners within Inverclyde Council and the area of Inverclyde Central were inspected by Education Scotland during January and February 2019. During the visit Education Scotland staff talked to children, young people, adults and community organisations. We worked closely with local CLD managers, CLD providers, partners, paid staff and volunteers. We wanted to find out the quality of the strategic leadership of CLD and the quality of CLD provision in the area. We also looked at how well paid staff and volunteers are developing their own practices and building capacity. We looked at how partners are contributing to current and evolving national policy objectives such as closing the poverty-related attainment gap; prevention; reducing social isolation; tackling health inequalities; and empowering communities.

2. How good is the strategic leadership of community learning and development?

Leaders across Inverclyde Council demonstrate strong leadership in relation to CLD. Governance arrangements are clear and generally understood by staff and partners. CLD partners are appropriately represented on the Strategic Implementation Group, chaired by the Head of Education. Reporting arrangements are robust and change is managed well. The CLD Plan 2018-21 links well to the Local Outcomes Improvement Plan (LOIP) and is based on effective analysis of Inverclyde's population. However, the CLD plan would benefit from more specific and measurable outcomes. Elected members and senior officers are highly supportive of CLD. They value its key role in engaging with communities and in particular young people. There is strong commitment for the Year of Young People and its ongoing legacy. A strong culture of partnership working is evident amongst partners working in CLD related activity. CLD is actively engaged in the Scottish Attainment Challenge and work with schools is becoming more embedded. The authority is investing in Family Learning approaches and this is starting to lead to improvements and better engagement with parents. Visions, values and aims are well understood across senior leaders, elected members and partners. Leaders are working well with staff and partners to identify and mitigate risk. However, community engagement requires strengthening. Young people were consulted about CLD priorities through 'Clyde Conversations' although there is more work needed to strengthen community ownership of CLD priorities.

Inverclyde Council CLD staff have a strong commitment to continuing professional development. Time is set aside regularly to help staff reflect on and develop their practice. They have good access to training and development opportunities and are highly motivated. Training for youth workers is regular, helping them to reflect on and improve their practice. Adult learning volunteers receive effective support with good access to training, leading to good progression for individuals. Many are members of the CLD Standards Council. Partner agencies also encourage staff to develop their practice. Belville Community Garden encourages reflective practice to support their learning offer and CLD and Jericho House staff are learning from each other's approaches.

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3. How good is the learning and development in this community?

Partners use a range of methods to demonstrate improvements against aims, outcomes and targets. There are clear links between the delivery of CLD provision by partners and the strategic priorities in the LOIP and the CLD Plan. The Family Hub at Kings Oak Primary School is improving life chances for families. Increasing numbers of adults are participating in learning programmes leading to achievement of SQA awards, engagement in further learning and employment. Increasing numbers of children are also gaining Dynamic Youth and Hi5 awards. Children are more engaged in their learning and exclusions at the school are now nil. The partnership team at Kings Oak Primary School meet weekly to track children's participation in out of school learning, using research and intelligence to target specific groups, for example, Syrian families. Partners across Greenock share effectively analysis of data and achievement outcomes for young people. Almost all school leavers now achieve a positive post-school destination, a significant improvement over recent years. The Duke of Edinburgh's award sustains high levels of participation with growth in the number of awards achieved in the past three years. Participation in Active Schools groups is improving. The Fife Online Referral Tracker system used in the IDEAS project is generating important data on participant data and client referral. Health based programmes are targeting groups most in need and this is starting to lead to improvements in physical and mental health. All adult learners have individual learning plans, helping them to track their progress. However, partners recognise the need to improve the analysis of data. More rigorous and regular self-evaluation would help improve partners' understanding of outcomes and their collective ability to monitor progress against shared objectives. Progress reports are currently focused mainly on levels of participation. These need to contain better partnership analysis of impact and outcomes.

Community groups and organisations across Inverclyde Central are confident, active and skilled. Supported by CLD staff and CVS Inverclyde, they provide a range of good quality provision for local people. Members of community groups and organisations demonstrate a strong sense of place and high levels of resilience. CVS Inverclyde supports around 125 organisations and through their networks, promote good practice, share information and make referrals. Adults dealing with addiction issues are well-supported by the Recovery Café to reconnect with their local community. Community groups such as River Clyde Homes, Belville Community Gardens and Knit and Natter are addressing social isolation and building resilience. Most community groups are open and inclusive. Craigend Resource Centre is tackling inequality in the community through developing a range of services. Diversity is recognised and welcomed in programmes at Auchmountain Community Centre. The Inverclyde Men's Shed is developing new facilities to help build social skills and tackle loneliness. Through Clyde Conversations Steering group, young people inspire others to influence practice in their schools and the wider community. The group is now more able to hold agencies and partners account for progress in tackling identified priorities for young people. Leadership of capacity building is not yet sufficiently clear. Delays in implementing locality planning is hampering the development of shared priorities at a local level. Whilst the Capacity Building Network has plans to take forward locality planning and participatory budgeting, it is at an early stage.

Learners are well supported to progress their learning and achieve their goals. Almost all learners are progressing well and opportunities for achievement are key to the learning offer. Family Learning work in All Saints and Kings Oak Primary Schools is helping adults and children to gain awards, improve confidence and apply their learning in other settings. Kings Oak Primary School provides outstanding learning opportunities. Pupils operate the credit union, promote road safety and participate in the life of their community. Many parents are gaining qualifications or

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employment. A few are now leading programmes such as a toddlers' group and Bookbug sessions. Young people are involved routinely in the design of their learning programmes. Relationships with staff are of high quality. Young people benefit from safe and accessible learning places to meet and learn together. Examples include the Recruit Programme, the Duke of Edinburgh's award and the Lesbian, Gay, Bi-sexual and Transgender group. Young people on the autistic spectrum are well supported to learn at their own pace through the Connect Youth Group. The curriculum for young people in the Wider Achievement scheme at Inverclyde Academy is built around learner need and interests. Whilst the majority of young people have good access to award schemes, there is scope to ensure that this is available for all. Adult learners are achieving through a wide range of activity such as English for speakers of other languages (ESOL) classes, information, communication and technology, Play and Stay and Eat Better/Feel Better classes. Almost all adult learners reflect on their learning through individual learning plans. CLD staff and partners consistently use participant feedback to plan future programmes. However, progression routes for adult and ESOL learners to further and higher education are limited. Those facing challenges in their lives are supported well to engage in learning. Online modules provided by West College Scotland for literacies learners and the Greenock Recovery Alcohol Support Project are examples of this. The achievement of learners is recognised and celebrated. Many adults and young people are gaining national recognition.

What is the capacity of the local authority and CLD partners to further improve?

This inspection of CLD in Inverclyde Council found the following key strengths.

- Strong partnership working in relation to the Attainment Challenge.
- Community planning partners' understanding of the essential role of CLD.
- Strong culture of mutual support amongst organisations and groups.
- Evolving youth voice.

We discussed with partners how they might continue to improve their work. This is what we agreed with them.

- Implement Locality Planning.
- Improve joint self-evaluation across strategic partners in CLD.
- Implement the CLD plan with a focus on outcomes.

4. What happens at the end of the inspection?

We are satisfied with the overall quality of provision. We are confident that the local authority's self-evaluation processes are leading to improvements. As a result we will make no further evaluative visits in connection with this inspection. During the inspection, we identified an aspect of interesting practice which we would like to explore further. As a result we will work with the education authority in order to record and share more widely the interesting practice.

Sheila Brown
HM Inspector
40T

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Quality indicators help CLD providers, partners and inspectors to judge what is good and what needs to be improved. You can find these quality indicators in the publication How good is the learning and development in our community?

Education Scotland evaluates four important quality indicators to help monitor the quality of CLD across Scotland. Here are the results for this inspection.

Improvements in performance	**good**
Impact on the local community	**good**
Delivering the learning offer with learners	**very good**
Leadership and direction	**very good**

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

excellent	outstanding, sector leading
very good	major strengths
good	important strengths with some areas for improvement
satisfactory	strengths just outweigh weaknesses
weak	important weaknesses
unsatisfactory	major weaknesses

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Education Scotland
Foghlam Alba

Inverclyde Alliance

AGENDA ITEM NO: 8

Report To:	**Inverclyde Alliance Board**	**Date:**	**17 June 2019**
Report By:	**Corporate Director Education, Communities & Organisational Development**	**Report No:**	
Contact Officer:	**Ruth Binks**	**Contact No:**	**01475 712761**
Subject:	**Progress with actions from the Children's Services Inspection and the Year 2 Delivery Plan for the Strategic Children's Service Plan**		

1.0 PURPOSE

1.1 The purpose of this report is to update the Inverclyde Alliance Programme Board on progress with the Children's Service Plan.

2.0 SUMMARY

2.1 The strategic Children's Services Plan for Inverclyde was published in August 2017. The plan contained the more in depth "delivery plan" for the first year.

2.2 After the outcome of the Children's Services Inspection led by the Care Commission was published in October 2017, an inspection action plan was written to take forward the 3 key action points.

2.3 Progress has been made in all of the key areas but there is still further work to take forward. The action plan from the inspection is now subsumed into the delivery plan for the second year. Appendix 1 details the present status of each of the 3 Key Areas for Improvement.

2.4 The year 2 delivery plan for the strategic Children's Services Plan is attached as Appendix 2. The report highlights the many strengths and achievements of Children's Services over the last year as well as actions for the future. A lot of work has been undertaken to streamline this delivery plan and establish effective governance arrangements. This has now been completed and the strategic group now feels that the delivery plan and the associated groups are more reflective of multi-agency Children's Services rather than individual service plans.

2.5 There is still further work to be undertaken on establishing the most pertinent key performance indicators and this will be completed over the next year.

3.0 RECOMMENDATIONS

3.1 It is recommended that the Alliance Board:

a. Approves the second delivery plan for the Children's Services three year plan.

Ruth Binks
Corporate Director
Education, Communities & Organisational Development

4.0 BACKGROUND

4.1 The strategic Children's Services Plan for Inverclyde was published in August 2017. During the period May to June 2017 the Care Inspectorate led a joint inspection of Inverclyde Children's Services and the report was published in October 2017.

4.2 Many strengths were identified in the report and the report listed 3 main areas for improvement which were:

- further strengthen joint risk assessment and decision making in response to child protection concerns, including new concerns arising in open cases and from accumulating signs of neglect
- develop joint quality assurance systems and processes to achieve high standards of practice in key processes more consistently
- demonstrate clearer links between activities and measurable improvements in outcomes through implementation of key priorities in the children's services delivery plan.

4.3 Whilst a specific action plan was produced to take forward the areas outlined in the plan, these actions have now been subsumed into the second year of the delivery plan.

5.0 PROPOSALS

5.1 Feedback on the first delivery plan from both stakeholders and the Care Inspectorate was that there were too many activities listed under the key priorities. The four key priorities have been maintained (the fourth changing focus from strategic housing to corporate parenting) and the number of activities have been streamlined to ensure that they truly reflect joint Children's Services planning.

5.2 All actions relating to Key Action 1 of the inspection action plan (further strengthen joint risk assessment and decision-making in response to child protection concerns are being taken forward by the performance management sub group of the Child Protection Committee. As GIRFEC practice is integral to multi agency working these actions also join with work streams of the GIRFEC Implementation group and CELCIS in their work on improving practice in relation to addressing Neglect in Inverclyde. Joint working and collaboration is also taking place with the domestic abuse working group and the training sub group. All actions are contained within the actions plans of the performance management sub group and the relevant sub groups; these in turn link to the Child Protection Committee business plan which is monitored by the Child Protection Committee.

5.3 The delivery plan highlights that whilst some progress has been made with Key Action 2, to develop joint quality assurance systems, this work has mainly been undertaken at individual service level. Whilst some quality assurance systems have been put in place by individual services to reflect on the quality and standard of children's plans this is yet to be taken forward on a multi-agency basis.

5.4 To address Key action 3, the governance structure and groups to take forward the plan have been revised over the last year. The old SOA6 structure was no longer fit for purpose and the purpose of groups, membership of the groups and how the groups feed into the plan had to be clarified. The new governance structure is outlined in the delivery plan.

5.5 The Key Performance Indicators for the plan still need to be revised and streamlined and this will be undertaken by the strategic leads for the groups over the coming year. The work undertaken for the

strategic needs assessment was very strong and gives a firm platform to build on.

5.6 The delivery plan highlights the many successes and achievements over the last year in relation to the four identified priorities. Many of the successes have built on strong working relationships and partnership working. The positives include the work of the Champions' Board, the inspection of the Attainment Challenge and Community Learning and Development, the emerging work with CELCIS, the links with poverty initiatives across Inverclyde and the establishment of the funding model to support attainment money for care experienced young people.

6.0 IMPLICATIONS

6.1 Legal: There are no known legal implications.

Finance: There are no known financial implications.

Human Resources: There are no known HR implications.

Equality and Diversity: There are no known equality and diversity implications.

Repopulation: There are no known repopulation implications.

Inequalities: There are no known inequalities implications.

7.0 CONSULTATIONS

7.1 N/A.

8.0 LIST OF BACKGROUND PAPERS

8.1 Joint Children's Services Findings – Inverclyde Alliance Board – 11 December 2017.

APPENDIX 1

Inspection Action Plan – Update Report April 2019

1. Further strengthen joint risk assessment and decision making in response to child protection concerns, including new concerns arising in open cases and from accumulating signs of neglect		
Outcome	Initial Referral Discussions will be consistently undertaken, with evidence of key partners being actively involved in the decision making process.	
End of year position	This outcome has been **ACHIEVED** EVIDENCE QA activity shows improved, effective and consistent application of IRD processes Initial Referral Discussions are taking place in 100% of cases where concern is raised about children thought to be at risk, we are continuing to develop practice to ensure that this includes those at risk through accumulating neglect. 100% of Initial Referral Discussions take place as soon as reasonably practical or within 24 hours of the concern being received. 100% of IRD records show clear multi-agency discussion, decision making and rationale regarding the provision or non-provision of medicals.	
Outcome	IRD records are consistent within all agencies files.	
End of year position	This outcome has been **ACHIEVED** EVIDENCE Following the improved IRD process Quality assurance activity has evidenced that 100% of IRD's audited were consistently stored within all agencies files.	

Outcome	Systems will support “real time” Initial Referral Discussion.	
End of year position	This outcome has been **ACHIEVED** EVIDENCE Real time conference calls between Police , SW , CPS (Health) and any other relevant agency went live in March 2018	
Outcome	There will be consistent high quality assessment of risk and need.	
End of year position	This outcome is **PARTIALLY ACHIEVED** and improvement activity shall continue EVIDENCE An improvement project is underway involving CP lead officer, Children and families service manager, SW Quality Improvement officer and SW’s from the request for assistance team to address the quality of Child Protection reports initially as a test of change. This is a longer term outcome that is anticipated to take up to 2 years to identify issues, design and implement improvements and review progress and then scale up across all teams. * RESOURCING ISSUE IDENTIFIED This Outcome has been delayed as a result of the SW CP QI officer having limited capacity due to the completion of S21 notices relating to the historic abuse enquiry.	
Outcome	Agency responses to domestic abuse is child centred, joined up and streamlined	

End of year position	This outcome has been **ACHIEVED** EVIDENCE RFA team was established which has aligned the SW duty response and Domestic abuse screening process under one team remit. Collaborative approach to addressing perpetrator based work between criminal justice and children and families SW teams sourced and training to commence in Autumn 2019.	
Outcome	The cumulative impact of neglect is recognised and addressed.	
End of year position	This outcome is **PARTIALLY ACHIEVED** EVIDENCE The Addressing Neglect and Wellbeing Work stream shall continue to collaborate with CELCIS on this until 2020. This is a longer term outcome that is anticipated to take up to 2 years to identify issues, design and implement improvements and review progress and then scale up across all Inverclyde.	
Outcome	All Child's Plans are SMART and consider all wellbeing indicators routinely.	
End of year position	This outcome has been **PARTIALLY ACHIEVED** EVIDENCE All reviews chaired by our child planning and reviewing officers have their plans recorded on a SMART / Outcome focused format. Quality Assurance of these plans to ensure the target of 80% of plans are graded good or above has not been possible due to the vacant Post within the team. This was filled on 23/3/19 and should allow work to progress.	
Outcome	All Named Persons and Lead Professionals will engage in joint risk assessment re child protection concerns, both for new cases and for cases where there are accumulative signs of neglect.	

End of year position	This outcome has been **PARTIALLY ACHIEVED** EVIDENCE The improved IRD process does ensure that named person / lead professionals are consulted and if can be possible involved. Further coaching of named persons is planned to allow named persons to be competent participants in IRD's.	
Outcome	All staff will receive appropriate level of support and challenge in order to meet their responsibilities.	
End of year position	This outcome has been **ACHIEVED** EVIDENCE The communities of practice continue to share good practice in relation to their roles as named persons. This Outcome shall continue to be developed as the learning from the ANEW work stream feed into these learning / good practice forums	
Outcome	All multi-agency chronologies are fit for purpose and used meaningfully to inform assessment of risk/need.	
End of year position	This outcome is **NOT ACHIEVED** EVIDENCE The aim of implementing a shared format for Health, SW and Education has not yet been achieved. There are issues relating to different ways of recording in each agency and strategic liaison is underway to address this	
Outcome	Chronologies are subject to review and analysis.	

End of year position	This outcome has been **ACHIEVED** EVIDENCE CP Chairs and Reviewing Officers have been including review of the chronology as an agenda item in review meetings. Further improvement is required to evidence the quality of chronologies and the difference they are making for children and young people.	
	2. Develop joint quality assurance systems and processes to achieve high standards of practice in key processes more consistently	
Outcome	A Joint Quality Assurance framework is in place with measurable standards which is used to improve quality across key processes.	
End of year position	This outcome has been **PARTIALLY ACHIEVED** EVIDENCE The Performance Management Group created a multiagency QA Calendar across key processes – the IRD group has met regularly, single agency file reading has occurred , audit activity feedback is shared as a fixed agenda item at PMG agenda Multi-agency screening of child plans has not occurred due to vacancy in the planning officer role and shall now be progressed.	
Outcome	Quality assurance systems and processes are applied and improvements are evidenced through Plan, Do, Study, Act cycle as part of the continuous improvement framework	

End of year position	This Outcome is **NOT ACHIEVED** *RESOURCING ISSUE IDENTIFIED HEALTH and SW capacity at Performance Management Group has been diminished due to staff being allocated to other duties. i.e.: S21 historical child abuse enquiry. NHS Child Protection Service have recently advised that they are temporarily unable to participate in committee business due to a shortage of operational staff.	
	3. Demonstrate clearer links between activities and measurable improvements in outcomes through implementation of key priorities in the children's services delivery plan	
Outcome	Key outcome measures from the children's services delivery plan are linked to specific, measurable and activities that are tracked and reported on.	
End of year position	This Outcome is **ACHIEVED** Evidence Significant work is underway to realign the children's service plan and its reporting structure to include links with CPC and GIRFEC strategic group	
Outcome	Integrated children's services plan sits within a framework for evaluating, monitoring and intervening to ensure that it delivers improved outcomes for children and young people.	
End of year position	This Outcome is **ACHIEVED** Evidence A new reporting structure including flash reports shall be utilised to report on the progress of the CSP.	

Outcome	Robust governance and structures support our statutory planning and reporting requirements for the integrated children's service plan.	
End of year position	This Outcome is **ACHIEVED** Evidence The governance arrangements for CSP have been mapped and continue to be developed.	

APPENDIX 2

Inverclyde Alliance Children's Services Delivery Plan (second year)

2019

Welcome to the second Delivery Plan for the Inverclyde Children's Services 3 year Strategic Plan (2017-2020). This plan reflects on the progress to date and also takes forward the learning and challenges from the first year. There have been very many positives over the last year built upon the strong relationships and partnership working across Inverclyde. The positives include the work of the Champions' board, the inspection of the Attainment Challenge and Community Learning and Development, the emerging work with CELCIS, the links with poverty initiatives across Inverclyde and the establishment of the funding model to support attainment money for care experienced young people.

Whilst, there have been many successes taken forward through the plan, initial feedback has suggested that the first year delivery plan had too many priorities and that the plan was too cluttered. Therefore work has been taken forward over the last months to streamline the plan and prioritise actions and governance. The second delivery plan has 4 main priorities, each with a priority lead, and the simplified "plan on a page" can be seen on page 12. Priority 4 is the only priority to change and this is because the priority very much focussed on corporate parenting through strategic housing rather than the other way round as initially presented. Priority 4 is now corporate parenting but will encompass the work of strategic housing. Work has also been undertaken to ensure that there is a clear linkage between delivery groups and to put a governance structure in place so that all groups are clear as to how the actions will be taken forward and who is responsible.

As well as delivering on the plan, work undertaken over the next year will be to review and streamline the key performance indicators which will be revised as the plan progresses.

Ruth Binks
Corporate Director, Education, Communities and Organisational Development

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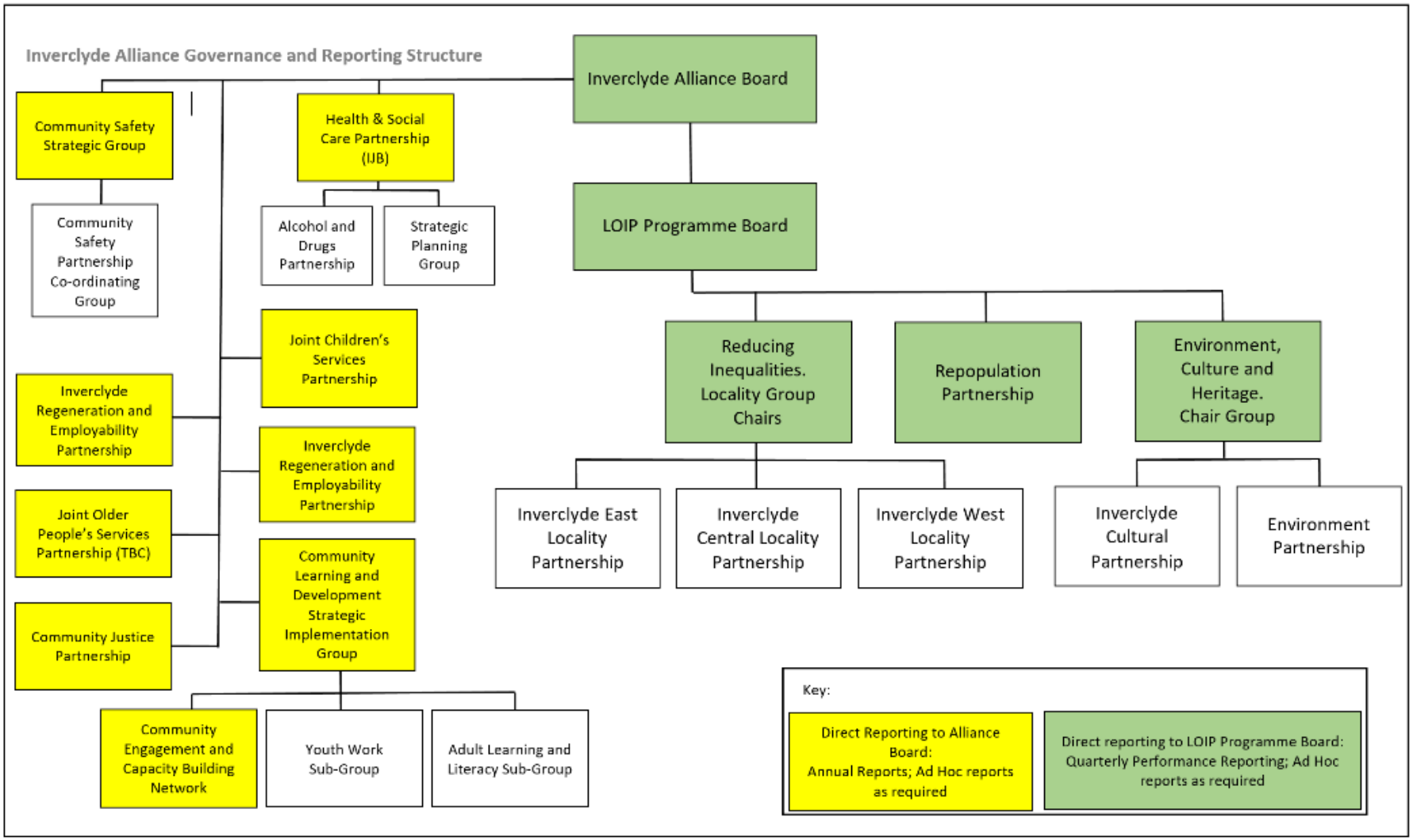
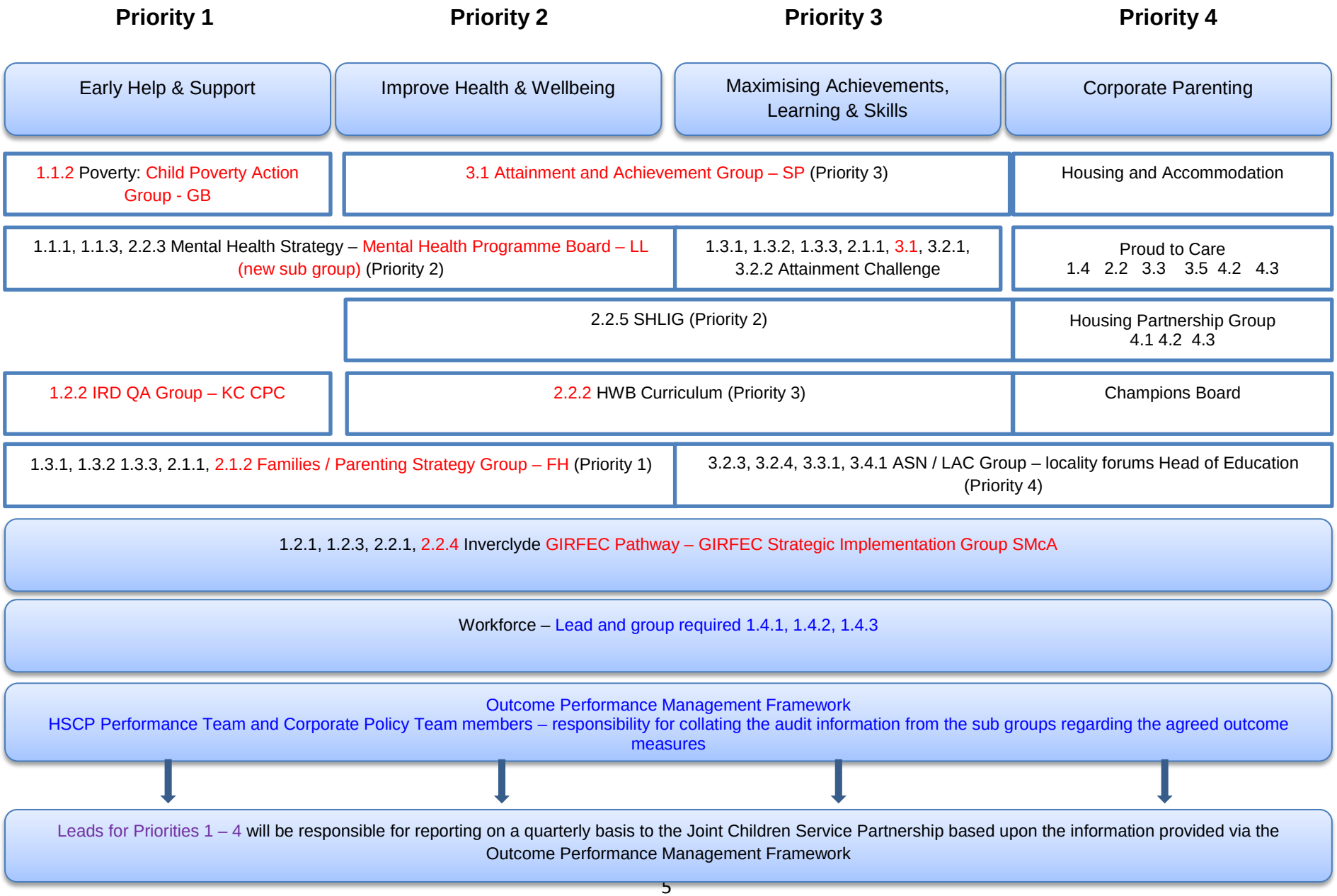
The Inverclyde planning partnership structure and the delivery groups for the Children's services plan are detailed in the diagrams below:




Priority 1
Priority 2
Priority 3
Priority 4
Early Help & Support
Improve Health & Wellbeing
Maximising Achievements, Learning & Skills
Corporate Parenting
1.1.2 Poverty: Child Poverty Action Group - GB
3.1 Attainment and Achievement Group – SP (Priority 3)
Housing and Accommodation
1.1.1, 1.1.3, 2.2.3 Mental Health Strategy – Mental Health Programme Board – LL (new sub group) (Priority 2)
1.3.1, 1.3.2, 1.3.3, 2.1.1, 3.1, 3.2.1, 3.2.2 Attainment Challenge
Proud to Care
1.4 2.2 3.3 3.5 4.2 4.3
2.2.5 SHLIG (Priority 2)
Housing Partnership Group
4.1 4.2 4.3
1.2.2 IRD QA Group – KC CPC
2.2.2 HWB Curriculum (Priority 3)
Champions Board
1.3.1, 1.3.2 1.3.3, 2.1.1, 2.1.2 Families / Parenting Strategy Group – FH (Priority 1)
3.2.3, 3.2.4, 3.3.1, 3.4.1 ASN / LAC Group – locality forums Head of Education (Priority 4)
1.2.1, 1.2.3, 2.2.1, 2.2.4 Inverclyde GIRFEC Pathway – GIRFEC Strategic Implementation Group SMcA
Workforce – Lead and group required 1.4.1, 1.4.2, 1.4.3
Outcome Performance Management Framework
HSCP Performance Team and Corporate Policy Team members – responsibility for collating the audit information from the sub groups regarding the agreed outcome measures
Leads for Priorities 1 – 4 will be responsible for reporting on a quarterly basis to the Joint Children Service Partnership based upon the information provided via the Outcome Performance Management Framework

Evaluation

Children's Services Plan 1 Year On

Priority 1: Access to early help/support.

We said we would focus on the following key areas:

- GIRFEC/Inverclyde framework - well understood, multi-agency training, communities of practice (multi-agency)
- Early year's expansion - impact for under 2s
- 27-30 month assessment - identified needs - early years collaborative work. Children/parental support related to child behaviour (strengths and difficulties—parenting strategy)
- Parental participation on school by school basis

Priority 1 areas of achievement were:

- Request For Assistance / Duty team in place giving clarity and single point of access to social work services
- Significant developments over the last 2 years focused on system wide understanding of wellbeing; development, alignment and implementation of multiagency assessment & planning processes, and workforce development and awareness raising.
- Under 2's - early years - uptake and provision
- Financial inclusion strategy
- Primary care improvement plan - access to Primary Care Multi-disciplinary team
- Commitment to more Health Visitors and school nurses
- Immunisation uptake - streamline service
- Sexual health strategy
- Wellbeing assessment/ESP parents active contribution to child's plan
- Literacy development work - attainment challenge

- Parent Councils – increasingly involved in school improvement
- Your Voice
- Community learning and development activity
- Health - Experience of Service Questionnaire survey - moving to digital technology 2019 / CAMHS (Child and Adolescent Mental Health Services)
- Implementation of recommendations of the Scottish Government report "Rejected and redirected Referrals CAMHS paper" since May 2018 improved access to CHOICE appointment and increasing referrals into Tier 3 CAMHS services
- Active work and improvement in did not attend for CAMHS appointments with reduction and improved attendance rates
- Barnardo's evaluations of work undertaken
- Full Implementation of universal pathway by September / October 2019
- Core and additional Health Plan Indicator (HPI) implemented. HPI assigned by health visitor in all 0 – 5 year olds in Inverclyde.
- Wellbeing assessment and unmet needs identified and child's plan progression
- Special Needs in Pregnancy co-ordinated support
- Whole system approach to tackling youth offending
- Post Autism Diagnostic clinic - ASN – interface. Reviewed to improve uptake and meet local needs of parents and practitioners based on first two years of delivery
- LACC - permanence - PACE
- Birth Ties
- Kinship care
- Neglect - CELSIS - strong growth
- Drug and alcohol - use - impact at birth/early years etc.
- GIRFEC continued implementation
- Improved health input at ASN cluster forum meetings

Priority 2: Improved health and wellbeing outcomes.

We said we would focus on the following:

- Children's Screening and immunisation uptake
- Mental health - tier 2 services (nurturing Inverclyde)

- Areas from inspection for improvement - update on progress
- Participation of children and YP - strategic plan and children plan

Other Priority 2 areas of achievement are:

- Attainment - participatory budgeting approach to allocation for care experienced funding
- Health survey being progressed
- School support - Pupil Equity Funding, HSCP, Attainment
- LIAM project for mental health - school nurses. NES whole system approach to low level 8-18 year old anxiety management using CBT framework and intervention. Commenced with school nurses and Barnardo's. Second phase Education staff still to be progressed.
- Family support and relationships
- Nurturing approach
- Active living schools strategy
- Champion's Board
- Summer clubs and holiday hunger initiatives
- Alcohol and Drugs Partnership strategy
- Children's Plan - reviewed every 3 months reviewed
- Mental wellbeing - national strategy being taken forward
- Proud 2 Care - very strong group established - connected with senior leaders
- Family Nurse Partnership is well established
- Poverty strategy being progressed
- Health Visitors - at full staffing compliment as per the 2019 caseload weighting tool. Ongoing annual review via the national workload tool.
- Progressing the Healthy Child Programme through establishment of Local Implementation Groups (LIG) in Inverclyde to ensure good learning in line with collaborative and Scottish Government strategy
- Support for full implementation of national universal pathway in 2019
- LACC health pathway in place
- Advocacy - participation

- Children Affected by Parental Substance Misuse (CAPSM) Plan is in place and progressing
- Kinship - financial support for kinship care
- Awards related to children and YP

Priority 3: Opportunities to maximise learning, achievements and skills for life.

We said we would focus on the following:

- C&YP participation- student councils, Rights respecting schools, LGBT group, Proud 2 Care, Clyde Conversations, Representation Scottish Youth parliament, working towards education committee representation and policy development i.e. anti-bullying PRPB
- Attainment challenge - Barnardo's
- Consistent approach in GIRFEC pathways in schools, multi-agency training and consistent approach partner agencies
- Family support - learning, pathways for parents - signposting and increased confidence - qualification, Inverclyde Live.

Other Priority 3 areas of achievement are:

- Rights respecting schools status continues on almost all schools with many now achieving level 2
- Well progressed GIRFEC strategic implementation group – CELSIS + QA
- Community Engagement taking place - our place, our future (OPOF); LOIP priority
- Joint training- strategic children services - structure
- Report back from Education Scotland on inspection of Attainment Challenge work in Inverclyde hugely positive
- Introduce participatory budgets to support children looked after in their learning needs
- Effective values programme
- Nurture/trauma, anxiety, autism training. Inverclyde Communication Outreach Service team into primary schools
- Clyde conversations/Proud 2 Care/Champions Board events have all taken place
- Redesign principles - Strategic Planning consultation
- Working continuing on closing attainment gap + improving attainment across the board
- Taking forward the Community empowerment Act
- Localities and development of LOIP and participatory budgeting
- Move towards ASN locality forums on locality basis for decision making

- PEF/attainment funding - individual schools and planning based on school and individual needs to improve attainment
- Team Around the Child meetings and progressing collaborative children's planning

Priority 4: Housing and accommodation as part of the corporate housing strategy.
We said we would focus on the following:

Role of Government as corporate parents- £250K, Council enables to waive council tax, what more can you do?

- Developed young person's housing contribution statement
- Registered Social Landlords- rapid housing - eradicate homelessness
  Strategic Housing Investment Plan - housing stock improvement

Other Priority 4 areas of achievement are:

- Community tolerance, respect and support
- Child poverty action gap - conference
- Developed continuous care core and cluster
- Champions Board - relationship - advocacy
- Participation of care experienced YP - housing strategy
- Reducing number of care leavers reporting homelessness
- Champions network
- Strong links to attainment and employability - see priority 3
- Resettlement scheme - unaccompanied minors
- Strategic Plan - HSCP
- Corporate parenting - relationships
- Looked after raising awareness - Proud 2 Care
- Teacher nurturing relationships - high proportion of teachers now trained
- Commissioned research
- Continued multi-agency representation and awareness on the agenda of Children's service Strategic group

What were the challenges we faced when taking the plan forward?

The challenges identified primarily fell into themes related to poverty, deprivation and health and social inequalities, barriers to systems working and structure and governance.

Barriers to working across boundaries and commissioning as a system were identified:

- How do we design /achieve whole system approaches when funding and policy focus is in silos and ring-fenced?

Challenges related to poverty, deprivation and health and social inequalities included:

- Lowest attaining children/LACC
- In Scotland, children in the most deprived 10% of small neighbourhoods were around 20 times more likely to be looked after or on the child protection register than children in the least deprived 10% (Nuffield foundation 2017)
- Intergenerational impact and across service, inequalities and deprivation, unemployment, poverty
- Family support - strategy refresh required
- Breast feeding initiation
- Drugs and alcohol
- CAMHS targets - demand and capacity

Structure and governance challenges included:

- Quality assurance across agencies and information sharing
- Groups - governance structures - how to reorganise and how do groups fit together?

Children and Young People Services Plan 2017-20

Delivery Plan

Priority Theme 1: Early Help and Support

Outcomes:	1.1	Children, young people and families experience less poverty, neglect and harm;
	1.2	Children, young people and families have access to early intervention.
	1.3	Parents are more confident and have improved parenting skills.
	1.4	The workforce that supports children and young people is well trained, motivated and feels valued.

Priority Theme 2: Improve Health and Wellbeing

Outcomes:	2.1	Parents make positive attachment and are actively engaged in their child's development
	2.2	Children and young people's health and wellbeing is improved.

Priority Theme 3: Maximising Achievements, Learning and Skills

Outcomes:	3.1	Close the attainment gap.
	3.2	Parents support their children to improve attainment.
	3.3	Learning and skills for life are improved, including for LAC,
	3.4	Young people aged 16-24 are in employment and training.
	3.5	Children young people and parents influence planning decisions.

Priority Theme 4: Corporate Parenting

Outcomes:	4.1	LAC young people where possible, will be supported and maintained in their local community
	4.2	Care experienced young people know how to get the help they need to sustain a home.
	4.3	Care experienced young people have nurturing relationships through key transition points.

Priority Theme 1: Early Help and Support

Outcomes:
- 1.1 Children, young people and families experience less poverty, neglect and harm;
- 1.2 Children, young people and families have access to early intervention.
- 1.3 Parents are more confident and have improved parenting skills.
- 1.4 The workforce that supports children and young people is well trained, motivated and feels valued.

1.1 Children, young people and families experience less poverty, neglect and enhancing wellbeing

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
1.1.1	**ACES / Trauma Informed** Improve outcomes for children impacted by Adverse Childhood Experiences (ACEs) / Trauma		Practitioners become reflective skilled workforce more aware of poverty, neglect and harm impact and the affect into adult hood and chronic lifetime conditions.	Workforce Strategy Group		2.2.3 3.5.1 4.1
	Raise awareness	Continue to raise awareness of the importance of Adverse Childhood experiences by sharing research across agencies. Screening and panel discussions on Resilience film are held (multi-disciplinary)	Parents, public and other key agencies e.g. Police service are given opportunity to develop understand and skills around the ACEs and Trauma.			
		Common use of language by professionals supporting children with adverse childhood experiences and their families	Develop a common understanding and collaborative approach, and ensure this is accessible to all those in support services.			
	Identify Trauma	Presence of Trauma / ACEs Risk is identified to minimise impact of adverse childhood	Improved outcomes for children and young people. Reduced generational ACES being recorded.			

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
		experiences.				
	Assess effect of Trauma	All children's service staff are trauma informed to ensure barriers to accessing services and early help are reduced	Staff understand the impact of trauma on children's wellbeing, family dynamics and challenge to attainment, both social and educational.			
	Understand intervention techniques and strategies	All services consider their 'front door' from a trauma informed perspective.	All services maximise opportunities to ensure that early help is accessible to the children and families who have experienced ACEs and Trauma.			
		All trauma framework training materials and animations are cascaded throughout children's services	Staff in all agencies become aware of how their interactions with services users – however short- can make a different to their ability to access early help and overcome the effects of trauma by developing resilience and having a trusting relationship with those working with the child and their family.			

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
1.1.2	**Poverty** Reduce the impact of poverty and deprivation as a barrier to positive educational outcomes for children and their families. Decreasing those people living in or close to poverty thus improving Health and Wellbeing for all and closing the attainment gap.	Improved financial and welfare access for those identified as in greatest in need. Increase the number of families accessing IDEAS project through Nurture services: • Continue to promote the IDEAS service through social media; • Targeted approach focusing on educational establishments across Inverclyde; • Continue with regular meetings to review and track progress. There will be an increased awareness of the impact of poverty on families when implementing educational systems and processes.	Impact will be seen in adult life is addressed early in childhood. Parents and families through empowerment and support move out of poverty bracket. Income maximisation for families. Reduction in levels of poverty across Inverclyde. Reduction in parental and family stress resulting in reduced risks to children and young people. Increase in the number of families attending meetings. The monthly outlay of a family reduces by an average of £3.10 per female (£37.18 annually), school absenteeism reduces.	Child Poverty Action Group		Child Poverty Action Plan 3.1.1 3.1.2 3.2.1

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
		• The cost of a school day is reduced by providing free sanitary products in schools, council buildings, health centres; • Free school meals continue through the summer holidays; • The cost of a school day is reduced by grant support for activity expenses (sport equipment, etc); • 1140 hours Early Phase project will be prioritised to support families experiencing poverty; • Cost of the School Day will be highlighted to all heads of establishments to ensure that families do not have additional costs for everyday educational	The financial pressure and stress upon families is reduced as children on low incomes continue to have access to a hot healthy meal during the school holiday Children living in poverty have less barriers to achieving / being active Parents/carers will have the opportunity to access employment, education and training due to increased early learning and childcare hours Fewer requests for additional costs will be made. e.g. costs of trips, activity weeks etc. to avoid children being at risk of missing out on opportunities Children will have access to free school meals during holiday periods. Those eligible receive the monies/transport they are entitled to. The most vulnerable are not reliant on parents sourcing and completing the relevant paperwork.			

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
		activities; • Holiday lunch clubs will continue to provide family lunches and learning • Review current practices for distribution and completion of clothing grant/free school meal/transport. Successful CELSUS project Interagency outcomes and Improvement collaborative in neglect in Inverclyde. Groups to use data in Strategic needs assessments and identifying areas of concern and targeting future provision to avoid ACES and impact on children and young people health and wellbeing. All staff dealing with children, young people	Completion of Project September 2020 with changed methodology and improved outcomes for test of change area identified. Staff have greater awareness and can apply the local knowledge base to children individual plans in the analysis of need. Improved staff awareness of the national picture. Improved staff confidence in resources and supports available locally to support those greatest in need.	GIRFEC Strategic Group Child Poverty Action Group		

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
		and families to have poverty strategy awareness and workshop session to support staff awareness on the local prevalence, causes and impact to support person centeredness and family resilience and empowerment.				

1.2 Children, young people and families have access to early intervention

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
1.2.1	**Early Interventions** To improve outcomes for children and their families by developing a strong professional base for identifying, understanding and responding to need at the earliest opportunity, with clear, agreed, high quality multi agency approaches throughout a child's experience	Analyse practice at transition points as the child's steps down the Inverclyde GIRFEC pathway.	Named person and lead professional practitioners will be well equipped to promote and support the wellbeing of all children especially at points of transition, when responsibilities are handed from one practitioner to another. Professionals, children and their families will collaborate to develop support packages that effectively address unmet need.	GIREFC Strategic Group		3.1.2 3.1.3 4.1
		Investigate and observe multi-agency cooperation through the team around the child approach, noticing whether equality of partnership and participation is achieved by agencies, children and their families	Relationships and collaboration, between partner agencies, children and their families, will be based on a minimum standard offer of timely and evidence informed assessment.			

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
		Promote the use of evidenced informed tools in assessment and planning practice, noticing to what extent they are offered by early help practitioners at the Collaborative and Enhanced collaborative levels of the Inverclyde GIRFEC pathway Refresh of staff training to enable a commonality of understanding of the role, function and practice for Named Persons, Team Around the Child and the use of the wellbeing indicators. Review of referral pathways to ensure early and effective support for children and young people.	The use of evidence informed tools, validated in the UK context, will result in improvements in assessment of risk for children in need and their families and help ensure developmental and health needs are adequately met. Staff will be equipped to provide early and effective safeguarding for children and young people. Streamlined multi agency processes and delivery of support.			

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
		Continue to monitor Internal governance and practice to ensure a cohesive approach.	Practices continue to be underpinned by an effective review process and are reflective of trend, demand and needs of young people within Inverclyde.			
1.2.2	**IRD** Further strengthen joint risk assessment and decision making in response to child protection concerns including new concerns arising in open cases and from accumulating signs of neglect	A collaborative approach is taken to improve services and multi-agency procedures to protect children and young people. • The Initial Referral Discussion (IRD) includes the Named Person where appropriate. • Review and develop IRD multi-agency guidance. • Provided coaching to named persons to facilitate robust engagement in multi-disciplinary discussion about thresholds of risk	Children are safer as a result of early identification of potential for significant harm Staff are supported and confident when engaging in discussions Children are safer due to informed professionals jointly assessing and planning to manage risk Better early information which will support IRD	Child Protection Committee		4.1

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
		and decision making • Promote consideration of issues of poor parenting in police referrals	process.			
1.2.3	**Health and Wellbeing: Early interventions** Improve health and wellbeing outcomes for all children aged 0 – 5 years.	Full implementation of the Universal health visiting pathway in Inverclyde HSCP by Sept 2019 All core children will have 11 core home visits and 3 child health assessments. Evaluated via case record audit and performance management data. ISD reports. Team will focus on Family strengths and respond to “needs”	Improved outcomes for children 0-5 years. Captured in school readiness and improved assessment scores and ratings across the 9 domains. Early interventions for children and parents. Collaborative working identified at earlier age. Improved developmental outcomes for children. Standardised approach to understanding and capturing additional vulnerabilities and risk	GIRFEC Strategic Group		

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
		Application of the Health plan Indicators to assess level of need and address vulnerability at each visit.	in children and families. Universally adopted across caseloads. Evaluated at Case load management to ensure health visitors have capacity to build strong relationships form pregnancy with parents. Improved knowledge of strategic needs in Inverclyde's child population and level of need.			

1.3 Parents are more confident and have improved parenting skills

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
1.3.1	Skills for Parents	Continue to identify initiatives to promote parental skills with Neighbourhood Officers continue to engage with schools and youth groups to ensure identification of parents requiring assistance; Continued development of services with a range of external partners including Barnardo's Business Development Unit Ongoing identification of gaps in service provision, directed through relevant forums, groups and partnerships. Complete a follow up analysis of recent parental engagement survey and event Continue to work in partnership with Barnardo's and other relevant agencies	Children and young people are safeguarded from significant harm. Provide broader opportunities to identify those families in need of assistance and generate ground level collaboration. Improved joint working across and opportunities for new service growth. Improved service provision to children and families Parents' views are collated and points for future action agreed Bespoke packages of support are provided for families	Family/ Parenting strategy Group.		2.1.1 3.2.2

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
		Embed Parental Engagement Strategy	More parents are engaged in their child's education			
1.3.2	Range of Support and Help	A range of parenting supports are implemented and evaluated across the locality with all agencies contributing cohesively: • Improved understanding of parenting approaches in Staff groups at universal level; • Improved evaluations to measure impact adopted across the approaches and programmes used; • Involve parental evaluations and comments into future service developments/ initiatives	Staff able to identify need and link children and parents to what service they require early and with success. Improved data collection across universal services to detail level of parenting currently undertaken in 121 basis by practitioners. To access demand and capture unmet needs and gaps for future planning. Providing a service that meets needs and allows attendance and accessibility to improve outcomes for children and young people.	Family /Parenting Strategy Group		1.3.1, 1.3.2 1.3.3, 2.1.1, 2.1.2
1.3.3	Parental Engagement	Continue to collate & evaluate feedback that evidences sustainable changes for children and families. Increased provision in numbers of parenting	Parental confidence increased leading to improved child-family relationships. Improved sustainable family relationships.	RIC Families & Communities		RIC Families & Communities 2.1.2 3.2.2

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
		programmes provided. Continue to work in partnership with Barnardo's and other relevant agencies Embed Parental Engagement Strategy	 Bespoke packages of support are provided for families More parents are engaged in their child's education			

1.4 The workforce that supports children and young people is well trained, motivated and feels valued.

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
1.4.1	Analysis of workforce needs	Joint workforce training needs analysis The workforce that supports children and young people is well trained, motivated and feels valued Review and develop quality of joint training and awareness sessions with Inverclyde Social Work and CLD Outreach. Recognition both within service and partners of good practice and reporting to Governance Groups with partners and Inverclyde Council. Continue to identify existing skills across all agencies and utilise these through multi-agency training. Ongoing scoping and identification of training needs on local and	Joint roles / working teams in areas of GIRFEC, Neglect and Child protection are adopted. Enable multi partners perspectives and priorities to be examined and shared across partnership Deliver improved practice and highlight positive work across partnership. Continual increase in staff knowledge and diversity in service delivery across workforce enabling ongoing improved response to the needs of children and their families. Improved health and	Workforce Strategic Group		3.2.2 4.1 4.2

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
		national areas of priority.	wellbeing in children and their families.			
1.4.2	Partnership	Workforce training and development is done on a multiagency basis where possible to have shared understanding of roles and responsibilities and collaborative approach is adopted to poverty, neglect and harm. Continue to support the work of the multi-agency Child Protection Practitioner's forum in developing and sharing expertise amongst practitioners in this area. Collective approach to identifying thematic workforce training relevant to the changing needs of children and families.	Reduced training costs and continued promotion of consistent multi-agency working further recognition and evidence of the breadth of transferrable knowledge and expertise which Inverclyde's workforce have to offer. Shared understanding of child protection issues and developments across the partnership. Increase in skills and expertise. Opportunity for frontline staff to contribute to strategic issues in the field of child protection.	Workforce Strategy		2.2.4 3.2.3 3.3.2 4.2

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
1.4.3	**CPD** Workforce development improves the skills of Named Person and Lead Professionals	Improve awareness and education of self-care and identifying secondary traumatisation for staff supporting vulnerable/ high risk children and families Deliver staff training on maintaining staff wellbeing and resilience building Establish group reflective practice sessions to combat work stress to help staff identify when they need individual support and provide it There is a continued focus on developing Leadership skills at all levels. Five to Thrive approaches are evident in more establishments Effective use of wellbeing assessments	Staff feel valued and motivated Support to vulnerable children and families is more effective as a result of trauma informed self-reflective relationship based practice Workplace Stress is reduced /Absenteeism is reduced Increased motivation to improve outcomes for children and families Increased understanding of attachment leads to improved support strategies Clear identification of needs results in			3.2.3

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
			appropriate support provided Increased knowledge across Education and HSCP of responsibilities in Corporate Parenting			
		Integrate training into practice around Corporate Parenting responsibilities				

Priority Theme 2: Improve Health and Wellbeing

Outcomes:

2.1 Parents make positive attachment and are actively engaged in their child's development
2.2 Children and young people's health and wellbeing is improved.

2.1 Parents make positive attachment and are actively engaged in their child's development

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
2.1.1	**Nurture and Attachment** Parents' understanding of the importance of attachment and nurturing is supported.	Five to Thrive workshops are delivered in schools and Early Years establishments Nurturing approaches continue to be developed across all establishments, with Nurture teachers meeting regularly with parents Health visiting assessments result in early identification of nurture need and assessment leading to individualised action plans to address areas of development	More parents understanding Five to Thrive approaches. Increased engagement from parents who were previously reluctant to attend school events Parent(s) are helped and supported at the earliest possible stage of their child's development Services are targeted to offer early help and support to support parents in accessing services to increase their confidence and their parenting skills	Families/Parenting Strategy Group		2.1.2 1.3.1 1.3.2 1.3.3

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
2.1.2	**Parental Engagement** Increase parental involvement by providing opportunities for engagement and participation with staff across CPP.	Pilot a Parents/Carer Group, modelled on the structure of the Lomond View Parents Group, in a small number of schools. • Increase parental and carer involvement • Kinship Care • Foster Care • ASN/LAC at Home Family Support Workers linked to schools and early years' establishments to model family learning activities	Reduces the barriers to engaging with parents/carers. Parents/Carers become more invested in their child's education Increased parental confidence in use of Five to Thrive approaches through seeing this modelled with their own children	Families/Parenting Strategy Group		RIC Families & Communities 1.3.3 3.2.2

2.2 Children and young people's health and wellbeing is improved

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
2.2.1	**Early Development** Children and young people's right to good health is increasingly being recognised	Develop partnership working with services to support wellbeing All children to have Health plan indicator identified and recorded on EMIS record. Those vulnerable and additional High to have wellbeing assessment and child's plan.	Children and young people access support services when needed Additional assessment / visit will identify early family strengths and respond to "needs" via national practice Model and wellbeing assessment if Additional High identified.	GIRFEC Strategic Implementation Group		2.2.4 1.2.1 1.2.3
2.2.2	**Health & Wellbeing Curriculum** Schools and Early Years establishments continue to develop a comprehensive programme of learning experiences to develop health and wellbeing.	Ensure pupil voice influences HWB curriculum Health improvement is included in local promotions and in the school curriculum; including on-line safety	Relevant learning experiences provided Children and young people know how to access information and support when needed	HWB Implementation Group		Priority 3

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
2.2.3	**Mental Health Strategy** Early identification of need for those children and young people identified as requiring emotional health and mental health being needs can access suitable services in Inverclyde	Improved GIRFEC approach and interagency response to Wellbeing concerns to those children identified as vulnerable. Implementation of recommendations from mental health strategy around prevention and early intervention for Emotional and mental health. Opportunities for professional learning in mental health awareness. All children seen by health visiting team to have Health Plan Indicator identified.	Improved outcomes for children at lower level of collaborative working by applying Team Around the Child (TAC). As per GGC 5 year mental health strategy. The National 10 year mental health strategy with specific areas for children and young people. Teaching and support staff have increased knowledge and understanding of mental health issues.	Mental Health Programme Board		1.1.1 1.1.3

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
2.2.4	**Inverclyde GIRFEC Pathway** A multi-agency collaborative approach to identify and find relevant support	Application of record keeping audit tool in health visiting EMIS records to ensure quality standards are high and continuous improvement is addressed. Childs plans evaluated and outcome goal based focussed. Establish a robust system to identify health and well-being outcomes that require support. Develop a clear and concise referral process. Continue to develop nurturing approaches across all establishments Provide opportunities for professional learning to support	Children and young people with areas of concern identified for further professional discussion. Children and young people receive appropriate targeted support. More staff confident in supporting children affected by trauma Relationships develop as sense of belonging Children and young people are active in their local communities Improved access to services.	GIRFEC Strategic Implementation Group		1.2.1 1.2.3 2.2.1

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
		assess health and wellbeing need through adult mentoring Continue to build peer networks of support Implement the recommendations identified in the Scottish Government Rejected and Redirected referral Audit August 2018.	 Ensure that children and young people are receiving the right help at the right time from services			
2.2.5	**Sexual Health Improvement - young people**	Young people can access contraception from primary care providers and from Sandyford sexual health service but face barriers in relation to accessibility. Young people who are or may be pregnant require easy and fast access to information about pregnancy and services which can support them. Particularly vulnerable	Young people have increased knowledge and skills around contraception and sexual negotiation All young people have equal access to information about contraception and support to make informed choices Young parents have increased knowledge about local services	Sexual Health Local Improvement Group		Pregnancy and Parenthood Young People Strategy

Outcome	Development Area	Actions	Expected Impact	Who is Responsible	Timescale	Links
		young people are able to access appropriate services Aligned services, focusing on the needs of vulnerable young people are supportive of their needs.	and are confident using them			

Priority Theme 3: Maximising Achievements, Learning and Skills

Outcomes:

3.1 Close the attainment gap.
3.2 Parents support their children to improve attainment.
3.3 Learning and skills for life are improved, including for Looked After/Care Experienced,
3.4 Young people aged 16-24 are in employment and training.

Priority Theme 3: Maximising Achievements, Learning and Skills

3.1 Close the attainment gap

Outcome Reference	Development Area	Actions	Impact	Who is Responsible	Timescale	Links
3.1.1	Reduce poverty related barriers to accessing education which will supporting learning and life skills.	Raise awareness of the availability and eligibility of free meal entitlement/clothing grants/Education Maintenance Allowance.	Children and young people are ready for their school day and work experience	Financial Inclusion Partnership; Education Services; Services/Attainment Challenge Programme Manager.	Ongoing 2019-20	
		Schools to raise awareness of impact of cost of the school day on families. Implement strategies to reduce cost of the school day.	Impact reduced	Child Poverty Action Group; School management Team; Education Officers	December 2019	
	Close the attainment gap between the poorest pupils and their classmates.	Develop teacher's capacity through Coaching and Modelling sessions in Nurture and Family Learning Sessions	Whole system approach to improve attainment	Head of Education; Services/Attainment Challenge Lead; Locality Education Officer	Ongoing 2019-20	
		Further develop *Holiday Literacy Lunch Clubs* within Attainment Challenge Communities.	Reduce barriers between parents/carers and school.		June – August 2019	
3.1.2	Close the attainment gap for LAC at home children	Review/revisit Inverclyde GIRFEC	Whole system support of children,	Integrated Children's Services Partnership	Ongoing 2019-20	

Outcome Reference	Development Area	Actions	Impact	Who is Responsible	Timescale	Links
	and young people	model including: Quality Assurance of wellbeing assessment process; TAC procedures, Education Action Plans and Child's Plan. School improvement planning priorities improved outcomes for LAC/Care Experienced young people	young people and families supports attainment Whole school, departmental and teacher planning for LAC/CE improves.	- LAC Outcomes Group Head of Education Education Services Head of Education Head Teachers	 June 2019	
3.1.3	Reduce the number of LAC and Care Experienced young people who are NEET.	Ensure all opportunities for work, further education and training are explored for all LAC/Care Experienced young people. Create and develop partnerships working with colleges, universities and employers to create education, training and work opportunities for LAC and Care	More robust procedures. Employers, colleges and training providers widen their support for LAC and Care Experienced (CE) young people. All LAC/CE and Care Experienced young people will have participated in work/college/training prior to leaving school thus enhancing their	Head of Education; Champions Board; MCMC Team; Head Teachers; Integrated Children's Services Partnership - LAC Outcomes Group (See CSP Revised Structure) Head of Education MCMC Team Head Teachers Integrated Children's Services Partnership - LAC Outcomes Group	Ongoing 2019-20 Ongoing 2019-20	

Outcome Reference	Development Area	Actions	Impact	Who is Responsible	Timescale	Links
		Experienced young people. Develop current tracking and intervention strategies to targeted groups.	opportunities for a positive destination. Young people develop skills to support them in the world of work, training and further education.	Head of Education Head Teachers	August 2019	

3.2 Parents support their children to improve attainment.

Outcome Reference	Development Area	Actions	Impact	Who is Responsible	Timescale	Link
3.2.1	Parents/carers work collaboratively with schools and Early Year establishments.	Develop and implement Parent Strategy to improve partnership working	Whole system approach to improve attainment	Head of Education Locality Education Officer; Services/Attainment Challenge Programme Manager.	Ongoing 2019-20	
	Increase school's capacity for family learning	Develop partnership working between Education Services, 3rd Sector, parents/carers and young people'	Reduced barriers between parents/carers and school.	Head of Education Locality Education Officer Champions Board.	Ongoing 2019-20	
		Increase parent capacity to engage and be involved in	Events to build partnerships that shares the learning	Head of Education; Locality Education Officer;	Ongoing 2019-20	

Outcome Reference	Development Area	Actions	Impact	Who is Responsible	Timescale	Link
		their children's learning.	between parent/carer and child Working together sustains learning	Champions Board.		
3.2.2	Improve attendance in all Inverclyde schools.	Identify the children within SIMD 1 and 2 with less than 80% attendance in P1, 2, and 3. Review/revisit GIRFEC pathway for this cohort.	Improved attendance. Longer term increased attainment for children in SIMD1 & 2.	Head of Education Services; Head Teachers Attainment Challenge Lead; Barnardo's Nurture Inverclyde Integrated Children's Services Partnership - LAC Outcomes	Ongoing 2019-20 Ongoing 2019-20	
3.2.3	Reduce exclusions in Inverclyde Schools	Identify the children and young people at risk of exclusion. Review/revisit GIRFEC pathway.	For LAC/CE improve: tracking and monitoring; Target setting; Curriculum flexibility. Improved integration and partnership working to support LAC/CE.	Head of Education; Locality Education Officers; Locality ASN Forum; Integrated Children's Services Partnership - LAC Outcomes Group. Multi-agency and 3rd Sector partners; Integrated Children's Services Partnership - LAC Outcomes Group.	Ongoing 2019-20 Ongoing 2019-20	

Outcome Reference	Development Area	Actions	Impact	Who is Responsible	Timescale	Link
3.2.4	Raising awareness of Corporate Parenting responsibility improves outcomes for LAC	Review impact of Champions Board Consultation events around priority areas Increase parental and carer involvement for those in Kinship/Foster Care and ASN/LAC at Home Multi-agency review of GIRFEC model.	Provide a governance and communication framework Builds networks of support and social capital Reduced barriers to engaging with parents/carers allowing them to become more invested in their child's education	Champions Board; Pround2Care Group/Inverclyde Council/Elected members/Inverclyde Corporate Parenting Steering Group; Integrated Children's Services Partnership - LAC Outcomes Group	Ongoing 2019-20	

3.3 Learning and skills for life are improved, including for LAC

Outcome Reference	Development Area	Actions	Impact	Who is Responsible	Timescale	Links
3.3.1	Improve employability, skills and sustained positive school lever destinations for LAC.	Young people have experiences while at school to prepare them for post-school outcomes. Develop Annual Survey of all S3-S6 pupils which shows	Improved pupil readiness for post-school destinations. Increased resilience and capacity of LAC as they	Education Services; Inverclyde Corporate; Champions Board; Parenting Steering Group. Inverclyde Corporate Parenting Steering Group;	Ongoing 2019-20 Ongoing 2019-20	3.3, 3.4, 4.3 3.5

Outcome Reference	Development Area	Actions	Impact	Who is Responsible	Timescale	Links
		their thoughts and aspirations for the senior phase, this also supports schools and post-school partners.	prepare for the world outside school.	Integrated Children's Services Partnership - LAC Outcomes Group; MCMC Team		
		Listen to the views of LAC/CE young people as they prepare for beyond their school years.	Enhanced partnership between school and home for LAC and CE young people.	Inverclyde Corporate Parenting Steering Group.	Ongoing 2019-20	3.5
		Developing partnerships to improve opportunities to provide work experienced learning and develop skills.	Improved community involvement in offering opportunities for local skills development for LAC pupils.	Inverclyde Corporate Parenting Steering Group/Inverclyde Academy/Education Scotland/children and young people Improvement collaborative.	Ongoing 2019-20	2.2, 3.3, 3.5
		Promote an improvement culture that engages young people, families and communities.	Improved destinations for LAC.	Parenting Steering Group; Integrated Children's Services Partnership - LAC Outcomes Group; MCMC Team	Ongoing 2019-20	4.3

3.4 Young people aged 16-24 are in employment and training.

Outcome Reference	Development Area	Actions	Impact	Who is Responsible	Timescale	Links
3.4.1	Increase the number of Care Experienced 16-24 year olds in employment and training	Pathway assessment and Plans reviewed at key transition points Consultation event with Chamber of Commerce and Inverclyde Council	Care experienced young people's self-esteem will be increased Engage and lobby local need	Champions Board; Inverclyde Corporate; Parenting Steering Group; Economic Regeneration; Integrated Children's Services Partnership - LAC Outcomes Group; Chambers of Commerce.	Ongoing 2019-20	3.3.1 4.3

Priority Themes and Outcomes:

Priority Theme 4: Corporate Parenting

Outcomes:

4.1 LAC young people where possible, will be supported and maintained in their local community
4.2 Care experienced young people know how to get the help they need to sustain a home.
4.3 Care experienced young people have nurturing relationships through key transition points.

Priority Theme 4: Housing and Accommodation

Outcome	Development Area	Actions	Impact	Who is Responsible	Timescale	Links
4.1	A collaborative approach is taken to improve services to give care experienced young people a sense of place and belonging in their local communities	Evaluate the effectiveness of the TAC to promote the wellbeing areas identified in the Pathway Plan.	Increased capacity and knowledge amongst the TACs to build an evidence base of what works to improve health and wellbeing.	Champions Board, Child Poverty Action Group, Integrated Children's Services Partnership, Inverclyde Corporate Parenting Steering Group	Ongoing 2019-20	1.1.1 1.1.3 1.2.1 1.2.2 1.4.1 2.2.3 3.3.2 3.4.1
		Provide opportunities for multi-agency professional learning to support staff to improve their understanding of the lived experience of care experienced children, young people and their families.	Increased awareness improves practice and support to care experienced young people and their families.	Inverclyde Corporate Parenting Steering Group, Proud2Care Group	Ongoing 2019-20	3.2.4
		Establish a Care Experienced Champions Network across the Community Planning Partnership.	Sharing practice improves outcomes for experienced young people.	CEYP Attainment Fund Evaluation Group, Proud2Care Group, Your Voice	Autumn 2019	3.2.4 3.3.1

Outcome	Development Area	Actions	Impact	Who is Responsible	Timescale	Links
4.2	Reducing housing instability is improved by co-ordinated approaches from services	Analyse with the Throughcare/Aftercare Team, RSLs and care experienced young people the impact of the launch of the Youth Housing Statement. Review the existing packages of support with care experienced young people and support services. Establish an Aftercare / Continuing Panel Establish a gateway community hub that promotes access to information and support networks.	Increasing opportunities for care experienced young people to build skills in preparation to move into a tenancy. Reduce barriers that support care experienced young people to sustain their tenancy. Care experienced young know how to access relevant support to improve them sustaining a tenancy.	Champions Board, Housing Partnership Group, Inverclyde Corporate Parenting Steering Group Inverclyde Corporate Parenting Steering Group, Aftercare Team and care experienced young people Inverclyde Corporate Parenting Steering Group, Aftercare Team and partnership with RSLs	Ongoing 2019-20	1.4.1 1.4.2
4.3	A collaborative approach to workforce development improves graduated transitions	Analyse and evaluate the Child's Planning process to ensure that wellbeing need is identified and addressed early. The ICPG, a multi-agency group of	Care experienced young people know who will support them at key transition points. Outcomes for individual care	Champions Board, Inverclyde Corporate Parenting Steering Group, Child's Planning and Improvement Officers and the Team Around the Young Person Joint Children's Services Partnership,	Quarterly Reporting Quarterly Meetings	2.2.4 3.1.1 3.2.4 1.4.3

Outcome	Development Area	Actions	Impact	Who is Responsible	Timescale	Links
		corporate parents increasingly uses data to track transition points. Care experienced young people identify who will support them at transition points	experienced young people are improved by data analysis. Care experienced young people feel valued	Inverclyde Corporate Parenting Steering Group Advocacy, Child's Planning and Improvement Officers	Cycle of pathway planning	3.3.1

6

Appendix 1

Glossary of Terms	
Child	Anyone who has not yet reached their 18th birthday. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change his/her status or entitlements to services or protection.
Care Experienced Leavers	Aged 16-26 previously looked after at the age of 16
Neglect	The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: • provide adequate food, clothing and shelter (including exclusion from home or abandonment); • protect a child from physical and emotional harm or danger; • ensure adequate supervision (including the use of inadequate care-givers); or • ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.
Child's Plan	Where those working with the child and family have evidence that suggests that one or more targeted interventions is required to meet the child's wellbeing needs, then a Child's Plan should be drawn up to include a single plan of action, managed and reviewed through a single meeting structure even if the child is involved in several processes. Where a child protection intervention is required, the Child's Plan will exist and incorporate a „Child Protection Plan" for as long as this is deemed to be necessary.
Child Protection	Child protection is when a child requires protection from child abuse or neglect. For a child to require protection, it is not required that child abuse or neglect has taken place, but rather a risk assessment has identified a *likelihood* or *risk* of significant harm from abuse or neglect
Getting It Right For Every Child (GIRFEC)	The GIRFEC approach is a Scotland-wide programme of action to improve the wellbeing of all children and young people. Its primary components include: a common approach to gaining consent and sharing information where appropriate; an integral role for children, young people and families in assessment, planning and intervention; a co-ordinated and unified approach to identifying concerns, assessing needs, agreeing actions and outcomes, based on the Wellbeing Indicators; a Named Person in universal services; a Lead Professional to co-ordinate and monitor multi-agency activity where necessary; and a skilled workforce within universal services that can address needs and risks at

Glossary of Terms	
	the earliest possible point. Key elements of the GIRFEC approach, such as Named Person and Child's Plan, are given a statutory basis through the Children and Young People (Scotland) Act 2014
Harm/significant harm	Harm means the ill treatment or the impairment of health or development of the child – in this context, "development" can mean physical, intellectual, emotional, social or behavioural development and "health" can mean physical or mental health. Child protection is closely linked to the risk of *significant* harm – whether the harm suffered, or likely to be suffered, by a child is „significant" is determined by comparison of the child's health and development with what might be reasonably expected of a similar child.
Lead Professional	For a child who is receiving support from a number of different agencies, the Child's Plan will be multi-agency. In these circumstances, the role of the Lead Professional is vital to ensuring that support is coordinated across agencies the child, young person and family are kept informed and are actively involved in the process, and the agreed support is being taken forward in line with the plan. The Lead Professional will be the professional who is best placed to carry out that coordinating role and work with the family to improve outcomes for the child, or young person. The role of the Named Person in relation to promoting, supporting and safeguarding the child's wellbeing, will continue to be important alongside the coordinating role of the Lead Professional
My World Triangle	As part of the GIRFEC National practice model for assessing risk and need, the My World Triangle is a framework that provides a starting point for considering what risks might be present in a child's life. It focuses attention on the three dimensions of a child's world: *how I grow and develop what I need from people who look after me, my wider world.*
Named Person	The Named Person is a professional point of contact in universal services, most often known to the family and available as a single point of contact both to support children and families their parents/carers when there is a need, and to act as a point of contact for other practitioners who may have a concern about the child's wellbeing.
Request for Assistance	Where a practitioner has a concern about a risk to a child's wellbeing, they should share that concern with the child's Named Person as soon as is reasonably possible. Where concerns about possible harm to a child arise these should always be shared with the appropriate agency (normally police or social work) so that staff responsible for investigating the circumstances can determine whether that harm is *significant*. Concerns should be shared without delay as per local guidelines. Once a concern is shared, information will be gathered by the investigating agencies to determine whether a response under child protection is required.
Parents/carers	A parent is defined as someone who is the genetic or adoptive mother or father of the child. A carer is someone other than a parent who has rights/responsibilities for looking after a child.
Resilience Matrix	The Resilience Matrix is a tool for analysing what the information gathered around a particular child protection concern might mean for a child. It provides practitioners with a framework for weighing up the particular risks against any protective factors for the individual child in relation to resilience, vulnerability, adversity and the protective environment.
Risk	In the context of this guidance, risk is the *likelihood* or *probability* of a particular outcome given the presence of factors in

Glossary of Terms	
	a child's or young person's life. What is critical with respect to child protection is the risk of significant harm from abuse or neglect.
Wellbeing indicators	The Wellbeing Indicators are the broad framework for identifying a child's needs where potential child protection (and other) concerns are identified. They do so under eight headings – *safe; healthy; achieving; nurtured; active; respected; responsible*; and *included* – which are used to identify what needs to change in the Child's Plan (or the incorporated Child Protection Plan) and how progress on outcomes should be monitored and recorded.
Team around the Child	Skill set around the child, young people and family to work in partnership to deliver improved SMART outcomes in the Child's Plan

Inverclyde Alliance

AGENDA ITEM NO: 9

Report To:	**Inverclyde Alliance Board**	**Date**: **17 June 2019**
Report By:	**Corporate Director Environment, Regeneration & Resources**	**Report No:**
Contact Officer:	**Sharon Lang**	**Contact No**: **01475 712112**
Subject:	**Programme of Alliance Board Meetings to December 2020**	

1.0 PURPOSE

1.1 The purpose of this report is to request the Board to agree a programme of dates for meetings of the Inverclyde Alliance Board to December 2019.

2.0 SUMMARY

2.1 The suggested dates continue the programme of quarterly meetings of the Alliance Board and these are set out in appendix 1 to the report. The October and December 2019 dates were agreed by the Board at an earlier meeting.

2.2 It is proposed to continue with the arrangement of including workshop sessions on priority issues for the Community Planning Partnership at every second meeting of the Board.

3.0 RECOMMENDATION

3.1 It is recommended that the Alliance Board agrees the programme of Alliance Board meetings to December 2019, as set out in the appendix to the report.

Sharon Lang
Legal & Property Services

APPENDIX

INVERCLYDE ALLIANCE BOARD

Call for Agenda Items	Submission Date	Pre-Agenda Meeting	Issue Agenda	Board Meeting
Wed 28 Aug 2019	Fri 6 Sept 2019	Wed 18 Sept 2019 - 3 pm	Mon 23 Sept 2019	**Mon 7 Oct 2019 - 1pm (workshop sessions)**
Wed 30 Oct 2019	Fri 8 Nov 2019	Wed 20 Nov 2019 - 3 pm	Mon 25 Nov 2019	**Mon 9 Dec 2019 - 1pm**
Wed 5 Feb 2020	Fri 14 Feb 2020	Wed 26 Feb 2020 - 3 pm	Mon 2 Mar 2020	**Mon 16 Mar 2020 - 1pm (workshop sessions)**
Wed 6 May 2020	Fri 15 May 2020	Wed 27 May 2020 - 3 pm	Mon 1 June 2020	**Mon 15 June 2020 - 1pm**
Wed 26 Aug 2020	Fri 4 Sept 2020	Wed 16 Sept 2020 - 3 pm	Mon 21 Sept 2020	**Mon 5 Oct 2020 - 1pm (workshop sessions)**
Wed 28 Oct 2020	Fri 6 Nov 2020	Wed 18 Nov 2020 - 3 pm	Mon 23 Nov 2020	**Mon 7 Dec 2020 - 1pm**

Inverclyde Alliance

AGENDA ITEM NO: 10

Report To:	**Inverclyde Alliance Board**	**Date:**	**17 June 2019**
Report By:	**Ruth Binks, Corporate Director Education, Communities & Organisational Development**	**Report No:**	
Contact Officer:	**Hugh Scott Service Manager**	**Contact No:**	**01475 715450**
Subject:	**Young People Representation on Inverclyde Alliance Board**		

1.0 PURPOSE

1.1 The purpose of this report is to seek approval from the Inverclyde Alliance Board to progress with plans to explore the possibility of appointing Inverclyde's two elected Members of the Scottish Youth Parliament (MSYPs) to the Inverclyde Alliance Board.

2.0 SUMMARY

2.1 In 2013, the Scottish Government agreed that 2018 should be dedicated to young people and as such 2018 was officially referred to as the Year of Young People. Community Learning and Development's Youth Work Services team delivered a series of events and opportunities for young people to take part in including our first ever awards event and two successful Clyde Conversations events.

2.2 As a legacy of the Year of Young People, it is hoped that the youth consultation and representation agenda be further developed to include and involve young people more meaningfully within formal structures. As such, it is proposed that the 2 democratically elected members of the Scottish Youth Parliament be co-opted on to the Inverclyde Alliance Board to enhance the role and profile of an MSYP and ensure that voices of young people are heard and can be effective in influencing decisions taken at this level.

2.3 In addition, it is proposed that other members of the Inverclyde Youth Council be given the opportunity to attend the Board along with one of our MSYPs on a rotational basis. This will provide continuity as well as an opportunity for members of the Youth Council to gain experience of attending such meetings and hopefully develop confidence, skills and knowledge of local government structures which they could use to develop the Youth Council further.

2.4 The elected MSYPs and members of the Youth Council attending the meetings will be supported by members of Community Learning and Development's Youth Services Team who will support the young people in relation to all aspects of attending such a meeting e.g. agenda, report / presentation preparation, their role during the meetings etc.

2.5 If approved, it is hoped that the young people can provide an important youth perspective on agenda items. The MSYPs will formally represent the Youth Council and young people from across Inverclyde. They regularly consult with young people and as such have a firm understanding of young

people's views and opinions and can share this information with the Board as appropriate.

2.6 There are examples of young people sitting on formal committee structures elsewhere across Scotland. In North Lanarkshire Council, members of the North Lanarkshire Youth Council sit on the Youth, Equalities and Empowerment Committee and in Perth and Kinross Council, the MSYPs sit on the Lifelong Learning Committee. If approved, Inverclyde would still be one of the few authorities to take this significant step and ensure youth participation is valued and that the role of the MSYP is both meaningful and recognised.

3.0 RECOMMENDATIONS

It is recommended that the Alliance Board:

a. Notes the content of this report.
b. Agrees to the proposed arrangements for our two MSYPs to sit on the Alliance Board;
c. Agrees to the proposal for other members of the Inverclyde Youth Council to attend the Board as and when required.

Ruth Binks,
Corporate Director: Education, Communities and Organisational Development

4.0 BACKGROUND

4.1 Inverclyde's Youth Participation and engagement structures currently comprises:

- 2 Elected Members of the Scottish Youth Parliament
- Inverclyde Youth Council
- Clyde Conversations Steering Group
- Clyde Conversations Events
- I Youth Zone Steering Groups
- LGBT Clyde Pride Group

4.2 There is in place a well-established, dynamic and sector leading approach to pupil /youth engagement through pupil councils, I Youth Zone steering groups, Clyde Conversations Steering Group and events, Inverclyde Youth Council and the members of Scottish Youth Parliament who support regular consultation events and activities across Inverclyde. The young people involved in this diverse infrastructure welcome the opportunity to continue to inform decision-making processes.

4.3 This desire has been strengthened by the focus of the Year of Young People 2018 and young people have requested increased opportunities of participation as part of the legacy planning. In Inverclyde, the Year of Young People presented a range of opportunities for young people both locally and nationally to enhance the youth participation agenda and this would be a fitting legacy of the year.

4.4 The Inverclyde Youth Participation Strategy demonstrates the commitment from the local authority to ensure that young people feel they have a voice and are included and empowered to make changes to their own lives. Underpinning the Strategy is Article 12 of the UNCRC which states that "when adults are making decisions that affect children, children have the right to say what they think should happen and have their opinions taken into account". This proposal would ensure that Inverclyde is meeting the objectives stated in Article 12 and would ensure that youth participation is both meaningful and empowering.

4.5 The involvement of young people in the planning and delivery of the Clyde Conversations events worked well from the perspective of both elected members and young people and this presented an opportunity to deepen the level of engagement and influence on the part of young people. Young people are keen to represent the interests of Inverclyde's young people at this level.

5.0 IMPLICATIONS

Legal: none at present
Finance: None
Human Resources: none at present
Equality and Diversity: There is representation within our youth participation structures from young people with a variety of backgrounds and experiences including LGBT, care-experienced young people, young people with disabilities and young carers.
Repopulation: none at present
Inequalities: none at present

6.0 CONSULTATIONS

6.1 Various consultations have been carried out in relation to youth representation including the Penny for Youth Thoughts, Clyde Conversations Survey and the consultation used to create the Youth Participation Strategy.

7.0 LIST OF BACKGROUND PAPERS

7.1 None

Inverclyde Alliance

AGENDA ITEM NO: 11

Report To:	**Inverclyde Alliance Board**	**Date:**	**17 June 2019**
Report By:	**Louise McVey Corporate Policy, Performance and Partnership Manager**	**Report No:**	
Contact Officer:	**Gail Baxter Corporate Policy Officer (Poverty)**	**Contact No:**	**712746**
Subject:	**Local Child Poverty Action Report**		

1.0 PURPOSE

1.1 The purpose of this report is to seek the approval of the Alliance Board for the final Local Child Poverty Action Report 2018/19.

2.0 SUMMARY

2.1 Under the Child Poverty (Scotland) Act 2017, there is a requirement for all local authorities and relevant Health Boards across Scotland to reduce child poverty. The Act sets out four national statutory income based targets to be achieved by 2030. The four targets are:-

- Less than 10% of children are in relative poverty
- Less than 5% of children are in absolute poverty
- Less than 5% of children are in combined low income and material deprivation
- Less than 5% of children are in persistent poverty.

2.2 The Act requires that each local authority and relative NHS Health Board must jointly prepare annual Child Poverty Local Action Reports (LARs). The first report will cover the financial year 2018/19. These annual reports must set out the activity undertaken during the reporting period and those planned going forward to meet the 2030 targets. The report requires to be submitted to the Scottish Government by 30 June 2019.

2.3 Child poverty is a significant issue for a large number of families in Inverclyde. In recognition of this, funding has been allocated to some actions included within the LAR to specifically develop strategies and implement projects with the aim of reducing child poverty within Inverclyde.

2.4 It is recognised that a multi-agency approach is required in order to tackle poverty, and partners delivering activities at a local level to tackle Child Poverty must be involved in the forward planning element. To facilitate this, an Inverclyde Child Poverty Action Group has been established. Membership of the group is shown in 5.2 of this report.

2.5 The Inverclyde Child Poverty Action Group has agreed that the Inverclyde LAR should focus on a small number of set themes. Each theme provides an overview of current service provision and what is planned for the year ahead.

2.6 The Inverclyde LAR Report 2018/19 is provided for final approval in Appendix 1.

3.0 RECOMMENDATIONS

3.1 It is recommended that the Alliance Board:

a. Approves the Local Child Poverty Action Report.

Louise McVey
Corporate Policy, Performance and Partnership

4.0 BACKGROUND

4.1 The Fairer Scotland Strategy set out a vision to ensure that Scotland is the best place in the world in which to grow up. To realise this outcome, it is committed to eradicating child poverty. Evidence suggests that poverty can undermine the health, wellbeing and educational attainment of children who experience it. A 2013 study found that child poverty in the UK cost at least £29 billion a year.

4.2 **Child Poverty (Scotland) Act 2017**

This legislation sets out a clear agenda for measuring, reporting on and reducing child poverty levels across Scotland. There are a number of statutory requirements which are set out below:

- Four statutory national **income** targets, to be met in the financial year beginning 1 April 2030.
- Places a duty on local authorities and health boards to report annually on activity taken, as well as planned action to contribute to the reduction of child poverty by 2030.
- Four **interim income** targets, to be met by Scottish ministers in the financial year beginning 1 April 2023 and 2026.
- Places a duty on Scottish ministers to publish child poverty delivery plans in 2018, 2022, and 2026, and to report progress towards meeting the 2030 targets.
- To report on delivery plans annually.
- The creation of a Poverty and Inequality Commission to be established from 1 July 2019 with functions related to the child poverty national reduction targets.

Scotland is now the only part of the UK with statutory targets to reduce child poverty.

5.0 DEVELOPING INVERCLYDE'S LAR

5.1 The range, role and collaborative engagement with partners delivering activities at a local level to tackle child poverty **must** be reflected in the LAR. However, partners delivering these activities must also be involved in the forward planning element.

5.2 To facilitate this, an Inverclyde Child Poverty Action Group has been established with the following leads:-

Designation	**Service / Organisation**
Corporate Director	Education, Communities and Organisational Development
Corporate Policy Officer (Poverty)	Corporate Policy
Service Manager	Children's Specialist Service
Children's Planning and Improvement Officer	Children & Families
Manager	Corporate Policy, Performance and Partnership
Principal Benefits and Customer Services Officer	Finance
Service Manager	Children & Families
Team Leader	Public Health and Housing
Head of Inclusion, Culture and Communities	Inclusion, Culture and Communities
Quality Improvement Officer, Early Years	Education
Head of Organisational Development, Policy and Communications	Organisational Development, Policy and Communications
Acting Head of Education	Education
Implementation Lead	CELCIS
Health & Wellbeing and Poverty Linked Initiatives Officer	Education

Chief Executive Officer	CVS
Operations Manager	The Trust Employability Service
Service Manager	Strategy and Support Services
Service Manager	Primary Care, Public Health and Equalities
Project Manager	Scottish Attainment Challenge

5.3 The Inverclyde Child Poverty Action Group agreed that the Inverclyde LAR should focus on a small number of set themes. Each theme provides an overview of current service provision and what is planned for the year ahead. This Report is provided for the final approval of the Alliance Board in Appendix 1.

5.4 In accordance with the Child Poverty (Scotland) Act, the Local Action Report will be submitted annually, with the first LAR submitted in June 2019.

6.0 IMPLICATIONS

6.1 Legal: The Child Poverty (Scotland) Act places a legal requirement on Councils and NHS Health Board to produce a Local Child Poverty Action Report.

6.2 Finance: Financial implications are shown in Appendix 1 (Delivery Plan, page 15 – 58).

6.3 Human Resources: There are no direct HR implications arising from this report at present.

6.4 Equality and Diversity: EIA can be found in Appendix 2 of this report.

6.5 Repopulation: A reduction in poverty levels will improve the quality of life for many residents in Inverclyde. Improved satisfaction levels may encourage more young people to stay in the area and may make Inverclyde a more attractive place for those considering moving to the area. Repopulation remains a key priority within the Inverclyde Outcomes Improvement Plan.

6.6 Inequalities: Inequalities and poverty are inextricably linked therefore reducing poverty will have an impact of reducing inequalities in the area.

7.0 CONSULTATIONS

7.1 n/a

8.0 LIST OF BACKGROUND PAPERS

8.1 None

APPENDIX 1

Inverclyde

Local Child Poverty Action Report

2018/19

DRAFT

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Foreword

We are pleased to introduce the first Inverclyde Child Poverty Action Report.

Inverclyde is an area with many strengths and a great deal to be proud of, however there are communities where levels of poverty and inequality are disproportionately high. Too many children in Inverclyde are currently living in poverty and experiencing poorer outcomes as a result of this. Urgent action is needed now, both to help these children and to prevent future generations of children growing up in poverty.

Poverty however is multi-dimensional in nature and one organisation alone cannot deliver the change that is required to tackle its root causes. Collaboration is essential to bring resources, knowledge and expertise together that can make lives better for those children and young people in our communities experiencing the greatest inequalities.

That is why, to inform the development of this Inverclyde Local Child Poverty Action Report, we held a dedicated Inverclyde Child Poverty Event 'Every Child, Every Chance' in October 2018. This event was the first of its kind locally and was attended by more than 100 representatives from across the public and the third sectors. It provided an invaluable opportunity to learn more about the drivers of poverty, to discuss the particular issues prevalent in our communities and to forge closer professional relationships. The event was a great success and provided a robust platform on which to develop this Inverclyde Child Poverty Action Report.

We know that poverty is not inevitable and we are committed to working together, sharing our learning and developing new ways of working in order to deliver improved outcomes and life chances for the children and young people of Inverclyde.

Aubrey Fawcett
Chief Executive
Inverclyde Council

Jane Grant
Chief Executive
NHS Greater Glasgow and Clyde

Executive Summary

Just over 1 in 4 children in Inverclyde is living in poverty, increasing to 1 in 3 in some of our communities. Partners in Inverclyde recognise that child poverty and deprivation limits opportunities and choice and that by tackling child poverty; alleviating the financial strain on low income households and improving the living standards of families in poverty, we will help to improve outcomes for our children and young people and create thriving, sustainable communities across Inverclyde. In doing this, we will achieve our vision of 'Getting it right for every child, citizen and community'.

This Inverclyde Local Child Poverty Action Report sets out what actions Inverclyde Council and NHS Greater Glasgow and Clyde, along with partners, will take to reduce child poverty in Inverclyde. The report sets out what we have done in the past year and what we plan to do in the year ahead.

The diagram below provides an overview of the local actions for delivery within this Inverclyde Child Poverty Action Report and how they link to the national drivers of poverty:

Income from Employment	*Cost of Living*	*Income from Social Security and Benefits in Kind*
The Scottish Attainment Challenge	**Reduce Cost of School Day**	**Implementation of automated payments**
The Employability Pipeline	**Holiday lunch club provision for families**	**Change in eligibility criteria for free school meals, school clothing grants**
Training / Apprenticeships for school pupils	**Food provision for residents in need**	**Maximise income for eligible residents**
SAMH Individual Placement Support service (IPS)	**Eradicating period poverty**	**Roll out of the Best Start Grant**
	Increase the supply of affordable housing	**Credit pupils in receipt of free schools meals to purchase food during holidays**
	Tackling Fuel Poverty	**Ensure families can access support from Social Prescribing Practitioners**

In developing this Child Poverty Action Report we have looked at what we know is working, sharing our learning and developing approaches, however radical, to doing things differently to tackle the poverty and inequalities that exist in our communities. The initiatives described below are intended to provide a flavour of the work that is being taken forward in Inverclyde to tackle child poverty.

Implementation of Automated Payments

We have identified that the application process for school clothing grants, free school meals and EMAs can act as a barrier to some families, resulting in them not claiming what they are entitled to. Work is currently being carried out to explore how information currently held by Council Tax for Council Tax reduction purposes can be used to provide automated payments to those eligible families, to ensure that they receive these benefits without the additional requirement to complete the application forms.

Income Maximisation for pregnant women and families with children

NHS Greater Glasgow and Clyde received £63,750 in 2018/19 for the enhancement of referral pathways into income maximisation for pregnant woman and families with children. Specifically, this money will be used to:

- Create local capacity in Health Board areas to establish or enhance referral pathways;
- Plan and delivery of training on child poverty, money matters and referral pathways for universal maternity and health visiting workforce;
- Develop formal referral pathways; and
- Negotiate additional capacity with local advice services.

Inverclyde Council has been allocated £2,704 of this funding and Child Poverty Action Group will use this to deliver input to midwifery, family nurse and health visiting staff around maternity and other benefits.

Cost of the School Day

'Cost of the School Day' awareness raising sessions have been carried out with the Head Teaches of all Inverclyde schools. As a result, new projects and initiatives have been adopted by local schools to reduce the cost of the school day, including:

- The purchase of additional PE kits to increase participation and allow children to exercise in comfort;
- Uniform swaps / banks;
- A reduction in the number of non-uniform days with no set donation;
- A reduction in fundraising events; and
- Offers of support for school trips to ensure opportunity for all.

The next stage will be to train local 'Cost of the School Day Champions' who will work to raise awareness amongst staff, parents and carers within the school community.

Our Plan

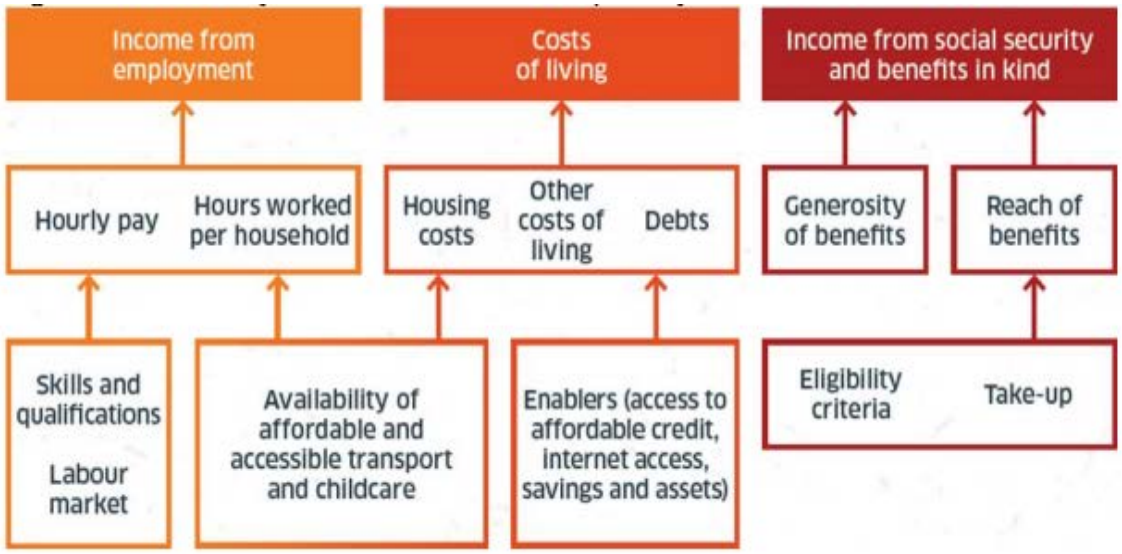
Introduction

Under the Child Poverty (Scotland) Act 2017 there is a requirement for all local authorities and relevant Health Boards across Scotland to reduce child poverty. The Act sets out four national statutory income based targets to be achieved by 2030. The four targets are:-

- Less than 10% of children live in households that are in relative poverty
- Less than 5% of children live in households that are in absolute poverty
- Less than 5% of children live in households that are in combined low income and material deprivation
- Less than 5% of children live in households that are in persistent poverty

The Act requires that each local authority and relative NHS Health Board must jointly prepare annual Child Poverty Local Action Reports (LAR's). The first report will cover the financial year 2018/19. These annual reports must set out the activity undertaken during the reporting period and those planned going forward to meet the 2030 targets.

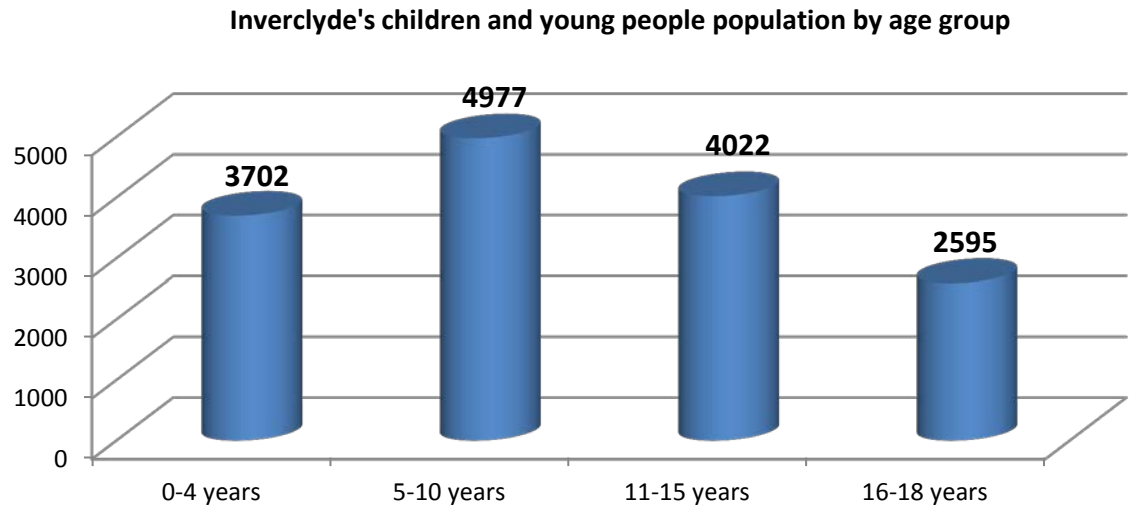
The direct drivers of poverty fall in to 3 main categories:-



How the risk of child poverty varies between different groups

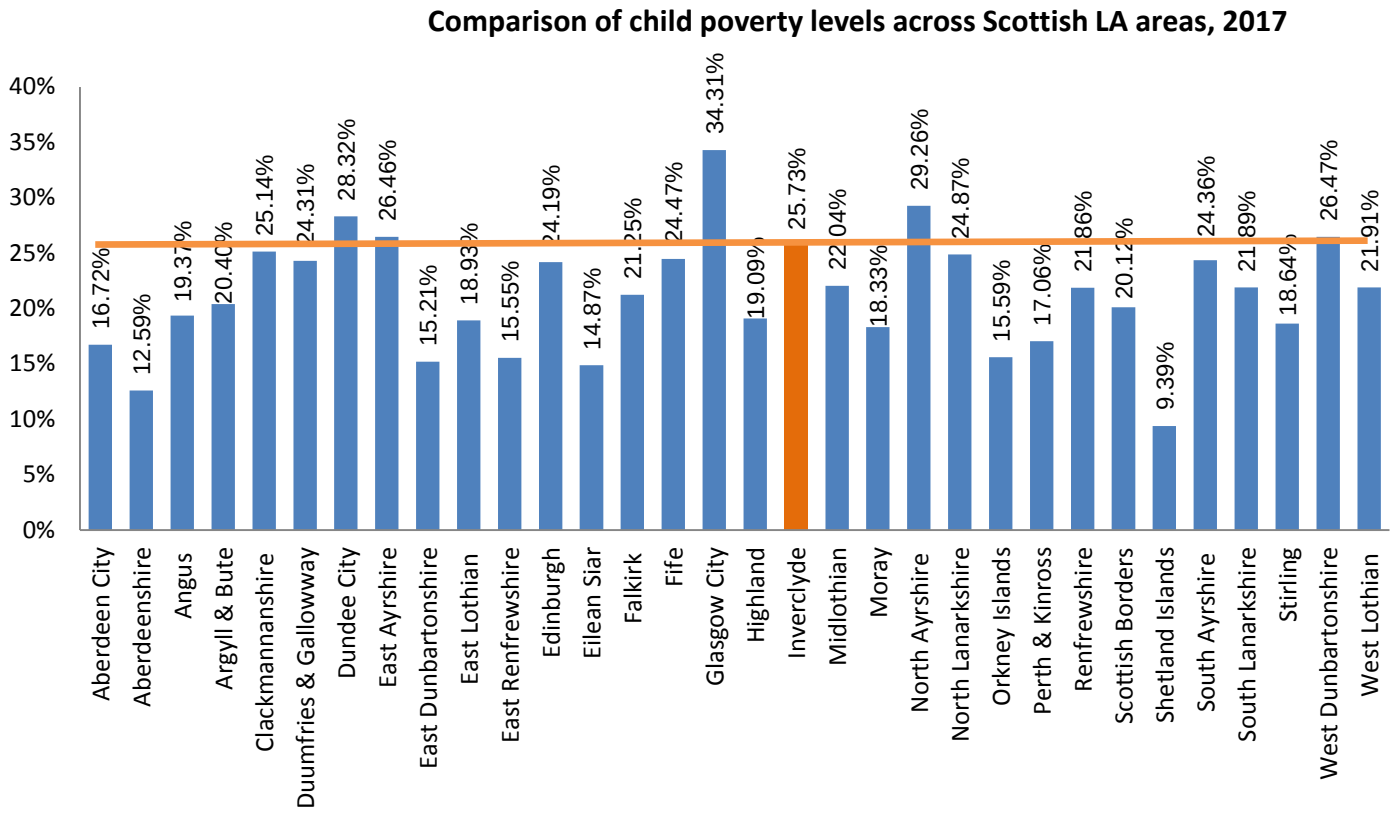
Child Poverty in Inverclyde

Inverclyde's population in 2017 was estimated to be 78,760. Just under one fifth, (19.4%) of the population is aged 18 years or younger. The age breakdown is shown in the graph below.



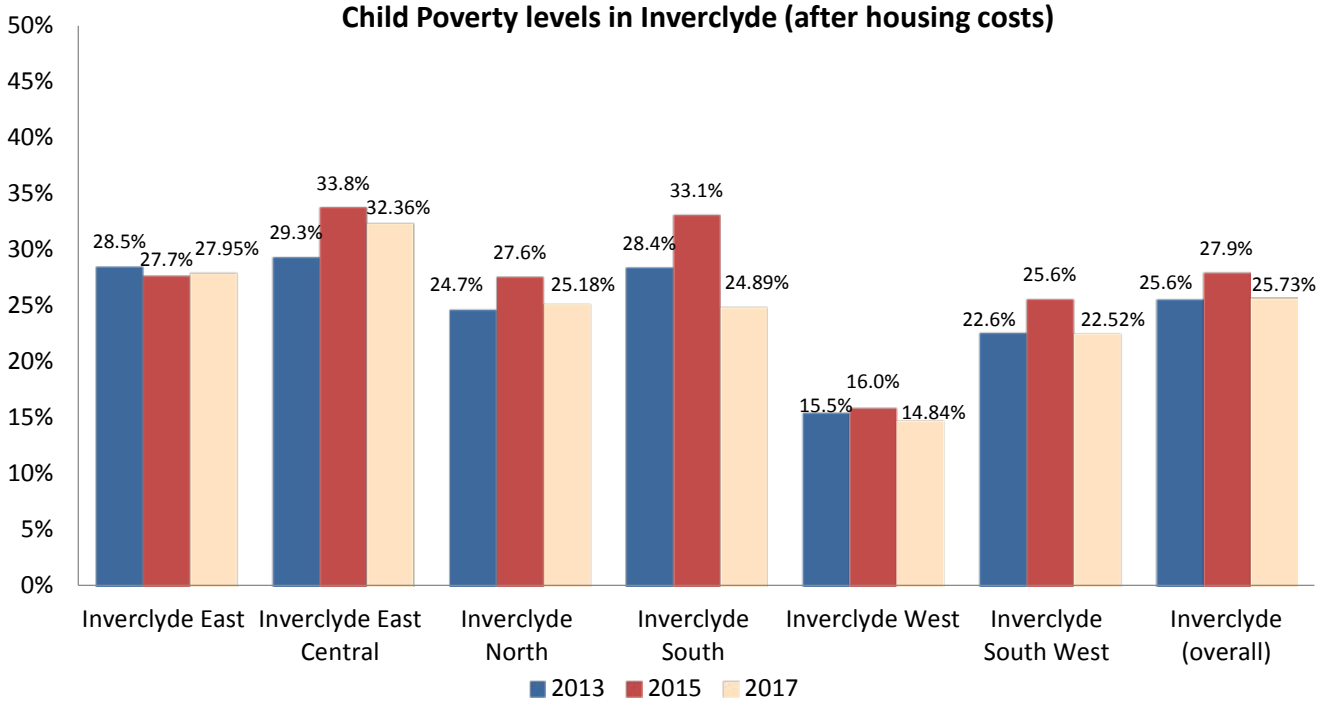
Source: NRS, Mid-year population estimates, 2017

According to poverty figures published by End Child Poverty, Inverclyde has the sixth highest level of child poverty in Scotland, after housing costs. It is estimated that just over 1 in 4 (25.7%) children and young people in Inverclyde are living in poverty.



Source: End Child Poverty, published January 2018

However, poverty levels vary significantly across the authority. The graph below shows that in Inverclyde East Central, child poverty levels rise to almost 1 in 3 children and young people.



(n.b ward boundaries as of 2013)

The Attainment Challenge

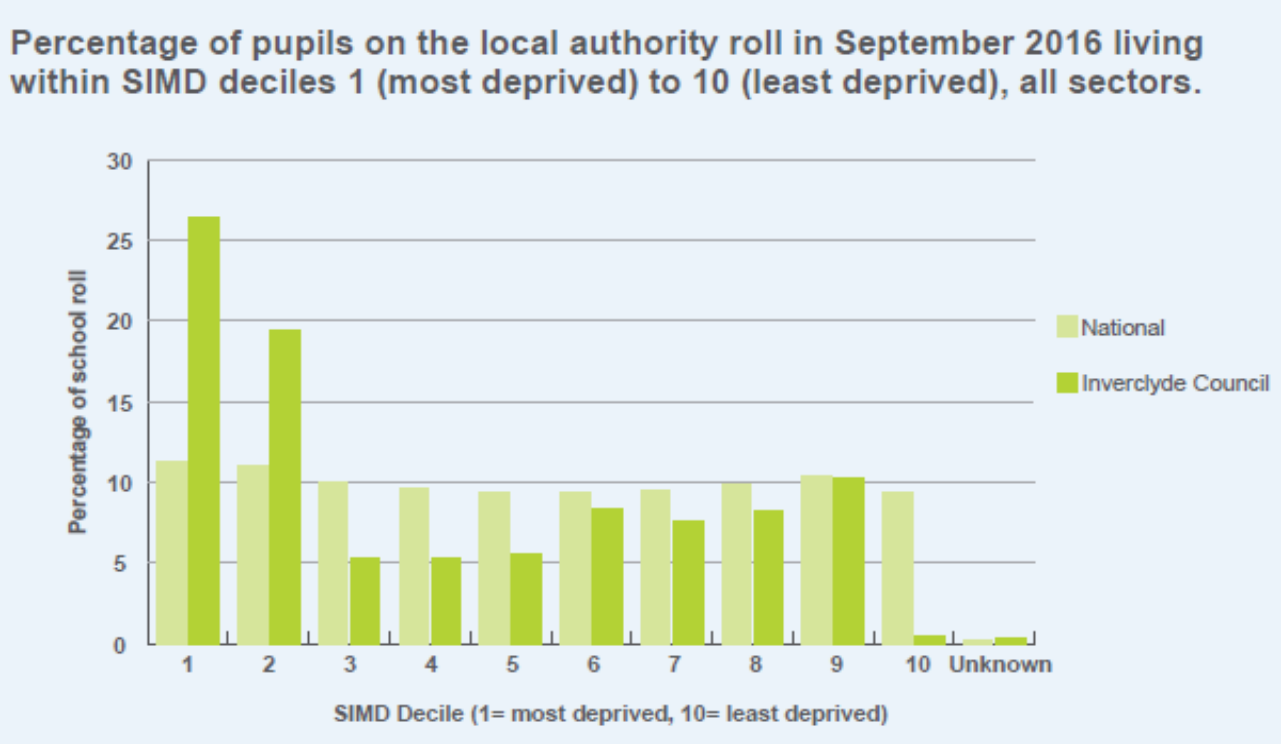
Differences in educational attainment can be a consequence of poverty but can also drive it too. It has been recognised nationally that there is a clear and persistent gap in attainment between pupils living in Scotland's most and least deprived areas. Educational attainment affects employment prospects later in life and in turn, the risk of future poverty. Children who achieved higher qualification levels increase their probability of being employed and having access to increased earnings.

The Scottish Attainment Challenge was launched by the Scottish Government in February 2015 with a focus on improving outcomes in literacy, numeracy and health and wellbeing for children from disadvantaged backgrounds.

Inverclyde was one of the first attainment challenge authorities in Scotland. This funding has been used to implement proven interventions designed to improve outcomes for children, and their families, including:

- increasing leadership at all levels, including parents and children;
- further strengthening links with third sector partners, including Barnardo's;
- embedding nurture across the education system; and
- supporting the skilled understanding and use of data for improvement.

The graph below shows that just under half of all pupils in Inverclyde schools live in the areas of highest deprivation categorised as SIMD 1 and 2. This is well above the national average. Moreover, Inverclyde has more than twice the national average number of pupils living in SIMD 1.



Locality Planning

Partners have recognised that there are particular communities in Inverclyde that suffer from higher levels of multiple deprivation and experience the greatest inequalities and therefore require targeted support and attention.

The Inverclyde Alliance is currently developing its approach to locality planning in Inverclyde and has produced Locality Plans for three areas in Inverclyde which experience the greatest level of inequality and deprivation.

Inverclyde has committed to developing these plans with communities, co-producing them using asset based community development. Work with communities has been going on via Aspiring Communities funded activity and is being used to inform the Locality Plans for Port Glasgow, Greenock East and Central and Greenock South and South West. This is in addition to the large scale community engagement programme ‘Our Place, Our Future’ which informed the Inverclyde Outcome Improvement Plan, and the responses from that have been broken down into the localities.

Developing our Local Child Poverty Action Report

Tackling child poverty, alleviating the financial strain on low income households and improving the living standards of families in poverty is key to improving outcomes for future generations and creating thriving, sustainable communities across Inverclyde.

Research has shown that childhood experiences have a strong bearing on a child's prospects in adulthood. Children that have grown up in poverty have a much higher likelihood of having poorer experiences than those who have grown up in better off households.

The Scottish Public Health Network report 'Polishing the Diamonds', Addressing Adverse Childhood Experiences (ACEs) in Scotland highlighted that ACEs have been shown to be related to deprivation with the experience of four or more ACEs being reported by 4.3% in the least deprived quintile and 12.7% in the most deprived quintile. ACEs and particularly childhood abuse and neglect are linked to poverty in adulthood.

- ## Inverclyde Child Poverty Action Group (CPAG)

Poverty is multi-dimensional, many people move in and out of poverty during the course of a year or over their lifetime, while a minority are in poverty for longer periods of time. Levels of poverty also vary, from people who are just under the poverty threshold to those who are in severe poverty or destitute and struggle to acquire the basic necessities of life. A partnership approach is essential to ensure that we develop a holistic approach locally to tackling poverty. Partnership working also has the benefit of collaborative gain, where we can achieve more than the sum of our parts.

Recognising this, we have established an Inverclyde Child Poverty Action Group, encompassing a wide range of partners:

Designation	Service
Corporate Director	Education, Communities and Organisational Development
Corporate Policy Officer (Poverty)	Corporate Policy
Service Manager	Children's Specialist Service
Children's Planning and Improvement Officer	Children & Families
Manager	Corporate Policy, Performance and Partnership
Principal Benefits and Customer Services Officer	Finance
Service Manager	Children & Families
Team Leader	Public Health and Housing
Head of Inclusion, Culture and Communities	Inclusion, Culture and Communities
Quality Improvement Officer, Early Years	Education
Head of Organisational Development, Policy and Communications	Organisational Development, Policy and Communications
Service Manager	Community Learning & Development, Community Safety and Resilience
Acting Head of Education	Education
Implementation Lead	CELCIS
Health & Wellbeing and Poverty Linked Initiatives Officer	Education

Designation	Service
Chief Executive Officer	CVS
Operations Manager	The Trust Employability Service
Service Manager	Strategy and Support Services
Service Manager	Primary Care, Public Health & Equalities
Project Manager	Scottish Attainment Challenge

An essential element in reducing child poverty in Inverclyde is effective engagement with those coping with the challenges of living in poverty. By developing a greater understanding and raising awareness across partners of the causes and effects of poverty, we can deliver services in a more targeted way as well as enhance the service that we are providing. Most importantly of all, it will ensure that the voices of those that are experiencing poverty are being heard.

Strengthening and building on the engagement that has already taken place is a key priority for the Inverclyde Child Poverty Action Group and we are currently looking at the best ways to develop our community engagement further.

- ### Inverclyde Child Poverty Event 'Every Child Every Chance'

The Inverclyde Child Poverty Event 'Every Child, Every Chance' was the first event locally where services and organisations came together as a whole to discuss how together, we can work to eradicate child poverty.

The event was attended by 103 people from various Services, organisations and the 3rd Sector. Of those attending, 26% of participants were from Inverclyde Council (Education Services); 17% from other Services within Inverclyde Council and 15% of participants were from the HSCP. The remainder of participants, 42%, were from the 3rd Sector.

The event was a success for Inverclyde, providing participants with the opportunity to gain an insight into the requirements for the Local Action Report, providing networking opportunities with other Agencies/Services and increasing the knowledge and understanding of participants as to what services are available that can support families living in poverty. An evaluation of the event was carried out which showed that it was positively received.

- ### Clyde Conversations 3

The third annual Inverclyde 'Clyde Conversations' event, which is an event solely for our young people in secondary schools took place in February 2018, with a follow up event in November 2018. Clyde Conversations is planned and co-delivered by the young people of Inverclyde, including agreeing a series of workshops to enable young people to have the opportunity to take part in decisions that affect their lives. The focus of the workshops was:

- Mental Health
- Career & Job Prospects
- Alcohol & Drugs
- Pupil Voice
- Hate Crime
- Sexual Health
- Young People's Reputations

83 young people from across Inverclyde secondary schools attended the event. A number of actions emerged from the event and these will be taken forward by partners.

- **Our Place Our Future**

As part of the development of the Inverclyde Outcomes Improvement Plan, an Inverclyde-wide conversation was generated by the Our Place Our Future survey.

This survey used the Place Standard tool and delved into a wide range of themes that affect an individual's overall health and wellbeing, from streets and spaces, to work, care, housing and local amenities. The first phase was coordinated and delivered by community planning partnership, the Inverclyde Alliance, with funding support from the Big Lottery Fund Awards for All Scotland.

1,310 people completed the main survey and an additional 83 young people responded to an adapted survey featuring some of the same questions. This represents 1.75% of the total population of Inverclyde and is the highest number of respondents Inverclyde Alliance has ever had to an engagement process.

Results have been segmented down to locality level to provide the partnership with a greater understanding of the issues that are affecting residents in their communities and what changes residents would like to see in their area.

NHSGGC Child Poverty Leads Network

In December 2017, NHS Greater Glasgow and Clyde established a pan-GGC child poverty action co-ordination network. The purpose of the network is to co-ordinate board-wide corporate/acute service NHS action to reduce child poverty with local-partnership strategies and reports and to provide a forum for sharing evidence and learning across NHS GGC's six partner local authority areas. The network, is chaired by NHSGGC's Lead for Child Poverty, meets three times per year and involves senior maternity and children services staff, child poverty leads from each of the health board's six partner local authorities and health and social care partnerships, Glasgow's Child Poverty Co-ordinator and representation from the Glasgow Centre for Population Health. Outputs include a development session sharing local successes – including description of automation of local authority provided benefits – a best practice guide and local child poverty data resource. The network links into NHS GGC's Maternal and Child Health Strategy, Health and Employment, HR and Equalities and Financial Inclusion committees and reports to the Board Public Health subcommittee. **Appendix 3** details NHS child poverty actions undertaken in the main at a pan-GGC level.

Resources

It is anticipated that cost of some of the projects in our delivery plan will be met from existing resources. Where indicative costs have been identified, these are noted in the plan. Opportunities to access external funding streams will also be explored where appropriate.

Equality Impact Assessment

You can find the equality impact assessment on our Local Action Report here (weblink to be inserted)

Links to other plans and strategies

The Inverclyde Alliance vision for Inverclyde is:

'Nurturing Inverclyde: Getting it Right for Every Child Citizen and Community'

This means that the Alliance will work in partnership to create a confident, inclusive Inverclyde with safe and sustainable, healthy, nurtured communities, and a thriving, prosperous economy, with active citizens who are resilient, respected and responsible and able to make a positive contribution to the area.

Partners in Inverclyde recognise that poverty and deprivation limits opportunities and choice. That is why, within the Inverclyde Outcomes Improvement Plan, reducing inequality has been established as one of three strategic priorities that the Community Planning Partnership will focus on.

In addition to this, this delivery of the actions and projects within this Local Action Report, will make a significant contribution to the delivery of a range of strategic plans and priorities for partners across Inverclyde and these are noted in the Delivery Plan in Appendix1.

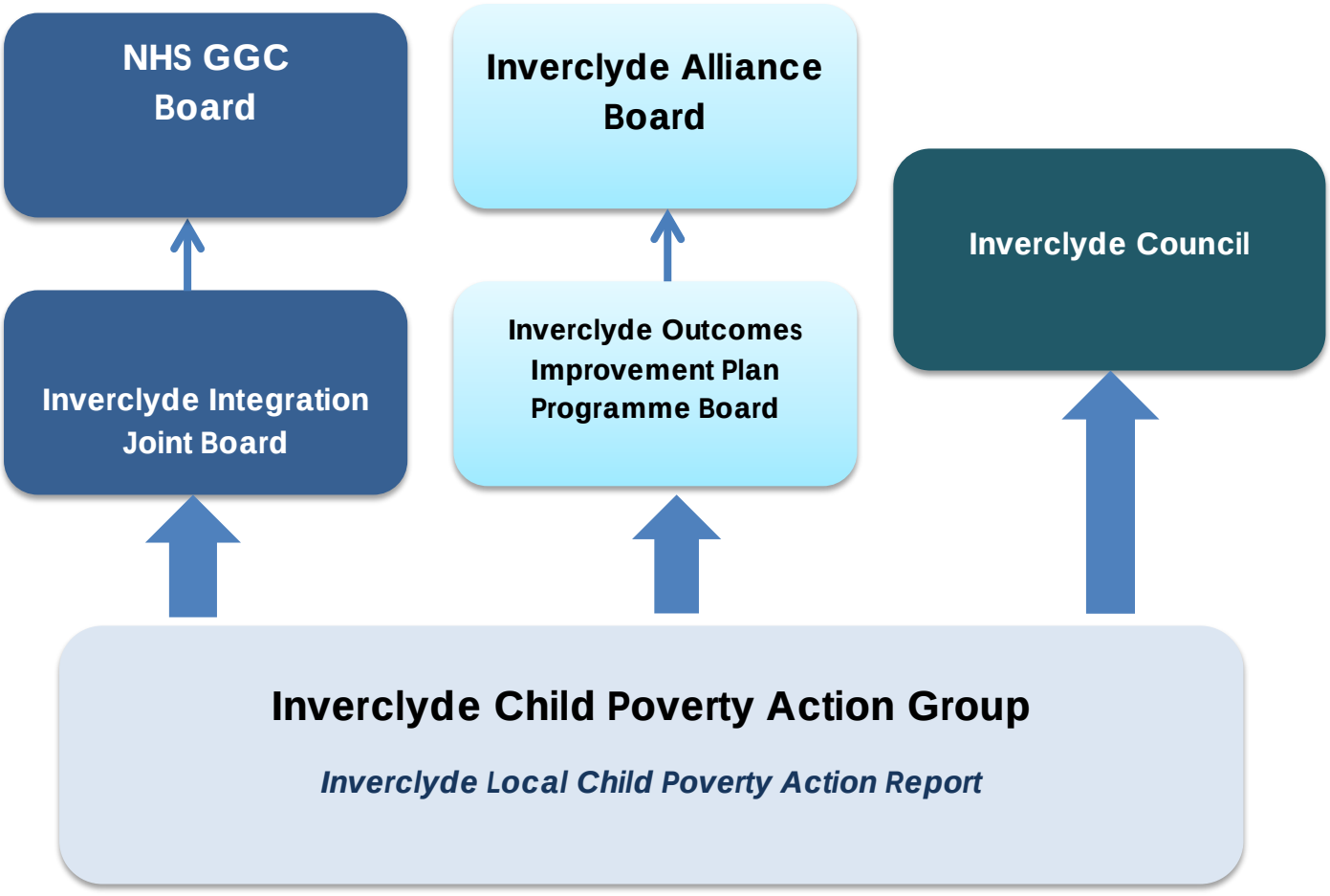
The links between the LAR and the area's high level strategic Plans is shown below:

Governance Framework

Immediate responsibility for the governance of this Inverclyde Local Child Poverty Action Report rests with the Inverclyde Child Poverty Action Group. This group meets on a regular basis and is chaired by the Corporate Director of Education Communities and Orgnisational Development, Inverclyde Council.

The cross-cutting nature of this Report and its central focus on reducing child poverty, means that it has a key contribution to make to the Community Planning Partnership's strategic aim of tackling inequalities. The Inverclyde Alliance Board, supported by the Programme Board will therefore provide leadership and scutiny to the work of the Child Poverty Action Group, as well as helping to co-ordinate partnership actvity.

Both the Council and NHS Greater Glasgow and Clyde have the lead responsibility for the delivery of projects and intiatives within this Report and as such, the management teams and relevant committes of both organisations will receive progress reports on the Delivery Plan.



Appendix 1

Inverclyde Child Poverty Action Report Delivery Plan

June 2019

INCOME FROM EMPLOYMENT

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
The Scottish Attainment Challenge – maximise every child and young persons opportunity to achieve their potential and succeed by providing equity in education.	Education Services	£3506,002 (Scottish Attainment Challenge) £2,428,800 (Pupil Equity Fund)	Particular focus is on closing the poverty-related attainment gap by improving activity in literacy, numeracy and health and wellbeing in our communities with the highest concentrations of deprivation. The aspirational local vision is to develop practice which is both effective and sustainable. In order to improve outcomes in literacy, numeracy and health and wellbeing as well as narrow the attainment gap, parental engagement, workforce expertise, meeting learning needs and leadership will be transformed. Our vision is that every school will be a nurturing school, with benefits to the pupils of improved attendance, attainment and well-being. New interventions are implemented alongside the scaling up of interventions that have been developed as small pilots or tests of change. Inverclyde's project is based on a sustainable model which focusses on upskilling our permanent workforce. This has led to the establishment a range of posts with an emphasis on a coaching and modelling role. Our CMOs are leading improvements in pedagogy across the authority. There are opportunities for leadership development at all levels, recognition of and use of staff skills to develop practice across our community of schools. The programmes implemented for literacy, numeracy and health and well-being are evidence based. All	August 2023	This action covers all priority groups as the Scottish Attainment Challenge covers all young people living in SIMD 1 & 2 areas within Inverclyde.	Attainment Challenge Plan, Inverclyde Council Corporate Plan, Education, Standards and Quality Report, Inverclyde Outcomes Improvement Plan, Inverclyde Children's Services Plan	

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			changes to practice are monitored for impact and effectiveness. Practice which has been measured for impact and found to be effective is then shared across the authority, leading to long term improvements. Parental engagement is a focus within our Families and Communities workstream, with Family Support Workers providing bespoke packages of support, Community Learning and Development staff delivering tailored learning packages to young people and parents and our libraries staff supporting parents to support literacy at home. There have been improvements across the authority in the quality of learning and teaching, matched by improvements in the progress of learners, especially P1 – P3, particularly in relation to literacy and numeracy. There are noticeable improvements in numeracy at S3. Across the broad general education and into the senior phase there is clear evidence that Inverclyde is making progress in narrowing the poverty-related attainment gap. Pupil Equity Funding (PEF) has been paid by Scottish Government to local authorities by means of a ring-fenced grant with indicated amounts that should be allocated directly to each school. The mount allocated to each school has been decided according to the number of pupils in P1 – S3 who are eligible to be registered for free school meals.				

INCOME FROM EMPLOYMENT

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			Schools submit annual plans to the authority officers outlining how they intent to use their PEF. The plans are supported by national and local guidance. All schools are expected to link their PEF plans to their annual improvement planning process through the ongoing Standards and Quality and Improvement Plan. The table on the following page outlines Spending proposals of Pupil Equity by Equity Intervention. The latest key findings from Mid-Year Progress Report shows at June 2017:- **Primary** • P1 Pips results have improved in average scores for all focus schools in reading and maths, with 8 out of our 9 target schools above the national average for Maths and 4 of our target schools above the national average for Reading. • 92% of pupils in P1 made appropriate progress, or better, according to their Maths standardised assessments, with Attainment Challenge focus schools improving from 8% from last year's figures, compared to an overall gain of 4% across the authority. • 90% of pupils in P1 made appropriate progress, or better, according to their Reading standardised assessments, with Attainment Challenge focus schools improving by 5% from the previous years				

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			figures, compared to the same figure across the authority. • Teacher Professional Judgements this year demonstrate increased number of pupils achieving appropriate levels of Curriculum for Excellence. • Overall attendance at professional learning opportunities has increased. **Secondary** • Teacher Professional Judgements this year demonstrate increased numbers of pupils achieving appropriate levels of Curriculum for Excellence. • Professional Learning opportunities • Attendance at professional learning opportunities has increased. **The Year Ahead** • Increase in attainment for targeted groups of pupils in literacy and numeracy. • Increase in teachers' knowledge and skills to engage children in learning in literacy and numeracy. • Increased confidence in assessment and planning. • Increased teacher skill in on-going assessment and reflective planning to meet the needs of children. • Increase in parental awareness of children's				

INCOME FROM EMPLOYMENT

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			learning in literacy and numeracy. • Consistent use of common tracking system to effectively use data to support learning and teaching, and the identification of target cohorts. • Increase in children's reading for pleasure.				

1. Early Intervention	2. Social & Emotional Well being	3. Health & Well being	4. Targeted Support Literacy
Eyecos Classroom Assistants Early Years Learning Assistants Active Play Programmes Language Assistants Staff Additional Responsibilities	Counselling Programmes Bespoke Counselling Play Therapists Welfare Officers	Health & Well-being coaches Nurture Groups Breakfast Clubs Outdoor Learning Play Coaches Counselling Programmes	Staff Development Accelerated Reading Numeracy Recovery SEAL Targeting Phonics Development Reading Programmes Additional Staff Targeted Support Differentiated Support Classroom Assistants Staff Additional Responsibilities
5. Professional Development	**6. Wider Engagement**	**7. Partnership Working**	**8. Resources**
High Quality Learning and Teaching Developing Pedagogy Coaching Support Visible Learning Literacy training PEF PT's Differentiated Support	Family Learning Officers Extra-Curricular Sport Clubs Family Library Outdoor Play Areas Family Support Residential Seminars Enhanced Supported study STEM Weekends	Counselling Services Cluster Welfare Officers CLD Support Coaching Support Outreach Workers Children's Advocacy Officer Residential	Administrative Assistants Digital IT Wi-Fi

INCOME FROM EMPLOYMENT

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
Employability			The purpose and structure of the Employability Pipeline is to provide Inverclyde residents with a tailor made pathway of support, where their individual circumstances, barriers, needs and aspirations are assessed and delivery organisations work collaboratively to support and progress each individual through their personal pathway towards, and into, a positive destination. The Inverclyde Employability Pipeline provides a range of employability support to local residents looking for work, or looking to improve their employment situation. It also supports Inverclyde businesses to train and grow their workforce. The Council contract with relevant organisations to deliver services that are of high quality and provide best value for money. Currently, three main contractors deliver services on behalf of the Council (see below)			Inverclyde Council Corporate Plan, Inverclyde Outcomes Improvement Plan, Inverclyde Children Services Plan	
Employability	**Stepwell Consultancy Ltd**	£117,500	**Stepwell Consultancy Ltd** is a local Social Enterprise company specialising in improving the health, well-being and employment opportunities of local people who have a health condition that is preventing them from moving into employment. Their **"Progress"** programme delivers support that enables people to identify their barriers and builds	Initial funding agreed until 31st March 2019	This action covers all priority groups given the eligibility criteria of the programme.	Inverclyde Council Corporate Plan, Inverclyde Outcomes Improvement Plan,	

INCOME FROM EMPLOYMENT

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			positive coping strategies whilst working on a plan to improve their physical and mental health activities available through "Progress" include Stress and Condition Management, Counselling, Mentoring, Vocational Training, Personal Development and Supported Employment/Work Placement opportunities. Stepwell work in partnership with a number of local services and employers to provide specialist client support when needed, ensuring a connected quality service is provided for every client's individual needs. Commissioned by Inverclyde Council as part of the wider Inverclyde Resilience Project with funding from Scottish Government, Whole Life Restore employability programme was established. Whole Life Restore is an innovative employability programme that is locally delivered, specialist in nature, inventive in its flexibility and utilises a holistic, person centred and asset based approach within a restorative and supported employment delivery model. Whole Life Restore is for residents of Inverclyde who:- • Are in receipt of unemployment benefit			Inverclyde Children Services Plan	

INCOME FROM EMPLOYMENT

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			• Have a 'lived experience' of criminal justice, addictions and/or homelessness • Are ready to explore their future aspirations including actively looking to progress into employment or other positive destinations. Attending Whole Life Restore will not affect any benefits and provides access to an extensive and collaborative range of therapeutic interventions, life skills training, resilience workshops, pre-vocational and vocational qualifications, one2one employability support, work placements and supported employment opportunities.				
Employability	Trust Employability Services	£2,061,000	Trust Employability Services is funded by Inverclyde Council (ESF) and delivered by Inverclyde Community Development Trust. The Trust aims to assist residents of Inverclyde to access opportunities in education, training and employment by providing them with advice, information, guidance and practical support. Contracted Volumes 1050 individuals over 12 months with specific eligibility criteria **What's on Offer** **Training** - The Trust offers a variety of training; accredited, non-accredited and e-learning opportunities. Once a person is registered with the	Ongoing		Inverclyde Council Corporate Plan, Inverclyde Outcomes Improvement Plan, Inverclyde Children Services Plan	

INCOME FROM EMPLOYMENT

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			Trust this will be discussed more fully during a one to one appointment with one of the team. This will include where relevant; **Prevocational training**, **Work Preparation Workshops, Pre-employment training, Vocational training, Practical Work place training and Industry specific options relevant to the prevailing labour market demand.** The team will actively support **Work Preparation** – providing hands on assistance with job applications, online recruitment, CV & interviews. **Travel expenses** - Travel to arranged appointments and training will be reimbursed when using public transport **Funded Training package** - Funding assistance can be offered for external training, any required licences relevant to the job opportunities a person is seeking, travel to interviews, specific clothing for the job and travel expenses while waiting on first salary payment. All funding is subject to evidence of securing an interview or job offer, a member of the team will work with an individual to support any relevant funding requirements. **Partners** - Financial Fitness and Community Learning & Development will offer benefits assessment & literacy and numeracy support where required.				

INCOME FROM EMPLOYMENT

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			Employment & Work Experience The Trust team works in collaboration with local & national partners, local employers and businesses to support the creation of employment opportunities & work experience. The Trust offers a **Job Matching Service** designed to alert relevant jobs to match a persons skills and experience.				
Employability	Inverclyde Advice & Employment Rights Centre	£65,900	**Inverclyde Advice & Employment Rights Centre** is a local organisation providing a unique service to Inverclyde by supporting people in work who are experiencing difficulties with their employer. The organisation works with the client and their employer at the earliest possible stage, to resolve issues with a view to maintaining the client in employment. Inverclyde Advice & Employment Rights Centre works in partnership with a range of services including Welfare Rights, Local Trade Unions, Legal firms and Occupational Health units to ensure the required mix of expertise is available for an individual client.	Ongoing		Inverclyde Council Corporate Plan, Inverclyde Outcomes Improvement Plan, Inverclyde Children Services Plan	
Training / Apprenticeships for school pupils	Regeneration and Planning Service	£90,000	Within Inverclyde Council we aim to recruit young people to the workforce through an Apprenticeship Programme, which will be open to young people attending Secondary School.	August 2019 – June 2020	This action will benefit school pupils within the Senior age group of	Inverclyde Council Corporate Plan, Inverclyde	

INCOME FROM EMPLOYMENT

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			The year ahead Recruit 12 secondary school pupils to take part in this apprenticeship. This will give an opportunity to gain qualifications and receive work experience.		school.	Outcomes Improvement Plan, Inverclyde Children Services Plan	
Employability	SAMH Individual Placement Support service (IPS)		The Individual Placement and Support (IPS) Model is a specialist service supporting people to engage in work and work related activity. It places people into employment quickly and then provides open-ended 'in-work support' to both employee and employer. The IPS employment model is internationally recognised as the most effective way to support people with mental health problems and/or addictions to gain and keep paid employment and assist in their Recovery. Co-location of IPS within Community Mental Health Teams is a fundamental part of IPS, and fits well with the Scottish Government's commitment to joining up health and employability. IPS is an integrated service requiring the IPS Specialists to be co-located with all aspects of the Inverclyde Adult Mental Health Services, including specialists and clinicians. This approach helps to ensure collaborative working and integrated care planning resulting in successful and positive employment and job outcomes.	May 2019 - May 2020	People with long term Enduring Mental Illness of Working Age	Mental Health 5Yr Strategy HSCP Strategic Plan	

INCOME FROM EMPLOYMENT

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			The Model operates on six key outcome principals: • Outcome 1: Employment support is embedded within the Inverclyde adult community mental health service. Outcome 2: People with mental health problems access paid employment. • Outcome 3: People with mental health problems sustain paid employment. • Outcome 4: Partnerships with employers, and other relevant partners and organisations, are developed and sustained. • Outcome 5: People with mental health problems are involved in shaping the service and central to the development of a Quality Assurance Framework which is used to obtain stakeholder experiences of IPS. • Outcome 6: People experiencing mental health problems from all backgrounds and circumstances are able to access IPS. Individual recovery Outcomes include: • People have knowledge and tools to better self-manage their mental health and wellbeing • People are more resilient • People have increased self esteem				

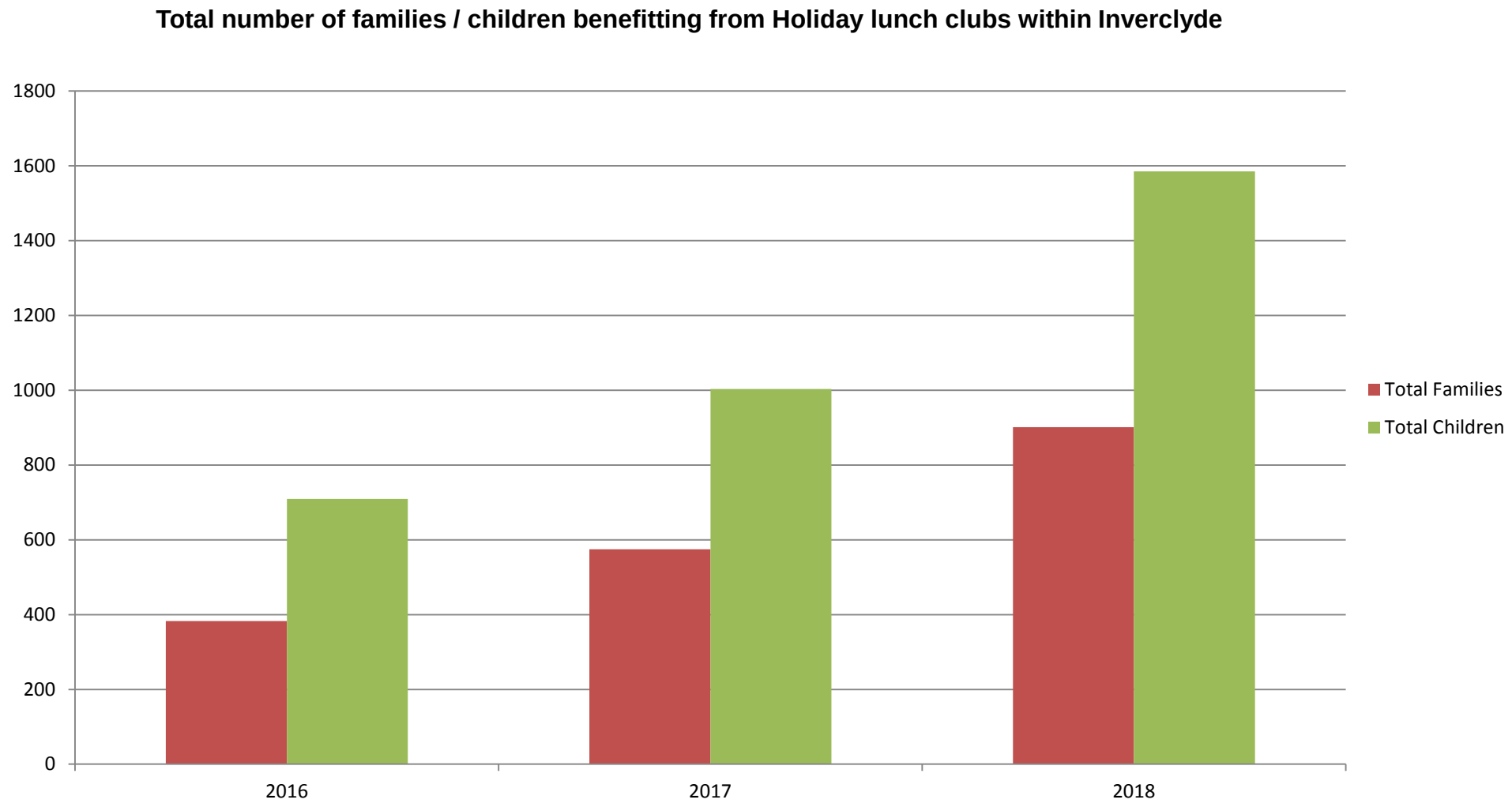
INCOME FROM EMPLOYMENT

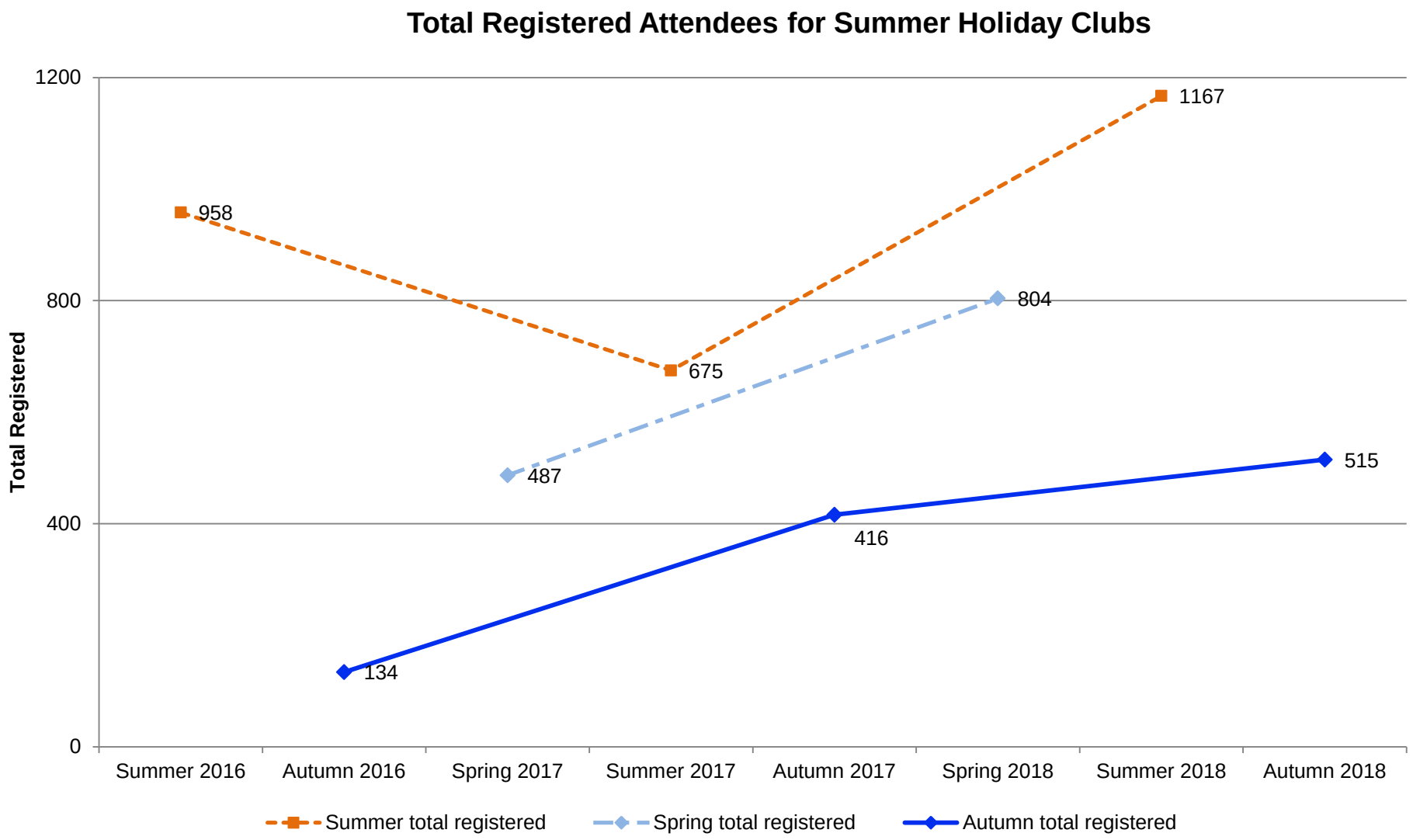
Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			• People have improved life skills to live independently • People are more connected to their communities which have an Employment focus. Wide Actions 2019: • To extend the work of IPS within the service for a further two years (2019/2021) • To link wider to local Employability Pipeline and Employability Health Outcomes • Explore options to extend provision to include pathways related to Primary Care • Strengthen the linkages within Fairstart projects to enable local reporting and monitoring.	2019/21			

COSTS OF LIVING

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
Reduce cost of school day within Inverclyde's schools and nurseries.	Education Services	£3,706	Head Teachers attended both a workshop and Inverclyde's Child Poverty Event where there were presentations with regards to the Cost of the School Day and how schools can assist in reducing this. **The Year Ahead** Whilst Schools have implemented ways to assist with reducing the cost of the school day (see below for some of examples from our local schools), further awareness is required for school staff, pupils and parents/carers. Inverclyde has agreed to train local Cost of the School Day 'champions' who in turn will raise awareness within all schools. Some of the ways in which our local schools are assisting to reduce the cost of the school day:- • Purchase of additional PE kits to increase participation and allow all children to exercise in comfort (kept and laundered in school) • Uniform swap/bank • Reduction in the amount of non-uniform day with no set donation • Reduction in fundraising for charities • Offer support for school trips to ensure everyone gets the opportunity to attend.	Commencing August 2019	This action covers all priority groups as raising awareness will cover all families with school aged children within Inverclyde.	Inverclyde Corporate Plan, Inverclyde Outcomes Improvement Plan, HSCP Strategic Plan 2019 – 2024, Inverclyde Children's Services Plan	
Provide holiday clubs for Inverclyde families.	Education Services	£54,000 currently funded from the Attainment	Families within Inverclyde Council are benefitting from school holiday clubs which offers family play and fun with a light lunch. Families were able to enjoy a range of activities	Ongoing	This action covers all priority groups as the holiday clubs are open	HSCP Strategic Plan 2019-2024	

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
		Challenge	including reading, arts and crafts and outdoor games. Families had access to the school family support workers, arts, craft, Bookbug sessions and family cooking. Children were encouraged to take part in the Inverclyde libraries Summer reading challenge. Families were welcome to attend any of the hubs at dates and times that suit their needs. In addition and for the first time the Scottish Attainment Challenge also provided lunch for the Stay and Play project that is offered from Play4All in Craigmarloch Additional Support Needs School. **The Year Ahead** There will be holiday hubs running in 9 locations over the spring break. This will provide a total of 29 play sessions. Consultation with CLD, libraries, Barnardo's, CMO's and Family Support Workers has taken place to begin planning for Spring, Summer and Autumn 2019 holiday hubs. Additional resource is available during 2019 as Home School Link Workers will be supporting the family support workers running the holiday hubs.		to all families with Primary School aged children (siblings welcome).		


Total number of families / children benefitting from Holiday lunch clubs within Inverclyde
1800
1600
1400
1200
1000
800
600
400
200
0
2016
2017
2018
Total Families
Total Children

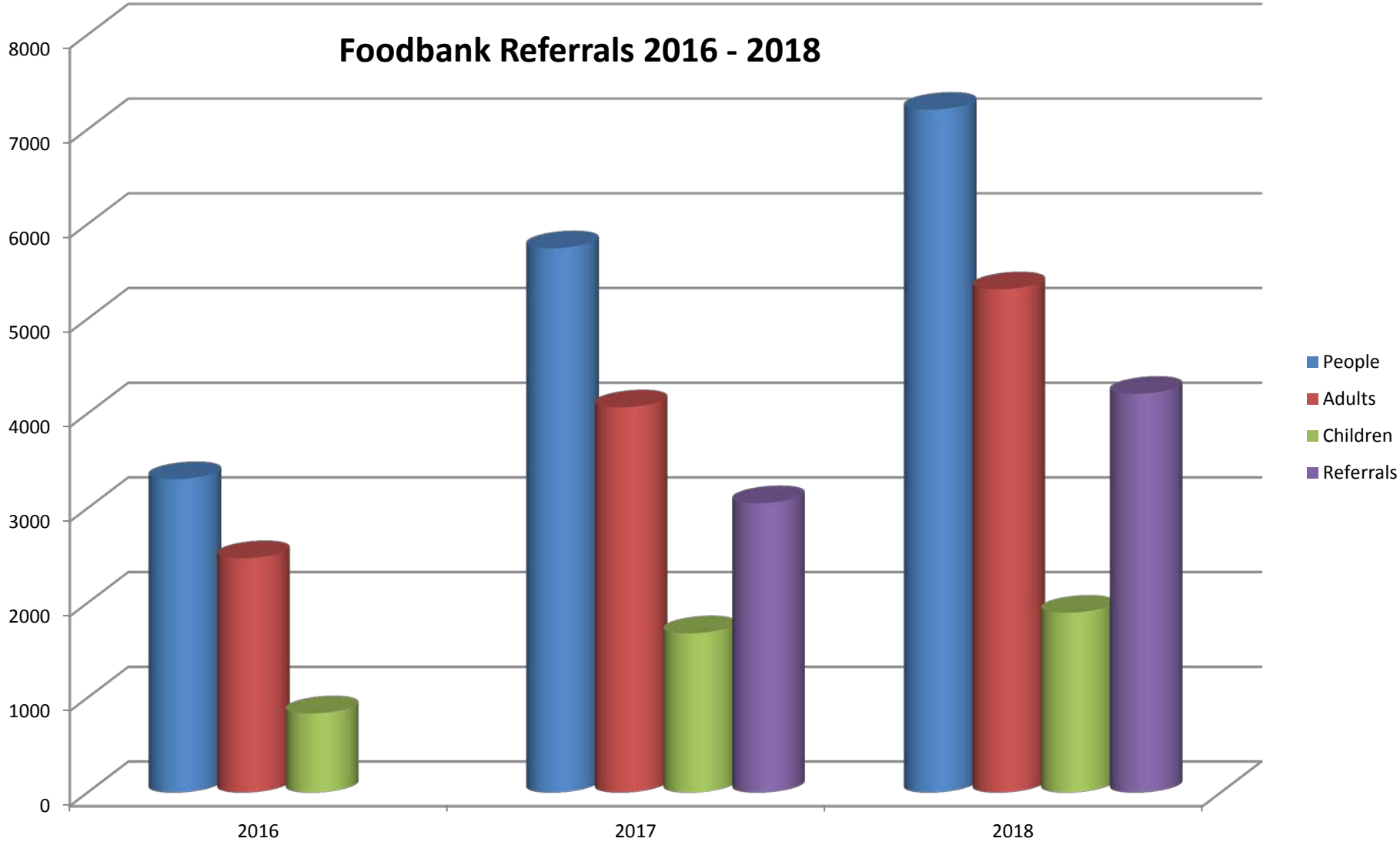

Total Registered Attendees for Summer Holiday Clubs
Total Registered
1200
800
400
0
958
675
1167
487
804
134
416
515
Summer 2016
Autumn 2016
Spring 2017
Summer 2017
Autumn 2017
Spring 2018
Summer 2018
Autumn 2018
Summer total registered
Spring total registered
Autumn total registered

COSTS OF LIVING

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
Provision of food to Inverclyde residents in need	I58 Project	N/A	INVERCLYDE FOODBANK I58 PROJECT All food given out by Inverclyde Foodbank is donated. Non-perishable, in date food is donated via 'Supermarket Collections, Schools, Churches, Businesses and Individuals. There are currently 25 volunteers who meet clients over a cup of tea and are able to signpost people to agencies able to solve the longer-term problem. Foodbank has seen a significant rise in referrals over the last 2 years with the roll out of Universal credit having an impact on this increase. Referrals to the foodbank are received from 137 local agencies / services. Services available in addition to Foodbank are as follows:- • Fuel bank – referring clients for fuel vouchers • Baby bank – referrals specifically for baby items such as food and nappies • Uniform bank – referrals for school uniforms. Foodbank are also keen to support local schools in promoting ideas within schools to have their own uniform banks. • Christmas hampers – self referrals accepted • Christians against Poverty – free debt counselling charity with money management and budgeting courses available for adults, adults with literacy needs, Students, Secondary School pupils, Primary 7 pupils.	Ongoing	This action covers all priority groups.	Inverclyde Corporate Plan, Inverclyde Outcomes Improvement Plan, HSCP Strategic Plan	

COSTS OF LIVING

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			The Year Ahead Foodbank will continue to provide and support local residents in need, and refer to other agencies where appropriate. They will continue to raise awareness of the Services available to residents through liaising with referring agencies.				


Foodbank Referrals 2016 - 2018
8000
7000
6000
5000
4000
3000
2000
1000
0
2016
2017
2018
People
Adults
Children
Referrals

COSTS OF LIVING

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
Putting an end to Period Poverty in Inverclyde	Education Services	£28,000	Menstruation, or periods, is a natural bodily function of women and young girls. There are a number of women and girls in Scotland who are unable to afford essential sanitary products during menstruation due to poverty. Inverclyde Council have rolled out access to free sanitary products for pupils across all of its primary, secondary schools, libraries, youth clubs and community centres. Inverclyde have received £28,000 to purchase the sanitary products and suitable storage for the schools. Workshops and training sessions will also be organised to promote access. Providing access that protects dignity and avoids anxiety, embarrassment and stigma, will ensure that everyone can participate in education at all levels. **The Year Ahead** In addition to the plastic boxes located in toilets, there will be tote bags purchased for the back of toilet cubicle doors in secondary schools to ensure a variety and quantity of products can be accessed in privacy. On 30 November 2018, COSLA Leaders agreed to the proposed funding to expand access to free sanitary products and "aim to increase the number and range of places where sanitary products are	Ongoing	This action covers all menstruating people.	Inverclyde Corporate Plan, Inverclyde Outcomes Improvement Plan, HSCP Strategic Plan	

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			available for those who need them. We will do this through working with a range of public and private sector organisations and with additional third sector partners to expand the geographical spread of support". The budget allocated for 2019/20 is £72,947.				
Increase the supply of affordable housing	Housing Strategy / Developing Registered Social Landlords / HSCP	£32 million Scottish Government grant funding	Good housing has the potential to play a central role in poverty reduction and increasing housing affordability is a key lever in reducing poverty for households with children. National and local housing providers will receive around £32 million grant funding from the Scottish Government's Affordable Housing Supply Programme and will deliver over 800 new homes (including specialist provision homes to cater for our disabled population) in Inverclyde over the next 3 years. **£17m has been spent and 234 socially rented homes completed so far in the area from 2015 – 2018. These homes all address fuel poverty through increased energy efficiency.** To secure funding every local authority is required to prepare an annual Strategic Housing Investment Plan (SHIP). The SHIP sets out the key investment priorities for affordable housing in Inverclyde over a five year period to achieve the outcomes of the Local Housing Strategy (LHS) 2017-2022, and help the	March 2021	This action includes all priority groups.	Local Housing Strategy 2017-2022 Strategic Housing Investment Plan 2019 – 2024 HSCP Strategic Plan 2019 2024 Housing Contribution Statement 2019 - 2024	

COSTS OF LIVING

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			Scottish Government reach the national target of providing 50,000 new affordable homes by 2021/22. The SHIP will Increase the supply of affordable housing in the area and mitigate against fuel poverty, Reducing housing costs will positively contribute to one of the 3 key drivers of reduced child poverty: 'Reduced cost of living for families'. Our LHS mentions the need to tackle fuel poverty and our SHIP notes that all new homes will be developed to the Greener Standard. This compliments the successful recent work by Inverclyde Council and partners on delivering our HEEPS ABS programme.				
Continue tackling fuel poverty in the area through the Home Energy Efficiency Programme: Area Based Scheme (HEEPS: ABS).	Housing Strategy / Developing Registered Social Landlords / HSCP	£1,015,000 HEEPS resource in 18/19.	In Inverclyde as across Scotland, many people do not live in a house that is warm, dry and affordable, with people on low incomes being disproportionately affected. Local Councils, COSLA and the Scottish Government are working hard to deal with fuel poverty, and to reduce greenhouse gas emissions in order to tackle the threat of climate change. As part of a range of programmes aimed at achieving these objectives, the Scottish Government has developed and funded the Home Energy Efficiency Programme: Area Based Scheme (HEEPS: ABS).		This action includes all priority groups.	Local Housing Strategy 2017-2022	

COSTS OF LIVING

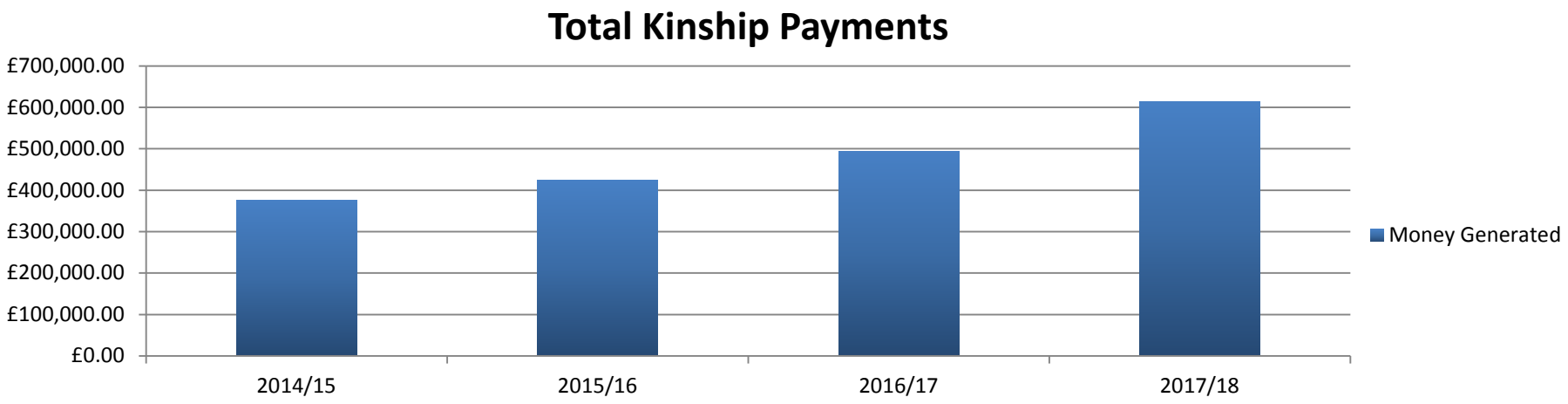
Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			From 2013 to date a total over £8m HEEPS funding has been awarded to Inverclyde from the Scottish Government. This has helped the Council in collaboration with RSLs to provide External Wall insulation to over 2000 properties in Inverclyde, making homes more energy efficient and cheaper to keep warm and dry.				

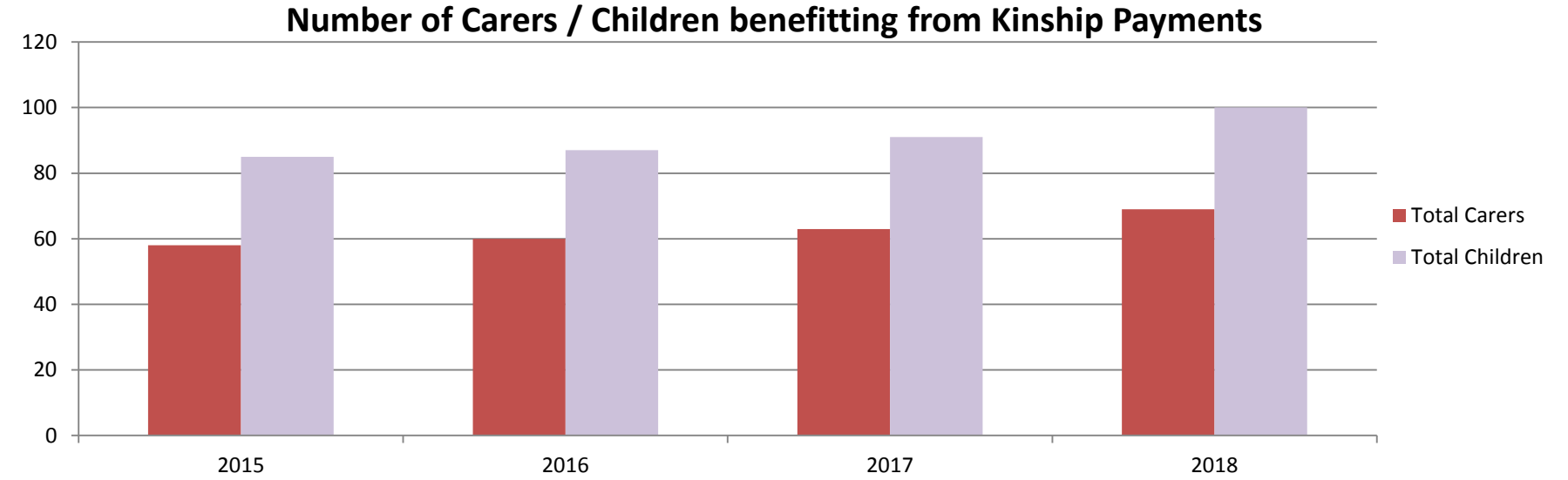
INCOME FROM SOCIAL SECURITY AND BENEFITS IN KIND

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
Implement Automated Payments (School Clothing Grant, Free school meals, EMA)	Education Services and Finance Services, Inverclyde Council	£0 contained within overall budget	Education Services currently provide application forms directly to families who have previously received School Clothing Grants/Free School Meals. The application forms are also sent to schools to encourage families who may be eligible to complete and return the application forms. There is also a full communication exercise using social and local media to encourage an increase in the take up of the benefits. Inverclyde uses the same form for applications for free school meals and clothing grants. **The Year Ahead** Work is currently being undertaken to explore methods of using information already held by Council for Council Tax Reduction purposes to automate payments to ensure families received the benefits without the need to complete additional application forms. The application process may be a barrier to some eligible families so removing the responsibility to complete and submit a form with supporting evidence would increase the number of families receiving payments. It is acknowledged that not all scenarios will fit an automated process so the manual application will remain for those who require this.		This action covers families with school aged children who are eligible for School Clothing Grants, Free School Meals and EMA	Inverclyde Corporate Plan, Inverclyde Outcomes Improvement Plan, HSCP Strategic Plan, Inverclyde Children's Services Plan	Cost of Living
Change the eligibility criteria for Free School Meals, School Clothing Grant to	Education Services and Finance Services, Inverclyde Council	£100,000	Education Services provide Free School Meals in accordance with Scottish Government legislation. Entitlement for working families is approximately the equivalent of working no more than 16 hours per week at the National Minimum Wage. The same qualifying criteria are used for the provision of School Clothing Grants.		This action covers working families on low earnings with school aged children.	Inverclyde Corporate Plan, Inverclyde Outcomes Improvement Plan, HSCP Strategic Plan,	Cost of Living

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
allow more families to qualify			**The Year Ahead** To widen support, a local scheme will be introduced providing universal entitlement to Primary 4 pupils and new enhanced qualifying criteria for P5 to S6 pupils will be introduced. Criteria will be based on the equivalent of working no more than 24 hours each week at the Scottish Living Wage.			Inverclyde Children's Services Plan	
Ensure eligible families receive appropriate Kinship Payments	HSCP	£563,250 This is the overall Kinship amount. The child poverty element is contained as part of the overall figure.	Social Work Services has a general duty to safeguard and promote the welfare of children in their community who are in need by providing a range of services. This means that kinship carers and the children for whom they are caring can ask for assistance under this provision. Kinship payments are paid until at least the young person's 18th birthday. Inverclyde Council provides a kinship allowance to carers who meet certain criteria and have been assessed and approved by social work services as formal kinship carers. Examples of the kind of help offered are outlined below: Access to individual social work support Financial support Advice on welfare rights and legal options Training in relation to behaviour management, child development, attachment, effects of separation and loss Advice on managing difficult behaviours Advocating on behalf of carers to relevant agencies such as health, housing and education	Ongoing	This action is intended for children subject to legal status of Section 11 Children (Scotland) Act 1995' or Section 83 Children's Hearing (Scotland) Act 2011.	Inverclyde Corporate Plan, Inverclyde Children's Services Plan, HSCP Strategic Plan	

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			Regular local support group meetings for kinship carers All kinship carers have an Income maximisation check from a welfare rights officer, supporting the notion that good advice is crucial in ensuring the financial basis of a placement is sound. This formed part of the Healthier Wealthier Children programme and involves the following robust process :- • Identifying the correct kinship allowance • Identifying the correct level of benefit and tax credit entitlement • Kinship allowance paid by the local authority The above demonstrates ways that efficiencies can be realised from the local authority budgets and most importantly, it plays a part in developing a stable secure and nurturing placement for children and young people. The following page shows both total money paid in Kinship Payments and the number of carers/young people benefitting from Kinship Payments from 2014/15 to 2018/19. **The year ahead** Continue to provide a robust process to ensure families are receiving correct benefits.				


Total Kinship Payments
£700,000.00
£600,000.00
£500,000.00
£400,000.00
£300,000.00
£200,000.00
£100,000.00
£0.00
2014/15
2015/16
2016/17
2017/18
Money Generated


Number of Carers / Children benefitting from Kinship Payments
120
100
80
60
40
20
0
2015
2016
2017
2018
Total Carers
Total Children

INCOME FROM SOCIAL SECURITY AND BENEFITS IN KIND

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
Maximise Income for eligible residents	HSCP	£616,300. This is the overall advice resource. The child poverty element is contained within this.	Inverclyde HSCP Advice Service providing money advice, benefits advice and welfare rights representation, is predicted on a rights-based perspective that contributes to the alleviation of poverty and effects of debt in the community. It plays a vital role in working to protect the well-being of vulnerable claimants and consumers; and also supports the wider Inverclyde economy by ensuring residents receive the support they require during these times of change and uncertainty. The challenges facing Inverclyde residents are diverse and vary from the effects of continuing austerity, growing reliance on personal debt and continued welfare reform. The provision of an effective one stop, holistic advice service is an effective method of delivering advice and is relevant to the Statutory duty of Inverclyde Council to deliver advice and assistance to promote the social welfare of Inverclyde residents. Within the context of the continuing impacts of welfare reform and devolved social security, Inverclyde Council commissioned a review of all advice provision across Inverclyde. This offered the opportunity for Inverclyde HSCP Advice Service, and other partner organisations, to consider if the current models of service delivery best meet the needs of service users going forward. In March 2018 the positioning statement of Social Security Scotland Agency (SSSA) was published with a strapline of 'Dignity, Fairness, Respect.' Advice Services have engaged	Ongoing	Due to the Service and Advice available, this Action covers all priority groups.	Inverclyde Corporate Plan, Inverclyde Outcomes Improvement Plan, HSCP Strategic Plan	

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			in a discussion with SSSA to explore job shadowing opportunities for SSSA workers to understand the role of Advice Services and the challenges of dealing with the current social security system. SSSA are keen for this to happen viewing it as 'an opportunity that will be of great benefit.' The following page shows statistics from Advice Services from 2015/16 to 2017/18. **The Year Ahead** Advice Services will continue to offer high standard advice, information and support to Service Users. A key task for Advice Services will be to revisit the 'Healthier Wealthier Children' income maximisation model currently operating in Inverclyde to consider improvements in referral pathways and explore how to further extend the coverage and effectiveness of the initiative. Advice Service remains as committed as ever to make an active contribution to Inverclyde HSCP's vision of improving lives.				

INCOME FROM SOCIAL SECURITY AND BENEFITS IN KIND

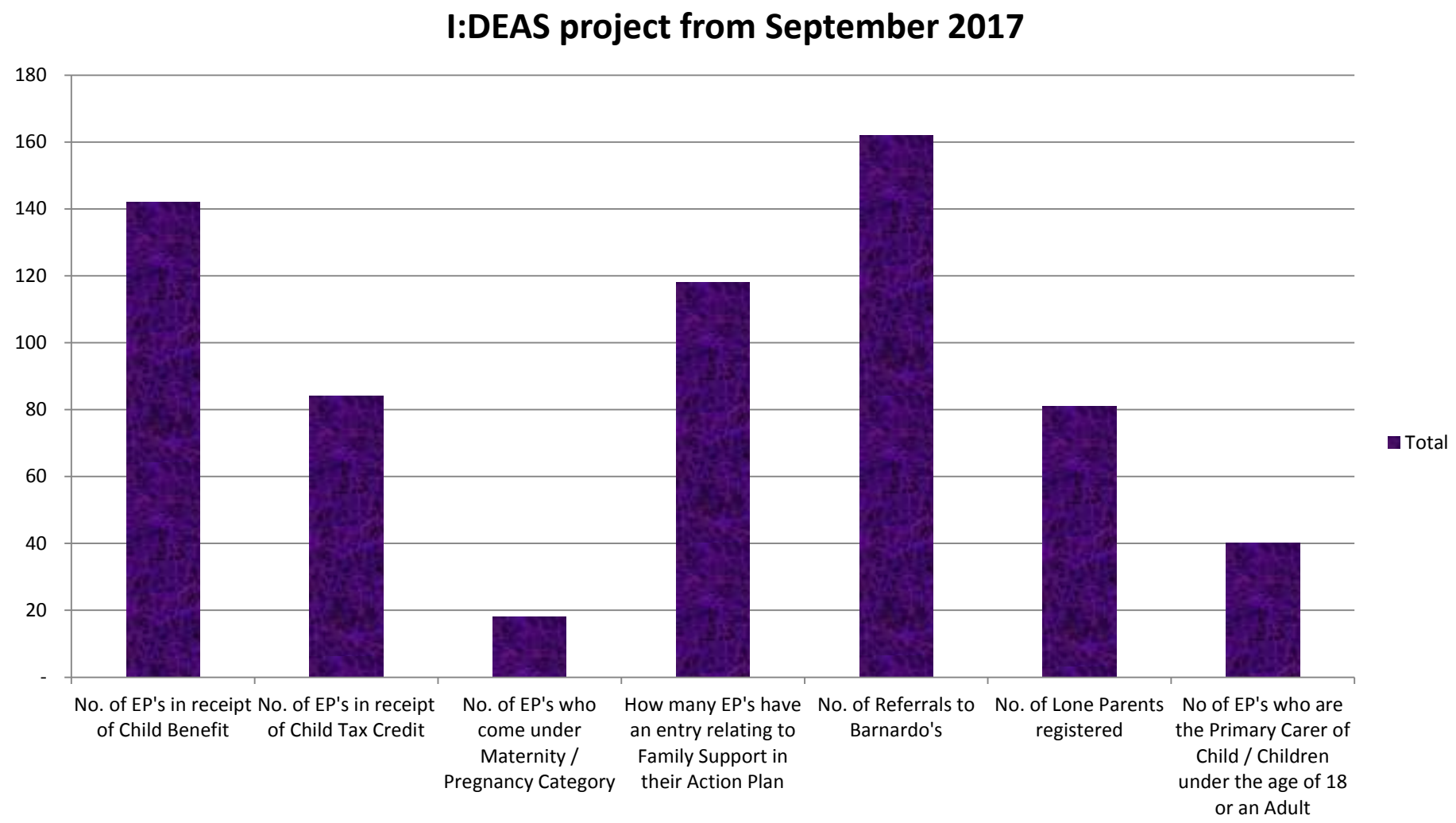
	2015/2016	2016/17	2017/18
Advice First Calls Handled (Inbound and Outbound – includes calls from internal departments. N.B. some enquiries may require multiple calls to resolve the issue)	10,945	12,435	11,209
Face to Face Appointments Scheduled (Port Glasgow and Greenock) (Many clients require multiple appointments to resolve their issue[1])	2776	3414	3390
Home Visits	214	222	166
Vulnerable Groups – New Clients (Advice Outreach for Hard to Reach Groups – Homelessness, Addictions, Mental Health)	315	444	278*
Macmillan Cancer Support Advice and Welfare Rights - New Clients	370	384	329*
Welfare Rights appeals scheduled (Some clients may require multiple appeals, e.g. appeal is adjourned, goes to Upper Tribunal or is revised in client favour prior to hearing)	698	591	1033
Welfare Rights Cases with final outcome decision in favour of the appellant	74%	70%	75%
Money/debt interventions carried out with clients (2 new Money Advisors started in August 2017)	258	824	1021[2]
Amount of multiple debt managed by Money Advice Team	£1,393,712	£2,098,654.95	£2,178,052.28

[1] Universal Credit issues are requiring multiple interventions/appointments to attempt to resolve.

[2] Money Advice interventions now include all correspondence on behalf of client, including liaising with creditors.

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
	I:DEAS project	£2,270,000 The total I:DEAS budget supports a number of priorities including child poverty.	I:DEAS (Inverclyde Delivering Effective Advice and Support) Project offers a service to individuals/families who:- • Live in a workless household • Live in a low income household • Living in a single parent household (could also be homeless and meet one of the above) Eligible participants (Eps) go through a registration process and have an allocated Mentor who will support them as much or as little as they require. I:DEAS offer a truly holistic service with regard to finances and inclusion in society. Partners are:- • CVS • Future Stills • HSCP Advice First • Barnardo's • The Wise Group • Financial Fitness • Scotcash • Community Learning Development There are dedicated workers in each of these organisations who all work together as a wider team. The allocated Mentor will walk hand in hand with the participant and will provide ranging degrees of support dependant on the individual. From the Services available	Ongoing	This action benefits all priority groups given the eligibility criteria.	Inverclyde Corporate Plan, Inverclyde Outcomes Improvement Plan, HSCP Strategic Plan,	

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			above, I:DEAS will improve a person's current situation with their finances and ensure they have the skills and capacity to be able to continue with positive finances through their lives. A big part of the service is to ensure that those who are socially excluded due to debt will no longer be, I:DEAS will provide family support if required. **The Year Ahead** Funding (by European Social Fund and The Big Lottery) has been sourced until March 2020. This project will continue to support local eligible participants. I:DEAS project are looking for volunteers and peer supporters to support the good work.				


I:DEAS project from September 2017
180
160
140
120
100
80
60
40
20
-
No. of EP's in receipt of Child Benefit
No. of EP's in receipt of Child Tax Credit
No. of EP's who come under Maternity / Pregnancy Category
How many EP's have an entry relating to Family Support in their Action Plan
No. of Referrals to Barnardo's
No. of Lone Parents registered
No of EP's who are the Primary Carer of Child / Children under the age of 18 or an Adult
Total

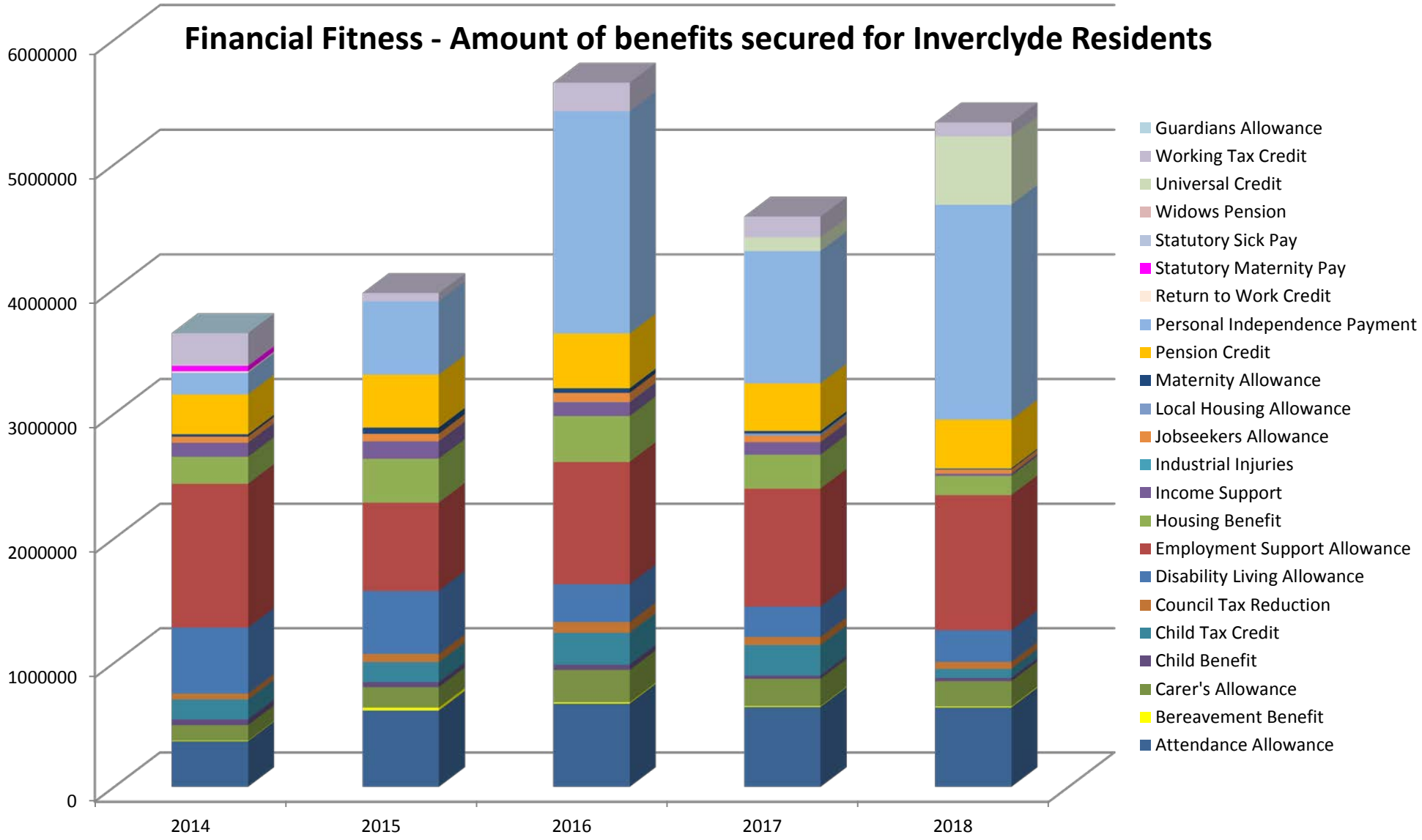
Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
Improve income maximisation referral uptake within antenatal, community child health, early years education and other community based services.	Advice Services & NHS	£2,704 from NHS GGC	Healthier Wealthier Children (HWC) was a project that aimed to help families at risk of poverty. The project worked closely with antenatal and community child health, early years education and other community based services working with families at risk of poverty. It aimed to target pregnant women and families with young children experiencing, or at risk of, child poverty, as costs increase and employment patterns change around the birth of a child. Following the cessation of funding in October 2010 there was agreement for Inverclyde Advice First to provide income maximisation services and collate numbers of people benefiting and report on the financial gains received. Funding was then withdrawn in 2013. Inverclyde no longer had a dedicated resource which meant that the publicity and promotion to Health Visitors and Midwives to encourage referrals greatly reduced. Initially Health Improvement staff picked this up, however, due to lack of capacity this ceased. There is no longer a separate referral form or process meaning referrals have been subsumed into the generic referral process for Inverclyde Advice First. **The Year Ahead** NHS GGC have received £63,750 for 2018/19 for enhancement of referral pathways into income maximisation for pregnant woman and families with children. This funding will also be available next year. The money should be used for:- • Create local capacity in Health Board areas to establish or enhance referral pathways • Plan and delivery training on child poverty, money matters and referral pathways for universal maternity and health visiting workforce • Develop formal referral pathways (including consideration of		This Action covers all priority groups due given it is aimed at antenatal, community child health, early years education and other community based services.	Inverclyde Corporate Plan, Inverclyde Outcomes Improvement Plan, HSCP Strategic Plan,	

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			electronic referrals) • Negotiate additional capacity with local advice services. Inverclyde Council has been allocated £2704 of the £63,750. The proposed way to spent eh money locally is to commission CPAG (Child Poverty Action Group) to deliver input around maternity and other benefits. At the same time we will ask them to do a refresh on HWC (Healthier Wealthier Children) and set up an inbox for HWC referrals. The training will be delivered to approximately 25 Health Visitors and midwives before the end of the financial year. In turn, the 25 Health Visitors/Midwives will become local 'champions' and train all Health Visitors/Midwives locally. Impact will be measured by the increase in referrals from Health Visitors/Midwives. On a pan-NHSGGC basis NHS Greater Glasgow and Clyde staff have also worked to review and refresh the Healthier Wealthier Children intervention. Workshops and training sessions for new and existing midwives and health visitors were delivered to raise awareness of the new statutory duty on the NHS to work with local authorities to maximise the incomes of pregnant women and families with children and revise how to raise the issue of money worries and pathways into money advice services. Staff and client facing promotional materials were produced and development of electronic referral pathways explored. A money advice service continues to be provided to families in Royal Hospital for Children with average annual income gains of over £8,000 per family eligible for financial support.				
Maximise Income for	Financial Fitness	£140,000	Financial Fitness's aim is to tackle poverty by ensuring local people have access to welfare benefit and financial advice and information		Due to the Service	Inverclyde Outcomes	

<table>
<tr><th>Action</th><th>Who action is carried out by</th><th>Resources allocated</th><th>Summary and how impact has/will be assessed</th><th>Timescale for action</th><th>Group(s) the action is intended to reduce poverty amongst</th><th>Link to other plans</th><th>Links to other Poverty Driver(s)</th></tr>
<tr><td>eligible residents.</td><td></td><td></td><td>in their own communities. They therefore tackle social exclusion, poverty and deprivation by providing a grass roots service of advice which is free, independent, impartial and confidential. Furthermore, this service is provided in the local communities, through home visits or the use of various local venues which are easily accessible. The following page shows the amount of benefits Financial Fitness has secured for Inverclyde Residents from 2014 – 2017 split by benefit type. The total amount secured for each year is as follows:-
<table>
<tr><td>2014</td><td>2015</td><td>2016</td><td>2017</td><td>2018</td></tr>
<tr><td>£3,646480</td><td>£3,966,258</td><td>£5,655,419</td><td>£4,580,191</td><td>£5,335,741</td></tr>
</table>
This is an indication of just how many benefits are going unclaimed in the area and highlights the continuing need for the service across the district. These statistics, however, fail to show the full extent to which people’s lives have been impacted upon. Many Inverclyde residents are able to make informed lifestyle choices based on need rather than affordability. Clients have been affected personal in the following ways:-

Increased income leads to healthier living as clients have greater access to better foods, exercise and leisure facilities.
Clients are now able to deal with existing debt and budget accordingly due to higher household income.
Many locals now experience greater self-esteem and confidence due to higher household income.
Many locals now experience greater self-esteem and confidence due to increased social inclusion.
Clients will tend to spend relatively high amounts of their extra income on local services and businesses, thus improving the local economy.
</td><td></td><td>and Advice available, this Action benefits all priority groups.</td><td>Improvement Plan</td><td></td></tr>
</table>

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			• Higher incomes generally lead to less erratic lifestyles, as rent/mortgage, council tax and other household priorities can be paid timeously. **The Year Ahead** Financial Fitness will continue to support clients through the benefits system's biggest change since its conception, with a host of benefits affected. Clients are being notified of changes and up-to-date advice.				


Financial Fitness - Amount of benefits secured for Inverclyde Residents
6000000
5000000
4000000
3000000
2000000
1000000
0
2014
2015
2016
2017
2018
Guardians Allowance
Working Tax Credit
Universal Credit
Widows Pension
Statutory Sick Pay
Statutory Maternity Pay
Return to Work Credit
Personal Independence Payment
Pension Credit
Maternity Allowance
Local Housing Allowance
Jobseekers Allowance
Industrial Injuries
Income Support
Housing Benefit
Employment Support Allowance
Disability Living Allowance
Council Tax Reduction
Child Tax Credit
Child Benefit
Carer's Allowance
Bereavement Benefit
Attendance Allowance

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
Best Start Grant – Local Roll Out	**Social Security Scotland**		Initial roadshows were arranged and held in various locations in Scotland, stakeholders were invited to attend. Inverclyde were included in events in Glasgow on Wednesday 24 October and Johnstone on Monday 5 November however a full timetable was issued to allow flexibility of venues and dates. Following the roadshows the presentation, links to Web pages, advice etc was shared together with Q&A docs. Stakeholders were asked that this was shared across the LA area. Best Start Grant opened at 00:01 on Monday 10 December. The response to the launch of Best Start Grant Pregnancy and baby Payment has been unprecedented with more than 4000 claims being submitted on the first day. This incredible response is largely down to the excellent support from stakeholders. Meetings have taken place with local groups to promote the benefits and raise awareness. One group have requested information packs in other languages. These will be given out January 2019 and a session planned for the families. Calls have been made to; play group, Local Nurseries etc to further raise awareness. National Engagement lead and local delivery for Social Security Scotland have engaged with CVS Inverclyde and other partners and stakeholders regarding sharing publicity and publications to utilise their communications routes. Information has also been publicised through Inverclyde Council's Social Media.	10th December 2018 (Pregnancy and Baby Payment), Summer 2019 (Early Learning Payment), Summer 2019 (School Age Payment)	This action will benefit all priority groups.	Inverclyde Corporate Plan, Inverclyde Outcomes Improvement Plan, HSCP Strategic Plan	

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			Social Security Scotland have appointed a Local Delivery Relationship Lead for Inverclyde who will work on building relationships, work collaboratively with existing local agencies and services and provide face to face pre-claim support in offices, outreach centres or home visits. Organisations and individuals have made enquiries about BSG as a result of the publicity already out there. . To Summarise BSG; **A Pregnancy and Baby Payment**, available from 10.12.18 - will help with expenses in pregnancy or having a new child, for example maternity clothes, a pram or additional heating. This replaces the DWP's Sure Start Maternity Grant. Pregnancy and Baby Payment - pays £600 for a first child, and £300 for other children. There will be an extra £300 if there is a multiple birth. **An Early Learning Payment,** available by Summer 2019 – will help with costs during nursery and early learning years to support child development, for example travel costs, trips out and toys for home learning. Early Learning Payment – A payment of £250 when a child reaches the age of 2 or 3 years. **A School Age Payment,** available by Summer 2019 – will help with the costs of preparing for school, for example a school bag, after school activities such as swimming or football, or helping with the cost of school trips. School Age Payment – A payment of £250 around the time a				

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
			child would usually start school. **The Year Ahead** Moving forward engagement will continue within Inverclyde to ensure that the information surrounding not just the pregnancy and baby payments but the additional elements due to be available from Summer 2019 are publicised and available to ensure families in Inverclyde are aware of Best Start Grant and support them to claim these new benefits. Inverclyde would benefit from receiving Local statistics in order to measure against local information.				
Use of Young Scot card to allow secondary pupils on Free School Meals to be credited during school holidays.		To be determined	Whilst holiday clubs are available for Primary school children, their siblings and parents/carers, there is currently no provision for Secondary school pupils to receive food during holidays. **The Year Ahead** It has been agreed by Inverclyde Child Poverty Action Group to liaise with Young Scot to discuss the possibility of progressing towards achieving electronic payments during school holidays for pupils in receipt of Free School meals. Discussions are currently in progress.		**Secondary School Pupils receiving Free School Meals**	Inverclyde Corporate Plan, Inverclyde Outcomes Improvement Plan, HSCP Strategic Plan, Inverclyde Children's Services Plan	Cost of Living

INCOME FROM SOCIAL SECURITY AND BENEFITS IN KIND

Action	Who action is carried out by	Resources allocated	Summary and how impact has/will be assessed	Timescale for action	Group(s) the action is intended to reduce poverty amongst	Link to other plans	Links to other Poverty Driver(s)
Ensure families can access support from social prescribing practitioners	**HSCP**	£250,000 estimate including 5.5 WTE Community Links Worker, 1.00 WTE Social Prescribing Co-ordinator, 0.2 WTE Welfare Rights Officers	Social prescribing is provided by a range of third sector organisations in their day to day services however the most notable impact for families will come from Community Links Workers attached to GP practices. Whilst the majority of referrals will be for adults – both services work across the range of age groups and will be supporting families. Most referrals include support around money – benefits & debt, housing, social isolation, emotional and practical support and resilience. **The Year Ahead** A commissioning process for community links workers will take place in 2019/20. Welfare rights officers based and embedded in GP practices will be tested and evidence collected.			Inverclyde Corporate Plan, Inverclyde Outcomes Improvement Plan, HSCP Strategic Plan	

Appendix 2

Inverclyde Local Child Poverty Action Report

Short, Medium and Long Term Planning Framework

June 2019

Long Term Plan/Outcomes: (3-5 years)

- To reduce inequalities (Inverclyde Local Outcome Improvement Plan)
- To reduce the prevalence of child poverty in our communities. (Inverclyde Corporate Plan)

Medium Term Plan/Outcome (1-3 years)

- To maximum social security and benefits in kind for eligible children and families living in low income
- To support priority groups to ensure that they receive support and advices they need to increase their skills and move into work employment and training.
- To provide enablers such as affordable child care and transport to reduce the cost of living for families on low income

Short Term Plans/Outcomes; (12 months)

- Automate payments for free school meals, school clothing allowance and educational maintenance allowance for families in receipt of Council Tax Reduction
- Provide a robust system that ensures all families are receiving maximised benefits.
- Train local champions within schools to raise awareness of cost of the school day
- Tackle Food Inequalities during the weekend and school holiday period.
- Provide training opportunities for young people through an expansion of the Apprenticeship Programme

What data evidence informs this long term outcome?

- Every Child, Every Chance - The Tackling Child Poverty Delivery Plan 2018-22
- Understanding Society https://www.understandingsociety.ac.uk/
- JRF Research highlighting the link between poverty and attainment - https://www.jrf.org.uk/report/closing-attainment-gap-scottish-education
- https://www.jrf.org.uk/report/poverty-scotland-2018
- Child Poverty Action Group for Scotland http://www.cpag.org.uk/cost-school-day
- Scottish Government National Performance Framework https://nationalperformance.gov.scot/national-outcomes/poverty

Drivers/Interventions:

- Income from Employment
- Cost of Living
- Income from social security and benefits in kind

Measures (How will we know we are successful):

2019/20 short term plan - 12 months

Intervention	When?	Who?	Measure / questions	Expected Impact
Implement Automated Education Benefits Payments (School Clothing Grant, Free School Meals and Education Maintenance Allowance)	By Christmas 2019 and ongoing	Revenue and Benefits and Education Services	% increase in the number of families receiving these benefits	The eligible families will be in receipt of benefits without having to complete further forms/documentation
Increase the qualifying criteria of families in receipt of Council Tax Reduction to enable eligibility of Education Benefits	From April 2019	Revenue and Benefits.	Increase in the number of families who are eligible for these benefits.	*217 families 316 children* will benefit from receiving FSM/SCG.
Eligible Families receive appropriate benefit payments			Number of Kinship payments provided Number of Kindship Carers who have received an income maximisation check. Healthier, Wealthier Children will consider extending coverage and	

Income for Social Security and benefits in kind

Costs of Living

Income from Employment

Intervention	When?	Who?	Measure / questions	Expected Impact
			effectiveness to providing support to families in receipt of benefits. There will be an increase in local capacity to establish or enhance referral pathways. Plan and deliver training on child poverty, money matters and referral pathways for universal maternity and health visiting workforce. The IDEAS group will support eligible participants and recruit volunteers to provide information and advice.	
SSSC – Benefits			Role out the new SSS benefits to eligible families including Pregnancy and Baby Payments, Early Learning Payment School Age payments.	
Foodbank Referrals			Raise awareness of local foodbank support that is offered including financial awareness and support.	

Income for Social Security and benefits in kind

Costs of Living

Income from Employment

Intervention	When?	Who?	Measure / questions	Expected Impact
Reduce the Cost of the School Day within Secondary, Primary and Early Years Establishments			Train local champions to raise awareness and share good practice across all schools. Provide children and families with food and play activities during the holiday and weekend period to reduce food insecurity. Provide funding to families in receipt of free school meals to impact on food insecurity during the weekend and holiday period.	
Inverclyde Attainment Challenge in Schools				Increase in Attainment for targeted groups of pupils in literacy and numeracy. Increase in teachers knowledge and skills to engage children in learning in literacy and numeracy. Increase in confidence in assessment and planning Increase in parental awareness of children's learning in literacy and numeracy.

Appendix 2

Intervention	When?	Who?	Measure / questions	Expected Impact
Employability			Provide 12 Apprenticeship opportunities for young people unlikely to gain attainment in school.	

2020-2023- Medium term plan

To maximum social security and benefits in kind for eligible children and families living in low income

What data/ evidence informs these priorities	Outcomes	How are you going to achieve it? / Interventions	How are you going to measure the impact? What questions are you going to ask?	Expected Impact
To support priority groups to ensure that they receive support and advices they need to increase their skills and move into work employment and training.				

Income for Social Security and benefits in kind

Costs of Living

Income from Employment

What data/ evidence informs these priorities	Outcomes	How are you going to achieve it? / Interventions	How are you going to measure the impact? What questions are you going to ask?	Expected Impact
To provide enablers such as affordable child care and transport to reduce the cost of living for families on low income				
What data/ evidence informs these priorities	Outcomes	How are you going to achieve it? / Interventions	How are you going to measure the impact? What questions are you going to ask?	Expected Impact

NHS Greater Glasgow and Clyde

Public Health Standing Committee
17 April 2019 **Paper No: You will be given this**

Dr Sonya Scott, Consultant in Public Health
Dr Noreen Shields, Planning and Development Manager

NHS GGC Child Poverty Action Report 2018

Recommendations

The Public Health Committee is asked to:

- Note the work undertaken by NHS GGC staff in 2018/19 to meet our statutory duty to contribute to reductions in child poverty rates in Scotland.
- Approve the planned deployment of health resource in pursuit of reduced child poverty levels in 2019/20 as described in our six local area child poverty action reports and summarised in this paper.
- Note the wider partner actions undertaken and planned to reduce child poverty in each of our six community planning partnership areas and continue to influence development of these through appropriate local partnership structures.

Purpose of Paper

This paper aims to summarise the range of activities undertaken in 2018/19 by NHS GGC staff which contribute to reducing child poverty rates in Scotland and outline planned future actions for approval.

Summary of Key Messages:

- The NHS has a new statutory duty to report in partnership with local authorities, action taken to reduce child poverty and maximise the incomes of pregnant women and families with children.
- A range of activity has been undertaken by corporate, acute and health and social care partnership (HSCP) health staff to contribute to reducing child poverty across Greater Glasgow and Clyde (GGC).
- Employability actions have focused on promoting NHS career opportunities and pathways into NHS employment via a range of activity including awareness and guidance sessions for unemployed people in the community and awareness and guidance training sessions for staff in Jobcentre Plus and employability advisors in partner agencies.
- Work has also been undertaken to understand and support staff financial wellbeing, with training for managers on universal credit and available sources of support for staff experiencing money worries.
- There has been a substantial amount of work undertaken to refresh and extend the Healthier, Wealthier Children Programme (HWC)[3], including staff information and training sessions and the development of staff support materials and promotional materials.
- HWC continues to result in substantial financial gains for families resident in GGC.

[3] HWC is a programme routine enquiry about family financial wellbeing by maternity and health visiting staff and referral to money advice services where required.

- An innovative and enhanced model of co-located money advice support for families has been piloted with our Special Needs in Pregnancy Service, highlighting the significant financial vulnerabilities of this patient group (average household income <£6000).
- Co-location of money advice services in GP practices in deprived areas has been successfully piloted.
- Evidence and data briefings have been produced and a development session hosted by NHS GGC to support evidence-informed action in partner local authority areas.
- In 2019/20 there will be a continued focus on improving the practice of routine enquiry of financial wellbeing. We will develop electronic referral pathways into money advice services for health visitors and in some HSCP areas pilot the co-location of money advisors with vaccination clinics in deprived communities. We will also explore how we can have a focus on parents within our employability programmes and understand current gains from community benefits with a view to maximising for children and families.

Any Patient Safety/Patient Experience issues
This work seeks to improve patient experience by ensuring assessment and treatment of social health has parity with physical and mental health.

Any Financial Implications from this Paper
NHS GGC received a small amount of funding (£2, 640) to provide for one month of a band 7 officer's time to report on child poverty reduction actions and an additional £63, 750 to: enhance referral pathways from maternity and children's services into money advice services, provide training for midwives and health visitors on family financial wellbeing and provide capacity in money advice services for responding to referrals from maternal and child services.

A recent review of NHS GGC's Healthier Wealthier Children (HWC) programme[4] noted the precarious nature of funding for money advice services, which are often reliant on non-recurrent funding and funding from charitable sources.

NHS GGC's Child Poverty Strategy seeks to ensure maximal community benefits are gained from our procurement spend.

Any Staffing Implications from this Paper
Effective action requires strategic leadership on a board-wide and community planning partnership-specific basis and therefore time of health staff working in corporate and acute directorates and health and social care partnerships.

The new statutory duty requires that midwives and health visitors in particular, support action to maximise the incomes of pregnant women and families with children.

Any Equality Implications from this Paper
Some members of our population are at greater risk of experiencing poverty in childhood. Action to reduce child poverty should therefore particularly benefit children of lone and/or young parents, children with disabilities and/or children of parents with a disability and black and minority ethnic children.

[4] Naven, L. Review of Healthier, Wealthier Children (HWC) in NHS Greater Glasgow and Clyde. Glasgow Centre for Population Health. 2018. Available at: https://www.gcph.co.uk/assets/0000/6927/Review_of_Healthier_Wealthier_Children_HWC_for_Financial_Inclusion_Group.pdf [Accessed 4 February 2019]

Any Health Inequalities Implications from this Paper
Health inequalities are fundamentally caused by inequalities in income, resource and power. Work to reduce child poverty will contribute to reduced inequalities in income and therefore inequalities in health outcomes.

Has a risk assessment been carried out for this issue? If yes, please detail the outcome.
No

Highlight the Corporate Plan priorities to which your paper relates
Produce and implement joint reports and plans on tackling child poverty including maintaining and developing the healthier, wealthier children programme and exploring how to use our role as an employer and procurer of goods and services to help tackle child poverty.

Authors – Sonya Scott and Noreen Shields.

Tel No – 01412014888

Date –

DRAFT

- **NHS Greater Glasgow and Clyde Child Poverty Report 2018/19**

1. Purpose

This paper aims to summarise the range of activities undertaken in 2018/19 by NHS GGC staff which contribute to reducing child poverty rates in Scotland and outline planned future actions for approval.

2. Background

The Child Poverty (Scotland) Act 2017 placed a new statutory duty on health boards to maximise the incomes of pregnant women and families with children and to jointly plan and report on these and other actions taken to reduce child poverty in each local authority area. The submission deadline for the first local area action reports is 30th June 2019.

Family poverty is associated with a range of health risks and adverse outcomes including unplanned pregnancy, smoking in pregnancy, stillbirth, injury in childhood, child neglect and maltreatment, emotional and behavioural problems and adverse health-related behaviours. Furthermore it is now know that household income is a cause factor in a child's cognitive, emotional, behavioural and physical development. It is estimated that £78 billion (£1 in every £5) is spent in the public sector each year dealing with the consequences of poverty.

Twenty-nine percent of children are living in relative poverty after housing costs[5]in NHS GGC. Over 40% of all children in poverty in Scotland are in the Greater Glasgow and Clyde Valley Region. Rates vary across local authority areas from 1 in 7 children in East Dunbartonshire and East Renfrewshire to 1 in 3 in Glasgow City. As a result of welfare reform it is predicted that if we do nothing child poverty rates in Scotland will increase from 26% to 38% by 2030.

Child Poverty is not inevitable, indeed rates halved in the UK between 1997 and 2012.The causes of poverty are often confused with the consequences which can impede progress in reducing rates of poverty. The new legislation and accompanying guidance makes clear that poverty is caused by the costs of essential goods and services outstripping household income from employment and/or social security. It requires local authorities and health boards to work with other community planning partners to consider and act on powers they have to maximise incomes and reduce costs for families.

In 2018/19 NHS GGC received Scottish Government funding of £2, 641 to report on child poverty actions and an additional £63, 750 to enhance the Healthier Wealthier Children (HWC) Programme. HWC is a programme of routine assessment of the financial wellbeing of pregnant women and families with children by health staff and where required referral into money advice services. This programme was established in NHSGGC in 2010. In the last eight years the programme has resulted in over £20 million financial gain for families living in GGC. Due to its success in NHSGGC it is currently being rolled out across all Scottish health boards. Recent funding has been provided to: enhance or develop referral pathways from maternity and children's health services into money advice services, provide training on addressing family financial wellbeing for midwives and health visitors and/or fund increased capacity within money advice services to respond to referrals from maternity and children's health services.

The majority of HWC monies (£35812) were disbursed according to the national funding formula to Health and Social Care Partnership (HSCP) health improvement teams. These

[5] defined as living in a household with less than 60% of the average household income for equivalent family size and composition

teams have been strategically leading HWC in their areas since 2013. The remaining £27938 (including South Glasgow and Renfrewshire's HWC funding) has been used to fund continued provision of a co-located money advice service with our Special Needs in Pregnancy Service.

3. Approach

While statutory responsibility for local area planning and reporting falls to the NHS and Local Authority the guidance accompanying the legislation states, "we know that solving poverty requires collaborative working across a range of partnerships. In many cases it will make sense for the Community Planning Partnership process to provide a helpful vehicle to coordinate reports."

Community Planning Partnerships (or similar partnership fora e.g. Glasgow City Poverty Leadership Panel) have therefore often been the structures through which local partnership strategies have been created, agreed and delivered.

Health staff have contributed to reducing child poverty on both a board-wide and locally specific basis. Board-wide actions are delivered through the following existing strategic groups: The Financial Inclusion Group, The Employment and Health Strategic Group and The Equalities and Health Group. At a local level health improvement staff in health and social care partnerships have been integral to, sometimes leading, local partnership planning processes.

NHS GGC staff can and have taken action to increase family incomes and reduce family costs in our role as an employer and in the provision of our service. Staff have also advocated evidence informed action to relevant partners where authority for action lies out with our control. Appendix 1 describes the range of action undertaken in 2018/19 within these categories.

Impact

Action to maximise incomes and reduce costs for pregnant women and families with children through Healthier, Wealthier Children and the Neonatal Expenses Fund have resulted in the financial gains for families in NHS GGC detailed in tables 2 and 3. Referrals and average financial gain have increased substantially between 2017 and 2018 for all services. This could be the result of improved detection of need and/or increasing levels of financial needs.

Table 2. Healthier Wealthier Children referrals and financial gain Jan-Dec 2017 & 2018

Year	Midwifery referrals	Health visiting referrals	Other referrals*	Average gain per family p.a.	Total gain
2017	293	1581	708	£2,100**	£2,498,258
2018	304 (4% ↑)	1965 (24% ↑)	767 (8% ↑)	£2,533**	£4,415,769

*GPs and health care assistants
**Approximately 46% of those referred take up the referral.

Table 3. Money advice referrals from wards and Family Support and Information Service (FSIS) in the Royal Hospital for Children (RHC) and families supported through the Neonatal Expenses Fund 17/18 &

18/19 (Q1-3)

	Number of families supported	Average gain per family p.a.	Income gained
17/18			
Referrals to money advice services from RHC wards and FSIS	361	£6,743	£2,434,358 (income)
18/19 (Q1-Q3)			
Referrals to money advice services from RHC wards and FSIS	332	£8,024	£2,664,077
Neonatal expenses fund	206	£195	£40, 201

4. Future Areas of Development

Appendix 2 details child poverty reduction-relevant actions which are planned for 2019/20.

5. Challenges

- Local action to reduce child poverty necessarily requires relationships, intelligence and influence across a complex range of internal and external policy areas.
- Funding to NHS boards has been provided for one month of reporting activity only and being the same for all boards does not reflect local levels of child poverty or the number of local authority reporting partners.
- Despite clear and compelling evidence of effectiveness in maximising incomes, referral rates from maternity and health visiting services into money advice service are less than we might expect, more work is required to develop relationships between health and money advice services, embed routine enquiry in practice and reduce stigma of accepting a money advice referral.
- Demand for money advice services is increasing at a time of static or decreased funding[6].

6. Recommendations

The Public Health Committee is asked to:

- Note the work undertaken by NHS GGC staff in 2018/19 to meet our statutory duty to contribute to reductions in child poverty rates in Scotland.
- Approve the planned deployment of health resource in pursuit of reduced child poverty levels in 2019/20 as described in our six local area child poverty action reports and summarised in this paper.
- Note the wider partner actions undertaken and planned to reduce child poverty in each of our six community planning partnership areas and continue to influence development of these through appropriate local partnership structures.

[6] The Improvement Service. *Money Advice Services – Investing in the Future*. 2018. Available from: http://www.improvementservice.org.uk/documents/em_briefing_notes/em-briefing-future-money-advice-svcs.pdf [Accessed Feb 2019].

Appendix 3

NHS Greater Glasgow and Clyde

Actions undertaken by NHSGGC staff to maximise incomes and reduce costs for families in 2018/19

A	Employer-related actions	Poverty driver	Partners involved	Priority Groups [7]	How measure success?	Timeframe
A1	Promotion of NHS career opportunities and pathways into NHS employment via: • schools engagement activity • awareness and guidance sessions for unemployed people in the community • awareness and guidance training sessions for staff in JobcentrePlus and employability advisors in partner agencies • college visits • attendance at community jobs fairs and careers events . A total of 84 events have been hosted in 2018/19	Income from employment	NHS Workforce Employability Team Local Authority Education Services Developing the Young Workforce Regional Groups Jobcentre Plus Clyde Gateway Rosemount Learning Centre Prince's Trust Jobs and Business Glasgow	All	May be possible in future to report activity by SIMD of school, community organisation and report the number of parents reached.	2018/19
A2	NHSGGC pre-employment training programme delivered to 21 people, 13 of whom gained employment following the programme, 11 within NHSGGC.	Income from employment	NHS GGC Workforce Employability Team Clyde Gateway and partner agencies	All	Number of people supported into good quality employment.	2018/19
A3	Apprenticeship opportunities provided for young people including: • 3 Foundation Apprenticeship Engineering placements for senior phase school pupils hosted by hospital based Estates Teams	Income from employment	NHS GGC Workforce Employability Team and range of services across NHS accepting MAs.	All	Number of apprentices securing positive destination	2018/19

[7] Lone parents, families with disabled member, families with child aged <1y, families with three or more children, BME families.

	• Modern Apprenticeship Programme recruitment (20 MAs starting with NHSGGC in next 6 months).				following programme.	
A4	Research on staff financial health needs and creation of an action plan to address those needs.	Income from employment, social security, reduced costs and mitigation of impact.	Public Health, staff participants across range of directorates.	All	As below for actions A5-A7	2018/19
A5	Poverty Awareness training for HR, occupational health and support and information services staff, delivered by Public Health Staff in partnership with Poverty Alliance and Child Poverty Action Group. Training content included Welfare Reform and 'in work' benefits, the rise in 'in work' poverty and the impact of poverty, how to raise the issue of money, the support and resources available and appropriate pathways for referral and signposting staff.	Income from employment, social security, reduced costs and mitigation of impact	Public Health Poverty Alliance Child Poverty Action Group	All	Number of staff trained (100 in 2018/19) Pre and post training assessments Explore feasibility of monitoring number of staff supported through support and information services.	2018-20
A6.	Money advice information to be included with standard Payroll letters informing staff of either move from full to half or half to no pay during sickness absence or recovery arrangements for overpayments.	Income from social security. Reducing household costs.	HR and Payroll staff.	All	Standardisation of process.	2018/19

A7.	Money and debt advice webpage developed for managers and staff on NHSGGC intranet.	Income from social security. Reducing household costs. Mitigation of impact.	Public Health	All	Number of visits to website.	2018/19
A8.	Continued provision and promotion of family-friendly working policies and opportunities.	Income from employment and reduced costs.	HR	All but may particularly benefit lone parents and families with disability.	.	Ongoing
A9.	Continued provision of monthly payment scheme for annual travel cards for staff.	Reduced costs	First Glasgow, ScotRail, Scottish Passenger Transport.		890 staff benefited during 2018 calendar year.	Ongoing
A10	Provision of educational bursaries to support in-work progression for staff.	Income from employment	Learning and Education Team.	All	Number of applications received and awarded by job band.	2018/19
B	**Service-related actions**	**Poverty driver**	**Partners involved**	**Priority Groups**	**How measure success?**	**Timescale**
B1	Four child poverty information sessions reaching 70 staff in total across all HSCP areas, two chaired by Director of Nursing and in collaboration with University of Stirling, to raise awareness of new child poverty legislation and new statutory income maximisation duty , provided for health visiting, family nurse and senior midwifery staff.	Income from social security. Reduced costs	Director of Nursing, public health, health visitors, midwives, family nurses, academic colleagues.	All	Post-event evaluation on knowledge and confidence responding to money worries	2018/19
B2	Development of refreshed staff and patient-facing	Income from	Public Health	All	Number of	2018/19

	materials to promote new statutory duty, routine enquiry of financial wellbeing, maternity benefits available and referral pathway into money advice services.	social security. Reduced costs	Communications colleagues		referrals from midwifery and health visiting colleagues into money advice services.	
B3	Development of materials for staff on sources of support for asylum seekers who have no recourse to public funds.	Mitigation of impact	Public Health	All particularly black and minority ethnic families.		2018/19
B4	Further development and promotion of a poverty and financial inclusion e-learning module for staff. 83 staff have completed in 11 months from 1/4/18	Income from social security, reduced costs and mitigation	Public Health	All	Number of staff completing e-module	Ongoing
B5	Face-to-face briefing sessions for new midwives and Royal Hospital for Children staff on assessment of family financial wellbeing. 32 new midwives and 16 RHC staff attended these briefings.	Income from social security, reduced costs and mitigation of impact.	Public Health, midwifery and paediatric staff.	All	Number of staff trained	2018/19
B6	Development of team-level training programme on raising issue of money worries for existing midwifery staff.	Income from social security and reduced costs	Public Health, Glasgow City Health Improvement.	Priority groups highlighted	Increased referrals from midwifery teams into money advice services.	2018/19
B7	Training for new health visitors on financial wellbeing, benefits of income maximisation, referral pathways and broader employability services available from money advice providers.	Income from social security and reduced costs	Public Health HSCP Health Improvement teams.	Priority groups highlighted	Increased referrals from health visiting teams into money advice	2018/20

					services.	
B8	Use of health visiting peer champions for promotion of routine financial health enquiry and referral in Glasgow City HSCP.	Income from social security and reduced costs	HSCP Children and Families Teams and Health Improvement	All	Increased referrals from health visiting teams into money advice services.	2018/20
B9	Training and information for adult health service staff on assessment of patient financial wellbeing. Information provided at nursing induction sessions in both Greater Glasgow and Clyde. FI briefings provided to Diabetes MCN, Beatson and Pulmonary Rehab staff. 78 staff in total attended these sessions.	Income from employment, social security, costs of living and mitigation of impact.	Public Health and range of community and acute adult service staff.	All	Number of staff attending sessions.	2018/19
B10	Inclusion of a question on financial wellbeing in adult acute ward nursing admission documentation and associated staff training. Three training sessions for senior nursing staff and 26 ward briefings delivered.	Income from employment, social security, costs of living and mitigation of impact.	Public Health and acute adult service nursing staff.	All		2018/19
B11	Development of a NHSGGC briefing for organisations representing priority groups on referral pathways from maternal and child services into money advice services.	Income from social security and reduced costs	Public Health		Increased referrals into money advice services for priority groups.	2018/19
B12	Management of the Financial Inclusion, Money Advice service in the Royal Hospital for Children (RHC) which provides parents/carers with a range of services to	Income from social security and reduced	Public Health	All	Number of families' supported,	Ongoing

	support their financial wellbeing including: benefits checking, income and expenditure support, financial capability and budgeting information debt management support, assistance with housing and eviction issues and energy advice. Parents and carers can also access emergency family funds and foodbank vouchers via the Family Support and Information Service co-located with the Financial Inclusion service at the RHC. .	costs. Mitigation of impact.			average and total financial gain.	
B13	Management of neonatal expenses fund for parents or guardians with either premature or sick babies in neonatal care to claim reimbursement for food and travel expenses.	Reduced costs	Public Health	Families with child under age of one.	Number of families supported and average financial gain.	Ongoing
B14	Facilitation of co-location of money advice services with Special Needs in Pregnancy Service (SNiPs) to target income maximisation support and advocacy to those with greatest financial health needs (e.g. average household income for this client group <£6000 per annum).	Income from employment, social security, reduced costs of living and mitigation of impact.	Third sector money advice service SNiPs staff, Glasgow City and Renfrewshire HSCP Health Improvement, Public Health	All, particularly pregnant women, young families.	Number of families' supported, average and total financial gain.	Ongoing
B15	Development of electronic referral pathway into money advice services developed for health visiting staff.	Income from social security, reduced costs.	Public Health, children and families staff, e-health, local authority and third sector money advice providers	All	Increased number of referrals into money advice from health visiting.	2018/20
B16	Regular feedback to health visiting teams on money advice referrals and patterns.	Income from social security and reduced	HSCP health improvement teams	All	Increased number of referrals into	Ongoing

		costs.			money advice from health visiting.	
B17	Analysis of uptake of healthy start food vouchers for low income families to support ongoing promotion to families by midwifery and health visiting staff.	Income from social security	Public Health, midwifery and health visiting teams.	All, particularly Pregnant women and families with children under one.	Increased uptake of health start benefit.	2018/20
B18	Survey of family financial health needs undertaken for families of children with disabilities attending child development centres.	Income from social security and reduced costs.	Families with lived experience of poverty. Specialist Children's Services. Glasgow City Council, Third sector Carers' Centre and Money Advice Services Public Health, Glasgow City HSCP Health Improvement.	Families with a disabled household member.	Increased money advice referrals from CDC staff. Average financial gain of £5000 per family supported.	2018/19
B19	Proposal developed and funding secured for research into the financial impact of pregnancy and possible cost-related barriers to attending antenatal care for low income families living in NHS GGC	Reduce costs, mitigation of impact.	NHS Health Scotland, NHS Ayrshire and Arran, Glasgow Centre for Population Health (GCPH), The Poverty Alliance, Child Poverty Action Group, Midwives, Family Nurses, Health Visitors,	All, with particular focus on pregnant women and families with children under one year and	Funding secured.	2018/19

			Public Health.	inclusion of BME families.		
B20	Financial incentives for pregnant women to stop smoking in pregnancy.	Mitigate impact of poverty	Midwives, Lead Midwives, University of Glasgow, Corporate Communications, HSCP Health Improvement Teams, eHealth, Public Health Directorate, Quit Your Way Services (Pregnancy, Pharmacy, Community, Acute)	All eligible pregnant women.	Number of women who receive full incentives by SIMD. Number and rate of women who maintain quit at 12 and 24 weeks post-quit date.	2018/20
B21	Colocation of money advice service in nine GP practices in deprived areas in North East Glasgow. Over 350 people supported in the first three quarters of 2018/19 with total financial gain of £1,148,423 for those benefiting financially.	Income from social security and reduced costs	Money Advice services, Clyde Gateway, Primary Care Teams, Glasgow City Health Improvement Team	All	Total and average financial gain	2018/19
C	**Advocacy**	**Poverty driver**	**Partners involved**	**Priority Groups**	**How measure success?**	**Timescale**
C1	Child Poverty Action network for local authority and HSCP leads established to co-ordinate board-wide and local area action and to share evidence and best practice across GGC.	All	All six local authorities and HSPCs, NHS Health Scotland, Public Health.	All	A number of supporting resources have been developed for local areas including an evidence	2018 -

					briefing and data guide.	
C2	Development session for local area child poverty leads organised with input from NHS Health Scotland, The Improvement Service and the Scottish Poverty and Inequalities Research Unit – focus on advocacy of automation of local area benefits and return on investment from referrals into money advice services from health service sources.	All	All six local authorities and HSPCs, NHS Health Scotland, The Improvement Service, GCPH, Public Health.	All	A number of areas are now exploring automation of local benefits.	2018/19
C3	Presentations on impact of child poverty on health, new statutory duty and evidence base for local action presented to: - NHS GGC Board Heads of Children's Health and Social Care Services and Area Partnership Forum and also -partnership forums in each local authority area -the national Scottish Local Authority Economic Development Conference.	All	Public Health	Priority risk groups highlighted.	Child Poverty plans discussed at and endorsed by senior strategic partnership committees.	2018/19
C4	Guidance on evidence informed action to reduce child poverty at a local level produced.	All	Public Health	All		2018/19
C5	Guidance on data available at local authority level to measure poverty and its drivers produced.	All	Public Health	All	Indicators being used in local child poverty action reports	2018/19
C6	A range of articles produced for staff news, core brief and hot topics related to child poverty.	All	Communication Staff and Public Health	All	Increased awareness of child poverty legislation amongst staff	2018/19
C7	A blog on evidence informed local action to reduce child poverty written for GCPH -	All	Public Health and GCPH	All	Increased awareness of	2018/19

	https://www.gcph.co.uk/latest/news/861_poverty_isn_t_inevitable_local_action_is_possible				causes of poverty and evidence informed actions which can be taken at local level in local policy makers and practitioners	
C8	A blog on the benefits of integrating money advice into primary care health services written for GCPH https://www.gcph.co.uk/latest/news/877_at_the_deep_end_integrating_money_advice_workers_into_gp_practices	All	Glasgow City Health Improvement Team and GCPH	All	Further roll out of co-location of money advice support in general practice.	2018/19

APPENDIX 2. Planned actions to maximise incomes and reduce costs for families in 2019/20

FA	Employer related actions	Poverty driver	Partners involved	Priority Groups	How measure success?	Timeframe
FA.1	Implementation of the NHS GGC Widening Access to Employment Strategy recommendations with specific action to support parents to access NHS job opportunities	Income from employment.	Widening Access to Employment Strategic Group, Workforce Employability Lead, Public Health Employability partner agencies	All	Number of parents accessing employability programmes going on to sustained employment.	2019/20
FA.2	Explore how we could optimise the impact of our procurement spend on local job creation and/or job quality for low-wage employees[8].	Income from employment	Head of Procurement, Commodity Manager Corporate Services, Public Health	All	Number and type of community benefits gain through capital spend and contracted services.	2019/20
FA.3	Plans in place to deliver Poverty Awareness training to Payroll staff in 2019/2020	Income from employment, social security, reduced costs and mitigation of impact.	Public Health	All	Number of staff trained. Pre and post-training assessments.	2019/20
FA.3	Include information on support for financial wellbeing in attendance	Income from social security and reducing costs of	Public Health and HR	All	Staff know sources of support for financial wellbeing.	2019/20

[8] Earning less than £17,550 per year whilst working full-time (based on living wage rate of £9 per hour and 37.5h week.

	management policy guidance and processes.	living.				
FA.4	Payslip messages signposting to sources of money advice and support to be issued quarterly from April 2019.	Income from social security and reduced costs of living.	Public Health and Payroll colleagues.	All	Staff know sources of support for financial wellbeing.	2019/20
FB	**Service-related actions**	**Poverty driver**	**Partners involved**	**Priority Groups**	**How measure success?**	**Timeframe**
FB.1	Develop electronic prompt for routine financial health enquiry and promotion of Best Start Pregnancy and Baby grant at 22 week antenatal appointment.	Income from social security.	Maternity services, Public Health.	All, particularly pregnant women	Midwifery referrals to money advice services increase. High levels of uptake of Best Start Pregnancy and Baby Grant in GCC	2019/20
FB.2	Explore development of electronic prompt for promotion of Best Start Grant Nursery and School grant payments at 27month and pre-school health visiting assessments on EMIS Web.	Income from social security	Children and Families, e-Health, Public Health	All	High levels of uptake of Best Start Nursery and School grant payments in GGC.	2019-21
FB.3	Develop quality assurance process for electronic referrals into money advice services from maternity service IT system.	Income from social security and reduced costs of living.	Maternity services, public health, money advice providers.	All, particularly pregnant women.	We can evidence referrals made are being received by the eleven money advice providers across GGC.	2019/20

FB.4	Facilitate targeted co-location of money advice services in vaccination settings in East Dunbartonshire, East Renfrewshire HSCPs.	Income from social security and reduced costs of living.	Children and Families teams, money advice services, health improvement teams.	All particularly families with a child under the age of one.	Referrals made, families engaging with service and financial gain.	2019/20
FB.5	Provide dedicated money advice support for family nurses in North East Glasgow City.	Income from social security, reduced costs of living.	Family nurses, health improvement staff.	All, particular young parents.		2019/20
FB.6	Expand provision of co-located money advice service in GP practices in Glasgow	Income from social security, reduced cost of living	Money advice services, primary care teams, Glasgow Health Improvement Team.	All	Referrals made, average and total financial gain	2019/29
FB.7	Raise awareness of child poverty legislation, statutory duty and available support services with GPs working in Deep End practices.	All	GPs, public health.	All	Increased referrals to money advice services from primary care.	2019/20
FB.8	Undertake research into the cost of the pregnancy pathway to explore the financial impact of pregnancy on low income families and how services can mitigate, given	Reduce costs, mitigation of impact.	Families with lived experience of poverty, NHS Health Scotland, NHS Ayrshire and Arran, GCPH, The Poverty	All, with particular focus on pregnant women and families with children under one year and inclusion of BME families.	Breadth of participants recruited. Useful insights and actionable recommendations generated.	2019/20

	evidence that this can be a point of transition to poverty for some families.		Alliance, Child Poverty Action Group, Midwives, Family Nurses, Health Visitors, Public Health.			
FB.9	Develop questions on money worries for Children's Hospital admission documentation.	Income from social security, reduce costs, mitigation of impact.	Public Health, acute children's services.	All	Families are routinely asked about social health when child admitted for acute care.	2019/20
FB.10	Disseminate findings of family financial health needs of families attending child development centre (CDC) to improve pathways into support services for families of disabled children.	Income from social security, reduce costs.	Public health, specialist children's services	Families with a disabled child	CDC staff are aware of new statutory duty on child poverty, the likely levels of need in families using their service and the benefits or referring to money advice services. Referrals into money advice from CDC's increase.	2019/20
FB.11	Develop child poverty microsite for staff, partners and general public on causes, relevance for health, local rates and current NHS actions.	NA	Public Health	All	Number of visits to site	2019/20
FB.12	Continue to deliver and improve routine financial	Income from social security and	Maternity, family nurse, children and	All, with focus on pregnant women	Recorded enquiry Referrals made	Ongoing.

	health enquiry and referral into money advice in midwifery, family nurse and health visiting services.	reduced costs of living.	family services, public health and health improvement.	and young parents.	Number of families engaged Total and average financial gain.	
FB.13	Continue to monitor and feedback on income maximisation referrals from maternal and child services.	Income from social security and reduced costs of living.	Public health and health improvement in HSCPs	All	Increasing enquiry and referrals made.	Ongoing.
FB.14	Research into the prevalence of financial hardship in families of children attending outpatient ENT clinics in Royal Hospital for Children	Income from social security, reduced costs.	ENT staff, public health, service users.	All	Completion of results with actionable recommendations to improve health and/or care.	2019/20
FC	**Advocacy**	**Poverty Driver**	**Partners involved**	**Priority Groups**	**How measure success?**	**Timeframe**
FC.1	Analysis and reporting, in partnership with GCPH, on indicators of child poverty and economic, housing, childcare and transport drivers in the Glasgow and Clyde Valley Region.	Income from employment and costs of living.	GCPH, Glasgow City Region, Glasgow City Council, Children's Specialist Services, Public Health, Health Improvement.	All	There is a greater understanding of levels and distribution of determinants of child poverty amongs.t relevant senior decision makers across GGC	2019/20

Contact us

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We are committed to using our website and a range of social media to communicate with people, communities and businesses across Inverclyde and beyond.

This document is available in other formats.
Please contact us to request this.

Equality Impact Assessment

APPENDIX 2

This document should be completed at the start of policy development or at the early stages of a review. This will ensure equality considerations are taken into account before a decision is made and policies can be altered if required.

SECTION 1 - Policy Profile

1 Name/description of the policy, plan, strategy or programme	Inverclyde Local Child Poverty Action Report resulting from Child Poverty (Scotland) Act 2017
2 Responsible organisations/Lead Service	Organisational Development, Policy and Communications Service
3 Lead Officer	Ruth Binks, Corporate Director, Education, Communities & Organisational Development
4 Partners/other services involved in the development of this policy	Inverclyde Council, Inverclyde HSCP, NHS GGC and 3rd Sector organisations within Inverclyde are involved in the development of the Local Child Poverty Action Report. The Local Child Poverty Action report requires to be presented to the following Boards/committees:- • Alliance Board • CMT (Corporate Management Team) • IJB (Integration Joint Board) • Policy & Resources Committee • Education & Communities Committee • NHS GGC Board In addition to this, national partners (Improvement Services, SPIRU (Scottish Poverty and Inequalities Research Unit), Scottish Government and NHS Scotland are involved in supporting the development of the Local Child Poverty Action Report.
5 Is this policy:	New **X** Reviewed/Revised ☐
6 What is the purpose of the policy (include any new legislation	The purpose of the Report is to reduce the number of children living in poverty. By placing statutory income targets on Government we will

which prompted the policy or changes to the policy)?	focus action on reducing inequality and poverty within the formative years of children's lives. The Act sets out four national statutory income based targets to be achieved by 2030. The four targets are:- • **Less than 10% of children live in households that are in relative poverty** • **Less than 5% of children live in households that are in absolute poverty** • **Less than 5% of children live in households that are in combined low income and material deprivation** • **Less than 5% of children live in households that are in persistent poverty** The Act requires that each local authority and relative NHS Health Board must jointly prepare annual Child Poverty Local Action Reports (LAR's). The first report will cover the financial year 2018/19. These annual reports must set out the activity undertaken during the reporting period and those planned going forward to meet the 2030 targets.
7 What are the intended outcomes of the policy?	Tackling child poverty means tackling all poverty, ending the cycle of poverty for good. This involves producing actions to maximise household incomes, boost life chances and sustain high quality places where children can thrive and prosper.
8 Geographical area (Inverclyde wide or a specific location)	The Local Child Poverty Action Report covers Inverclyde in its entirety, however, Partners have recognised that there are particular communities in Inverclyde that suffer from higher levels of multiple deprivation and experience the greatest inequalities and therefore require targeted support and attention. The Inverclyde Alliance is currently developing its approach to locality planning in Inverclyde and has produced Locality Plans for three areas in Inverclyde which experience the greatest level of inequality and deprivation. The Scottish Attainment Challenge mentioned within the report is specifically targeting schools within communities where there's a predominance of children who live within SIMD 1 and 2.

9	**Is the policy likely to have an impact on any of the elements of the Council equality duty (if yes, please tick as appropriate)?**	**X** Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010 **X** Advance equality of opportunity between people from different groups □ Foster good relations between people from different groups
10	**Will those who may be directly or indirectly affected by this policy be involved in its development?**	Your Voice (the Inverclyde Community Care Forum) have set up a 'Challenging Inverclyde Poverty' group in which members of the public attend. This will make sure that members of communities affected by poverty are able to get their voices heard on the policies and decisions that most impact their lives and lives of people in their communities.

SECTION 2 – Impact on Protected Characteristics

Which of the protected characteristics will the policy have an impact upon? (see guidance for examples of key considerations under each characteristic)						
	Impact					
Protected Characteristic	**Positive** High	Low	**Neutral**	**Negative** High	Low	**Reason/Comments**
Age	X					Child poverty in Inverclyde is growing, with more than one in four children estimated to be living in poverty. The whole Child Poverty (Scotland) Act is about children. Children cannot by their own actions remove themselves from household poverty, therefore, the Local Child Poverty Action Report supports children and their families.
Disability	X					Given the high prevalence of poverty for disabled people, families with a disabled adult or child are a priority group in the Tackling Child Poverty Delivery Plan. The employment rate for disabled people is significantly below that for the general population so disabled parents who are able to work may find it difficult to be accepted into paid work. Disability also creates additional costs. These include accommodation, heating, equipment, transport, medical supplies and insurance. As well as the additional costs of living for disabled people, their capacity - and the capacity of other household members - to earn income can be negatively impacted. Depending on the nature of disability one or more household members may be required to act as a carer full or part time which reduces the time that they would be able to undertake paid work.
Gender reassignment			X			
Marriage and civil partnership			X			
Pregnancy and maternity	X					Households with a young child are a priority group in Scottish Government's Tackling Child Poverty Delivery Plan. The Healthier Wealthier Programme offers

						income maximisation advice for families experiencing child poverty and will aim to prevent families from falling into child poverty by working with health and early years services to identify families at risk at an early stage. Consequently the main service groups targeted for providing referrals to Healthier, Wealthier Children income maximisation services will be, in the first instance, midwives and other antenatal service staff, health visitors, oral health and breastfeeding advisers, parenting support workers, and early education staff.
Race	X					According to Scottish Government's Tackling Child Poverty Delivery Plan 2018 – 22, 37% of Minority Ethnic children are living in poverty and fall into the action within the Local Child Poverty Action Group of targeted groups
Religion or belief			X			
Sex (male or female)	X					According to statistics, women have higher poverty rates than men. The large majority of lone parent households are headed by women and these households tend to experience high poverty rates.
Sexual orientation			X			
Other groups to consider (please give details)	X					The Inverclyde Child Poverty Delivery Plan 2018 – 22 has targeted its actions towards six priority areas. Structural factors outwith the control of these households can lead to many becoming trapped in poverty. Often, the main issue is lack of flexibility around work and care, but there are many factors at play including discrimination, which leads to the far higher poverty rates for children in these families as shown below (national figures):- • Lone Parents (36% of children in *relative poverty) • Disabled (30% of children in relative poverty) • 3+ children (30% of children in relative poverty) • Minority Ethnic (37% of children in relative poverty) • Youngest Child Aged <1 (32% of children in relative poverty) • Mothers Aged <25 (44% of children in relative poverty) *This is where some people's low income means that they struggle to participate in 'ordinary' economic, social and cultural activities. In Scotland relative poverty is determined as those earning less than 60% of the national average. While not as extreme as absolute poverty, relative poverty is still serious and harmful.
Fairer Scotland Duty						The Fairer Scotland Duty places a legal responsibility on particular public bodies in Scotland to actively consider how they can reduce inequalities of outcome

						caused by socio-economic disadvantage, when making strategic decisions. People in Scotland still experience significant socio-economic disadvantage and resulting inequalities of outcome. The Fairer Scotland Duty clearly links to the Child Poverty (Scotland) Act 2017, and the National Co-ordinator for Child Poverty also has a role to help public bodies implement the Duty successfully. People who are living in poverty are more likely to suffer from socio-economic disadvantage. The Local Child Poverty Action Report will have a positive impact on reducing inequalities of outcome caused by socio-economic disadvantage as all the actions included in the report are linked to the three main Poverty Drivers – Income from Employment, Cost of Living and Income from Social Security and Benefits in Kind.

SECTION 3 – Evidence

What evidence do you have to help identify any potential impacts of the policy? (Evidence could include: consultations, surveys, focus groups, interviews, projects, user feedback, complaints, officer knowledge and experience, equalities monitoring data, publications, research, reports, local, national groups.)	
Evidence	**Details**
Consultation/Engagement (including any carried out while developing the policy)	Inverclyde hosted an event during Challenge Poverty week in October 2018 at the Beacon Arts Theatre "Every Child Every Chance". More than 100 representatives from across the public and third sectors attended this event which provided a robust platform on which to develop the Inverclyde Child Poverty Action Report. A second event is taking place in June 2019. The purpose of this event is to inform delegates of how their input in the past 12 months has informed the Local Action Report 2018/19 and Plan for 2019/20 to impact on child poverty in Inverclyde.
Research	There has been a vast amount of research completed focussing on Child Poverty from national partners including:- • Joseph Rowntree Foundation • Poverty Alliance • Scottish Government • NHS Health Scotland • Child Poverty Action Group • Scottish Equality and Poverty Research Unit • Improvement Services In addition to the research carried out by external partners, they offer support to Local Child Poverty Action Report Leads within Local Authorities.

Officer's knowledge and experience (including feedback from frontline staff).	Actions included within the Local Child Poverty Action Report have been collated from Services within Inverclyde, NHS GGC, Inverclyde HSCP and 3rd Sector. Officers have immense understanding, many years experience and knowledge of their Service Area and the links to poverty.
Equalities monitoring data.	A reduction in child poverty is likely to be of significant benefit to a wide range of people with protected characteristics that often experience higher rates of poverty.
User feedback (including complaints)	
Stakeholders Other	Stakeholders are currently invited to provide feedback on the draft Local Child Poverty Action Report prior to submission on or before 30th June 2019.
What information gaps are there?	

SECTION 4 – CONSEQUENCES OF ANALYSIS

What steps will you take in response to the findings of your analysis? Please select at least one of the following and give a brief explanation.		
1. Continue development with no changes		
2. Continue development with minor alterations	X	Feedback from stakeholders will be incorporated into the report, as appropriate.
3. Continue development with major changes		
4. Discontinue development and consider alternatives (where relevant)		
How will the actual effect of the policy be monitored following implementation?		

Inverclyde’s Child Poverty Action Group will continue to meet on a regular basis and present progress reports on the delivery of the plan to relevant committees. The Local Child Poverty Action Report will be required to be submitted to Scottish Government on an annual basis, therefore actions will be monitored on an ongoing basis.

When is the policy due to be implemented?

The first Local Child Poverty Action Report is due for submission to Scottish Government on or before 30 June 2019. Following submission of the report, work will continue to ensure that the tasks in Inverclyde relating to child poverty are streamlined, joined-up, makes the best use of resources and that the impact is being monitored.

When will the policy be reviewed?

The Act requires that each local authority and relevant NHS Health Board must jointly prepare annual Child Poverty Local Action Reports (LAR’s). These annual reports must set out the activity undertaken during the reporting period and those planned going forward to meet the 2030 targets. Reviewing will be ongoing.

What resources are available for the implementation of this policy? Have these resources changed?

Poverty is multi-dimensional in nature and one organisation alone cannot deliver the change that is required to tackle its root causes. Collaboration is essential to bring resources, knowledge and expertise together that can make lives better for those children and young people in our communities experiencing the greatest inequalities. There are a number of partners involved in the implementation of the Report, examples of which include:-

- Inverclyde Council
- Inverclyde HSCP
- Financial Fitness
- SAMH
- Inverclyde Foodbank
- NHS GGC
- Social Security Scotland

To collate the work being carried out by all Services, Inverclyde Council has recruited a Corporate Policy Officer (Poverty) for a period of 2 years.

Name of Individual(s) who completed the Assessment Name(s): Gail Baxter Position: Corporate Policy Officer (Poverty) Date: 9.4.19
Authorised by Name: Position: Date:

Please send a copy of all completed forms to Karen Barclay, Corporate Policy Officer at karen.barclay@inverclyde.gov.uk

Inverclyde Alliance

AGENDA ITEM NO: 12

Report To:	**Inverclyde Alliance Board**	**Date:**	**17 June 2019**
Report By:	**Corporate Director Education, Communities & Organisational Development**	**Report No:**	
Contact Officer:	**Brian Young Health Improvement Lead Inverclyde HSCP**	**Contact No:**	**01475 715283**
Subject:	**Pregnancy & Parenthood in Young People Improvement Plan**		

1.0 PURPOSE

1.1 The purpose of this report is twofold –

I. To inform the Alliance Board on the local implementation of the Scottish Government's Pregnancy & Parenthood in Young People Strategy and associated local improvement plan

II. To seek support from the Alliance Board for the proposed direction of travel, which is adopting a community planning approach.

2.0 SUMMARY

2.1 The Scottish Government's Pregnancy & Parenthood in Young People Strategy is the first Scottish strategy of its kind, setting out what actions are needed to tackle the cycle of deprivation associated with many cases of pregnancy in young people and providing extra support for young parents.

The Strategy also concentrates on increasing the opportunities available to young people, to support their wellbeing and prosperity across the life course. It aims to help young people develop the appropriate knowledge, skills and confidence in making decisions around pregnancy and parenthood through a partnership approach between professionals and young people.

2.2 The local implementation of the strategy is the responsibility of the Sexual Health Local Implementation Group (SHLIG) and a requirement of the national strategy is to have an 'accountable person'. This responsibility falls to the Corporate Director Education, Communities & Organisational Development, who is also the chair of the SHLIG.

A writing group was convened to develop the Improvement Plan, which was informed by a required self-assessment process, designed to consider the current assessment against the actions from the strategy and what further improvement work is required.

2.3 The Improvement Plan is contained in Appendix 1 and was agreed at Inverclyde Council's Education and Communities Committee (November 2018).

2.4 National rates of pregnancy in young people under 20 have seen a significant drop in recent years. The most recent data on conceptions in 2016 show that since 2007:

- rates in the under 20 age group have decreased by **45.1%**
- rates in the under 18 age group have decreased by **55%** and
- rates in the under 16 age group have decreased by **60.6%**

In 2004, Inverclyde had the third highest rate for teenage pregnancies of all the 32 local authorities in Scotland. By 2017, this had fallen to 24th out of 31.

3.0 RECOMMENDATIONS

3.1 That the Inverclyde Alliance approves the content of this report.

Ruth Binks
Corporate Director
Education, Communities and Organisational Development

4.0 BACKGROUND

4.1 Pregnancy in young people is often a cause and a consequence of social exclusion and should not been seen narrowly as a health challenge. Reducing levels of pregnancy in young people helps to reduce the likelihood of poverty and a recurring cycle from one generation to the next.

Universal services across all agencies have an important role to play in identifying and supporting the needs of young people. These responsibilities will be strengthened through the commencement of the provisions and duties in relation to the *Children and Young People (Scotland) Act 2014.*

In terms of local pregnancy data/rates, in 2004, Inverclyde had the third highest rate for teenage pregnancies of all the 32 local authorities in Scotland. By 2017, this had fallen to 24th out of 31.

Local actions that could be attributed to the reduction are as follows:

- A number of key research areas and learning from other strategic approaches have paved the way for the Inverclyde Sexual Health Implementation Group (SHLIG)'s direction of travel.
- The local prevention and promotion activities that have formed part of the work through SHLIG, have seen targeted efforts that were initially attributed to a post that was specifically funded by CRF/Fairer Scotland Funding that now forms part of mainline budgets.
- In parallel in this period, there has been a significant culture shift in attitudes and intense awareness-raising and support with and to both denominational and non-denominational schools.
- In 2008, the Scottish Government Pharmacy Public Health contract was established, making Emergency Hormonal Contraception available free of charge in virtually every pharmacy in Scotland plus the numbers of Free Condoms sites from 6 in 2011, rising to 33 by the end of December 2016.
- The Scottish Government (2007) released additional funds to enable local authorities and Health Boards to collaborate on training teachers to deliver Relationships, Sexual Health and Parenthood Education in Schools (RSHP). For Inverclyde, this triggered work allowing for the training to be delivered locally.
- In a further drive to continually improve our performance in this area, there is the local articulation of the Scottish Government's Pregnancy and Parenthood for Young People Strategy, with the developments under the leadership of the SHLIG.

4.2 The Strategy focuses on increasing the opportunities available to young people, to support their wellbeing and prosperity across the life course. It aims to help young people develop the appropriate knowledge, skills and confidence in making decisions around pregnancy and parenthood through a partnership approach between professionals and young people.

In producing the final strategy, the Scottish Government is suggesting it should be seen as both a strategy and a practical plan for action. It works its way systematically through what we must do to improve outcomes for young people underpinned by the United Nations Convention on the Rights of the Child (UNCRC) and the national approach of 'Getting it Right for Every Child (GIRFEC).

4.3 To support the construction of its Strategic Plan, at the end of 2018, Inverclyde HSCP developed its Strategic Needs Assessment. This highlighted differences in the Inverclyde localities and the rate in Inverclyde Central is higher than in the other areas. In 2015/16 the rate was 37 per 1,000 women, the highest of the areas shown, but a decrease from the 54 per 1,000 in 2011-13.

There is specific work contained in the Improvement Plan, seeking to better understand and address these differences, augmented by the range of actions that are contained in this Improvement Plan has been carefully developed to ensure the overall aim is secured.

4.4 As stated above, the local implementation of both the strategy and the associated Improvement Plan is the responsibility of the SHLIG and the plan was developed by a writing group drawn from the SHLIG membership. A key document to inform the plan was the self-assessment process that was required by Scottish Government.

Throughout the writing of the plan, there were discussions with other key agencies, such as the Family Nurse Partnership, and there was a robust consultation process undertaken with a young mum's group (Barnardo's) and several young peoples' groups. These were facilitated by colleagues at Community Learning & Development and the views have been pivotal in the final draft that is attached as Appendix 1, ensuring the voices of the young people are, quite rightly, at the centre of the plan. It also provides robust evidence that the plan has been co-produced.

4.5 A core element of the required plan is the aspect of the tackling of inequalities –

Inverclyde has high levels of deprivation and associated physical and mental ill-health. There are areas of high primary and secondary care service use and some areas have high populations of more affluent and older people. Evidence suggests that poor socio-economic circumstances affect opportunities for good health and access to services.

Similar to many areas of Scotland, Inverclyde exhibits disparity in the life circumstances and quality of life of residents, with some areas of Inverclyde ranking amongst the most deprived in Scotland, whilst other areas of Inverclyde fall at the opposite end of this scale.

While there is a welcome improvement in life expectancy for both males and females in Inverclyde, longer life expectancy does not always translate to healthy life expectancy. Stark health inequalities continue to exist in life expectancy and other health outcomes across communities in Inverclyde.

National data highlights that a young woman living in Scotland's most deprived areas is five times more likely to experience a pregnancy as someone living in the least deprived, along with the most deprived areas have 12 times the rate of delivery compared to the least deprived.

Careful consideration has been given to each of the improvement actions to ensure there is the ongoing response to addressing inequalities.

5.0 CURRENT POSITION

5.1 The implementation of this Improvement Plan presents a number of opportunities to support the health and wellbeing of the young people who are affected by pregnancy and parenthood.

The improvement actions, underpinned by seeking to reduce inequalities, clearly demonstrate a continuing local strength of working together to bring about the best possible outcomes for the people of Inverclyde.

5.2 In addition, the improvement plan fully supports the ''Nurturing Inverclyde' vision and is a further demonstration that the Inverclyde Alliance is committed to improving outcomes for all its citizens' and particularly those living in our most deprived communities and our most vulnerable residents.

6.0 IMPLICATIONS

Finance

6.1 None

Legal

6.2 None

Human Resources

6.3 None

Equality and Diversity

6.4 An Equality Impact Assessment (Appendix 2) has been completed to ensure these aspects have been addressed.

Repopulation

6.5 None

Inequalities

6.6 The improvement actions have a focus on addressing inequalities, which has also been considered in the attached Equality Impact Assessment (Appendix 2).

7.0 CONSULTATIONS

7.1 There were several consultations carried out with young people, in particular, and other key stakeholders, to ensure their views were reflected in the final plan.

8.0 CONCLUSIONS

8.1 The ECOD Directorate presents this report and associated improvement plan for the endorsement of the Inverclyde Alliance for final sign-off.

9.0 BACKGROUND PAPERS

9.1 The self-assessment that informed the Improvement Plan is available on request.

9.2 The Improvement Plan is contained in Appendix 1.

9.3 Equality Impact Assessment in attached in Appendix 2.

Pregnancy and Parenthood in Young People Strategy: Inverclyde Alliance Improvement Plan (2019 – 2027)

	Where are we now?	Where do we want to be?	How will we get there (including timescale)?	How will we know we are getting there?	Who is responsible?	Progress (RAG status) *& Commentary*
1.	There are a range of engagement and needs assessment processes already in place for young people including Clyde Conversations	Improve the understanding of the needs of young people	The outputs of engagement with young people need to be reflected in planning with feedback provided to young people on progress. Where issues raised by young people cannot be progressed this should also be communicated back to young people Clyde Conversations 3 – feedback to young people happens every year on progress	Reviewed at SHLIG	SHLIG CLD-Lead Responsibility	
2.	Develop and implement processes that address the outcomes of the needs assessment and pathways in place that take account of data collecting protocols and data sharing practices					
3.	There is a requirement for a senior leader to be designated to take responsibility for multi-agency coordination of PPYP action, data sharing and intelligence gathering		Inverclyde Alliance to agree senior lead officer for local PPYP implementation	Lead Officer in Place	Inverclyde Alliance	
4.	Relationships, Sexual Health and Parenthood Education (RSHP) is provided in most	Young people have a better understanding of what healthy, safe, consensual and equal	Implement the Early Protective Messages approach in all pre-5 establishments	Evaluation Reports from training	Education Health Improvement (Sandyford)	

Pregnancy and Parenthood in Young People Strategy: Inverclyde Alliance Improvement Plan (2019 – 2027)

	Where are we now?	Where do we want to be?	How will we get there (including timescale)?	How will we know we are getting there?	Who is responsible?	Progress (RAG status) *& Commentary*
	establishments. In Pre-5 establishment the Early Protective Messages has been piloted. In primary, secondary and ASL schools there are RSHP programmes and programmes of CPD for teachers.	relationships are. Young people have increased knowledge of nurture, attachment, preconception and parenthood	Implement an improvement plan to ensure teaching staff are confident at delivering RSHP and are supported by school management and parents and carers in delivery Ensure there is consistency synergy between delivery of RSHP and school-based programmes aimed at addressing Child Sexual Exploitation and Gender Based Violence in schools	Training Plan in place Annual report of teacher training numbers Outcome of School HWB Survey Evidence of joint planning plus review of individual school plans	Education/CLD Child Protection Committee	
5.	Young people can access contraception from primary care providers and from Sandyford sexual health service but face barriers in relation to accessibility.	Young people have increased knowledge and skills around contraception and sexual negotiation All young people have equal access to information about contraception	Sandyford will expand the availability of young people's drop-in clinics as part of the service review. This will include expanding digital provision of information and signposting. Sandyford will consult with young people about the potential for shifting the location of the drop-in to increase accessibility, including scoping provision within existing youth services. Staff working with young	Increased provision of services Report of consultation with young people Attendance data from services including uptake of contraception. Report of staff briefing sessions?	SHLIG (Education/ CLD)/Sandyford	

Pregnancy and Parenthood in Young People Strategy: Inverclyde Alliance Improvement Plan (2019 – 2027)

	Where are we now?	Where do we want to be?	How will we get there (including timescale)?	How will we know we are getting there?	Who is responsible?	Progress (RAG status) *& Commentary*
			people including those in secondary schools, CLD and Children's Services will be briefed on how to signpost young people to services.			
6.	Young people who are or may be pregnant require easy and fast access to information about pregnancy and services which can support them. Staff that work with young people have a pivotal role in signposting or where required ensuring the Named Person is involved. Particularly vulnerable young people are able to access appropriate services Aligned services, focusing on the needs of vulnerable young people are supportive of their needs.	Young people make early and informed choices following conception	Ensure information about pregnancy and associated choices and services is available to young people in easy to access formats. Staff working with young people including those in secondary schools, CLD and Children's Services will be briefed on how to signpost young people to services.	Information available on Young Scot and Sandyford websites Report of staff briefing sessions Numbers attending Termination of Pregnancy and Referral (TOPAR) (assessment and referral) before nine weeks of pregnancy Number of women under 20-years booking early with a midwife Numbers engaging with Family Nurse Partnership (FNP) early in pregnancy	CLD Sandyford FNP Midwifery	

Pregnancy and Parenthood in Young People Strategy: Inverclyde Alliance Improvement Plan (2019 – 2027)

	Where are we now?	Where do we want to be?	How will we get there (including timescale)?	How will we know we are getting there?	Who is responsible?	Progress (RAG status) *& Commentary*
7.	There are a range of support services in place for young parents. More work is required to provide a more joined up approach to supporting young parents. This includes ensuring young parents have access to appropriate and secure housing and financial inclusion support. .	Young parents have increased knowledge about local services and are confident using them	Use data produced as part of Action 3 to inform multi-agency service planning Develop an engagement process with young parents to highlight areas for improved partnership working Agreeing a Housing Charter, reviewed through the Corporate Parenting strategy Develop and implement a robust communications strategy, ensuring everyone working with young parents communicate effectively, across multiple services, putting the young parent(s) and their needs at the centre.	Report of engagement with young parents produced Housing Charter Developed Communication with partners issued	CLD/Environmental Services Inverclyde Alliance (Outcome 6)	

Pregnancy and Parenthood in Young People Strategy: Inverclyde Alliance Improvement Plan (2019 – 2027)

	Where are we now?	Where do we want to be?	How will we get there (including timescale)?	How will we know we are getting there?	Who is responsible?	Progress (RAG status) *& Commentary*
8.	Young parents require support to ensure they can remain in education, training or access employment while ensuring their child has the best start in life.	Young parents are supported to stay in education, training or employment	Review current support for young parents to remain in school during pregnancy and post birth. Use the outcome of the engagement process with young parents to guide Inverclyde Alliance to assess and if required frame improvements in vocational training and employability services.	Annual report of young parents remaining in Education FNP Data on young parents engaging with school, training or employment	Education Inverclyde Alliance	

Equality Impact Assessment

This document should be completed at the start of policy development or at the early stages of a review. This will ensure equality considerations are taken into account before a decision is made and policies can be altered if required.

SECTION 1 - Policy Profile

1	**Name/description of the policy, plan, strategy or programme**	Inverclyde Alliance: Pregnancy and Parenthood in Young People Improvement Plan
2	**Responsible organisations/Lead Service**	Inverclyde Sexual Health Implementation Group (SHLIG)
3	**Lead Officer**	Brian H Young, Health Improvement Lead, Inverclyde HSCP
4	**Partners/other services involved in the development of this policy**	Membership of the Sexual Health Implementation Group (SHLIG)
5	**Is this policy:**	New ✓ Reviewed/Revised ☐
6	**What is the purpose of the policy (include any new legislation which prompted the policy or changes to the policy)?**	The local improvement plan is a direct response to the Scottish Government's 10-year Pregnancy and Parenthood in Young People Strategy.
7	**What are the intended outcomes of the policy?**	The plan has a number of improvement activities focusing on increasing the opportunities available to young people, to support their wellbeing and prosperity across the life course. It aims to help young people develop the appropriate knowledge, skills and confidence in making decisions around pregnancy and parenthood through a partnership approach between professionals and young people. This plan will support delivery of Equality Outcome 2 – Inverclyde's children, citizens and communities are able to access our services and buildings with ease and confidence.
8	**Geographical area (Inverclyde wide or a specific location)**	Inverclyde wide
9	**Is the policy likely to have an impact on any of the elements of the Council equality duty (if yes, please tick as appropriate)?**	• Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act

	2010 • Advance equality of opportunity between people from different groups • Foster good relations between people from different groups
10 Will those who may be directly or indirectly affected by this policy be involved in its development?	The construction of the improvement plan has seen consultation with young people, young mums, and a wide range of professionals who have a support role for young people. The strategy has also been discussed at 'Clyde Conversations', which is an annual event led by young people, providing a platform to talk about pertinent health and wellbeing issues. The plan was also borne out of a requirement from Scottish Government to develop a self-assessment process, which involved a number of key stakeholders.

SECTION 2 – Impact on Protected Characteristics

Which of the protected characteristics will the policy have an impact upon? (see guidance for examples of key considerations under each characteristic)						
	Impact					
Protected Characteristic	**Positive** High	Low	**Neutral**	**Negative** High	Low	**Reason/Comments**
Age	Y					N/A for young people up to the age of 18 (not Equality Act 2010)
Disability			Y			Young people with disabilities form a very small part of the plan but the intention is to cover this in other areas.
Gender reassignment			Y			No known correlation.
Marriage and civil partnership			Y			N/A
Pregnancy and maternity	Y					
Race			Y			
Religion or belief			Y			According to the guidance on the implementation of Relationships, Sexual Health and Parenthood Education in Schools *"The Scottish Government is committed to ensuring that all children and young people receive high quality Relationships, Sexual Health and Parenthood Education (RSHP) in order to respect, protect and fulfil their human rights as they grow up"*. Moreover, national guidance on the curriculum is always developed on the basis of wide consultation. It is recognised religious authorities with a role in denominational education provide guidance on RSHP education for their denominational schools and that right will continue as at present. This national guidance should be seen to be complementary to the guidance provided by the religious authority while at the same time serving as a useful basis for everyone. Noteworthy is that the Scottish Government supports the right of the Roman

						Catholic Church to give witness to its faith, and to uphold the traditions of Catholic education.
Sex (male or female)	Y					Should have a positive impact on young women in terms of preventing pregnancy and enhanced support for young men who may become fathers
Sexual orientation			Y			Will have more of an impact on heterosexual couples
Other groups to consider (please give details) Fairer Scotland Duty	Y					Pregnancy in young people is often a cause and a consequence of social exclusion. Reducing levels of pregnancy in young people helps to reduce the likelihood of poverty and a recurring cycle from one generation to the next. National data highlights that a young woman living in Scotland's most deprived areas is five times more likely to experience a pregnancy as someone living in the least deprived, along with the most deprived areas having 12 times the rate of delivery compared to the least deprived.

SECTION 3 – Evidence

What evidence do you have to help identify any potential impacts of the policy? (Evidence could include: consultations, surveys, focus groups, interviews, projects, user feedback, complaints, officer knowledge and experience, equalities monitoring data, publications, research, reports, local, national groups.)	
Evidence	**Details**
Consultation/Engagement (including any carried out while developing the policy)	As per above plus discussions at SHLIG Throughout the writing of the Plan, there were discussions with key agencies such as the Family Nurse Partnership. There was also a robust consultation process undertaken with a young mums' group and several young people's groups.
Research	References in plan and statistics National rates of pregnancy in people under 20 have seen a significant drop in recent years. The most recent data on conceptions in 2016 shows that, since 2007, rates in the under 20 age group have decreased by 45.1%; rates in the under 18 age group have decreased by 55%; and rates in the under 16 age group have decreased by 60.6%. In Inverclyde, there are differences in the pregnancy rate in the localities; the rate in Inverclyde Central is higher than in the other areas. In 2015/16, the rate was 37 per 1,000 women, the highest of the areas shown (but a decrease from 54 per 1,000 in 2011/13).
Officer's knowledge and experience (including feedback from frontline staff).	Sandyford input and school health; corporate director (education); self-assessment on teenage pregnancy & housing
Equalities monitoring data.	Forms part of the Council's Equality Mainstreaming Reporting Able to track births and abortions with limited ethnicity data

	Limited equalities monitoring data for sexual health service and FNP (check)
User feedback (including complaints)	Young parents and LGBT groups fed back positively
Stakeholders Other	SHLIG and committees (Education & Communities and Inverclyde IJB)
What information gaps are there?	Routine reporting of pregnancy notifications for young women Limited knowledge of what data is routinely captured in young people and how this is fed into planning Family Nurse Partnership – criteria and what are HVs recording

SECTION 4 – CONSEQUENCES OF ANALYSIS

What steps will you take in response to the findings of your analysis? Please select at least one of the following and give a brief explanation.		
1. Continue development with no changes		
2. Continue development with minor alterations	**Y**	**Lifespan of the plan; data needs more exploration**
3. Continue development with major changes		
4. Discontinue development and consider alternatives (where relevant)		
How will the actual effect of the policy be monitored following implementation?		

Through Teenage Pregnancy data – see plan

When is the policy due to be implemented?

Following approval by the Inverclyde Alliance on 17th June

When will the policy be reviewed?

In line with agreement with Scottish Government and Education & Communities Committee on an annual basis.

What resources are available for the implementation of this policy? Have these resources changed?

In kind support

Name of Individual(s) who completed the Assessment

Name(s): Brian Young

Position: Health Improvement Lead, Inverclyde HSCP

Date: 12th May 2019

Authorised by

Name:

Position:

Date:

Please send a copy of all completed forms to Karen Barclay, Corporate Policy Officer at karen.barclay@inverclyde.gov.uk

Inverclyde Alliance

AGENDA ITEM NO: 13

Report To:	**Inverclyde Alliance Board**	**Date:**	**17 June 2019**
Report By:	**Corporate Director Education, Communities & Organisational Development**	**Report No:**	
Contact Officer:	**Brian Young Health Improvement Lead Inverclyde HSCP**	**Contact No:**	**01475 715283**
Subject:	**Multi-agency Guidelines for Responding to Self-harm and Suicide in Children and Young People (Inverclyde Alliance)**		

1.0 PURPOSE

1.1 The purpose of this report is twofold –

I. To bring to the attention of the Inverclyde Alliance Board, the Multi-agency Guidelines for Responding to Self-harm and Suicide in Children and Young People and developments to support children and young people who may be at risk of self-harm and suicide.

II. To request the Inverclyde Alliance Board to support the proposed direction of travel, which is adopting a community planning approach.

2.0 SUMMARY

2.1 Both a national and local priority is to sustain and improve the mental health and wellbeing of children and young people, along with safeguarding, forming a key commitment that is an integral part of ongoing priorities for Inverclyde.

2.2 Recent high-profile cases, and subsequent reports and policy guidance, such as:
The fatal accident inquiry into the deaths on the Erskine Bridge (2012); the SCSWIS Practice Guide on Suicide Prevention for Looked After Children & Young People (2011); and Responding to Self-Harm in Scotland Final Report (2011), have contributed to begin to establish best practice in responding to self-harm and suicide.

With particular regard to the Erskine Bridge Fatal Accident Inquiry (2012) – *'Local authorities should commission a set of guidelines for staff working with looked after and accommodated children about recognising and mitigating suicide risk in this client group. These guidelines should include the requirement to develop a detailed management protocol*'.

2.3 A multi-agency writing group, with membership drawn from Inverclyde Council's Education Psychology, Specialist Children's Services, Social Work, Health Visiting and Health Improvement, was established to devise a draft of the guidance, utilising best practice from the guidelines already published in other areas and adapting for an Inverclyde context.

In addition, a freelance writer was independently commissioned to develop the guidelines.

3.0 RECOMMENDATIONS

3.1 That the Inverclyde Alliance Board notes the content of this report and approves the publication of the guidelines and associated implementation.

Ruth Binks
Corporate Director
Education, Communities and Organisational Development

4.0 BACKGROUND

4.1 Over the years, several policy drivers have considered the aspects of improving the mental health of children and young people. The latest Scottish Government's 10-year mental health strategy places children and young people at the heart of the early intervention and prevention agenda. Moreover, other policy drivers, such as the 5-year Strategy for Mental Health Services in Greater Glasgow and Clyde 2018-2023 are informed by a range of documents including the Scottish Government's Mental Health Strategy and the Healthy Minds 2017 report by NHS GG&C's Director of Public Health.

4.2 Given the directive outlined above from the Erskine Bridge Fatal Accident Inquiry, there was a responsibility placed on local areas to develop guidelines, a multi-agency approach was adopted locally.

4.3 The multi-agency guidance has been created to support staff and specifically ***frontline responders***, across all partner services, to provide a caring and appropriate response to children and young people experiencing emotional distress and who may be at risk of self-harm or have thoughts of suicide.

The document encompasses guidance for staff for both self-harm and suicide in a single document. This may infer an inevitable link and may cause concern, as self-harm and suicide are distinctly different behaviours, with very different intent and motivations.

Creating a document that includes but separates the two behaviours is the most effective way to ensure staff are capable of responding appropriately to young people experiencing suicidal ideation as well as the small proportion of young people who move from self-harm to suicide and the larger numbers whose self-harm does not lead to suicide.

In addition, this format will help to dispel the myths around the two behaviours and clarify the distinct features of each.

4.4 Noteworthy, is the extensive and robust consultation processes that the document has had, including discussions with several key professional stakeholders in social work, education services, 3rd sector agencies and young people themselves. As is evident in the guidelines, their voices have been pivotal in the document's construction, along with valuable input from Inverclyde Council's Legal Services.

4.5 Scrutiny of the guidelines has been mainly through the Joint Children's Services Plan Group and the Inverclyde Child Protection Committee.

Future governance arrangements are being recommended to the Inverclyde Alliance Board as the Joint Children's Services Plan Group.

5.0 CURRENT POSITION

5.1 In terms of the implementation of the guidelines, there are planned training/up skilling workshops that will be delivered on a multi-agency basis and the further creation of easy reference leaflet that captures the main points of the guidelines that will be used by the first responders.

5.2 The final draft of the guidelines, contained in Appendix 1, is an illustration of the content and for the Alliance meeting, there will be printed copies made available at the meeting.

6.0 IMPLICATIONS

Finance

6.1 None.

Legal

6.2 None

Human Resources

6.3 None

Equality and Diversity

6.4 Appendix 2 (attached) details an Equality Impact Assessment that addresses this aspect of the report.

Repopulation

6.5 None

Inequalities

6.6 The guidelines have a focus on addressing inequalities, which has also been considered in the attached Equality Impact Assessment (Appendix 2).

7.0 CONSULTATIONS

7.1 There were several consultations carried out with a range of stakeholder that included young people, to ensure their views were central to the final construction of the guidelines.

8.0 CONCLUSIONS

8.1 The ECOD Directorate presents this report and associated guidelines for the final sign-off by the Inverclyde Alliance

9.0 BACKGROUND PAPERS

9.1 A final draft of the guidelines is contained in Appendix 1.

9.2 An Equality Impact Assessment is detailed in Appendix 2.

Inverclyde Multi-Agency Guidelines for Responding to Self-harm and Suicide in Young People

Foreword

Councillor Stephen McCabe, Leader of Inverclyde Council and Chair of Inverclyde Alliance

On behalf of the Inverclyde Alliance, I am pleased to introduce the Inverclyde Alliance Multi-Agency Guidelines to Support Children and Young People at Risk of Suicide and Self-harm.

This development has been part of an extensive piece of work that firmly commits the Community Planning Partnership to sustaining and improving the emotional wellbeing and mental health of children and young people, as a local priority. This is augmented by the need to ensure there is adequate and effective support for children and young people with mental health problems and that they have early access to the help they require.

These guidelines have been created to support staff and specifically ***frontline responders***, across all partner services, to provide a caring and appropriate response to children and young people experiencing emotional distress and who may be at risk of deliberate self-harm or have thoughts of suicide. This document encompasses guidance for staff for both self-harm and suicide in a single document.

Creating a document that includes but separates the two behaviours is the most effective way to ensure staff are capable of responding appropriately to young people experiencing suicidal ideation as well as the small proportion of young people who move from self-harm to suicide and the larger numbers whose self-harm does not lead to suicide.

In addition, this format will help to dispel the myths around the two behaviours and clarify the distinct features of each.

The guidelines have been constructed following a number of consultations, quality assurance and scrutiny processes, ensuring these are robust for use in the context of supporting the outcomes for the children and young people of Inverclyde.

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PART 1 Introduction

1.1 Purpose of Guidance

These guidelines are intended for all staff working or in contact with children and young people in Inverclyde. They are the result of a process of collaboration and consultation with staff in statutory and voluntary services in Inverclyde as well as parents, carers and young people. It has utilised the latest research on responding to self-harm and suicide and is consistent with the principles and models of responding recommended by ASIST (Applied Suicide Intervention Skills Training) and 'What's the Harm' Self-harm Awareness and Skills Training (See Part 5 Resources and Training).

The purpose of this document is to ensure that all agencies working in Inverclyde provide a consistent, caring and appropriate response to children and young people who have been using self-harm as a coping strategy and/or are experiencing thoughts of suicide.

These guidelines should be read in conjunction with other relevant guidelines that are currently in place within each service or agency, e.g. GIRFEC which is briefly discussed in section 1.4 below:

When young people do access social, healthcare and other services, they need do so without fear, stigma and safe in the knowledge that they will be given strong and appropriate support[1].

This document is not intended to be a definitive or exhaustive guide to all aspects of self-harm and suicide. Neither should it be considered as a training package, it is recommended that you make every effort to attend the training that is outlined in Part 5 (Resources and Training).

In addition to the overall aim above, it is intended these guidelines will help to:

- Maximise consistency of response across agencies.
- Build upon and strengthen the knowledge and skills of staff in recognising and responding appropriately to young people who self-harm or are experiencing suicidal thoughts or behaviours, based on the latest research and government policy recommendations.
- Develop and maintain the quality of support, advice and guidance offered to young people who self-harm and or are experiencing suicidal thoughts or behaviours.
- Ensure that the first line response is appropriate and provides interim management even when referral is considered appropriate.
- Create clarity on the appropriate pathways when referral to another agency is required.
- Contribute to an environment within services which is nurturing and supportive and challenges the myths and stigma associated with both self-harm and suicide, so helping to promote the health and happiness of our young people.

How to use these Guidelines

It is suggested that these guidelines are supported by a smaller accessible leaflet (Responding to Distress: Self-harm leaflet and Responding to Distress: Suicide leaflet) for responding to Self-harm and Suicide. These A5 leaflets are designed to provide an at a glance guidance to responding to a young person, including a flowchart containing guidance on 'How to Help'.

This main document can be used as a reference when a practitioner requires more in-depth guidance on the rationale behind the leaflet.

1.2 Definition of Child or Young Person

There are several differing definitions of a 'child' in Scottish legislation[2] and the United Nations Convention on the Rights of a Child framework defines a child as being under 18 years of age.

However , it is also intended that these guidelines will apply to young persons over 18 years of age and in some circumstances up to , and including , the age of 25 years .Certainly , in terms of the Children and Young People (Scotland) Act 2014 , Local Authorities have a duty towards children who have been looked after and accommodated until they reach their 26th birthday .

Some of the services involved with children and young people have different age criteria. When seeking advice or making referrals , please ascertain with the agency the age range for which they provide support and help .Consideration should be given to vulnerability and whether adult or child protection processes apply for those children between the ages of 16 – 18 years.

1.3 Rationale for Separating Self-harm and Suicide

For this document, it is necessary to separate self-harm from suicide, whilst acknowledging that there may be links between the two behaviours. This is consistent with the approach taken in 'What's the Harm' Self-harm Awareness and Skills Training delivered throughout Greater Glasgow and Clyde.

It is common for those unfamiliar with self-harm to assume that it is a suicide attempt or gesture.

'While suicide attempts are undertaken with some intent to end life, Non-Suicidal Self Injury is undertaken with the intention of self-integrating and preserving life'[3].

(See section 2.1. for an explanation of the use of the terms self-harm self- injury and non suicidal self injury)

Several authoritative studies have indicated that young people are clear about the difference in intent between self-harm and suicide: self-harm is about staying alive and suicide is about dying. However, given that there is a view that both self-harm and suicide are underpinned by distress it can be assumed that there is a link between the two behaviours, and there is some evidence that for some, suicide may become an option when self-harm is no longer an effective coping mechanism for an individual's distress[4].

'The relationship between self- harm and suicide is complex. Many people who die by suicide will have a history of self- harm, but most people who self- harm will not go on to die by suicide. As such self- harm is a clear risk factor for suicide, but it is also a phenomenon that we need to understand and address in its own right.'[16]

However, given the apparent prevalence of self-harm in young people, estimated at 1 in 12 [8] to 1 in 15 [2] secondary pupils, it is clear that the majority of young people do not go on to attempt or complete suicide.

'That said, it is important to note that individuals with a history of self-injury are at higher risk for suicide thoughts, gestures, and attempts and, because of this, need to be assessed for suicide risk'[15]

For this reason, the guidelines would always recommend ensuring that the young person is always asked directly about the intent behind their harming behaviour and that the lethality of the method is taken into account. (See 'Self-harm How to Help' and 'Suicide How to Help').

1.4 Parental Support

1.4(i) Involving parents

Whenever we work with young people and we ensure there is a relationship of trust, we also have to make them understand that there may be occasions when we may need to share information with other people, including their parents.

While we want to ensure a comprehensive support system is in place for young people at risk of self-harm or suicide, we also need to listen to young people if they tell us they live with parents who may have mental health issues, substance misuse problems or are verbally, physically or emotionally abusive to them.

We need to recognise that we could make an already difficult family situation worse or risk the child or young person from disengaging with us. Therefore, it is very important to identify whether the child or young person wants their parent(s) to be a source of support for them. ***They may prefer to identify another adult family member or even an older brother or sister to be their support.*** What is important is that the child or young person's feelings are documented and that all staff engaged with the young person are aware of their circumstances so decisions can be made in the best interests of the child or young person.

1.4(ii) Information to support parents to support their child

From a parent's perspective it can be very difficult supporting their child in relation to self harm or suicide. The following information may be useful:

***In relation to Self –Har*Guidance from the National Self-harm network for family/friends and carers is available at this link:**

http://www.nshn.co.uk/downloads.html

Leaflets include:

Basic First Aid Distractions that can help

Advice for friends family and carers of young people who self harm

Advice for Young People Self harm: The Myths

Guidance from Lifesigns: Self Injury Guidance and Network Support offers downloadable leaflets:

www.lifesigns.org/downloads.html

Leaflets include

Parents and Guardians Factsheet Friends Factsheet

For People who self injure factsheet

Young Minds provide a parents helpline:

Call 08088025544

(Mon to Fri 9.30-4.00pm)

Parentline can be contacted:

Call: 08000 28 22 23).
Email: parentlinescotland@children1st.org.uk

Text: 07860022844

Webchat also available

In relation to Suicide

Guidance for family, friends, carers and the young person is available from Papyrus and it's associated helpline HOPElineUK (0800 068 41 41). Papyrus materials are available at this link:

http://www.papyrus-uk.org

Provide information leaflets, including:

Thinking of ending it all Not just a cry for help Coping with Exams

Listen to me Conversation starters (About Suicide)

HOPELineUK is a confidential support and advice service run by Papyrus for:

- Young people under the age of 35 who may be having thoughts of suicide
- *Anyone concerned a young person may be having thoughts of suicide*., including parents and guardians

HOPELineUK can be contacted:

Call: 08000 68 41 41

Text :07786209697

Email: pat@papyrus-uk.org

Parentline Scotland:

Call: 08000 28 22 23

Young Minds provide a parents' helpline:

Call: 08088025544

(Mon to Fri 9.30-4.00pm)

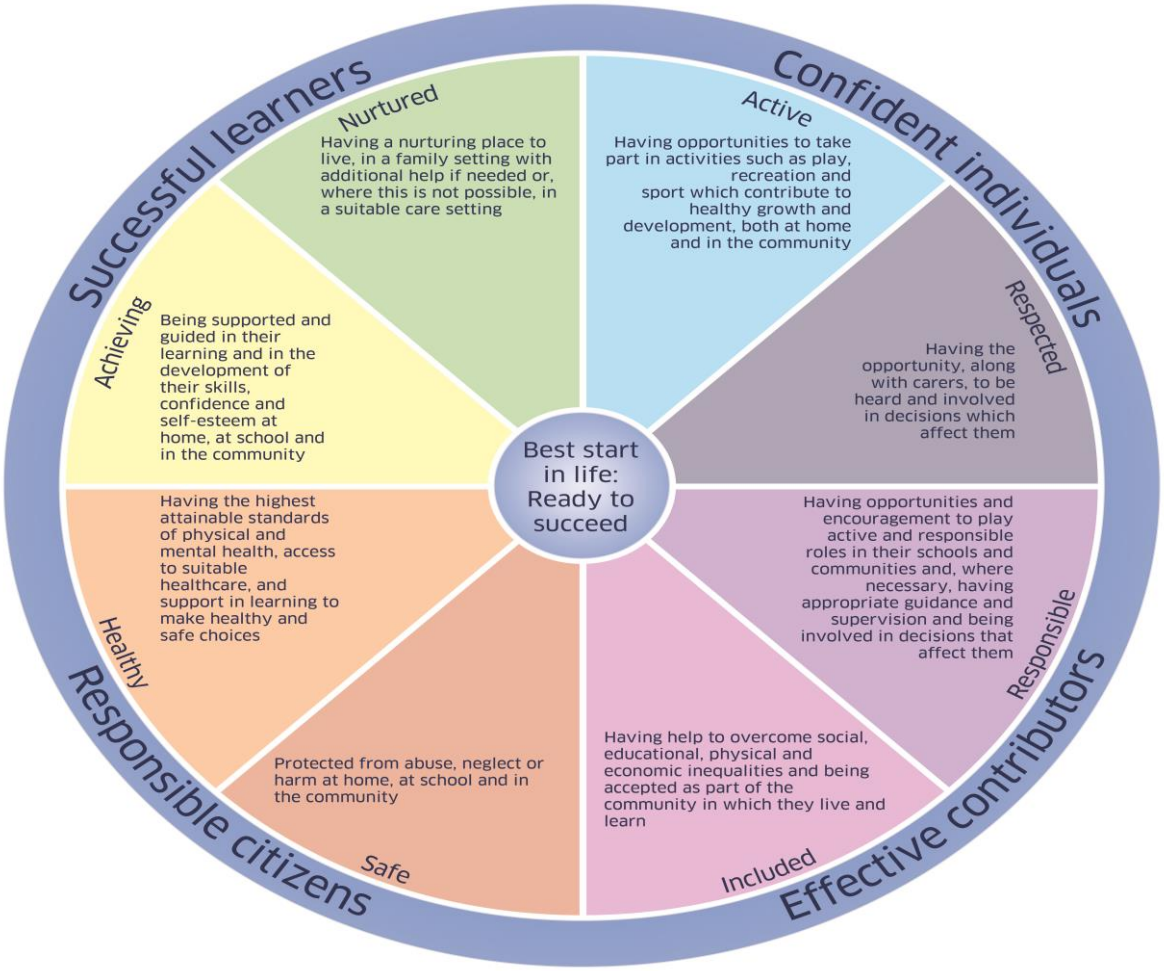
1.5 Getting It Right for Every Child (GIRFEC)

Getting it right for every child (GIRFEC) is the national approach in Scotland to improving outcomes and supporting the wellbeing of children and young people by offering the right help at the right time from the right people. The GIRFEC approach should be used as a way to identify needs, outcomes and solutions for individual children or young people at risk as a result of self-harm or suicide. It supports them and their parent(s) to work in partnership with the services that can help them.

The Getting It Right for Every Child approach ensures that anyone providing support places the child or young person and their family at the centre. Practitioners need to work together to support families, and where appropriate, take early action at the first signs of any concern.

The Wellbeing Indicators

To ensure that children get the best start in life practitioners use the eight indicators to assess a child or young person's overall wellbeing and identify strengths and any concerns. The indicators offer a consistent approach and language which helps organise what we know about a child or young person. If you work with children and young people, and you record information about them, you and your organisation should organise that information based on the wellbeing indicators in line with this National Practice Model.



Find out more about GIRFEC: www.gov.scot/Topics/People/Young-People/gettingitright

Wellbeing is broader than child protection and how we tend to think about welfare. When considered together the different elements of wellbeing give the whole picture of a child's or young person's life at a particular point in time. A child's or young person's wellbeing is influenced by everything around them and if we don't consider the bigger picture and work together our support can be less effective.

Concern for a child's wellbeing may arise as a result of an event, a series of events, attributes or circumstances which affects how they progress and do well now and in the future, for example, missing appointments for health checks.

Below are the five key questions every practitioner should ask themselves when they are concerned about a child or young person:

What is getting in the way of this child's wellbeing?

Do I have all the information I need to help this child?

What can I do now to help this child?

What can my agency do to help this child?

What additional help, if any, may be needed from other agencies?

Where concerns are identified action must be taken and a child's plan put in place. It is important to liaise with your supervisors and at this stage you must consider if a multi-agency approach is necessary.

The Named Person

Most children and young people get all the help and support they need from their parent(s), wider family and community, but sometimes, perhaps unexpectedly, they may need a bit of extra help.

Children and young people from birth to 18, or beyond if still in school, and their parents will have access to a Named Person to help them get the support they need.

This is to ensure that every child or young person has a clear point of contact if they or their parents want information or advice, or if they want to talk about any worries and seek support

A Named Person will normally be the health visitor for a pre-school child and a promoted teacher - such as a head teacher, or guidance teacher for a school age child.

A Named Person will be available to listen, advise and help a child or young person and their parent(s), provide direct support or help them access other services. They will also be a point of contact for other services if they have any concerns about a child's or young person's wellbeing.

If you have concerns for a child's wellbeing and consider that they need additional support you should consult with the child and family and with their agreement involve the child's Named Person. If the child and family are opposed to this further involvement then the child's welfare and safety must be your paramount consideration and you must consider if it is necessary, justifiable and proportionate to share this information and involve the Named Person without

their consent.

If the child and family are opposed to this further involvement then the child's welfare and safety must be your paramount consideration and you must consider if it is necessary, justifiable and proportionate to share this information and involve the Named Person, or any other agency /service, without their consent. It is imperative that you inform the child and their family of your intention to share information and the reasons why you feel this additional help is required, unless doing so would be detrimental to the child's welfare and safety.

PART 2 Responding to Self-harm

2.1 Definition of Self-harm

There are many definitions of self-harm, the definition utilised within these guidelines is:

"an act which is intended to cause injury to oneself but which is not intended to result in death. It is often described by those who self-harm as a way of coping with emotional pain and of surviving distressing experiences. It is not a suicide attempt."[9]

This is the definition used within the 'What's the Harm' Self-harm Awareness and Skills Training [9] and the 'On Edge'-learning about self-harm Resource Pack[12] .

Some of the literature quoted in this document uses the term Non-Suicidal Self Injury (NSSI) and self injury : for the purpose of this document these terms are synonymous with the term self-harm. It should be noted that self-harm, which has suicidal intent will be dealt with in the adjoining Inverclyde Responding to Suicide (Section3).

This section of the guidance has utilised research and articles which relate to self-harm and/or self-injury, which has a direct intent to cause tissue damage but is not intended to result in death.

2.2 Background and National Context

Self-harm among young people is a significant and growing public health issue[6]. On average two teenagers in every secondary school classroom will have hurt themselves in response to the pressure of growing up in an increasingly complex and challenging world[7]. Young people also say self-harm is their number one concern for their peers, above bullying, gangs, binge-drinking and drug use[7]. However, those in closest contact with young people often have limited knowledge of self-harm, which results in a poor response when a young person finally finds the courage to tell someone they need help[7] According to Truth Hurts (2006)[8], the National Inquiry into self-harm amongst young people, the response a young person receives when they first disclose self-harm will influence whether or not they go on to seek further help.

The Scottish Executive's Choose Life Strategy and Action Plan (2002, 2013-16) [17] identified children and young people as a priority risk group. It recommended that teaching staff are enabled or empowered to identify when early interventions are necessary and provide access to appropriate support and services. It is also recommended that teachers and other practitioners be equipped with the knowledge, skills and training to enable them to talk openly about self-harm to those groups most at risk and continue to develop and expand school based programmes on positive mental health and well-being. The Self-Harm Action Plan (2011)[10] sets out a series of objectives in relation to self-harm.

2.3 Prevalence of self-harm among young people

It is difficult to put a definite figure on the prevalence of self-harm, with estimations varying depending on the population studied and assessment tools used, and on the definition of self-harm.

"There are a number of reasons why it is difficult to determine the prevalence of self-harm amongst young people in Scotland. The majority of individual episodes of self-harm go unreported and yet prevalence is based on hospital treatment" [10] ***(SG, 2011).***

> Worryingly, as the hospital figures are only the tip of the iceberg, the true figure of how many children and young people are self-harming is likely to be far higher, and this is especially so for particular at-risk groups including lesbian and gay, transgender and bisexual young people, looked-after children, and young people in the criminal justice system.[7]

The Truth Hurts Report [8] estimated in 2006 that 1 in 12 young people self -harm. In 2013 Childline reported a 68% increase in the number of young people contacting them in relation to self- harm in the previous year, and intimated that they are at the greatest risk of self -harm around the age of 12 to 13.

2.4 Why young people Self-harm

Self-harm is a coping mechanism, which enables a person to regulate feelings and express difficult emotions. Young people who hurt themselves often feel that physical pain is easier to deal with than the emotional pain they are experiencing. However, the behaviour only provides temporary relief and fails to deal with the underlying issues that the person is facing.

> ***They may want attention, but the fact that they do want attention isn't because they're bad and they're an attention seeker, it's because they have another … they feel the need for affection or something like that"***
> ***Benjamin,****17* [12]

For some young people, Self-harm may last for a short time. For others, it can become a long-term behaviour. Som people self-harm, stop for a while, and return to it months, even years later in times of distress.

> **It is a response to distress. It can be a way of coping with unbearable emotional pain, feelings of powerlessness and hopelessness. These feelings may arise from events happening in a person's life right now or painful experiences in the past that left the person feeling powerless, bad about themselves, alone, hurt and betrayed'[8].**

The reasons young people gave for using self-harming behaviours are varied and are discussed below. It is however safe to assume that the behaviour is underpinned by distress of some kind.

- Self-harm temporarily relieves intense feelings, pressure or anxiety
- Self-harm provides a sense of being real, being alive - of feeling something other than emotional numbness or disassociation
- Harming oneself is a way to externalise emotional internal pain – to feel pain on the outside instead of the inside
- Self-harm is a way to control and manage pain - unlike the pain experienced through physical or sexual abuse
- Self-harm is self-soothing behaviour for someone who does not have other means to calm intense emotions, a form of emotional regulation
- Self-loathing - some young people who self-harm are punishing themselves for having strong feelings (which they may not have been allowed to express as children), or for a sense that somehow they are bad and undeserving (for example, being a victim of abuse and a belief that it was deserved)
- Self-harm followed by tending to wounds may be a way to be self-nurturing, for someone who never was shown by an adult to express self-care
- Self-harm can be a way to draw attention to the need for help, to ask for assistance in an indirect way
- Self-harm can be used to attain group membership, but this should not imply that the young person is not experiencing severe distress

Self-harm can be influenced by alcohol and drug misuse2.5 Groups who may be more at risk of Self-harm

Anyone can self-harm. This behaviour is not limited by gender, race, education, age, sexual orientation, socio-economics, or religion. However, there are some identified vulnerable 'at risk' young people.

These are:

- Adolescent females
- Young people in a residential setting
- Lesbian, gay and bisexual and transgender young people
- Young Asian women
- Children and young people in isolated rural settings
- Children and young people who have a friend who self-harms
- Groups of young people in some sub-cultures who self-harm
- Children and young people who have experienced physical, emotional or sexual abuse during childhood

2.6 Types of Self-harming behaviours

Self-harm is a response to a sense of overwhelming emotional distress and the most common ways that young people self-harm are:

- Cutting.
- Biting self.
- Burning, scalding, branding.
- Picking at skin, reopening old wounds.
- Breaking bones, punching.
- Hair pulling.
- Head banging.
- Ingesting objects or toxic substances.
- Overdosing with a medicine.
- Inserting objects

It is always helpful to check out what purpose the behaviour serves for the young person before assuming that it is harm as referred to in these guidelines. For example, for some young people with additional needs self- harm or self- injurious behaviour may have a sensory component and so the management of that behaviour would need to take account of this.

There are a variety of other risk-taking behaviours, which may also be associated with self-harm. With these behaviours, the harm is **less direct,** but could potentially be more life threatening and they might include:

- Eating disorders.
- Drug and alcohol misuse.
- Dangerous driving/sports.
- Unsafe sex/multiple sexual partners.

2.7 Indications that a young person may be using Self-harm

How can you tell if someone is self-harming? Often a person who is self-harming will take steps to hide the injuries. Here are a few things to look for:

- Unexplained or clustered scars or marks
- Fresh cuts, bruises, burns, or other signs of bodily damage
- Bandages worn frequently
- Inappropriate dress for the season, such as long shirts or long trousers worn consistently in summer
- Unwillingness to participate in events that require less body coverage (such as swimming), physical education (PE)
- Constant use of wrist bands, multiple bracelets
- Unusual or unexplainable paraphernalia, such as razor blades or other cutting implements
- Physical or emotional absence, preoccupation, distance
- Social withdrawal, sensitivity to rejection, difficulty handling anger, compulsiveness
- Falling behind in class, difficulty concentrating
- Expressions of self-loathing, shame, and/or worthlessness
- Mention of self-harm in creative writing.

'It is important to note that although many self-injurious youth do become emotionally withdrawn, not all do. There are a significant number of highly functional and socially engaged individuals who self-injure'[3].

2.8 Link to Suicide

A common misconception is that self-harm is a suicide attempt. ***'While suicide attempts are undertaken with some intent to end life, non-suicidal self-injury is undertaken with the intention of self-integrating and preserving life'***[3]. Many studies have indicated that young people are clear about the difference in intent between self-harm and suicide: self-harm is about staying alive and suicide is about dying. However, given that there is agreement that both self-harm and suicide are underpinned by distress it can be assumed that there is a link between the two behaviours, and there is some evidence that suicide may become an option when self-harm is no longer an effective coping mechanism for an individual's distress[4]. Given the apparent prevalence of self-harm (one study cites 1 in 12 adolescents will self -harm [8]), it is clear that the majority do not go on to attempt suicide: this supports the rationale for separating self- harm and suicide within this document

'

2.9 Responding to Young People who self-harm

2.9 (i) Advice for staff on initial response to a young person:

- It is crucial that you show compassion and respect
- Unless the injuries are serious or requiring immediate attention, initially focus on the young person and their feelings rather than the self-harm
- Be aware that the young person may be feeling guilty and ashamed
- Be aware of the stigma associated with self-harm and that this may be making the young person more distressed
- Refrain from telling the young person to stop as this can make it worse
- Let the young person know you are available to talk about their self-harm but avoid being too intrusive initially
- Recognise signs of distress and find a way of talking to the young person about how they are feeling
- Listen to their worries and problems and take them seriously
- Try to remain calm and reassuring, however upset you feel about the behaviour
- Help the young person to understand that talking about worries and feelings is the best way to reach a solution
- Accept your limitations and seek advice if you feel stuck or out of your depth
- When the young person is ready, work through the flowchart with them

2.9 (ii) Starting conversations about Self-harm

Encouraging open talk about self-harm

Young people who engage in self-harm can find it hard to talk about the subject and are often afraid of the reaction they may receive. Almost all of them feel guilty and ashamed.

The reaction a young person receives when they disclose their self-harm can have a critical influence on whether they go on to access supportive services. Young people who have self-harmed want responses that are **non judgemental and** ***which are caring and respectful. Professionals working with young people e.g (youth work, social work, health and education) need to recognise that dealing with disclosure requires them to exercise their existing core professional skills, not to have a completely new set of skills[8].***

Since the adult's initial reaction to the young person disclosing self-harm is so crucial these guidelines recommend striving to be a '***compassionate witness'*** where the initial goal is to hear the young person and give them a safe space to share some of their distress, rather than

focussing initially on actions to be completed, ***unless you believe their life to be in immediate danger.***

The term 'compassionate witness' encompasses not only what someone does but also their value base. The compassionate witness realises that listening to an individual with empathy and without judgement can be a way to help the person release their emotions and gain some clarity about the meaning of those emotions. The compassionate witness holds their own discomfort in relation to the other's behaviour by containing their own emotions, and trusts that the other person is doing the best they can with the resources they have at the time. The value base of the compassionate witness is underpinned by respect for the other person and belief that listening to the other person can at times be as important as acting.

If you are concerned about broaching the subject directly with a young person then there are **two** possible courses of action:

Report your concerns to an appropriate member of staff e.g.

Pastoral care / Manager / Team Lead /Supervisor and work within your organisational policies

or

Approach the young person if you consider this is appropriate to your role or relationship with them and ensure that you are in a place that protects the privacy of the young person by choosing an appropriate time and place

1. ***Tentatively*** **ask directly about what you are observing and saying something like:**

   'I notice that you have wounds or scars on your arms and know that this can be a sign of self-harm. Are you deliberately hurting yourself?'

   'I've noticed you've been wearing bandages on your arm for some time now and have wondered if you are hurting yourself?'

   'I've noticed you've been upset recently and covering up your arms despite the warm weather and I'm wondering if...'

2. ***If the answer is yes, try to respond with calm concern, rather than with shock or emotional displays.*** Walsh (2012)[3] suggests '***respectful curiosity'*** – asking simple questions that allow you to gather important information and provide an opening for sharing. The following questions are ***suggestions and not a script*** as a child centred response needs to be tailored to each individual

   'Do you want to talk about this?'

'Where on the body do you tend to hurt yourself?'

'Do you want to talk about what happened that made you hurt yourself?'

'What do you use to hurt yourself?'

'Are you taking care of your wounds/burns/cuts?'

3. ***Establish if the young person needs help to tend to their wounds or if medical attention is required.***

'Is there anything I can do to help you take care of your cut/ burn/bruise?'

'Do we need to get immediate medical attention?'

4. Don't assume what the young person needs and wants or take any action without discussing it and agreeing it with them. Be sure that the young person is comfortable with the way forward, **unless you believe their life is in imminent danger.**

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See the Flowchart Self-harm How to Help' Page 26

2.9 (iii) Ethos of approach: Harm Minimisation

These guidelines advocate a harm-minimisation approach to self-harm whenever practicable. ***'Harm minimisation is just that - minimising the damage you are doing to yourself'***[15].

> **'If we take this at face value understanding that those who self-harm are using it as a survival strategy has significant implications for how we can help. It would not be helpful to tell the person that they should stop self-harming. Doing that is the equivalent of taking a life jacket off a drowning man. No rational person would do this: we would use our common sense and get the man out of the water first. The same is true for those who self-harm'**[14]

This approach stems from acceptance that self-harm is a coping strategy and indeed may be keeping the person alive: removing their coping mechanism will exacerbate their distress and could precipitate a suicide attempt. The initial goal (unless wounds are serious or life threatening) is to listen to the young person and ensure our response is calm and non-judgemental so that we help them contain their distress.

Harm Minimisation is consistent with a Recovery based approach, where the individual decides the process and definition of their own recovery. (See Glossary P.52 for explanation of Recovery approach). Concentrating on the self-harm rather than underlying issues is more likely to be counterproductive, exacerbating the behaviour rather than reducing it.

Eventually the young person may be ready to focus on their self-harm. At that point a ***harm minimisation*** approach would involve encouraging the young person to put measures in place to reduce the harm caused by the behaviour, (such as cleaning wounds, using clean/safer implements, not using alcohol or drugs at the same time), until such time as the underlying distress can be managed by other means. Note that initially at least it may not be about putting something in place of the harm (alternative coping strategies) but about reducing the impact of the behaviour post harm. A harm minimisation approach has proven efficacy in the fields of sexual health and substance misuse. Encouraging ***positive risk management*** (see Glossary p.68) by the individual is consistent with the "*10 Essential Shared Capabilities for Mental Health" (See Glossary P 68)*

Encouraging alternatives to self-harm should be facilitated with extreme care, given the alternative has to relate to the function of the self-harm. For example, if it is important for a young person to see blood, then suggesting they ping their wrist with an elastic band is likely to be irrelevant at best. However, if the purpose of the self-harm is to feel pain then the elastic band ***may*** be a suitable alternative.

2.9 (iv) Harm Minimisation and Young People

- Supports young people to take responsibility for their own behaviour, unless that behaviour is life threatening
- Enables young people to gradually develop more healthy ways of coping
- Increases young people's self-esteem
- Increases young people's assertiveness in a positive way
- Encourages young people to take control of their lives (reducing risk taking behaviours).

The caveat to adopting a harm minimisation approach would be where the young person did not have the capacity to engage in harm minimisation, or where the means of harm was in itself very lethal[9]

2.9(v) SafePlan for Self Harm

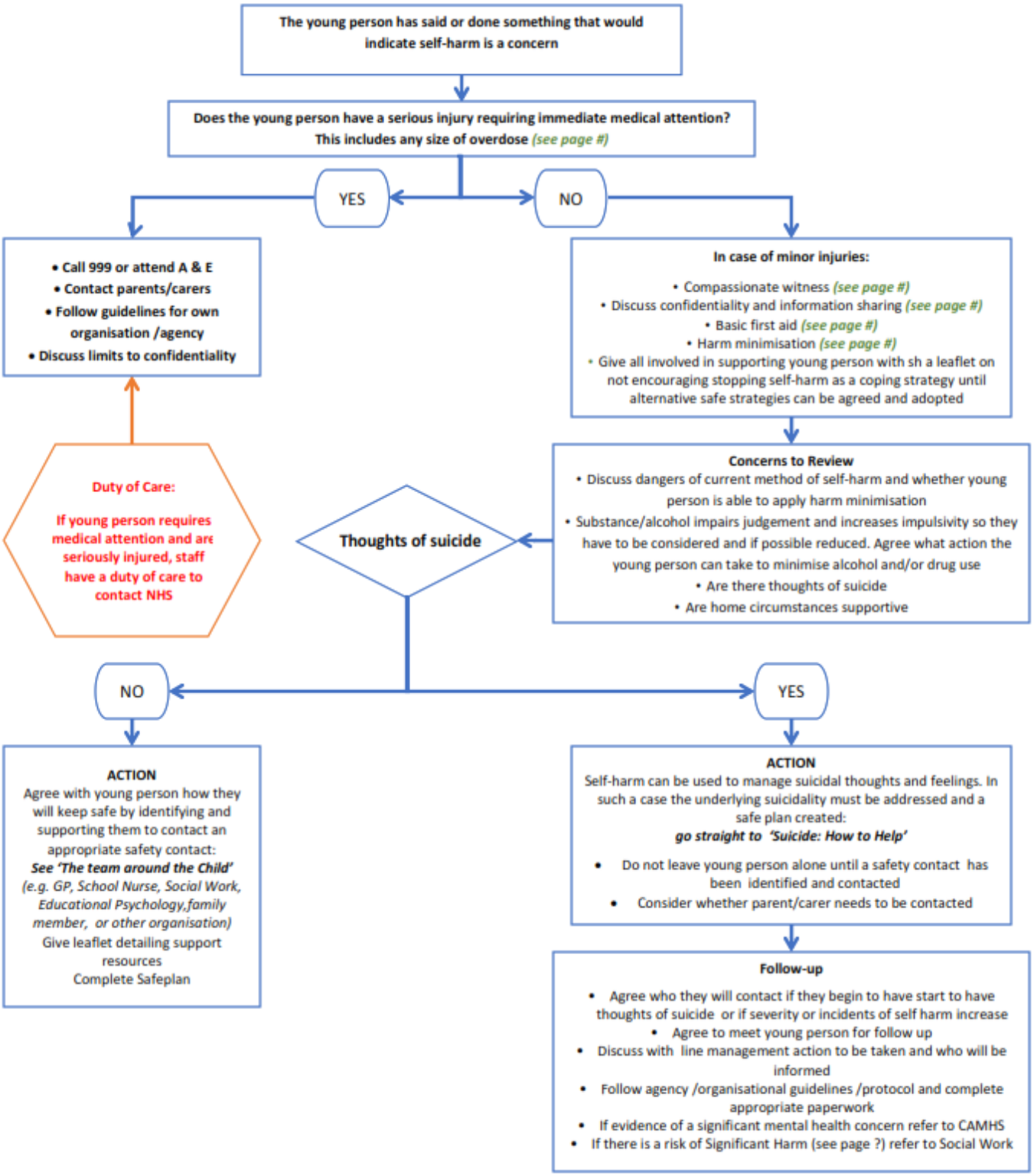
NAME MY SAFEPLAN

Need to ensure this is not just a tick box exercise

(Space for Young Person's Name) **states they are unable to agree to a Safeplan** **Activate 24-hour monitoring**	My 24-hour safety contacts are: Daytime: Night-time:
Agree who are their safety contacts: Daytime: Evening: Night-time: Ensure individuals who are safety contacts are aware and agree to this responsibility	My safety contacts are: Daytime: Evening: Night-time:
Agree how they will keep safe from alcohol and drugs	I will keep safe from alcohol and drugs by
Agree what they will do in event of an incident of self harm	If I self harm I will do the following to take care of my wounds:
Agree what they will do if incidents of self harm increase or if they become more serious	If I begin to self harm more often or hurt myself more I will do the following:

Discuss the situations that cause them distress (e.g. being on their own, going on Facebook etc.) and how they can avoid them	I will try to avoid the following upsetting situations:
Helplines and other resources	Detail resources here

2.9 (vi) Taking Action: 'Self-harm How to Help' Flowchart



2.10 Addressing Contagion

Social contagion refers to the way in which a behaviour such as Self-harm can spread among members of a group.

Contagion or the spread of self-harm is a concern for many working with young people. Some organisations and individuals are wary of discussing self-harm with young people as they fear they may promote contagion. This has prevented them from talking openly about self-harm. This approach has been challenged as it increases the stigma attached to the behaviour and discourages help seeking, often resulting in young people seeking support from unsuitable sources, especially online. Not talking about self-harm may be counterproductive, but the context and way in which it is discussed should be considered carefully.

The following measures are recommended:

- Utilising the 'On Edge' – learning about self-harm resource pack with pupils [12]
- Encouraging staff to attend What's the harm? Developing Self-Harm awareness and Skills Training' [9]
- Provide young people with information on support resources that treat the subject of self-harm responsibly (The National Self-harm Network leaflets or Lifesigns Leaflets)
- As part of the response to young people who are using self-harm, if it's thought to be an issue, consider discussing a responsible '***etiquette***' about showing their wounds to other young people.[3] This would have to ***be balanced with*** responding in a way which acknowledges the possible purpose of showing wounds (e.g. to communicate distress) with helping the individual understand the possible impact this may have on others. Note that the majority of young people who self-harm do so in a hidden manner, but for a small number showing their wounds may have a significant purpose which should not be dismissed.
  'In light of the complexity of the current research in this area, it is recommended that students be asked to cover wounds, due to school health requirements concerning any potential contamination by blood which applies to all cuts and wounds; secondly it should be explained to students that there is some evidence that the viewing of wounds by those who are still struggling with their recovery around self – injury could be triggering'[22]

PART 3 Responding to Suicide

3.1 Definition of Suicide

For this document, suicide is defined as **'the act of deliberately killing oneself**', which has been taken from the report the World Health Organisations 'Preventing Suicide: A Global Imperative' (WHO,2014)[17].

Suicidal behaviour refers to a range of behaviours that include thinking about suicide (ideation), planning for suicide, attempting suicide and suicide itself. The inclusion of ideation in suicidal behaviour is a complex issue about which there is meaningful ongoing academic dialogue.

The rationale to include ideation (i.e thinking about suicide) in suicidal behaviour is so that staff are clear they should respond to thoughts of suicide even when no plan is in place. There is a diversity of research included in these guidelines which have different views on whether ideation should or should not be included in suicidal behaviour.

3.2 Background and National Context

The Choose Life Strategy and Action Plan (2002)[16] identified children and young people as a priority risk group. For preventing suicide in children and young people, these guidelines advocate that staff working with young people are enabled to recognise when early interventions are necessary and provide access to appropriate support and services. It is also recommended that staff be equipped with the knowledge, skills and training to enable them to talk openly about suicide to those groups most at risk and continue to develop and expand school based programmes they do receive such a response.[16]

3.3 Prevalence

The Suicide Statistics Report (2015)[18] stated that the overall rate for suicide among 15 to 19 year olds in 2013 was 9.6 per 100,000, translating to 66 deaths in this age group for Scotland.

The Scottish Public Health Observatory (ScotPHO) do not produce a rate per 100,000 for 0 to 15 age group due to small numbers that may identify the young person. However, it is important not to be complacent and assume that suicide does not occur in the under 15 age group.

The World Health Organisation (2014)[17] state that suicide is the second leading cause of death amongst young people aged between 15 and 29 years old.

The reliability of the statistics on suicide across all age groups is affected by several factors including the multiple definitions of suicide and the stigma associated with suicide impacting on the decision to record a death as a suicide

3.4 Common Misconceptions

There are many common misconceptions surrounding suicide as detailed in the publication 'Art of Conversation'.[19]

"People who talk about suicide never attempt or complete suicide"	People who talk about suicidal thoughts may also attempt suicide. Many people who complete suicide have told someone about their suicidal feelings in the weeks prior to their death. Listening to and supporting people in these circumstances can save lives.
"Talking about suicide or asking someone if they feel suicidal will encourage a suicide attempt"	Serious talk about suicide does not create or increase risk; it can help to reduce it. The best way to identify the possibility of suicide is to ask directly. Openly listening to and discussing someone's thoughts of suicide can be a source of relief for them and can be key to preventing immediate danger of suicide.
"If somebody wants to end their life they will"	Most people contemplating suicide do not want to die; they want to end the pain they are suffering. Although there are some occasions when nobody could have predicted a suicide, in many cases a tragic outcome may be averted if appropriate help and support is offered to a person and they are willing to accept this help.
"Some people are always suicidal"	Some groups, sub-cultures or ages are particularly associated with suicide. While some groups, such as young men, seem to be at an increased risk, suicide can affect all ages, across gender and cultures. Many people think about suicide in passing at some time or another. There isn't a 'type' for suicide, and while there may be warning signs they aren't always noticed. While those who have made an attempt on their own life in the past can be at increased risk of completing suicide, with appropriate help and support, people can and do move on in their lives.
"If a person has made attempts they won't do it for real"	Those who have attempted suicide once are at increased risk of attempting again. They need to be taken seriously and given support and help to find a safe resolution for their suicidal thoughts and actions.
"When a person shows signs of feeling better, the danger is over"	Often the risk of suicide can be greatest as depression lifts, when a person appears calm after a period of turmoil. This can be because once a decision to attempt suicide is made; people may feel they have found a solution; however desperate they may be.

3.5 Factors which may precipitate suicidal behaviour in young people

Suicide attempts in young people nearly always follow a stressful event or life crises, such as:

- Inter-personal loss such as relationship problems
- Bullying/cyber bullying
- Bereavement or traumatic grief
- Family break-up
- Homelessness
- Issues relating to sexual orientation
- Unexpected exam results or unemployment

Sometimes the young person will have shown no previous signs of mental health problems. In order to feel suicidal a young person does not have to be experiencing a mental health issue, their feelings may be a manifestation of distress.

Sometimes, the young person will have had serious problems (e.g. with the police, their family or school) for a long time. It is these young people who are most at risk of further attempts. Some young people will already be seeing a Counsellor, Psychiatrist or Social Worker. However, others may have refused these forms of help, and appear to be trying to escape from their problems.

Expressing feelings of hopelessness are common in those who have attempted suicide.

3.6 Who is at risk?

Anyone is at risk but there are some specific 'vulnerable groups' amongst young people:

- Young people who are misusing drugs or alcohol are at risk of death by suicide. This is not just linked to those with a substance misuse habit but includes casual recreational users too. Young people can be particularly vulnerable in the 'come down phase ' (see Glossary P.52)
- Looked after and accommodated children and young people
- Young men
- Lesbian, gay, transgendered young people or other marginalised groups

There are other groups of people who are at risk of suicide, and young people can fall into these categories:

- Young people with mental health problems (in particular those in contact with mental health services and those with a severe mental illness such as young people with severe depression or severe anxiety disorders)
- Young people who have attempted suicide before
- A young person who has a relative or friend who attempted or completed suicide
- Young people who have been in young offender's institute/prison
- Young people who have been recently bereaved
- Young people in isolated or rural communities
- Young people who have recently lost employment.
- Young people who are homeless.

3.7 Some ways in which people Suicide

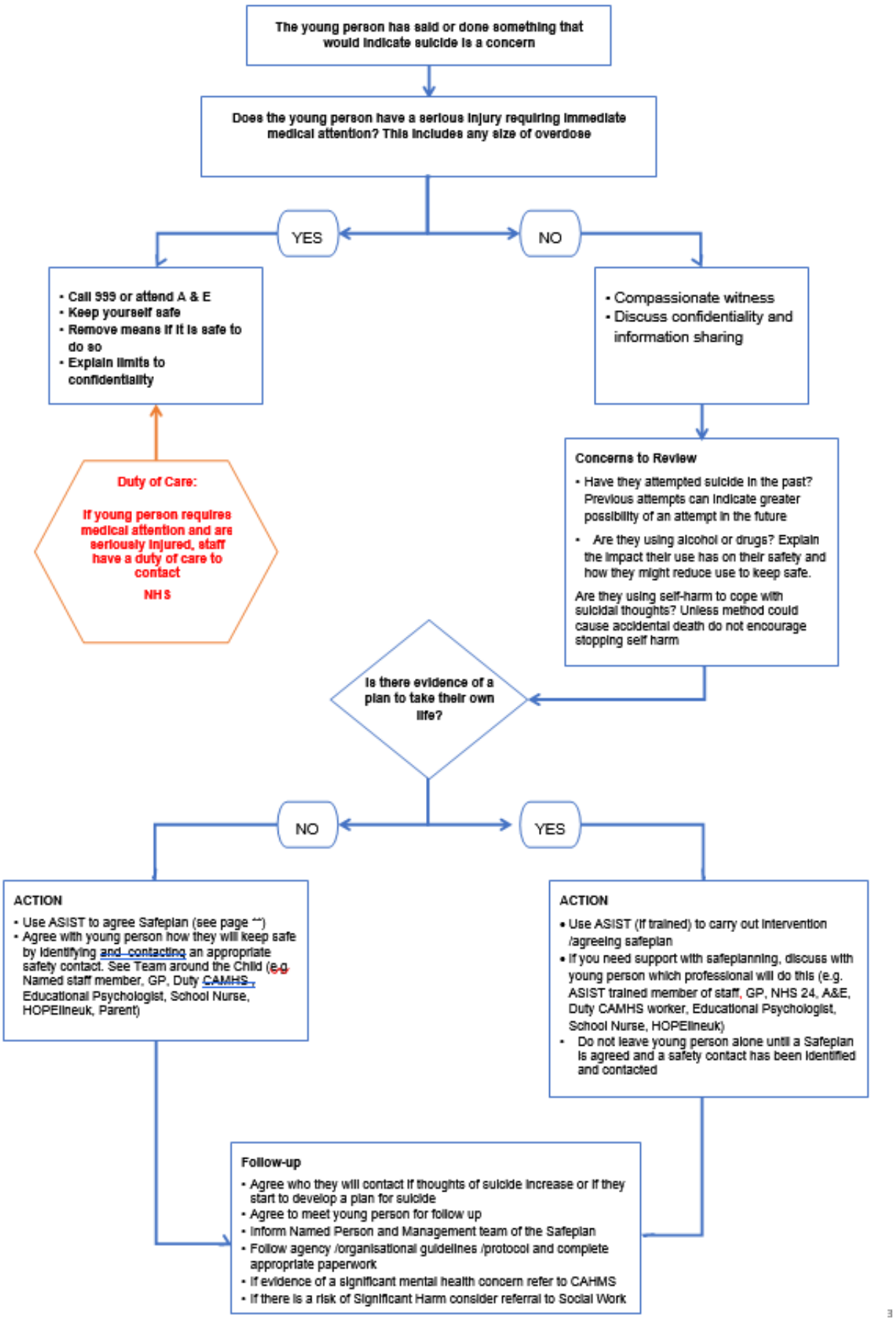
- More young females take overdoses of drugs
- More young males use methods such as hanging, strangulation or poisoning
- Between 80% and 90% of adolescents who are referred to hospital after suicide attempts have taken overdoses
- A large proportion of attempted suicides are by an overdose of commonly available drugs such as aspirin, paracetamol, antidepressants and minor tranquillisers, often in conjunction with alcohol. Such overdoses can result in death, or long term physical damage, even if the suicidal intent may have been small

3.8 Some indications that a young person may be feeling suicidal, thinking about Suicide

- Previous deliberate self-harm or suicide attempt
- Talking about methods of suicide
- Dwelling on insoluble problems
- Giving away possessions
- Hints that “I won’t be around” or “I won’t cause you any more trouble”
- Change in eating or sleeping habits
- Withdrawal from friends, family and usual interests
- Violent or rebellious behaviour or running away
- Drinking to excess or misusing drugs
- Feelings of boredom, restlessness, self-hatred
- Failing to take care of personal appearance
- Becoming over-cheerful after a time of depression
- Unresolved feelings of guilt following the loss of an important person or pet (including music or sports idols)
- Expressing feelings of hopelessness

This list is not exhaustive, and sometimes we just notice something different about a young person that we are unable to pinpoint. Always act on your instincts and open the conversation about whether the young person is ok.

3.9 Working with young people who are suicidal (i) Taking Action 'Suicide How to Help Flowchart



Section 3.9.(ii) Initial response to a young person who is suicidal

Ask the young person if they are thinking about suicide/ending their life/taking their life. Ask them clearly and directly. For example, *'Are you thinking about suicide?'* *'Are you thinking about ending your life?'* *'Are you thinking about killing yourself?'* **If the answer is Yes – go to the suicide flowchart.** Talking about suicide does not make it more likely to happen. Try to be patient if they are angry or refuse to talk. It may be that writing things down is an easier way for them to communicate with you.	***Put*** the young person down or do things that might make them feel worse. Do not ask them in a way which implies criticism e.g. 'You're not thinking of doing anything stupid/silly are you?'
Listen – this is the most important thing you can do. Treat the young person with respect and try not to be judgemental or critical. See the glossary – how to be a good listener	***Abandon*** or reject the young person in any way. Help, support and attention are vital if they are to begin to feel that life is worth living again. Don't assume that the danger is over just because they seem to be better; they may be at risk for quite a while.
Empathise – by showing that you really are trying to understand from their point of view.	***Nag –*** although it may be well meant, nobody wants to be pestered all the time. Don't intrude or be hyper-vigilant – try to balance being watchful with a respect for privacy.
Reassure the young person that desperate feelings are very common and can be overcome. Things can and do change, help can be found and there can be hope for the future. People ***MAY*** get better.	***Ignore*** any signs of distress
Try to give practical support, **always agree a safeplan** that is explicit about what they will do to keep themselves safe.	***Criticise*** their actions - however you may be feeling about their thoughts of suicide; try to remember the pain and turmoil that underpins these thoughts. Don't take their behaviour personally – it is not necessarily directed at you.

3.9(iii) Starting conversations about suicide

Don't tell – ask

The best way to help is to ask questions. That way you leave the young person in control. By asking questions, the young person you are talking with finds his or her own answers.

Here are some questions which can lead conversations into useful areas:

When: 'When did you realise?'

Where: 'Where did that happen?

What: 'What else happened?'

How: 'How did that feel?'

All of these questions effectively ask the young person you're talking with to examine, honestly, the problems they are experiencing. The only question to avoid is 'why?' – it can sound challenging and judgmental and may result in the young person becoming defensive

If you discover someone in the act of trying to take their own life:

- Keep safe - do not endanger your own life
- If the person's life is in danger, phone 999 immediately or take the person directly to A&E
- Perform first aid if it is necessary and if it is safe to do so
- Remove the means if possible
- If the person is drinking alcohol or taking drugs, try to get them to stop

3.9 (iii) Safeplan

The purpose of a safeplan is to help a young person keep themselves safe from suicide. Even when referral to clinical services or other services is being undertaken, ***It is important to create a simple safeplan for interim management unless clinical services are seeing the child immediately.***

In the event of lower levels of concern and even when a plan for suicide is not present, a basic safeplan is still required. Having a safeplan in place that can help guide a young person through difficult moments can make a difference and helps to keep them safe. During the night can be a difficult time for young people, it is at this time, young people need to know what action to take or who to contact.

A safe plan should be developed with another person; this person will help the young person by writing down the actions and contacts that have been discussed with the young person. **The commitment to the safeplan needs to be explicit in order to keep the young person safe from suicide.**

No matter what the level of concern a safeplan is still recommended.

3.9 (iv) Suggested Paperwork for Safeplan for Suicide

NAME MY SAFEPLAN

Need to ensure this is not just a tick box exercise

(Space for Young Person's Name) **states they are unable to agree to a Safe plan** **Activate 24-hour monitoring**	My 24-hour safety contacts are: Daytime: Night-time:
Agree how long they can keep themselves safe	I can keep myself safe until:
Agree who are their safety contacts: Daytime: Evening: Night-time: Ensure individuals who are safety contacts are aware and agree to this responsibility	My safety contacts are: Daytime: Evening: Night-time:
Method planned - Will be disabled by: Doing: Who will help them do it: When will they do it: How will they do it	I agree to disabling my plan by : Doing: Who will help me do it: When will I do it: How will I do it
Agree how they will keep safe from alcohol and drugs	I will keep safe from alcohol and drugs by

Discuss the situations that make them upset (e.g. being on their own, going on Facebook etc.) and how they can avoid them	I will try to avoid the following upsetting situations:
Helplines and other resources	Detail resources here

3.9(v) How to respond to a Crisis

This is an example of what is currently being used in Education, however given this is a Multi Agency Guidance you should always follow your own Agency Protocols

The young person has said or done something that would indicate suicide is a concern (refer to section 3.9 (i) in guidelines and flowchart).

If the young person has a serious injury requiring immediate medical attention and this includes any size of overdose:

- CALL 999 or attend A & E
- Keep yourself safe
- Remove means if it is safe to do so
- Attend to immediate care needs using First Aid if required , and if it is safe to do so
- Explain the limits to confidentiality (including informing your line manager)
- Be compassionate and listen
- Given that there is a threat to life the parent/carer is advised of the current situation, when safe to do so. The young person is informed that this is the action that is being taken.

If there is no serious injury requiring immediate medical attention but there is evidence that the young person may be planning to take their own life:

- Be compassionate and listen
- Use ASIST (if trained) to agree a Safeplan
- If you need support writing a Safeplan, discuss with the young person which professional will do this (e.g. ASIST trained member of staff, GP, NHS 24, A&E, Duty Social Worker, CAMHS, Educational Psychologist, School Nurse and member(s) of the Team around the Child as appropriate)
- If there is a requirement to convene a Team Around the Child do so immediately
- Do not leave the young person alone until a Safeplan is agreed and a safety contact has been identified and contacted
- Inform your line manager
- Given that there is an immediate threat to life the parent/carer is advised of the current situation, when safe to do so. The young person is informed that this is the action that is being taken.

PART 4 – Supporting Information

4.1 (i) Confidentiality and Information Sharing

The basis for information sharing can be found across National guidance, regional procedures and local protocols both in single and multi-agency settings e.g.: Protecting Children and Young people: Framework for Standards (2004); Sharing Information about children at risk of abuse or neglect: A brief guide to good practice (2004); and The Data Protection Act (1998).

Many local Data Sharing Partnerships also have local Sharing Information protocols. Also there is Health guidance for sharing information contained within the General Medical Council guidance (for 0-18 year old's) and the NHS Caldicot Guardian's information on confidentiality and information sharing. Guidance can also be found at:

www.scotland.gov.uk/Topics/People/ Young-People/gettingitright/informationsharing

The Inverclyde Guidance on Information Sharing is available at

https://www.inverclyde.gov.uk/education-and-learning/girfec/practitioners

It is important that you:

- Understand the legislative, policy and practice context parameters when sharing personal and/or sensitive personal information;
- Understand the limitations and constraints of confidentiality and consent; and
- Understand that you are empowered to share personal and/or sensitive personal information, if you are worried and/or concerned about a child or young person's wellbeing and nothing whatsoever prevents you from doing so.

Following a conversation with a child/ young person, you may pass on information given by them when:

- They have given their explicit agreement and you are sure they have understood what will be shared, with whom and why. OR
- The information they have given us means that you must act to keep them or someone else safe. Refer to your own organisation for child protection procedures. OR
- You feel that they are at risk of seriously harming or killing themselves you must act. (Details are given in the example flowcharts and 'Risk of Significant Harm' is defined on P 52).It is imperative that each professional supporting a young person makes clear the reason and nature of their involvement and the support they can or will be providing, including gaining the young person's consent for actions.

It is also vital to make explicit:

- Why you would wish to share information
- With whom information would be shared
- What information would be passed to or available to others e.g. shared case notes
- Any recommendations you will be making and to whom
- Any actions that you will be taking

Within this context, you should be making young people aware that you have to ensure their safety and that of other children, young people or vulnerable adults. Therefore, you should be explicit in letting them know that you may be required to let others know.

Our primary responsibility is to keep the young person or other young people safe

Evidence supports an approach and strategies that recognise that:

- Ensure the young person is safe and risk to them is minimised has priority over a commitment to contact parents.

- The young person may be very accurate in their appraisal of their situation and risks of contacting their parents. There could be the potential for an increase in the risk to them from e.g. abusive parents. In addition, we have to be aware that the young person may wish to be protective of e.g. a parent who has mental or physical health problems.

Legally and professionally, we have to listen to, respect, and where appropriate, accept and work with their decisions rather than those of their parents

- We are not acting “in loco parentis”, even when we are fulfilling our duties as a corporate parent. Rather, we are required to fulfil our professional responsibilities as set out in any Council or Service policies, our professional codes of practice or legislation. This will include discussing events with other lead professionals.

- Self-harm and similar behaviours are coping mechanisms, necessary for surviving personal problems and traumas. While we will be working with young people to find and use less harmful coping strategies, the priority is to address their primary problems and enable them to better cope with them

These young people are very vulnerable, often very isolated and very poorly supported, however this may not be apparent (for example, perfectionism is a major contributor to self-harm risk). They may well have needed courage and a great deal of encouragement to access and work with staff. In going against their wishes, not only may we exacerbate an already troubled or abusive family situation but put them at risk of withdrawing from contact with any service. Therefore, there is a risk of compounding their vulnerability and isolation, and, in so doing, increasing their stress so that the self-harm and suicide behaviours increase and become riskier.

4.1 (ii) Assessing likelihood of harm

It is paramount to ensure that the child or young person is safe at all times and that risk to them is minimised. In the case of a medical emergency take immediate action by calling 999.

If you consider that a child is likely to significantly harm themselves as a result of their self-harming or suicidal behaviours then they should not be left alone, social services should be informed and they will commence a multi-agency risk assessment and put a risk management support plan in place as soon as possible.

How do we define significant harm?

"Harm" means the actual or potential ill effect, or the impairment of the health or development

of the child, In this context, "development" can mean physical, intellectual, emotional, social or behavioural development and "health" can mean physical or mental health.

Whether the harm suffered, or likely to be suffered, by a child or young person is "significant" is determined by comparing the child's health and development with what might be reasonably expected of a similar child.

4.1 (iii) Involvement of Parents/Carers

Parents and Carers may often but not always be important sources of support for young people

Evidence supports an approach and strategies that recognise that: When we ask young people to involve their family/carers, we have to be ready to respond to three reactions: 1. They will agree and may even be keen and relieved that their family/carers will be involved. 2. They will be reluctant. 3. They will refuse to have their family/carers contacted, let alone be involved.

- ***Agreeable In most cases***, we will be able to receive the young person's agreement to informing and involving their family/carers. We can then decide the best strategies to support that young person and their family/carers.

- ***Reluctant.*** In other cases, the young person will be reluctant for this to happen because of anxiety, embarrassment or uncertainty about how the adult(s) will react. Here, staff will have to help both the young person and their family/carers by:

    - Reassuring and supporting the young person through this process.

    - Signposting adults in the family/carers to other sources of support and information. It may be helpful or even essential to identify adult family members such as an older sibling, aunt, grandparent or carers to act as a bridge and longer term mediator.

- ***Refusal*** It is important to recognise that the young person's resistance to their family/carers being contacted can be realistic and appropriate. Our priorities are to ensure their safety and

that they continue to seek help and engage with support staff . For some young people, we may have to respect this refusal while continuing to seek ways to encourage them to inform and involve their family/carers. In some situations, we may need to engage in long-term intensive multi-agency work with the whole family before it is safe and appropriate to explicitly consider the young's person's self-harm and/or suicide behaviours. In a few cases, it will never be possible to inform or involve the parent/carers.

In considering our course of action, it is important to:

a. Be alert to the fact that a major reason for self-harming and suicide behaviours in young people is abuse, physical, emotional or sexual, by family members/carers. If there is knowledge or any anxieties about this possibility, it is imperative that staff take active steps to clarify the situation and ensure the young person's safety before making the family/carers aware of the situation. The involvement of and advice from social work colleagues are likely to be central to this process.

b. Take steps to reassure the young person, if required, about the value of informing and involving their family/carers.

c. Provide support to the young person while working with them to understand how they can discuss their problems and needs with their parents/carers.

d. At the time of the discussions with the young person, they may not be ready to involve their family/carers and let them know about their self-harm or suicide behaviours through, for example, fear of their reaction or embarrassment. They may not feel emotionally and psychologically prepared, at this point, to disclose the behaviour and discuss their feelings with family members/carers.

e.

f. ake steps to support family members/carers to understand the young person's behaviour and then give them appropriate help to support their child.

4.2 Looked After and Accommodated Children and Young people

In terms of the Children and Young People (Scotland) Act 2014 , Corporate parenting duties have been placed on a range of publicly funded organisations in respect of Looked after children and care leavers , increasing the breadth and depth of support available .Part 10 of the Act extends eligibility to after care assistance up to an individual's 26th Birthday while Part 11 introduces " continuing care " for Looked After and Accommodated children .

For more complete discussion see 'Understanding suicide and self-harm amongst children in care and care leavers ' IRISS insights, no 21:

http:// www.iriss.org.uk/resources

A copy of the Practise Guide 'Suicide Prevention for looked after children and young people' can be found at:

http://www.anguschildprotectioncommittee.org.uk/pdfs/Suicidepreventionguide.pdf

This practise guide has some useful discussions that will help to inform responses not only to a young person who is at risk of suicide but also of self -harm.

4.3. Support for Staff

Managing Feelings

Staff members need to monitor and care for their own mental wellbeing on an ongoing basis.

Talking to young people who self -harm or are suicidal is challenging and rewarding but it can also provoke uncomfortable feelings in ourselves such as anxiety, fear, confusion, sadness, frustration, hopelessness and powerlessness. It is important for the staff member involved to be aware of their own mental health and to acknowledge any distress they may feel. Regardless of your particular relationship with that young person you will need to consider how to look after yourself so that you are in the best position to help.

Managing your feelings is important in maintaining your own emotional health and well-being, as well as preventing it affecting your work with the young person. It is essential you access some form of supervision and take the opportunity to reflect on the work and its impact.

Line managers also need to be careful that staff members feel they access appropriate support whenever they need it, but particularly when dealing with these kinds of incidents.

TrainingConsider whether you need to seek additional training to improve your skills, knowledge and confidence in helping young people who self-harm or are suicidal. See Section 5 on Resources and Training.

Be honest about your limits

If supporting the young person becomes too much of a burden it may affect your relationship with them. It is rarely helpful to become a young persons' sole source of support. They will benefit more from developing or identifying a wider support network.

Finally:

- Accept the fact that you can't always be there for them when they are distressed and thinking about self-harm or suicide. This is why a robust Safe Plan needs to be developed to help them manage their safety and utilise other supports.
- Accept that you are not responsible for their behaviour

Managing stress

This straightforward approach to managing stress was developed by Saakvitne and Pearlman[20].

Awareness • Be alert to one's needs, limits and emotions. • Pay attention to all aspects of your experience including thoughts and feelings. • It helps to have quiet time and space for positive self-reflection.	**Balance** • Maintain a balance and diversity of activities at work. • Balance your energies between work and play, between activity and rest, between focus on self and focus on others. • Balance provides stability and helps us be more resilient when faced with high levels of stress.
Connection • Connection to oneself and to others decreases isolation and increases hope. • Connection is supported by open communication. • Connection with others, both personally and professionally is essential. • Connection with others enables us to be empathetic and to provide effective support. • We cannot do this work alone or unsupported • When we look after ourselves, we are better able to care and support others.	**Additional Resources**: National Helplines such as Breathing Space and Samaritans may be useful for times of extreme distress (see section 5.2(iii) Helpline Details) Local Resources: Mind Mosaics: Counselling and Therapy Tel: 01475 892208 The Spark Counselling Port Glasgow for Relationship Counselling. Tel: 08088020050

PART 5 – Resources and Training

5.1Responding to Self-harm

5.1(i) Educational Resources

Positive Mental Attitudes Curriculum pack that addresses young people's emotional and mental well-being	http://mindreel.org.uk/video/positive-mental-attitudes-%E2%80%93-schools-curriculum-pack
On Edge – learning about self-harm Resource pack for teachers and professionals working with young people	http://mindreel.org.uk/video/edge-learning-about-self-harm-millies-story

5.1(ii) Advice Sites

The Basement Project Offers publications and resource packs that can be purchased as well as free downloadable factsheets	www.basementproject.co.uk
The National Self-harm Network Offers downloadable leaflets and posters	www.nshn.co.uk
Mind Offers resources that can be purchased	www.mind.org.uk
LifeSIGNS **Self-Injury Guidance and Network support** Offers an online Support forum and extensive information for those who self injure and those who wish to support them. Offers downloadable Factsheets :	www.lifesigns.org.uk

• For people who self-injure Factsheet • Parents and Guardians Factsheet • Males Factsheet • Teachers and Lecturers Factsheet • Friends Factsheet	
Free downloadable resource: **OUT OF HARM.TOOLKIT.** If you are a young person who is self-harming and would like to have a conversation with an adult you trust, you could give them this. It also provides a useful guide for an adult wishing to discuss self- harm with a young person	www.confab.org.uk/uploads/images/fullToolkit.pdf

5.1(iii) Helplines/Details

Childline ChildLine is a private and confidential service for children and young people up to the age of 19.	0800 11 11 www.childline.org.uk
Samaritans Samaritans is a private and confidential telephone helpline	116 123 jo@samaritans.org www.samaritans.org
Get Connected Get Connected is the UK's free, confidential and multi-issue helpline service for young people under 25 who need help, but don't know where to turn.	0808 808 4994 80849 (text) www.getconnected.org.uk

5.1(iv) Training

Lanarkshire Lifelines Online training and information on self-harm	http://www.selfharmlifelines.org.uk/register.html
What's the harm? Developing Self-harm Awareness and Skills Training	

5.2 Responding to Suicide

5.2 (i) Educational Resources

Papyrus - Prevention of Young Suicide Provide information leaflets including: Thinking of ending it all Not just a cry for help Coping with Exams Listen to me	https://www.papyrus-uk.org/

5.2 (ii) ADVICE SITES

Support for Parents/Carers

HOPELineUK run by PAPYRUS **A confidential helpline to support anyone supporting a young person with suicidal thoughts**	0800 0684141 Confidential Helpline 10am-10pm weekdays, weekends 2pm till 10pm Confidential text advice 07786209697 Confidential e mail advice pat@papyrus-uk.org Also provide useful leaflets
ParentLine Scotland 0808 800 222 **www.parentlinescotland.org.uk**	

5.2(iii) Helpline Details

Childline ChildLine is a private and confidential service for children and young people up to the age of 19.	0800 11 11 www.childline.org.uk
HOPELine UK HOPELineUK is a confidential support and advice service for: • Young people under the age of 35 who may be having thoughts of suicide • Anyone concerned a young person	08000 68 41 41 https://www.papyrus-uk.org/help-advice/about-hopelineuk

may be having thoughts of suicide.	
Samaritans Samaritans is a private and confidential telephone helpline	116 123 jo@samaritans.org www.samaritans.org
Get Connected Get Connected is the UK's free, confidential and multi-issue helpline service for young people under 25 who need help, but don't know where to turn.	0808 808 4994 80849 (text) www.getconnected.org.uk
Breathing Space (16+) Breathing Space is a free, confidential phone and web based service for people in Scotland experiencing low mood, depression or anxiety.	0800 83 85 87 http://breathingspace.scot/

(iv) Training

SafeTALK **(Suicide Alertness for Everyone)** 3-hour (face to face)	safeTALK is training that prepares anyone over the age of 15 to identify persons with thoughts of suicide and connect them to suicide first aid resources. Most people with thoughts of suicide invite help to stay safe. Alert helpers know how to use these opportunities to support that desire for safety. As a SafeTALK-trained suicide alert helper, you will be better able to: • move beyond common tendencies to miss, dismiss or avoid suicide • identify people who have thoughts of suicide • apply the *TALK* steps *(Tell, Ask, Listen* and *KeepSafe)* to connect a person with suicide thoughts to suicide first aid, intervention caregivers. Powerful video clips illustrate both non-alert and alert responses. Discussion and practice help stimulate learning. Learn steps that contribute to saving lives.
ASIST **(Applied Suicide Intervention and Skills Training)** 2 days (face to face)	The ASIST workshop is about **suicide first-aid;** about helping a person at risk stay alive and seek further help. The ASIST workshop is for caregivers who want to feel more comfortable, confident and competent in helping to prevent the immediate risk of suicide. Evaluations have shown that the workshop increases knowledge and confidence to respond to a person at risk of suicide, that intervention skills are retained over time and that they are put to use to save lives.

HOPELineUK 0800 0684141

'How to talk so kids will listen & listen so kids will talk' Adele Faber and Elain Mazlish

ParentLine Scotland 0808 800 222

www.parentlinescotland.org.uk

PART 6 – In the event of a completed suicide : PostventionSamaritans' Step by Step service is there to support organizations working with young people so that they can respond effectively following the suspected or attempted suicide of someone from within their community; taking practical steps to reduce the risk of further deaths in the area.

PART 6 In The Event of a Suicide About Step by Step

Samaritans has offered the Step by Step service across the UK since 2010 and have recently expanded to support schools and Youth-reach Centres in the Republic of Ireland.

The Step by Step team aims to:

- Provide information and support to help the school community come to terms with what has happened and prevent stigma and isolation in the school community;
- Support school communities to reduce the risk of further suicide;
- Reach out to high risk people and communities to reduce the risk of further suicide

Specialist support

The service is run by a team of trained volunteers, called Postvention Advisors, who can offer practical support, guidance and information on addressing the impact of a suspected or attempted suicide on the school community. The team is experienced in working proactively with schools and local authorities to prevent further suicides. The specialist knowledge and skills of the volunteers is based on research and best practice developed through Samaritans' experience, learning from the communities we have supported.

As every situation is different, Postvention Advisors can tailor the support offered depending on the needs of the school or group

Contact the team by e mail:

stepbystep@samaritans.org

or call:

0808 168 2528

The Resource 'After A Suicide' is available from SAMH and gives detailed information and advice for those affected by a completed suicide

PART 7– Additional Information

7.1 Glossary of Terms

- Reference to 'come down' Page 30 or 'crashing' is the deterioration in mood that happens as a psychoactive drug is decreasing or clearing from the blood
- Reference to 'the Recovery Model' on Page 22. ' Recovery is about building a meaningful and satisfying life, whether or not there are recurring or ongoing symptoms or mental health problems'. Mental Health Foundation
- Reference to 'positive risk management' Page 22

  Positive risk management is: 'weighing up the potential benefits and harms of exercising one choice of action over another. Identifying the potential risks involved, and developing plans and actions that reflect the positive potentials and stated priorities of the service user. It involves using available resources and support to achieve the desired outcomes, and to minimise the potential harmful outcomes'. (Steve Morgan, risk consultant, 2004) quoted in **http://arcuk.org.uk/scotland/files/2013/05/2.0_Positive-Risk-Management-June-2011.pdf**
- Reference to the '10 Essential Shared Capabilities for Mental Health' on Page 22

The 10 Essential Shared Capabilities (ESC) were originally developed and published by a partnership involving the Department of Health, the Sainsbury Centre for Mental Health, the National Institute for Mental Health in England and the NHS University in 2004. It is important to note that these organisations worked closely with service users and carers to develop the ESCs to ensure that they reflected their priorities.

The 10 ESCs are listed below:

1. Working in partnership
2. Respecting diversity
3. Practising ethically
4. Challenging inequality
5. Promoting recovery
6. Identifying people's needs and strengths
7. Providing service user-centred care
8. Making a difference
9. Promoting safety and positive risk taking
10. Personal development and learning

The 10 ESCs:

- are about attitudes, behaviours, expectations, and relationships
- describe the values and principles that should be demonstrated in the way mental health services are commissioned, planned and delivered
- are derived from, and reflect, how people who use mental health services and those who support them want to be treated, and the way they expect to be treated
- outline values and principles that should influence the actions and outcomes that people working in mental health services should be seeking to achieve

Five steps to active listening from 'The Art Of Conversation' Published by NHS Health Scotland www. Healthscotland.scot

Open Questions	Rather than asking questions which only require a yes or no answer, try to ask open questions. For example, instead of saying 'Has this been going on for a long time?' ask 'How long has this been going on?' That way, instead of closing the conversation down into a yes or no response, you open it out and encourage the other person to keep talking.
Summarising	It helps to show that you've listened to, and understood, what's been said. You can do this by summarising. For example, 'So you've fallen out with your partner and you are finding it very difficult?
Reflecting	Repeating back a word or phrase can encourage people to go on. If someone says, 'So it's been difficult recently', you can keep the conversation going simply by reflecting on this and saying, 'It sounds like it's been really difficult for you.'
Clarifying	We all skirt around or gloss over the most difficult things. If we can avoid saying them, we will. If the person you're speaking with glosses over an important point, try saying 'Tell me more about....' or '....sounds a difficult area for you'. This can help them clarify the point, not only for you, but for themselves.
Reacting	You don't have to be completely neutral. If whoever you're talking with has been having an absolutely dreadful time, some sympathy and understanding is vital. 'That must have been difficult' or 'You've had an awful time' can be helpful things to say'.

7.3 Sources of Information

(i) Information uoted in the document

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7.3 Acknowledgements

Equality Impact Assessment

This document should be completed at the start of policy development or at the early stages of a review. This will ensure equality considerations are taken into account before a decision is made and policies can be altered if required.

SECTION 1 - Policy Profile

1	**Name/description of the policy, plan, strategy or programme**	Multi-agency Guidelines for Responding to Self-harm and Suicide in Children and Young People (Inverclyde Alliance)
2	**Responsible organisations/Lead Service**	Children's Services Plan Group
3	**Lead Officer**	Brian H Young, Health Improvement Lead, Inverclyde HSCP
4	**Partners/other services involved in the development of this policy**	Multi-agency writing group formed to oversee the developments. Membership was drawn from Inverclyde Council's Education Psychology, Specialist Children's Services, Social Work, Health Visiting and Health Improvement. Additional scrutiny was undertaken by the Inverclyde Child Protection Committee.
5	**Is this policy:**	New ✓ Reviewed/Revised ☐
6	**What is the purpose of the policy (include any new legislation which prompted the policy or changes to the policy)?**	The guidelines have been developed following a directive from the Erskine Bridge Fatal Accident Inquiry (2012) – *'Local authorities should commission a set of guidelines for staff working with looked after and accommodated children about recognising and mitigating suicide risk in this client group. These guidelines should include the requirement to develop a detailed management protocol'.* Over the years, several policy drivers have considered the aspects of improving the mental health of children and young people. The latest Scottish Government's 10-year mental health strategy places children and young people at the heart of the early intervention and prevention agenda. Moreover, other policy drivers, such as the 5-year Strategy for Mental Health Services in Greater Glasgow and Clyde 2018-2023 is informed by a range of documents including the Scottish Government's Mental Health Strategy and the Healthy Minds 2017

	report by NHS GG&C's Director of Public Health.
7 What are the intended outcomes of the policy?	The multi-agency guidance has been created to support staff and specifically frontline responders, across all partner services, to provide a caring and appropriate response to children and young people experiencing emotional distress and who may be at risk of self-harm or have thoughts of suicide. The document encompasses guidance for staff for both self-harm and suicide in a single document. Creating a document that includes but separates the two behaviours is the most effective way to ensure staff are capable of responding appropriately to young people experiencing suicidal ideation as well as the small proportion of young people who move from self-harm to suicide and the larger numbers whose self-harm does not lead to suicide. In addition, this format will help to dispel the myths around the two behaviours and clarify the distinct features of each. The document is not intended to replace current organisational policies or protocols and instead is to be used to complement existing resources. This plan will support delivery of Equality Outcome 2 – Inverclyde's children, citizens and communities are able to access our services and buildings with ease and confidence.
8 Geographical area (Inverclyde wide or a specific location)	Inverclyde wide
9 Is the policy likely to have an impact on any of the elements of the Council equality duty (if yes, please tick as appropriate)?	• Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010 • Advance equality of opportunity between people from different groups • Foster good relations between people from different groups

10	**Will those who may be directly or indirectly affected by this policy be involved in its development?**	There have been extensive and robust consultation processes carried out, including discussions with several key professional stakeholders in social work, education services, 3rd sector agencies and parents and young people themselves. As is evident in the guidelines, their voices have been pivotal in the document's construction, along with valuable input from Inverclyde Council's legal services. Future governance arrangements will be the responsibility of the Joint Children's Services Plan Group.

SECTION 2 – Impact on Protected Characteristics

Which of the protected characteristics will the policy have an impact upon? (see guidance for examples of key considerations under each characteristic)						
	Impact					
Protected Characteristic	Positive		Neutral	Negative		Reason/Comments
	High	Low		High	Low	
Age	Y					N/A for young people up to the age of 18 (not Equality Act 2010)
Disability		Y				Young people with disabilities form a very small part of the developments but the intention is to cover this in other areas.
Gender reassignment		Y				No known correlation.
Marriage and civil partnership		Y				N/A
Pregnancy and maternity			Y			
Race			Y			
Religion or belief	Y					
Sex (male or female)	Y					
Sexual orientation	Y					
Other groups to consider (please give details)						

SECTION 3 – Evidence

What evidence do you have to help identify any potential impacts of the policy? (Evidence could include: consultations, surveys, focus groups, interviews, projects, user feedback, complaints, officer knowledge and experience, equalities monitoring data, publications, research, reports, local, national groups.)	
Evidence	**Details**
Consultation/Engagement (including any carried out while developing the policy)	As mentioned above, extensive and robust consultation took place on the devising of the Guidelines, including discussions with several key professional stakeholders in social work, education services, third sector agencies and young people. Input was also sought from Inverclyde Council's Legal and Property Services.
Research	The guidelines contain a widespread approach to evidence-based research and resources.
Officer's knowledge and experience (including feedback from frontline staff).	As per above (see Section 1.4)
Equalities monitoring data.	Forms part of the Council's Equality Mainstreaming Reporting
User feedback (including complaints)	Extensive consultation has been undertaken by young people's groups with positive feedback.
Stakeholders Other	Key stakeholders throughout Inverclyde participated in focus groups, as part of the development of the guidelines. The feedback has been used to fully inform the final document.

What information gaps are there?	Local data is not available on the number of suicides for young people aged 15 – 24, which is mainly due to low numbers and this type of data being made available publicly would run the risk of identifying individuals who had taken their own lives. As a proxy measure, reference could be made to national data, which would be sourced from the national Scottish Suicide Information Database (ScotSID) reporting and the next update due in December 2019.

SECTION 4 – CONSEQUENCES OF ANALYSIS

What steps will you take in response to the findings of your analysis? Please select at least one of the following and give a brief explanation.		
1. Continue development with no changes		
2. Continue development with minor alterations	Y	The guidelines will be subject to ongoing monitoring and amendments carried out, subject to pertinent updated information becoming available, such as statutory measures and appropriate resources being developed.
3. Continue development with major changes		
4. Discontinue development and consider alternatives (where relevant)		

How will the actual effect of the policy be monitored following implementation?

As above

When is the policy due to be implemented?

Following approval by the Inverclyde Alliance on 17th June.

Additionally, arrangements have been made to deliver training/upskilling workshops on a multi-agency basis. An easy reference leaflet will also be created

that captures the main points of the Guidelines (to be used by first responders).
When will the policy be reviewed?
On an annual basis
What resources are available for the implementation of this policy? Have these resources changed?
In kind support

Name of Individual(s) who completed the Assessment Name(s): Brian Young Position: Health Improvement Lead, Inverclyde HSCP Date: 12th May 2019
Authorised by Name: Position: Date:

Please send a copy of all completed forms to Karen Barclay, Corporate Policy Officer at karen.barclay@inverclyde.gov.uk

Inverclyde Alliance

AGENDA ITEM NO: 14

Report To:	**Inverclyde Alliance Board**	**Date: 17 June 2019**
Report By:	**Hugh Scott, Service Manager, Inverclyde Council & Derek Lang, Superintendent, Police Scotland**	**Report No:**
Contact Officers:	**Simon Wright, Area Commander, Police Scotland & William Rice, Community Safety & Resilience, Inverclyde Council**	**Contact No: 714245**
Subject:	**Community Safety & Violence Reduction Initiative – Update**	

1.0 PURPOSE

1.1 The purpose of this report is to update the Partnership on the development of an area based Community Safety & Violence Reduction Initiative in Inverclyde.

2.0 SUMMARY

2.1 At its meeting of 18th March 2019 the Inverclyde Alliance agreed to develop a Community Safety & Violence Reduction Initiative which will make a significant contribution towards delivery of the National Performance Framework, the Inverclyde Outcomes Improvement Plan 2017-22 and the Local Police Plan for Inverclyde.

2.2 A working group was established to progress development of the Community Safety & Violence Reduction Initiative and a clear working model has been developed. Subject to Inverclyde Alliance approval it is proposed that the initiative be branded as 'Improving Inverclyde - A Community Safety Initiative' and that the initiative is delivered and evaluated within the undernoted timescales.

3.0 RECOMMENDATIONS

It is recommended that the Alliance Board:

a. agrees to brand the initiative as 'Improving Inverclyde - A Community Safety Initiative';
b. notes the inclusion of the national Violence Reduction Unit as a Partner;
c. delivers the initiative, through the Community Safety Partnership, over a 9 month period from 1st June 2019 to 31st January 2019, including engagement, delivery and evaluation.

Derek Lang, Superintendent,
Police Scotland
Chair of Inverclyde Community Safety Strategy Group

Hugh Scott, Service Manager,
Inverclyde Council
Chair of Inverclyde Community Safety Co-ordinating Group

4.0 BACKGROUND

4.1 Following community consultation and the completion of a strategic assessment, the Community Safety Partnership has set out 3 overarching strategic priorities for 2018/19 and these are Reducing Violence, Crime and Disorder; Reducing Unintentional Harm and Injury; and Promoting Community Resilience. Currently, the majority of responses to violence, anti-social behaviour and disorder are reactive and Police led, with preventative work taking place in school settings through the delivery of initiatives such as Mentors in Violence Prevention (MVP) and No Knives Better Lives (NKBL).

4.2 Whilst such responses and initiatives undoubtedly make a contribution to reducing violence, crime and disorder, the recent delivery and success of a multi-agency approach in Renfrewshire warranted consideration for a learning and improvement opportunity for subsequent development and delivery within Inverclyde. Project evaluation information from Police Scotland and information from Renfrewshire Council has been used to inform the development of the proposed area based Community Safety & Violence Prevention Initiative in Inverclyde through the Community Safety Partnership.

4.3 Following approval from the Inverclyde Alliance at its Board meeting on Monday 18th March 2019 to progress the development of a Community Safety & Violence Reduction Initiative, the lead partners discussed the intended outcomes and legacy benefit and set out an action plan for delivery.

4.4 The Violence Reduction Unit has agreed to join the multi-agency delivery group and will provide expertise, guidance and evaluation of the initiative. A community engagement strategy will be developed, as will a communication strategy. The governance arrangements for the group have been agreed within existing structures of the Community Safety Partnership, reporting ultimately to the Inverclyde Alliance Board.

The identification of an area will be based on the triple criteria of crime statistics, SIMD outcomes and existing community engagement and capacity. This task will be undertaken by the Community Safety Partnership relative to LOIP Locality Areas, factoring in LOIP priorities and Local Policing priorities.

5.0 PROPOSALS

5.1 It is proposed that the initiative be delivered under the brand 'Improving Inverclyde' and that a communications strategy be developed to promote and support delivery.

5.2 It is proposed that the initiative be delivered in four key stages to ensure appropriate lead in timescales for the key stages;

Stage 1, Community Engagement – June 2019
Stage 2, Listen and Prepare – July 2019
Stage 3, Operational Delivery – August-December 2019
Stage 4, Review and Evaluate – January 2020

6.0 IMPLICATIONS

6.1 Legal:
There are no legal implications and the initiative will be delivered within existing legislative frameworks.

6.2 Finance:
There is no direct spend associated with delivery of the initiative, outwith the existing budgets of partner organisations. In the long term it is expected that successful delivery will lead to budget savings on a preventative spend basis.

6.3 Human Resources:
There are no Human Resource implications.

6.4 Equality and Diversity:
An Equalities Impact Assessment has been completed and previously approved by the Inverclyde Alliance Board.

6.5 Repopulation:
Delivery of a violence reduction initiative, which engages and involves the community, makes our communities safer and addresses fear of crime within communities. The legacy benefit from the initiative will make our communities stronger and more resilient and this contributes to a stable population and makes Inverclyde an attractive place for people to relocate to.

6.6 Inequalities:
An Equalities Impact Assessment has been completed and previously approved by the Inverclyde Alliance Board.

7.0 CONSULTATIONS

7.1 Community consultation forms the backbone of the initiative and an appropriate period for pre and post-initiative community consultation has been included. Delivery partners have been consulted through their membership of the Inverclyde Community Safety Partnership.

8.0 LIST OF BACKGROUND PAPERS

8.1 Inverclyde Alliance Board 18 March 2019: Community Safety & Violence Prevention Initiative.

Inverclyde Alliance

AGENDA ITEM NO: 15

Report To:	**Inverclyde Alliance Board**	**Date:**	**17 June 2019**
Report By:	**Margaret McConnachie, Alcohol & Drug Partnership Lead Officer**	**Report No:**	
Contact Officer:	**Louise Long Chief Officer Inverclyde HSCP**	**Contact No:**	**01475715360**
Subject:	**Estimated Prevalence of Problem Drug Use in Scotland 2015/16 -** Information Services Division (ISD) - An Official Statistics Publication for Scotland. Published March 2019.		

1.0 PURPOSE

1.1 The purpose of this report is to provide the Alliance Board with summary information about recent reporting of the Scottish Government's Estimated Prevalence of Problem Drug Use in Scotland study published in March 2019.

2.0 SUMMARY

2.1 In March 2019 the Scottish Government (Information Services Division (ISD)) published national estimates for Problem Drug Use in Scotland. The data was collated in 2015/16. The Scottish Government has commissioned an estimation of problem drug use in Scotland since 2000. Studies have been carried out every three years. The methodology used has changed over time and for this reason trend comparisons require to be considered with caution.

The full document can be located at : https://www.isdscotland.org/Health-Topics/Drugs-and-Alcohol-Misuse/Publications/2019-03-05/2019-03-05-Drug-Prevalence-2015-16-Report.pdf

2.2 **Appendix 1** of this report provides a summary of key findings for Scotland and Inverclyde.

2.3 The estimates produced in the study relate to the population aged 15-64, data was collected for one year April 2015 to March 2016. The focus was on the problematic use of opioids (including illicit and prescribed methadone use) and/or the illicit use of benzodiazepines.

2.4 Data was collated from: specialist treatment services, drug related hospital admissions and criminal justice social work records.

2.5 The study estimated that In Scotland there were **57,000** individuals who fall within the problematic drug misuse definition which represents **1.62%** of the population aged 15-64. For Inverclyde there were an estimated **1.500 individuals** representing **2.91%** of the population aged 15-64. **70%** of the estimated problematic drug misuse population **were male**, with **two thirds** of this population being aged between **35-64 years**.

Across other local authorities in Scotland Inverclyde had the highest rate of estimated problematic drug misuse. This was also the case for young people ages 16-24.

2.6 Trend data reflects a considerable fall in estimated number of people with problematic drug misuse in Scotland and Inverclyde between 2013 and 2016. With the trend in prevalence **rates** for Inverclyde being consistently around double that for Scotland over the three studies which have carried out Between 2009 and 20016.

The study considers problematic opiate use only. Evidence suggests changes in the use of drugs in Scotland with a growing trend in the use of cocaine and crack cocaine. The likelihood is that across the board the impact of this change in trends means we are in a worse position in terms of the problematic use of drugs.

3.0 RECOMMENDATIONS

3.1 It is recommended that the Alliance Board:

a. Notes the content of the briefing note at Appendix 1 which outlines key findings from the National Problematic Drug Misuse Prevalence report.
b. Notes the data which is specific to the Inverclyde Local Authority area.
c. Approves the Alcohol and Drug Partnership to lead on a multi-agency response and develop plans for consideration at the October Alliance Board.

Margaret McConnachie
Inverclyde Alcohol and Drug Partnership Lead Officer

4.0 BACKGROUND

4.1 The misuse of drugs is a significant issue in Scotland and it leads to a variety of social and health problems which impact on individuals, families and communities. People with problematic drug use are often amongst the most marginalised in society and can have multiple complex needs due to the circumstances in which they live.

4.2 The Scottish Government's Drug Misuse Prevalence Study is part of a wider needs assessment which aims to identify needs associated with drug misuse. The Scottish Government has commissioned drug misuse prevalence studies every three years since 2000. Changes in methodology used over the various studies make it difficult to make comparisons between studies.

Much of the problem drug-using population is hidden. There are many reasons for this including the illegality of the use of certain drugs and the stigma associated with drug misuse. This hidden nature of substance misuse makes it difficult to assess its extent in the population.

The prevalence study provides estimates of the national and local prevalence of problem drug use for those aged 15 to 64 living in Scotland between April 2015 and March 2016.

Drug prevalence figures can only ever be estimates, combining available data on observed cases with an estimate of the unknown population.

For this purpose of the estimates being discussed in this paper problem drug use is defined as:

- the problematic use of opioids (including illicit and prescribed methadone use) and/or the illicit use of benzodiazepines, and implies routine and prolonged use as opposed to recreational and occasional drug use.

It is important to note that other drugs can be involved with problematic drug misuse, in particular cannabis and cocaine.

The Drug Misuse Prevalence Estimates have been prepared by NHS National Services Scotland – Information Services Division (ISD). Data included:

- **Specialist Treatment Services:** Each Alcohol and Drug Partnership (ADP) in Scotland was asked to provide data on individuals who had registered for treatment and/or were in receipt of specialist drug treatment during the period 1st April 2015 to 31st March 2016.
- **Drug-Related Hospital Admissions:** Information was extracted from centrally held data within NHS National Services Scotland. The data relates to inpatient and day case admissions to general acute and mental health specialties.
- **Criminal Justice Social Work Reports:** prepared by Social Workers, at the request of a Court, to assist in sentencing. They include information on an offender's personal background and circumstances, their physical and mental health, alcohol or drug use, and all relevant offence-related information.

Combining available data on observed cases with an estimate of the unknown population.

Key Findings

- The estimated problem drug use prevalence rate for Scotland was **1.62%** of the population aged 15-64. The estimated number of Individuals was **57,000**.
- The estimated problem drug use prevalence rate for Inverclyde was **2.91%** of the population aged 15-64. The estimated number of Individuals was **1,500.**
- Inverclyde was reported as the Council area with the highest problem drug use prevalence rate in Scotland.
- In Scotland **70 %** of the estimated number of people with problem drug use were **male**; for Inverclyde the gender distribution was similar.

- Inverclyde has the highest rate of prevalence for younger people aged between 15 and 24 in Scotland (for both males and females).The Inverclyde rate at **3.09%** of male population aged 15-24 is twice that for the Scotland- wide rate for this age group and gender.
- The Inverclyde rate at **0.65%** of female population aged 15-24 is twice that for the Scotland- wide rate for this age group and gender (0.33).
- Trend data reflects a considerable fall in estimated **numbers** of people with problematic drug misuse in Scotland and Inverclyde between 2013 and 2016 which follows a sharp rise in estimated numbers between 2010 and 2013. The trend in prevalence **rates** for Inverclyde have been consistently around double that for Scotland over the three studies carried out.
-

It is important to note that the study considers problematic opiate use only. Evidence suggests changes in the pattern of drug use in Scotland with a growing trend in the use of cocaine and crack cocaine - which is not measured by this prevalence study.

5.0 PROPOSALS

5.1 The Alcohol and Drug Partnership has requested the Executive Group to examine in more detail the prevalence study with a view to commissioning an analysis of alcohol and drug education and prevention across Inverclyde. The ADP will bring back a report to a future Alliance Board as it is likely a whole system response will be required.

6.0 IMPLICATIONS

6.1

Legal:	None
Finance:	None
Human Resources:	None
Equality and Diversity:	None
Repopulation:	None
Inequalities:	None

7.0 CONSULTATIONS

7.1 No consultation carried out

8.0 LIST OF BACKGROUND PAPERS

8.1 **Estimated Prevalence of Problem Drug Use in Scotland 2015/16 -** Information Services Division (ISD) - An Official Statistics Publication for Scotland. Published March 2019.https://www.isdscotland.org/Health-Topics/Drugs-and-Alcohol-Misuse/Publications/2019-03-05/2019-03-05-Drug-Prevalence-2015-16-Report.pdf

Prevalence of Problem Drug Use in Scotland 2015/16 - Estimates: Briefing Note

Information Services Division (ISD) - An Official Statistics publication for Scotland. Published March 2019.

Link to Publication: https://www.isdscotland.org/Health-Topics/Drugs-and-Alcohol-Misuse/Publications/2019-03-05/2019-03-05-Drug-Prevalence-2015-16-Report.pdf

1. 0 Introduction

This report provides estimates of the national and local prevalence of problem drug use for those aged 15 to 64 living in Scotland between April 2015 and March 2016.

Definition of Problem Drug Use

Problem drug use within the report is defined as the problematic use of opioids (including illicit and prescribed methadone use) and/or the illicit use of benzodiazepines, and implies routine and prolonged use as opposed to recreational and occasional drug use.

How reliable are these estimates?

Drug prevalence figures can only ever be estimates, as drug use is often hidden. These estimates look beyond counts of individuals seeking treatment for drug problems. They combine available data on people who are known to use drugs in Scotland (specifically opioids and benzodiazepines), with an estimate of the unknown population.

Prevalence Rates

The estimates are presented as a prevalence rate, i.e. a proportion of the population, together with an associated range within which it can be reasonably inferred (with 95% confidence) that the true prevalence rate should lie. They attempt to show, with a high degree of confidence, the range of values within which the actual underlying number of problem drug users is likely to fall within the given year.

2.0 Background

Estimates of problem drug use have been undertaken in Scotland every three years since 2000. Scottish Government Information Services Division (ISD) undertook the two previous national drug prevalence studies for 2009/10 and 2012/13. Prior to that, drug prevalence estimates for Scotland were produced by researchers from the University of Glasgow in a three-yearly cycle between 2000 and 2006.

Caveat:

there have been some notable changes to the methodological approach for the 2015/16 study, which mean that direct comparisons with the results from previous studies are difficult to fully interpret.

Estimates:

As much of the problem drug using population is hidden, drug prevalence figures can only ever be estimates, combining available data on observed cases with an estimate of the unknown population.

Data Source:

Three data sources that could potentially record problem drug use consistently across all Council areas of Scotland have been interrogated for the 2015/16 study, these are:

- Clients registering with specialist drug treatment services
- Drug-related hospital admissions
- Criminal Justice Social Work (CJSW) reports.

Data is reported at the following geographic and administrative levels:

- Scotland
- Health and Social Care Planning Regions (3)
- NHS Boards (14)
- Council Areas (32)

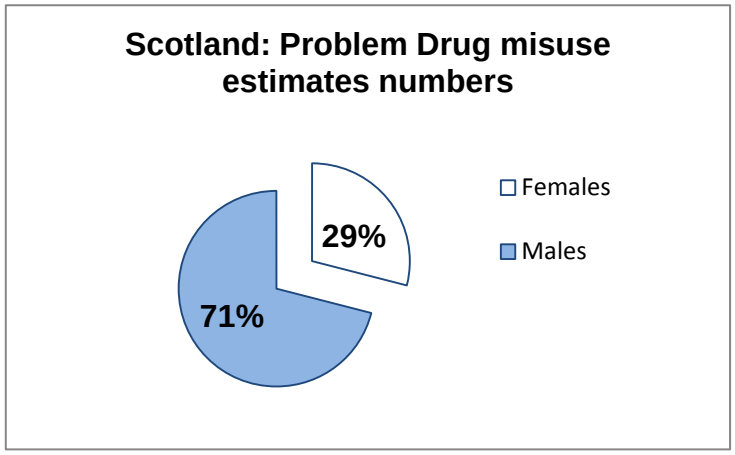
This report provides a focus on National data and data reported at local Council area level, in particular for Inverclyde.

3.0 Estimates: National Data

The number of individuals with problem drug use in Scotland was estimated to be in the range 55,800 to 58,900 during 2015/16. (95% confidence Interval). This represents an estimated prevalence rate and number:

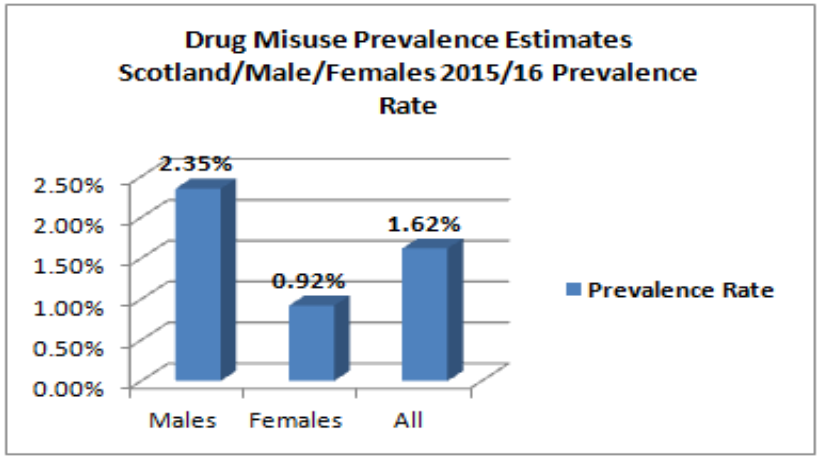
Scotland: Estimated Prevalence Rate 1.62%. Scotland: Estimated Number of Individuals 57,000

3.1 Gender



Numbers:

- The majority of individuals with problem drug use were male 71% of the 57.000 individuals.



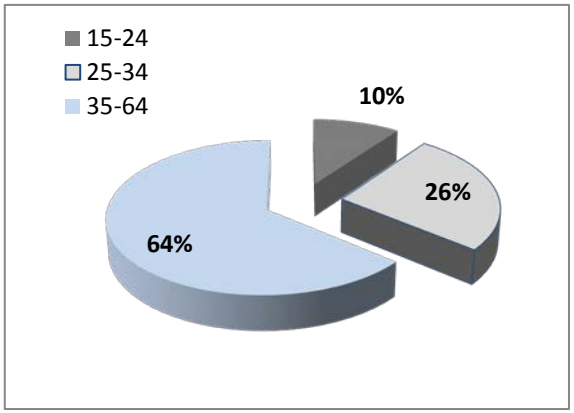
The prevalence **rate** amongst:

- males was 2.35%,
- this compares to 0.92% for females.
- 1.62% for population 15-64.

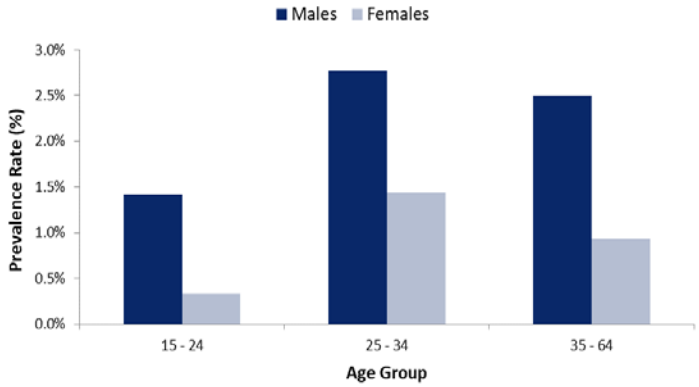
3.2 Age and Gender Profile

Of the estimated number of problem drug use cases in Scotland (57.000)

- Two thirds of estimated prevalence are between the ages of 35 and 64
- One quarter were between ages of 24-34
- One in 10 were aged between 15 and 24



Scotland : Prevalence rates by age and gender



Prevalence rates by age and gender:

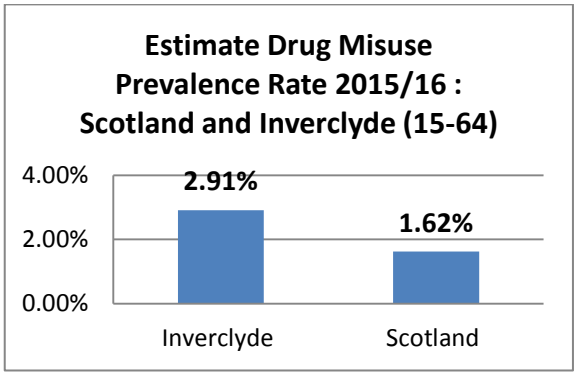
- Prevelence rates for males are higher than for women across all age groups considered:

The rate for males in the youngst category (15-24) is four times that of the rate for females.

4.0 Inverclyde Data

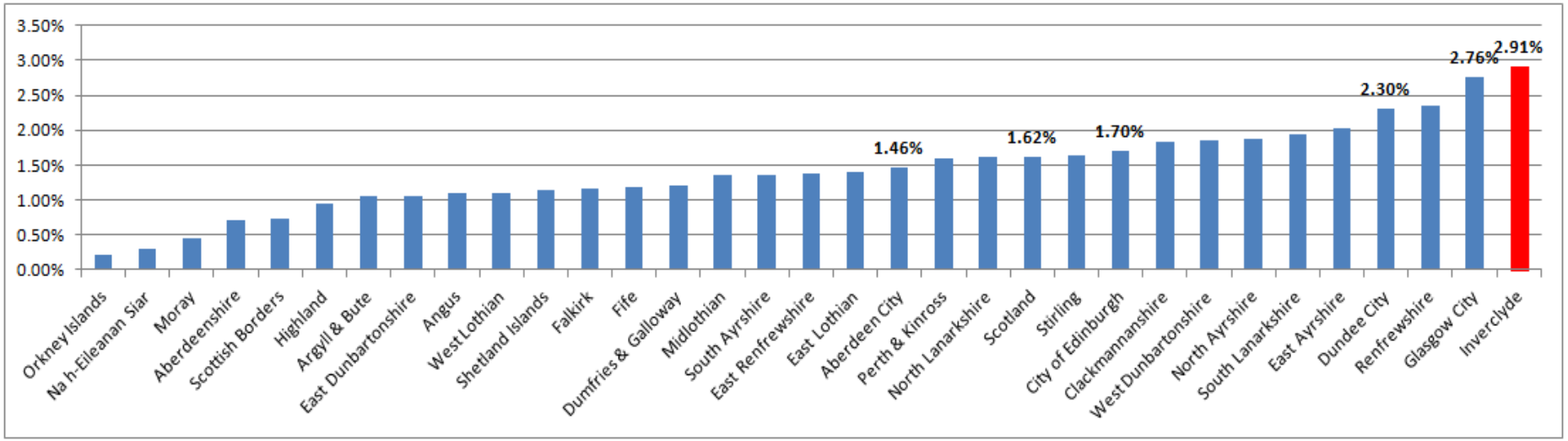
Inverclyde has the highest estimated drug misuse prevalence rate in Scotland at 2.91% and estimated 1,500 individuals.

Inverclyde Estimated Prevalence Rate 2.91%	**Scotland Estimated Prevalence Rate 1.62%.**
Inverclyde Estimated Number of Individuals 1,500	**Scotland Estimated Number of Individuals 57,000**



4.1 Council Estimates

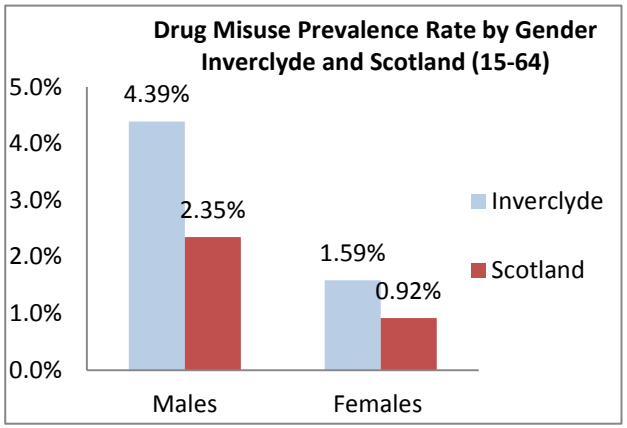
The table below ranks prevalence rates across all 32 local authorities in Scotland and includes the national rate.

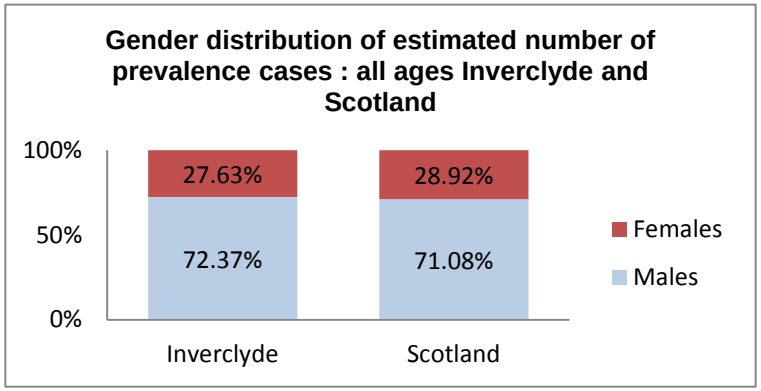


4.2 Inverclyde Age and Gender profile

Estimated Rate: In Inverclyde the estimated drug misuse prevalence **rate** for males is considerably higher than that for women. The patterns in similar to that for Scotland as a whole

Estimated Number: The distribution of estimated **number** of cases of drug misuse across males and females in Inverclyde is similar to that of Scotland: with almost one third of the estimated numbers being female.



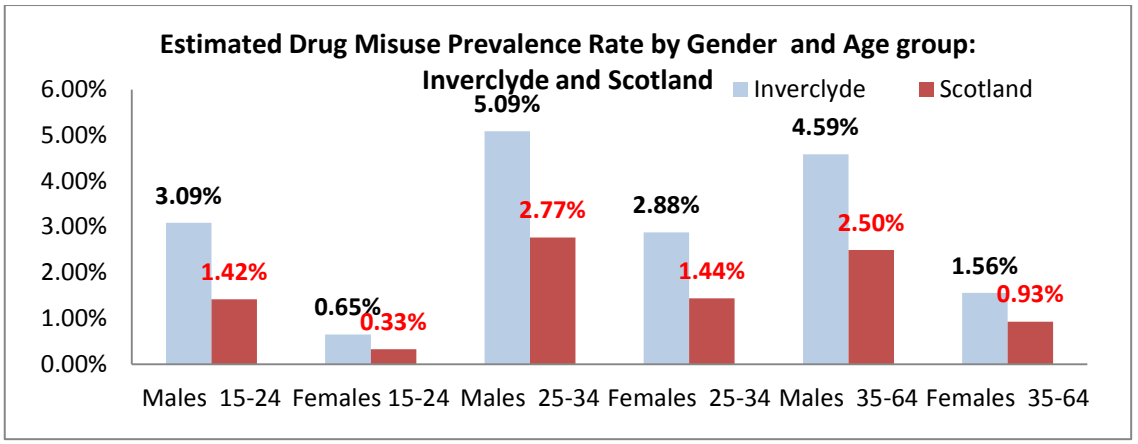


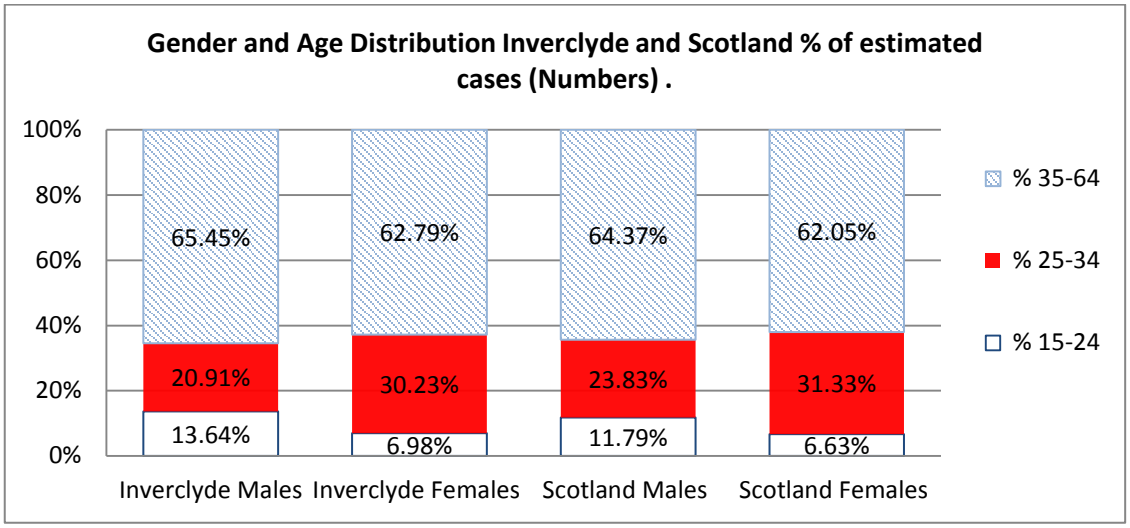
4.3 Inverclyde and Scotland Gender and Age Group – Rates and number of cases.

Age profile information is reported across gender groups at local authority level.

Key differences for Inverclyde data are:

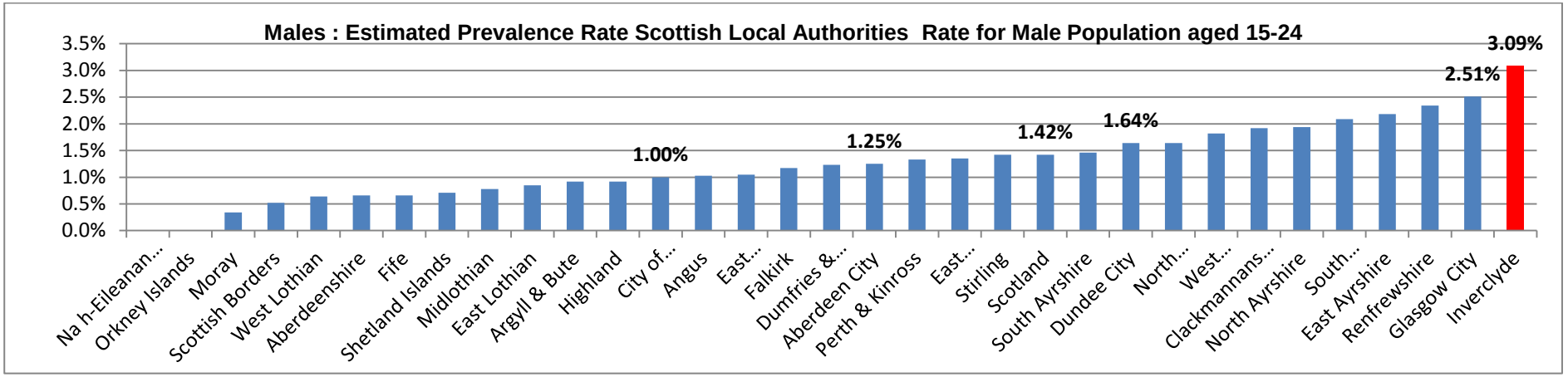
- The difference in prevalence rates for both male and females within the 15 to 24 age group. Which are double the rates for Scotland.
- In Inverclyde younger males make up a higher proportion of total estimated number of males with problematic drug misuse (13.6% compared to Scotland (11.8)%
- The profile for the distribution of women (numbers) across Inverclyde and Scotland is similar.


Estimated Drug Misuse Prevalence Rate by Gender and Age group:
Inverclyde and Scotland
Inverclyde
Scotland
6.00%
5.00%
4.00%
3.00%
2.00%
1.00%
0.00%
3.09%
1.42%
0.65%
0.33%
5.09%
2.77%
2.88%
1.44%
4.59%
2.50%
1.56%
0.93%
Males 15-24
Females 15-24
Males 25-34
Females 25-34
Males 35-64
Females 35-64

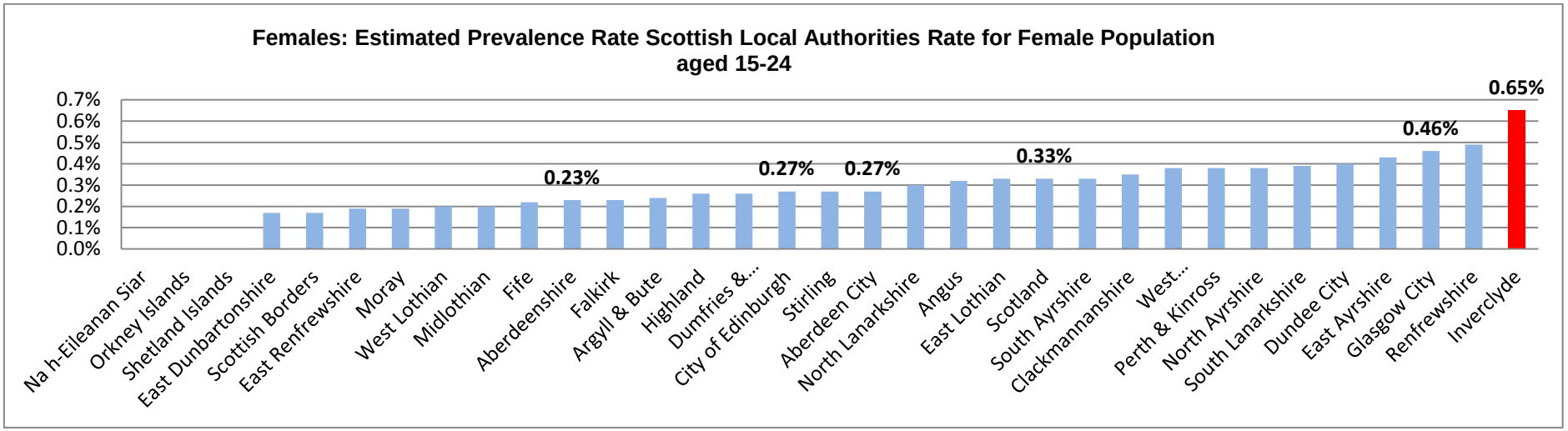

Gender and Age Distribution Inverclyde and Scotland % of estimated cases (Numbers) .
100%
80%
60%
40%
20%
0%
65.45%
62.79%
64.37%
62.05%
20.91%
30.23%
23.83%
31.33%
13.64%
6.98%
11.79%
6.63%
Inverclyde Males
Inverclyde Females
Scotland Males
Scotland Females
% 35-64
% 25-34
% 15-24

4.4 Young People: Inverclyde has the highest rate of problem drug use prevalence for young people aged between 15 and 24. The graph below shows the distributions of prevalence rates for this age group across all local authorities in Scotland.

- **Males:** The Inverclyde estimated prevalence rate at 3.09% of male population aged 15-24 is twice that for Scotland as a whole.



- **Females**: The Inverclyde estimated prevalence rate at 0.65% of female population aged 15-24 is the highest in Scotland.



5.0 Data sources: Data collection and who is included.

The following sources of data were used to establish the problem drug misuse estimates:

- Clients registering with specialist drug treatment services
- Drug-related hospital admissions
- Criminal Justice Social Work (CJSW) reports.

Detailed data source analysis is not yet available at Council area level. This section reports on Scotland wide profile of data source information.

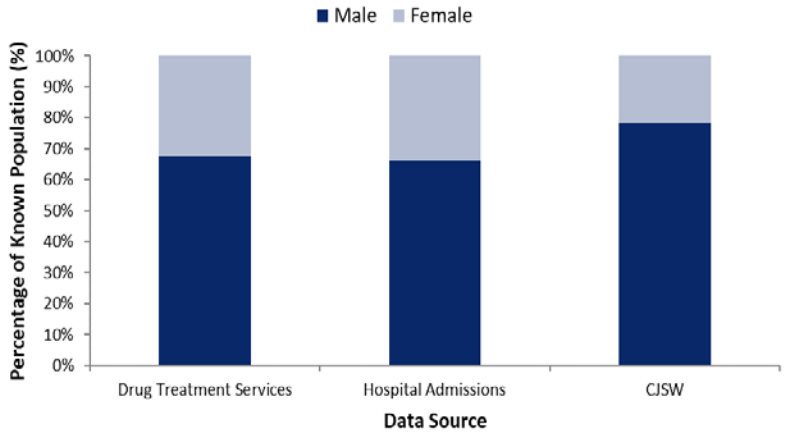
Specialist Drug Treatment Services: Each Alcohol and Drug Partnership (ADP) in Scotland was asked to provide data on individuals who had registered for treatment and/or were in receipt of specialist drug treatment during the period 1st April 2015 to 31st March 2016. Individuals were eligible for inclusion if they problematically used opioids and/or benzodiazepines. Similarly, legitimate prescribing, where the drug was being prescribed as treatment for an ongoing drug problem, including Opioid Replacement Therapies (ORTs) such as methadone, should also have been included.

Drug-Related Hospital Admissions: Information was extracted from centrally held data within NHS National Services Scotland (NSS). The data, which was initially sourced from NHS hospital administration systems across Scotland, relates to inpatient and day case admissions to general acute and mental health specialties.

Criminal Justice Social Work Reports: Criminal Justice Social Work Reports (CJSWRs) are prepared by Social Workers, at the request of a Court, to assist in sentencing. They include information on an offender's personal background and circumstances, their physical and mental health, alcohol or drug use, and all relevant offence related information. Data collection guidance stipulated that the context should be considered to establish current drug use. In general this included

- cases where the offence involved or was related to relevant drug(s) misuse
- cases where the client was in treatment for relevant drug(s) misuse
- cases where the individual's relevant drug(s) misuse had been assessed to be a problem, even if the client/offender had stated that they were not currently using drugs or they were in withdrawal or were substituting with another drug.

Data Source: Gender and Age Profile: Scotland



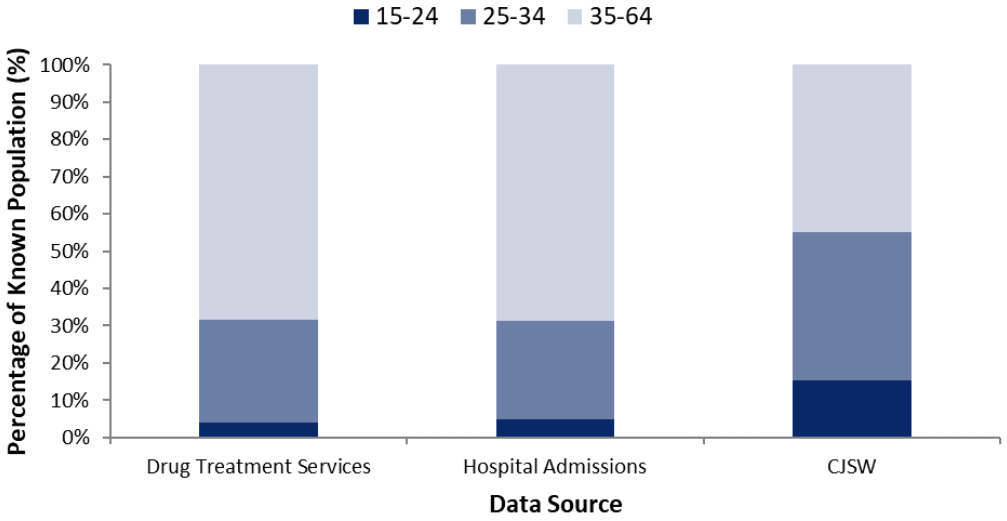
- 67.7% of the observed population receiving specialist drug treatment services during 2015/16, were male.
- This compares to 66.0% of all those identified through hospital admission records and
- 78.4% for all those identified through Criminal Justice Social Work (CJSW) Reports were male .

There is an almost identical age demographic in those identified through specialist drug treatment services and through hospital admissions:

- just over 30% were aged between 15 and 34 years.
- By contrast, more than half (55.0%) of all those identified through Criminal Justice Social Work Reports were aged between 15 and 34 years.

These data suggest that the age and gender demographic for Scotland overall is very similar for those identified through specialist drug treatment services or through hospital admissions.

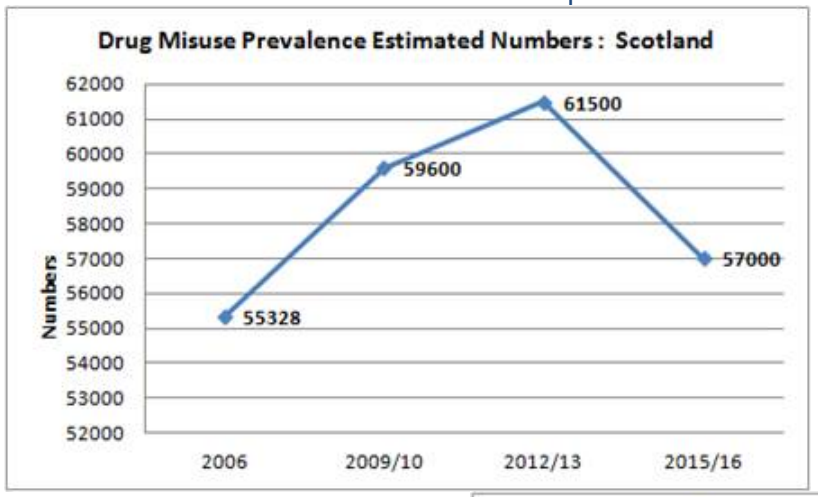
The profile is different for those identified through Criminal Justice Social Work reports, **where a younger, more male dominated cohort emerges.**

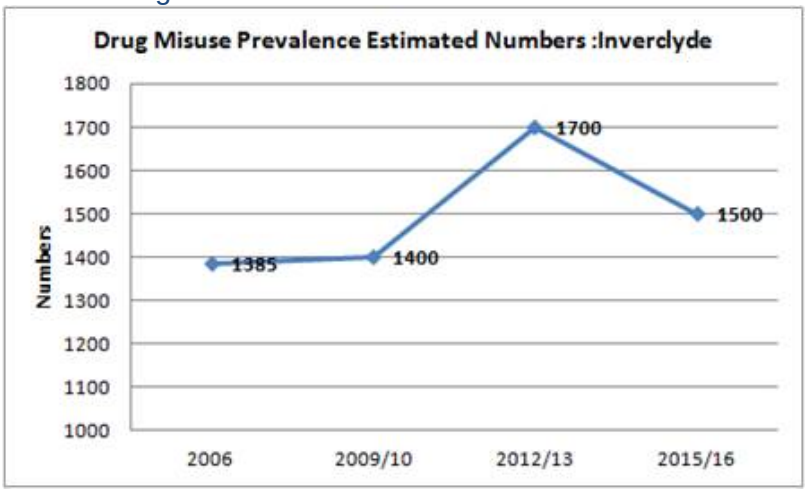


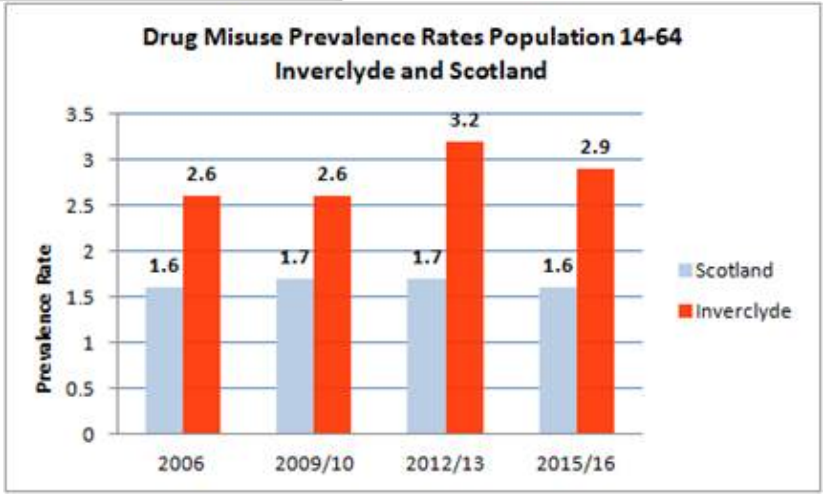
6.0 Data Trends and Methodology

The latest national prevalence rate is lower than was observed for 2012/13. However, due to some changes to the data included for this study and the margin of uncertainty that surrounds the statistical models and assumptions, it is not possible to conclude that a real reduction has occurred. Within the limits of the methodology the trend tables below reflect:

- A considerable fall in estimated numbers of people with problematic drug misuse in Scotland and Inverclyde between 2013 and 2016 which follows a sharp rise in estimated numbers between 2010 and 2013.
- The trend in prevalence rates for Inverclyde have been consistently around double that for Scotland over the period under consideration.
- Evidence suggests changes in the use of drugs in Scotland with a growing trend in the use of Cocaine and Crack Cocaine means the likelihood is that across the board we are in a worse position in terms of the problematic use of drugs.







Inverclyde Alliance

AGENDA ITEM NO: 16

Report To:	**Inverclyde Alliance Board**	**Date: 17 June 2019**
Report By:	**Corporate Director Education, Communities & Organisational Development**	**Report No:**
Contact Officer:	**Hugh Scott, Service Manager Community Learning & Development, Community Safety & Resilience and Sport**	**Contact No: 01475 715459**
Subject:	**Domestic Abuse (Scotland) Act 2018**	

1.0 PURPOSE

1.1 The purpose of this report is to set out for the partnership the introduction of the Domestic Abuse (Scotland) Act 2018 and resulting changes to Criminal Law for perpetrators of Domestic Abuse in Scotland from 1st April 2019.

2.0 SUMMARY

2.1 The Scottish Government's 2015 consultation 'A Criminal Offence of Domestic Abuse' found strong agreement that the previous laws used to prosecute Domestic Abuse did not fully reflect the experience of victims of Domestic Abuse. In particular, previous laws did not criminalise some of the behaviours experienced by victims of ongoing and coercive controlling behaviour within relationships, at the hands of their partners or ex-partners. The Bill was passed by the Scottish Parliament on 1st February 2018 and received Royal Assent on 9th March 2018 as the Domestic Abuse (Scotland) Act 2018, with an implementation date of 1st April 2019.

2.2 Domestic Abuse consists of a range of behaviours causing more than physical or sexual harm, including behaviours which undermine the victim and restrict their freedom. The Domestic Abuse (Scotland) Act 2018 reflects this and introduces a new offence, known as Coercive Controlling Behaviour, which better reflects the actual experience of victims of Domestic Abuse and the long term pattern of abusive behaviour. It is recognised that Coercive Controlling Behaviour has a long lasting effect on both the adult victim and children. The offence allows, where the circumstances and evidence merit, the totality of an accused's behaviour to be prosecuted in a single charge rather than a series of distinct incidents. This approach recognises the cumulative impact of such behaviour on victims.

3.0 RECOMMENDATIONS

3.1 It is recommended that the Alliance Board notes the introduction of the Domestic Abuse (Scotland) Act 2018, which came into force on 1st April 2019.

Ruth Binks
Corporate Director
Education, Communities & Organisational Development

4.0 BACKGROUND

4.1 The Domestic Abuse (Scotland) Act 2018 creates an offence with respect to a course of behaviour which is abusive towards that person's partner or ex-partner. The new law covers not only spouses, civil partners and cohabitants but also people in intimate personal relationships who do not live together. As well as physical abuse, it will cover other forms of psychological abuse and coercive and controlling behaviour that cannot be easily prosecuted under the existing law. The Act provides a description as to what constitutes abusive behaviour.

4.2 The new offence provides clarity on the law and ensures that criminal law captures and reflects the actual experience of victims of Domestic Abuse. This will make it easier for the Police and Prosecutors to investigate and prosecute as a single offence the totality of behaviour amounting to Domestic Abuse. This will send a message out to the public, including perpetrators, that this behaviour is unacceptable in society and won't be tolerated.

5.0 IMPLEMENTATION

5.1 In preparation for the legislative changes, a large-scale training programme is being delivered to Police Scotland by SafeLives which will see all Police Officers in Scotland receive the Domestic Abuse Matters training. Initial e-learning for all Police Officers has been undertaken in advance of the implementation of the Act and this training will be further enhanced by the specific training events which commenced in January 2019 and will continue for an 18 month period.

5.2 Inverclyde Council will incorporate the implications of the new Act into the Violence Against Women Strategy Action Plan and will include this in the ongoing Violence Against Women courses.

6.0 IMPLICATIONS

6.1 **Finance**

There is no direct spend associated with delivery of the new legislation other than that which is already in place for delivery of the large-scale training programme being delivered to Police Scotland.

6.2 **Legal**

Legislative changes have now been made and the initiative will be delivered within existing legislative frameworks.

6.3 **Human Resources**

This report does not impact on Human Resources.

6.4 **Equality and Diversity**

Legislative changes have been made which seeks to promote equality.

6.5 **Repopulation**

None

6.6 **Inequalities**

None

7.0 CONSULTATIONS

7.1 None.

8.0 BACKGROUND PAPERS

8.1 There are no background papers.

Inverclyde Alliance

AGENDA ITEM NO: 17

Report To:	**Inverclyde Alliance Board**	**Date: 17 June 2019**
Report By:	**Louise McVey** **Corporate Policy, Performance and Partnership Manager**	**Report No:**
Contact Officer:	**Louise McVey**	**Contact No: 712042**
Subject:	**NRS mid-year population estimates (2018) for Inverclyde and Scotland**	

1.0 PURPOSE

1.1 The purpose of this report is to provide the Inverclyde Alliance Board with details of the latest mid-year population estimates (2018) published by the National Records of Scotland (NRS) on 25 April 2019

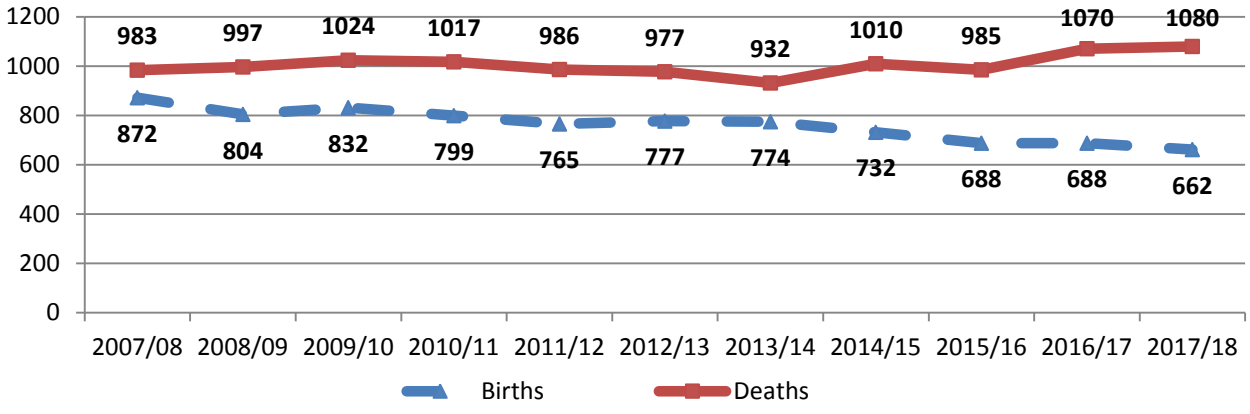
2.0 SUMMARY

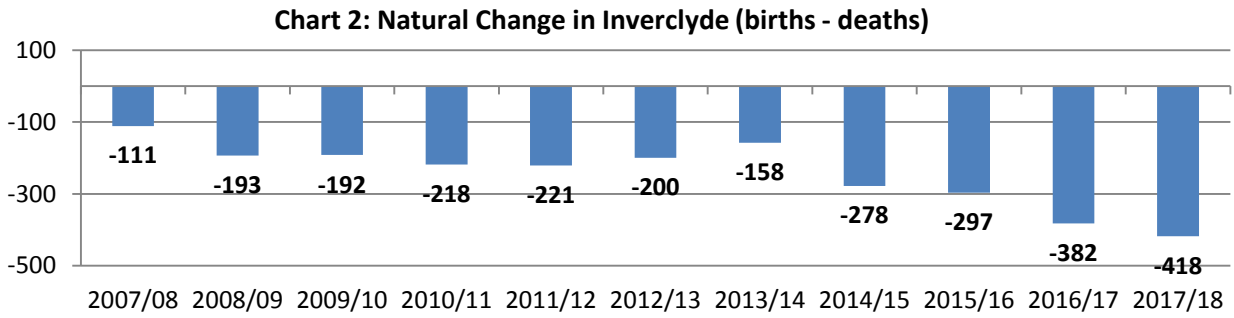
2.1 The estimated population of Inverclyde as at 30 June 2018 was 78,150. This is a 610 (-0.77%) decrease compared to the 2017 mid-year population estimate (78,760) and the largest population decrease in Scotland. In contrast, Scotland's population is estimated to have increased by 0.2% between 2017 and 2018 to a record high of 5,438,100.

2.2 Inverclyde is one of 14 council areas in Scotland to have had an estimated decrease in population between mid-2017 and mid-2018. Of those councils affected by a reduction in population, the extent of decline ranges from -0.08% in East Ayrshire to -0.77% in Inverclyde. Appendix 1 shows the population change in council areas across Scotland between mid-2017 and mid-2018.

2.3 The largest driver of population change in Inverclyde between mid-2017 and mid-2018 continues to be negative natural change (-0.53%). There were 1,080 deaths in Inverclyde compared in 662 births during this period, resulting in natural change of -418. Death rates in Inverclyde have increased again while birth rates have continued to fall. The 10 year trend in births and deaths and natural change is shown in charts 1 and 2 below.

Chart 1: Birth and Death Rates 2007/08 - 2017/18 (Inverclyde)





Additional trend information on birth and death rates in Inverclyde over the past 10 years is provided in Appendix 2.

2.4 According to the National Records of Scotland 'Inverclyde Council Area Profile', Inverclyde had the second highest standardised death in Scotland in 2017. The leading cause of death for males in 2017 was ischaemic heart disease, whilst for females the leading cause of death was dementia and Alzheimer Disease. Appendix 3 provides further information on the leading causes of death for males and females in Inverclyde.

2.5 Scotland also suffered from negative natural change over the same period (-0.14%), with 7,700 more deaths than births, which is the largest natural decrease on record. This is attributed to a 10% increase in the number of deaths nationally between December 2017 and March 2018, compared with the previous year.

2.6 Following a small positive net migration figure (+10) in Inverclyde in the year to mid-2017, it is disappointing that the latest estimates show that between mid-2017 and mid-2018, out-migration in Inverclyde was again higher than in-migration, with an estimated 1,470 people moving into the area and 1,650 leaving, resulting in net civilian migration of -180, or -0.22%. The level of out-migration is higher than in any of the previous 6 years shown in the chart below, which tracks the migration pattern in Inverclyde since the 2011 Census.

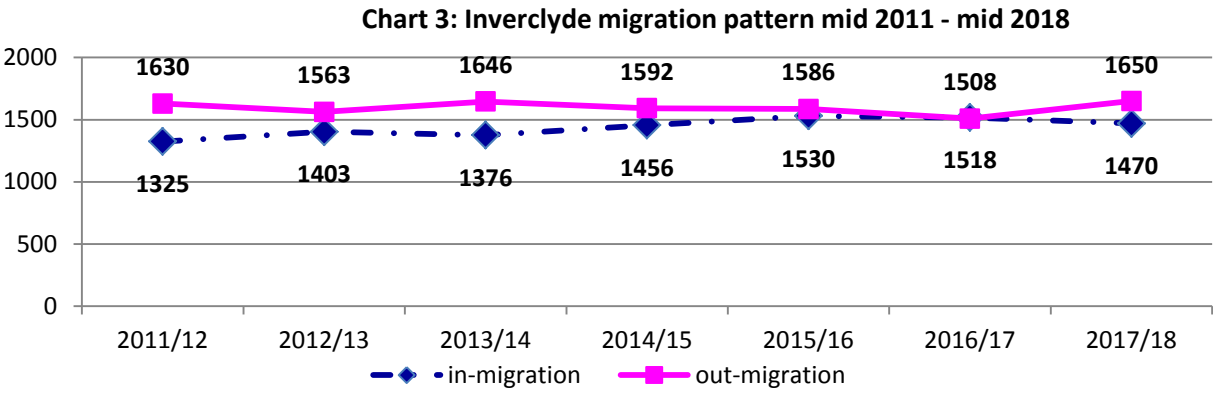
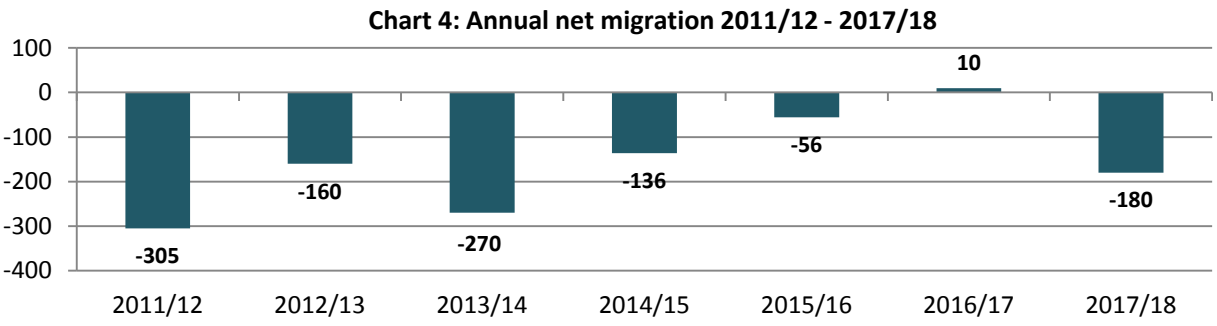


Chart 4 (below) shows the change in annual net migration over the same period



2.7 By contrast, Scotland had an estimated net civilian migration figure of 20,900 (0.38%). The

component change in population, including natural change and migration levels, for all Scottish council areas is provided in Appendix 5.

2.8 The age structure of Inverclyde's population remains unchanged from 2017 and continues to broadly reflect the national picture:

- 16% of the population is aged under 16 years (Scotland, 17%)
- 63% of the population is aged 16-64 years (Scotland, 64%)
- 21% of the population is aged 65 years and over (Scotland, 19%)

2.9 Looking at population changes nationally, the council areas with the largest population increases between mid-2017 and mid-2018 were Midlothian (+1.39%), City of Edinburgh (+1.03%) and East Lothian (+0.91%). Midlothian had the highest level of migration from within Scotland of all council areas (1.2%).

2.10 The area with the largest proportion of its population leaving for other areas within Scotland was Aberdeen City, which saw 0.8% of its mid-2017 population leave for another council area in the year to mid-2018. This is likely to be attributable to the downturn in the economy of Aberdeen City in recent years.

2.11 Appendix 6 shows the levels of economic activity and inactivity across all council areas in Scotland. The chart shows that some council areas in Scotland experiencing depopulation between 2017- 2018 still have high levels of economic activity, relative to other areas in Scotland, demonstrating the multi-dimensional nature of depopulation.

2.12 Currently, work around repopulation is primarily the responsibility of the Inverclyde Alliance Population Partnership and an Action Plan on repopulation was considered by the Alliance Board at its meeting on 18 March 2019. The implications of these latest population figures will be considered by the Population Partnership and next steps agreed in line with the approved Action Plan.

3.0 RECOMMENDATIONS

It is recommended that the Alliance Board:

- Notes the latest mid-year population estimates for Inverclyde and Scotland;
- Remits it to the Inverclyde Alliance Population Partnership to consider these latest population statistics and agree any additional actions in connection with these.

Louise McVey
Corporate Policy, Performance and Partnership Manager

4.0 BACKGROUND

4.1 The National Registers of Scotland (NRS) is the responsible agency of the Scottish Government that handles all matters relating to population and household statistics, including the Census and mid-year estimates. On 25 April 2019 the National Records for Scotland (NRS) published 'Mid-Year Population Estimates Scotland, Mid 2018'. The report provides population estimates for Scotland, its council areas and NHS boards by sex and age.

4.2 Population estimates are based on the census (2011) and are updated annually to account for the population change in the period 1 July - 30 June. The two main contributors to population change are natural change (births minus deaths) and net migration (the difference between long term moves into and out of the UK or local areas).

4.3 In addition, every two years the Office of National Statistics (ONS), in consultation with NRS and the other constituent countries of the UK, produces a principal population projection and a number of variant projections based on alternative plausible assumptions of future fertility, mortality and migration, at a national level for the UK and its constituent countries. The last population projection report was published on 28 March 2018.

4.4 The census and associated population measures have a significant bearing on a number of strategic issues most notably Government Funding and Housing / Planning Policy Development. Projections are also used as a framework for resource allocation and local planning in areas such as education and health.

4.5 Stemming and ultimately reversing population decline is a key priority for the council and its partners involved in the regeneration of Inverclyde. Currently work around repopulation is primarily the responsibility of the Inverclyde Alliance Population Partnership.

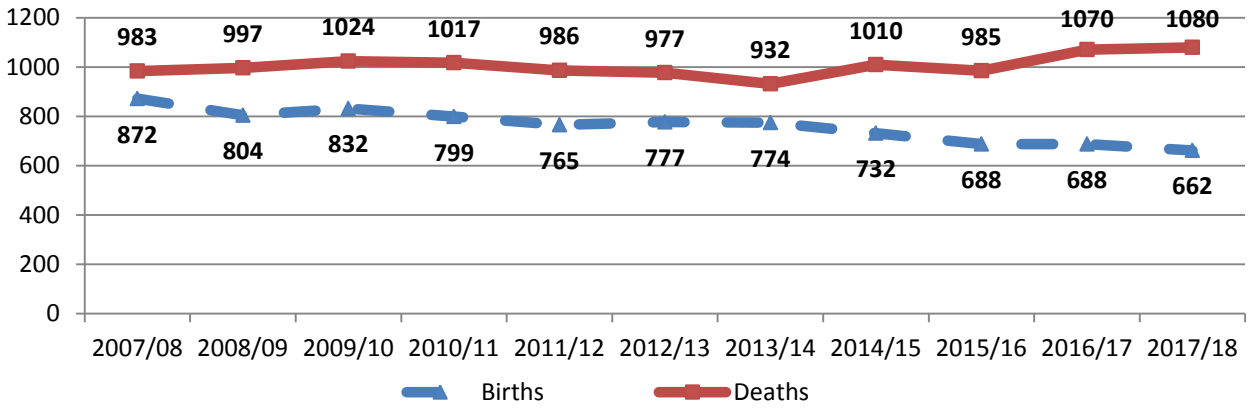
5.0 INVERCLYDE MID YEAR POPULATION ESTIMATE (30 JUNE 2018)

5.1 As at 30 June 2018, the population of Inverclyde was estimated to be 78,150; this is a 610 (-0.77%) decrease compared to the 2017 mid-year population estimate, 78,760.

5.2 Inverclyde is one of 14 council areas in Scotland to have had an estimated decrease in population between mid-2017 and mid-2018. Population decline ranges from -0.08% in East Ayrshire to -0.77% in Inverclyde. Appendix 1 shows the population change in council areas across Scotland between mid-2017 and mid-2018.

5.3 The largest driver of population change in Inverclyde between mid-2017 and mid-2018 continued to be negative natural change (-0.53%). There were 1,080 deaths in Inverclyde compared in 662 births, resulting in natural change of -418. The 10 year trend in births and deaths and natural change is shown in charts 1 and 2 below.

Chart 1: Birth and Death Rates 2007/08 - 2017/18 (Inverclyde)



Additional trend information on birth and death rates in Inverclyde over the past 10 years is provided in Appendix 2.

A far smaller proportion of population change is due to 'other' changes' (-0.02%), which includes changes in the number of prisoners or armed forces populations.

5.4 According to the National Records of Scotland 'Inverclyde Council Area Profile', Inverclyde had the second highest standardised death in Scotland in 2017, 12.6 (deaths per 1,000 population) in Inverclyde compared to 10.7 (deaths per 1,000 population in Scotland). The leading cause of death for males in 2017 was ischaemic heart disease, followed by lung cancer. The leading cause of death for females in the same year was dementia and Alzheimer Disease followed by ischaemic heart disease. Appendix 3 provides further information on the leading causes of death in Inverclyde.

5.5 A far smaller proportion of population change is due to 'other' changes' (-0.02%), which includes changes in the number of prisoners or armed forces populations.

5.6 Following a small positive net migration figure (+10) in Inverclyde in the year to mid-2017, it is disappointing that the latest estimates show that between mid-2017 and mid-2018, out-migration in Inverclyde was again higher than in-migration, with an estimated 1,470 people moving into the area and 1,650 leaving, resulting in net civilian migration of -180 or -0.22%. The level of out-migration is higher than in any of the previous 6 years shown in the chart below, which tracks the migration pattern in Inverclyde since the 2011 Census.

Chart 3: Migration pattern mid 2011 - mid 2018

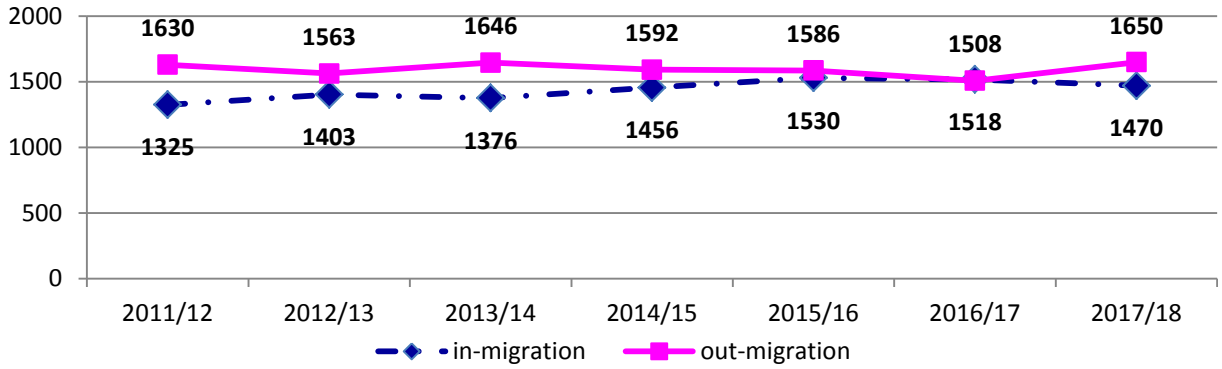
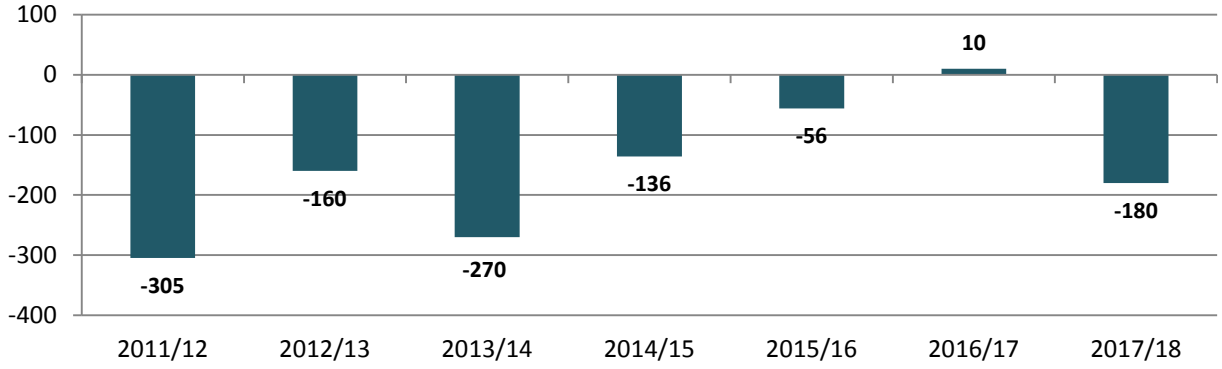


Chart 4 below shows the change in annual net migration figures over the same period.

Chart 4: Annual net migration 2011/12 - 2017/18



The components of population change, including natural change and migration, for all Scottish council areas is shown in Appendix 4.

5.7 Of those moving into Inverclyde, 71% of people came from within Scotland, 24% of in-migrants came from the rest of the UK and 5% from overseas. Of those leaving Inverclyde, 76% went elsewhere in Scotland, 16% went to the rest of the UK and 8% went overseas. The origin and destination of migrants across all council areas is provided in Appendix 4.

5.8 The age structure of Inverclyde's population in mid-2018 remains unchanged from 2017 and

broadly reflects the national picture:

- 16% of the population is aged under 16 years (Scotland, 17%)
- 63% of the population is aged 16-64 years (Scotland, 64%)
- 21% of the population is aged 65 years and over (Scotland, 19%)

6.0 NATIONAL POPULATION CHANGES

6.1 ***Mid-2018 estimates***

Scotland's estimated mid-2018 population was 5,438,100. Scotland's population has increased every year for the past 18 years to a record high in 2018.

6.2 Scotland's population growth has slowed in the past two years from 0.6% in the year to mid-2016 to 0.2% in the year to mid-2018 (13,300 people).

6.3 The change in the population nationally has been driven by positive net migration, which despite decreasing over the past two years, still saw 20,900 more people arriving in Scotland than leaving. Migration has been the main driver of Scotland's population growth over the past 18 years.

6.4 In contrast, Scotland has negative natural change with 7,700 more deaths than births over the same period, which is the largest natural decrease on record. This is attributed to a 10% increase in the number of deaths nationally between December 2017 and March 2018, compared with the previous year.

6.5 The population of 18 council areas across Scotland increased between mid-2017 and mid-2018, whilst 14 council areas are estimated to have experienced a population decrease. This compares to 11 council areas experiencing population decline the previous year. The three additional councils estimated to have had a decline in population between mid-2017 and 2018 are Clackmannanshire, South Ayrshire and Na h-Eileanan Siar. The change from population growth to depopulation in Na h-Eileanan Siar and Clackmannanshire is attributed to less migration into both areas than the previous year. For South Ayrshire, the change was driven by less migration into the area and an increase in the number of deaths compared with year to mid-2017.

6.6 The council areas which saw growth from migration within Scotland were the suburban areas outside of the cities. Midlothian grew by the largest amount (1.2%), followed by East Lothian (0.8%), East Renfrewshire (0.7%), Renfrewshire (0.7%) and East Dunbartonshire (0.5%) respectively. The area with the largest population leaving for other areas within Scotland was Aberdeen City, which saw 0.8% of its mid-2017 population leave for another council area in the year to mid-2018. This is likely to be attributable to the downturn in the economy of Aberdeen City in recent years, which has resulted in a decrease in the employment rate in the area.

6.7 A chart showing the levels of economic activity and inactivity across all Council areas in Scotland is provided in Appendix 6. The chart shows that some council areas in Scotland experiencing depopulation between 2017-2018 still have high levels of economic activity, relative to other areas in Scotland, which demonstrates the multi-dimensional nature of depopulation.

7.0 IMPLICATIONS

7.1 Legal: None

7.2 Finance: None

7.3 Personnel: None

7.4 Equality and Diversity: Mid-year estimates and population projections highlight a rise in an

elderly population going forward which has implications for the council in regard to the protected characteristic of age. Services are aware of this predicted increase and work such as reshaping care for elderly people will have a positive impact on the services older people receive.

7.5 Repopulation: Many social and economic factors influence population change, including policies adopted by both central and local government. It is hoped that the work on delivering positive outcomes for the people of Inverclyde, coupled with the work being carried led by the Population Partnership to raise the profile of Inverclyde will have a positive impact on future migration and natural change and encourage more people to come and live here.

7.6 Inequalities: There is a danger that a reduction in population will widen the inequalities within Inverclyde as it is likely to be those with a higher level of skills or qualifications that are leaving the area.

8.0 CONSULTATIONS

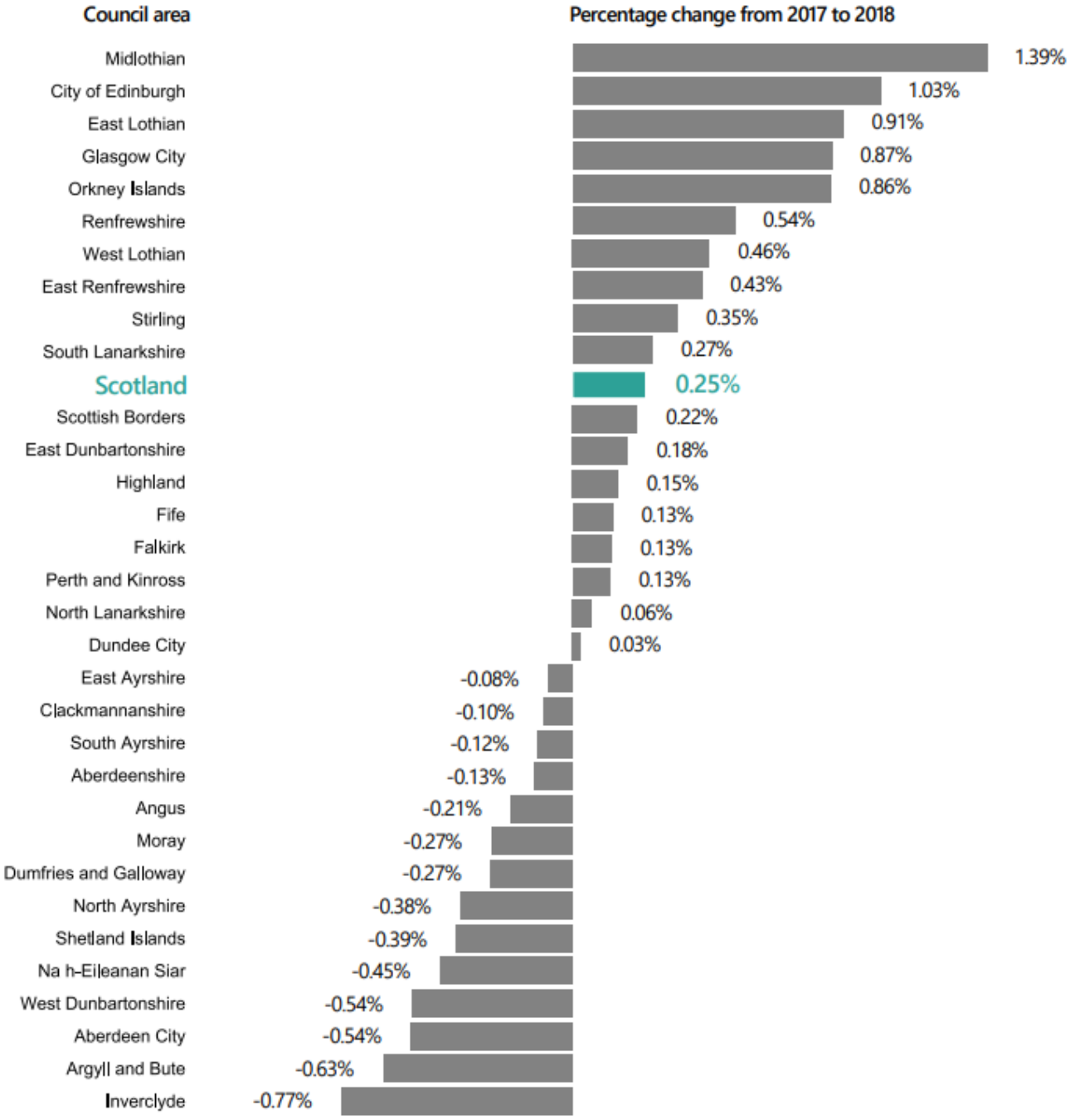
8.1 None.

9.0 LIST OF BACKGROUND PAPERS

9.1 None.

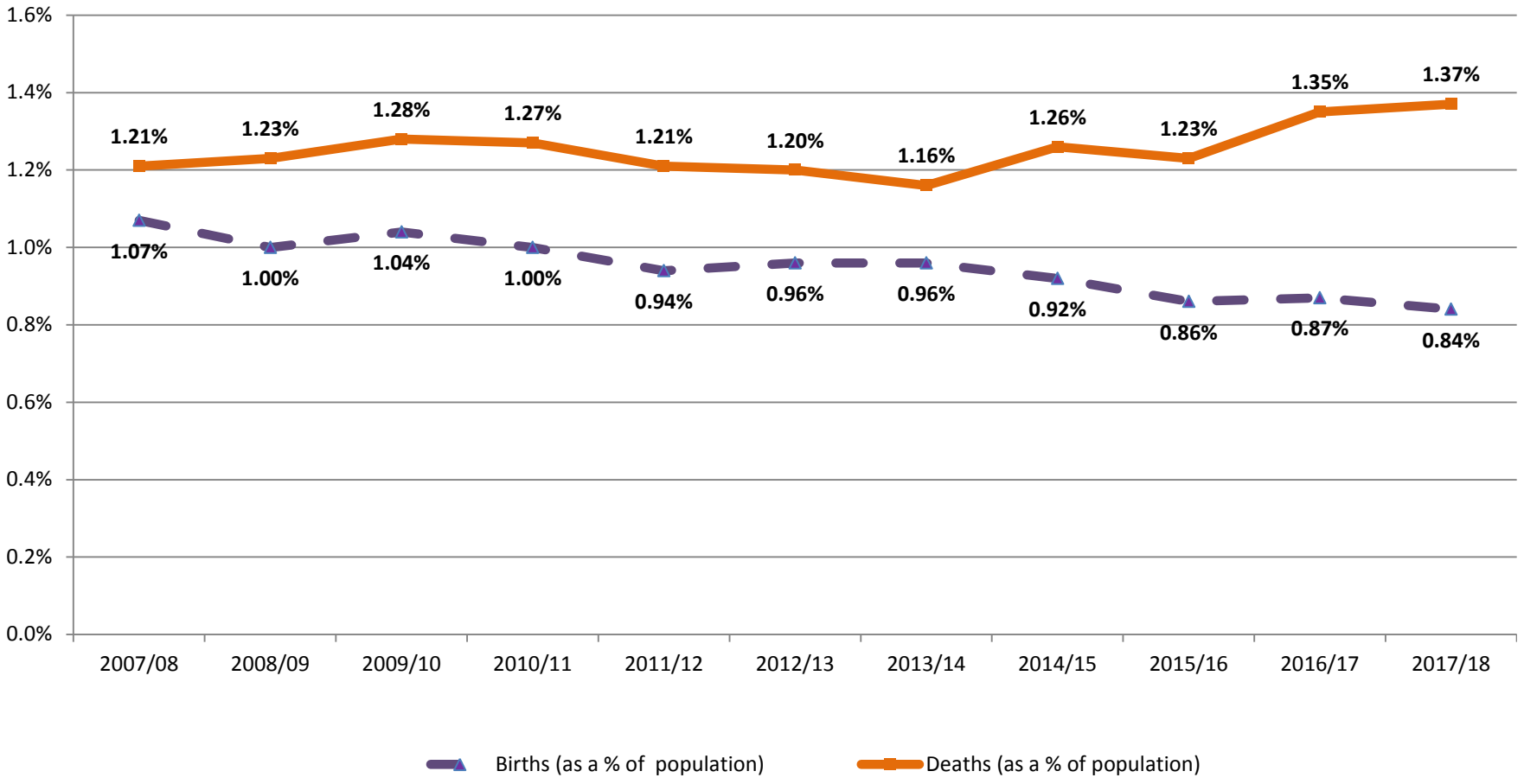
Appendix 1

Population change across Scotland's council Areas mid 2017 - mid 2018



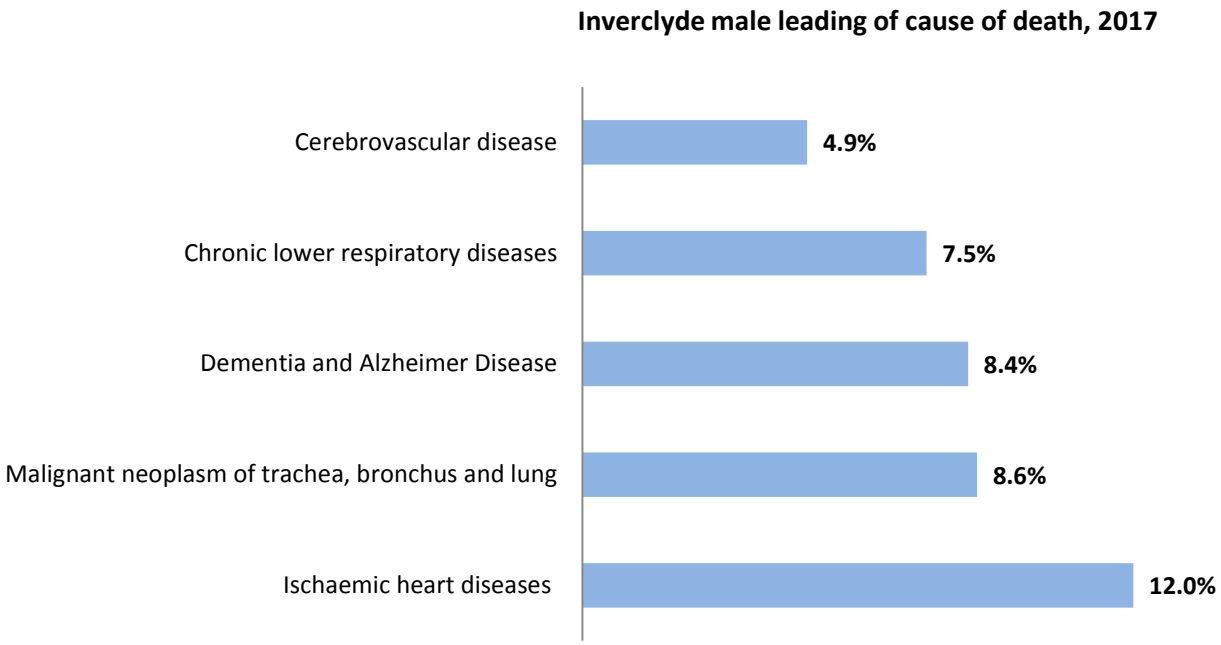
Appendix 2

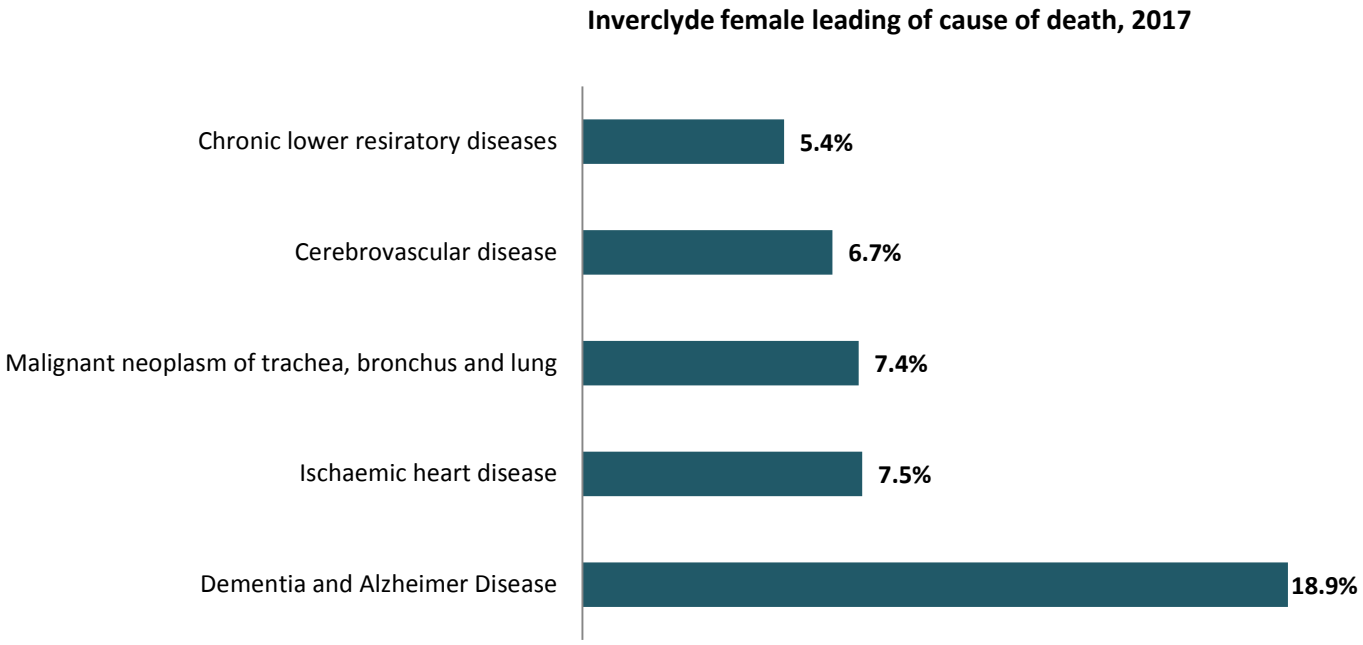
Births and Deaths as a % of total population (Inverclyde)



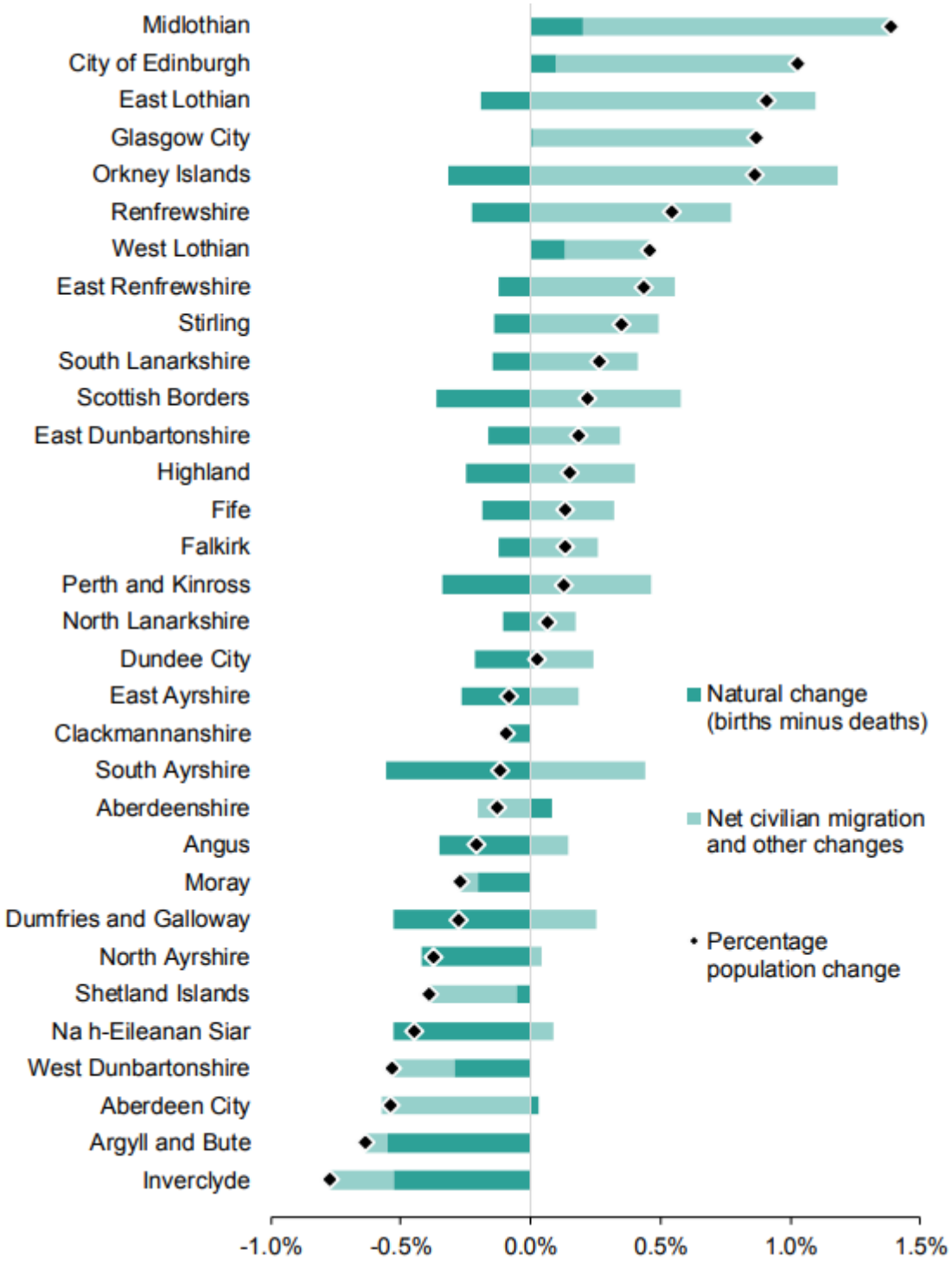
Appendix 3

The information shown below is based on a list of causes developed by the World Health Organisation and published by National Records of Scotland.

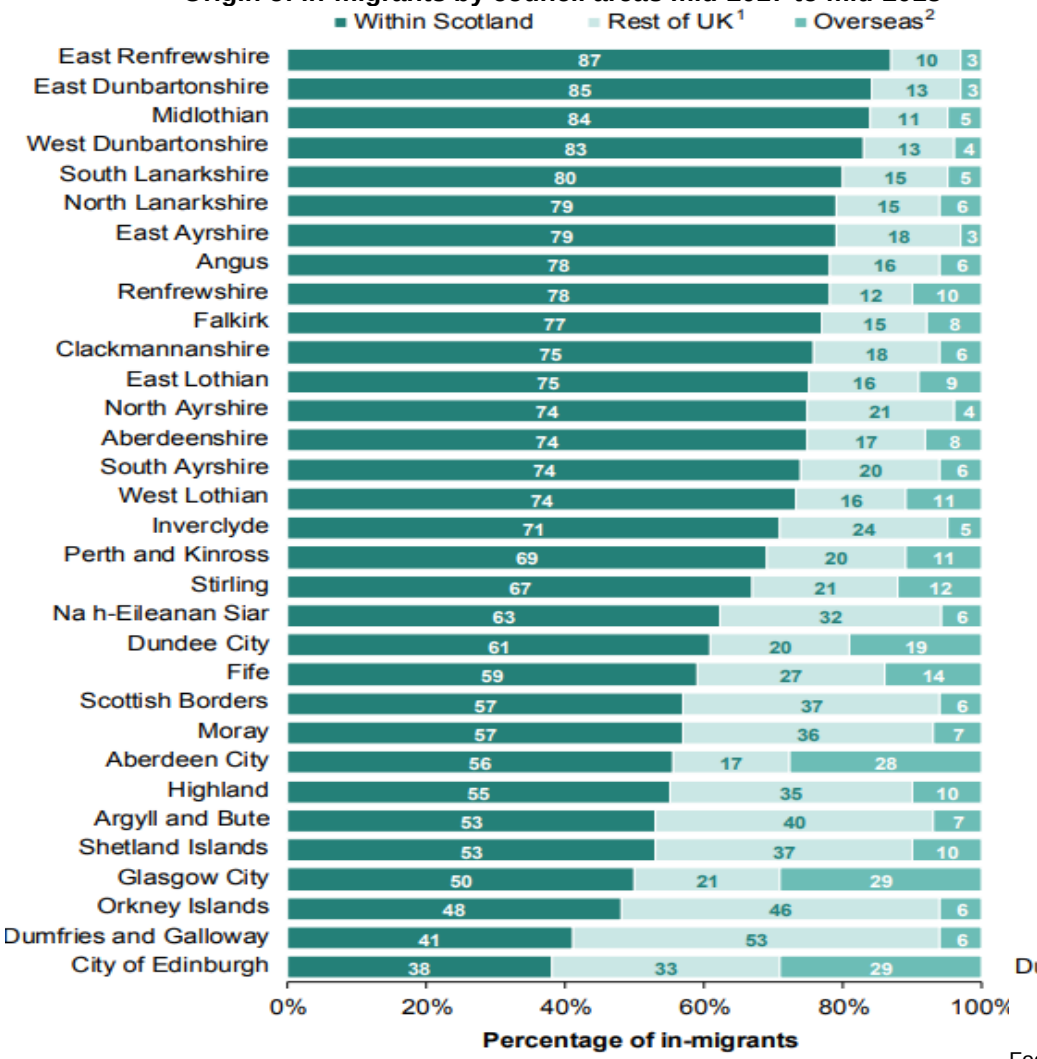




Components of population change for council areas mid-2017 to mid-2018

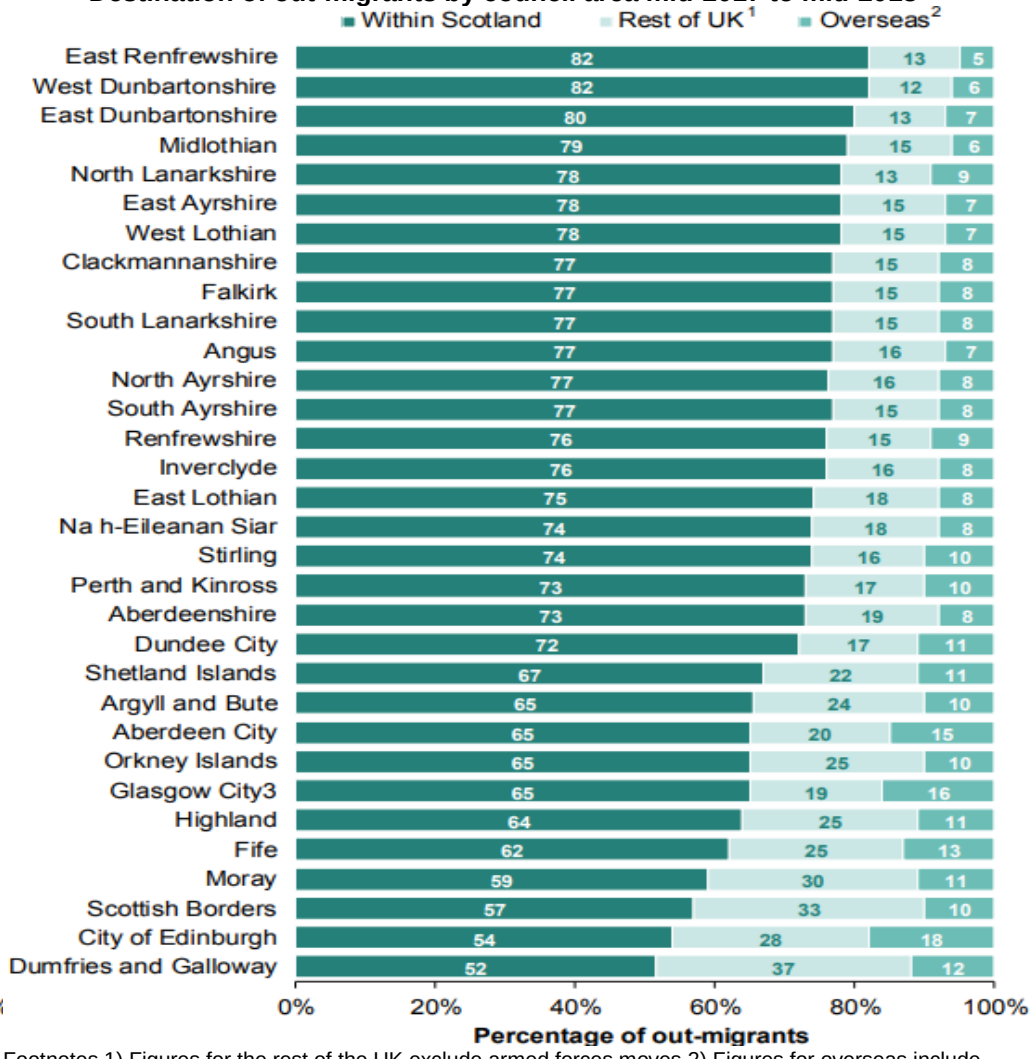


Origin of in-migrants by council areas mid-2017 to mid-2018

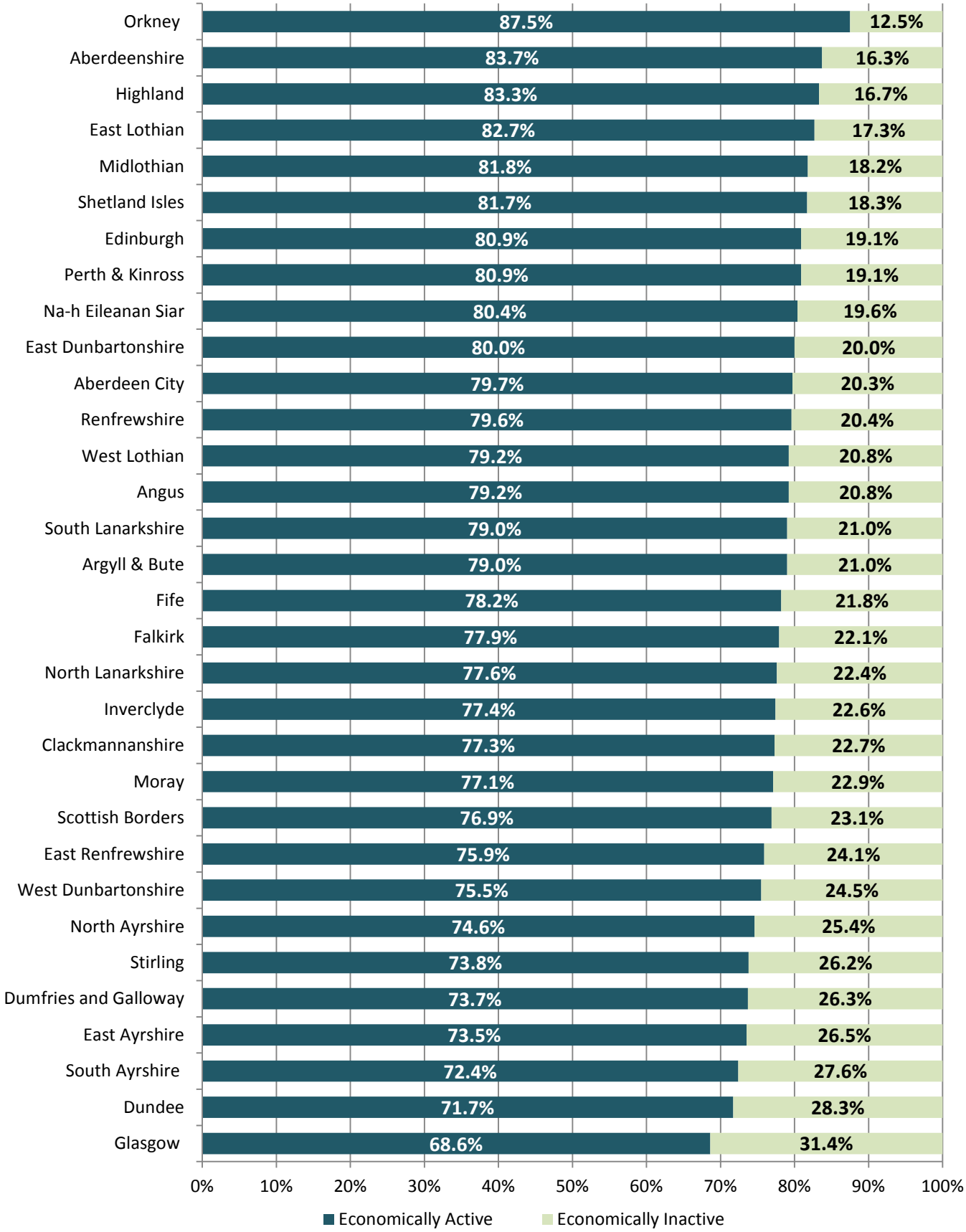


Footnotes 1) Figures for the rest of the UK exclude armed forces moves 2) Figures for overseas include asylum seekers & refugees. Rounded figures are used and may not add up to 100%.

Destination of out-migrants by council area mid-2017 to mid-2018



Footnotes 1) Figures for the rest of the UK exclude armed forces moves 2) Figures for overseas include asylum seekers and refugees. Rounded figures are used and may not add up to 100%.

Appendix 6

% of the population economically active and economically inactive Jan 2018- Dec 2018