
Report To:	Education & Communities Committee	Date:	2 September 2025
Report By:	Ruth Binks Corporate Director Education, Communities & Organisational Development	Report No:	EDUCOM/46/25/MR
Contact Officer:	Michael Roach	Contact No:	01475 712850
Subject:	Inverclyde Wellbeing Service – Annual Report 2024/25		

1.0 PURPOSE AND SUMMARY

1.1 ☐ For Decision ☒ For Information/Noting

- 1.2 The purpose of this report is to share with members of the Education and Communities Committee the annual governance report for 2024/25 from Action for Children who deliver the Inverclyde Wellbeing service which includes the school aged counselling service. The report is attached as Appendix 1 to this paper.
- 1.3 As well as the counselling service Action for Children offer curriculum-based support groups for secondary school pupils as well as an innovative transition support program for P7 pupils as they move into S1.
- 1.4 The report outlines the impact of the service and the positive evidence it has in meeting the key performance indicators set for the year.
- 1.5 The service has a balanced budget going into the school year 2025/26.
- 1.6 Action for Children are now entering year 2 of the refreshed contract for the Wellbeing Service following on from their initial 4-year contract. The current contract is due to expire in July 2027.

2.0 RECOMMENDATIONS

- 2.1 Members of the Education and Communities Committee are asked to note the content of the annual governance report for the Inverclyde Wellbeing service.

Ruth Binks
Corporate Director Education, Communities & Organisational Development

3.0 BACKGROUND AND CONTEXT

- 3.1 Since August 2020 the Inverclyde Wellbeing service has been in operation delivered by Action for Children in partnership with HSCP and Education Services. The service is funded by an annual grant for school counselling and is enhanced by funding from HSCP to offer a wider wellbeing service to all school aged pupils who live in Inverclyde.
- 3.2 The service is accessed by referral and these can be made by pupils, parents, education staff, health and social care services. These referrals are then triaged by representatives from health, educational psychology and HSCP. The wellbeing service offers tier 2 counselling but the triage process may determine that a tier 3 service is required.
- 3.3 As well as the 1:1 counselling offer there are a number of group work programmes also being offered by the service e.g. the BLUES programme. A full update is given in the report attached as Appendix 1 to this paper.
- 3.4 There remains a waiting list for counselling once triaged. The longest young person is waiting is 6 months; this has remained consistent with this point last year. This had reduced from approximately 9 months during periods of lockdown and covid restrictions. The number of referrals also increases at times when there is promotion of the service. An annual letter is sent to all parents in September of each year.
- 3.5 The service is funded by a grant from the Scottish Government. However, the HSCP agreed that they would provide additional funding in order to ensure that all school pupils have access to this service as well as widen the scope beyond just counselling e.g. the delivery of group work programmes. The current contract with Action for Children runs out in July 2027.

4.0 IMPLICATIONS

- 4.1 The table below shows whether risks and implications apply if the recommendation(s) is(are) agreed:

SUBJECT	YES	NO
Financial		X
Legal/Risk		X
Human Resources		X
Strategic (Partnership Plan/Strategic Plan)		X
Equalities, Fairer Scotland Duty & Children/Young People's Rights & Wellbeing		X
Environmental & Sustainability		X
Data Protection		X

4.2 Finance

There are limited financial costs associated with the information provided in this paper.

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report	Virement From	Other Comments
N/A					

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact	Virement From (If Applicable)	Other Comments
N/A					

4.3 Legal/Risk

There are no legal implications.

4.4 Human Resources

N/A

4.5 Strategic

N/A

5.0 Equalities and Fairer Scotland Duty

(a) Equalities

This report has been considered under the Corporate Equalities Impact Assessment (EqIA) process with the following outcome:

	YES – Assessed as relevant and an EqIA is required.
X	NO – This report does not introduce a new policy, function or strategy or recommend a substantive change to an existing policy, function or strategy. Therefore, assessed as not relevant and no EqIA is required. Provide any other relevant reasons why an EqIA is not necessary/screening statement.

6.0 CONSULTATION

6.1 N/A

7.0 BACKGROUND PAPERS

N/A

Action for Children Report

Inverclyde Wellbeing Service Governance Report

Year 5: July 2024 – June 2025

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Introduction Year 5 –

June 2024 began the 5th year of delivery for the Action for Children Inverclyde Wellbeing Service (IWS), after successfully winning the tender to deliver a schools based emotional health and wellbeing service for the next 3 years, until July 2027.

Having now firmly established a service over 4 years, the IWS continued to deliver our range of tier 1 and 2 early intervention work across all Inverclyde schools, reaching over 1700 children and young people (CYP) in the reporting period.

Working with partner agencies, both statutory and third sector, and school staff, we continued to develop our close working relationships to enhance and widen our reach, ensuring access for all CYP, appropriate for our services.

As in previous years, we are represented on a number of local steering groups with a particular focus on emotional health and wellbeing. Aware of where our services overlap with new and existing services, we contribute to the wider aims of supporting CYP to access a variety of supports that enhance their overall wellbeing, and which impact positively on their ability to engage and attain academically in school.

Service delivery

The IWS has continued to deliver its early intervention-based initiatives across both primary and secondary schools in Inverclyde, contributing to a menu of services offered across the local authority with other partner agencies. As stated above, the IWS focuses on support at tiers 1 and 2, with tier 3 being the threshold for support by CAMHS.

Group work programmes continue across both primary and secondary, with all P7 pupils taking part in Bouncing Back, which acts as a precursor to The Blues Programme, an intervention offered to pupils who meet the threshold for this intervention later in secondary school (S3).

In S3, all pupils are invited to complete questionnaires to assess whether the Blues Programme would be of benefit to them, after attending a presentation in their Personal and Social Education (PSE) classes. If scoring above the threshold to be invited to take part, Blues Programme facilitators work with schools to ensure the composition of each group is conducive to encouraging attendance and participation.

A well-established model is now in place with our counselling team providing in situ support to all secondary schools, varying dependent on waiting lists and levels of need, while we continue to dedicate a proportion of our counselling resources to primary schools. Demand is typically lower in primary than in secondary school. We rotate counselling staff across primary schools to meet the demands of individual schools on an equitable basis.

One to One Counselling

The counselling service continues to work to a model of 8 sessions, based on the referral criteria widely shared with potential referral sources, such as school guidance staff. Information is also distributed to all parents/carers through Education Department communications via e mail at specific points in the year, for example at the beginning of the school year after the summer holidays.

Referral figures for the year show that of new referrals received during the reporting period, approx. 70% were for secondary school pupils, with the remaining 30% for primary-aged pupils.

Of those referrals active within the reporting period, i.e. offered counselling sessions, approximately 79% were secondary school aged, with 21% being primary school aged.

There is regular communication between the service and secondary schools, with updates on waiting lists, and discussions on referrals, considering priorities and levels of need. Relevant meetings such as TAC (Team Around the Child) meetings are attended when IWS staff are invited for their input. Boundaries around confidentiality are maintained, with the exception of the disclosure of any safeguarding risks. These concerns override confidentiality to ensure CYP are kept safe, and concerns are shared as appropriate.

All counsellors continue to access monthly clinical supervision as per the requirements of their role, as well as maintaining their CPD (continuing professional development) throughout the reporting period. All have access to training and development opportunities, both internal and external.

Waiting list times

Waiting list times remain consistent with previous annual reports, with an average waiting time of approximately 6 months. The service continues to work collaboratively with all partners to best meet the needs of individual CYP, and will respond to requests for the prioritisation of referrals based on an individual assessment of the presenting issues. A degree of flexibility is required to ensure each CYP receives the service that best provides them with the support they require, and each case is reviewed with their counsellor in supervision on a monthly basis, or more frequently as and when required.

Counselling delivery figures

The figures below show details for the current reporting period July 2024-June 2025:

- 195 new referrals received during July 2023-June 2024, see **Fig. 1**
- 268 CYP (*# active referrals*) offered access to counselling support during July 2023-June 2024
- Approx. 80% referrals offered support were from secondary schools (213 YP)
Approx. 20% were from primary schools (55 YP) (*# active referrals*)
- Circa 60 currently engaging or at initial assessment stage (*# active referrals*)
- Over 92% CYP completing sessions showed an improvement (*# active referrals*)
- 119 CYP (of a total of 129, or 92%) showed an improvement on completion of agreed sessions (Number of children who have reported an improved outcome following access to a counsellor using a Young Person Clinical outcomes in Routine Evaluation (YP-CORE) or a Strengths and Difficulties Questionnaire (SDQ) or another measure), see **Fig. 2**
- Less than 1% of scores remained consistent throughout sessions
- Less than 9% of scores declined during sessions
- A number of those CYP who have disengaged *(see number below) have done so as a result of feeling they no longer require further sessions or to quote anecdotally from school staff “are in a better place”, but due to not attending final sessions, we are unable to provide a figure for how many of this figure this applies to. The views of the counselling team are sought for these CYP, based on their assessments during sessions attended, and are subjective. This figure also includes those CYP where there was no further action following initial offer of counselling or assessment session.
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*circa 60+ disengaged from support (see note above) this figures includes those CYP who declined or withdrew from sessions, CYP accessing other supports (10+ CYP accessing other services) including, CAMHS, private counselling or other therapeutic inputs.

(# denotes active referrals, those offered counselling within reporting period)

Waiting List figures

	Number on List	% of List
Cases on Waiting List (as of end of June 25)	81	
Primary School Waiting List	35	43%
Secondary School Waiting List	46	57%

Comparison figures for 2023-24 2024-25 (# active referrals):

129 CYP completed sessions and recorded a measurable outcome, with 119 CYP showing an improvement, which is <92%, or 119 of 129 CYP.

This is an increase in CYP completing sessions, from 101 in 2023-24, to 129 in 2024-25, with an increase in those CYP with an improved score from 99 in 2023-24 to 119 in 2024-25.

There was also an increase in the number of CYP accessing support, up from circa 205 in 2023-24 to circa 260 in 2024-25.

As stated above, anecdotal evidence from discussion with school staff suggests a number of CYP disengage from counselling when they feel they have improved in their general wellbeing or have talked through a concern or issue which they feel has been resolved. While this is positive for CYP in this situation, we are often unable to complete sessions and record these outcomes positively, as no final sessions take place.

Fig.1

Fig. 1 shows the breakdown of **new referrals received in the reporting period** July 2024 to June 2025, with numbers for pupils per source, i.e. Primary or Secondary school, along with comparable data from the previous reporting period.

	Year 4 2023-24			Year 5 2024-25		
Month	Primary	Secondary	Total	Primary	Secondary	Total
July	<5	5	7	<5	<5	<5
August	<5	12	16	<5	<5	<5
September	6	13	19	11	14	25
October	5	10	15	7	12	19
November	8	21	29	<5	14	16
December	<5	10	13	<5	14	17
January	<5	19	23	6	9	15
February	<5	13	16	6	14	20
March	<5	18	20	6	24	30
April	<5	8	10	<5	7	11
May	<5	11	15	5	10	15
June	<5	18	20	6	13	19
TOTAL	45	158	203	58	137	195

Fig. 2

Fig. 2 shows the breakdown of age group of pupils **accessing counselling in the reporting period** who completed agreed sessions, and outcomes recorded using YP Core, or CORS (Child Outcome Rating Scale) as appropriate, dependent on age and level of understanding of each CYP. (**# active referrals**)

Year Group	Improved Outcome	Score Declined	Score Remained Consistent
P1	<5		<5
P2	<5		
P3	<5		
P4	<5		
P5	9		
P6	9	<5	
P7			
S1	27	<5	
S2	25	<5	<5
S3	17		
S4	10	<5	
S5	7		
S6	<5	<5	
TOTAL	119	8	<5

Fig. 3

Fig. 3 indicates the age ranges of all CYP **offered counselling in the reporting period (# active referrals)**

Stage Specific Data	Number CYP
Number of children in P1	5
Number of children in P2	6
Number of children in P3	6
Number of children in P4	6
Number of children in P5	12
Number of children in P6	17
Number of children in P7	<5
Number of children in S1	47
Number of children in S2	59
Number of children in S3	44
Number of children in S4	37
Number of children in S5	18
Number of children in S6	7
TOTAL	268

Fig. 4

Fig. 4 indicates the number of CYP male, female or non binary **offered counselling in the reporting period (# active referrals)**

Gender	Number CYP
Number of female pupils	153
Number of male pupils	111
Number of young people identifying as non-binary	<5
TOTAL	268

Fig. 5

Fig. 5 indicates the referral source for referrals **offered counselling in the reporting period (# active referrals)**

Referral Source	Numbers
Self-referral	<5
School Staff	198
Social Services	<5
GP	8
School Nurse	<5
Health Professionals: CAMHS	24
Skylark	11
Other: Community Link Worker	<5
Ed Psych	11
Parents/carers	<5
Children 1st	8
Inverclyde Emotional Wellbeing Hub (IEWH)	
TOTAL	268

Fig. 6

Fig. 6 indicates the issues reported by referral information for CYP **offered counselling in the reporting period (# active referrals)**

Mental Health and Wellbeing issues reported by children and young people					
Exam Stress	0	(0%)	Self-Harm	5	(2%)
Trauma	10	(4%)	Depression	0	(0%)
Bereavement	20	(8%)	Anxiety	74	(27%)
Gender Identity	0	(0%)	Emotional/ Behavioural Difficulties	89	(33%)
Substance Use	0	(0%)	Body Image	<5	(<1%)
Low Mood	55	(20%)	Parental separation	<5	(1%)
Other Issues including physical health relationships, parental incarceration, parental ill health, young carers, phobias, self esteem:				10	(4%)

Fig. 6 above indicates the number and percentage of referrals which highlight the above headings as reasons for initial referrals, as recorded on referrals submitted. In addition, during counselling, further presenting issues are disclosed by CYP as they engage in sessions.

These include, but are not limited to, parental divorce/separation, incarceration of family members, peer relationships, family relationships, caring responsibilities, exam stress, dyslexia, school attendance/non-attendance, familial mental health, grief and anticipatory grief, bullying, dealing with pre diagnosis/diagnosis such as ASD/ADHD/OCD, trauma, sleep issues, social media, physical health (own and family members), disabilities, school transitions, gender identity, domestic abuse, loss, and feelings of anger.

Re-Referrals

Within the reporting period, 40 re-referrals have accessed support. This is generally as a result of a CYP having previously benefited and engaged in support. Equally, they may have moved from a position of non-engagement or no further action on assessment of their initial referral. The shortest period between referrals resubmitted was 6 months, with the longest between referrals being over 4 years, suggesting a sense of trust in young people's experience or in their knowledge and understanding of what the service offers.

Self-Referrals

While the total number of self-referrals is low as shown in Fig. 5 above, many CYP are supported to refer, as they may lack confidence in accessing the means to refer on their own. This could be by approaching school staff, or through having worked with IWS staff in group work or other activities. Further work to encourage and increase the number of direct self-referrals included IWS staff attending Personal and Social Education sessions with senior phase secondary school pupils and will also involve posters with QR codes being displayed in schools on pupil notice boards in the coming school year. This will direct CYP to the IWS website and referral form, as well as give them information on how to seek support to be "assisted" to self-refer.

Group Work Programmes

Blues Programme

7 schools took part in Blues programme delivery in 2024-25, with the closure of Cedars school of Excellence reducing the number of previously participating schools from 8.

Port Glasgow High School, St Stephens High School, Notre Dame, Inverclyde Academy, Clydeview Academy, St Columbas Gourrock, and St Columbas Kilmacolm all continued to participate in 2024-25.

	Year 3 (22/23) (across 8 schools)	Year 4 (23/24) (Across 8 Schools)	Year 5 (24/25) (Across 7 Schools)
Number of Blues Groups across 7 schools	22	22	17
Number of CES-D completed	694	652	692
Scoring Over Threshold and invited to Programme	41% (288 pupils)	38% (246 pupils)	37% (256 pupils)
Scoring Under Threshold	59% (407 pupils)	62% (406 pupils)	63% (436 pupils)
Pupils Invited and began Programme	75% (215 pupils)	58% (144 pupils)	46% (119 pupils)
Number of participating pupils whose CES-D score improved*	58.6%	82%	72%
Number of participating pupils whose CES-D score didn't change*	27%	4%	9%
Number of participating pupils whose CES-D score decreased*	13%	14%	19%

* based on pupils who completed the Programme and completed a second CES-D questionnaire

These figures for the reporting period show that from a cohort of S3 pupils, the number who completed CES-D's (questionnaires), rose to 692 (2024-25) from 652 (2023-24).

256 scored over the threshold which would indicate they would benefit from the intervention and were given the opportunity to take part in 2024-25, an increase from 246 in 2023-24.

The numbers of pupils opting to participate reduced to 119 in 2024-25, down from 144 in 2023-24.

Overall, 92% of YP who took part rated the programme as 4 out of 5 stars.

Scores varied across schools with the highest improvement post intervention being 83%, and the lowest 40%.

Variances between schools of scores which remained the same was from the highest at 50% to the lowest at 0%, and variance of scores which deteriorated during the intervention ranged from the highest at 29% with the lowest a school which recorded 10% of reduction in pre to post intervention scores.

These variances in scores are significant as they continue to demonstrate the impact of individual group dynamics on the resulting scores. Each group presents in their own way, and this can influence outcomes in terms of how comfortable YP are to be open and feel able to share, the effect of peers in a group, as well as the overall engagement of the group, as a whole.

Blues Programme facilitators continue to work closely with key school contacts to look at the makeup of each group, to try where possible to reduce any issues which might impact negatively on the positive delivery and outcomes of the 6 weekly Blues Programme in each school. This also helps encourage engagement and attendance at sessions. Information is shared with schools in advance of the delivery of groups, to promote the intervention and encourage more young people who have been invited to attend. This year 37% of YP scored over the threshold to be invited (compared to 41% in 2023-23, and 38% in 2023-24) and a total of 119 YP participated, 46% of those invited.

Bouncing Back

All P7 classes across all primary schools were again invited to take part in Bouncing Back sessions during the term after the Easter school holidays.

21 schools took part, with the closure of Cedars School of Excellence reducing the figure from 22 schools in 2023-24.

The focus of Bouncing Back, based on the Blues Programme principles though condensed and simplified as appropriate for the age group, remains to support the P7 pupils with making the transition to S1 successful. By looking at strategies, skills and techniques that the pupils will learn during the sessions, we help build their resilience and ability to 'bounce back' when faced with life's challenges and changes.

Mental health "first aid kits" were created and distributed to each P7 class taking part in Bouncing Back, providing a range of items for the pupils to use, to help remind them how to use the skills and techniques they gained to look after their health and wellbeing, when feeling anxious or worried.

Figures below for Bouncing Back delivery in Year 5

- 26 groupwork sessions were delivered
- Over 661 CYP took part in these group work sessions across all P7 classes

Comparison figures for Year 5 show an increase in the number of pupils accessing Bouncing Back, up to 661 in 2024-25 from 568 in 2023-24

26 group sessions were delivered, down from 31 in 2023-24, due to an overall reduction in the number of P7 classes, although the number of pupils increased in 2024-25 (661 CYP)

Sample school data shows:

- 78% of CYP taking part in Bouncing Back rated the intervention 4 or 5 stars, from a rating of 1 to 5 in 2024-25, which is slightly lower than in year 4 (80% in 2023-24)

Other group work activities

Other activities to support CYP across both primary and secondary schools include a combination of 1 to 1, and small group sessions:

Secondary school, weekly “drop in” sessions, arranged with guidance staff to support identified CYP who would benefit from early intervention support, provide a safe space for the young people to open up about mental health and wellbeing. Signposting to any further support where necessary takes place if specific needs are identified and require escalation.

In an ASN school, bespoke 1 to 1 and small group sessions take place. Developed by staff to provide a non-judgmental listening ear for the CYP and helping them to understand their emotions, these have evolved and adapted over time to provide what is effective through observing and listening to staff and young people. Supporting young people across both primary and secondary school, a weekly “friendship group” has been offered with female pupils, to help confidence and self-esteem and to encourage peer support.

Primary school weekly sessions.

A primary had requested support for some group work sessions with a group of male pupils who were currently in separate classes, but would be in the same class after the summer. The pupils presented with a variety of needs and can struggle to regulate their emotions. We worked on team building exercises and teaching some skills to help the pupils recognise and manage their emotions better.

Primary school group work sessions to support a group of female pupils who presented as having low self-esteem, and in particular one pupil has very low confidence and would struggle to come in the main school gates in the morning. Work with the pupils was focused on trying to increase confidence and self-esteem overall, and to firm up friendships. The school are hopeful that with some continued group engagement the transition to high school will not be as challenging as it currently seems, when the pupils are ready to make the transition.

Further school engagement

The IWS continued to contribute to all secondary school Joint Support Team meetings on a regular basis, along with other partner agencies. In addition, IWS attends a variety of school events, including PSE sessions for senior school pupils, parental engagement events, careers events and primary transition evenings. This provides opportunities to engage with wider school communities and increases the profile and reach of our service.

The service also attends and contributes a regular update to Education colleagues throughout the school year, sharing outcome data, feedback and training opportunities with senior school staff and leaders for health and wellbeing and ASN provision across both primary and secondary schools.

Staff Training 'What's the Harm: Self harm awareness and skills' training

3 IWS staff are now trained as 'What's the Harm: Self harm awareness and skills' trainers, and sessions have been offered to schools, as well as partners working to support CYP and families across Inverclyde.

Full day training sessions have been offered to schools, as well as the option of bespoke split sessions to best incorporate the training into the school day. These sessions can be delivered in person as well as online and can also be offered as parental engagement sessions where schools feel there would be an appropriate level of interest from parents/carers to participate.

IWS staff will also be accessing further training in understanding neurodiversity, and how to better support CYP who present with a diagnosis or ASD traits.

Single Point of Access – Centralised Referral System - Inverclyde Emotional Wellbeing Hub (IEWH)

THE IWS continues to take part in fortnightly assessment meetings with the IEWH team, working with participating partners, both statutory and third sector, including Barnardos, Educational Psychology, School Health, Social Work and CAMHS.

The group utilises the FORT (Fast Online Referral Tracking System) Referral system, which allows members to upload referrals and allocate these to services, once discussions have taken place during fortnightly meetings, and the appropriate services have been agreed.

This continues to have a positive impact on redirecting referrals to the service that best meets their needs from the participating partners, reducing the need for referrals to return to “square one” and repeat the referral process to seek support from other agencies.

Key Performance Indicators

Example Key Performance Indicators	Example Year 5 Targets:	Year 5 Outcomes:
Reach KPIs: <ul style="list-style-type: none"> Number of appointments Number of group work sessions Number of 1:1 sessions Number of preventative sessions 	<ul style="list-style-type: none"> 1,600 pupils directly supported in Year 3 i.e.: 600 primary pupils – <i>Bouncing Back</i> groups 600 secondary pupils completed Blues Programme Questionnaire 200 secondary pupils participating- <i>Blues Programme</i> groups 375 pupils - targeted 1:1 support/counselling/school drop ins 	<ul style="list-style-type: none"> Circa 1750 pupils engaged in Wellbeing Service supports 661 Bouncing Back (P7) 692 Secondary pupils completed Blues Programme Questionnaire. 256 invited to participate in Blues Programme 119 secondary pupils participated in Blues 268 offered 1:1 support/counselling 84 YP (Secondary school) drop in/small group work Approx. 100 CYP supported across primary and ASN schools in 1 to 1 or bespoke small group interventions
Outcome KPIs: <ul style="list-style-type: none"> Improved CYP wellbeing, mental health and resilience Reduced Tier 3/CAMHS referrals 	<ul style="list-style-type: none"> 88% of pupils improving against selected SHANARRI Wellbeing Outcomes % of pupils addressing their needs without the requirement for specialist services 	<ul style="list-style-type: none"> > 92% completing agreed sessions showing an improved outcome using a Young person's Clinical outcome e.g. Young Persons CORE
Quality KPIs: <ul style="list-style-type: none"> Accessible service/the right help at the right time Structured support and goal-setting Providing relationship-based interventions Informing CYP/families of available support 	<ul style="list-style-type: none"> Maintain 95% of pupils providing positive feedback on their experience of the service - including: <ul style="list-style-type: none"> Service accessibility Relationship-based support Quality of interventions 	<ul style="list-style-type: none"> 99% of Blues participants would recommend the programme. 92% of secondary pupils (S3) gave a 4 or 5 star rating for Blues Programme sessions, from a scale of 1 to 5 72% of Blues participants score improved pre to post intervention, 9% remained the same, and 19% of scores decreased. 78 % of P7 pupils gave a 4 or 5 star rating for Bouncing Back sessions, from a scale of 1 to 5

Finance year 4

Cost Type	Core Service
Employee Costs Total	£266,803.88
Other Employee Related Costs Total	£20,773.57
Premises Costs Total	£3,000.00
Equipment Total	£4,778.66
Communication Costs Total	£1,216.91
Variable Costs Total	£0
Activity Costs Total	£861.53
Management Fee	£33,015.24
Total	£330,449.79
Income	(£306,000)
Action for Children Income Contribution*	(£24,449.79)
Surplus / Deficit	£0

* In order to maintain the level of service delivery in the previous contract, Action for Children have committed to contribute financial support for the duration of this contract.

Access to funding for CYP and families Additional Funding Received

The IWS continued to look at opportunities to support CYP and families engaged with the service to access funding opportunities provided by Action for Children through corporate partnerships.

These include our Family Fund, Crisis Fund, Enrichment Activities Fund, Turner and Townsend Education Fund, and our partnership with Dell Technologies.

Cost Type	Value	No of CYP Benefitting	Impact
Fundraising Corporate Partnership Enrichment Fund	£590.33	55 pupils	<p>Sensory Bags and Mental Health Support for pupils at an ASN school, to help focus in class and emotional regulation.</p> <p>Mental Health First Aid Kits to aid focus in class, independently manage emotions and self-regulate, improving mood and wellbeing</p> <p>Group activity session to build confidence, goal setting and mental health support</p>
Fundraising Corporate Partnership Family Fund	£500	<5 families / 8 children	Supermarket vouchers to ease financial hardship, improved hygiene, laundry, school uniform and to contribute to energy costs.
Turner and Townsend Fund	£100	<5 pupils	Funding towards school clothing and materials to help raise attainment at school and relieving financial pressures.
Dell Chromebooks	£2,800	7 families	
Christmas Gifts	N/A	15 pupils	Gifts received by a local secondary school that were in excess of what the school could distribute, which the IWS was then able to distribute to pupils being supported in other schools by the service, and other Action for Children services operating locally.

Next Steps Year 6 August 2025

After a period of uncertainty between the end of the initial 4 year contract and the confirmation of the successful tender bid to continue to deliver for a further 3 years, the IWS has been able to consolidate the service and team through recruiting to fill any vacant posts, ensuring the service is fully staffed.

This has allowed the service to place counselling staff in secondary schools who have been able to remain consistently in situ, which has provided the opportunity for both the school and counselling staff to become more familiar with each other and further develop working relationships. This consistency has been beneficial when working collaboratively to improve the engagement of some “hard to reach” CYP, through showing a flexible and determined approach to continue to reach out to these CYP, over a period of time when issues around attendance or engagement may further impact on their wellbeing, as well as their willingness to work with the service offered to them.

Continuing to work alongside schools and partner agencies allows the service to promote collaborative working, such as the Inverclyde Emotional Wellbeing Hub Triage Team, as well as ensure there is a clear pathway and menu of services, including the IWS, to help CYP and families to be directed to the support they need, at any given time.