Report To:	Health & Social Care Committee	Date: 30 April 2009
Report By:	Ian Fraser Corporate Director Education and Social Care	Report No: SW/18/09/RM/BK
Contact Officer:		Contact No: 714072
Subject:	The Integrated Children's Services	Project – Final Report

1.0 PURPOSE

Invercive

- 1.1 To submit to Committee the final report of the Integrated Children's Services Project.
- 1.2 To highlight the key achievements of the project and areas of work that require continuing attention to improve integrated service delivery that secures better outcomes for children, young people and families.

2.0 SUMMARY

- 2.1 The Inverciyde Integrated Children's Services Project was established in 2003 through the specific grant of the Changing Children's Services Fund.
- 2.2 The project continued until the 31 March 2009 when it was formally ended.
- 2.3 Prior to the conclusion of the project the multi-agency steering group conducted a thorough review of its performance and achievements which forms the basis of the attached Final Report.

3.0 RECOMMENDATION

- 3.1 That Committee note the contents of the project final report, the achievements described within it, and ratify the formal ending of this initiative.
- 3.2 That Committee note the continuing work to improve integrated service delivery specified in section 4.12 below and remit the Head of Social Work Services to take these forward in consultation with the partner agencies and services, and report on progress at an appropriate later date.

Robert Murphy Head of Social Work Services

4.0 BACKGROUND

- 4.1 In 2001 the national report 'For Scotland's Children' was published. This Scottish Executive commissioned report examined and made recommendations on how better integration of service delivery could be achieved to secure better outcomes for children, young people and families, especially those most vulnerable.
- 4.2 The report highlighted that the most vulnerable children and young people invariably require multi-agency support and intervention but all too often the efficacy of this was impaired by a lack of co-ordinated assessment, action planning and service delivery.
- 4.3 Simultaneous with the publication of the report the Scottish Government announced the creation of a specific grant, the Changing Children's Services Fund (CCSF), to be provided to local authorities and their partners to support the development of integrated services, processes and practice.
- 4.4 The funding was on a local authority basis, with a requirement that multi-agency agreed proposals for its deployment were formulated and submitted for scrutiny and approval at national level. The funding was increased incrementally from 2002/03 through to 2005/06 to a peak of just under £1.2 m. From 2006/07 a phased transfer of funding to the overall grant to Council began, concluding in March 2008 when the specific grant funding ended.
- 4.5 The planning partners in Inverclyde, led by senior officers of the Council, formulated proposals for the deployment of the funding allocation. However, protracted discussions with central government about the initial submission meant that implementation was delayed until April 2003, the start of the second financial year of the CCSF. In light of this central government did allow the Council to carry forward resources into the next financial year and authorised the same in the two years that followed.
- 4.6 The plan for deployment of the CCSF involved allocating a portion of the funding to the establishment and maintenance of the Integrated Children's Services Project and the greater proportion to front-line service developments that promoted enhanced integrated working.
- 4.7 The Integrated Children's Services Project was designed as a focus and driver for change in the organisation of services, processes and practice that achieved more effective integrated working leading to better short, medium and long-term outcomes for children, young people and families. This included facilitating joint working between the partner agencies to identify, design and implement new initiatives in service provision that addressed needs and gaps. The initial project proposal identified three priority areas of focus:
 - Developing integrated family support services and systems;
 - Developing better-integrated services for children and young people with disabilities and their families; and
 - Developing an Integrated Assessment Framework for the joint assessment of needs, action planning and review.

These were expanded during the lifetime of the project with further focus on specific issues concerning child protection work, and also the mental health of young people and drug misuse by or affecting children and young people.

4.8 Throughout the lifetime of the project it was overseen by a multi-agency steering group chaired by the Head of Social Work Services, and involving the Head of Lifelong Learning and Educational Support and the Service Nurse Lead for Inverclyde CHP. In addition to overseeing and directing the project's work the steering group regularly reviewed the project's staffing profile and adjusted this in the light of changing circumstances.

- 4.9 The steering group in turn reported into the joint children's services planning arrangements for Inverclyde.
- 4.10 The attached final report gives more detail of the history and achievements of the project, but the following are some of the key achievements that should be acknowledged:
 - The development of more robust multi-agency work in child protection through the development of a comprehensive range of training and enhanced support to Inverclyde Child Protection Committee. This was inclusive of the establishment of the post of Child Protection Lead Officer. The value of this development is evidenced by the strongly positive report received following the recent HMIE inspection report on child protection services in Inverclyde.
 - The development of a new joint Special Needs in Pregnancy Service (SNIPS) involving Social Work Services Family Support Team and SNIPS Midwives, and other services as required including substance misuse staff. This service won a Guardian UK National award and a COSLA award.
 - The development of a range of family support programmes and methods, including Mellow Parenting (highlighted as a good practice example in the child protection inspection report), Handling Children's Behaviour, and Infant Massage.
 - The CCSF made a significant contribution to the capital costs for the new-build replacement for Rainbow Family Centre in Port Glasgow and the project worked with Early Years services and other partners to develop proposals for integrated service delivery at the centre.
 - The CCSF and the project have also supported a range of developments within local health services, for example Health Visiting Family Support Workers, Community Children's Nursing, an Attention Deficit Hyperactivity Disorder (ADHD) Nurse, Speech & Language Therapy and doubling the capacity of the multi-agency Autistic Spectrum Disorder (ASD) Diagnostic Service.
- 4.11 The project has, through engaging actively with a wide range of services, disciplines and professionals, played a pivotal role in developing streamlined and more integrated processes and practice that have enhanced joint working and the quality of service delivered to children, young people and families.
- 4.12 Overall, the project is deemed to have met most of its original objectives and targets and therefore concludes with significant progress achieved with reference to the vision and goals set for it in 2003. There are two areas which remain to be taken forward to full conclusion, namely:
 - The full implementation of the Integrated Assessment Framework (IAF), which over time will provide new processes and unifying documentation for multiagency working in relation to child protection, looked after and looked after and accommodated children, reports to children's hearings, and children and young people with additional support needs.
 - o The realisation of the plan to co-locate the Skylark Child Development Centre, Paediatric Community Children's Nursing, and the Social Work Services Children with Disabilities Team. This was in the advanced planning stage, but implementation was delayed due to a full review of provision at Inverclyde Royal Hospital by NHS Greater Glasgow and Clyde. The co-location will involve further developmental work to enhance joint working processes and practice for children and young people with the most complex needs.

Both of these objectives are still live at this stage and hopefully will reach conclusion in the near future.

4.13 The national policy document 'Getting It Right For Every Child', published in 2005, is effectively the next stage on from 'For Scotland's Children' and is described as a long-term programme building on and developing further integrated working focused firmly on securing better outcomes for children and young people, especially the most vulnerable. The IAF is a key component of this policy and taking this whole programme forward on a multi-agency basis links directly to one of the local outcomes specified in Inverclyde's Strategic Outcome Agreement:

"Giving children the best start in life".

5.0 IMPLICATIONS

- 5.1 Legal: None
- 5.2 Finance: All specific funding aligned with the Project has been transferred to the appropriate mainline service budgets as required.

Cost Centre	Budget Heading	Budget Year	Proposed Spend this Report	Virement From	Other Comments

- 5.3 Human Resource and Development: None
- 5.4 Equalities: Incorporation off equality and diversity issues was integral to the developments from this project and was instrumental in the development of the Children's Rights Officer, post. Issues around inclusion were also tackled with a wide range of service users actively involved in the development of service and in consultations.

6.0 CONSULTATION

6.1 The final project report was extensively consulted upon by the project steering group and through the integrated children's services planning arrangements. The report includes summary information from feedback obtained from key stakeholders.

7.0 LIST OF BACKGROUND PAPERS

7.1 Inverclyde Integrated Children's Services Project – Final Report

INVERCLYDE Integrated Children's Services Project

Final Report



CONTENTS

PART 1

Introduction

Executive Summary

Robert Murphy, Head of Social Work Services Chair of the Project Steering Group

PART 2

Project Manager's Report

- 2.1 Background and Project Profile
- 2.2 Summary of Progress against Project Objectives
 - Objective 1: Provide a framework for the development of better integrated children's services
 - Objective 2: Develop a shared assessment framework and protocols for information sharing
 - Objective 3: Enhance multi-agency service for provision for children with ASN / Disabilities
 - Objective 4: Enhance services for children and young people with mental health needs
 - Objective 5: Develop integrated child protection and family support services and systems
 - Objective 6: Develop services for young people with substance misuse issues

2.3 Conclusion

APPENDIX

Summary of Feedback Responses

PART 1

1.1 Introduction

The Integrated Children's Services Project was established in 2003, funded by the resources of the Changing Children's Services Fund (CCSF), which came to end in March 2008.

The project was concluded on 31 March 2009, and the project steering group has undertaken a full review of the project with reference to its original objectives.

This report represents a summary of the outcome of that review and is in 3 parts:

Part 1 includes this introduction together with an executive summary by the chair of the steering group.

Part 2 is detailed self-evaluation report compiled by the project manager, which gives detail of the project's work with reference to its objectives and the joint work undertaken to establish and support the other funded developments. The final section includes some observations by the project manager.

The Appendix is a brief summary of the rating and responses received to a standardised questionnaire issued to a range of individuals in the partner services and agencies, including the voluntary sector. The full detail of these has been considered by the project steering group and is available separately.

1.2 Executive Summary

As part of our joint commitment through the Inverclyde Integrated Children's Services Plan an inter-agency project team was established to facilitate the development of closer integrated working across children's services in Inverclyde. The Integrated Children's Services Project was tasked with the responsibility of engaging agencies, staff and service users across Inverclyde to consider clearer integration of services to enhance outcomes for children.

The project team were supported and directed through an inter-agency project steering group which was composed of senior managers from Health, Education and Social Work.

There has been a multi-layered approach to the project which has targeted issues of service co-location, joint policy development and enhanced joint working at a practice level. The project has also taken forward a range of developments aimed towards involving parents and children in the process of improving services, and has carried out a number of consultations and evaluations.

This evaluation report outlines the many and varied approaches taken to enhance services including the establishment of new and adapted services which have been secured through the direction of funding from grant to mainstream, where evaluations have proven to be positive. Such service developments occur across agencies and include jointly developed programmes.

The project staff have demonstrated a high level of commitment, skill and knowledge in their endeavour to secure and enhanced service to children and this is particularly evident in the work done around services to children with disability, the establishment of a Children's Rights and Information Officer post, and the establishment of the "LINKZ" Centre associated with the Transitions Team which eases he move from children's services to adult services for children with disabilities. The project team have also carried out significant work relating to the development of the Integrated Assessment Framework though work is required to progress this further. A number of associated work streams have been established and completed which have undoubtedly improved our joint work and partnership agenda.

Like all projects there are still areas identified which we would like to develop further, and some work outstanding which requires to be completed. In this regard the Project steering Group would recommend that the temporary contracts of the existing project staff be continued for a further period of nine months and that a set priority programme of work is established.

In conclusion, the Project Steering Group would contend that the project, through the Project Manager and staff, in conjunction with our wider staff groups, has achieved significant success in our continued efforts to integrate services in such a manner as to improve the outcomes for children in Inverclyde. This is not the end of a process but rather a component of a commitment towards continuous improvement maintained as an overall aim of the Integrated Children's Services Plan.

Robert Murphy Head of Social Work Services Chair of the Project Steering Group

PART 2

The Integrated Children's Services Project (ICSP)

Project Manager's Report

2.1 Background and Project Profile

The ICSP was designed through the multi-agency children's services planning process in response to the national report 'For Scotland's Children' and the creation of the Changing Children's Services Fund specific grant (CCSF). This was during 2002, the first year of the CCSF Main Fund (a strand of the fund targeted at drug misuse by or affecting children and young people had been brought in earlier).

In 2001/02 extensive work had been done locally to publicise and examine the implications of 'For Scotland's Children', for example through a seminar involving a wide audience including elected members of the Council.

The partners then developed a proposal for deployment of the CCSF in Inverclyde which had as one of its central components the creation of the Integrated Children's Services project as a focus and driver for change and the development of better integrated children's services in Inverclyde. Other elements of the proposal identified key areas for service delivery based on jointly agreed needs, gaps and priorities.

However, the initial proposal was not approved by the Scottish Executive, who requested further and more detailed information. This was duly provided by way of supplementary information, including that on activity and targets. This was then followed by a visit by senior officers to Edinburgh to discuss the proposal with the Scottish Executive. Final approval of the Inverclyde proposal was not forthcoming until late autumn, and actual transfer of the monies to the Council did not take place until December 2002.

The consequence of this protracted process was that deployment of the CCSF resources to all the agreed initiatives, including the establishment of the Integrated Children's Services Project, did not commence until April 2003. The partners did secure agreement that the resources allocated for 2002/03 could be carried forward into 2003/04, and further carry forwards were agreed in subsequent years.

One of the first priorities for the ICSP on being established was to support the various agencies in the design and implementation of the service delivery elements that had been agreed in the original submission, and in service and financial planning that involved working with partners to generate other proposals that addressed the use of the resources carried forward and the incremental increase in the baseline allocation of the CCSF.

The original configuration of the project staff team was a Project Manager; 3 Project Officers; a Project Administrator; and a Clerical Assistant. This has been amended over the duration of the project as noted in the project history outlined in the table below.

In devising the project, the partners hoped that the focus on integrated service development would be reflected in the project team being comprised of representatives from the three major services – education, health and social work. In the event it was not possible to realise this aspiration in the recruitment process at the outset or since. In the original team the project manager had a professional background in social work, with two of the project officers having a social work background and the third in health.

In setting up the project the partners decided to locate it in a base outwith any of the partner agencies in order to try to avoid any over-identification with them. There is good evidence that this has been successful in giving the project a degree of independence and objectivity within and in how it is perceived externally by staff in the partner agencies.

The size of the Inverclyde authority area and the services within its boundaries lends itself well to effective multi-agency working, with it being relatively easy to identify and engage with the key stakeholders and maximise opportunities for enhancing existing relationships between services and joint working practices between practitioners. As a result, the project was fairly quickly able to establish itself and engage with key players from both universal and targeted services.

The ICSP and the planning partners took an approach that sought to focus developments around existing and mainstream services rather than use resources to create a raft of separate free-standing projects.

This focus meant that a wider degree of knowledge, participation and permeation was achieved than if integrated service delivery had been focused around possibly short-term initiatives that ran the risk of being peripheral to mainstream service delivery and practice.

The original project proposal, as amended, specified 4 major objectives:

- 1. The provision of framework for the development of better-integrated children's services this related to the essential role of the ICSP itself;
- 2. The development of a shared assessment and protocols for information sharing later re-titled the Integrated Assessment Framework (IAF);
- 3. Enhanced multi-agency support for children with disabilities; and
- 4. The provision of integrated and responsive support for vulnerable families.

These have been amended and others added over time, latterly including specific reference to child protection, mental health, and the incorporation of the drug misuse by (or affecting) children and young people priority when the 2 streams of funding were brought together in 2004/05. This is reflected in the layout of the objectives described in section 2 of this report.

The history of the project from inception can be summarised as follows:

Date	Event	Comment
1 April 2003 – June 2003	Project Manager appointed	Temporary external appointment
	Project Officers 1 & 2 appointed	Seconded from Social Work Services & NHS Argyll & Clyde
	Project Administrator appointed	Seconded from Social Work Services
	Project located in premises at Ladyburn Business Centre	Chosen as setting independent of partner agencies
October – December 2003	Project Officer (3) appointed	Seconded from Social Work Services
	Clerical Assistant appointed	New external appointment
1 April 2004	Project extended until March 2006	In light of continuation of CCSF via 2003-06 Spending Review
April – December 2004	Project Officer (2) leaves in October	To new post of Child Protection Nurse Specialist
	Child Protection Co-ordinator appointed in December	New post, co-located with project but externally managed
January – March 2005	Project Officer (1) leaves	Subsequent efforts to recruit to the 2 PO vacancies are unsuccessful
	Additional accommodation acquired within Ladyburn Business Centre	For use for multi-agency training & meetings
April 2005 – March 2006	Child Protection Co-ordinator post and associated senior clerical post made permanent	First year of phased transfer of CCSF specific grant to overall grant to Council
	Senior Clerical Assistant appointed April 2005	
	Children's Rights & Information Officer (CRIO) post made permanent	As above
	Project Clerical Assistant leaves April 2005	Post deleted
	Family Support Co-ordinator appointed June 2005	Temporary secondment from NHS Argyll & Clyde to develop Mellow Parenting programme

Date	Event	Comment
	Children's Rights & Information Officer (CRIO) relocates to ICSP office in March 2006	Line management continues to be provided externally
April 2006 –	Project extended to March 2008	Extension of CCSF.
March 2007		Project is reconfigured with the deletion of 1 Project Officer post
	Family Support Co-ordinator retires end July 2006	As per original plan this post is then deleted.
	Project Officer (part-time) appointed January 2007 bringing complement up to1.7 FTE	Partial filling of the 1 vacant post in reconfigured project staffing profile.
	Child Protection Lead Officer appointed January 2007	Redesigned new post co- located with the project but externally managed.
		Post of Child Protection Co-ordinator deleted.
	ICSP Project Manager takes over line management of Children's Rights & Information Officer	Agreed as an interim arrangement to be reviewed at a future point.
April 2007– March 2008	Children's Rights & Information Officer leaves post September 2007	Subsequent delay in recruiting a replacement
	0.7 FTE Project Officer leaves post October 2008	Steering Group agree that this post will not be filled
	CCSF ends 31 March 2008 – majority of remaining specific grant transferred to overall central government grant to Councils	Agreed that ICSP will continue for a further and final year with Project Manager and 1 Project Officer only
April 2008 – March 2009	Post of Project Administrator deleted 1 April	Post-holder transferred to Child Protection
	Post of Senior Clerical Assistant to Child Protection Lead Officer deleted and replaced by post of Administrator	Deleted post already vacant
	New Children's Rights & Information Officer appointed July 2008	Children & young people involved in the recruitment and selection process
	Project Officer leaves post December 2008	To permanent post within the Council
31 March 2009	Project ends	

2.2 Summary of Progress against Project and CCSF Objectives

This section describes progress with reference to the objectives in the original project and CCSF proposal and elements that have been added to it as reported in annual monitoring returns, spending plans and Committee reports, and updates of the Integrated Children's Services Plan.

This tabular representation highlights the range of strategic and service development activity the project and the partners have been involved in since 2003.

It is worth emphasising that in terms of the service elements the ICSP's role with the CCSF funded developments has been wide ranging, for example:

- in some instances being the route for securing resources to get an initiative established and supporting it;
- o generating proposals through partnership working; and /or
- project managing developments with a continuing a high level of involvement after implementation.

It is also important to stress that the support to the funded developments has been only part of the ICSP's work over its lifetime. It has contributed significantly to wider strategic planning and the promotion of cultural and organisational change for enhanced joint work and integrated service delivery.

Whilst the involvement in various strategic and development activity can be specified, it is more difficult to quantify the impact of the project on these important aspects of cultural change but the feedback from the partner agencies in the gave some insight into perceptions about this.

Objective 1: Provide a framework for the development of better integrated children's services

Proposed Outcomes

- 1.1 An improved infrastructure for strategic planning of integrated children's services
- **1.2 Better integration of existing services for children**
- **1.3 Inter-agency training provided on all aspects of integrated working**

1.4 Successful integrated projects will have informed future developments

Development Activity

Establish and locate the Integrated Children's Services Project.

Establish the project Steering Group

Pilot and evaluate a range of projects

Carry out training needs analysis

Develop training programmes

Deliver targeted training to parents and a range of professionals

Disseminate good practice in collaboration with all agencies

Progress

The project was initiated with the appointment of the Project Manager in April 2003 and fully established by October 2003. As noted in the table above describing the project history, since that time there has been staff turnover and the staffing complement has been regularly reviewed in response to changing circumstances.

The Steering Group was put in place immediately after the Project Manager was appointed, with representation from Social Work Services, Education Services and Health. It is chaired by the Head of Social Work Services.

From April 2003 to March 2008 the Project Manager was responsible for monitoring and reporting locally and to the Scottish Government on the deployment of the Changing Children's Services Fund.

Significant service developments have been achieved as described in sections 2-6 below, but less progress in terms of structural change towards jointly managed and resourced services. A number of key external factors have contributed to this including the major changes that have taken in place in configuration of the Council's senior management and service structure over the last three years, and the dissolution of NHS Argyll & Clyde with the establishment of the new successor organisation of NHS Greater Glasgow & Clyde.

However there has been a strong and consistent focus on the development of improved processes and practice that have improved co-ordinated and integrated service delivery by the agencies and professionals.

Objective 1: Provide a framework for the development of better integrated children's services

At strategic level, the project was significantly involved in the preparation of the integrated children's services plan for 2005-08, and the annual updates for 2006 and 2007. Work is at and advanced stage on preparing the plan for 2009-11. The Project Manager has been a member of the Children's Services Plan Core Group.

The project team has been represented on a number of the children's services planning thematic groups including:

- Additional Support Needs
- Inverclyde Childcare Partnership
- Looked After Children & Family Support

The Project Manager is also a member of the Planning & Monitoring Sub-Group.

Other involvements in strategic multi-agency groups include:

- > Community Plan (Enterprise & Learning thematic group)
- More Choices, More Chances (NEET) Strategy Group
- Integrated Community Schools Strategy Group

From a more operational perspective the project is also involved in:

- Skylark Co-location Group and the Skylark Management Team & ASD Diagnostic Service Management Team
- Golf Road (ASD) Management Group
- > Learning Disability Joint Development Group (Partnership In Practice)
- > Choose Life Steering Group (Young Persons' Nurse)
- > Children's Rights & Information Officer Advisory Group
- Mellow Parenting Programme Practitioners Group
- > Handling Children's Behaviour Programme Practitioners' Group
- Sleep Scotland Steering Group
- LINKZ Steering Group
- > Daisy Chain (Hillend Annexe) Steering Group
- Down's Syndrome Support Group
- Youth Connections Steering Group (re Disability Outreach Worker) and the Connect Youth Club Steering Group
- Play4All (Capability Scotland) Steering Group
- Early Bird Steering Group

Objective 1: Provide a framework for the development of better integrated children's services

All CCSF funded projects were reviewed in 2005, 2006 & 2007, with the ICSP having a central role in co-ordinating and reporting on these.

A wide range of training events and programmes have been delivered and commissioned. See objectives 2-5 below for details of those linked to specific service developments.

The project has also organised a number of late afternoon workshops on a variety of themes. These were generally held monthly, and focused around raising awareness of needs / issues / services as a vehicle for promoting wider understanding and enhanced joint working.

In total, the project has developed / delivered 84 training courses, seminars and events on various aspects of integrated working and joint service delivery. The total number of participants on these was 2,221, which can be broken down as follows:

Education Services	863	Social Work Services 475
Health – Community	377	Health – Acute Care 84
Other Local Authority	51	
Voluntary Sector	161	
Other	159	(e.g. Careers Scotland, James Watt College)
Private Sector / Individua	ls 34	
Police	6	SCRA 11
		SCRA 11

In total 1,109 individuals attended one or more of these 84 events.

Self-Evaluation

The project demonstrated that it was a focus for joint strategic planning activity for children's and young people's services, and for the development of enhanced joint working practices and processes.

The project's strong presence in the children's services strategic planning processes has provided a high level of support to joint planning and implementation work, ensuring an increasing focus on integration between the partner agencies and services.

Informally, staff from the agencies have reported a cultural shift towards more joint working and integrated service delivery over the last 5 years. Existing areas of strength in joint working have been enhanced by the work of the project and deployment of the CCSF, for example in child protection through the multi-agency training initiatives and SNIPS development and in children with disabilities through the developments focused around Skylark Child Development Centre.

Objective 2: Develop a shared assessment framework and protocols for information sharing

Proposed Outcomes

2.1 Develop a single shared assessment framework for all children

2.2 Early identification of vulnerable children and families

2.3 Better access to a single assessment process for children and families

2.4 More rapid access to additional service provision by a one door approach

Development Activity

Research and report on literature review, good practice, mapping of current local practice, gap analysis, ICT information systems

Develop and disseminate inter-agency assessment framework and protocol for children and families

Phased implementation and evaluation of agreed assessment framework e.g. Special Needs in Pregnancy Services (SNIPS), the Pre-School Assessment Team (PRESCAT), and school-based Joint Assessment Teams (JATS).

Establish models for the delivery of assessments through a centrally based children's assessment centre and/or a network of assessment locations

Progress

Work continued on the IAF throughout the lifetime of the project. The initial research phase involved detailed exploration of local pathways through services and referral processes, together with a review of literature and research.

There was also direct engagement with the Scottish Government officer responsible for national work on the IAF which eventually emerged in Getting It Right For Every Child policy document (2005) and the accompanying documentation.

Work to develop the underpinning policy, protocols, guidance and actual documentation of the IAF has been extremely detailed and painstaking, with constant revision and refinement required in response to national developments and to the input of local agencies and practitioners.

A full set of IAF documentation was completed by February 2007, with further revisions and amendments thereafter. The process of introducing this new framework for joint assessment of need and action planning began on a pilot basis in September 2007, and more widespread implementation was started in 2008. To date over 300 staff have received training on Getting It Right For Every Child and the IAF.

The issue of an ICT solution to support the IAF remains outstanding. While some options have been identified and examined no solution has yet been decided and embarked upon. Any decision made will require to ensure the engagement of all relevant partner agencies and that the solution can fully integrate with the national developments in electronic solutions for inter-agency information sharing (known as e-care).

Objective 2: Develop a shared assessment framework and protocols for information sharing

In terms of the original proposal for a centrally based assessment centre and/or network of assessment locations, the latter approach has been taken forward incrementally through enhanced joint working and inter-agency arrangements.

However, the proposed development of Skylark Children's Centre provides a location for the co-ordination of assessment and care planning for children and young people with significant health, developmental and disability issues and the commitment in principle to developing a more comprehensive children's services centre remains a priority within the children's services plan.

Self-Evaluation

The pace of progress made on the development of the IAF in Inverclyde has been influenced by national factors, including the publication of Getting It Right For Every Child which includes the IAF as a key element, as much as by local factors.

The work on this priority has been very complex, painstaking and detailed and consequently considerable time and effort has been dedicated to it by the project with and on behalf of the partner agencies. This has included participation in national and health board wide forums and events about the IAF and the technical electronic framework to support it.

The project achievements include the compilation of the comprehensive set of documentation required for the IAF in consultation with stakeholders, and the development and delivery of a training programme for staff on a multi-agency basis. Evaluations of this training programme from individual participants have been very positive.

Work is currently ongoing to support wider implementation of the IAF, which will eventually see it replace a range of other processes and documentation, including that relating to child protection, looked after and accommodated children, reports to children's hearings, and additional support needs.

Outwith the IAF, but related to it work has been done across a range of practice areas to promote early identification of children / families in need through joint work and action planning, for example through the joint SNIPS development and the continuing development of the local multi-agency ASD Diagnostic service. These in due course will become merged with the IAF.

Proposed Outcomes

3.1 Establishing better informed and co-ordinated assessment and treatment / education / care planning services for children with disabilities

3.2 Providing a wide range of training opportunities promoting improved knowledge and practice supporting the delivery of integrated support for children and young people with disabilities and their families

Development Activity

Service Development

1. Enhancing the multi-agency ASD Diagnostic Service

2. & 3. Enhancing Community Children's Nursing & School Nursing Services

4. Developing out of school holiday care providing respite support (including for children with ASD)

5. Developing transition services for young people with ASN

6. Developing programmes of support for pre-school children with highly complex needs

7. Establishing early years support workers to promote the inclusion of children with ASN in local, mainstream centres

8. Enhancing dietetic services for children with chronic illness and complex disabilities

9. Developing joint programmes for children with developmental co-ordination disorders

10. Enhancing educational psychology services for children with ASN

11. Developing additional outreach educational support for children with communication disorders / ASD

12. Commissioning an external consultation on services for children with disabilities

13. Piloting a nursing service for children & young people with ADHD

14. Establishing multi-agency base for transition support work

15. Establishing a base for family support work for families of pre-school children with ASN

Training

Commissioning / developing and delivering a range of training to promote improved multi-agency work with children with disabilities and their families and improve outcomes for them.

Progress

Service Developments

1. Enhancing the multi-agency ASD Diagnostic Service

CCSF support was given to the multi-agency ASD Diagnostic Service by way of funding 2 additional clinician sessions per week and additional resources for speech & language therapy. This effectively doubled the capacity of the service and within 18 months the waiting time for diagnostic assessment was reduced from 15 months to 6 months. It is important to emphasise that the input of Psychological Services and Social Work Services was increased to match and participate in this greater frequency of service. The additional funding for clinicians and speech and language therapy was consolidated as permanent in April 2006.

2. & 3. Enhancing Community Children's Nursing & School Nursing Services

This is an example of a development being realised in way significantly different way from that originally envisaged following the inception of the ICSP and more detailed analysis of needs and target areas for service development. It emerged from discussion between the ICSP and the Children's Services Development Manager in health, and the ICSP worked closely with her in developing the proposal and review thereafter.

Through 2004 to 2006 CCSF resources were deployed to increase the complement of locally based Community Children's Nurses at Skylark CDC from 0.8 to 2 FTE. This substantially increased the capacity of this service to respond to referrals of children with complex health needs, with the number increasing from 36 to 111 in the first year. The service provides direct home based support to children and young people with complex medical needs and their families, as well as providing support, guidance and training to childcare and education establishments on the care of these young people. Following the ministerial approval of the health board's paediatric redesign for Inverclyde in late 2006 the funding responsibility was taken on in whole by NHS Greater Glasgow & Clyde.

In 2007/08, some CCSF resources were deployed to enable one of the paediatric nursing staff at the IRH to take on the role of co-ordinator for the Sleep Scotland programme. This is a programme for working with parents of children with complex medical needs / disabilities to tackle sleep problems. The health service undertook to programme this in as part of the overall paediatric service from April 2008. In addition to supporting the formulation of this proposal the ICSP commissioned training for staff on this programme and provided ongoing support to the practitioners group.

CCSF resources were also committed from 2004 to provide enhanced school nursing support for children and young people with ASN in Glenburn special school. These have been used on a sessional basis, enabling the existing linked school nurse to offer additional services to the school and young people there. The issues that have been addressed through this include mental health and well-being; sexual health, parenting and relationships education, puberty and early onset puberty education and support; healthy eating and exercise; constipation prevention and support; and additional support for parents with learning difficulties or mental health problems to access appropriate services. This development was consolidated in April 2008.

4. Developing out of school holiday care providing respite support (including for children with ASD)

Funding was provided by the CCSF for 2 years and the service was developed and delivered by the Autistic Spectrum Disorder (ASD) Parents Support Group in partnership with Enterprise Childcare. The ICSP worked with the parents' group on issues of service and financial planning through 2004 and 2005.

Through this, the local parents' group were able to continue providing playschemes during the Easter and summer holidays (5 weeks in total). It was also able to develop, in partnership with Youth Connections, new Saturday club provision for young people aged 5-11 and 12-16 – providing 17 places in all. Since 2006 the group has accessed other grant funding to continue their work.

CCSF resources were also allocated through 2003-06 to support Capability Scotland's Play 4 All service, providing out of school care for children with Additional Support Needs. The bulk of the service's funding was provided by the Big Lottery, with a further contribution from Inverclyde Council's Education Services. The ICSP was involved throughout the lifetime of Play 4 All through that project's steering group and by assisting with training of the staff group.

5. Developing Transition Services for Young People with ASN

From the time of its inception, the ICSP worked with staff in Social Work Services' Children & Families and adult Assessment & Care Management to develop a model of service that enhanced support for young people approaching the transition to adult services. This led to the establishment of 4 posts of Transition Worker, 2 in each of the service areas therefore improving integration between child and adult services as well as with other services and agencies. The model aimed to enhance the direct support provided to young people and their families through the process of transition, as well as releasing professionally qualified staff to focus more effectively on assessment, care management and other more skilled direct service tasks. By the end of 2006-07, 84 young people were receiving an ongoing service from this group of staff. As well as helping develop the service model, the ICSP developed and contributed significantly to the development and delivery of an induction training programme for the staff that were recruited. This service was consolidated 2007/08.

6. Developing programmes of support for the families of pre-school children with highly complex needs.

After initial research on issues and needs, the ICSP identified the growing number of pre-school children in early years services with an ASD diagnosis and the need to look at programmes that would aid parents in understanding and responding to their child's condition.

The National Autistic Society's Early Bird and Early Bird Plus programmes were identified as a suitable model for this and the project funded and organised training of 9 staff in this programme. Thereafter the project co-ordinated the planning and delivery of programmes in the early stages, with this role then being taken over the TRIAD Project. TRIAD is an Early Years funded development which provides enhanced support to early years establishments and carers for children with ASD.

7. Establishing early years support workers to promote the inclusion of children with ASN in local, mainstream centres.

This development was supported by matched resources from the CCSF and Sure Start in 2004-06. It aimed to promote the inclusion of pre-school children in mainstream provision by offering enhanced support. A total of 6 staff were employed, each helping to support 4/5 children in 3 targeted establishments. In April 2006 Early Years Services assumed responsibility for the continued funding of this development.

8. & 9. Enhancing Dietetic Services for children with chronic illness and complex disabilities

There were 2 strands to this element. The first was part-funding of a post of Senior Paediatric Dietician (Diabetes) which covered both the Renfrewshire and Inverclyde areas and was implemented in September 2004. The ICSP was involved in formulating the proposal; the recruitment and selection process, and annual review thereafter. The post has provided a direct service to around 84 Inverclyde children and young people, as well as training for 600 staff in various services. NHS Greater Glasgow & Clyde committed to supporting this development from core funding from April 2008.

The second element, involving a paediatric dietician within the team at the IRH proved less successful initially. The ICSP supported the original development and the worker, but the post was not really developed as hoped and envisaged prior to their departure after less than a year. The project has worked with the local service to redesign this proposal, which is now funded to 0.5 FTE with some supplementation from health, and was involved in the recruitment / selection process. This is now a consolidated development and it is developing closer working with Skylark Child Development Centre and the proposed co-location.

10. Developing out of school programmes for children with developmental coordination disorders

This development, which was designed by the senior physiotherapist at Skylark in consultation with the project, involved enhanced partnership working between physiotherapy, occupational therapy and schools. It delivered 10-12 new programme sessions for children and young people in mainstream schools over a period of 6 months in 2004/05. A modest amount of CCSF funding was deployed for start-up equipment and sessional staff costs. From April 2005 the development was taken forward by the physiotherapy and occupational services at Skylark.

11. Enhancing Educational Psychology Services for children with ASN

The approach taken for this development was to increase capacity within Psychological Services by additional staffing rather than concentrate specific work in one post/person. This enabled the service to respond to the increased activity of the ASD Diagnostic Service (see 1above).

Psychological Services have worked closely with the project and other services on a range of developments including the implementation of the ASL Act and other joint work with Skylark CDC.

CCSF resources originally provided for 1 full-time post but this was revised in April 2007 to consolidated resources equivalent to 0.5 FTE of an Educational Psychologist post.

12. Developing additional outreach educational support for young people with communication disorders / ASD

This initiative was developed by the project together with Education Services and Social Work Services in response to needs identified because a significant number of young people with an ASD diagnosis were moving from primary to secondary school education in the 2005/06 academic year.

The approach aimed at the inclusion and retention of the young people in mainstream education provision by offering enhanced support to them and to the staff in schools.

In the first year support was provided to 35 pupils. Funding was provided in 2005/06 by the CCSF, after which costs were met by Education Services and the post was subsequently consolidated on a permanent basis.

13. Commissioning an external consultation on services for children with disabilities

As part of the process of seeking the views of service users and ensuring these informed service provision and development, it was agreed at an early stage to commission an independent consultation with carers and young people.

The ICSP devised the specification for the consultation and oversaw the recruitment of the consultant and the progress of the work through to completion.

The detailed report produced in the summer of 2005 highlighted areas of good practice and service, and areas of need and gaps and has been used as a frame of reference for the Additional Support Needs thematic sub-group of the children's services plan.

A review in 2007 by that group has assessed that most of the recommendations of the report have been addressed.

14. Piloting nursing service for children and young people with ADHD

The proposal for this development was jointly worked up by the ICSP and staff in health, in consultation with other key stakeholders including Education Services and was implemented in May 2005. The CCSF resources currently provide funding for the nursing post and for clerical support to the Attention Deficit Hyperactivity Disorder (ADHD) clinic.

The ICSP was closely involved through the recruitment and selection processes, review and ongoing support to the development, and in the development and delivery of a multi-agency staff training programme through 2007.

The most recent review of this development highlighted that 44 new referrals received by the ADHD clinic in 2006/07, although only 8 resulted in an actual diagnosis – with most of the others being directed to other assessment or care/treatment services. A further 38 children who already had a diagnosis were reviewed at the Community Medical Officer (CMO) led ADHD Clinic, and 20 at the nurse only clinic.

This development was consolidated as permanent by Inverclyde CHP from core resources from April 2008.

15. Establishing a multi-agency base for transition support work

The LINKZ Transition base, adjacent to Glenburn School, was formally opened in June 2006.

The ICSP was involved in the original formulation of the proposal and had the lead role in overseeing work required to commission and progress the development in close consultation with colleagues in Education Services and Property Services.

The ICSP involvement continued thereafter through co-ordination of the multi-agency steering group that has been established to oversee the use of the facility.

16. Establishing a base for family support work for families of pre-school children with ASN

The Daisy Chain annexe to Hillend Children's Centre was formally opened in September 2006.

Once again, the ICSP was involved in the formulation of the original proposal and had the lead role in commissioning and overseeing work required to progress the development in close consultation with colleagues in Education Services and Property Services.

The base is now fully operational and provides a location for the delivery of a range of services such as physiotherapy and speech and language therapy and as a venue for groups, including the Early Bird programmes and the recently formed Down's Syndrome Parents Support Group, which was established in response to parental request.

Other examples of developments that have been supported by the project include the establishment of the Youth Connections Connect Youth Club for young people with ASD and the Youth Connections club for young people with hearing impairment.

Training / Conferences / Events

The project has been involved in jointly developing and delivering, or commissioning organising a wide range of training, events, conferences or seminars including:

- The ICSP helped co-ordinate the development and delivery of multi-agency awareness raising training supporting the local implementation of the Education (Additional Support for Learning) Act. This was delivered to approximately 500 staff across Inverclyde
- Joint participation with Youth Connections in the 'Challenge the Barriers' event in March 2007 which promoted awareness on disability
- As noted above, a training programme for staff in relation to children and young people with ADHD
- At an early stage the project initiated late afternoon workshops on a wide range of topics, including many directly related to children and young people with disabilities. These were designed to promote continuing professional development in the context of joint and integrated working.

- The project was also involved in developing/or commissioning training on child protection and children with disabilities which should be completed early 2008
- The ICSP was also involved in a wide range of commissioned and developed programmes in relation to ASD:
 - Commissioning places for 5 professionals (3 from Education services, 1 from Social Work Services, and 1 from Speech & Language Therapy) together with 1 parent to undertake an on-line course in autism provided by Birmingham University
 - Commissioning a locally delivered 6 week module from the University of Strathclyde Centre for Autism Studies for 22 participants from a range of agencies as well as 3 parents/carers
 - The Autism Now conference in Inverclyde involving speakers from national organisations and the Scottish Parliament.
 - An autism awareness programme devised and delivered by ICSP and others which has now been delivered to over 300 staff
 - An ASD and play training programme devised by ICSP and delivered to staff in playschemes and youth clubs in 2005 & 2006
 - Challenges of understanding and working with young people with ASD developed by the ICSP specifically for staff working in residential settings and delivered jointly with staff from Who Cares? Scotland
 - Autism & sexuality devised by the ICSP in response to specific requests and delivered to staff from the Sandyford Initiative and the Youth Connections Connect (ASD) Youth Club
 - ASD: The Development of Multi-Agency Support. An ICSP training presentation delivered to students undertaking ASD post-graduate courses and at conferences & seminars which highlights good practice in Inverclyde.
 - ASD & Welfare Benefits. Devised for and delivered to staff in Information Services, Welfare Rights & the Financial Fitness Team

Self-Evaluation

Examples of achievements / outcomes which the project had a central role in securing include:

- Building integrated services around existing child development and children with disabilities / additional support needs provision, most significantly those focused around the Skylark Child Development Centre with the now consolidated expansion of the multi-agency ASD Diagnostic Service and consequent re4duction in the waiting time for diagnostic assessment. In addition to this there is the significant planning and organisational development work that has been undertaken in preparation for the service colocation.
- Allied to the above, supporting the local paediatric service re-design and through the deployment of the CCSF for a transitional period helped expand Community Children's Nursing Services. Withjn a year, the number of children receiving these services was increased threefold.

- Helping sustain existing provision and develop new out of school care services for children and young people with complex needs through partnership working with the local Childcare Partnership, a local parent-led organisation and voluntary sector providers.
- Helping devise new services for young people approaching the transition to adult services, including designing and participating in the delivery of induction training for the staff appointed to the new posts. A stakeholder consultation on these services was undertaken in late 2006, which included seeking the views of young people and families. This highlighted a high degree of satisfaction among a sample group of parents (12) whose children had received the service, with all of them stating they felt well-supported through the transition process whereas a sample of parents (4) whose children had previously been through the transition process all said that they did not. Professional staff across the range of agencies in general reported better co-ordinated, smoother and more effective planning and direct support having resulted from the development. These findings helped strengthen the case for consolidation of this development on a permanent basis from April 2007.
- Developing a range of programmes, delivered on a multi-agency basis, for working with children and young people with additional support needs and their families. Examples include the training and co-ordination of the Early Bird programmes, the programmes for children and young people in mainstream schools with developmental co-ordination and the early years support workers promoting the inclusion of children with ASN in local, mainstream provision. Another example of a developmental targeting particular needs and also supporting inclusion was the establishment of the additional outreach teaching post for children and young people with language and communication disorders / ASD.
- Promoting joint working and integrated service delivery by creating locations in which services could be delivered – specifically the LINKZ and Daisy Chain bases.
- Developing new and innovative approaches to jointly identified needs, for example the establishment of the ADHD Nursing service and the multi-agency work and trained that has focused around this development.
- Providing a focus for the delivery of a wide range of training that promoted awareness of key issues, greater understanding between services and disciplines, and enhanced staff skills in ways that promoted joint working. These ranged from the support the project gave to the wide-ranging awareness raising undertaken to support the implementation of the ASL Act, to highly specific training such as that related to ASD and ADHD.

It is also worth noting that of the developments described in the progress section above, 8 were taken on from core funding by the host agency and a further 5 developments were consolidated from the resources transferred from the CCSF into the overall grant to the Council in 2006/07 and 2007/08.. This illustrates success in getting integrated service developments embedded into core service as opposed to relying on external, short-term funding.

Objective 4: Enhance services for children and young people with mental health needs

Proposed Outcomes

4.1 Developing specific services for young people at risk of suicidal behaviour / self-harm as part of the Choose Life Strategy

4.2 Improving access to the local CAMHS by reducing the waiting list and time and enhancing multi-agency work, including that for targeted groups such as Looked After and Accommodated Children and Young People

Development Activity

1. Establishing a post of Choose Life Young Person's Nurse

- 2. Enhancing capacity within the CAMHS Nursing Team
- 3. Establishing a temporary post of CAMHS social worker
- 4. Examining the potential for enhanced clinical child psychology services in relation to children and young people with neuro-developmental disorders

Progress

1. Establishing a post of Choose Life Young Person's Nurse

The ICSP Project Manager was involved in the formulation of the proposal at the time of the launch of the Choose Life Strategy, and has maintained a close involvement since in supporting the worker and the development through being part of the multi-agency steering group.

The development involved a partnership between Choose Life (led by Social Work Services), the Child and Adolescent Mental Health Service (CAMHS), the NCH GAP project, and the ICSP. The post was designed to provide a direct service for young people of secondary school age exhibiting signs of significant distress using brief, focused interventions; together with offering advice and guidance to staff across the services in working with young people giving cause for concern; and contributing to the wider Choose Life agenda through training and other activity.

During the 2 year period (May 2005 – April 2007) when the worker was in post, a total of 83 young people were referred and provided with a service. Using mental health assessment tools 95% of the young people who engaged with the service reported their issues were clearer and they had an improved outlook on life.

Effectively this service provided a bridge between primary care and the more specialist services within CAMHS, with the latter providing clinical support and guidance to the Choose Life Worker through one of the Clinical Nurse Specialists.

Following the departure of the worker in May 2007, the ICSP was involved with the other partners in redesigning the post on the basis of the lessons learned. This subsequently was awarded Fairer Scotland funding.

Objective 4: Enhance services for children and young people with mental health needs

2. Enhancing capacity within the CAMHS Nursing Team

In 2003 it was agreed to direct CCSF funding to enhance the complement of nursing staff in the local CAMHS. The aim of this was to tackle the waiting list and times for the local CAMH Services and therefore improve access to the service for children, young people and families.

An immediate impact was certainly made, with the waiting list reduced from 23 to single figures within 2 months and sustained at that level through to May 2006. Similarly, the longest waiting time was reduced from 28 weeks to zero by March 2004 and kept low through to the end of 2006. However, since the end of 2006 there was an upward trend, and the most recent figures are that there are 14 children on the waiting list with a longest waiting time of 12 weeks.

As well as this impact, it is worth noting CAMHS involvement in other developments including the IAF, ADHD training and other involvements in multi-agency work including those with the ICSP. More significantly, CAMHS provided enhanced support for Looked After & Accommodated Children and Young People through direct work, training and advice consultancy to staff in the care sector.

3. Establishing a temporary post of CAMHS social worker

This development was piloted through 2005-06 and involved appointing a full-time social worker to work with the CAMHS team on a joint basis and aiding links to other social work children and families services. During that time the worker was involved in 25 cases either as sole or lead worker or as co-worker with another member of the CAMHS Team.

After the conclusion of the pilot period and review of the lessons learned, it was decided that the role could be taken on by Social Work Services' Children & Families services rather than through an individual post. This is currently fulfilled through the Children with Disabilities Team.

4. Examining the potential for enhanced clinical child psychology services in relation to children and young people with neuro-developmental disorders

This was identified as a potential area for development in 2005, but after extensive scoping work involving the project and clinical child psychology looking at presenting issues and the overall pattern of assessment and treatment/care planning provision it was decided not to proceed with a specific development in this area.

Objective 4: Enhance services for children and young people with mental health needs

Self-Evaluation

Achievements / outcomes which the project promoted under this priority heading include:

- Developing a successful joint initiative for young people exhibiting signs of emotional/ mental distress within the wider framework of the Choose Life strategy. The detailed reviews of the development in 2006 and 2007 highlighted that the service made links across the agencies and in turn received referrals from a wide range of sources, including GP's and schools. This development was also an example of the ICSP harnessing and bringing together distinct but related strategies and funding streams to develop new ways of delivering services to young people with mental health needs.
- The developments supported within CAMHS in Inverclyde made an impact on access to the service, as demonstrated by the reduction in waiting lists and times. It also helped provide capacity within the service to support other initiatives such as Choose Life and the ADHD developments. The initiatives taken forward in relation to Looked After & Accommodated Children are reported to have lessened the recourse to crisis referrals, and supported care staff in responding to presenting mental health issues for children and young people.

Once again it is worth noting that some of the developments have already been absorbed by and become embedded in the existing services in social work and health.

Proposed Outcomes

5.1 Mapping family support service provision, identifying gaps and areas for improvement leading to the development of greater availability of better integrated support.

5.2 Achieving a decrease in the number of children being looked after by the local authority and a decrease in the number of children on the Child Protection Register.

5.3 Promoting children's rights throughout Inverclyde

5.4 Developing services for Looked After & accommodated Children and Throughcare Services

Development Activity

- 1. Auditing all forms of family support across the agencies and carry out an analysis of skills/ training needs of staff in the services
- 2. Consulting with families and other key stakeholders
- **3.** Enhancing existing and develop new family support services by:
 - Piloting generic family support work e.g. support for parents and children from the pre-natal stage through the range of services and integrated transport and escort services
 - Examining the feasibility of developing existing family support bases and services
 - Enhancing educational psychology services for joint family support programmes & work
 - Supporting new developments in mobile crèche provision to ensure access to family support e.g. drug clinics, day hospitals
 - > Developing Integrated Community Schools pupil / parent support services
- **4.** Developing improved multi-agency child protection work under the direction of the Child Protection Committee by:
 - Establishing the post of Child Protection Lead Officer reporting to the Child Protection Committee
 - Developing multi-agency child protection training and information for agencies and the public
 - Providing interim funding support to the new post of Child Protection Nurse Specialist for Inverclyde
- 5. Establishing a new post of Children's Rights & Information Officer for Inverclyde
- 6. Providing nursing / health clinic support targeted to Looked After Children

7. Establishing a temporary post of Throughcare Development Worker

Progress

1. Audit all forms of family support across the agencies and carry out an analysis of skills/ training needs of staff in the services

One of the early activities of the project was to examine models and methods in delivering family support and considering options for a model to be used in Inverclyde as a means of integrated service delivery. This was part of a deliberate strategy in the early life of the project to aim for 'quick gains' in promoting joint training that followed through to joint service delivery.

The strongest focus in this area has been on the early years. Following discussions with various staff involved in family support work it was decided opted for pursuing training in the Mellow Parenting programme. A pool of 24 staff have been trained in this approach, with the ICSP commissioning local delivery of the training to multi-agency groups.

These programmes require significant support in co-ordination and organisation. Between May 2005 and July 2006 there was a temporary post of Family Support Programmes Co-ordinator based with project who fulfilled this role. Since then the support role has been provided by the ICSP.

Also in the early stages we funded and commissioned training for 20 practitioners in Baby Massage, with co-ordination of this now being undertaken by a local Health Visitor.

In 2007 the ICSP commissioned and had delivered locally training to 20 staff on the Handling Children's Behaviour programme.

One of the things the ICSP initiated was to bring together all the above trained practitioners to establish more coherence and co-ordination in what is being delivered, where, when and by whom.

2. Consulting with families and other key stakeholders

A consultation on family support services in the early years was commissioned by the ICSP in 2006, and completed by the end of that year. The consultation involved focus group work and structured individual interviews with service users by the external consultant as well as one focus group session with staff involved in family support work. The report will inform the work of the children's services plan Looked After Children & Family Support which aims to conclude a multi-agency family support strategy as part of the new integrated children's services plan.

3. Enhancing existing and develop new family support services

3.1 Piloting generic family support work e.g. support for parents and children from the pre-natal stage through the range of services

The principal development under this heading has been the joint SNIPS / Social Work Family Support service.

The ICSP was involved in working with the service on design of this development, thereafter the initiative was taken forward by the managers and practitioners in social work and health, with the development of joint processes as well as direct service delivery.

After that pre-natal stage, the main contribution of the ICSP has been in the development of family support programmes as described above.

This development was consolidated as permanent in April 2006.

At the time of the inception of the project and the CCSF, funding was agreed to continue the post of Vulnerable Children's Health Worker on an extended temporary basis. This ended in March 2006, with a significant amount of the remit having in any case being subsumed by the Child Protection Nurse Specialist. However, continued funding was provided, and is now consolidated, to support 2 posts of Health Visiting Family Support Worker in health primary care. Both of the workers concerned have been significantly involved in the joint delivery of family support programmes such as Mellow Parenting through the ICSP.

3.2 Examining the feasibility of developing existing family support bases and services

The ICSP in consultation with others looked thoroughly into the feasibility of developing bases for the delivery of enhanced family support work through 2003/04. This included examination of one particular possibility, which in the end was assessed as being unsuitable for the purpose.

However, CCSF funding was deployed in 2006/07 to support the re-provision for Rainbow Family Centre in Port Glasgow. The project team and the early years manager together with others have worked on developing a service model which will see the new-build centre as operating as a hub and focus for the delivery of a range of joint work in family support as well as a provider of pre-school education and child care. The centre opened in December 2008.

3.3 Enhancing educational psychology services for joint family support programmes & work

This development was not in the original CCSF proposal, but was developed jointly by the ICSP and Psychological Services. As noted in development 9 under Objective 3 above, the approach taken was to expand capacity within the service to enable it to engage more widely in family support initiatives. One key example of this is that 2 of the Educational Psychologists in the service have trained in and delivered the Mellow Parenting programme. From April 2007 the additional resources were consolidated to establish an additional 0.5 FTE permanent post in the service.

3.4 Piloting integrated transport and escort services

This development appeared under in the original proposals for the deployment of the CCSF. The funding provided for an additional Escort/Contact Worker posts in the Social Work Services' Family Support Resource Team.

ICSP was involved in guiding and advising on the original service proposal and ensuring the deployment of funding. Since then it has been taken forward by Social Work Services, with the ICSP's main involvement being through supporting. This development was consolidated in April 2008.

3.5 Supporting new developments in mobile crèche provision to ensure access to family support e.g. drug clinics, day hospitals

This proposed development appeared in the original proposals for the CCSF.

However, during 2003 the ICSP consulted with various services and re-examined this proposal. It assessed that this was not a priority area for development in light of existing service provision which could be accessed / purchased in the area and other developments which aided improved service access, and the proposal was therefore not taken forward.

3.6 Developing Integrated Community Schools pupil / parent support services

This development involved providing funding to augment the existing ICS teams in Invercive – essentially by 2 posts, though in 2004/05 transitional funding was provided for 4 because of a funding gap.

The service model has remained much the same, with the additional resources essentially supporting wider coverage by the service which has now developed to cover all educational establishments in the Inverclyde area.

The project has worked with ICS to support other developments within their service, for example the Consequences programme on relationships for pupils in the middle stages of secondary school, transition programmes and in training ICS staff in the Handling Children's Behaviour programme. As noted earlier the ICSP project manager has from the start been a member of the ICS Strategy Group.

This development was consolidated in April 2008.

4. Developing improved multi-agency child protection work under the direction of the Child Protection Committee

4.1 Establishing the post of Child Protection Lead Officer reporting to the Child Protection Committee

This development was devised as a proposal in 2003/04 and enacted in 2004/05, with the post initially designated as Child Protection Co-ordinator, but redesigned and implemented as the Child Protection Lead Officer in 2006/07. The ICSP did support some of the initial development in designing the post, but thereafter work was taken forward by the Child Protection Committee.

This post and the associated budget, together with the other administrative posts related to child protection work in Social Work Services were consolidated as permanent in April 2006.

4.2 Developing multi-agency child protection training and information for agencies and the public

The most significant contribution of the ICSP in relation to this objective was to establish, in autumn 2003, the commissioned and locally delivered training for the Dundee University Certificate in Child Protection Studies for a multi-agency cohort of staff.

This commissioning was repeated in 2004, 2005 and 2006. Responsibility for this aspect of work, together with the whole area of information for the agencies and the public, now rests with the CPC and the Lead Officer.

4.3 Providing interim funding support to the new post of Child Protection Nurse Specialist for Inverclyde

This was an interim arrangement using funding through the CCSF to establish this new post in 2004, with the health service taking on responsibility for the funding from 2004/05.

There were and continue to be links between the project and this post, and this is much more significantly the case for the Child Protection Lead Officer.

5. Establishing a new post of Children's Rights & Information Officer for Inverclyde

This development was formulated and implemented in 2004/05. This was the first time the Council had established a post specifically dedicated to promoting children's rights as specified in the UN Convention on the Rights of the Child.

The support provided by the project to the postholder was strengthened in early 2007 when the ICSP project manager took over the role of line manager for the CRIO.

The post has developed in a range of ways, providing information and advice to both young people and staff in the agencies on children's rights. It involves significant levels of engagement with schools, including primary schools undertaking project based work around children's rights (including those seeking the UNICEF Rights Respecting Schools award).

The post has also developed the Children's Rights Impact Assessment framework for Inverclyde, based on the model devised by the Office of Scotland's Commissioner for Children & Young People.

The ICSP Project Manager chairs advisory group for the post and has prepared reports to Committees and the Council's Corporate Management Team.

6. Providing nursing / health clinic support targeted to Looked After Children

Through 2003-06 some CCSF resources were provided to enable school nursing staff to deliver health care advice and support to Looked After and Accommodated Children & Young People.

In 2007/08 it was agreed that the available resources would be consolidated, but a different approach would be taken by developing a specific post of Looked After Children's Nurse. This involved part-funding from previously CCSF resources consolidated into the overall grant to the Council, with the remainder being provided by NHS Greater Glasgow & Clyde through service redesign.

The ICSP was involved in the design of the new post, but this in the main was taken forward jointly by the CHP and Social Work Services.

This dedicated service is now in place.

7. Establishing a temporary post of Throughcare Development Worker

Throughout the last 5 years the provision of services to care leavers has been a continuing priority with respect to the implementation of the revised arrangements for their financial support through the transfer of DWP monies and the policies emanating from national government.

The CCSF provided some support to meeting the challenge of introducing a raft of new policies and procedures, together with enhanced direct support for this group of young people, initially through the funding 1 FTE post and latterly with funding for 0.5 FTE with the remaining 0.5 funded by Social Work Services.

It is worth noting that the postholder has undertaken significant joint work with the CRIO, including that for the Talkback consultations with young people who are looked after and accommodated.

This post was consolidated in April 2008.

Self-Evaluation

Achievements / outcomes which the project promoted under this priority heading include:

- Training multi-agency cohorts of staff in family support programmes such as Baby Massage, Mellow Parenting, and Handling Children's behaviour and supporting / co-ordinating delivery of these.
- Commissioning and overseeing to conclusion a consultation on family support services in the early years.
- Establishment and consolidation of a joint service initiative involving the Social Work Services Family Support & Resource Team and the health SNIPS team. This service has won a UK national and a COSLA award. Between the period April 2004 to March 2006 the service responded to referrals on 183 women.
- Contributing to the funding and the service design plans for the re-provision of Rainbow Family Centre.
- Contributing financially and strategically to the development and delivery of Integrated Community Schools
- Developing multi-agency child protection training through the commissioning of the local delivery of the Dundee University Certificate in Child Protection Studies and participating in the local development of other courses, for example communicating with children
- Supporting the Child Protection Committee in establishing and developing the post and role of the Child Protection Lead Officer
- Establishing the post of Children's Rights & Information Officer, with the ICSP providing an increased level of direction for the development of the post through the project manager taking on the role of line manager
- Supporting the development of Throughcare Services in response to the national changes in the arrangements for the financial assistance to care leavers and the requirement to provide enhanced care planning and support.

It has to be recognised that the third of the proposed outcomes, securing decreases in the number of children being looked after and the number of children on the child protection register was not achieved.

For example, in March 2004 there were 215 Looked After Children, in March 2007 there were 272 – an increase of over a quarter. However, it needs to be acknowledged that this statistic reflects national trends.

It is worth noting that 5 of the developments described under this heading have been consolidated through the CCSF monies transferred to the overall central government grant to the Council, 1 has been taken on in whole on a permanent basis by the agency, and 1 has been consolidated through a combination of former CCSF and agency monies.

Objective 6: Develop services for young people with substance misuse problems

Proposed Outcome

6.1 Reduce the number of young people misusing substances

Development Activity

Establish and develop the INDIE Project

Progress

The INDIE Project was already established prior to the inception of the ICSP through that element of the CCSF that was brought in early, and at a later stage incorporated into the main CCSF.

The original project profile included other external funding secured from Lloyds TSB, but this was brought to an end after 2 years. The ICSP Project Manager worked with the responsible Social Work Service Manager to redesign the service configuration in response to the changing funding profile, and throughout the last three years to manage other changes in the service design that have been required.

The project is now incorporated into and managed through Social Work Services' Youth Support Service rather than being a separate, free-standing project.

The service has undertaken a range of work including direct interventions with individual young people, delivering a range of group work interventions and educative programmes to young people, establishing a peer training programme, delivering training to staff groups, and the development of resource / information packs.

INDIE was consolidated permanently in April 2008.

Self-Evaluation

This development was been affected by staffing issues over a significant period, with a consequent impact on the level of service provided. At the end of 2005/06, 44 individual young people were being provided with a service and there was a waiting list of 11 young people. Since then the numbers have declined, although the service continues to provide input to LAAC reviews, residential team meetings and children's hearings.

Of the 4 peer educators, all of whom were drug users, 3 have ceased substance misuse and 1 is adopting a harm reduction approach.

In the 2007 review of the project, self-assessments of the young people provided with the service 44% reported cessation or reduction in substance misuse, 25% reported increased attendance at school/college, and 16% cessation or reduction in offending.

3. Conclusion

The following are some concluding observations I would make as ICSP Project Manager:

- 1. In the first 2 years the project played a significant role in helping the various services establish the agreed funded developments as the amount of resource increased incrementally (and was augmented by carry forwards). Obviously a plateau was reached where all that could be put in place and resourced was achieved.
- 2. Over the whole lifetime of the project the most significant advances in terms of integrated service delivery have undoubtedly been in relation to children with disabilities / Additional Support Needs. Much, though not all of this has been focused around the proposed co-location of the Skylark Child Development Centre, Community Children's Nursing, and the Social Work Services Children with Disability Team, which has yet to be enacted.
- 3. A significant amount of time was taken up with budget planning, monitoring and reporting. This was undertaken by the project manager, with support from the project administrator and finance staff in Social Work Services which held the CCSF budget. This requirement ceased from April 2008.
- 4. Multi-agency training was a particular feature of the project's work, and always focused around enhanced practice for joint working and integrated service delivery.
- 5. Similarly, the project has contributed significantly to children's services planning work through the various strategic groups and activities.
- 6. The IAF was one of the original project priorities which is yet to be fully realised. A stage has been reached where we have a set of documentation and processes that we are beginning to be implemented. However, significant work remains in rolling this out across all the relevant agencies and services through training and support for implementation and in incorporating it into a wider range of processes. Also, it needs to be acknowledged that the Getting It Right For Every Child programme and the IAF will for the foreseeable future be subject to further change and development in response to local experience and national developments.
- 7. It is also worth noting that the project has also had a role in the development and delivery of parenting programmes, particularly Mellow Parenting which was highlighted in the recent Child Protection Inspection Report as an area of good practice.

Will Brown Project Manager Integrated Children's Services Project 31 March 2009

APPENDIX Feedback from agencies and services

This section provides a brief summary of the responses from agencies and services to a standard questionnaire that sought their views about the performance and progress of the project. This exercise was undertaken towards the end of 2007, at a time when the end of the CCSF was approaching.

The questionnaire invited staff to give ratings on the project's progress with reference to 4 key objectives with space for comments on each, and also invited further comments of possible future priorities and objectives for integrated children's services.

The rating scale was based on that used by HMIE for evaluation frameworks such as 'How Good Is Our School':

6 Excellent	the project has fully achieved the objective and/or demonstrated significant innovation, leadership, and support to your agency /service
5 Very Good	the project has significantly achieved this objective and/or demonstrated innovation and leadership and provided significant support to your agency / service
4 Good	the project has in the main achieved this objective, but might have improved on this / in demonstrating more innovation and leadership and support to the services
3 Adequate	on balance the project only just achieved this objective and might have performed much better on it and with reference to innovation / leadership and support
2 Weak	the project did not make significant progress on this objective and was deficient in demonstrating innovation, leadership and support to the agencies / services
1 Unsatisfactory	the project did not achieve this objective at all and contributed nothing by way of innovation, leadership and support

The following is a brief summary analysis of these returns, the full version of which is available and has been considered by the ICSP Steering Group.

The analysis gives the average rating given against the objectives and comments by the ICSP Project Manager.

Objective 1: Providing a framework for the development of better- integrated children' services		
Average rating	4.4	
Project Manager's comments	3	
It is fair to say that there were quite a wide range of views about this. However the average rating and some of the comments suggest that a number of the key stakeholders felt that the project had made a significant impact in promoting joint working and integrated service delivery overall.		
Objective 2: Developing associated protocols for inform	an Integrated Assessment Framework and ation sharing	
Average rating	3.5	
Project Manager's comments	3	
It should be noted that the feedback and this average rating was provided towards the end of 2007. Undoubtedly at that time a number of practitioners felt a degree of frustration that progress towards a local model for the IAF had been slower than had been hoped. There was recognition that at least in part this resulted from slow progress at national level and the staffing changes within the project.		
However, since that time the described in the section on Object	bace of progress has quickened significantly as tive 2 on page 13 of this report.	
Objective 3: Developing enhanced multi-agency support for children with disabilities (including those with mental health needs)		
Average rating	4.6	
Project Manager's comments	3	
A significant number of respondents indicated that that was the objective for the project had demonstrated the greatest degree of success. This was with reference to service developments, improved joint processes and integrated and working practices, and the development and delivery of a wide range of multi-agency training opportunities.		
The one key development that remains outstanding, which was outwith the project's control, was the proposed co-location of the staff in Skylark Child Development Centre, Community Children's Nursing and the Social Work Services Children with Disabilities Team.		
Objective 4: Developing integrated and responsive family support services and systems		
Average rating	4.1	
Project Manager's comments		
There were a range of views expressed in relation to the perceived progress on this objective.		
There recognition of examples of good developments and practice, including the SNIPS initiative and Mellow Parenting, but also several respondents felt that more work was needed to develop more fully and meaningfully integrated services and working practices in family support work.		

Future Priorities / Objectives

Respondents were asked to describe any priorities for the next 1-3 years in relation to the integrated children's services agenda.

In summary, some of the key points highlighted by respondents were:

- **The IAF**, including the identification of a new technology solution and an emphasis on the need for a dedicated co-ordinating resource to drive this forward locally. There was also strong advocacy for monitoring and thorough evaluation of the effectiveness of the IAF post-implementation.
- More integrated **family support services** in terms of better use of resources but also to ensure that families get the best possible, consistent support when they need it. This included integrated care and support for Kinship Carers.
- The development of an integrated model of working with **children and young people with disabilities** and their families.
- Co-location of the Child Development Services.
- Mental Health promotion, including in the early years.
- Educational attainment for Looked After Children (whether looked after at home or looked after and accommodated).
- Continued support to multi-agency teams in delivering **Mellow Parenting**, **Handling Children's Behaviour and Baby Massage programmes**.