

Services for children and young people in East Ayrshire

March 2018

Report of a joint inspection

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1. Introduction

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

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

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

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

In September 2014, the Care Inspectorate published 'How well are we improving the lives of children, young people and families? A guide to evaluating services for children and young people using quality indicators'. This framework is used by inspection teams to reach an independent evaluation of the quality and effectiveness of services. While inspectors keep in mind all of the indicators in the framework, we evaluate nine of the quality indicators in each inspection, using the six-point scale as set out in Appendix 2. These nine indicators are chosen for evaluation because they cover the experiences of children, young people and families and the difference services are making to their lives; the outcomes partners collectively are making in improving outcomes for children across the area; and key processes which we consider to be of critical importance to achieving positive outcomes for children and young people. These are leading change and improvement; planning and improving

services and involving children and families in doing so; and assessment and planning for children who are particularly vulnerable, including children and young people who are looked after or in need of protection.

2. How we conducted the inspection

The joint inspection of services for children and young people in the **East Ayrshire community planning partnership** area took place between 28 August and 10 November 2017. It covered the range of partners in the area that have a role in providing services for children, young people and families.

We reviewed a wide range of documents and analysed inspection findings of care services for children and young people. We spoke to staff with leadership and management responsibilities. We carried out a survey of named persons and lead professionals. We talked to large numbers of staff who work directly with children, young people and families and observed some meetings. We reviewed practice through reading records held by services for a sample of 104 of the most vulnerable children and young people. We met with 190 children and young people and 43 parents and carers in order to hear from them about their experiences of services. We are very grateful to everyone who talked to us as part of this inspection.

The Care Inspectorate regulates and routinely inspects registered care services provided or commissioned by East Ayrshire council. For the purposes of this inspection, we took into account findings from inspections of all relevant services for children and young people undertaken over the last two years. We also referred to a report of a joint inspection of services to protect children in the East Ayrshire council area published by Her Majesty's Inspectorate of Education in March 2010, to consider what progress had been made in the areas for improvement outlined in that report. You can find this report at www.educationscotland.gov.uk

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

3. The community planning partnership and context for the delivery of services to children, young people and families

East Ayrshire is situated in south west Scotland and covers 1,262 square kilometres (127,033 hectares) spread over both urban and rural communities. Kilmarnock is the largest urban area with a population of around 44,000. The rest of the population lives in smaller communities, ranging from less than a hundred people in some villages and rural areas to around 9,000 in Cumnock, the second largest town. NHS Ayrshire and Arran covers the three local authority areas, which consist of East Ayrshire, North Ayrshire and South Ayrshire. East Ayrshire has a population of 122,150 of which 21.4% are aged 0-19. From the 2014-based population projections, the population of East Ayrshire is due to decrease by 4% by 2039 while the under 0-15 population is due to decrease by 9% by 2039.

There are sharp contrasts in the economic characteristics of communities across East Ayrshire. Some experience significant deprivation while others are relatively affluent. In the north of the authority, high levels of deprivation co-exist with the relatively wealthy commuting population, which continues to increase. The Scottish Index of Multiple Deprivation (SIMD) highlights that 20% (1 in 5) of East Ayrshire residents live in the 0-15% most deprived areas in Scotland and East Ayrshire has the tenth largest proportion of population categorised as most deprived. Almost 5,700 children in East Ayrshire are estimated to be living in poverty (after household costs), representing more than a quarter (28%) of the child population. This is the third highest of local authority areas in Scotland and higher than the national average rate of children who live in relative poverty in Scotland.

Five areas in East Ayrshire experience deep-rooted deprivation in Scotland with data zones consistently among the most deprived 5% in Scotland, since the SIMD of 2004. With a significant proportion of East Ayrshire's children and families living in deprived areas, the local authority is one of nine areas to receive additional support in the form of targeted funding to schools, through the Scottish Attainment Challenge.

Community planning in East Ayrshire is undertaken by East Ayrshire community planning partnership. The partnership's community plan 2015/2030 is recognised as the sovereign planning document for the East Ayrshire area, providing the overarching strategic policy framework for the delivery of public services by all partners. The community plan, underpinned by East Ayrshire's **single outcome agreement**, sets out the community planning partnership's ambition for East Ayrshire for delivering and achieving improved outcomes for children, families and communities. The community plan is implemented through three thematic delivery plans, namely economy and skills, safer communities, and wellbeing. Locality planning is founded on aggregate multi-member wards with service delivery based on multi-disciplinary working developed around people in communities. Three

localities have been established: Kilmarnock; Northern (Annick & Irvine Valley) and Southern (Ballochmyle, Cumnock & Doon Valley). These localities are aligned to education area boundaries and the children and young people strategic partnership arrangements. Responsibility for children and young people's strategic planning lies with the East Ayrshire community planning partnership board. The board has delegated the responsibility for overseeing children and young people's strategic planning to the children and young people's strategic partnership.

4. How well are the lives of children, young people and families improving?

Improvements in the wellbeing of children and young people

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

Performance in improving outcomes for children and young people in East Ayrshire was very good. Despite challenges associated with high levels of poverty and deprivation, positive outcomes were being achieved across a number of important measures. Effective joint working and universal and locally targeted approaches to prevention and early intervention were helping tackle the consequences of child poverty and addressing inequalities. Closing the poverty related attainment gap between the most and least disadvantaged children and young people was a partnership priority. Positive trends were being achieved in addressing health and wellbeing outcomes, in some instances sustained over several years. Partners were achieving success in improving the wellbeing of many vulnerable children and young people. This included ensuring more stability for those who are looked after, reducing homelessness among young people and increasing opportunities for employment, further education and training. Further concerted efforts are needed to ensure children looked after at home and in kinship care improve equally.

How well are trends improving through prevention and early intervention?

There were early indications of positive impact of joint work in tackling the effects of child poverty. Significant progress had been made in delivering the financial inclusion strategy with increased levels of income generated for families and coordinated approaches to tackle food and fuel poverty. The total number of primary school children taking free school meals had increased across the whole school roll in 2016/17. Nearly a third (31%) of entitled two-year-olds accessed an early learning and childcare place within an early childhood centre, partner centre or community child minder, exceeding the national figure of 27 per cent. There was a high uptake of free SHOUT cards that enabled vulnerable or low-income families to access sport and leisure activities at discount or no cost.

A wide range of health improvement initiatives and wellbeing strategies were helping tackle inequalities in communities. The public health team worked with partners to develop robust health and social outcomes profiles for children and young people at a locality level to inform the likelihood of adverse childhood experiences, including exposure to domestic abuse, parental substance misuse and mental health problems. This data was used when planning services and support. Improving trends were being achieved against key child and maternal health outcomes, and performance compared favourably against the national average on some measures.

This included the uptake of immunisations and healthy start vitamins, child healthy weight, the number of pregnant women misusing drugs, and children's oral health. The percentage of children registered with an NHS dentist had increased across all age groups except 0-2 years since 2014 and was now better than the national average. All early years settings and primary schools delivered the Childsmile national preventative dental care programme to improve children's oral health. The percentage of pregnant women accessing early antenatal care was 93% compared to 89% nationally. Importantly, performance was above the national figure for women living in the most deprived areas. The number of women successfully stopping smoking in pregnancy was on an upward trend, although still significantly above the national average.

Conversely, trends for exclusive breastfeeding rates remained significantly lower than the national rate, at 16% compared to 27% nationally. The uptake rate for children's 27-30 month developmental reviews was higher than the national average and identified concerns about a higher proportion of children, particularly speech, language and developmental concerns. Partners had developed the Linking Language and Literacy initiative, through the children and young people's improvement collaborative, which showed total concerns related to speech, language and communication falling from 31% (2014 baseline) to 12% in 2016. This exceeded the initial **stretch aim** of achieving a reduction to 20%. The challenge remained to scale up the reach of this effective early intervention initiative to ensure more children across East Ayrshire could similarly benefit.

There was a strong downward trend in the percentage of 15-year-old pupils who reported consuming alcohol on a weekly basis, from 37% to 19% between 2006 and 2015. The prevalence of drug use among 15-year-olds also indicated a positive downward trend. Admissions to hospital for unintentional injuries in children under 15 years had reduced significantly over the last three years.

Commendable multi-agency diversionary approaches were successfully identifying and intervening with young people at risk of offending and seeing a steady reduction in anti-social behaviour incidents over the past three years. Young people were provided with early and appropriate levels of support and activities to prevent them re-offending. A wide range of targeted community safety initiatives focusing on education and awareness raising was helping reduce the risk of harm to children and young people from deliberate fire raising incidents, house fires and road traffic crashes.

How well are outcomes improving for children and young people?

A comprehensive range of health training, education, campaigns and improvement initiatives was ensuring all young people have access to information and skills to make healthy choices about their sexual health. Teenage pregnancy rates were reducing steadily although remained above the national average. Babies born with

low birth weight had reduced overall. While perinatal, neonatal and infant deaths remained higher than the national average, stillbirths had fallen. Levels of childhood obesity were in line with comparator areas.

Capital investment in schools and early years provision was delivering high-quality learning environments. The nurture approach delivered in schools was having a positive impact on children and young people's social and emotional wellbeing and learning. Inspection reports by Education Scotland were very positive about early years, secondary and special school establishments over recent years, with quality in both process and outcomes across these sectors being evaluated mainly as good and very good. In a few recent inspections of primary schools, lack of a clear and consistent approach to tracking and monitoring children's attainment and achievement had resulted in the quality of attainment and achievement being evaluated as weak.

Between 2013 and 2015, the percentage of school leavers attaining literacy and numeracy at Scottish Credit and Qualifications Framework (SCQF) levels 4, 5 and 6 was above or equivalent to **virtual comparators** and national performance.

Positively, attainment for the lowest attaining 20% of all school leavers was above the virtual comparator, and the gap between East Ayrshire and the national figure was reducing. SCQF level 4 performance in literacy and numeracy in 2016 was below the national average, although in line with the virtual comparator. At SCQF level 4, attainment for S4 school leavers remained below the virtual comparators, but with an improvement trend evident since 2013. As an Attainment Challenge authority with one of the highest concentrations of deprivation, those children most affected by the poverty related attainment gap were being supported by targeted improvement activity in literacy, numeracy and specific areas in health and wellbeing.

Reducing exclusion for all children was a stretch aim for partners. They had renewed their exclusion strategy, providing alternatives to exclusion and developing support for schools to maximise inclusion of all children and young people. Most recent figures up to week 12 of the 2017/18 session showed that the rate of exclusion for all children had reduced by 50% in comparison with the same period the previous year. Exclusion rates for primary and secondary children living in the most deprived areas had reduced by almost a quarter between 2008/09 and 2014/15. There had been more limited success in reducing exclusions of some looked after children. We say more about this in the following section.

Trend data showed overall improvement in the percentage of school leavers with positive destinations. Tackling youth employment was also a strategic priority for partners. Efforts by partners had seen the number of 16-24 year olds claiming benefits related to employment reduce year on year to below benchmark comparators, while the gap against the national figure was also narrowing.

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

Positively, given the deprivation profile in East Ayrshire, the number of looked after children had reduced from 508 in 2011 to 463 in 2016 as a result of a strategic approach taken by partners. The overwhelming majority of children (92%) were now supported within community settings compared with 90% nationally. The number of looked after children in kinship care had increased year on year since 2012, from 79 to 212 in 2016. However, data collection that is focused on outcomes for these children needed strengthening. Overall, children were benefiting from stability in their placements, with just three out of 388 children experiencing multiple moves in the last 12 months. More young people were remaining in foster placements and children's houses beyond their eighteenth birthday. Both of these trends suggest that placements are matching children's needs well.

The number of care leavers staying in touch with services rose from 157 to 186 in the three-year period to 2016/17. A higher proportion than average of care leavers was in employment, education or training. Homelessness among young people eligible for aftercare services was low. Only one young person out of the 77 who were eligible for support in 2016 experienced homelessness and 21 out of 25 young people sustained their tenancies.

Child and adolescent mental health services were exceeding the national service delivery standard; 94% of children referred were seen within 18 weeks against a standard of 84%. The number of young carers registered as receiving support had increased by 20% from those registered in 2014.

The **child protection committee** had a robust approach to quality assurance and performance measurement. They were monitoring and asking searching questions about the reasons for any trends. For example, there was an upward trend in child concerns being reported by police to social work services from 664 in 2011/12 to 1,467 in 2015/16, which partners thought was a result of increased identification of concerns in the community. Conversely, recorded domestic abuse incidents had fallen, which partners believed was due to under-reporting of incidents.

While the wellbeing of more vulnerable children and young people demonstrated some important and improving trends, partners recognised the need for focused action to improve the educational attainment and personal outcomes for looked after children, in particular, those looked after at home and in kinship care. There were improving trends in the percentage of looked after school leavers attaining literacy and numeracy at SCQF level 5 and 6, above the national performance figure in 2016. However, improving educational attainment at SCQF level 4 remained challenging with a significant drop in performance between 2015 and 2016 in comparison with both the virtual comparator and national figure. Closing the poverty

related attainment gap between the most and least disadvantaged children and young people was a partnership priority.

Youth unemployment in the area still remained high at 5.6% as at June 2017, compared to the Scottish average of 3.8%. However, despite the significant challenge of the employment profile, partners had achieved a steady reduction improvement from a high of 7.8% in 2014. The majority of care leavers secured positive destinations in both initial and follow-up surveys (75%) and this is similar to the national average. Coordinated and targeted one-to-one approaches through the well-established care leavers tracking forum was delivering positive outcomes for care experienced young people by supporting them to secure and sustain a positive destination.

Efforts to improve outcomes for the most vulnerable children and young people were being addressed through the corporate parenting action plan and kinship care action plan.

Impact on children and young people

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

The impact of services on the wellbeing of children and young people growing up in East Ayrshire was very good. Most children and young people were living in caring and nurturing environments either with their parents, kinship carers, foster carers or in children's houses. They benefitted from helpful approaches adopted by staff in universal services or from staff providing targeted support to children and families who need extra help. Children were thriving as a result of trusting relationships built with staff in school or in their care placements. Children and young people felt valued and listened to and their views respected. Children we spoke to and those who completed a wellbeing survey felt safe in their schools and communities. Most vulnerable children were kept safe either through effective support being given to their family or by providing alternative care arrangements. However, a few children remained at home in potentially risky situations for too long before effective measures to keep them safe were taken. Children and young people accessed a range of free or discounted activities through SHOUT cards although more preschool children and children in kinship care could have benefitted from extending the use of these cards. Children with additional support needs were more active and included through creative use of self-directed support. Children and young people were given opportunities to both take responsibility and be responsible citizens within their schools and communities.

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

A strong focus on keeping children safe in schools and the community was helping children to feel safe. A wide range of preventative and diversionary activities including workshops, road shows, theatre and street-dance programmes increased their knowledge and awareness about keeping themselves safe. Children learned how to use the internet safely as well as about the dangers of knives. Many children and young people in schools benefitted from Protecting People work, which provides multi-agency, co-ordinated public protection awareness on issues relating to alcohol and drugs, domestic abuse, personal safety and risk. Senior pupils were helping raise awareness of low-level violence and domestic abuse to other children in their school through the Mentors in Violence Prevention programme. Campus police officers and the Ayrshire College campus liaison officer provided safety advice and support to young people and collaborated with school staff on risk assessment and planning to keep children safe. Children were confident that they knew who they could speak to if they had a problem or concern and felt teaching staff listened to their concerns and acted upon them. In particular, they knew what to do if they were being bullied.

Many children in need of protection benefitted from staff working well together to reduce risks such as domestic abuse, sexual abuse, parental addiction or self-harm. Most vulnerable children were kept safe either through effective support being given to their family or by providing alternative care arrangements. Carefully considered contact arrangements allowed children to feel safer while having contact with their parents. A few children were left in potentially risky situations for too long, particularly those experiencing domestic abuse or neglect. Some care leavers and victims of domestic abuse were being kept safer by using tele-enabled products called SMART supports, which monitored movement and could record evidence through the risk management centre which could, if necessary, contact the police.

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

A wide range of health promotion activities was improving children's physical and emotional health, confidence and self-esteem. Health visitors worked effectively with parents and carers with young children, supporting them to improve family health, providing advice around nutrition, immunisations and dental health. Staff in early-childhood centres supported healthy lifestyles by providing healthy snacks and promoting physical activity including the Daily Mile or daily dance. School nurses provided specialist health interventions as well as health drop-in sessions for secondary school children. A social enterprise called Centrestage worked successfully with vulnerable or socially isolated children and families, providing them with opportunities to eat a healthier diet and prepare healthy foods through the Fun, Food, Folk activity programme. Some children successfully reduced their body mass

index through healthy weight programmes for children, such as Mind, Education, Nutrition, Do-it! (MEND). Most children whose names were on the child protection register were having their health needs met well, supported by the team around the child. However, for a few children and young people looked after at home or receiving aftercare services, their plans were not reviewed often enough to ensure their emotional health needs were fully met.

Children were being helped to increase their confidence and self-esteem, leading to improved emotional wellbeing and mental health, promoted through a range of approaches including nurture-based practice, Roots of Empathy, Seasons for Growth and restorative practices. A mental health nurse seconded to the intensive support team supported the mental health needs of looked after children as well as helping to prevent young people entering secure care.

How well are children and young people helped to achieve?

Children were given many opportunities to achieve both in and out of school. An extensive range of activities was available across services and children were encouraged to participate. Activities included national digital learning week, maths camps, outdoor learning programmes, an annual art and design exhibition and a musical spring spectacular showcasing the creative talents of over 500 children and young people. Staff worked well together to deliver additional and flexible supports such as enhanced transitions, intensive one-to-one support, mentoring and alternative school timetables. This had resulted in better attendance, behaviour and progress in learning. For some care leavers and young people with additional support needs or disabilities, development of employability skills was leading to qualifications, work and college placements, modern apprenticeships and employment through supported programmes including Project SEARCH and WG13.

The availability of nurture classes and bases in early childhood centres and schools was allowing children to learn in a more supportive, flexible environment. Most vulnerable children and young people were helped by a range of services to achieve and develop wider interests outside school. Children and young people in residential placements benefitted from developing good relationships with carers and were encouraged to participate and achieve in both school and community activities. They were offered additional support to learn by a teacher working within children's houses. Despite high levels of support in early childhood centres and education settings, for some more vulnerable children, learning was compromised because of conditions at home. Although the attainment of looked after children and young people was improving, partners recognised this needed to improve further, particularly for those children looked after at home.

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

A strong collective focus on relationship-based practice was making children feel cared for and nurtured. Children were able to share their thoughts and feelings well with staff through the Starting a Conversation (Wellbeing Web tool) which allowed staff to measure improvements in children's wellbeing. When children were at risk of harm or neglect, staff worked hard to support parents to improve their parenting and provide more nurturing environments. These efforts were largely successful and as a result, most children were benefitting from improved nurturing, better relationships with parents or carers and more stability. Across services, staff including early years' practitioners, family support workers and staff from the intensive support team showed commitment and resilience in the face of ongoing challenges to provide practical as well as nurturing support. A few children living at home were still experiencing the impact of poor nurturing relationships despite staff working tenaciously and intensively with their parents.

Young people in residential care had very positive relationships with staff. The model of nurture and care provided within children's houses was changing behaviour and relationships for the better. More young people living away from home were experiencing stability as a result of having fewer placement moves. The majority of older young people in contact with services benefitted from effective support to move to independent adulthood. This help resulted in them being able to establish and maintain secure, safe and supportive environments for themselves. Most care experienced young people were helped to move to independence as young adults by effective support from East Ayrshire Supported Carers.

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

Children and young people benefitted from a wide range of community sport and recreation activities including football, swimming, afterschool clubs, early years play and sport mentoring programmes. The Vibrant Communities service was supporting communities to reclaim their open spaces for play and a range of outdoor activities. More than half the population of East Ayrshire's children and young people attended the annual play day in 2017. The Play and Activity Motivation (Early Years) initiative for toddlers and parents and Active Motivation initiative in children's houses were examples of programmes successfully encouraging children and young people to become more active. Children with additional support needs attending special schools benefited from a range of physical activities with the help of a youth worker. Access to **self-directed support** had helped some children become more active. Most young people living in children's houses were supported to take part in a range of physical activities. The availability of SHOUT cards allowed vulnerable or low-income families to access a range of sport and leisure activities at a discount or no cost. All children looked after away from home or receiving aftercare services also had free access to summer activities with their SHOUT cards. However, more

preschool children and children in kinship care could have benefitted from extending the use of these cards.

How well are children and young people respected?

Many children and young people benefitted from a range of opportunities to express their views or contribute to service planning. Both the community planning partnership's and the health and social care partnership's participation and engagement approaches were very effectively supporting a wide and diverse range of routine consultation and engagement with children and young people of all ages. Feedback from young people involved in these activities indicated that they felt more listened to and that their views mattered. Vulnerable children and young people's views were routinely sought by staff working with them. They engaged well with them, using the Wellbeing Web tool, Having Your Say forms and attending meetings where decisions about their own individual plans were being made. Staff were vigilant to the reactions and behavioural responses of very young children and this was used to influence care planning. The majority of children were supported effectively to understand their rights. Independent advocacy was provided to looked after and accommodated children through WhoCares? Scotland and had been extended to include very young children and babies involved in the permanency planning process, which was helping reduce unnecessary delay. Some children looked after at home could have also benefitted from having access to independent advocacy.

The AspiretoCreate group used arts to explore ideas and themes and create a positive identity for care experienced young people. Children with disabilities had their views listened to through ongoing contact with guidance staff, regular participation in nurture sessions, the Abilities Conference and inclusion in the Children and Young People's Representative Forum. They also benefitted from inclusion in decision-making processes about their needs and interests through creative use of self-directed support.

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

Early years staff were assisting and encouraging children to make choices and establish routines which were helpful to them. Younger children benefitted from helpful support from family support workers and early years practitioners who were engaging effectively with their families. Many children in primary schools were involved in a variety of groups promoting responsibility, including Rights Respecting Schools, health and wellbeing groups and citizenship groups. Some children also took on mentoring roles to support each other and younger children. Young people involved with lesbian, gay, bisexual, transgender and intersex (LGBTI) groups were responsible for making positive changes within schools. For example, introducing gender neutral toilets and delivering workshops at the 2016 East Ayrshire LGBTI

conference. A growing number of children and young people were gaining increased levels of responsibility from participating in wider achievement awards. Young people with additional support needs benefitted from imaginative use of activities through self-directed support to promote independence and increase responsibility. Most young people receiving aftercare were supported well to develop independent living skills. They were also helped to adhere to boundaries that helped them maintain a safe home environment. However, a few young people had not had enough opportunities and support to learn and develop the skills they needed to live independently. Most young people involved in offending behaviour were supported to take increased responsibility and understand the consequences of their actions by engaging with the **Whole System Approach** programme.

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

The East Ayrshire Employability Pipeline was effectively supporting older young people to benefit from modern apprenticeships, supported employment and work coaches. Children were encouraged to become involved in activities and regular youth conferences meant that young people were able to meet with other children of similar ages, stages or affected by similar issues to discuss relevant issues. Young people believed strongly that their views were listened to and they were part of the solution. The Vibrant Communities service supported large numbers of children, both living at home and away from home. Children and young people benefitted from support built around play and early intervention, sport and diversion and through looking at life skills and inclusion. Youth work, sports development and active schools had become one service successfully providing focused and targeted support to vulnerable children and young people. This was helping to improve resilience and community inclusion through befrienders, essential skills support and home link workers.

Children looked after away from home were maintaining appropriate contact with their family, extended networks and community in a variety of ways. This included staff facilitating personal contact, supervised sessions and, on occasions, letterbox contact. Many young people being supported into independence were helpfully encouraged to build and maintain links within their community. A few children on the child protection register and children living at home who were socially isolated could have benefited from more support to help them feel more included in their school and community. Increasing numbers of children with additional support needs were benefitting from support from the East Ayrshire support team, which was helping to reduce barriers to inclusion and develop their educational opportunities.

Impact on families

This section is about the extent to which family wellbeing is being strengthened and families are supported to become resilient and meet their own needs. It also

considers parental confidence and the extent to which earlier help and support has a positive effect on family life

The impact of services on family wellbeing was excellent. Families were much more resilient and confident because they were experiencing helpful and reliable support from an extensive range of accessible, high-quality, universal and specialist services suited to their needs. The impact of the third sector and social enterprises was highly significant in supporting families to better meet their own needs. Timely, flexible help and support was ensuring positive outcomes for families. Wide-ranging, evidence-based parenting programmes and approaches provided strong focus on parenting and community capacity building, which was reducing families' reliance on specialist support. Early years play programmes, including targeted work with community-based parent and toddler groups, supported parents and carers to increase their parental skills, knowledge and confidence. Preventative work in the community had a strong focus on positive play including the Positive Play in Prisons initiative. Vulnerable families received intensive, targeted and continued support including pre-birth support. Families benefited from positive relationship-based support that created a culture of trust and families felt valued.

Families benefited from very effective and high levels of support that helped them to improve and sustain positive wellbeing, increase parental confidence and strengthen resilience. A wide range of community-based groups, early years play programmes, parenting work and extensive play activities helped families share parenting experiences and reduced isolation. Families with very young children attended baby massage and babies-for-life groups, which helped increase bonding and attachment. Parents and carers were helped to increase their knowledge of child development and confidence in bringing up their children through a wide range of early intervention, universal and targeted supports that were well matched to the needs, age and stage of their children.

Early learning and childcare practitioners, family support workers, health visitors and intensive support workers were improving outcomes for families and building parenting capacity through a range of flexible, evidence-based parenting programmes. A few parents with older children felt that support could be further strengthened around managing teenager behaviours. Most practitioners were trained in the Solihull model which provided a shared approach and language when working with families. The impact of third sector organisations and social enterprises was invaluable in fostering a strong focus on confident and resilient parenting, community capacity building and inclusion. For example, the Centrestage social enterprise connected families and communities by offering children and families' opportunities to widen their experiences by trying something new, developing interests and new skills.

Vulnerable refugee children and families and Gypsy travellers were being well supported to feel part of the community through very effective partnership working across statutory and third sector services. The Vibrant Communities service was making a real difference to strengthening children's, young people's and families' resilience through a range of preventative and early intervention work that focused on positive play. This included the Positive Play in Prisons initiative which was successfully supporting fathers in prison to improve their relationships with their children and to bond with them.

People who had recently left prison and families as part of supervised contact arrangements were being supported to improve family relationships through a range of family intervention programs including Play@Home. Increasing numbers of kinship carers were benefiting from the helpful support provided by the intensive support team and the Vibrant Communities team as well as regular peer support through the kinship carers group. The intensive support team were highly effective in supporting children, young people and families, providing concentrated support at points of crisis, in the evenings and at weekends. Young or vulnerable women in early pregnancy were being effectively supported to have a healthy pregnancy and feel confident about supporting their baby to grow, develop and learn through the innovative family nurse partnership and the safeguarding midwives team.

Parents and carers appreciated the help they received from staff and commented that staff would often "go the extra mile" to support them through regular and meaningful contact. Families clearly benefited from positive and respectful relationship-based support. This allowed them to discuss their needs within a culture of trust and families felt valued. Staff were tenacious in supporting parents and carers who were reluctant to seek help for whatever reason. In a few cases, despite the persistence of staff providing a range of targeted and intensive support to families, improvements had not been sustained. More effective use of **team-around-the-child meetings** would enable staff to make more sound and timely decisions about the help families need where parenting may be compromised. Parents and carers of children with disabilities or additional support needs benefited from the highly developed self-directed support facilitated by the Thinking Differently team and disabilities team through creative use of resources that empowered children, young people and their families.

Targeted work with families around domestic abuse and nurture was helping parents to better understand the impact on their children and respond appropriately to their children's needs. Women and children were helpfully supported by Barnardo's, Women's Aid and the Children Experiencing Domestic Abuse Recovery (CEDAR) group programme to strengthen resilience. Some men participated in the Caledonian programme, an integrated approach to address men's domestic abuse, while their partners attended safety planning programmes. Parents attending addiction services were supported well by children and families addiction staff who

worked closely with adult services sharing information and helping to keep children safe.

A strong partnership approach was helping to tackle the impact of food and fuel poverty on families through highly effective collaborative working. Vulnerable families and young people received very effective co-ordinated support from the Council of Voluntary Organisations' (CVO) East Ayrshire community connectors to minimise poverty and isolation. Increasing numbers of families were benefitting from financial advice from the East Ayrshire Citizens Advice Bureau and the financial inclusion team to maximise their income and provide energy saving advice. Community safety programmes involving a whole-family approach were widely available. Although children were successfully learning about using the internet safely and online behaviour from curricular programmes delivered within schools, the need for more help to increase parental awareness of internet safety was identified by a few parents and carers.

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

Providing help and support at an early stage

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

The extent to which services provide help and support at an early stage was very good. The **Getting it Right for Every Child** principles and wellbeing indicators were used effectively by staff to bring a shared understanding and a strong culture of collaborative working in providing timely help and support. Screening groups enhanced the early identification of children, young people and families in need of additional support. The **Whole System Approach** programme ensured early access to appropriate services and effective interventions to address offending behaviour. Information sharing and communication was strong within and across services, including between adults' and children's services. **AYRshare** provided staff with a strong platform to share information across health, social work and education, where multi-agency involvement was required, and was being embedded incrementally in a planned way. Staff delivered coordinated and well planned early intervention and prevention approaches and provided timely support for children and families. Some children who experienced neglect would have benefited from earlier decision making and targeted action.

Staff across all services confidently recognised when children, young people and families needed additional help or support. They shared a common understanding of the **Getting it Right for Every Child** principles and national practice model. The request-for-assistance process ensured a tiered and proportionate response for additional interventions. Over three-quarters of respondents to our staff survey agreed or strongly agreed that **Getting it Right For Every Child** had made it easier for them to provide timely help to children, young people and families. This had led to a strong culture of collaborative working. Sensitive routine enquiry undertaken by maternity services helped to identify vulnerable pregnant women and put supports in place at an early stage. Robust pre-birth screening by midwives was resulting in prompt referrals to the safeguarding midwives team. The **Starting a Conversation** toolkit, which incorporated the wellbeing indicators, was used as a helpful prompt by a range of staff with parents, carers, children and young people to identify their strengths and build resilience. Staff across schools used **Wellbeing Web** exercises to recognise strengths as well as issues that may hinder a child or young person's wellbeing.

Staff recognised the importance of supporting emotional health at an early stage and both the **Mental Health Framework** and **Neuro-development Pathway** were

effectively helping build capacity across services. This was resulting in fewer referrals to specialist mental health services such as child and adolescent mental health services. Nurture groups in schools effectively supported children in need of additional help. Health visitors and teachers were alert to the wellbeing needs of children and promptly offered helpful advice and support to parents and carers when they needed it. Joint visits between social workers, midwives and health visitors were regularly undertaken to identify and assess children and families' needs. Education staff and school nurses worked well together to ensure that relevant information about a child or young person's wellbeing was promptly and appropriately shared. Screening groups enhanced the early identification of children and young people in need of additional support. The co-location of adult social work teams with children and families social work teams was supporting better communication and increased collaboration. Adult practitioners felt more confident reporting concerns at an earlier stage. The introduction of a comprehensive risk indicator tool for multi-agency use helped staff identify the potential warning signs of vulnerable children and young people at risk of child sexual exploitation.

Our review of vulnerable children's records showed that, in the majority of relevant cases, services were very good or good at recognising when children and families needed additional help and support at an early stage. Staff were increasingly confident at recognising and responding to children who were experiencing neglect. However, in a few cases, the signs were not noticed early enough.

Sharing information was strong within and across services. Following the Supreme Court judgement in July 2016 requiring Scottish Government to amend the information sharing provisions in Part 4 of the Children and Young People (Scotland) Act 2014, existing guidance for practitioners was revised with a focus on information sharing. This had resulted in the development of the All Ayrshire Getting it Right for Every Child resources which were helpfully supporting staff to understand their respective roles and responsibilities and share information in a proportionate and informed way. In the majority of children's records we reviewed, we assessed sharing and using information to provide support at an early stage as good or better. Email protocols and processes to share information had recently been improved across NHS Ayrshire and Arran, education and local Scottish Children's Reporter administration systems. The AYRshare information system provided staff with a strong platform to share information across health, social work and education, where multi-agency involvement was required. While staff viewed this as an aid to information sharing, the full benefits were still to be realised as it was being gradually embedded in a planned way. Education staff were experiencing challenges with the requirement to input to both Scottish Education's education management information system (SEEMIS) and AYRshare, as there is no compatibility between the two systems at this time.

Information was shared successfully through a number of robust communication processes such as concern reporting by police that identified vulnerable children and families. Children and families benefited from range of community-based prevention approaches taking place in schools and across communities. These were delivered by third sector organisations and the Vibrant Communities service to stop difficulties arising or getting worse. The Whole System Approach programme ensured access to suitable early and effective intervention, including youth diversion schemes in respect of young people involved in offending behaviour. A care leavers tracking forum helped identify looked after and care experienced young people who would benefit from more intensive one-to-one support. The young carers support service took a whole-family approach and linked closely with other services to ensure young carers' wellbeing needs were identified and effectively supported. Children and young people with additional support needs received effective early transition planning tailored to their individual needs.

Assessing and responding to risks and needs

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

Assessing and responding to risks and needs was good. Overall, staff across services worked well together to ensure children and young people were kept safe and issues affecting their wellbeing were appropriately addressed. Initial responses were prompt and effective in the majority of cases but not always sufficiently robust in situations of cumulative neglect or domestic abuse. Helpfully, partners had implemented the Graded Care Profile tool to help staff identify neglect and it was being incrementally rolled out at the time of our inspection. Relevant partners were jointly involved in initial referral discussions, which were supporting effective joint decision making. Not all staff were clear about thresholds to trigger an initial referral discussion in response to neglect concerns or domestic abuse incidents where a social worker was already involved. There were positive examples of staff using chronologies effectively to understand and analyse patterns of risk and to support decision making. While chronologies were completed for nearly all cases we reviewed, under half were fit for purpose. Partners recognised that improving the quality of chronologies was a developing area of practice. Overall, staff made effective and consistent use of the GIRFEC national practice model and wellbeing indicators to support the quality of assessment of risks and needs.

Initial responses to concerns about safety and wellbeing

Staff, including those who worked with adults, worked well together to protect children and young people and keep them safe. A prompt response to initial concerns about the safety or wellbeing of children was effective for the majority of vulnerable children. Staff were confident in their roles in child protection and

responded promptly. Information was shared between relevant services in a timely and appropriate manner. This included situations that occurred out with normal working hours and at weekends. When it was no longer safe for a child or young person to remain at home, appropriate accommodation was found without delay with kinship carers, foster carers or in children's houses for the majority of vulnerable children. Oversight of child protection investigations ensured a timely response was taken in most circumstances. In the main, child protection medical examinations took place timeously by an appropriately trained paediatrician. Legal measures were used well to ensure children were kept safe. Services performed less consistently when responding to concerns about domestic abuse or where chronic poor parenting meant that children were being neglected. This affected a minority of children. Helpfully, the implementation of the **Graded Care Profile** tool (in working with families where neglect was a concern) was being rolled out to social work, health and early years practitioners to better support identification and a timely response.

Partners had given a great deal of careful thought to developing and implementing an initial referral discussion process. This process had created a culture that promoted critical analysis and appropriate support and challenge. Refinements to the process were ensuring that police, social work and health shared and considered information together and for the most part, jointly decided how concerns would be investigated and taken forward. As part of assuring the quality of these new processes, senior managers across health, social work services and police had been involved in regularly reviewing all discussions and decisions. As the initial referral discussion process had become more embedded and confidence in the process increased, reviews reduced to monthly sampling.

While staff were competent at recognising and responding to concerns that a child may be at immediate risk of abuse, not all were clear about when to trigger an initial referral discussion where there was cumulative concern about neglect or domestic abuse in families already known to them. For a few children whose records we read, initiating an initial referral discussion would have better supported joint risk assessment and decision making, particularly in respect of assessing the need for a medical examination.

The quality and use of chronologies

There were some positive examples of staff using chronologies effectively with families to help them understand and analyse patterns of risk and to aid decision making but practice was variable. In our review of vulnerable children's records, nearly all cases (99%) had a chronology although just under half were assessed as reaching a good enough standard. Common themes for improvement included: greater consistency in recognising what constituted a significant event, including events that had happened before services had become involved; too much or too little detail; a greater focus needed on the impact of important or significant events

for the child rather than a list of agency contacts. Some work had been done to overcome challenges in using information technology to help staff produce more effective and comprehensive chronologies in an integrated way. Partners fully recognised from recent multi-agency file audits that chronologies were an area for further improvement activity. Training for all lead professionals and named persons on multi-agency chronologies had been undertaken as part of an improvement planning approach, with coaching and mentoring planned to further improve the quality and use of single and multi-agency chronologies.

The quality of assessments

Staff were able to draw on a range of procedures and guidance to help them gather information and assess risks and needs. For example, care and risk management procedures supported specific risk assessment and planning relating to young people involved in serious or problematic offending. Almost two-thirds of staff responding to our survey confirmed they had received training in assessment and had the guidance and tools they needed. Most children and young people had an assessment of risk or need, of which the majority were evaluated as good or better. Staff made effective and consistent use of the **GIRFEC national practice model** and wellbeing indicators to support the quality of assessment of risks and needs. This included police, who used these tools to develop information within child concern reports. This was helping to bring a more consistent approach to analysing and assessing risk as well as identifying strengths. An improved recording format for the child's assessment and plan had been designed with frontline practitioners, with the involvement of young people and their families. This had multi-agency agreement and although at an early stage of implementation, it was already considered by staff to be improving assessment practice. All children looked after away from home had their health needs assessed annually.

Planning for individual children and young people

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

Planning for individual children and young people was good. Child's plans were increasingly outcome-focused, helpfully supported by the Starting a Conversation toolkit. This usefully promoted a sharper focus on the wellbeing indicators in developing plans that addressed children and young people's wellbeing needs. Almost all children who required one, had a plan in place to help staff manage risks or address needs, although the quality of the plans varied. Over half of plans were not sufficiently specific, measureable, achievable, realistic and time bound (SMART). Children and young people looked after away from home in a variety of placements had their individual plans and wellbeing needs reviewed regularly. While the team-around-the-child approach provided a helpful multi-agency mechanism to review the

progress on the child's plan, the process worked less well for children and young people looked after at home, or in kinship care placements. High quality, nurturing environments were providing stability for those children and young people who were no longer able to remain at home. Very effective planning and support arrangements were helping young people to remain in continuing care placements or secure and maintain their own tenancy. Robust permanency planning was securing alternative family placements with minimal delay.

The quality of children and young people's individual plans

Getting it Right for Every Child principles were used as the basis for all plans. They helpfully guided staff to record assessed need and risks, actions, and goals against each of the wellbeing indicators. Staff who responded to our survey strongly agreed that Getting it Right for every Child had improved the way they plan to meet the needs of children. In our review of vulnerable children's records, almost all children who required one, had a plan in place to help staff manage risks or address needs. However, their quality varied. The majority (just over half) was good but inspectors assessed one in ten as weak or unsatisfactory. Over half of plans to manage risks and needs were evaluated as good or better, one-third evaluated as adequate and over a tenth were weak or unsatisfactory.

The Starting a Conversion toolkit was helping staff identify strengths and clearer outcomes for individual children. The toolkit's integrated assessment framework helped them develop plans to manage risks and meet needs. Like the assessment process, an improved recording format for the **child's plan** had been modified for use on a multi-agency basis. As this development was at an early stage of implementation, we found both or either version to be in place when reading children's records. While most plans set out the desired outcomes for individual children, less than half (42%) were SMART (specific, measurable, achievable, relevant and time-bound).

As a result of file audits and quality assurance processes, managers were very aware that further work was needed to support staff to improve the quality and consistency of child's plans. This improvement work was being taken forward through the GIRFEC action plan which supported delivery of the 2017-20 **children and young people's service plan**.

The quality and effectiveness of planning and reviewing

Staff from across services came together regularly to plan, review and monitor progress of plans to manage risks and improve overall the wellbeing of children and young people. Over three-quarters of child's plans were being reviewed at intervals appropriate to the needs of the child or young person. Children and young people who were looked after away from home had their individual plans and circumstances

reviewed regularly, but for those children looked after at home or living with kinship carers, more focused attention is needed. We found an appropriate level of partnership working to support the children and their families in the majority of the records we read. Formal child protection plans and planning processes for children on the child protection register and those looked after away from home were firmly embedded and working well. Children, young people and their families were involved appropriately in these processes. Independent reviewing officers provided appropriate levels of challenge and accountability in progressing child's plans. Catch-up meetings were being used for older young people in stable permanent placements. Developed by older young people, this was a less formal and proportionate review process.

The team-around-the-child approach provided a helpful mechanism for staff and families to monitor and review the progress on the child's plan. However, it worked less well for children and young people who were looked after at home or in kinship care arrangements and for a few young people who were receiving aftercare support. While a clear GIRFEC framework of procedures and guidance is in place, staff were unclear about the frequency of arranging a team-around-the-child meeting to review the child's plan. There was not a consistent approach to recording decisions from these meetings that ensured a clear and shared understanding, particularly for those staff not able to be present.

Positively, staff involved children, young people and families in key processes, including seeking and recording their views in almost all of the cases we read. Children and young people who were looked after and accommodated away from home benefitted from opportunities to express their views with the help of an independent advocacy worker from Who Cares? Scotland or independent reviewing officers. While children looked after at home or in kinship care had access to advocacy type support, a few children could have benefited from independent advocacy had this been available to them.

Securing stable and nurturing environments

Effective planning helped secure a nurturing and stable environment for most children (90% in the records we read). Assessments were completed with few significant delays and services provided promptly. The nurture approach was a strong driver in planning for children and young people. Pathway planning was effective for most care leavers, helping them to receive meaningful support and timely interventions to achieve their goals and aspirations towards reaching independence. There was a strong focus on continuing care for young people and many continued to remain in children's houses beyond their eighteenth birthday or with foster carers in supported placements. For those moving to independence, a wraparound approach had been adopted with housing, social work and third sector services collaborating to put together accommodation options for care experienced

young people. A supported accommodation scheme was available for a number of young care leavers which was successfully meeting their needs. The nurture model of care in children's houses was well underway and was beginning to impact positively on the stability of residential care provision for young people. This was reflected in positive inspection reports published by the Care Inspectorate.

A strong focus and robust oversight had been given to improving practice in securing permanent alternative care for children and young people. Independent advocacy had been extended to include very young children and babies involved in the permanency planning process which was helping reduce unnecessary delays. As a result, progress was being made with an increasing number of court orders granted over the past three years. Our review of children's records showed the plan to secure a permanent placement for a child had progressed very well or fairly well in 78% of cases.

Planning and improving services

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

Joint planning to improve services was very good. The children and young people's strategic partnership and child protection committee sat within a strong, coherent planning structure, with clear lines of accountability. The multi-agency structures driving these processes were effective and all relevant services were meaningfully involved. The influence of Getting it Right for Every Child was strong, with aspirational stretch aims in the children and young people's service plan aligned with the wellbeing indicators. Universal, targeted and specialist services all featured in the delivery of stretch and detailed aims. Both the children and young people's strategic partnership and the child protection committee drew upon and benefitted from a strategic assessment of need of children across East Ayrshire. The availability of this data contributed to the setting of performance measures in the newly drafted children and young people's service plan and life of the current plan. This was supported and monitored by performance management and a robust, systematic approach to self-evaluation. There were opportunities to strengthen further future performance reporting on achievements through the new joint children and young people's service plan that encompassed child protection committee business planning.

Integrated children's services planning

Community planning partners had a strong and shared vision for all services to deliver the best possible outcomes for children, young people and families. Strategic

planning arrangements were robust, with clear connections between structures and processes. Child poverty, alcohol and drugs, and youth employment were strategic priorities of the community planning partnership board and were threaded through the community plan's thematic delivery plans. The children and young people's strategic partnership was highly committed to developing and implementing multi-agency planning and carried out these responsibilities in a well-organised and inclusive way.

The new children and young people's service plan, covering the period 2017-20, had involved consultation with local children, young people, staff and managers across all partnership services. The new plan helpfully contained up-to-date supporting data, resource and performance information, and revised priorities and aspirational stretch aims that had been informed by a thorough, dynamic strategic assessment. This included the multi-agency data compendium and health profiling tool, results from the annual wellbeing survey and practice based self-evaluation activity including multi-agency file audits.

Universal, targeted and specialist services all featured in the delivery of stretch and detailed aims. Significant progress had been made in delivering a financial inclusion strategy, which had made positive inroads into increased levels of income for some families, and had successfully facilitated coordinated approaches to tackle food and fuel poverty. A pan-Ayrshire transformational change programme was identifying improving trends in relation to a range of key health outcomes. In education, a nurture approach was firmly embedded in early years and primary settings. This evidenced-based strategy was driving forward an effective nurture approach, improving the emotional wellbeing of all children and young people, including the most vulnerable.

Statutory partners, third sector organisations, front line staff and communities were actively involved in children's services planning at various levels to deliver prevention and early intervention strategies. Implementation of a whole-systems approach had seen a steady decline in youth crime over a significant period. The corporate parenting action plan 2016-18 set out partners' commitment to the values, principles and standards that looked after children and care leavers had the right to expect in order to ensure they reached their full potential. As a result, some outcomes for looked after children had improved, and the numbers of looked after children overall had steadily decreased. Performance data and self-evaluation also pointed to areas that continued to require further improvement, particularly for children looked after at home.

Child protection committee business planning

The East Ayrshire child protection committee had responsibility for all child protection activity across the local authority area. There was strong collaboration among the

three child protection committees that served the whole of Ayrshire and Arran. Examples included public awareness activity, developing a common approach to undertaking initial and significant case reviews and workshops focusing on neglect.

As part of public protection arrangements, clear and effective governance arrangements were in place. The child protection committee was accountable to and supported by the chief officers group which oversaw all activity designed to protect children. The committee worked effectively to the East Ayrshire child protection plan 2015-18 to secure improvement through self-evaluation activity, disseminating learning and engaging with the public to raise awareness. The committee's self-evaluation and improvement hub subgroup was responsible for implementing the self-evaluation action plan and associated self-evaluation work of the committee in a coordinated manner. Quarterly reporting helped to identify and understand trends, analyse information and prioritise accordingly. Self-evaluation was well embedded and regular multi-agency audit and reflective reviews had been systematically undertaken to inform policy, practice and improvement planning.

The child protection committee routinely considered ways to make changes in processes to improve outcomes for vulnerable children and young people. In doing so, the committee was mindful of the priorities it had set: neglect; internet safety; and a set of safeguarding themes that aligned with those of other public protection committees. The committee had well considered position statements for each of these themes, identifying service gaps and providing reassurance on progress made.

Since 2015, a programme of multi-agency file audits had revealed strengths and areas for improvement in the recording of some key processes, such as initial referral discussion, as well as practice issues including the involvement of fathers in pre-birth assessment. The committee had initiated a range of responses including staff support and development; changes to guidance and procedure; and improved levels of safety for vulnerable children.

The previous children and young people's service plan and child protection committee annual reports were written to highlight the wide range of activities, self-evaluation and improvement work undertaken on a multi-agency basis. The next version of the plan would offer opportunities to better demonstrate the positive impact and achievements of partnership activities on the lives of children and young people and to further develop arrangements for public facing performance reporting.

Child sexual exploitation

The child protection committee was responsible for developing a joint strategic approach to tackling the sexual exploitation of children and young people. Along with the other public protection committees and partnerships in the area, services worked hard to identify key priority actions and reduce duplication. Solid foundations

had been laid, with actions related to child sexual exploitation incorporated within a coordinated thematic safeguarding action plan that was being regularly reviewed. As a result, there had been tangible developments in a number of areas: awareness raising in schools; staff development and training at various levels; and single service and multi-agency guidance and procedure designed to protect vulnerable children and young people.

Child protection procedures were applied for children and young people at risk of, or experiencing, sexual exploitation,. The child sexual exploitation indicator tool was used widely by carers in children's houses to record and monitor risks. Partnership working between Police Scotland's missing person coordinator, single points of contact identified for police and social work regarding children's houses, and staff in all children's houses had strengthened coordination. Given the potential risks of sexual exploitation in respect of children's houses, plans were in place to introduce quarterly multi-agency data and trends analysis meetings.

Managing and mitigating risks

Well established and effective risk management arrangements were in place at single service and partnership levels, including the community planning partnership. The children and young people's strategic partnership and child protection committee routinely considered emerging and potential risk through self-evaluation, consultation, engagement, and reflective learning. The self-evaluation and improvement hub maintained a wide ranging self-evaluation action plan, which set out priority areas, action taken, and impact. Partners encouraged a culture where concerns could be openly raised, and took corresponding action to reduce risk. All of this allowed risks to be identified, escalated to the most appropriate organisational level and acted on, ensuring the safety and wellbeing of children and young people.

Participation of children, young people, families and other stakeholders

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

The extent of participation by children, young people, families and other stakeholders in policy, planning and service development was excellent. Partners truly strived to ensure children and young people were empowered to have a voice and enthusiastically sought their views on a wide range of priorities to shape and improve children's services. The partnership's participation and engagement strategy effectively promoted and supported the systematic participation, meaningful involvement and engagement of children, young people and families across universal and targeted services. A strong culture prevailed, where the views of children, young people and families were routinely sought and influential in shaping current and future policy and strategies. This included the new children and young people's service plan

and the development of community-led action plans, ensuring children's views were prominent and had broad impact. Staff across agencies used innovative, well embedded approaches and tools to proactively involve children and young people and maximise their involvement. This was being achieved through a variety of participatory approaches, representative forums, committees and umbrella groups. A genuine and sincere commitment by staff to uphold and embed the UN Convention on the Rights of the Child was evident at every level of service engagement. This was helping to ensure that children's rights, equality and diversity was widely promoted and fully respected.

Community planning partners were strongly committed to transforming services by fully engaging and empowering children, young people, communities and wider stakeholders to have a voice in how their local services were developed and delivered. The participation and engagement strategy and the engaging-our-communities approach, which was part of the community planning partnership's commitment to locality planning, was well implemented and embedded. This was supporting and promoting open and meaningful communication between children, families, communities and policy makers. The involvement and voice of children and young people had been important in assessing success and progress being made in the children and young people's services plan. This was accomplished through systematic feedback and activity achieved through the annual wellbeing survey and health and wellbeing focus groups. Community-led action planning, supported by Vibrant Communities was a highly impressive example of partners engaging and empowering whole communities. Examples included successful **community asset transfers** and **participatory budgeting**. Children and young people, families and wider stakeholders were actively involved in identifying local priorities and delivering locality-based approaches and solutions. They were fully engaged in contributing to the development of local community-led plans through surveys, attendance at focus groups, and as members of steering groups.

Extensive communication and engagement with children, young people, families, communities and other stakeholders was meaningfully contributing to improvements in service design and service delivery and development of a range of helpful policies and child-centred strategies. A wide variety of approaches, programmes and initiatives were used to seek ways to involve children and young people and their families. Annual youth conferences, equalities conferences and community-led action planning events and workshops were reaching large numbers of children, young people and families across communities. Comprehensive information and data from these events were being used effectively to facilitate discussions and inform community planning, children's services planning and wider service development. This included feedback from universal and targeted youth groups, social media, the Starting a Conversation toolkit (Wellbeing Web tool) and Viewpoint, an electronic tool used to seek the views of children and young people.

Children and young people living in children's houses were empowered to exercise choice. House meetings, the use of You Said, We Did feedback and It's Better to Listen forms were empowering young people to meaningfully participate in quality improvement. The Scottish Children's Reporters Administration had upgraded its hearing centre to enhance the environment and support engagement. Every child and young person had the opportunity to use the Have Your Say form to contribute to decision making at panel meetings. Members of the children and young people's representative forum and elected members of the Scottish Youth Parliament were working purposefully to make sure the views of children and young people were heard. A range of participation, engagement and consultation approaches was embedded within schools' and early childhood centres' decision-making structures in a variety of ways to capture pupils and parents views. Pupil councils, school senates and eco-committees were leading to positive changes in school environments that were led by children and parents. Schools were proactively promoting the rights of children through the UNICEF Rights Respecting Schools programme.

Positive and regular consultation with staff across services on a range of topics was encouraging and empowering them to identify practice issues and be involved in improvement work at a strategic level. For example, health visitors and school nurses responded to Survey Monkey consultation with positive feedback around strategic vision, communication and management and leadership. Multi-agency frontline staff were responsible for refining key processes connected to child protection case conferences, leading to earlier decision making and families being well informed prior to the meetings. Consultation events with foster carers and kinship carers was shaping local policy, procedure and practice.

Children's rights were well promoted and understood by leaders and policy makers across services. The children and young people's services plan reflected a clear commitment to the rights of children with its emphasis on upholding and embedding the UN Convention on the Rights of the Child at every service level. Services were seen to promote and support the rights of the child and equality and diversity.

Care experienced young people were well represented on the corporate parenting group and corporate parenting network group through Connected Voices. This is a forum where care experienced young people collectively influence and make changes to benefit other looked after children and young people. They spoke positively and enthusiastically about how their views were valued and used to raise the profile of care leavers and influence local improvement planning, policy and practice for looked after children and young people. They also raised the profile and represented the needs and rights of care experienced young people through participation at national conferences and active engagement in a range of activities. These included presentations to staff groups, taking part in employee development days and speaking to elected members through the Corporate Parenting Pizza &

Coke quarterly events. Young carers were routinely consulted about their individual needs. Some were supported to promote the rights and needs of young carers within school settings and constructively engaged in conversations about solutions that would improve their outcomes.

Young people identifying as LGBTI, as well as those questioning their sexuality were strongly supported through youth groups and the pan-Ayrshire LGBTI development group to campaign, raise awareness and promote their rights. Some of the young people successfully co-produced a transgender toolbox talk for education and other professionals, which they co-delivered to fellow young people, teachers and other partner agencies. East Ayrshire council had also developed the Transgender Toolbox talk to promote understanding and awareness, and to support staff and partners. A number of stakeholders had participated in LGBTI workshops. The LGBTI equalities youth conference was co-produced and co-designed with young people to help raise awareness of the issues affecting LGBTI young people, promote rights and provide the opportunity to express views.

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

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

Leadership of improvement and change was very good. Leaders demonstrated a strong commitment and high aspirations. They articulated, owned and embedded a shared vision for children, young people and families. Through innovative transformational change, leaders were building, and on their way to achieving, community empowerment and capacity through championing the collective vision and values of strong, safe and vibrant communities. A sound and sustained commitment to early intervention and prevention through asset-based approaches was helping to deliver strong, sustainable communities. The Getting it Right for Every Child model had enhanced partnership working by embedding a shared way of working. Children's services business planning took place within a culture of improving outcomes through innovative thinking, mutual respectful challenge and collective decision making. Clear and collective leadership was directing the effective delivery of integrated services for children and young people to tackle inequalities within communities. Leaders were highly committed and ambitious in their corporate parenting role. They recognised that a continued focus is needed to deliver improved outcomes for looked after children; particularly those looked after at home, if they are to successfully close the poverty related attainment gap. While partners knew themselves well through their well informed self-evaluation, they would achieve greater consistency of performance in key processes by further strengthening quality improvement processes at an operational management level.

The community planning partnership's shared vision of strong, safe and vibrant communities was clearly articulated by leaders and embraced by staff across partner agencies. Chief officers, elected members and staff across the partnership recognised their responsibilities to improve opportunities and reduce inequalities for children, young people and families. A concerted effort and commitment to addressing inequalities was being championed through strong partnership working. A range of joint delivery plans and policies specifically targeted additional resources in the most disadvantaged communities. Leaders were very well sighted on the challenges within their communities and the potential for these to negatively impact on outcomes for children, families and communities. The community plan gave a clear commitment to mitigating the impact of poverty and inequality through a collective and shared approach. This included financial inclusion activity that was being delivered on a multi-agency basis. Targeted initiatives through the educational

attainment challenge fund and new pupil equity funding provided further opportunities through joint working, to address and improve the educational attainment gap created by child poverty. Accelerating improvement in the literacy, numeracy and health and wellbeing outcomes for children and young people living in the most deprived communities were key partnership priorities.

Leaders demonstrated collective ownership and a shared commitment to embedding the culture, systems and practices of the Getting it Right for Every Child approach across services. This was supporting a shared way of working and common language, underpinned by a strong approach to practice that was based on relationships, as set out in East Ayrshire's Relationships Framework. With a strong focus on nurture and rights-based practice, staff were embedding these core principles in their work.

A high degree of trust, collaboration and challenge gave partners a determination to improve the life chances of care experienced children and young people. Corporate parenting was seen as a clear priority by leaders, and elected members were highly committed and ambitious to deliver improved outcomes. The depute provost of East Ayrshire showed passion and dedication in her role as the children's champion to achieve better outcomes for care experienced children and young people. The corporate parenting group had strong representation from elected members, care experienced young people, council officers and third sector representatives. It heard directly from young people about matters which concerned them and about new corporate parenting developments and initiatives. There was an evident consistent approach to corporate parenting planning with engagement and active participation of children, young people and care leavers. The well-established, multi-agency corporate parenting network group ensured progress on the 2016-18 corporate parenting action plan was delivered. This was contributing to innovative developments, including pathways for employability, and embedding the **East Ayrshire SNAP** approach to the philosophy of care in children's houses. While improving outcomes for looked after children and young people, particularly those looked after at home, was a clear priority for partners, it required continued focus.

Leaders had well-established and robust governance arrangements in place that ensured clear oversight and connectivity within children's services planning and across wider community planning. Collective accountability and responsibility for leading integrated services for children and young people was very well embedded. The newly refreshed 2017-20 children and young people's service plan, which incorporated child protection business planning, provided a coherent strategy and clear direction for integrated children's service planning for the next three years. Thematic action plans that ensured a focus on vulnerability and specific needs effectively supported delivery of the service plan. These action plans connected the strategic priority themes of early intervention and prevention, tackling inequalities and lifelong learning to the business of the chief officers' group and the children and

young people's strategic partnership. There was a need to improve the quality of leadership and planning for improvement within the primary school sector, which had resulted in evaluations of 'weak' in a few recent inspections.

A strong commitment to early intervention and prevention through **asset-based** approaches was well embedded at both a strategic and operational level. Senior officers considered the entirety of their resources as part of their decision making to commit resources when planning joint services. The East Ayrshire integration joint board had integrated resources in order to progress the joint planning, delivery and resourcing of social work, health visiting and school nursing services for children and families.

The introduction of the Vibrant Communities approach was demonstrating a clear shift to prevention and early intervention and targeted partnership activity. It was leading the sector in delivering a whole-system change approach to building community empowerment and engagement, resilient communities and reducing inequalities through responsive frontline services and solution-focused working. This ambitious, proactive approach, taken in response to public sector reform, was driving and embedding East Ayrshire's transformation agenda across the wider partnership to reduce the poverty-related outcomes gap. A strong social enterprise and third sector presence was delivering more joined up and flexible services for children, young people and families in response to local needs. Together with Vibrant Communities, they were promoting innovative ways to increase children and families' resilience and build sustainable communities.

Partners knew themselves well through their well-informed self-evaluation and improved use of performance data. They had established a robust approach to using data on a partnership basis. While the collection of data was still being refined, it was strengthening understanding and intelligent use of data to measure improvement at a locality level. This had been built up over time as a result of self-evaluation cycles and had informed the development of the new children and young people's service plan. Partners benchmarked well with comparators at a national level on a range of indicators of wellbeing.

Opportunities were made available for staff to continually reflect and learn from best practice. A strong ethos of innovation and creativity encouraged them to improve the quality of their work and practice through a strong ethos of innovation and creativity. Agencies worked together collaboratively, adopting best practice from elsewhere, using research and working in an evidence-based way. An example was the strategic focus being taken by the child protection committee to neglect, with an emphasis on understanding thresholds, with the University of Stirling. Key processes, including information sharing, and risk and needs assessment, were already being improved through joint multi-agency audit and quality assurance systems. Opportunities to strengthen current quality assurance practices at an

operational management level to bring greater consistency to key processes for chronologies, team-around-the-child and child's plans were being taken forward through the GIRFEC action plan. This plan contributed directly to the delivery of the stretch aims of the 2017-20 children and young peoples' service plan.

7. Conclusion, areas of particular strengths and areas for improvement

We are confident that the wellbeing and life chances of children and young people growing up in East Ayrshire are improving as a result of robust and collective leadership by partners to deliver effective integrated services. We could see investment in early intervention and prevention approaches having a positive impact on family wellbeing. Despite significant challenges associated with high levels of poverty and deprivation, a number of measures had achieved positive outcomes through joined up, universal and targeted approaches. These approaches are ensuring children and young people are safe, healthy, achieving, nurtured, active, respected, responsible and included. Families were much more resilient and confident as a result of experiencing timely, flexible and reliable support from an extensive range of accessible, high-quality services. Children and young people were encouraged to have a voice and to give their views on a wide range of priorities and topics. Getting it Right for Every Child principles have supported a shared understanding and strong culture of collaborative working to deliver coordinated, early help and effective interventions.

We could see care experienced children and young people benefiting from positive relationship-based support from highly committed and responsive staff and carers. Nurturing approaches were resulting in stable environments for looked after children and young people living in kinship care placements, foster care and children's houses. Collective accountability and clear oversight, provided by the chief officers' group and child protection committee, were ensuring performance and practice in protecting children is improving. In most cases, vulnerable children and families benefited from information sharing that is proportionate, appropriate and timely. Most children and young people in need of protection were helped to keep safe by prompt multi-agency responses to manage and address risk. Staff were identifying vulnerable children and young people at risk of child sexual exploitation and supporting them through effective coordinated approaches and interventions.

A prompt response to initial concerns about the safety or wellbeing of children was effective for the majority of vulnerable children. For a few vulnerable children and young people, the quality of the initial response to child protection concerns has not been sufficiently robust, particularly in situations of cumulative neglect. However, we note the work already underway to improve consistency in thresholds and response where neglect is a concern. We could see that this work was beginning to strengthen consistency of practice in assessing potential harm more effectively.

Particular strengths

In the course of our inspection, we identified a number of particular strengths which are making a positive difference for children and young people in the East Ayrshire community partnership area.

- Strong, visible leadership and highly collaborative partnership working.
- Strategic focus on transformational change that is aspirational, creative and innovative.
- Well-planned and coordinated services that are highly effective in supporting families to increase resilience and confidence.
- A strong strategic approach that ensures the voice of children and young people is fully reflected in policy, planning and service development.
- A sound evidence base for children's services planning through the robust partnership approach to intelligent use of data.
- A systematic and well-embedded approach to self-evaluation and continuous improvement.

Areas for improvement

Partners are strongly committed to delivering the best possible outcomes for children and young people in East Ayrshire. We have a high level of confidence that partners will be able to make the necessary improvements in light of the inspection findings. In doing so East Ayrshire community planning partnership should now do the following.

- Further strengthen quality assurance processes to ensure greater consistency and sustained improvement in the quality of key processes. This should include the joint response to cumulative neglect through the initial referral discussion process and improving the quality of chronologies.
- Strengthen the team-around-the-child process and quality of children's plans.
- Maintain the emphasis on improving the attainment gap and achievement outcomes for looked after children and young people, in particular children who are looked after at home.

8. What happens next?

The Care Inspectorate will request that a joint action plan is provided that clearly details how the East Ayrshire partnership will make improvements in the key areas identified by inspectors. The Care Inspectorate and other bodies taking part in this inspection will continue to offer support for improvement through their linking arrangements. They will also monitor progress in taking forward the partnership's joint action plan.

Appendix 1: Good practice examples

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

Vibrant Communities

The East Ayrshire Vibrant Communities service was established in April 2013 as a catalyst for change across services and partnerships. Vibrant Communities work with all sectors of the community, including children and young people, adults and older people, to develop sustainable communities and to reduce inequalities through a wide range of innovative prevention and early intervention services and programmes. By focusing on asset-based approaches, individuals, families and communities are at the very heart of the planning and decision-making process and integral to delivering the overall vision of strong, safe and vibrant communities. The service has continuously attracted considerable national interest from other local authorities, community planning partnerships and major funders who are particularly interested in the way in which both employees and communities have been empowered to make change. Central to community empowerment and community engagement has been the development of 18 community-led action plans, which are community owned and developed. The involvement of children and young people as stakeholders in every plan has been facilitated by the Vibrant Communities' early intervention and prevention service. Key outcomes already delivered by community-led action plans include:

- increased membership of existing groups
- more people involved in shaping the future of their community
- the creation of new community organisations
- increased local capacity to develop and manage projects
- communities shifting from being reactive to proactive
- communities becoming partners in their own development
- communities partnering with public agencies to deliver services
- move towards investment culture with business and key funders
- increase in community events and celebrations.

The Vibrant Communities' community investment team has increased co-production work with communities by supporting the process that transfers assets to the community, with 44 applications approved, empowering local groups and communities to run facilities and deliver local services. Vibrant Communities has also been proactive in helping a range of community groups, voluntary organisations, social enterprises and charities with funding options and new routes to community investment. During 2015/16, Vibrant Communities supported 63 community projects

to obtain £1,506,000 of funding. A further £1,202,000 of funding was received for nine East Ayrshire community-based projects during 2016/17. Vibrant Communities successfully piloted the Participatory Budgeting approach, which empowers local people to decide how and where public money is spent in their communities. This successful initiative has resulted in 19 participatory budgeting events taking place across communities, with 250 projects receiving a share of £220,000 of public funding.

Positive Play in Prison

Positive Play in Prison, introduced in 2011/12, works with children, families and whole communities to ensure improved quality of life using asset-based approaches. It is a targeted service working with the most vulnerable and isolated children and families. The Positive Play in Prison initiative helps children and families to establish and maintain a paternal bond and meaningful contact with fathers who are incarcerated in HMP Kilmarnock by providing positive play experiences.

Programmes include 1-2-1 bonding visits, family book share (where fathers create a story CD to send home to their children) sports days and summer family days which have demonstrated improved outcomes for both parent and child including lessening the impact of the sentence on their children and strengthening family bonds and parenting skills. In 2016/17:

- 66 prisoners were supported through weekly play and bonding sessions
- 98 family visits took place within HMP Kilmarnock
- 93 children were involved in Positive Play sessions.

Positive Play in Prison was recognised for its innovation and success when it won the Convention of Scottish Local Authorities (CoSLA) Chair's Award in 2016. In April 2017, the Positive Play in Prison team won two silver awards at the Improvement and Efficiency Social Enterprise (iESE) Awards.

Youth employability

The Scottish Index of Multiple Deprivation (SIMD 2016) and Scottish Neighbourhood Statistics identify East Ayrshire as being one of the most deprived areas relative to Scotland as a whole, with 14% of the population in East Ayrshire aged 16-60/64 years employment-deprived compared to 11% across Scotland as a whole. Youth unemployment remained high at 5.6% as at June 2017, compared to the Scottish average of 3.8% however, this figure was steadily reducing from a high of 7.8% in 2014. Given the deprivation profile in East Ayrshire, a targeted partnership approach was helping to reduce youth unemployment and increasing the number of young people progressing into a positive destination. A range of initiatives had resulted in the percentage of school leavers in positive destinations continuing to increase and peaking in 2014/15 at 94%. Substantial investment and focused activity from local and national business leaders in partnership with community planning partners was

being achieved through strong and effective partnership working. A wide range of local and national programmes to support employability ensured young people were being equipped with the relevant skills, qualifications and positive attitude needed for the world of work. This was being achieved through the well-established Business Enterprise Programme in all secondary schools. Backed by accredited qualifications, vocational pathways, support for entrepreneurship and high levels of business engagement throughout the curriculum, this nationally acclaimed programme was evidencing a significant impact on the lives of young people. The following all contributed towards securing positive destinations for East Ayrshire's school leavers:

- sector leading business engagement
- new investment to support STEM (science, technology, engineering and mathematics) education
- articulation between school and college courses
- skills development to support growth sectors
- innovative work with third sector partners
- careers guidance embedded at key stages.

Coordinated approaches to reducing youth unemployment included:

- work-based learning opportunities through the Flexible Pathways Initiative, in partnership with Ayrshire College, Princes Trust and a range of local employers
- vocational pathways through the school and college partnership
- access to a range of European and Skills Development Scotland funded initiatives, provided by East Ayrshire Employability
- individual coaching support to enhance employability skills and access training
- a targeted approach, through Project Search, to secure employment for young people with learning disabilities or autism
- wage subsidies to private sector employers, creating sustainable jobs
- modern apprenticeships
- a graduate intern programme providing one year of employment with intensive support, for new graduates to secure employment and career pathway.

Early intervention successfully identified those young people who were at risk of not achieving a positive destination upon leaving school. Ayrshire College employability and engagement officers offered weekly engagement programmes to all secondary schools, to help young people who were furthest from the labour market to transition successfully into further learning or training. Intensive one-to-one approaches from the well-established care leavers tracking forum had delivered positive outcomes for a number of care experienced young people by supporting them to secure and sustain jobs. Ayrshire College's inclusive-learning team leader and its learning and student services delivered a range of support and specific interventions that was demonstrating improved course completion rates.

Linking Language and Literacy

In 2016, the **Early Years Collaborative** and **Raising Attainment for All** combined to form the Children and Young People's Improvement Collaborative (CYPIC) with the aim of delivering quality improvement throughout a child's journey. This aligned closely with the Maternity and Children Quality Improvement Collaborative, which focuses on maternity, neonatal and paediatric healthcare settings. The East Ayrshire CYPIC had identified that the key priorities for collaborative work across the community planning partnership were language, communication and literacy. This was informed by the partnership's data compendium and local data from the 27-30 month child health assessment broken down by deprivation quintiles. This data highlighted that in some areas of East Ayrshire, up to 40% of children were not meeting their developmental outcomes around speech, language and communication (compared to 13.3% at a national level in 2014/15). However, it also showed that only 7-10% of children will have long lasting speech, language and communication needs requiring the support of the speech and language therapy team.

The Linking Language and Literacy (LLL) initiative focused on reducing concerns in speech, language and communication at the 27-30 month assessment within the Irvine Valley area. An example of one of the interventions developed was Chat Packs, a play session that typically included parent(s) or carer(s), their child (typically 8-24 months) and a speech and language therapist. Communication champions were also established who accessed quality evidence-based training to enhance their skills and support others to improve practice across the early childhood centres. Ninety per cent of centres had a communication champion who was 'Learning Language and Loving it' (LLLI) trained. This was enhancing and maximising the capacity of speech and language therapy services. Snappy Chats, a **pre-request parent group** run by a speech and language therapist and supported by an assistant nurse practitioner from the health visiting service, informally screened children who may require additional support from the speech and language therapy service. This initiative provided parents with advice and early language strategies to improve their child's speech, language and communication skills. Where the health visitor's 27-30 month assessment identified a speech concern, the parent was invited to attend a Snappy Chats session with their child. This early intervention was averting the need for formal referrals to the speech and language department. It was also helping to identify those children early who may need a more in-depth assessment and so ensuring timely access to specialist advice.

The initial aim of the initiative was to reduce concerns around speech, language and communication from 31% to 20%. The impact of these initiatives is already delivering positive outcomes. The LLL initiative has resulted in a significant improvement with total concerns related to speech, language and communication falling from 31% at the 2014 baseline to 12% in 2016. This exceeded the initial

stretch aim of achieving a reduction to 20%. Following the positive evaluation and learning from the LLL initiative in the Irvine Valley over the last 18 months, delivery of the LLL project was being extended to the Doon Valley, where local data showed a high level of need.

Appendix 2: Evaluated indicators of quality

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

Here are the evaluations for nine of the quality indicators.

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

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

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

Appendix 3: The terms we use in this report

East Ayrshire community planning partnership is the local community planning partnership for the East Ayrshire council area. It is formed from representatives from key agencies and organisations from the public, community, voluntary and private sector. The partnership works together to plan and deliver services in East Ayrshire.

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

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

The **child's plan** specifies the desired outcomes derived from any assessments and the actions necessary to enhance and support a child's wellbeing.

The **child protection committee** brings together all the organisations involved in protecting children in the area. Their purpose is to make sure local services work together to protect children from abuse and keep them safe.

Community asset transfer involves the transfer of responsibility for an asset from the council to a voluntary or community organisation. The part of the [Community Empowerment \(Scotland\) Act 2015](#) which covers community asset transfer enables community bodies to make requests for any land or buildings they feel they could make better use of. Community bodies can request ownership, lease or other rights as they wish.

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

Raising Attainment for All is a Scottish government initiative that seeks to support consistent improvement in attainment and achievement through the development of a collaborative learning system. The programme is being delivered in schools and authorities as part of a collaborative, as with the Early Years Collaborative.

Getting it Right for Every Child is the Scottish Government's approach to making sure that all children and young people get the help they need when they need it. There are eight wellbeing indicators, which are safe, healthy, achieving, nurtured, active, respected, responsible and included. These provide an agreed way of measuring what a child needs to reach their potential.

www.scotland.gov.uk/gettingitright

The **GIRFEC national practice model** provides a framework for practitioners and agencies to assess, analyse, take appropriate action and review. It relates to the

wellbeing indicators, resilience matrix, My World triangle and developing a child's plan.

Graded care profile helps professionals measure the quality of care being given to a child. It is an assessment tool that helps them to spot anything that is putting that child at risk of harm.

Participatory budgeting is recognised internationally as a way for local people to have a direct say in how, and where, public funds can be used to address local needs.

Self-directed support is the support a person purchases or arranges to meet agreed health and social care outcomes. It allows people to choose how their support is provided, and gives them as much control as they want of their individual budget.

The concept of a **stretch aim** is that there must be a shift in the way that activity is delivered. A clear stretch aim is aligned directly to what you want to achieve (what), is quantifiable (how much), identifies a time frame for achieving the aim (by when) and is unachievable by hard work alone (change will be necessary).

A **team-around-the-child meeting** is a single planning process to establish or review a child's plan with the child at the centre of that planning process.

The **virtual comparator** takes the characteristics of pupils in a school and matches them to similar pupils from across Scotland to create a 'virtual school'. This is a valuable benchmark for schools as it takes into account young people who have similar needs and backgrounds.

Whole System Approach is the Scottish Government's programme for addressing the needs of young people involved in offending. It aims to divert young people who offend from statutory measures, prosecution and custody through early intervention and robust community initiatives.

An Asset-based approach facilitates people and communities to come together to achieve positive change using their own knowledge, skills, networks and community resources. Asset-based approaches recognise and build on a combination of the human, social and physical capital that exists within communities.

SNAP stands for Social Pedagogy, Nurture and Response Abilities Pathway. The East Ayrshire SNAP model provides the underpinning philosophy of care within their residential childcare services. It was developed by staff and based on evidence including nurture; attachment; social pedagogy; responsibility pathway and therapeutic crisis intervention.

A **pre-request parent group** is an early intervention group aimed at preventing the need for formal referrals to the speech and language department.

Appendix 4: The quality indicator framework

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

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