



**care**  
inspectorate

# Report of a joint inspection of services for children and young people at risk of harm in East Lothian community planning partnership

Prepared by the Care Inspectorate in partnership with Education Scotland, Healthcare Improvement Scotland and His Majesty's Inspectorate of Constabulary in Scotland

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## Introduction

### Our remit

At the request of Scottish Ministers, the Care Inspectorate is leading joint inspections of services for children and young people at risk of harm.

The remit of these joint inspections is to consider the effectiveness of services for children and young people up to the age of 18 at risk of harm. The inspections look at the differences community planning partnerships are making to the lives of children and young people at risk of harm and their families.

Joint inspections aim to provide assurance on the extent to which services, working together, can demonstrate the following.

1. Children and young people are safer because risks have been identified early and responded to effectively.
2. Children and young people's lives improve with high-quality planning and support, ensuring they experience sustained loving and nurturing relationships to keep them safe from further harm.
3. Children and young people and families are meaningfully and appropriately involved in decisions about their lives. They influence service planning, delivery and improvement.
4. Collaborative strategic leadership, planning and operational management ensure high standards of service delivery.

### The terms that we use in this report

- When we say **children at risk of harm**, we mean children up to the age of 18 years who need urgent support due to being at risk of harm from abuse and/or neglect. We include in this term children who need urgent support due to being a significant risk to themselves and/or others or are at significant risk in the community.
- When we say **young people**, we mean children aged 13-17 to distinguish between this age group and younger children.
- When we say **parents** and **carers**, we mean those with parental responsibilities and rights and those who have day-to-day care of the child (including kinship carers and foster carers).

- When we say **partners**, we mean leaders of services who contribute to community planning. This includes representatives
- When we say **staff**, we mean any combination of people employed to work with children, young people and families in East Lothian.

**Appendix 2 contains definitions of some other key terms that we use.**

## Key facts

**Total population:  
112,450 people  
on 30 June 2022**

This is an increase 2.6% from 30 June in 2021. Over the same period, the population of Scotland decreased by 0.8%

NRS Scotland

In 2022, 18% of the population were under the age of 16, higher than the national average of 16%

NRS Scotland

In 2022/23, East Lothian had a rate of 1.9 for number of children on the child protection register (per 1,000 of the 0 – 15yr population), lower than the Scottish average of 2.3

The rate of child protection investigations (per 1,000 of the 0 – 15yr population) was 17.5, this was higher than the Scottish average of 13.2

Childrens social work statistics 2021/22



8 (6%) of East Lothian data zones are in the 20% most deprived in Scotland. It is estimated over 1,151 children (6%) age 0-16 could be living in poverty in East Lothian in 2019/20.

In 2021/22, it is estimated that 21.1% of children in East Lothian were living in poverty after housing costs, this is lower than the overall Scottish proportion which stood at 24.5%.

SIMD

UK Govt children in low income families

East Lothian had 104 incidents per 10,000 population of domestic violence recorded by Police Scotland in 2022/23. This was lower than the national average of 114.

Domestic abuse recorded by Police Scotland 2021/22

## Our approach

Inspection teams include inspectors from the Care Inspectorate, Healthcare Improvement Scotland, His Majesty's Inspectorate of Constabulary in Scotland and Education Scotland. Teams also include young inspection volunteers, who are young people with direct experience of care or child protection services. Young inspection volunteers receive training and support and contribute to joint inspections using their knowledge and experience to help us evaluate the quality and impact of partners' work.

We take a consistent approach to inspections by using the [quality framework for children and young people in need of care and protection](#). Inspectors collect and review evidence against all 22 quality indicators in the framework to examine the four inspection statements. We use a six-point scale (see appendix 1) to provide a formal evaluation of quality indicator 2.1: impact on children and young people.

## How we conducted this inspection

The joint inspection of services for children at risk of harm in the East Lothian community planning partnership area took place between 31 October 2023 and 3 April 2024. It covered the range of partners in the area that have a role in meeting the needs of children and young people at risk of harm and their families.

- We listened to the views and experiences of **39** children and young people and **55** parents and carers. This included face to face meetings, telephone or video calls and survey responses.
- We reviewed practice by reading a sample of records held by a range of services for **60** children and young people at risk of harm.
- We reviewed a wide range of documents and a position statement provided by the partnership.
- We carried out a staff survey and received **408** responses, with **352** fully completed from staff working in a range of services.
- We met with **approximately 130** staff who work directly with children, young people and families.
- We met with members of senior leadership teams, committees and boards that oversee work with children at risk of harm and their families.

We are very grateful to everyone who talked to us as part of this inspection.

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 and young person in East Lothian who may be at risk of harm.

## Key messages

- Children and young people were safer as a result of staff's effective recognition and response to risks and concerns.
- Partners worked well together using inter-agency referral discussions to plan responses if children and young people were at risk of harm.
- Most children and young people experienced positive relationships with staff that had helped to keep them safe.
- The Single Point of Access had enabled many children and young people to receive effective support for their mental health and wellbeing.
- Children and young people at risk of harm felt that staff working with them listened to and respected their views.
- There were examples of meaningful involvement at strategic level, but partners were not consistently seeking, collating and using the views of children and young people and their families to inform service improvements.
- Leaders worked well together through clear governance structures and reporting arrangements. Staff had confidence in their leaders.
- Partners had not fully established ways to collect, analyse and report on the difference services were making. They had scope to develop a greater understanding of this.

## Statement 1: Children and young people are safer because risks have been identified early and responded to effectively

### Key messages

- Children and young people were safer as a result of staff's effective recognition and response to risks and concerns.
- Partners had commenced an ambitious programme of transforming children's services with the aim of providing preventative and early support for families.
- Staff were confident in their ability to recognise and report child abuse, neglect and exploitation, and assess and analyse risks.
- Partners worked well together using inter-agency referral discussions to plan responses if children and young people were at risk of harm.

### Preventative approaches

East Lothian has one of the highest growing child populations in Scotland. It has a relatively low rate of families on low incomes, when compared to the national rate. However, there are areas of high deprivation and pockets of poverty throughout the local authority. National factors, including the lasting impact of the Covid-19 pandemic and cost-of-living crisis, have also negatively affected families. Tackling poverty and addressing inequalities was a key priority for the partnership. Partners had a strong awareness of poverty-related data and had carefully used this to inform their approaches to addressing poverty. In targeted areas, staff working across a range of services had helped to address poverty and disadvantage at an early stage.

#### Practice example: the Pennypit Centre

An example of effective targeted provision of support was the Pennypit Centre and the Pennypit Community Development Trust, a community centre in the Prestonpans area. This delivered early intervention and preventative support to families facing poverty and disadvantages. Staff in the centre knew their community well, understood local need and provided support sensitively and flexibly.

As a result, a range of tailored services had made a positive difference to local children and families, such as links with foodbanks, money advice, young dads' group, food parcels and clothing provision, breakfast clubs, low-cost birthday parties and local facilities for holding meetings for families.

Many third sector organisations were providing helpful support to children, young people and families across the area. Examples included: **Circle**, Homestart, The Bridges Project, Children 1st, Cyrenians, Women's Aid, Midlothian Young Peoples Advice Service (MYPAS), the Motorcycle project, Heavy Sound and the Volunteer Centre East Lothian (VCEL) Youth Befriending Service. However, waiting lists for some services had meant that some families had to wait for the right support.

Other preventative work included police school link officers who worked collaboratively in schools to provide crime prevention education programmes. Early and effective interventions had been developed by multi-agency partners with the aim of preventing criminal activity, preventing exploitation and improving relationships.

### **Addressing needs at an early stage**

Partners had experienced an increasing demand for support. In particular, referrals to social work services had increased by 35% over a 5-year period. Leaders recognised the need to continue to drive towards providing early and effective support to families, both as part of their commitment to keeping **The Promise** and also to help them to manage the increasing referrals to statutory services. As a result, education and children's services had started an ambitious programme to transform services, with the aim of intervening early and preventatively. One aspect of service redesign included the Families Together East Lothian service. This was being partly funded by Scottish Government's Whole Family Wellbeing Fund. The service had started in two pilot areas and was providing targeted support to families for a 12-week period to help prevent the need for further social work involvement or involvement from other services.

Education services had developed a locality planning forum approach in pilot areas. This approach brought together multi-agency staff across school clusters to help find creative solutions to supporting children and young people who had been identified as needing additional support. Staff reported that this helped them to work together, share ideas and approaches and intervene early to address concerns. There were plans to extend this throughout East Lothian.

The **Getting it Right for Every Child** (GIRFEC) approach was well-embedded. The majority of staff who completed our survey agreed that the GIRFEC approach was having a positive impact on the lives of children and young people at risk of harm. Staff demonstrated confidence in working together through **child planning meetings**. These helped staff to work collaboratively to identify concerns and plan support.

Overall, the collaborative GIRFEC approach had led to staff working well together to identify and work with children, young people and families who needed support. This was reflected in the low rates of children being referred to the **Scottish children's reporter administration** (SCRA) and in the low rates of children subject to compulsory supervision orders.

## Identifying and responding to concerns

Staff were confident in their ability to identify safety concerns for children and young people and knew how to respond. Almost all staff who completed our survey were confident in their knowledge, skills and ability to recognise, report and respond to signs of child abuse, neglect and exploitation. Almost all staff knew the standards of practice expected of them. They also felt supported to be professionally curious with the aim of keeping children and young people safe. Staff had good access to both multi-agency and single agency child protection training. This was reflected in our staff survey, with almost all staff who responded agreeing that the training they had attended had benefitted their work with children and young people at risk of harm.

Partners were committed to continuous development, particularly in supporting staff to identify and respond to child protection concerns. One example of this was that the chief executive of East Lothian council had requested that Education Scotland review their child protection policies, practices and guidance. This review was undertaken in 2022 and had resulted in the strengthening of education staff's role in multi-agency working in child protection processes. Education leaders had enhanced their quality assurance of child protection processes in schools. This ongoing focus had increased the confidence of education staff in thresholds for intervention and making child protection referrals.

Another example of development in approaches to identify protection concerns, was the launch of a neglect toolkit in 2023. Over 180 staff had attended training and this had equipped staff with the knowledge and skills to respond to concerns about the impact of poverty and neglect. Further training and awareness briefings are scheduled, along with plans to evaluate the impact of the toolkit.

Partners were working well together to identify and respond to domestic abuse concerns. **The Safe and Together** model and **multi-agency risk assessment conferences** (MARAC) were embedded in practice.

In our record reading, we evaluated partners' initial response to concerns as good or better in most records. There was routine communication with staff in **universal services** and concerns were shared in a timely manner. Clear decisions had been made about next steps.

## Investigating protection concerns

When children and young people were at risk of harm, staff responded effectively. Information was shared appropriately when there were concerns about a child's safety. Immediate action was taken to keep them and other children safe if this was needed. Legal measures were almost always explored and interim safety plans were developed for almost all children in the records that we read. We evaluated the quality of follow-up to concerns as good or better in most of the records that we reviewed.

The **inter-agency referral discussions (IRDs)** process was an area of strong practice. They helped staff to share information and make informed joint decisions about actions necessary if children and young people were at risk of harm. This included when concerns were reported out with core working hours. In the records we read, we found that IRDs were routinely happening and that police, health and social work were almost always fully involved. Additionally, the timescales for IRDs were almost always met. In all of the records that we read, clear decisions were made and written records were completed. The IRD process was supported and enhanced by regular audits and robust managerial oversight. All IRDs were quality assured by a multi-agency group and findings were helpfully used to direct further improvement work and had led to consistently high standards of practice. Learning themes from quality assurance had been further explored in development workshops with relevant staff.

Staff routinely considered the need for medical examinations and joint investigative interviews. The introduction of the **Scottish child interview model (SCIM)** and the creation of dedicated interviewers had ensured a co-ordinated **trauma informed approach** to the investigation of child protection concerns. This was helping to improve the quality of the investigative process for children and young people at risk of harm. For staff involved in SCIM this included support for vicarious trauma and wellbeing.

Partners had worked collaboratively to develop the **Sycamore Centre**, a centre specifically designed to provide a quiet, supportive space to carry out joint investigative interviews and medical examination if required. This space is now operational and will be used from early-mid April onwards. The ethos of the centre is trauma-informed and it has incorporated the principles of **'Bairns' Hoose'** standards. The sycamore suite may be used for medical examinations if required but most children and young people requiring a medical examination will visit the purpose-built, child-friendly Acorn Suite at the Royal Hospital for children and young people.

Vulnerable Young People's and **Care and Risk Management (CARM)** procedures were in place for when there were concerns about older young people. These were used as necessary following agreement at an IRD. They were being consistently applied and they helped guide staff to work collaboratively if young people were at risk of harm.

### **Impact of identification and response to concerns**

Children and young people were safer because concerns were being effectively identified and responded to by staff. When we spoke with staff, children and parents, we heard very good examples of how they had received support that had helped them become safer. Through our surveys, most children and young people reported that they felt safe all or most of the time. The majority of parents and carers who responded to our survey reported that their child was safer as a result of the support they had received. Our review of records showed that for most children and young people, risks of harm had reduced because of the help that had been provided.

## Statement 2: Children and young people's lives improve with high quality planning and support, ensuring they experience sustained loving and nurturing relationships to keep them safe from further harm

### Key messages:

- Most children and young people experienced positive relationships with staff that had helped to keep them safe.
- Children, young people and families were benefitting from high quality assessment and planning approaches.
- The Single Point of Access had enabled many children and young people to receive effective support for their mental health and wellbeing.
- Children and young people with very high levels of risk and need were being well supported by multi-agency staff to remain with family or in care settings locally.

### Assessment and planning to reduce risk

Our review of records highlighted that the partnership's approach to assessment and planning for children and young people was an area of strength. Staff were confident in their approaches to this aspect of their work. We evaluated the quality of assessments and child's plans as good or better in almost all the records we reviewed, demonstrating consistent high-quality practice. The partnership had a well-embedded **Signs of Safety** approach to assessments and plans. This helped staff to define harm, outline danger and identify safety goals in a way that was accessible to families and other staff. Assessments routinely included the views of children and young people and their parents and carers. All records that we read had a chronology and most contained multi-agency information. However, we evaluated the quality of chronologies as less strong than assessments and plans. Partners had recognised this as an area for development.

Following the publication of the National Guidance for Child Protection in Scotland in 2021, the partnership finalised and implemented the Edinburgh and Lothians Multi-Agency Child Protection Procedures in December 2023. This resulted in changes to child protection planning meetings and reviews. There was very good attendance and involvement from social work, police, health and education staff in these meetings. This helped partners to work together to plan and review risks and needs for children and young people. Risks were suitably explored and clear decisions were made at almost all planning meetings in the records that we reviewed.

We evaluated the quality of reviews as good or better in most records that we read. Independent reviewing officers routinely ensured children and young people were supported prior to and during review meetings. They helpfully encouraged children and young people to share their views.

As noted previously, for older young people, vulnerable young people's procedures and care and risk management procedures were also routinely being used to plan if young people were at risk or displaying signs of trauma. We found that staff were working well together through these processes and they were being used consistently. If young people were at risk of harm in the community, or if they were harming themselves or others, we evaluated the impact of work to reduce these risks as good or better in most of the records that we reviewed. Partners were keen to continue to make further improvement in their work to keep children and young people safe and had plans to further develop their **contextual safeguarding** approaches.

### **Support for children and young people at risk of harm**

The majority of staff responding to our survey were confident that children and young people who had experienced abuse and neglect were being supported to recover from their experiences. Our review of records highlighted strengths in relation to the impact of work to reduce risks and harm experienced by children and young people.

We heard positive examples of staff working together to address risks and needs. Practical help and therapeutic supports were available to families from universal services in education and health settings and through a range of third sector organisations such as Homestart and the Bridges. Targeted and intensive supports were provided by statutory services and third sector organisations. Families had good access to a wide range of creative and flexible support.

Various third sector organisations had been commissioned to provide children, young people and families with specialist support to address safety concerns. There were strong links between Children's Services and **Midlothian and East Lothian Drugs and Alcohol Partnership** and together they had jointly funded social workers to support children affected by parental drug and alcohol use. An example of specialist support was the provision of MYPAS to address the drug and alcohol use of young people. This service had effectively supported almost 50 young people during the 2022/23 reporting period and had evidenced significant reductions in their drug and alcohol use.

Children's 1<sup>st</sup> were providing Family Group Decision Making which had helped families to come together to make plans if children were at risk of harm. Families using the service reported they had strengthened family connections, given children voices in their plans and had helped families to provide solutions to concerns.

Children's services had partnered with the **National Society for the Prevention of Cruelty to Children** and were one of three areas nationally to take part in the Harmful Sexual Behaviour Programme. The aim of this is to help partners to

develop and improve approaches to children and young people displaying harmful sexual behaviour. While it was too early to tell the impact of this work, it is an illustration of the partnership's approach to working collaboratively with third sector organisations to provide targeted and specialist support to children and young people at risk of harm.

Circle was providing targeted support for families with very young children, most of whom had been referred to the service during pregnancy to address concerns arising from drug or alcohol use, domestic abuse or parenting support. We heard examples of how this whole family support service, provided by family support workers, had positively impacted families with very young children and had led to improved safety and wellbeing.

### **Practice example: Olivebank Child and Family Centre**

Over the past year, significant changes had been made to the Olivebank Child and Family Centre and the service now provides perinatal and postnatal support to families with children up to the age of two years across the East Lothian area. The service has worked with a wide range of parents and young children to address issues such as parental drug and alcohol use, parental mental health concerns, supporting new parents who need additional practical and emotional support and supporting care experienced parents.

Support is flexible and can be up to five days per week. It is designed to meet the needs of each unique family referred to the service and includes practical, emotional, financial support for families as well as running parenting programmes and other groupwork. In order to demonstrate the impact of the service, staff record impact information three times a year, using a bespoke assessment for each child and family. This assessment considers parental and baby mental health and wellbeing, early years developmental milestones, the parent-child attachment. Staff in the service also carefully considered the experiences of very young children.

This together with feedback from families, is helping the service to map impact on an individual level. The service is currently considering how to best aggregate this information to track progress and consider the impact of the service as a whole.

As part of the partnership's commitment to keeping The Promise, the strategic approach to ensuring that children, young people and families remain in East Lothian had helped some children to return to their communities and had prevented others from moving away. This meant that services and staff in East Lothian were supporting children and young people with very high levels of complex needs and risks to remain within the local area. Staff were working well together to carefully plan creative care and support for those children and young people who were at high risk of requiring alternative care arrangements as a result of trauma and other complexities.

This approach had been well supported by senior leaders in children's services who had a very good awareness of the children and young people with the highest level of risks and needs, and the pressures on local services. Further work was underway to develop the capacity of services to provide intensive community-based supports. Children's services had recently commissioned Action for Children to deliver a new intensive outreach service - Chances - the impact of which will need to be evaluated in due course.

### **Mental health and wellbeing support**

The partnership had developed a **Single Point of Access** utilising staff in education, health, social work and the third sector. This provided a triage approach to mental health and wellbeing requests for assistance and supported early intervention. Through this approach, staff were able to select the most appropriate service from a suite of options including counselling, wellbeing support, art therapy, group work, and support from young people's mental health youth workers. As a result, in the past year around 700 children received effective support to address their mental health and emotional wellbeing needs. However, some services, particularly counselling, had lengthy waiting lists because of the volume of referrals.

This approach supports the screening of **Child and Adolescent Mental Health Service** (CAMHS) referrals and ensures that children and young people are receiving the most appropriate and timely support for their mental health and wellbeing. Waiting times for CAMHS had significantly reduced since the commencement of Single Point of Access and are lower in East Lothian than in neighbouring areas. CAMHS provided services to children and young people with more complex mental health needs was providing a crisis intervention service and an unscheduled care service to support young people in crisis. However, some staff working with children and young people and a few families reported that they still struggled to access timely support at times of crisis.

### **Quality of relationships**

Most children and young people at risk of harm were benefiting from trusting relationships with staff working with them. All the children that we heard from had the support of an adult they could trust. Most told us that they felt listened to and had had their rights explained to them. The majority of staff who completed our survey agreed that children and young people at risk of harm were thriving as a result of nurturing and enduring relationships with the people involved with them.

The Signs of Safety approach included the use of a range of tools such as 'the three houses' and 'words and pictures.' Staff were encouraged to spend quality time with children and their families and routinely used tools to help them to communicate well with children and their families.

There were very good examples of children and young people benefiting from their relationships with social work staff, school staff and staff from a variety of third sector

projects. However, there were a few children and young people who told us that they had experienced changes of staff involved in supporting or working with them, which had impacted on them. Likewise, while the majority of parents and carers told us that their trusting relationships with staff had helped them, a few parents and carers shared that they had found it difficult to access support.

Similar to issues faced across Scotland, staff and leaders told us about the staffing challenges that had arisen, particularly since the Covid-19 pandemic. Extensive efforts had been made to recruit, retain and support staff across agencies through the grow your own approach. This focuses on attracting, developing, supporting, and retaining employees by working with local colleges and universities to train and support newly qualified staff. Recruitment procedures highlighted their organisational commitment to workload management, promoting wellbeing and supporting a trauma informed workforce. These efforts had led to recent improvements in staffing levels, particularly in social work services.

### Statement 3: Children, young people and families are meaningfully and appropriately involved in decisions about their lives. They influence service planning, delivery, and improvement.

#### Key messages:

- Children and young people had a very good awareness of their rights.
- Children and young people were being well supported by staff to participate, share their views and contribute to decision-making.
- Children and young people at risk of harm felt that staff working with them listened to and respected their views.
- Partners were not consistently seeking, collating and using the views of children and young people and their families to inform service improvements.

#### Rights-based practice

Children and young people had a very good awareness of their rights. Rights-based approaches in schools had helped increase awareness and understanding for both staff and pupils. Work across the partnership meant that rights-based language was well-embedded and helped staff, children and young people and families to understand children's rights and the importance of the **United Nations Convention on the rights of the child (UNCRC)**.

As a result of the partnership's focus on children's rights, staff understood the importance of ensuring that children's rights to express their views, feelings and wishes were central to their work. Staff worked well to ensure that children and young people shared their views and contributed to decision-making.

#### Involvement of children and young people in decision-making

Children and young people at risk of harm were suitably involved throughout key protective processes, including during investigations, at meetings and when plans were reviewed. During investigations, the views of children had been considered in most of the records we read. A majority of children and young people contributed to multi-agency meetings and reviews. Their views were also routinely sought prior to meetings led by Independent Reviewing Officers, who are responsible for chairing meetings. The ways in which children were listened to, heard, and involved by staff was rated as good or better in most of records that we read.

The Signs of Safety approach to assessments and planning had helped social work staff to ensure that the views and experiences of children and their families were central to assessments, plans and reviews. Families found this approach helpful and understandable. Other services using Signs of Safety, such as Olivebank, Family

Nurse Partnership, Health Visiting and Circle, were working well to promote the involvement of very young children and emphasised the importance of understanding and interpreting the behaviour of very young children in their work.

Overall, children and young people at risk of harm felt that staff working with them listened to and respected their views. In our children and young people survey, almost all of the respondents agreed that they had been listened to and that they have someone who supports them to express their views. In the staff survey, a majority of respondents felt that children and young people, parents and carers were able to contribute and participate meaningfully in decisions that affected their lives.

### **Independent advocacy**

When children and young people were care experienced or when they attended children's hearings, they had access to independent advocacy. Advocacy staff were involved in supporting the work of the East Lothian **Champions Board** as well as individually advocating for children and young people. We received positive feedback from children and young people about the support from advocacy staff.

Children and young people that we met, read the records of, and who completed our surveys had a very good understanding of their right to be heard. They were being well supported by staff who knew them to share their views in important meetings. While two services provide advocacy, neither was commissioned to work with children and young people at risk of harm, unless they were care experienced or attending children's hearings. Partners advised of ongoing efforts to secure funding to fill this gap, but this had not yet been achieved.

### **Influence of children and young people**

Partners had a clear vision for the promotion of children's views and experiences in service improvement. As a result, the views of children, young people and families had influenced service developments. This included informing school improvement plans, education improvement plans and wider children's services planning.

Young people also had an influence in the creation of the Youth Vision Strategy 2023 to 2026 through the **Young People's Advisory Group**. Children and young people also had opportunity to influence Poverty Action planning. Some children, young people and families had shared their experiences and had been encouraged to outline key areas that they would like to see improve.

Third sector organisations had involved children, young people and families in the planning and evaluation of their services. Very good examples included Circle, MYPAS and the Bridges project. In these examples, children, young people and families who used the services had shared their experiences, provided feedback and worked closely with staff to influence the strategic direction of the services.

Children's services planning processes included consultation and engagement with the East Lothian Champions Board. The East Lothian Champions Board was well

established and brought together young people with lived experience to share their views and influence service delivery. Through the East Lothian Champions Board senior leaders of key services had been identified as ‘ambassadors.’ This connected senior leaders with young people and helped views and experiences to be heard and understood.

An example of the involvement of young people was that partners had worked collaboratively with Who Cares Scotland to publish a ‘Home and Belonging’ report which explored care leavers’ experiences. The report was co-produced by a care experienced young person and a senior housing strategy officer. It included the views of a range of young people across East Lothian. The impact of this report was that it informed key strategic planning, including the 2024-29 Local Housing Strategy and East Lothian Partnership Corporate Parenting Plan 2024-27.

Other examples of consultation with children and young people included helping to identify priorities for the transforming services for children programme and supporting the design of whole family support. These were good examples of how the partnership had consulted with children and young people as part of strategic planning. The partnership recognised that more could be done to ensure that this was being done consistently in order that the views of children and young people at risk of harm were consistently used to inform service improvements.

## Statement 4: Collaborative strategic leadership, planning and operational management ensure high standards of service delivery

- Leaders, operational managers and staff shared high aspirations and a strong value base for the delivery of services.
- Leaders worked well together through clear governance structures and reporting arrangements. Staff had confidence in their leaders.
- Staff felt well supported through supervision arrangements, peer support and the support of their managers.
- Partners had not fully established ways to collect, analyse and report on the difference services were making.

### Vision, values and aims

The Community Planning Partnership had an agreed, clear and ambitious vision that East Lothian should be prosperous, community-minded and fair. Partners had placed improving outcomes for children, young people and families at the centre of their aims. Their shared vision was articulated in the Children and Young People's Services Plan 2023 – 2026 as "Making sure East Lothian's babies, children and young people are happy, healthy and heard". Most staff who completed our survey agreed that leaders had a strong vision for the delivery and improvement of services.

Key strategic plans were well connected through the shared vision. Plans provided a framework for leaders of services for children and young people to share their ambitions for children and young people at risk of harm. The children's services plan was clearly aligned with the Promise and was helpfully framed around the Promise foundations. It was also underpinned by a rights-based approach in line with the UNCRC.

Leaders, operational managers and staff shared a strong value base and high aspirations for the delivery of services. Leaders were visible and approachable. Most staff who responded to our survey felt that leaders were highly visible, communicated well and knew the quality of work they were able to deliver. We observed leaders to have strong working relationships that were respectful and supportive. Elected members also valued their close working relationships with senior leaders across the partnership and felt confident in the leadership arrangements.

### Leadership of strategy and direction

Leaders and elected members were working in a context of increasing demand for services along with increasing pressure on financial resources. Together, they continued to prioritise services for children and young people at risk of harm. They

recognised the importance of services that were working to keep children and young people safe and supported.

Children's services planning sits within a clear governance and accountability structure, led by the **East Lothian Children's Strategic Partnership (ELCSP)**. Leaders had streamlined the children's services plan to focus on three key areas: children and young people's rights; children and young people's mental health and whole family wellbeing. Leaders had built in an annual review of progress in order to maintain focus and ensure they continue to have the right priorities.

Strategic planning is overseen by elected members through the education and children's services committee. Elected members were well sighted on service developments, performance measures and identified risks. The governance structure and reporting arrangements provided a suitable mechanism for leaders, senior managers, third sector representatives and elected members to oversee services for children and their families.

The **East and Midlothian Public Protection Committee (EMPPC)** provided effective leadership of child protection. Reporting arrangements to the **Critical Services Oversight Group (CSOG)** ensured leaders were well-sighted on current and emerging risks, both in a local and national context. Working across the two local authority areas (East Lothian and Midlothian) had enabled partners to share information, learning and resources and helpfully benchmark performance. The jointly resourced public protection office provided the conduit from strategic direction to operational practice.

### **Leadership of people and partnerships**

There was evidence of positive working relationships across the whole partnership. Leaders worked well together and this provided an example and set expectations for operational managers and staff. Staff had very good collaborative working relationships across agencies and this was promoted and visible across the partnership. Staff were well supported to work jointly across services and were proud of the contribution they were making.

Staff benefited from the range of opportunities available to support their development and staff were positive about the quality of learning and training available to them. Almost all staff who completed our survey reported that the training they had undertaken had increased their confidence and skills in working with children and young people at risk of harm.

The importance of relational work and trauma informed practice was a key priority for leaders. Developing a trauma informed workforce had been prioritised and training was underway across the partnership. We heard very good examples of staff understanding the impact of trauma and working together to prevent the re-traumatisation of children and young people through careful joint planning. This understanding of the importance of trauma-informed practice was also reflected in our conversations with senior leaders and elected members.

The learning and practice development sub-group of the EMPPC ensured the multi-agency learning and development framework focused on key priority areas. It was shaped against local priorities and influenced by action plans arising from learning reviews and local audit activity. The next step for the partnership was to develop an understanding of the difference development opportunities were making on improving the experiences of children, young people and families.

Staff felt well supported through supervision arrangements, peer support and the support of their managers. Staff told us that they felt valued, listened to and respected. Most staff who completed our survey received regular supervision. There were particularly positive survey responses from social work and health staff about their supervision arrangements. The introduction of an education support officer for child protection had helped education staff to better access support and advice in relation to child protection matters.

Recruitment of staff across a range of services throughout East Lothian was a challenge for leaders, as it has been throughout Scotland. The capacity of services was an area of concern for some staff members. However, leaders had a strong understanding of the impact of recruitment challenges and had worked hard to develop solutions. The 'grow your own' approach was an example of a strategy to address this.

### **Leadership of improvement and change**

Partners were committed to an ambitious transformational change programme. An evidence-based approach had been taken to map their systems and processes and understand children's journeys through services. Consultation with families, staff and other stakeholders was integral to the process which included reviewing the key purpose, outcomes and operating principles for the whole of children's services. However, progress on this change programme had been delayed by the impact of the Covid-19 pandemic, changes in leadership arrangements and staffing pressures.

At the time of the inspection, the redesign programme was already underway it is intended to make transformational changes to the re-direction of services towards prevention, early intervention and family support, aligned with The Promise. Various approaches and tests of change had commenced in education and children's services, such as Child Planning Framework locality teams, Families Together East Lothian approaches and changes to Olivebank, as outlined earlier. Other developments have included the introduction of a third sector commissioning group, which has brought greater openness and clarity for commissioned services.

The redesign programme also includes partners' commitment to keeping children and young people in East Lothian and reducing statutory involvement with children and their families. Through the 'Belonging to East Lothian' policy approach, partners had significantly reduced their numbers of looked after children and had kept more children at home or in community settings in East Lothian. This had taken a significant amount of strategic drive and operational effort. For children and young

people who were identified as being at risk of harm, this meant that they were more likely to remain at home and be provided with intensive supports to sustain these arrangements.

### **Self-evaluation, quality assurance and the use of data**

Leaders demonstrated a commitment to improving the quality of services for children and young people at risk of harm. They were working well together to drive improvements in priority areas whilst balancing the need for stability. The CSOG and EMPPC had recently undertaken self-evaluation activities which had helped them to assess their own effectiveness. They had re-structured the sub-group arrangements and created a new child protection sub-group to allow more focus on child protection matters. This was an example of leaders' willingness to try new approaches and make changes to leadership arrangements if required.

Improvement work across the partnership was influenced by a range of learning opportunities. Quality assurance activities and learning from case reviews underpinned improvement activities for child protection practice. Examples of recent audit activities included a review of Care and risk management (CARM), signs of safety audit and an audit by NHS Lothian on cause for concern reports. Staff and managers were involved in quality assurance activities which helped to connect strategic goals with frontline practice.

The performance and care governance group had recently developed a quality assurance framework for children's services which was helping them to oversee audit and quality assurance activities. However, the range of self-evaluation and quality assurance activities across the partnership was not yet being systematically pulled together to provide an overarching view of service performance to inform longer term improvement priorities.

Partners were routinely gathering a wide range of data. Examples included the child protection minimum data set, SCIM data set, drug and alcohol data set and performance related data for children's service planning. These data sets were process driven and did not demonstrate the impact of services on the lives of children and young people. While some individual services were gathering impact-related information, this was not being routinely gathered, aggregated and analysed to inform the planning of service delivery. As a result, the partnership had not yet fully developed mechanisms necessary to fully understand the impact services were having on the lives of children, young people and their families.

## Evaluation of the impact on children and young people - quality indicator 2.1

For these inspections we are providing one evaluation. This is for quality indicator 2.1 as it applies to children at risk of harm. This quality indicator, with reference to children at risk of harm, considers the extent to which children and young people:

- feel valued, loved, fulfilled and secure
- feel listened to, understood and respected
- experience sincere human contact and enduring relationships
- get the best start in life

### Evaluation of quality indicator 2.1: **Very Good**

We found important strengths that had significant positive impacts on children and young people's experiences.

- Children and young people at risk of harm were receiving support from a range of services which was effectively improving their safety.
- Children and young people are experiencing enduring relationships with staff. Staff understand the importance of these relationships in supporting positive outcomes for children and young people
- For most children and young people at risk of harm the support they received from both statutory and commissioned services was improving their wellbeing.
- Children and young people at risk of harm were routinely listened to and meaningfully involved in decisions that affect their lives.
- Children and young people are being effectively informed about and understood their rights.

We identified two areas where the partnership will need to consider how to ensure consistency in experience and outcomes for children and young people at risk of harm and their families.

- Independent advocacy is well established, and the partnership is committed to filling the gap which means that currently some children and young people at risk of harm do not have access to this support if they want it.
- There were examples of meaningful involvement at strategic level, but partners were not consistently using the views of children and young people and their families to inform service improvements.

Whilst improvements are required to maximise the wellbeing and experiences of children and young people, the strengths identified clearly outweigh areas for improvement. Therefore, we evaluated quality indicator 2.1 impact on children and young people as Very Good. See appendix 1 for more information on our evaluation scale.

## Conclusion

The Care Inspectorate and its scrutiny partners are confident that the partnership in East Lothian has the capacity to make changes in the areas that require improvement.

This is based on the following:

- Leaders, including elected members, recognised the need for continuous improvement. They had demonstrated commitment in their collaborative working and investment in new approaches and services.
- Evidence of strong partnership working, and staff and leaders demonstrating their commitment to improving outcomes for children, young people and families.
- There was evidence of effective joint working and self-evaluation across the partnership having led to improvement in key processes. They were taking steps to address areas for improvement already identified, most of which matched the findings of our inspection.

## What happens next?

The Care Inspectorate will request that a joint action plan is provided that clearly details how the partnership will make improvements in the key areas identified by inspectors. We will continue to offer support for improvement and monitor progress through our linking arrangements.

## Appendix 1: The quality indicator framework and the six-point evaluation scale

Our inspections used the following scale for evaluations made by inspectors which is outlined in the [quality framework for children and young people in need of care and protection](#). Published in August 2019, it outlines our quality framework and contains the following scale for evaluations:

- **6 Excellent** - Outstanding or sector leading
- **5 Very Good** - Major strengths
- **4 Good** - Important strengths, with some areas for improvement
- **3 Adequate** - Strengths just outweigh weaknesses
- **2 Weak** - Important weaknesses – priority action required
- **1 Unsatisfactory** - Major weaknesses – urgent remedial action required

An evaluation of **excellent** describes performance which is sector leading and supports experiences and outcomes for people which are of outstandingly high quality. There is a demonstrable track record of innovative, effective practice and/or very high-quality performance across a wide range of its activities and from which others could learn. We can be confident that excellent performance is sustainable and that it will be maintained.

An evaluation of **very good** will apply to performance that demonstrates major strengths in supporting positive outcomes for people. There are very few areas for improvement. Those that do exist will have minimal adverse impact on people's experiences and outcomes. While opportunities are taken to strive for excellence within a culture of continuous improvement, performance evaluated as very good does not require significant adjustment.

An evaluation of **good** applies to performance where there is a number of important strengths which, taken together, clearly outweigh areas for improvement. The strengths will have a significant positive impact on people's experiences and outcomes. However, improvements are required to maximise wellbeing and ensure that people consistently have experiences and outcomes that are as positive as possible.

An evaluation of **adequate** applies where there are some strengths, but these just outweigh weaknesses. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people is reduced significantly because key areas of performance need to improve. Performance that is evaluated as adequate may be tolerable in particular circumstances, such as where a service or partnership is not yet fully established, or in the midst of major transition. However, continued performance at adequate level is not acceptable. Improvements must be made by building on strengths while addressing those elements that are not contributing to positive experiences and outcomes for people.

An evaluation of **weak** will apply to performance in which strengths can be identified but these are outweighed or compromised by significant weaknesses. The weaknesses, either individually or when added together, substantially affect peoples' experiences or outcomes. Without improvement as a matter of priority, the welfare or safety of people may be compromised, or their critical needs not met. Weak performance requires action in the form of structured and planned improvement by the provider or partnership with a mechanism to demonstrate clearly that sustainable improvements have been made.

An evaluation of **unsatisfactory** will apply when there are major weaknesses in critical aspects of performance that require immediate remedial action to improve experiences and outcomes for people. It is likely that people's welfare or safety will be compromised by risks that cannot be tolerated. Those accountable for carrying out the necessary actions for improvement must do so as a matter of urgency, to ensure that people are protected and their wellbeing improves without delay.

## Appendix 2: Key terms

Note: more key terms that we use are available in [The Guide](#) to our inspections.

**Bairn's Hoose:** is Scotland's approach to the Icelandic 'Barnahus,' which means 'children's house.' Bairn's Hoose offers holistic, child-centred support to those who have been victims or witness of abuse and to children under the age of criminal responsibility whose behaviour has caused harm.

**Care and risk management (CARM):** are processes which are applied when a child between the ages of 12 and 17 has been involved in behaviours which could cause serious harm to others. This includes sexual or violent behaviour which may cause serious harm. CARM processes are also applicable when an escalation of behaviours suggests that an incident of a seriously harmful nature may be imminent.

**Champions boards:** allow young people to have direct influence within their local area and hold their corporate parents to account. They also ensure that services are tailored and responsive to the needs of care experienced young people and are sensitive to the kinds of vulnerabilities they may have as a result of their experiences before, during and after care. Young peoples' views, opinions and aspirations are at the forefront in this forum and are paramount to its success. Champions boards build the capacity of young people to influence change, empower them by showing confidence in their abilities and potential, and give them the platform to flourish and grow.

**Child and adolescent mental health services (CAMHS):** are multi-disciplinary teams that provide assessment and treatment/interventions in the context of emotional, developmental, environmental and social factors for children and young people experiencing mental health problems, as well as training, consultation, advice and support to professionals working with children, young people and their families.

**Child planning meetings:** a single multi-agency planning process around the child's plan with involving those practitioners who support the child and family and are likely to be participants at a child's plan meeting. This can be one off or ongoing meetings.

**Circle:** Circle is a third sector organisation that works alongside whole families to offer practical, emotional, parenting, connecting and advocacy whole family support

**Critical services oversight group (CSOG):** CSOG provides governance over the East Lothian and Midlothian Public Protection Committee and maintains an overview of wider Public Protection issues. It maintains oversight of the findings and learning from Learning Reviews, self-evaluation and external scrutiny.

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

**Contextual safeguarding:** an approach that recognises that as young people grow and develop, they are influenced by a whole range of environments and people outside of their family.

**East Lothian and Midlothian public protection committee (EMPPC):** brings together all the organisations involved in protecting individuals in East Lothian and Midlothian. Their purpose is to make sure local services work together to protect children and adults from abuse and keep them safe.

**Getting it Right for Every Child (GIRFEC):** is a national policy designed to make sure that all children and young people get the help that they need when they need it.

**Independent advocacy:** is when the person providing advocacy is not involved in providing the services to the individual, or in any decision-making processes regarding their care.

**Inter-agency referral discussion (IRD):** is the start of the formal process of information sharing, assessment, analysis and decision making following reported concern about abuse or neglect of a child or young person under the age of 18 years, in relation to familial and non-familial concerns. This may include discussion of concern relating to brothers and sisters, or other children within the same context, and can refer to an unborn baby that may be exposed to current or future risk. They may also be known as initial referral discussions, or initial referral tripartite discussions.

**Midlothian and East Lothian Drugs and Alcohol Partnership (MELDAP):** is a locally based, inter-agency strategic partnership responsible for commissioning and developing local strategies for tackling problem alcohol and drug use and promoting recovery.

**Multi-agency risk assessment conferences (MARAC):** is a regular, local meeting where information about domestic abuse victims at risk of the most serious levels of harm (including murder) is shared between representatives from a range of local agencies to inform a co-ordinated action plan to increase the safety of the victim and their children.

**Safe and Together:** is a model containing a suite of tools and interventions designed to help staff improve their awareness and understanding of domestic abuse. The model is based on three key principles: keeping children safe and together with their non-abusive parent, ensuring safety, healing from trauma, stability and nurture; partnering with the non-abusive parent as a default position ensuring efficient, effective and child-centred practice; and intervening with the perpetrator to reduce the risk and harm to the child through engagement, accountability and criminal justice.

**Scottish Child Interview Model (SCIM):** is a new approach to joint investigative interviewing that is trauma informed. It maintains the focus on the needs of the child

in the interview, minimises the risk of further traumatisation and aims to achieve best evidence through improved planning and interview techniques.

**Scottish Children's Reporter Administration (SCRA):** an executive non-departmental public body of the Scottish Government with responsibility for protecting children at risk.

**Sycamore Centre:** The Sycamore Centre includes two children's house, Aspen and Rowan, each have 2 interview suites which provide a quiet, supportive space for children and young people that can be tailored to individual needs. This is a partnership between NHS Lothian, Police Scotland, City of Edinburgh Council, Mid Lothian and East Lothian Councils and working with third sector colleagues. The ethos of the Sycamore Centre is trauma informed.

**Trauma informed approach:** being 'Trauma Informed' means being able to recognise when someone may be affected by trauma, collaboratively adjusting how we work to take this into account and responding in a way that supports recovery, does no harm and recognises and supports people's resilience.

**The Promise:** was established to take forward the work of the Independent Care Review. In 2021, it published its plan for 2021-2024, outlining key outcomes that aim to ensure that Scotland's children and young people grow up loved, safe and respected, so they can realise their full potential.

**United Nations Convention on the Rights of the child (UNCRC):** is a widely ratified international statement of children's rights.

**Universal services:** is the term given to those services used by the whole population of children and young people, mainly in health and education, including schools and nurseries, GP and health visiting.

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