

# Education, Children and Families Committee

10am, Thursday, 11 September 2014

## Integrated Children's Services

Item number	7.11
Report number	
Executive/routine	Executive
Wards	All

### Executive summary

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Over the last three months a consultation process has begun to progress the further development of Integrated Children's Services as reported to Committee in May 2014.

The original high level paper provided the platform for consultation and engagement across the areas of provision within scope of an Integrated Service. This engagement has primarily involved staff as well as recognising Trade Union consultation processes where appropriate and relevant to the changes proposed. A summary of the staff consultation survey is attached as Appendix 1. There are further plans to work directly with children, young people and their families to seek their views on ways to improve service design and delivery as we go forward with integration.

The proposal will establish systems that further develop effective partnership working at a local level to deliver even better outcomes for children, young people and their families here in Edinburgh.

Further detail about the locality structure to deliver Integrated Children's Services is contained at Appendix 2. Following the consultation process, firm proposals (including management structures) for Integrated Children's Services will now be developed and submitted to the Scottish Government along with the paper which will set out the integrated adult health and social care arrangements within the city.

### Links

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Coalition pledges [P1](#), [P36](#)

Council outcomes [CO1-CO6](#)

Single Outcome Agreement [SO2](#), [SO3](#)

There will be no immediate impact on management and organisational structures within Children and Families: any changes that occur going forward will be consistent with work to strengthen locality management and service delivery being developed as one of the key BOLD workstreams.

## **Recommendations**

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- 1.1 The Committee is asked to note the feedback from the consultation process which demonstrates staff support for further integration of services.
- 1.2 That the Committee requests a further paper to be submitted to the December Committee detailing the proposal to be submitted to the Scottish Government along with details of Health and Social Care Integration within the city.
- 1.3 That this report is forwarded to the Corporate Policy and Strategy Committee for information.

## Integrated Children's Services

### Background

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- 2.1 There is a long history of partnership working in children's services in Edinburgh, supported by the Edinburgh Children's Partnership and Integrated Plan for Children and Young People.
- 2.2 The proposal to move towards greater integration will build on this work and also take account of the changes required to the management of a range of health services when the existing Community Health Partnership ceases to exist in line with the establishment of the adult Health and Social Care Partnership by April 2015.

### Main report

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- 3.1 The Christie Commission report outlined the importance of integrating public services if we wished to improve outcomes for the people of Scotland. The four Lothian Local Authorities and NHS Lothian have moved forward promptly with proposals for integration. The programme of work to deliver an integrated children's service builds on an ethos of integrated children's service planning in Lothian and follows on from considerable work in establishing the shadow Health and Social Care Partnerships.
- 3.2 The creation of shadow Health and Social Care Partnerships (Joint Integrated Boards) and anticipated future dissolution of the Community Health Partnerships (CHPs) in or beyond April 2015 has a consequential effect for the future management of universal community child health services.
- 3.3 There is a strong desire to strengthen the integration of children's services through collaborative working to improve outcomes for, and the wellbeing of, children, young people and families in Edinburgh. Over the last six months discussions have taken place between Chief Executives of NHS Lothian, City of Edinburgh Council, Non-Executive members and CEC Elected Members on how best to build upon the successful partnership.
- 3.4 An effective children's integrated planning partnership is already in place comprising of officers representing the Council services for children, the full range of health services for children, police and the voluntary sector. However there is not a joined up governance arrangement and this is a particular gap and one that the Chief Executives are committed to resolving through effective alignment of service planning, joint commissioning and quality assurance.

- 3.5 There is no intention of City of Edinburgh Council to delegate Children and Families function to the emerging Health and Social Care Partnership nor is there a desire to delegate universal health service provision to the Health and Social Care Partnership. There is, however, a desire to have greater management alignment across all children's services and a joined up governance mechanism to support these arrangements. This has been taken into account when considering the future potential management and governance arrangements for all children's health services currently being delivered in Edinburgh, including those within the Women and Children's Directorate and Edinburgh CHP.
- 3.6 Feedback from the staff engagement exercise is largely supportive of the direction of travel with the majority of staff responding (79%) strongly agreeing/agreeing with the statement "I think the proposals will strengthen partnership working in Edinburgh" and 79% agreeing that the proposals will have a positive impact on **outcomes** for children and young people.
- 3.7 The next phase of engagement will focus on working directly with children, young people and their families to gather ideas and suggestions for improving service delivery. Early feedback from consultation with parents and carers in Total Craigroyston would indicate a real willingness to engage in these discussions and opportunities and ideas for service redesign as a result.
- 3.8 Further work to develop integration at a neighbourhood level will be progressed as an integral part of the BOLD workstream addressing this issue and the development of management structures at a local level will reflect this approach.
- 3.9 The model of integration consolidates the good work that is taking place currently at school cluster level and supports the realignment of wider resources around each high school, its feeder primaries, pre-school provision and health visiting and school nursing services.
- 3.10 Opportunities for greater alignment of boundaries across the city are currently being explored across Council service areas and with partners and a paper is being prepared for discussion at the September Edinburgh Partnership. Further development of the integration agenda will take due account of these discussions.

## Measures of success

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- 4.1 The Integrated Children's Plan, the Children and Families Service Plan and the NHS Lothian Children and Young People's Health and Wellbeing Strategy outline the areas of activity which will maintain and improve outcomes for children, young people and their families in Edinburgh. The existing performance framework which supports these plans will be reviewed and further developed to acknowledge Integrated Services. We would expect to see improvements in the priority areas within these plans. We would also expect that

feedback from staff would demonstrate the added value of further integration through the introduction of greater co-location, shared infrastructure resources and improved communication and information sharing.

## **Financial impact**

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- 5.1 The development of Integrated Services will be managed within existing Children and Families and NHS Lothian budgets and we anticipate that efficiencies can be achieved through the development of more shared resources and business support functions at a neighbourhood level.

## **Risk, policy, compliance and governance impact**

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- 6.1 There are no direct implications for policy, compliance or governance arising from the recommendations in this report.

## **Equalities impact**

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- 7.1 In the next stage of development, a full Equalities and Right Impact Assessment will be undertaken and the outcomes of this will be addressed both in strategic planning and operational service delivery implementation. It is anticipated that the development of better integrated children's services should help us address areas of inequality more effectively and consistently.

## **Sustainability impact**

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- 8.1 Developing models of collocation and shared services will have a positive effect in terms of property use and associated energy requirements and the development of more integrated working practices should contribute to more sustainable services in the longer term.

## **Consultation and engagement**

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- 9.1 This proposal to develop Integrated Children's Services continues to build on the very positive work of the multi-agency Edinburgh Children's Partnership, its Chief Officer group and each of the Strategic Oversight Groups designed to ensure multi-agency delivery of actions within the Integrated Plan for Children and Young People.
- 9.2 A full information, consultation and engagement programme will be developed to explore the potential in this discussion document and to determine the best structures and approaches to delivering integrated services which improve outcomes.

## **Background reading/external references**

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- 10.1 ["Towards Integrated Children's Services" – Appendix 1 Education Children and Families Committee Report March 2014](#)

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## Links

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<b>Coalition pledges</b>	<p>P1. Increase support for vulnerable children, including help for families so that fewer go into care.</p> <p>P36. Develop improved partnership working across the Capital and with the voluntary sector to build on the “Total Craigroyston” model.</p>
<b>Council outcomes</b>	<p>CO1. Our children have the best start in life, are able to make and sustain relationships and are ready to succeed.</p> <p>CO2. Our children and young people are successful learners, confident individuals and responsible citizens making a positive contribution to their communities.</p> <p>CO3. Our children and young people in need, or with a disability, have improved life chances.</p> <p>CO4. Our children and young people are physically and emotionally healthy.</p> <p>CO5. Our children and young people are safe from harm or fear of harm, and do not harm others within their communities.</p> <p>CO6. Our children and young people’s outcomes are not undermined by poverty and inequality.</p>
<b>Single Outcome Agreement</b>	<p>SO2. Edinburgh’s citizens experience improved health and wellbeing, with reduced inequalities in health.</p> <p>SO3. Edinburgh’s children and young people enjoy their childhood and fulfil their potential.</p>
<b>Appendices</b>	<p>Appendix 1 - Integrated Children’s Services staff survey</p> <p>Appendix 2 - Integrated Children’s Services Management Group - Terms of Reference</p>

# **Integrated Children's Services staff survey**



**Edinburgh Children's  
Partnership  
6 August 2014**

Survey ran between May and end of July 2014

## **265 responses**

Schools	43
Other Children and Families	36
Health Visiting	31
Royal Sick Children's Hospital staff	28
AHPs	27



Survey asked:

*'I think the proposals for integrating children's services will strengthen partnership working in Edinburgh'*

**79% agreed** (strongly agree and agree)

*'The proposals will support me to deliver a more effective service'*

**61% agreed**

For both statements, others tended to tick 'neither agree or disagree' rather than disagree options

*'With reference to your answers above, can you tell us about any opportunities or benefits you see in relation to the proposals?'*

**189** people responded, with a number of themes and issues emerging:

- Better multi-agency partnership working, increased links, more seamless service for children and their families
- Simpler, more effective access to services with less waiting time
- More effective planning and delivery of services

- ❑ Help for children and families to get the support they need earlier
- ❑ Better understanding/awareness of different services; better communication and relationships between professionals
- ❑ Opportunity to build on the success of CSMGs and enhance the implementation of GIRFEC further
- ❑ Less bureaucracy and less duplication
- ❑ More scope for local 'place-based' approaches like Total Craigroyston/neighbourhood

*'Can you tell us about any barriers or disadvantages you see in relation to the proposals?'*

**180** people answered. Main issues:

- ❑ Worries that issues re capacity, workloads and staff levels will make the proposals unrealistic and difficult/impossible to achieve
- ❑ Concerns proposals are more about saving money than improving outcomes
- ❑ ICT systems do not support integration
- ❑ Issues re the phrase 'do whatever it takes' – it needs to be defined better, managers need to buy into it, staff need more flexibility to be able to 'do whatever it takes'

- ❑ It might lead to more meetings/more time spent in meetings
- ❑ Potential issues around confidentiality
- ❑ Tensions between centralised/strategic and neighbourhood/local approaches
- ❑ The need for both staff roles and management/governance arrangements to be clear – worries about blurring if not
- ❑ All very high level at the moment – hard to see how it will translate on the ground/what difference it will make on a day to day basis

**79% agree** that the proposals *will have a positive impact on **outcomes** for children and young people*

**18% think** they will make *little or no difference*

**3% think** they will have a *negative impact*

**75% agree** that the proposals *will have a positive impact on **services** for children and young people*

**19% think** they will make *little or no difference*

**6% think** they will have a *negative impact*

**165 people** answered the first question and **128** answered the second (although more than 30 of these were 'see above').

Similar issues in both responses:

Positives:

- Streamlining and better co-ordinating the response of services
- Helping children and families at an earlier stage
- Building on the strengths and responding to the views of parents and young people
- Improving relationships, communication and awareness between services

- ❑ Greater consistency
- ❑ Less complexity
- ❑ Better service planning

Some concerns that:

- ❑ If changes aren't implemented well they will have a negative effect
- ❑ Lack of resources, funding and staffing will mean that aims are not met
- ❑ There isn't enough detail at this stage to be able to say
- ❑ Some services' commitments to working together are 'on paper' only and make little difference in practice



## Next steps...

- Engagement with children and young people
- Engagement with parents/carers, community groups
- Early September to late November

## **Integrated Children's Services Management Group**

### **Terms of Reference**

Integrated Children's Services Management Groups (ICSMGs) comprise locality managers working together to improve outcomes for children, young people and their families by:

- making decisions and directing resources to support delivery of the Strategic Objectives in the Integrated Plan and to address specific local concerns promptly and effectively
- monitoring the consistent implementation of the Getting it right for every child Core Components within their sphere of responsibility and across the locality

#### **Specific functions:**

- Identify local trends and themes using agreed authority-wide data sets
- Receive reports as required on progress against agreed targets
- Identify and deliver solutions to barriers to effective local service delivery
- Develop effective links with adult services to better meet the needs of families
- Drive forward positive changes to culture, systems and practice across all partners
- Report to the Children's Partnership on activity to meet Strategic Outcomes
- Identify service/resource gaps which require strategic intervention and support
- Retain an overview of multi-agency staff training to achieve objectives
- Identify and celebrate good practice and success

#### **Membership**

Core membership will consist of the following:

- Social Work Practice Team Manager
- Senior Education Manager
- Principal Educational Psychologist
- NHS Service Manager
- Police Scotland
- SfC Service Manager
- Early Years Manager
- ASN Service Manager
- EVOC Children and Families Network representative

Additional partners may be represented based on localised links and relevant issues

- Reporter's Administration
- Skills Development Scotland
- CLD
- NHS Audit Services
- Social Work Adult Teams

#### **Expectations of Members**

- Attendance at meetings\*
- Authority to make decisions and allocate resources

- Timely communication to allow for meeting preparation
- Provision of relevant and up to date information to facilitate discussion and progress
- Contribution to decision making for specific cases and agreed action
- Commitment to service improvement
- Ensuring all actions and tasks agreed by the group are acted upon and treated as core business by staff
- Reporting back on action and impact at agreed intervals

\*sending informed substitutes – with appropriate delegated authority – *only* when necessary

### **Role of the Chair**

The Chair will be nominated from the membership of the Core Group and will play a crucial role in ensuring the effective operation of the ICSMG to meet its agreed aims

Support for the ICSMG will be provided by the ICS Area Co-ordinator

### **Frequency of meetings**

ICSMG meetings will take place on a 6 weekly basis, but require to have a mechanism to contact each other to access information quickly should the need arise.

Area managers will use their own profession's network of support and resources to resolve issues without having to hold back action on children's cases to wait for area managers to meet.