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| AssessmentNo | 978 | Owner | levans |
| Resource | HSCP | | Service/Establishment Joint |
| | First Name | Surname | Job title |
| Head Officer | Lesley | James | Head of Service Children and Families and Justice services |
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| | (include job titles/organisation) | | |
| Members | Head of Service – Lesley James Service Improvement Lead – Laura Evans HSCP Senior Management team Ailsa King – Health Improvement Lead | | |
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| | <i>(Please note: the word 'policy' is used as shorthand for strategy policy function or financial decision)</i> | | |
| Policy Title | Children's Health and Care Services Strategy Improving Lives With Children and young People in West Dumbarton | | |
| | The aim, objective, purpose and intended out come of policy | | |
| | <p>Aims • Safely shift the 'balance of care,' reducing the number of children looked after away from home; • Outcomes are improved for children and young people by increasing; community based supports when children and their families need them; • The need for the workforce to align to the service demand; • Implement the Promise Plan by implementing the changes within the Nurtured DIG; • Meeting the National Care Outcomes; • Implement the Care inspectorates recommendations; • Projects are led by data including the Children's Strategic Needs Assessment; • Services are sustainable and delivered within the available budget; • Across health visiting, school, nursing and social work services will ensure early help is locally delivered, providing the right help in the right place to meet the identified needs of children and young people. We will collate and measure any gaps in service provision and annually report on identified gaps in service provision through our Area Resource Group; • Ensure all children have the best start in life. Children of all ages will thrive through loving and consistent living arrangements supported by access to early learning, family support and childcare to make sure we get it right at infancy in multi-agency planning. • A family first approach will ensure children and young people have the following in place: o remain at home or with birth family where possible; o ensure a rights based approach in line with UNCRC; o Promote the right to family life by valuing relationships with siblings, the wider family and community; and o For a small minority of children who cannot remain with family due to risk of harm, support will be local and we will endeavour to keep children within 15 miles of their home community. • We will minimise children's exposure to harm with fully embedded GIRFEC principles and approaches supported with robust assessment and planning including chronologies to support analysis. • We will strive to Keep families together and develop services to ensure the 'scaffolding' of support helps to enable families facing complex and enduring challenges is available through use of reserves and redesign of our service provision and commissioning' • We will ensure services are relational and not transactional; • Support employees by ensuring training is in place to show what a 'good conversations' is with a focus on outcomes and SMART care plans and this becomes part of employees core practice; and • Using data, consultation and evaluation to improve services. We will use information as an asset to develop, improve and evaluate our services, with the voice of those who use our services having a meaningful part to play in our service design.</p> <p>Purpose The purpose of re-design is to meet the aims and objectives of the</p> | | |

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| | <p>project but also to follow the Scottish approach to re-design to gain the data required to ensure this service is fit for the future. The evaluation and engagement to date has taken into account both lessons learned and feedback from stakeholders. The project team will collaborate with employees, managers and key stakeholders to understand what changes are required. Outcomes The outcomes the service strives to meet are: 1. Percentage of children on the Child Protection Register who have a completed and current risk assessment; 2. Percentage of child protection investigations to case conference within 21 days; 3. Number of children referred to the Scottish Children's Reporter Administration (SCRA) on non-offence (care and protection) grounds; 4. Number of children referred to the Scottish Children's Reporter Administration (SCRA) on offence grounds; 5. Balance of care for looked-after children: percentage of children being looked after in the community; 6. Percentage of children from black minority and ethnic communities who are looked after that are being looked after in the community; 7. Percentage of 16- or 17-year-olds in positive destinations (further/ higher education, training, employment) at point of leaving care 8. Child and Adolescent Mental Health Services 18 weeks referral to treatment; and 9. Mean number of weeks between referral and treatment for specialist Child and Adolescent Mental Health Services.</p> | | |
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| | <p>Service/Partners/Stakeholders/service users involved in the development and/or implementation of policy.</p> | | |
| | <p>Head of Service – Lesley James Service Improvement Lead – Laura Evans HSCP Senior Management team Ailsa King – Health Improvement Lead</p> | | |
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| | <p>Does the proposals involve the procurement of any goods or services?</p> | <p>Yes</p> | |
| | <p>If yes please confirm that you have contacted our procurement services to discuss your requirements.</p> | <p>No</p> | |
| <p>SCREENING</p> | | | |
| <p><i>You must indicate if there is any relevance to the four areas</i></p> | | | |
| | <p>Duty to eliminate discrimination (E), advance equal opportunities (A) or foster good relations (F)</p> | <p>Yes</p> | |
| | <p>Relevance to Human Rights (HR)</p> | <p>Yes</p> | |
| | <p>Relevance to Health Impacts (H)</p> | <p>Yes</p> | |
| | <p>Relevance to Social Economic Impacts (SE)</p> | <p>Yes</p> | |
| <p>Who will be affected by this policy?</p> | | | |
| <p>Service Users West Dunbartonshire citizens West Dunbartonshire employees</p> | | | |
| <p>Who will be/has been involved in the consultation process?</p> | | | |
| <p>• Head of Service – Lesley James • Service Improvement Lead – Laura Evans • HSCP Senior Management team</p> | | | |
| <p>Please outline any particular need/barriers which equality groups may have in relation to this policy list evidence you are using to support this and whether there is any negative impact on particular groups.</p> | | | |
| | <p>Needs</p> | <p>Evidence</p> | <p>Impact</p> |
| <p>Age</p> | <p>West Dunbartonshire has a decreasing and aging population. Between 2018 and 2028, the population</p> | <p>HSCP Children's Needs assessment</p> | <p>Positive Impact – Service user Even though there is declining population within West Dunbartonshire,</p> |

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| | <p>of West Dunbartonshire is projected to decrease from 89,130 to 87,141. This is due to fewer babies being born each year and more people moving out of the area than moving in.</p> | | <p>there is a rise in looked after children and young people within the service. One of the aims of the project is to ensure all children have the best start in life. Children of all ages will thrive through loving and consistent living arrangements supported by access to early learning, family support and childcare to make sure we get it right at infancy in multi-agency planning. One of the aims of the project is to ensure the service meets the National Outcome “Percentage of 16- or 17-year-olds in positive destinations (further/ higher education, training, employment) at point of leaving care”.</p> | |
| <p>Cross Cutting</p> | <p>Impacts on all protected characteristics and external impacts. Domestic Abuse rates in West Dunbartonshire are the second highest in Scotland, at 168 incidents per 10,000 population reported to Police Scotland. Children are adversely affected by domestic abuse with the average number of people involved per incident remaining at four (victim,</p> | <p>HSCP Children’s Needs assessment</p> | <p>The following project aims at positive impacts on all of the protected characteristics. All changes will aim to have the following in place:</p> <ul style="list-style-type: none"> • have a family first approach • remain at home or with birth family where possible; • ensure a rights based approach in line with UNCRC; • Promote the right to family life by valuing relationships with siblings, the wider family and | |

perpetrator and two children). Across Scotland, young carers were more likely to live in the most deprived SIMD Deciles. 23.4% of the 145 young carers known to Y Sort It are aged 8 - 11 years. In 2020/21, West Dunbartonshire had a rate of 15.1 child protection investigations (per 1,000 of the 0 - 15yr population), higher than the Scottish Average of 12.8.

community; • For a small minority of children who cannot remain with family due to risk of harm, support will be local and we will endeavor to keep children within 15 miles of their home community. • Safely shift the 'balance of care,' reducing the number of children looked after away from home. The National Promise and Nutured DIG changes will be implemented which is based on 5000 children voices on how to improve Children services. Some National outcomes have already been mentioned, but the remaining outcomes will need to be met by the service. These outcomes are mandatory performance indicators all children services are required to meet. The Care Inspection recommendations are actions which ensure the children is are the forefront of children services and is meeting the required needs. Across health visiting, school, nursing and social work services will ensure early help is locally delivered, providing the right help in the right

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| | | | <p>place to meet the identified needs of children and young people. We will collate and measure any gaps in service provision and annually report on identified gaps in service provision through our Area Resource Group; We will minimise children's exposure to harm with fully embedded GIRFEC principles and approaches supported with robust assessment and planning including chronologies to support analysis. We will strive to Keep families together and develop services to ensure the 'scaffolding' of support helps to enable families facing complex and enduring challenges is available through use of reserves and redesign of our service provision and commissioning' Employee Impact - Positive Support employees by ensuring training is in place to show what a 'good conversations' is with a focus on outcomes and SMART care plans and this becomes part of employees core practice.</p> | |
| Disability | West Dunbartonshire has | HSCP Children's Needs assessment | The aims of the project doesn't | |

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| | <p>a rate of 23.7 per 1,000 school pupils assessed and/or declared as having a disability compared to the Scottish rate of 24.3 per 1,000 pupils. 26% of residents report having a lifelong time limiting condition (Scotland is 24%). There is limited available local and national data about disability and social care workers, which relies on individual workers to disclose this information. Whilst Scottish Social Services Council (SSSC) data show that at least 2% of the overall social care workforce reported having a disability, this is likely to be an undercount, because disability information was unknown for a further 17% of the social care workforce.</p> | | <p>provide any direct impact on children or young people with a disability, but there are cross cutting impacts which affect all protected characteristics. Employee Impact – Positive Any employee affected by any changes to their working life, can apply for a Disability passport via the councils wellbeing policy.</p> | |
| <p>Social & Economic Impact</p> | <p>Before the pandemic, one in five Scots were living in relative poverty after housing costs, including almost one in four children. West Dunbartonshire contains the third equal highest share of the most deprived data zones out of Scotland's 32 local authority areas. In</p> | <p>HSCP Children's Needs assessment</p> | <p>Positive and negative impact - included in cross cutting section Negative Impact - Children One of the aims of the project is for the service to be sustainable and delivered within the available budget. If the service is unable to deliver within the service, this could mean externalizing existing services.</p> | |

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| <p>2019 29% of West Dunbartonshire residents were in fuel poverty, this is predicted to rise to 41% from April 2022. Child health and wellbeing is also affected by household income and the employment status of parents. 17.3% of children live in households in fuel poverty. West Dunbartonshire has continued high rate of child poverty across the whole area (26%) with projections that this will rise to 33%. 22.6% of children live in low income families and there is a high eligibility for and uptake of free school meals (27.4% for primary 4-7 pupils) although the registration rate for secondary school pupils is on a downward trend. Almost half of the primary schools in West Dunbartonshire have rates of over 30% of pupils in Primary 4-7 registered for free school meals. West Dunbartonshire has 14.7% of S4 pupils reported drinking alcohol at least once a week. This is higher than Scotland at 11.5% and 4.1% of S4 pupil reporting using drugs monthly. The rate of drug</p> | | | |
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| | <p>related hospital stays in 11-25 year olds is increasing and is higher than the Scottish average.</p> <p>West Dunbartonshire also has 543 young people in prison per 100,000. This is the highest figure of any local authority in Scotland.</p> | | |
| Sex | No Impact | No Impact | The aims of the project doesn't provide any direct impact on children, young people, their families or carers based on a person's sex but there are cross cutting impacts which affect all protected characteristics. |
| Gender Reassign | <p>There is no national data about gender reassignment and people who access children services</p> <p>However, given the prevalence of social care needs in the population and across the life course, it is likely that some trans people will require social care support.</p> | HSCP Children's Needs assessment | The aims of the project doesn't provide any direct impact on children or young people who have underwent gender reassignment but there are cross cutting impacts which affect all protected characteristics. |
| Health | <p>The longstanding impacts of poverty, poor employment and multiple deprivation have led to a less healthy population in West Dunbartonshire. Life expectancy is lower than the Scottish average with those living in the most deprived communities</p> | HSCP Children's Needs assessment | Positive and negative impact - included in cross cutting section. |

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| | <p>spending, on average 24 years fewer in good health than those living in the least deprived areas. With those in the most deprived areas also dying younger, they spend more than one third of their lives in poor health.</p> | | |
| Human Rights | <p>Right to equality FREDA' principles: Fairness Respect Equality Dignity Autonomy The right for respect for private and family life, dignity and autonomy protected by the HRA (Article 8 of the European Convention on Human Rights) autonomy protected by Article 8 of the ECHR and by Article 19 of the Convention on the Rights of Persons with Disabilities</p> | Human Rights Act | <p>Positive and negative impact - included in cross cutting section.</p> |
| Marriage & Civil Partnership | <p>West Dunbartonshire has both a high percentage of lone parent families and lone parents who are not in employment. 50% of lone parents in West Dunbartonshire were not in employment, the third highest of all local authorities in Scotland. Children in lone parent families and non-working lone parent families are more likely to have lower mental wellbeing than those</p> | HSCP Children's Needs assessment | <p>Positive Impact – Children As the number of lone family's increases in West Dunbartonshire, the ethos of the Promise and one of the aims of this project is to improve for children and young people community based supports when children and their families need them. The services which will be in place will support children whether there is a family setting or not.</p> |

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| | <p>who are not in those categories. West Dunbartonshire is likely to have a high percentage of children, young people and parents who have a number of Adverse Childhood Experiences (ACES).</p> | | |
| <p>Pregnancy & Maternity</p> | <p>There is no national data about pregnancy and maternity and children services. However, there is a substantial cohort of women of child-bearing age who are receiving social care, and many of this group are likely to experience pregnancy and maternity. There are 22,710 women aged 18-64 receiving social care in Scotland. Within the general population, there are around 50 live births per 1,000 women of childbearing age in Scotland.</p> | <p>HSCP Children's Needs assessment</p> | <p>The aims of the project doesn't provide any direct impact on children, young people, their families or carers who are pregnant or on maternity but there are cross cutting impacts which affect all protected characteristics.</p> |
| <p>Race</p> | <p>Research by the ALLIANCE and Self Directed Support Scotland (SDSS), which explored people's experience of Self-directed Support and social care in Scotland, highlighted barriers to support for Black and minority ethnic people, including: access to information and advice; and cultural awareness and</p> | <p>HSCP Children's Needs assessment https://www.gov.scot/publications/race-equality-framework-scotland-2016-2030/documents/</p> | <p>Positive impact –employees It is important employees participate in training on equality, diversity and human rights, including race equality and intercultural competency training. Reviewing recruitment strategies to encourage a greater representation of the minority ethnic</p> |

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| | <p>understanding. This was particularly the case for Black and minority ethnic women, and the report suggests that this could be associated with women having less fluency in English in some communities</p> <p>Minority ethnic groups are also less likely to report health damaging behaviours such as smoking, excessive alcohol consumption and drug misuse. Health and social care workers are required to understand the importance of a flexible, person-centered approach; no two people are exactly the same, and service provision must reflect this. Where service users have additional requirements linked to language, culture or understanding of services, these need to be met effectively. Local authorities for which many social care staff work generally have very low numbers of minority ethnic staff.</p> | | <p>population within Children services.</p> <p>Positive Impact – Children One of the national outcomes the project will be measured against is “Percentage of children from black minority and ethnic communities who are looked after that are being looked after in the community”.</p> | |
| <p>Religion and Belief</p> | <p>There is no national data on religion or belief for people who access social care, although NRS analysis of population data suggests that Scotland is becoming</p> | <p>HSCP Children’s Needs assessment</p> | <p>The aims of the project doesn’t provide any direct impact on children, young people, their families or carers who have a religious belief but there are cross cutting</p> | |

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| | more ethnically and religiously diverse. | | impacts which affect all protected characteristics. |
| Sexual Orientation | LGBTQI+ identities are associated with poorer health and Wellbeing. | HSCP Children's Needs assessment | The aims of the project doesn't provide any direct impact on children, young people, their families or carers based on a person's sexual orientation but there are cross cutting impacts which affect all protected characteristics. |

Actions

| Issue Description | Action Description | Actioner Name | Due Date |
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| Negative Impact - Children One of the aims of the project is for the service to be sustainable and delivered within the available budget. If the service is unable to deliver within the service, this could mean externalizing existing services. | Ensure that all changes implemented within the five year plan, don't impact the service budget and help reduce any overspend. | Lesley.James@west-dunbarton.gov.uk | 31-Dec-2029 |

Policy has a negative impact on an equality group, but is still to be implemented, please provide justification for this.

The strategy is required to make sure there isn't an overspend within the service. Without a re-design of the service the service will continue to overspend, and measures will be forced upon the service.

Will the impact of the policy be monitored and reported on an ongoing bases?

Assessment of its effectiveness will be monitored via the HSCP Project Management Board and the What does it take programme board. Strategically its governance and any issues raised by protected characteristics will be managed via the HSCP Board, Project Management office

Q7 What is your recommendation for this policy?

Introduce

Please provide a meaningful summary of how you have reached the recommendation

This high level strategy suggests that there may be positive impacts on a number of protected groups however these will be monitored as part of the overall strategy with equality impact assessments also being carried out with individual workstreams also.