

WEST DUNBARTONSHIRE COUNCIL

Report by the Director of Community Health & Care Partnership And Executive Director of Educational Services

Community Health and Care Partnership Committee: May 2013

**Subject: West Dunbartonshire CPP Integrated Children's Services Plan
2013-15**

1. Purpose

1.1 This report presents the West Dunbartonshire Community Planning Partnership (CPP) Integrated Children's Services Plan (ICSP) 2013-15.

2. Recommendations

2.1 The Committee is asked to:

- Approve the Integrated Children's Services Plan for its interest; and
- Re-affirm its commitment to the priorities within the ICSP across West Dunbartonshire Community Planning Partners.

3. Background

3.1 West Dunbartonshire has a strong history of positive integration and partnership working in relation to the development of children's services. This has been increasingly embedded through such developments as the commitment by the Council and NHS GGC Health Board to an integrated approach to the management and development of children's health and social care services as part of the establishment of the CHCP; the ambitious partnership agreement between the Council (led by Educational Services) with Save the Children to address child poverty; and the recent establishment of a Community Planning Partnership Youth Alliance as a vehicle for public agencies and voluntary sector organisations to better work together to engage directly with children and young people in local communities.

3.2 The attached Integrated Children's Services Plan is explicitly reflective of that community planning approach and has been enthusiastically approved by the local CPP Children and Young People's Strategy Group.

4. Main Issues

4.1 The priorities of the attached ICSP reflects the requirements and expectations of the Scottish Government, the Council, the NHS GGC Health Board and other local community planning partners, i.e.:

- Early intervention and prevention, most notably in relation to the emerging ambitions of the national Early Year's Collaborative programme.

- Embedding Getting It Right For Every Child (GIRFEC) across all services and all providers.
 - Child protection, as led and overseen by the Public Protection Chief Officers' Group on behalf of community planning partners.
 - Self-evaluation within and across services and providers (not least in anticipation of the new joint external inspection regime).
- 4.2 The CPP ISCP also builds on the significant work led by West Dunbartonshire Council Educational Services to embrace the principles of Curriculum for Excellence, and the on-going work to ensure successful implementation through the comprehensive Curriculum for Excellence Action Plan.
- 4.3 The CPP ISCP is the vehicle for co-ordinating action to deliver the local Single Outcome Agreement (SOA) commitments for children, young people and their families. The two year period of this ICSP intentionally bridges the final year of the current SOA and the first year of the next one (as agreed by the CPP Children and Young People's Strategy Group). Its content has been developed to support the third year refresh of the current SOA (as required by Scottish Government). It has been prepared so that it can be smoothly updated and its time period refreshed once a new SOA is confirmed in 2014.
- 4.4 The CPP ICSP supports the long-term commitments that Committee will recall from the previously approved long-term CHCP Commissioning Strategy for Children's Services; the Educational Services' work programme for 2013/14 as set out with in its Departmental Plan; and the CHCP's work programme for 2013/14 as articulated within its Strategic Plan 2013/14.
- 4.5 As members will recall, the CHCP's formal submission to the Scottish Government's consultation on the new health and social care partnerships highlighted the strong case for inclusion of children's health and social care services within the remits of the integrated partnerships. While the Scottish Government's response indicates that the legislation will leave the decision to include these responsibilities and resources to local discretion between councils and health boards, it did accept the rationale and opportunities of doing so (such as is already the case within the CHCP). The fact that the Council and the NHSGGC Health Board have had the vision to include children's health and social care within its progressive CHCP arrangements, means that the priorities expressed within this ICSP – and particularly the Early Years Collaborative development work – should be more effectively taken forward across community planning partners in a streamlined and coherent manner.

5. People Implications

- 5.1 Staff training, development and engagement are important features of the implementation of the CPP ISCP, with specific elements further supported by investment in additional staff (e.g. Child Protection; GIRFEC; and Childsmile oral health programmes).

6. Financial Implications

- 6.1 The delivery of the ISCP is underpinned by its existing allocation of resources, augmented by non-recurrent contributions secured from other budgets/sources (e.g. Council community planning funding in support of parenting programmes).

7. Risk Analysis

- 7.1 Both the Care Inspectorate and Health Care Improvement Scotland have indicated their commitment to joint inspection of children's services and child protection arrangements; for such inspection to be undertaken across community planning partners at a local level; and of the importance of local community planning partners to provide evidence of structured self-evaluation underpinning the development of services.
- 7.2 The development and articulation then of this CPP ISCP reflects these expectations, with a Public Service Improvement Framework (PSIF) self-evaluation having been undertaken to shape and underpin its content.
- 7.3 Visible commitment by the Committee to the focused and streamlined community planning approach to the provision and development of children's services – as well as child protection within the wider context of public protection – and a partnership approach to self-evaluation as expressed within the attached ISCP are important to providing both local and external inspection body assurance of quality.

8. Equalities

- 8.1 An Equality Impact Assessment completed on the CPP ISCP found that there were no specific negative concerns, and a range of positive findings in relation to the rights of children. This provides reassurance and encouragement to on-going work in this regard.

9. Consultation

- 9.1 This strategy has benefited from comments and contributions from across local community planning partners, particularly those CHCP and Educational Services staff planning and delivering local services; and through on-going engagement with key community groups and fora.

10. Strategic Assessment

- 10.1 This strategy will actively support the delivery of the following WDC strategic priorities:
- Improve life chances for children and young people.
 - Improve the well-being of communities and protect the welfare of vulnerable people.



Keith Redpath
Director of the Community Health
& Care Partnership
Date:

Terry Lanagan
Executive Director of
Educational Services

Person to Contact: Mr Soumen Sengupta
Head of Strategy, Planning and Health Improvement.
West Dunbartonshire Community Health & Care
Partnership, West Dunbartonshire CHCP HQ, West
Dunbartonshire Council, Garshake Road, Dumbarton,
G82 3PU.
E-mail: soumen.sengupta@ggc.scot.nhs.uk
Telephone: 01389 737321

Appendices: West Dunbartonshire Community Planning Partnership
Integrated Children's Services Plan 2013-15.

Background Papers: West Dunbartonshire CHCP Commissioning Strategy for
Children's Services 2012-22.
West Dunbartonshire CHCP Strategic Plan 2013/14.
WDC Council Educational Services Departmental Plan
2013/14
West Dunbartonshire Community Planning Partnership
Single Outcome Agreement 2011-2015.
Equality Impact Assessment of West Dunbartonshire
Community Planning Partnership Integrated Children's
Services Plan 2013-15.

Wards Affected: All