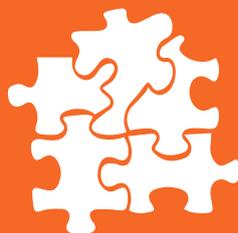


Moray Children's Services Plan

2017-2020



**Moray
Community Planning
Partnership**

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1. Foreword

– Moray Chief Officers

We want every child in Moray to be safe, healthy, respected and nurtured to achieve their full potential. This plan sets out how we will work with children, young people and their families over the next three years to achieve this goal. It covers services for children from pre-birth to eighteen years of age and beyond in some cases.

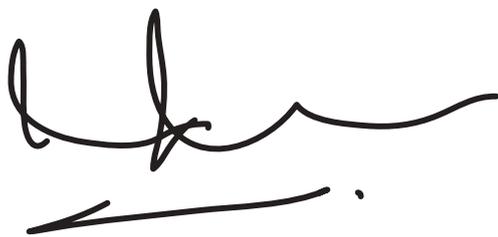
We have spoken to staff in the Moray Council, NHS, Police Scotland and third (voluntary) sector partners, children, young people, families and inspectors about what we are getting right, what could be better and what is important to them. This feedback, together with information about children living in Moray and drawing on national policies, has been used to prioritise the actions contained in this plan.

Our priorities of having ‘Ambitious and Confident, Healthier and Safer children’ will be achieved by planning together and through focused effort. For each priority we have set out actions we will take over the next three years to improve the outcomes for all children with a particular focus on those who are most vulnerable in our communities. Our aim is to prevent problems happening in the first place. When they do arise, we aim to ensure a fast response through the provision of effective interventions and making the most of our collective resources.

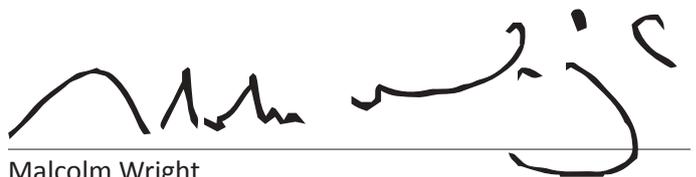
This new way of working will require us all to work differently together. We will support those working with children to ensure they have the knowledge, skills and resources to help us achieve our vision and objectives.

Importantly we will carry on listening to you to ensure we are getting it right.

Signatures Moray COG



Roddy Burns



Malcolm Wright



Campbell Thomson

2. Introduction

Our Children's Services Plan is the result of close working and co-operation between partner agencies involved in delivering Children's Services across Moray and at the heart of this plan are the GIRFEC agenda and Children's Rights. This plan details how the partnership will build on the good work already being carried out and make improvements to services wherever they are required.

The Act places a requirement upon the local authority and relevant health board to produce a Children's Services Plan. It also makes requirements of various other services and the Third Sector to become involved in engagement and consultation regarding the delivery of Children's Services. Any Children's Services Plan also needs to have an evidence base and for that reason a Profile of Children in Moray¹ has been completed and a full Joint Strategic Needs Assessment will take place during the first year of the life of this plan.

The Scottish Government directs that Children's Services Plans must be prepared with a view to achieving the following five aims.

- a. So that 'children's services' are provided in a way which:
 - i. best safeguards, supports and promotes the wellbeing of children in the area concerned;
 - ii. ensures that any action to meet needs is taken at the earliest appropriate time and that, where appropriate, action is taken to prevent needs from arising;
 - iii. is most integrated from the point of view of recipients; and
 - iv. constitutes the best use of available resources.
- b. That 'related services' in the area are provided in the way which, so far as is consistent with the objects and proper delivery of the service concerned, safeguards, supports and promotes the wellbeing of children in the area concerned.

A 'children's service' is one which is provided only to children, or primarily for their benefit such as, Health Visitors, Education and children and families social work.

A 'related service' is one which is not a children's service, but is capable of having a significant effect on children's wellbeing, such as leisure and recreation, Housing and parental support services.

Altogether these aims are about planning, developing and producing a local environment which promotes effective GIRFEC practice for all our children and young people. Some of these services will be available to all children and others will be delivered in Moray in a tiered approach to children and families with specific needs. The Moray Children's Services Plan will tell a story of how services will work together to achieve the aims above, by providing services which are organised and equipped to deliver high quality, joined up, responsive and where possible, preventative support to children and families.

In a challenging financial climate where increasing demands are being made for public services, it is more important than ever that we are able to demonstrate that Moray's children's services are delivered in a way which provides best value for money. To this end, over the course of this plan, we aim to direct our services towards prevention and early intervention, rather than intervening at times of crisis. To do this we will construct a range of outcome focussed performance measures to help us identify what works well and also importantly, what does not work well, so we can tailor our service provision accordingly.

The focus on prevention and early intervention will ensure that we give children in Moray the best possible start in life and when children and families require support, the right assistance will be given at the right time and it will be delivered in an integrated manner.

¹ Profile of Children in Moray
[www.moray.gov.uk/downloads/
file112180.pdf](http://www.moray.gov.uk/downloads/file112180.pdf)

3. Our Vision for Moray's children

We want Moray to be the best place in Scotland to grow up in.

It is our vision that Moray will be:

- a place where children and young people thrive
- a place where they have a voice, have opportunities, learn and can get around
- a place where they have a home, feel secure, healthy and nurtured
- a place where they are able to reach their full potential



4. Our Priorities

Our priorities for the Children's Services Plan will direct us as we strive to get it right for every child in Moray. The priorities are drawn from a number of sources outlined in this document including Moray 2026: A Plan for the Future¹ the Profile of Children in Moray, the Care Inspectorate Report and consultation with children, partners and stakeholders. Sections 7 to 9 explain more about the sources used to set our priorities. We have identified three priorities:

- **Ambitious and confident children** – to improve the life chances of children, especially the most vulnerable, by supporting them and their families at the earliest stages.
- **Healthier children** – children get the healthiest start in life and are supported to achieve the best possible mental health and wellbeing and there is equity for vulnerable groups.
- **Safer children** – to protect children from the risk of harm, abuse and neglect and promote and support safer environments and communities.

A comprehensive action plan has been developed around these priorities, which includes appropriate monitoring and evaluation systems, and demonstrates our commitment to investing in our work force and enabling us all to deliver on an ambitious programme.

This Plan will be reviewed annually to monitor progress and update as appropriate, specifically the first review will consider the Moray Community Planning Partnership Local Outcomes Improvement Plan (LOIP). The LOIP is due to be published in October 2017 and will take cognisance of this Plan. The annual review will take into account any emerging trends and issues identified locally through consultation, national policy development and legislation.

¹ Moray 2026: a plan for the future. Moray Community Planning Partnership. 2016 edition.
www.moray.gov.uk/downloads/file92241.pdf

5. Structure and Governance of the Community Planning Partnership

The Moray Community Planning Board sits alongside the Chief Officers' group and comprises of members of Moray Council (Councillors and Chief Executive), and senior officers from The Scottish Fire and Rescue Service, Police Scotland, Highlands and Islands Enterprise Moray, Moray College UHI, NHS Grampian, Moray Integrated Joint Board for Health and Social Care, tsiMoray, HITRANS, Skills Development Scotland and The Scottish Government. The Board's role is to provide effective leadership to the Partnership, facilitate agreement on the strategic priorities of the area and scrutinise the performance of the Partnership.

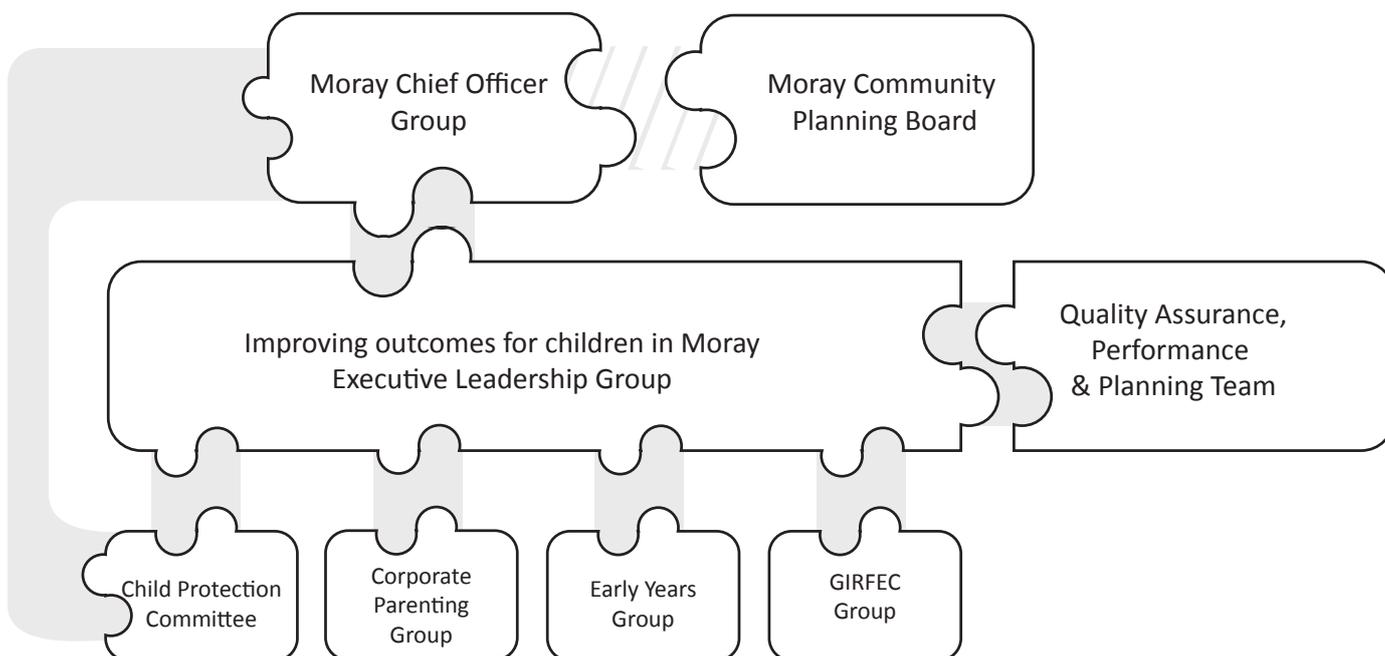


Governance Structure for Children's Services

Further to the joint inspection of services for children and young people, an interim governance structure was put in place for the short term to address some of the areas of weakness in terms of leadership and governance. The Moray Chief Officers' Group (MCOG) has reviewed governance arrangements and the structure below has been approved as the new governance structure for joint children's services in Moray.

Moray Child Protection Committee

The Moray Child Protection Committee (Moray CPC) covers the local authority area, bringing together key agencies to contribute to promoting the care and welfare of children in Moray, with the aim of ensuring that all children are safeguarded and protected from harm and abuse. The Moray CPC works to promote inter-agency working, continuous improvement through self-evaluation and sharing best practice in child protection services. The work of the Moray CPC supports practice and aims to provide better outcomes for vulnerable children, young people and their families.





Locality Management Groups

Currently in Moray there are eight Locality Management Groups (LMGs): Forres, Lossiemouth, Elgin North, Elgin South, Milne's, Speyside, Buckie and Keith. The geographic areas mirror the school catchment areas.

LMGs focus specifically on the provision of services for children and young people; this includes both universal and targeted services. LMGs are based on the principles and values of GIRFEC, in that the aim is to simplify pathways of support, reduce bureaucracy and enable effective information sharing.

Fundamental to the development of LMGs, is the belief that 'relationships' and 'effective partnerships' lead to better outcomes and long lasting change for children and families. A locality model allows these relationships and partnerships to be developed.

Such an approach will ensure that practitioners within a locality have:

- shared values, based on trust, respect, openness
- a shared language and a common purpose
- an understanding of how various, emotionally based, issues affect a child's wellbeing, and the resultant impact on their learning and behaviour
- an understanding of staged intervention; and each team's roles and responsibilities within the staged intervention process
- a toolkit of support strategies, resources and contacts across the levels of staged intervention

Each LMG is supported by a Locality Wellbeing Officer (LWO).

LMG Action Plans will reflect Community Planning Partnership priorities within a locality context. Locality Profiling will aid this process and help identify need.

6. Children's Rights and Wellbeing

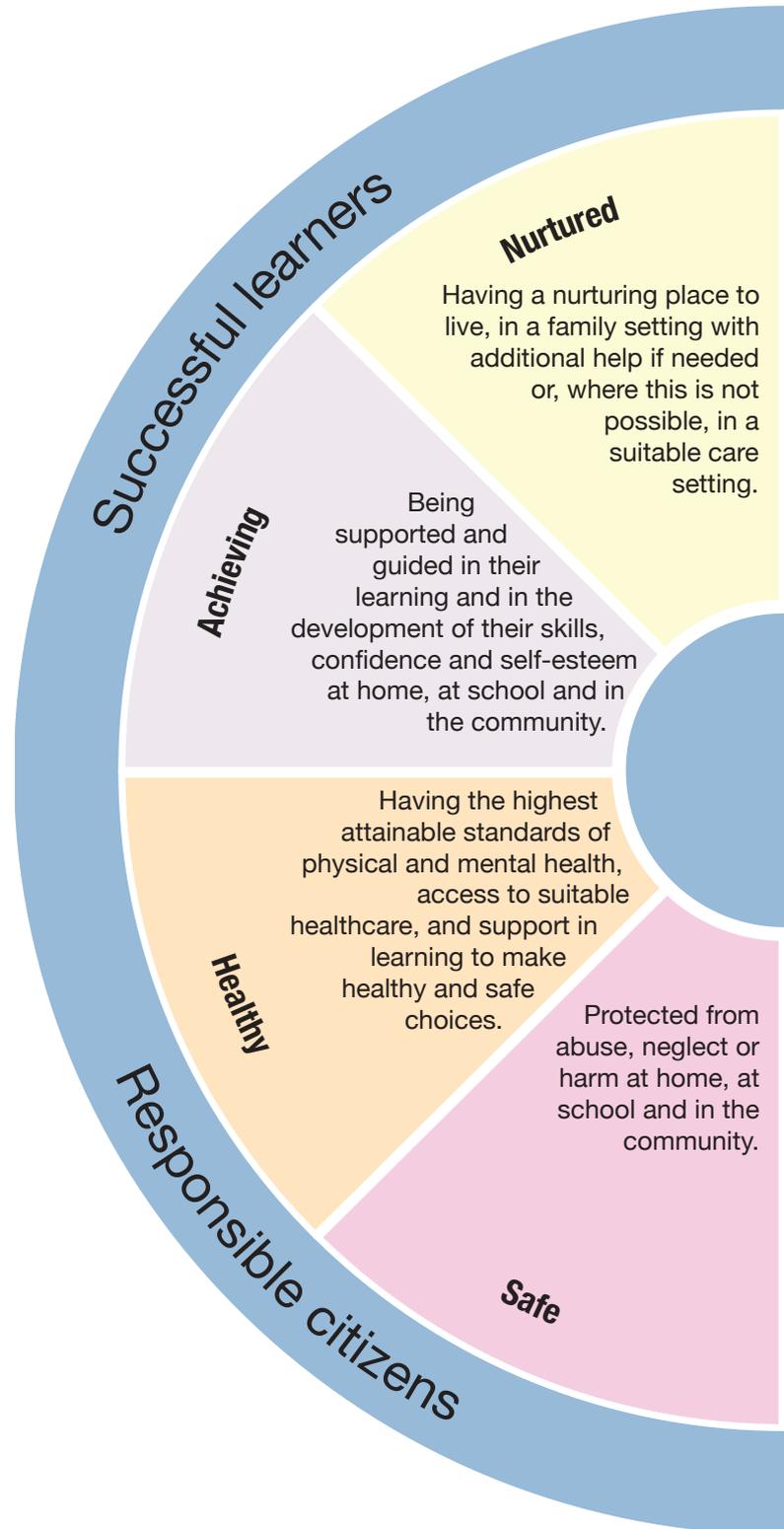
The National Context

Getting it Right for Every Child (GIRFEC)

Getting it Right for Every Child (GIRFEC) is a Scottish Government policy which, put simply, is about keeping the child and family at the centre and working alongside the child and family to promote well-being and positive outcomes. It is the Government's aim to legislate the GIRFEC approach, which they have proposed will be enacted in late 2017.

At the heart of the GIRFEC approach are the Wellbeing Indicators. These provide a framework in which to assess a child's needs, based on a belief that every child should be:

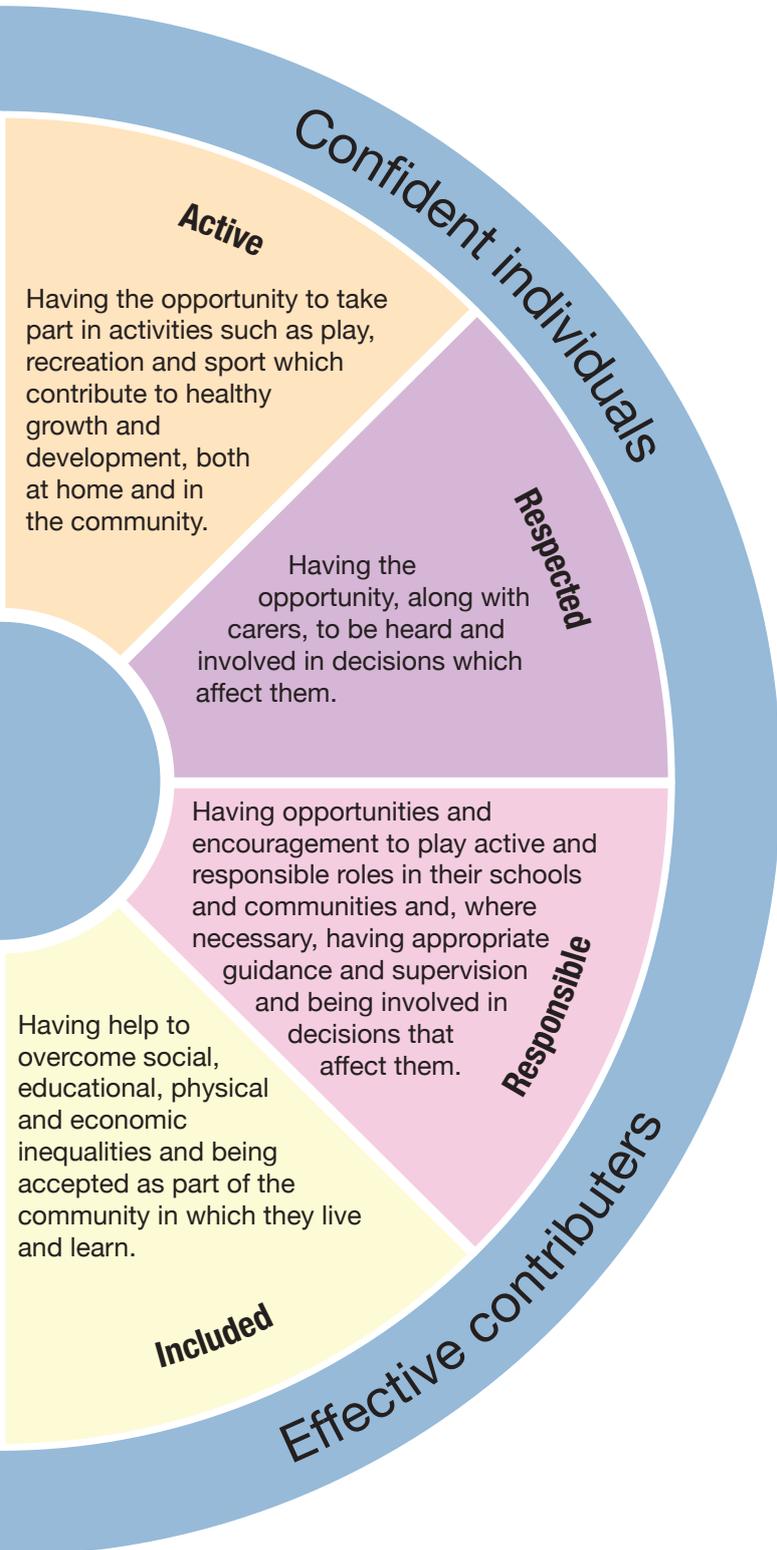
- **Safe** – Protected from abuse, neglect or harm at home, school and in the community.
- **Healthy** – Having the highest attainable standards of physical and mental health, access to sustainable healthcare and support in learning to make healthy and safe choices.
- **Achieving** – Being supported and guided in their learning and in the development of their skills, confidence and self-esteem at home, school and in the community.
- **Nurtured** – Having a nurturing place to live, in a family setting with additional help if needed, or, where this is not possible, in a suitable care setting.
- **Active** – Having opportunities to take part in activities such as play, recreation and sport which contribute to healthy growth and development both at home, school and in the community.
- **Respected** – Having the opportunity, along with carers, to be heard and involved in decisions which affect them.
- **Responsible** – Having opportunities and encouragement to play active and responsible roles in their schools and communities and where necessary, having appropriate guidance and supervision and being involved in decisions that affect them.
- **Included** – Having help to overcome social, emotional, physical and economic inequalities and being accepted as part of the community in which they live.



The GIRFEC approach is underpinned by the Rights of the Child (United Nations Convention of the Rights of the Child) which has 4 guiding principles.

- non-discrimination;
- right to life, survival and development
- doing what is in the best interest of the child
- meaningfully engaging children and youth

Curriculum for Excellence and the GIRFEC Wellbeing Wheel



Curriculum for Excellence is Scotland's 3 to 18 curriculum with the aspiration that all young people will become Successful Learners, Confident Individuals, Effective Contributors and Responsible Citizens. These are known as the four capacities and demonstrate our ambition for our young people who must be at the very centre of what we do as outlined in the GIRFEC Wellbeing Wheel below. Before young people can become successful, responsible, confident or contribute effectively, they need to be well and the GIRFEC Wellbeing Wheel shows the eight wellbeing indicators of Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible and Included (SHANARRI) as outlined above. As practitioners it is vital that we get these indicators right in order to enable children and young people to achieve the four capacities. The Wellbeing Wheel can be used to identify needs and concerns and to support effective planning for children and young people.

Curriculum for Excellence is broken down into two distinct phases. Firstly, the Broad General Education (BGE) which applies to the curricular experience for young people from the age of 3 to 15 and then the Senior Phase, from ages 15 to 18. Within the BGE, young people should experience a wide range of experiences and outcomes divided into eight key curricular areas:

- Languages and Literacy
- Mathematics and Numeracy
- Health and Wellbeing
- Expressive Arts
- Religious and Moral Education
- Sciences
- Social Studies
- Technologies

Once they enter the senior phase, young people will have greater options for further study and can choose to specialise in certain areas. Throughout the curriculum from 3 to 18, young people should be developing skills for life, learning and work. Later on in this plan, there is a specific section to highlight some of the important work which is going on in Moray in order to develop our young workforce.

Solution Orientated and Restorative Approaches

In Moray, we recognise the need to focus on getting the basics right for our children and young people. Everyone involved with children and young people must base their work on the Rights of the Child and ensure that our children and young people are safe, healthy, active, nurtured, achieving, respected, responsible and included.

Part of getting the basics right is about ensuring that all those working with children and young people, are able to support them using solution oriented and restorative practices.

Solution-oriented practices, among other things, are about:

- Building on people’s strengths
- Empowering those we work with and support
- Respectful and supportive conversations
- Adopting a no-blame standpoint
- Equality of perspectives

When undertaken skilfully, solution-oriented and restorative conversations can be effective tools when resolving conflict; adopting a supportive, no-blame approach and allowing all parties to be heard.

Combined together, this creates the lens through which our Children’s Services Plan is focused and through which all support for children, young people and their families should be viewed.



GIRFEC activity in Moray

The vision of GIRFEC is shared by all Community Planning Partners in Moray and is progressed through the leadership in the new governance structure. The GIRFEC journey in Moray has been one in which significant input has been placed on developing strong and collaborative partnerships of children, young people, their families, communities and professionals. The essence of this is to fundamentally improve outcomes for children and young people in Moray, as articulated in the 'Moray 2026 – A plan for the future' – 'Ambitious and Confident young people'. This overarching aim cascades to other strategic plans to ensure that GIRFEC is inherent in all of them. Throughout 2016, there was a significant move forward by aligning the vision for our children and young people with the 'Values and Principles' of GIRFEC and the 'Rights of the Child'. This provides a solid foundation to give everyone who works with children and young people shared understanding.

One of the most essential criteria for the success of GIRFEC in Moray is the need to gather views and feedback of children and young people in a meaningful way. This Plan articulates how Moray will use localities and Local Management Groups to do this.

Significant time and preparation has been spent in making sure that staff have a good understanding of the Principles of GIRFEC and what their responsibilities are in terms of the Act.

Work has been undertaken to support schools to recognise and strengthen the links between Children's Rights, Wellbeing and Staged Intervention, ensuring schools now consider the wellbeing needs of the child and not just their educational needs. Within NHS Grampian, Health Visitors use a wellbeing assessment tool for all assessments with children and their families; this is currently being reviewed to comply with the new 'Universal Health Visiting Pathway'¹, along with a summary sheet for 'Named Person Handover' into school.

As part of the GIRFEC approach outlined in the Act, the Named Person Service was officially launched across Moray in August 2016. Partners recognise the need to embed the Named Person service in Moray and the change in culture and practice required. By December 2016, all named persons, from both health and education services, had been trained on their role and further training has continued to support the role, specifically around lead professional roles, child's planning, chronologies and recording/sharing information. This has supported all partners to understand the pathway, articulating the difference between 'universal services' 'universal services with support' and 'targeted interventions'. In supporting the necessary change in culture and practice, Named Person 'surgeries' were established and held in each Associated School Group (ASG).

The Child's Plan and planning process has been developed and this has been part of the Named Person and Lead Professional training mentioned above. We are confident that this will give consistency and a shared understanding on the process, so that children, young people and their families receive the best possible service and outcome.

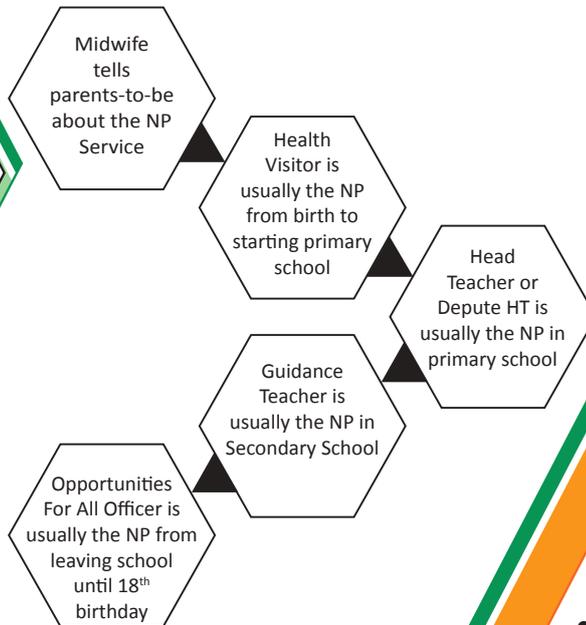
1 Universal Health Visiting Pathway in Scotland - Pre Birth to Pre School.
www.gov.scot/Resource/0048/00487884.pdf

Universal Services

The majority of children and young people make their journey from birth to adulthood supported by their family and universal services (services available to everyone eg school, GP etc.)

All children and young people from birth to 18 years (or later if still in school) have a Named Person (NP) who will be the first point of contact for a child/young person and their family if they have any concerns. They are there as a support to make sure the child/young person's wellbeing needs are met.

getting it right for every child in Moray Pathway



There are times, the Named Person role is taken on by someone else but the child/young person and their family must always be informed who this is. For example: the Family Nurse Practitioner, or a Principle Teacher.

Universal S

Occasionally children and young people have specific wellbeing needs which cannot be met by universal services but can be supported within universal services as part of an Individualized Plan with guidance from a specialist.

- 5 GIRFEC questions
- What is getting it right for every child?
 - Do I have all the information I need?
 - What can I do now to improve things?
 - What can my agency do to help?
 - What additional help, if any, is needed?

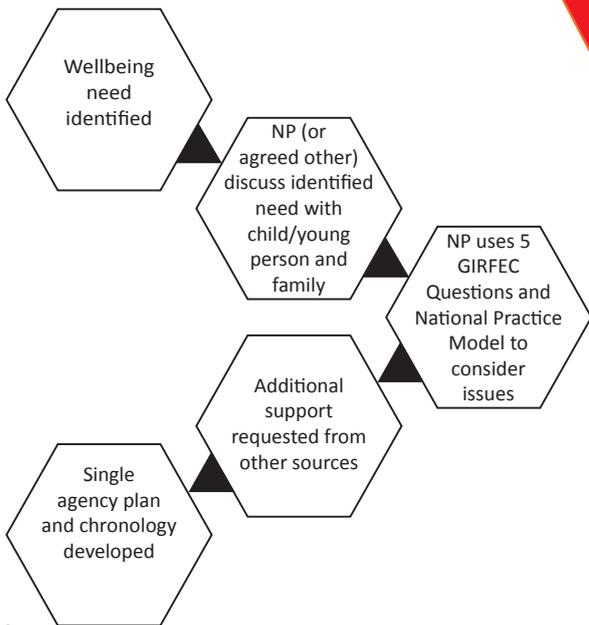


Child Protection procedures can be

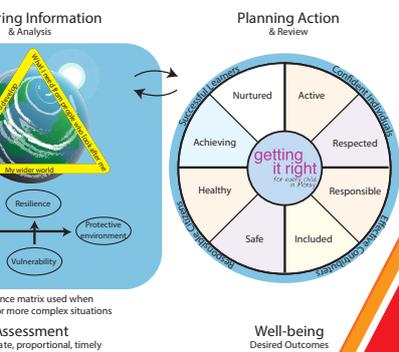
Appropriate and proportionate interventions, based on appropriate assessment, always in discussion with Child/Young Person

Services with Support

Young people may have a need that cannot be fully met by the family or that cannot be met through additional services eg a Classroom Assistant or a Special Educational Plan; advice and support from a specialist service.



What are the barriers in the way of this child or young person's wellbeing?
 What information I need to help this child or young person?
 How can we help this child or young person?
 What do we need to help this child or young person?
 What support may be needed from others?



Targeted Intervention

For a small number of children and young people, a more co-ordinated approach will be required to deliver a Targeted Intervention which will be recorded in a Child's Plan and be co-ordinated by a Lead Professional. This will always be started by the Named Person who will have discussed the needs with the child/young person and their family, along with any professionals who may be able to assist.

Additional advice/guidance/support is available at any time within your locality.

For further information contact your Locality Wellbeing Officer



Statutory/Compulsory interventions can be initiated at any point but are likely to be part of a Targeted Intervention. The Reporter to the Children's Panel will require a copy of the Child's Plan as part of the referral and may also ask for additional information.

initiated at any point

Appropriate and proportionate information sharing, involving the Named Person and their Family



Child Health 2020

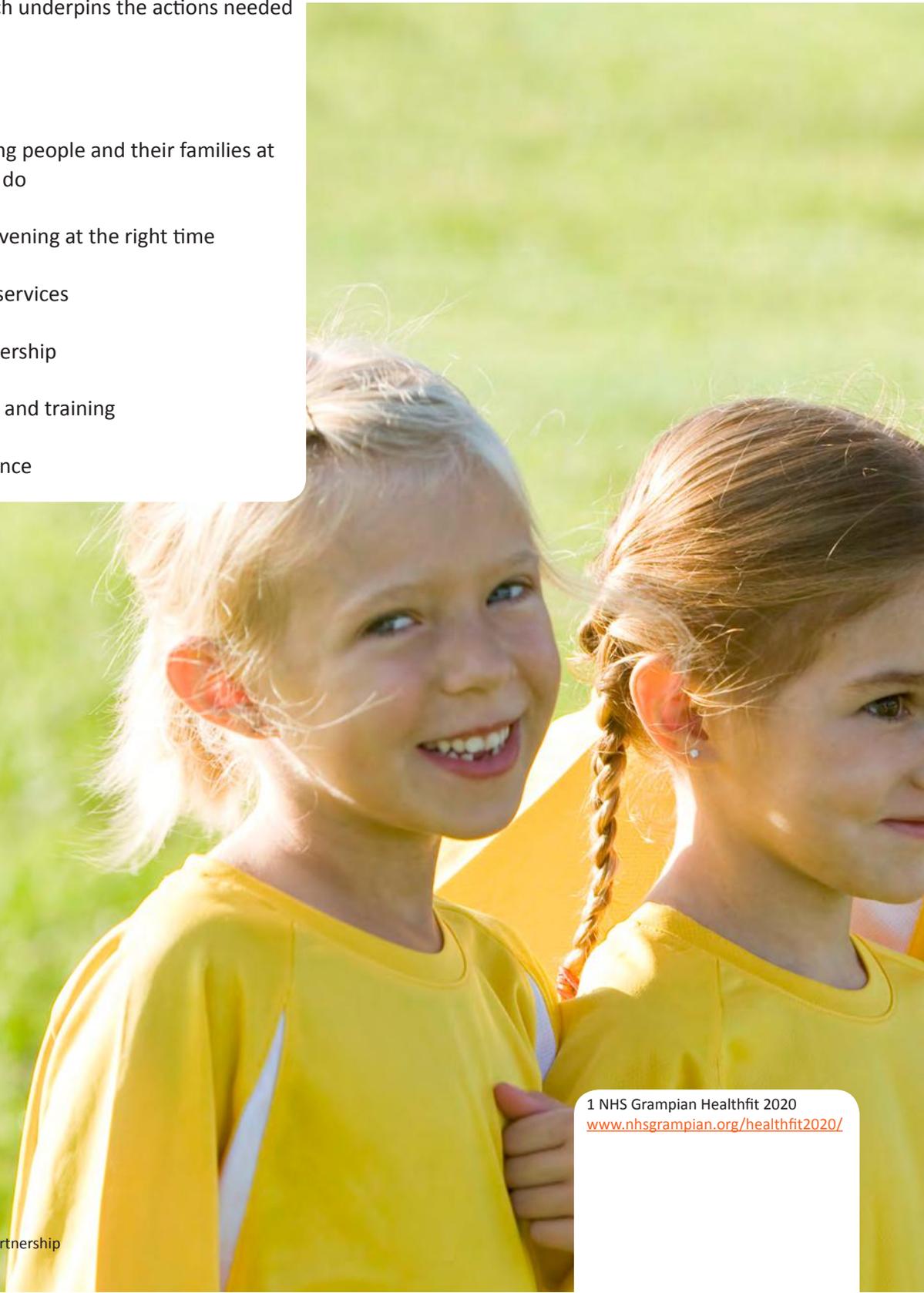
This strategic framework sits within NHS Grampian's Healthfit 2020¹, and represents a step in the journey towards the aspiration that 'by 2020, all children and young people of Grampian will have the healthiest possible start in life'. Key values, targets and indicators from relevant national and local policies combined with feedback and discussions with health professionals, partner agencies and children and families have been identified. This information has been captured within six key themes and a child health map so to produce the strategic framework which underpins the actions needed to achieve our vision.

The six key themes are:

- putting children, young people and their families at the heart of what we do
- acting early and intervening at the right time
- safe and sustainable services
- integration and partnership
- workforce, education and training
- knowledge and evidence

GIRFEC Champions

Health set up GIRFEC Champions, which comprises a group of health professionals who are knowledgeable about the GIRFEC approach and are willing to promote and support its implementation across health. These representatives support health staff who need to know more about GIRFEC in their role. Education also created a similar model in the form of a working group, to support Named Persons across schools in Moray, complete with a representative from each locality/ Associated School Group.



¹ NHS Grampian Healthfit 2020
www.nhsgrampian.org/healthfit2020/

Rights Respecting Schools

Moray Council have a Service Level Agreement with UNICEF to help support schools with delivering a rights-based education. The Rights Respecting Schools Award (RRSA) is structured with clear criteria to follow so that children's rights are embedded across the whole school, to ensure that children not only become aware of their rights, but that they also learn about the universality of children's rights, that their rights are unconditional as well as respecting the rights of others (including adults).

By schools putting the UNCRC principles at the heart of their culture and ethos, this aims to improve wellbeing and enable children and young people to make informed decisions and to grow into confident, active and empowered global citizens. Across Moray, 5 secondary schools and 33 primary schools have registered for the accreditation from UNICEF. Of these 38 schools, 19 of these schools have achieved their Recognition of Commitment (ROC), and one primary school has achieved their Level 1. It is anticipated that a further 8 schools should achieve ROC and another 2 primary schools may achieve their Level 1 by June 2017.



7. What we know about Children in Moray

During January 2017 a Profile of Children was created which provided the partnership with information on the child population in Moray. The key elements of the profile are illustrated on the following pages:

Key issues across all three priorities is variation – some communities have really positive outcomes, while others have greater potential to be supported to improve

Ambitious and Confident

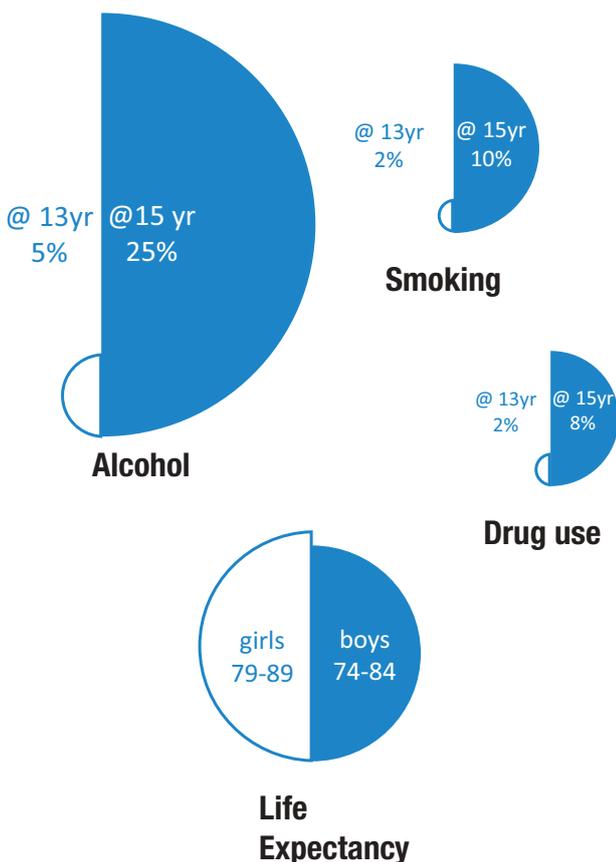
Some children face greater obstacles to success in life than others.

- The percentage of children growing up in poverty across communities in Moray varies from one in fifty (2%) to one in six (16%)
- Four out of five girls (84%) and seven out of ten boys (71%) achieve level 5 literacy
- Three out of five girls (60%) and three out of five boys (60%) achieve level 5 numeracy

Safer

- Annual crime rates across communities in Moray range from 1 crime for every 200 people (0.5%) to 18 crimes for every 200 people (9%)
- 100 domestic violence incidents a year that occur with a child in the vicinity – including 40 where the child witnesses the incident
- One child severely injured in a road traffic accident every other month
- One child slightly injured in a road traffic accident every six weeks





Healthier

Some girls and boys will live longer and healthier lives depending on where they are born in Moray.

- Life expectancy for girls across communities in Moray ranges from 79 to 89 years of age
- Life expectancy for boys across communities in Moray ranges from 74 to 84 years of age

The early years are vital to health and life opportunities in the future.

- The percentage of infants born with low birth weight across communities in Moray varies from none (0%) to one in twenty (5%)
- The percentage of infants who are exclusively breast fed across communities in Moray varies from one in two (50%) to one in six (20%)
- The percentage of primary 1 children who are obese across communities in Moray varies from none (0%) to one in four (25%)
- The percentage of primary 7 children free from dental decay across communities in Moray varies from four out of five (80%) to one in three (33%)

Many health-related behaviours have their beginnings in childhood.

- One in fifty (2%) 13 year olds in Moray are regular smokers (SALSUS 2013)
- One in ten (10%) 15 year olds in Moray are regular smokers (SALSUS 2013)
- One in twenty (5%) 13 years in Moray drank alcohol in the past week (SALSUS 2013)
- One in four (25%) 15 years in Moray drank alcohol in the past week (SALSUS 2013)
- One in fifty (2%) 13 year olds in Moray used drugs in the past month (SALSUS 2013)
- One in thirteen (8%) 15 years used drugs in the past month (SALSUS 2013)

8. Partner and Stakeholder consultation findings

To inform our planning process we gathered the perspectives of the organisations and services that are involved in the lives of the children and young people of Moray.

The views of children and young people and their parents and carers, including children with additional support needs and Looked After Children, were also sought in accordance with the Act and Article 12 from UNCRC, whereby children have the right to a say in all matters affecting them.

A number of consultations have taken place across Moray to help inform a range of strategic plans including our Children's Services Plan including:

- Professional Workshops
- Interviews/discussions
- Surveys
- Social media events
- Focus groups

Partner Consultation

Directly linked to identifying needs to inform this current plan, partners were invited to attend a consultation event held at Spynie Dental Hospital, Elgin, (Moray) in January 2017. There was representation from many partners including:

- Police Scotland
- Education (schools and central officers)
- Social Work
- NHS Grampian
- Third Sector

Various group discussions during this consultation identified similar themes as challenges or barriers for children and families accessing services across Moray, the main ones being:

- Transport and related rural issues.
- The challenge of delivering services, meeting demands and developing opportunities for young people for the future in a rural area.
- Tackling inequalities.

Encouragingly all partners demonstrated a common drive to improve the provision of services in a joint capacity; increase joint working across co-locations; and focus on early intervention and prevention rather than reactive approaches.

Stakeholder Consultation

Children and young people were consulted, during the school day, at school, about their views on services across Moray. Parent's views were also gathered.

The schools visited were:

- New Elgin Primary
- West End Primary
- Tomintoul Primary
- Dallas Primary
- Milnes High
- Speyside High

These schools were specifically chosen to reflect the varying demographics across Moray.

Children & Young People

The questions that the children and young people were asked revealed the following common themes:

- The majority of children/young people across all schools said they feel safe both in and out of school.
- Most children said they know they can speak to someone in school, or a family member or a friend out of school, if they feel worried or upset about anything.
- Most children said they feel valued and that they can get advice either in school or at home if they need it.
- A mixed response was received on whether children believed that they are healthy and whether school, home or community supports them to be healthy.
- Most children said there are lots of good services across Moray and that most of them were able to access clubs and groups if they wanted, even if they didn't actually access these themselves.

Children and young people told us one of the main issues was a lack of regular transport (and bus shelters) that would allow them to access other services such as sports clubs, especially for those children living in more rural areas. There was also an issue raised around keeping clubs in local areas rather than centralising them.

Looked After Children were consulted through Who Cares? Scotland and they told us they would like to access more activities by: improving affordability of activities; improving affordability of transport; increasing their personal financial capacity. They expressed concern at the number of young people going homeless and highlighted there was too much focus on their past and they sometimes felt judged. They wanted their views taken into account more.

Parents/Carers

Parents/carers of children with additional needs told us there was a need for better communication, from schools and between agencies, and they would like an easier method to gain a wide range of information such as a 'one stop shop'. They expressed concern at a lack of diagnoses in early years in some cases.

Potential centres of excellence and specialist training for mainstream school staff were also highlighted by parents as ways to improve services.

Parents/carers told us they would like to build resilience in themselves through post diagnoses supports and opportunities to share experiences/expertise.

9. Care Inspectorate Joint Inspection findings

Between 22 August 2016 and 7 October 2016 the Care Inspectorate undertook an inspection of joint children's services in Moray. The report contained six areas for improvement listed as follows:

1. improve standards of operational practice by setting clear expectations for staff and strengthening approaches to quality assurance and staff supervision
2. improve the initial risk assessment of, and response to, vulnerable children and young people at risk of, or experiencing neglectful parenting or cumulative harm
3. strengthen collective vision and collaborative leadership to direct the delivery of integrated children's services; it should be underpinned by strategic needs assessment and robust performance information, and demonstrate measurable improvements in outcomes for children, young people and families
4. strengthen the governance, leadership and accountability of the child protection committee
5. implement a framework of joint self-evaluation, ensuring a clear focus on improved outcomes for children and young people, including those in need of protection
6. strengthen the approach to corporate parenting, participation and children's rights to deliver improvements at pace.

We have developed an Improvement Plan to address these areas; that plan complements our Children's Service's Plan. Work has already begun on our improvement plan and we will continue to assess progress and review priorities in that regard. It is important to recognise that our improvement plan specifically addresses the areas of improvement from the Inspection Report and our Children's Services Plan details how we will work and develop over the next three years.



10. Assessing children's needs in Moray

During early 2017 a Profile of Children in Moray was created which has helped provide an evidence base for this Children's Services Plan. The Profile was compiled from information provided from services within the Community Planning Partnership and through consultation. It tells us what we know about children in Moray and importantly identifies areas where we need to gain further information. We recognise that in order to provide the best possible service for children and young people in Moray we need to carry out a full joint strategic needs assessment (JSNA). This will take place during the first year of our Children's Services Plan. Throughout the life of this three year Children's Services Plan, we will constantly review our progress and yearly updates on progress will be published. We will review the commissioning of the services we employ, to ensure we are meeting the needs of our children and young people in Moray.

In addition to developing our JSNA we will further develop the work of the Quality Assurance group. This group will lead on self-evaluation and performance management information development, which will contribute to the JSNA and continuous improvement.



11. How services for children and young people and their families in Moray work together

In Moray we have a tiered approach to providing services to meet the needs of children, young people and families. Alongside the description of services, we have provided case studies of how these services work together to support families using this tiered approach. The case studies do not describe the totality of services available in Moray but are useful to illustrate how children, young people and families can be supported to achieve our priorities of having safer, healthier and more ambitious and confident children in Moray.



Universal Services

The majority of children make their journey from pre-birth to adulthood, supported by their family and the universal services in the health and education services. These are services that are available to all children and examples of which are:

- Family Information Service and Health improvement and public health services at health points, community centres and pharmacies as well as online.
- Midwifery, Health Visiting, School Nursing and GP service.
- Early Learning and Childcare services in a variety of settings – playgroups, nursery classes within primary schools and private nurseries.
- Schools – both primary and secondary.
- Community learning services.
- Third Sector services/organisations – some Third Sector services/organisations are accessible through universal services, whilst others are provided through more targeted support. Examples of Third Sector are: Aberlour Child Care Trust, Action for Children, Avenue Confidential, Care Vision, Children 1st, Core Assets, Cornerstone, Moray Women's Aid, National Fostering Association and Moray Options, Quarriers, Scottish Autism, tsiMORAY, Who Cares? Scotland.

As part of these services specific evidence based programmes are also available either in groups or individually depending on identified need. These programmes include, ante-natal and post natal education groups, infant massage, breast feeding support groups, Peep, Bookbug and Active Schools.

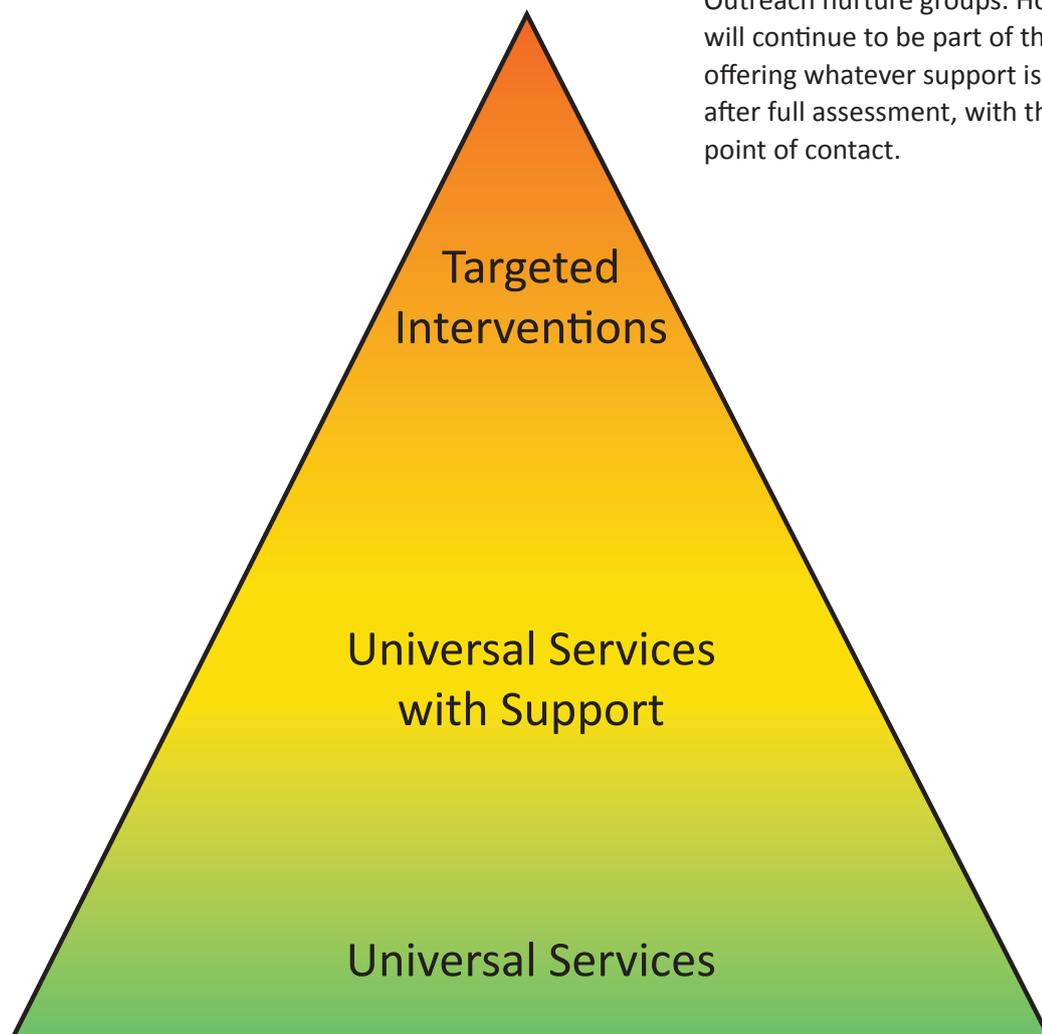
Universal Services with Support

Occasionally children and young people may require additional help or advice to meet needs which cannot be fully met by their family or universal services. This might mean some additional support within universal services, for example, a Classroom Assistant as part of an Individualised Educational Plan, or advice and guidance from a Speech and Language Therapist for a short period.

Targeted Interventions

For a small number of children there will be a need to involve more specialist services to address high thresholds of risk or need. This could include children on the Child Protection Register and Looked After Children, but may also include children with complex health and social care needs, or children whose parents need extensive additional support in order to provide a safe and nurturing home life.

Services working at this level will include: Children's Social Work service, Police Scotland, Rowan Centre and Child and Adolescent Mental Health Service (CAMHS), Educational Psychology Service, Family Nurse Partnership services, The Moray Interagency Developmental Assessment and Support (MIDAS) and Outreach nurture groups. However, universal services will continue to be part of the team around the child offering whatever support is agreed as being required after full assessment, with the Named Person being the point of contact.



Case Studies can be found in [Appendix D](#)

12. Early Years Services

The Early Years Framework¹ for Scotland was published in 2008. It provided a new vision for the Early Years in Scotland. The main focus was on targeting resources on GIRFEC in their early years. An Early Years Strategy² was launched in Moray in 2016. The outcomes it sought to achieve were that Moray is:

- a place where children have a home, feel secure, healthy and nurtured
- a place where children thrive
- a place where children are able to reach their full potential
- a place where children have a voice, have opportunities and can get around

The delivery plan for this strategy is in the process of being updated.

In Moray, partners recognise that early intervention and prevention is the key to success in getting it right and improving outcomes for our children, young people and families. Much work has already taken place and continues to be developed to help move forward this way of working.

A local Early Years Collaborative has been established at a Community Planning Partnership level to accelerate the local conversion of the high level principles set out in GIRFEC and the Early Years Framework, to deliver tangible improvement and outcomes and reduce inequalities for Moray's children, help put Moray squarely on course to shift the balance of care from crisis management to early intervention and prevention and to sustain this change to 2018 and beyond and more recently in response to the new national Children's and Young People's Improvement Collaborative initial discussions have taken place so to aid to drive this forward.

So to support transformational change and improvement of children's and young people's services in Moray the 3-Step Improvement Framework for Scotland's Services has been adopted and invested in at a Community Planning Partnership level.

To date:

- Quality improvement methodology and practice has been delivered via a number of bespoke Early Years Collaborative workshops and annual conferences;
- The first cohort of multi-agency staff have completed a formal quality improvement training programme and are now developing their role as mentors to support the second cohort;
- The second cohort of quality improvement training programme will commence in April 2017, with projects identified from the Moray CPP Improvement Plan;
- Three staff members are currently participating in the national Coaching Improvement Professional Development Programme; and
- Five staff members are currently participating in the national Improvement Science In Action (ISIA) Programme.

1 The Early Years Framework – The Scottish Government
www.gov.scot/Resource/Doc/257007/0076309.pdf

2 Moray Early Years Strategy 2016-2026
www.moray.gov.uk/downloads/file109795.pdf

Early Years Educational Service

Recognising the ability to read and write as a key requirement for all children, the Emerging Literacy Project is a Northern Alliance based programme¹; a result of Innovation Funding from Education Scotland as part of the Scottish Attainment Challenge. Partners from various agencies work together with staff from Early Learning and Childcare Centres and regularly deliver training to them including 'Pre-birth to Three', 'English as an Additional Language' and 'Building the Ambition'. This provides a consistent approach to teaching pre-school children how to recognise and voice sounds. The project assesses the children when they start Primary 1 and any gaps identified are addressed.

Although primarily aimed at preschool and P1 children with pronounced learning and communication difficulty, the service can also be offered to children on the autistic spectrum or with other complex communication disorders.

In getting it right for children with additional support needs (ASN), the Early Intervention Funding (EIF) is allocated to the Early Learning and Childcare providers. These funds are moderated by a Moray group and can be applied for annually. For many children however, funding through early intervention may only be required for one year and this will be sufficient to improve their outcomes and help develop strategies and intervention to support improvements. A similar approach has recently begun in relation to older children and young people, where 'Pupil Support Assistant' hours can be provided for a short period of time. Should it be necessary, 'Exceptional Support Funding' can be applied for and this can be made available for longer periods of time.

Family Nurse Partnership

The Family Nurse Partnership (FNP) is a home visiting programme for first-time, teenage parents aimed at giving their children the best possible start in life. It offers intensive and structured home visiting, delivered by specially trained nurses, from early pregnancy (before 28 weeks) until the child is two years old, when the Health Visitor takes over. The FNP service seeks to improve pregnancy outcomes, child health and development and parent's ability to financially support themselves.

¹ Northern Alliance. Raising Attainment in Literacy, Language and Communication. Interim Report: December 2016
[education.gov.scot/improvement/Documents/sacfi4e-northern-alliance-literacy-interim-report.pdf](https://www.education.gov.scot/improvement/Documents/sacfi4e-northern-alliance-literacy-interim-report.pdf)

13. Children with Additional Support Needs

Moray is an inclusive authority with no special schools and the presumption that all children and young people will participate in mainstream education where at all possible.

Some children or young people may need extra support, long or short term, to help them make the most of their school education and to feel fully included in their learning.

Children may need extra help for a variety of reasons, for example:

- physical impairments or learning disabilities
- family circumstances, e.g. young carers, substance abuse, Looked After Children
- are on the Child Protection Register
- being bullied
- have English as an additional language.

In Moray, we use the staged intervention approach to assess additional needs. This is based on the framework for GIRFEC. Our use of this approach helps us decide when more targeted support is required as early as possible.

Enhanced Provision of Services – Additional Support Needs

There are eight Associated School Groups (ASGs) within Moray. Each secondary school and one primary school in each ASG has an enhanced Additional Support Needs provision to meet the most complex needs. These schools have a Principal Teacher (ASN) to lead and manage teams of specialised teachers and Pupil Support Assistants.

Moray Interagency Developmental Assessment and Support (MIDAS)

The MIDAS service is aimed at pre-school children with significant and complex additional support needs which require the involvement of more than one agency. The service links in with specialists located out with Moray, for example consultants in Aberdeen, Edinburgh and Glasgow, which enables them to offer a local assessment for children, preventing the need for them and their families to travel to a regional assessment centre around 70 miles away. This has improved early identification allowing more timeous intervention. The service also provides parents with a consistent source of support and can co-ordinate the input of a wide range of activities to assist the child, easing the transition to early years education.

Educational Psychology

The Educational Psychology Service (EPS) is a team of registered psychologists who work with parents/carers, school staff and other professionals to help children and young people make the most of their education and to reduce the barriers that they may face. The broad aims of the profession include enhancing social inclusion, social and emotional well-being of young people and families, and raising attainment, and they have a statutory duty in Scotland to advise local authorities in how best to meet the needs of children and young people with additional support needs.

EPs carry out a range of activities, the core of which are consultation, assessment, intervention, training and research. These could be with children and families, schools or establishments, or at a local authority/national level. Each EP in Moray is linked to an Area Schools Group and individual schools and also with other local authority/multi-agency activities such as working groups, training and project design and piloting.

EPs work closely with pupils, parents and schools to support individual education and well-being and this is typically done via collaborative meetings and possibly direct involvement with the young person/family. All EPs are registered with the Health Professions Council and are directed by the British Psychological Society Code of Ethics and Conduct (2009).

Autism Diagnostic Assessment Pathway Team (ADAPT)

ADAPT is a multi-disciplinary team made up of specialist health and education professionals, who are responsible for diagnosing children with Autism Spectrum Disorder (ASD).

The team collates reports and information from any professionals involved with the child and their family. This may include reports from nurseries, teachers, Health Visitors, Speech and Language Therapists, Occupational Therapists etc. Once the reports and any required assessments are completed, the team will make a diagnosis facilitating referral to appropriate supports.

Autism and Communication Disorder Service

The team supports the needs of pupils with an Autism Spectrum Disorder (ASD) or a social communication disorder who attend mainstream education settings in Moray. Specialist staff offer consultation and advice to support pupils who have been referred to the service. General Autism Training is available to support school staff and specific support strategy training is available to meet individual pupil need. The team work closely with a range of Partner Agencies, including Speech and Language Therapy, Occupational Therapy, Educational Psychology and Mental Health Services for Children and Adolescents.

English as an Additional Language Service

The team support the learning and teaching of pupils with a first language other than English. They work in partnership with and on the basis of shared responsibility with the bilingual learner's own school and teachers to support access to the mainstream curriculum. They improve access, ensure integration and raise achievement across the mainstream curriculum and aid with the process of assessment and certification.

Sensory Education Service – Hearing Education

This is a peripatetic education support service for deaf and hearing impaired babies, children, young people and their families. They offer support and advice to build effective partnerships with children, families and school staff. They work with school staff to ensure a high quality of education to support the journey to excellence for deaf pupils by providing access to quality assessment and advice about the full range of language and communication choices. Deaf awareness training can be provided for class teachers and support staff. The team work closely with a range of Partner Agencies including Audiology, ENT, Speech and Language Therapy, Educational Psychology and Occupational Therapy.

Sensory Education Service – Visual Education

This is a peripatetic educational support service for children, teachers and all those concerned with the education of the child or young person with a visual impairment. They ensure full access to the curriculum in a form which is appropriate to their individual needs to allow the pupil to achieve their full potential. They consult with and give information and advice to parents/carers, schools and other professionals. Direct teaching input can be provided in key skill areas related to a visual impairment. Awareness training is provided for staff, pupil and other professionals.

14. Early Intervention and Prevention

Community Safety Partnership

By carrying out a multi-agency tasking and co-ordinating process, the Community Safety Partnership aims to improve community safety across Moray by identifying and addressing immediate concerns in order to protect the most vulnerable and at risk and be proactive to ensure that communities feel safe. This is enhanced by looking forward, identifying emerging trends ensuring as far as possible, that we are on the front foot with preventative measures.

Early Intervention Worker, Police Scotland

Early intervention by Police Scotland in Moray is delivered by the Early Intervention Worker (EIW) who is a full time member of Police staff based at Elgin Police Office.

The service is aimed at children involved in low level offending and/or antisocial or risky behaviours with a view to educating them of the dangers involved and curbing the behaviour.

Upon receiving a referral the EIW will meet the child and their parents/carers and will make an assessment of the needs. The EIW can offer Acceptable Behaviour Contracts, early intervention warning letters, provide group sessions or one to one counselling services. The EIW will also make referrals to other key partners where required, who can provide additional support

Youth Justice – Offending Prevention

The Youth Justice Team, Social Work was formed in 2002 to offer a range of services and support to local children and young people who are involved in, or identified as at risk of becoming involved in offending or anti-social behaviour.

Initially the team offers a 6 week assessment period and completes base line assessments using the ASSET assessment tool, this considers risk and likelihood of continuing to be involved in risk taking behaviours. More specifically the team can apply a specific risk assessment tool to assess sexualised behaviour, as well as violent behaviour. This information is then collated in a multi-agency a plan that will best meet the young person's needs.

The Whole System Approach is a Scottish Government initiative which has been introduced in Moray with a view to achieving positive outcomes for some of our most vulnerable young people, to ensure they reach their full potential and become successful contributors to their communities and wider society.

Adopting a Whole System Approach encourages all of us to find new ways of working with all young people under 18 who offend.

The approach emphasises the need for earlier intervention with all young people under the age of 18 who are engaged in offending behaviour and who come to the attention of the Children's Hearing System, the Police, the Courts or other agencies. By having more streamlined and consistent responses that work across all systems we aim to achieve better outcomes for young people and their communities across Moray.

The approach includes interventions and responses such as:

- Early and effective interventions by a range of agencies to ensure young people get a timely, appropriate and proportionate response to early/minor offending and are directed towards positive activities.
- Multi-agency screening takes place to identify opportunities for diversion from prosecution, diversion from custody and greater use of community disposals. This ensures that young people get an immediate and effective response that meets risk and need and promotes options that will develop their capacity and skills.
- Improved risk assessment and risk management to support decision making, ensuring the most appropriate resources are targeted at the young people who pose the highest risk of offending or of causing harm.

15. Child Protection

Moray Child Protection Committee is the strategic partnership responsible for making sure that all services work together to improve outcomes for children, by making sure they are protected from abuse, neglect and harm and get the help they need when they need it.

Moray CPC regularly receives performance management information which is derived locally and from the North East of Scotland Child Protection Register (CPR) which covers Grampian and is managed by the Child Protection Partnership (CPP). This information provides data trends across Moray in relation to risk indicators and comparisons to previous quarters throughout the year.

Moray CPC is currently reviewing this performance management information in order to gather and present meaningful information that can help identify both good practice and areas for improvement. Most importantly Moray CPC is looking to provide rich analysis behind the performance management information, so that this can be used to improve outcomes for children and direct targeted resources accordingly.

Over the year covered by the 2015/16 Annual Report Moray CPC:

- published a Child Protection basic awareness and Child Sexual Exploitation (CSE) briefing document to all children's services
- made significant progress with the current Child Protection Improvement Plan, including key areas on CSE
- completed a successful learning review for a case in Moray (finished action to be submitted to CPC later in the year)
- successfully held a development day with all staff connected to Moray CPC and actioned the key feedback
- developed and implemented the Child Protection and Wellbeing Policy and Procedure
- reviewed and updated the Inter-Agency Referral Procedure for all staff

The Moray CPC is considering how it can take forward wider governance and auditing of operational practice, decision making and partnership practice in child protection and complex cases. The audit and review of randomly selected case conference minutes along with oversight of informal multi agency case reviews are two potential areas to link strategy closer to practice and to drive forward quality standards through relational practice and an open learning culture.

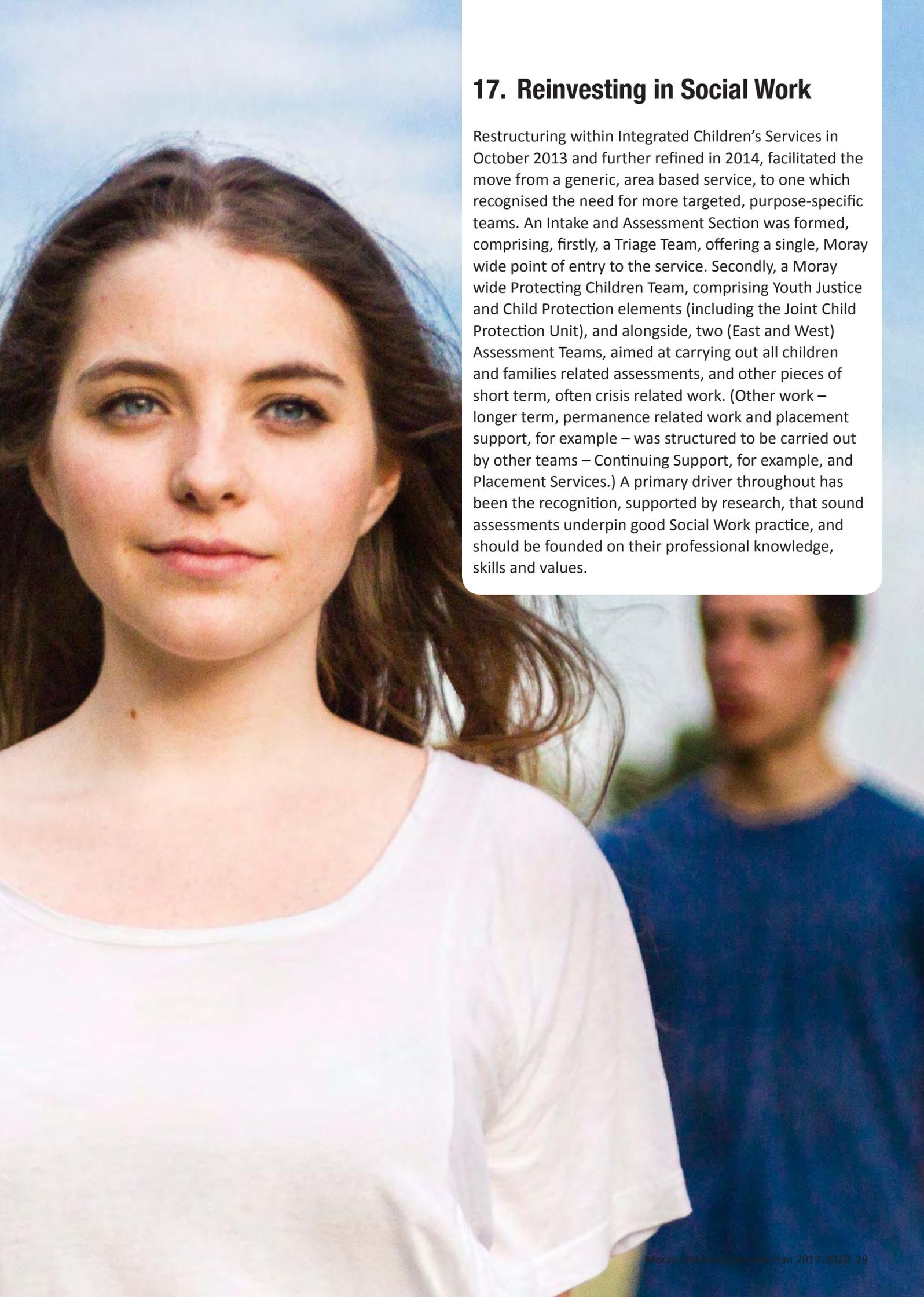
The Moray CPC has played a key role in the progress of the Moray Learning and Development Group (MLDG). The MLDG has been re-named from the previous Child Protection and GIRFEC Inter-Agency Training Group and consists of experienced professionals from Health, Education, Social Work, Police, and Third Sector. It is the responsibility of the MLDG to develop and deliver a multi-agency Child Protection, GIRFEC and Early Years training calendar for all staff working with children and young people across Moray.

16. Police Scotland, North East Division

The Partnerships and Events strand of the North East Division has been designed and built taking cognisance of the already strong partnership ethos which has long existed across the North East. An extension to this work was the creation of Partnership Co-ordination Unit (PCU) which encompasses and co-ordinates all aspects of vulnerability from child concerns to Domestic Abuse to Case Conference co-ordination, ensuring that the available resources are used in the most effective way possible, again with a view to linking in with the most appropriate partner agencies to enable, support and intervene as required, improving service delivery.

The Police Risk and Concern Hub works alongside partners to meet public protection responsibilities and provide high quality services. Information received in the Vulnerable Person Database, Domestic Violence, Adult Protection and Child Protection through a coordinated Risk and Concern Project is triaged to identify risk to children, young people and vulnerable adults, ensuring services respond with support at an early stage.

Developments in 2016 have included creating a single point of contact, through a team of specialist Sergeants, for practitioners wishing to undertake an Inter-Agency Referral Discussion (IRD) and agree the need for a Child Protection Investigation. This has created a more consistent and efficient response to referrals, and further builds expertise within the Risk and Concern Hub staff team working across a range of vulnerability and risk.



17. Reinvesting in Social Work

Restructuring within Integrated Children's Services in October 2013 and further refined in 2014, facilitated the move from a generic, area based service, to one which recognised the need for more targeted, purpose-specific teams. An Intake and Assessment Section was formed, comprising, firstly, a Triage Team, offering a single, Moray wide point of entry to the service. Secondly, a Moray wide Protecting Children Team, comprising Youth Justice and Child Protection elements (including the Joint Child Protection Unit), and alongside, two (East and West) Assessment Teams, aimed at carrying out all children and families related assessments, and other pieces of short term, often crisis related work. (Other work – longer term, permanence related work and placement support, for example – was structured to be carried out by other teams – Continuing Support, for example, and Placement Services.) A primary driver throughout has been the recognition, supported by research, that sound assessments underpin good Social Work practice, and should be founded on their professional knowledge, skills and values.

18. Young carers

A young carer is a child or young person aged 18 or under, who helps look after a relative who has a disability, illness, mental health condition, or a drug / alcohol problem. Most young carers look after a member of their immediate family.

A number of children and young people in Moray may face additional challenges through their experiences as young carers. Although figures are not definitive, there were up to 281 children/young people identified as young carers on the young carer data from the Moray 2011 census.

Recognising some of the difficulties in identifying young carers and providing relevant supports, Quarriers are commissioned to provide a young carers Support Service across Moray. Quarriers also undertook the development of a toolkit to ensure that schools and young people's support agencies were more 'carer aware'.

The number of registered young carers receiving support from Quarriers as of 31 December 2016 was 162. The breakdown per geographic area is set out in the table below

	Elgin	Milnes	Laich	Keith	Buckie	Forres	Speyside	Total
Male	15	4	8	4	9	11	5	56
Female	45	7	14	7	10	20	3	106
Totals	60	11	22	11	19	31	8	162

This is some of our key achievements in supporting Moray's young carers:

- Between October and December 2016, Quarriers supported 76 young carers, with 14 new referrals in the period.
- In December 2016 Quarriers sent out a newsletter for young carers to each young carer registered with the Service and to each primary and secondary school in Moray.
- In October 2016 Quarriers supported 8 young carers to build their own computers, in association with Re-Boot in Forres. Each young person achieved a certificate for their work.
- In December 2016 Quarriers held two Christmas parties for young carers – supporting 20 young carers at each event and raising the profile of some of the difficulties they face.
- In January 2017 Quarriers made a successful partnership bid, along with Moray Council for additional funding from the NHS Grampian Carer Information Strategy¹ to further develop the toolkit and take forward implementation across schools, the named person services and Locality Management Groups.

1 NHS Grampian Carer Information Strategy. NHS Information for Carers. www.nhsgrampian.org/carers/

19. Community Learning and Development

Community Learning and Development within Moray is currently delivered through a range of partners, the Third Sector and the local authority. The Moray CLD Plan 2015-2018¹ has as its overarching aspirations for CLD that:

- Every child has the best start in life
- Everyone, irrespective of age, has access to support and development opportunities enabling them to meet their needs and aspirations and realise their potential
- Empowered communities have access to support and resources enabling them to identify and address their own needs and aspirations

Strategically the CLD Plan is overseen by the Community and Lifelong Learning Forum on behalf of the Community Planning Partnership.

Children and Youth Work

For the period April-December 2016 the Children's Wellbeing Team delivered 145 universal projects to 2974 participants and 163 targeted programmes involving 1244 participants.

These projects and programmes were based around the wellbeing indicators and ranged from youth drop-ins, accreditation projects and transition events to lunch time Lego groups.

There are currently 223 active participants on the Duke of Edinburgh Award with 89 volunteers. The social return on investment figure for 2015/16 was 4,923 volunteering hours in Moray by participants equating to £19,052, and 32,611 hours for leaders equating to £326,110.

By end of Quarter 3 (2016/17) 1,886 young people, aged between 3 and 16 years, had participated in sports coaching programmes during term time and holidays. 64 people had attended coach education, plus training courses related to sport, 10 of them being young people under 18 years.

Adult Learning

Informal learning is delivered by frontline library staff for example, heritage, Bookbug, information skills, as well as the formal accredited learning delivered by dedicated learning centre staff. During 2016/17, 220 new learners signed up for accredited learning; over 550 learners attended basic awareness sessions and 1968 learners attended accredited learning. 180 Job Club sessions in Aberlour, Buckie, Elgin, Forres, Keith and Lossiemouth were delivered to just under 900 participants.

Courses currently on offer include European recognised computer literacy certification programmes, Family History Online and One Day Excel Learning. Centre staff are also offering an invigilation and online testing service to businesses. Current projects are Digital Drop-ins, iPad learning, 3D printing and code clubs for kids.

1 Community Learning and Development Plan 2015 – Moray Council
www.moray.gov.uk/downloads/file101851.pdf

Essential Skills

By end of Quarter 3 (2016/17) there were 146 active learners – 122 learners successfully completed course units including Core Skills Communication, Numeracy, Wellbeing, ICT and Volunteering Skills. Literacy learning was also provided for 1533.5 hours. Staff are also supporting learners with driving theory, the Construction Skills Certification Scheme and college courses. Learning is provided through a range of projects including Kickstart with Moray College UHI, The Big Friendly Read, Reading Ahead; Family Learning and delivered integrated literacies support in partnership with the Criminal Justice Team, SACRO, Step by Step, Forres Credit Union, Parent Network Scotland, Moray College and Early Years Drop-in.

English for speakers of other languages (ESOL)

Moray Council currently provides 37 ESOL classes a week spread between Buckie, Forres and Elgin, from pre-literate through to intermediate level. There are between 100 and 120 active learners. Polish and Spanish are the predominant languages spoken and five Syrian families are also being supported.

Community Capacity Building

Training to support volunteers is delivered through tsiMORAY and ranges from governance training, participatory budgeting events to social enterprise inputs and health and wellbeing projects.

Community capacity building training is also supported with 213 participants to date. The Councils Community Support Unit has worked with 58 groups supporting 493 people directly, ranging from regeneration groups, Planning for Real groups and the Moray Federation of Community Halls and Associations.

Moray is part of the Northern Alliance partnership to support and develop the CLD sector in the seven northern local authority areas. The 2016 annual conference attracted 96 participants, 32 of whom were from Moray.

A CLD network meets three times per year which links with the annual 'Join the Dots' conference targeting Third Sector practitioners through tsiMORAY.



20. Developing the Workforce

The Moray Learning and Development Group (MLDG) is responsible for developing and delivering a multi agency Child Protection, GIRFEC and Early Years training calendar for all staff working directly, or indirectly, with children, young people and their families across Moray.

It is recognised that multi agency training/learning promotes better relationships between professionals, agencies and organisations, and helps develop a greater understanding of others roles and responsibilities. This should then be reflected in positive integrated working that is evidenced through improved outcomes for children, young people and their families.

A calendar of training has been established to fit the needs and requests across Moray, based on some feedback.

A Quality Assurance Framework has been produced with the aim of:

- Ensuring that the training provides best value and is planned and delivered to a high standard.
- Developing a robust learning needs analysis to identify future training and learning, within the multi-agency workforce.
- As part of the quality assurance, it is essential that the impact of any training sessions is evidenced in practice and most importantly, how it improves outcomes for children, young people and their families.

This framework will also measure the impact of learning through evaluations, one to ones and focus groups with practitioners in the first instance. The second part of this will be to link this to service audits, supervision and feedback from children, young people and their families.

Moving forward, it is essential that all partners coordinate training across Moray and consideration must be given to how best this is achieved over the lifetime of this Children's Services Plan.

Developing the Young Workforce

Developing the Young Workforce is an initiative from Scottish Government which is leading the Moray Skills Framework/Pathways developments to ensure that by 2020, all young people have a better understanding of the world of work and the local economic landscape. The key aim is to ensure early intervention is in place to support all young people to be in the best position on leaving school and able to make an informed choice about the pathway they wish to pursue. The Moray Skills Pathway is based around the 8 key sectors in Moray's economy, by developing meaningful partnerships with Employers, Moray College UHI, Skills Development Scotland and Moray Council, young people can be supported to have a range of experiences to support their skills development.

The DYW Operational Group has the strategic overview for the implementation of the 39 DYW recommendations across Moray, the action plan has been drawn up under 5 main headings:

- Early Intervention & Prevention
- Transition Planning
- Quality Assurance
- Promoting Equity
- Culture & Practise

The action plan is mapped to the DYW recommendations and the Moray Children Services Plan.

The role of the Opportunities for All Officer is to support local delivery of the OfA commitment to young people age 16-19 (up to their 20th birthday), through engagement/re-engagement, transition planning from school and other post-school learning opportunities, access to learning and training offers and improving progression outcomes.

21. Corporate Parenting – The Moray Position

Care experienced children and young people continue to be recognised as a vulnerable group in society, despite the attention over recent years towards improving outcomes for them. In Moray we recognise that they are particularly disadvantaged and will need additional support and specialist services.

Simply put, 'corporate parenting' is the term used for the collective responsibility of the members of the Community Planning Partnership, as a corporate body, to ensure that care experienced children, young people and care leavers receive the same quality of support from the partners as they would from a supportive parent.

Being a Corporate Parent involves:

- Commitment to professional development, for example through participating in appropriate training to carry out corporate parenting responsibilities.
- Celebrating the success of our children and young people.
- Making sure that all foster homes and children's homes are of the standards in terms of comfort, homeliness, friendliness and openness of carers and staff. This will be achieved by visits, liaison with the staff responsible, being familiar with inspection reports, benchmarking and following up on identified areas of concern.
- Meeting with young people and listening to what they have to say.

Moray's Community Planning Partnership is committed to provide high quality services that promote good outcomes for care experienced children and young people. To achieve this, the Community Planning Partnership will work together consistently to deliver on the duties specified for Corporate Parents in part 9 of the Act which are specified in the section on legislation and policy.

The duties are intended to ensure the attention and resources of Corporate Parents are focused on safeguarding and promoting the wellbeing of care experienced children and young people and care leavers. Every Corporate Parent is expected to fulfil these duties in their own way, consistent with their purpose and functions.

There are some key areas for specific focus which have been identified and laid out within our Corporate Parenting Strategy.

Moray's aim is that Corporate Parents will have the same aspirations and commitment to care experienced children and young people as any good parent would have for their own children. Support and services provided should always make a positive difference every day to children and young people's lives.

In 2014 Moray signed the Who Cares? Scotland pledge to:

- (listen) to the voice of Scotland's care experienced children and young people
- (act) so that Scotland is a better place for care experienced children and young people
- (unite) with and around Scotland's care experienced children and young people

As a result, Who Cares? Scotland together with Action for Children and Moray Council's Placement Services Team (Through Care After Care) have worked together since making this commitment, to form the 'Moray Group' which is a group of care experienced children and young people. We have been listening to what that group, in addition to the views and wishes of the wider group of care experienced children and young people, have been saying and using that information to determine our policies to make sure that care experienced children and young people have the right help, at the right time, to do their best and make a success of their lives.

22. The Third Sector in Moray

The Third Sector in Moray includes community groups, voluntary organisations, charities, social enterprises, volunteers, uniformed organisations and others who deliver a wide range of services and supports for children, young people, families, parents and carers across Moray.

Some of these groups come together through the Children & Young People's Third Sector Forum, which was established with the support of tsiMORAY to bring together and connect the many Third Sector organisations with an interest in children and young people working across Moray.

Forum members from a range of Third Sector organisations act as Third Sector liaisons on a variety of strategic and operational groups to bring a Third Sector perspective to Community Planning Partnership discussions. All Third Sector liaisons are committed to collaborative leadership and planning to enable a shared vision and to improve services and outcomes for children, young people, parents, families and carers across Moray.

Forum members also offer and receive peer support during discussion of the issues, concerns, developing trends and impacts of funding and legislation facing those who work with children and young people. The Forum is one of five currently active in Moray, and meets approximately every 6 weeks throughout the year. The other forums focus on environment and sustainability, health and wellbeing, social enterprise and volunteer management.

All forums are supported and facilitated by tsiMORAY, a local charity acting as an umbrella support organisation for the Third Sector in Moray and one of 32 Third Sector interfaces in operation across Scotland. tsiMORAY brings together and supports Moray's Third Sector to enable its full participation in the sustainable development of Moray, including participation in Community Planning. tsiMORAY also facilitates networking events and training, volunteer placement, organisational and social enterprise development.

Supporting young people into volunteering can enable the development of life skills and enhance employability skills for young people. tsiMORAY enables, supports and promotes youth volunteering through Saltire Awards which are the Scottish awards designed to formally recognise the commitment and contribution of youth volunteering. Supported by the Scottish Government, the Saltire Awards enable young volunteers to record the skills, experience and learning gained through successful volunteering placements in school or provided by local and national voluntary agencies.

The Awards are split in to four sections – The Challenge, The Approach, The Ascent and The Summit and achievement is recognised in the form of Saltire Award certificates and Young Scot reward points.

Saltire Awards are designed to encourage and enable youth volunteering and dovetail neatly into the four capacities of Curriculum for Excellence as participants will develop their abilities through volunteering to become successful learners, confident individuals, responsible citizens and effective contributors. The Saltire Journal is the resource provided to facilitate recording of skills and learning achieved, in addition the participants may be asked to complete a self-evaluation (Footprints), which directly links their responses to Curriculum for Excellence.

23. Gypsy Travellers

There is a dedicated Unauthorised Encampment Officer (UEO) within Moray Council, who works closely with other partners to ensure that children and young people in travelling families are provided with appropriate health and education services. There is currently no authorised encampment in Moray for Gypsy Travellers. Clear pathways have been developed for gypsy traveller families to engage with services.



24. Progress and Achievements

Whilst 2016 was a challenging year for the Community Planning Partnership in terms of going through the joint services inspection, the resultant report has helped the partnership to focus on priorities for this plan for the next three years and highlighted a number of areas of strength:

- The range and effectiveness of nurturing support to parents and very young children.
- The willingness of front line staff and senior managers to work collectively to meet the needs of children and young people.

Further to this, our own self-evaluation has identified a number of key partnership strengths over the past few years which demonstrate a commitment to partnership working:

- The 2015/2016 Education Scotland thematic review of senior phase pathways highlighted some important strengths in partnership working across the senior phase in Moray for learners.
- The 2015 Education Scotland Validated Self-Evaluation of Educational Psychology highlighted important strengths in relation to these services in Moray which are rooted in partnership approaches to working.
- Our fostering and adoption services have received consistently good inspection reports over a number of years as has our Support Lodgings Project, again with strong foundations in partnership working.
- Our partnership working on relation to the Early Years Collaborative (now the Children and Young People's Collaborative) and use of the associated improvement methodologies has resulted in positive results in various locations across Moray and our early years conferences have led to closer partnership working across services
- Good partnership working at a community safety level between various CPP partners has resulted in a reduction in anti-social behaviour reports and a reduction in juvenile offences and offenders.
- There is emerging good practice in relation to how we are developing the young workforce in Moray at a partnership level and a skills framework has been developed which is to be launched in May 2017.
- Moray is currently consulting on an ASN Strategy, rooted in the importance of strong partnership, which should steer a clear course of action in this area for the next ten year period

Notwithstanding the enormity of challenges which lie ahead for partners in Moray in terms of responding to our joint inspection, it is clearly evident that there are many clear examples of good and emerging partnership working upon which our partnership can build over the life cycle of this joint Children's Services Plan.

25. Action Plan 2017/2020

Priority 1 – Ambitious and confident children – to improve the life chances of children, especially the most vulnerable, by supporting them and their families at the earliest stages.

<p>Aim We will quality assure and self-evaluate our work with children, young people and their families.</p>							
<p>Actions Develop Quality Assurance Framework. Draft terms of reference. Create timetable of self-evaluation/quality assurance exercises throughout the life of the CSP. Communicate learning to staff and re-evaluate</p>							
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/UNCRC	
Number of single and multi-agency Quality Assurance exercises carried out demonstrating improved outcomes for children, young people and families.					Quality Assurance Team	Included Respected 1-6	
Number of repeat or re-evaluation quality assurance exercises showing continuous improvement.					Quality Assurance Team		
Number of multi-agency audits.					Quality Assurance Team		

<p>Aim We will close the attainment gap for our children and young people.</p>							
<p>Actions Work in partnership to deliver support to schools and their local communities in order to improve outcomes and close the attainment gap. Schools will identify the gaps pertinent to their contexts and will consider how to make best use of Pupil Equity Fund (PEF) using a range of partners and strategies in order to close the gap for targeted individuals and groups. Emerging literacy pilot will be rolled out across schools and the learning shared with ELCC partners.</p>							
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/UNCRC	
Improvements evidenced through baseline assessment data and attainment data, as well as evaluative commentaries by schools and during QA visits. Proportion of positive school inspection outcomes.					Schools	Achieving 17-18, 28-30	
Evaluation of literacy pilot carried out prior to further roll out.					Schools		

Aim						
We will maximise the training, employment and education opportunities for all school leavers.						
Actions Continue to work in partnership to improve provision for post school learning and employment for young people. Launch and implement the Skills Pathways Planning groups focussing on 8 employment sectors with partnership working with schools, SDS, college, third sector and employers. Continue to consider curricular pathways across the senior phase.						
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/ UNCRC
Increase the % of young people entering positive destinations from school.	14/15=94.41% 15/16=92.66% 15/16 data not available at time of writing				Schools	Achieving Included 28-30
Increase the number of young people from deprived areas entering positive destinations from school.	30% Most deprived 14/15=90.00% 15/16=84.72% 15/16 data not available at time of writing				Schools	
Increase in the % of 16 - 19 year olds in education, employment or training.	2015=88.2% 2016=91.0%				Opportunities for All Officer	
Increase in the number of looked after children who enter education, employment or training following school.	14/15=61.9% 15/16=58.33% 15/16 data not available at time of writing				Corporate Parentship	
Increase the number of looked after children who remain in employment, training or education 1 year after leaving school.	Follow up data collected 6 months after leaving				Corporate Parentship	

Aim We will ensure all children and young people are supported to be responsible citizens																																		
Actions Develop early intervention strategy. Refine the range of early intervention and prevention services to best support offenders, victims and parents.																																		
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/ UNCRC																												
Reduce the number of young people committing/suspected of crime.	<table border="1"> <thead> <tr> <th></th> <th>2012</th> <th>2013</th> <th>2014</th> <th>2015</th> <th>2016</th> <th>2017</th> </tr> </thead> <tbody> <tr> <td>Accused</td> <td>434</td> <td>319</td> <td>234</td> <td>277</td> <td>296</td> <td>1560</td> </tr> <tr> <td>Suspect</td> <td>172</td> <td>103</td> <td>96</td> <td>94</td> <td>100</td> <td>565</td> </tr> <tr> <td>Total</td> <td>606</td> <td>422</td> <td>330</td> <td>371</td> <td>396</td> <td>2125</td> </tr> </tbody> </table> <p>Based on the above figures, the 5-year average is 425.</p>		2012	2013	2014	2015	2016	2017	Accused	434	319	234	277	296	1560	Suspect	172	103	96	94	100	565	Total	606	422	330	371	396	2125				Police Scotland	Included Responsible 12-14, 16, 40-41
	2012	2013	2014	2015	2016	2017																												
Accused	434	319	234	277	296	1560																												
Suspect	172	103	96	94	100	565																												
Total	606	422	330	371	396	2125																												
Increase the number of children engaged in diversionary activities.	<p>2014/15 Young people aged 8-16 who were reported to YJMU – 187 Young people aged 8-16 who were diverted from formal Criminal Justice processes – 172 (92%) Young people aged 8-16 who were referred to SCRA or COPFS – 15 (8%)</p> <p>2015/16 Young people aged 8-16 who were reported to YJMU – 212 Young people aged 8-16 who were diverted from formal Criminal Justice processes – 176 (83%) Young people aged 8-16 who were referred to SCRA or COPFS – 36 (17%)</p> <p>2016/17 (until 09.03.17) Young people aged 8-16 who were reported to YJMU – 259 Young people aged 8-16 who were diverted from formal Criminal Justice processes – 235 (90.7%) Young people aged 8-16 who were referred to SCRA or COPFS – 24 (9.3%)</p>				Children & Families Social Work																													

Aim We will improve the availability of affordable child care across Moray						
Actions Develop a strategic plan for the delivery of the expansion of early learning and childcare.						
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/ UNCRC
Increase in number of available early learning and Childcare places in Moray.					Early Years Strategy Group	Included Nurtured 26-29
Increase in number of staff involved in early learning and childcare services. Increase in parental participation and engagement in early learning and childcare.					Early Years Strategy Group	

Aim We will consult widely with children and seek their views on our services and how to improve.						
Actions Develop plan, methods of reporting and standards for consultation exercises. Map and evaluate recent consultation exercises. Carry out consultation and feedback exercises. Collate and share the views of children from existing practices ie school visits and Schools for the Future reviews. Improvement Plans informed by consultation and feedback.						
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/ UNCRC
Increase in parental participation and engagement in early learning and childcare. Plan for consultation and feedback will be in place.					Early Years Strategy Group	Respected Included 12-14
Changes in plans/policies/procedure will include the views of children.					Quality Assurance Team	
Children will report they are being listened to.					Quality Assurance Team	
Increase in the number of children using Viewpoint. Increase in number of children consulted and feedback obtained.	In the first 3 Qtrs of 16/17 a total of 29 young people had used the Viewpoint system.				Quality Assurance Team	
Number of consultation exercises carried out.					Quality Assurance Team	
					Quality Assurance Team	

Aim We will ensure children achieve their educational aspirations.						
Actions We will deliver an appropriate curriculum and intervene early for those who are disengaging from education and provide supports to children, young people and their families. We will improve standards of literacy and numeracy among young people.						
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbing Indicator/ UNCRC
% of school leavers will achieve level 4 numeracy	14/15=87.1%				Schools	Responsible Achieving 12-13, 15, 28-29
% of school leavers will achieve level 4 literacy	14/15=95.7%				Schools	
% of school leavers will achieve level 5 numeracy	14/15=59.3%				Schools	
% of school leavers will achieve level 5 literacy	14/15=77.5%				Schools	
Reduce exclusion rates (per 1000 pupils) from school.	15/16=0.02%				Schools	

Aim We will maximise opportunities for all children to participate in volunteer work and nationally recognised awards.						
Actions We will work in partnership with the Third Sector and other organisations to provide access to a wide range of opportunities.						
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbing Indicator/ UNCRC
Increase numbers of children offered and participating in. Wider achievement activities including non-accredited activities.					tsiMORAY	Responsible Achieving 15, 27-28, 31

Priority 2 – Healthier Children – children get the healthiest start in life and are supported to achieve the best possible mental health and wellbeing and there is equality for vulnerable groups.

<p>Aim We will improve health supports and outcomes for children before they are born.</p>						
<p>Actions Implementation of Child Health 2020 plan. Expectant mothers are provided with relevant healthcare advice on conception/pregnancy. All eligible pregnant women will be able to access Family Nurse Partnership. Explore and plan the Implementation of the new Maternity and Neo-natal Care in Scotland 5 year plan</p>						
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/ UNCRC
Decrease the number / % of mothers smoking during pregnancy	18.6%				NHS Grampian	Healthy Safe 6, 18, 23-25, 27
Reduce the number/% of babies born with a low birth rate. Reduce the number/% of still births.	1.63%				NHS Grampian	
Measures from 'Baby Steps Project' to be agreed	Grampian 19.3% 2015/16 number of pregnant women who are obese				NHS Grampian	
Number of young women accessing FNP.	2015 – 24 notifications 2016 – 16 notifications 2017 – 14 clients currently involved				NHS Grampian	

Aim						
We will improve health supports and outcomes for children and young people						
<p>Actions</p> <p>Implementation of Child Health 2020 Strategy</p> <p>Targeting of services within the communities which have the lowest breastfeeding rates.</p> <p>Maintain the number of children who have a 27-30 month development review.</p> <p>Intervene early and provide support to children identified as having development concerns at 27-30 month review.</p> <p>Provide support and information to families and educational establishments to improve healthy nutrition</p>						
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/ UNCRC
% of babies exclusively breast fed at 6 - 8 week review. Increase the % of babies exclusively breast fed at 6 – 8 week review in communities who have the lowest rates.	30%				NHS Grampian	Health Nurtured 18, 24-27
Increase the number/% of eligible households participating in the Healthy Start Scheme.					NHS Grampian	
By 2020 at least 85% of children in each SIMD quintile of the CPP will have no developmental concerns identified at the time of their 13-15 month child health review. By 2020 at least 85% of children in each SIMD quintile of the CPP will have no developmental concerns identified at the time of their 27-30 child health review.	75.8% no concerns 90.7% had review				NHS Grampian	
By 2020 at least 85% of children in each SIMD quintile will have successfully achieved early level literacy, numeracy and are progressing in health and wellbeing by end of Primary 1.					Schools	
By 2020 at least 85% of children in each SIMD quintile will have successfully achieved CfE first level literacy and numeracy and are progressing in health and wellbeing by end of Primary 4.					Schools	
Increase % of children with no evidence of dental decay at P1.	73.8%				NHS Grampian	

Aim							
We will ensure that children, young people and families have access to regular healthy exercise.							
Actions Work in partnership to promote healthy living from birth. Ensure that Well-being indicator 'active' is embedded in the curriculum Children receive 2 hours of quality physical education per week Increase opportunities for families to access leisure services. Implementing the Moray mile or other initiatives where there is an identified problem with children not undertaking regular exercise							
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/ UNCRC	
Increase % of infants and children with a healthy weight at their developmental reviews at 8 month, 12 months, 27 months, preschool and at routine P1 health review.	76.7%				NHS Grampian	Active Healthy 13, 15, 23-24, 28-29, 31	
% of schools achieving two hours of quality PE				Schools			
Children and families will report having greater access to leisure facilities.				Lifelong Learning, Culture & sport			
Number of schools participating in Moray Mile.				Schools			

Aim						
We will ensure that all Looked After Children experience improved health outcomes after becoming Looked After.						
Actions						
All looked after children will receive health assessments at appropriate times. Children's Plans have comprehensive health and wellbeing actions. Increase opportunities for looked after children to access leisure services.						
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/ UNCRC
Increase number/% of Looked After Children who receive a health assessment within (timescale).	2015 data – completed 38 new referral assessments which accounted for 97% of new LAC in Moray. 68% of those assessments carried out within 8 week timescale				NHS Grampian	Healthy Nurtured Included 9, 20-22, 24-26, 31
Audit/Quality Assurance of Children's Plans.					Quality Assurance Team	
Looked After Children report increased opportunities to access leisure services including access to Fit Life? cards.					Corporate Parentship	

<p>Aim We will ensure children and young people achieve the best possible mental health</p>						
<p>Actions Ensure children have access to CAMHS. Ensure that those children and young people or families who have identified mental health issues are supported by partners and are signposted to appropriate support. Ensure that needs are identified early through partners working together to best meet the needs of individuals and families.</p>						
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/ UNCRC
Reduce assessment waiting times for CAMHS. Audit of signposting to alternative services. Evaluate the impact of Mental Health Development Workers	45% seen within 18wks Increased confidence in schools to support young people with mental health and wellbeing issues.				NHS Grampian	Included Healthy Nurtured 3, 24, 39

<p>Aim We will ensure children and young people are informed to make healthy lifestyle choices.</p>						
<p>Actions We will work in partnership to educate young people regarding the risks of smoking, drug and alcohol consumption.</p>						
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/ UNCRC
Increase percentage of 13 and 15 year-olds (taking part in 2-yearly SALSUS survey) who have never smoked at all.	13-87% 15-60%				NHS Grampian	Nurtured Active Healthy 12, 17-18, 24, 33
Decrease percentage of 13 and 15 year-olds (taking part in 2-yearly SALSUS survey) who said they had drunk alcohol in the week prior to the survey.	13-5% 15-25%				Moray Alcohol & Drug Partnership	
Increase percentage of 13 and 15 year-olds (taking part in 2-yearly SALSUS survey) who said they had never used drugs.	13-98% 15-83%				Moray Alcohol & Drug Partnership	
Reduce the number of children and young people (0-19) years presenting at Dr Grays Hospital with alcohol or drugs as a primary or secondary factor					Moray Alcohol & Drug Partnership	

Priority 3 – Safer children – to protect children from the risk of harm, abuse and neglect and promote and support safer environments and communities.

<p>Aim Children are safe from harm, abuse and neglect.</p>						
<p>Actions Children are safe from harm, abuse and neglect. Supervision will be strengthened across all services to ensure early intervention in cases of cumulative harm or neglectful parenting. Supervisors will receive training on Risk Assessment/Chronologies and Child’s Plan. Establish a baseline of supervision across relevant partners. Training courses on identifying neglect/Risk Assessment/ Chronologies/Children’s Plan to be included in Moray Learning and Development Group training calendar.</p>						
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/ UNCRC
Number of training courses delivered and evaluated positively.					Child Protection Committee	Safe Respected Nurtured 3-6, 9, 11-13, 16-30, 32-37, 39-42
Number of supervisors attending training courses.					Child Protection Committee	
Number of children’s assessment of need plans rated as good or better by Quality Assurance Team.	CI Report: around half of all plans were assessed as good or better.				Quality Assurance Team	
Number of chronologies assessed to be good or better by Quality Assurance Team.					Quality Assurance Team	
Regular audits show earlier interventions and greater staff competence and confidence in dealing with neglect and harm.					Quality Assurance Team	

Aim We will ensure children and young people are safe at home, schools and communities.																																								
Actions Provide education and support to children, young people and families to help keep them safe. Following a child being de-registered from the Child Protection Register hold a minimum of 2 Core Group meetings to assess improvements for the child.																																								
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/ UNCRC																																		
% of de-registrations from CPR which have core group meetings continuing for a period of 6 months after de-registration.	Not routinely measured presently.				Child Protection Committee	Safe Healthy Nurtured Respected 9-12, 19-22, 24-29, 32-34, 36, 39																																		
% Reduction in the number of children and young people in placements out with Moray.	LAAC 14/15=9.15% 15/16=9.8%				Children & Families Social Work																																			
% Reduction in the number of emergency hospital admissions as a result of unintentional injury. (Children under 5 years)	43 admissions in 0-4 age in 2015/16				NHS Grampian																																			
% Reduction in number of child road traffic casualties.	<table border="1"> <thead> <tr> <th></th> <th>2012</th> <th>2013</th> <th>2014</th> <th>2015</th> <th>2016</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Fatal</td> <td></td> <td></td> <td></td> <td></td> <td>2</td> <td>2</td> </tr> <tr> <td>Serious</td> <td>7</td> <td>7</td> <td>7</td> <td>4</td> <td>9</td> <td>34</td> </tr> <tr> <td>Slight</td> <td>16</td> <td>13</td> <td>8</td> <td>3</td> <td>3</td> <td>43</td> </tr> <tr> <td>Total</td> <td>23</td> <td>20</td> <td>15</td> <td>7</td> <td>14</td> <td>79</td> </tr> </tbody> </table> <p>Based on the above figures, the 5-year average is 15.8.</p>		2012	2013	2014		2015	2016	Total	Fatal					2	2	Serious	7	7	7	4	9	34	Slight	16	13	8	3	3	43	Total	23	20	15	7	14	79			
	2012	2013	2014	2015	2016	Total																																		
Fatal					2	2																																		
Serious	7	7	7	4	9	34																																		
Slight	16	13	8	3	3	43																																		
Total	23	20	15	7	14	79																																		

Aim We will improve multi agency support for vulnerable children and young people.						
Actions Implementation of GIRFEC in line with the requirements of the Children and Young People (Scotland) Act 2014. Robust risk assessment processes are in place to support early intervention.						
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/ UNCRC
Increase in % of child's assessment of need plan rated as good or better by Quality Assurance Team.	CI Report: assessment of need – 68% were assessed as good or better.				Quality Assurance Team	Respected Included 1-8, 12-13, 18, 25, 30
Increase in % of Child Risk Assessments rated as good or better by Quality Assurance Team.	CI Report 2017: 65% assessed as good or better.				Quality Assurance Team	

Aim We will protect children from child sexual exploitation and harm online.						
Actions We will work in partnership to educate children, young people and their families regarding online safety and the risks of child sexual exploitation. We will work in partnership to raise awareness of CSE within our communities. Carry out analysis on CSE crimes in Moray. Ensure up to date information and advice will be accessible on the Moray Council website.						
Improvement Measures	Baseline	Yr 1	Yr 2	Yr 3	Lead	Wellbeing Indicator/ UNCRC
Increased awareness of CSE in communities through providing up to date information on website.					Child Protection Committee	Safe Nurtured 17-19, 28-29, 34-37, 40
Number of online safety presentations given by Police Scotland School Liaison Officers.	2014/15 94 inputs 2015/16 74 inputs 2016/17 68 inputs to date (06/03/2017)				Police Scotland	

26. Appendix A: Glossary of Terms

Acceptable Behaviour Contracts: In relation to early intervention, a contract between the early intervention worker and the child which sets out agreed parameters for the child to comply with.

Active Schools: Initiative is a team in Moray whose key objective is to increase physical activity and volunteering in local communities.

Additional Support Needs (ASN): A child or young person is said to have Additional Support Needs if they need more, or different support, to what is normally provided in schools or pre-schools to children of the same age. It applies to children and young people who have long-term physical or learning difficulty or disability, but may also include needs arising from emotional or behavioural difficulties, illness or long-term conditions, young carers and Looked After Children.

Adult Services: The Health and Social Care Partnership and Third Sector organisations deliver high quality person centred care and support to enhance adults' independence and wellbeing in their own community. This can be in relation to criminal justice, learning disabilities, mental health, substance misuse, physical disabilities, sensory impairment, older people and dementia.

ASSET assessment tool: An assessment process is designed to find out the risk and protective factors playing a part in a young person's offending.

Associated School Group (ASG): Schools work in a group format, based on a Secondary school and its associated Primary schools. This is known as an Associated School Group.

Audit: An internal or external formal review and inspection of a service or organisation's records.

Autism Spectrum Disorder (ASD): Autism is a lifelong developmental disability that affects how people perceive the world and interact with others. It is a spectrum condition with three key areas of difficulty: Social Communication, Social Interaction and Social Imagination.

Building the Ambition: A document which provides national practice guidance to support staff in providing high quality early learning and childcare.

Book Bug: Is a Scotland wide project that gives four free books to children from birth to Primary 1. There are also free Book Bug sessions in libraries with songs, stories and rhymes.

The Care Inspectorate: The body which regulates and inspects care services in Scotland to make sure they meet agreed national standards. They also jointly inspect with other regulators to check how well different organisations in local areas work to support adults and children.

Care leavers: Young people aged 25 or under, who have been looked after by a local authority for at least 13 weeks since the age of 14; and who were looked after by the local authority on their school-leaving age, or after that date.

Child Protection Register (CPR): Every area in Scotland has a Child Protection Register, which is a list, (kept by the Social Work Department), of children who may be at risk of future harm.

Child Poverty: A child is considered to be living in poverty if they live in a household with less than 60% of the average household income. Contributing causes to child poverty are low wages, unemployment, and inadequate social security benefits. The impact of growing up in poverty means children may live in unheated houses, go hungry, face health difficulties, struggle to reach their potential at school, or be unable to join in activities with friends.

Child Sexual Exploitation (CSE): A specific type of sexual abuse where children and young people in exploitative situations and relationships are groomed and given something such as gifts, money or affection as a result of involvement in sexual activities.

Children's Hearings System: Scotland's unique care and justice system for children and young people which aims to ensure their safety and wellbeing. Decisions are made by a laypersons tribunal called the Children's Panel, who agree whether legal measures are required for the child's care and protection (for example a Compulsory Supervision Order).

Children’s Reporter: The Children’s Reporter’s primary function is to receive referrals for children and young people who are believed to require compulsory measures of supervision for their welfare and protection. The Reporter investigates referrals and decides whether a child or young person should be referred to a Children’s Hearing.

Children’s Rights: These are basic and fundamental freedoms and entitlements that every child should have. These rights are listed in the UN Convention on the Rights of the Child 1989. Almost every country in the world has signed up to and agreed to protect these rights.

Childsmile: A national programme to improve the oral health of children in Scotland and reduce inequalities in dental health and access to dental services

Chronologies: A chronology is a document reflecting significant positive or negative events impacting on a child or young person’s life, reflected in date order. It is used to aid understanding of a child’s experiences, and to analyse patterns in family circumstances which impact on a child’s wellbeing as part of wider assessment. Chronologies may be single service or multi-agency using information shared by Health, Social Work, Education, Police and partner agencies.

Commissioning: Is a process that public sector organisations use to plan, procure, deliver and evaluate services for local residents.

Community Safety Partnership (CSP): A statutory partnership of organisations who work together to create strategies and practical interventions to reduce crime and disorder in their local area.

Compulsory Supervision Order: A legal order which means that the local authority (called ‘the implementation authority’) is responsible for providing support to the young person. It can contain measures that say where the young person must live, or other conditions which must be followed, for example around contact arrangements between a child and their family.

Consultation: The process of seeking views and feedback from the general public, service-users, practitioners or agencies on a specific matter (such as service development, law or policy).

Corporate Parenting: The role and responsibilities undertaken by public bodies in relation to promoting outcomes for children and young people who are Looked After.

Curriculum for Excellence (CfE): Is the current education model in Scotland that is transforming all aspects of education. It has been developed over a number of years in partnership with teachers, parents and the wider education and business community.

Diversion: In the event the Procurator Fiscal believes that formal proceedings may not be necessary they can ‘divert’ a case for Social Work or other intervention.

Early Learning and Childcare Centre (ELCC): Education and care for pre-school children delivered in caring and nurturing settings. This includes nurseries, nursery classes in schools, playgroups, or child-minders. These may be provided by the local authority or partners in the private and Third Sector.

The Early Years Collaborative: Is a national initiative bringing together practitioners from all services working with children 0-8 years and their families.

Educational Psychologist (EP): A professional who helps children or young people who are experiencing problems that hinder their successful learning and participation in school and other activities. These problems can include a range of emotional and social problems or learning difficulties.

Elected Members: Also known as Local Councillors, together elected members represent the people in their local community jurisdiction. Councillors are directly voted in to represent the people, and therefore have to consider not just the interests of their local electorate, but those throughout the whole area to create a harmonious local environment. Elected members provide a key role in support, scrutiny and approval of policy, strategy, funding and service decisions by local authorities.

Engagement: The process of developing and sustaining a working relationship between one or more public, private or Third Sector body and one or more community (geographic or interest) group, to help them both to understand and act on relevant needs or issues.

English for Speaker of Other Languages (ESOL):

Classes provided to help improve English skills and public speaking abilities. Classes include beginner, intermediate, and advanced levels that address educational needs along with supplementary cross-cultural programs that enhance communication awareness among diverse population.

European Computer Driving Licence (ECDL): A computer literacy certification programme provided by the ECDL Foundation, a non-profit organisation.

Foster Care: Offers children and young people a safe, secure and nurturing place to live when their birth family is unable to care for them. Children are placed within family homes in the community on an emergency, short-term or long-term basis.

Getting it Right for Every Child: is the Scottish Government's approach to making sure that all children and young people get the help they need when they need it.

There are eight wellbeing indicators, which are: safe; healthy; achieving; nurtured; active; respected; responsible; and included. These provide an agreed way of measuring what a child needs to reach their potential.

Hand Held record: A portable health care record specifically designed for Gypsies/Travellers, to improve their access to health care, particularly when they are travelling.

Individualised Educational Plan (IEP): A planning and monitoring tool used by many schools in Scotland for children with additional support needs.

Interagency Referral Discussion (IRD): The formal process in which professionals share information about a child or young person for whom they are concerned and determine if a child may be in need of protection or in need of other support and plan what will be done in order to assess or investigate actual or potential harm to the child.

Joint Strategic Needs Assessment (JSNA): Looks at the current and future health and care needs of local populations to inform and guide this planning and commissioning (buying) of health, well-being and social care services within a local authority area.

Kinship Care: The care of children by relatives or close family friends in circumstances where children are unable to remain with their birth parents. Kinship Carers must be assessed and approved by the local authority.

Looked After Children: Children and young people who are in the care (sometimes referred to as care experienced) of the local authority. Looked After Children and young people may live with their parents and be subject to compulsory measures of supervision (looked after at home) or be looked after away from home (for example in foster or kinship care, residential childcare or residential educational establishments).

Lead Professional: Coordinates the drawing up and review of a Child's Plan where one is in place, working closely with the Named Person. In some cases the Named Person will also act as the Lead Professional.

Moray Child Protection Committee (MCPC): brings together all the organisations involved in protecting children in the area. Their purpose is to make sure local services work together to protect children from abuse and keep them safe.

Moray Community Learning and Development (Moray CLD): This group brings together agencies involved in the delivery of Community Learning and Community Development across areas of Moray with the purpose of improving learning and development opportunities in local communities.

Moray Community Planning Partnership (Moray CPP): The local community planning partnership for Moray, comprising key representatives from agencies and organisations in the public, community, voluntary and private sector. The partnership works together to plan and deliver services in Moray. Local authorities and their community planning partners have been given the autonomy to use their combined resources to accelerate progress in tackling poverty and deprivation in local communities.

Outcomes: How we want things to turn out, and what we want to achieve through our actions. These might be strategic outcomes, or outcomes for an individual child or young person.

Planning for Real: A nationally recognised model for community planning based on interactive three dimensional technologies. The process allows residents to register their views on a range of issues, to work together to identify priorities, and in partnership with local agencies, develop an action plan for change.

Peep: is a pre-school intervention programme which aims to increase the educational achievement (especially literacy skills) of children from infancy to 5 years by forming partnerships with parents and carers by recognising and supporting their contribution to children's learning during the formative pre-school years.

Pre-birth to three: A document which provides national practice guidance to support students and staff working with and on behalf of our youngest children and their families.

Resilience: The ability to of a person to recover from, or adjust easily to adverse circumstances (positive coping ability.)

Rights Respecting School: An initiative run by UNICEF UK, which encourages schools to place the UN Convention on the Rights of the Child at the heart of its ethos and curriculum.

Scottish Index of Multiple Deprivation (SIMD): identifies small areas across Scotland where the population experiences deprivation across multiple domains (such as poverty, poor housing conditions, a lack of skills or good education, poor public transport, life expectancy).

Staged Intervention: A process which is used to identify, assess and support the learning needs of children and young people.

Statutory Duty: A legal obligation or requirement that a company, government organisation, or members of a particular profession must comply with and provide.

Substance Misuse: Use of substances (including alcohol, illicit drugs and prescribed medication) in a manner which is harmful to themselves or others.

Third Sector Organisations: Service providers which are not public authorities (i.e. voluntary, charitable or community based organisations).

Vulnerable Person Database: Police Scotland application which records details of all significant incidents relating to vulnerable persons in the categories of Domestic Abuse, Child Concerns and Vulnerable Adults.

Young carer: A child or young person aged 18 or under who helps look after a relative who has a disability, illness, mental health condition, or a drug or alcohol problem.

27. Appendix B: Glossary of Service Providers

Aberlour Child Care Trust: One of Scotland's main children's charities with services throughout Scotland.

Action for Children: A UK children's charity (formerly National Children's Home) committed to helping vulnerable and neglected children and young people, and their families, throughout the UK.

Avenue Confidential: A provider of Mediation, Counselling and Child Contact in Northeast Scotland.

Child and adolescent mental health services (CAMHS): A specialist NHS services, which provide assessment and treatment for children and young people with emotional, behavioural or mental health difficulties.

Children's Hospice Association Scotland (CHAS): A registered charity that provides the country's only hospice services for children and young people with life-shortening conditions.

Highland & Islands Transport Partnership (HITRANS): The partnership between Transport Scotland, private sector transport operators, local authorities and government.

Moray Women's Aid (MWA): The largest provider of support services to women and children experiencing Domestic Abuse/Violence throughout rural Moray.

NHS Grampian Substance Misuse Service: This service is available to patients that have been referred by their GP. The Substance Misuse Service offers education, care and treatment for individuals experiencing problems and difficulties related to illicit drug and or alcohol use.

Quarriers: One of Scotland's largest social care charities providing practical care and support for vulnerable children, adults and families who face extremely challenging circumstances.

Rowan Centre: A support service for all agencies working with children and young people around mental health issues and a multi-disciplinary assessment and treatment services for children and young people, their families and carers.

Safeguarding Communities and Reducing Offending (SACRO): Sacro is a national community justice voluntary organisation working across Scotland to make communities safer by reducing conflict and offending.

Who Cares? Scotland: A national voluntary organisation, working with care experienced young people and care leavers across Scotland providing Advocacy and Corporate Services.

28. Appendix C: References

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29. Appendix D: Case Studies

Case Study 1 represents universal services

Jane and Peter are delighted to find out they are expecting a baby. They are cared for by a midwife at their local GP surgery. Their baby boy, Simon, is born after an uneventful pregnancy at Dr Grays hospital and they are supported by their midwife at home after his birth and then by their Health Visitor – Simon’s Named Person, who is also a part of the team at the GP practice. Jane and Simon are also seen by her GP, and they receive medical services they require in their local community. When Simon is a few months old, he and Jane start to attend the mother and toddler group in their local church hall. When he is 3 years old he is enrolled in the pre-school nursery class in the local primary school. The Health Visitor continues to be available to the family for help and advice and as Simon’s Named Person is the initial point of contact for Jane or Peter if they have any concerns or worries.

When Simon is 5 years old he attends the local primary school as a full time pupil; the Head Teacher of the school now acts as his Named Person so Jane and Peter still have an identified point of contact if they are worried about Simon in any way. Simon can also speak to the school staff about any concerns he may have. When Simon is 11, he moves to the secondary school in the nearby town and support and advice continue to be available to him and his parents, this time with his guidance teacher carrying out the Named Person role. Throughout all his time at school the school nursing service is also available to offer any support required around Simon’s health. Simon attends the local community centre youth group and the local Scouting association group

Case Study 2 represents universal services with support

Faye is a 27 month old girl who is attending her scheduled review as part of the NHS Scotland wide Child Health Screening programme. Louise has noticed that Faye is not saying any words yet and the Health Visitor carrying out the review agrees that her speech development seems to be slightly delayed. Faye is referred to the local Speech and Language Therapy services, where her mum receives specific guidance and support about how to encourage her language development and after 8 weeks of following this advice, a further review shows that Faye’s speech development is now age appropriate.

Case Study 3 represents universal services with support

Wayne is a 13 year old boy in his 2nd year at the local Secondary School. His behaviour in some classes is difficult at times as he finds concentrating on teaching from the front challenging. Following assessment, a classroom assistant is allocated to support him in some classes and he is encouraged to sit at the front of classes. After a term of this support an improvement in his behaviour is noted and Wayne is coping better in class, making good progress across the curriculum.

Case Study 4 represents universal services with support

Stef and Jamie are 18 month old twins. Their mother, Sue has separated from their father, and is known to have had substance misuse problems in the past. Sue now receives Methadone by prescription from NHS Grampian Substance Misuse service. She finds it hard to keep to routines, and there are concerns about how much contact she still has with her partner, who also has substance misuse problems. Before the twins were born a plan was developed with Health, children’s Social Work service and Adult Substance Misuse Service and Sue, to offer support to Sue, and to monitor the progress of the twins. The twins names are currently on the Child Protection Register and ongoing work, along with regular reviews, is being carried out with the family to ensure their safety and wellbeing.

Case Study 5 represents targeted services

Niall is 14; his school attendance level is not good and he has been taken home by police officers on a couple of occasions recently having been found drinking with his friends in a local park. The police officers, through national systems, have informed Niall's guidance teacher about this and a meeting has been held with Niall, his parents, a police officer, guidance teacher, and the school nurse. A plan has been developed which will give Niall an amended curriculum which will allow him to engage more effectively with education and he will attend a youth group at the weekends to help him make changes to his alcohol use.

Case Study 6 represents targeted services

Jill is 10 and has a rare chromosomal abnormality which means that her life expectancy is limited. She is a wheelchair user and needs help with all aspects of her personal care. She is fed by tube, and her hearing is poor, but is fully engaging with education and has friends at the local school she attends. She is well supported by the Team Around the Child in Moray and has carers visiting at home to support her parents. Children's Hospice Association Scotland (CHAS) nurses also support the family and Jill attends respite at Rachel House in central Scotland twice per year. At the regular planning meetings, which are held to ensure that Jill's wellbeing is addressed as fully as possible and all involved are communicating, an identified action is for the CHAS nurse to start developing an Anticipatory Care Plan with Jill and her parents which will support them to have the type of end of life care they wish. This will inform all concerned about managing this situation effectively and sensitively when this is required.

