North Ayrshire
Early Intervention & Prevention
Strategy 2013/17: Early Years
# Early Intervention & Prevention Strategy 2013/17: Early Years

## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page No</th>
</tr>
</thead>
<tbody>
<tr>
<td>i.  Executive Summary</td>
<td>4</td>
</tr>
<tr>
<td>1.  Introduction</td>
<td>7</td>
</tr>
<tr>
<td>2.  The Case for Early Intervention and Prevention</td>
<td>10</td>
</tr>
<tr>
<td>3.  Our Challenges</td>
<td>18</td>
</tr>
<tr>
<td>Causal Factors and Negative Outcomes</td>
<td></td>
</tr>
<tr>
<td>Mapping of Services</td>
<td></td>
</tr>
<tr>
<td>4.  Our Outcomes</td>
<td>22</td>
</tr>
<tr>
<td>Early Years Collaborative</td>
<td></td>
</tr>
<tr>
<td>Matching needs to services</td>
<td></td>
</tr>
<tr>
<td>5.  Our Plans</td>
<td>27</td>
</tr>
<tr>
<td>Early Intervention and Prevention Programme</td>
<td></td>
</tr>
<tr>
<td>6.  Our Spending</td>
<td>30</td>
</tr>
<tr>
<td>Preventative Spending</td>
<td></td>
</tr>
<tr>
<td>Voluntary Sector</td>
<td></td>
</tr>
<tr>
<td>Early Years Change Fund</td>
<td></td>
</tr>
<tr>
<td>Risks and Issues</td>
<td></td>
</tr>
<tr>
<td>7.  Our Action Plan</td>
<td>35</td>
</tr>
<tr>
<td>Future Developments</td>
<td></td>
</tr>
<tr>
<td>8.  Our Monitoring</td>
<td>37</td>
</tr>
</tbody>
</table>

**Appendix**

- Appendix 1 – Outcome Map 1                                           | 38      |
- Appendix 2 – Outcome Map 2                                             | 39      |
- Appendix 3 – Outcome Map 3                                             | 40      |
- Appendix 4 – Outcome Map 4                                             | 41      |
- Appendix 5 – Early Intervention and Prevention Developments           | 43      |
- Appendix 6 – Early Years: Early Intervention and Prevention Action Plan 2013/14 | 55      |

June 2013
Executive Summary

1.1 We are determined to improve the life chances of our children and young people and to achieve this by shifting our resources into early intervention and prevention. We are committed to taking action which will ensure that our children are nurtured and can access the opportunities which will help them succeed.

1.2 The Early Intervention and Prevention Strategy 2013/17 sets out North Ayrshire Community Planning Partnership's (CPP's) ambition to improve outcomes for vulnerable children from 0 to 8 years and how this will be achieved through a range of initiatives designed to encourage warm, responsive parenting, healthy attachment and resilience. The strategic plans for early intervention activity with older children and young people will be addressed in a separate strategy at a later stage.

1.3 The Strategy has been produced for 2013/17 to cover the same period as the Single Outcome Agreement (SOA) 2013/17 and links to the outcomes and targets within it. It will sit below the SOA and also links to the Integrated Children's Services Plan.

1.4 The case for preventative action is made in the Christie Commission’s report which highlights the social and economic inequalities that persist in Scotland and the need to reduce the demand on the public services currently responding to negative social outcomes.

Our Vision and Outcomes

1.5 The CPP’s vision of a better childhood is developed to focus on outcomes:

- Parents and carers encourage and support their children
- Children are safe and cared for in a nurturing home
- Children are resilient and their life chances are improved
- Children can access the opportunities to help them succeed

1.6 A mapping of services within the strategy illustrates what is in place in North Ayrshire for children at highest risk of harm, at medium risk and for all children and families, from pre-birth to 8 years. The various factors which can lead to harm and chaotic families, such as domestic abuse, alcohol and drug misuse and poverty, and the negative outcomes which can result, are included within the strategy. These outcomes include educational failure, poor health and criminal behaviour.

1.7 The strategy incorporates the Early Years Collaborative’s work and its aims to improve outcomes and reduce inequalities for all babies, children, mothers, fathers and families across Scotland.

Our Plans for the Future

1.8 The research and evidence on the effectiveness of intervention in the early years is contained within the strategy together with the proposals now in place to deliver this intervention and preventative activity in North Ayrshire. This includes support through parenting programmes, enhancing individual parenting capacity and building community capacity, providing integrated early years centres, delivering direct support to vulnerable families in their own homes, intensive support by family nurses to vulnerable young mothers and improving resilience in children.
1. **Introduction**

1.9 There are details of the preventative spending planned and the use of the Early Years Change Fund. Identifying the extent of current spending and where savings will occur or future costs avoided as a result of this preventative activity is a significant challenge to be addressed over the next few years. There is a considerable time lag in realising these savings which makes this task even more difficult.

1.10 An action plan and indicators have been developed to allow monitoring of the progress in implementing our proposals. This strategy therefore describes North Ayrshire CPP’s commitment and determination to improve the outcomes for our children.

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**Preventative Spending**

1.9 There are details of the preventative spending planned and the use of the Early Years Change Fund. Identifying the extent of current spending and where savings will occur or future costs avoided as a result of this preventative activity is a significant challenge to be addressed over the next few years. There is a considerable time lag in realising these savings which makes this task even more difficult.

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**Intervention in the Early Years**

1.1 The purpose of the strategy is to set out the North Ayrshire CPP’s proposals for early intervention and prevention in the early years. It describes our vision and what we want to achieve over the next four years in improving outcomes for children.

1.2 The strategy indicates what action is planned through the projects within the Early Intervention and Prevention programme and the links to the Early Years Collaborative. It includes the major financial and other resource commitments which have been made and how the programme will be funded and evaluated. It also includes details of further work to develop our approach to intervention in the future.

1.3 The strategy focuses on intervention and prevention in the early years, primarily on the period pre-birth up to 8 years old. The involvement of parents and carers is critical in these early years. They are key to providing the nurture and support that allow young children to thrive and are therefore also essential to this strategy on the early years.
Intervention with Young People, Adults and Older People

1.4 There is a significant amount of other early intervention and prevention activity currently being carried out with young people, adults and older people. This includes youth diversion schemes to prevent young people from becoming involved in the criminal justice system and prevention initiatives for older people to improve fitness and reduce falls. This is not included in this strategy but will be developed in the future, linking to other strategic developments for these age groups, to provide wider strategic direction on this theme.

What is Early Intervention and Prevention?

1.5 Early intervention and prevention can be defined as: “Actions which prevent problems and ease future demand on services by intervening early, thereby delivering better outcomes and value for money”.

Early Intervention

1.6 Early intervention can be defined as getting in at the first signs of trouble. For the early years, early intervention has been defined as: “those programmes which ensure that babies, children, and young people build the social and emotional bedrock to fulfil their potential and reduce dysfunction. This is a prerequisite to break the intergenerational cycle of dysfunction and underachievement.” Waiting for a child to reach school age before any problems are identified or addressed is simply too late, as by that stage most of the damage is already done.

Prevention

1.7 Prevention is different in that it starts before the problem begins, stopping it happening in the first place. An example of a prevention-based programme is the Family Nurse Partnership. It involves working with teenage, first time mothers preventing risks to their child’s development before it is born and in the first two years of life. This is targeted prevention, preventing a poor outcome for a high risk group.

1.8 The CPP’s Early Intervention and Prevention Programme has been developed to improve the outcomes for vulnerable children from pre-birth to eight years in North Ayrshire. It is designed to be both preventative and to provide early intervention.

Vulnerable Children

1.9 Vulnerable children can be defined as children who are at risk of, or who are already experiencing, social and emotional problems. Vulnerability may be linked to disadvantage and poverty. Vulnerable children may include those who are affected by parental drug and alcohol problems and by parental mental or other health problems. Children who have multiple health problems, with the developmental delays that this can cause, can be vulnerable. This can also include children who have experienced domestic violence and children of young mothers, particularly those without family support. Criminality is a factor and children with parents in prison are likely to be vulnerable.
2. The Case for Early Intervention and Prevention

2.1 The Christie Commission report on the Future Delivery of Public Services highlighted the need to take preventative action to reduce the inequalities and disadvantage being experienced in communities across Scotland. The report noted that the measures of social and economic inequality have remained unchanged despite significant growth in public service expenditure in recent times.

2.2 An estimated 40% of all spending on public services, however, is on interventions that could have been avoided by a preventative approach. It concluded that a radical change is needed to reduce demand and lessen inequality. As a result the Scottish Government has set out as its first of four Pillars of Public Service Reform - “a decisive shift towards prevention”.

Early Years Framework

2.3 The Scottish Government’s Early Years Framework describes the transformational change needed to give all children the best start in life. It focuses on the period between pregnancy and 3 years which is increasingly being seen as critical in shaping children’s life chances. This is based on evidence of brain formation, communication and language development, and the impact of relationships formed during this period on mental health and wellbeing. The early years are therefore a critical period of opportunity to change the poor outcomes being experienced by many children.

2.4 The Early Years Taskforce has been established to develop the strategic direction for the early years change programme and co-ordinate policy across Government and the wider public sector. The Early Years Framework is the basis of the Taskforce’s case for action.

2.5 Getting it right for every child is the national practice model for improving outcomes for all children and young people. Its key principles include:

• Putting the child at the centre
• Building on strengths and promoting resilience
• Providing additional help that is appropriate, proportionate and timely
• Ensuring services work collaboratively and share information, where appropriate.

2.6 Curriculum for Excellence is Scotland’s vision for the education of all children. It aims to raise standards, improve knowledge and develop skills. The aim of all early years centres and of primary
schools is to ensure that every child should experience a broad education that develops skills for
learning and for life. They work with a real focus on literacy and numeracy and promote an active
and healthy lifestyle to children and their parents and carers.

2.7 The consultation on the Children and Young People Bill in 2012 indicated that “a more rapid
shift to the early years and early intervention is essential if we are to improve the outcomes for
the most vulnerable children and young people”. It also contains the case surrounding the need for
early intervention.

2.8 It also includes a clear commitment to recognising, respecting and promoting children’s rights in
Scotland. This will be done through developing and implementing policy which is consistent with

2.9 Focusing on early intervention and prevention is one of the three key principles in the Scottish
Government’s Child Poverty Strategy for Scotland. The Strategy recognises that Scotland’s long
standing and entrenched problems of poverty, poor health, poor educational attainment,
unemployment and levels of substance misuse and crime are passed from generation to

2.10 The Scottish Government has taken a long-term and integrated policy approach with its three
social policy frameworks which are aimed at supporting the early years (The Early Years
Framework), tackling poverty (Achieving Our Potential) and health inequalities (Equally Well).
These frameworks have been developed jointly with key partners, and are aimed at tackling the
long term drivers of deprivation.

2.11 The principles of early intervention and prevention are at the heart of these frameworks, and
the Government’s approach to tackling child poverty. The three social policy frameworks recognise
that children’s start in life, cycles of poverty and poor health are interlinked. These are complex
problems, involving complex solutions - often involving both cultural and structural change - and
which require a long-term approach.

2.12 The National Parenting Strategy acknowledges the factors that influence a child’s outcomes –
poverty, where they live, their housing, the local community, their friendships and the resources
that their parents have or can access. It also recognises that deeply engrained problems of,
for example, drug and alcohol dependency, and offending behaviour, can stem from poor experiences in the early years. The strategy promotes effective parenting to build more positive futures for children and their families which will have long-term benefits for communities and Scotland as a whole.

2.13 Professor Susan Deacon’s report “Joining the Dots: A Better Start for Scotland’s Children” proposed a “new generation” of children and family centres across Scotland and that there should be a “common sense consensus” on how important children’s early years are to an individual, society and the economy. She recommended that there should be a renewed focus on improving children’s early years and an emphasis on the importance of effective parenting. The report recognised the importance of intervening more quickly when a child is at severe risk of abuse and neglect during the early years of life.

2.14 Early intervention in cases of neglect can allow a child to recover developmentally, and reduces the impact of the neglect on their future potential. The ability of a vulnerable child to benefit from interventions is greater in early life.

2.15 Children and young people who grow up in poverty are more likely to have low self-esteem, play truant, leave home earlier, leave school earlier with fewer qualifications and be economically inactive as adults.

2.16 The Single Outcome Agreement 2013/17 makes clear commitments to build on existing good practice in developing further early intervention and prevention activity. It contains early intervention as one of its overarching themes.

2.17 The Integrated Children’s Services Plan 2010/15 sets early intervention at its heart. It is also central to progress which is being made in implementing Getting It Right for Every Child (GIRFEC), forging new ground in developing Partnership Forums, fostering good practice and improving partnership working.

2.18 Building on the strengths of universal services is fundamental as they have a key role to play in intervening early at various stages of a child or young person’s life. The principle of ‘progressive universalism’ aims to ensure universal services (including maternity, child health, social services and education) support all vulnerable children and that they receive more intensive
help to meet their additional needs.

2.19 We are developing our response in universal services around the role of the “named person” and the “lead professional” in terms of how we respond to children in need.

Growing Up in Scotland

2.20 It is clear that disadvantages experienced from birth can harm the life chances of children, particularly in the earliest years. By the time they reach three, children from difficult and troubled home backgrounds are already behind other children of their age in terms of their cognitive development and this gap remains at 5 years.

2.21 In the last few years there has been growing evidence that children who experience poor unstable environments often face greater challenges in later life as a result. It is also increasingly evident that it is in the first years of life that inequalities in health, education and employment opportunities are passed from one generation to another.

2.22 The brains of young children grow very quickly in the first two years of life. If their experiences are supportive and consistent, the child learns that the world is a safe, nurturing place with opportunities to learn and grow. If this is not the case, however, the child experiences inconsistent responses to its signals for attention and the brain develops in a different way which affects learning, memory and judgement.

Millennium Cohort Study

2.23 A child’s experiences in the early years of life can have a life-long impact on their relationships, educational attainment and employability. Recent analysis of the Millennium Cohort study data follows the lives of 19,000 babies born in the UK in 2000/01. It has identified the factors which will increase the risk that children of 5 years and under will experience difficulties with their social, emotional and cognitive development. These factors include:

• Being of low socio-economic status
• Living in a low income or workless household
• Living in rented or social housing or in an area of deprivation
• Living with mothers who have specific issues, including mental health problems, alcohol misuse, mothers who smoked during pregnancy and/or mothers who themselves were living away from home before the age of 17
• Living with a lone parent or an unemployed lone parent; co-habiting parents and living with a stepfather

Effective Provision of Pre-school Education

2.24 The evidence is unequivocal that early years education enhances children’s cognitive, social and behavioural development. This effect is long lasting and greatest for the most vulnerable children. These effects are largest for children with the longest duration of attendance and for children in higher quality provision.

2.25 Ensuring that vulnerable children have access to regular, high quality, early years provision, available as early as possible after 2 years old, is the best value foundation on which all other interventions should be built.

2.26 As well as promoting general development, early years provision has a key role in actively building children’s social and emotional skills together with their parents. This is particularly important for more vulnerable children who can already by school entry be significantly disadvantaged by comparison with their peers.

2.27 The Effective Provision of Pre-school Education (EPPE) project focused on the effectiveness of early years education. It was a study of 3,000 children and findings indicate the positive impact of early years education in offering disadvantaged children a better start to primary school. This positive impact on a child’s progress is over and above important family influences.
3. **Our Challenges**

3.1 It is estimated that one fifth of children in Scotland are growing up in relative poverty and their future outcomes are heavily influenced by their parents’ economic circumstances.

3.2 North Ayrshire has the 4th highest level of child poverty of all local authority areas in Scotland, with 25% of children living in poverty. It is ranked 5th highest in Scotland in the Scottish Index of Multiple Deprivation (2012) in terms of the percentage of datazones that fall within the 15% most deprived areas in Scotland. The number of these datazones increased slightly by three between 2009 and 2012. The severity of deprivation within deprived areas also shows signs of increasing. There were twice as many datazones in the 5% to 10% most deprived in 2012 as there were in 2004.

3.3 The number of children looked after in North Ayrshire is increasing each year, from 473 in 2007 to 582 in 2012. There are more looked after children living at home or in kinship care than in most other local authority areas and high levels of kinship care placements (30% compared to the Scottish average of 24% in 2011). This involves Social Services staff in managing greater risk in the community than colleagues in other areas.

3.4 The average number of children on the Child Protection Register has increased from 46.75 in 2009/10 to 65.58 in 2011/12. This reflects the increasing number of referrals and investigations and an improved approach to thresholds of risk. North Ayrshire had the highest number of children referred to the Reporter in Scotland per 1,000 of population under 16 in 2011/12.

3.5 The educational attainment of looked after children and young people has been improving in recent years. The percentage of all 16-17 year olds ceasing to be looked after at home or away attaining at least one SCQF level 3 in any subject increased from 42% in 2006/07 to 78% in 2009/10. The average tariff score in S4 for looked after young people rose from 89 in 2010/11 to 95 in 2011/12. This is still significantly lower, however, than the overall average tariff score of 179 in the same period.

3.6 North Ayrshire was the sixth highest area in Scotland in terms of the proportion of domestic abuse incidents recorded by the police per 100,000 population in 2011/12. This was 1,404, compared to the Scottish average of 1,139. During 2011/12, North Ayrshire Council received 781 domestic abuse referrals from Strathclyde Police. A total of 1347 children were involved in these incidents. This is a 2.7% decrease from 2010/11.

3.7 The factors which affect children’s life chances are shown in Diagram 1.

Diagram 1

**Causal Factors & Risks of Harm in Early Years: 0 – 5 years**

- Educational Issues
- Parenting Skills
- Environment
- Intergenerational Effects
- Parental Mental Health
- Domestic Abuse
- Smoking
- Obesity & Nutrition
- Congenital Disorders
- Health
3.8 The negative outcomes which can result from the causal factors in Diagram 1 are shown in Diagram 2.

Diagram 2

Negative Outcomes in the Early Years

3.9 The mapping of services in North Ayrshire for the children at highest risk of harm to those children at very little risk of harm in universal services is shown in Diagram 3.

Diagram 3: Mapping of Services: Pre-birth to 8 years

3.10 Further work is needed in identifying the costs of these services. This is important in obtaining a wider understanding of the total spending across all services on children.
4. Our Outcomes

Vision: A Better Childhood

4.1 Our ambition for children in North Ayrshire is for a Better Childhood where they are safe, nurtured, happy, healthy and have opportunities to fulfil their potential. Children’s early years are a vital period which significantly influences their future health, wellbeing and success in life. We want them to have the best possible early experiences where they grow up in a caring and nurturing environment that encourages them to be all they can be.

Outcomes

4.2 The national, single outcome agreement (SOA), integrated children’s services plan (ICSP) and early intervention outcomes are:

National Outcomes

• Our young people are successful learners, confident individuals, effective contributors, and responsible citizens
• We have improved the life chances for children, young people and families at risk
• Our children have the best start in life and are ready to succeed

SOA Outcome

• Children’s health and wellbeing is improved by breaking the cycle of poverty, inequality and poor outcomes

ICSP Outcomes

• Children and young people are nurtured and parents are supported
• Children and young people are safe, healthy, active, aspiring and achieving
• The life chances of vulnerable children and young people are improved

Early Intervention Outcomes

• Parents and carers encourage and support their children
• Children are safe and cared for in a nurturing home
• Children are resilient and their life chances are improved
• Children can access the opportunities to help them succeed

Outcome Mapping

Outcomes maps are attached at Appendices 1, 2 3 and 4 which show how the projects and services contained within this strategy contribute to these outcomes.
Early Years Collaborative

4.3 In 2012 the Scottish Government launched the Early Years Collaborative in recognition that:

- By the age of 2, the brain is 80% of adult size.
- Vocabulary at age 5 has been found to be the best predictor of whether children who experienced social deprivation in childhood escape poverty in later adult life. Up to 50% of vocabulary is acquired by age 3.
- Boys assessed by nurses at age 3 who were assessed to be “at risk” had 2.5 times as many criminal convictions at age 21 than the group deemed not to be at risk.

4.4 The Early Years Collaborative (EYC) is a multi-agency Quality Improvement Programme to be led by Community Planning Partnerships. Its aim is to create transformational change in the early years.

4.5 There is a lot of evidence about successful early intervention approaches but there is inconsistency across Scotland in how this is implemented. The Collaborative aims to close this gap between what we know works and what we do. It has created structures where partners can learn from each other and recognised experts. The Early Years Collaborative is focussed around the following 5 workstreams:

- Workstream 1: Conception to Year 1
- Workstream 2: 1 Year to 30 Months
- Workstream 3: 30 Months to starting primary school
- Workstream 4: Leadership

4.6 The Early Years Collaborative’s ambition is:
To make Scotland the best place in the world to grow up in by improving outcomes, and reducing inequalities, for all babies, children, mothers, fathers and families across Scotland to ensure that all children have the best start in life and are ready to succeed.

Stretch Aims

4.7 There are three “stretch aims” which sit below this ambition to give a focus for this work. These are:

1. To ensure that women experience positive pregnancies which result in the birth of more healthy babies as evidenced by a reduction of 15% in the rates of still births (from 4.9 per 1,000 births in 2010 to 4.3 per 1,000 births in 2015) and infant mortality (from 3.7 per 1,000 live births in 2010 to 3.1 per 1,000 live births in 2015);
2. To ensure that 85% of all children within each CPP have reached all of the expected developmental milestones at the time of the child’s 27-30 month child health review by end 2016; and
3. To ensure that 90% of all children within each CPP have reached all of the expected developmental milestones at the time the child starts primary school by end 2017.

4.8 The overall vision is to achieve transformational change in the early years which will provide a stable, nurturing environment for all of Scotland’s children.

4.9 Test of change are now being taken forward throughout North Ayrshire to improve services as part of the Collaborative’s work.
**Matching Needs to Services**

4.10 Getting a better fit between children who need help and services to help them could make a significant improvement in productivity of public services and outcomes for children. The Dartington Social Research Unit’s work suggests that it is not unusual for over a third of children getting a lot of extra help not to necessarily need that help. Their care may not be doing them much harm but it is probably not to their benefit. This may be due to the process of sifting referrals and an understandable desire for caution which may keep too many children in contact with services for too long.

4.11 The analysis unusually also reveals that a significant proportion of the child population, around 5%, have serious impairments to their health and development that go unreported to services.

4.12 Outcomes could therefore improve significantly by shifting resources from those children getting support who don’t necessarily need it, towards those in need but not getting it. There is an opportunity to save money and achieve better outcomes by better matching needs of children with the services they access.

**5. Our Plans**

5.1 CPP partners have recognised that a step change is needed to achieve the shift towards early intervention and prevention in North Ayrshire. Prior to a Chief Officers Away Day event in August 2011 there was a review of effective interventions being recommended nationally and consultation was carried out on which of these could be further developed in North Ayrshire.

5.2 The main areas for improvement were developed into the projects described below to achieve the desired outcomes shown.

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| Parenting Programmes - to improve the co-ordination and roll out of the Solihull Approach and of parenting programmes consistently across North Ayrshire so that all parents who wish access to a parenting programme can do so in their local area. | This should:  
  - improve individual parents’ capacity to be good parents;  
  - build community capacity for parents to support each other and their children. |
| Integrated Support in Early Years Centres - to provide support and advice from Money Matters, Home Inclusion and Social Services staff in the five Early Years Centres. | This should:  
  - ensure vulnerable families are less isolated and more connected to the wider community;  
  - build parents’ confidence and self-esteem to allow a greater focus on their child and improve attachment |
### Project Outcome

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<tr>
<td><strong>Family Support Service</strong> – to provide a support service for families at risk of becoming chaotic to help with household organisation and to provide children with a more nurturing, stable and supportive home environment.</td>
<td>This should: • provide children with a stable, nurturing home.</td>
</tr>
<tr>
<td><strong>Multi Agency Domestic Abuse Response Team (MADART)</strong> - to respond to domestic violence incidents as soon as they are reported, offering support and services for victims, including children.</td>
<td>This should: • provide a quicker, more proportionate and more co-ordinated response to children experiencing domestic abuse.</td>
</tr>
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<td><strong>Permanent Care for Children</strong> - to speed up the decision-making for children who cannot live with their parents so that they are placed in a permanent new family more quickly.</td>
<td>This should: • ensure that children can form secure attachments to their parents and carers because they are moved between placements less often.</td>
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<tr>
<td><strong>Family Nurse Partnership</strong> - to provide support to vulnerable first time mothers aged under 19 during pregnancy and throughout the first two years of their baby’s life, offering advice on child development, parenting skills, healthy eating and employment opportunities.</td>
<td>This should: • improve young parents’ capacity to be good parents; and • support their babies to grow up in a safe, nurturing environment.</td>
</tr>
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<td><strong>Asset Based Community Development (ABCD)</strong> - to work with people in the Ardrossan Central and Castlepark areas to map community assets for the early years.</td>
<td>This should: • build community capacity for parents to support each other and their children; and • improve children’s health outcomes</td>
</tr>
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<td><strong>Vulnerable Children Support</strong> - to provide home-based practical support to vulnerable families.</td>
<td>This should: • provide children with a stable, nurturing home.</td>
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<td><strong>Capacity Building with Parents</strong> – to increase engagement with parents, to provide easy access to parenting information and advice, and to provide training opportunities to build parents’ capacity to support each other.</td>
<td>This should: • improve individual parents’ capacity to be good parents; • build community capacity for parents to support each other.</td>
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<tr>
<td><strong>Stop Now and Plan (SNAP) approach</strong> - to reduce behavioural problems in primary school children.</td>
<td>This should: • improve children’s resilience and their ability to deal with their emotions.</td>
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5.3 Further details of these developments and the financial commitments made to them are attached at Appendix 5.

5.4 There are several new services developed not included in the programme which will have a significant impact on early intervention. For example, the Assistant Nurse Practitioners are now offering additional home-based support on parenting and on health advice. There is also a Vulnerable Pregnancy Service within Maternity Services which provides additional support and continuity of care to vulnerable pregnant women and their partners. It aims to improve the health and well-being outcomes for the mother and baby at birth, reducing admissions to the neonatal unit, increasing stability, improving the quality of attachment, and reducing the number of babies going into care.
6. Our Spending

Preventative Spending

6.1 Intervening in the early years should over time reduce the need for crisis interventions in later life which are costly to many services such as social services, health, police and criminal justice services. The Early Years Framework refers to creating a “virtuous cycle” whereby increasing savings should support more investment in early years and early intervention which in turn reduces the need for crisis intervention. The Early Intervention and Prevention programme should therefore bring savings to public services in the longer term.

6.2 There is increasing interest in preventive action and preventive spend as a means of improving key social outcomes in the medium to long term. The Scottish Parliament’s Finance Committee Inquiry into Preventative Spend was established “to consider and report on how public spending can best be focussed over the longer term on trying to prevent, rather than deal with, negative social outcomes”. It concluded that considerable and sustained planning and investment will be required over the long term to ensure that the transition to a more preventative approach can be achieved.

6.3 The highest rate of return in education, for example, is derived from investment in pre-birth to 3 years but investment in the UK currently involves far more being spent on tertiary education than on earliest education.

6.4 Key points made in the Committee’s final report include:-

- The amount spent on welfare in Scotland has doubled in the last 10 years but we still have the same re-offending rate for young people, little movement on child poverty, and increased problems with alcohol and drug misuse.

- There is compelling evidence of the benefits of early years intervention at as early a stage as possible, including pre-birth.

- Investing in early years is a route to reducing a series of intractable problems: school failure, health inequalities, alcohol and drug abuse and violence.

- There is very clear evidence of the effectiveness of early intervention, the focus should now be on implementation with a radical step change to the existing approach.

6.5 There is a continuing commitment by CPP partners to funding early intervention and to increasing this funding over time.

Voluntary Sector

6.6 The voluntary sector will continue to be involved in supporting this preventative work. North Ayrshire Women’s Aid, for example, is introducing a Children’s Experiencing Domestic Abuse Recovery (CEDAR) project. Action for Children has been delivering “Roots of Empathy” classes to Primary School children and Barnardos has delivered You First Parenting classes to under 21 year old parents. A Third Sector Early Intervention Fund has been created by the Scottish Government for voluntary sector partners to support this form of activity.

Economic Case for Early Intervention

6.7 In addition to the benefits for children and families from support in the early years, there is international and Scottish evidence to show that significant savings can be made to the public purse from effective early years interventions. Investing in early years intervention from pre-
birth to 5 years led to short term savings of up to £37,400 each year per child in severe cases. In the longer term, a failure to intervene effectively in early childhood can result in a nine-fold increase in direct public costs.

6.8 The medium to longer terms costs are met by different services at various stages in an individual’s life. Local authorities experience the higher proportion of costs between 9-18 years, primarily in social services. In the longer term, the UK Government experience a higher proportion of the cost through the benefits system, although Councils would be expected to experience high social housing costs and adult social services. From 40 years onwards the costs are split between health, local authorities and the UK Government.

6.9 A wide range of economic studies suggest that returns to early investment in children during the pre-birth period and first few months of life, up to the age of eight years old are high, but reduce the later the investment is initiated.

6.10 Graham Allen MP’s report (2011) on ‘Early Intervention: Smart Investment, Massive Savings’ focussed on addressing the financial and economic costs. The report illustrated not only the price of failure to the taxpayer but also the costs to the economy of carrying across the generations underachievement, low skills and poor educational attainment.

**Early Years Change Fund**

6.11 The Early Years Taskforce oversees the Early Years Change Fund and is keen that it operates coherently and consistently across Scotland. It has indicated that the fund is an integral part of its collective response to improving outcomes for children.

6.12 The Early Years Change Fund has been created as a starting point to reconsider the way the total resource for early years services provision is invested. This is with a view to shifting investment upstream and to developing a clear strategy to make anticipatory and preventative approaches that work and that help to reduce the demand for more formal, higher intensity care in the future.

6.13 The Early Years Change Fund is a combination of existing funds currently committed and new funds. The Scottish Government has contributed £50 million to the Fund from 2012/13 to 2015/16.

6.14 An indicative allocation of £1,382,000 was issued in 2012/13 to NHS Ayrshire and Arran in respect of Child Healthy Weight Interventions, Childsmile, Infant Nutrition and Maternity Services, and the demand led budget for Healthy Start, managed centrally by the Health and Social Care Directorate. This includes funding of £1.6 million which has been allocated over three years from 2012 to 2015 to the Family Nurse Partnership’s implementation in Ayrshire.

6.15 Indicative allocations of £984,549 in 2013/14 and £1,396,204 in 2014/15 have been issued for North Ayrshire Council. It is understood that these funds are not new but are a blend of currently allocated and redeployed resources.

6.15 In North Ayrshire the Council has allocated £1.9 million to the Early Intervention and Prevention programme in 2013/14. This increases to £2.1 million in 2014/15 and funding continues into 2015/16. It will be critical that the sustainability of this funding is maintained at the end of this period so that the positive impact of these interventions can be continued into the future.

**Risks and Issues**

6.16 There are some risks associated with early intervention and prevention which are related to the wider economic and legislative changes affecting Scotland and North Ayrshire. These are:

- The impact of welfare reform in potentially increasing child poverty and levels of deprivation which are the key factors affecting children's life chances
- The impact of the economic recession in affecting levels of unemployment and of deprivation
- The time lag involved between implementing an intervention and being able to see its results, as this can be relatively long term
- The imminent integration of Health and Social Care in Scotland and the potential disruption to services caused by this integration
- Uncertainty about the future positioning of children's services within new management structures
- Pressures on services to find savings in mainstream services which may affect capacity in existing services which support preventative activity.

6.17 The Scottish Parliament Finance Committee's report (2010) indicated that barriers to preventative spending were as follows:

- The public body which invests in preventative spending may not be the same body that derives the benefits
- Elections are conducted every four years but the benefits of preventative spending will occur over a much longer timescale
- It can be difficult to prove conclusively that a specific intervention in early years is responsible for causing a particular outcome
- Budget restraints may make preventative spending less likely
- Increasing investment in preventative spending does not reduce demand for more reactive services, as our social problems will not simply go away, and dual funding may be needed.

7. Our Action Plan

Early Years: Early Intervention and Prevention Action Plan

7.1 The projects within the Early Intervention and Prevention Programme are contained in an action plan designed to achieve its outcomes. This aligns with the age groups used by the Early Years Collaborative and is consistent with actions being proposed.

7.2 The Early Years Early Intervention and Prevention Action Plan 2013/17 is attached at Appendix 6.

Future Developments

7.3 The next stage in developing early intervention and prevention work will be to produce a strategy and plan for older children and young people (8 to 18 years). This will include the effective early intervention activity being developed through the mentoring scheme and within youth justice.
7.4 In relation to the early years, in addition to the actions included in the Action Plan at Appendix 6, there will be priority in future in relation to:

- Support for pregnant women with substance misuse issues
- Reducing teenage pregnancy rates
- Identification and support to children affected by parental substance misuse and mental health issues
- Adoption, permanence and contact arrangements
- Kinship care and foster care
- Issues highlighted through the Child Health Review

8. **Our Monitoring**

8.1 The Early Intervention and Prevention Programme Board has been set up to monitor progress is developing the programme’s outcomes and an evaluation framework to measure progress. The Board comprises representatives from the Council, NHS Ayrshire and Arran and Police Scotland.

8.2 Quarterly progress reports are also being submitted to the CPP Board, CHP Committee, ICSP Steering Group and other relevant forums.

8.3 The action plan and the indicators being used to monitor progress are consistent with the actions and indicators contained in the SOA. Monitoring of the programme’s progress will therefore also be reflected in the SOA annual report.

8.4 Although it can be challenging to demonstrate the benefits of intervention in the early years, as there can be a time lag between the intervention and the results, the action plan contains indicators which will be reported on annually to demonstrate impact of our early intervention activity. All of this activity will contribute to ensuring that North Ayrshire is the place to have a Better Childhood.
Appendix 1

Outcome Map 1:
Parents and Carers encourage and support their children

Appendix 2

Outcome Map 2:
Children are safe and cared for in a Nurturing Home
Appendix 3

Outcome Map 3:
Children are Resilient and their Life Chances are Improved

Appendix 4

Outcome Map 4:
Children can access the Opportunities to help them Succeed
Early Intervention and Prevention Developments

1. Parenting Programmes and Approaches

The North Ayrshire Parenting and Family Support Strategy 2010/15 identifies that there is a need to provide a continuum of parenting and family support. The Parenting and Family Support Group has considered the parenting approaches available and how these should be developed further in North Ayrshire.

The Solihull Approach has been adopted in North Ayrshire as a foundation approach for all families with children aged 0-5 years, in addition to other more intensive parenting interventions. It is designed for use with individuals, rather than as a programme for all parents. It involves training professionals in its concepts to help them support the family more effectively. Its theoretical model is developed from three concepts of containment, reciprocity and behaviour management. It can be used alongside other interventions. Multi agency awareness-raising sessions and Solihull foundation courses have been delivered in North Ayrshire over the last year.

Additional funding has now been allocated to improve co-ordination and to roll out the Solihull Approach and other parenting programmes consistently across North Ayrshire. This should help to ensure that all parents who wish access to a parenting programme can do so in their local area.

There has been an ABC Handling Children’s Behaviour course running for several years to assist parents in dealing with difficult behaviour. This course is designed for low level behavioural problems (Level 1/2). There are already almost 100 staff in nurseries, home visiting and social services trained to deliver this course which has been positively evaluated. A series of courses will be run by community nurseries which will cover all areas of North Ayrshire.

An evidence-based programme to support babies and children’s learning and development, Parents Early Education Partnership (PEEP), is now being delivered in North Ayrshire. Practitioners are being trained in
the approach which is designed for all parents and carers. Specialist parenting programmes are also to be provided for children and parents where there may be behavioural problems and in-depth support is needed, particularly where the child is vulnerable and there may be parental issues regarding drug or alcohol misuse and child protection.

Mellow Parenting is a 14 week parenting programme which will be introduced to provide such support for parents with children under 5 years. It is a more intensive programme (Level 3/4) for parents which is particularly designed for vulnerable families where there may be substance misuse and child protection issues. It is effective in improving the mother child interaction and child behaviour problems.

Incredible Years is a parenting programme to promote social competence, emotional regulation and problem solving skills and to reduce behaviour problems in young children (0-12) years. It also is more intensive (Level 3/4) and involves two hour sessions with children over an 18 week period.

<table>
<thead>
<tr>
<th>Programme</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parenting</td>
<td>£100,000</td>
<td>£100,000</td>
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</tbody>
</table>

2. Integrated Early Years Centres

The five Early Years Centres offer a range of early learning and childcare, activities, services and support, as well as opportunities for parents to volunteer, to meet with other parents and to access support and advice in an accessible environment which is familiar and comfortable to them. Agencies work together in an integrated way and provide links to a range of professionals delivering services to families locally. Services which can be provided from Early Years Centres include speech and language therapists, play workers, health visitors, mental health workers and family support workers. This has been found to have a major beneficial impact on the wellbeing and development of young children.

The purpose of expanding the early years centres is to develop the centres as hubs for work with children and families in the surrounding community to reduce the isolation experienced by vulnerable children and their parents and to support families to become more connected to the wider community.

The earlier we can offer support to vulnerable children and their families, and the more we can do this in a joined up and meaningful way, the better the outcomes we can expect for the families concerned.

Delivering joined up services, including income maximisation and financial capability, has been highlighted as good practice in the first Annual Report on the Child Poverty Strategy.

Additional posts are being created within the 5 Early Years Centres for Education, Social Work and Money Matters Advice staff:

- A clear focus on the needs of the child and support to families within the centre and at home.
- Leading and supporting shared assessments and plans for what is actually needed to make things better for children and their families.
- Supporting families with complex needs.
- Close working relationships with early years centre and cluster primary school staff, as well as other statutory services such as midwifery, health visiting, GP’s etc.
- An ability to help access a range of resources and services for parents including addiction services, domestic violence services and mental health services.
- Use of well evidenced groupwork and parenting programmes that can be jointly delivered with partners to vulnerable children and their carers.
- Provision of targeted advice and support to maximise household income and reduce pressure on household budgets, thereby contributing to children’s well being and life chances.
- Improving money management skills and increasing household income to give increased choice and independence to service users and also promote positive outcomes for children living in poverty.
- Building capacity within families and supporting them to access training and other appropriate organisations.
- Provide information, advice and support on Welfare Reform which will have a significant and detrimental impact on vulnerable groups – and child poverty.

The social workers and advice workers will take self-referrals and referrals from Early Years Centre staff. Links will also be made with feeder primary schools in order to assist vulnerable children and their families. There will be particular focus on supporting vulnerable children with their transition from the Early Years Centre to primary school.
3. Capacity Building with Parents

In order to build capacity with parents it is proposed to build on the existing provision in North Ayrshire and fully use the existing workforce while developing parent capacity through a strengths-based approach. The Parenting Learning and Development Co-ordinator will be essential to the success of the service.

The service aims to:-

- Increase effective and meaningful engagement with parents
- Identify needs and provide effective, appropriate support and opportunities
- Ensure all parents have easy access to information on parenting
- Ensure all parents know who to ask for help
- Develop parent-friendly areas where parents can socialise and engage
- Provide opportunities for parents to engage with children 0-5 to promote language development, play and interaction
- Provide training opportunities for parents and support them to facilitate groups
- Ensure all existing services for families in North Ayrshire are fully utilised

4. Asset Based Community Development (ABCD) Project

The Asset Based Community Development (ABCD) project is supporting work locally on early intervention and prevention in the early years which may be mainstreamed across North Ayrshire. It is engaging with parents using an asset based approach.

It has two bases in Castlepark, Irvine, and in Ardrossan and has consulted with parents and carers on their experiences of parenting in North Ayrshire and the issues for them. The project has identified community volunteers in both areas and is supporting them to build their capacity. Proposals for healthy eating information and cooking skills, and parenting programmes are currently being developed, along with the baby and child first aid training.

Another important aspect of the project’s work is in assisting with young children’s speech and language development, including the training of early years staff in “Learning Language and Loving It”.

5. Peripatetic Early Years Practitioner Support in Early Years Classes

An additional peripatetic Early Years Practitioner (EYP) enables 5 early years classes to work more effectively with the families attending the class.

Early years classes are staffed on a 1 to 10 ratio. As staff are fully committed to working with children or planning and assessing it is difficult for them to find time to work with families and more challenging to build up effective relationships or provide required support for more vulnerable families.

The provision of this additional member of staff will help the staff in early years classes to be responsive to the needs of families and to build up stronger more effective relationships. This helps to support children's wellbeing and development.

6. Family Support Service

There is a wide range of professionals supporting parents, including teachers, midwives, health visitors, social workers, nursery nurses, home-school inclusion workers, etc. This support tends to be relatively small in scale and patchy in coverage.
Quarriers has been commissioned to provide a family support service to parents/carers with children aged up to and including 0 – 8 years of age in order to build capacity and capability. This will include practical and organisational support in order to achieve the best possible outcomes for children and their families. Families referred to the Family Support Service will receive support in relation to housing, care, educational, social and health needs. These needs could be in relation to behavioural issues, routines, nutrition, budgeting, cleaning, cooking or literacy.

Referrals will be made by a range of Community Planning Partners including social services, health, education and skills and housing. A “named person” will submit a referral to the Family Support Service and will remain responsible for liaison with the Family Support Service until the intervention has concluded.

The service will provide a maximum of 12 weeks intervention in order to support identified needs and will adopt the most up to date evidence based approaches in terms of both practice and measuring outcomes.

<table>
<thead>
<tr>
<th>Programme</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Support Service</td>
<td>£400,000</td>
<td>£400,000</td>
<td>-</td>
</tr>
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</table>

7. Vulnerable Children’s Service

Most of the vulnerable very young children on North Ayrshire’s Child Protection Register are placed there as a result of neglect. Therapeutic intervention with these families is often not enough. Home-based practical support is needed to help improve parenting and family circumstances in order to safeguard and improve the outcomes for vulnerable children.

Quarriers’ Family Support Service will intervene early when parenting issues are identified by services. There is currently no service, however, for vulnerable very young children aged 0-5 years which focuses on practical household and domestic support in order to improve the wellbeing of children and families. This will delivered by 10 Family Workers who would be managed by Social Services Team Managers to provide intensive support and to link to the Early Years Centres.

<table>
<thead>
<tr>
<th>Programme</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vulnerable Children’s Support (0-5 years)</td>
<td>£265,000</td>
<td>£360,000</td>
<td>£360,000</td>
</tr>
</tbody>
</table>

8. Family Nurse Partnership

The Family Nurse Partnership is a preventative programme for vulnerable first time mothers. It involves a family nurse visiting mothers who are 19 and under every one or two weeks during pregnancy and throughout the first two years of their baby’s life. The nurses work intensively with families to offer guidance on child development, parenting skills, eating and living healthily and support mothers choosing to take up education or employment opportunities.

The programme has an estimated cost of £3,000 per client per year. Cost savings estimated in the longer term are high and the programme is consistently rated as one of the most effective for vulnerable young families.

Scottish Government funding has been provided to NHS Ayrshire and Arran to introduce the programme in Ayrshire. Additional posts of Assistant Nurse Practitioners have also been established to focus on early intervention with 0-3 year olds in disadvantaged areas.

<table>
<thead>
<tr>
<th>Programme</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Nurse Partnership</td>
<td>£1.6 million for Ayrshire over 3 years</td>
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</table>

9. Multi Agency Domestic Abuse Response Team (MADART)

Every time the police are called to a family home in response to a domestic incident, a report is completed, detailing the circumstances, family composition, whether charges/arrests were made, and if children present. These reports (where children are involved) were previously sent automatically to Scottish Children’s Reporters Authority (SCRA) and Social Services for assessment and further action as appropriate.

The Multi Agency Domestic Abuse Response Team (MADART) now screens and initially assesses all domestic abuse incidents in the first instance. By having access to a variety of information systems under the one roof (Police, Housing, and Social Services), MADART will be able to effectively assess, quickly, what
follow-up action, if any, is required.

The benefits are:

- Quicker response – The ability to share information at source as referrals are received, and calling on the expertise of staff in a multi disciplinary environment, leads to a quicker evidence-based response.
- Proportionate response – Only children assessed as most at risk will now be referred to SCRA. This should address the previous practice of ‘blanket’ referral and avoid unnecessarily challenging victims about how they will protect their children.
- Effective response – The suite of responses available to the team will ensure that the right response can be made at the right time and that victims (and their children where they have them) can be assisted to be safe.

The Multi Agency Domestic Abuse Response Team includes Police personnel, a Social Worker, a Housing Officer and an administrator. In addition, a named health professional is attached to the unit on a part-time basis.

Additional resources to provide ASSIST (Advocacy, Support, Safety, Information, Services Together) Workers have recently been agreed by Strathclyde Police and the Scottish Government. There are 6 ASSIST Workers for Ayrshire and they are based at Kilmarnock Police Station.

There is significant evidence of the impact on children affected by domestic abuse in terms of their health and emotional wellbeing. The CEDAR (Children Experiencing Domestic Abuse Recovery) project is a successful Canadian model which has been piloted in three areas of Scotland recently. North Ayrshire Women’s Aid has received Big Lottery funding to allow this programme to be run in North Ayrshire. Although it will be aimed at older children aged between 4 and 12 years, there will be other benefits from the mothers’ involvement in this programme.

<table>
<thead>
<tr>
<th>Programme</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>MADART</td>
<td>80,000</td>
<td>80,000</td>
<td>-</td>
</tr>
</tbody>
</table>

10. Permanence

Social Services need to act quickly and positively to bring young children taken into care back together with their parents where this is possible. Where this is not possible, measures need to be in place to put children in a new family permanently.

The damage caused to very young children who cannot form secure attachments because they are moved frequently between carers is well evidenced. It is estimated that this can involve moving from between 4 to 8 different placements in the child’s first year. More work is needed to provide continuous care and to prevent this from happening.

It is proposed to speed up the arrangements for children who cannot live with their parents so that they are placed in a permanent new family more quickly. This should create better outcomes for children taken into care at an early age.

Additional posts have been established within Social Services to improve the existing processes. Arrangements are now in place for the development of a new model to:

1. Assess parental ability to care for children;
2. Provide support required to return children home where possible and appropriate;
3. Place children in permanent care timeously

There will also be annual public campaigns to increase the number of people volunteering to foster and to adopt children.

<table>
<thead>
<tr>
<th>Programme</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanence</td>
<td>£123,000</td>
<td>£123,000</td>
<td>-</td>
</tr>
</tbody>
</table>

11. Stop Now and Plan (SNAP)

‘At-risk’ and vulnerable children and their families can be identified relatively easily within primary schools. The Stop Now and Plan (SNAP) approach, which is now being used by some Councils, focuses resources around primary schools to identify and intervene with children (and their parents) at an early
The primary goal of the programme is to keep ‘at-risk’ children in mainstream school and out of trouble. It focuses on children with disruptive behaviour problems and includes a parent management training group along with community and school advocacy and support. The aims of the programme include:

- increasing emotion-regulation and self-control (parents and children)
- improving social competency
- engaging high-risk children and their families in supports at an earlier stage
- developing effective parent management skills
- connecting Children and Parents to community based resources

Although focusing on Primary School years, the approach will also support young people through transition into S1.

The proposal involves creating multi-disciplinary teams around the Primary School cluster groups and, most importantly, around vulnerable children and their families identified within those clusters. Some re-configuration of existing resources will be required, involving the Young Person’s Support Teams, Educational Psychology, Home School Inclusion workers, Pupil Support Service and the Pupil Welfare Service. Discussions will also take place with Child and Adolescent Mental Health Services to identify ways they can link with the teams.

It is proposed that a number of support workers can be added to the teams to focus on ensuring that children and their parents are integrated and more connected to their local communities. Given the current prevalence of children affected by parental substance misuse in North Ayrshire, it is proposed that specialist addictions staff could also assist with the assessment of addictions issues on parenting capacity as well as in offering specialist support to parents.

<table>
<thead>
<tr>
<th>Programme</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stop Now and Plan</td>
<td>£232,000</td>
<td>£307,000</td>
<td>£307,000</td>
</tr>
<tr>
<td>Supported Carers Scheme</td>
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</table>

Supported carers undergo a full assessment similar to that of foster carers and need to go through the fostering panel for approval or de-registration. They are paid at a lower rate than foster carers because they do not have the responsibility of caring for a young person on a supervision order and due to their different role with this age range.

The number of young people receiving a service from the Social Services Throughcare team has increased by 20% over the past 2 years.

Fewer young people are returning home following a period of care. The additional support offered by a supported carer is an added step to independence and more likely to achieve positive outcomes for these young people than a move to live immediately in their own accommodation. There would be financial benefits from increasing the number of supported carers as it is considerably less expensive to accommodate a young person with a Supported Carer (£185 per week) than to provide Foster Care (£400 per week) or residential care in a children’s unit (£2,700).

A dedicated Senior Throughcare Worker could take on an overseeing role and deal with the general assessments on young people. They would drive the recruitment campaign, assess, train and review the carers, link to national good practice, and link to fostering campaigns.
The overall total investment by the Council in early intervention and prevention over the next three years is detailed below.

<table>
<thead>
<tr>
<th>Proposal</th>
<th>Lead service</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
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</thead>
<tbody>
<tr>
<td>Parenting Programmes</td>
<td>Education &amp; Skills</td>
<td>100,000</td>
<td>100,000</td>
<td></td>
</tr>
<tr>
<td>Family Support Service</td>
<td>Social Services &amp; Health</td>
<td>400,000</td>
<td>400,000</td>
<td></td>
</tr>
<tr>
<td>Multi Agency Domestic Abuse Response Team</td>
<td>Social Services &amp; Health</td>
<td>80,000</td>
<td>80,000</td>
<td></td>
</tr>
<tr>
<td>Permanence</td>
<td>Social Services &amp; Health</td>
<td>123,000</td>
<td>123,000</td>
<td></td>
</tr>
<tr>
<td>Asset Based Community Development Project</td>
<td>NHS Ayrshire &amp; Arran (funded by CPP)</td>
<td>80,000</td>
<td></td>
<td></td>
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<tr>
<td>Vulnerable Children Support</td>
<td>Social Services &amp; Health</td>
<td>265,000</td>
<td>360,000</td>
<td>360,000</td>
</tr>
<tr>
<td>Capacity Building with Parents</td>
<td>Education &amp; Skills</td>
<td>190,000</td>
<td>228,000</td>
<td>228,000</td>
</tr>
<tr>
<td>Stop Now and Plan (SNAP)</td>
<td>Social Services &amp; Health</td>
<td>232,000</td>
<td>307,000</td>
<td>307,000</td>
</tr>
<tr>
<td>Supported Carers Scheme</td>
<td>Social Services &amp; Health</td>
<td>104,000</td>
<td>141,000</td>
<td>141,000</td>
</tr>
<tr>
<td>Integrated Support in Early Years Centres</td>
<td>Social Services &amp; Health</td>
<td>289,000</td>
<td>372,000</td>
<td>372,000</td>
</tr>
<tr>
<td>Peripatetic Early Years Practitioner Support</td>
<td>Social Services &amp; Health</td>
<td>22,000</td>
<td>27,000</td>
<td>27,000</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>1,885,000</td>
<td>2,138,000</td>
<td>1,435,000</td>
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</tbody>
</table>

In addition, there is significant investment by CPP Partners in the Family Nurse Partnership, MADART and a range of other initiatives.
<table>
<thead>
<tr>
<th>Outcome</th>
<th>How will we measure success?</th>
<th>Workstream 2</th>
<th>1 year – 30 months</th>
<th>What will we do?</th>
<th>How will we do it?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children are safe and cared for in a nurturing home</td>
<td>% of children achieving developmental milestones by 27-30 month child health review</td>
<td>We will expand the services, facilities and support available to parents and develop Early Years Centres as information hubs for parents</td>
<td>Integrate Social Services, Health, Education and Money Advice services in Early Years Centres</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>No of early years referrals to Partnership Forums</td>
<td>We will provide more direct household and domestic support to vulnerable families</td>
<td>Deliver a Family Support Service with the voluntary sector (Quarriers)</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>We will build capacity in parents to support and train each other</td>
<td>Provide parent-friendly space in nurseries, deliver Parent Scotland capacity building training and the ABCD project</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>We will improve the time taken to place vulnerable children with an adult who cares for them</td>
<td>Review processes for parental assessments and the placing of children for adoption</td>
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<td></td>
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<td>We will ensure all parents can access a Parenting Programme in their local area</td>
<td>Deliver universal and specialist parenting programmes through the Parenting Learning and Development Coordinator</td>
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<table>
<thead>
<tr>
<th>Outcome</th>
<th>How will we measure success?</th>
<th>Workstream 3</th>
<th>30 Months – 8 Years</th>
<th>What will we do?</th>
<th>How will we do it?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children are resilient and their life chances are improved</td>
<td>Children (pre-birth to 8) referred to the Reporter on care and protection grounds and total number of referrals</td>
<td>We will improve the services for women and children experiencing domestic abuse</td>
<td>Co-ordinate domestic abuse referrals through a Multi Agency Domestic Abuse Team (MADART)</td>
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<td></td>
<td>% of children achieving their developmental milestones at the time the child starts primary school</td>
<td>We will help children deal with their experience of violence</td>
<td>Implement the Children Experiencing Domestic Abuse Recovery (CEDAR) programme</td>
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<td>% of children with no obvious dental decay in P1</td>
<td>We will provide high quality educational experiences in our nurseries and Early Years Centres</td>
<td>Provide a well-trained early years workforce and Nurture classes in Primary 1 to help with transition from nursery</td>
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<td>% of children with a healthy weight in P1</td>
<td>We will improve children’s resilience and ability to deal with their emotions</td>
<td>Introduce Stop Now and Plan programme to reduce violence and conduct disorders in primary school children</td>
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<table>
<thead>
<tr>
<th>Outcome</th>
<th>How will we measure success?</th>
<th>General</th>
<th>What will we do?</th>
<th>How will we do it?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children are safe and cared for in a nurturing home</td>
<td>No of children pre-birth to 8 looked after at home/accommodated</td>
<td>Improve information sharing between services</td>
<td>Implement the Ayrshare initiative</td>
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<td>Undertake data analysis to improve identification of vulnerable children</td>
<td>Establish means of reviewing existing data on IT systems</td>
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<td>Use areas of family stress maps to improve how we match resources to needs</td>
<td>Develop Neighbourhood Approach</td>
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<td>Improve evidence base on what works to improve children’s outcomes</td>
<td>Support Early Years Collaborative tests of change</td>
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</tbody>
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This document can also be made available in other formats such as audiotape, CD, braille and in large print. It can also be made in other languages, on request.

www.north-ayrshire.gov.uk/communityplanning