

ANGUS COUNCIL

CHILDREN AND LEARNING COMMITTEE - 12 JANUARY 2016

EARLY YEARS COLLABORATIVE AND SUPPORT FOR UNBORN BABIES AND THEIR PARENTS

1. Background

1.1 Since October 2012 Angus Council and its partners have contributed to the work of the Early Years Collaborative; a national initiative lead by Scottish Government to improve outcomes for children in their early years. The work of the collaborative is linked to improving outcomes across work streams that relate to ages and stages in the early years as follows:

- Conception to 1 year - making sure all women experience positive pregnancies which result in the birth of more healthy babies
- One year to 30 months - reaching expected developmental outcomes by 27-30 months
- 30 months to primary school - reaching expected developmental outcomes by the time children start primary school
- Start of P1 to the end of P4 - reaching developmental milestones by the time children finish in P4

2. Developments within Conception to 1 year work stream

2.1 For the last 2 years work has been ongoing with expectant mothers who are known to have issues with substance misuse. A support worker is identified to assist the mother and her partner to attend all anti-natal and health appointments throughout the pregnancy with the overall outcomes being that the baby is born full term, at a good birth weight and without neonatal abstinence syndrome. These outcomes at birth are associated with more positive longer term outcomes for children.

2.2 The support worker, who is identified once the assessment of the unborn baby's circumstances commences, which can be any time from 16+ weeks in pregnancy, can come from any professional background. This person assumes responsibility for co-ordinating appointments and providing support to the parents to attend the appointments in a way that meets the parent's needs, i.e., text or phone call to remind the parent of the appointment or transportation of the parent to the appointment. Time spent transporting parents is often used to discuss issues related to the parents lifestyle, impact on the unborn baby and helping parents understand the advice they have been offered during the appointment.

3. Outcomes achieved to date

3.1 To date 6 families have been supported in this way. The outcomes for the babies have been extremely positive. All but 1 baby has been born full term, all but 1 child has been born without neonatal abstinence syndrome and all but 1 have been born at a good birth weight.

4. Next steps

4.1 Testing of this approach continues and is being extended across all children's services teams for all vulnerable expectant mothers and their babies.

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