

Tayside Plan for Children, Young People and Families Annual Report 2020-2021

Tayside Regional Improvement Collaborative (Phase 4) 2020

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This report was approved by the Tayside Collaborative on 23 July 2021. Should you wish to enquire on this report, please contact us via www.taycollab.org.uk

Foreword

Welcome to the end of year report on the Tayside Plan for Children Young People and Families covering April 2020 to March 2021. We are reporting on our **Plan** which was extended for a further year to take account of the Covid-19 pandemic. This is our fourth and final report on the Plan from 2017 – 2020 (extended to 2021).

As was reported in the 2019/20 report, Covid-19 continues to present significant challenges to many families (and particularly more vulnerable families) which will impact on people and communities for years to come, placing increased pressure on children's services. As an existing Collaborative, we were well placed to identify opportunities to work together as we have moved through response to recovery stages. We re-prioritised and reframed some of our approaches, including those for our next Children's Services Plan 2021-23.

The Coronavirus (Scotland) Act 2020 provided public bodies with flexibility to postpone compliance with certain duties and exercise flexibility when efforts to respond to the pandemic were prioritised. As stated at the outset, we used this to continue our existing plan through 2020 to 2021 and follow, where appropriate our existing structure and priorities. We are grateful for both the flexibility provided by the legislation and the support from each community planning area. It has allowed good work to continue whilst providing us some space as a Collaborative to ensure our priorities are appropriate. Our next plan will therefore take us from April 2021 until March 2023 in line with the national planning and reporting framework.

We continue to fully integrate work of the Tayside Regional Improvement Collaborative (TRIC) within our children's planning framework, recognising that outcomes in health, wellbeing and educational attainment are inter-related and inter-dependent. We have recognised and built on early successes and reflected on areas where we want to make further progress.

Even in these challenging times, there is strong commitment to continue to work together across Tayside, to mature and embed our approach to joint work where there is clear added value to children and families from taking a regional approach. This is reflected in some of the actions that have paused or are not progressing on a Tayside basis, and in those that are being driven forward with clear benefit. As I have said previously, this means a planning landscape that is not linear. It is one that still reflects the commitment of each community planning area to be honest, bold and brave to deliver services in a combined way, either as being locally driven or across the Tayside region.

A handwritten signature in black ink that reads "Margo Williamson". The signature is written in a cursive style with a long horizontal flourish extending to the right.

MARGO WILLIAMSON

Chair of Tayside Children's Services Collaborative

Strategic Executive Group

Introduction

'Our children and young people will have the best start in life and Tayside will be the best place in Scotland to grow up'

The **Tayside Plan for Children, Young People and Families 2017-2020** (having been extended into 2021) forms the Integrated Children's Services Plan (ICSP) for the three Community Planning Partnership areas in Tayside and is led by the three Councils in Tayside (Angus, Dundee and Perth and Kinross), NHS Tayside, Police Scotland, the Third Sector and other organisations that influence service delivery in the Community Planning Partnership (CPP) areas. The plan was developed, and is being delivered, within a framework of policy, legislation, evidence-based practice and analyses of local needs. It maintains a focus on the improvement of outcomes for children and young people in the area, recognising the importance of a holistic focus on the family and whole child to achieve this. It builds the collective capacity and resilience of services, shares expertise and makes the best use of resources to accelerate progress towards improving outcomes in health, wellbeing and attainment.

The Plan was the first of its kind to reach across both geographic and organisational boundaries and focuses on five shared priority areas to improve outcomes for children and young people, stated under each associated group in the progress section below.

In developing the Plan, partners committed to several areas of collaboration: the development of shared planning and delivery; the alignment of systems and processes; shared learning and workforce development; and shared commissioning arrangements. All with the aim of ensuring a genuinely whole system approach was adopted to achieve a step change in how resources are mobilised towards delivery of improvement in the most important priorities and outcomes for children and young people.

As the Plan has been worked through, the ambitious nature of the original priorities has been recognised. Within the detailed work there have been areas of work identified as collaborative that have since been taken forward by each individual local authority. This has helped the Collaborative to reflect on the need to more clearly identify the added value which might be gained from joint working which justifies any joined-up approach. This has also helped build a more streamlined and focused future Plan.

The plan is underpinned by a range of key drivers: legislation such as the Children and Young People (Scotland) Act 2014 and the Education (Scotland) Act 2016; national policy such as Getting It Right For Every Child and national improvement frameworks such as Best Start and the Child Protection Improvement Programme.

Future planning has been influenced by the findings of the **Independent Care Review** (reported in February 2020). This has influenced the approach to the next ICSP in Tayside, ensuring that the 5 foundations of **The Promise** underpin the region's priorities

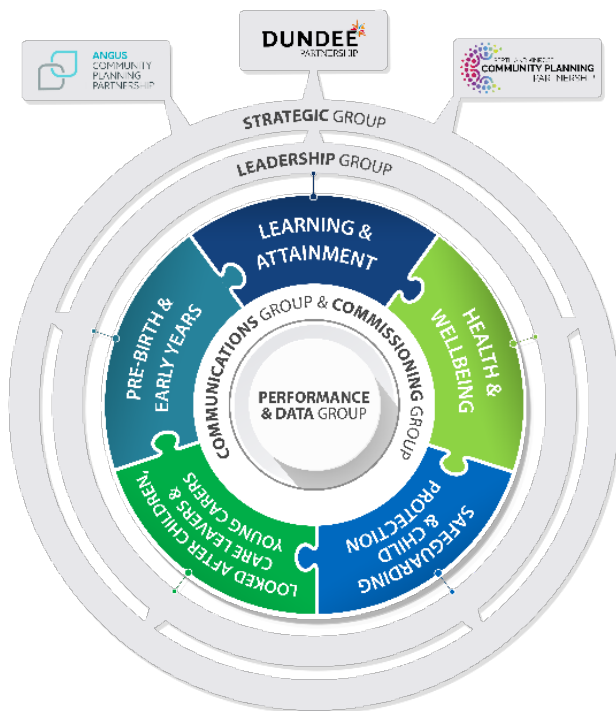
and actions. The incorporation of the United Nations Convention on the Rights of the Child (UNCRC) into Scots Law will further the approach to Children's Rights. Public authorities are now obliged to report what they will do to make Rights better for children and young people. A Tayside Summary Report on children's rights has been prepared for 2017 – 2020 and is available on the [TayCollab web page](#).

The views and experiences of people who access services or who have lived experience and experience of caring for someone with some additional needs, have also influenced developments, particularly in the areas of parenting support, mental health and wellbeing and corporate parenting.

Tayside Collaborative Model

The diagram below (Figure 1) shows how the Collaborative has worked over the last four years. The five Priority Groups (PGs), with representation from across the three areas, delivered detailed action plans, against which their progress is reported. The sub-groups, focussing on Performance and Data, Commissioning and Communication, continue to offer support to the PGs to deliver their outcomes.

Figure 1: TRIC Collaborative Model



Communication, continue to offer support to the PGs to deliver their outcomes.

Governance is delivered through the Leadership Group and further by the Strategic Group at Chief Executive level. In February 2021 the Directors Group was renamed to become the Leadership group as each of the five PG Leads joined existing members.

Although there has been continued support for the existing collaborative model, the positioning of the Performance and Data at the core of the model continues to reflect how clearly evidencing the impact of collaborative work being undertaken helps drive decision making.

Group Progress and Next Steps

Below is an overview of the work of the groups towards achieving the actions set from 2020/21, taking into consideration the outbreak of Covid-19 during the final weeks of March 2020. In this reporting period, each group continued to base their activity on the original high level aims of each area (within the Tayside Plan 2017-2020), next steps reported in the annual report 2019-2020 on this Plan, TRIC action plans submitted to Education Scotland in October 2020 and most significantly, the inevitable response to the Covid-19 outbreak.

Towards the end of 2019, a development session was held to look at what needed to be stopped, started and continued, in preparation for the next iteration of what would have been a 3-year ICSP from April 2020 to March 2023. With the impact of Covid-19, actions that had previously been identified were revisited and reviewed. This was undertaken at local consultation events held in each area to inform what is now a 2-year Tayside Plan (2021 – 2023).

Throughout this reporting period all priority groups have been involved in preparation of the new Plan. The next steps of each group below highlight some of the key actions to be progressed within the plan.

Priority Group 1: Pre-birth & Early Years

'Our children will have the best start in life; they will be cared for and supported to learn in nurturing environments.'

A new Lead was appointed to take forward the work of this group from June 2020.

With Tayside currently being the only area in Scotland delivering to targeted eligible clients up to the age of 24, a third and final evaluation report on the **Family Nurse Partnership (FNP) Programme** (extended eligibility criteria in Tayside) was shared with this priority group as they re-engaged in August 2020.

The key learning points from the report are:

- Those with additional identified vulnerabilities continue to enrol and engage well on the programme.
- Attrition in the programme is low (17.5% for age 19 and under and 11.7% age 20-24).
- Over 53% of the caseload were clients aged between 20 and 21 years old in this cohort.
- Mental ill health diagnoses were prevalent in this client group.
- The majority of clients enrolled were at risk of living in poverty.

- Due to environmental / housing conditions Family Nurses agenda matched to problem solve with clients around their housing challenges.
- Clients enrolled speak highly of their involvement and their Family Nurse.
- Clients like the continuity of carer which FNP brings.
- Clients enjoy using the programme materials.
- Child protection vulnerabilities were demonstrated through clients who had been identified as having additional risk factors requiring multi-agency intervention.
- Family Nurses adapted their communication and assessment skills well for programme delivery ensuring individualised care.
- Supervisors could identify the positive impact of the programme for families.
- Supervisors were sensitive to offering the programme to clients in this age range in that it would not be detrimental to site capacity for those under 19.
- Supervisors required an increased knowledge of adult protection.
- The model of supervision within FNP required no adaption for this group of clients.

As reported previously, with National governance now in place and this piece of work having concluded, this will become a mainstream function of NHS Tayside and as such will not be included in future action plans for this group.

This is also the case with **Allied Health Professional (AHP)** work with the delivery of the 5 ambitions of Ready to Act leading to a National Improvement Plan, resulting in this area no longer being taken forward by this group. Nevertheless, late in 2020, the Child Health Advice Line team presented findings from 2019/20 to this group. Having been delayed due to Covid-19, the team were also able to compare some data to pre Covid-19 times: almost double the amount of calls were logged in September 2020 compared to the same time in 2019.

While eligible 2 years old and 3 – 5-year-old children across Tayside continued to be entitled to up to 1140 hours of funded Early Learning and Childcare (ELC), driven forward by each local area, **ELC Leadership** continued as a collaborative workstream hosting some virtual events early in 2021. **Sarah Philp** worked with 178 practitioners over 6 sessions. 98% agreed that they had a deeper understanding of collaboration, the challenges and the leadership practices that support collaboration and built collective efficacy at the end of the sessions. 96% agreed that they had reflected on their own practice and setting and had identified steps to enhance collaboration in those settings. Later in 2021, a survey will go out to evidence further impact of the sessions and follow up reflections with smaller cohorts in each local area will be planned for the next academic year.

Linked to the learning from Addressing Neglect Enhancing Wellbeing (ANEW) programme and the ELC expansion, improving **transitions for children aged 0-3 years with additional support needs** has emerged as a workstream which incorporates learning from best practice already in each local area. With the use of appropriate data, this will examine the earliest possible identification of the best possible support in addressing developmental milestone needs of young children.

Support for families (welfare and poverty) to address poverty will remain a key priority for this group, requiring the involvement of health visiting, midwifery and welfare rights teams, with learning being shared across Tayside.

Extending from the work with the Perth and Kinross Welfare Rights Team, financial inclusion information for Tayside Child Poverty Plans was shared by a Senior Health Promotion Officer for Welfare Reform/Health & Financial Inclusion from NHS Tayside. This included plans around nursing information and referrals, income maximisation in health settings, electronic referrals to advice services, the Connecting Scotland project and Angus Midwifery Pilot project.

Having run between the end of 2019 and early 2020, over 100 referrals were made by midwives with over £325,000 generated for pregnant women and their families. This averaged approximately £3,000 per person, with the highest gains coming from universal credit payments. Referrals may have been higher, but Covid-19 saw a significant impact on service delivery.

Following evaluation of the pilot, Public Health allocated its remaining funding from Scottish Government to maternity services to recruit a project midwife for 18 months. This post holder will be responsible for working alongside key universal services and colleagues within Maternity Services, Health Visiting, Family Nurse Partnership and Early Years education settings. Leading on service improvement activity, developing pathways, training, data collection/analysis will be integral to the role.

With a previous commitment to improve the use of data, this group were provided with Tayside **child developmental milestone review** information. 13 -15 month, 27-30 month and 4 -5 year review information from 2013/14 and 2018/19 was used to show any emerging trends and inform future decision making. To highlight any early impact of Covid-19, some analysis was also carried out looking at child health visits and developmental reviews.

As reported last year the early impact of Covid-19 resulted in all planned training sessions to embed the **Solihull Approach** in NHS, Local Authorities and third sector partners being suspended from March 2020. The focus became the development of a clear delivery plan for training sessions in a different way.

To increase the capacity to roll out Solihull Training across Tayside and to strengthen the sustainability of the work, volunteer trainers were recruited from partner agencies. As a result of re-deployment following the pandemic outbreak, many were no longer available to deliver training. However, via 2 online courses, 17 participants from across Tayside were able to complete the Train the Trainer course during this time.

With all in person training suspended from March 2020, from January 2021 8 Tayside wide Foundation online courses ran to conclusion with 89 participants ranging from local Early Years staff (over 50%) to teachers and health visitors. Angus also ran virtual 'Solihull in Practice' sessions at the beginning of 2021, designed to provide newly trained practitioners the opportunity (approximately 3 months after their initial training) to reflect on their use of the approach and share with colleagues the impact

the training had on them and the children and families they work. Data is still being gathered on this.

Themes from course evaluations taken up to March 2021 are:

- All participants felt the training was highly relevant or quite useful to their work
- All participants felt it was highly relevant or quite useful in helping build relationships with parents
- 96% indicated that they had begun to think differently about some of the challenges they encounter when working with children and families
- 95% indicated that the training had been highly relevant or quite useful in increasing their professional network
- And 96% felt that the approach had begun to make them think differently about some of the challenges they encounter when working with children and their families.

Online courses for parents are included with the Solihull approach and during the pandemic access to these resources was free to parents. The take up is show below with significant variation across the 3 local authorities:

Parents Online Courses (as at January 2021)	Tayside	Angus	Dundee	Perth & Kinross
<i>Registered Learners</i>	1045	30	207	808
<i>Actual Learners</i>	919	26	153	740
<i>Understanding pregnancy, labour, birth and your baby</i>	202	5	35	162
<i>Understanding our baby</i>	94	1	17	76
<i>Understanding your child</i>	455	14	63	378
<i>Understanding your teenager brain</i>	168	6	38	124

In addition to the above, this priority group will continue to be a forum for any potential collaborative actions such as those that might emerge in relation to infant mental health from the recent launch of the [Wellbeing for Wee Ones campaign](#) on Parent Club, aimed at parents of young babies.

Next Steps

Transitions

- Improvements will be scoped, and actions planned with Health and Children and Families colleagues. We will agree and implement transition pathways consistently for children aged 0-3 years with developmental needs and those with additional support needs (including incorporation of learning from ANEW project in Dundee).
- An approach to tracking and monitoring children's progress in early learning and childcare will be developed via a screening and tracking tool. This will be used consistently across the Collaborative by practitioners to ensure that all children are making progress and any gaps are identified and addressed quickly;

- To support families (welfare and poverty), health professionals will work collaboratively with Welfare Rights Teams (or equivalent) across Tayside to maximise income from social security. Effective referral pathways will be established across universal health and educational services.

Priority Group 2: Learning & Attainment

'Our children, young people and their families will be meaningfully engaged with learning and combined with high quality learning experiences, all children and young people will extend their potential.'

At the outset of this period, activity of the members of this group required local focus on supporting schools (staff and learners) in their management of the outbreak of Covid-19. Once the group could more formally re-establish themselves, the aims of the existing workstreams were re-examined to ensure they remained appropriate given the emerging situation. By the beginning of the 20/21 academic session, as with other priority groups, action plans (with obvious caveats) were refreshed and submitted to Education Scotland for the period to March 2021.

In terms of the previously identified workstreams, the following can be noted in terms of progress:

Learning & Teaching (Practitioner Enquiry with a focus on feedback): Given that the previous Research into Evidence workstream was now amalgamated with this workstream (to emphasise the use of academic research and evidence in individual enquiries), further progress was halted due to face-to-face practitioner enquiries not being possible. This workstream has not been identified as a priority in session 2021/22.

Numeracy: To increase pace and challenge in this area, work had been planned to resume in September 2020 with the aim of creating (in partnership with Education Scotland) a plan for the development of support for primary to secondary numeracy progression. Due to resources being diverted to support remote learning, progress was not possible with this work. As the 2021/22 focus is solely on recovery workstreams, numeracy progression will not be prioritised during that time.

School Improvement: This support approach was to be expanded and developed further to support schools in analysing and understanding data for improvement, sharing of effective practice and in further developing monitoring/tracking processes. As reciprocal school visits could not happen, this was postponed.

School Leadership: The delivery of the shared leadership strategy, encompassing the Leadership Development and Induction Programme (LDIP) for Head Teachers was to be reviewed. Further opportunities for professional learning, eg Evolving Systems Thinking was to be delivered with support from Education Scotland. This was put on hold in session 2020/21 but will resume as part of the 2021/22 plan.

Curriculum Leadership: This workstream had aimed to implement recommendations from the Curriculum Review of Senior Phase and Broad General Education (BGE), then support Middle Leadership colleagues to engage with curriculum development and improvement. Learning & teaching approaches across the curriculum were to be reviewed and refreshed according to need. There was to be an opportunity to develop this over a 3-year period, with Literacy, Early Years and Outdoor learning as examples. Approaches to ensure equity and inclusion for all (considering the Additional Support for Learning review in June 2020) were also to be reviewed and refreshed. Unable to progress in its original form, the group diverted resources to respond to the emerging events at this time. To provide curricular support during the lockdown period, a Principal Teacher (PT) Hub was created for each subject area for all PTs across Tayside.

Moderation: In this session, there was continued focus on upscaling aspects of this work with further moderation events, joint in-service days and Quality Assessment and Moderation Support Officers leading on this. Further support was also provided by the Education Scotland National Improvement Framework (NIF) Officer for Tayside. This work will continue in session 2021/22.

Work did continue, and will continue, on scaling up some of these already established workstreams, with Education Scotland supporting the planning and implementation where appropriate.

Further analysis of school self-evaluation plans and performance data was undertaken in February 2021 to identify any further and emerging areas of shared focus that would benefit from collaborative support for recovery and improvement.

Added to workstreams above noted as progressing, have been digital pedagogy and awareness raising and embedding of UNCRC in all schools across Tayside. To support learners both nationally and across Tayside there had to be a significant immediate focus on the former.

With Education recovery plans from each Tayside local authority being shared as they were finalised and an ever changing picture emerging following the Covid-19 outbreak, Education Scotland colleagues continued to support the provision of a supplementary online library of resources via their **National Improvement Hub: Scotland Learns**. The more interactive online resource **e-Sgoil** continued with plans for expansion. With the potential benefits of a blended learning approach being recognised across Tayside, with some learners thriving and becoming more motivated during this period, this was taken further in Tayside with almost 60 teachers becoming involved with the creation of or quality assurance of recorded lessons across the Broad General Education and Senior Phase.

The group actively considered cohorts of learners who could benefit from virtual learning, whether it be those not currently in school on a full-time basis or in their final school year. A needs analysis was undertaken, and work began on piloting a Tayside virtual campus to enhance and widen course choices across the Senior Phase.

Advanced Higher courses were offered in three curricular areas. Early in 2021, practitioners were presented with progress in this area.

Next Steps

- To embed **UNCRC**, there will be focused interventions to increase wellbeing and raise levels of attendance, engagement and participation in learning for identified cohorts of children and young people across Tayside. Policies and processes across the three local authorities will also become UNCRC compliant.
- Professional learning opportunities around UNCRC, including 'train the trainers' approach to build capacity across Tayside.
- Establish service level agreements with UNICEF for all authorities to help embed the UNCRC across Education and Children's services.
- Promote the Rights Respecting School Award in schools to embed key principles of the UNCRC.

In terms of **digital learning**, a Tayside virtual campus will be created delivering 3 Advanced Higher subjects, as a pilot, with the aim of widening this offer in the coming years. There will be more opportunities for children and young people for independent learning through engagement with accessible and flexible online digital resources. To improve digital pedagogy, more professional learning opportunities for teachers will be available. An additional development will be the creation of a digital resource bank at National Qualification level 1 to National Qualification level 3. This accessible and flexible resource will be created for learners with additional support needs or barriers to learning, so that they can access learning whenever they need to and in a range of settings. We will create and implement a Tayside Digital Strategy.

- There will be a range of opportunities for regional and national **moderation** activities to increase teacher confidence. There will be collaborative delivery of joint In-Service days, career long professional learning sessions and Quality Assurance and Moderation Support Officer training.
- Under **school leadership**, the LDIP will continue to be delivered with a sub workstream to plan and develop leadership opportunities for Depute Headteachers preparing for headship. This will lead to a Depute Headteachers Collaborative Network and Masterclass.

- Moving forward with **school improvement**, work to support robust evidence gathering for each of the core **How Good is Our School? (4th edition)** quality indicators, will be undertaken in partnership with Tayside central officers, Education Scotland and Headteachers. Local areas will focus on collaboration and support to develop a shared understanding of effective self-evaluation for improvement. There will be developments around data literacy and data cultures for improvement in all schools to help raise levels of attainment and achievement. For identified cohorts, there will be an opportunity for professional learning in making effective and sustainable changes through the Model for Improvement methodology.
- Develop approaches to engagement with and by children and young persons. Children and young people will experience more planned opportunities to have their voices heard and influence things which affect them.

Priority Group 3: Health & Wellbeing

'Our children and young people will be physically, mentally and emotionally healthy.'

As the membership of this group comprises an equal split of NHS and Local Authority/3rd sector colleagues, there have been some unavoidable delays in progressing work since the Covid-19 outbreak. Nevertheless, once in a position to regroup, significant progress has been made.

With the **Tayside Strategy for Parents** (2019-2024) having been developed following consultation with parents, those with a parenting role and service providers, the next stage had been to consult on the draft delivery plan. Work had begun to identify actions that the group felt would improve the experience and outcomes for parents and their families. The views of parents and those with a parenting role were gathered in February 2021.

The group also had to consider the wide range of local and national surveys parents had been asked to contribute to, primarily focussed on the impact of the pandemic, for example: Child Poverty Action Group Scotland (Covid-19 and beyond), Connect Scotland Parents and Carers surveys (views on children returning to school), PKC Learning from lockdown survey and Angus Home Learning survey. That withstanding, much focus was on child learning and wellbeing with little on experiences, personal needs and challenges from a parent perspective.

Also now embedded within both the Tayside Strategy for Parents work and in wider planned public health activity, are the group's previous areas of work related to the national Pregnancy & Parenthood in Young People strategy and Substance Use Prevention strategy. The latter is also within the established governance structures of the 3 Alcohol and Drug Partnerships in Tayside.

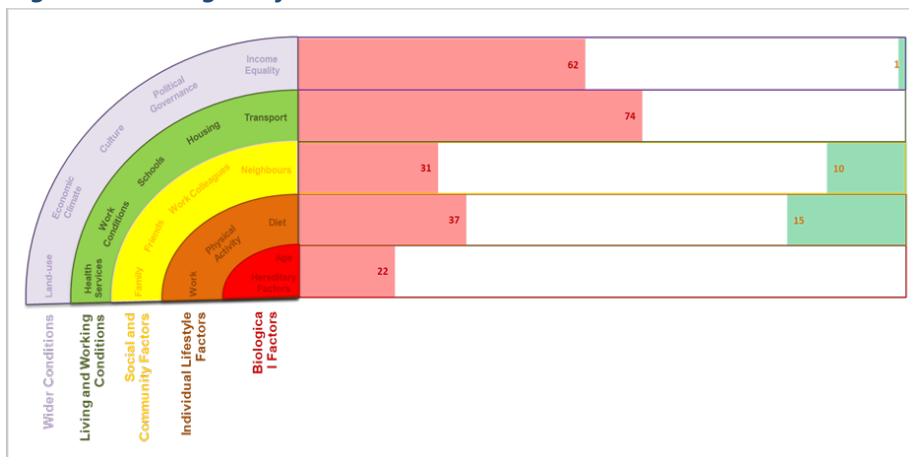
In terms of the development of a Tayside **Child Healthy Weight Strategy**, once again planned events had to be postponed due to Covid-19, such as a facilitated workshop at the end of March 2020. With the core working group recommencing on the whole system approach to child healthy weight, over 60 stakeholders attended a virtual workshop in the middle of December 2020, an output of which was a system map (Figure 2) identifying the key causes of childhood obesity:

Figure 2: Key causes of childhood obesity



Further focus groups have been held to verify the collated system map and to map existing and future actions that are in place using an action scales model (figure 3):

Figure 3: Existing and future actions



Evaluation of the work in Dundee (as one of 3 early adopter sites in Scotland) will be supported by the National Institute of Health Research (NIHR) to inform the process and to measure outcome indicators.

With the aim of completing the development of the first multi-agency **Mental Health and Wellbeing Strategy** (Connected Tayside: An Emotional Health and Wellbeing Strategy for Children and Young People), the TRIC Leadership group were asked early in 2021 to approve amendments made in light of developments since the outbreak of the pandemic. To finalise the strategy, its position as part of the wider **Living Life Well – Strategy and Change Programme** (the response to **Trust and Respect**: the independent enquiry into mental health services in Tayside) had to be considered. To bring this to completion, a performance framework, an externally designed, user friendly, summarised version of the strategy and a charter section are being finalised.

As part of the activity around this strategy, a pilot counselling service in schools across Tayside was established. Any impact of the national review of additional support for learning would inform the future development of this service. Having originally targeted children and young people with mental health needs identified as having additional support needs, the immediate impact of Covid-19 led to the pilot being progressed for all children in the region.

The provision of counselling was viewed as being integral to the mental health and wellbeing strategy for children and young people. With services commissioned late in 2020, **counselling in schools** was offered to children aged 10 and over from November 2020. By March 2021, almost 200 young people had engaged with the service. 87% of support was provided to secondary aged pupils. In terms of engagement, over 450 one to one sessions took place either face-to-face, online or by phone.

For the implementation of a new service during a pandemic, there was a host of challenges. Both providers and schools reported issues around virtual engagement with the service for various reasons including privacy and communication. Feedback from schools and providers suggested that the use of drop-in sessions and group work would increase as there was a physical return to school and the service was extended. In relation to Covid-19, the most significant issues were increased anxiety, worry about schoolwork/exams, a sense of support networks no longer existing and loneliness.

Next Steps

- The Tayside Mental Health & Wellbeing Strategy for children and young people (and its associated outcomes framework) will be implemented. Counselling in schools for children and young people across Tayside will continue to be rolled out, focusing further on data on improvement outcomes and evaluations.
- There will be a formal launch and implementation of the Tayside Child Health Weight Strategy.

Priority Group 4: Looked After Children, Care Leavers & Young Carers

'Our children and young people who experience particular inequalities and disadvantage will achieve health, wellbeing and educational outcomes comparable with all other children and young people.'

As this group reconvened following the Covid-19 outbreak, there was a welcome opportunity for representatives from each local area to share their experiences of supporting vulnerable children during the crisis and what potential opportunities there might be moving forward.

Although in Angus there were fewer children coming into care and fewer than usual Child Protection referrals, this was not the case in Dundee where there was a focus on developing a decision-making framework in respect of risks of harm and Children's Rights. The concern for potential hidden harm was shared by each area representative, especially for those less engaged with schools at the outset.

In addition to each local area progressing with recovery planning, SCRA colleagues looked at emergency legislation, processing of their backlog and virtual hearings, recognising early that staff health and wellbeing required careful consideration.

In relation to previously identified action areas, developments around having a consistent **dataset for Young Carers** in Tayside had progressed in so far as being able to identify some common indicators. Differing local systems and processes have had an impact on this being taken forward in this period. In addition, those involved in this area of work were heavily involved in data collection and analysis support key worker childcare following the outbreak of the pandemic. For the time being, it has been decided to progress with three local datasets rather than a common Tayside dataset. This can be reviewed once local data is robust.

With regard the **engagement of looked after children**, the focus during this time turned to local needs of these more vulnerable groups by those who knew them best. Any detailed analysis of cohorts of care experienced children and young people in Tayside using digital technologies was therefore not possible, all be it existing approaches and learning continues to be shared.

Having finalised the **respite review** of services for families of children with a disability across the region, this was presented to the Directors (since renamed Leadership) group in November 2020. There were a total of 10 recommendations, some which applied to one local authority area and some which applied to 2 or more areas. Each of these are being implemented regionally and/or locally.

Dundee received additional funding in 2021/21 to develop a transitions framework for all young people moving into adulthood and work on this will inform developments across all 3 local authority areas in Tayside.

The group used this forum to discuss both benefits and drawbacks of collaborating when there were significant amounts of funding being made available locally, such

as community mental health funding. This led to early consideration of aspects of the Independent Care Review (published in February 2020), which remains an ongoing action area and will be finalised in the next iteration of the Integrated Children's Services Plan.

Next Steps

- Implement School approaches with a specific focus on reducing exclusions and improving attendance/attainment.
- Implement Health Improvement Plans with a specific focus on meeting the wellbeing needs of care experienced children, young people and care leavers, including during key transitions.
- Complete a regional self-evaluation of the national Secure Care Standards and develop associated regional and/or local improvement plans.
- Explore and maximize opportunities for siblings to sustain and develop positive relationships.
- Capacity, confidence and competence will be built in the workforce to develop high quality relationship-based care (kinship/residential/staff/volunteers).
- Capacity will be built to manage and mitigate risk, looking at partnership approaches to sustaining children at home.
- Work will commence with Columba 1400 on collaborative, values-based leadership with children and young people at the centre.
- Co-produce regional training programme by March 2022

Priority Group 5: Safeguarding & Child Protection

'Our children and young people will be safe and protected from abuse at home, school and in the community.'

Work around various **multi-agency guidance material** continued during 2020/21 culminating in September 2020 with the following being publicised, cascaded and distributed more widely across the collaborative: IRD (Inter-Agency Referral Discussions) Practice Guidance, Concern for Unborn Babies Practice Guidance (including associated referral form), 2 sets of guidance information around participation in Key Child Protection Meetings: one for practitioners and one for children and families. This links to future work around prioritising support given to the

workforce: creating the culture and ethos that enables and supports frontline practitioners in the highly complex field of multi-agency child protection.

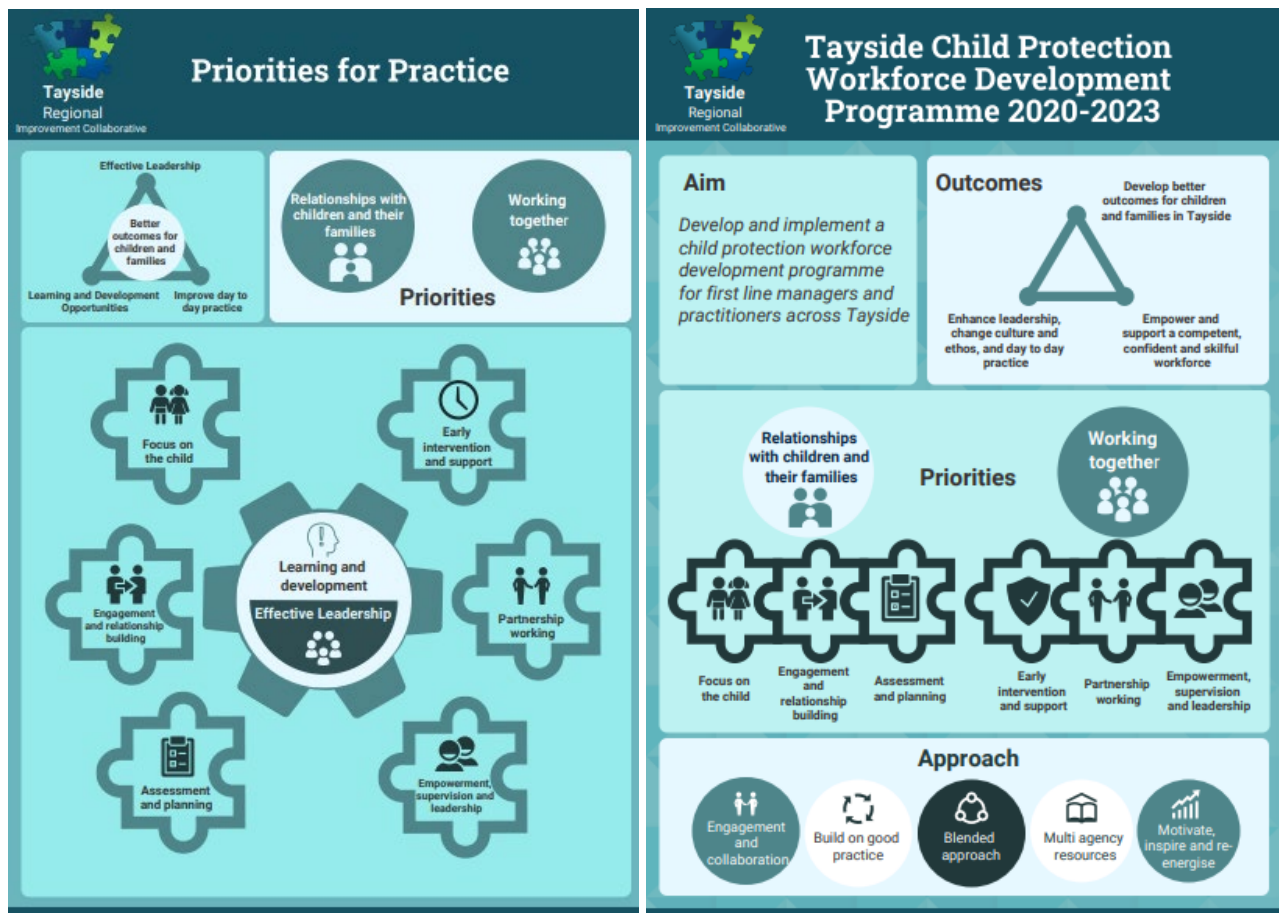
With the **Child Protection Tayside CPC Shared Dataset** agreed and in place since August 2020, throughout the pandemic, this group have examined data collated for the weekly Scottish Government (with SOLACE and other partners) vulnerable children's dataset. This has been used to analyse trends and interrogate key areas of significance in Tayside. A key focus early on was for the group to identify any significant shift that could directly be attributed to Covid-19 and the ensuing lockdown. The data has provided a very useful start to initiating discussion on how data across the Collaborative is used to support and challenge practice, identify positive and concerning trends, work together to understand these more deeply and take remedial action where required.

In October 2020, a Tayside Chief Officers Group leadership event received the research undertaken by Dr Sharon Vincent of Northumbria University into Initial and Significant Case Reviews (ICR/SCR Research) carried out in Tayside since 2015. This will be used to help devise the shared leadership and vision for protecting children over the next 3 years. Following evaluation of the event, and analysis of the outputs, there has been wider dissemination of research findings through high quality materials to March 2021 (see figure 4).

The key themes identified from this work has led to the development of 2 main areas of improvement: working together and relationships with children and families, as well as a series of priorities for practitioner training and workforce development.

With a full-time seconded **Lead Officer for workforce development**, the group is taking forward a co-production approach to multi-agency workforce development. Preparatory work to establish a Tayside Child Protection Workforce Development Programme for 1st Line Managers and Frontline Practitioners has been completed. This is aimed at enhancing leadership, changing culture, ethos and day to day working practices, which will empower and support a competent, confident and skilful workforce to deliver better outcomes for babies, unborn babies, children, young people and families.

Figure 4: Priorities for Practice and Workforce Development Programme infographics



Next Steps

- Supporting our people and creating the culture and ethos that enables and supports frontline practitioners in the highly complex field of multi-agency child protection.
- Quality assuring the implementation of the multi-agency guidance material, gathering feedback and evaluation from practitioners.
- Ensuring Chief Officers, Senior Officers and Managers understand the key child protection improvement messages across Tayside under the themes of **working together** and **relationships with families** and build this into their work.
- Receiving commitment and resourcing (partners in a state of readiness) for the key components to implement a successful multi-agency workforce development plan which has co-production at its core.
- Develop and implement a thematic Tayside wide child protection workforce development Programme for first line managers and frontline practitioners.
- Develop and implement a Tayside wide approach to quality assurance and self-evaluation prioritising the most recent areas of practice guidance

- Build on the experience during the pandemic of analysing data across the collaborative to identify patterns and trends, risks and good practice.
- Introduce regular data reports and analysis to the work of Priority Group 5.
- Develop qualitative measures linked to our Priorities for Practice.

Supporting Sub-Groups

Members of the **Performance and Data** group, were heavily involved in local activity during the emergency response period from March 2020. As the regional work restarted, this group met virtually at the same frequency as in previous years and continued in their support of the work of the priority groups. This included support from a dedicated TRIC Information Assistant to assist with the ongoing review of outcome measures and consistent data analysis. Having this resource, was of assistance at crisis point when establishing key worker childcare provision.

Current data sets would continue to be influenced by work taking place nationally and regionally on, for example, a core data set for child protection committees and a core data set for Looked After Children.

In terms of **Communication**, as with the performance and data group, there was an immediate focus required on local emergency communication, particularly for education colleagues in one authority whose role had been to support this for the Collaborative. As well as supporting Tayside wide emergency tasks, the dedicated TRIC multi-media content developer carried out all communication tasks until such time as groups reconvened.

Later in 2020, the team previously supporting communication continued this directly with priority groups. A review of communication will be undertaken as action plans emerge for the year ahead.

Other dedicated support resources (TRIC Management Assistant and Project Officer) were also involved in response and recover work at both a local and regional level at the time of the pandemic outbreak.

There was no requirement for the **Commissioning** group to meet during this time.

Performance Framework Summary

The agreed set of indicators (when the Tayside Plan was first introduced) have now been updated by the Performance and Data Group to include core data from this year. Performance in relation to these high-level outcome measures has been provided in Appendix 2, with information to the end of 2019/20 representing the most up to date data available from public sources.

For this year, the core data set highlights the following:

- The proportion of children with at least one developmental concern recorded at 27-30 months has remained relatively consistent, albeit with a small increase in Perth and Kinross. The impact of Covid-19 in the early part of 2020 has been noted nationally as having an impact on the coverage of child development reviews, with an increasing proportion being carried out remotely. It has then been more difficult to make complete assessments of children's progress. Values in Tayside are broadly in line with those nationally values (14%).
- The proportion of children with no speech, language and communication concerns identified at 27-30 months has continued to show an increase in Dundee and Angus, but a slight decrease in Perth and Kinross. However, each of these areas are in line with national data (90%).
- The proportion of 3 and 4 year old children accessing Early Learning or Childcare provision has remained consistently high across all three areas. Provision of places for 2 year old children has shown small decreases in all areas, although Dundee still remains higher than the national value (11%).
- Although the proportion of pupils entering positive destinations after leaving school remains high, all 3 local authority areas show a slight decrease in this reporting year (particularly for looked after children). This trend is also seen in national data (a reduction from 95% to 93%) and may be because of Covid-19 on training and employment.
- Satisfaction with schools has shown a decrease in each of the local authority areas. Satisfaction rates in Angus and Perth and Kinross are still above national values (72% for the same period), but rates in Dundee are significantly lower.
- The rate of teenagers conceiving has shown consistent decreases in all Tayside areas, with the overall figure showing a decrease over the last 5 years, but at an average of 33 per 1,000, it remains above the national value (30 per 1,000). There remains a strong correlation with areas of deprivation, with values seen much higher in Dundee than in the other two areas.
- The proportion of looked after children who have achieved Literacy and Numeracy at SCQF Level 4 has increased in both Angus and Dundee. Although values have decreased slightly in Perth and Kinross, values in all three areas are

above national levels (55%).

In general, educational attainment has shown some fluctuating patterns and has not been consistent across all three areas with some values remaining below the national figures. Longer monitoring of data will be required to establish trends. For 2019/20, the absence of external assessment information and the decision to award estimated grades, have led to a different pattern of attainment than has been seen previously. The attainment data for 2020 cannot be directly compared to that of previous (or future) years and cannot therefore be used to directly demonstrate subject, school or authority improvement comparably.

As highlighted in previous years, some indicators are based on relatively small cohorts, such as number of Looked after Children, which are therefore subject to fluctuation from year to year. Caution is therefore required in interpretation.

Again, there are often considerable differences in the patterns seen across the three local authority areas, which, considering the different demographics in each area, is not unexpected.

Conclusion

This report has highlighted activity that has been carried out in partnership across Tayside in exceptional circumstances. At the beginning of this reporting period, whole communities were dealing with the immediate impact of a pandemic, including effects on relationships, social contacts, education, employment, and mental health to name a few.

As an established collaborative, Tayside were well set up to support each other to manage not only the emergency response but also the beginnings of the recovery process. The strength of the partnerships has made the best use of the resources and continues to meet ongoing challenges at both strategic and operational levels.

As the collaborative has matured, learning has been that it is not effective to plan and work together on everything: making sure that working together makes the best use of what is available, to make things better for children and young people, is key. This has meant looking closely at some original areas of collaborative work, what those set out to achieve and deciding if it might be more appropriate to instead focus on a local solution in each area.

Having worked together for the last four years, there is now greater clarity on what is best moving forward, understanding on how available data can be used more effectively and focus on more specific actions to ensure they contribute to making a difference. This last year has shown that more than ever that leadership, planning, priorities and service delivery need to incorporate flexibility, responsiveness and decisiveness to meet the changing needs of communities coming out of the pandemic.

There is confidence entering into the next 2 years of a refreshed Plan, that all be it the focus might be different, the strategic priorities remain the same: make improvements that will make Tayside the best place for children, young people and families.

Appendix 1: Priority Group Members (Job Titles & Organisations)

(AC – Angus Council, DCC – Dundee City Council, PKC – Perth & Kinross Council)

Pre-birth & Early Years (Priority Group 1)

Lead: Service Leader (Early Years & Early Intervention) (AC)

Members: Education Manager Early Years (DCC), Early Years Manager (AC), Executive Director Children & Families (DCC), Lead Midwife (NHS Tayside), Family Nurse Partnership Lead Nurse (NHS Tayside), Senior Nurse Health Visiting Service (P&K) (NHS Tayside), Senior Health Promotion Officer (NHS Tayside), AHP Early Intervention & Prevention Lead (NHS Tayside), Quality Improvement Officer (Early Years and Primary) (PKC), Care Inspectorate Representative, Education Officer (Education Scotland).

Learning & Attainment (TLAG) (Priority Group 2)

Lead: Education Officer (DCC)

Members: Chief Education Officer (DCC), Head of Education (PKC), Executive Director (Education & Children's Services) (PKC), Director of Education and Lifelong Learning (AC), Service Leader (AC), Improvement Officer (AC), Education Officer x 2 (DCC), Head Teacher, Angus Virtual School (AC), Quality Improvement Officer (PKC), Senior Regional Advisor for Tayside (Education Scotland), NIF Advisor (Education Scotland), Support Service Manager (AC).

Health & Wellbeing (Priority Group 3)

Lead: Lead Nurse – Women, Children & Families Division (NHS Tayside)

Members: Education Officer (DCC), Service Lead (DCC), Parenting & Family Learning Team Leader (PKC), Service Manager ASN/Educational Psychology (AC), Lead Officer ADPs (AC), CAMHS Manager (NHS Tayside), AHP Manager (NHS Tayside), Senior Nurse School Nursing Service (NHS Tayside), Senior Health Promotion Officer (NHS Tayside), Dietetic Consultant in Public Health (NHS Tayside), Development Officer (Health & Social Care) (PKAVS), LAC Medical Adviser to Adoption and Fostering Panels, Community Paediatrician (NHS Tayside), Inclusion Manager/Principal Educational Psychologist (PKC), Senior Education Officer (Inclusion) (Education Scotland).

Looked after Children, Care Leavers & Young Carers (Priority Group 4)

Lead: Head of Service, Children's Service and Community Justice (DCC)

Members: Senior Manager, Residential Services (DCC), Education Support Officer (ASN) (DCC), Senior Manager, Children and Families (PKC), Service Leader, Child Protection & Review (AC), Team Manager (Carers Support Services) (Dundee Carers Centre), Locality Reporter Manager (SCRA), Detective Inspector (Police Scotland),

Child Health AHP Service Manager (NHS Tayside), Team Leader (Looked After Children) (NHS Tayside), Consultant Community Paediatrician/Medical Advisor for LAC in Dundee (NHS Tayside), Senior Information Officer (DCC), Senior Education Officer (Inclusion) (Education Scotland).

Safeguarding & Child Protection (Priority Group 5)

Lead: Depute Director, Education and Children's Services / CSWO (PKC)

Members: Detective Chief Inspector, Tayside Division (Police Scotland), Detective Inspector (Police Scotland), Assistant Director (Barnardo's Scotland), Lead Nurse Child Protection (NHS Tayside), Lead Paediatrician Child Protection (NHS Tayside), Independent Chair (Angus Child Protection Committee), Independent Chair (Dundee Child Protection Committee), Independent Chair (Perth and Kinross Child Protection Committee), Lead Officer, Protecting People (DCC), Team Leader, Protecting People (AC), Child Protection Inter-Agency Coordinator (PKC), Attainment Advisor (Education Scotland), Information Assistant (PKC), Tayside Child Protection Learning & Development Officer (PKC).

Appendix 2: Performance Framework

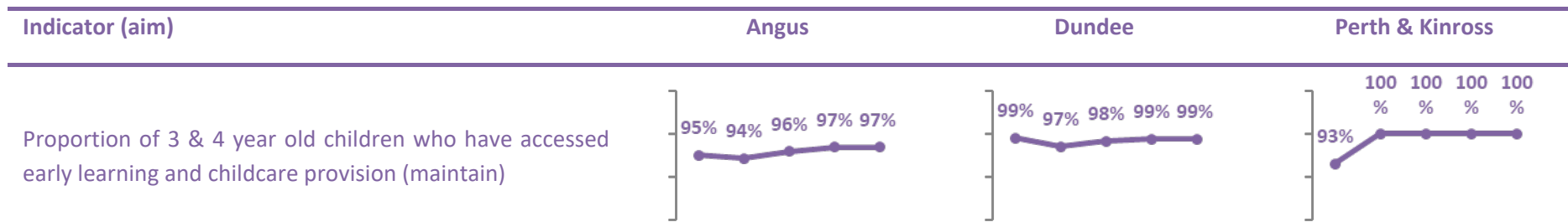
Unless otherwise noted, data for all indicators covers the years 2015/16, 2016/17, 2017/18, 2018/19 and 2019/20

NB The COVID-19 pandemic may have had an impact on many of the measures presented, particularly those within education. Care should be taken when making comparisons with previous years.

1. Our children will have the best start in life, they will be cared for and supported to learn in nurturing environments

Indicator (aim)	Angus	Dundee	Perth & Kinross																																				
Proportion of children with at least one developmental concern recorded at 27-30 months Child Health Review (reduce)	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td><td>2019/20</td></tr> <tr><th>Value</th><td>22%</td><td>21%</td><td>15%</td><td>14%</td><td>14%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	2019/20	Value	22%	21%	15%	14%	14%	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td><td>2019/20</td></tr> <tr><th>Value</th><td>22%</td><td>22%</td><td>18%</td><td>17%</td><td>17%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	2019/20	Value	22%	22%	18%	17%	17%	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td><td>2019/20</td></tr> <tr><th>Value</th><td>19%</td><td>19%</td><td>12%</td><td>11%</td><td>15%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	2019/20	Value	19%	19%	12%	11%	15%
Year	2015/16	2016/17	2017/18	2018/19	2019/20																																		
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Proportion of children with no speech, language and communication concerns identified at 27-30 months Child Health Review (increase)	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td><td>2019/20</td></tr> <tr><th>Value</th><td>83%</td><td>83%</td><td>89%</td><td>89%</td><td>90%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	2019/20	Value	83%	83%	89%	89%	90%	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td><td>2019/20</td></tr> <tr><th>Value</th><td>83%</td><td>82%</td><td>88%</td><td>89%</td><td>90%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	2019/20	Value	83%	82%	88%	89%	90%	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td><td>2019/20</td></tr> <tr><th>Value</th><td>85%</td><td>84%</td><td>90%</td><td>92%</td><td>90%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	2019/20	Value	85%	84%	90%	92%	90%
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Value	85%	84%	90%	92%	90%																																		
Proportion of 2 year olds children who have accessed early learning and childcare provision (increase)	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td><td>2019/20</td></tr> <tr><th>Value</th><td>9%</td><td>11%</td><td>9%</td><td>10%</td><td>8%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	2019/20	Value	9%	11%	9%	10%	8%	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td><td>2019/20</td></tr> <tr><th>Value</th><td>15%</td><td>16%</td><td>16%</td><td>17%</td><td>15%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	2019/20	Value	15%	16%	16%	17%	15%	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td><td>2019/20</td></tr> <tr><th>Value</th><td>8%</td><td>8%</td><td>9%</td><td>12%</td><td>9%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	2019/20	Value	8%	8%	9%	12%	9%
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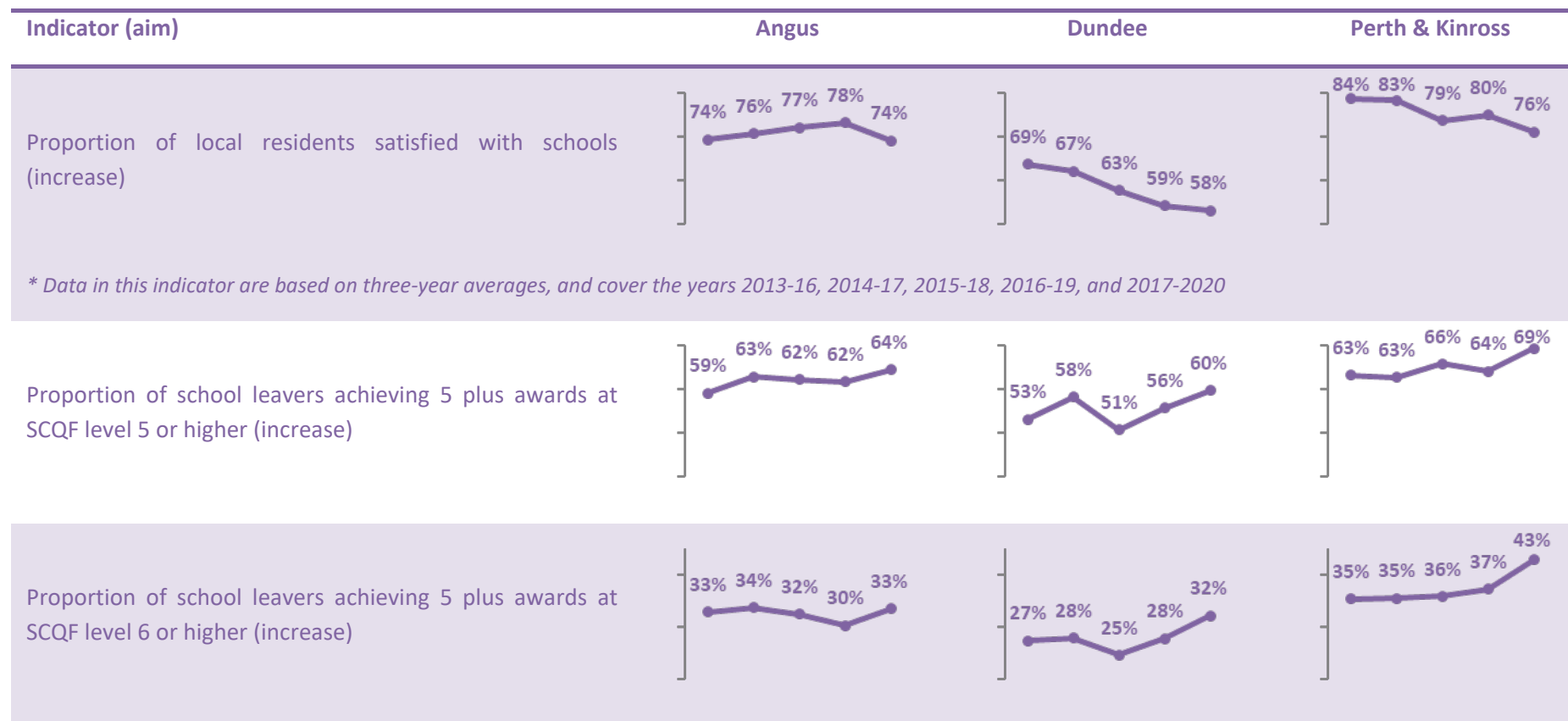
* Data in this indicator are from the relevant census week in September for the years 2016, 2017, 2018, 2019 and 2020



** Data in this indicator are from the relevant census week in September for the years 2016, 2017, 2018, 2019 and 2020*

2. Our children, young people and their families will be meaningfully engaged with learning and combined with high quality learning experiences all children and young people will fulfil their potential

For 2020 the absence of external assessment information, and the Ministerial direction to award estimated grades, have led to a different pattern of attainment than we have seen in previous years. **The results for 2020 should not be directly compared to those in previous years or future years. The 2020 Attainment data cannot therefore be used to directly demonstrate subject, school or authority improvement compared with previous years.**



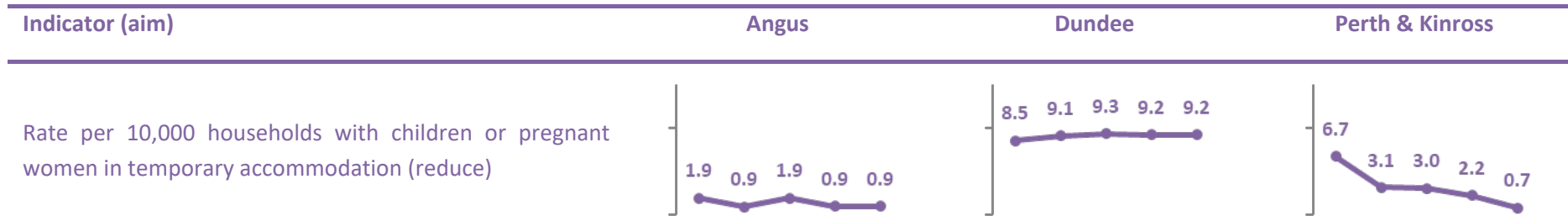
Indicator (aim)	Angus	Dundee	Perth & Kinross
Proportion of school leavers from SIMD Q1 achieving 5 plus awards at SCQF level 5 or higher (increase)	<p>37% 46% 33% 44% 45%</p>	<p>39% 42% 36% 40% 43%</p>	<p>35% 28% 36% 39% 43%</p>
Proportion of school leavers from SIMD Q1 achieving 5 plus awards at SCQF level 6 or higher (increase)	<p>18% 18% 13% 15% 19%</p>	<p>14% 14% 12% 14% 17%</p>	<p>10% 9% 11% 14% 16%</p>
Proportion of school leavers achieving literacy and numeracy at SCQF level 4 or above (increase)	<p>91% 90% 88% 89% 89%</p>	<p>86% 86% 83% 86% 85%</p>	<p>84% 86% 90% 89% 88%</p>
Proportion of school leavers achieving literacy and numeracy at SCQF level 5 or above (increase)	<p>66% 72% 67% 65% 68%</p>	<p>54% 59% 54% 59% 64%</p>	<p>62% 60% 63% 64% 69%</p>

Indicator (aim)	Angus	Dundee	Perth & Kinross
Proportion of pupils entering positive destinations after leaving school (increase)	<p>95% 95% 95% 96% 94%</p>	<p>92% 94% 91% 94% 92%</p>	<p>95% 94% 96% 97% 94%</p>
Leavers' average total tariff SIMD Quintile 1 (increase)	<p>583 634 503 550 586</p>	<p>555 593 510 543 580</p>	<p>558 490 548 531 601</p>
Leavers' average total tariff SIMD Quintile 2 (increase)	<p>668 683 685 605 562</p>	<p>646 705 624 696 738</p>	<p>678 653 683 606 677</p>
Leavers' average total tariff SIMD Quintile 3 (increase)	<p>811 822 804 778 795</p>	<p>946 913 802 838 1036</p>	<p>889 917 896 879 1012</p>

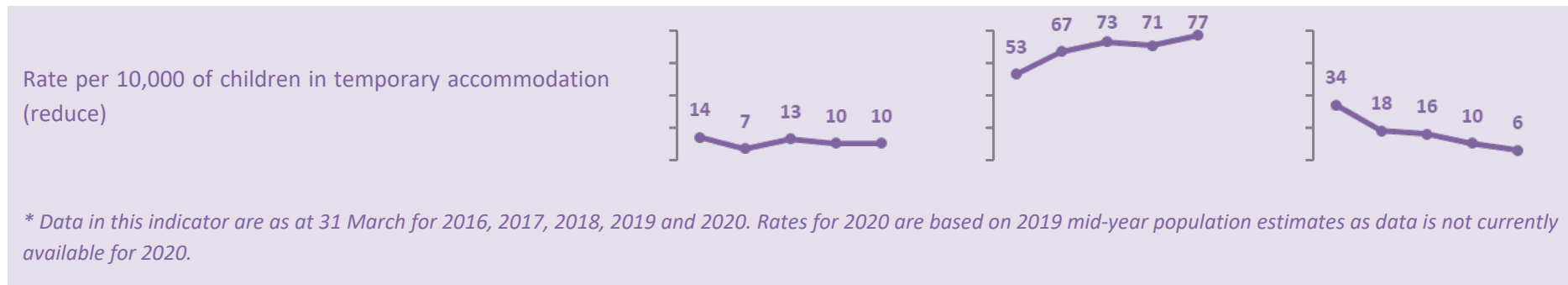
Indicator (aim)	Angus	Dundee	Perth & Kinross
Leavers' average total tariff SIMD Quintile 4 (increase)	<p>892 935 915 884 958</p>	<p>940 1009 922 915 996</p>	<p>1041 972 1015 996 1018</p>
Leavers' average total tariff SIMD Quintile 5 (increase)	<p>997 1029 989 948 1013</p>	<p>1125 1084 1018 1079 1194</p>	<p>1144 1135 1199 1156 1290</p>
Proportion of pupils who stay on from S4 to S5 (increase)	<p>80% 83% 82% 84% 84%</p>	<p>76% 85% 81% 76% 79%</p>	<p>86% 87% 85% 86% 89%</p>
Proportion of pupils who stay on from S4 to S6 (increase)	<p>52% 51% 55% 53% 58%</p>	<p>59% 51% 56% 52% 54%</p>	<p>60% 56% 59% 59% 65%</p>

3. Our children and young people are physically, mentally and emotionally healthy

Indicator (aim)	Angus	Dundee	Perth & Kinross																																				
Proportion of children with a BMI in a healthy weight (clinical) category at P1 review (increase)	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td></tr> <tr><th>Percentage</th><td>86%</td><td>84%</td><td>83%</td><td>82%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	Percentage	86%	84%	83%	82%	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td></tr> <tr><th>Percentage</th><td>83%</td><td>85%</td><td>82%</td><td>83%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	Percentage	83%	85%	82%	83%	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td></tr> <tr><th>Percentage</th><td>84%</td><td>79%</td><td>82%</td><td>87%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	Percentage	84%	79%	82%	87%						
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<i>*No data has currently been published for 2019/20 – data above shows 2015/16 to 2018/19</i>																																							
The rate per 1,000 of teenagers conceiving (under 20 years) (reduce)	<table border="1"> <tr><th>Year</th><td>2014</td><td>2015</td><td>2016</td><td>2017</td><td>2018</td></tr> <tr><th>Rate</th><td>29</td><td>31</td><td>31</td><td>38</td><td>35</td></tr> </table>	Year	2014	2015	2016	2017	2018	Rate	29	31	31	38	35	<table border="1"> <tr><th>Year</th><td>2014</td><td>2015</td><td>2016</td><td>2017</td><td>2018</td></tr> <tr><th>Rate</th><td>51</td><td>52</td><td>51</td><td>45</td><td>43</td></tr> </table>	Year	2014	2015	2016	2017	2018	Rate	51	52	51	45	43	<table border="1"> <tr><th>Year</th><td>2014</td><td>2015</td><td>2016</td><td>2017</td><td>2018</td></tr> <tr><th>Rate</th><td>30</td><td>24</td><td>26</td><td>25</td><td>22</td></tr> </table>	Year	2014	2015	2016	2017	2018	Rate	30	24	26	25	22
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Rate	30	24	26	25	22																																		
<i>* Data in this indicator are based on calendar years 2014, 2015, 2016, 2017 and 2018</i>																																							
Proportion of P7 pupils with no obvious dental disease (increase)	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td></tr> <tr><th>Percentage</th><td>68%</td><td>71%</td><td>71%</td><td>71%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	Percentage	68%	71%	71%	71%	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td></tr> <tr><th>Percentage</th><td>62%</td><td>67%</td><td>66%</td><td>67%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	Percentage	62%	67%	66%	67%	<table border="1"> <tr><th>Year</th><td>2015/16</td><td>2016/17</td><td>2017/18</td><td>2018/19</td></tr> <tr><th>Percentage</th><td>72%</td><td>75%</td><td>75%</td><td>74%</td></tr> </table>	Year	2015/16	2016/17	2017/18	2018/19	Percentage	72%	75%	75%	74%						
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Year	2015/16	2016/17	2017/18	2018/19																																			
Percentage	72%	75%	75%	74%																																			
<i>*No data has currently been published for 2019/20 – data above shows 2015/16 to 2018/19</i>																																							



* Data in this indicator are as at 31 March for 2016, 2017, 2018, 2019 and 2020. Rates for 2020 are based on 2019 mid-year household estimates as data is not currently available for 2020.



* Data in this indicator are as at 31 March for 2016, 2017, 2018, 2019 and 2020. Rates for 2020 are based on 2019 mid-year population estimates as data is not currently available for 2020.

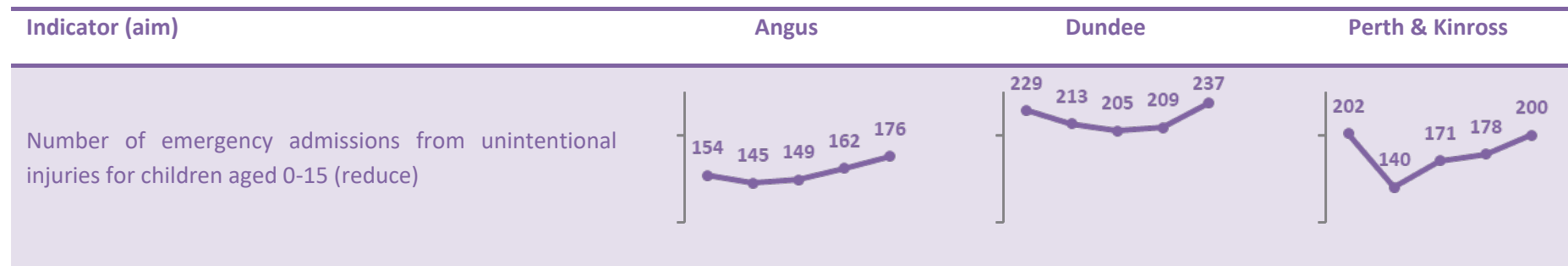
4. Our children and young people who experience particular inequalities and disadvantage will achieve health, wellbeing and educational outcomes comparable to all other children and young people

Indicator (aim)	Angus	Dundee	Perth & Kinross
Proportion of children and young people placed in family-based placements (increase)	<p>91% 92% 92% 90% 90%</p>	<p>90% 89% 88% 88% 89%</p>	<p>94% 92% 95% 96% 96%</p>
Proportion of openings lost to exclusions during academic year for looked after children (reduce)	<p>0.21% 0.25% 0.23% 0.20%</p>	<p>0.40% 0.24% 0.28% 0.11%</p>	<p>0.34% 0.21% 0.17% 0.40%</p>
*No data has currently been published for 2019/20 – data above shows 2015/16 to 2018/19			
Proportion of looked after children in positive destinations post school (increase)	<p>70% 79% 71% 76% 89%</p>	<p>85% 84% 87% 88% 71%</p>	<p>83% 82% 75% 89% 78%</p>

Indicator (aim)	Angus	Dundee	Perth & Kinross
Proportion of looked after school leavers gaining Literacy & numeracy at SCQF level 4 or better (increase)	<p>49% 48% 42% 47% 56%</p>	<p>39% 45% 53% 53% 57%</p>	<p>48% 55% 55% 69% 61%</p>

** Data in this indicator are based on three-year averages, and cover the years 2013-16, 2014-17, 2015-18, 2016-19 and 2017-20*

5. Our children and young people are safe and protected from harm at home, school and in the community



Information sources for Headline data

Priority Group	Information	Source	Most recent data available
PG1	Child developmental milestones	Public Health Scotland: Early Child Development https://beta.isdscotland.org/find-publications-and-data/population-health/child-health/early-child-development/	April 2019- March 2020
	ELC provision	Schools in Scotland – summary statistics 2020 https://www.gov.scot/publications/summary-statistics-schools-scotland-2020/	Census at September 2020
PG2	School satisfaction data	Local Government Benchmarking Framework https://www.improvementservice.org.uk/benchmarking	3 year average 2017-2020
	Pupil attainment data/Leaver's data	Insight https://insight.scotxed.net	Academic year to June 2020
	Staying on rates	Pupil census: supplementary statistics 2020 https://www.gov.scot/publications/pupil-census-supplementary-statistics/	Census at September 2020
PG3	Child BMI	Public Health Scotland: Primary 1 BMI statistics https://beta.isdscotland.org/find-publications-and-data/population-health/child-health/primary-1-body-mass-index-bmi-statistics-scotland/	School year 2019-2020
	Teenage pregnancy data	Public Health Scotland: Teenage Pregnancies https://beta.isdscotland.org/find-publications-and-data/population-health/births-and-maternity/teenage-pregnancies/	Year ending Dec 2018
	Child dental health	Scottish Public Health Observatory (ScotPHO): profiles https://scotland.shinyapps.io/ScotPHO_profiles_tool/	School year 2018/2019
	Temporary accommodation	Homelessness in Scotland: 2019 to 2020 https://www.gov.scot/publications/homelessness-scotland-2019-2020/	At March 2020
PG4	Family based placements	Local Government Benchmarking Framework https://www.improvementservice.org.uk/benchmarking	2019-2020
	Exclusion data	Local data	School year 2018/1029
	Attainment and Destinations data	Insight https://insight.scotxed.net	Academic year to June 2020
PG5	Emergency hospital admissions	Public Health Scotland: Unintentional injuries https://beta.isdscotland.org/find-publications-and-data/health-services/hospital-care/unintentional-injuries/	Year ending March 2020