Date: 20 August 2021

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| **Workstream (WS)/Area** | **Transitions** | **WS Lead**  | Claire Curtis NHS/ Lesley Gibb DCC |
| **Expected Outcomes** *(what is going to change as a result of the actions taken)* | **Impact** *(the longer-term effect of the expected outcomes)* |
| * Children will have the interventions and support needed to improve their progress to meeting developmental milestones.
* Transition pathways agreed and implemented 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).
 | * Improved co-ordination of early identification, assessment and support for children and their families, including the role and responsibilities of the Named Person and Lead Professional.
* Improved referral routes and information sharing between health, and education services in order that robust processes for planning effective transitions are in place
* Improved availability and use of developmental milestone review data to inform transition planning
* Improved planning across partners involved in Child’s Plan Meetings.

**The above lead to:*** Improved transition planning trom home to ELC
* Improved performance in Wellbeing, Equality & Inclusion/How Good is Our Early Learning and Childcare.
* Wider performance data to evidence inclusion.
* Improved levels of parental satisfaction.
* Improved reports on staff confidence.
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| **Actions**  | **Measures (how and when will progress/change be evidenced)** |
| * Scope improvements and plan actions with representatives from Health and Children and Families Service
* Establish workstreams and associated tests of change
* Review existing referral pathways for assessment, intervention and planning for children aged 0-3 years with developmental needs and those with ASN needs.
* Based on effective practice/approaches identified, plan to improve co-ordination of early identification, assessment and support for children 0-3 yrs with developmental needs and those with additional support needs
* Review referral routes and information sharing between health, and education services in order that robust processes for planning effective transitions into ELC are in place.
* Use child developmental milestone review information. 13-15 month, 27-30 month and 4-5 year review information to inform single agency/ multi agency planning
 | Use child developmental milestone review information. 13-15 month, 27-30 month and 4-5 year review information to show progress in:% of children meeting developmental milestones (increase)% of children with unmet milestones between developmental reviews (reduce)Survey feedback from stakeholders indicates improved information sharing leads to more robust transition planningSurvey feedback from stakeholders indicates improved co-ordination of early identification, assessment and support for children aged 0-3Capture child and families’ voices/feedback regarding areas to target and then feedback to evidence change Baseline data identified in order to track: pre and post changes  |
| * Develop an approach to tracking and monitoring children’s progress in ELC (screening and tracking tool) to be used consistently across the collaborative by ELC practitioners to ensure that all children are making progress and any gaps are identified and addressed:
* Work with IT colleagues to ensure the screening and tracking tool is user friendly and compatible across all 3 LAs.
* Develop clear guidelines for implementing and using the screening and tracking tool.
* Implement a small pilot in each LA to test the development.
* Act on feedback from the pilots and amend the screening and tracking tool if necessary.
* Roll out the screening and tracking tool to be used universally 2022- 23.
 | % of practitioners with the information they need to support children’s learning, development and progress (increase) % of practitioners identifying in a timely way each child’s strengths and areas for development to enable them to plan accordingly (increase) . |
| **Resources** |  |
| Resource to support improvement methodology recording and tracking.Support to identify and record appropriate measures.Financial support Pre-birth to 5 (Solihull Approach) manuals for settings £7700Transitions Project Leader  |  |

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| **Workstream (WS)/Area** | **Support for Families (Welfare and Poverty)** | **WS Lead**  | **Lead : Blair Finlay**  |
| **Expected Outcomes** *(what is going to change as a result of the actions taken)* | **Impact** *(the longer-term effect of the expected outcomes)* |
| * Health professionals will work collaboratively with Welfare Rights Teams (or equivalent) across Tayside to increase and to maximise income from social security.
* Health professionals will routinely raise the topic of money worries by using the Public Health Scotland guidance on the CARE approach.
* Effective referral pathways will be established across universal health and educational services, i.e. (Maternity, FNP, Health Visiting & Education).
* Develop Standard Operating Procedures (SOP) for each referral pathway.
 | * Financial hardship for families will be reduced and parents will have better access to the benefits they are eligible to receive.
* Support families to address poverty identified during pregnancy and at agreed key stages (0-5).
* Provision of universal holistic income maximisation service.
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| **Actions** *(all work to be completed by March 2022)* | **Measures** *(how and when will progress/change be evidenced)* |
| * Recruit a Project Midwife to work closely with Public Health & partners to drive forward activity and service improvement to address Child Poverty in Tayside.
* Child poverty and financial inclusion training to be delivered by Public Health & Welfare Right Services across pre-birth and early years networks.
* Child poverty and financial inclusion activity to be feature on staff meeting agendas.
* Management receive regular data updates on referrals and outcomes for families.
* Identified leads across universal services to maintain and/or increase activity which will help mitigate child poverty.
* Families will be offered digital devices and support via the Connecting Scotland Initiative. This programme will target households with children, pregnant women and care leavers up to the age of 26.
* A pilot will be developed with Education & Lifelong Learning and the Angus Council Skills Team supporting parents to access employment opportunities. If successful, this will be promoted Angus wide.
* Proposal for 5 Income Maximisation Officers – Working withing the school context – Using COVID Recovery Budget to fund
* Addition of Welfare Rights check into the MY World Nursery Induction booklet. Following on from the Midwifery/Health Visiting Pathways
 | Measures that could be used :* % Number of referrals ( increase)
* % Number of pregnant women and parents engaging with advice services ( increase)
* % Income Generated Benefit gains ( increase)
* % who would use the service again ( increase)
* Improved outcomes for parental employment and skills – 35 families have engaged to date
* Increased uptake of financial entitlements within the school context, crisis intervention
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| **Resources** *(what is needed to carry to deliver)* |
| **£30,000 for administration support for Local Authority Welfare Rights Teams across Tayside.** |