

NHS Highland & The Highland Council

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Key to Tables			
performance status		benchmarking	
Improving Performance			Better than average plus 5%
Static performance			Average +/- 5%
Declining performance			worse than average plus 5%
Pending Publication			PHS data



Annual Performance Report Appendix 1 National Integration Indicators

Highland Health and Social Care Partnership

NHS Highland & The Highland Council

national outcomes	national standard	national integration indicators	target 2023-24	frequency	Reporting Periods					NHS	benchmark	Scotland 2023
					2017-18	2019-20	2021-22	2023-24	2024-25			
1	NA	Percentage of adults able to look after their health very well or quite well	NA	biennial	94.00%	94.00%	92.40%	93.00%	NP			90.70%
2	NA	Percentage of adults supported at home who agreed that they are supported to live as independently as possible	NA	biennial	86.40%	82.30%	86.50%	71.90%	NP			72.40%
2 & 3	NA	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided		biennial	79.20%	75.40%	72.10%	60.50%				NP
3 & 9	NA	Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated	NA	biennial	76.30%	69.10%	72.10%	60.50%	NP			59.60%
3	NA	Percentage of adults receiving any care or support who rated it as excellent or good	NA	biennial	83.00%	79.20%	83.00%	75.70%	NP			70.00%
3	NA	Percentage of people with positive experience of the care provided by their GP practice	NA	biennial	87.00%	85.10%	77.20%	80.40%	NP			68.50%
4	NA	Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life	NA	biennial	85.70%	78.00%	84.30%	73.6%	NP			69.80%
6	NA	Percentage of carers who feel supported to continue in their caring role	NA	biennial	37.50%	28.70%	32.00%	31.20%	NP			32.00%
7	NA	Percentage of adults supported at home who agreed they felt safe	NA	biennial	83.70%	82.20%	86.00%	78.20%	NP			72.70%
1 & 5	NA	Premature mortality rate for people under 75 (per 100,000 population)	NA	year ending		397	407	400	389			442
1,2,4,5,7	NA	Emergency admission rate for adults (per 100,000 population)	NA	year ending		9,846	9,860	9,599	9,549			11,859
2,4,7	NA	Emergency bed day rate for adults (per 100,000 population)	NA	year ending		100,321	110,871	119,873	118,628			120,047

national outcomes	national standard	national integration indicators	target 2023-24	frequency	Reporting Periods					NHS	benchmark		Scotland 2023
2,3,7,9	NA	Emergency re-admissions to hospital within 28 days of discharge (per 1,000 discharges)	NA	year ending		118	114	116	116				104
2,3,9	NA	Proportion of last 6 months of life spent at home or in a community setting	NA	year ending					90.10%				89.2%
					2017-18	2019-20	2021-22	2023-24	2024				
2,4,7,9	NA	Falls rate per 1,000 population aged 65+	NA	year ending		15.00%	14.20%	14.20%	14.20%	14.80%			22.7%
3,4,7	NA	Percentage of care services graded “good” (4) or better in Care Inspectorate inspections	NA	year ending		84.20%	80.30%	83.00%	81.20%	81.20%			81.90%
2	NA	Percentage of adults with long term care needs receiving care at home	NA	year ending		53.70%	56.80%	58.70%	54.80%	56.50%			64.50%
2,3,4,9	NA	No. of days people aged 75+ spend in hospital when they are ready to be discharged (per 1,000 population)	NA	year ending		817	1019	1213	1822	2209			867
2,4,7,9	NA	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency	NA	year ending	21.30%	22.60%				data not published since 2019-20			
8	NA	Percentage of staff who recommend their workplace as good	NA	Recorded as “still under development” in cover page “future developments” section									
2	NA	Percentage of people admitted to hospital from home during the year, who are discharged to a care home	NA										
2,3,9	NA	Percentage of people who are discharged from hospital with- in 72 hours of being ready	NA										
2,3,9	NA	Expenditure on end of life care	NA										

Annual Performance Report Appendix 2 Together We Care Strategic Outcomes

Highland Health and Social Care Partnership

NHS Highland & The Highland Council

Strategic objective/ outcome	Priority	Measure	National outcome	Frequency	Reporting Periods						Comment
					03-2020	03-2021	03-2022	03-2023	03-2024	03-2025	
SO 3 Outcome 9 Care Well	2 (9a,9b, 9c)	Care at Home - Unmet Need No. of clients assessed and awaiting a service (waiting list includes DHD patients)		year end	155	163	241	329	371	446	number of clients per week, as at year end position, assessed for care at home and awaiting a package of care
SO 3 Outcome 9 Care Well	2 (9a,9b, 9c)	Care at Home - Unmet Need No. of hours required - assessed and awaiting a service (in- cludes DHD patients)		year end	593	911	1,455	2,659	2,660	2,942	number of scheduled hours per week required, including new clients and those already in receipt of a service requiring additional hours
SO 3 Outcome 9 Care Well	2 (9a,9b, 9c)	Care at Home current clients in receipt of a service		year end	1,871	2,020	1,895	1,770	1,776	1,664	number of clients per week in receipt of a care at home package, including internal and external provision as at year end
SO 3 Outcome 9 Care Well	2 (9a,9b, 9c)	Care at Home - hours per week current clients in receipt of a service		year end	14,440	15,921	14,905	13,333	13,413	12,962	
SO 3 Outcome 9 Care Well	2 (9a,9b, 9c)	Care at Home new clients in receipt of a service		year end	1,042	1,294	1,091	1,086	1,130	1,017	all clients (internal and external provision) recorded as "new" or "short service" during year
SO 3 Outcome 9 Care Well	2 (9a,9b, 9c)	Care Homes current long-stay residential & nursing placements		year end		1,723	1,758	1,747	1,693	1,654	number of residential placements as at March year end
SO 3 Outcome 9 Care Well	2 (9a,9b, 9c)	Care Homes new long-stay residential & nursing placements		annual			743	705	592	603	all residents (internal and external provision) recorded as "admission" or "short placement" during year

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Strategic objective/ outcome	Priority	Measure	National outcome	Frequency	Reporting Periods						Comment
					03-2020	03-2021	03-2022	03-2023	03-2024	03-2025	
SO 3 Outcome 9 Care Well	2 (9a,9b,9c)	Care Homes long-stay residential & nursing placements (closed)		annual			739	740	640	692	all residents (internal and external provision) recorded as "admission" or "short placement" during year
SO 3 Outcome 9 Care Well	2 (9a,9b,9c)	Carer Breaks Number of people who were approved funding		annual			381	536	533	517	Scheme commenced September 2021
SO 3 Outcome 9 Care Well	2 (9a,9b,9c)	Carer Breaks Total funding approved (£)		annual			999,980	1,227,547	1,015,103	643,492	
SO 3 Outcome 9 Care Well	2 (9a,9b,9c)	SDS Option 1 Current number of clients in receipt of a direct payment		year end	373	403	442	568	680	800	number of people in receipt of a direct payment as at March year end
SO 3 Outcome 9 Care Well	2 (9a,9b,9c)	SDS Option 2 Current number of clients in receipt of an ISF		year end	266	241	235	205	256	299	number of people in receipt of an ISF as at March year end

NHS Highland & The Highland Council

No	Together we care outcome	Description	Main Service	Link to National & Ministerial outcomes and indicators
1	Start well	Give every child the opportunity to start well in life by empowering parents and families through information sharing, education, and support before and during pregnancy	Maternity & Neonatal Services PNIMH	
2	Thrive Well	Work together with our families, communities and partners by building joined up services that support our children and young people to thrive	CAMHS / NDAS / Corporate Parenting / Integrated Children's Services / Paediatrics	
3	Stay Well	Work alongside our partners by developing sustainable and accessible health and care focused on prevention and early intervention	Public Health / Sexual Health / Gender Identity / Women's Services	National outcome 1
4	Anchor Well	Be an anchor and work as equal partners within our communities by designing and delivering health and care that has our population and where they live as the focus	Public Health / Comms & Engagement	
5	Grow Well	Ensure that all colleagues are supported to be successful in their role and are valued and respected for the work they do. Everyone will be clear on their objectives, receive regular feedback and have a personal development plan	People & Culture / All services	
6	Listen Well	Work in partnership with colleagues to shape our future and make decisions. Our leaders will be visible and engage with the wider organisation, listening to, hearing, and learning from experiences and views shared	People & Culture / All services	National Outcome 8
7	Nurture Well	Support colleagues' physical and mental health and wellbeing through all the stages of their life and career with us. We foster an inclusive and kind culture where difference is valued and respected	People & Culture / All services	
8	Plan Well	Create a sustainable pipeline of talent for all roles, and excel in our recruitment and onboarding, making us an employer of choice both locally and nationally	People & Culture / All services	
9	Care Well	Work together with health and social care partners by delivering care and support together that puts our population, families, and carers experience at the heart	Adult Social Care	National Outcome 2, 3, 4, 6, 7, 9 Ministerial Strategic Indicator 6
10	Live Well	Ensure that both physical and mental health are on an equal footing, to reduce stigma by improving access and enabling all our staff in all services to speak about mental health and wellbeing	Mental Health Services	National Outcome 2, 3, 4, 7, 9 Ministerial Strategic Indicator 2c

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Outcome 1 Highland's Children will be safe, healthy, achieving, loved, nurtured, active, included, respected and responsible				
	target	baseline	current	data source
Indicator 1 The number of young carers identified on SEEMiS will increase	improve from baseline	68		Education & Learning
analysis				
Indicator 2 the number of households with children in temporary accommodation will reduce	95	100		Education & Learning
analysis				
Indicator 3 Percentage of children reaching their developmental milestones at their 27 – 30 month health review will increase	85%	75%	82%	Child Health
analysis: Data from NHS, last updated Jan – Mar 23. Note in the data file that this is incomplete. Data shows a slightly decreasing number of children achieving their developmental milestones at the 27-30 month Child Health Surveillance review. This is correlated to the number of assessments being undertaken and the targeted approach which is part of the mitigation plan to improve outcomes. (note Indicator #6)				
Indicator 4 Percentage of children in P1 with their body mass index measured	95%	75%	82%	Child Health
analysis: data last updated in 2021-22 by NHS Highland				
Indicator 5 The rate of LBW babies born to the most deprived compared to those born in the least deprived parts of Highland.	improve from baseline	1%		Population Health

NHS Highland & The Highland Council

Outcome 1 Highland's Children will be safe, healthy, achieving, loved, nurtured, active, included, respected and responsible				
	target	baseline	current	data source
analysis: A number of key professionals, including midwives, health visitors, Community Early Years Practitioners (CEYP) and specialist breast feeding support workers support women to exclusively breastfeed their baby in Highland. Breastfeeding rates have been consistently good in Highland. The performance has dipped slightly in the past quarter, however an improvement plan has been put in place to address this, particularly to a partnership approach, between NHH and THC, is being tested to improve support for breast feeding in remote and rural Highland. This involves better use of core support worker roles (CEYP) through enhanced additional infant feeding support. It is hoped this approach will provide a more effective and equitable service for families across Highland. This will be evaluated to support the scale and spread of a more universal approach to infant feeding support across other rural locations in Highland				
Indicator 10 Maintain 95% Allocation of Health Plan indicator at 6-8 weeks from birth (annual cumulative)	95%	97%	NK	Child Health
analysis: not updated in NHH file				
Indicator 11 Maintain 95% uptake rate of MMR1 (% of 5 year olds)	95%	95%	95%	Child Health
analysis: latest data from NHH to Dec 22				
Indicator 12 90% CAMHS referrals are seen within 18 weeks	90%	80%		CAMHS, Education & Learning
analysis: considerable progress has been made in clinical modelling, performance and governance. Progress has been made despite despite a lack of appropriate supports and improvements in e – health with much of the work of business analyst colleagues having to be completed manually due to limitations of current systems. The service has halved the number of patients waiting since the peak of May 2022 and reduced longest waits from over 4 years just over 2 years projected clearing of cases over 2 years by April 2023. This progress has been achieved with a workforce funded establishment at the second lowest of mainland boards with a current vacancy rate of 48% with ongoing national workforce shortages and additional recruitment challenges of remote and ruralservices. We are diversifying our staff profile and adopting a grow our ownstrategy which is showing promise but will be a medium term approach to increasing capacity.				
Indicator 16 Percentage of children and young people referred to AHP Service OCCUPATIONAL THERAPY, waiting less than 18 weeks from date referral received to census date (Interim Measure) - NOT 18RTT METHODOLOGY	90%	85%	51%	Health & Social Care

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Outcome 1 Highland's Children will be safe, healthy, achieving, loved, nurtured, active, included, respected and responsible				
	target	baseline	current	data source
Analysis: There are a number of contributory factors to the increase in waiting times for OT over the last year, including an increase in need/number of request, limited resilience due to staff sickness/availability of staffing within the small paediatric OT service in Highland, increase in the urgent area of work, hospital discharges from out of authority and acute complex cases in more rural areas and increased surgeries for CYP post covid. A particular pressure has arisen since 2020 since the removal of a number significant portion of ASN support in schools. A mitigation plan is in place which includes: A Central approach to managing waiting times for cross team overview and prioritisation, revisiting geographical boundaries to enable longer waits to be actioned, consideration of alternative ways of interventions (telephone, telehealth, face to face), pre request discussions are being carried out and increasing to manage where possible advice / support and intervention and building capacity through reduction of time on Just Ask helpline. Clinic-based services have been tried with limited success as many CYP need school / home visits as well. Some aspects of the service have been redesigned to ensure upfront intervention and support and reduce the need for Requests in some areas (e.g. Sensory , Post diagnostic support). Further data cleansing is planned to ensure figures are correct. OT have recently redesigned some aspects of their service to ensure upfront intervention and support, aiming to reduce the need for Requests in some areas. A steady staffing flow over the coming months is required to begin to improve the 18 week RTT target				
Indicator 17 Percentage of children and young people referred to AHP Service DIETETICS, waiting less than 18 weeks from date referral received to census date (Interim Measure) - NOT 18RTT METHODOLOGY	90%	88%	66%	Health & Social Care
Analysis: Paediatric dietetics consistsof a small specialist team. The increase in waiting times has been a direct result of an increase in need/referrals (from 71 requests in 2022 to 86 per month in 2023) to the service and a decrease in staffing availability, with an average of 28% reduction across dieticians and support staff as a result of long term sickness, carers leave etc. A review of the service was undertaken in 2022 with mitigating action plan which included further prioritisation. This includes a greater focus on early prevention and intervention and working with schools and families, addressing emerging issues at an earlier stage working and through the implementation of new focussed pathways around particular areas of increased need. (eg: selective eating). The plan also is driving forward change to the approach addressing infant allergy which aims to provide early support for parents of infants with feeding difficulties and a reduction in the misdiagnosis of cow's milk protein allergy as well as contributing to service development for the increased number of CYP who have diabetes including supporting access to technology for more vulnerable CYPs, to support self management A period of full staffing may be possible in coming months, and this should improve waiting times to within target by the autumn as long as demand does not continue to significantly increase. The mitigation plan will be adapted according to presenting need with risks escalated as necessary.				
Indicator 18 Increase the uptake of specialist child protection advice and guidance to health staff supporting children and families at risk	90%		46%	Health & Social Care
Analysis:				
Indicator 23 Increase the uptake of specialist child protection advice and guidance to health staff supporting children and families at risk	improve from baseline	59%	100%	Health & Social Care
Analysis: IRDs are the interagency tripartite (health, social work and police Scotland) discussions which form part of the risk assessment and planning for children at risk of harm. Child Protection Advisors, are accountable for co-ordinating, representing and analysing all information from across the health systems as part of the IRD process. There has been a 48% increase in the Interagency Referral Discussions (IRDs) between 20/21 and 22/23. This created significant pressure to the service including risks to the delivery of stat/man Child Protection training across the partnership and for providing supervision to staff to universal and targeted health services. An action plan was implemented to ensure the tripartite process was secured. These actions included upskilling from the general workforce to be trained in being the agency decision maker at IRD. Notwithstanding this, the service, and ability to retain the national tripartite approach to child protection risk management, continues to be at risk. The risk is likely to increase in the incoming months as a result of implementation of the new Child Protection Guidance and an increase in the number of IRDs				

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Outcome 2 The voice and rights of Highland's children will be central to the improvement of services and support				
	target	baseline	current	data source
Indicator 24 The number of children reporting that they feel safe in their community increases	improve from baseline	85%	88%	Education & Learning
Analysis: Most recent data from the 2021 lifestyle survey with over participants from P7, S2 and S4 pupils. Baseline for the data was established in 2011 – the survey is undertaken every two years across Highland schools Large improvement in the value for the most recent survey, with an increase from 55.41% in 2019 and 58.98% in 2017.				
Indicator 25 Self-reported incidence of smoking will decrease	improve from baseline	13%	3%	Education & Learning
Analysis: Most recent data from the 2021 lifestyle survey with over participants from P7, S2 and S4 pupils Baseline for the data was established in 2011 – the survey is undertaken every two years across Highland schools Mean of 3.28% (P7: 0.44%, S2: 2.71% and S4: 6.70%) is a decrease from 5.32% in 2019. This downward trend has been seen for a number of years.				
Indicator 26 The number of children who report that they drink alcoholat least once per week	improve from baseline	20%	6%	Education & Learning
Analysis: Most recent data from the 2021 lifestyle survey with over participants from P7, S2 and S4 pupils. Baseline for the data was established in 2011 – the survey is undertaken every two years across Highland schools Mean of 5.56% (P7: 0.43%, S2: 1.37% and S4: 14.90%) is a decrease from 8.79% in 2019. This downward trend has been seen for a number of years.				
Indicator 33 The number of children entering P1 who demonstrate anability to develop positive relationships increases	improve from baseline	91%		Health & Social Care
Analysis:				
Indicator 34 The delay in the time taken between a child being accommodated and permanency decision will decrease (Target in Months)	15	55	21	Health & Social Care
Analysis: This data is reported quarterly on PRMS under the title “Average months between child accommodated to permanence decision at CPM Qtr”. The latest update was for Q4 21/22 and the baseline was established in 2016.				
Indicator 35 The number of care experienced children or young people placed out with Highland will decrease (spot purchase placements)	3	8	3	Health & Social Care
Analysis: This data is reported monthly. The baseline was established in 2016.				
Indicator 36 The number of care experienced children or young people in secure care will decrease	3	8	3	Health & Social Care

NHS Highland & The Highland Council

	target	baseline	current	data source
Analysis: This data is reported monthly. The baseline was established in 2016.				
Indicator 37 There will be a shift in the balance of spend from out of area placement to local intensive support, to reduce the number of children being placed out with Highland through the Home to Highland programme	50%	10%	38%	Health & Social Care
Analysis: This data is collected monthly. The baseline was established in 2018.				
Indicator 38 All children returning "Home to Highland" will have a bespoke education/positive destination plan in place	100%	22%	15%	
Analysis: This data is collected annually. The baseline was established in academic year 2018/19				
Indicator 44 Number of concerns recorded for children placed on the child protection register at a pre-birth or initial conference		58	90	HHSCP minimum data set
Analysis: This data is collected quarterly and reported in the Child Protection Minimum Dataset. Latest data from Q3 2022/23. In Q3 2022/23, there were 90 concerns recorded and showed an increase from the low value in the prior quarter. Emotional Abuse was the most common concern recorded across Highland in the Quarter, but there was also a notable increase in Physical Abuse in the quarter.				
Indicator 45 Number of children and young people referred to the Children's Reporter	reduce	8	1	HHSCP minimum data set
Analysis: This data is collected quarterly and reported in the Child Protection Minimum Dataset. Latest data from Q3 2022/23. There tended to be little variation in the figures until last quarter, where the number of children referred on Non-Offence Grounds has increased significantly and remained at this high level. In particular, there have been sharp rises in the reason for referral being: "Child's Conduct Harmful to Self or Others", rising from 49 in Q1 2022/23 to 94 in Q2 and 130 in Q3, and "Lack of Parental Care", rising from 93 in Q1 to 125 in Q2 and 180 in Q3. The current figure is much higher than the baseline figure				
Indicator 47 The number of non-offence referrals taken to a hearing by the Reporter	reduce	218	417	HHSCP SCRA quarterly report
Analysis: Data reported quarterly from SCRA, last update for Q3 22/23 (April 23). There has been a sharp and significant increase in recent updates in the total number of non-offence referrals				
Indicator 48 Number of Children's Hearings held		263	202	HHSCP SCRA quarterly report
Analysis: Data reported quarterly from SCRA, last update for Q3 22/23 (April 23). The number of Children's Hearings has remained relatively steady in recent quarters, with the most recent update being the lowest level since Q4 21/22				

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	target	baseline	current	data source
Indicator 54 Number of looked after children and young people with prospective adopters	increase from baseline	12	16	HHSCP SG annual return
Analysis: This data is collected and quality-assured annually as part of the statutory returns to Scottish Government. The snapshot for the data is 31 July. Number of looked after children and young people with prospective adopters has decreased in the year from 22 to 16. This decrease is in line with the decreases seen above (-28%). It is, however, above the baseline figure.				
Indicator 55 Number of looked after children and young people within a local authority provided house	reduce from baseline	81	65	HHSCP SG annual return
Analysis: This data is collected and quality-assured annually as part of the statutory returns to Scottish Government. The snapshot for the data is 31 July. While the number of looked after children within a local authority provided house has decreased from 70 in 2021 to a provisional figure of 65, this represents a greater %age of overall LAC. The number of LAC has reduced by -17% but those LAC within a local authority provided house has only decreased 7%.				
Indicator 56 The number of LAC accommodated outwith Highland will decrease	30	44	17	Health & Social Care
Analysis: This data is reported quarterly on PRMS, with the baseline being established in 2016. The last update was in April 2023. The indicator on PRMS is titled: The average no. of LAC accommodated outwith Highland - Quarterly. The current value of 17 is a continued decrease since Q3 22/23, and represents the lowest value since the baseline was established.				
Indicator 57 The percentage of children needing to live away from the family home but supported in kinship care increases	20%	19%	18%	Health & Social Care
Analysis: This data is reported monthly on PRMS, with the baseline being established in 2016. The last update was in April 2023. There has been a slight decrease in the monthly figure for the last three months, with the current figure sitting below both the target and baseline figure				
Indicator 58 The number of children where permanence is achieved via a Residence order increases	82	72	120	Health & Social Care
Analysis: This data is reported monthly on PRMS, with the baseline being established in 2016. The last update was in April 2023. There has been an overall steady increase in the value in recent months, and a significant increase in both the target and baseline figure.				

Annual Performance Report Appendix 4 Ministerial Strategic Indicators

Highland Health and Social Care Partnership



NHS Highland & The Highland Council

MSG No.	Standard Indicator	target	Reporting Periods					Comments
			2019-20	2020-21	2021-22	2022-23	2023-24	12-month total
MSG 1	Number of emergency admissions - North Highland		23,008	19,812	20,852	20,843	20,534	12-month total
MSG 2A	Unplanned bed days (Acute Services)		184,712	159,070	183,542	200,660	178,194	12-month total
MSG 2C	Unplanned bed days (Mental Health)		38,544	31,934	29,327	27,267	29,324	12-month total
MSG3	ED Attendances		40,451	31,598	38,185	40,804	42,170	12-month total
MSG4A	Delayed Discharges, bed days all reasons		42,611	28,223	34,673	44,897	64,269	12-month total
MSG4C	Delayed Discharges, bed days H&SC reasons		31,380	19,819	24,482	31,998	43,864	12-month total
MSG5	End of life care, percentage of last 6 months in the community		89.10%	91.20%	90.70%	89.80%	Scotland 89.10% (2022-23, latest provisional)	
MSG5	End of Life, percentage of last six months in hospital / hospice		10.80%	8.80%	9.40%	10.20%	Scotland 10.9% (2022-23, latest provisional)	
MSG6	Balance of Care, percentage of population in community settings		93.10%	93.10%	93.40%	93.50%		

Highland Integrated Children's Service Plan 2023–2026

Annual Report 2024/25





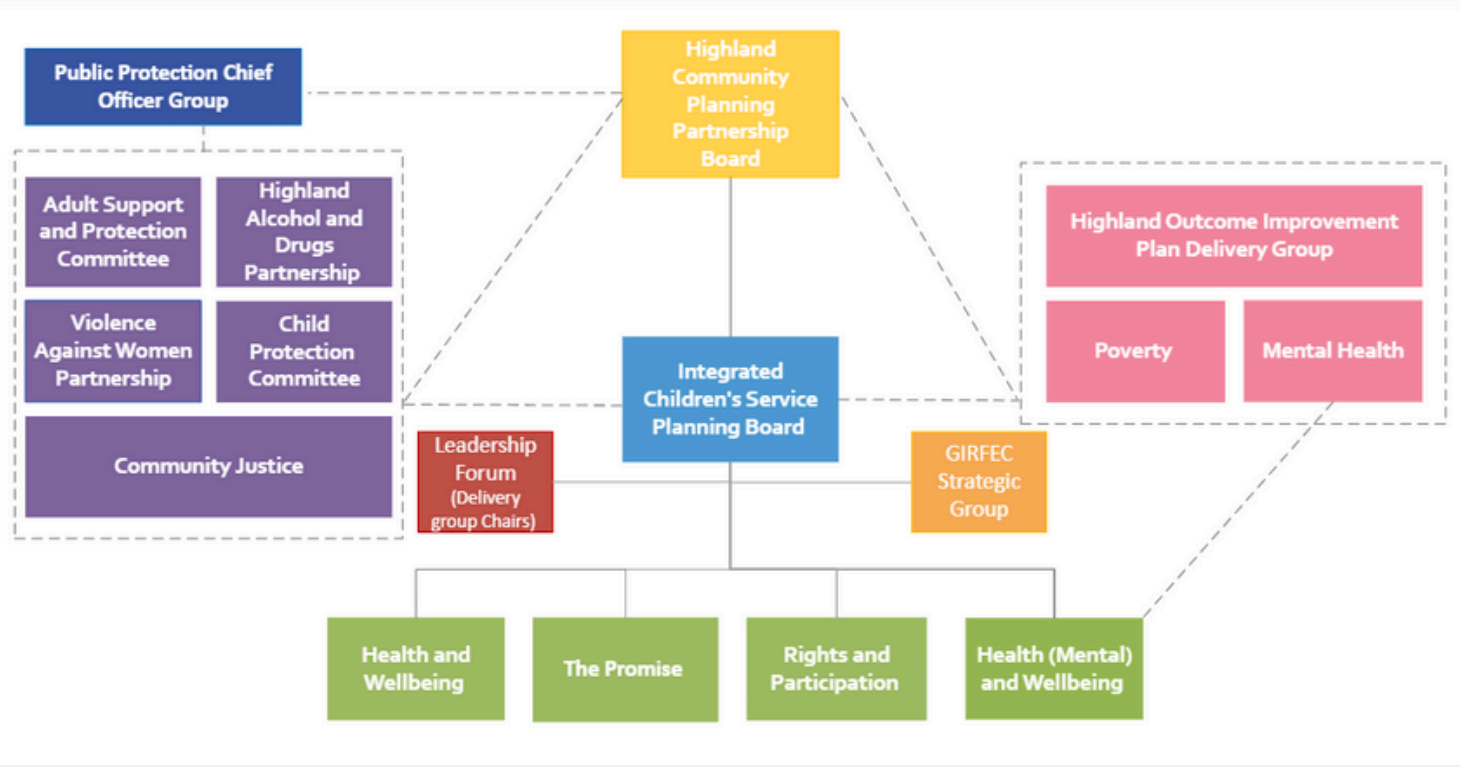
Integrated Children's Service Board



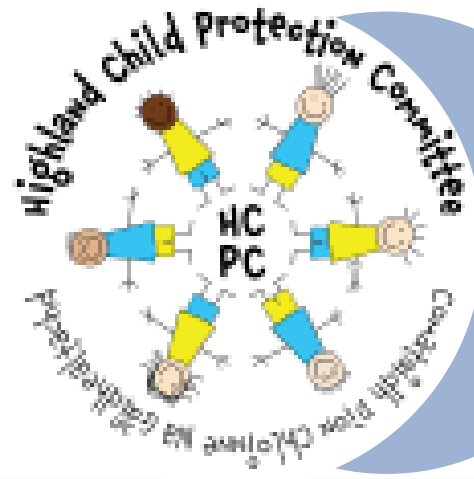
Highland Children's Service Plan sits within a context of the Community Planning Partnership and the Integrated Children's Service Planning Board, strategically leads the improvement of outcomes for all Highland's Children and Families.

The Plan articulates how partners work together to provide services which are organised, equipped to deliver high-quality, joined-up, trauma-informed, responsive and preventative support to children and families. [Find full plan here](#)

The annual report represents the work undertaken during 2024/25 and outcomes achieved in the delivery of the integrated children's service plan 2023-2026. The change ideas and priorities are implemented through each of the delivery groups.



DELIVERY GROUPS



The Child Protection Committee



The Promise Board



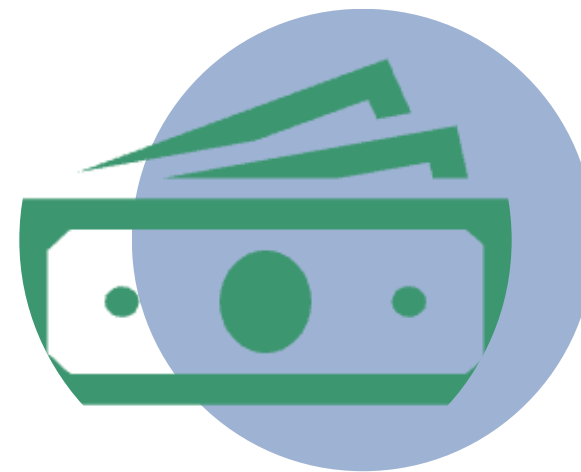
Health and Wellbeing



Drugs and Alcohol



Rights and Participation



Poverty Reduction



**Health and Wellbeing
(Mental Health)**

The delivery groups are partnership groups made up of statutory and 3rd Sector representatives. The groups take a life course approach to their improvement work of the Integrated Children's Service Plan

VISION 26

Another successful Vision event was held with over 200 attendees and 60 local organisations showcasing the work to support children, young people and families in Highland and the contributions to the Children's service plan. Vision 26 launched the Children and Young People Participation Strategy and the child friendly version of the Integrated Children's Service Plan. Celebrating the incorporation of UNCRC into Scots Law,



CHILDREN'S RIGHTS AND PARTICIPATION WEBSITE

USERS

478

VIEWS

2000

CLICKS

6300

KEY HIGHLIGHTS



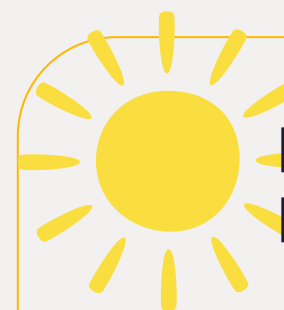
WORRIED ABOUT MONEY APP -
2300 VIEWS AND 213 USERS



100'000
Free Period
packs/ products
distributed
across Highland

1000 Views
of the Vaping
Information
Booklet

Integrated Children
Service Board engaged
in **4** development days
to focus in on
workstreams of
Trauma Informed
Practice
The Promise 24-30
Child Protection
Whole Family Wellbeing



BRIGHTER BEGINNINGS: WHY EARLY YEARS MATTER'S

Early years event Brighter Beginnings hosted by Inverness Family Centre and supported by Highland CPC was held at Eden Court on 3rd March 25. Over 500 Families and Children under 5 were welcomed along to meet services and enjoy the activities. Celebrating the importance of the Infant Pledge and working alongside families to give our youngest children the best possible start in life. The event welcomed key note speaker Dan Wuori. [More details on event here](#)

Getting it Right for Every Child (GIRFEC)

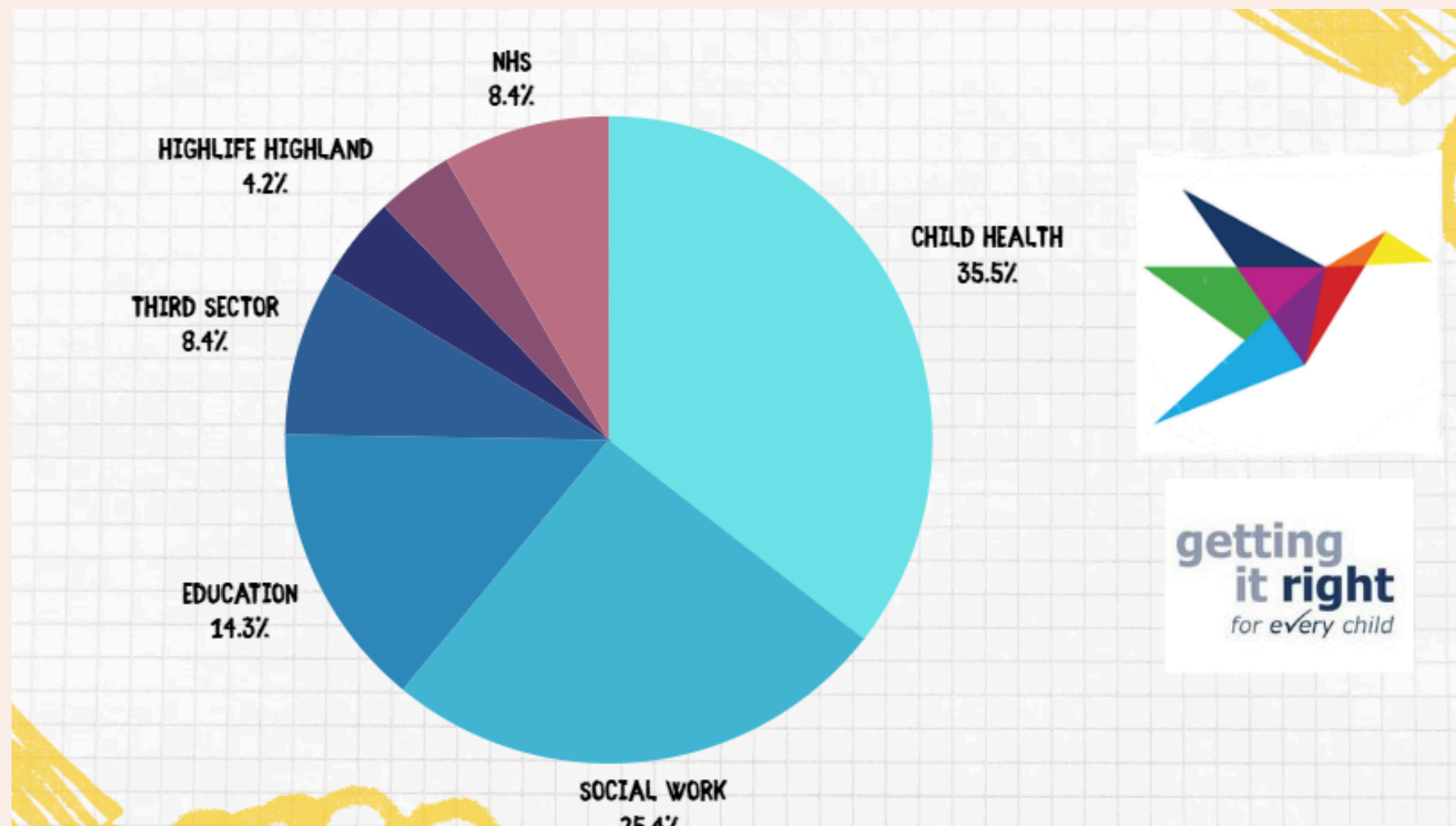
A renewed focus was developed following the updated National GIRFEC Guidance and Highland launched the GIRFEC refresh and reset, lead by The Integrated Children's Service (ICS) Board with facilitators provided across the partnership including CALA, Child Protection Committee and The Whole Family wellbeing team. This began with planned face to face sessions Highland wide. During these sessions we held discussions in relation to the eLearning module, Child's Plan, Chronologies and Implementation of the refreshed guidance. We received a wealth of feedback across the services.

Delivery consisted of 9 'in person' sessions

Overall, 284 attendees. The workshops were held in 7 locations between March and June 2024:

An improvement plan was developed based on the feedback from practitioners

Highland GIRFEC elearning module was developed and so far been completed by 294 practitioners



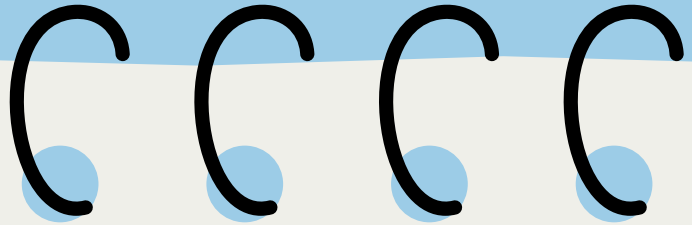
Following the feedback from refresh and reset sessions the multi agency GIRFEC Strategic Group has formed to take forward the improvement plan, this is underway and includes;

- Review of the Child's Plan (started Nov 24)
- Development of Practice Guides for Childs Plans, Additonal Support needs and Chronologies.
- GIRFEC Multiagency Training

Whole Family Wellbeing Programme

The Whole Family Wellbeing team have been undertaking significant work across Highland working towards the programme’s aim to provide holistic whole family support, readily available across Highland to families that need it, when they need it for as long as they need it. Working with local organisations, assessing local need and funding activity inline with the programmes funding strategy, whilst taking a whole system approach to delivery of services provided to support children and families.

Inverness High School ASG Test of Concept. Partnership working with CALA, Thriving Families and Home-Start East Highland working as an alliance to provide Holistic Whole Family Support through the Family Links Project within the Inverness High School ASG area. This is now reaching a 6 month evaluation of the project.



Self-Assessment Toolkit

The WFWP Self-Assessment Toolkit was launched and completed by wide range of 3rd Sector organisations, there is now a further requirement to disseminate the WFWP Self-Assessment Toolkit through our statutory services in Highland. This will allow for a whole system approach to quality assurance across services both in statutory and third sector, who provide support to families.

[Can be found here](#)

CHILDREN AND FAMILIES
AT THE CENTRE

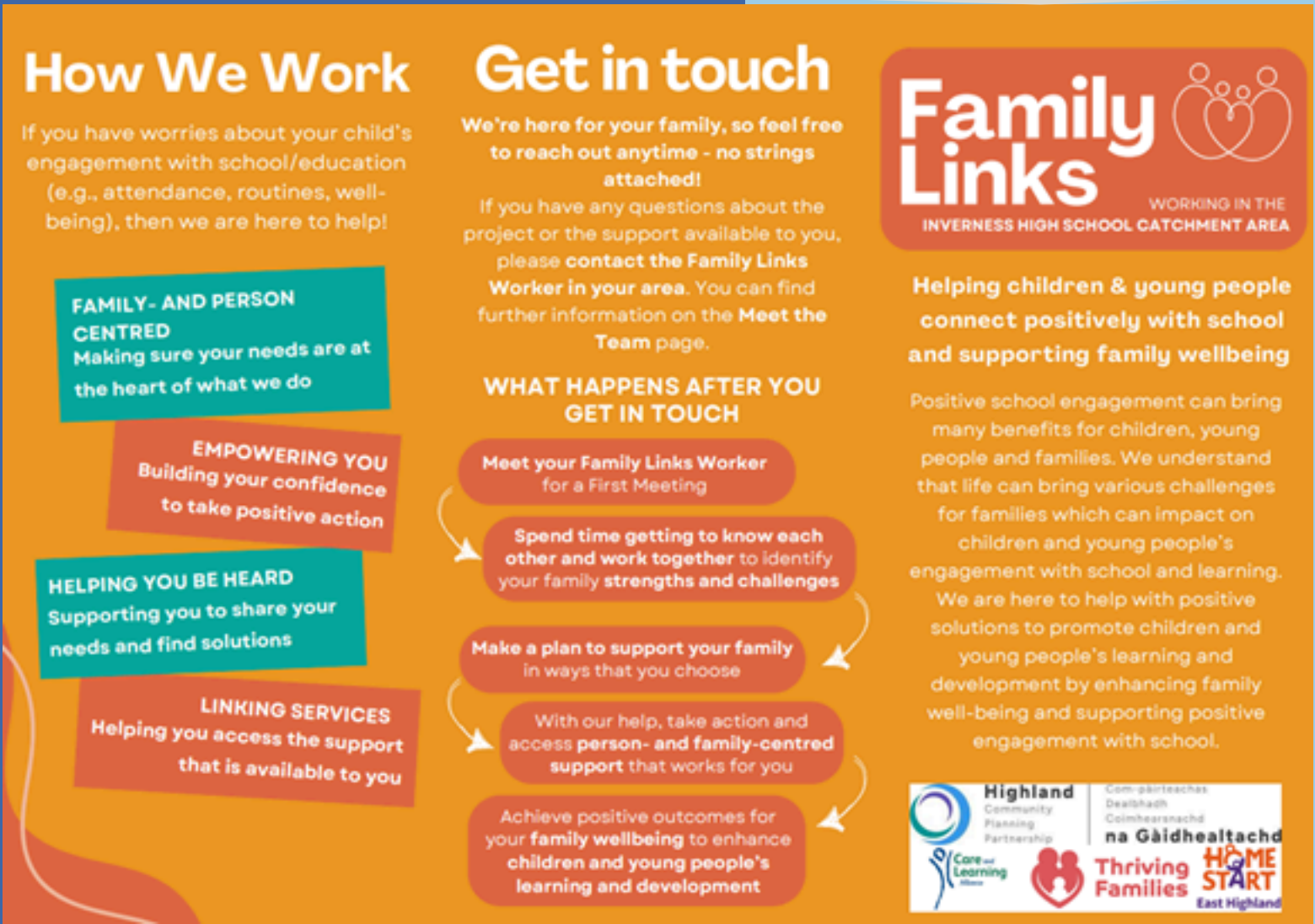
AVAILABILITY
AND
ACCESS

WFWB -
News
Round up
distributed
to over
800
people
monthly.

Detailing
locality
and
highland
family
support
activity

WHOLE SYSTEM
APPROACH / JOINED UP
SUPPORT

LEADERSHIP
WORKFORCE
CULTURE



Whole Family Wellbeing Funding Strategy

The WFWB Funding strategy was developed to define the approach, application/allocation process and governance of the Whole Family Wellbeing fund, to services who are providing Holistic Whole Family Wellbeing Support across Highland. Funding Strategy

Element 1 Funding

Element 1: Locality Community Based Activity Small Grant Fund (>£10K)

To date a total of 34 applications were received from Third Sector Organisations, with 30 of those being successful.

A total of £286,583.64 has been released so far to the 30 successful Projects across Community Partnership areas



Element 2 Funding

£1,257,308.00

Funding was awarded for element 2 tests of concept to improve the reach of Holistic Whole Family Support across various thematic work streams, covering a broad range of support services meeting family needs in Highland.

Poverty

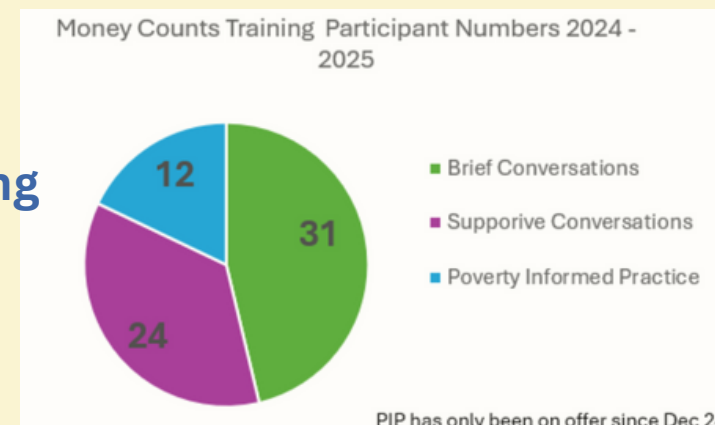
Money Counts Training delivered since April 24.

5x Brief Conversations,

4x Supportive Conversations Training and

2x Poverty Informed Practice Training

This continues to be offered as a means of increasing the number and quality of conversations around money worries. The training highlights the **Worrying About Money? Leaflet** and app as tools to support individuals access a range of appropriate support services and organisations.



Local Child Poverty Action
Update Report produced
and published

Find worrying about
money leaflet here

2024 has seen further delivery of projects across the Highlands and sessions to boost numeracy confidence in everyday life ranging from outdoor family fun days to weekly activities within highlife libraries for families to explore everyday numeracy through games, crafts and play. With the introduction of additional evening classes to achieve maths qualifications and the development of digital tools to support learning.

Lead Officer for Period Products attended various events across the summer in conjunction with the Welfare Support Team. Events attended included **Belladrum Music Festival**, Inverness Highland Games, Pop up shops in Eastgate Centre, **Vision 26** at Inverness Leisure Centre with over **100'000** packs of free period products distributed across Highland

Caithness Parental Employability Pilot

The aim of the project is to develop and deliver a 6-week, 2 days-a-week pilot place-based offer in Wick that is targeted at helping approximately 8 unemployed parents overcome some of the barriers they face to securing fair and sustainable employment in the local area. This in turn has the potential to reduce levels of child poverty in the area and help employers secure the staff they need. This will be rolled out wider across Highland following successful evaluation of the pilot

Development of Flexible Models of Childcare in Rural Areas

- New models piloted. A more sustainable delivery model in place, including a shift in the balance of Early Learning and Childcare delivery between Local Authority and Private providers.
- Successful Alcohol and Drug Partnership funding bid focused on new models of delivering rural childcare
- ADAP funding to engage rural consultant to support CALA in development of the integrated Single Care Model (SCM) pathway pilot and working group has met and continues to develop model
- Partners include CALA, HIE, Highland Council, NHS Highland, Care Inspectorate and 3rd/private providers.
- Challenges of rural delivery of childcare been highlighted to Minister for Children and Young People as well as MSPs to gain support to allow flexibility in models.
- Close partnership working on new models for childminding

Child Protection

GIRFEC and Child Protection Procedures were launched in December 2024. These joint procedures were brought together to reinforce the importance of the continuum of care, support and protection. An APP has been developed for easy access to the guidance.

GIRFEC and CP Procedures plus APP

In 2024/25 CPC and partners delivered training to **3632** people

492
downloads
of the
GIRFEC and
Child
Protection
Procedures
APP

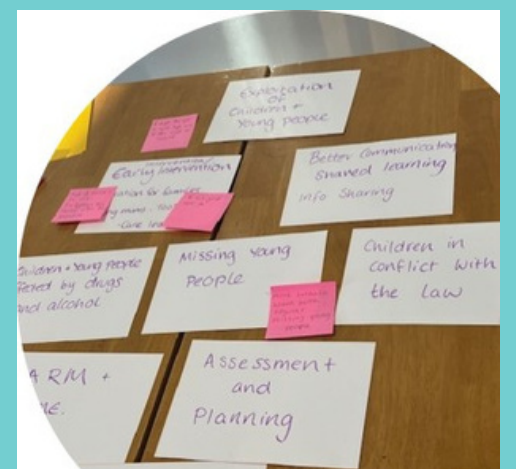
Highland Child Protection Committee
Biennial report
has been produced and published

To provide support for older young people in Highland, we have continued to work in partnership with Police Scotland, Action for Children, Aberlour and Barnardos to deliver specialist services for young people at risk of exploitation, including delivery of an outreach service through The Anchor Project. We have also worked with the CYCJ, Youth Action Team and our partners in the Highland Alliance to develop an Older Young People Action Plan to support young people at risk of community harm and those involved with justice services.

The Vulnerable Pregnancy Pathway has been reviewed and relaunched as Women, Pregnancy and Additional Support Needs guidance. Led by our Midwifery Development Officers, this activity forms part of the CPC 'Starting Out' Action Plan to work together and make sure families are at the heart of all our assessment and planning processes. The voice of our youngest children is a key priority and on 3rd March 2025 we relaunched our Consulting with our youngest children toolkit developed in partnership with the Care and Learning Alliance. All resources can be found at www.hcpc.scot.

The Scottish Child Interview Model (SCIM) aims to support children who have experienced abuse or harm, making sure they are interviewed in a trauma informed way, and receive ongoing support through Bairns' Hoose standards. Funded by the Scottish Government, we have been working to create warm and welcoming spaces for children, families and services to work together and support recovery. We have now recruited a Bairns Hoose Manager and a full-time SCIM team to take this work forward. Further information on Bairns Hoose and SCIM is available at www.hcpc.scot/resources.

The launch of Scottish Child Interview Model and Bairns Hoose took place in May 2024.



Highland welcomed Graeme Armstrong (author of the bestselling novel The Young Team and presenter of the BBC documentary series Street Gangs). This unique opportunity allowed staff and practitioners working with young people in the Highlands to gain valuable insights into gang culture, youth violence, and the power of connection and healing

The Promise



Highland Promise Plan 2025-2028

Highland 's first Promise Plan was developed and is built on the voices and experiences of care experienced children and young people through a broad range of engagement and participation activities across Highland and developed as a collaborative Promise Board Plan

[Find the Highland Promise Plan here](#)

Family Group Decision Making

Referrals to Family Group Decision Making for 135 children from 92 families.

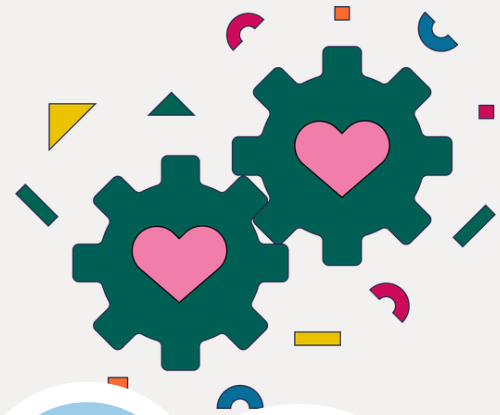
67% of referrals relate to children and young people who are on the edge of care,

21% relate to children and young people who are Looked After Away from Home

12% are for young people transitioning from care.

This included supporting families to create, review a family plan. Families that did not want to create a family plan, worked with coordinators to make commitments to what they would provide for the child or caregivers.

- Trauma Summit held with senior leaders across partnerships in Sept 2024, supported by MSPs, Scottish Government and Improvement Service
- Development session on Trauma Informed Systems held , in line with Road Map and Self Assessment tool (Jan 2025) Actions identified from the meeting are being take forward.



Children's Rights and Participation Service

Children's Rights and Participation service recruited 3 Child Rights and Participation Officers.

Their role is to support the council's commitment to 'Keeping The Promise' and actively listening to children and young people about decisions that affect their lives

Highland now have

28

Promise Ambassadors

Has Answers APP

HasAnswers developed by the Calman Trust, is designed to equip young people to manage the challenges they may encounter as they move towards independent living. **214** Individuals have registered. Advice most frequently accessed is

- Help to find or keep a job (50)
- Money related information/advice (28)
- Ways to save money (19)
- Cooking for yourself (19)
- Things that cause worry (mental health) (14)
- Recipes (14)

Direct help from the HasAnswers team is available for further support.



Rights and Participation

Children’s Rights and Participation website was developed and launched. This includes The Library of Voices is live and there are already examples of consultations uploaded.

Users
478

Views
2000

Clicks
6300


Trainee training for understanding of UNCRC and Impact assessments went live **97 staff have accessed and completed these**

Children’s Rights and Wellbeing Impact Assessments have now been undertaken for **149** strategic developments and actions across Highland Council.

Children and Young People Participation Strategy

Development was led by Inspiring Young Voices and was designed ensuring the meaningful and equitable participation of children and young people at the heart of the process. With input gathered from almost 800 children and young people from across Highland. Implementation is now underway with focus on training, support and Voice



**Highland**
Community Planning Partnership

**Com-pàirteachas Dealbhadh Coimhearsnachd na Gàidhealtachd**

**Highland Children and Young People’s Participation Strategy**
2024 - 2029*“Together we can all make change”*

Health and wellbeing (Mental Health)



Community Based Supports

An interactive session was led by colleagues from Public Health to explore how we align to the Framework's four outcomes around community-based supports and services Scottish Government CYP Community Mental Health and Wellbeing Supports and Services Framework, : which will enhance the work of the delivery group

A collective focus on Pathways has been agreed and in development for young people to gain a better understanding across the system and so any gaps can be identified.

Outcome 1: Wellbeing

Children, young people and their families have improved mental health and wellbeing.

Outcome 2: Early guidance and support

Children, young people and their families can access guidance and support at an early stage, when and where they need it.

Outcome 3: Clearer pathways

Children, young people and their families receive the help they need, and pathways to supports and services are clearly communicated.

Outcome 4: Whole-system approach

Supports and services are part of a whole system where key partners work together to improve the mental health and wellbeing of children, young people and their families, all of whom are integral to the co-design of supports and services.

Mental Health and Wellbeing delivery group held a development day held to map Highland Services across the continuum of need using the THRIVE Framework

CYP Community Mental Health and Wellbeing fund been introduced to the Integrated Children Services Board and encouragement has been made for better use of partnership funding by working together. Aligned to the WFWP Funding Strategy and enabling a joined-up approach for improvements to community-based supports and services across Highland

Drugs and Alcohol



Planet Youth- 5 Local Action Groups have agreed 3 clear goals, focused on reducing risk factors and strengthening protective factors for substance use initiation, and improving overall mental and physical health outcomes.

Increased provision of activities for young people via Highlife Highland, with estimated 645 young people involved in specific Planet Youth activities since July 24



Vaping booklet has been produced by NHS Health Improvement Team with over +1000 views, with positive feedback.

Webinar delivered with Safe, Strong and Free with a focus on bullying, coincided with anti-bullying week, and was available online

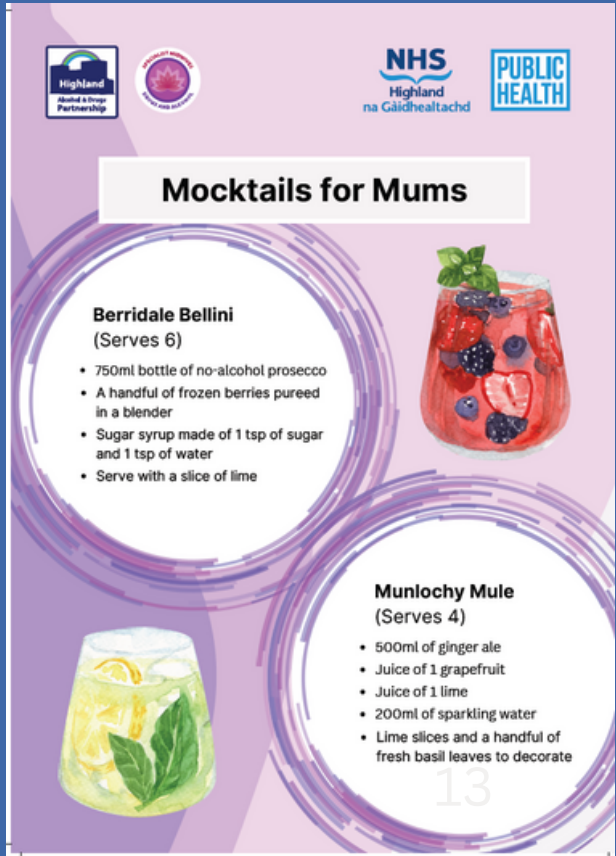


Midwifery Packs

Packs have been made up with nice re-usable bags to have available for women – 2 small, 2 medium and 2 large. Maternity department store one of each size, these are to help reduce stigma and respect everyone's right to dignity. Each bag contains a dressing gown, pyjamas, slippers, 2 pairs of socks, 4 pairs of pants, a water bottle, wash bags include a wide range of toiletries for Mum. .

Mocktails for Mums

As part of ongoing efforts to raise awareness about Fetal Alcohol Spectrum Disorders (FASD), specialist midwives served alcohol-free "mocktails for mums" at several events, all thanks to funding from HADP. Our mocktails provided an opportunity to actively engage in conversations about the impact of alcohol during pregnancy with both staff and members of the public - including young children who enjoyed pouring themselves a cup! We were then able to offer evidence-based information and advice for safe and healthy pregnancies with our printed recipe cards. We were delighted to receive positive feedback about the taste of the mocktails from those who engaged with us.



Feedback

What Practitioners, Children and Young people and families tell us

“
Vaping information pack
was useful to understand
why young people vape
and how to help them
avoid starting
”

- Active Schools

Planet Youth provided information
that was specific to our school,
which highlighted areas to work on
Parent - School Parent Council

It was busy and
highlighted just how much
we have going on for
young people in Highland.
It was a great chance to
network -
Organisation Rep Vision 26.

Ensure my voice is
heard
Young person,
Feedback about
Childs Plans

We are the next
generation so what
happens will affect
us in the future -
Young person - C&YP
Strategy

I very much love it when Family Links
Worker comes to see me on Fridays
because it makes me feel like more
people care about me
and it is very fun and I wish I could
go with her every day
p6 child Family Links Project

“I am thankful for my time with the Family
Links Worker. It was about my daughter’s
anxieties about going to school, but it is as
much for me as for my daughter. I was
needing reassurance, and our time together
put me at ease. Parent - Family Links Test of
Concept Project.

Excellent to have lots
of partner agencies
together to focus on
GIRFEC in practice.
Practitioner - GIRFEC
Refresh Session



Work Progressing into 2025/26

Development of Integrated Children's Service Plan
2026-2029 -Predicated on Children's Voice

GIRFEC FOCUS - Continued Implementation of Improvement
plan, delivery of training and completion of Childs plan
review

Whole Family Wellbeing Programme - Developing Holistic
Whole Family Support operating model for Highland

Children's Rights and Participation - Child Friendly Complaints Process in
Highland produced by children and young people and creation of a
guidance document to support practitioners understand what 'capacity'
means in relation to Child Friendly Complaints, but also more widely.

Highland Child Protection Committee are undertaking reviews
and work on neglect and CSA, based on data evidence.
Including development of a neglect toolkit of support.



The Promise Board and delivery groups will continue
implementation of Highland Promise Plan 2025-2028
