

## **CEL CIS's Commitment to Keeping The Promise**

CEL CIS is a leading improvement and innovation centre that aims to improve the lives of children and families in need of care and protection in Scotland. We want to see a world where children and young people have safe, healthy, happy, and loving childhoods, and are supported to be everything they want and hope to be. This vision is informed by the gap that exists between their current experiences and life chances and what they deserve to be.

Our vision and ambitions are in complete alignment with the full realisation of The Promise. Our commitment to The Promise in those few weeks after the launch was a galvanising moment of reflection, hope, drive and purpose for us at CEL CIS. We fully share The Promise's ambitions for a new ground-breaking approach to support children and families, and it has provided us with a renewed determination to play an important part in helping to deliver on the national and local collective change required.

In the first year since the publication of The Promise, we have been offering, and will continue to offer, to the sector and The Promise team, support in partnership to deliver The Promise for Scotland's infants, children, young people and families. We have also been taking action on how we can change and improve at CEL CIS, most importantly to ensure the voices of those with lived experience are not only part of what we do, but also how we work. We haven't always got that right, and we are on our own journey of change and improvement. But we are changing and improving by continuing to listen, to adapt, and to be challenged, through significantly strengthening the involvement and participation of those with lived experience in how we work inside our organisation. Change is required across the whole care landscape and that includes CEL CIS too. We will always keep listening.

As Scotland's recognised Centre for Excellence for Children's Care and Protection, we remain ready and willing to work together with others to help Scotland fulfil The Promise. Indeed, much of the work that we are currently delivering is supporting others to improve and make these changes happen now.

We are doing this by keeping true to the approach set out by The Promise and by bringing together a range of knowledge, skills and attributes. This includes:

- Ensuring that our understanding of what needs to change, and how, is grounded in meaningful participation and engagement with babies, children, young people, and their parents and carers.
- Having respect for multiple perspectives on what needs to change, and how, across all services/supports relevant to family life and at all levels of the workforce from the frontline to strategic leaders who can aid in the embedding and scaling of service/practice change.

- Building knowledge, skills and abilities within teams, organisations and partnerships to enable them to effectively design and scale up service/practice change – using a range of evidence based approaches and tools that support complex change.
- Building systems that maximise the effective use of data to support better care for children, young people and their families and measure what is important to them.
- Raising awareness, increasing knowledge, and shifting attitudes to support the culture change required – through activities such as policy analysis and advocacy work, applied and action based research, and communications.

## Working in collaboration with The Promise Team

Despite a generally progressive legislative landscape and a developing recognition of the importance of listening to those with experience of care, we know the care and support that many vulnerable children and families receive must improve. The reasons for this are multiple and complex but The Promise is Scotland's chance to 'do it once, and do it right'. The size and scale of change, as identified in The Plan, is great and ambitious, as it should be - but it is also possible.

In our complex change work, we have learned what has worked and what hasn't in establishing and carrying out improvements of significant scope and scale. We know that The Promise team will bring together care-experienced people as planners, public service designers and change experts to work alongside system decision-makers and gatekeepers charged with redesigning care and overseeing the Plan's development. We have shared some of the essential elements below based on learning from our multi-agency change projects (e.g. [the national Permanence and Care Excellence programme](#); [Addressing Neglect and Enhancing Wellbeing](#)) that we know support complex change design and will be important for the Promise Team and Oversight Board to consider.

1. A commitment of capacity locally to develop a change team with the appropriate range of skills is critical to initiate and sustain change and improvement efforts. This is needed for mapping the local system, sharing evidence, engaging stakeholders at all levels (including communities with lived experience), identifying and addressing barriers and building readiness for change. The task to support change of this scale cannot be layered onto existing responsibilities if it is to be effective and must include meaningful design work with those who have experience of using these services.
2. Local areas will require intentional, purposeful and structured external facilitation to explore how the system currently works, what particular aspects of this system need to change and to provide the supports for a staged based implementation plan that develops a new system that enables positive experiences for children and families.
3. We know that the workforce needs increased capacity, resources and support to respond to the needs of families in the way that will uphold The Promise. The evidence is now clearer about the types of support required by our workforces to make change real, including clearer practice guidance, access to training and coaching and greater clarity on professional roles and functions to reduce siloed-working that can be a barrier to this support.
4. As the Promise notes, many of the services and supports families need do not currently exist. New services and functions will need to be developed to meet the aspirations, for example, of early support to families. These new functions must be predicated on best research and lived experience

and cannot be 'layered on' or delivered within existing capacities, systems and resources.

5. There remains misconceptions about the time and resource required to undertake change work at the scale required to benefit children and families. Assessing and developing the leadership capacity within the system is critical as a means of developing an understanding of what needs to be done, and how, and to support leaders to create the enabling contexts for change. This must include the decision-makers who can often be 'hidden' or not traditionally central to children's planning but who are pivotal to creating an empowering environment for the Promise, including those from legal, financial and human services.
6. Data capacity is key to assessing the quality and fidelity of practice (ensuring its being experienced as intended), understanding how service delivery is impacting on the experiences and outcomes for children and their families and for measuring and evidencing improvement.
7. There must be a collaborative team approach locally and nationally to aid alignment and coherence across local areas in the development of the plan. There also needs to be more explicit recognition that change and improvement is required across the sector, not just in statutory services.

## **Our Offer**

We would welcome an opportunity for a mutual and ongoing knowledge exchange with The Promise Team to share learning, experience and expertise together, and to explore the ways in which CELCIS can help and formally fulfil some of the change functions identified above.

Similarly, we would also value developing a supportive and strategic ongoing dialogue and relationship with The Promise Team in order to create the change required in The Plan, and would be pleased to:

- Support The Promise Team to establish clear, regular and routine communication methods and feedback loops to support coordination and alignment of delivery, sharing of knowledge (bridges and barriers) on the collective impact and transformational change that is sought locally and nationally.
- Complement and add value to the strengths, skills and function of The Promise Team, and that of other national intermediaries/national bodies that will be needed to uphold The Promise.
- Assist The Promise Team to build collective understanding of the evidence base related to complex change and in what circumstances some methods of change may be more effective than others. This will be crucial in helping others make sense of these and avoiding confusion and wasting of time or resource.

- Support communication of what can be expected of, and how to respond to and support change with, workforces and statutory and third sector delivery organisations during a pandemic and in a crisis environment.

To do this, it would be beneficial to have a clearer understanding of how resources can and will be allocated by The Promise, as well as how requests to support the work of the Promise team will be identified, allocated and governed.

The scale of the change envisaged to keep The Promise over the next 10 years means there is a need for national integration, coordination and alignment. Change will be experienced locally but work is required at both a national and local level to make it a reality. CELCIS believes strongly in a [Collective Impact approach](#) which may offer a proven approach to drawing people and initiatives together in a unifying way. We are keen to know what systems and processes are being used to draw together stakeholders involved in delivering on the commitments in The Promise; how The Promise Team will provide active support to coordinate and connect the strands of design, implementation and improvement over the years; how coordination and connection will work between the Oversight Body, The Promise Team, and delivery at the national and local levels.

## **Involving the care community and lived experience in our plans to #KeepThePromise**

### **Equipping CELCIS to involve lived experience**

CELCIS is committed to ensuring that the lived experiences of the care experienced babies, children, young people and their families is at the heart of our work to support and inform practice. The value we place on this can be seen in the commitments made in the [CELCIS strategy](#) and our strategic goals, of which *valuing experience; children and family support and services are informed by the participation, voice and experience of babies, children, young people* is at its core. The clear messaging around the importance of participation within The Promise has led us to a place of significant self-reflection, analysis and consideration. We know that we must make changes and improvements to better enact these commitments and ensure this involvement is at the foundation of our work and decision making. Participation must guide what we do to support partners and organisations we work with, so that the voice of the care community is at the centre of practice improvements and changes.

Historically at CELCIS we have benefitted from strong examples of participation in our work. Within our staff group we benefit from the talent and contribution of modern apprentices, consultants and full time members of staff with care experience. Participation has also been evident in the many forums and planning groups we facilitate and host from the Scottish Care Leavers Covenant to the Participation Network, to the SIRCC Conference planning partnership. We share evidence through amplifying the voices of care experienced children and families in our collaborative work with international partners including UN Committees and NGO networks. These collaborative spaces also act as a community of practice to enable people to reflect, learn and share knowledge on how to best involve care experienced babies, children and young people in strategic decision-making and care planning in ways that are safe and meaningful. We have also ensured that our communication platforms are used to share these voices and experiences, and we will continue to enable children and adults with care experience (and their wider community) to share their insight through our qualitative research, our journal, blog and storytelling. However, we plan to do much more.

The reflection and reassessment prompted by The Promise on how to better meet our values and commitment to participation has led us to carry out an extensive array of research, engagement and analysis over the last year. To do so we have collaborated with external partners and communities of lived experience to inform a whole new approach to participation, with the insight and ideas from the communities of lived experience at its core. We are currently embedding plans to implement the findings of this research, engagement and analysis to strengthen participation across each area of CELCIS work.

We have many rungs still to climb up the ladder of participation to authentic coproduction but we are on our way with a clearer vision of where we want to be and how we will know when we get there.

## **Equipping the workforce to involve lived experience**

The national change design programmes commissioned to us offer opportunities to influence, pioneer and enable a child's voice to be amplified, listened to and given agency even in the most difficult circumstances, where their safety become paramount and they depend on protection from the care givers they live with. Examples of this work range from rapid research into the experiences of children and young people attending Children's Hearings during lockdown, the findings of which were reinforced by collaborative networks, including strategic leadership within and around the Children's Hearing System. We also include the expertise of those with care experience, their families, and those who care for them in planning the content and practice development emerging from annual forums such as the SIRCC conference. We employ people with experience of care in supportive and paid roles to co-design many different aspects of our work and have plans to significantly expand these opportunities in 2021.

In our work on Significant Case Reviews we are enabling safe reflection and learning spaces for those involved in reviewing the most tragic events where a child has died or experienced life threatening harm from a parent or care giver. We are exploring how best to include the voice of family members in these incredibly sensitive circumstances. CELCIS is involved in national work on developing a new model of conducting these types of review with an ethos of understanding, collective synthesis and constructive applied learning from what happened rather than a demoralising blame culture. Similarly, CELCIS is working to facilitate direct engagement with children, young people and families who have lived experience of child protection procedures. We aim to learn from experience so that these procedures can be planned and conducted in ways that acknowledge and hold the pain, fear and loss in the room, enable the experience to be as safe and supportive as possible and a small stepping stone to the start of trauma recovery.

In our work with victims and survivors of abuse we respect and model a strengths based and trauma informed approach to enable and empower the voice of lived experience, and strive to embed best learning from such profoundly complex and heart-breaking situations, keeping people at the centre of them.

A key development in the last year has been the role CELCIS currently plays through our work with statutory and voluntary partners to support them to listen to, understand, act upon and learn from the needs of those with lived experience and those who care for them in all kinds of family compositions. This work is complex and requires a specific skillset, value base and a comprehensive trauma-informed approach. We understand that many partners want to do more to engage with the needs of children, young people but do not have the tools and confidence to do so. We support these partners by providing them with the knowledge and skills to effectively use these tools and approaches. We do so through training and free consultancy support to ensure they listen to and act on the needs of those they care for, in ways that are safe, supportive and meaningful. CELCIS believes passionately that the needs and experiences of

children and families in these contexts must be understood and acted upon - this consultancy support is one mechanism for doing so.

### **Our Offer**

We have built up significant expertise and credibility in facilitating meaningful engagement in these contexts. We believe this would be a valuable offer to the sector, and contribution to the implementation of The Promise. Participation will be at the heart of making real the aspirations of The Promise and to ensuring that voice and participation are embedded locally and nationally for the long term and as 'business as usual'. The sector will require support to build this capacity and expertise as well as access to independent rigour. We would welcome the opportunity to be further guided on this and how we can contribute to this aspect of delivering The Promise.

## Identifying initiatives in and around the 'care system' that need to be considered to ensure they are fully aligned to Keep The Promise

We know that there are many aspects of the current 'care system' that require significant and urgent action in order to align with The Promise, some of which we will outline here. There are also areas of the system that must cease, to help put an end to often negative care practices, but also to free up capacity within the system to enable more positive experiences of care. This must be the case for all children and families, whatever family or care environment they live in, whether at home with their families (whether birth, adoptive, kinship or foster families) or in residential or alternative care. There are areas of our work that have resulted in significant learning about initiatives that are likely to have the biggest impact (improvement) for the biggest population of children and families (what we call leverage points); initiatives that will deliver not just some outcomes but socially significant outcomes. Some of this work and the learning is outlined below, which includes some of our own work (what we did and how we did it) and work in the wider sector that we believe will be pivotal in delivering the change that is needed.

A core foundation of The Promise was that *where children are safe in their families and feel loved they must stay and families must be given support together to nurture that love and overcome the difficulties which get in the way.* We know how important this is and a fundamental aspect of our work is to ensure that families can stay together where possible and get the support they need before this becomes too difficult. We have led and supported a range of initiatives that seek to build the functions that enable this, and to understand what gets in the way of doing so. An integral part of this is in implementing the national practice model of Getting it Right for Every Child (GIRFEC) as well as the National Performance Framework.

The [Addressing Neglect and Enhancing Wellbeing programme \(ANEW\)](#) aimed to respond to the needs of babies, children, young people and their families where neglect had been identified as an area in which they needed help. There is crucial learning from this work about the ways in which universal services could be better supported to address the unmet needs of families earlier and in non-stigmatising ways, preventing the escalation to statutory services. Crucially, there is also the development of tools and practice models that will short cut this work for other local areas, and we would be happy to share these.

One area that is of most relevance in the ANEW work is the focus on the GIRFEC facilitator role and specifically the **Team Around the Child Meetings**. Work with partners in the statutory and third sector' has been done here to make explicit the practice that best supports the participation, voice and involvement of children, families and carers, with a view to challenging the existing power imbalance in these types of settings between families and the workforce. Similarly, we would highlight the value and potential of scaling up **Family Group Decision Making (FGDM)**. We know how important FGDM can be in supporting families to stay together. They build on the strengths of the family members that

matter most to a child, in a setting that is conducive to these relationships - not the needs of the 'system'. We are currently part of the FGDM Steering Group who are considering the evidence on implementation and scale-up.

The [Permanence and Care Excellence \(PACE\) programme](#) at CELCIS, worked alongside 27 out of 32 local authorities so that babies, children and young people can experience permanence and security in their lives. Crucial elements of success were: the use of an established change methodology (Quality Improvement) to support tests of change, the use data and evidence to improve decision-making and strong collaborative working with representation from partners across 'the system'. This required direct knowledge of the current ways of working from the frontline workforce and leaders (at all levels) and the involvement of children, their families and carers to convey their experiences of the system we were trying to change.

**Transforming Pathways** is an example of how we have supported a large local authority to consider how it can make explicit and enact an evidence based 'model of overarching care', rather than focusing on changes to different component parts of their system to better respond to the needs of babies, children, young people and families. The key aim here is to develop the services and functions that can effectively help children and their families at an earlier stage and keep families together in their own communities. Where this not possible, it will ensure high quality alternative care that supports recovery from trauma and maintains links with families and communities.

A key element of supporting children and young people in their own families and communities will be through a greater focus on **Kinship Care**. Some children who are cared for in kinship families will be understood as 'looked after' under these statutes, and some will not. Across these situations, as well as geographically, the support these children and families receive will vary and often doesn't meet their needs. The complex landscape for kinship carers to access support must be simplified, be more intentional in meeting their individual family needs and on a more consistent basis. We are currently involved in the planning for collaborative project to plan and implement such an approach with key partners including Scottish Government, Social Work Scotland and CoSLA.

The Promise identified the need to overhaul the language and stigma in and around the lives of those with care experience. Having worked alongside the Independent Care Review, and the Stigma Work Group in particular, CELCIS, alongside the Esmée Fairbairn Foundation, Life Changes Trust, The Robertson Trust, Scottish Government and Social Work Scotland have developed the **Each and Every Child** initiative. This is a reframing project that aims to tell the story of care experience, to transform the current public narrative of their lives and mobilise people at all levels of the community to take action to do so, with care experience at its heart. The values and ethos of this initiative is wholly aligned with The Promise. This solution-focused work begins in earnest from January 2021, and will equip people across Scotland with the means to change language and narratives around the lives of people with care experience.

We support recent proposals to raise the age when a child in need of support and protection can be referred to the Children's Reporter, to ensure that children who are 16 and 17 years of age can receive the same care and protection from this system as younger children. We understand that this is one small part of what needs to happen to meet the needs of any child in need of care and protection, or who is involved with the **Children's Hearing System**. We also know it is imperative that we address and prevent the disproportionately high contact with criminal and justice systems that care experienced children and young people currently experience. We know more also needs to be done to provide child friendly access to justice, and implementation of the Barnahus model will be a critical part of this work. There are a number of important areas of our work that progress this agenda. This includes our work with strategic leadership through **the Children's Hearing Improvement Partnership** and the support we have offered as a delivery partner of the young person led Our Hearings Our Voice. We recognise advocacy as a critical aspect of children and young people having their voice heard in the decisions that affect them and have provided support in the development of the National Advocacy Service for children involved in the Children's Hearing system.

We also know there is also a need to make immediate changes for children that are in Secure Care and have worked alongside the Children's and Young People's Centre for Justice, and children and young people directly, to help co-produce with to develop the new **Secure Care Pathway and Standards**. These Standards are fully aligned with The Promise and their implementation will help transform how care is experienced for children and young people in secure care.

The Promise rightly emphasised the need to do better to keep care experienced brothers and sisters together, or to preserve their relationships where this is not possible. We know that care experienced children, young people and adults have been raising the importance of this for over 40 years. These relationships are hugely important to their identity and wellbeing, and act as protective factors that can help heal and mitigate any harm they have experienced. We are a member of **Stand up for Siblings**, which was formed in 2015 to raise the importance of preserving the relationships of brothers and sisters and improve practices that enable this. Stand up for Siblings worked with the Independent Care Review and is fully aligned to The Promise. It includes child rights, child welfare, legal and advocacy organisations and conducts research, holds conferences, and lobbies for change in legislation and practice, publishing '[Seven steps in supporting sibling relationships](#)' which provides an agenda for practice improvements. The recent passing of the Children (Scotland) Act 2020 will support practice that keeps brothers and sisters together, but will require multiagency collaboration in order to make this a felt reality for the majority of care experienced children and young people.

We have informed and supported legislative proposals to incorporate the **United Nations Convention on the Rights of the Child** into Scots Law, understanding that this could have a significant impact on all children in Scotland, enabling them to enjoy their human rights, and reinforcing efforts to

make the changes needed to uphold The Promise. However, we know that considerable work will be required to ensure that this makes a difference to the day-to-day lives of all children in Scotland. For instance, ensuring that the 'voice' of babies and young children informs decisions or policy that affects them, especially because approximately half of children subject to applications for Child Protection Orders or whose names are placed on Child Protection Registers are under two years old. We have already begun supporting partners to take an implementation approach to embedding rights-based practice.

Not enough young people with care experience are supported to stay in their homes after they reach 18 years old, despite their entitlement to this in statute. Through our work in facilitating the **Scottish Care Leavers Covenant**, we work alongside third sector partners and statutory services to address the barriers they face in doing so, as well as ensuring that children and young people leaving care are supported and cared for, including in their education, housing, and the relationships that matter to them.

We would highlight the work of the **National Trauma Network** as integral to ensuring that knowledge and understanding of the needs of babies, children, young people and families are seen in practice, so that we can respond to these in a considered, informed and compassionate way. One of the component parts to doing this is to hold the hand of those holding the hands of care experienced babies, children, young people and their families. Doing so is a core aspect of our work with voluntary and statutory workforces, and enables us to dismantle the barriers and build the bridges that strengthen the scaffolding needed to support children and families.

There exists a range of initiatives across Scotland already making the changes necessary to keep The Promise. These are necessary but we know they are not sufficient to uphold The Promise, and we are fully committed to planning, implementing and sustaining the work that will be required to do so. The learning that has emerged from current or previous work can offer valuable information about what must do to make these changes in the future, especially for the parts of the 'care system' that have been most resistant to this. We hope that the learning and evidence we have collated from these initiatives, some of which is outlined in this response, will play a useful role in work to keep The Promise.

## **Identifying existing networks and groups that can support collaborative change**

CELCIS works and learns with others, and the learning from the various networks of people that we host and work alongside, influences and informs what we do. Some of these networks are instrumental to facilitating and sustaining change because they engage strategic leadership and key decision makers who can direct resources, such as financial, commissioning or personnel who provide vital capacity and permissions for change to happen (and be sustained). Crucially, we use our voice within these networks to uphold the Promise, frequently and actively challenging our partners where necessary. For some of the other networks we host or participate in, such as the Fostering Community of Practice, the Adoption Task Force, the Participation Network or the Virtual School Head Teacher Network, their importance lies in their capacity to bring people together, including those with lived experience, their families, communities and all level of the workforce, in order to share their expertise of what works to change practices, and what needs to happen to keep The Promise.

We use our voice in the strategic networks that we participate in, which include the Scottish Government's Collective Leadership group, the National Child Protection Leadership Group, and the Children's Services Planning Strategic Leads Network. We know how important it is that collaborative work within these networks does not sustain the status quo of unmet need and siloed-working, but constantly reviews the 'so what' and works towards creating the paradigm shift required in how we work alongside children and families. The relationships we make, and the evidence and learning of practice change we share places us uniquely to facilitate, create and hold 'safe' but challenging collaborative spaces with a range of dynamic organisations. We aim to drive change by facilitating environments to consistently, actively and constructively challenge our partners and enabling them to work towards the crucial changes needed to shift organisational cultures, functions and capacities.

We also hold collaborative networks in which the workforce, those who 'hold the hand' of children and their families, can share their understandings of the barriers to upholding The Promise, and amplify the voices of those they care for. The Permanence and Care Excellence programme (PACE), for example, supported the local workforce to collaborate with agencies that supported care planning and decision making for babies, children and young people to allow them to live in their permanent families with minimum disruption. This has meant we have been able to develop relationships and connections with people who will be open and ready to accept support and make further changes to the landscape of care that are needed to realise The Promise.

Our Communities of Practice enable the workforce, including networks of leaders, managers and critically, those working directly with children and their families, to share and apply learning nationally and locally. These collaborative networks have resulted in significant shared learning around key developments and initiatives in the sector. We know these networks are essential to providing the infrastructure needed to create the information, learning and readiness

required for meaningful and whole systems change. These networks, and other work that sustains collaborative multiagency networks, goes hand in hand with our work on facilitating complex change by providing a forum to identify how change can be driven or be hampered, and potential solutions.

Our facilitation or participation in networks that bring together a range of people of different experiences across these siloes is equally important to *how* we work. These spaces enable a broad spectrum of people, often unlikely to work together outside of these networks, to share knowledge, learning and expertise of what works and build relationships and collaborations. These networks can involve those with lived experience, a broad range of people from the workforce as well as strategic leadership.

CELCIS convene several networks that aim to improve the experiences of children and young people with care experience in education. The Education Forum is an open access network of the workforce and leaders involved in the education of children with experience of care, and their families. We also host Scotland's Virtual School Head Teachers network, a network of senior members of education staff who work at a strategic level, who can share knowledge and experiences that enable them to respond quickly to the needs of children and young people. We have described the Participation Network that we host, which drives the best possible participation practice, as well as the annual Scottish Institute of Residential Child Care Conference, which brings together the residential childcare workforce, management and leadership, with the voice of care experienced people. Our connection to the global picture of children's rights includes collaborative exchanges with international partners including the European Social Network, UN Committees and NGO networks, enabling us to share and contrast evidence and practice of what has worked in different national contexts.

Our commitment to building and sustaining relationships and collaborative spaces that span every level of organisations and go across communities is embedded in the way we work. To make the changes needed will take more than our commitment, but will require new ways of working and collaborating to overcome the barriers and siloed-working that have hampered change in the past.

## **Key contributors to planning for a new landscape of care**

We share the view of The Promise that the voice of children and young people who experience care, as well their parents and carers, must inform and be embedded in the work needed to realise The Promise. This must continue to be the focus in any redesign of care.

Alongside this, to support the redesign, we would also look to those that provide care (paid and unpaid) to form the 'backbone' of the plan and offer expertise about the barriers to change that have arisen in their care. This will include the people in the workforce who support and care for babies, children, young people and families, including teachers, youth or play workers, social workers, residential care workers, as well as doctors, health visitors and nurses. We know that the relationships these people hold with children matter, they are the "golden thread" in children's lives, and relational and strengths based approaches to work with families is critical to effectively supporting them.

But we know that this will not be enough. There will not be the capacity to make or sustain these changes with existing resources, and that we must have in the room the strategic leaders who hold decision making capacities such as the funding and commissioning of services. This extends to Scottish Government, COSLA, SOLACE, as well as intermediary organisations at a national level that support change, learning and improvement, such as Education Scotland, NHS Scotland and the Care Inspectorate.

Our work with the workforce to 'hold the hands of those who hold the hand of children' must enable these people at every level, to speak freely and with confidence about the needs of those they care for. Their capacity to amplify lived experience, based on relationships, trust, and knowledge of those they work with (rather than the role they occupy within an organisation), is both complementary to and supportive of the participation of these children and families. For this to happen there needs to be an organisational culture where these relationships are valued, and for the workforce to have the capacity and skill to listen to, understand and act on the needs of those they care for. This is especially true for understanding the needs of babies, young children as well as disabled and/or non-verbal children, who are able to communicate their experience in a variety of ways, if there are adults attuned enough to observe and listen to them, and who have the time, capacity and the right places (including digital ones and creative spaces) to do so.

Realising The Promise and supporting children to grow up within their own families and communities will take a paradigm shift in how we assess, manage and have a tolerance for 'risk'. This means that those with current responsibility for child protection and criminal justice services be an integral part of supporting the enabling conditions for change.

Our work on complex change has further highlighted some of the people who must be in the room to carry out and sustain the change required. Teams comprised of formal leaders, managers, team leaders and those in the workforce

who work directly with children and their families, who have insight across organisations will be needed to facilitate, embed and sustain change. There will need to be particular emphasis on the role of strategic leadership, those who can make decisions related to the personnel, policy, and especially the funding for improvement processes, as critical to building capacity for this change to take place. It will also require local implementation teams whose task is to guide and support stage-based change efforts.

This can be illustrated by the learning from Champions Boards, where care experienced children and young people, work with their 'corporate parents' to have influence over decisions in their local communities. Ensuring that Champions Boards and other similar thematic groups have the capacity and scope to affect decision-making has brought about complex conversations about service delivery and design at local levels. From these discussions, learning has emerged that to integrate the expertise of those with lived experiences with the power strategic leadership holds, they must occupy the same spaces for forums in which these decisions are made. Furthermore, that the decisions must be made within these spaces without delay, to ensure these exercises are not just consultative. We must ensure that this learning translates from a local to a national level.

Similarly, we would point to learning on what has been successful in multi-agency partnerships formed via Child Protection Committees, and how these have overcome variations in governance and funding structures between agencies to ensure that babies, children and families get the right support when they most need it.

We know that each child and family in Scotland will need a tailored and individual response that meets their specific needs. We also know that the landscape of how we currently offer support is fragmented, and that making the changes so desperately needed is not simple. However, our work and the learning and evidence from it offer a wide variety of approaches to change within both operational and strategic contexts, and can help bring the right people 'in the room' to make the changes needed to keep The Promise.

## **The Scottish Approach to Service Design and keeping The Promise**

We welcome the considered approach to service design outlined by The Promise that will be essential in driving lasting and meaningful change for children and families. At CELCIS, we have strong expertise in change design and improvement approaches, so welcome a coordinated and concerted service design approach being taken to ensure the required systemic and structural changes are made. We are committed to being informed by the evidence on the 'what' and the 'how' and would therefore like to partner with The Promise and others to explore how delivery organisations combine design work with careful attention to fully defining services and practices, in a way that can be carried out at a scale to ensure availability to the whole community intended. Because we believe it is in this way that *all* children and families receive consistent support, have better experiences, and their lives improve.

The aspirations for our approach aligns with many of the critical principles of the Scottish Approach to Service Design: that we explore and define the problem before we design the solution; we design service journeys around people and not around how the public sector is organised; we seek citizen participation in our projects from day one and we use inclusive and accessible research and design methods so citizens can participate fully and meaningfully.

This combined with knowledge and expertise across the experiences a child and family may have through 'the system' – early help and family support, child protection, care and after care - means that we feel able to offer our skills as part of Scotland's toolbox for change. The scope and scale of change will require a range of approaches, and we are committed to working collaboratively and collectively with The Promise and others as will be necessary in this change journey.

### **Our Offer**

We would welcome the opportunity to deepen our understanding of the Scottish Approach to Service Design, including how this approach can productively align, complement, and perhaps differ from the approaches we have taken to date and the work we deliver. We are keen to collaborate with The Promise Team, partners and communities of experience, to reflect and take forward a design approach that improves our own work and that of the organisations who are seeking to realise The Promise. It will be helpful to stakeholders to understand alignment, and all of our roles and responsibilities, to help deliver on The Plan. This clarity will be crucial in helping everyone responsible for carrying out The Promise to navigate the help and capacity they need.

## Measuring change

Our focus is informed by evidence, policy, and by the recommendations of national reviews and consultations, many of which have been informed by community engagement and participation, and most recently by both the process and evidence of the Independent Care Review. A core part of our current internal work has been to undertake an action research project to identify the ways in which we can, internally, integrate lived experience of *all* the communities into what we do in a way in which it becomes embedded and sustainable over time. Integrating lived experience into our internal mechanisms allows us to be held to account by those our work ultimately supports and provides insights around how we can improve.

Whilst we recognise the importance of making these changes, our approach has always been collaborative across stakeholders and partners, offering a set of tools and mechanisms that we can support others to use, including the Child Protection Data Minimum Data Set, or tools to measure leadership capacity for change such as the Leadership Capacity Test (which is similar to the Scottish Approach to Design Maturity Test).

These enable us to put in place mechanisms to collect data and measure change with partners and to measure how this shifts implementation capacities within service delivery organisations, in turn effecting service quality, and which in turn again effects health, education and wellbeing for children and families.

### Our Offer

CELCIS has developed expertise in developing the data systems that will support services to collect the kind of data that will support planning and the deployment of resources and data that is important to children and families; will indicate fidelity to particular practices and approaches; support the coaching of staff towards agreed approaches; can measure the impact of improvement activities and initiatives and can evaluate the experience of babies, children, young people and their families as they engage with services and measuring outcomes. We would offer this expertise to the Promise Team and early conversations have already taken place.

## Capturing and using data

CELCCIS, like many other organisations, must meet the challenge of collecting objective measurements of the quality of the services we provide to others, how these effect change and improvement (in our case, in law, policy and practice), how this in turn impacts upon what matters to children and families and what effect these changes have on their lives. Over the last few years, we have become clearer about the 'theory of change' that underpins different elements of our work. Assessing the attribution of different services that we offer is a challenge, for example in assessing what our contribution is to raising awareness, increasing knowledge and shifting attitudes. We have outlined below where we think our impact can be greatest, in light of the evidence, and how we hope this work will progress to produce data that supports practice fidelity, indicates our effect and the effect of our partners work on what matters to children and families, and the impact of this on their experiences and outcomes. We can provide a more detailed logic model that outlines this as a generic level.

<b>Generic overview of theory of change and intended data measurement</b>			
<i>CELCCIS Inputs</i>	<i>CELCCIS effects</i>	<i>Delivery Organisations Inputs</i>	<i>Delivery Organisations Effects</i>
<p>Implementation consultants available to guide capacity building within organisations</p> <p>Relationship based approach to integrating usage of organising framework</p>	<p>Organisational implementation team embedded and using evidence and data to drive decision making in building an implementation infrastructure to support the workforce/services to deliver with consistently high quality</p> <p>Organisational leadership team undertaking the tasks needed to ensure sufficient implementation infrastructure to sustain consistently high quality services</p>	<p>Effective approaches to staff recruitment, training and coaching</p> <p>Effective approaches to addressing policy and procedural barriers to delivering quality services</p> <p>Consistently high quality service delivered to anyone/everyone who wants or requires it – i.e. measures of fidelity that also tell us if a service is positively experienced and ensures the</p>	<p>Consistently positive experiences of recipients using service, measured through objective data collection</p> <p>Indicators that show recipients to be thriving in the context of the service offered, measured through objective data collection – i.e. how do practices contribute to improvements in health, wellbeing and opportunities for people.</p>

	Mechanisms to measure progress through data collection, collation and usage	support needed is available	
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This generic overview of the data we can gather can be related to whatever the specific change initiative is, whether that be Family Group Decision Making, inclusive community based family support services, social work support to kinship or foster carers, or, in quality care such residential childcare.

It is contingent on delivery organisations adjusting their way of work, integrating evidence and data with a relationship based approach to achieve change within workforces and organisations. It is also contingent upon our own team's knowledge and skills to grow that capacity within CELCIS and in the work that we do with others.

## **Understanding procurement and commissioning arrangements that facilitate or inhibit progress**

CEL CIS understands how important procurement and commissioning arrangements are in how care is ultimately experienced by children and families.

Our insights on procurement and commissioning arrangements would advocate that public sector funders:

- Involve children, young people and families in the tendering process, for example by contributing to the:
  - Service design/specification articulated in the tender documentation;
  - Scoring/assessment of the tenders received, including being part of an interview panel.
- Assess bidders in their skills and experience of truly engaging, involving and/or supporting children, young people and families. In doing so, it is important to assess beyond what is written (e.g. by professional bid writers) from the daily values, principles and ways of working of bidding organisations.
- Recognise and value the skills and expertise that Third Sector providers can bring for children, young people and families, but also the commissioning supports they may need:
  - Greater lead in times to tender if a consortium approach is sought. Relationships, ways of working and mutual understanding need to be built between the consortium partners. Consortia/collaborative approaches are a positive development but enter an existing funding landscape that encourages competition between Third Sector partners.
  - Building and sustaining trust and relationships between children, young people and families and the workforce is crucial to uphold The Promise, this requires multi-year funding that builds organisational and job security.
  - Offering commissioning/tender development support – particularly among smaller providers.
- Clearly articulate the service that is to be commissioned, specifying the core 'non-negotiable' elements of the service, but also the aspects of the service where creativity and innovation from 'bidders' is welcomed.
- In the 'Quality versus Quantity' bid scoring framework, be more explicit in what 'Quality' actually means in terms of 'Quality' for children, young people and families.

- When a service/contract is awarded, allow time and space for development and refinement of the service – including how to ensure children and families are involved, and establish an appropriate performance measurement framework is in place.
- Hold regular and constructive programme/service management and governance meetings that allow for learning and reflection between the funder/commissioner and the service providers.
- More work is required to support collaboration between the Third and Statutory sector based on partnership and mutual respect.

## **The role of The Promise in unlocking the barriers from service innovation to wholesale implementation**

Scotland has experienced challenges in taking innovations to scale and making innovations available to everyone who should benefit from them. The Promise articulates so clearly that the change needs to ensure equitable access to rights and supports for *all*. To achieve this will take careful attention to 'what works' in achieving wholesale implementation and adherence to this as an approach to guiding changes in services and practices. The need for attention to 'readiness for change' and meaningful service redesign cannot be underestimated, enabling people to make sense of what can be strengthened and how, and what to let go of. Expertise and external facilitation is often required to effectively design and guide change in practices, services, organisations and complex systems.

Change can often falter in national and local bodies due to a lack of a designated, sustained team in their workforce to design, guide and facilitate change (implementation and improvement). These teams are not governance groups, committees or working groups. They are teams, trained and coached in effective change methodologies who have skills in working as an effective team, in facilitating change, in conducting analysis and design to inform decision making and action, and engaging and collaborating with people impacted by and responsible for change initiatives. These teams are equipped with design skills, which are relational in their work, work closely with strategic leadership and decision makers to highlight barriers that need to be unlocked and use data for tracking progress and improvements (including in the experiences and outcomes for children and families).

The evidence demonstrates that these teams are critical to making wholesale change happen. This requires resources to support the change design and delivery – both people and money. Resources that right now are under incredible pressure and will be even more constrained in the coming year due to the pandemic and the economic crisis that will follow. Local areas will not be able to unlock and find funding for this alone.

With this in mind then, we believe The Promise must spearhead and amplify the need and funding required for the infrastructure and resources to equip change teams to fulfil local and regional capacity using change methods and frameworks. The Promise Team's support in equipping communities of lived experience to support this change will be crucial.

## Current barriers to #KeepThePromise and opportunities to make change at CELCIS

We know that commitment and alignment to The Promise requires more than sentiment, and are committed to action both internally and with our external work with partners, that helps the paradigm shift required to make The Promise a reality for children, young people and families. This is a continuous process, and is reflected in our core values and the way we listen to the valuable insights of our colleagues with care experience and our collaborative relationships across Scotland, but The Promise has driven deeper introspection and interrogation of the way we do this. The Promise provides a singular opportunity for the systemic and cultural change that children, young people and families have called for, and since the launch in February 2020, we have been examining and taking action on how we can support the change agenda. In considering this response, we held a rapid consultation across CELCIS to consider what we could offer, and what we needed to change. The response from staff was significant, we have listed below some of the learning from this exercise, as well as the opportunities we can offer to make changes from our knowledge of how to make complex change happen.

- *Language and Meaning*  
We recognised within the Promise the importance of challenging language around the needs and the 'care system' for babies, children, young people, their families, carers and the workforce. Whilst we recognise that the use of some terms in statute has implications on the rights and entitlements that affect how thoroughly we can change (e.g. the status of 'care leaver') we are committed to reflecting on this language and changing the practices that underscore its meaning. We continue to be involved in several initiatives to challenge language and narratives and are at the forefront of the [Each and Every Child Initiative](#).
- *Our Approach to Participation*  
CELCIS is funded to improve the experiences of children and families in Scotland. We advocate for what children and their families tell us they need, and from evidence on this. We are committed to ensuring that the lived experiences of the care community is at the heart of our work to support and inform practice. Whilst there has always been a level of involvement of care experienced people in our teams and decision making structures, we recognise the need to do better, moving beyond consultation to increase and improve the level of participation to in our internal processes and decisions as well as in work we facilitate externally. We have embarked on a wide range of research, engagement and analysis over the last year to begin to do so and will implement these plans in early 2021.
- *How services are organised*  
We have structured our organisation around improving care experiences, protection and permanence, and of engagement, research, data and evaluation. In considering how we fulfil our responsibilities to The

Promise, the need to pay more attention to babies and infants has arisen. In addition to this, we know we must consider how our work and responses can be defined by chronological age that is set in guidance and statute. We know that children's developmental stages can be distinct from their chronological age, especially when children and young people have experienced trauma. Some of the innovative and adaptive responses to the COVID-19 pandemic have paved the ground for new ways of working that better meet the needs of children and families beyond categories and definitions imposed by the 'care system', and we are looking at how our organisational structure and roles can be more adaptive to these needs.

In our work in local areas, we have sought to understand the barriers to making these changes. We have learned that whilst the workforce generally feel confident and competent to respond to child protection concerns, they often feel less equipped to respond to families' needs when concerns initially arise.

Many of those who support children and families are struggling to meet the requirements of the plethora of policy and legislation that involves a change and/or an expansion of their professional roles, which is made even more challenging in the context of austerity and reduced levels of funding to local authorities.

To create and sustain the new functions required to uphold The Promise, we know that strategic leadership must build capacity to develop the infrastructure in local areas that will sustain these changes.

The COVID-19 pandemic has entrenched disadvantage and caused harm to many across Scotland, it has placed a significant strain on services, and we recognise there is a need to support the workforce to adapt to these circumstances, as well as challenging practices that have not met the needs of children and families. However, we recognise that there have also been many examples of innovative and positive practice from the workforce. These include: examples of greater flexibility to ensure that the needs of children and families are met, rather than the needs of the system, as well as increased recognition and trust in the strengths of children, families and communities, working together with them to find solutions that meet their needs. We welcome the determination from the Promise to sustain these practices where they have emerged, and would highlight the CELCIS resource [Meeting the Challenge of COVID-19, learning and practice](#), which collates and shares these.

We share The Promise's commitment and ambition to create a new approach to supporting children and families. Our determination to help deliver the changes required has been reaffirmed. The work we have already begun to do has resulted in considerable learning, which we hope we can offer to support the changes required to uphold The Promise. We will continue to interrogate and identify what else we must do to improve to play our part in keeping The Promise.

## **Additional target areas for the Promise Oversight Board to consider**

We welcome the targets areas suggested by the Oversight Board and suggest the following additions.

- *Unplanned moves and frequent moves for children*  
These moves can have a lifelong impact on babies, children and young people and they are indicative of wider care, support and safety issues. We suggest that any such moves are captured and identified early to avoid children experiencing these.
- *There are existing clear references to siblings – namely they should live together – or when not there should be maintained relationships.*  
We suggest it would also be helpful for the Oversight Board to monitor how many groups of brothers and sisters are reunited when a family is found to care for them, if they have not immediately placed together due to resource issues. We must ensure that our definition of 'sibling' is aligned to who children and young people themselves see as their brothers and sisters, so that these important relationships are protected where it is safe to do so.
- *The participation of pre and non-verbal children.*  
We know that in work focusing on voice and participation there is a need to better understand the experiences of *pre-verbal and non-verbal children*, especially as we know these children and their families can be in most need of support. We suggest explicitly monitoring how we involve babies, infants as well as disabled and/or non-verbal children, how their needs are enacted based on this, and how we equip the workforce with the skills and capacity to do so when we monitor the participation of children.
- *The use and meaning of language.*  
The Oversight Board could be in unique position to model and guide how we all communicate and the narratives around care experienced babies, children, young people and their families, and we are keen to see The Promise as a partner in the Each and Every Child initiative.
- *Support for care experienced children and young people in education*  
There are high levels of variation in the assessment of children with care experience to provide help with any additional support needs they might have, though they are entitled to this under the Education (Additional Support Needs) (Scotland) Act 2009. This is part of a wider picture of gaps in understanding around additional support needs, which can relate to holistic supports for children who have experienced trauma as well as support with learning needs. We would suggest that the number of care experienced students assessed for additional support needs is monitored, as well as the number of care experienced children considered for a Coordinated Support Plan, and targets to ensure that every care

experienced child or young person has a Scottish Candidate Number. This would ensure that the support needs of care experienced children and young people in every level of education were better understood.

- *Support for care experienced young people, including to stay in their homes*

We support Oversight Board targets to ensure that young people can stay in their care setting as they enter adulthood (if they want to), and are supported to move when they are ready. We would note that there have been significant barriers to upholding this entitlement, and attention must be paid when monitoring this to the commissioning of services, and to ensuring there is adequate and equitable financial support for the people who care for young care experienced people, regardless of where they live in Scotland, and that meets the needs of young people as they grow up. We would also add that whilst young care experienced adults have rights around housing, education, finance and employment and health, we must also pay attention to how their emotional needs are met, and that the relationships that matter to them are sustained. Digital inclusion is fundamental to enabling young people to enjoy these rights, to develop and sustain these relationships and as a protective factor to support their wellbeing. The COVID-19 pandemic has amplified the need for digital inclusion and access to be seen as a basic right and we would encourage the Oversight Board to consider digital inclusion for care experienced people as a focus area.

- *Theories of Change.*

The Oversight Board is in a unique position to ensure that local areas are focussing on the 'what' and 'how' of change – that they ask about theories of change and how this will be resourced and implemented. Assessing leadership capacity and readiness for a change of this scale across Community Planning Partners would be an invaluable addition.