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**North Lanarkshire Children and Young People Community Mental Health and Wellbeing Fund** 

**Progress Report - Phase Four (2023-24)**

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**Many thanks to the funded projects and CIILs who provided information and to the VANL staff who prepared this report**

**1. Introduction**

**1.1 Purpose of Report**

The purpose of this report is to share an update on the progress of Phase Four (2023-24) of the Children, Young People, and Families Community Mental Health and Wellbeing (CYP) Fund, and to share the impact and learning so far covering the period April 2023-December 2023.

This report includes a summary of:

* feedback from Community and Voluntary Sector (CVS) organisations providing services
* feedback from Cluster Improvement and Integration Leads (CIILs)
* plans for the remainder of Phase Four

**1.2. Duration of Fund**

Phase One was a rapid pilot to develop and test the approach. Given the success of the pilot, additional funding was agreed for Phase Two and Phase Three. Phase Four was agreed and launched in April 2023.

|  |  |  |
| --- | --- | --- |
| Phase | Date | Total Funding Per Year |
| Phase One | Jan 21-Mar 21 | £100,000 |
| Phase Two | Sep 21-Mar 22 | £364,600 |
| Phase Three | May 22- Apr 23 | £516,344 (includes Phase Two underspend of £56,588) |
| Phase Four | May 23-Apr 24 | £502,650 |
|  | **TOTAL** | **£1,483,594** |
| Phase | **Date** | **Total Custodian Funding** |
| Phase One | As above | £100,000 |
| Phase Two | As above | £276,600 |
| Phase Three | As above | £465,000 |
| Phase Four | As above | £449,650 |
|  | **TOTAL** | **£1,291,250** |

**1.3 Overview of Fund**

**1.3.1 Aim**

Our **North Lanarkshire Children and Young People Community Mental Health and Wellbeing** Fund supports local delivery of the Scottish Government Children and Young People Mental Health and Wellbeing Framework, the North Lanarkshire Children’s Services Plan, and Lanarkshire Mental Health Strategy.

**1.3.2 Outcomes**

To improve children and young people’s mental health and wellbeing, with reference to the national [‘SHANARRI’](https://www.gov.scot/policies/girfec/wellbeing-indicators-shanarri/) framework.

**1.3.3 Objectives**

**1.3.3.1** Increase North Lanarkshire Community and Voluntary Sector (CVS) capacity to support children and young people’s mental health and wellbeing in their local community.

**1.3.3.2** Demonstrate the contribution of the North Lanarkshire CVS to improving children and young people’s mental health and wellbeing.

**1.3.3.3** Improve collaboration between schools and the community and voluntary sector.

**1.3.4 Fund Logic Model**

The [‘logic model’](https://evaluationsupportscotland.org.uk/resources/ess-support-guide-1c-developing-a-logic-model/) diagram below summarises the fund’s:

* Investment and other inputs
* Funded projects
* Beneficiaries
* Types of activities delivered
* Difference made (i.e., outcomes)

**Figure One: North Lanarkshire Children and Young People Mental Health and Wellbeing Fund Logic Model**



**1.4 Fund Context**

**1.4.1 Funding and Fund Management**

**1.4.1.1** Funding for this initiative is provided by the Scottish Government to the North Lanarkshire Council (NLC), which is then transferred to Voluntary Action North Lanarkshire (VANL) to manage distribution through the Community Solutions Programme - working in partnership with NLC Education and Families colleagues and CVS organisations. Decisions about local funding priorities are taken by the North Lanarkshire school clusters[[1]](#footnote-1), which commission CVS organisations to provide mental health and wellbeing support for their children and young people. VANL facilitates liaison between the school clusters and the CVS; manages award payments and supports evaluation and reporting.

**1.4.2** VANL supports this fund as part of the wider Community Solutions Programme, which VANL hosts and manages on behalf of [Health and Social Care North Lanarkshire.](https://hscnl.org.uk/)

**1.4.3** **Funding Awards Process**

**1.4.3.1 Process for Identifying Needs and Agreeing Funding Awards**

The process for accessing and using funding was revised for Phase Four following feedback from Phase Three. The new process is as follows:

* CIILs work alongside school staff to identify local priorities to support children and young people’s mental health, informed by a needs analysis and with a ‘solution-focussed’ approach
* A directory of available Community and Voluntary Sector (CVS) supports is provided via the online Glow Platform
* Using the directory, CIILs then contact the organisations they feel fit the needs of their cluster and agree with the organisation the support the organisation will provide
* A sign off form is signed by both the CIIL, and the CVS organisation providing the service and returned to VANL

**1.5 Evaluation, Learning and Improvement**

**1.5.1 Approach**

The Fund’s approach to evaluation, learning, and improvement is guided by the Community Solutions Performance Management, Evaluation, Learning, and Improvement Framework. The framework sets out the Community Solutions Programme’s approach to performance management, evaluation, learning, and improvement to support funded projects and the programme as a whole. The framework also sets out standardised measures and relevant supports to help funded projects make the most of their findings.

In previous phases, projects reported on reach and impact. In Phase Four, in line with the framework, in addition to reach and impact, projects will report on the following:

* Type of support provided – activities
* Numbers of unique individuals supported – reach
* The difference this support made to those receiving support – outcomes

The framework supports funded projects to gather more robust information on outcomes and capture and share more structured learning to inform improvements to their service or activities, and where possible to other funded projects, the wider CVS, and the Health and Social Care system.

**1.5.2 Performance Data and Method**

Funded projects are also asked to measure their project outcomes using feedback from young people measured against ‘SHANARRI’ indicators, which are widely used nationally and locally to measure outcomes as part of the Getting It Right for Every Child (GIRFEC) approach. The initials of the SHANARRI set out the following aspirations for every child and young person:

Safe

Healthy

Achieving

Nurtured

Active

Respected

Responsible

Included

Funded projects collect this data at points prior to, during, and post project delivery using a range of different methods including:

* Written surveys; online or via the phone
* Verbal feedback
* Observations
* Self-assessment methods such as the [Warwick Edinburgh Mental Wellbeing Scale](https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/) and progress tracker worksheets

Funded projects use this data to complete evaluation forms which are submitted to VANL at the six- and twelve-month mark of the projects.

VANL also hosts two Learning and Improvement events for representatives from funded projects and from school clusters for each phase. The purpose of these events is to collect feedback from funded projects on their experience of the fund. This feedback informs the delivery of future fund phases and service delivery for projects. The first event for Phase Four will be held in February 2024. and will be guided by the findings of this report.

Data from evaluation forms and Learning and Improvement events is used to prepare Impact and Learning reports for each phase.

Due to delays within schools to identify and award funding, the information for this progress report has been collated from a shorter ‘check-in’ evaluation form for CVS organisations which covered the essential information for this report. A more detailed report will be available in Autumn 2024.

CIILs report to NLC Education and Families at the end of each project, for each cluster. CIILS report on:

* the process of accessing and using funding
* reach
* impact and outcomes
* feedback on the intervention and provider

Data from CIIL evaluation forms has not been included in Impact and Learning reports for previous phases, as this was not shared with VANL. For future evaluation, CIILs report directly to NLC Education and Families and this will be shared with VANL.

A methodological issue with reporting has been identified as discrepancies between what is reported by CIILs and CVS organisations. For example, there is a disparity between the number of children and young people supported reported by CIILs versus the CVS organisations. VANL staff will investigate this further and clarify with CIILs and the organisations how information is being collected.

**1.6 Fund Delivery for this Period**

**1.6.1 Planning and Launch**

Funding for Phase Four was agreed in May 2023 and the Fund was launched in June 2023. VANL hosted two information sessions – one with CIILs and one with CVS organisations – in June 2024 to brief them on the Fund and the new process for assessing and using funding. CIILs and CVS organisations were able to use the summer to discuss and award funding for schools returning in August 2023, however, no funding applications were received until August.

**1.6.2 Number of Applications and Amount Awarded**

So far, £185.5k of £449.7k total funding has been awarded to 42 projects across 14 organisations. The remaining spend is £264.2k.

VANL staff offered support to CIILs to allocate the rest of their funding before December 2023, but to date, only two have allocated all of their funding. 15 of the 23 clusters have spent a proportion of their funding. Three remaining CIILs have not spent any of their funding or submitted their proposals. VANL have offered support to these CIILs to mitigate potential delays to service delivery and underspend, however, this was rejected. One CIIL then submitted an application for a counselling project, which is against the Fund guidelines. This indicates that some improvement is required (see section 5).

Of the 42 projects, 28 evaluation forms were returned and inform the content of this report. **Many projects have not yet or had just started delivery and therefore had nothing to report.**

13 evaluation forms were received from CVS organisations covering the following school clusters:

* Airdrie Academy
* Bellshill Academy
* Caldervale High
* Chryston High
* Clyde Valley High
* Cumbernauld Academy
* Cardinal Newman
* Dalziel High
* Kilsyth High
* Our Ladies High Cumbernauld
* St Ambrose High
* St Andrews High
* St Margaret’s High
* St Maurice High

15 evaluation forms were received from CIILs covering the following clusters:

* Caldervale High School
* Cardinal Newman High School
* Clyde Valley High School
* Cumbernauld Academy
* St Ambrose High School
* St Andrew’s High School
* St Margaret’s High School
* St Maurice’s High School
* Taylor High School

Evaluation forms were returned by both the CIIL and the CVS organisation for 10 projects.

**2. Overview of Reach and Impact for this Period**

**Figure Two: CVS Organisations - Summary of Reach**

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**Figure Three: CIILs – Summary of Reach and Impact**

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As mentioned above, there is a disparity between the number of children and young people supported reported by CIILs versus the CVS organisations. VANL staff will clarify with CIILs and the organisations how this information is being collected. As some projects are still ongoing, some children and young people have not reported on outcomes yet.

**Figure Four: CIILs - Summary of Feedback on Impact on Children, Young People, and Families**



At the end of each project, we will have specific information on impact including figures. This will be available in the end-of-phase report.

**3. Overview of Supports Delivered for this Period**

**3.1 Type of Support Delivered**

Please see the below Phase Four Interim Summary Report for a full breakdown of spend by cluster and by organisation. These reports also summarise the type of support being delivered in Phase Four and the vulnerable groups targeted by the interventions.



**Figure Five: Trends/patterns of need targeted by CIILs with interventions**



CIILs reported that most of the support provided so far in Phase Four has been health and wellbeing services. Emotional distress services include projects such as:

* Ponies Help Children’s ‘Equine Assisted Therapeutic Support’ project which includes a 7-week block of individual session for young people to work with their chosen pony to build resilience and reduce anxiety
* Social Track’s ‘Shredability’ project which includes a 10-week group session for young people to access bikes, scooters, and skateboards to build confidence through developing practical skills
* Outlet Play’s ‘Individual and Group Sessions’ which involves outdoor play sessions

Health and Wellbeing services included projects such as:

* Bazooka Arts’ ‘Transition Project’ which involves targeted support for S1 pupils with reducing anxiety and building resilience to engage in and attend school

Figure 6: Type of Support

* PASP’s ‘Play Champion’ project which involves an 8-week programme of outdoor play and learning leadership skills
* Make and Create Art’s ‘Creative Arts’ project which involves using creative arts to support children and young people struggling with anxiety

**3.2 Location of Support**

The CVS organisations provided information on when and where the supports took place. Most projects (82%) took place during the school day. Supports took place most often in a school building (43%), or community based (43%).

Figure 7: Time of Support

Figure 8: Location of Support

As the Scottish Government has advised that all interventions should be based in the community, the CVS organisations were asked if this has been possible to achieve, and if not, what are the barriers. Despite 43% of projects taking place within a school building, no barriers were identified by projects. VANL will investigate this further, and an update will follow this report.

The CIILs provided the following information on when and where the supports took place. The majority of supports took place during the school day (94%), and within a school building (63%).

Figure 9: Time of Support

Figure 10: Location of Support

The difference in the location and timing of support reported by CIILs versus CVS organisations is possibly due to evaluation forms being received from different projects – only 10 projects had evaluation forms returned by both the CIIL and CVS organisation. However, 29 (67%) interventions were during the school day, and 19 (58%) within a school building.

**4. Stakeholder Feedback about the Fund for this Period**

The following fund stakeholders were invited to share positive and critical feedback on their experience of the fund to date:

* Funded projects
* CIILs

Stakeholder feedback was captured from evaluation forms and is summarised below. This feedback is used to inform ongoing learning and improvement to the fund.

There was not sufficient time to organise a Learning and Improvement event prior to the preparation of this report. However, an event will be held in February 2024 where the issues raised within this report will be discussed and hopefully resolved. If necessary, a supplementary, anonymous survey for CIILs and CVS organisations will also be issued to capture more information.

**4.1 Fund Delivery Process**

The following positive and critical feedback from CIILS on the fund delivery process was received. CIILS were asked to provide feedback on the new process for accessing and using funding. The majority (80%) found that the process in 2023-24 was easier, and the remaining 20% found it to be somewhat easier. 87.5% found the process was time consuming, but was worthwhile for its impact on children, young people, and families.

Figure 11: CIIL Opinion on Funding Process

Figure 12: CIIL Opinion on Time to Access Funding

**Figure 13: Summary of further comments about the process**



\* VANL staff will review this comment further.

**4.2 Fund Evaluation**

The following positive and critical feedback from CIILs on the fund evaluation process was received. The CIILs engage with the CVS organisations to gather feedback from service users. The majority of CIILs (74%) reported that individual evaluations were done with the users of supports. The majority of CIILs (74%) reported that an evidence-based measure was not used to evaluate.

Figure 15: Use of evidence-based evaluation measures

Figure 14: CIIL engagement with evaluation

The CIILs also gather feedback from the CVS organisation in a variety of ways including:

* written format (40%)
* verbally or face-to-face (34%).

Four CIILs are in the process of collecting feedback from the providers as their projects are still ongoing.

Figure 16: Feedback from provider

**4.2.1 Challenges**

The CIILS reported on the challenges they have faced so far. This could relate to setting up supports, delivering, selecting people to attend, etc. Responses were mixed with 40% not experiencing any challenges; 27% facing some challenges; 33% experiencing challenges.

Figure 17: Challenges Faced

**Figure 18: Challenges Identified**

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**4.3 Supports Delivered**

Feedback was also received from CIILs on the supports delivered. The majority of CIILs (80%) would use the intervention again. The majority of CIILS (85%) also fed back that they got the service they were hoping for.

Figure 19: Feedback on Intervention

Figure 20: Feedback on Quality of Intervention

Figure 16: Feedback on Intervention

The following changes were reported by the three CIILS who said they would use the intervention again with changes:

* One CIIL said the intervention had been effective overall, but it didn’t have as much impact as hoped on some of the young people compared to others it worked well for. The CIIL reported that they will be reviewing why this was
* One CIIL found the cost to be quite high

The feedback about the reasonability of the cost of support was mixed. Most (53%) of CIILs felt that the cost of support was reasonable, whilst 40% thought it was somewhat reasonable. One CIIL was unsure or had not considered this. As this is based on subjective opinion, using a more robust approach to looking at value for money is proposed.

Figure 21: Reasonability of Cost of Intervention

**Figure 22: Summary of Feedback on Interventions**

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The majority (86%) would use the CVS organisation provider again.

Figure 23: CIIL Use of Provider in Future

**Figure 24: Summary of Feedback on Provider**

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**5. Improvement Issues and Actions**

Proposed improvement actions are set out below, with responses from appropriate senior colleagues in the council’s Education and Families department and NHS Lanarkshire Health Improvement Team sought by early Feb. 2024.

5.1 The following options are proposed for, to ensure that the fund is fully allocated as soon as possible:

* CIILs are instructed to accept guidance and support from VANL to accelerate agreement and issuing of funding awards
* where a CIIL is not able to allocate their funding timeously, this is allocated to another CIIL that is able to achieve this

**5.2 It is proposed that a panel-type approach to support allocation of funding awards is piloted in one cluster during the remainder of Phase Four and, if successful, would be used in future.** Proposed arrangements for the pilot are outlined below.

5.2.1 CIILs would still conduct the needs analysis for their cluster and identify their priorities, with local CVS organisations invited to submit applications against these priorities.

5.2.2 VANL would convene an Award Panel for the pilot cluster with the following members and VANL staff providing support.

* the CILL
* a representative from Education and Families
* a representative from NHS Health Improvement
* VANL’s Senior Children, Young People and Families Officer
* a service user and parent/guardian/carer

CVS organisations would submit proposals to the CILL who would share these with the panel. The panel would review applications and score each based on need, eligibility, quality and distributional criteria. Funding award decisions would be made ideally by consensus and exceptionally by majority vote.

5.2.3 This panel approach works well for other funds managed through the Community Solutions programme e.g. the Communities Mental Health and Wellbeing Fund for people over 18. It has also been successful in other local authorities e.g. a similar model is used in Dundee, as a joint approach with the third sector interface (TSI) and the Children’s Services Planning Partnership.

5.3There will be some changes to CIILs at the end of the financial year in March 2024 and this is likely to cause further challenges regarding allocation of funds. **Education and Families colleagues are requested to advise how this issue will be addressed**.

5.4 A formalised steering group for the Fund is proposed to enable more timely review and resolution of issues and support improvements. This should involve key staff from VANL, NLC Education and Families, and NHS Lanarkshire, with VANL convening. The group should meet online as needed during the rest of this phase and for any future phases at least quarterly.

[document ends]

1. \*School clusters: Schools within NL are clustered into groups of one high school and surrounding primary schools, forming a network of local schools which aid issues such as pupil transition from primary to secondary school and community links. There are 23 school clusters in North Lanarkshire, which all work to the Empowering Clusters Integrated Model where schools and school leaders – supported by NLC central staff – work together to support improvements to services and outcomes for families and communities, including action to tackle poverty, improve attainment and wellbeing. [↑](#footnote-ref-1)