

**REPORT TO: EDUCATION COMMITTEE – 20th DECEMBER 2004**

**REPORT ON: ROLL OUT OF INTEGRATED COMMUNITY SCHOOLS**

**REPORT BY: DIRECTOR OF EDUCATION**

**REPORT NO: 759-2004**

## **1.0 PURPOSE OF REPORT**

1.1 This report seeks Committee approval for the continuing roll out of the Scottish Executive's Integrated Community Schools programme across all primary and secondary schools in Dundee.

## **2.0 RECOMMENDATIONS**

2.1 The Education Committee is recommended to:

- i. note and approve the content of this report on Integrated Community Schools;
- ii. instruct the Director of Education to work with partners in the Council and other agencies to monitor the implementation of these proposals and report back to Committee no later than two years from the date of this report; and
- iii. remit to the Assistant Chief Executive (Management) to take proposals to the Personnel Committee to establish the support posts outlined in paragraph 7.2 below.

## **3.0 FINANCIAL IMPLICATIONS**

3.1 The ongoing allocation to the Council from the Scottish Executive for the roll out programme has risen from £311,600 in each of 2002-03 and 2003-04, through £467,400 in 2004-05, to the sum of £623,200 in 2005-06. The Scottish Executive has yet to announce how it will continue to support this major policy thereafter.

3.2 The allocation has been sufficient to meet total costs in the first three years of the roll out programme. A shortfall of £56,000 in 2005-06 will be met from the government's Changing Children's Services Fund.

## **4.0 LOCAL AGENDA 21 IMPLICATIONS**

4.1 These proposals will address barriers to learning through engagement with the wider community, and in so doing help to raise attainment and achievement for all pupils.

## **5.0 EQUAL OPPORTUNITIES IMPLICATIONS**

5.1 This report will improve equality of access to educational opportunities for all children, and in particular those with additional support needs.

## **6.0 BACKGROUND**

- 6.1 The Education Committee approved the proposals to begin the roll out programme of New Community Schools (now re-badged as Integrated Community Schools) in 2002 - report no. 794-2002.
- 6.2 Since that time a detailed blueprint document has been drafted and has been the subject of intensive consultation with all partners, both those within Dundee City Council and those external agencies, most notably the Tayside NHS Boards and Trusts, but also including the voluntary services. Primary and secondary Head Teachers and the teacher trade unions have also been consulted. The blueprint document has now been agreed by all partners, and is attached in its final form.
- 6.3 There are significant outcomes to report in the period following Committee report no. 794-2002, viz.
- i. Multi-agency School Referral Teams have become firmly established in all secondary schools in the city, including the three schools working within the Better Neighbourhood Services Fund project, addressing the difficulties facing some of our most troubled and troublesome young people. The level of inter-agency dialogue and the attempts to work together for the benefit of youngsters with real needs have been heartening.
  - ii. Pupil Support Workers (formerly known as Youth Workers) have been appointed in all secondary schools and are contributing well to onsite behaviour support arrangements for those who are unable to sustain the complete secondary curriculum. They bring different skills to the secondary school, and complement those employed by teaching staff.
  - iii. The Baldragon Academy associated primary cluster pilot programme has continued to be a successful model of the community school concept, delivering a range of school- and community-based activities that have enhanced the learning and teaching experiences of the pupils. These have included highly beneficial breakfast clubs in almost all the cluster schools and in some others not associated with Baldragon, credit unions where pupils and community adults take a leading role in their administration; study groups; the establishment of a learning centre in Macalpine; health promotion activities such as Heartstart, which arose out of community demands, and well attended holiday clubs.
- 6.4 HMle Scotland have evaluated the national pilot programme and have very recently reported their findings (*'The Sum of its Parts: The Development of Integrated Community Schools in Scotland', September 2004*). They draw attention to some key strengths of the emerging programme, but also to areas where further development nationally will be necessary if the overall aims of the initiative are to be realised.

## **7.0 PROPOSALS**

- 7.1 The attached blueprint document is the strategic policy document that describes how the programme will roll out in Dundee. It affirms the programme's aims and

objectives, reiterates the background to the programme and outlines the model, built around a cluster-based School Support Team, by which it will be delivered. It sets out in some detail how the various key agencies will contribute to the programme.

7.2 One very successful aspect of the Baldragon primary pilot has been the appointment of a team to promote, facilitate and co-ordinate activities. It is therefore proposed that a similar team be appointed to support the wider roll out programme. This will comprise: 1 FTE ICS Integration Manager; 2 FTE ICS Area Co-ordinators; and 1 FTE ICS Clerical Officer. 2 FTE Area Co-ordinators are considered adequate as the programme rolls out, but the potential need for a third appointment will be reviewed as the last clusters come on board.

7.3 We in Dundee will give serious consideration to the lessons of the HMle national evaluation. Through the Community Schools Steering Group, comprising senior officers from Council departments and our external partners, we will monitor the emerging programme and endeavour to ensure that it is successful from both strategic and operational points of view.

## **8.0 CONSULTATION**

8.1 This Report has been subject to consultation with the Chief Executive, Depute Chief Executive (Support Services) and the Depute Chief Executive (Finance); and also with the Assistant Chief Executive (Community Planning), the Director of Social Work, the Head of the Communities Department, representatives of Tayside NHS Boards and Trusts, primary and secondary Head Teachers, the teacher trade unions, and the voluntary services.

## **9.0 BACKGROUND PAPERS**

9.1 None

ANNE WILSON  
Director of Education

9th December 2004

JC/DD

**Dundee City Council**

**A Blueprint for**

**Integrated Community Schools**

**in Dundee**

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## INTRODUCTION: THE SCHOOL COMMUNITY

The Scottish Executive has indicated in unequivocal terms that the Integrated Community Schools (ICS) approach is the preferred model for the future delivery of educational services in Scotland.

It gives us the opportunity to extend our joint working to provide an integrated range of support for all our young people, including provision and support for vulnerable children and families. Nationally it is clear that we are failing our looked after children and our lowest attaining youngsters, and therefore on social and economic as well as educational terms, this development is essential.

The definition of “community” requires careful consideration. Dundee’s Community Plan 2001-2006 acknowledges that it is dealing with “a range of themes ..... based on the big issues”, such as lifelong learning and social inclusion. Some of these themes and issues are at the heart of the Education Department’s work, and some of the ongoing work of the department is referred to in the Community Plan – the Attendance Initiative, the development of cultural and sporting activities, etc. This is Community Planning in its broadest sense, using a multi-agency approach to explore all aspects of life in the city.

The experience gained from the Baldrigon cluster primary pilot is that a range of partnerships and joint working arrangements have already been developed with the community. Within the ICS roll out proposals the Operational Support Team would develop these links and be a key partner with the neighbourhood partnership networks in liaising with school staff, and contributing to joint planning and the development of local community plans and community learning plans. Schools would also use these developments to engage more readily with the themes and objectives set out in the National Priorities for Education, such as Values and Citizenship, and Learning for Life.

The ICS approach, therefore, concentrates attention on schools as a central part of their communities, and the strategies and mechanisms that can be employed to enhance the learning opportunities of the young persons in them. It lays constant emphasis on the learning needs of individual pupils, and how they can be met in individual schools and individual school communities.

The ICS approach differs from the traditional school approach by embodying the fundamental principles that the potential of children can be realised only by addressing their needs in the round, and that this requires an integrated approach to the delivery of a range of services necessary to assist children to overcome the barriers to learning and positive development. The Scottish Executive is clear that central to young people’s positive development are factors such as improved opportunities offered for family support, family learning and health improvement, all of which can be provided in a school establishment which is part of and for its community, and is in turn supported by its community. This approach, therefore, has a narrower, more directed focus on **the school community**, and what can be undertaken to assist the school in meeting the needs and achieving the potential of all young persons. Furthermore, the document reflects the diversity of local communities and sets out to establish a strategic framework within which each ICS can be developed to reflect local needs and characteristics.

## AIMS AND OBJECTIVES

The ICS approach is founded on the belief in giving children the opportunity to realise their full potential so that they leave school with relevant skills, well motivated with high self-esteem, and better equipped for adult life.

In preparing plans on how to take forward the work of ICS local authorities have been urged by the Scottish Executive to include in their arrangements eight elements regarded as core to the roll out programme. The proposals in this blueprint document take cognisance of these elements:

- **integrated planning of services within local authorities and NHS Boards and Trusts and other partner agencies**

The approach to children's services planning in Dundee in general, and to the development of New strategic direction has been given to integrated planning through the formation of an Executive Steering Group, comprising Directors and second tier officers from relevant Council departments, and representatives from Child Health Services.

- **integrated service delivery including firm financial commitments from all partners**

These proposals have drawn on tried and tested models of integrated service delivery, such as the Social Inclusion Partnership. Monies allocated to the roll out programme have not been generous and it is the Executive's clear view that complementary sources of funding must be identified.

- **clear plans to improve attainment and achievement**

Clear plans and targets to raise attainment will be part of the roll out programme. The Education Department has dedicated Parents' Evenings to discuss attainment issues, the establishment of direct links with individual families, and a number of school-based study initiatives. In addition all schools are required to identify their capacity for improvement and have in place Improving Pupil Achievement strategies. The Education Department has put in place a significant range of strategies to improve attainment and achievement in schools, and the current development plan makes specific reference to the needs of the lowest attaining 20% and to looked after children. Other departments and agencies have undertaken focussed work, sometimes jointly with the Education Department, with many of the most vulnerable young people.

- **high level of engagement and consultation with parents and carers**

In the initial phase of the roll out programme the proposals concentrate on improved co-ordinated work with parents, many of whom have complex needs of their own which impact significantly on their children's lives. Work is ongoing to include all parents in discussions about their children's achievements.

- **an explicit commitment to the welfare of pupils demonstrated by the arrangements in schools for pupils' pastoral support, and the emphasis that the school places on their emotional and social development**

The establishment of the concept of the multi-agency School Referral Team, more effective linkage initiatives, such as the establishment of Sure Start Health Visitors working alongside early years staff, and the appointment of Primary Mental Health Workers under the umbrella of the Changing Children's Services Fund. It is also important that all schools are working towards achieving Health Promoting Schools status.

- **good engagement with the wider community, especially in addressing barriers to learning**

Work should continue to be undertaken with the community as a whole, linked to specific development examples of departmental and school initiatives that establish links with the wider community.

- **joint training and work to achieve a shared understanding of objectives and better team working and skill transfer**

This is important for any model of integration between the school and its community, and will be enhanced by the establishment of onsite teams, working together and with other visiting partners, will both necessitate and facilitate skill transfer.

- **professional, determined and courageous leadership**

The direct management of the community school will rest firmly in the hands of the Head Teacher in the proposed model.

A number of specific aims arise from these elements. While some of these such as raising attainment and promoting social inclusion are central to the whole philosophy, others such as adult learning will have higher or lower priority, or, as in the case of improved health, will be subject to differing interpretations, all depending on local circumstances. The aims of the ICS approach, dependent on availability of resource budgets, are to:

- promote social inclusion;
- raise attainment;
- encourage and maintain good attendance;
- reduce exclusion;
- promote community participation;
- improve links with parents;
- support families;
- involve young persons;
- deliver comprehensive, integrated early years services;
- devise effective transition arrangements;
- provide out-of-school care and learning activities;
- provide alternative curricular programmes as appropriate;
- promote adult learning;
- improve health, by supporting the Health Promoting School;
- increase access to leisure opportunities; and
- create more opportunities for integrated training and planning.

## BACKGROUND

A short life working group comprising representatives from the key local authority departments, the Health Board and Trust, and other external agencies met in 2002 to draft proposals for the roll out programme of New Community Schools in Dundee. The group had as its remit: "to bring proposals to the Director of Education on how Dundee might take forward the roll out of the New Community School approach to the city's secondary schools".

The group's proposals have informed the roll out programme described in this blueprint, as have experiences from the phase 1 New Community School pilot in Baldragon Academy between 1999 and 2002, and the phase 3 pilot in the Baldragon cluster of associated primary schools, ending in March 2004.

Given the Baldragon experience it was decided that the roll out programme should begin in that school, as well as in Braeview Academy and St Saviour's High School. Between August 1999 and June 2002 both Braeview and St Saviour's had been Action Plan schools, in which the guiding concepts were similar to those of New Community Schools, in terms of seeking to raise attainment and promote social inclusion within the school community.

The roll out programme thus far has been tentative, and has involved the appointment of Pupil Support Workers and the consolidation of the School Referral Team as a mechanism for supporting those identified as having significant additional support needs, often stemming from behavioural difficulties.

In deciding how to proceed from this point we should be mindful of the relative state of readiness of Morgan Academy and Lawside Academy who, along with Braeview Academy, are part of the Better Neighbourhood Services Fund project '*Support for Young People*'. The aims of this project are very similar to those of ICS, in particular inasmuch as they require and rely on a multi-agency approach to support young persons experiencing difficulties in school, home or community, and their families.

We must also consider the clear success of the primary pilot project, and it is therefore proposed that we incorporate the Baldragon cluster of associated primary schools early into the roll out programme. This will not only allow us to continue the successful work of that pilot, but also to implement and evaluate a whole cluster approach.

Appendix 1 illustrates the proposed roll out programme.

## THE MODEL

Embedded in the model is the key principle that the school is in its community and for its community. The concept of a community school cannot be seen as an add-on or a transient project, dependent on temporary funding. It is a way of ensuring the effective delivery of a wide range of services to young persons and their families.

The model also recognises that learning opportunities exist outwith schools, and that for some young people opportunities within the wider community might provide better outcomes. In addition, *'For Scotland's Children'* reflected that early years services are important community and family support resources, which provide children with good social and emotional development opportunities.

The model illustrates the continuing development of fully integrated service delivery. It is based on a team with the ability to respond to all pupils. It will have the capability and capacity to deliver different functions and services to pupils and families across the school population. Some services might be available in a focussed way for individuals in need of support, such as troubled or challenging youngsters, or those with difficulty in maintaining a regular attendance pattern at school, or those with domestic difficulties requiring social work input. Other services could be delivered as part of a strategic approach to healthy living and lifestyles in terms of pupil and family learning.

### **Overall Management Structure** (see Appendix 2)

Strategic management of the ICS programme will be undertaken by the Community Schools Steering Group, chaired by the appropriate Education Services Manager, with input from managers of all agencies involved. Its role will be to determine and develop the strategic direction of the programme across the city, and to monitor and evaluate its impact.

Operational management will be in the hands of officers of participating agencies, charged with delivering the aims of the programme across the city on a day-to-day basis. This group will be chaired by the ICS Integration Manager (see below).

Operational support for the programme will be provided by a team comprising the ICS Integration Manager, 2.0 FTE ICS Area Co-ordinators, and 1.0 FTE ICS Clerical Officer. The team will have an important role promoting integrated work and facilitating developments in each cluster of the city.

### **School Support Team (SST)**

The roll out programme will be delivered on a cluster basis, managed in each cluster by its SST, meeting termly. The SST will comprise workers from the different agencies in each cluster, and will be chaired by the ICS Area Co-ordinator. A list of members and a brief description of their roles is given in Appendix 3.

The model is based on a core team, with sufficient scope for flexibility to allow schools to choose, if they so wish, to enhance the basic team with other external support. The model

reinforces the fundamental principle of the ICS approach by striving to address the needs of children and families in the round. It also clearly implies the financial commitment of Council Departments and their partner agencies to the process, as well as illustrating how it complements work with children funded from other government sources.

There is an overriding principle that the management of Integrated Community Schools and School Support Teams must be collegiate in style. The Head Teacher will lead the school and will have responsibility for day-to-day operational management and decisions. The Head Teacher and school staff will have to work in close conjunction with professionals from other agencies but cannot in any sense manage them. These professionals will continue to be managed in their own service by managers responsible for professional supervision or appraisal and staff development opportunities in their professional area.

There ought not to be any issue about management if the managers themselves are ready and able to work together to promote shared visions, to develop strategies and action plans, to value diversity and ensure respect for each other's values and culture, to learn from each other and develop skills that complement their own, and to maximise the use of resources.

It is accepted that workers from each agency will require to have their roles clearly defined, and to have a sense of identity within the school and its community. We should recognise, however, that there is overlap of skills and expertise which we should use to our advantage, each worker bringing knowledge and experience from their own area of work to the world of schools and school pupils. This will also give young people and their families improved access to services designed to meet a wider range of need.

There are also pragmatic matters that concern the ways and style of working, which make it necessary to retain the management structures we know. Multi-agency working inevitably means that different employees come together with different salaries, different hours, and different conditions of service. The ICS approach will see learning and teaching occurring in different ways, often at 'out-of-school' times, and certainly in locations other than schools and with people other than young persons of school age.

As well as management there are other issues which arise from multi-agency working which will require discussion and resolution in the detailed development of ICS. Chief among these are issues concerning accommodation for workers in schools, information sharing and confidentiality, and the implications for schools of an approach which includes staff from other agencies working in school during out-of-school hours.

## DEPARTMENTAL AND AGENCY INPUT

### Education

The Education Department will continue to set the agenda for improving pupil achievement, and deliver the aims set out in its Department Development Plan:

- to ensure that all learners achieve the highest potential
- to ensure equality of opportunity for all
- to promote a culture where everyone is valued equally and all achievements are recognised
- to ensure that all learners experience the broadest range of personal development opportunities
- to work in partnership with the home, the community and other services
- to develop an inclusive ethos which supports all staff in providing the highest quality Education Services
- to ensure that all services achieve best value consistent with high quality educational provision

The current Department Development Plan has six key objectives that will be supported by the ICS approach:

- improving pupil achievement
- supporting the curriculum
- building ethos and strengthening relationships
- promoting inclusion
- pursuing quality improvement
- managing resources effectively

With particular regard to ICS, the department will base its Home School Support Service staff in schools. This will facilitate better integrated working with other agencies in general and Social Workers in particular. The Home School Support Service will continue its traditional roles of offering support to young persons and parents/carers in times of need, in particular in the areas of non-attendance, child protection advice, and pupil welfare.

Considerable work has already been undertaken within early years service development in Dundee to promote better integration of care, education and health. The ICS model will strengthen local co-ordination of early years services to ensure that community resources work more effectively together to meet the needs of young children and their families.

Strong relationships with families can be established early in children's lives, building a strong foundation for future relationships within schools and the wider community. The ICS model will work alongside the developing Sure Start strategy to strengthen care and health support for children at the start of life and their families, pre-school education services, and childcare services for children aged 0 – 14 outwith school hours.

In the primary sector the model is appropriate for the close relationships that can develop in each school's community of children and families. Within each cluster, primary schools, in consultation with their pupils, their parents and carers, will be able to identify their own particular needs and work in the cluster towards achieving these.

In recent years primary schools have generally been very successful in raising attainment. With regard to meeting the additional support needs of primary-aged children, the department will continue to develop its policy of Supported Staged Intervention, and will consider with partner agencies how best to introduce the concept of the School Referral Team in the primary school.

Each secondary school has established a School Referral Team. The roll out programme will facilitate greater partner input to these teams, to support young persons at stage 3 and beyond of the department's Stages of Assessment and Intervention.

The appointment of Pupil Support Workers is designed to assist teaching staff to develop and maintain onsite behaviour support units, where an alternative curriculum in the mainstream school can be devised according to each pupil's needs. The Pupil Support Worker is expected to:

- work directly with young people in a wide range of opportunities and settings including group work, individual work, activity projects, issue-based work and drop-in sessions;
- assist and encourage young people to develop youth action projects based on their own ideas, to enable them to participate in projects and activities, stimulating new opportunities where relevant;
- assist with the personal and social development of young people;
- work as part of a team of multi-disciplinary staff within the initiative;
- provide additional support, counselling and guidance to young people where appropriate;
- contribute to effective multi-agency assessment and intervention;
- promote active citizenship, social inclusion and lifelong learning;
- assist with information analysis and production of reports, and maintain a record of work for monitoring and evaluation purposes;
- attend staff meetings as required;
- assist in the delivery of individualised learning for young people;
- attend appropriate training as identified and negotiated with school and other agency staff;
- contribute to effective home/school/community liaison;
- work with the Communities Department to improve pupils' access to community-based youth work services;
- act as a mentor for identified young people;
- carry out the role of Link Worker when appropriate for identified young people; and
- contribute to the development of Health Promoting Schools.

## **Communities**

The Communities Department has as its goal "bringing the Council closer to its communities and promoting community learning".

Its strategic priorities include:

- increasing citizen participation
- securing positive, challenging contact with young people
- delivering community learning
- developing community centres and libraries

- building partnerships with voluntary organisations and community groups.

The department supports the co-ordination of local community plans which will be structured around the same geographic boundaries as integrated community schools.

The Communities Department's main contribution to the objectives of the integrated community school has been through the development and implementation of Social Inclusion Partnership work with Dundee's most excluded and vulnerable young people and families, in particular, the Xplore Social Inclusion Partnership and BNSF managed intervention youth services, i.e. Fusion, Connexions, Route 15, Outdoor Education and Fairbridge in Scotland.

The Communities Department is organised in such a way that its youth work, adult learning and community development support is focused around the production and delivery of community learning plans.

The department's youth work is focused on 11-18 year olds and includes accreditation opportunities such as:

- the Duke of Edinburgh's Award
- Young Quality Scot
- Youth Achievement Award
- Natural Connections Programme

It supports a delivery of the Young Scot Card and its integration with the Dundee Smartcard.

The Communities Department is part of the Dialogue Youth Initiative, which brings together Government and young people with a view to promoting youth citizenship.

The department has successfully developed externally funded peer education initiatives which, to date, have focused on pupils from Lawside and Morgan Academies and feeder primary schools.

The Communities Department manages alternative programmes for those with particular needs who have been referred through School Referral Teams or who have been referred through the Xplore Social Inclusion Partnership.

The Outdoor Education Team managed by the Communities Department has a Service Level Agreement with the Education Department, which enables young people to experience the challenging benefits of outdoor education opportunities and to combine skills development with a learning curriculum, promoting personal and social responsibility.

The Literacies initiative targets those adults in Dundee who have literacy and numeracy difficulties. Many of those self-identifying for help are parents who are motivated by the desire to help their own children with homework and personal study. The Literacies initiative has funded special programmes for young adults from difficult backgrounds, who have experienced difficulty in obtaining recognised literacy and numeracy standards during their period in school.

The Corner (young persons' health and information project) continues to provide support to a significant percentage of young people from all schools in Dundee. It provides a free confidential sexual health service including:

- full range of contraception and pregnancy testing
- information on a wide range of topics, including drugs, housing and employment

- one-to-one support and advocacy
- outreach work in schools, colleges, community venues and public places
- a broadly based response to issues raised by young people including arts, mental health, single sex, cultural, travel and legal issues.

The expansion of IT access through locally based community learning centres across the City provides alternative opportunities for young people to access information, extend their personal study to access books and other information resources in a supportive environment.

## **Social Work**

The Social Worker in an ICS will be a specialist professional with a limited caseload.

The proposed ICS model includes the contribution of a range of professionals and others to give children the opportunity to realise their full potential. It is assumed that the involvement of each partner with any individual child or young person will be based on:

- whether what the partner can contribute is relevant to the needs of that young person
- whether the needs of the young person meet their criteria
- whether involvement is in accordance with agency priorities

This ensures priority access to each aspect of the ICS range of services to those most in need.

Consequently the cases where Social Workers are involved will be complex and relate to young people who are experiencing conflict or difficulties at home or in the community as well as in the school. There will be elements of the Social Worker's role that will enhance the general approach and contribution of the school to its community, but the emphasis will be on individual referral-based work from a school base to children and families.

A more general pastoral social work contribution to a school would be desirable, but is probably not a realistic use of scarce resources. It is not appropriate to consider broadening access to targeted social work at a time when the department is working out how best to manage access to those Social Workers it has.

For the Social Worker, issues may relate to child protection, child welfare, offending and the needs of looked after and accommodated young people. The practice and systems that are connected with these areas require specialist knowledge, professional support and clear lines of accountability in line with statutory responsibilities.

Social Workers offering a social work service to children, young people and families from a school base:

- need direct line management from and accountability to their own professional group;
- will benefit from continuing professional development at a time of change through training courses and in-house measures relating to best practice, standards and quality, as well as current procedures;
- will maintain an awareness of, and contact with, networks of support accessible through the Social Work Department; and

- will perform a link function between schools and the Social Work Department's case-holding teams throughout the city.

## Health

School Health Nurses are committed to supporting the implementation of the Integrated Community Schools agenda by ensuring that the health needs of the school community are taken account of in local authority and health planning frameworks. The school health nursing service strengthens and facilitates the well-being, academic success and life long achievement of children and young people by identifying and assisting in the modification of health related barriers to learning. They are also well placed to work in collaboration with others to build the children's and young people's capacity for adaptation, self-management and self-advocacy.

School Health Nurses are well placed to assist in:

- the Health Promoting/Integrated School Team plan;
- developing and delivering the health focussed aspects of an intervention;
- the support of children with chronic and complex health needs;
- the support of vulnerable children and young people;
- the support, training and education of staff in schools and communities;
- routine child health screening programmes;
- school Health Immunisation Programmes; and
- serving as a medical and public health resource in the school setting.

At present school Health Nurses are based in community settings but should resources become available we recognise the potential of basing them within the school setting and would be supportive of such a move in recognition of the potential benefits that this will achieve.

There is currently the equivalent of 243 hours of trained staff (Grade E and F) and 91 hours of untrained staff (temporary funding) for Integrated Community Schools. The Dundee team covers 72 schools including offsite centres, 10 Angus authority schools and 1 Perth & Kinross authority school. This equates to 3.375 hours per week per school and does not take into account higher level needs, greater demand or travel time, etc.

NHS Tayside is committed to supporting the implementation of the ICS and Health Promoting Schools (HPS) agendas within the framework of the Community Planning Health Partnership.

At present Dundee Local Health Care Co-operative (DLHCC) has a Children and Young People's Working Group which is multi-disciplinary and multi-agency, and as the DLHCC evolves into a Community Health Partnership this group will similarly develop as a key driver to support the delivery of services to children and young people in Dundee in line with the Child Health Strategy.

On a practical level, many of the core DLHCC services underpin the principles of ICS/HPS in terms of offering children and young people the best start in life from the antenatal period, through the early years with home visiting and the Child Development Programme, to wider aspects of positive parenting and family health. As providers of health care, Primary Care Teams are involved in the delivery of core health services to children, young people and their families throughout the lifespan.

Public Health Nurses (Health Visitors) in particular work closely with School Nursing Teams in supporting the children and their families at key transition stages, both in school and in the home environment. The DLHCC is also committed to the wider public health agenda which is facilitated through the Dundee Public Health Nursing Network and Primary Healthcare Teams.

The Public Health Practitioners (2) oversee the co-ordination of public health activity within seven locality zones, each of which has a named leader. The Public Health Practitioners work closely with the Directorate of Public Health, Dundee City Council and the voluntary sector to respond to identified health needs in localities. This includes work that may be highlighted through health needs analysis within schools and the wider community in which children and their families live. The DLHCC is also working to other national drivers, including tackling inequalities, which have resulted in jointly funded posts including those for Looked After Children. Surestart Health Visitors (2) are working towards improving access to healthcare for children whose families find it hard to access mainstream services.

NHS Tayside's Directorate of Public Health, through its specialist Young People's Team, supports schools to move towards being Health Promoting Schools. This includes health promotion training courses for primary school staff (including sexual health and relationships education) and secondary school staff. The Directorate's Young People's Team also provides educational resources (including a schools information newsletter), contributes to parent education and organises a health promotion drama tour of Dundee schools in order to help young people access NHS services.

The recent joint initiative between the Directorate of Public Health and Dundee's Better Neighbourhood Services Fund (BNSF), which has co-ordinated health promotion services to five Dundee secondary schools, has produced encouraging results.

### **Better Neighbourhood Services Fund: Support for Young People project**

The BNSF model has brought the three key Council departments (Education, Communities and Social Work) together at strategic and operational level. There are two main tiers linked by a Co-ordinator with a planning, monitoring and budgetary remit:

- The Steering Group comprises 2<sup>nd</sup> tier officers from each of the partner departments, and is chaired by the Assistant Chief Executive and 'served' by the Co-ordinator. It meets around six times per year. There is additional support from the departmental Service Managers who meet with the Co-ordinator to develop strategies as required.
- The Operational Management Team meets monthly and comprises team leaders from each department, the Health Facilitator and the schools' Depute Head Teachers. It is chaired by the Co-ordinator.

BNSF believes, through its developing experience, that it is in a strong position to advise the roll out programme with regard to the management framework, the role and tasks of the proposed Operational Management Team, and the need to avoid a proliferation of structures and meetings.

It also recognises the significant success of the School Referral Teams across the city and suggests that they should be at the heart of the ICS model. BNSF further proposes that SRTs in some shape or form should be considered for primary schools, either linking with

their cluster secondary school as they do now under the Attendance Review Group, or having their own type of SRT system established, linked with early years provision. It is noted that the primary schools' agenda is different from that of the secondary, especially regarding the level of demand and nature of behavioural difficulties.

The professional management system in BNSF, with workers line-managed within their professional discipline, has been a success. There are distinct career pathways, supervision and support mechanisms for staff in place. This has not affected workload management, as SRT co-ordinators are able to identify and prioritise cases, in partnership with workers and team leaders. Lines of accountability and responsibility have, by and large, been worked through and accepted, and barriers to multi-disciplinary working are being removed. It may be useful to cement this approach by developing a professional standards framework for non-teaching staff, using the Nursing in Schools Framework as a guide.

The BNSF initiative has introduced an external Social Worker and Youth Workers who work alongside the Pupil Support Workers and Home School Support Service workers whose posts are established in the Education Department. Both sets of workers are delivering a distinct, quality service but it is important that the potential for confusion is recognised and avoided.

Accommodation has been a major consideration within the BNSF initiative. BNSF has a mixture of co-located and offsite staff. Space is very much at a premium and inhibits any attempts at co-location, but difficulties have been overcome. There is a strong argument for all staff to be co-located in order to promote a greater sense of belonging, but on the other hand care must be taken that professional identity is not diluted. Consideration should be given to all available accommodation for ICS staff, including space outwith secondary schools.

Social Work Assistants and Out-of-Hours Youth Support Workers have been established within BNSF and have firmly established their credibility within a very short time, offering a service previously unavailable to vulnerable children. This is very similar to the roles of some Home School Support Service workers.

BNSF would greatly regret the loss of the Health Resources Facilitator post, in which the incumbent has been successful in building up an impressive network of resources, now being introduced into schools and communities.

A major strength of BNSF has been the in-built monitoring and evaluation framework, with three component strands, one of which is internal monitoring by the Project Co-ordinator.

In summary we consider that BNSF has been successful because it has endeavoured to maintain a simple approach, making good use of new and existing resources and management systems, and learning not to introduce additional unnecessary tiers of management.

## ROLES AND RESPONSIBILITIES

### ICS Integration Manager

The Integration Manager is responsible for the management of the ICS initiative, as a community driven initiative in each cluster; and will develop integrated working among the various partner agencies in order to provide support to pupils and families in the local communities.

Key duties will involve:

- taking lead responsibility for co-ordinating the development and implementation of the ICS initiative in the clusters;
- promoting and taking forward the delivery of integrated services, encompassing Education, Social Work, Communities and Health;
- maintaining effective working relationships and links with managers within partner agencies, and appropriate statutory and voluntary agencies;
- ensuring the delivery of ICS activities to nurture area development and deliver the services required by young people and their families;
- monitoring and evaluating the effectiveness of the ICS initiative, and providing regular reports to the ICS Steering Group;
- preparing information for dissemination on the initiative's impact on social inclusion, educational attainment, pupil personal development, community learning, social welfare and health;
- encouraging school staff, members of the community and partner agencies to contribute to new and existing cross-service initiatives;
- facilitating communication between groups, and providing advice and guidance to interested parties on the initiative;
- promoting pupil, parent and community participation in furthering the objectives of the initiative;
- establishing a consultation framework within schools and centres, and linking this into established Council consultation frameworks within the local community, to ascertain the views of children, young people and parents, and the various community and interest groups on the services and service levels that might be effectively delivered in an integrated way within local schools;
- managing the administration of the project, including the allocated budget, in a way that ensures best value;
- supporting school senior management and staff in their work to develop Health Promoting Schools;
- promoting the use of schools as a community resource;
- identifying and assisting in the development of an appropriate inter-agency programme of joint staff development and collaborative working for staff in liaison with their line managers;
- contributing to the management of activities which will improve ethos, attendance, early intervention, family support, alternatives to exclusion and alternative curricula, in conjunction with members of the senior management teams of schools and other services; and
- chairing the ICS Operational Group.

## ICS Area Co-ordinator

The Area Co-ordinators will work with clusters of schools, and will encourage, facilitate and oversee the development of integrated services.

Key duties carried out by the Area Co-ordinators will include:

- assisting the ICS Integration Manager in the effective discharge of that remit;
- assisting in the development and implementation of the ICS model on a cluster basis;
- helping to promote and take forward the delivery of integrated services encompassing Education, Social Work, Communities and Health;
- co-ordinating and assisting in the delivery of activities outlined in the ICS development plan, in order to support area development and the delivery of services required by young people and their families;
- assisting in the monitoring and evaluation of the effectiveness of the ICS initiative and the provision of reports to the Steering and Operational Groups;
- as a member of the project team, encouraging school staff, members of the community and specialist agencies to contribute to new and existing cross-service initiatives;
- facilitating communication between groups and providing advice and guidance to interested parties on the work of the initiative, as directed by the ICS Integration Manager.
- as a member of the operational support team, promoting pupil, parent and community participation in furthering the objectives of the initiative;
- identifying and promoting links with departments, agencies and organisations in order to assist schools to develop a range of ICS activities;
- offering advice to schools regarding the identification and acquisition of appropriate resources;
- identifying and reporting good practice in individual schools and clusters, and preparing related information for dissemination;
- working with schools and partner agencies to devise activities which will impact on social inclusion, educational attainment, pupil personal development, community learning, social welfare and healthy lifestyles;
- establishing local links with children, young people and parents, and the various community and interest groups, to ascertain views regarding ICS services;
- chairing the School Support Teams in each cluster; and
- representing each cluster on Local Community Learning Partnerships.

## SUMMARY

The concept of the ICS has at its heart the twin principles of raising attainment and achievement and social inclusion. Let there be no doubt that the concept will be difficult to realise, and will require more than the two or three years of the roll out programme before it is fully embedded. **It is therefore aspirational, a long-term project aiming for long-term results.** Commitment to the concept is required from everyone concerned, and must be evidenced in word and in deed.

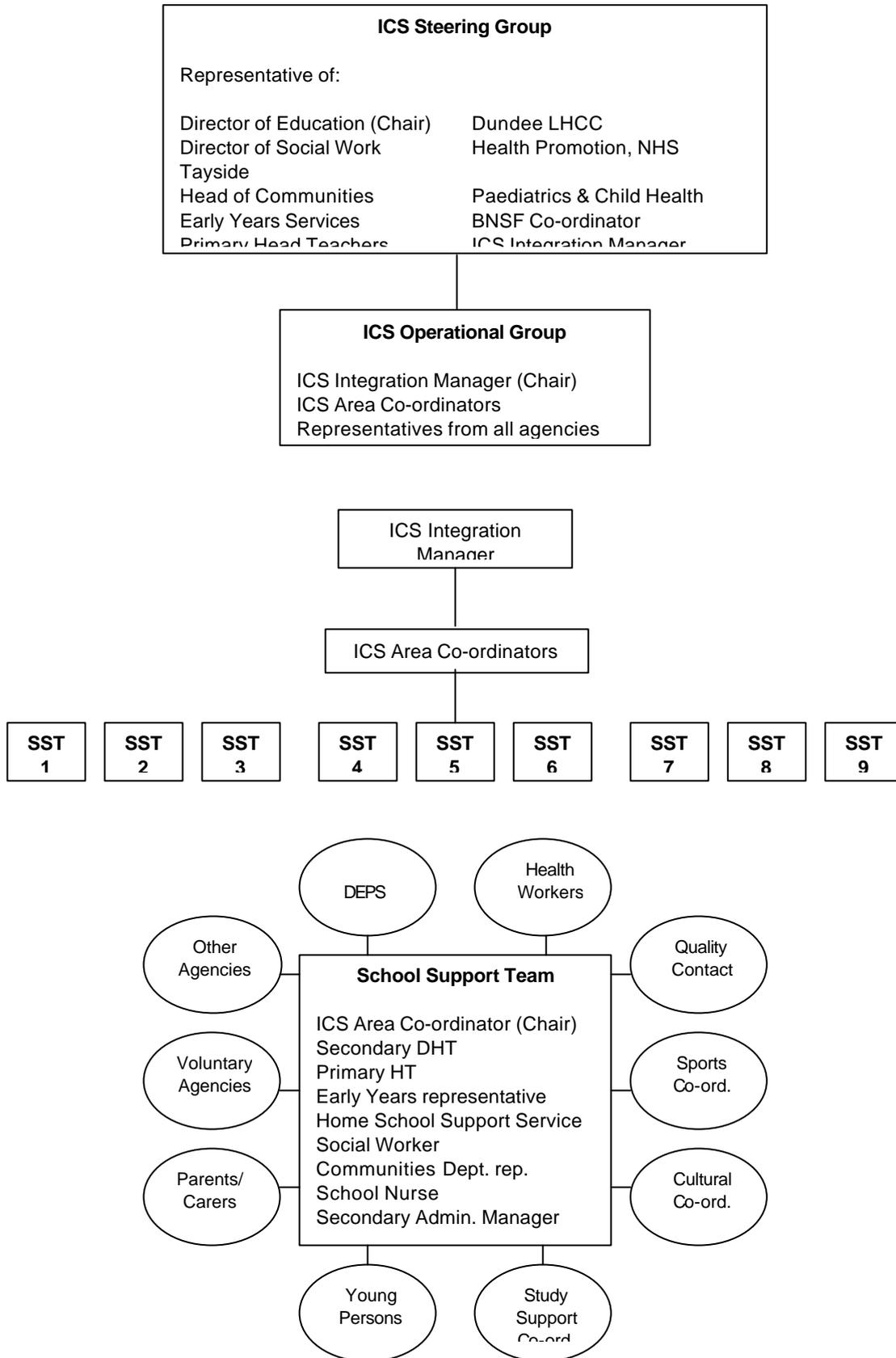
Secondly, if this ICS approach is correct, **it is correct for all our children in all our schools.** It is not just for children who are looked after, or disadvantaged, or troubled and/or troublesome, although in keeping with Scottish Executive and local policy they will clearly require some priority attention. We will also work with all our children and young people beyond and outwith the school, helping them and their parents and carers to engage with learning.

Throughout this blueprint we have taken the opportunity to emphasise the multi-agency approach vital to the success of the venture. All schools – nursery, primary and secondary – have traditionally been seen as free-standing educational establishments, but the concept of the ICS goes beyond that. The ICS needs to be modern and flexible and at the heart of its community. In short **community school structures cannot be grafted on to traditional school structures.**

## THE ROLL OUT PROGRAMME: 2002-2007

- Phase 1: 2002-03** Appointment of Pupil Support Workers in:  
Braeview Academy  
St. Saviour's High School
- The BNSF project established in:  
Braeview Academy  
Lawside Academy  
Morgan Academy
- Phase 1 pilot in Baldragon Academy continued between March and June 2002, then concluded
- Phase 3 pilot in Baldragon primary and early years cluster continues
- Phase 2: 2003-04** All previous projects continued, plus:
- Appointment of Pupil Support Workers in:  
Baldragon Academy  
Craigie High School  
Menziesshill High School  
St. John's High School
- Phase 3: 2004-05** All previous projects continued, plus:
- Appointment of Pupil Support Workers in:  
Grove Academy  
Harris Academy
- ICS approach established in:  
Baldragon Academy cluster  
Craigie High School cluster  
Menziesshill High School cluster
- Appointment of ICS Integration Manager and Area Co-ordinators
- Phase 4: 2005-06** All previous projects continued, plus:
- ICS approach established in:  
Grove Academy cluster  
Harris Academy cluster  
Morgan Academy cluster (BNSF still involved)
- BNSF project concluded
- Phase 5: 2006-07** All previous projects continued, plus:
- ICS approach established in:  
Lawside Academy cluster (following ending of BNSF)  
Braeview Academy cluster  
St. John's High School cluster

## ICS ROLL OUT MODEL



## THE SCHOOL SUPPORT TEAM

<b>Core members</b>	
ICS Area Co-ordinator	The co-ordinator will chair each SST for which s(he) is responsible.
Depute Head Teacher	A member of the school Senior Management Team, the DHT will chair the secondary School Referral Team and will have overall responsibility for multi-agency co-ordination.
Representative Primary HT	The HT will represent the views of the cluster primary HTs on a rotational basis.
Early years representative	The nominee can be a nursery HT, a representative from a Child and Family Centre, or a representative from the private sector. S(he) will represent the views of all early years services in the cluster.
HSSS Worker	These persons will work together to support individual children and their families, through both statutory and non-statutory work, including attendance default.
Social Work representation	
Communities representation	Building on the successful model of the Better Neighbourhood Services Fund, this worker can oversee work beyond the confines of the school and into the community.
School Nurse	A School Nurse will be allocated to each secondary school and cluster primaries, and will help to deliver aspects of the health promoting school, depending on the priorities identified by the SST.
Tayside Police	As well as providing an effective link with the local community this person will have a locus in areas such as youth justice and child protection.
Admin. Manager	This new proposed post in each secondary school might service the SST and advise on financial and other administrative matters.
<b>Access to:</b>	
Educational Psychologist	The Educational Psychologist will provide a consultation-based service, negotiating CPD input for school and other staff; research and development projects; and casework, involving assessment and reporting (within the authority framework for assessment and ASN legislation), and direct interventions with pupils and families.
Health Workers	<ul style="list-style-type: none"> <li>• School Nursing Assistants;</li> <li>• a Primary Mental Health Team (based at Dudhope House), set up to support primary care and non-specialist workers in the management of mental health problems;</li> <li>• a Drugs &amp; Alcohol Co-ordinator;</li> <li>• two Complex Needs Co-ordinators;</li> <li>• two Public Health Practitioners (PHP), who co-ordinate and facilitate public health activity for DLHCC, and co-ordinate DLHCC's public health response through 7 locality zones, each with a named lead;</li> <li>• NHS Tayside's specialist Health Promotion Service</li> </ul>
Quality Contact	The team will offer advice on and participate in transition events between primary schools and the secondary school.
Sports Co-ordinator	The worker in each secondary school co-ordinates a range of sporting activities, with the aim of promoting healthy lifestyles.
Cultural Co-ordinator	There are two workers in the city who co-ordinate a range of cultural activities, with the aim of promoting creativity.
Study Support Co-ordinator	The worker in each secondary school can facilitate access to Library services and assist in the promotion of Adult Learning.
	They should be regularly consulted, and every attempt made to

Pupil and Parent bodies	promote good, strong parental links, especially with those who display reluctance to interact.
Voluntary/other agencies	The SST will involve whatever services and agencies (Xplore, SPACE, HE and FE, retail and commercial enterprises, etc.) it considers necessary to strengthen community support and fellowship.