

'We live longer, healthier lives. Individuals thrive and reach their full potential'

**Shetland Children's Plan 2021- 2024**  
**Year two 2022/23**



Building a brighter future together for  
Shetland's children and young people

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## Executive Summary

Welcome to the sixth Annual Report for Shetland’s Integrated Children’s Service Plan. This Report covers the period from April 2022 to March 2023 and describes our approach to ‘build a brighter future together for Shetland’s children and young people’.

For most of our children and young people, Shetland provides a safe and nurturing environment within which they can grow and flourish. We have high standards of educational and health provision, with strong community resources and a rich heritage and culture. However, Shetland is not immune to social, economic and environmental factors which may cause our young people not to get the best start in life, and not to reach their full potential. We recognise that, and as partners, we are committed to working together to improve the outcomes for our children, and their families, where our services and interventions can help and support them.

In 2022-23, we continued to nurture the strong collaborative approaches built through the COVID-19 pandemic to take forward work that requires a partnership approach to have a significant impact. This included implementing a shared approach to domestic abuse in the Safe and Together Model, embedding the HENRY approach to support the best start in life, and bringing together local parenting support under one offering to simplify the support landscape for both parents and professionals.

We have also seen the implementation phase of some key pieces of engagement – where we have shifted away from a consultation approach to meaningful ongoing engagement and shared decision making– these include the implementation of the Well Youth service, the progression of the Anchor Project into the Anchor for Families service, and the next steps of the Neurodevelopmental Pathway project. 2022-23 saw the implementation and analysis of the first comprehensive schools Health and Wellbeing census, with 73% of P5-S6 pupils taking part locally. This has given us a wealth of information to understand any gaps and challenges and inform future service planning, and will form a central part of our planning for the future over 2023-24 as we analyse the local data.

As a Partnership operating within the wider Shetland Partnership we have played an important role in the development of key pieces of strategy and planning to ensure children and young people in Shetland are best served by the decisions that affect them. These include the Our Ambition – Excellence and Equity for Shetland’s Learners strategy, and the next stage of delivery of the Shetland Partnership Plan. Running through all of our work has been our commitment to embed the UNCRC principles and deliver The Promise in Shetland.

Throughout 2022-23 we have started to see the longer term effects of the pandemic and cost of living crisis impacting on families. Tackling inequalities in all the forms that they take, remains a priority and has been central to the development of the next iteration of our joint children’s plan – to be published shortly.

It has been an honour to chair the Shetland Children’s Partnership in 2022-23 and I want to take this opportunity to thank all of our staff for the hard work they do to deliver the best possible services and support for children, young people and families in Shetland.

I hope you enjoy reading about our work.

Professor Kathleen Carolan, Chair of the Shetland Children’s Partnership

## Introduction

Our longer term ambition as a Partnership is to work together to improve children and young people's life chances. This has been broken down into 10 outcomes that will help us realise our ambition.

1. Our Children and Young People (CYP) have improved social and emotional resilience so they can be happy and content members of our community;
2. Our children have a healthier, safer, and more memorable childhood;
3. Our Children and Young People have a greater number of more positive learning opportunities to enable them to move forward into adulthood with the skills, abilities and ambitions necessary to serve them and their communities well in the future;
4. Our Children and Young People experience fewer inequalities;
5. We are better at safeguarding and promoting the wellbeing of our most vulnerable people, including looked after Children and Young People and care leavers;
6. Every child has the best possible start in life and the early stages of their life, from before they are born until they begin primary school, are as positive as they can be;
7. Our services:
  - Are more person centred;
  - Act earlier, and prevent future need wherever possible and
  - Better at working together.
8. Improved attainment and achievement of positive destinations in adulthood;
9. The impact on families under pressure is reduced, focus areas:
  - Mental health;
  - Domestic Abuse and
  - Alcohol and other drugs.
10. We are better at listening to the needs, fears and wishes of young people, and using what we learn to improve our services.

Through this annual report we hope to tell the story of work that has been progressed by the Partnership – the complex, challenging issues that cannot be solved by any one organisation – and also to demonstrate the added value from relationships and communication built up through the Partnership, by sharing examples of collaborative work.

Under the Children and Young People (Scotland) Act 2014 a Children's Services Plan must be prepared with a view to achieving the following five aims:

- That 'children's services' in the area are provided in the way which:
  - Best safeguards, supports and promotes the wellbeing of children in the area concerned;
  - Ensures that any action to meet needs is taken at the earliest appropriate time and that;
  - where appropriate, action is taken to prevent needs arising;
  - Is most integrated from the point of view of recipients, and
  - Constitutes the best use of available resources.
- That related services in the area are provided in the way which, so far as consistent with the objects and proper delivery of the service concerns, safeguards, supports and promotes the wellbeing of children in the area concerned.

[Children's Services Planning Guidance](#) is available for further information.

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In writing the 2021-24 Children's Partnership Plan the team identified markers of progress under 4 themes that we hoped would be achieved, or the conditions for achieving them would be created by the end of the term of the plan. These are listed below –

	<b>Ambition</b>
<b>Equity</b>	Increased understanding for staff and community leading to reduced stigma around child poverty.
	Build equity practice in schools.
	Further develop transitional pathways for young people with complex needs moving into adult services including mental health.
	Further develop early intervention and prevention services.
	Create trauma informed organisations and community where every encounter matters, preventing re-traumatisation through relationships that offer collaboration, choice, empowerment, safety and trust.
<b>Participation</b>	Develop an holistic Early and Effective Intervention approach for people in the youth justice system.
	Ensure decisions about how to make services better at the design, commissioning and delivery stage are made with children and young people;
	Ensure the views of young people are heard and help to inform SPPC.
<b>Rights</b>	Communities more aware of children's rights across all services and activities.
	Create 'child friendly' public services in health, education, arts and culture, leisure and social services to welcome and support young people and children.
<b>Corporate Parenting</b>	Be <b>alert</b> to matters which, or which might, adversely affect the wellbeing of an eligible young person.
	<b>Assess</b> the needs of eligible children and young people for any services or support provided.
	<b>Promote</b> the interests of eligible children and young people.
	Seek to provide eligible children and young people with <b>opportunities</b> to promote their wellbeing.
	Take appropriate action to help eligible young people to <b>access</b> these opportunities.
	Keep our approach to corporate parenting under constant review, seeking out <b>improvement</b> wherever possible.


## Shetland Snapshot in Numbers

**27%** of Shetland's Population are aged **0-24yrs**



2021, NRS

**96%** young adults (16-19) in education, training or employment




2022, Skills Development Scotland

Life expectancy at birth

**83.2** years Female  
  
**79.6** years Male

2018-21, NRS

**15%** children in Shetland are living in poverty (a return to pre-pandemic levels)



End Child Poverty - 2021/22

**1 in 12**



**P7-S6 pupils go to bed or school hungry**

always or often

P7-S6 HWB Census 2022

'In general, my health is...'


**Excellent or Good 75%**

**Fair or Poor 22%**

**Prefer not to say 3%**

(P5-S6) HWB Census (2022)

**84%** of Primary 1s had no obvious tooth decay




Scottish average was 73% PHS 2021-22

school attendance **96%**



2021, Our Ambition - Excellence and Equity Strategy

**91%** of all Health Visitor routine check-ups were done on schedule



PHS 2021-22

**99%** for the first visit after a baby is born



I always/mostly feel safe in the area where I live...



**94%**



**87%**

HWB Census 2022

## Nurturing our Partnership

Following the review of our Children's Partnership in 2021/22 to improve the progress of collaborative work towards shared objectives we have matured and developed as a Partnership allowing us to undertake a number of joint pieces of work to progress against the complex, shared challenges that impact outcomes for children and young people in Shetland. This work to align approaches and activity is both supporting better outcomes and more sustainable approaches, in a system that has been impacted by workforce and financial challenges.

### Developing our Approach

- Joint inspection preparation work
  - Realising the benefits from the joint file reading exercise the previous year in terms of sharing good practice and learning across organisations the local reviewing remit of Quality Assurance group reviewed their remit to better direct their work towards action, with a focus on children at risk of harm, by aligning themselves as an inspection preparation group. This has supported a systematic approach to assuring quality and consistency across services. The group benefitted from close links with the team undertaking the adult services inspection, and also from relationships with other authorities who had undergone Children's Services inspections. The group is in the process of a self-evaluation against the revised national guidance for Child Protection.
- Increasing third sector involvement to make equal partnership
- Central to achieving best outcomes for children and young people, and working well together is having the right people around the table to drive change. We have a vibrant, valued third sector in Shetland who are integral to progress towards our ambition. This year we welcomed a number of new third sector partners into the Shetland Children's Partnership in recognition of their role as equal partners, these include:
  - Ability Shetland;
  - VAS Open Project;
  - Relationship Scotland Shetland Branch;
  - Shetland Women's Aid;
  - Moving On Employment Project.
- We still maintain our Third Sector Interface colleague as Vice-Chair of the Partnership who acts as a liaison between the breadth of the Third Sector in Shetland and the SCP.
- Using our Partnership voice to influence the wider system
  - Work on the UNCRC to expand the knowledge and understanding of requirements across our system to uphold and champion the rights of children is ongoing. While children's services and teams have been engaging with the UNCRC for some time there is still work to be done to ensure our wider system are able to meet their obligations to our children and young people.

## Building our Evidence Base

- To support best practice, targeting of resources and efforts, and understand our progress we need to have a reliable picture of the situation in Shetland. This includes through reviewing data, and considering this alongside best practice guidance, qualitative feedback and input from children, young people, professionals and communities. Needs Assessment.
- As part of the process of updating the Children's Partnership Plan a Health Needs Assessment was undertaken. A review of current data, discussions with teams and service users, and best evidence around service provision, recognised the progress made so far, and identified the following priority outcomes:
  - All our children have the best start in life in a nurturing, safe and stable home environment;
  - We improve attainment and achievement for all children and young people;
  - We reduce the impact of poverty on children and families;
  - The emotional health & wellbeing of children and young people is improved (including through transitions);
  - We Keep the Promise for our Care Experienced children and young people;
  - All children and young people are included, and have opportunities to participate;
  - Our most vulnerable children and young people are protected and
  - Our workforce are nurtured and have opportunities to develop.

The Shetland Children's Partnership recognise that their role in tackling many of the root causes of poorer outcomes is limited, and so a great deal of work goes into building relationships and advocating for children's outcomes, and alignment of activity across sectors to have an even greater impact on the life chances of our children and young people.

- Self-assessments and mapping
  - From previous pieces of collaborative work we recognise the need to understand and appreciate the many services and provisions available to support children, young people and their families in Shetland. On one hand there is a need to streamline and make appropriate support more accessible, on the other there is great value in the breadth and depth of support available and we do not want to lose the individuality or community links that many of our small services have.
  - There have been a number of pieces of self-assessment and mapping work undertaken this year to support the aim of understanding the landscape to facilitate the spread of key success factors across services supporting children, young people and families. This work has helped us to identify gaps, make best use of resources, and drive improvement. Some key pieces of work include:
    - How good is our whole family support self-assessment (Sept 22 doc)
    - Mapping Mental Health and Wellbeing support available (OUTCOMES – Well Youth);
    - Mapping Alcohol and Drugs support – for young people affected by others' substance use, and for those with concerns around their own substance use. (Outcomes – Well Youth, SWA funding, commissioning SDF training).



## Nurturing our workforce

The critical success factors for achieving best outcomes are supported by the processes and procedures we have in place, but they are delivered by our teams. The workforce in Shetland are an incredible asset. We recognise as a Partnership the high expectations placed on our teams, and that the implementation of policies, procedures and ways of working often fall upon the same few people.

For best outcomes and a “no door is the wrong door” experience we must support our teams to be confident and capable of recognising and responding helpfully to the challenges children and young people are experiencing. Local analysis has identified a number of key areas where knowledge or confidence among teams could be better to help us to realise our ambition to be a person-centred, accessible, responsive system. These areas are priorities for cross Partnership training and development, and include:

- Supporting CYP with Care Experience
  - Work with the Each and Every Child team;
  - Framing workshop – this is about looking beyond services, into the wider system and community, and understanding that how we speak about care experience has a big impact on people’s opinions and attitudes and on the life chances of children, young people and their families.
  - The Each and Every Child team ran an online introduction to framing workshop, and followed up with an in-person visit to deliver Corporate Parenting training. These events were well attended by organisations from across the Children’s Partnership and were very well received.
- Trauma informed organisations
  - Trauma-informed practice training has been available across the Partnership for a number of years, but a coordinated, strategic approach to implementing this approach across services has been difficult to realise. A series of workshops run by NES (NHS Education for Scotland) towards the end of 2022-23 focussed on Trauma Informed organisations, system and workforces and brought together representatives and teams from across our children’s and adult services to progress their learning and explore the barriers and potential solutions to implementation of a trauma informed approach across our organisations.
  - While work towards an implementation group to support the work of local “Trauma Champions” has progressed there are still challenges around time and capacity to engage in training and service review exercises. Having a trauma informed workforce as a key component across our main strategic plans in Shetland should support prioritisation of this by all partners.
  - To deliver effective trauma-informed approaches, our workforce must be safe and well. In response to the increasing pressure and challenges with mental wellbeing experienced by teams, Shetland Islands Council ran a workshop for local education and children’s services teams which supported staff to reflect on vicarious trauma, learn more about how to recognise it in action and learn how to use proactive self-care as a means of managing its impact.
  - Sessions were run for staff and for managers, to ensure teams could be supported to implement any learning or action identified.
  - Following the workshops it was noted that there was a sense of renewed focus on staff wellbeing and the need for this to be a priority within Children’s Services but also more widely across the local authority. More details about this piece of work can be found in the [case study produced for the Improvement Service](#).

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 <p>1 DEFINITION OF A CHILD</p>	 <p>2 NO DISCRIMINATION</p>	 <p>3 BEST INTERESTS OF THE CHILD</p>	 <p>4 MAKING RIGHTS REAL</p>	 <p>5 FAMILY GUIDANCE AS CHILDREN DEVELOP</p>	 <p>6 LIFE, SURVIVAL AND DEVELOPMENT</p>	 <p>7 NAME AND NATIONALITY</p>
 <p>8 IDENTITY</p>	 <p>9 KEEPING FAMILIES TOGETHER</p>	 <p>10 CONTACT WITH PARENTS ACROSS COUNTRIES</p>	 <p>11 PROTECTION FROM KIDNAPPING</p>	 <p>12 RESPECT FOR CHILDREN'S VIEWS</p>	 <p>13 SHARING THOUGHTS FREELY</p>	 <p>14 FREEDOM OF THOUGHT AND RELIGION</p>
 <p>15 SETTING UP OR JOINING GROUPS</p>	 <p>16 PROTECTION OF PRIVACY</p>	 <p>17 ACCESS TO INFORMATION</p>	 <p>18 RESPONSIBILITY OF PARENTS</p>	 <p>19 PROTECTION FROM VIOLENCE</p>	 <p>20 CHILDREN WITHOUT FAMILIES</p>	 <p>21 CHILDREN WHO ARE ADOPTED</p>
 <p>22 REFUGEE CHILDREN</p>	 <p>23 CHILDREN WITH DISABILITIES</p>	 <p>24 HEALTH, WATER, FOOD, ENVIRONMENT</p>	 <p>25 REVIEW OF A CHILD'S PLACEMENT</p>	 <p>26 SOCIAL AND ECONOMIC HELP</p>	 <p>27 FOOD, CLOTHING, A SAFE HOME</p>	 <p>28 ACCESS TO EDUCATION</p>
 <p>29 AIMS OF EDUCATION</p>	 <p>30 MINORITY CULTURE, LANGUAGE AND RELIGION</p>	 <p>31 REST, PLAY, CULTURE, ARTS</p>	 <p>32 PROTECTION FROM HARMFUL WORK</p>	 <p>33 PROTECTION FROM HARMFUL DRUGS</p>	 <p>34 PROTECTION FROM SEXUAL ABUSE</p>	 <p>35 PREVENTION OF SALE AND TRAFFICKING</p>
 <p>36 PROTECTION FROM EXPLOITATION</p>	 <p>37 CHILDREN IN DETENTION</p>	 <p>38 PROTECTION IN WAR</p>	 <p>39 RECOVERY AND REINTEGRATION</p>	 <p>40 CHILDREN WHO BREAK THE LAW</p>	 <p>41 BEST LAW FOR CHILDREN APPLIES</p>	 <p>42 EVERYONE MUST KNOW CHILDREN'S RIGHTS</p>
 <p>43-54 HOW THE CONVENTION WORKS</p>	<h1>CONVENTION ON THE RIGHTS OF THE CHILD</h1>					

## 1. Social and Emotional Resilience

Working towards: Our children and young people have improved social and emotional resilience so they can be happy and content members of our community.

Nurturing stronger families by supporting parents and carers helps to build social and emotional resilience in children and young people, and wider communities. This year work has progressed to expand and align our various parenting offerings, and re-orientate them to tackle the stigma around seeking parenting support that had been identified locally. The Shetland Family Centre led this piece of work, with input from a number of different partners, and informed by the critical success factors identified in the Anchor Early Action project.

### Support in numbers 2022/23

- Incredible Years (parents of children aged 2-11)  
6 groups completed  
46 parents took part
- Teen Triple P (parents of teens aged 12-16)  
2 groups completed  
14 parents took part
- PEEP LTP\* (parent with 0-5 year olds)  
22 families engaged

Since the Incredible Years programme began in Shetland

- 91% of children attending have had an improved SDQ (Strengths and Difficulties Questionnaire)
- 67% have moved out of the "clinical range"\*\*

\*Learning Together Programme

\*\*no longer indicate a need for clinical intervention after attending Incredible Years

### 'Group Teen Triple P'

This was included for the first time in 2022-23 with the Shetland Family Centre team delivering two groups, supporting 14 parents.

The groups aim to promote strong parent-child relationships, and empower families to promote resilience and healthy development in their children.

*"The course has left me feeling that I'm not stumbling around in the dark, there is light at the end of the tunnel using these tools."*

### Changing the conversation around parenting support...

Inclusion of staff on the Incredible Years course has helped to support consistency of support and guidance offered across our teams. Social workers, social care workers and foster carers have had the opportunity to take part as groups and have noted changes in their practice, feeling better able to support families, and de-stigmatise referral for parenting support.

Collaboration with health, education and the Anchor for Families teams to support this key messaging around effective parenting tools and strategies is helping to declutter the landscape for families, giving a consistency of messaging, approach and support while maintaining the vibrancy and choice of our service landscape.

*"I think by letting parents know that I've sat it, makes it seem like less of a punishment for 'bad parenting' and more of an opportunity. I don't know if she would have been as keen to participate if I hadn't had gone into the level of detail that I did!"*



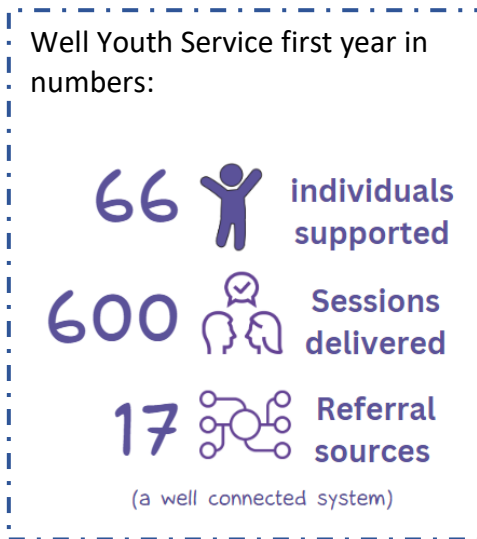
### Mind Your Head – Well Youth

The Well Youth programme has completed its first year of operation, from February 2022-March 2023. This service has been conceptualised, designed and commissioned collaboratively between partners, led by identification of need by young people (development discussed further in section 10). The service is commissioned jointly by Shetland Islands Council and the Shetland Alcohol and Drug Partnership, and is delivered by Mind Your Head.

The service is available for people aged 10-25 years, who are struggling with their own mental health, or who are supporting people who are struggling with their mental health. Well Youth offers one-to-one support, and workshops and drop-in sessions in schools.

Anxiety, Family Issues, and Depression were most frequent presenting issues, others included substance use (personal or parental), trauma, bereavement and self-harm.

The team monitor wellbeing with the young person throughout their intervention to agree where to focus support – early analysis shows improvement across a breadth of areas in wellbeing scores and this will continue to be monitored.



### Understanding our Situation

The Schools Health and Wellbeing Census gives us a huge amount of detailed information – further local analysis in 2023/24 will support improvement planning driven by this data.

Agree/Strongly Agree	Shetland	Scotland
Even if I'm having a difficult time I feel like I will be ok	58.9%	58.4%
I feel like I can make decisions in my life (P5-S1)	77.2%	78.1%
There are lots of things that I worry about in my life (p5-S1)	40.1%	41.8%

## 2. Healthy, Safe and Memorable Childhood

Working towards: Our children have a healthier, safer, and more memorable childhood.



**Healthy Families, Right for the Start** – embedding the HENRY approach

Having a shared, consistent approach to health messaging for children and families is an ambition Shetland has been pursuing by implementing the [HENRY](#) (Health, Exercise and Nutrition for the Really Young) approach. This evidence based approach builds family resilience through a strengths-based, solution-focused partnership approach that supports families to take control of their own lives, identify their own lifestyle goals and plan to achieve them in a way that will work for their family. The way of working dovetails perfectly with the Anchor for Families approach, with evidence-based health education and support layered on top.

The Healthy Shetland team facilitate quarterly network session for trained staff to maintain their knowledge, confidence and skills to use in their practice. Staff from wider services delivering this approach across our system, are trained in the core HENRY approach that supports them to make every contact with families valuable in building their understanding, resilience and autonomy include: Health Visiting, Maternity, Dental, Oral Health Education, Early Learning and Childcare, Early Years – Play workers, Social Care Workers, Shetland Family Centre, Anchor for Families, School Nursing, Quality Improvement Officers, Active Schools, Dietetics, Mind Your Head.

Local Healthy Families (HENRY) facilitators from Health Improvement, Health Visiting, Shetland Family Centre and Maternity have delivered:



**Fussy Eating workshops**



**Healthy Families groups**



**families supported 1:1**

### Vaccination and Immunisation Uptake – a Quality Improvement Approach

NHS Shetland Public Health team work in collaboration with Health Visitors, School Nurses, Maternity, Primary Care and Education teams to support delivery of the local vaccination and immunisation programme. In 2022/23 the team have been working to understand the gap in uptake seen for some immunisations. They have been improving the quality of the data held by undertaking record audits, and identifying those who have not been reached by this primary prevention programme, and offering catch up clinics for those most likely to be at risk - those potentially moving away for further or higher education, then those entering school or nursery.

This work will feed into the local Measles Elimination Action Plan which will support a more consistent approach to delivery and identification of gaps in protection.

### Safer Islanders

The Anderson High School hosted the first ever "Safer Islander" event in September – this was a multi-agency event with representatives from police, fire, ambulance and coastguard; and from the construction sector, agriculture industry and utility companies leading presentations and workshops.

**180** S1 pupils were involved in the multi-agency event coordinated by Shetland Islands Council.

### Summer of Play - Increasing Opportunities to be Active

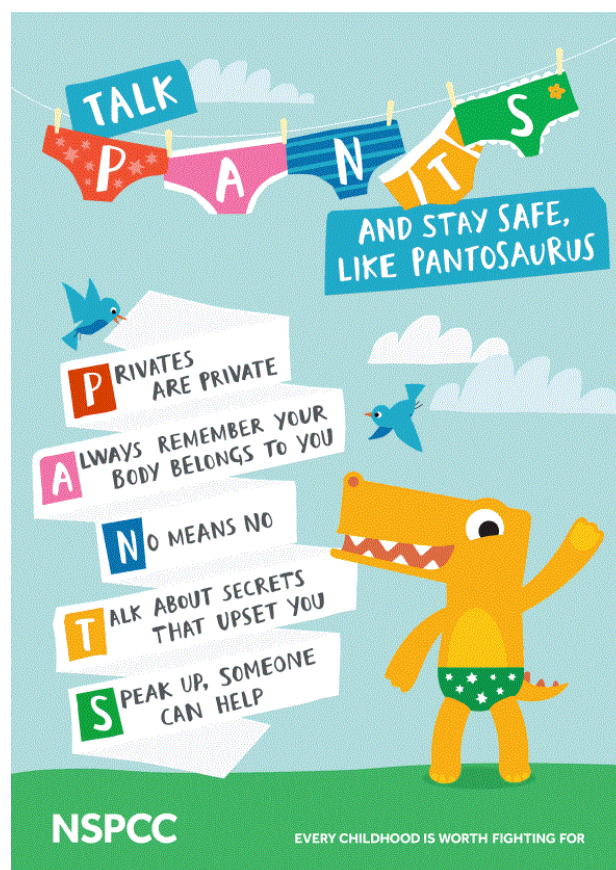
The SIC Sport and Leisure team delivered a successful free summer holiday programme including their regular Picnic and Play sessions that they took on the road to 6 locations outside Lerwick. The summer programme culminated in the popular summer cycle event which saw more 500 people take to the closed-streets on their bikes.

People were supported to access events by other agencies including Anchor for Families, and partners took the opportunity to be more visible and engage with families in a positive, informal environment.

### Child Protection is Everyone's Business

Shetland Public Protection Committee (SPPC) worked with our island Protection Committee partners in Orkney and Western Isles, and the NSPCC Scotland to deliver a high profile campaign to raise awareness in the community and help protect young children from sexual abuse. The [Inter-Island PANTS Campaign](#) is aimed at children aged 3-8.

This campaign aims to protect children from sexual abuse by encouraging parents, caregivers and professionals to have conversations with children in an age-appropriate way about how to stay safe. The team work with Early Years and School staff and communities to raise the profile of the [NSPCC Talk PANTS](#) campaign and encourage everyone to engage to improve their understanding, awareness and ability to play their part in protecting children and young people.



	Shetland	Scotland
Taken part in sports clubs (S1-3)	65.6%	50.1%
I feel safe in the area where I live (always or most of the time)	93.7%	87.1%
Do you have an adult in your life that you can trust and talk to about any personal problem (always or sometimes)	91.4%	91%
I feel my physical health is good or excellent	75%	73.9%

### 3. Positive Learning Opportunities

Working towards: Our children and young people have a greater number of more positive learning opportunities to enable them to move forward into adulthood with the skills, abilities and ambitions necessary to serve them and their communities well in the future

#### **Creating Opportunities and Building a Sustainable Workforce**

DYW worked in partnership with Anderson High School staff to host a joint Opportunities and Apprenticeship event. The aim of the event was to raise awareness of apprenticeships, jobs, trainee and volunteering opportunities available in Shetland to all senior phase pupils across Shetland.

600 pupils  
46 exhibitors

The exhibitors included employer offering apprenticeships, volunteering opportunities and UHI Shetland.

*"Opened my mind to new opportunities I didn't know existed"*

*"NHS I didn't know they had the opportunities they have for me"*

#### **Rights Respecting School – Gold Award**



Cullivoe Primary School been reaccredited with a Gold Rights Respecting School Award from Unicef UK. The Award recognises achievement in putting the United Nations Convention on the Rights of the Child at the heart of a school's planning, policies and practice.

The Gold Rights Respecting Schools Award is given to those schools committed to promoting and realising children's rights, and encouraging the school community to respect the rights of everyone in the school. Cullivoe Primary School is the only school in Shetland to have achieved this Award and one of only around hundred schools across Scotland. The school last achieved a Gold Accreditation in March 2017.

#### **First Steps to Youth Work**

First Steps to Youth Work is aimed at introducing staff, volunteers or anyone interested in working with young people to the basic principles of youth work.

Learners are introduced to a range of icebreakers and group work activities which underpin youth work principles and practice e.g. understanding young people's needs and characteristics; issues facing young people; Maslow's Hierarchy of Needs; skills and qualities of a Youth Worker; case studies; written and verbal communication skills; health and safety.

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In Shetland this course was delivered to two groups over the course of the year, with 11 young people gaining their SCQF Level 4 qualification. This proved to be an extremely effective way to support these young people into work relating to their professional interests.

## Young Islanders

Following a hugely successful pilot with the Young Islanders Challenge, Youth Scotland were delighted to continue the work with Scotland's young people from island communities to build the Young Islanders Network.

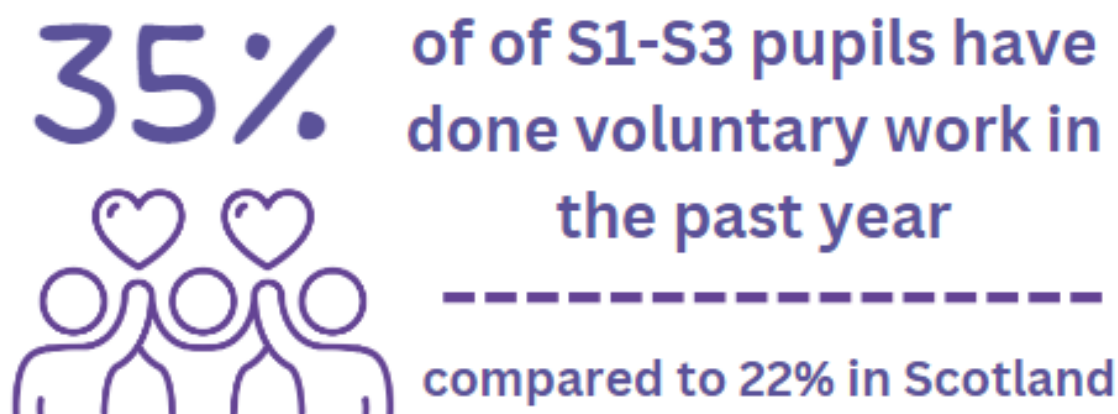
The Young Islanders Network, delivered in partnership with Scottish Government and the National Islands Plan, aims to build a network and community for young people to play a meaningful part in making the National Islands Plan work for Young Islanders.

In Shetland in 2022/23 a local network was created which consisted of four members initially. These members took part in national training where they were able to develop their own skills in public speaking, decision making and teamwork. The group began work on their own brand as a group and what areas they would like to focus on in future years. This work will be carried forward and expanded upon as they move through the project.

### Micro:bit and Digital drop-in

Shetland Library have been running activities that reach young people currently unengaged with digital technologies due to barriers such as gender, geography, background, or socioeconomic factors.

In 22/23 attendance at Micro:bit has increased from 33% to 57% female.





## 4. Tackling Inequality

### Working towards: Our children and young people experience fewer inequalities

Shetland's continuing work to tackle child poverty, response to the Cost of Living crisis and associated inequalities work is thoroughly explored in the Local Child Poverty Action Report which will be published in the autumn.

Work to mitigate the impact of poverty on families in 2022/23 included:

- Rollout of Anchor for Families across all areas of Shetland
  - The Anchor for Families team has expanded and can now offer equitable support across Shetland. Now, every school across Shetland is linked to a worker as a point of contact, with some areas having a more enhanced level of contact, depending on need.
- Ensuring local climate change measures do not proportionally impact on low income families
- Expansion of support to enable parents to move into work or improve their employment status
- Created and implemented a Cost of Living Campaign (We Shine Brighter Together)
  - Film Reach: 19,727;
  - Social Media Reach: 9,554;
  - Shetland Times circulation: 11,438;
  - Radio Advert: 240 times on local radio;
  - Cinema Screenings: 672 (11,558 individuals)

Shine On Shetland



**48** families supported by Anchor for families

**10,500** Cost of Living support leaflets distributed

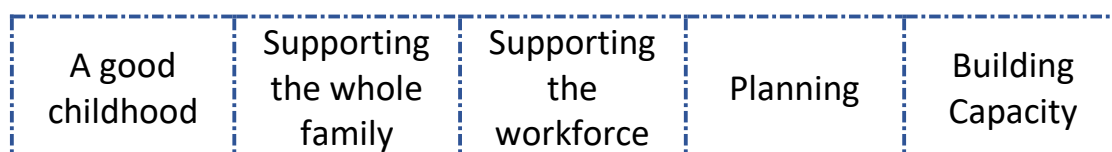


How often do you go to bed or school hungry? (P7-S6)	Shetland	Scotland
Always or often	8.6%	8.3%
Sometimes	29.3%	25.8%

## 5. Safeguarding and Promoting the Wellbeing of our Most Vulnerable

Working towards: We are better at safeguarding and promoting the wellbeing of our most vulnerable people, including looked after CYP and care leavers.

Keeping the Promise continues to underpin our approach to support across Shetland. Work against the five priority areas for 2021-24 can be seen woven throughout this report as they interact across almost all our local priorities.



- Each and Every child training – upskilling our system to build support through how we speak about care experience
- Festival of Care 2023 “Tending the Light” - building community understanding and relationships, and increasing opportunities for children and young people who have experienced care to share their experiences. This year’s festival was held in Inverness and built on the amazing work started here in Shetland by #ShetlandCrew. People were invited to reflect on their own impact with the festival asking:



FEBRUARY 2023

*'What is it to tend the light for care experienced children and young people across Scotland?'*

- Partnership approach to planning spend of short term funding for greatest impact and sustainability of outcomes;
- Sharing and highlighting the critical success factors for effective whole family support identified through the Anchor Project;
- Working to understand barriers to accessing support and building the conditions for change in our wider system to eliminate these barriers;
- Establishment of an Inclusion Team within our Education Service, contributing to improvements for care experienced young people;
- Partnership approach to review and implementation of cross-system policy and legislation to ensure staff are supported, work aligns with existing activity and change is fit-for-purpose for our remote island communities;

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- The #ShetlandCrew in their work with the Meids (formerly the Corporate Parenting Board) identified a key piece of practical support they wanted to see progressed to support people with care experience moving into their own home. The project produced an information pack and welcome box for people with experience of care moving into their own home.

### Family Group Decision Making

Planning and implementation of Family Group Decision Making model is a development driven by our Partnership approach to delivering on the Promise in Shetland. Funding secured from the Scottish Government has been used to develop this service within children's services.

The FGDM process is a strengths-based empowerment model designed to unite a wide family group, including relatives, friends, community members and others in collectively making decisions to resolve an identified concern with a child or young person.

The service will support existing decision making processes such as looked after children, child protection and the children's hearing process. An independent coordinator will work with the child's wider family network and support them to work together to come up with a family plan for support and risk minimisation, alongside any requirements to ensure the child or young person's safety.

### UHI Shetland – proactive Corporate Parenting

UHI **the promise**  
**scotland**  
to proactively identifying and involving young people with care experience in the services they have available to them.

In 2022/23 the UHI Shetland team began their transitions programme which involved them strengthening their multiagency contacts to build up networks and ways of identifying students and potential students earlier. They sought to build early relationships between students and the student support team rather than waiting for issues to arise and identified a named point of contact for Care Experienced students.

Support available includes advice before attending or applying to college, emotional support from their counselling services, practical and social support to form networks and plan introductions to key staff in the UHI Shetland team, and help to navigate and identify funding support available.

There is  
a lot that  
has been done.

And there is  
still a lot to do.

#KeepThePromise



## 6. Best Possible Start in Life

**Working towards:** Every child has the best possible start in life and the early stages of their life, from before they are born until they begin primary school, are as positive as they can be.

### A Shared Ethos

Our universal delivery teams continue to work together to deliver for individual families, adding support from specialist services where needed. Adopting the HENRY approach as a system supports consistent, effective messaging for parents and carers, helping them to feel empowered to navigate their early years journey and make the best choices for their family. Key components of the HENRY approach are having a shared message around a healthy lifestyle, and creating the conditions for change by how this message is delivered:

A healthy lifestyle	Creating the conditions
Parenting skills	Relationships based on trust and respect
Healthy family routines	Working partnership with families
Balanced diet	Empathy
Physical activity and sleep	Strengths-based
Emotional wellbeing	Solution-focused
Breastfeeding	Building motivation for change

This year the HENRY approach has been extended from early years, into the antenatal period with greater involvement of the maternity team who support delivery of groups and workshops, while also embedding the principles into their daily practice.

This shared ethos is already in place in services across our system, with staff in the following teams trained in the core approach and with 'raise, engage, refer' training to build the skills and confidence to connect with families effectively, supporting changes in behaviour, and facilitating them to access support if needed:

Health Visiting, Maternity, Dental, Oral Health Education, Early Learning and Childcare, Early Years – Play workers, Social Care Workers, Shetland Family Centre, Anchor for Families, School Nursing, Quality Improvement Officers, Active Schools, Dietetics, Mind Your Head



Shetland has the second highest rate of breastfeeding in Scotland; and the second lowest "drop off" in breastfeeding.

In 2022/23:

- Raise, Engage, Refer training delivered to a further 15 staff
- Core training delivered to a further 17 staff

### Strengthening Families

The HENRY approach helps families to build skills to identify and make changes, and overcome future challenges. For those who need a little extra support to create the best environment for their families there is support available through the Shetland Family Centre. The Peep Learning Together Programme helps parents, carers and practitioners make the most of the learning opportunities in everyday life, supporting their babies' and young children's learning through play.

This early support makes a real difference to outcomes for children and families helping them to build sensitive and responsive relationships communicate effectively and supports children to achieve their potential.

The programme covers 5 areas, and for those who are interested the Peep Progression Pathway gives parents or carers the opportunity to build on and formally recognise their learning and development through Peep by offering nationally recognised qualifications. This helps to build parent/carers capacity, confidence and 'learner identity' which can support people into further opportunities, learning, volunteering and work, The 5 strands of child development covered are:

personal, social and emotional development	communication and language	early literacy	early maths	health and physical development.
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### Associate Family Wellbeing Practitioner

The Family Wellbeing Practitioner test of change was co-produced by NHS Shetland, Shetland Islands Council and Emotional Wellbeing and Resilience project, and came into place in late 2021.

The service delivered short periods of intensive support to help referred families prepare for the emotional and practical aspects of parenthood, building their skills to provide appropriate and nurturing care and overcome socioeconomic challenges. Support was provided aligned to the GIRFEC domains.

The service worked well and quickly established itself alongside the maternity and health visiting teams, with close links to other Children's Services as required. Initial funding was available until November 2023 and work in the latter half of the year was geared towards incorporating the delivery model within existing services given the short term nature of funding available, and the similarity of approach to our other early intervention offerings. Finding ways to make delivery of outcomes consistent and sustainable is a recurring

### Creating Opportunities

Shetland Library continue to work with the Health Visiting and Early Years and Childcare teams to give every child in Shetland access to reading and learning materials through the Every Child a Library Member ([ECALM](#)) programme.

- 558 Bookbug bags gifted
- 146 Bookbug sessions
- 61% of young Shetlanders are members of the library ([performance-report-2022-2023](#) ([shetland.gov.uk](#)))
- Number of borrowers aged 0-3 has increased by 27%

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problem within our small system - previous work to explore the ‘Family Nurse Partnership’ model which is used in other places in Scotland, on which this project was modelled, concluded that the service was not sustainable within Shetland. Work continues between Child Health and the Anchor for Families team to understand any gap in provision left following the end of the project, this will be further explored through the development process of the Child Health strategy in 2023/24.

## 7. People-Centred, Joined Up, Early Action

Working towards: Our services:

- Are more person centred
- Are better at working together
- Act earlier, and prevent future need wherever possible

Developing our approaches to be more person-centred, integrated and prevention focussed is more complex than simply changing assessment or intervention styles. Teams need to have a breadth of knowledge to be able to respond effectively and appropriately as a trusted professional, they must have a clear understanding of the landscape of supports available, and as a system we need flexibility in policies, procedures and ways of working to be able to provide support to meet each individual’s needs.

Work this year has focussed on creating the conditions within the system to facilitate person-centred support; building a shared understanding across the Shetland Partnership about taking a person-centred approach and the need to approach this collectively; and building the skills and confidence of staff to be able to thrive within these conditions. The relationship building and necessary connectedness of services takes time and work to develop which can be difficult in times of intense operational pressure but we have seen significant progress in a number of key areas – testament to the commitment of our teams, managers and system leaders to make real change.

### **Mental Health and Wellbeing for Children and Young People**

2022/23 saw the culmination of work begun in then Emotional Wellbeing and Resilience project over recent years. A gap identified by the project workers in the process of their peer research was around Mental Health and Wellbeing support for young people, outwith existing statutory services. The peer research identified the unmet need and outcomes young people wanted provision to meet.



To build on these findings the Shetland Children’s Partnership established a short-life working group to agree a service specification to meet the outcomes. From there the ‘Well

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Youth' service was designed. This has gone on to be commissioned jointly by SIC and Shetland Alcohol and Drugs Partnership and is run by local Third Sector provider Mind your Head.

The free service is open to self-referrals, and offers young people aged 10-25 the opportunity to seek support early and work with a Wellness Practitioner to develop a plan for support and build up their skills to cope with future challenges. This service is available throughout Shetland to meet the needs of individuals – an important point identified through the EWR project around accessibility of services for people using public transport.

### **Anchor for Families**

Anchor for Families is the early action, relationship based, strengths focussed provision created from the learning of the Anchor Project which came to a close at the end of 2022/23. The Anchor for Families team walk alongside families who are under pressure, helping them build the strength and capacity required to achieve their goals. Anyone can self refer, and the team have close relationships with colleagues in Education, Health and Children's Services, to both offer best support to families, and to build capacity within services to adopt and embed the effective early action approach identified by the Anchor Project. More detail on the work of Anchor for Families, including case studies, can be found in the Local Child Poverty Action Report which will be published in the autumn.



### **Bairn's Hoose Development Work**

The Shetland Children's Partnership have been involved in discussions on a national and regional level around the development of the [Barnahus model](#) for Scotland since the concept was first introduced. In 2022/23 the Partnership has developed the conversation to understand better how the Bairn's Hoose concept and standards could work in Shetland, how our current system works to achieve the standards, and areas we could strengthen to provide better outcomes for children and young people.

The Partnership ran a workshop looking at possible scenarios from the point of view of a young person, and explored our existing pathways with regional links to NHS Grampian. This exercise was helpful in building a shared understanding of challenges experienced by children and young people and has prompted work to gather evidence around how our system meets the standards, to provide a more robust approach to identifying areas for improvement.

This work is particularly important as the Barnahus model as it works elsewhere cannot be applied directly in Shetland due to the way we deliver services with regional partners, and the logistics of remote and rural service delivery. However, the Partnership recognises the value and benefits of the model as an ethos and are engaged in actively exploring how to improve outcomes in line with the published standards, which were not finalised until June 2023, but are included overleaf for information.

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Figure 1 Bairns Hoose Standards - children and young people. Healthcare Improvement Scotland June 2023, available at [https://www.healthcareimprovementscotland.org/our\\_work/standards\\_and\\_guidelines/stnds/bairns\\_hoose\\_standards.aspx](https://www.healthcareimprovementscotland.org/our_work/standards_and_guidelines/stnds/bairns_hoose_standards.aspx)



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### Neurodevelopment Pathway Project

The aim of this multiagency project was to develop a streamlined neurodevelopmental pathway so that individuals who have neurodevelopmental profiles and require support will benefit from a connected and accessible system of support where no door is the wrong door.

Teams have worked closely together to progress towards a sustainable solution that will deliver a continuity and stability of service for people with Neurodevelopmental differences in Shetland.

A period of public engagement during the COVID pandemic identified needs of children and young people in Shetland with neurodevelopment differences, and potential solutions to support these needs. Following this a mapping exercise of the current journey for people through existing services was undertaken.

Building on the mapping exercise which had involved teams from all services delivering parts of the current pathway, professionals were brought together to explore existing challenges and hopes for the future. The outcomes of this engagement were grouped under the broad themes of: Access; Support; Diagnosis; Transitions; Knowledge (of professionals, communities, universal services and support workers).

The National Neurodevelopmental Specification sets out the importance of a whole-system, cross-sector approach to supporting the needs of individuals who have neurodevelopmental profiles and require support, and the importance of providing tailored support at the earliest opportunity. The specification sets out the following seven standards of care to be met by local teams:

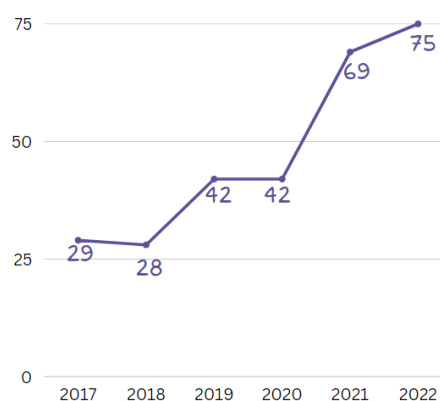
1. High quality care and support that is right for me;
2. I am fully involved in the decisions about my care;
3. I will receive high quality assessment, formulation and recommendations that are right for me;
4. My rights are acknowledged, respected and delivered;
5. I am fully involved in planning and agreeing my transitions;
6. We fully involve children, young people and their families and carers and
7. I have confidence in the staff who support me.

The ambition and standards within the specification very much align to the general shift in ways of working we are progressing across our system. The project identified three important areas of action required to make clear progress for people with neurodevelopmental differences in Shetland:

- Assessment, Support and Diagnosis Pathway;
- Improving skills and knowledge;
- Supporting acceptance of Neurodevelopmental differences in the community.

Follow up work to implement the findings from this scoping project is ongoing.

Autism Pathway Referrals 2017-2022



## 8. Attainment and Achievement

Working towards: Improved attainment in education and achievement of positive destinations in adulthood

### The Ambition – Excellence and Equity for Shetland’s Learners

The SIC Children’s Services strategy for education improvement in Shetland was published in 2022, covering the next 4 years. The strategy has been built on a period of self-assessment and broad consultation to identify key areas of work and develop the structure to implement, monitor and manage these. The strategy recognises that everyone across Children’s Services, and their associated partners have important roles to play in achieving the ambitious vision of the National Improvement Framework for Scotland:

- **Excellence through raising attainment and improving outcomes:** ensuring that every child and young person achieves the highest standards in literacy and numeracy, as well as the values, attitudes, knowledge and skills necessary to shape a sustainable future as successful learners, confident individuals, responsible citizens, and effective contributors.
- **Achieving equity:** ensuring every child and young person has the same opportunity to succeed, no matter their background or shared protected characteristics, with a particular focus on closing the poverty related attainment gap.

### “Every encounter matters”

To be able to achieve this vision locally, improvement is needed across five priority areas, which are closely reflected in the priorities of the Children’s Partnership Plan. Progress within each workstream will be continually monitored, and reported annually. The “stretch aims” or targets for each, and associated work, can be found in the full report – some of the key indicators are included within the dataset for this annual report.

- Workstream 1 - Placing the human rights and needs of every child and young person at the centre of education.
- Workstream 2 - Improvement in children and young people’s health and wellbeing.
- Workstream 3 - Improvement in attainment, particularly in literacy and numeracy.
- Workstream 4 - Improvement in skills and sustained, positive school-leaver destinations for all young people.
- Workstream 5 - Closing the attainment gap between the most and least disadvantaged children and young people.

	Shetland	Scotland
Most of the time I am happy at school	60%	57.4%
I enjoy learning new things	83.1%	80.1%
I feel like my teachers treat me fairly	77.2%	73.6%
I feel positive about my future	71.4%	72.8%

## 9. Focus Areas: Mental Health, Domestic Abuse, Alcohol and Other Drugs

Working towards: The impact on families under pressure is reduced; focus areas – mental health, domestic abuse, alcohol and other drugs

### Mental health

A Mental Health mapping exercise early in 2022/23 was undertaken by the Children's Partnership to better understand the landscape and interactions, identify areas for improvement, and support a more strategic approach to gaining and spending funding, and to service delivery. We recognise the burden of these processes on multiple smaller services within our system and hope this approach will support our breadth of services to develop in ways that are complementary and contribute to better outcomes.

The [Good Mental Health for All](#) project was established over 2022/23 as a multi-agency approach aiming to develop a refreshed mental health and wellbeing strategy for Shetland. As a Children's Partnership it is valuable to be sighted on these pieces of work which cross both adult and children's services. Having the opportunity to input into development of strategies that affect our children and young people, and to lend our expertise into the development process will lead to better outcomes as the Shetland system develops in line with our ambitions.

#### **Perinatal and Infant Mental Health (PINMH)**

This service is now embedded, jointly delivered by Maternity, Health Visiting and Mental Health teams to meet the needs of babies and families in the very early stages of life.

Being able to provide this support in a more intensive, collaborative way helps to keep the child at the centre and ensure ongoing support is provided to prevent future crisis.

### Domestic Abuse

The Children's Partnership work with the Shetland Domestic Abuse Partnership to support implementation of the Shetland Domestic Abuse & Sexual Violence Strategy 2018-2023. There is considerable cross over in membership of the two groups, and the Shetland Public Protection Committee within which the SDAP sits.

The main pieces of work progressed by the Children's Partnership has been in the areas of upskilling our workforce and system in the way we respond to domestic violence within families, to ensure best outcomes and mitigation of impact on children. This has included beginning to implement the Safe and Together model this year (more detail below).

### **Alcohol and Other Drugs**

Following review of the Children's Partnership, and with Substance Use highlighted as a priority area the Shetland Alcohol and Drug Development Officer (ADDO) has been added to the Partnership in 2022/23.

The ADDO, together with the Shetland Public Protection Committee (SPPC) undertook an exercise to map the support available to children and young people who were impacted by parental or family substance use, or who had concerns around their own substance use.

This included mapping the service landscape, and understanding people's experiences through journey mapping and collection of user experience case studies. The main areas identified as gaps following this exercise were around knowledge and skills of the wider workforce to support people within universal services, and the availability of specialist support for children and young people affected by, or struggling with their own, substance use.

Three primary outcomes from this work, progressed in 2022/23 have been:

- Alcohol and Drug Partnership commissioning training for professionals working with children and families affected by parental substance use (delivered by the Scottish Drugs Forum);
- Alcohol and Drug Partnership co-commissioning the Well Youth service;
- Alcohol and Drug Partnership supporting delivery of services within Shetland Women's Aid where both substance use and domestic abuse feature within a household.

These pieces of work are reported within the Shetland Alcohol and Drug Partnership Annual Report.

### **Understanding Drug Culture among Young People in Shetland**

The OPEN project peer researchers have been scoping a piece of work over 2022/23 with input from a number of Children's Partnership members – this work will look at attitudes to drug use and the drug culture among young people in Shetland.

This is a great example of the shift away from service-led engagement, towards community owned research with identification of issues and scope for research identified by young people to respond to challenges they see within their peer groups.

The peer research group has established a project board and the work will take place in the first half of 2023/24. The findings from this research will be used to support service planning and understand areas for improvement within our current system.

### **Maximising the Impact of our Workforce**

Being able to improve outcomes around these focus areas is reliant not only on specialist services but on the day-to-day interactions of children, young people and families being effective at identifying, responding and supporting to their specific needs. While our teams have core skills in taking a holistic approach, support is required to build the confidence and

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skills to respond, react and support people appropriately whether they are accessing specialist help or not. Training for the general workforce delivered in 2022/23 includes:

- Safe and Together model – assisting systems to become domestic violence informed, supporting child wellbeing and safety - training and implementation led by Shetland Women’s Aid with support from Children’s Social Work;
- Trauma Informed Practice – a suite of training is available for individuals and teams to improve their practices, services, processes and policies to be trauma-informed. An implementation working group is in development to further progress this across the whole Shetland Partnership following a series of workshops in late 2022/23;
- Children and families affected by parental substance use – training commissioned by the Shetland Alcohol and Drugs Partnership following a support mapping exercise that identified gaps in knowledge and confidence in core services, as well as a need for more specialist support. Training provided by the Scottish Drug Forum and to be repeated in 2023/24.

The difference taking a whole family approach can make, and some of the challenges that still exist for families in Shetland, an example:

“The support has been life changing...Now I’ve built up support and connections round about me with services for me and my child, and with family and friends now I’ve felt safe and confident to speak more openly about what has happened... There is still a lot of stigma and people looking down on you and not understanding.”

A mother talking about support from SMRS Families Affected By – and their support to link in with other services, including Health Visiting, Anchor for families and Shetland Women’s Aid.

### What did the health and wellbeing census tell us?

	Shetland	Scotland
Regular tobacco smokers (S2 and S4)	4.9%	2.7%
Use of e-cigarettes or regular vaping(S2 and S4)	12.5%	10.2%
Regular vaper (S2 and S4)	8.2%	6.7%
Drinking alcohol once a week or more(S2 and S4)	14.4%	7.4%
Have ever taken illegal drugs, drugs formerly known as legal highs, solvents, or prescription drugs that were not prescribed to you (S2 and S4)	15.5%	9.6%
Mental Health and Wellbeing – Strengths and Difficulties Questionnaire within normal range (S2-S6)	64.3%	58.1%
Mental Health and Wellbeing – My life is just right	59.2%	58.8%

## 10. Listening to Understand, and Act

**Working towards:** We are better at listening to the needs, fears and wishes of young people, and using what we learn to improve our services

Relationships built up through the Partnership have supported a shift in the way we engage with our communities, bringing children and young people to the fore and building a continuous relationship of meaningful involvement. This year has seen some of these pieces of co-design work conclude in delivery of new services – work that started as peer-research identifying issues, and has led to commissioning of services achieving better outcomes.

This work includes:

- Mind Your Head's Well Youth service – a direct result of the Emotional Wellbeing and Resilience project's peer research, discussed earlier in the report.
- The OPEN Space project which began in 2021. The aim of the project at the time was to ask young people if they felt that there was a need for a space for them in Lerwick, taking a lead on community action research so that young people could influence changes in their communities. The team conducted research in variety of ways including focus groups, interviews, survey and padlet. Findings included:
  - Young people felt passionate about feeling stigmatised within the community;
  - Not having a space to go to affected their sense of community;
  - Young people wanted a place to belong that was theirs;
  - Young people felt as though public buildings weren't as accessible to them as they are to other members of the public due to their age and businesses and other adults in the community pre judging the young people.

The Open Space project final report was finalised in September 2022 and presented to the Children and Education committee. Councillors took on board the gaps identified by the research, and 'The Hub' was provided for young people following this. However, because young people were not involved in the choice or development of the solution they felt they did not have the influence we would have hoped for but do feel they were listened too. There is still work to do in improving how we, as a system engage throughout the process of improvement, to develop solutions as well as identifying challenges.

- OPEN and SADP peer research project re: drugs and drug culture in Shetland. Research question identified by peer researchers, project team brought together, research will be progressed in 23/24. Important to gain insight into topic but also learn from approach – shift away from engaging on the terms of the organisation, or commissioning research on service identified issues. Collaborative approach to engagement – listening to understand, not tick a box.

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- Children's Services (SIC) commissioning the OPEN project to work on rewording their vision statement so that young people's thoughts and views were a part of the future vision and had influence over it. The OPEN team ran focus groups, conducted interviews and ran a survey to gather our findings. Young people generally spoke about wanting a person centred approach, more 1 to 1 interaction with trusted adults and options to pursue different passions while in school to find what they are good at. We collated our findings in our final report and were able to present back in February 2023. Young people's view were well received and Children's Services used the peer research findings to influence their directorate plan.
- HWB Census
  - Shetland pupils had the highest response rate of the 16 participating local authorities. More than 1600 pupils took part locally, Implementation of the survey was led by the SIC Education Quality Improvement service, with valuable input across education, health, public health and school nursing;
  - The census covered the following topics, with some variation in questions to be appropriate to ages and development across the P5-S6 target group:
    - Attitudes to school and aspirations;
    - Neighbourhood and life at home;
    - Physical health;
    - Mental health and wellbeing;
    - Experience of bullying;
    - Substance use and
    - Relationships and sexual health.
  - The census was completed in May/June 2022, with the results published by the Scottish Government in February 2023. These results have since been included alongside other data and qualitative evidence in the Health Needs Assessment that has driven production of our revised Children's Partnership Plan.

**73%** of P5-S6 pupils  
took part  
(58.3% Scottish average)

We have a strong history among our children and young people of involvement in local, regional and national forums and this has accelerated over 2022/23 as many of these have restarted post-pandemic. Examples include:

**Shetland Youth Voice** is for anyone aged 12-25 who wants the opportunity to get their views and opinions heard at a local, national and international level. Up to 30 young people attended sessions in 22/23 from six schools and five third sector organisations participating. The group had engagement with a range of partners including Mind Your Head, NHS Shetland, the Tall Ships Race and Voluntary Action Shetland.

**MSYPs for Shetland** - Michaela Christie and John Fraser represent young people in Shetland at the Scottish Youth Parliament. Michaela is a member of the National Sport & Leisure committee while John is a member of the Jobs & Economy Committee. In 2022/23 they both attended Education and Families committee meetings and took part in discussions with the Chair, Vice-Chair and Director regularly. They have represented Shetland's young

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people at Developing Young Workforce seminars, engagement sessions with NHS and ADES and the Lerwick Tall Ships event while also attending SYP sittings on the Scottish Mainland.

Shetland has had representation on the **Northern Alliance Youth Advisory Group** with regular virtual meetings taking place (facilitated by NA CLD staff) and a first in-person meeting taking place in March 2023.

**Pupil Councils and Participative Democracy Certification:** Participative Democracy Certification (PDC) provides accreditation for secondary pupils participating in representative roles in their school communities such as pupil councils (or equivalents).

PDC is a method of recognising and rewarding young people's involvement in decision-making. It is specifically aimed at the youth work sector and offers two credits at SCQF level 5 for participants.

It provides a useful structure for meaningful participation for young people in their schools, getting them to research issues affecting them, consult peers and present to school senior management on their findings. In 2022, 25 young people were awarded PDCs from Anderson High and Aith Junior High School. As well as accreditation, each secondary school/department in Shetland currently has a participation forum either facilitated by staff in school or partnered with Youth and Employability staff.

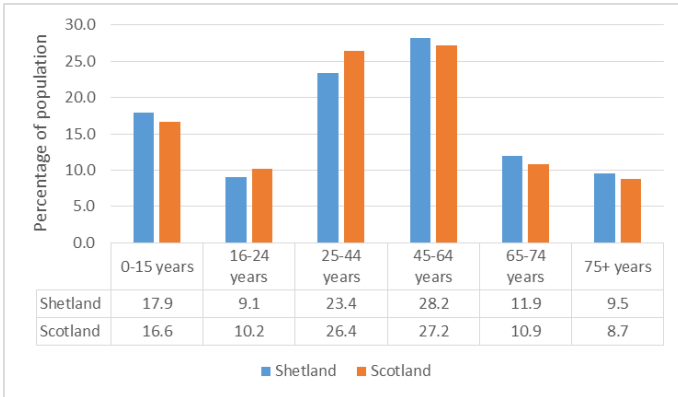


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## Children and Young People Data Dashboard (in development)

### Demographics

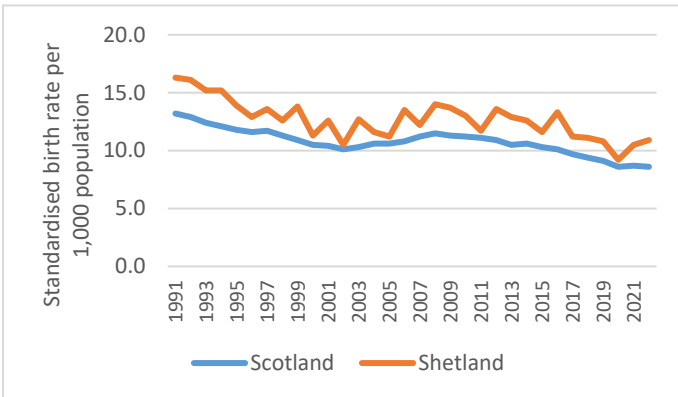
Population split – 2021



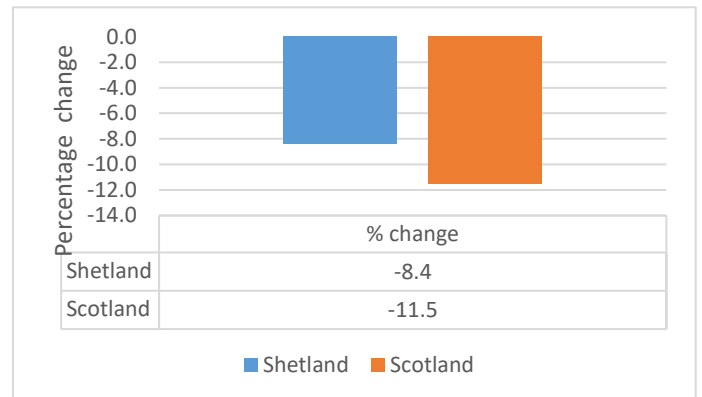
Population change - 2018 to 2043



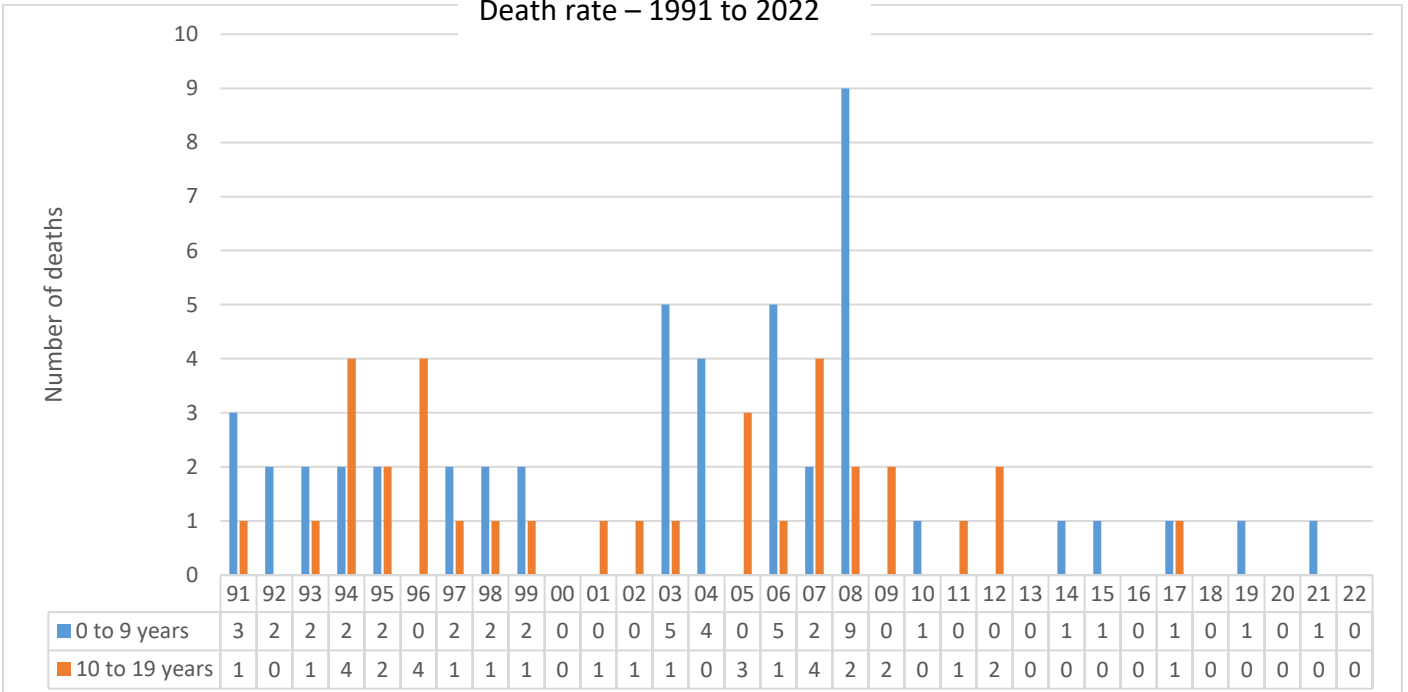
Birth rate – 1991 to 2022



Birth rate change – 2021 to 2022

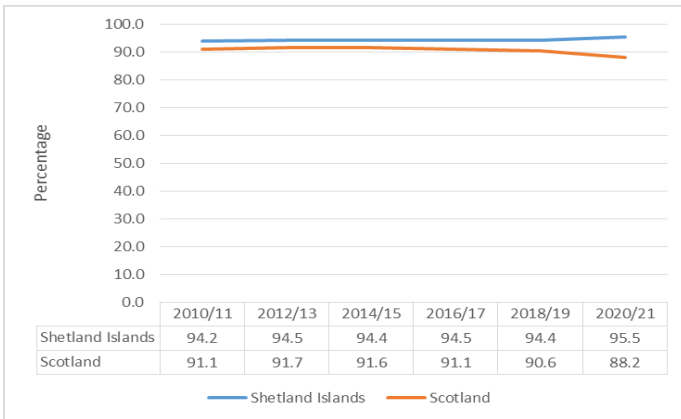


Death rate – 1991 to 2022

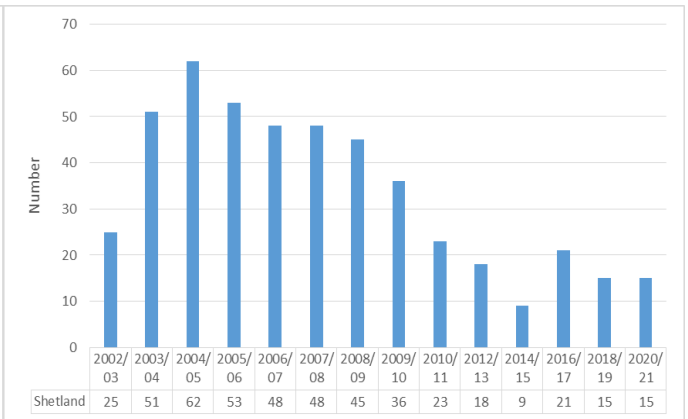


Education

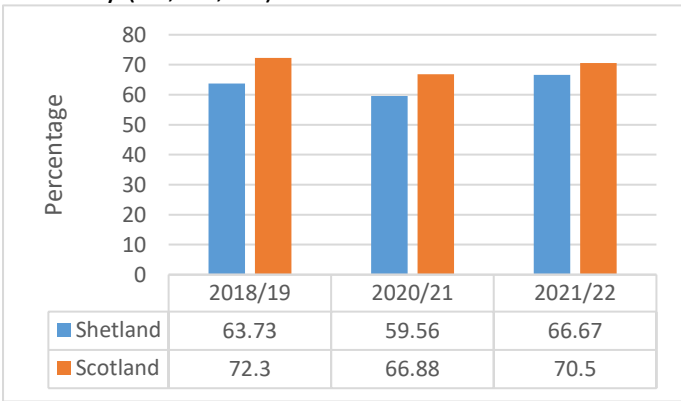
Attendance –rate (all schools)



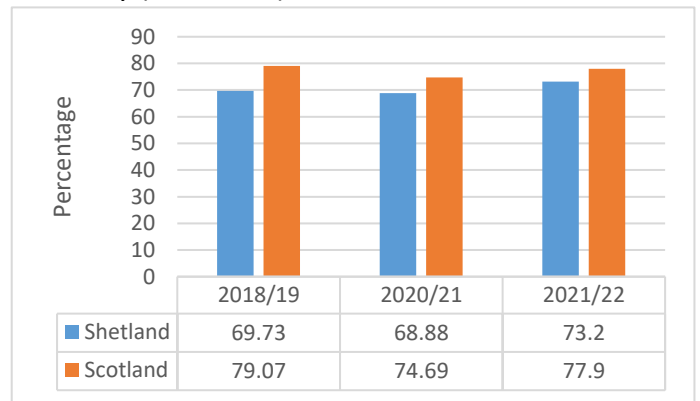
Exclusions - number



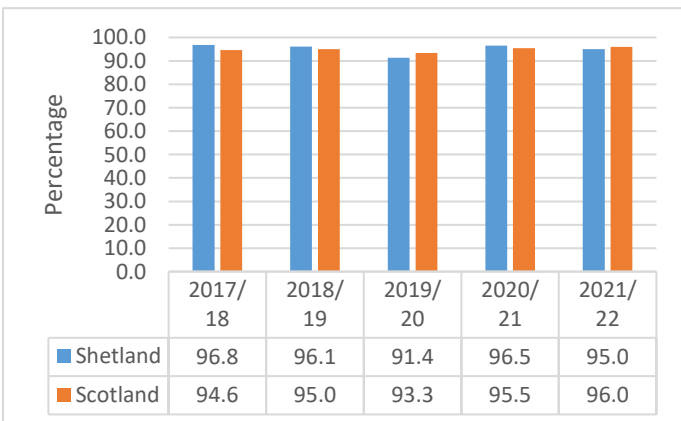
Meeting expected levels of achievement for literacy (P1, P4, P7)



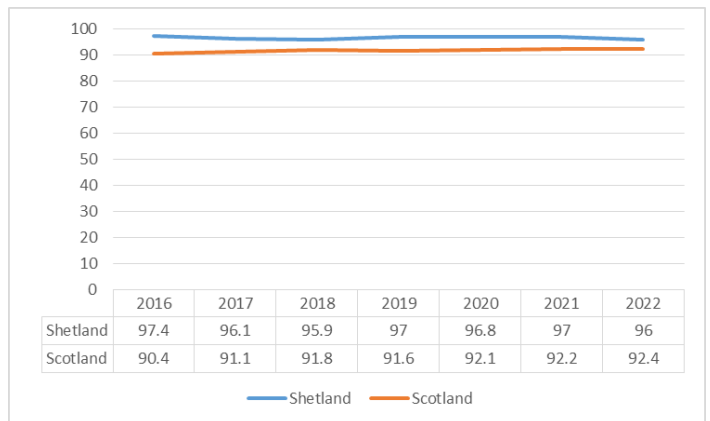
Meeting expected levels of achievement for numeracy (P1, P4, P7)



Positive destinations of school

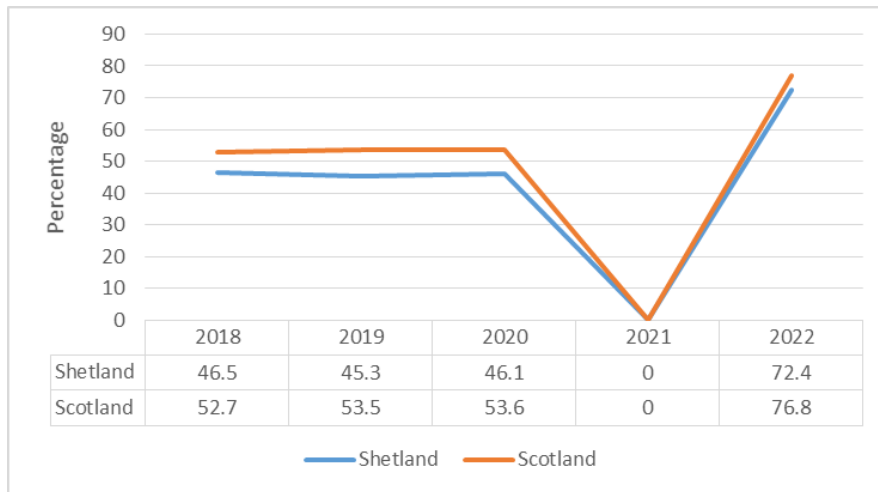


Young adults (16-19 year olds) participating in education, training or employment

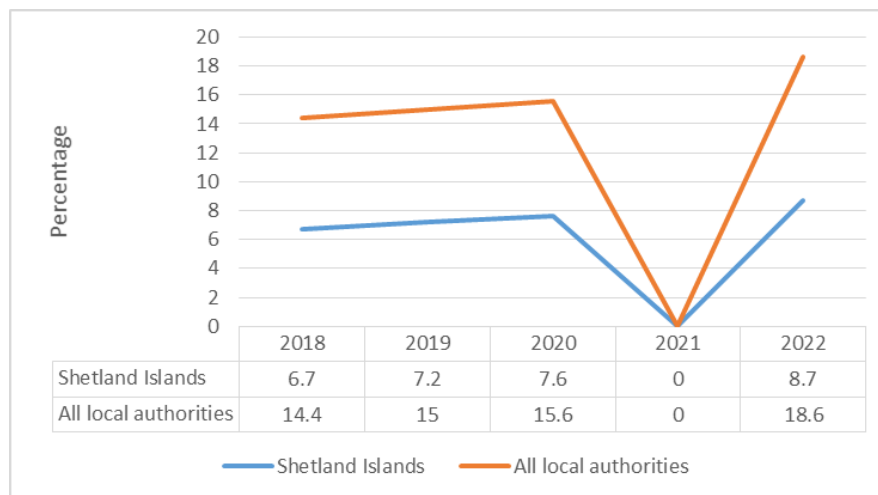


Poverty

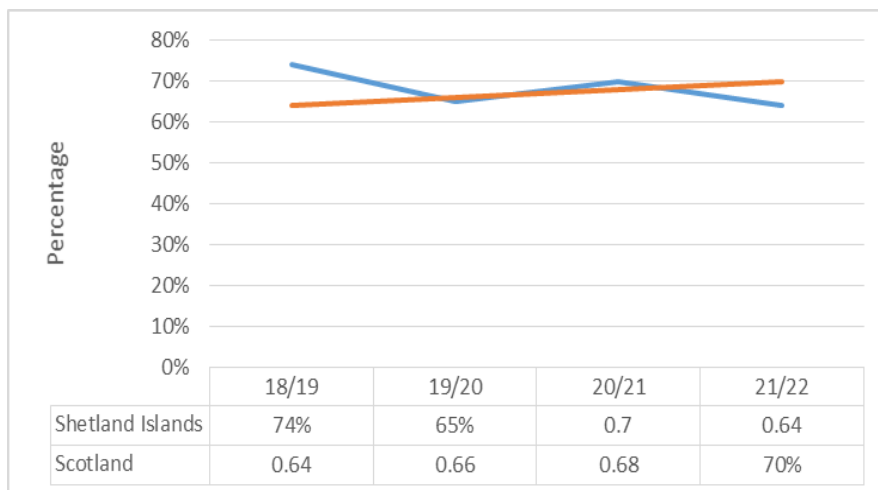
Free school meals P1-P7



Free school meals S1-S6

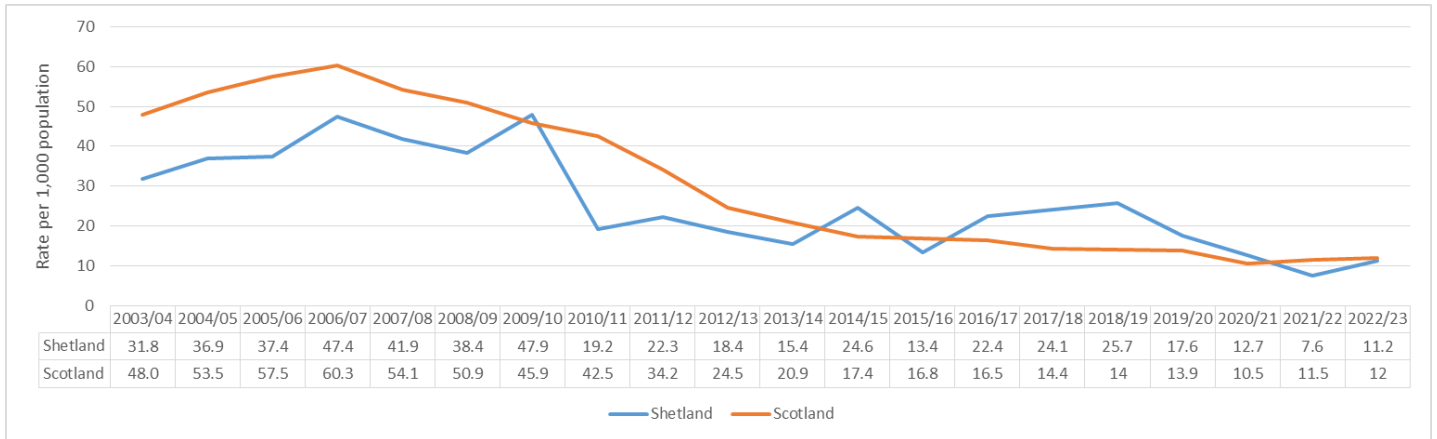


Healthy Start – Percentage of processed applications authorised

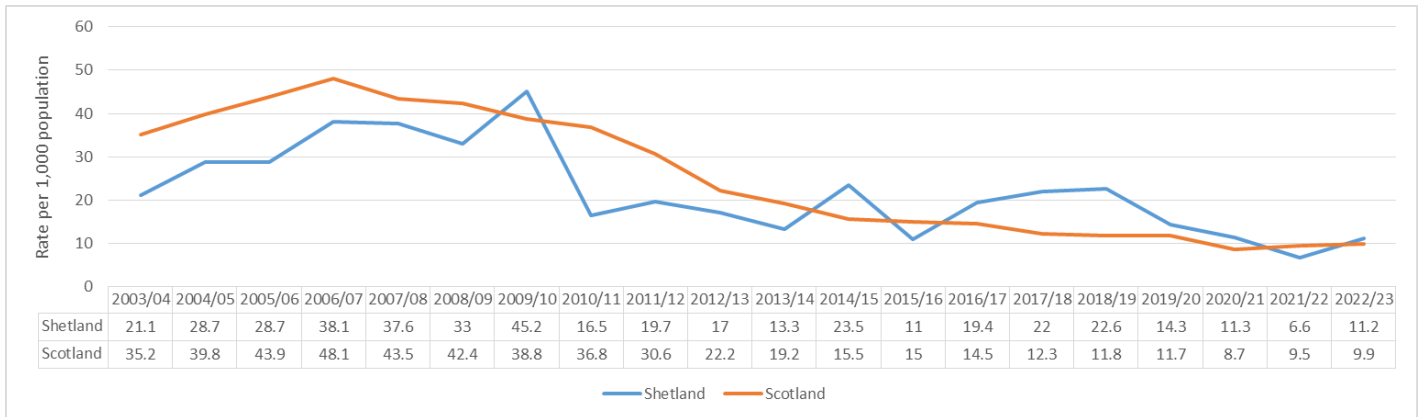


Crime

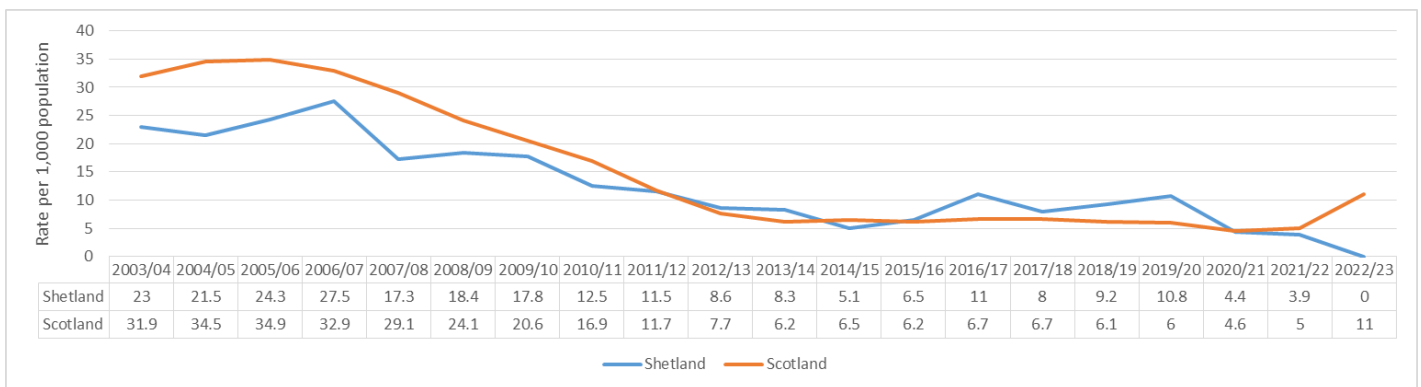
Rate of children's reporter referrals



Rate of children's reporter referrals – non- offences

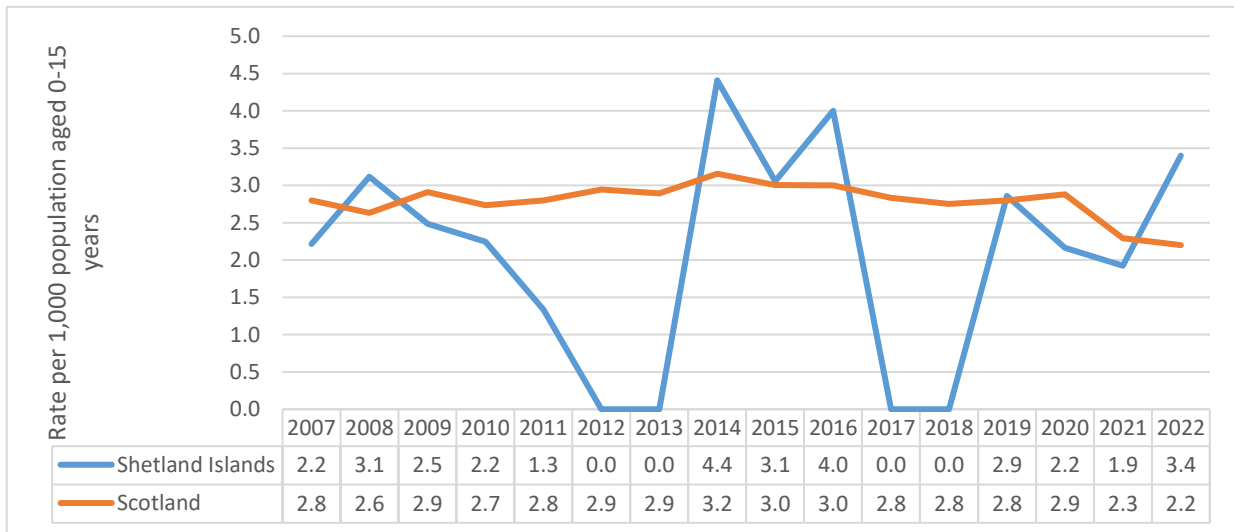


Rate of children's reporter referrals – offences

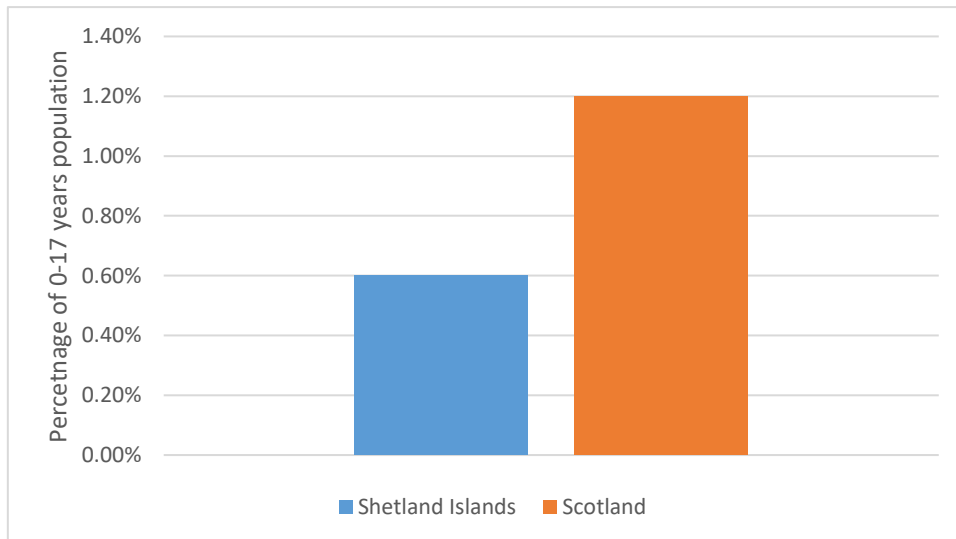


Child Protection

Rate of children on the register



Rate of Looked After Children - 2022



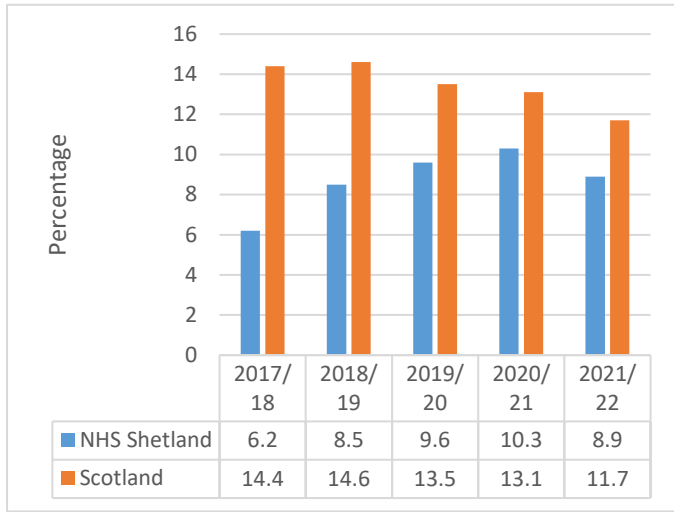
Number of registrations, deregistration and case conferences 2021/22



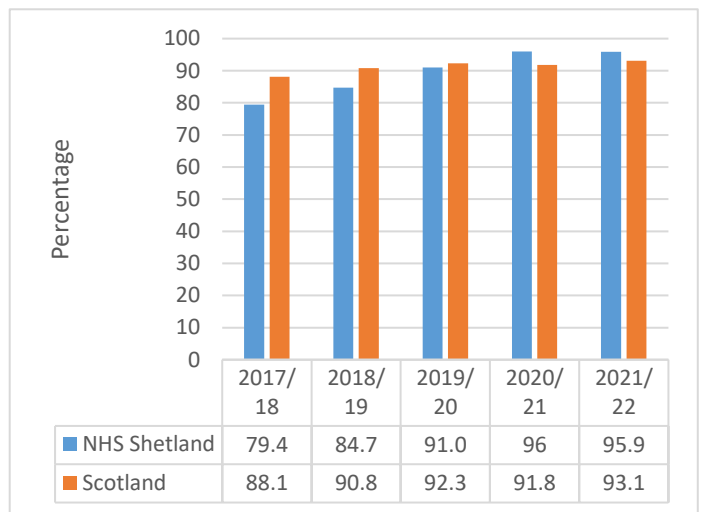
'We live longer, healthier lives. Individuals thrive and reach their full potential'

Maternity and Early Years

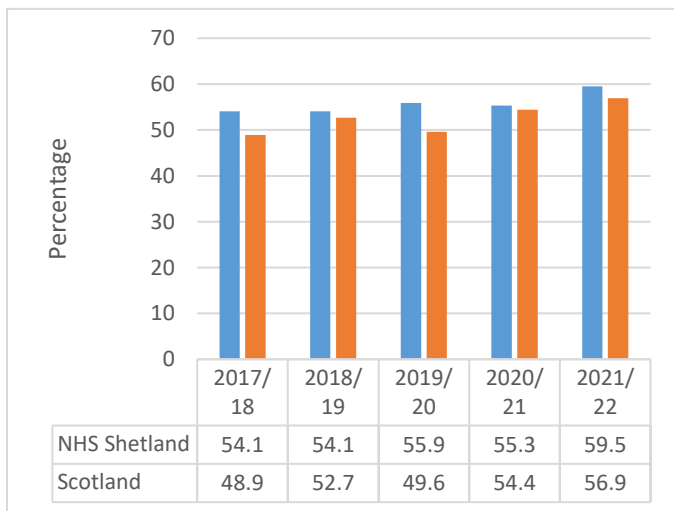
Maternal Smoking



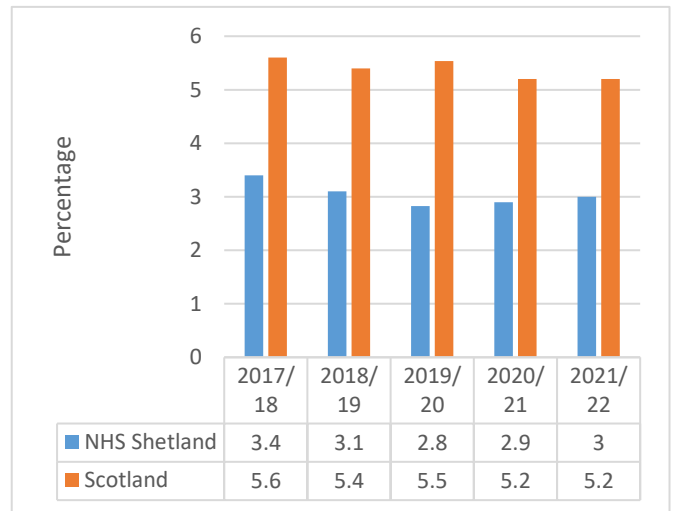
Antenatal booking by 12 weeks



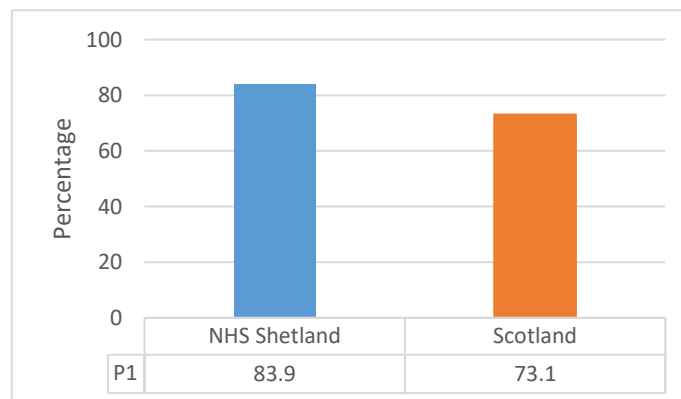
Maternal BMI (overweight or obese)



Low birthweight



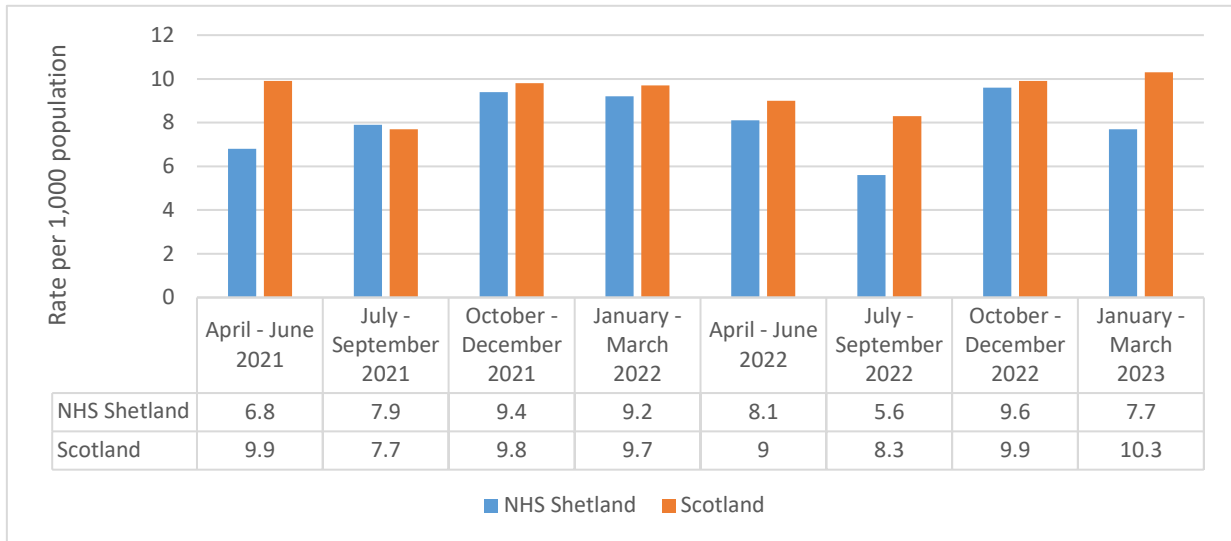
No obvious tooth decay P1 and P7



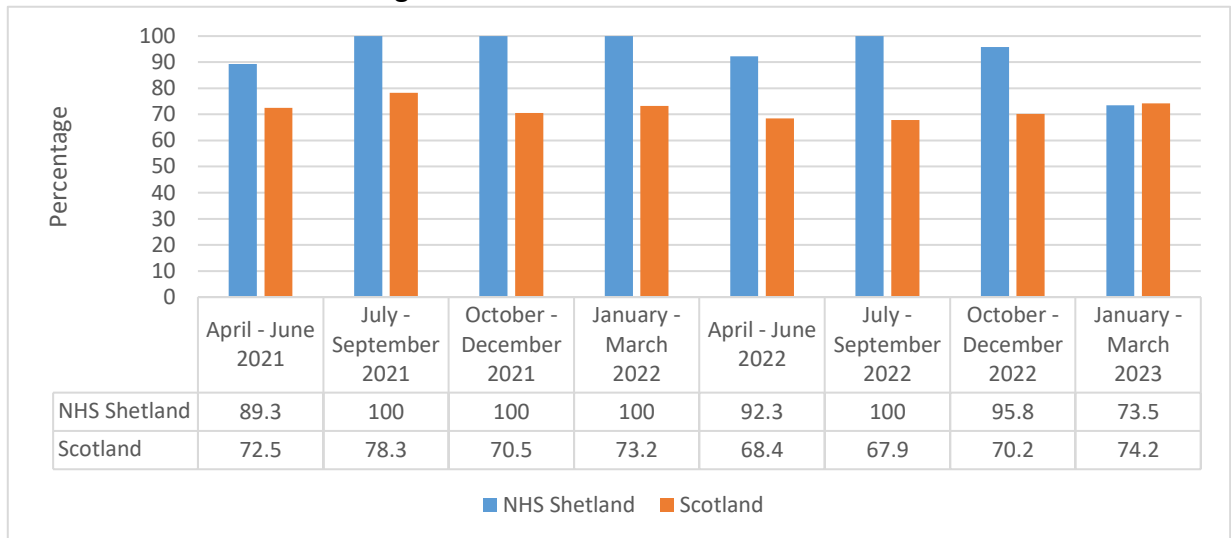
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Child and Adolescent Mental Health Service (CAMHS)

Rate of Referrals

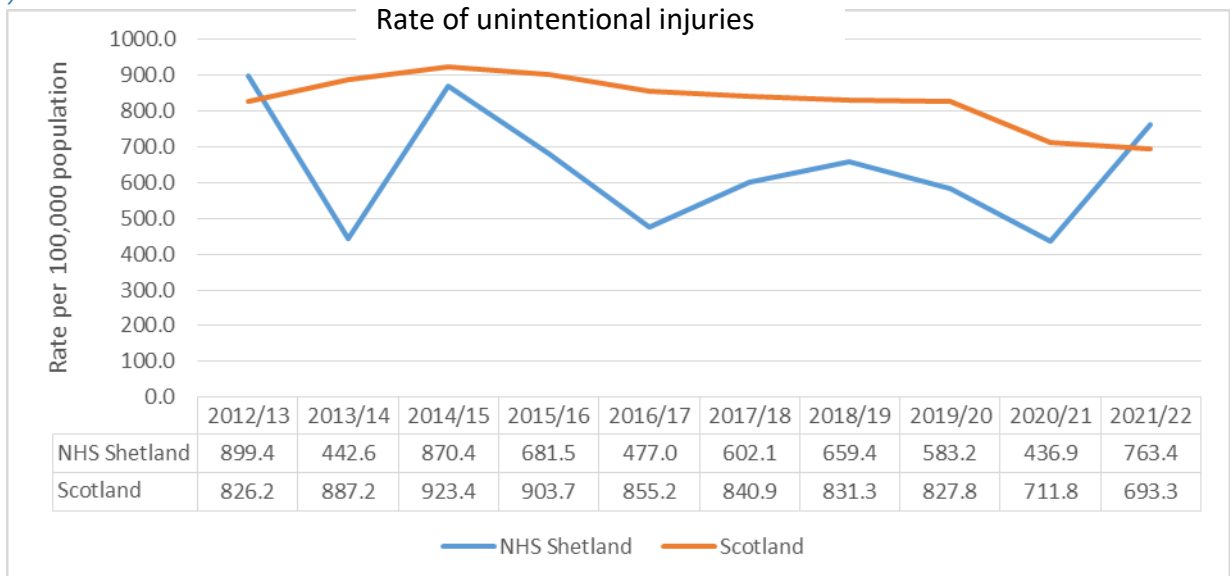


% waiting less than 18 weeks for start of treatment



Emergency Care

Rate of unintentional injuries

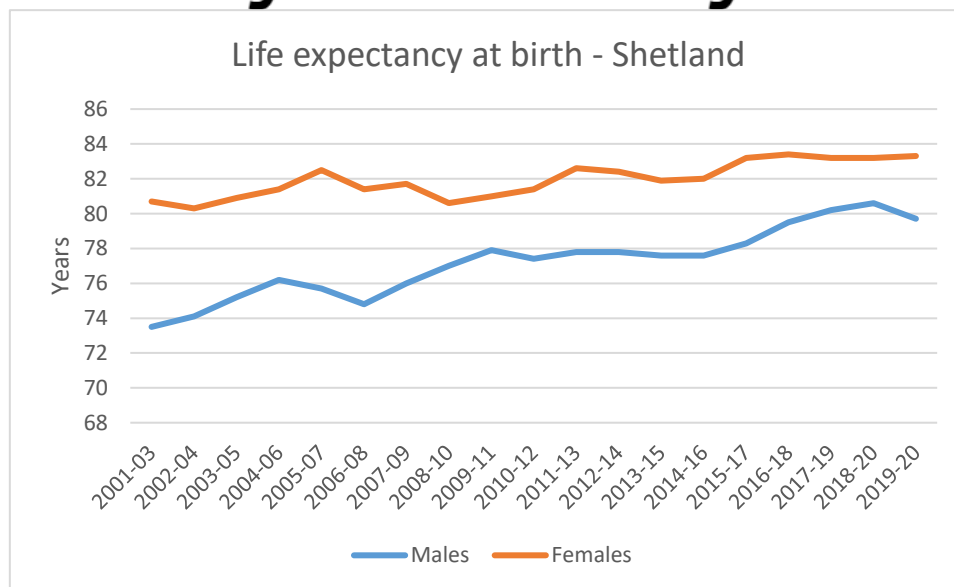
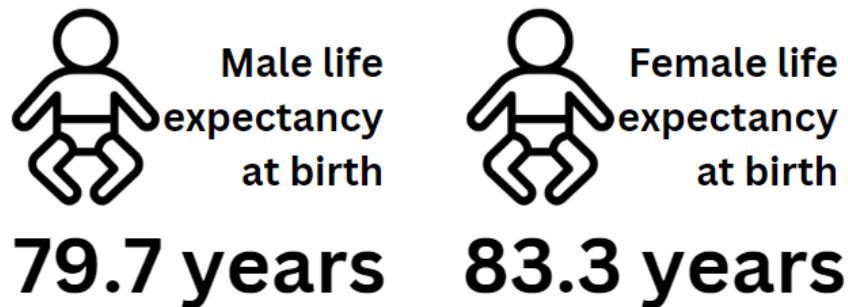


## Public Health Data – Children and Young People

### Life expectancy<sup>1</sup>

In Shetland Islands, life expectancy at birth was higher for females (83.3 years) than for males (79.7 years) in 2019-21 and it is higher than Scotland level for both females and males.

Between 2001-03 and 2019-21, female life expectancy at birth in Shetland Islands has risen by 3.2% while male life expectancy at birth has risen by 8.4%.



In Shetland Islands, life expectancy at age 65 years was higher for females (21.9 years) than for males (18.5 years) in 2019-21 and it is higher than at Scotland level for both females and males.

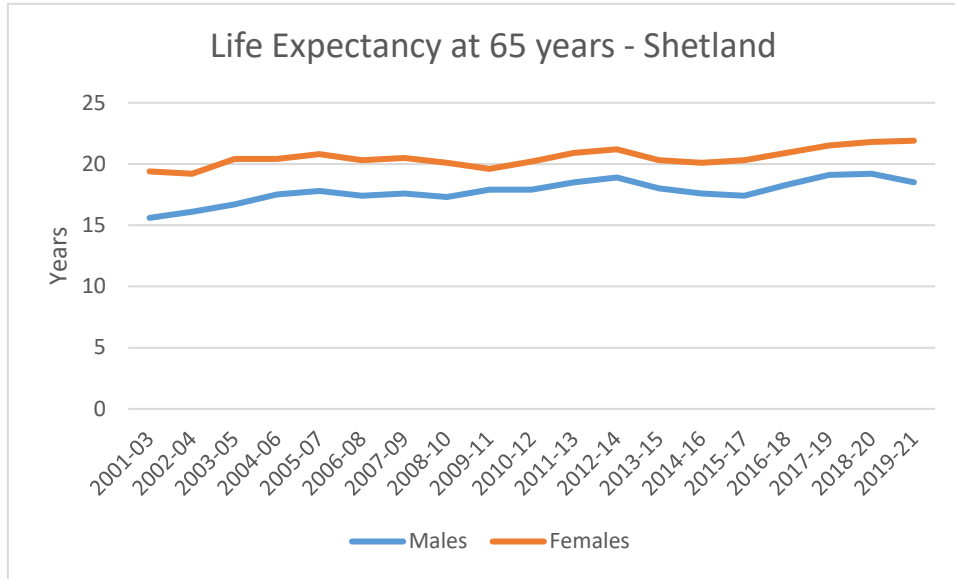
Between 2001-03 and 2019-21, female life expectancy at age 65 years in Shetland Islands has risen by 12.9% while male life expectancy at age 65 years in Shetland Islands has risen by 18.6%.



<sup>1</sup> Life Expectancy in Scotland, 2019-2021, National Records of Scotland



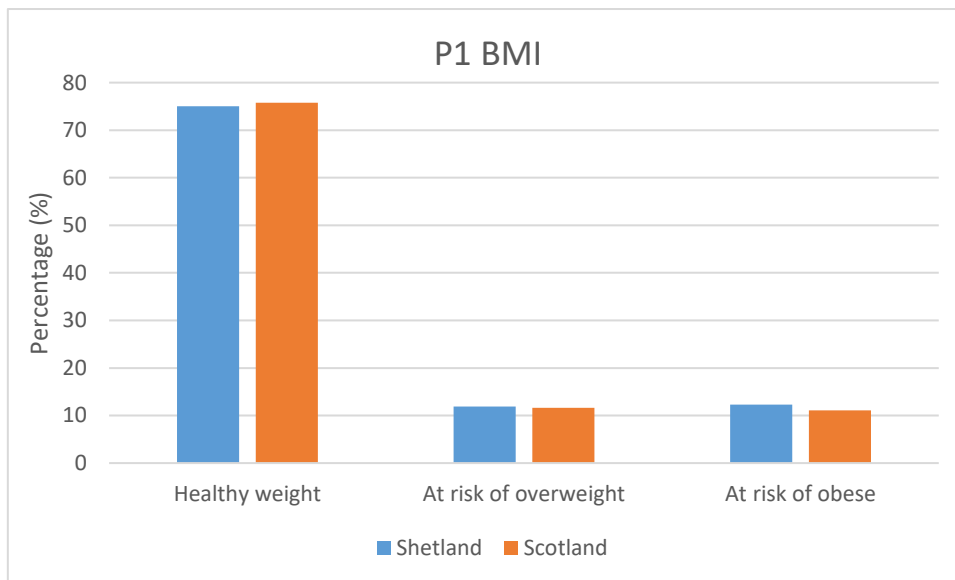
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### P1 BMI<sup>2</sup>

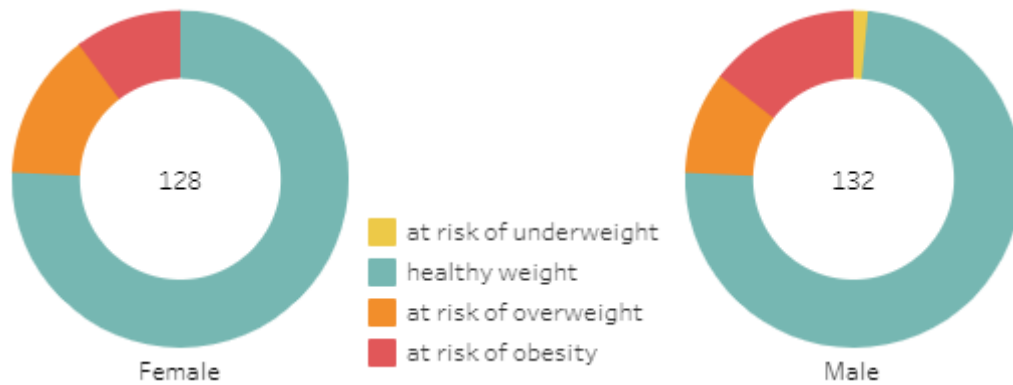
The coverage of P1 BMI reviews in Shetland in 2021/22 was higher than the national average – with 100% of P1 children receiving their review.

In 2021/22 the percentage of Primary 1 children in NHS Shetland who were deemed to be at risk of being obese was the 6<sup>th</sup> highest in Scotland. In Shetland there was a higher proportion of girls who were deemed to be at risk of being overweight, whereas there was a higher proportion of boys who were deemed to be at risk of being obese. This is a similar picture to what is seen nationally.



<sup>2</sup> Primary 1 Body Mass Index (BMI) statistics Scotland, School year 2021 to 2022, Public Health Scotland

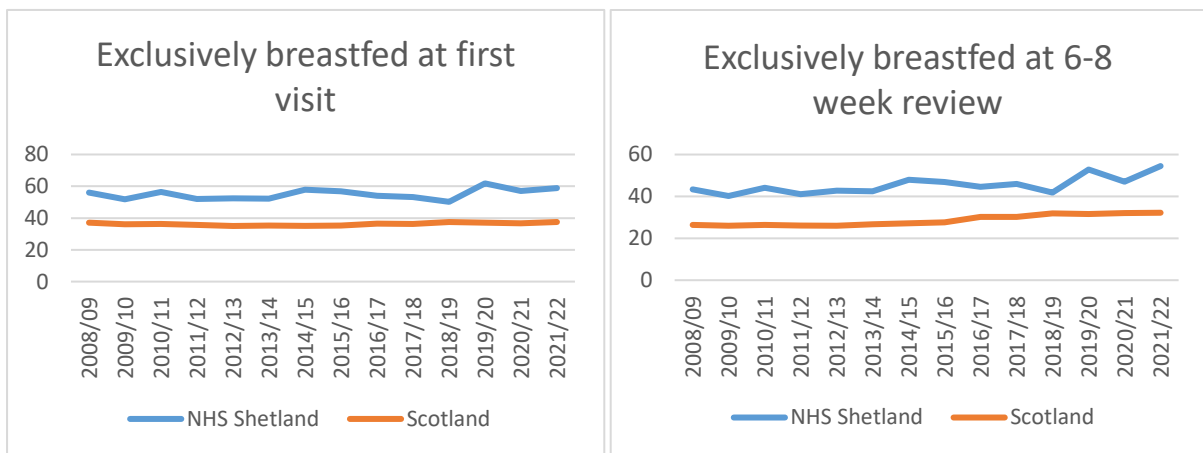
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In the 13 year period between 2008/09 and 2021/22 the rate of children who are outwith the health BMI range in Shetland has been fluctuating with those deemed to be at risk of being overweight ranging from 9.3% to 15.8% and those deemed to be at risk of being obese ranging from 5.8% to 15%.

### Infant feeding<sup>3</sup>

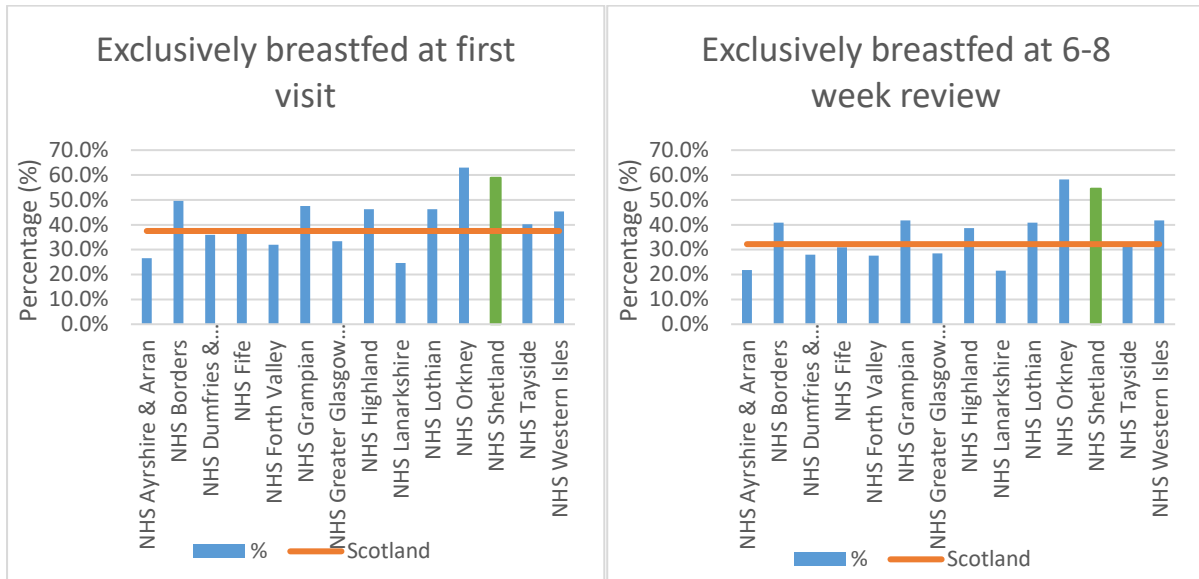
Shetland has historically had a high breastfeeding uptake rate, with consistently more than 50% of babies being exclusively breastfed at the time of the health visitor first visit and more than 40% at the time of the 6-8 week review.



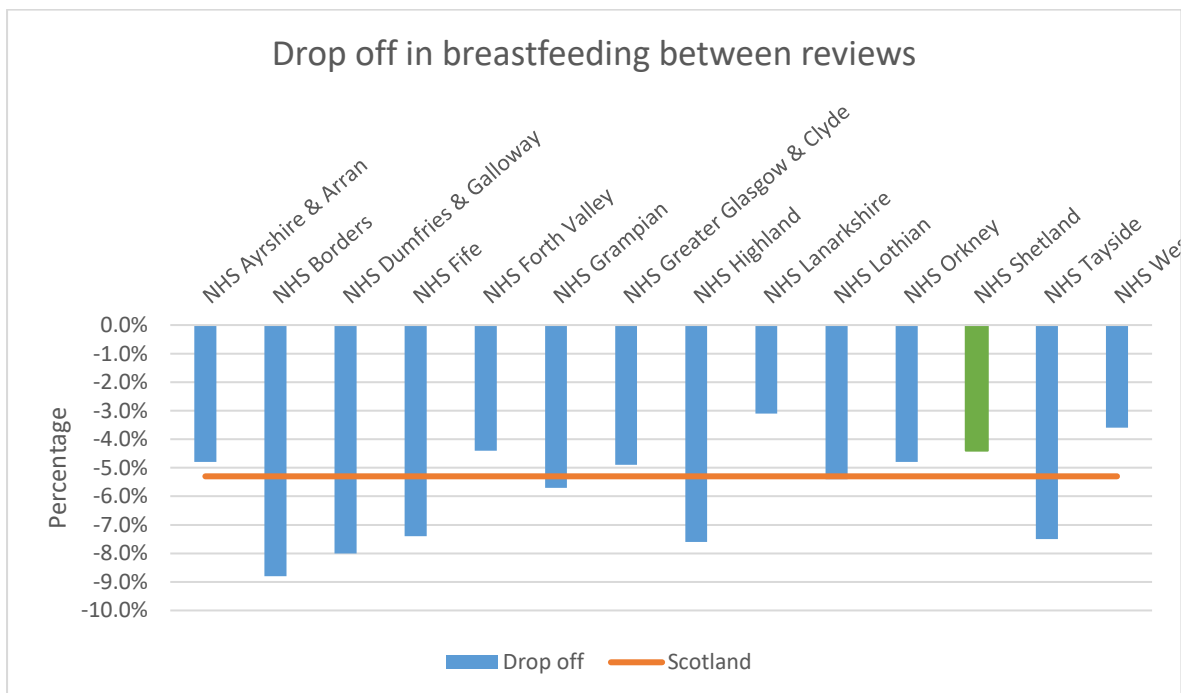
In 2021/22, Shetland has the 2<sup>nd</sup> highest breastfeeding rate at health visitor first visit – 58.9%, with Orkney being the only other board that had a higher rate – 63.0%. However, at the time of 6-8 week review Shetland had experienced a lower percentage drop-off, with 54.5% of infants still being exclusively breastfed.

<sup>3</sup> Infant feeding statistics, Financial year 2021 to 2022, Public Health Scotland

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Not only does Shetland has a high rate of breastfeeding, there is also a lower than average drop off rate between health visitor first visit and 6-8 week review. In 2021/22 the national drop off rate was 5%, however in Shetland that was 4.4% - this was the 3<sup>rd</sup> lowest drop off rate across NHS boards.



#### Early child development<sup>4</sup>

All children in Scotland are offered the Universal Health Visiting Pathway which includes a series of child health reviews, including an assessment of children’s development at 13-15 months, 27-30 months and 4-5 years. These reviews involve asking parents about their child’s progress, carefully observing the child, and supporting parents to complete a structured questionnaire about the child’s

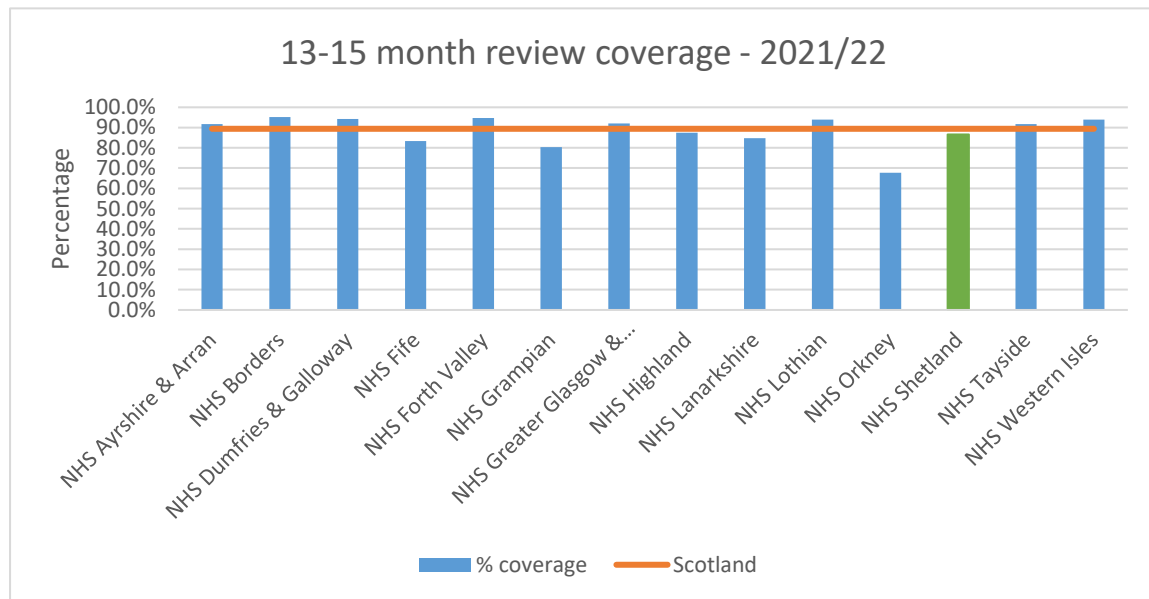
<sup>4</sup> Early child development, Scotland 2021/22, Public Health Scotland

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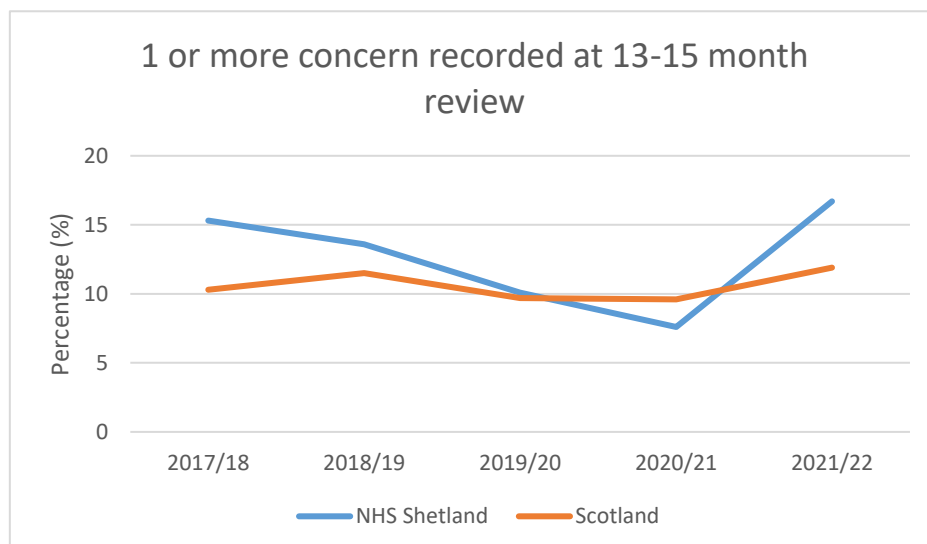
development. At the end of the review Health Visitors record whether they have any concerns about each area of the child's development.

### 13 -15 month reviews

The coverage of 13-15 month reviews in Shetland in 2021/22 was lower than the national average – with 86.6% of children receiving their review. This is the first year where coverage within Shetland had been below 90% and also below the national level.



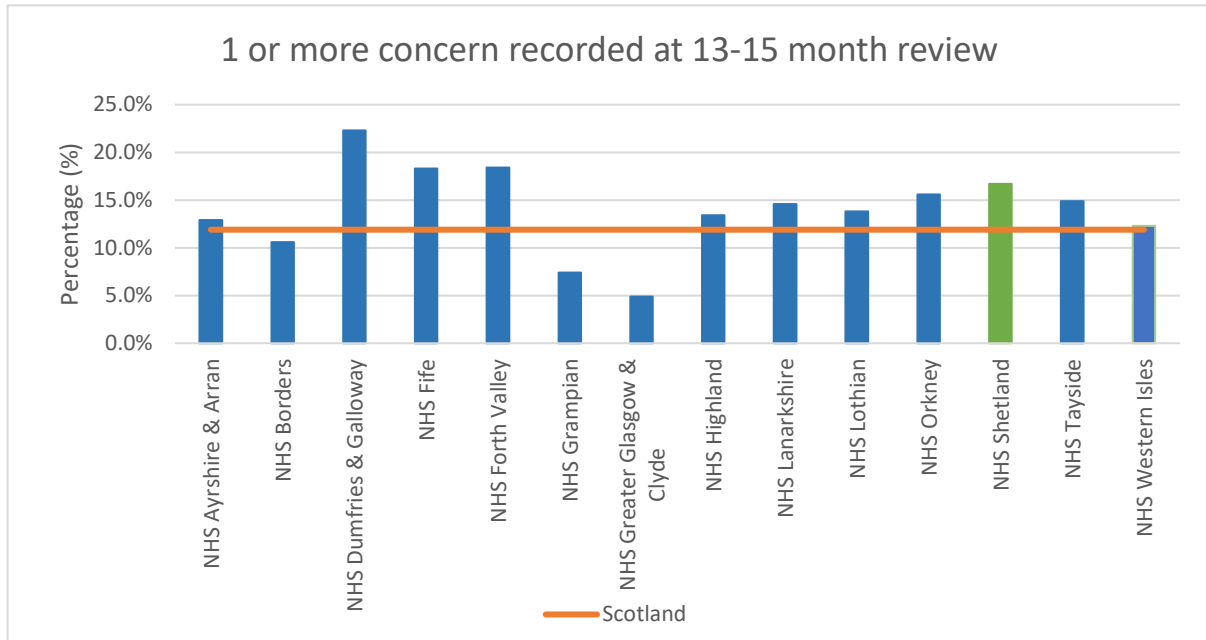
Over recent years the proportion of children in Shetland with 1 or more concern recorded at their 13-15 month review had fallen, however 2021/22 saw an increase to 16.7%, and is now higher than the Scottish rate.



In 2021/22, 16.7% of children undergoing a 13-15 month review in Shetland had a concern recorded about at least one area of their development. This was one of the highest rates recorded across all

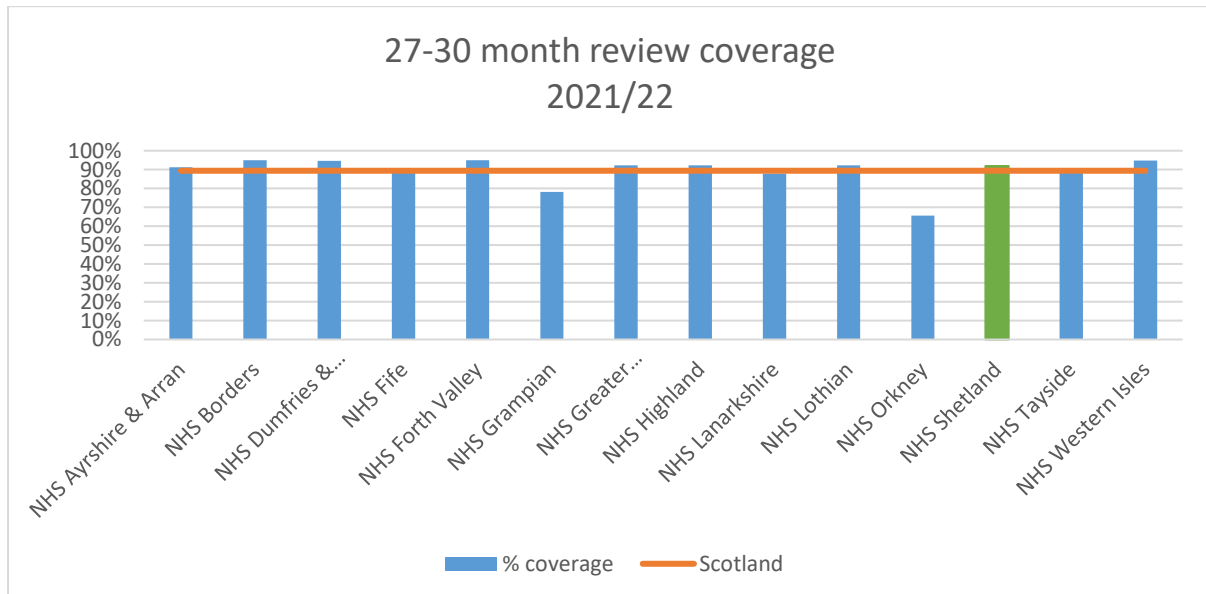
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NHS boards, with only NHS Dumfries and Galloway, NHS Fife and NHS Forth Valley having higher rates.



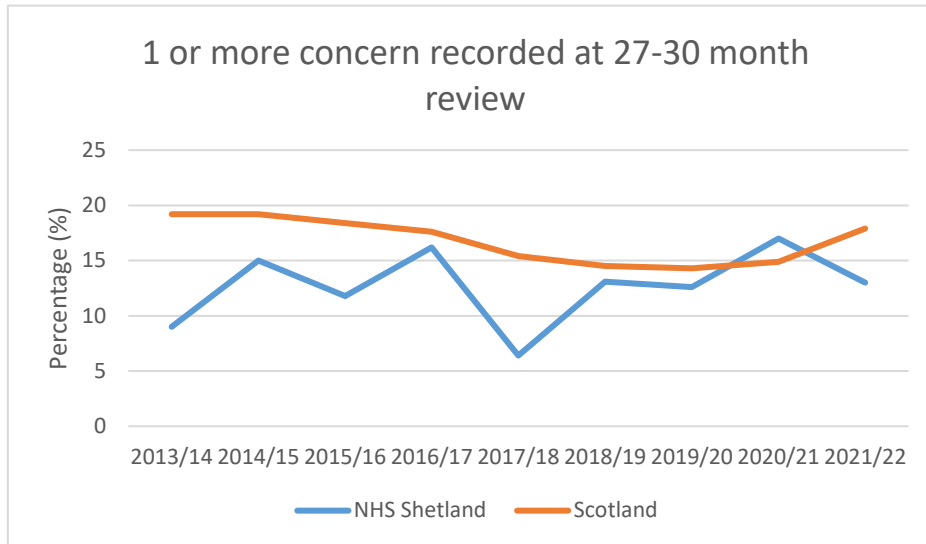
### 27-30 month reviews

The coverage of 27-30 month reviews in Shetland in 2021/22 was higher than the national average – with 91.9% of children receiving their review. Other than in 2020/21, coverage within Shetland had always been above the national level, with over 90% of children consistently having a 27-30 month review recorded.

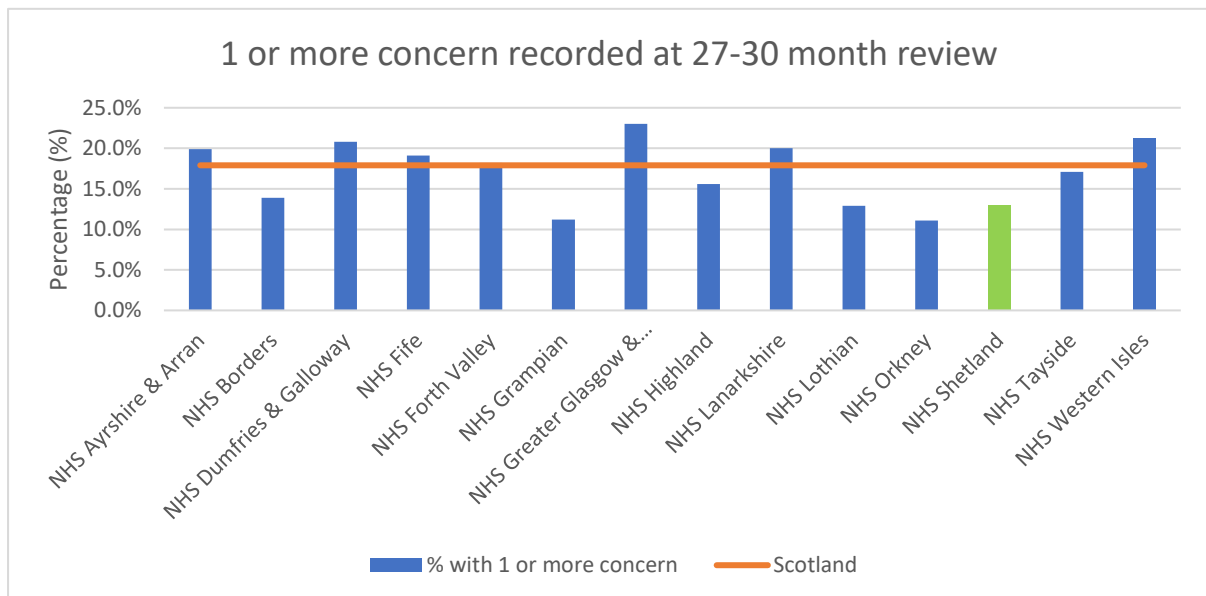


Over recent years the proportion of children in Shetland with 1 or more concern recorded at their 27-30 month review has ranged from 6.4% to 17.0%, and until 2020/21 had been lower than the Scottish rate.

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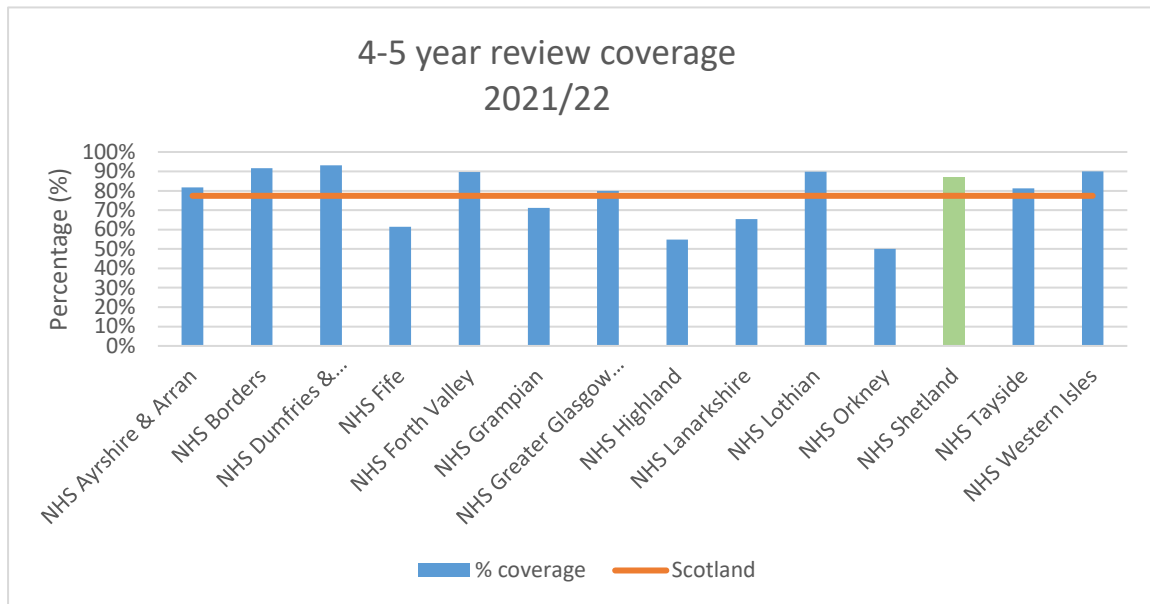
In 2021/22, 13.0% of children undergoing a 27-30 month review in Shetland had a concern recorded about at least one area of their development. This was below the national rate of 17.9% and one of the lowest rates recorded across all NHS boards, with only NHS Grampian, NHS Lothian and NHS Orkney having lower rates.



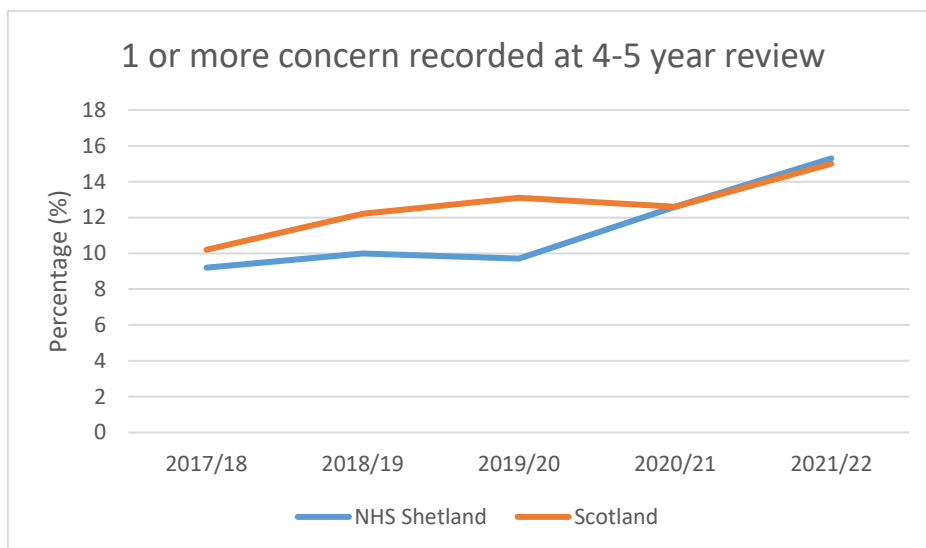
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#### 4-5 year reviews

The coverage of 4-5 year reviews in Shetland in 2021/22 was higher than the national average – with 86.8% of children receiving their review. Coverage within Shetland had always been above the national level, with over 80% of children consistently having a 4-5 year review recorded.

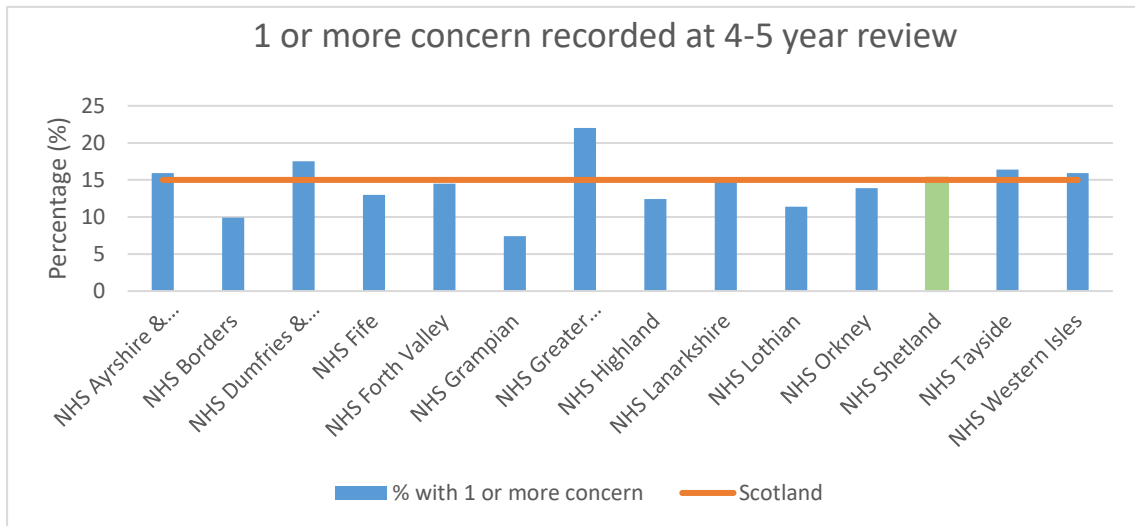


Over the last four years the proportion of children in Shetland with 1 or more concern recorded at their 4-5 year review has ranged from 9.2% to 15.3% and this year is higher than the Scottish rate.



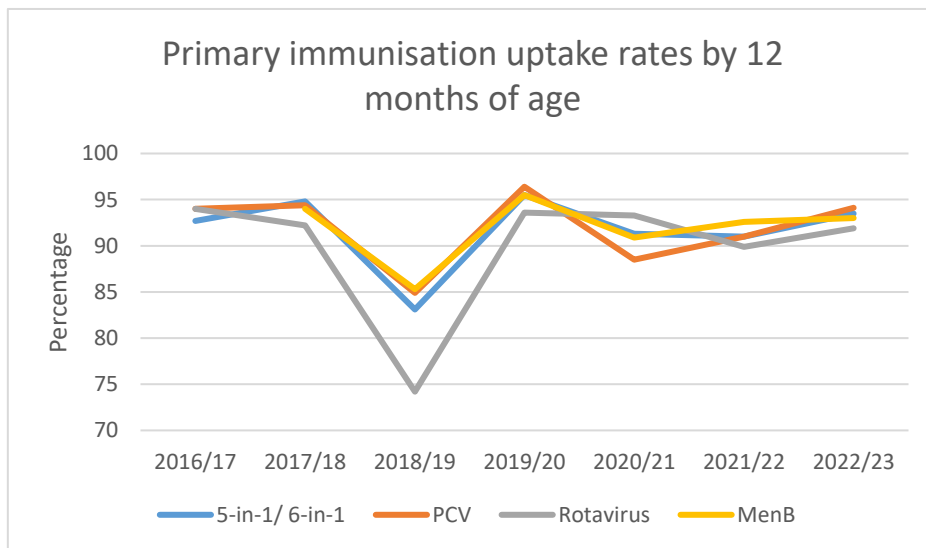
In 2020/21, 12.6% of children undergoing a 4-5 year review in Shetland had a concern recorded about at least one area of their development. This was equal to the national rate.

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### Immunisations<sup>5</sup>

2022/23 saw an increase in the uptakes rates of primary immunisations by 12 months of age. Uptake ranged from 91.9% for the Rotavirus vaccine to 94.1% for the Pneumococcal conjugate vaccine.

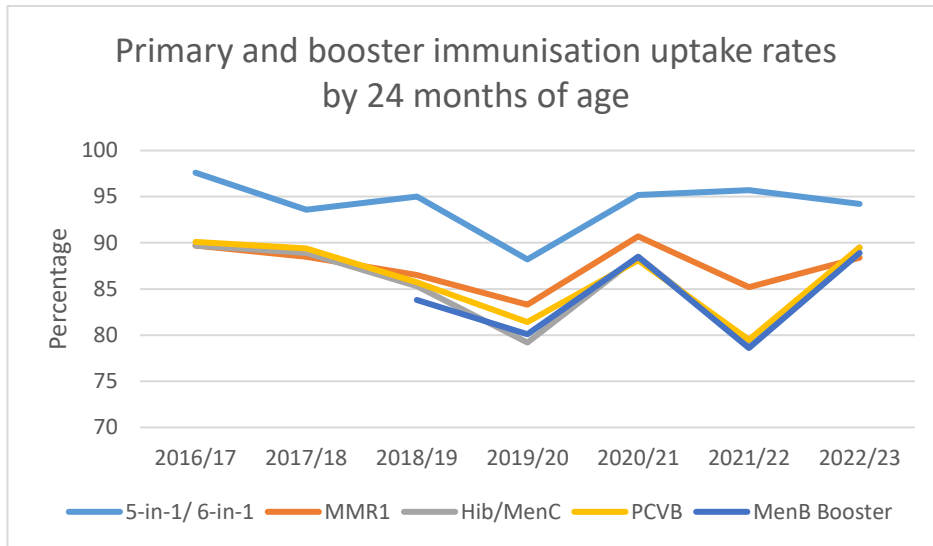


The most recent immunisation rates for those reaching the age of two shows uptake for the year 2022/23 has increased for all immunisations except the 6 in 1 vaccine. Uptake for this cohort of the different primary vaccines ranged from 88.4% for the MMR to 94.2% for the 6 in 1 vaccine.

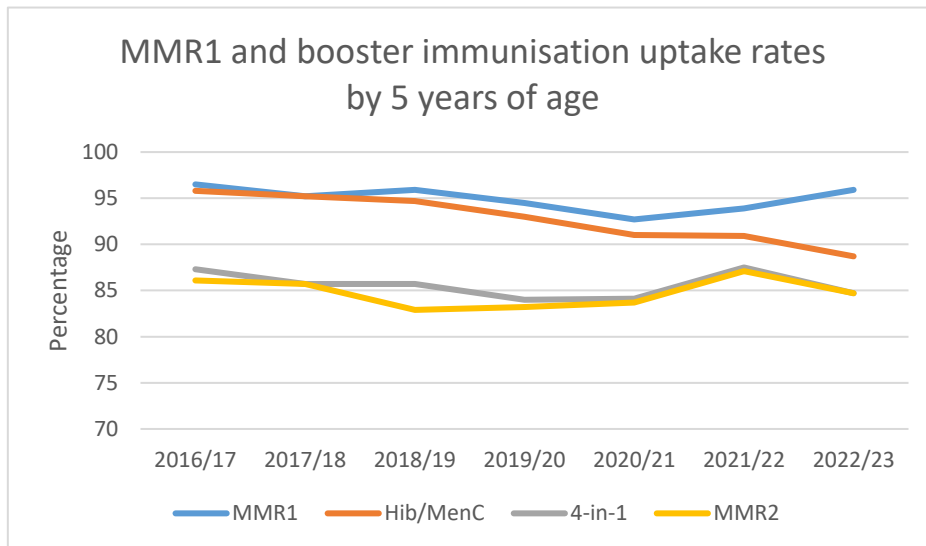
<sup>5</sup> Childhood immunisation statistics Scotland, Public Health Scotland



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Uptake of the pre-school booster measured at age 5 years has seen a lot of fluctuation over the last six years. During 2022/23 uptake fell for all vaccines except for MMR 1. Uptake rates ranged from 84.7% for the 4 in 1 and MMR booster vaccines to 95.9% for the MMR 1 vaccine.



Uptake of all immunisation (except MMR1 at 5 years) across these three age cohorts is lower in Shetland than the national average, particularly the 5 year uptake of Hib/Men C, 4 in 1 and MMR Boosters. In Shetland uptake of these immunisations was around 5-6% lower than the national uptake rates.

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### Teenage boosters<sup>6</sup>

By the end of the 2021/22 school year uptake of the teenage Td/IPV Booster and MenACWY immunisation in Shetland was higher than the national rate. In Shetland there has been a decrease in uptake of both the teenage Td/IPV Booster and MenACWY immunisations between 2020/21 and 2021/22. However it is important to note that due to small numbers, these uptake rates are prone to fluctuation.

#### Td/IPV booster uptake



**76.0%**

#### MenACWY uptake

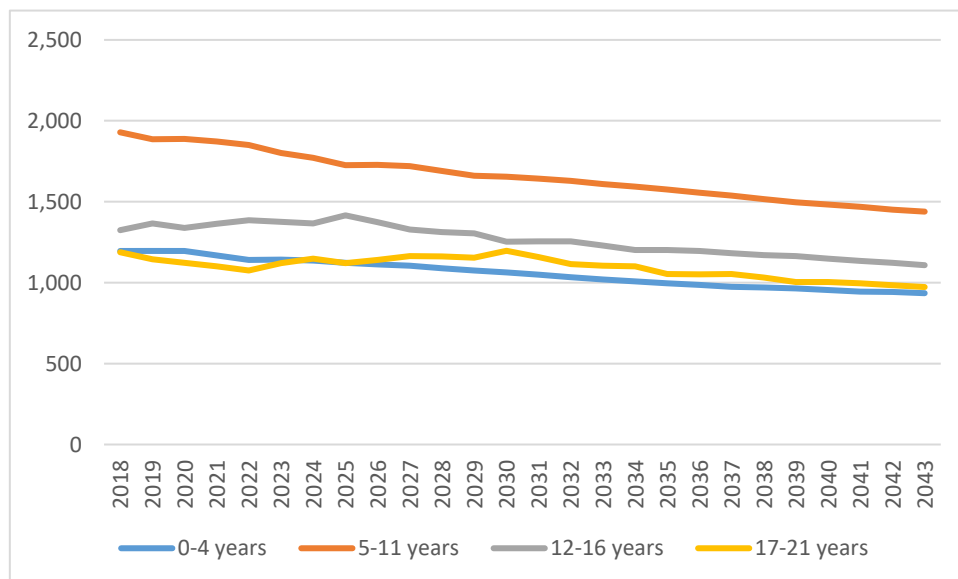


**76.0%**

### Population projections: 2018-2043<sup>7</sup>

Population projections for NHS Shetland suggest that the population of young people will fall across all age bands between 2018 and 2043.

The largest decrease will be seen in the 5-11 years age band, with projections showing that there could be a decrease of almost 500 young people. The smallest decrease is projected in the 12-16 years and 17-21 years age bands – which projected decreases of 216 and 215 young people respectively.



<sup>6</sup> Teenage booster immunisation statistics Scotland, School year 2021/22, Public Health Scotland

<sup>7</sup> Population Projections for Scottish Areas (2018-based), National Records of Scotland