



Item No: 9

Meeting Date: Wednesday 22nd March 2023

Glasgow City Integration Joint Board

Report By: Mike Burns, Assistant Chief Officer, Children's Services

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Scottish Government Funding for Improved Mental Health Services for Children and Young People 2023-2024

Purpose of Report:

To advise the IJB of the plan for the third year of investment in community mental health supports for children and young people by the Scottish Government.

Background/Engagement:

The Scottish Government has announced another year of funding for mental health support at tier 1 and 2 (non-clinical) community level, for service delivery and support costs associated with new and enhanced community mental health and wellbeing services for children and young people aged between 5 and 24, and their families and carers.

Governance Route:

The matters contained within this paper have been previously considered by the following group(s) as part of its development.

- HSCP Senior Management Team ☐
- Council Corporate Management Team ☐
- Health Board Corporate Management Team ☐
- Council Committee ☐
- Update requested by IJB ☐
- Other ☐
- Not Applicable ☒

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Recommendations:	<p>The Integration Joint Board is asked to:</p> <ul style="list-style-type: none">a) Note the contents of the report;b) Approve the plan for the third year of funding for community mental health and wellbeing supports;c) Note the progress made, as noted in Scottish Government progress report; andd) Note that future funding for the Emotionally Based School Non-Attendance project will be the subject of a separate report to the IJB.
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Relevance to Integration Joint Board Strategic Plan:

Community Mental Health and Wellbeing Framework

The HSCP Strategic Plan sets out the aim to implement the prevention components of the five-year Mental Health Strategy for Greater Glasgow and Clyde through the implementation of **a whole system programme**, which provides **seamless pathways** of mental health support.

The specific priority for mental health relating to children's services is to "develop care promoting wellbeing and working with children's services to promote strong relational development in childhood, protecting children from harm and enabling children to have the best start in life."

This report outlines the plan for the third year of funding to continue to deliver the tier 1 and 2 community level mental health supports in order to meet children and young people's mental health needs, particularly where these do not require targeted clinical intervention, in line with the Scottish Government's framework. This ongoing investment will continue to complement and strengthen current service responses, reflecting the aspirations of Getting It Right For Every Child and the current HSCP reform and change agenda, to deliver the *right help at the right time*. Furthermore, this investment will align the preventative spend in the city ensuring that the whole system operates in alignment and that support to children, young people and their families is coordinated and effective, ensuring best value and best outcomes for children, young people and families.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	<p>This funding will contribute to some of the key National outcomes. In particular; that young people are assisted to improve their own health; that their quality of life is improved; that the role of carers is enhanced and supported; and that the framework and funding reduces health and social inequalities through learning from lived experience. Such outcomes are aligned to the HSCP's transformational agenda and the desire to shift the balance of care, and secure better outcomes for all children and young people living in the City. Good mental health and wellbeing remains fundamental to that aspiration.</p>
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Personnel:	<p>Some staff will be directly impacted through the additional resource, as they may be asked to work differently to continue to support the development of tests of change in</p>
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	<p>order to explore approaches which are effective in meeting children and young people's mental health needs. For example, staff will be supported to build their understanding of neurodiversity in order to respond more effectively to children and young people's needs when they initially emerge, and to incorporate strengths-based and trauma informed practices into their approach. The aim is to promote a high quality and consistent preventative and early intervention response in order to avoid escalation and long delays for support, which may be exacerbated by waiting lists for services.</p>
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Carers:	<p>Carers will benefit from increased mental health support and more seamless pathways into support, particularly in relation to responses to children and young people's needs which do not require more specialist support (e.g. from CAMHS). The aim is to provide a range of services which respond to all levels of needs, and to support carers (as well as staff) with understanding the range of children and young people's needs, and to provide a range of approaches where a medical diagnosis is not appropriate/ required.</p> <p>In addition, the challenge is to ensure that both parents and carers are guided through the current maze of service provision. It is hoped that a more aligned and coordinated neighborhood approach in tandem with Joint Support Teams in schools and primary care teams can ensure that children get the help they need when they need it.</p> <p>The investment will also seek to support young carers and supplement the current work done in this area. Furthermore, it is hoped that this additional grant and investment can complement the aspirations and objectives of the Family Support Framework.</p>
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Provider Organisations:	<p>It is estimated that 84 organisations in Glasgow City provide mental health support for children and young people. Detailed discussions are underway with GCVS to support the development of a 'whole system' of mental health supports and services, which promotes a shared understanding of needs, and a more consistent response across the range of providers who contribute to improving children and young people's mental health and wellbeing.</p>
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Equalities:	<p>An EQIA has been undertaken in order to ensure that the range of supports being provided through this funding meet the diverse needs of children and young people, and also the individual needs of the population of LGBT+ children, children with disabilities, children with Additional Support</p>
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	Needs and those with a range of neurodevelopmental needs. The Framework will also seek to assist earlier access and support to cohorts of children with protected characteristics, and some funding has been channelled into direct service provision (e.g. to support LGBTQI+ children and young people) and scoping work to better understand the needs of children and young people (for example, Black and Ethnic Minority children and young people; (https://www.stor.scot.nhs.uk/handle/11289/580329)).
Fairer Scotland Compliance:	The proposals in relation to investment to improve the mental health and wellbeing of children and young people will support meeting the wider strategic priorities of the IJB, including assisting young people to improve their own health, improving their quality of life and reducing health and social inequalities.
Financial:	<p>Scottish Government has allocated £1,755,000 for 2023/24 to continue to develop and expand community wellbeing and mental health supports. This report is seeking approval of the plan for the third year of funding.</p> <p>The existing HSCP workforce and our integrated Partners will provide additional resource in supporting and developing a whole system approach to meeting children and young people's mental health needs, and responding to the impact of the pandemic.</p>
Legal:	Normal legal processes and procedures for Glasgow City Council and the Health Board (e.g. in relation to commissioning processes and involvement of trade unions in the development of practitioners' roles) will be followed in developing a whole system approach to meeting children and young people's mental health and protection needs.
Economic Impact:	There will be positive economic impacts at a local neighborhood level as services are expanded to meet children and young people's mental health needs at tier one and tier two level, through preventing escalation to specialist services and moreover the delays caused by inappropriate referrals to more targeted services (often in the absence of other appropriate supports at community level).
Sustainability:	This work fully aligns with the children's transformational change programme, the principles of GIRFEC and the Christie Commission report, which emphasise the need to improve preventative and early intervention support for children and young people. Given that the key point of leverage to deliver the transformational change programme

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	<p>is to develop practice at the frontline – at the point of interaction with children, young people and their families – the current workforce represents a considerable resource in terms of its contribution to achieving sustainable change across all supports and services, including those addressing children, young people and families’ mental health needs.</p> <p>Fundamentally, a more effective and preventative approach towards children and young people’s mental health may also divert demand from more targeted supports, and Adult Mental Health and Adult Services generally.</p>
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Sustainable Procurement and Article 19:	The procurement process will meet all legislative requirements, and article 19 of the UNCRC.
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Risk Implications:	Failure to approve and implement this plan risks not meeting the range of current, and emerging, mental health needs of children, young people and their families, particularly at Tier 1 and 2 early intervention level. Continuing challenges arising from and exacerbated by the pandemic are likely to exacerbate mental health issues for a prolonged period, which will have an impact on broader wellbeing outcomes if appropriate supports, similar to those outlined in this plan, are not in place.
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Implications for Glasgow City Council:	<p>This funding has the potential to develop a range of mental health and wellbeing supports for children and young people at tier one and two level, which will meet their needs earlier, and prevent escalation, thereby relieving pressure on more targeted supports, such as statutory Social Work Service (which is currently supporting around 10,500 children and young people, and their families), Specialist Children’s Services and CAMHS.</p> <p>This funding is also aligned to the £18 million invested by the City Council into services for children through the new Community Fund and the £2.2m invested through the Care Experience Fund with Education. It should be noted that Scottish Government has also invested a further £1.3million into School Counselling.</p>
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Implications for NHS Greater Glasgow & Clyde:	In line with the Greater Glasgow and Clyde Mental Health Framework and the Scottish Government framework, this funding aims to develop a whole system approach (aligned to Getting It Right For Every Child) to meeting mental health and wellbeing needs, with a focus on shifting the balance of care and improving transitions to adult services. The alignment across GGC and GCC highlights the potential for improved integration and partnership working and the increased likelihood of meeting children and young people’s
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	needs at a neighborhood and community level. This should enable targeted supports to be directed at those most in need of specialist care and support. The aim is to reduce the number of inappropriate referrals and delays caused by waiting lists and to ensure a more seamless pathway to specialist care for the children and young people who require it.
Direction Required to Council, Health Board or Both	
Direction to:	
1. No Direction Required	<input type="checkbox"/>
2. Glasgow City Council	<input type="checkbox"/>
3. NHS Greater Glasgow & Clyde	<input type="checkbox"/>
4. Glasgow City Council and NHS Greater Glasgow & Clyde	<input checked="" type="checkbox"/>

1. Purpose

- 1.1. This report is a follow up to the reports presented to IJB in [January 2021](#), [March 2021](#), [May 2021](#), [September 2021](#), [March 2022](#) and [April 2022](#) which sought approval for the strategic direction, and the plan for the use of the Mental Health tier 1 and 2 funding, in the context of its alignment with the wider children's services transformational change programme. This report sets out the specific financial detail in relation to the plan and has been developed in partnership by the Assistant Chief Officer for Children's Services, the Senior Leadership team for Children's Services, and a range of partners.

2. Background

- 2.1. This paper sets out the financial plan for the £1,755,000 which has been awarded for 2023/24 by the Scottish Government, and an overview of the progress with the spend so far. This funding was awarded "to deliver new and enhanced community based mental health and emotional wellbeing supports and services for children, young people, their families and carers", in line with the Community Mental Health and Wellbeing Framework. The financial plan for this award is outlined in Table 1.
- 2.2. Given the short-term nature of this funding in that it continues to be a one-year allocation and not recurring funding, there have been some challenges in relation to the timescales for planning and procuring services. Therefore, appropriate methods continue to be explored to govern this funding. The HSCP will continue to utilise a variety of commissioning methods to ensure flexibility of service and maximum use of funding. All exercises will be undertaken in line with the relevant standing orders/ statutory financial instruments of the Council and the Health Board.

3. Financial Plan – Tier 1 and 2 Community Mental Health Support

- 3.1 This phase of funding will primarily be used to continue to deliver the supports and services outlined in previous reports.

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- 3.2 The table below presents the full year spend from April 2023 to March 2024, except in cases where recruitment and/ or procurement timescales have been built in, as indicated in the table. Based on the current advice, the funding is to 31 March 2024. The learning and outcomes will continue to be monitored, and the Children's Services team will continue to look for opportunities to strengthen support to children, young people and families, and will update the IJB accordingly.

Table 1: Financial plan for the award of £1,755,000 to continue to develop and expand community wellbeing and mental health supports in 2023/24		
HSCP Supports and Services		
Service/ support	Description	Cost
Youth Health Service	One year of running costs associated with the delivery of the expanded model of Youth Health Services provision across the city.	£354,260
Children and Young People's Networking Team 1 x Band 7 temporary Project Manager post (to be managed by Central Parenting Manager), with 3 month gap for recruitment assumed due to current post holder leaving in March 23 5 x Band 3 temporary Healthcare Support Workers	Support for children, young people and their families into the range of tier 1 and 2 mental health and wellbeing supports, and for professionals who are looking to identify appropriate supports to improve children's mental wellbeing. As well as improving the connectedness of services, this work will also help to build an understanding of the range of children and young people's neurodiversity needs across the partnership, which will help to further develop appropriate services, and is key to ensuring that children, young people and their families are routed to the right service, in line with the philosophy of GIRFEC.	£224,927
Tier 2 CAMHS Support Team 5 x Band 3 temporary Healthcare Support Workers (managed by Nurses working within CAMHS service)	Provision of tier 2 level support to families referred to CAMHS. This team has been set up in response to an analysis of the CAMHS waiting list which suggested that the needs of a number of children with specific neurodevelopmental needs	£163,000

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	and anxiety issues could be more appropriately addressed through other types of support (particularly in cases where children and young people may not require or benefit from a formal diagnosis). As well as providing a direct source of earlier intervention support to the families of children and young people on the waiting list (pending formal assessment of their need), the support is also for children and young people who are referred to CAMHS but do not receive a service following assessment, with support beginning when children and young people are on the waiting list.	
Targeted support for Roma/ Refugee/ Asylum communities - 2 x one-year fixed term WTE posts at grade 4 (SWS) or Band 3 (NHS) equivalent level	Roma/Refugee/Asylum Primary/Community Connectors	£68,109
Community outreach support for pregnant young mothers SW posts 1 x Grade 4 and one Grade 6 - one year fixed term posts	Community outreach and mentoring approach to support pregnant women under 24 (and under 26, if care experienced) whose children are at risk of accommodation/ have been removed from their care, and who are not currently involved in services.	£79,118
One-year fixed term Assistant Service Manager post (Grade 8)	To support redesign of aftercare, through partnership work with Registered Social Landlords, attending to the mental health needs of young people and the impact of the pandemic.	£77,072
Mental Health Services Evaluation and Coordination role (NHS Band 7; fixed term for one year)	To extend the initial start-up funding provided by SG for coordination and evaluation support for an additional	£50,800

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	year, in order to support development of coordinated support and seamless pathways and to provide evaluation support.	
Mental health and wellbeing support for Unaccompanied Asylum Seeking Young People	Cost to run five 'Orientation to the City' courses, covering travel, cooking activities, interpreter services, ESOL courses and tutors etc.	£24,530
Provided Supports and Services		
Service/ support	Description	Cost
Full year cost of 1.0 FTE Senior Educational Psychologist post (from April 2023 – March 2024) to oversee and evaluate Emotionally Based School Avoidance Project, and to provide training to Social Work and Health staff to support young people's mental health and wellbeing.	Joint programme developed by HSCP and Education to meet the needs of young people who have a profile of need which results in school avoidance. Led by Educational Psychology, this programme is building an understanding of school avoidance in a multi-disciplinary team through providing training in developmental needs and techniques to encourage the transition from isolation in the home environment to better life outcomes such as return to school, engagement in positive destinations or seeking appropriate support through services to address other support needs. Support is being extended to young people who are not attending school and have recently left school.	£88,934
Compassionate distress support	Cost of one year service to fund 4 Distress Response Workers to support young people aged 16 – 25 from 9am – 2am Monday to Friday and 5pm – 2am at weekends.	£158,335
Mental health support for LGBTQI+ children and young people	Targeted third sector support to meet specific needs of children and young people	£180,000

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Service/ support	Description	Cost
Extension of pilot project within the Youth Health Service aiming to extend support to parents/ carers	Third sector support to parents of children and young people referred to YHS	£70,000
Individual and group prevention and early intervention mental health programmes	Continuation of community children and young people's mental health model developed in North East Glasgow	£26,000
Improving mental health support for children, young people and families within Black and Minority Ethnic communities	This funding will be utilised to support the implementation of the recommendations published in the BME scoping report in order to improve approaches to addressing the mental health needs of children, young people and families from Black and Minority Ethnic communities.	£35,000
Online Mental Health Support	Online anonymised support platform to improve mental health and wellbeing, which is an open access forum for children and young people	£145,336
Reserve funding for inflation, additional costs and contingencies for all the initiatives, with possible contribution towards the expansion and/ or continuation of EBSNA (as detailed in section 4.2)	Where known, staff pay uplifts have been built into the figures presented, however, given the cost of living crisis, inflation and increasing costs overall, a reserve fund is being built in. This reserve fund may also be used to fund an extension or expansion of the EBSNA service, subject to the necessary funding being available (see section 4.2) and in adherence with normal legal and commissioning processes.	£9,579
Total Spend		£1,755,000

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4. Context

- 4.1 This funding is focusing on reducing distress, and children and young people are being involved in the ongoing evaluation of services. Approaches are being developed with Commissioning, Health Improvement and Education colleagues to involve young people in this process.
- 4.2 Last year, additional funding was available for community mental health supports due to an underspend during the previous year (2021/ 22). This underspend was used to commission the Emotionally Based School Non-Attendance project, which is funded to October 2023, with permission from Scottish Government. This project was set up to provide in-reach support within schools to children and young people displaying emotionally based avoidant behaviours, targeting young people who are struggling to engage following the impact of schools closing over the pandemic, for example, due to anxiety, issues related to autism/ neurodevelopmental profiles of need, and other mental health presentations, as well as care experienced young people returning to Glasgow from placements in other local authorities etc. The approach has been very successful, with 164 referrals so far, 57 young people allocated a key worker, and a waiting list of 10 – 12 weeks. Due to ongoing concerns about the rate and impact of non-attendance (see Appendix 2), HSCP and Education colleagues recognise the importance of this type of service and have commenced joint strategic dialogue about funding post-COVID, in the context of addressing the ongoing impact of the pandemic and appropriate mitigation. Due to the relative decrease in funding (in the absence of any underspend for 2023/24), the decision has been taken to source a more reliable, long-term fund for this type of service, rather than relying on non-recurring one year funding streams. Discussions are under way to establish options for the expansion of this service using the reserve fund which will be the subject of a separate report.
- 4.3 A progress report was submitted to Scottish Government in January 2023, covering the period from July to December 2022. In this period, over 1300 children and young people accessed the supports, and over 170 parents and carers were also supported. Over 500 young people had so far reported improved outcomes following the emotional distress support received, through this figure represents an underestimate as not all young people have participated in an evaluation, with many still participating in the programmes. The reporting arrangements are determined by Scottish Government for monitoring in line with the Children and Young People's Mental Health and Wellbeing Supports and Services Framework.

Qualitative feedback from young people highlights the value of these services in improving mental health and wellbeing:

“I liked that there was support for me if I needed it, I felt heard and that I wasn't alone in how I was thinking or feeling.” (Young person involved with Youth Health Service)

Several case studies have been developed to highlight the impact of the support (see Appendix 1 for examples).

Parents have also commented on the value of the services:

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“[Practitioner] was very helpful and friendly which made me feel comfortable. I've never had to ask for support before, but, I never felt judged or embarrassed. [Practitioner] was so helpful providing information which I refer to a lot. I've had a lot of self doubt in the way I've been dealing with my son because I felt useless. [Practitioner] always spoke me through what I've been doing and looked at the positives in that which actually has helped me try look at the positives too. I think this service is great to help parents like myself when you feel you have no where to turn. She was very patient as I've had a busy period of work during my time with [Practitioner] and this helped me not feel guilty when I felt I was putting my work over my son's behaviour.” (Parent of child being supported by Networking Team)

“Great to be part of and meet a wider community of LGBTQ+ parents. [Our child] loved playing with the toys and meeting new people.” (Parent involved in LGBTQI+ supports)

- 4.4 Further detail on the outcomes achieved for young people is contained in the Youth Health Service Annual Report (report available on request).
- 4.5 These developments are part of the wider whole system change work to develop an aligned and effective single system for children's services across the Glasgow partnership, demanding radical improvement and effective collaboration from all services to ensure better outcomes for children and young people. It is recognised that a comprehensive, coordinated and aligned approach is necessary across all stakeholders in the partnership to ensure that the aspirations of GIRFEC are realised, in line with the integration agenda for Health and Social Care, and discussions are taking place with Community Planning Partners to coordinate this spend with other initiatives (including the Whole Family Wellbeing Fund and Child Poverty Pathfinder), to ensure more seamless pathways of support for children, young people and their families.

5. Recommendations

- 5.1 The Integration Joint Board is asked to:
 - a) Note the contents of the report;
 - b) Approve the plan for the third year of funding for community mental health and wellbeing supports;
 - c) Note the progress made, as noted in Scottish Government progress report; and
 - d) Note that future funding for the Emotionally Based School Non-Attendance project will be the subject of a separate report to the IJB.

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Direction from the Glasgow City Integration Joint Board

1	Reference number	220323-9
2	Report Title	Scottish Government Funding for Improved Mental Health Services and Supports for Children and Young People
3	Date direction issued by Integration Joint Board	22 March 2023
4	Date from which direction takes effect	22 March 2023
5	Direction to:	Glasgow City Council and NHS Greater Glasgow and Clyde jointly
6	Does this direction supersede, revise or revoke a previous direction – if yes, include the reference number(s)	No
7	Functions covered by direction	Children's Services, Mental Health Services, Adult Services
8	Full text of direction	The Integration Joint Board directs the Council and Health Board to utilise the 2023/24 Scottish Government funding to continue to develop, improve and expand mental health services for children and young people according to the plans for funding outlined in this paper, with a review of the outcomes achieved in March 2024.
9	Budget allocated by Integration Joint Board to carry out direction	The total funding available for the development and expansion of tier 1 and 2 supports for 2023/24 is £1,755,000.
10	Performance monitoring arrangements	In line with the agreed Performance Management Framework of the Glasgow City Integration Joint Board and the Glasgow City Health and Social Care Partnership.
11	Date direction will be reviewed	March 2024

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Appendix 1

Case Study 1: 11 year old girl, who was waiting for an Autism assessment, whose family was being supported by the Networking Team

Mum concerned about her daughter struggling with a high level of anxiety, causing her behaviour to be very difficult to manage both for mum and the child, especially before and after school. This anxiety was impacting on the child's sleep, friendships at school, not coping with school environment, not coping with transitions and was also impacting on general family life. Relationship between mum and daughter was strained, as daughter was struggling to express her feelings and mum was unsure how to help her daughter. Mum highlighted that her daughter's sensory issues with noise levels, certain textures of clothing and eating habits was also causing increased anxiety and these were becoming difficult to manage.

Resources provided by Family Support Worker over two return visits were as follows: Sleep Scotland guidance/ information/ strategies for improving sleep; NHS Kids website information about sensory differences, anxiety, and fussy eaters; online website for Autism support for mum; Emotional Wellbeing apps for young children; information leaflet about "Calm Down Kit"; daily routine, check lists, and visual prompts; chart containing wellbeing wheel visual & 'how do I feel' tool to help daughter to express how she was feeling; Kooth website details; Right Click counselling support for adults and referral to Central Parenting Team Fear-less programme.

All resources and handouts were explained and discussed with mum during both visits. Mum said she had tried some of these before when her daughter was younger and felt she was going back the way. Family Support Worker was able to give mum reassurance and encouragement to give them another go, which mum agreed to and was more positive at the second visit with feedback about how some of the resources were helping e.g. she and her daughter had put together a bag of sensory items that her daughter takes out with her to help to reduce her anxiety. Mum was able to share that her thoughts around Autism were changing as, having read through the resources, she could identify with how her daughter was presenting and that the pattern of behaviour matched with descriptions of Autism.

Family Support Worker also attended school meeting at the request of mum, who had arranged this to address the struggles her daughter was having at school; discussion and encouragement to mum given by worker before meeting took place, which mum was grateful for. Both mum and dad attended this meeting and were confident in raising their concerns. Good outcome from meeting, as support was put in place for their daughter, which mum and dad were pleased about.

Mum had thanked worker for support both verbally and by sending a text. She felt worker's presence at the meeting had made a difference to the outcome. Mum also advised that she has been using more resources and her relationship with daughter has improved, as they are able to communicate and understand each other better. Mother is still working through a sleep routine but this is taking longer to establish. In general, mum fed back that she felt her daughter is using strategies & techniques to help with managing her anxiety.

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Further resources and information provided by worker are as follows: Website Lifelink Glasgow - counselling service; Young Minds website; Enquire Scotland website – support at school.

Mum reported that she is very happy with all resources provided with and stated that “she and her daughter are in a better place than before” and will continue to try and utilise the resources and supports given.

Case study 2: parent’s account of being supported by ‘Martha’s Mammies’ Service for mothers whose children are at risk of accommodation

My Martha’s Mammies Journey...

“I came to Martha’s Mammies around May 2022. My support worker [Practitioner’s name] introduced herself, I was a bit nervous at first as my trust issues are sky high. [Practitioner] introduced me the groups which I really enjoy as it takes your mind off your troubles. It’s a very relaxing environment and its nice to meet other women who are going through what you are going through”

Things I like about Martha’s Mammies...

“Trust (main point). I get on with my support worker. I get support to go to important meetings like children’s panels, permanence meetings and anything involving social work. When I have something bothering me, I know [Practitioner] will be there to support me”

How has Martha’s Mammies helped me...?

“Firstly, I feel I can trust people now. My anxiety had dipped quite a lot and I can open up more”

“I just want to say that I’m very grateful for Martha’s Mammies. I have definitely recommended it to anyone who’s willing to come that maybe is needing support”

Case study 3: young person being supported by Walk and Talk Service

Sarah has been accessing the service for a while now. She was extremely socially anxious and found meeting new people a very daunting task. She is now meeting with 2 of our staff members at the same time to improve her ability to socialise. For Sarah this was a big challenge but something she reported as beneficial to her. With the staff member she is working towards, and looking forward to, attending one of our group settings. Sarah expressed that Walk & Talk “has done more to help her than any other service she has accessed.”

Appendix 2

Over the last four years, there has been a reduction of 3.1% in attendance across primary schools in Glasgow City, and a reduction of 2.3% in secondary schools (see Table 1).

Table 1: Percentage attendance in primary and secondary schools in Glasgow City from 2019 to 2022

	Primary Schools	Secondary Schools
2019 - 20	93.2	90.1
2020 – 21	93.0	90.7
2021 – 22	90.1	87.8

The rate for pupils living in the most deprived SIMD Decile 1 is lower, at 89.1% across primary schools and 86.4% for secondary pupils.

In terms of educational attainment, Klein, Sosu and Lillywhite (2022) have suggested that for 4th Year pupils sitting National 4 and 5 exams across Scotland, “[a] one percentage point increase in days absent was associated with a decrease of 3% of a standard deviation in tariff scores.” This is essentially a 3% decrease in educational attainment. The researchers also reported that different types of absence impacted attainment, for example, for sickness or truancy absence, a 1% point increase translated into a 4% standard deviation in academic achievement; for family holidays, a 1% point increase translated into a 3% standard deviation in academic achievement; and exceptional domestic circumstances were associated with a drop of 2% standard deviation in academic achievement.

Reference

Klein, M., Sosu, E., & Lillywhite, E. (2022). School absenteeism and educational attainment-Evidence from the Scottish Longitudinal Study.