

The Promise: Plan 21-24 Evaluation

Report by The Diffley Partnership
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From many voices to smart choices



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Introduction

[Plan 21-24](#) marks the initial phase of Scotland's ambitious endeavour to keep its promise to children and young people within the 'care system', as well as those on the edges of care, ensuring they grow up loved, safe and respected. Originally structured as three consecutive three-year plans, subsequent adjustments amalgamated the latter two into a unified six-year route map, [Plan 24-30](#).

The framework for Plan 21-24 delineates five core priority areas—A good childhood, Whole family support, Planning, Supporting the workforce, and Building Capacity—comprising of 25 specific actions intended for completion by 2024.

Central to the plan are five foundational principles—What matters to children and families, Listening, Poverty, Children's Rights, and Language—which align with the conclusions and fundamentals of the promise.

To critically evaluate progress and assess the effectiveness of these strategies, The Promise Scotland commissioned an independent evaluation by Diffley Partnership. This evaluation scrutinises not only the outcomes achieved within the 'care system' but also explores the development, implementation, and monitoring of Plan 21-24 amidst socio-political and economic challenges impacting Scotland's ability to meet its commitments within the stipulated timeframe.

Methodologically, the evaluation combines an extensive evidence review of evaluations, reports, and data related to Plan 21-24 with qualitative stakeholder interviews. The evidence review examines trends over the past three years to ascertain impacts and outcomes, while stakeholder interviews gather insights on progress, challenges, and factors influencing implementation. By synthesising these findings, this report aims to provide a comprehensive assessment of Scotland's progress towards meeting the conclusions of [the Independent Care Review](#), highlighting successes, identifying challenges, and proposing strategic recommendations for future implementation.

Background and Methodology

Background

In February 2020, the [Independent Care Review published seven reports](#), including [the promise](#), following a root and branch review of Scotland's 'care system'. It was informed by the views and experiences of over 5,500 care-experienced children, young people, adults, families and members of the unpaid and paid workforce. The Independent Care Review concluded the current 'care system' is failing to provide the foundation of safe, strong and loving relationships for far too many children. It was clear that Scotland must care in a way that gives children every possible chance to experience love in their lives. The conclusions of the Independent Care Review were accepted across the political spectrum and Scotland made a promise that all care experienced children and young people would grow up safe, loved and respected by 2030.

The promise aims to transform Scotland's 'care system' into one that is more caring and collaborative, centred on the experiences, views, and voices of children and young people. This transformation focuses on providing high-quality, trauma-informed, and compassionate care, improving holistic outcomes, and ensuring that children's voices are heard, and their rights protected.

[Plan 21-24](#) was the first in a series of three comprehensive 3-year plans (the last two of which have since been combined into one 6-year plan) outlining the changes that need to be implemented for Scotland to "Keep the Promise". The plan was organised into 5 priority areas: A good childhood, Whole family support, Planning, Supporting the workforce and building capacity. These were split into a number of actions – 25 in total – each of which were to be fulfilled by 2024.

Additionally, the Plan was designed with 5 underlying fundamentals which were to guide all of the work going into keeping the promise: What matters to children and families, Listening, Poverty, Children's Rights and Language.

To assess progress under Plan 21-24 according to the indicators, actions and priority areas set out in the document, The Promise Scotland commissioned Diffley Partnership to undertake an independent evaluation of the Plan. In addition to evaluating the Plan's outcomes on the 'care system', this research intends to identify strengths and weaknesses of different aspects of Plan 21-

24, such as its development, implementation and monitoring. It also examines how various socio-political and economic circumstances have impacted Scotland's ability to meet the aims of the Plan in the allotted time period.

Methodology

Diffley Partnership was commissioned by The Promise Scotland to carry out a comprehensive evaluation of the progress made towards the actions outlined in Plan 21-24. Our approach combined both an evidence review and stakeholder interviews to provide a robust assessment of the implementation of these actions, ensuring that the evaluation process was thorough and systematic.

Evidence Review

At the core of this evaluation was an extensive evidence review. This process involved the collection, analysis, and synthesis of a wide range of secondary data sources. These sources included published and unpublished evaluation reports, academic research papers, grey literature, policy documents, and official statistics that were pertinent to the implementation of Plan 21-24. By conducting this desk-based research, we aimed to gain a holistic understanding of the progress that has been made, along with identifying potential gaps and areas for improvement.

We have conducted an extensive evidence review focusing on evaluations, research reports, and data related to the implementation of Plan 21-24. This desk-based research included analysing this evidence to assess the progress towards achieving the goals of Plan 21-24, reviewing trends in data over the past three years, and integrating qualitative and quantitative data sources. We systematically documented findings in an Excel matrix to ensure methodological rigour and to minimise bias.

The evidence review was conducted in several key stages:

1. **Identification of Relevant Sources:** Initially, a broad search strategy was employed to identify relevant literature and data sources that are directly related to the aims and objectives of *Plan 21-24*. This included reviewing databases, governmental reports, policy papers, and independent evaluations published within the period of the plan. We also focused on capturing emerging trends and insights from relevant official statistics from the past three years to align with the timeline of the plan.

2. **Systematic Analysis of Documents and Data:** Once relevant sources were identified, we proceeded with a detailed analysis of the content. Each document was systematically reviewed to extract information on the key themes, progress markers, and outcomes related to *Plan 21-24*. This included assessing how different actions outlined in the plan were demonstrated in the literature, identifying the extent of progress, and noting any barriers or challenges encountered along the way.
3. **Matrix Documentation:** To ensure methodological rigor and consistency in the analysis, we employed a systematic documentation process using an Excel-based matrix. This matrix enabled us to categorise, synthesise, and cross-reference the findings from various sources, ensuring that all information was captured in a structured and unbiased manner. This approach also facilitated the identification of common themes, indicators of progress and discrepancies across different data points.

Qualitative Stakeholder Engagement

In addition to the evidence review, we conducted a series of qualitative interviews with key stakeholders. These interviews were designed to gather insights from individuals and organisations directly involved in or impacted by the delivery of *Plan 21-24*. Stakeholder interviews were essential to complement and contextualise the findings from the evidence review, offering a more nuanced understanding of the complexities involved in the implementation process.

1. **Stakeholder Selection:** We identified 10 key organisations that are central to the delivery and monitoring of *Plan 21-24*. These organisations were selected based on their roles and interests to different aspects of the plan, ensuring a diverse range of perspectives. Interviewees included representatives from government bodies, non-governmental organisations, service providers, advocacy groups, and academic experts. The selection of these stakeholders was purposive, ensuring that a range of experiences and expertise was captured.
2. **Interview Design:** The interviews were semi-structured, allowing for both consistency across interviews and the flexibility to explore specific topics in greater depth where necessary. The interview guide was developed in collaboration with *The Promise Scotland* to ensure alignment with the plan's objectives. It focused on key areas such as stakeholders' perceptions of progress towards *Plan 21-24* goals, the challenges and barriers they faced, the factors that have facilitated or hindered implementation, and the broader impact of these actions on children, young people, and families.

3. **Data Collection:** Interviews were conducted virtually, with participants' consent, and lasted between 45 minutes to an hour. Interview recordings were transcribed verbatim to ensure the accuracy of the data and then coded for analysis.
4. **Thematic Analysis:** Following the coding process, we conducted a detailed thematic analysis of the interview data. This involved identifying common themes and insights, such as the effectiveness of specific interventions, gaps in service provision, and opportunities for future improvement. The analysis was used to triangulate findings from the evidence review and to uncover new insights that may not have been captured in the existing literature or data.
5. **Integration with Evidence Review:** Finally, the findings from the stakeholder interviews were synthesised with the results of the evidence review to form a comprehensive evaluation of progress. The integration of these two data sources provided a richer, more complete understanding of the implementation of *Plan 21-24*, highlighting both successes and areas for improvement.

Limitations

Despite the strengths of the methodology, there are some limitations that should be acknowledged:

- **Scope of Evidence:** The reliance on desk-based research means that we were dependent on the availability and quality of existing data, which may not always fully capture recent or emerging developments. While the evidence review was comprehensive, gaps in publicly available data might have limited the depth of analysis in some areas.
- **Stakeholder Sample:** Although qualitative interviews provided valuable insights, the relatively small sample size of 10 stakeholders may not fully represent the diversity of all those involved in the delivery of *Plan 21-24*. The stakeholders interviewed were primarily representatives of organisations, meaning that individual experiences, particularly from frontline staff or service users, might not be fully reflected.
- **Absence of Direct Voices of young people with lived experience:** Importantly, we did not conduct any interviews with children or young people currently in the care system or with lived experience of care. Although secondary sources and stakeholder interviews provided some insights into their experiences, direct engagement with children and young was not requested to be carried out as part of this commission.

Presentation and Interpretation of Findings

This report first presents an overview of the reflections of stakeholders who took part in interviews as part of this evaluation. The report then takes each priority area in turn, assessing the extent of progress on each action which makes up the priority area.

Each section then provides a summary of the results of the analysis of evidence in relation to each action.

Please note that where the term 'Looked after' is used, this is in relation to datasets and legislation where this is the terminology used.

Overview of Progress

The Promise Plan 21–24, integral to the broader work to keep the promise across Scotland, underscores Scotland's commitment to improving the lives of children, young people, adults and families with experience or contact with the 'care system' and to investing in early help and support for families.

Stakeholders interviewed acknowledged this commitment, but concerns were raised regarding the plan's effectiveness due to its broad scope, lack of measurable success indicators, and inclusion of some seemingly unattainable goals. Notably, several objectives set for 2024 remain unmet, highlighting the need for renewed efforts to achieve targets by 2030.

Despite these challenges, there have been significant achievements linked to the Plan over the course of Plan 21–24 driven by shared desire to Keep the Promise.

Progress includes heightened awareness of children's voices and participation, key legislative changes, and some evidence of alignment of local authority plans with the priorities identified in the promise. The promise is widely viewed as a vital driver for change, essential for realising Scotland's vision for child protection, care and support. Addressing existing challenges and mapping out a clear path to achieve the aims of the promise by 2030 is crucial.

Key Achievements

Efforts to increase participation in decision-making and raise awareness of the importance of listening to children and families have led to greater instances of children and families' voices being heard in decisions that affect them. [Enhanced collaboration](#) among public, private, and voluntary-sector organisations has resulted in notable changes. These include language transformation in care settings, reductions in school exclusions, changes in the practices and language around the use of restraint, and significant legislative reforms.

Despite implementation challenges, there has been a robust commitment to the promise, evidenced by leadership capacity building, trauma-informed practices, anti-poverty measures, and improvements in family support. Significant progress has been made in priority areas such as education, legislation, language, and planned reforms in the Children's Hearings System. The

Scottish Parliament has also enacted several key legislative measures, which have resulted in advances to meet the conclusions of the promise such as the [United Nations Convention on the Rights of the Child \(Incorporation\) \(Scotland\) Act](#) and the [Children \(Care and Justice\) \(Scotland\) Act](#).

Systemic challenges to keeping the promise

Challenges in resource allocation, particularly in maintaining adequate funding for local authorities, have impacted the effectiveness of work to deliver the promise. Sustained financial support across the sector is critical. Additionally, there are ongoing difficulties in collecting, analysing, and monitoring data around outcomes for children and families engaged in the care system; [data collected tend to be disconnected from the experience of individuals surrounding the care system](#), necessitating clear metrics for measuring impact. This presents a challenge in assessing the extent of progress towards the commitments set out in Plan 21-24.

Addressing workforce support and retention is imperative, as current asks of Plan 21-24 are seen to impose additional responsibilities on an already stretched workforce. Better communication and collaborative working between services in and around the care system and comprehensive community-based support are essential for improving outcomes for children and families. Robust evaluation mechanisms, clear accountability frameworks, and a detailed route map with tangible actions and deadlines are necessary for driving effective change.

Efforts should also focus on addressing systemic issues such as poverty, the cost of living crisis, and the lingering effects of COVID-19, which pose significant challenges to meeting conclusions of the Independent Care Review. Systemic change and policy coherence are crucial for addressing root causes effectively, requiring the development of coherent policies, necessary legislative changes, and simplified governance structures. Increased financial transparency and careful fund allocation and considerations in terms of commissioning, procurement and longer-term funding are critical to ensure the conclusions of the promise are met.

Summary of key findings

Several headline findings from the assessment of The Promise Scotland's Plan 21-24 and its implementation outcomes are outlined here. Moving forward, emphasising these points could strengthen the impact of efforts across actors towards ensuring the promise is kept by 2030:

1. The Importance of Implementing Measurable Success Indicators and Data Practices:

Stakeholders expressed a desire for clear and measurable success indicators aligned with each action in Plan 24-30. It was suggested this would facilitate effective monitoring and evaluation, allowing stakeholders to track progress more accurately and make informed adjustments as needed. Additionally, standardising regular reporting against these indicators across all implementing bodies would ensure transparency and accountability. The evidence also indicates that capabilities in collecting, analysing, and monitoring data related to outcomes for children and families could be enhanced moving forward. This would provide a more robust evidence base for decision-making, facilitate benchmarking against targets, and identify areas requiring additional intervention or adjustment. Therefore, [The Promise Progress Framework](#) has the potential to improve the measurement of progress against the promise.

2. A Need for Strengthened Workforce Support and Integration: Evidence and stakeholder interviews highlighted a need for strategies to support workforce recruitment and retention, without adding to already significant workloads. This could be achieved through targeted training programmes, enhanced career development opportunities, and improved support mechanisms for frontline workers. Fostering joint working across services - by promoting interdisciplinary collaboration and establishing clear communication channels between agencies involved in child protection, care and support - was also emphasised as a necessity.

3. The Importance of Addressing External Influences: Recognising and understanding how systemic issues such as poverty, the cost-of-living crisis, and post-pandemic challenges impact what can be achieved under the promise's objectives is paramount to developing an achievable plan and must be accounted for when assessing Plan 24-30. Those involved in delivering the promise should advocate for policy and changes to governance structures

by fostering cross-sector partnerships to leverage resources and expertise to effectively address these where possible.

- 4. The Value of Regularly Monitoring Progress Throughout Plan 24-30:** This assessment of Plan 21-24 demonstrates the importance of ongoing monitoring. Given that Plan 24-30 will be the final plan upon which the commitment to Keep The Promise will be judged, there is a need for regular independent analysis throughout the lifetime of this plan to ensure that there is sufficient information and monitoring to be able to address known issues before the life of the plan ends.

These key findings summarise the actions which are essential for realising the broader vision of the promise and ensuring that Scotland remains committed to creating a supportive and nurturing environment for all children and young people. They also indicate how Scotland can best build upon the achievements of Plan 21-24, address existing challenges, and pave the way for sustained improvements in the lives of children, adults and families in care and on the edges of care.

Overview from Stakeholder Interviews

Stakeholders offered varied perspectives on Plan 21-24's clarity and effectiveness in delineating objectives and guiding structural reforms. While some lauded its ambition and role in catalysing necessary shifts across workforce, resourcing, and structural challenges, criticisms centred on its high-level approach, broad nature of its aims and the absence of specific, measurable outcomes and an evaluation framework from the outset.

"It's difficult to evaluate the success of a plan or evaluate a plan without any success measures or all success measures within it... So there's some things, very clear local decision, local delivery, other things at a national level like ending homelessness, a local authority is not going to be able to do that on its own."

"There was too much in it... too many unquantifiable statements and too many sort of priorities within it that were not fully considered or fully engaged or fully worked through."

Despite these challenges, Plan 21-24 achieved some successes in the eyes of stakeholders. Some interviewees felt the Plan had prompted some progress by aligning stakeholders around some common priorities and catalysed some collaboration across organisations. Additional achievements cited by stakeholders include changes in language around care, reductions in school exclusions and notable reforms, such as to the children's hearing system.

Critical challenges highlighted in the interviews included resource constraints, particularly in local authority budgets and workforce support. Stakeholders consistently emphasised the strain on core resources and insufficient funding, which hindered sustained progress aligned with Plan 21-24's objectives.

Workforce issues, such as retention problems and inadequate training, were also identified as major barriers demanding urgent attention.

"Our workforce lacks the resources needed to effectively deliver on the promise. We struggle with retention and training, which undermines our ability to provide consistent, quality care."

Effective stakeholder engagement emerged as crucial for the successful implementation of Plan 21-24. There was strong consensus among interviewees on the need for more inclusive planning processes that actively involve care experienced individuals, frontline workers, and communities. Clearer communication strategies and robust accountability frameworks were emphasised to enhance transparency, build trust, and ensure all stakeholders remain accountable for delivering on the conclusions of the Independent Care Review. Some participants urged The Promise Scotland to lean into its role as a potential convenor to mobilise organisations and provide greater direction, leveraging the organisation's political capital and will to deliver the promise.

A recurring theme across interviews was the imperative need for comprehensive evaluation mechanisms in any future plans which were seen by some to be absent at the outset of Plan 21-24. Interviewees stressed the importance of ongoing evaluation to measure impact, clarify responsibilities, and adapt strategies in response to evolving needs and challenges.

"Evaluation is critical to understanding what works and what doesn't. It's imperative that we refine our approach to ensure lasting improvements in our 'care system'."

Looking ahead, stakeholders highlighted the necessity to streamline legislative frameworks, enhance workforce development strategies, and align policies more effectively to sustain momentum beyond the initial plan period.

Yet throughout, stakeholders underscored a collective commitment to overcoming these obstacles and advancing towards a more inclusive, effective 'care system' that prioritises the needs and voices of vulnerable children and families across Scotland.

In conclusion, while Plan 21-24 has marked significant progress in Scotland's 'care system', formidable challenges lie ahead, all of which require concerted efforts from all stakeholders. Clearer objectives, enhanced resource allocation, improved workforce support, and robust evaluation frameworks are essential to navigate complexities and sustain transformative changes in the lives of children, families and care experienced adults across Scotland. The interviews reflected on both achievements and areas requiring urgent attention, reflecting ongoing efforts to build a more responsive and supportive 'care system'.

Priority Area 1: A Good Childhood

Overview

Priority Area 1 of Plan 21–24 is ‘A Good Childhood’. This area seeks to ensure every child in Scotland grows up loved, safe and respected so they can realise their full potential. This includes providing stable and nurturing care, focusing on the child’s rights, and maintaining their relationships with family and friends.

Priority Area 1 contains 8 actions, namely:

- Support
- A right to an education
- Relationships
- Brothers and Sisters
- Youth Justice
- Advocacy
- Moving on
- Physical Intervention

These actions are assessed in this section, summarising conclusions from the analysis of evidence and stakeholder interviews on each.

Support

- *Every child that is ‘in care’ in Scotland will have access to intensive support that ensures their educational and health needs are fully met.*
- *Local Authorities and Health Boards will take active responsibility towards care experienced children and young people, whatever their setting of care, so they have what they need to thrive*

see the promise, pages 51 and 89

There have been steps in expanding support services tailored to the needs of care experienced children, aiming to enhance their overall wellbeing and stability. Progress can be observed in the development of targeted help and support aimed at promoting resilience and improving outcomes for care experienced children and young people such as support for further education. These efforts demonstrate a commitment to providing comprehensive support that addresses both immediate needs and long-term development.

However, challenges remain, particularly in ensuring equitable access to support across all regions and addressing gaps in service provision for specific demographics within the care experienced population. The availability of consistent funding and resources also impacts the sustainability and effectiveness of available and appropriate help.

The [*"Children's services reform research: Scotland's children's services landscape: The views and experiences of the children's services workforce."*](#) conducted by the Centre for Excellence for Children's Care and Protection (CELCIS) gathered insights from over 1,400 members of the workforce through a survey, focus groups, and interviews. Participants included professionals from social work, health, education, early learning and childcare, police, and voluntary sector services, representing all local authority areas in Scotland. The combination of extensive responses and detailed insights provides a robust evidence base to assess Scotland's children's services landscape from the workforce's perspective.

Two relevant findings to the action relating to support services in Plan 21–24 emerged prominently from the data gathered by CELCIS. First, the quality of practice within local services was rated highly, with 74% of respondents considering it to be 'very good' or 'good'. Second, the time it takes for children, young people, and families to access necessary services was a significant concern, with 56% of respondents rating it as 'poor' or 'very poor'. These findings highlight strengths in service quality but also significant challenges in service accessibility.

The most recent data on [Child and Adolescent Mental Health Services \(CAMHS\)](#) waiting times to the quarter ending March 2024 shows that 86.0% of children and young people were seen within 18 weeks of referral, which is an increase from 83.8% for the previous quarter and from the 74.2% for the same quarter ending March 2023. The Scottish Government standard states that 90% of

children and young people should start treatment within 18 weeks of referral to CAMHS. It does, however, have to be noted that significant number of children are inappropriately referred to CAMHS in the absence of other help and support services.

When considering support for unaccompanied asylum-seeking children to be treated as 'looked after' children, we see evidence from [Glasgow's Virtual School](#) whereby they have worked in partnership with the Volunteer Tutor Organisation to develop a successful tutoring intervention for unaccompanied asylum-seeking children,

[Social Work Scotland also noted in their response to Plan 24-30](#) that they have been working closely with Scottish Government, Cosla and other partners to progress key area of development including co-leading roundtable events to address the foster care crisis, fostering partnerships between national and local governments and third sectors to improve foster carers' status and support, jointly chairing the Kinship Care Collaborative to support kinship carers, including updating guidance and developing an assessment framework., participating in the Staying Together and Connected Implementation Group to advance sibling support and addressed standards affecting sibling placements and working on policies for unaccompanied asylum-seeking children and children from Ukraine to ensure equitable access and cultural acknowledgment.

Overall, according to this research, there has been moderate progress towards achieving this action, with significant actions having been taken. Scotland has made steps in expanding support services for care experienced children, however ongoing efforts are essential to address remaining gaps, enhance service accessibility, and ensure that all children receive the support they need to thrive.

A Right to an Education

- *Care experienced children and young people will receive all they need to thrive at school. There will be no barriers to their engagement with education and schools will know and cherish their care experienced pupils.*
- *School improvement plans will value and recognise the needs of their care experienced pupils with robust tracking of attendance and attainment so that support can be given early.*
- *Care experienced young people will be actively participating in all subjects and extra-curricular activities in schools.*
- *The formal and informal exclusion of care experienced children from education will end.*
- *Schools will support and ensure care experienced young people go on to genuinely positive destinations, such as further education or employment*

see the promise, pages 71 to 72

Scotland has made significant strides in advancing the right to education for care experienced children, aiming to provide equitable access and support. Efforts have included the implementation of specific help and support aimed at improving educational outcomes. These aim to reduce the attainment gap between care experienced children and their peers, which historically has been a significant challenge.

The progress can be seen in the development of support mechanisms to enhance post-school destinations and clarify the responsibilities of educational institutions and caregivers. This reflects a proactive approach to ensuring that care experienced young people have the necessary resources and guidance to navigate their further educational journey successfully.

For example, in 2019 the Scottish Government and all 18 universities and higher education institutions agreed to guarantee offers to care experienced applicants who met the minimum entry requirements for any course they applied for via the [Guaranteed Offer](#). In addition to this, the [Care Experienced Bursary](#) was launched in 2019 which provides support for anyone who has ever been

looked after by a local authority in the UK before turning 18, in a foster home, children's home, a List D school, a Borstal or close support unit.

The funding package is worth up to £11,400 and includes tuition fees, a non-income assessed Care Experienced Students Bursary of £9,000 and a non-income assessed student loan of £2,400. From 2024-25, care experienced students will also be able to apply for a [Special Support Loan](#) worth £2,400.

Since 2015/16 the number of care experienced students studying for an undergraduate degree at a Scottish university has grown from [445 \(0.5 per cent of all undergraduates\) to 1,685 \(1.9 per cent\)](#) in 2020/21, an increase of almost 280 per cent.

According to the [Renewing the Alliance for Fair Access Annual Report 2024](#) from the Commissioner for Fair Access, progress has been made in increasing the number and proportion of entrants to Higher Education with care experience from the Commission for Widening Access (CoWA) Core Target group. The number of care experienced entrants who are from SIMD1 areas has increased from 25 in 2013-14 to 145 in 2021-22 and the proportion of care experienced entrants who are from SIMD1 areas has increased from 16.2% in 2013-14 to 26.5% in 2021-22. However, the relative share of care experienced entrants from SIMD1 areas fell between 2020-21 and 2021-22 (from 32% to 26.5%), as the number of care experienced entrants from SIMD1 areas fell from 155 to 145.

There are specific options for help and support aimed at helping care experienced young people in education. For example, The [Enhanced Learning Tutoring Initiative \(ELTI\)](#) at Queen Margaret University was set up during Covid-19. It is a high school tutoring programme aimed at responding to the educational challenges faced by disadvantaged and care experienced young people by providing tutoring sessions to eligible S4-S6 pupils in East Lothian and Midlothian. Over 300 pupils take part each year.

There is also the [Hub for Success](#) which is a partnership organisation that supports care experienced students to get in, stay in, and return to college or university. They bring together the City of Edinburgh Council and the colleges and universities of the Edinburgh and Lothians. They

offer bespoke one-to-one information, advice and support for care experienced learners who are in or thinking of applying to our partner institutions.

Despite these efforts, challenges remain in achieving consistent outcomes across all regions. Variability in the implementation of support frameworks and the effectiveness of partnership working between educational institutions and health and social care services pose ongoing obstacles. Data transparency and the monitoring of educational attainment also require improvement to accurately assess progress and target help and support effectively.

Scottish Government statistics on school exclusions show that in [2018-19 there were 884 children who were 'looked after' excluded, compared to 618 in 2022-23](#).

[The Promise Report Card 2020-2024](#) by Who Cares? Scotland reveals significant issues and some progress regarding the exclusion of care experienced children from education in Scotland. Despite a commitment to ending these exclusions, their research shows that 23 local authorities still formally and informally exclude care experienced pupils, often reducing their school hours drastically without official documentation. This practice perpetuates educational disadvantage, leading to poorer outcomes for these pupils. A notable positive development is that one local authority has stopped excluding care experienced pupils, with two others planning to follow suit. However, the lack of comprehensive data and concrete target dates from most local authorities hinders effective monitoring and progress toward the promise's goals.

The report highlights the impact of various absences on care experienced pupils, contributing to their lower educational attainment and earlier school leaving compared to their peers. These absences often stem from required meetings with social workers and attendance at Children's Hearings, exacerbating the challenges faced by these pupils. It should be noted, the Children's Hearings System is testing [child-friendly scheduling](#), allowing children to choose the date, time and location of their hearing, which could help combat these attendance inequalities.

The introduction and expansion of [Virtual School Head Teachers since 2018](#) have shown positive effects by addressing part-time timetabling issues, facilitating support services, and combating discrimination within schools. Despite these efforts, the continued interruptions and exclusions signify that Scotland is not yet meeting the educational commitments for care experienced pupils

set out in the promise, indicating a need for more decisive and coordinated action across all local authorities. Additionally, equitable access to community resources such as [extracurricular activities](#) remains a challenge due to a lack of affordable options.

Overall, while there has been substantial progress in recognising and addressing the educational needs of care experienced children in Scotland, sustained efforts are needed to achieve universal improvements and ensure that all children have equal access to quality education and support services.

Relationships

- *All children living in and around Scotland's 'care system' will be maintaining safe, loving relationships that are important to them.*
- *There will be no barriers to 'contact' and children will be supported to have time with people they care about.*

see the promise, page 63

The assessment of relationships for care experienced children reflects on the critical importance of maintaining stable and supportive connections with significant others. Scotland has taken commendable steps towards supporting these relationships, emphasising the importance of maintaining bonds with siblings and other family members wherever possible.

Progress is evident in efforts and policies aimed at reducing barriers to maintaining relationships, such as moving children long-distances and communication challenges. For example, following the [Care Inspectorate's work exploring distance placements](#) and their impacts, they made recommendations including only accepting distance placements if providers can ensure children are able to have direct contact with their families, friends and people important to them.

However, [challenges persist](#), particularly concerning resource limitations and disparities in access to [digital communication tools](#). This is particularly true for [families in poverty](#); parents have cited additional emotional and financial stress due to travel requirements and expectations to bring gifts to visits. These factors can hinder the stability and safety of relationships for care experienced

children, impacting their emotional well-being and overall development. For example, a lack of positive relationship with an adult was identified as [a major risk factor for child criminal exploitation](#).

While there has been moderate progress on this area across Scotland according to this research, the extent of progress varies across regions, with some areas demonstrating robust support frameworks while others lag behind in consistency and accessibility. Addressing these disparities and ensuring equitable access to meaningful relationships remains a priority to safeguard the rights and well-being of all care experienced children in Scotland.

Brothers and Sisters

- *Scotland will stop the practice of separating brothers and sisters, unless for reasons of safety.*
- *Relationships between brothers and sisters will be cherished and protected across decision making and through the culture and values of the people who care for them*

see the promise, page 62

Scotland has made some progress in prioritising the preservation of sibling relationships among care experienced children, aiming to prevent unnecessary separations except where safety concerns dictate otherwise. The number of brothers and sisters separated reduced. In November 2023, at an evidence session of the Education, Children and Young People Committee of the Scottish Parliament the number of sibling groups separated in care settings was cited as [25%](#).

Local councils and health boards in Scotland are responsible for implementing care and protection measures, including ensuring the legal entitlements of siblings under the [Children \(Scotland\) Act 2020](#). This legislation mandates that local authorities promote personal relationships and direct contact between children and their siblings or those in sibling-like relationships. However, many local authorities struggle to provide accurate data on whether siblings are living together or the reasons for their separation. This issue is exacerbated by the broad definition of 'sibling,' which includes half-siblings, adult siblings, those with different surnames, and sibling-like relationships. Research with 70 infants who became looked after away from home between April 2018 and

March 2019 by the Scottish Children's Reporter Administration (SCRA) revealed that [only one in five infants \(12\) who were looked after away from home were placed with their siblings](#). This figure increased to 17 infants just two years later, although this still represented less than a third of those known to have at least one sibling.

The Staying Together and Connected National Implementation Group (STAC), chaired by the Scottish Government and CELCIS, is working to support the implementation of sibling connection and cohabitation, with recommendations and a [final report](#) published in Summer 2023. The group's efforts include improving data collection and monitoring, critical for fostering arrangements that enable siblings to stay together. Despite challenges in recruiting foster carers and a decline in foster care households, the number of family groups separated in foster care has not worsened since 2017, likely due to increased focus on keeping siblings together.

To address the ongoing challenges, local authorities have introduced staff training on legislative changes and the importance of sibling relationships. Efforts are underway to increase the availability of homes where siblings can stay together, recruit more foster carers and adoptive parents for sibling groups, and support families to stay together.

Some progress can be seen in advocacy efforts, guidance developed for practitioners and legislative changes aimed at embedding sibling rights within the decision-making processes of care services. These developments, including actions such as the Promise Partnership funded Association for Fostering, Kinship and Adoption's [evaluation of the Siblings Reunited \(STAR\) service](#) in 2022-2023, reflect a commitment to recognising and upholding the importance of sibling relationships in the lives of care experienced children.

The work taking place towards implementing the conclusions of the Independent Care Review and enacting the sibling legislation has meant that more conversations are taking place between children and their social workers around their sibling relationships. They are also now being consistently asked about these within Children's Hearings and as of January 2023, siblings can [apply for legal aid](#) to participate in their brother or sister's Children's Hearings, increasing the likelihood of them maintaining a meaningful relationship. There is, however, still a lack of consistency in terms of the information which is provided on supporting brothers and sisters' relationships prior to a Children's Hearing.

However, challenges remain, particularly concerning data recording and consistency in practice. Variations in decision-making processes and the interpretation of sibling rights highlight the need for clearer guidelines to ensure that all siblings receive equitable support.

Overall, according to this research, while Scotland has made substantial progress in promoting sibling relationships for care experienced children, ongoing efforts are essential to address remaining challenges and ensure that, when safe and appropriate, sibling bonds are consistently protected and prioritised within the 'care system'.

Youth Justice

- *The disproportionate criminalisation of care experienced children and young people will end.*
- *16- and 17-year-olds will no longer be placed in Young Offenders Institutes for sentence or on remand.*
- *There will be sufficient community-based alternatives so that detention is a last resort.*
- *Children who do need to have their liberty restricted will be cared for in small, secure, safe, trauma-informed environments that uphold their rights*

see the promise, pages 89 to 91

Scotland's approach to youth justice for children in conflict with the law aims to emphasise preventative measures and community-based alternatives to detention, reflecting a commitment to reducing the disproportionate criminalisation of care experienced young people. Legislative changes, such as those enacted through the [Children \(Care and Justice\) \(Scotland\) Act 2024](#), will increase access to the Children's Hearings System for 16- and 17-year-olds. It will also ensure no child is held in a Young Offenders Institution.

According to [Scottish Prison Service data](#), there were 7 children in custody aged 16-17 compared to 19 on 4 June 2021 and 49 on 9 June 2017.

Progress is evident in policies and programmes such as the [Whole System Approach](#) to young offending, which promote child-friendly practices and trauma-informed approaches within the justice system aiming to address the underlying factors contributing to children coming into conflict with the law. For instance, investment in the [Bairns' Hoose model](#) to provide children in the justice system with therapeutic and trauma-informed support; currently, only one Bairns' Hoose is operational in Scotland, with a scope limited to child victims and witnesses, although there are plans to expand this approach. Other child-friendly and trauma-informed approaches include Evidence by Commissioner facilities, which allow vulnerable witnesses to give evidence away from the courtroom. The Scottish Government [has recently announced plans](#) to expand these facilities, meaning that suites will be available throughout Scotland by April 2026.

The establishment of the Glasgow Youth Court is another example of a programme that demonstrates a significant development for 16–24 year olds who come into conflict with the law; however, [evaluation of this programme](#) notes areas of improvement, including in the information provided to young people appearing in Youth Courts, in the layout of the court itself, and in the language used in the courtroom, to better reflect the rights of young people.

CELCIS research on children's services reform identified data trends which suggest a decrease in the number of children involved in youth justice processes or referred to the Children's Reporter on offence grounds and fewer children and young people aged 12 to 20 having a criminal case brought against them during the COVID-19 pandemic, indicating some positive impacts of help and support.

However, challenges persist in achieving consistent implementation of the measures, policies and programmes discussed above across regions, making it difficult to ensure the rights of care experienced young people are upheld, such as the right to not [be punished in a cruel or unnecessary way](#), throughout the justice process. [Disparities in sentencing outcomes](#) and access to supportive services highlight ongoing systemic issues that require sustained attention.

Overall, while Scotland has made substantial progress towards improving youth justice outcomes for children in conflict with the law, continued efforts are needed to achieve equitable and rights-based outcomes within the justice system, ensuring that all young people receive appropriate help and support.

Advocacy

- *All care experienced children and their families will have access to independent advocacy at all stages of their experience of care.*
- *Advocacy provision will follow the principles set out in the promise.*
- *Care experienced children and young people will be able to easily access child centred legal advice and representation.*

see the promise, pages 114 to 116

In terms of advocacy, the Scottish Government's ambition to develop a lifelong advocacy service for those who are care experienced is clear. The Scottish Independent Advocacy Alliance defines [independent advocacy](#) to be 'about speaking up for, and standing alongside individuals or groups, and not being influenced by the views of others. Fundamentally, it is about everyone having the right to a voice.'

The promise states, "care experienced children and adults must have the right and access to independent advocacy, at all stages of their experience of care and beyond." The Hearings System Working Group Redesign Report, Hearings for Children, was produced in response to the promise's conclusion that the underlying structures of the Children's Hearings System should be redesigned so that they are better placed to listen to children and families. The [Redesign Report](#) recommended the extension of advocacy including to children and families 'on the edges of care' or working voluntarily alongside local authorities.

The Scottish Government committed to supporting The Promise Scotland to scope a national lifelong advocacy service for care experienced people and their families (['national lifelong advocacy service'](#)) and has started consultation on this.

In December 2023, The Promise Scotland published a paper entitled [Scoping and delivering a national lifelong advocacy service for care experienced children, adults and families](#). This paper scopes the core issues and identifies the core principles that should underpin a national lifelong advocacy service. It sets out a path towards delivery, identifying how it should be operationalised and what can be done to realise the conclusions of the promise with respect to advocacy and

upholding the rights of care experienced children, adults and families. This paper was shared with the Scottish Government, who are currently considering next steps.

Who Cares? Scotland set up their [helpline](#) for Care Experienced people in 2020 in response to the Covid- 19 pandemic. It has since evolved to be the National Advocacy Helpline which is an advocacy service which provides support to care experienced people of all ages. Since its launch, it has taken over 3,500 calls.

However, challenges persist, including disparities in advocacy provision across local authorities and high demand for advocacy related to complex legal and financial issues. For example, whilst the [My Rights, My Say](#) service has been highlighted as creating opportunity for young people to participate in decisions which affect them, particularly related to education, Partners in Advocacy found insufficient capacity for demand, with a persistent [waiting list of at least 30 people](#) at a time, as well as age restrictions regarding who can access the service. Additionally, Research by Who Cares? Scotland found that [out of 29 local authorities that responded, 13 said they do not currently provide independent advocacy services for care experienced people at all stages of their lives](#). These disparities can impact the effectiveness of advocacy services and hinder the ability of care experienced individuals to navigate the 'care system' effectively.

Overall, according to this research, while Scotland has substantial progress agreeing that advocacy services for care experienced children and families is vital, ongoing efforts are essential to address accessibility gaps, improve service accessibility, and increase awareness amongst care experienced children and adults about their rights and available support.

Moving On

- *Decisions about transitions for young care experienced people who move onto independent living or need to return to a caring environment, will be made based on individual need.*
- *Each young care experienced adult will experience their transition as consistent, caring, integrated and focussed on their needs, not on 'age of services' criteria.*
- *Housing pathways for care experienced young people will include a range of affordable options that are specifically tailored to their needs and preferences. Youth homelessness will be eradicated.*

see the promise, pages 68 and 92-93

Transition support for care experienced young people moving towards independent living in Scotland remains a complex area with significant progress and ongoing challenges. Efforts to provide comprehensive life skills training and practical support for young adults leaving care reflect positive steps towards ensuring successful transitions. For instance, in 2022, Scottish Government committed to investing up to [£45 million](#) in the ['Young Person's Guarantee'](#) which provides employability skills and employment opportunities to young people who need them. Scottish Government also committed to developing a [School Leavers' Toolkit](#) to provide practical information on topics such as budgeting and finances for young people transitioning into adulthood.

The extent of progress can be seen in initiatives aimed at improving housing transitions and preventing youth homelessness, such as the ['housing first'](#) approach, although challenges in accessing affordable housing options persist. Variability in service quality and gaps in coordination between housing providers and support services highlight systemic issues that impact the stability and wellbeing of care experienced young people during transitions.

In terms of eradicating youth homelessness, the [latest homelessness statistics](#) for Scotland show there were 32,242 homeless households in 2022-23, containing a total of 53,111 people:

36,848 adults and 16,263 children. Compared to the previous year, the number of adults increased by 11% and the number of children increased by 10%, in line with the overall increase of 10% in homeless households.

The 16-24 year old cohort account for some 22% of all homeless households in Scotland, despite equating to just 12% of the population. Over 8,000 homelessness applications were made by young people aged 16-24, with an 11% increase in homeless applications from young people experiencing mental ill-health.

There are also more households than ever in temporary accommodation at 15,036, an increase of 6% from the previous year. The number of children in temporary accommodation is also at a record high at 9,595 as of 31 March 2023, an increase of 9% from the previous year.

There were 1,067 homeless households that contained a household member under 25 that had been looked after by their local authority as a child. This accounts for 5% of all households with a household member under the age of 25. The increase of 10% is in line with overall homeless households.

In addition to being at [higher risk for housing insecurity](#), lack of support during the transition into independent life puts young people at greater [risk of criminal exploitation](#) and coming into conflict with the law. Young care leavers have experience being dismissed when trying to access support from social services, which intensifies the existing barriers to seeking support, such as [stigma](#) around the label of 'care leaver'.

Overall, Scotland has made initial steps towards these actions according to this research. While there are examples of good practice and commitment to supporting transitions, ongoing efforts are needed to address housing disparities, enhance life skills development, and ensure that all care experienced young adults have access to the resources necessary for independent living and long-term success.

Physical Intervention

- *All care experienced children, wherever they live, will be protected from violence and experience the safeguard of equal protection legislation.*
- *Restraint will always be pain free, will be used rarely, and only when required to keep a child safe.*
- *There will be well communicated and understood guidance in place that upholds children's rights and reflects equal protection legislation.*
- *The workforce will feel supported to respond to behaviour in a trauma informed way that reflects a deep understanding of the children in their care.*

see the promise, pages 85 to 86

Scotland's efforts to reduce physical intervention practices for care experienced children reflect a multifaceted approach aimed at promoting safety, dignity, and trauma-informed care within care settings. Efforts to minimise the use of restraint through training, policy development such as the Scottish Government's [guidance for Physical intervention in schools](#) and the [Rethinking Restraint Pilot](#), and culture change within care environments signify progress towards improving safety measures. This includes the proposal of [Calum's Law](#), which would make restraint guidelines in schools legally enforceable, and require training for teachers on de-escalation strategies.

The extent of progress varies across settings, with some institutions demonstrating significant reductions in physical intervention incidents. However, challenges remain concerning data accuracy, inconsistencies in reporting practices, and the need for standardised terminology and guidelines to ensure that physical intervention is eliminated. Along these lines, The Promise Scotland and the Children's Commissioner have called for the Scottish Government to [put in place a coherent statutory framework on restraint and seclusion across all settings in which children are under the care and/or supervision of the State](#).

Overall, while Scotland has made moderate progress in promoting safer care environments for care experienced children according to this research, sustained efforts are essential to address



remaining challenges and ensure that all interactions prioritise the safety, well-being, and dignity of children in care.

Priority Area 2: Whole Family Support

Overview

Priority Area 2 of Plan 21–24 is ‘Whole Family Support’. This area seeks to provide holistic help and support to keep families safely together and, wherever possible, to prevent children from entering the ‘care system’. An emphasis has been placed on prioritising and developing early help and support to address the root causes of family distress and wellbeing needs. Priority Area 2 is comprised of 4 actions, namely:

- Family Support
- Peer and Community Support
- Service Integration
- Family Therapies

The remainder of this section assesses each of these actions, summarising conclusions from the analysis of evidence and stakeholder interviews.

Family Support

- *The 10 principles of intensive family support will be embedded into the practice (planning, commissioning and delivery) of all organisations that support children and their families, directly or indirectly.*

Holistic and relational

- *Therapeutic*
- *Non-stigmatising*
- *Patient and persistent*
- *Underpinned by children’s rights*

- *Community Based*
- *Responsive and timely*
- *Work with family assets*
- *Empowerment and agency*
- *Flexible*

see the promise, pages 57 to 58

According to the [Scottish Government's 'Looked After' Children statistics](#), as of 31 July 2023, 12,206 children were looked after, of whom 20% were placed at home and 80% away from home. This is the lowest this figure has been since 2006.

The number of children looked after has decreased by 2% since 2022 and by 24% since 2013. The majority of looked after children (89%) were placed in community settings. The most common community placements for looked after children were kinship care (34%), foster care (22%), and at home with parents (20%). A smaller proportion of children (11%) were looked after in residential accommodation settings.

Efforts to embed intensive family support principles in Scotland have shown moderate progress. Investments like the [Whole Family Wellbeing Funding](#) demonstrate progress by supporting the transformation of access to early help and support for families aligned with the promise's principles of family support and Scotland's national blueprint.

Addressing adoption breakdowns has also seen some progress, with [reported cases declining](#) since the promise was made, indicating ongoing efforts in this area. However, inconsistent data collection remains a challenge, highlighting the need for better planning and resource allocation to strengthen support services and prevent adoption breakdowns effectively. Supporting parents with mental health needs has shown to have positive impacts on family wellbeing. Attention has been focused on perinatal mental health with funding allocated through community mental health work, parental employability programs, and family support services for life story and trauma recovery. Key initiatives include the [Communities Mental Health and Wellbeing Fund](#), Family Nurse Partnership, Bookbug, Baby Box, and the Universal Health Visiting Pathway. Continued advocacy and policy alignment are necessary to ensure comprehensive support for families facing mental health challenges.

Some improvements have also been made regarding supporting the needs of foster and kinship carers, including the introduction of the [Scottish Recommended Allowance](#) in 2023, which ensures all kinship and foster carers receive at least the standard national allowance to support them and the children and young people they care for. In CELCIS's [Children's Services Support Research](#), support and services for foster and kinship carers were noted as improvements made in local services. Nevertheless, numerous challenges for kinship and foster carers were identified in this

study, including a shortage of foster carers and unsuitable housing options for kinship carers. Moreover, in line with findings around other actions, kinship and foster carers have reported significant [communication gaps and delays](#) regarding vital information including that related to health, behavioural or cultural needs of the children and young people they care for,

Overall, while Scotland has made moderate progress in embedding intensive family support principles through investments like the Whole Family Wellbeing Fund, addressing adoption breakdowns, supporting parents with mental health needs, and aligning policies and funding, further collaboration and resource allocation are needed to advance implementation across the nation.

Peer and Community Support

- *There will be a consistent, national approach to ensure there are places in every community for parents of young children to meet other local parents, to stay and play with their children, and get support and advice.*

see the promise, page 49

The COVID-19 pandemic has emphasised the [importance of community support initiatives](#) in Scotland, particularly as the negative effects of families' narrowed social networks and lack of community resources persist. These impacts are more likely to be experienced by families living in deprivation, and include worsened parental mental health, which can lead to [neglect and abuse](#). Despite these outcomes, effective utilisation of community resources, especially for [addressing maternal mental health and wellbeing](#), remains in its early stages. While there is moderate progress in establishing community hubs and addressing pandemic impacts on social networks, significant challenges persist, such as providing temporary homes and maximising community support resources.

Examples of community hubs include '[Fit Like? Family Wellbeing Hubs](#)' in Aberdeen which is a group of services working together to support children and young people's mental wellbeing. The service offers help with finance and benefits, family relationships and communication, coping with daily pressures, promoting positive emotional and mental wellbeing and talking about traumatic experiences.

The [Shaping Places for Wellbeing Programme](#), a collaboration between the Improvement Service and Public Health Scotland (PHS) funded by The Health Foundation and the Scottish Government with COSLA support, aims to improve Scotland's wellbeing and reduce inequalities through a place-based approach. Running until March 2024, it involves local project actions, a local learning cohort, and a national leadership cohort to drive partnership-based, wide-ranging local actions while addressing environmental health. The programme aligns with national policies like 20-minute neighbourhoods and Scotland's Public Health Priorities, supporting local authorities, health boards, and partners in considering 'place' comprehensively.

The programme's implementation involves support inputs, replicable outputs, and aims for lasting systemic change. Seven Project Towns (Alloa, Ayr, Clydebank, Dalkeith, Fraserburgh, Dunoon, and Rutherglen) receive support from Project Leads and Community Link Leads to incorporate the voices of those experiencing inequality into decision-making processes. The programme is based on the Place and Wellbeing Outcomes, which outline characteristics essential for thriving communities and are integrated into local decision-making

Whilst Scotland has made moderate progress on this action, continuing to invest in community services is crucial to address existing gaps and improve support systems for families, particularly in times of crisis like the COVID-19 pandemic. Continued efforts are needed to strengthen community networks and enhance the utilisation of peer and community support resources across Scotland, ensuring equitable access and effective support for all families in need.

Service Integration

- *Scotland's family support services will feel and be experienced as integrated to those who use them.*

see the promise, chapter 3 and chapter 6

Integrated family services in Scotland have shown moderate progress, with innovations like the [Barnahus model](#) exemplifying successful service integration by providing comprehensive support for children and families under one roof. This model serves as an excellent example of how integrated services can enhance accessibility and effectiveness in delivering support.

However, this model is not yet accessible across the country, and challenges persist in local services, particularly for care experienced children and young carers, due to siloed approaches and differing priorities among service providers.

Statistical analyses [suggest limited associations](#) between structural integration and improved outcomes, indicating that structural integration alone may not suffice to enhance service delivery or user experience significantly. Collaborative initiatives, such as [the Scottish Attainment Challenge](#), demonstrate promising cooperation between education and social work sectors, yet further evaluation is necessary to gauge their impact on service integration outcomes comprehensively.

Overall, while moderate progress has been made to integrate services, with the Barnahus model standing out as exemplary, achieving seamless integration across regions and services remains [a challenge in Scotland](#). Continued efforts are essential to address these challenges and maximise the effectiveness of collaboration to improve service delivery and outcomes for families.

Family Therapies

- *All families will have direct and clear access to family therapies and specific support across a range of issues, so that accessing support is seen as something that a range of families may need throughout life.*

see the promise, chapter 3

Further data collection and evaluation are crucial to determine the efficacy of family therapy initiatives across Scotland. This information is essential for refining strategies, expanding successful programs, and ensuring that families receive the support they need effectively. Continued investment in family therapy services, coupled with rigorous evaluation, will be vital in enhancing outcomes and addressing the diverse needs of families across the nation.

The "[With Kids Play Therapy Programme](#)," funded by Edinburgh City Council, represents an initial step in meeting family therapy needs by providing therapeutic interventions in primary schools. This program focuses on improving relationships and understanding trauma, particularly for



vulnerable families. However, the lack of comprehensive data on its impact and reach poses challenges in assessing its overall effectiveness and informing future expansion efforts.

Priority Area 3: Supporting the Workforce

Overview

Priority Area 3 of Plan 21–24 is ‘Supporting the Workforce’. This area seeks to equip the care workforce with the skills, resources, and support needed to deliver high-quality care and support alongside children and families. This includes training, professional development, and ensuring the wellbeing of those working in the care sector. Priority Area 3 is comprised of 4 actions, namely:

- Workforce Values
- Trauma-informed
- Relationships
- Workforce Support

The remainder of this section assesses each of these actions, summarising conclusions from the analysis of evidence and stakeholder interviews.

Workforce Values

- | |
|---|
| <ul style="list-style-type: none">○ <i>There will be a national values-based recruitment and workforce development framework in place and adhered to by all organisations and professions involved in supporting children and their families.</i> |
|---|

see the promise, chapter 5

The broad commitment across the workforce to enact change, despite an extraordinarily difficult financial landscape and significant systemic challenges, is evident.

Scotland is making efforts towards implementing a national values-based recruitment and workforce development framework, although progress remains varied across local authorities and organisations. Training initiatives are inconsistent, with 19 out of 32 local authorities offering some level of training to pupils and families on understanding care experience according to [research](#)

[conducted by Who Cares? Scotland](#). However, a significant gap exists as 10 local authorities do not provide any such training. There is no available data to determine whether something else is done in the absence of this. Similarly, training for school staff also lacks uniformity, with 27 local authorities offering differing levels, some of which are optional rather than mandatory.

The [Communities that Care](#) project by Who Cares? Scotland stands out as a focused effort in three local authorities, delivering extensive care experience training to break down prejudices and stigma. Despite these localised efforts, there is a critical need for broader education programs to ensure widespread understanding and inclusivity regarding care experience throughout Scotland.

In terms of destigmatising language and practices, progress is evident with [22 out of 32 local authorities embedding such practices](#). Within justice, Our Hearings, Our Voice have created the 'Language Leaders' group to ensure that all children who attend Hearings are supported to understand and be included by changing the use of written and spoken language. The establishment of [SCRA's Race and Ethnicity Group](#) further demonstrates the commitment to racial equality, evident through plans like the [Race Equality Action Plan](#). These efforts are crucial steps toward diversifying boards and fostering inclusive practices within care settings.

Stakeholders mentioned organisational commitments to deliver change, although significant challenges persist, including a recognised workforce crisis exacerbated by financial constraints, the impact of COVID-19, and ongoing issues related to the cost of living. Organisations are responding with initiatives such as training programs, mental health support, and policies aimed at nurturing staff. Yet, [systemic barriers](#) such as inadequate IT systems and difficulties in recruitment continue to hamper progress.

Overall, according to this research, Scotland has made moderate progress towards this action. This includes implementing a national values-based recruitment and workforce development framework, and a few local authorities are delivering extensive care experience training to break down prejudices and stigma. However, local authority provision of training on understanding care experience to pupils, families and school staff is patchy. Just over two thirds of local authorities have embedded procedures to destigmatise language and practices. In terms of destigmatising language and practices, while good efforts have been made to promote diversity and inclusive

practices within care settings. Continued efforts are needed to overcome the challenges posed workforce crises, financial constraints and more.

Trauma-informed

- *Organisations that have responsibilities towards care experienced children and families and those on the edge of care will be able to demonstrate that they are embedding trauma informed practice across their work and within their workforce.*

see the promise, chapter 5

Scotland recognises the importance of trauma-informed practice in responding to the needs of care experienced individuals, as supported by the [Improvement Service](#). This recognition demonstrates the significance of trauma-informed approaches in improving outcomes for vulnerable groups and signals positive policy direction.

Throughout this research, we have seen many mentions of trauma-informed practice and various guidance in relation to this, indicating there is activity occurring across the space in this area in terms of a desire to establish these practices into the thinking and workings of organisations.

Several local authorities are actively delivering trauma-informed training to their staff, demonstrating proactive efforts to equip personnel with necessary skills and create supportive environments. However, a notable concern arises from the fact that [11 local authorities do not record any data related to the delivery of trauma-informed training](#) according to research by Who Cares? Scotland. This absence of data raises accountability issues and impedes the ability to assess the effectiveness of training programs across different regions.

Research findings and government strategies consistently highlight the importance of trauma-informed approaches, laying a strong foundation for continued advocacy and action in policy and practice settings. Overall, while progress is evident in implementing trauma-informed practices, particularly through training programmes such as the [National Trauma Transformation Program](#), the lack of consistent data recording poses challenges to assessing broader impact and ensuring uniform implementation across Scotland.

Overall, this research denotes that Scotland has made substantial progress towards this action, and recognises the particular importance of trauma-informed approaches to care experienced individuals. While there are examples of efforts to equip local authority staff with the skills and knowledge to work in a trauma-informed manner, inconsistencies in the recording of data on such training programmes are problematic.

Ongoing Relationships

- *There will be no blanket policies or guidance that prevent the maintenance of relationships between young people and those who care for them. Settings of care will be able to facilitate the protection of relationships that are important to children and young people.*

see the promise, chapter 5 and page 79

The ability for children, young people, and families to maintain strong, trusting and ongoing relationships with those who care for them proves challenging due to various systemic issues identified in research.

These challenges include continual service restructuring, inconsistent thresholds for service provision, and difficulties [in recruitment and retention of qualified practitioners](#).

Such barriers emphasise the gap between [policy intent and practical implementation](#), indicating a need for more cohesive approaches to support sustained relationships and effective help and support.

Elements of practice and work regarding ongoing relationships is also evident in the section of this report regarding Brothers and Sisters.

Overall, according to this research, Scotland has taken initial steps to fulfil this action, though a host of challenges – including service restructuring, recruitment and retention – have made progress difficult.

Workforce Support

- *A new framework of support will be in place to ensure people involved in the care of care experienced children and young people feel valued, encouraged and have supportive relationships for reflection with high quality supervision and environmental conditions.*

see the promise, pages 107 to 108

Scotland faces significant challenges in providing adequate support for its care workforce, as highlighted by significantly high sickness absence rates among social workers, some reaching up to 83.3% in certain local authorities according to [research conducted by Who Cares? Scotland](#).

These rates directly impact service quality and continuity, contributing to disruptions in care provision and challenges in maintaining relationships between care experienced children, families, and adults and those who provide care. Compounding these issues are disparities in funding, employment conditions, and organisational constraints, which collectively undermine workforce morale and wellbeing.

While there are existing support measures such as mental health and well-being programs, team-building activities, and the development of advanced practitioner roles, these efforts appear inadequate in addressing the root causes of workforce challenges. [Organisational constraints](#) such as limited resources, high caseloads, and risk-averse cultures further impede practitioners' ability to deliver effective support and therapeutic interventions. A key risk to the Promise is asking an already stretched workforce to take on additional responsibilities to meet achieve the goals of the Promise.

The complex nature of these challenges necessitates comprehensive reforms to establish robust support mechanisms that ensure the wellbeing of care professionals and high-quality help and support for care experienced children, adults and families.

These assessments across workforce values, trauma-informed practices, ongoing relationships, and workforce support demonstrate both progress and persistent challenges within Scotland's 'care system'. Addressing these complexities requires sustained commitment to systemic reform and strategic investment in enhancing support structures for care experienced children, families and adults.

Overall, Scotland has taken initial steps to fulfil this action, according to this research. However, challenges in providing adequate support for the care workforce – including disparities in funding, employment conditions, and organisational constraints – have a knock-on impact on service quality and continuity for care experienced children, families, and adults and those who provide care. Systemic reform and strategic investment are required if the root causes of workforce challenges are to be adequately addressed.

Priority Area 4: Planning

Overview

Priority Area 4 of Plan 21–24 is ‘Planning’. This area seeks to develop strategic plans and policies that prioritise the needs and rights of children and families and ensure that decision-making processes are informed by the voices of children and young people, and that policies are designed to support long-term positive outcomes. Priority Area 4 is comprised of 3 actions, namely:

- Planning
- Investment
- Information Sharing

The remainder of this section assesses each of these actions, summarising conclusions from the analysis of evidence and stakeholder interviews.

Planning

- *Scotland will have a national, strategic planning process in place that ensures that children who are cared from away from their family of origin ‘belong to a loving home.’*
- *The planning process will reflect the needs of Scotland’s children and young people whilst operating with the expectation that more children will remain with their families.*
- *It will reflect the principles of the promise ensuring:*
 - *Scotland’s most vulnerable children are not profited from (page 111)*
 - *Standards of care are consistent (page 111)*
 - *End to the selling of care placements to Local Authorities outside Scotland (page 110)*
 - *Acute and crisis services are phased out to promote early intervention and prevention (page 111)*

see the promise, chapter 6

Scotland's planning efforts in child protection, care and support reveal a complex landscape marked by both progressive efforts and persistent challenges. A notable concern is the substantial allocation of public funding to profit-making companies for residential care services; *Who Cares?* Scotland found that 15 local authorities have paid over [£200 million](#) to profit-making companies to provide children's residential care since pledging to keep the promise in 2020. This raises questions about resource prioritisation and alignment with principles outlined in the promise. This trend indicates a critical need to reassess funding strategies and prioritise investments that support sustainable and equitable models of care.

Moreover, despite acknowledging the issue, many local authorities continue to rely on profit-making companies for delivering care services without concrete plans to transition away from this model. This stagnation suggests a gap between policy intent and operational realities, highlighting the challenges in implementing systemic reforms within the 'care system'. Addressing these challenges requires proactive strategies to phase out reliance on profit-making entities and promote alternative models of care that prioritise children's rights and wellbeing over financial interests.

Transparency and accountability also pose significant challenges, with inconsistent data tracking expenditure on children's services across local authorities. This lack of transparency complicates efforts to evaluate the effectiveness of policy interventions and allocate resources effectively, emphasising the need for standardised reporting mechanisms and robust accountability frameworks. For example, [Children's Services Plans are standardised across local authority areas](#), ensuring consistent reporting of children's rights, child protection, corporate parenting, youth justice, child poverty, etc.

Amidst these challenges, [positive steps have been observed in some local authorities where commitments to phase out contracts with profit-making companies have been made](#). While commendable, these actions are often limited in scope, underscoring the broader need for widespread commitment and action across all authorities to ensure a comprehensive transition towards sustainable and equitable models of care.

However, persistent issues such as funding allocation, transparency, and accountability gaps pose significant barriers to achieving comprehensive reform. Some stakeholders in our interviews noted they still felt children’s voices were missing from such conversations.

To improve planning effectiveness, Scotland must prioritise reforms that reallocate resources towards equitable models of care, establish clear accountability measures, and enhance transparency in financial practices. By addressing these challenges and building on existing strengths, Scotland can advance its commitment to providing high quality care and support for children and families.

Overall, initial steps have been taken towards planning efforts. Commitments and intentions have been set, although the majority of required actions have yet to be fully realised, in large part due to challenges including lack of consistent data, transparency and accountability.

Investment

- *Investment in the lives of children and families will be considered strategically and holistically in the context of their experiences.*
- *The Human and Economic Cost modelling that underpinned Follow the Money and The Money reports will be embedded into organisational and budgeting processes across Scotland. That process will have involved organisations working together to spread investment and align budgets.*

see The Promise, Chapter 6; The Money; Follow the Money

Scotland's investment strategies in child protection, care and support demonstrate a varied landscape with notable efforts and systemic challenges. While efforts to mitigate the benefit cap and introduce the [Scottish Child Payment](#) are commendable for their direct support to families, the absence of a comprehensive investment strategy raises concerns about the broader impact on public service reform. This lack of strategic alignment may limit the effectiveness of individual streams of investment in addressing systemic issues related to poverty and inequality.

Notably, in their [second report](#) from June 2023, The Promise Oversight Board reflected they did not see any clear investment strategy from Scottish Government:

“There is also no comprehensive investment strategy in place. These things are important to enable us to report with confidence about pace and performance.”

We expect to see explicit leadership and drive from the Scottish Government and scrutiny bodies to articulate a clear set of principles, outcomes and milestones that will guarantee the promise is kept so that Scotland’s care experienced young people’s life chances are not defined by the fact they have been in care. We expect to see a strategic investment plan to deliver the required change. This does not have to mean additional resources when public finances are fragile; it means making best use of the resources that already exist by focusing on outcomes for children and families.”

Local action plans show targeted efforts to address community-specific needs, yet the absence of a cohesive investment strategy may result in fragmented approaches that fail to address root causes effectively. This fragmentation highlights the importance of integrating local initiatives into a unified framework that supports coordinated efforts and maximises impact across diverse communities.

Initiatives in monitoring outcomes for care experienced children are promising but may lack alignment with a broader investment strategy aimed at improving educational attainment and wellbeing outcomes across sectors. This disconnect underscores the need for cohesive investment planning that integrates sector-specific investments into a comprehensive framework for child welfare and development. In the [Keep the Promise implementation plan](#), the Scottish Government committed to ensuring that at least 5% of all community based health and social care spend will be invested in preventative whole family support measures by 2030.

Challenges in implementing cost modelling frameworks reveal barriers to achieving alignment in budgeting processes, which can hinder effective resource allocation and planning. Without clear guidelines and coordination mechanisms, these challenges may persist, compromising the efficiency and impact of investment efforts in child protection, care and support.

Efforts to enhance data maturity for informed decision-making represent a positive step towards improving accountability and outcomes. However, the absence of a comprehensive investment strategy guiding data use and interpretation may limit the full potential of data-driven insights in shaping policy and practice.

The assessment of Scotland's investment strategies in child protection, care and support highlights strengths in targeted interventions such as [mitigating the benefit cap](#) and introducing the [Scottish Child Payment](#). These initiatives demonstrate a commitment to addressing key issues affecting children and families. However, the absence of a cohesive investment strategy poses challenges in achieving systematic reforms that address root causes of poverty, inequality, and educational disparities.

The previously mentioned [Scottish Recommended Allowance](#) is also a significant step in supporting foster and kinship carers across Scotland. The weekly allowances, backdated to April 1, 2023, are set at £168.31 for 0 to 4-year-olds, £195.81 for 5 to 15-year-olds, and £268.41 for those 16 and older. This standardisation, agreed upon with COSLA, marks the first time a unified rate has been mandated across all local authorities in Scotland, helping to ensure that all foster and kinship carers receive fair and adequate financial support. This provides families with consistent and reliable financial assistance, recognising the essential care they offer to vulnerable children and young people.

Overall, moderate progress has been made on this front, with local targeted investment strategies and supportive payments such as the Scottish Child Payment and Scottish Recommended Allowance demonstrating improvements in the investment landscape. However, to enhance investment effectiveness, Scotland should develop a comprehensive strategy that integrates sector-specific efforts into a unified framework. This approach would improve coordination, maximise resources, and ensure that investments are strategically aligned to achieve long-term outcomes for children and families across Scotland. By addressing these challenges and leveraging existing strengths, Scotland can advance its commitment to improving outcomes for children and families and promoting equitable opportunities for all.

Information Sharing

- *Organisations with responsibilities towards children and families will be confident about when, where, why and how to share information with partners.*
- *Information sharing will not be a barrier to supporting children and families.*

see the promise, page 36

Information sharing practices within Scotland's child protection, care and support systems exhibit a diverse range of effectiveness levels across various initiatives. Stakeholders report some positive experiences with inter-agency communication, particularly in contexts such as [addressing child criminal exploitation](#). However, there is a [recognised need](#) for enhanced processes to optimise efficiency and ensure comprehensive data exchange among agencies.

Conversely, challenges emerge in the context of recordkeeping, where significant delays in accessing critical information once a child is no longer able to remain at home have been reported. These delays not only compromise the privacy and dignity of children but also reveal broader inefficiencies in information sharing practices, highlighting critical gaps that must be addressed to safeguard and protect children effectively.

Similarly, insights from the "[10,000 Voices](#)" report reveals substantial gaps in communication, with many children living away from home lacking a clear understanding of their circumstances. This deficiency in information sharing diminishes the effectiveness of support systems intended to promote children's wellbeing, necessitating urgent improvements to ensure that vital information is effectively communicated and understood by children. It is also important that children's voices are heard about their views on the the appropriate amount of information that would keep them safe being shared effectively.

Moreover, while efforts are underway to enhance [data sharing in rural areas](#) to combat child poverty, current practices face challenges that limit their overall effectiveness. Recommendations for establishing a working group represent a positive step towards improving collaboration and leveraging data for targeted help and support. However, addressing existing deficiencies in data

sharing practices is crucial for achieving meaningful impact and ensuring equitable support for families who require it.

In the realm of [supporting vulnerable young people in need of additional care and protections](#), reviews have highlighted missed opportunities to meet the needs of young people due to ineffective collaboration and data sharing among statutory agencies. These findings highlight systemic failures that significantly impact service delivery and outcomes for vulnerable young people, indicating a low level of effectiveness in current information sharing practices. Addressing these systemic barriers is paramount to improving inter-agency collaboration and better supporting the needs of vulnerable young people nationwide.

Lastly, concerns regarding legal rights and ethical considerations in information management highlight potential barriers that complicate comprehensive data sharing practices. These barriers necessitate policy reforms and clearer guidelines to facilitate secure and ethical information exchange across agencies, ensuring that information sharing practices uphold the rights and privacy of all individuals involved.

The assessment of information sharing demonstrates both strengths and challenges within Scotland's child protection, care and support system. Effective communication channels and targeted help and support addressing specific issues like child criminal exploitation and rural child poverty, show promise. However, significant gaps persist in areas such as recordkeeping for children unable to live at home, informing care experienced children of their rights and helping them understand and engage in decision-making about their lives, and collaboration among agencies supporting vulnerable young people.

Initial steps have been taken with regards to information sharing practices within and between Scotland's child care, support and protection networks, with some improvements in communication processes between agencies, although large deficits and challenges remain. To enhance overall effectiveness, it is crucial to prioritise reforms that streamline information sharing processes, ensure timely access to critical data, and foster robust inter-agency collaboration. By addressing these challenges and building on existing strengths, Scotland can improve outcomes for children and families in care, creating a more supportive and responsive child protection, care and support system.

Priority Area 5: Building Capacity

Overview

Priority Area 5 of Plan 21-24 is 'Building Capacity'. This area seeks to strengthen the capacity of organisations and communities to support children and families effectively which involves investing in services, fostering collaboration among different sectors, and ensuring resources are allocated where they are most needed. Priority Area 5 contains 6 actions, namely:

- Legislation
- Children's Hearing System
- Inspection and Regulation
- Policy Coherence
- Data Mapping and Collection
- Governance Structures

The remainder of this section assesses each of these actions, summarising conclusions from the analysis of evidence and stakeholder interviews.

Legislation

- | |
|--|
| <p>○ <i>Over the course of the next Parliamentary term, there will be identifiable progress made towards ensuring Scotland's legislative framework around the breadth of the 'care system' is coherent and cohesive, upholds the conclusions of the Independent Care Review and is compliant with the UNCRC.</i></p> |
|--|

see the promise, page 112

Scotland has made significant strides in its legislative efforts concerning child protection, care and support aligning with the conclusions of the Independent Care Review. Published in 2022, the Scottish Government's [Keeping the Promise implementation plan](#) laid the groundwork for significant investment, consultation, and support for children, young people, and their families. Furthermore, the incorporation of the United Nations Convention on the Rights of the Child

(UNCRC) [into Scots Law](#) through the 2024 Act marks a pivotal advancement towards embedding child rights in the national legal framework. This legislative move underscores Scotland's commitment to promoting children's rights comprehensively, ensuring that international standards are enshrined in domestic law, within the competencies of devolution.

Additionally, the [Redress for Survivors \(Historical Child Abuse in Care\) \(Scotland\) Act 2021](#) addresses past injustices related to historical child abuse, although its direct impact on legislative coherence within the current care system may be limited.

The [Children \(Scotland\) Act 2020](#) brought the law further in line with the UNCRC, ensuring that children's views will be heard in family court cases and Children's Hearings and that the best interests of children are at the heart of decision-making processes. It also gives more protection to victims of domestic abuse and introduced a legal duty to support care experienced brothers and sisters' relationships where they are not able to live together. Some of the duties within the Act are still to be commenced.

The [Children \(Care and Justice\) \(Scotland\) Act 2024](#) implements some of the core conclusions of the Promise, including by increasing access to the Children's Hearings System for more 16 and 17 year olds and ensuring no child will be held in a Young Offenders Institution. The proposed [Scottish Human Rights Bill](#) holds promise in addressing lifelong inequalities faced by care experienced individuals, reflecting Scotland's commitment to aligning legislative frameworks with the principles of the promise.

Challenges such as [gaps in data collection on early deaths](#) and uncertainties surrounding the National Care Service highlight areas where legislative coherence could be strengthened. Despite these challenges, Scotland's legislative landscape continues to evolve in support of child protection, care and support, with ongoing efforts to ensure that legal frameworks uphold the rights of all children under its jurisdiction. The key challenge going forward will be ensuring implementation of these key pieces of legislation.

Overall, according to this research, Scotland delivered this action as set out in Plan 21-24. It has made significant legislative efforts relating to child protection, care and support – including those

to align with the conclusions of the Independent Care Review and the international standards outlined in the UNCRC.

Children's Hearings System

- *The Children's Hearing System will have gone through a redesign process.*
- *That redesign process will bring together children and families, and organisations that hold the responsibility, to rethink the structures, processes and legislation that underpin the hearing system.*
- *The aim will be to ensure there are coherent, cohesive and collaborative proposals on an operating framework for The Children's Hearings System that has been designed with children and families.*
- *That redesign process will be underpinned by:*
 - *giving effect to the promise;*
 - *ensuring compliance with the UNCRC;*
 - *upholding the original intention of The Kilbrandon Review that children involved in offending need care and protection; and*
 - *ensuring The Children's Hearing System and The Courts can facilitate child friendly justice that upholds children's rights and enables their effective participation.*

see the promise, pages 39 to 44

Scotland's unique Children's Hearings System has shown notable progress in making improvements and reform alongside persistent challenges, as evidenced by stakeholder inputs and official reports. Care experienced children and adults have consistently advocated for reforms even before the Promise, underscoring the longstanding need for improvements in the way the Children's Hearings System operates and listens to children and families. The historical commitment to the Kilbrandon principles and to transformational change highlights the depth of engagement and collaboration that has shaped ongoing reforms.

As part of the commitment to change, organisations in and surrounding the Children's Hearing System, including Children's Hearings Scotland, The Promise Scotland, the Scottish Children's Reporter Administration and the Scottish Government, formed the Hearings System Working Group, established in 2021. The working group is tasked with preparing detailed proposals for the redesign of the children's hearing system, and published the '[Hearings for Children: The Redesign Report](#)', with over 97 recommendations. This report and the subsequent response from the Scottish Government demonstrate significant strides towards prioritising the voices and increasing the participation of children and families in Children's Hearings and embedding a rights-based inquisitorial approach. These efforts are aimed at ensuring that children's voices are heard and that decisions made alongside them are informed by their experiences and needs.

The Scottish Children's Reporter Administration (SCRA), [aims to enhance the Children's Hearings System through several key initiatives](#). These include ensuring Children's Hearings are inclusive, rights-based, and trauma-informed, and that all attendees are well-prepared, informed, and able to participate fully. SCRA is committed to clearly explaining the reasons for Hearings and the decisions made, making appeal rights accessible, and working with children and families with kindness.

Additionally, SCRA aims to use clear and appropriate language in all communications and engage openly and constructively with partners about potential changes to the Children's Hearings System. This includes preparing staff for upcoming changes while continually improving the current experience for children and families involved in the hearings process.

In addition, Children's Hearings Scotland have [taken many actions to ensure the Children's Hearing System reflects the commitments of the Promise](#). These include delivering and evaluating trauma informed learning to volunteers, undertaking assessments of Panel Members' knowledge and confidence around sibling's rights, providing new tools for staff and volunteers to develop their skills and knowledge to best respect children's rights, and developing a consistent approach to enhance participation, engagement and consultation with children and young people with lived experience and embed these voices in operational delivery.

Along with these programmes, the [Children's Hearings Redesign Board was recently established, made up of a group of leaders from relevant stakeholder organisations](#). The board is responsible for providing oversight to changes to the Children's Hearings System, ensuring any changes are based in evidence and benefit children and their families.

However, concerns regarding advocacy provision and the timely implementation of recommendations temper these advancements. Actioning recommendations and aligning reforms in a way that continues to take into account the views and experiences of care experienced children and adults will be crucial for achieving lasting change to Scotland's Children's Hearings System.

Overall, Scotland has made substantial progress towards this action, according to this research. A key source of progress was the formation of the Hearings System Working Group in 2021, while the Scottish Children's Reporter Administration (SCRA) has worked on a series of key initiatives to enhance the Children's Hearings System. Actions by Children's Hearings Scotland, and the establishment of the Children's Hearings Redesign Board, are also welcome, though care should be taken to address concerns around advocacy provision and the timely implementation of recommendations.

Inspection and Regulation

- *A new, holistic framework for inspection and regulation that values what children and family's value, will have been scoped and developed.*
- *It will understand the necessary legislative change required to focus on children's experiences and will be underpinned by the principles set out in the promise and give full effect to the secure care pathway and standards.*

see the promise, pages 119 to 120

The Care Inspectorate is committed to [delivering the Promise by 2030](#) as part of its strategic objectives. It is working to align its current and future activities with the promise's conclusions. This includes regulating and supporting services which work with babies, children, and young

people on the edges of care and with care experience, and aligning efforts with participation, equalities, the UNCRC, and corporate parenting.

The organisation is implementing a [Promise Development Model](#) across six workstreams, both internally and externally. Internally, this involves incorporating promise principles into methodology, participation, and learning and development activities. Externally, the Care Inspectorate contributes to national transformational change through its scrutiny and assurance roles, collaborating with other scrutiny bodies to provide evidence and influence necessary for achieving the promise's goals.

However, the lack of comprehensive data on the 'care system' poses significant challenges to monitoring progress effectively. Criticisms regarding data collection priorities and interruptions in policy reviews, such as the [National Care Service consultation](#), further demonstrate the need for improved data management practices and policy coherence. These challenges highlight the complexities involved in implementing new regulatory frameworks that align with the promise's goals across Scotland.

Also of note, [an independent review looking at the inspection and regulation of social care](#) in Scotland was called for in 2022, publishing findings in 2023. The report examined current systems of regulation and inspection across social care in Scotland, discussing how these systems can best support improved outcomes and experiences. Overall, includes 38 recommendations, some building on long-standing issues in the care system identified in earlier reviews, including the Independent Care Review, and others referring to new areas. This review represents a crucial step in transforming the care system to meet the needs of children, young people and families.

According to this research, Scotland has, overall, made moderate progress towards this action. The Care Inspectorate references commitments to delivering the Promise by 2030 in its strategic objectives, and is implementing a Promise Development Model at both internal and external levels. Conversely, data collection priorities and interruptions in policy reviews have faced criticism, and greater consistency of data is needed to monitor progress effectively.

Policy Coherence

- *There will be cohesive alignment in the policy initiatives and frameworks across Scotland. Policy development across Scotland will reflect the realities of people's lives and create a coherent policy environment.*
- *The focus of the 21-24 period will be on implementation and alignment not inquiries and reviews.*

see the promise, page 25

Scotland's efforts towards achieving policy coherence in child protection, care and support reveal a mix of challenges. Initiatives such as the [Mental Health and Wellbeing Strategy](#) demonstrate efforts to integrate trauma-informed practices and enhance children's participation in decision making about their care and support. These align with broader goals of embedding supportive frameworks and improving care outcomes across Scotland.

However, challenges related to data deficiencies and delays in policy reviews impact the overall coherence of policy initiatives. The lack of comprehensive data on the 'care system' limits the effectiveness of policy interventions aimed at addressing child protection, care and support issues. Addressing these challenges and enhancing policy alignment with the Promise's principles will be critical for achieving comprehensive and effective policy coherence in Scotland.

In interviews, stakeholders also noted there was not always agreed terminology across organisations, guidance and legislation, which hinders policy coherence.

The Children's Services Reform Research [concluding report](#) published in December 2023 by CELCIS found that practitioners described working in the context of a cluttered, insufficiently aligned and, at times, contradictory legislative and policy landscape. Policy changes were described as 'layered on' without a clear understanding of the impacts on other existing policies, which results in confusion and a continual shifting of focus. Local leaders, managers and practitioners are also struggling with implementation, particularly as there is no national sequencing, insufficient support for implementation, and all services are trying to manage the crisis in recruitment and retention at the same time.

Overall, Scotland has made moderate progress towards this action. While there have been efforts to integrate trauma-informed practices and enhance children's participation in decision making about their care and support, challenges relating to data deficiencies and delays in policy reviews limit the overall coherence of policy initiatives. The legislative and policy landscape can be seen as cluttered or contradictory, resulting in difficulties at implementation stages. All these issues impact the abilities of services to achieve the outcomes needed to improve the lives of children, young people and families.

Data Mapping and Collection

- *Scotland will have a cohesive central picture of all data on the processes and systems that directly and indirectly impact on children and their families, including wider socio-structural factors.*
- *The data picture will have been used to fully align data systems, collection and analysis methodologies to what matters to children and families, and the needs of those who take decisions on how best to support children and their families.*

see the promise, pages 114

Throughout this report, the assessment of actions has consistently noted a lack of clear data on those in care or who are care experienced in relation to the actions. This must be addressed in order to be able to assess the progress on key aspects of the Promise moving forward to 2030.

Data is crucial for understanding the needs and experiences of children, young people, and families requiring help and support. It informs decision-making, evidences effective practices, and evaluates service quality. However, members of the workforce often feel that data collection does not directly benefit their work, perceiving it as a burden rather than an aid. Additionally, while data can highlight experiences and outcomes, capturing and analysing qualitative information is challenging. Most indicators available focus on service operations rather than outcomes and are not designed to measure the effects of integration.

Scotland's approach to data mapping and collection in child protection, care and support highlights persistent challenges and some promising development. Significant gaps in data regarding [Black and Minority Ethnic \(BME\) child poverty](#) highlight deficiencies in targeting actions effectively. Despite Research Data Scotland (RDS) and Administrative Data Research Scotland (ADR Scotland) aiming to enhance data access and utilisation, challenges in data collection and utilisation persist.

In Scotland, efforts to improve the data landscape include the development of the [Children, Young People and Families Outcomes Framework](#) with core wellbeing indicators, [data mapping](#) by The Promise Scotland, and a review of Children's Social Work Statistics. Despite these, further work is needed to develop data that reflects what is important to children and families, including capturing their experience of appropriate help and support. National data collection gaps, such as information on initial social work referrals and reasons for changes in care, limit the effectiveness of planning and evaluating early help for children and families. Integrated data systems could support multi-agency work by enabling easier information sharing.

Overall, Scotland has taken initial steps towards this action. However, a dearth in clear data on those in care or who are care experienced has been consistently raised throughout this research. These challenges call for more cohesive and targeted approaches to improve data mapping and collection practices in Scotland. Addressing these gaps will be essential for developing informed policies and help and support that effectively support children and families.

Governance Structures

- *All public appointments to any of Scotland's Boards and Public Bodies which have an impact on the 'care system' will ensure that the values of the promise are embedded in recruitment frameworks.*
- *The governance landscape around the various Boards, networks and groups that sit around the 'care system' will be rationalised to enable effective and accountable shared working around the lives of children and families.*

see the promise, chapter 6

Scotland's governance structures in embedding the values set out in the Promise and involving care experienced individuals in decision-making processes about them and service delivery reflect progress, alongside areas for improvement. During our review we did not find many sources discussing this. Efforts to embed values set out in the Promise in recruitment frameworks for governance positions demonstrate proactive steps to integrate voices and experiences of care experienced people into decision-making processes. Successful implementation of reverse mentoring strategies further enhances governance structures by incorporating the perspectives of care experienced people.

However, concerns over data recording inconsistencies and uneven engagement practices related to reverse mentoring indicate areas where implementation could be strengthened.

This research indicates that, overall, Scotland has made moderate progress towards this action. Improving engagement practices and ensuring consistent data recording will be crucial for sustaining progress and achieving meaningful impact across governance structures in Scotland.

The Fundamentals of Plan 21–24

The Promise Scotland’s Plan 2021–24 outlines five core fundamentals aimed at transforming the care system in Scotland to better support children and families. This evidence review also looked at the progress towards achieving these fundamentals as well as the actions. The five fundamentals—What Matters to Children and Families, Listening, Poverty, Children’s Rights, and Language—serve as the guiding principles for achieving the promise.

The following sections provide a commentary on each fundamental based on the evidence review against the actions and stakeholder interviews.

What Matters to Children and Families

The Promise Scotland’s Plan 21–24 prioritises the needs and perspectives of children and families at every stage of implementation. This report highlights that while there has been progress in involving children and families in decision-making processes, challenges remain. Some organisations have moved towards integrating child-centric approaches, but there is still a notable gap in consistently prioritising the voices of children and families over systemic considerations. Ensuring that every decision is made from the perspective of those directly affected remains an ongoing challenge.

Listening

Listening to the voices of care experienced children and families is a core fundamental of the plan. The evaluation indicates that organisations have made progress in embedding feedback from children and families into their practices. However, it also reveals that this practice is not yet universal. Some stakeholders report that despite mechanisms for feedback, the actual impact on policy and practice varies significantly. There is a clear need for more consistent and effective ways to ensure that the insights and experiences of children and families are meaningfully integrated into organisational practices and policies.

Poverty

Reducing poverty among children and their families is critical. The evaluation shows that while there have been efforts aligned with the Child Poverty (Scotland) Act 2017, the impact of these

initiatives has been mixed. Economic challenges, particularly exacerbated by the COVID-19 pandemic and cost of living crisis, have hindered significant progress. Organisations have attempted various strategies to mitigate the effects of poverty, but sustained improvement is yet to be fully realised.

Children's Rights

The commitment to upholding the rights of children, as outlined in the UNCRC, is central to Plan 21-24. The evaluation notes that while there is a general awareness and endorsement of children's rights among organisations, the practical implementation can sometimes fall short. Issues such as inadequate resources, training, and support systems have been identified as barriers to fully realising these rights.

Language

The use of stigmatising language and practices is another fundamental of the plan. The evaluation reveals progress in shifting towards more respectful and empowering language when referring to care experienced individuals. Stakeholder interviews generally stated that there was a sense that there had been good progress in these areas over the period of the Plan. It is essential that all organisations and individuals involved in Scotland's 'care system' understand and adopt destigmatising practices to create a more supportive and respectful environment for care-experienced children and young people.

Conclusion

The evaluation of The Promise Scotland's Plan 21-24 shows that while there has been progress in some areas, significant challenges remain in fully embedding the five fundamentals across all organisations and practices. Continued efforts, enhanced resources, and stronger accountability mechanisms are required to ensure that the perspectives and rights of all children and families are consistently prioritised and respected.

Conclusion

Plan 21-24 is a crucial component of Scotland's broader promise to enhance the lives and uphold the rights of children and young people in Scotland. While stakeholders acknowledge the Plan's commitment, concerns have been raised about its effectiveness due to its broad scope, lack of measurable success indicators, and inclusion of some seemingly unattainable goals according to participants in interviews. The unmet objectives set for 2024 emphasise the need for renewed efforts to achieve the targets by 2030.

Despite these challenges, significant achievements driven by the shared desire to "Keep The Promise" have been realised over the course of Plan 21-24. These include increased awareness of children and families' voices in decision making, key legislative changes, and alignment of local authority plans with the Plan's priorities.

However, significant areas for improvement remain. Challenges in resource allocation, particularly maintaining adequate funding for local authorities, have impacted the effectiveness of implementation. Sustained financial support and clear metrics for measuring impact are critical for assessing progress towards the commitments set out in Plan 21-24 as Scotland moves on to its next plan. Addressing workforce support and retention, improving service integration, and shifting towards early help and comprehensive community based support are essential for improving outcomes for children, families and care experienced adults.

Future plans must be clearer on the specifics: who will be responsible for each action, how these actions will be carried out, when they will be completed, how they will be monitored, and what the financial costs will be. This clarity will help ensure accountability and enable more precise allocation of resources.

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From many voices to smart choices

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