

Collaboration in Dundee

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1 Introduction

This paper seeks to highlight the positive impact Dundee City Council is having in addressing their Children and Families priorities through collaborative work with partners.

The Children and Families Service Plan 2023-2027 states that, *“We recognise that, like all partners, our service operates in a challenging context and believe this invites us to fully concentrate on our shared priorities of reducing child poverty and inequalities in income, education and health; tackling climate change; delivering inclusive economic growth; building resilient and empowered communities; and designing a modern Council”*. They are acutely aware that as a service, they cannot address those priorities alone, and need to collaborate with partners within the council, across the city and beyond.

Effective collaboration exhibits a number of common factors: strong champions and trusting relationships are indispensable; good partnerships involve knowing what it is you want to change, bringing others in to help, and being willing to learn from mistakes; and taking ownership, accepting accountability and showing persistence are all essential. The successful operation and expansion of partnerships depends, above all, on the willingness of both sides to approach any relationship as one of equals, with shared objectives in mind.

Dundee’s Children and Families Service Plan clearly outlines what they want and need to improve, and that they will seek and work effectively with partners to make those changes and improvements. It is stated that, *“Each of these policies and strategies* require our service to work collaboratively with a range of key partners, regulatory or inspection bodies and parents/carers. This includes Scottish Government, Police Scotland, NHS Tayside, the Scottish Prison Service, Third Sector, Parole Board, Sheriff Court, Crown Office Procurator Fiscal Service, the Health and Social Care Partnership, Children’s Reporter, Education Scotland, Care Inspectorate, Scottish Social Services Council, Kinship Carers, Foster Carers and Adopters. Whilst this can add to the complexity of our work, we believe it is essential for us to aim to work in tandem whilst always adhering to regulatory frameworks and statutory decisions.”*

Their approach depends on understanding their demographics, and how the challenges faced are inter-related. This is clearly illustrated in the Protecting People Infographic in Appendix 1. It is essential that whole family approaches are promoted and that they work with other services and key partners in this.

The key factors within Dundee's demographics that they seek to address are:

- 25% of people in the city live in poverty which is the second highest nationally
- 71.5% employment rate compared with 73.5% nationally
- 15% on Child Protection Register are unborn babies compared with 5% nationally
- 2.2 per 1,000 child population Child Protection Orders is the first highest nationally
- Over 27% of care experienced children are 0-5 years compared to 18% nationally
- 45.2 per 100,000 people drug deaths in the last 5 years is the first highest nationally
- 177 per 100,000 people domestic violence incidents is the first highest nationally
- 64 per 1,000 people aged 16-64 report a mental health condition

Dundee’s Children and Families Service Plan 2023-2027 sets out 6 key priority themes to address these and are outlined in the following section.

* UNCRG; GIRFEC; [Achieving Excellence and Equity: National Improvement Framework and improvement plan 2023](#); [The Scottish Attainment Challenge \(SAC\) Framework for Recovery and Accelerating Progress](#); [Refreshed Narrative for Scotland’s Curriculum](#), [the Additional support for learning: action plan \(updated October 2021\)](#); [national carers strategy](#); the National Guidance for Child Protection in Scotland (2021); the Independent Care Review; and the National Strategy for Community Justice

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2 Priorities

The Children and Families Service Improvement Plan 2019-2022 included eight strategic priorities: Early Years; Learning Attainment and Achievement; Health and Wellbeing; Inequalities; Child Protection; Community Justice; People and Resources; and Communities and Family Views. Within each priority aims, intentions and impact were outlined. These remain key drivers.

In the Children and Families Service Plan 2023-2027 the following Key Priority Themes (and Primary Drivers) are outlined:

1. Actively listening and responding to the VOICES of children young people and families
(Our Promise; GIRFEC practice; Rights Respecting Schools)
2. Improving children and young people's HEALTH AND WELLBEING from early years to adulthood
(Physical, mental and emotional health; Our Promise; family support)
3. Improving EDUCATIONAL OUTCOMES for all and narrowing ATTAINMENT AND ACHIEVEMENT gaps
(Curriculum, pedagogy & assessment; ASN, equity & inclusion; transitions; attendance; relationships & behaviour; learning estate and support staff transformation)
4. Improving sustained POSITIVE DESTINATIONS for all young people
(Developing the young workforce; partnerships)
5. Improving EARLY INTERVENTION and COMMUNITY SUPPORT for people in the justice system
(National Strategy for Justice; Community Justice Outcome Improvement Plan)
6. Supporting our workforce and families to feel valued, confident and competent
(Trauma informed practice; leadership; health and wellbeing; SSSC codes of conduct; professional development)

Within the above Plan for 2023-2027 work undertaken to address these themes seeks to:

- Reduce the number of care experienced children and young people
- Improve stability of care for care experienced children and young people
- Improve permanence for care experienced children in their forever families
- Improve attendance/attainment/positive destinations of care experienced children and young people
- Improve the presence, progress and participation of all children and young people, reducing the gap between children and young people living in SIMD Quintile 1 and those living in Quintile 5
- Improve successful completion rate of Community Payback Orders

The [CELCIS 'Rapid Evidence Review'](#), June 2023 found that integration should be viewed as an outcome of a range of components, those being: co-location; facilitative relationships; aligned policy; committed leadership at all levels; holistic support; common finance and/or commissioning; shared culture; information/data sharing; shared goals; shared governance. These components are in evidence in our collaborations. An excerpt from the CELCIS paper can be found in Appendix 2.

Collaboration in Dundee

3 Spotlights: Collaborating to address our priorities

As noted in the introduction, Dundee City Council's approach to working effectively to address their priorities is to do so in collaboration with others, to seek the experience and expertise that will deliver positive impact. It is not possible to describe and include all of their collaborations here so a number of initiatives, projects and areas of work have been selected to spotlight. These spotlights demonstrate the positive impact and the improvement and progress being made towards addressing priorities, through their collaborative approach. A list of spotlight collaborators can be found in Appendix 3.

The spotlights are:

1. Art at the Start
2. Domestic Abuse Capacity Building
3. Community Mental Health and Wellbeing Fund for Children and Young People
4. Together to Thrive
5. Addressing Neglect and Enhancing Wellbeing

Those leading on the initiatives were invited to provide information for this report with the following questions sent as a prompt:

- Provide a brief description of the initiative
- Who is involved (and any links to websites of other organisations involved) and why are they involved?
- Which indicators or priorities are you addressing?
- How is collaboration addressing this priority?
- Describe success in moving towards targets
- Are there any other benefits?
- Is it replicable? How?
- Does this link to any other priorities? Benefits of this?
- How are the voices of children, young people and families captured/achieved?
- Is there anything else you think is of interest, surprising, helpful?

The spotlights make reference to the key priority themes within the Children and Families Service Plan 2023-2027 and to the priorities within the Children and Families Service Improvement Plan 2019-2022.

Those who provided information for the spotlights in this paper gave considered, full and very detailed responses and we thank them for their generous contributions. (See Acknowledgments on page 11)

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1. Art at the Start

Art at the Start was created and developed by Vicky Armstrong and Josephine Ross of the University of Dundee. This initiative seeks to support parents and carers, whilst making art together, to practically learn about, notice and reflect upon how their young children communicate and how beneficial it is when adults around children tune into and respond positively to these communications.

Research indicates the importance of the first 1000 days of a child's life and how poverty and other stresses that families face, make those first 1000 days more challenging. The initiative is intended to support adults around children: parents; carers; and practitioners alike, to tune into their communications to strengthen relationships and encourage positive attachments.



In Dundee this collaborative project involves the University of Dundee; the Dundee City Council Children and Families Early Years Team; two-year-olds who are eligible for a funded nursery place; their parents and carers; Early Years Support Workers (who are attached to NHS Health Visiting Teams); and Dundee's Leisure and Culture Library Service.

All are working together to improve outcomes for young children: the University researching the impact of engaging with the arts on infant well-being, development, and attachment relationships; Children and Families and NHS to improve health and developmental outcomes for all children growing up in Dundee, with a particular focus on those who experience the most challenging circumstances; and the library, who are keen to support and encourage families to use, and be comfortable, in their buildings.

Art at the Start has been developed with families at every stage and successfully delivered in busy nurseries. It has been tested in 12 local authority settings with 54 parents/carers, 57 children and 28 practitioners. It has been an enjoyable experience for all involved with parents and children having moments of connection in the sessions. Relationships between parents/carers and practitioners have been built and strengthened through Art at the Start. Practitioners have developed and enhanced their understanding of early relationships and attachment and they have grown in confidence. Following the project, families were keen to continue connecting whilst making art with their children and responded positively to library art boxes and Art at the Start books made available in local libraries.

Parents appreciated having protected time to play together with their children, away from the stresses and interruptions of daily life. They often commented that they were unaware of the impact of tuning into their child's communications made to brain development and feelings of self-esteem. One parent said, *"good to be able to see what my child liked and didn't like and they were capable of making choices."*

The benefits of Art at the Start are clear:

- for parents and children - improved understanding about communication, better relationships and stronger attachments
- for practitioners and parents - enhanced understanding and relationships
- better use of resources - people, place and physical

The project itself demonstrates just how much more collaboration brings.

The project, now in its third cycle, has made such improvement and development, that it is now intended that Art at the Start be made available to all eligible two-year-olds.

Addressing Priorities

- Actively listening and responding to the voices of children young people and families
- Improving children and young people's health and wellbeing from early years to adulthood
- Improving educational outcomes for all and narrowing attainment and achievement gaps

Collaboration in Dundee

2. Domestic Abuse Capacity Building

In response to high levels of domestic abuse incidents in the city and a disproportionate number of children and young people being placed on the Child Protection Register (CPR) because of associated concerns, the Council coordinated a workforce capacity building and targeted services approach to enable teams to respond more effectively. The Council has the highest rate of domestic abuse incidents in Scotland and at the time of introducing this approach, over 50% of children and young people were on the CPR as a result. It is recognised that domestic abuse traumatises mothers and children, can severely impede childhood development and influence behaviour into adulthood.

The intention is to build the confidence and competence of the workforce in understanding and responding to domestic abuse, whilst developing new services to provide additional support. As such, a dedicated Domestic Abuse Senior Officer coordinates targeted training in Safe and Together and risk assessment models to key teams; provides specialist consultancy advice to partners on types and levels of risk and defensible decision-making; and organises Multi Agency Risk Assessment Conference (MARAC) Meetings for partners to develop safety and support plans for mothers and children identified as high risk.

At the same time, the partnership has developed a Court Assist service providing advocacy support to victims of domestic abuse and delivered the Caledonian Programme to perpetrators and victims of domestic abuse. Wider developments to support vulnerable women and mothers more generally have included the development of the Bella Centre with the Scottish Prison Service; a new multi-agency Women's Hub, where a range of services are delivered; and support to a review of funding arrangements to maximise the sustainability of services in the context of growing financial constraints.

These collaborations have demonstrated and reinforced the Council and partners immediate and long-term commitment to supporting all vulnerable women and children and young people, and tackling the typically male perpetrators of domestic abuse. Over the course of this work, the proportion of children and young people on the CPR as a result of domestic abuse has reduced to 39% and plans to build on this range of work include preventative initiatives such as O'er Fierce Girls; work with young people on concepts of masculinity, identity and relationships; and early intervention programmes for perpetrators.

Safe & Together Briefing Sessions – quotes from practitioners following attendance with their cases

- *“Changing the language I use and the perspective taken when writing reports and assessments. Focus on the behaviours of the perpetrators and partner/align myself with the victim and children to form rapport and create safety plan.”*

Domestic Abuse Complex Case Consultancy Forums

- *“I feel it is a really beneficial forum which I hope is continued. Domestic abuse is such a complex and prevalent issue and I felt validated and supported in my assessment by the forum session. I found it extremely helpful that you are provided the time and space to discuss the family in a multi-agency setting and gather others views and best practice approaches. It highlighted that my gut feeling around the level of coercion and control was significant and allowed me to be part of a multi-agency plan to offer the best support I feel I can. I felt fully supported as some of the language regarding domestic abuse can be difficult to navigate at times.”*

1:1 Case Consultancy Focused work

- *“Due to the complexities of domestic abuse I found it really helpful having someone to talk through my concerns and how best to support the family.”*

Addressing Priorities:

- Improving children and young people's health and wellbeing from early years to adulthood
- Supporting our workforce and families to feel valued, confident and competent

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3. Community Mental Health and Wellbeing Fund for Children and Young People

The Community Mental Health and Wellbeing Fund for Children and Young People (CMHWF) is distributed by Scottish Government to all Scottish Local Authorities. Its objective is for every child and young person in Scotland to be able to access local community services (or out with their community if they prefer) which support and improve their mental health and emotional wellbeing.

In Dundee the Community Mental Health and Wellbeing For Children and Young People team is a varied group of 3rd sector providers who have risen to the challenge of creating bespoke mental health supports and services for the community. This group includes 12 organisations: [Includem](#); [Dundee Carers Centre](#); [Relationship Scotland Tayside and Fife](#); [Parent to Parent](#); [Hot Chocolate Trust](#); [Perth Autism Support](#); [Hillcrest Futures](#); [Tayside Council on Alcohol](#); [Dundee Women's Aid](#); [Dundee Rep Dramatherapy Service](#); [The Speech Language Communication Company](#); and Dundee City Council Community Learning and Development. All of the organisations wanted to respond to local need, were experienced to deliver and had a proven track record of collaboration. Each submitted a funding bid, and all were successful. Indeed all were then re-funded due to high quality evidence submitted by each organisation.

In terms of addressing the priority of improving mental health and wellbeing, 600 children and young people got the help they needed, when they needed it, and from the people with the right skills, knowledge and experience to provide it. And this support was easily accessible, close to their home, education, employment or local community services.

The success of this collaboration includes: numbers accessing and using digital platforms; recorded evidence from young service users; evidence in case studies and data fed back to service users. The CMHWF team received an 'Outstanding Service and Contribution Award' from Dundee City for work done in 2021-22 and received a visit from Maree Todd, as part of Mental Health Awareness Week 2023, to highlight the importance of the wide-ranging interventions supporting Dundee families.

Those involved believe it is replicable and that it provides a valued reflection space for partners to enable them to compare local approaches and make meaningful connections.

This collaboration has enabled many people to regain hope and has shown the care needed when young people children and their families when they are feeling low, have nowhere else to turn or require emotional and relationship support. Additionally, the importance of good mental health is becoming more widely recognised through this work. The reach into Dundee communities is significant, meaningful and much needed.

"When I first came to the service I immediately felt reassured that someone will be there to really listen to me and understand my concerns, without judgements, but more importantly you were able to reflect back the positive behaviours that I already had with my daughter and how I could build on them. It has already helped tremendously in boosting my confidence up within my mother-daughter relationship."

"The service has been amazing. I have used all your advice and I now understand why me and my child think or do the things we do. My relationship is so much better. Thank you."

"Now I understand what feelings my teen is going through. I have felt supported and guided which not only helped my teen helped myself."

"I feel safe here."

Addressing Priorities:

- Improving children and young people's health and wellbeing from early years to adulthood

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4. Together to Thrive

Together to Thrive (TTT) is a collaboration between Mental Health Foundation (MHF), NHS Tayside Child and Adolescent Mental Health Service (CAMHS), Dundee City Council (via the Alliance) alongside 9 third-sector delivery organisations* (Community-based Organisations, or CBOs) and school referral partners**.

TTT is based on a task-sharing model and aims to deliver transformational change in how support is delivered to families. Task-sharing is based on three principles: identification of priority health care needs of the population; training of community-based organisations by healthcare specialists; and ongoing coaching of community-based organisations by clinical specialists. In short, TTT aims to provide early support to parents of children (5 to 11) with neurodevelopmental concerns and prevent of escalation onto the CAMHS waiting list, should this not be required.

The pilot has enabled core infrastructure to be built to support the enhancement model of delivery and to enable ease of access to families looking for support. The model enhances capacity across the system through improved collaboration between organisations and sectors (education, mental health and community) and develops a more integrated infrastructure. All partners recognise that strong collaboration is required between core, delivery, school and community partners who come together with the common aim of better supporting families, children and young people with neurodevelopmental concerns. This collaborative approach is reflected in all aspects of the model, starting with its strategic leadership.

A hugely important element of TTT is its mission to improve whole-family relationships by focussing on how parental self-efficacy is strengthened through relationships with community-based staff who are trained in core areas of concern. Families work *with* TTT and are not delivered to.

Together to Thrive describes many successes in moving towards targets and these include: strong partnership agreements and working relationships; CBO staff trained; a data-led programme of training; a regularly scrutinised working Logic Model; recruitment of two parent/carer sessional workers; a unique referral and monitoring pathway for families; initiation of triage meetings; families directed by schools towards this support pathway; a visit from Maree Todd; and TTT being held up as an example of good practice.

This model of enhancement represents a departure from more traditional approaches to funding models or developing a core team to address a constantly shifting and unpredictably growing public health issue.

TTT demonstrates the enrichment of relationships and the lives of these families in measurable, meaningful ways relating to their feelings of self-confidence. It eases family dynamics, and supports practical parent/carer responses to specific issues experienced by a child.

Addressing Priorities:

- Improving children and young people's health and wellbeing from early years to adulthood

* Includem, Aberlour, Action for Children, Dundee Carers, One Parent Families Scotland, Relationship Scotland Tayside and Fife, Parent to Parent, Barnardo's and Dundee City Council Fostering and Permanent Adoption Service.

** BALDRAGON ACADEMY CLUSTER: Ardler PS, Craigowl PS, Sidlaw View PS, Downfield PS; CRAIGIE HIGH CLUSTER: Rowantree PS, Claypotts PS, Craigiebarns PS; BRAEVIEW ACADEMY CLUSTER: Fintry PS, Ballumbie PS, Longhaugh PS, Mill of Mains PS.

Collaboration in Dundee

5. Addressing Neglect and Enhancing Wellbeing (ANEW)

"It felt good that I got to say my views first. A big weight was lifted. Before I never got the chance to because the workers were always butting in and having their say. It felt good not to be interrupted."

ANEW is an active implementation approach which allows key staff in schools, nurseries and health visiting teams to listen to, engage with and support children, young people and families more effectively. Preparation for the meetings involves buddies for children and relationship building with parents. In the meetings no formal minutes are taken, instead actions are written down collaboratively, in the meeting, in plain view of everyone, and the family take these home with them.

The partners in this initiative are: CELCIS, as an academic partner; schools; nurseries; health visiting teams and of course children and their families. Children and their families are equal partners, and this starts with ensuring that meetings are held at a time and place to suit families. In preparation for meetings children can speak with their buddies, and this can take place in the playground or between classes. At the meeting children can present views themselves or through their buddies, and their views are always heard first, setting the tone of the meeting.

The initiative has had a two-pronged approach: working closely with a small number of schools, nurseries and health visiting teams to work out what needs to change; and developing and sharing guidance applicable to all agencies across Dundee.

ANEW has been a hugely effective, successful early intervention which has improved attendance and allowed children to feel more included, which are pre-requisites to improving educational outcomes. One recent example of this was a primary school pupil whose parent admitted that they would not have attended for at least a further few days due to underlying financial barriers which the parent was able to disclose and the school was then able to help.

The statistics speak for themselves:

- 71% pupils in ANEW sites compared to 35% across primary school average had their views heard in meetings
- 100% of parents who filled in parent questionnaires after their team around the child meeting said they felt listened to during the meeting, and were clear on what happens next
- 87% of parents who filled in the questionnaire felt that the meeting was helpful to them and their family

It is also of interest that ANEW significantly influenced Dundee's local refresh of GIRFEC.

Quotes from families and practitioners about the work (all from different meetings)



Addressing Priorities:

- Actively listening and responding to the voices of children young people and families
- Improving children and young people's health and wellbeing from early years to adulthood
- Improving educational outcomes for all and narrowing attainment and achievement gaps

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4 Lessons Learned and Recommendations

As noted in the Introduction, the 2023-2027 Service Plan states that, *“We recognise that, like all partners, our service operates in a challenging context and believe this invites us to fully concentrate on our shared priorities of reducing child poverty and inequalities of income, education and health; tackling climate change; delivering economic growth; building resilient and empowered communities; and designing a modern Council.”* The Plan incorporates *“actions on how we will support our workforce, how we will work collaboratively with all partners and how we will involve local communities, parents/carers and children and young people continually improving what we do. It also shows how we will shift our focus still further towards earlier, more accessible and better family support.”*

The spotlights highlight the way the Council has changed how individuals and communities are served in Dundee, and how they make the best use of their positive and innovative collaborations.

The spotlights also demonstrate lessons learned which shape their current and future practice:

1. Their people **are** their people: children; young people; their families; and their staff.
2. They work with children, young people, families and communities, really listening to shape support and services with them to create better, more tailored services.
3. They are, and need to be, open and honest about their challenges and they share these challenges with others. First decide what needs to be done and then consider who can help.
4. They know that they alone cannot achieve their desired, indeed required, outcomes. They recognise that they don't have all the expertise and experience, nor do they have the level of human and other resources needed. They understand that by collaborating with others they all get more.
5. They trust partners: know that the best person to do the job is the one with the expertise in that area. They need the best person, or best service to lead and that's not always them.
6. They are creative and innovative, they learn from research and practice, but they also allow time for initiatives to work.
7. They begin with pilots or prototypes, evaluate them, learn from them and then propose and act. This approach allows for innovation, learning and then scaling from success.
8. Learning is at the heart of what they do: for their people (staff and children, young people and families) and is provided by those best to deliver it, which could be their staff, NHS, one of their CBOs or from their children, young people or their families.
9. They act early with innovation and interventions, as demonstrated particularly in the Art at the Start and Community Mental Health and Wellbeing Fund for Children and Young People Spotlights. Acting in this way provides support when it is required.
10. LISTENING is their starting point, and constant throughout, as is building RELATIONSHIPS and creating EQUAL PARTNERSHIPS.

Recommendations

1. Be open and honest about what you need to do.
2. Listen to and work with children, young people, their families, and staff, to shape your services.
3. Seek collaborators and partners who can help.
4. Develop relationships and trust with partners, learn from each other and act as equals.
5. Raise awareness-prototype-evaluate-propose-act.

Collaboration in Dundee

In conclusion, in Dundee they have created an ecosystem, such as that noted in, '[An Ecosystem: What we need for effective collaboration in Scotland](#)': a system which is a community, living and interacting with one other in a specific environment, each part integral, connected by necessity. In this ecosystem there is parity of esteem and easy access to everything within it. As noted above the benefits of their ecosystem are clear: opportunities to share resources and expertise; quick and efficient signposting and easy access to support; avoidance of duplication and creative collaborations. And possibly most importantly the way they are able to promote and develop whole family approaches, and do this **with**, not **to** families.

5 Acknowledgements and References

Acknowledgements

Thanks to the following officers from Dundee City Council who provided detailed information for the spotlights on collaboration.

1. Art at the Start - Lesley Gibb, Education Manager, Children and Families Service, Dundee City Council
2. Domestic Abuse Capacity Building - Yvonne Beattie, Practice Manager, Children and Families Service, Dundee City Council
3. Community Mental Health and Wellbeing Fund for Children and Young People - - Dominic Venditozzi, Project Manager, Children and Families Service, Dundee City Council
4. Together to Thrive - Dominic Venditozzi, Project Manager, Children and Families Service, Dundee City Council
5. Addressing Neglect and Enhancing Wellbeing (ANEW) - Kerstin Jorna, Senior Information and Research Officer, Finance and Support Services, Children and Families Service, Dundee City Council

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['An Ecosystem: What we need for effective collaboration in Scotland'](#) (23 December 2022)

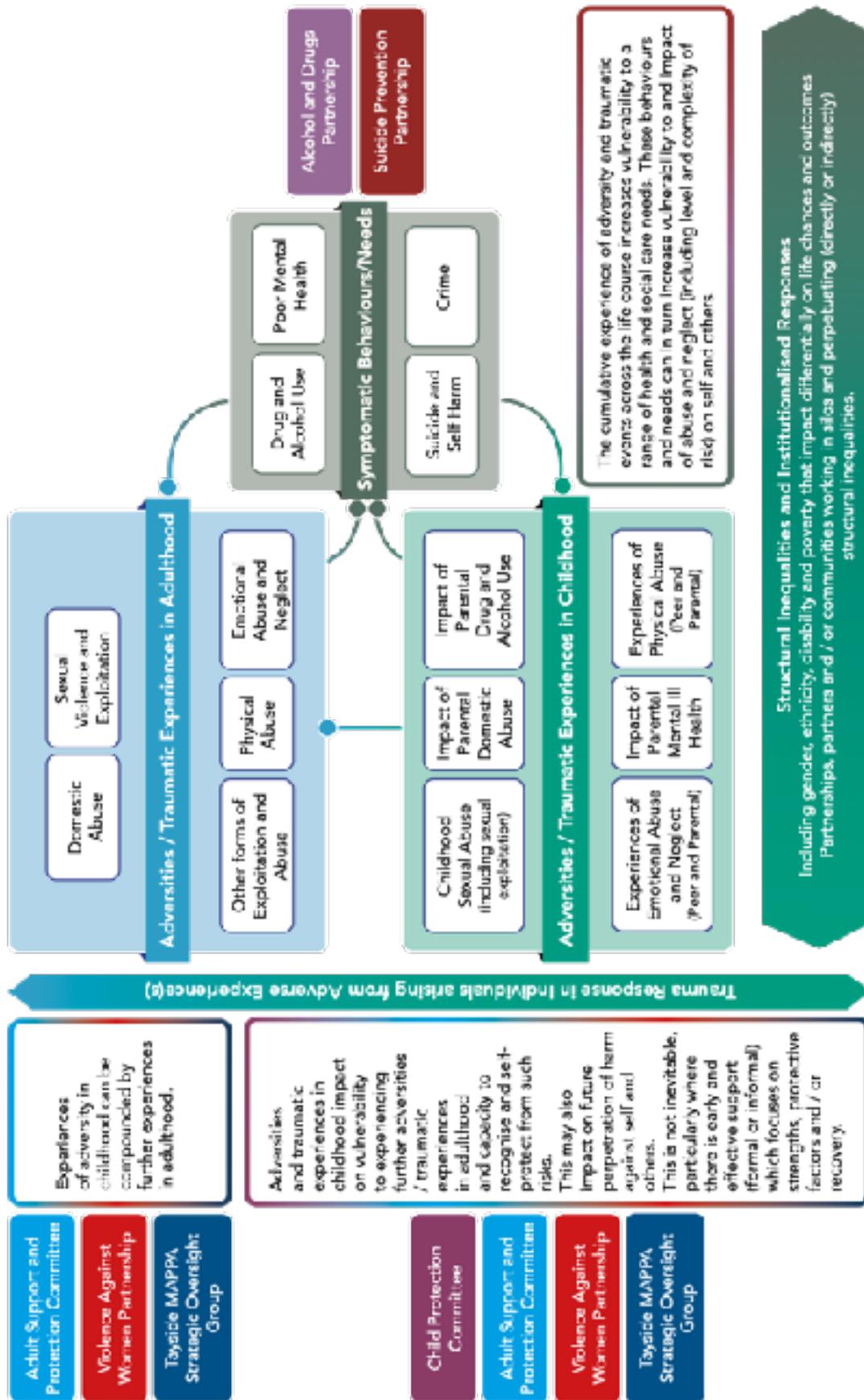
Community Planning Improvement Board presentation, Dundee City Council (9 August 2022)

'Dundee City Council, Children and Families Service Improvement Plan 2019-2022'

'Dundee Performs' Children and Families Service Plan 2023-2027 (June 2023)

['Rapid Evidence Review Summary Report'](#), Children's Services Reform Research, CELCIS (June 2023)

'Report of a joint inspection of services for children and young people at risk of harm in Dundee City', Care Inspectorate (11 January 2022)



What we found

Lack of evidence of models of systems-level integration

The studies we reviewed were based to a large extent on service and team integrations, rather than macro-level system integrations. This means that whilst the evidence may be strong in relation to what works at service-level integration, it gives little information as to the impacts, benefits, and challenges, that may be encountered in system-level integration, thus it does not allow us to draw any firm conclusions or recommendations in relation to large-scale systems integration.

Integration should be viewed as an outcome of a range of components

We confirmed that ‘integration’ as a concept is difficult to define and articulate. The studies’ authors often spoke of ‘integration’ without defining what they meant, what the objectives of integration were or what it aimed to achieve, or how this would be done. This may be because a singular definition of integration is neither straightforward to identify, or perhaps useful, in many contexts.



Figure 1: Components model of integration

Through the process of the review, we developed a ‘components of integration model’ which combines the different perspectives of what integration ‘is’ across the papers.

The value of this model lies in allowing a more nuanced understanding of integration, not as a singular process activity, but as an outcome of a broad range of components, the importance or impact of which will vary within different contexts. It thus allows both the ‘features’ of integration and the ‘activities’ of integration to be incorporated.

The place of shared culture, with committed leadership at all levels

A shared culture with committed leadership at all levels appears to be a significant facilitator for integration.

Strategically, leaders need to drive change and connect with those implementing change. Operationally, the workforce needs time to build new relationships across different professional peer groups and have the support from and confidence of leaders, including managers, to develop new shared ways of working.

Commitment is needed from the early stages of driving change to when integrated structures are more embedded, which take years, not months. Governments need to support transformational reform

Assessing the quality and strength of the evidence

We approached the assessment of the evidence regarding the effectiveness of integration on improving services, experiences and outcomes in two ways: firstly assessing the quality of the evidence presented in each paper and then considering the strength of that evidence in the context of what we found.

Our analysis suggested that the quality of the studies was high. The studies were carried out to a high standard, and we are confident that the findings presented are an accurate reflection of the context and experiences studied. Given the predominance of small-scale qualitative studies and few longitudinal studies that provided data over a significant time period, caution must be taken in assessing the strength of the evidence presented and in generalising these findings to other populations, systems and processes. Where a body of evidence was either particularly strong or had limitations, we highlighted this our review.

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Collaborators

Appendix 3

Art at the Start	Domestic Abuse Capacity Building	
Dundee Library Service (DCC) Early Years Support Workers (NHS) Health Visiting Team (NHS) Nursery Practitioners (DCC) Parent Development Officers (DCC) Parents and carers Two-year-olds University of Dundee	ASPEN Service Barnardo's Dundee Domestic Abuse Service Community Justice Social Work (DCC) Children and Families Service (DCC) Dundee ASSIST Dundee Women's Aid Police Scotland	
Community Mental Health and Wellbeing Fund for Children and Young People	Together to Thrive	Addressing Neglect and Enhancing Wellbeing (ANEW)
Community Learning and Development (DCC) Dundee Carer's Centre Dundee Rep Dramatherapy Service Dundee Women's Aid Hillcrest Futures Hot Chocolate Trust Includem Parent to Parent Perth Autism Support Relationship Scotland - Tayside and Fife Speech and Language Communication Company Tayside Council on Alcohol	Aberlour Action for Children Ardler Primary School Ballumbie Primary School Barnardo's Claypotts Primary School Craigiebarns Primary School Craigowl Primary School Downfield Primary School Dundee Carers Dundee City Council (via the Alliance) Dundee City Council Fostering and Permanent Adoption Service Fintry Primary School Includem Longhaugh Primary School Mental Health Foundation Milo Mains Primary School NHS Tayside CAMHS One Parent Families Scotland Parent to Parent Relationships Scotland - Tayside and Fife Rowantree Primary School Sidelawview Primary School	Children and Families (DCC) CELCIS Dundee East Health Visiting Service (NHS) Education and Social Work (DCC) Tayside East Health Visiting Service (NHS) Third Sector Representative