



care
inspectorate

Joint inspections of services for children and young people at risk of harm

**Review of findings from the joint inspection
programme 2021 – 2025**

26 August 2025



Foreword

This report is a review of the findings of joint inspections of services to children and young people at risk of harm. These were carried out in **community planning partnerships** in 15 local authority areas across Scotland, undertaken between 2021–2025. We are grateful to our young inspection volunteers, our associate assessors and our scrutiny partners (Healthcare Improvement Scotland, His Majesty's Inspectorate of Constabulary for Scotland and Education Scotland) who supported us in these joint inspections.

We are also grateful to the children, young people, family members, staff and leaders from across Scotland who took part in our joint inspections.

Since the previous overview report of the findings of joint inspections for children and young people in need of care and protection, 2018–2020, we have noted many improvements in the outcomes experienced by some children and young people and their families. These are welcome and demonstrate a significant commitment on the part of staff and leaders across services.

Although not every child or young person was experiencing positive outcomes, we hope the messages in this overview report can allow partnerships the opportunity to reflect on the differences services in their area are making to the lives of children, young people and the families they support.

We acknowledge that all partnerships found the context of their delivery of services a challenge. Following a difficult period brought about as a result of the impact on services of the Covid-19 pandemic, partnerships have continued to experience challenges brought about by additional factors. These have included an increasing volume and complexity of demand on services, crises in housing, finance and the cost of living, poverty and deprivation and an increase in requests for support in relation to mental health and wellbeing. A challenge in the recruitment and retention of qualified and experienced staff across some sectors has also compounded these challenges.

Without further national attention, all partnerships will continue to be limited in the impact services, however well delivered, can have on children and young people at risk of harm.

We welcome, however, the improvements we have already seen and we hope the findings from this report can assist partnerships in their self-evaluation work and in continuing their improvement planning and service development.

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Key messages

The key messages have been aggregated from our joint inspections. They cannot reflect the experiences of all children, young people and their families.

Key message 1

Effective responses and early recognition of risks by staff were helping to keep many children and young people safe. Staff were confident and competent at identifying a range of concerns for children and young people. The persistence, however, of the risks to children and young people posed by domestic abuse across Scotland, means it is imperative that all partnerships continue to prioritise collaborative responses to this.

Key message 2

The provision of early help and support to prevent harm was a strategic priority in almost all partnership areas we inspected. This support had made a positive difference to children and their families in these partnership areas.

Key message 3

The identification and response to concerns raised about an older young person in the community, or concerns if they were a risk to themselves or others, were not consistently effective. Overall, staff's response to concerns was more robust for younger children subject to abuse and neglect.

Key message 4

Staff across all partnerships had invested significant time and effort into building and maintaining strong, positive relationships with the children and young people they supported. These relationships were built on an understanding of trauma informed practice and a strong values-based culture of involving families in decisions made about their lives. The majority of children, young people and families we heard from appreciated the relationships they had with staff.

Key message 5

Outcomes for children and young people in relation to their mental health remained a significant challenge for staff to address. This, coupled with an increasing complexity of need and a difficulty in access and availability of suitable resources, meant that staff across partnerships were not confident these outcomes were being met, despite their efforts to do so.

Key message 6

We saw a correlation between how well partnerships involved children and young people, and the evaluation given for the impact of services on them. While the majority of children and young people were listened to in their individual care planning and support, this was not consistently the case when it came to how well

their views influenced service developments. The views of children and young people were more readily sought if they were care experienced than if they were involved in protective processes.

Key message 7

Staff, overall, reported more confidence in their immediate first line managers rather than strategic leaders. However, we noted clear links between staff's confidence in strategic leadership, systematic approaches to quality assurance and improved outcomes for children and young people.

Key message 8

Effectiveness in the gathering and analysis of quantitative and qualitative information about the impact of services, and feedback from children and young people about the differences services were making, were clear areas for improvement across most partnerships. This was also the case for how partnerships sought and used the views of children and young people to develop wider children's services planning.

Key message 9

We undertook some joint inspections during the period of the Covid-19 pandemic. In these, we found the quality of collaborative responses to risk to children and young people was effective in the majority of cases. We also heard many examples of staff going above and beyond their remits to ensure vulnerable families were helped. Staff also told us how well supported they had felt from their immediate line managers and colleagues across services during this challenging period.

Key message 10

We continued to see an improved picture in relation to our evaluation of key processes of assessment, planning and reviewing the care and support for individual children and young people, although we still saw variability in quality. The quality of chronologies in supporting effective decision making remained inconsistent.

Key message 11

Not all children and young people were benefitting from equity of availability or access to independent advocacy. The extent to which independent advocacy provision was embedded varied across partnerships. This meant that, for some children and young people, they had limited means of fully expressing their views to someone independent of decision-making processes in their lives.

Key message 12

Levels of poverty and deprivation across many areas challenged partnerships' ability to address an increase in the volume and complexity of concerns about children and young people. Without further national attention, the wide-ranging impact of these issues will continue to hamper the efforts of staff to effectively sustain improvement

in addressing the holistic needs of children and young people at risk of harm and their families.

A summary of key points from quality indicator 2.1 and the four statements can be found in Appendix 3.

Previous joint inspection programme

In September 2020, the Care Inspectorate published the overview report of [joint inspections of services for children and young people in need of care and protection 2018 – 2020](#). This report summarised learning from the joint inspections of eight community planning partnership areas. These joint inspections considered the differences services were making to the lives of children and young people in need of protection and those for whom partnerships had corporate parenting responsibilities. These findings can be found in Appendix 1.

Covid-19 pandemic response

In March 2020, the global Covid-19 pandemic impacted on all sectors and aspects of society. Throughout Scotland, staff and leaders of children's services had to respond to an unprecedented situation and find innovative ways to continue to support children and families within ongoing and frequent changes to the legislative and practice environment. The wider impact of this is still being experienced by children, young people and families, for example in accessing services that remain impacted by continuing challenges. These include delays and reductions in service provision, financial pressures, services which face recruitment and retention challenges, demographic changes and an increase in the complexity and volume of demand on services.

In response to the pandemic and feedback about previous joint inspection processes, we reviewed our scrutiny framework for joint inspections to ensure we continued to provide public assurance while trying to reduce the impact on partnerships already challenged by the pandemic.

Some of the changes to our approaches included:

- a narrower joint inspection focus
- an emphasis on hearing from children and young people
- undertaking some scrutiny activities virtually and holding some hybrid sessions
- smaller inspection teams on site and only when necessary
- a shorter and more streamlined inspection methodology
- reduction in the requests we made of partnerships
- additional exploration of the impact of the pandemic on service delivery.

We have continued some of these aspects through our delivery of current joint inspections, where they offer the optimum approach to partnerships, without compromising on inspection integrity.

Joint inspection programme 2021–2025

We refocussed our inspection activity to joint inspections of services for children and young people at risk of harm. This methodology enabled us to focus on children and young people up to the age of 18 years who needed support due to being at risk of harm from abuse or neglect. This included children and young people who presented a risk to themselves and/or others, or who were at risk within their communities.

We carried out 15 of these joint inspections between 2021 and 2025. These took place in Dundee, West Dunbartonshire, North Ayrshire, East Renfrewshire, Highland, Aberdeenshire, East Dunbartonshire, Scottish Borders, North Lanarkshire, Moray, East Lothian, Renfrewshire, Angus, East Ayrshire and Glasgow. Two of these joint inspections (West Dunbartonshire and North Ayrshire) did not include all scrutiny activities because the timing of these linked with pandemic restrictions. With the support of the partnerships and scrutiny partners, we were able to adapt our approaches to gain sufficient evidence to reach confident conclusions about the effectiveness of services for children and young people at risk of harm in these areas. In a further two partnerships, we carried out bespoke work. This included two progress reviews in Orkney to provide assurance about ongoing improvement activity. In Clackmannanshire, we undertook a focussed programme of self-evaluation and improvement work. For the purpose of this report, we use only the evidence gained from the 13 full joint inspections, as this provided the broadest picture of the effectiveness of services for children and young people at risk of harm.



This report explores the key findings across these 13 full joint inspections. More information about our approach to inspection is available in our [Guide](#). Each individual inspection report is available [here](#).

Using our [quality framework for children and young people in need of care and protection \(QF\)](#), we reported on the extent to which the partnership could demonstrate that:

1. Children and young people are safer because risks have been identified early and responded to effectively.
2. Children and young people's lives improve with high quality planning and support, ensuring they experience sustained loving and nurturing relationships to keep them safe from further harm.
3. Children and young people and families are meaningfully and appropriately involved in decisions about their lives. They influence service planning, delivery and improvement.
4. Collaborative strategic leadership, planning and operational management ensure high standards of service delivery.

For each of the 13 joint inspections, we evaluated one quality indicator from the above framework: Quality Indicator 2.1 the impact on children and young people.

Our evidence base

733

children and young
people completed
surveys

556

parents/carers
completed
surveys

960

children's
multi-agency
records reviewed

10,968

members of staff
across agencies
completed
surveys

We met **300**
children and young
people and

253
parents/carers

We met
with over

1,500
members of
staff

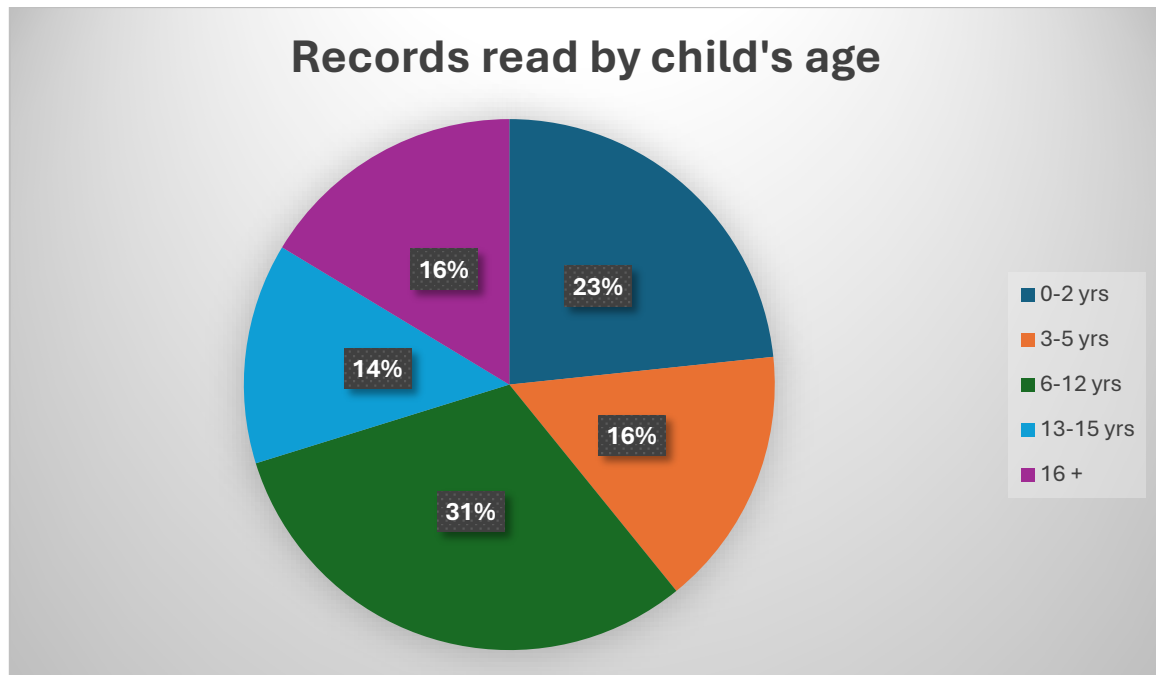
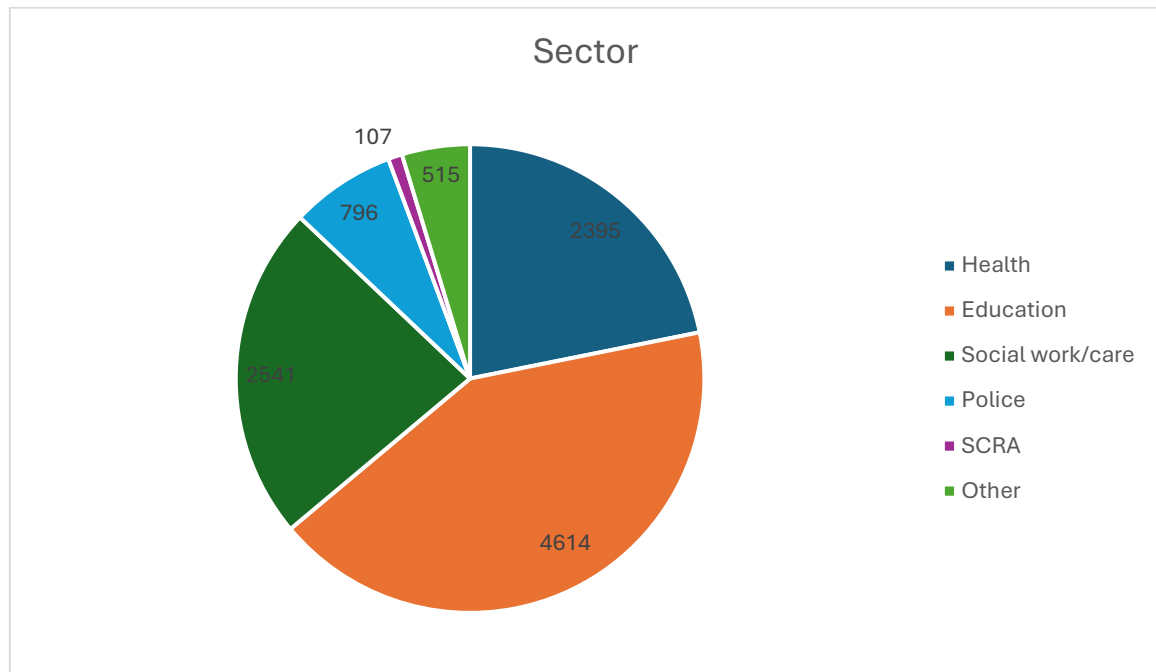
We reviewed
data relating to

15
partnerships

We reviewed
a wide range of
written
documents

We reviewed

15
position
statements

Records we read**Staff surveys we received**

Part A: Our findings

Quality indicator 2.1: Impact on children and young people¹

In this series of joint inspections, we evaluated one quality indicator – 2.1: impact on children and young people. Throughout our inspection activities, we gathered a wide range of evidence to enable us to make an evaluation of the extent to which children and young people at risk of harm:

- felt listened to and had their views taken seriously when decisions were being made
- felt staff had taken the time to get to know them and understand them
- enjoyed good relationships, built up over time with consistent adults who they trusted
- felt they were in the right place to experience the care and support they needed
- experienced improvements across the wellbeing indicators.

We gave an evaluation for this quality indicator in 13 out of the 15 partnership areas. Of these, 11 were evaluated as ‘Good’ or above (85%), with one partnership area evaluated as ‘Excellent’. This was an improvement on the previous joint inspection programme where 75% were evaluated as ‘Good’ or above, and none were evaluated as ‘Excellent’ for this quality indicator.

What worked well

In the six partnership areas that we evaluated as ‘Very Good’ or ‘Excellent’ for impact on children and young people, there were some common strengths which led to positive impact in the lives of children and young people receiving services.

- Relational practice - children and young people had enduring and trusting relationships with key members of staff which helped improve their safety and wellbeing. Staff demonstrated **trauma informed practice**.
- Rights focused practice - children and young people were well supported to understand and exercise their rights and had an adult they could trust and speak to. The **United Nations Convention on the Rights of the Child (UNCRC)** was embedded in a culture of listening to children and young people.
- Availability of services – the right services were available at the time when they were needed and complemented **universal services**. We saw good examples in targeted educational provision, health and wellbeing supports, and provision from both statutory and third sector organisations.

¹ A table outlining our evaluations is presented in appendix 2.

- The importance of being heard – children and young people felt listened to, heard and included in individual **children's planning meetings** and other key processes.
- The importance of being involved - children and young people were enabled to, and did, contribute to service development. The positive impact was both for those children and young people and for others receiving support.

What partnerships found challenging

We noted the following common themes where improvements should be made in the impact partnerships have on children and young people.

- Accessibility of services – the right support at the right time was not always available to children, young people or families. As a result, not all children and young people benefited equally from services. This meant that not all children and young people who needed a service, received it, resulting in limited or no improvements in their lives.
- Consistency in relationships with staff - some children, young people and families experienced a lack of consistency in staff involved in supporting them. Children, young people and families found frequent changes in staffing a barrier to relationship building or enabling improvements in their lives.
- Access to independent advocacy - children and young people at risk of harm did not always have access to independent advocacy services and this reduced their ability to speak freely with an individual not involved in key decisions in their lives.
- Supporting older young people – the quality of responses to older young people who presented a risk to themselves or were at risk of harm in the community was too variable across partnerships.
- Involving children and young people – the views of parents and carers were more regularly sought than those of children and young people. When children's and young people's views were sought, this happened more readily with care experienced young people than those in protective processes.
- Influence of children and young people – not all areas had a systematic process in place for ensuring the voices of children and young people influenced service planning.
- Feedback – there was a focus on process-related performance data and information, rather than sufficient weight being given to the collation and analysis of qualitative indicators including feedback from children and families.
- All partnerships found the context of their delivery of services a challenge to a greater or lesser extent. This included the volume and complexity of demand on services, crises in housing, finance and the cost of living, poverty and deprivation and an increase in requests for support in relation to mental health

and wellbeing in particular. All partnerships described the challenges inherent in a context of reducing finance and resources compounded with difficulties with staff recruitment and retention.

Statement 1: Children and young people are safer because risks have been identified early and responded to effectively.

“The safety and wellbeing of children and young people, including unborn babies, is paramount. Our children and young people have the right to be protected from all forms of harm and abuse.”

National guidance for child protection in Scotland (2021).

Prevention

In almost all partnership areas, we reported that the provision of early help and support to prevent harm had made a positive difference to children, young people and their families. Early help included joint working with third sector organisations and universal services in local communities. Examples included targeted educational support, financial and practical provisions and wellbeing approaches, all with the aim of delivering early support to prevent escalation of need. When this worked best, staff at all levels and across agencies demonstrated a joint approach to delivering family support. Throughout our inspections, we saw local partnerships prioritise early help and this was often linked to strategic approaches to keep ‘**The Promise**’ which highlighted the importance of early support being readily available to families.

In some inspection reports, we highlighted particular joint approaches from a range of agencies delivering community-based supports which had helped to address need at an early stage and prevent the need for involvement in protection systems. Some areas had embarked on ambitious transformation programmes with the aim of re-directing support towards prevention and early family support. At the time of inspection in these areas, it was too early to tell the impact of these approaches. It was important that partnerships considered how they would evaluate the impact of the new approaches they were taking in order to demonstrate the difference this was making to children, young people and their families.

Over three quarters of staff who completed our survey agreed that the ‘**Getting it right for every child**’ (GIRFEC) approach had made a positive difference to children’s lives. Staff told us that GIRFEC helped to promote a shared language and culture and helped them work with colleagues across agencies. We saw this in almost all areas in the collaborative approaches staff took across agencies to support families by identifying and responding to need at the early help stage. Over this inspection programme, only one third of staff who completed our surveys felt that children and young people were living in the right environment to experience the care and support they needed. We also noted the on-going impact of poverty on the lives of children and their families in many communities throughout Scotland and highlighted the importance of partnerships continuing to target local and national resources to address poverty and deprivation. In all partnerships, we saw strategic plans which aimed to address poverty and deprivation in communities through a collaborative approach across services. We acknowledge the long-term nature of this work but recognised the efforts partners were already making to address this.

Without local and national improvements in tackling poverty, deprivation and inadequate housing, the efforts of partnerships to improve the wellbeing and life chances of children and young people at risk of harm are being hampered.

Recognition and response to concerns

In our review of findings from the inspection programme 2018 - 2020, we reported that most partnerships demonstrated effective and prompt responses when concerns were initially raised about children and young people. In this most recent programme of joint inspections, this remained an area of strength across all of the partnerships inspected, although in some areas, the response was more effective for younger children than older young people.

Overall, we evaluated the initial response to concerns as ‘Good’ or better in over three quarters of the records that we read. Information was being effectively shared across agencies and decisions about next steps were clearly recorded. **Child protection committees** prioritised single and multi-agency child protection training and staff told us that this had helped build their confidence in identifying concerns and taking action to respond.

In the few partnerships in which this was an area for improvement, there were several contributory factors, some of which remained the same as those reported in the previous overview report. For example, staff in some partnerships responded more robustly to concerns about younger children than older young people. We also noted that, in a few areas, concerns were addressed individually, rather than several incidents being identified as cumulative harm and addressed as such, with a collaborative approach across all relevant agencies. In some areas, efforts to address issues such as domestic abuse were still developing at the time of the inspection, which meant that it was too early to tell whether there had been a significant impact on reducing the harm to children and young people posed by this issue. Police Scotland² reported an increase in domestic abuse incidents in 2023-24 for the first time since 2021. Domestic abuse remains the most common concern identified at children’s planning meetings, resulting in children’s names being placed on the child protection register³. It is imperative, therefore, that all partnerships continue to consider collaborative responses to this – and other prevalent issues impacting on response to concerns.

Staff confidence and competence

Our staff survey responses overwhelmingly showed that staff, across Scotland and across agencies, felt they had the knowledge, skills and confidence to report concerns about children. In almost all our inspection reports we highlighted this as a key strength. Staff knew the practice standards expected of them and were supported to be professionally curious in their work. Most were well supported by supervision arrangements and spoke highly of the support they received from direct line managers.

² Scottish Government: Domestic Abuse: Statistics recorded by the Police in Scotland 2023-24

³ Children’s Social Work Statistics 2023 - 2024 – child protection

One aspect that supported staff to recognise and report concerns was having robust guidance, procedures and protocols in place. Following the publication of the National Guidance for Child Protection in Scotland (2021), we increasingly observed partnerships working towards embedding this in practice. We saw collaborative efforts to develop approaches such as the **Bairns Hoose model** and the **Scottish child interview model**, although developments were at different stages across partnership areas. Almost all staff who spoke with us about these developments felt strongly that they would improve practice in relation to the involvement and participation of children and young people and in ensuring their voices were better heard in key processes. As long term cultural, as well as procedural change, we would expect to see the impact of these in the next inspection programme.

Learning and development opportunities also contributed to staff confidence, with almost all staff who completed our surveys reporting that these had increased their confidence in supporting children, young people and families. As our inspection programme progressed, we saw a steady increase in the percentage of staff who reported this greater confidence. This might also be indicative of the increase in opportunities for face-to-face training afforded by the ending of the restrictions which had been put in place during the Covid-19 pandemic.

Responding to concerns

We evaluated the quality of follow-up to concerns as ‘Good’ or better in most records that we reviewed over the joint inspections.

Inter-agency referral discussions (IRDs), as outlined in the National Guidance, are the multi-agency meetings in which child protection concerns for unborn babies, children and young people are considered by staff from Police, Health and Social Work. In three quarters of records that we reviewed, IRDs were held to consider and make decisions about next steps. Where these were held, they effectively and consistently brought together staff from these agencies and, at times, education staff, to make clear and timely decisions about child protection proceedings.

While IRDs were identified as areas of strength for most partnerships, there were also some inconsistencies about thresholds and timings in relation to when they were held. For example, IRDs were not always held where concerns arose from an accumulation of incidents of risk or potential risk; or where concerns were about neglect, unborn babies or older young people. When IRDs worked particularly well, we noted that there were robust quality assurance processes in place to help partnerships assure themselves of the quality of the IRD process, decision making and outcomes.

Staff worked well to plan and carry out protection investigations. The Scottish Child Interview Model had been introduced in many partnerships to ensure the experience children and young people had of being interviewed was carried out in a trauma-informed way. This meant that interviews were carefully and sensitively planned and took place at the child’s pace. We also saw examples of the ways in which the values of Bairn’s Hoose, such as the provision of child-centred and trauma-informed

support, had started to make a positive difference in the lives of some children and families.

Initial multi-agency meetings - typically child protection planning meetings - brought together families and staff across agencies to make decisions about whether children's or young people's names required to be placed on the child protection register and about next steps to keep them safe and reduce any further risk of harm. In the records that we read, the quality of the follow-up to concerns was evaluated as 'Good' or better in just under two thirds of records, and the quality of the initial multi-agency meeting was 'Good' or better in just over half of records we read. While there is room for improvement, we noted that there was routine and effective involvement of representatives from social work, police, education and health. Parents were also included in meetings. Across all records, the majority of children and young people who could have contributed to initial multi-agency meetings, did so, although this was variable in individual inspections.

Identifying and responding to concerns about unborn babies or very young children

When partners had concerns about unborn babies or very young children, the multi-agency response was timely and robust in most partnership areas. There were suitable protocols in place for reporting concerns. This group of children were more likely to be subject to good quality child protection planning meetings and, in some areas, more likely to be subject to child protection registration than other age groups. However, there was less likely to be an IRD held to discuss risks for these young children than for other age groups. The main reason we noted for this was that staff used a different route or pathway, other than the IRD process, for sharing information and planning a response. Performance was enhanced where quality assurance processes were in place to ensure that, regardless of the process used, effective responses and decision making were taking place for this group of very young children.

Identifying and responding to concerns about older young people

In our review of findings from the inspection programme 2018- 2020, we noted that staff were more likely to identify risks of significant harm for younger children than for older young people and follow-up responses were better for younger children. In this inspection programme, we reviewed partnership responses to concerns about young people who were at risk in their communities, who were at risk of harming themselves (for example through self-harming), or the small number of young people who posed a risk to others.

Overall, partnerships had made some progress towards ensuring effective identification and response to concerns about these young people. However, it remained the case that the identification and response to concerns in the community or concerns that a young person was a risk to themselves or others, was not as robust as that for concerns about younger children. Partnerships were working hard to ensure there were joint responses to these types of concerns, however, this was not always as effective as it should be. Some areas had better developed and

embedded '**care and risk management**' or 'vulnerable young person's processes' than others and there were some examples of **contextual safeguarding** approaches that had worked well for some young people. Regardless of the route through which concerns about these older young people were addressed, staff benefitted from the opportunities to formally meet together, identify and discuss risks and jointly plan a response. We concluded, however, that more needed to be done in all partnerships to ensure the joint response to concerns about this group of young people was consistently effective in reducing risk of harm.

Statement 2: Children and young people's lives improve with high quality planning and support, ensuring they experience sustained loving and nurturing relationships to keep them safe from further harm.

The key processes of assessment, planning and reviewing are the “essential tasks and actions undertaken by staff in their professional relationship with children and young people that form the bedrock of practice.”

A Quality Framework for children and young people in need of care and protection (November 2022).

Key processes

Across the joint inspections, we reviewed the records of 960 children and young people at risk of harm.

Most staff were knowledgeable and had the skills and confidence to assess and analyse risk and need. Almost all records had an assessment that considered risk and need and most of these were multi-agency. Only a small number of records did not contain an assessment. Of those that did, the majority of assessments were evaluated as ‘Good’ or better. This was an improved picture from our review of findings from the joint inspection programme 2018 – 2020. In that report, we noted that assessments were not as robust as they could have been in almost a quarter of the areas inspected.

Almost all records had a chronology, the majority of which were multi-agency. We saw a broadly similar picture to the quality of chronologies recorded in the report of the joint inspection programme 2018-2020 in which under half of chronologies were evaluated as ‘Good’ or ‘Very Good’. While we saw several examples of training and development opportunities for staff to improve the quality of chronologies to support decision making, the quality of these remained persistently variable. The “essential purpose of the chronology is to draw together important information and assist understanding, highlighting early indications of emerging patterns of concern”⁴. It is, therefore, important that the collation, analysis and use of multi-agency chronologies is given sufficient attention in order to enhance the decision-making process. We welcome the priority workstreams of the national public protection leadership group. In particular, the work of the national chronologies subgroup to review the good practice areas, challenges and opportunities to improve this area of practice. Most records contained a child’s plan, nearly all of which were multi-agency. Staff confidence in preparing an outcomes-focussed care plan, however, varied across partnerships from under half in one partnership to over three quarters in another. Despite this variable confidence, over half of child’s plans were evaluated as ‘Good’ or better. This represented an improvement in the quality of plans from the overview of our previous joint inspection programme, in which one in four plans were evaluated as ‘Adequate’ or less.

⁴ Care Inspectorate ‘Practice Guide to Chronologies’ (2017)

In the majority of records, there was evidence that reviews had taken place, albeit a small number of those had not been carried out within expected timescales. Of these reviews, three quarters were evaluated as 'Good' or better. This was also an improving picture in the quality of reviews from the previous joint inspection programme.

Overall, in terms of key processes, we saw improvements across assessment, planning and reviewing processes from the previous joint inspection programme. Of these processes, reviewing was strongest, suggesting a growth in staff confidence and competence from the initial response stage.

Relationships

Three quarters of children and young people, and almost all parents or carers, had had opportunities to develop relationships with key members of staff. The majority of children and young people told us their worker spent time with them and gave them the help they needed all or most of the time. Where contact occurred during the Covid-19 pandemic, the majority of children and young people felt they had had enough contact with their worker, but just under a third of parents and carers felt this contact was enough for their child. Three quarters of children and young people and parents and carers also told us children got the right help to make and keep supportive relationships with the people they cared about.

In the majority of partnerships, we reported on the strength of relationships between children and families and the professionals who supported them. We noted a correlation between this as reported in children's and parents'/carers' survey responses, positive record reading results and embedded cultures of listening to children and young people.

In half of the joint inspections, we commented on the role of independent reviewing officers in supporting relationships and intervention with children and young people and their families. This represented an increase, from the previous joint inspection programme, of the prevalence of these independent roles. Where we commented on these roles, we noted their enhanced remit in ensuring children, young people and families were routinely supported and engaged in key processes. Officers were providing appropriate challenge, objectivity and accountability for decision making processes.

Effectiveness of work to reduce risk

The majority of staff were confident that effective processes were in place to prevent or reduce risk of abuse or neglect for children and young people. Most children and young people told us they felt safe where they lived. Just over half of parents responding to our survey told us they found the involvement of services helpful and that workers had communicated with them well to help them understand what needed to change to keep their children safe. However, the majority agreed that their children were safer as a result of the help received.

We assessed the effectiveness of work undertaken to reduce risk and noted that this was most effective where there was an immediate concern about abuse or neglect or where the risk to the child arose from the parents' or carers' circumstances or behaviour. Where the child or young person was at risk of harming themselves or others, or at risk in the community, responses were less effective.

While on an aggregated basis, these findings are positive and are an improvement on the last inspection programme, we reported significant variability across individual partnerships in addressing different types of risk. In the main, the quality of the response to address immediate risks of abuse and neglect was evaluated better than the response to other risks to the child or young person. These findings indicate that, overall, staff felt more confident, and were more competent, at undertaking work to reduce immediate risk from abuse and neglect or from parents'/carers' circumstances or behaviours, than other types of risks presented. When aligned with findings from overall inspection activity and feedback from staff, parents, children and young people, we can see that the response to addressing immediate risk was better than the response to cumulative or extra familial harm.

Towards the latter part of the joint inspection programme, we started to note an increase in partnerships that had implemented, or were actively considering implementing, contextual safeguarding approaches. We commented positively on the impact of these approaches where they occurred in supporting collaborative working to reduce risk of extra familial harm.

We noted, in all inspections, that the area in which partnerships found the greatest challenge in addressing children's needs was in relation to mental health and wellbeing. This was also the area in which staff felt the least confident that children's outcomes were improving. All partnerships had seen an increase in referrals relating to this and, as a result, most faced significant issues of capacity, resulting in many children's or young people's needs not being met in relation to their mental health. In our staff survey, we asked staff how confident they felt that children's outcomes were improving. Only around a third of staff were confident that they were. Even in the partnerships in which we saw the strongest performance in this area, just over a half of staff felt confident in this area of practice. We acknowledge the significant efforts of staff to support children and young people with mental wellbeing concerns. However, the increase in more acute mental health issues, coupled with national delays and waiting lists for formal child and adolescent mental health services, means that this remains a significant area for development across partnerships.

Challenges in issues relating to mental health for children and young people were, and remain, a national issue.

Statement 3: Children and young people and families are meaningfully and appropriately involved in decisions about their lives. They influence service planning, delivery and improvement.

“Children must be listened to. This means they should be meaningfully and appropriately involved when decisions are made about their care. And it means everyone involved in their care should listen properly to them and respond to what they want and need. Scotland’s culture of decision making must be compassionate and caring. It must be focused on children and those they trust”. (The Promise)

“Every child has the right to express their views, feelings and wishes in all matters affecting them, and to have their views considered and taken seriously.”

Article 12 (United Nations Convention on the Rights of the Child).

Involvement of children and young people at risk of harm

During our joint inspections, we asked children, young people and staff to tell us about the extent to which children and young people were meaningfully and appropriately involved in decisions about their lives. We also gathered information about this during our record reading activities.

We found a strong correlation between the extent to which children had been listened to, involved and included and how we evaluated the partnership’s impact of services on children and young people. The better that partnerships listened to and included children and young people, the more likely they were to have a better overall evaluation of impact.

In almost all of our inspections, we recorded a positive key message about children and young people being asked for their views and the way in which this contributed to decision-making. Around two thirds of staff reported that children and young people were able to participate and have their views heard. Most children and young people that we heard from told us that they felt their worker listened to their views and opinions. We saw examples of creative tools and approaches being used to gather the views of, and hear from, children and young people, including those with quieter voices.

While we noted many positive findings, there was also room for improvement, particularly in how this was consistently demonstrated by all staff across all agencies.

Across our record reading activities, we evaluated the ways in which children and young people were included as ‘Good’ or better in two thirds of records we read. However, this varied in individual inspections, with this figure ranging from under one third in one partnership to almost all in another. Only half of the children and young people who we would have reasonably expected to be supported to attend their meetings did so. The views of older young people were more evident than those of younger children and overall, parents’ and carers’ views were more likely to be

included in child protection investigations than children's views. They were also much more likely to contribute to meetings than children and young people. Therefore, while we have seen improvements in how staff include and listen to the views of children and young people, it is how staff include the views of parents and carers which remains more frequently evident.

Independent advocacy

Across all of our joint inspections, around three quarters of children and young people who completed our surveys told us that they had someone who had explained their rights to them and most said they had someone to help them to express their views. However, not all children and young people had suitable access to well-embedded independent advocacy. This was an area for improvement highlighted in the majority of our inspection reports. Less than half of staff who completed our staff surveys agreed that independent advocacy was available in their area. Even in the areas that performed the best in this aspect of practice, less than two thirds of staff knew about the availability of independent advocacy services. In areas where independent advocacy was available to children and young people at risk of harm, it was not always being used effectively or consistently. In particular, we commented on the importance of:

- staff awareness and understanding of independent advocacy and the benefits this may have for children and young people at risk of harm
- a strategic approach and clear commissioning arrangements
- gathering and using information about the uptake and impact of independent advocacy support and using this to inform service planning and delivery.

Partnerships in which there were strong and well-established independent advocacy arrangements for children and young people at risk of harm also demonstrated effective leadership, commissioning and reporting arrangements and were able to demonstrate the difference independent advocacy made to the lives of children and young people.

Influencing service planning, delivery and improvement

While the majority of children and young people had opportunities to shape decisions about their own care planning, there was more limited evidence of their views being used to shape wider service developments. Overall, more action was needed to consistently gather, collate and use the views of children and young people at risk of harm and their families to influence children's services planning.

Partnerships found it easier to provide evidence of how the views of care experienced children and young people influenced strategic planning than the views of children and young people involved in protective processes. There were good examples of how **champions boards**, or equivalent groups, had influenced various developments included in our reports. However, it was more challenging to find examples of how children and young people involved in protective processes had influenced service developments.

Leaders, managers and staff expressed a commitment to hearing from children and young people and parents and carers and had aspirations to do this. However, systematically, there was not always a strategy or agreed means to making this happen for children and young people at risk of harm. The ability to gather quantitative and qualitative information about the impact of services and feedback from children and young people about the differences services were making in their lives was a clear area for improvement across all partnerships.

Children's rights and voice

Over the course of the four year period encompassed in this report, the Promise Plan and incorporation of the UNCRC into legislation have increasingly become key drivers for national and local policy developments. This has added impetus to the importance of amplification of the voices and experiences of all children and young people. While we saw some evidence of this in our first few joint inspections, by the end of the inspection programme, we increasingly saw the impact of these drivers on strategic approaches. More and more strategic plans held this as a central focus and a clear commitment.

By the end of our reporting period, partnerships demonstrated a strong understanding of the need to take a strategic approach to ensure children and young people's views, feelings and wishes were considered and taken seriously, as outlined in article 12 of the UNCRC. Examples of strategic approaches taken included a 'voice sub-group' of one child protection committee; a 'voice task group' in a children's services partnership, the embedding of children's rights in schools and the focus on the UNCRC charter in another. In other areas, children's rights officers were actively promoting feedback from children and young people at the strategic table. These approaches had helped to shine a light on the importance of hearing from, and listening to, children and young people at risk of harm.

Almost all areas, however, had more to do to continue to ensure that children and young people at risk of harm had a strong and consistent voice and influence at a strategic planning level. A continued focus on the Promise Plan and UNCRC workstreams will help partnerships develop this further.

Statement 4: Collaborative strategic leadership, planning and operational management ensure high standards of service delivery.

“Strong and sustained leadership of practice is a critical aspect of leadership of strengths-based ways of working.”

Social Care Institute for Excellence, 2022.

“Chief officers for public protection are responsible and accountable for improving the experience of, and outcomes for, children and adults who may need protection.”

Chief Officers Public Protection Induction Resource, 2023.

In this joint inspection programme, we reviewed both strategic leadership of services for children and young people at risk of harm, and the operational management of those services. This was a different focus from the previous joint inspection programme which focused on collaborative strategic leadership in relation to both child protection and corporate parenting. Nevertheless, we noted improvements across the extent of collaborative working in all aspects of leadership and direction.

Vision, values and aims

For most partnerships, we reported a strong vision and commonly held values for supporting children and young people at risk of harm. These were threaded through strategic plans and strategies. They were communicated well and understood by first line managers and frontline practitioners alike. Two thirds of staff across almost all partnership areas agreed that leaders had a clear vision for the delivery and improvement of services provided to children and young people in need of protection. The shared vision and values clearly shaped collaborative practice on the ground. In two partnership areas, despite a vision and values being written into strategic plans, we saw a disconnect between what senior leaders thought they had communicated to frontline staff, and the messages received by frontline staff. In these areas, key strategic plans did not always reflect a shared vision. This meant that, while staff remained committed to supporting children and young people, it was in spite of a lack of clarity around strategic service aims within these two partnerships.

Governance, performance and quality assurance arrangements

In the partnerships in which we assessed all four statements and the impact on children and young people highly, we saw robust, clear and collaborative governance arrangements over children’s services. Child Protection Committees (CPCs) were effectively directing the strategic overarching approach to protecting children and young people and **Chief Officer Groups** were effectively undertaking their oversight and scrutiny role of the CPCs. Elected members in these areas took an active interest in the effectiveness of services for children and young people and made it their business to be proactive in different fora directing services for children and young people.

In these partnerships, we could see clear linkages between strong leadership and governance and systematic approaches to self-evaluation and quality assurance for the purpose of furthering continuous improvement of services. In the highest performing partnerships, collaborative leadership arrangements pertaining to the direction and commissioning of services were aspirational in nature.

Where we did see a need for improvement was in the collation, analysis and use of data to enable all partners to effectively understand the difference that services were making to children and young people's lives. We commented on this in the previous joint inspection programme, stating then that partnerships were constrained in their ability to demonstrate the tangible differences services made. In this joint inspection programme, the ability to measure and demonstrate effectiveness through the consistent analysis of qualitative and quantitative data remained an area for improvement. This was also the case in the partnerships in which we saw systematic approaches to self-evaluation and quality assurance.

Staff perceptions of leadership and support

Across partnerships, we saw a mixed picture in relation to how staff viewed leadership of services for children and young people at risk of harm. When asked whether leaders were visible and communicated regularly, the numbers of staff who agreed they did, ranged from just less than two thirds to almost nine in ten. We saw a similar range in responses from staff when we asked whether leaders knew the quality of their work or had a clear vision. For these three aspects of leadership, there was one partnership area in which only two fifths of staff agreed with these statements. In the partnerships in which we saw more positive staff responses, we saw better quality collaborative working, better participation of children and young people and higher evaluations of the impact of services on children and young people.

Key leadership areas in which staff were often most critical were: the extent to which leaders ensured services had the necessary capacity to meet need; whether evaluation of impact had led to service improvements; or whether strategic changes had led to improvements. The numbers of staff agreeing with these statements ranged from just below one third to over three quarters. This demonstrated a real variance in how effective staff felt leaders were at securing the resources needed to deliver the right services and address service improvements. Despite this, around two thirds of staff who completed our surveys felt optimistic about overcoming any barriers to achieve better outcomes for children and young people and most staff felt proud of the contribution they were making.

Staff told us about the care and support they had received, particularly from first line managers, especially during and after the challenges brought about by the Covid-19 pandemic. Staff spoke very highly about operational managers who provided the practical and emotional support required to empower them to make the necessary decisions to ensure the children and families they worked with remained safe. Most staff across all partnership areas said they knew the standards required of them in practice and that they received regular supervision or opportunities to speak with a line manager. Most felt supported to be professionally curious and the

majority of staff felt valued, listened to and respected in their own teams and services.

Effectiveness of collaborative working

We reported many examples of effective collaborative working across most partnerships, both at a strategic and operational level. In ten joint inspections which took place over the period of the Covid-19 pandemic, we evaluated the quality of the continuity of collaborative working during our record reading activity. Of these ten, we evaluated this as 'Good' or better in seven partnerships, and as 'Adequate' in three partnership areas. During this period, we also evaluated the effectiveness of the multi-agency team's response to ensuring children were protected from harm and had their wellbeing needs met as 'Good' or better in just under two thirds of records we read.

The partnerships in which we saw higher results in terms of staff confidence in their leadership were those to which we also gave better evaluations for the quality indicator 2.1 – impact on the child or young person. This demonstrated a correlation between the efficacy of leadership and positive outcomes for children and young people.

Part B: Areas of reflection for partnerships and stakeholders

Every message and finding in this report will apply differently to each partnership area. However, we would ask partnerships to challenge themselves to reflect on the following questions with multi agency colleagues.

1. How well are you working together at operational and strategic levels to understand your local population of children and young people, to identify their needs and the risks they face in their lives?
2. How does this knowledge translate into effective children's services planning which addresses wider issues such as poverty and deprivation?
3. How effectively are you using your data to inform your collaborative strategic planning?
4. How well are you capturing and listening to the views of all children and young people both in terms of their own care planning and in helping to shape wider service developments?
5. What are the children, young people and families in your area telling you is important to them and for them when they are at risk of harm?
6. How are you assuring yourselves that all children and young people have equity of opportunity to participate in decisions that affect their lives?
7. How well are staff supported to, in turn, support children, young people and families living with increasing risks of harm?
8. Are you helping the children, young people and families that you support to meet their potential and attain better outcomes in their lives?

For all of these questions, how do you know and evidence how well you are doing across the Quality Framework and, in particular, quality indicator 10 – 'what is our capacity for improvement?'

Part C: Conclusion and next steps

Over the course of the joint inspection programme, there were several developments across the policy landscape. These included the introduction and implementation of the National Guidance for Child Protection in Scotland (2021), the embedding of the United Nations Convention on the Rights of the Child into Scottish law (2024) and the introduction and developing stages of the Promise. Over the four years of the inspection programme, we saw the gradual drive to integrate these across practice within services for children and young people.

Broadly speaking, in this inspection programme, we saw improvements in relation to the impact of services on many children and young people. We acknowledged a high degree of relationship based and trauma informed practice across services and observed staff in a wide range of universal services working well together to support families. We noted strengths in multi-agency responses to early indications of concern and the ways in which children and young people were involved in decision making in relation to their own planning and support. In general, we also noted improvements across key processes of assessment, planning and reviewing.

However, we also saw variability across partnerships in relation to some areas of practice. These included multi-agency responses to situations of risk in relation to cumulative harm, poverty, deprivation, domestic abuse and mental health. Responses to risks for older young people in relation to community based harms were, broadly speaking, not consistently effective. The wider collation of children's and young people's views to help shape the development of services was not taking place systematically in every partnership area. The extent to which partnerships were able to measure and demonstrate the difference they were making to children's lives varied due to differences in approaches to quality assurance.

We will continue to reflect on, and where appropriate, act upon the learning we have gained from the findings of this most recent joint inspection programme into our future work. We will also review feedback we have received on the most recent joint inspection processes and continue to develop our approach. There are many areas highlighted in this report which will support our focus. Broadly speaking we will consider how partnerships have improved:

- the ways in which the views of all children and young people are listened to, heard and taken into account in both their individual planning and support and in the development of services. This includes looking at how children and young people of all ages and in all processes are encouraged to participate and be heard
- their multi-agency responses to all types of harm but, in particular, how cumulative harm is identified and addressed – and how staff are supported to recognise this
- the ways in which the issues pertinent to individual communities are captured to inform children's services planning. This includes the wider issues which partnerships are trying to address
- the approaches taken to collecting, analysing and using quantitative and qualitative data to inform their service planning and development to meet the needs of their populations in the short, medium and longer term

- areas of good practice, as well as challenges which partnerships face, in working to improve outcomes for children and young people.

We will align our learning with that of the programme of joint inspections of public protection arrangements to ensure that findings highlighted in this report continue to inform improvement in services to children and young people.

In these joint inspections, similar to the previous programme, we continued to note certain children and young people whose outcomes remained poorer than their peers. Despite much work having been undertaken to improve approaches to corporate parenting, for example, the outcomes for children and young people subject to compulsory supervision orders and living at home remained an area in which partnerships could not easily demonstrate an improvement in outcomes. For this reason, we will focus our [next joint inspection programme](#) on these children and young people.

Appendix 1: Messages from the overview report of joint inspections of services for children and young people in need of care and protection, 2018 – 2020

1. Children and young people were benefitting from positive, caring relationships with key staff which were informed by trauma informed practice principles. These relationships were supported by the getting it right for every child approach. This gave staff a shared language and better opportunities to work effectively together with children and their families to address need and risk.
2. In most areas, there were robust processes in place to protect children and young people and keep them safe, underpinned by effective multi-agency training and governance arrangements. Children under five years of age were more likely to be identified as being at risk of harm and, once identified, assessment and planning processes for this group were of a higher quality than those for older children. We were not as confident that staff recognised and responded to the needs of, and risks to, older children as well as they did with the younger age group.
3. Most partnerships had invested in targeted family interventions and parenting support programmes which had been successful at enabling many parents and carers to better address their children's needs. However, more needed to be done to ensure that all families who needed this received the right support at the right time. Partnerships must do more to ensure families are enabled to participate and engage with all key processes and promote opportunities for independent advocacy more systematically.
4. We saw improvements in some outcomes for looked after children and young people, in particular, increasing numbers of young people achieving positive destinations, an increasing proportion of community-based placements, including an increasing use of kinship care placements, and reductions in out-of-area placements. Despite the welcome increase in kinship care placements, kinship carers themselves were not being supported well enough.
5. Where children are not able to live with their families, partnerships must do more to ensure that they are enabled to keep in contact with family members, especially with brothers and sisters.
6. Transition processes between children's and adults' services were often experienced by young people as disconnected and complex. Those most disadvantaged by this were children and young people with a disability and care leavers. We saw the poorest outcomes for young people in continuing care and care leavers. Many young people were constrained in their ability to successfully move on to adulthood by difficulties in accessing services such as mental health and wellbeing services and suitable housing options. The GIRFEC approach, while well embedded across children's services, was less well evidenced in pathways planning for care leavers.
7. The collaborative leadership of child protection was much more robust and embedded than that for corporate parenting. There must be equity in the governance arrangements for both aspects of practice to enable all children and young people in need of care and protection to achieve their potential.

8. While inspections illustrated examples of the impact of services supporting children, young people and their families, partnerships themselves were less able to demonstrate tangible evidence of impact. Performance measures focussed on process and activity-based data more than qualitative data. They were, therefore, constrained in their ability to show the differences services made to outcomes for children and young people.

Appendix 2: Table of evaluations for quality indicator 2.1 from 13 joint inspections

Area inspected	Report published	Evaluation for quality indicator 2.1
Dundee	2022	Good
East Renfrewshire	2022	Excellent
Highland	2022	Adequate
Aberdeenshire	2023	Very Good
East Dunbartonshire	2023	Good
Scottish Borders	2023	Good
North Lanarkshire	2023	Very Good
Moray	2024	Adequate
East Lothian	2024	Very Good
Renfrewshire	2024	Very Good
East Ayrshire	2025	Good
Angus	2025	Very Good
Glasgow	2025	Good

Appendix 3: Summary of key points for the quality indicator and each of the four statements

QI 2.1	<ul style="list-style-type: none"> • Embedding of a culture of listening to children and young people (including accessibility of independent advocacy; and use of feedback) • The extent to which children's views influence service development (not just individual care plans) • The right service being available at the right time and having a notable difference on children's and young people's lives
Statement 1	<ul style="list-style-type: none"> • The importance of investment in preventative and early intervention services • The clarity around thresholds and a shared language around risk across sectors • The significance of early help as a follow up to immediate concerns
Statement 2	<ul style="list-style-type: none"> • Overall improvement across key processes such as assessment, planning and reviewing, although the quality of chronologies to inform these remains variable • The importance of continuing to support work to address extra familial risk (including risk within communities) • The need for further investment in the capacity of services to address mental health and wellbeing
Statement 3	<ul style="list-style-type: none"> • The need to continue to embed a culture of listening to children and young people across all sectors and services • The need to strengthen the influence of children's views in strategic service development • The importance of consistent access and availability of independent advocacy • Seeking the views of children in protective processes needs to become routine • Listening to younger children as well as those who are older
Statement 4	<ul style="list-style-type: none"> • Collation and analysis of quantitative and qualitative data to effectively demonstrate the difference services are making • Leadership oversight of the capacity of services to meet need should strengthen • The importance of first line managers in supporting staff addressing children's complex needs • The clarity for staff that a shared and understood vision brings

Appendix 4: Glossary of terms

Bairns Hoose is a co-ordinated approach designed to reduce the number of times children and young people who are victims or witnesses to abuse, or violence have to recount their experiences to different professionals. The approach aims to make child protection, health, justice and recovery services available in one setting.

Care and risk management (CARM) are processes which are applied when a child between the ages of 12 and 17 has been involved in behaviours which could cause serious harm to others. This includes sexual or violent behaviour which may cause serious harm. CARM processes are also applicable when an escalation of behaviours suggests that an incident of a seriously harmful nature may be imminent.

Champions boards allow young people to have direct influence within their local area and hold their corporate parents to account. They also ensure that services are tailored and responsive to the needs of care experienced young people and are sensitive to the kinds of vulnerabilities they may have as a result of their experiences before, during and after care. Young peoples' views, opinions and aspirations are at the forefront in this forum and are paramount to its success. Champions boards build the capacity of young people to influence change, empower them by showing confidence in their abilities and potential, and give them the platform to flourish and grow.

Chief officers groups is the collective expression for the local police commander and the chief executives of the local authority and NHS board in each local area. Chief officers are individually and collectively responsible for the leadership, direction and scrutiny of their respective child protection services and their child protection committees.

Child protection committee is a locally-based, inter-agency strategic partnership responsible for child protection policy and practice across the public, private and third sectors. Working on behalf of chief officers, its role is to provide individual and collective leadership and direction for the management of child protection services in its area.

Children: when we say 'children', we refer to children under 12 years of age.

Children's planning meeting is a single multi-agency planning process around the child's plan involving those practitioners who support the child and family and are likely to be participants at a child's plan meeting. This can be a one off, or ongoing, meeting.

Community planning partnership: the multi-agency partnership arrangements with strategic responsibility for the direction and leadership of services for children and young people in each local authority area

Contextual safeguarding: an approach that recognises that, as young people grow and develop, they are influenced by a range of environments and people outside of their family.

Getting it right for every child (GIRFEC) is a national policy designed to make sure that all children and young people get the help that they need when they need it.

The Promise Scotland was established to take forward the work of the Independent Care Review. Key outcomes aim to ensure that Scotland's children and young people grow up loved, safe and respected, so they can realise their full potential.

Scottish child interview model is an approach to joint investigative interviewing that is trauma informed. It maintains the focus on the needs of the child in the interview, minimises the risk of further traumatisation and aims to achieve best evidence through improved planning and interview techniques.

Trauma informed: being able to recognise when someone may be affected by trauma, collaboratively adjusting how we work to take this into account and responding in a way that supports recovery, does no harm and recognises and supports people's resilience.

United Nations Convention on the Rights of the Child (UNCRC) is a widely ratified international statement of children's rights.

Universal services is the term given to those services used by the whole population of children and young people, mainly in health and education, including schools and nurseries, GP and health visiting.

Young people: when we say 'young people', we refer to children over 12 years of age.

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