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Pàrlamaid na h-Alba

Official Report

FINANCE COMMITTEE

Wednesday 8 February 2012

Session 4

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**FINANCE COMMITTEE
5th Meeting 2012, Session 4**

CONVENER

*Kenneth Gibson (Cunninghame North) (SNP)

DEPUTY CONVENER

*John Mason (Glasgow Shettleston) (SNP)

COMMITTEE MEMBERS

*Gavin Brown (Lothian) (Con)

*Mark McDonald (North East Scotland) (SNP)

*Michael McMahon (Uddingston and Bellshill) (Lab)

*Elaine Murray (Dumfriesshire) (Lab)

*Paul Wheelhouse (South Scotland) (SNP)

*attended

THE FOLLOWING ALSO PARTICIPATED:

Cheryl Hopkins (formerly Birmingham City Council)

CLERK TO THE COMMITTEE

James Johnston

LOCATION

Committee Room 4

Scottish Parliament

Finance Committee

Wednesday 8 February 2012

[The Convener *opened the meeting at 10:01*]

Early Years Intervention (Birmingham City Council)

The Convener (Kenneth Gibson): Good morning and welcome to the fifth meeting in 2012 of the Finance Committee of the Scottish Parliament. I remind everyone who is present to turn off any mobile phones, BlackBerrys, pagers and so on.

The first and only item on our agenda is to take evidence on early years intervention at Birmingham City Council. I welcome Cheryl Hopkins, who is former director of strategy, commissioning and business transformation at Birmingham City Council, and I invite her to make a short opening statement.

Cheryl Hopkins (formerly Birmingham City Council): Thank you very much, convener, and thank you for inviting me to your lovely city.

The committee has received a brief report and it is difficult to encapsulate a number of years of work in a brief report and introduction; I hope that the work will come out during the questions.

I will give you a little bit of context about Birmingham. We have a population of just over 1 million. We are the largest and the youngest local authority in Europe. We have areas where there are high levels of deprivation and poor outcomes for a number of our children. Under the Childcare Act 2006, we joined education services with social care services and established the children's trust arrangements, which meant all the agencies that are concerned with children working together. We decided that we wanted to develop a new strategy that focused on outcomes, value for money and efficiencies. Initially we thought about invest to save, but over time that has become more like "invest to contain", as the financial situation has developed.

We developed a strategy that was facilitated by the Social Research Unit at Dartington; the committee has taken evidence from Professor Michael Little. That strategy was a multi-agency approach that was taken along with elected members. We were fortunate to have cross-party political consensus for the strategy and developments thereafter on the transformation programme. The key features of the strategy were that it had to be data-led and that the data defined

the particular outcomes on which we wanted to focus. We chose a small number of outcomes—five—so that we could do in-depth work and do it really well, rather than do lots of things.

We had a clear methodology, including a programme management approach, which meant our taking quite a rigorous approach to the programmes and looking at evidence about what works. Last, but not least, we carried out clear evaluation as we were going through the process.

It was fortuitous that, following development of the strategy, Birmingham City Council was embarking on a major transformation programme throughout the council to improve the lives of citizens in Birmingham, which was predicated on up-front investment for prevention and early intervention, with longer-term benefits in terms of outcomes and cashable benefits. The programme was across not just children's services but adult services, housing, corporate services and so on.

I took the lead for the transformation programme and we converted the strategy into a business case, which looked at an investment of £41.7 million and an expected cashable return over 15 years—which is the life of a child between starting and leaving school—of £102 million, which would give us a net cashable benefit of £60-odd million.

The financial position has changed considerably since then, so I will give you an update on where we are now. This year, children's services in Birmingham had to achieve £22 million savings from its budget, as well as start to realise some of the brighter futures cashable benefits.

We looked at designing a completely new operating model for children's services by using the brighter futures principles and methodology, and by integrating the evidence-based programmes into that new model. For instance, the incredible years programme was rolled out and has been an integral part of the development of our children's centres.

The pilots have been scaled up as part of that new model, with 16 family support teams, the "team around the child" and "team around the family" approaches, and integrated assessment across partner agencies. We expect that, over the 15 years, that new model will deliver as many benefits as—if not more than—the original business case.

Birmingham is a pilot for community-based budgets nationally, which is a whole-system approach through Birmingham strategic partnership. It is about targeted support for families who have complex needs, with a focus on early intervention. Central to that is the focus on cost-benefit analysis and benefit realisation. Birmingham is a national exemplar for that work.

Birmingham is also working with national Government on a feasibility study for social impact bonds, which involves looking at private investment to fund evidence-based programmes. The feasibility study is on keeping children out of care and returning them home quickly, because obviously that is where the big bucks are.

I am happy to take questions.

The Convener: Thank you for your opening statement and your report.

I will start then open questioning up to colleagues, who no doubt have questions of their own. One or two of my questions were answered in your opening statement. Thank you for that.

In paragraph 5 of your report, on your initial findings, you say:

“The evaluations demonstrate reductions in conduct disorder, emotional difficulties and increases in pro social behaviour and educational attainment directly as a result of the pilots.”

What scale of improvement are we talking about? Has it been 5 per cent or 50 per cent? Over what period has it taken place?

Cheryl Hopkins: The various programmes started at different points, but the Social Research Unit evaluated the incredible years programme, the positive parenting programme and the promoting alternative thinking strategies—or PATHS—programme, after six months and then after a year. There was a follow-up after another year. The final findings are due to be published imminently, but the interim findings from the incredible years programme showed quite a substantial improvement in terms of conduct disorder and in parenting behaviour.

I am not a statistician, but the results were significant statistically; that is, they were over 1.1 of a statistical return. They have been validated both nationally and internationally. We found that the results mirror and replicate studies that have been done elsewhere in the world for incredible years programmes. Our results are slightly better than those of the north Wales study that was done a number of years ago. I am not saying that the conduct of every child is better, but overall there has been quite a significant improvement.

On the PATHS programme, we were surprised that the evaluation showed results that are probably better than those that have been achieved in the United States. Mark Greenberg, who is the developer of PATHS, has looked at all our results, which are getting better. I think that that is because we monitor not just the outcomes for the children but the fidelity aspect, which means that we check whether teachers are delivering the programme as it is meant to be delivered and whether they are completing the

records in the required way. There is very strong fidelity in the programme in that regard, which is probably why we are getting better results.

Although the programme is mainly about prosocial behaviour—children concentrating more in class, getting on with their peers, being less disruptive and so on—one of the spin-offs has been improvement in their educational attainment of up to about 11 per cent at the basic assessment level. So, there have been significant improvements in educational attainment, even though the programme is not designed specifically to improve that. However, it is a bit of a no-brainer to say that if kids are more settled in class, behave well and concentrate more, they will learn more. That outcome has been very welcome.

The Convener: It must be heartening that you have political buy-in from all the political parties in Birmingham. One of the things that we have talked about with regard to bringing in reforms in Scotland is the silo mentality; the people who work at the coal face are sometimes unwilling to change. How has the programme been percolated down to those who deliver it and, indeed, who work outwith the programme in Birmingham?

Cheryl Hopkins: That is probably the biggest barrier. At the beginning of the programme I expected that it would be, and it has proved to be so. Culture change is the most difficult change to achieve. I am not saying that we got it all right; we could have done better, particularly with social care colleagues—social workers—who probably stand to benefit most from early intervention programmes. However, they were probably the most sceptical.

One thing that we did at the outset was spend nine days locked in a room working on strategy development; they were not consecutive days—perish the thought—but happened over six months. We did that with chief officers from all the partner agencies—the assistant chief constable, the director of adult services, the director of housing, the health primary care trust chief executives and so on. The politicians also participated.

In-between times, when we had the data and had decided on the outcomes that we wanted to achieve, we held events around the city for practitioners, middle managers and cross-partner agencies and asked whether the strategy resonated with them, what they thought and what they would like to see, so there was to-ing and fro-ing and developing the strategy was quite an iterative process. There was consensus; there was a real buy-in to the strategy and people were very excited by it.

When it came to developing the programmes, we decided that we would, alongside putting in the

evidence-based programmes, stop doing certain things, because it is not just about commissioning something but about stopping doing things that you do not think will have any impact. That is where the rub comes. People might have spent their whole careers—perhaps 20 years—working on a favourite programme of theirs, but we suddenly said, “You’re not going to do that.” We told them to run instead a programme that is quite strict and prescriptive and which requires them to look at the evidence and focus on outcomes. That involves different ways of working. That approach was extremely challenging for practitioners and was also extremely challenging for politicians. Politicians in local wards had their favourite projects and programmes, but they were told that there was no evidence that those programmes were working and that we would invest in something else. I had quite a few hairy moments in taking such ideas through the political process.

10:15

Winning hearts and minds takes time; it was not quick and easy, but was a bit of a drip, drip process. It involved demonstrating the evidence and getting the developers over to talk directly to people. We got Mark Greenberg, who is the developer of PATHS, and David Olds, who developed nurse-family partnerships, over to talk to people. They are charismatic people who have years of evidence behind them, which helped to convince people that we were on the right track. That aspect was probably the most challenging part of the programme’s development.

The Convener: Originally, the programme was piloted in nine children’s centres. Is it now in all 63 or is it still being rolled out?

Cheryl Hopkins: The programme is now in 16 centres. We decided to take an iterative approach and build gradually rather than have a big bang, because we found that at issue was not just the programme but the infrastructure around it—that is, whether the staffing levels, training and support systems were right. Some of our children’s centres are very small and are run by voluntary organisations, so they do not have the necessary capacity. Over time, we must build that capacity. We have a small project team—I still talk about it in the present tense—to support development of the programmes, because we were concerned that that had to be done properly. Fidelity is really important. The project team has capacity for only so much development, so the approach is iterative.

The Convener: Ultimately, you want the programme to be rolled out across the city.

Cheryl Hopkins: Yes.

Paul Wheelhouse (South Scotland) (SNP):

Thank you for your evidence. The project is fascinating.

I am interested in the proposal to look at the feasibility of using social impact bonds: we discussed them last week. The notes that the clerks have provided contain summary figures for the programme’s costs, cashable benefits and costs to date after a few years of operation. It is understandable that, at this stage, only modest cashable benefits have been recorded.

Challenges that were presented to us last week were that of convincing private sector investors or social investors to invest in social impact bonds when the cash savings might occur far down the line, and that demonstrating earlier that the outcomes are being achieved will be more difficult. Bearing in mind that you have incurred about a third of the costs but have had less than 1 per cent of the benefits, from your early investigations into the feasibility of social impact bonds, do you have views yet on how you will pitch proposals to social investors to lure them into investing in social impact bonds?

Cheryl Hopkins: That is a conundrum. In the feasibility study in Birmingham, we decided to go for a portfolio approach that involved a combination of longer-term items—the early intervention programmes that I have described have much longer return periods—and quick wins.

If we can keep a few kids out of the care system, the returns are huge, so we have tried to put together a portfolio that has some quick early returns. For example, we have put in place programmes such as multisystemic therapy or functional family therapy, which are really good evidence-based programmes for keeping kids out of the care system and the criminal justice system. The returns from those programmes come in two or three years rather than in 15 years. A portfolio approach that enables you to see early returns year on year is more attractive for investors.

It is interesting that, even before the Cabinet Office got involved with Birmingham on the feasibility study, a number of discussions revealed that there was no lack of interest from private investors, although I would say that some of the interest was rather naive. I met a number of social finance companies from around the country that were interested in investing in the kind of stuff that we were doing. When they brought me proposals for social investment, I had to say to them, “I think you’re being naive and I wouldn’t invest in this.” They need robust evidence that programmes will work, because there is high risk. If programmes do not deliver the outcomes that they want, they will have invested for no return.

People are learning together and are feeling their way through the process. If I was an investor, I would want cast-iron evidence so that I would know that I would get a return on my investment. Some of the evidence-based programmes that we have put in place and that are now being developed across the country have a better chance of producing a return on investments. You must look at quick returns as well as longer-term benefits.

Paul Wheelhouse: In your opening statement you said that from the start you built in clear evaluation throughout the process. That is obviously very positive. You said that it might take two or three years for the quick wins to be felt, which I guess means that you expect to see early returns about now. When do you expect the first evaluation evidence to record those? The committee could perhaps access such evidence.

Cheryl Hopkins: The evaluation that we set up at the outset was mainly around better outcomes for children, but we wanted also to look at whether the benefits that we had predicted were being realised, so we put in quite a clear and robust benefits tracking system, whereby every child in every programme is being tracked—I hope over the next 15 years—to see whether the outcomes are being achieved and whether we are saving money. We predict that the children will not come into care, will not need a child protection plan, will not need extra support in schools, will not truant, will not enter the criminal justice system and so on.

It is very difficult to evaluate for things that are not going to happen, but the kids are very high-risk kids, so it can be predicted that a percentage of them will end up in care, in the criminal justice system and so on. There is a lot of national evidence on the predictors. We are tracking those benefits and so far we have been very successful, not only in the outcomes for children but in those cashable predictors.

Not one child that has been on the family-nurse partnership programme has ended up in care, although we are talking about the highest-risk kids of teenage mums, for whom there is a very high risk of neglect and abuse. None of the children has ended up in care, which is really positive and obviously produces huge savings.

I cannot remember the actual numbers for the incredible years programme, but I think that about 25 children of the first cohort of 120 children who were under child protection plans came off the plans. There were real savings in that regard. We can track exactly the take-up or lack of take-up of the service year on year and we can track the benefits in terms of cash as well as of outcomes.

Paul Wheelhouse: Thank you. That was extremely helpful.

The Convener: Yes. I am delighted to hear of the success of family-nurse partnerships, because we are rolling that programme out across Scotland.

Cheryl Hopkins: It is my favourite programme—it is wonderful. It just hits every outcome that you could want.

The Convener: Absolutely.

John Mason (Glasgow Shettleston) (SNP): I will follow what Paul Wheelhouse was asking about. You talked about making various savings—for example, in the criminal justice system. Section 7 of your written submission refers to

“Community based budgets (pooling public service budgets)”.

Can you tell us a little about how that works? One of the problems that we sometimes have is that there might be savings, for example, in social work and criminal justice but that the two do not match up.

Cheryl Hopkins: Absolutely. That is the problem. Under the “Lessons learned” heading, I have

“investors v beneficiaries (not the same)”

because they are not the same people. If health invests in family nurse partnerships, social care will benefit by kids not coming into care; if social care invests in the incredible years programme, the criminal justice system will save because kids do not end up in that system.

The dilemma is in how we get the criminal justice system to invest in early intervention. It is interesting that at a recent presentation that we did a senior police officer said that he would rather invest in more health visiting than in putting more bobbies on the beat. That made me think that we had at least won the hearts and minds, if not the cash. It comes down to people putting money on the table, but that has not been achieved in Birmingham. We have pressed the national Government to take the money out of the budget beforehand—to top-slice it from all the relevant budgets. It has been difficult to get people to pay a portion of their budget up front for early intervention.

The community-based budget pilot that we have developed takes a whole-system approach through the strategic partnership in Birmingham, which involves the police and the Department for Work and Pensions, because a lot of it is about employment and getting families back into work, and early intervention. It is about working in an area of Birmingham and throwing into the area all the evidence-based programmes that we can think

of, then tracking whether there are any savings. We have managed to attract quite a lot of national pump-priming funding to develop that approach. If we had had to have money from all the partner agencies up front before we started, I suspect that we would never have got it off the ground. I believe that there should be top-slicing of the money at the outset rather than an expectation that each agency will put up money. I do not know whether the national Government will do that.

John Mason: I presume that even with top slicing there is still the problem of the timescale. You said that you had had some quick returns but that returns take longer in some programmes.

Cheryl Hopkins: Yes.

John Mason: It is all very well to top-slice part of the money for the court system or whatever, but is there any evidence that there has been a reduction in the number of youngsters going through the court system or are only some individual youngsters being helped, which just means that more people are being dealt with elsewhere?

Cheryl Hopkins: You have raised an interesting point. It is about counting individual children who do not end up in the system. However, you must not do that without reducing budgets. I will give an example. When we started the incredible years programme, we predicted that there would be savings to education, welfare, social care and so on. I said that we had to reduce the budget right away or the system would adapt and places would fill with other kids. We know that if we have a secure unit or a children's home, we will fill it, so we had to take away the budget up front and say, "This is a different way of working that requires a real mind shift." We took the money off people at the beginning so that they could not then fill places with other families. We had to be rigorous about that; otherwise, we would, as John Mason rightly suggested, just have drawn in other families to whom we would not normally have provided a service.

John Mason: That was helpful; thank you.

10:30

Mark McDonald (North East Scotland) (SNP): Thank you for your evidence. I put on the record my interest as a member of Aberdeen City Council. Looking at what Birmingham City Council has done from my local authority background, I think that it is radical and that many local authorities could learn the lessons that you have applied, not just Governments. Given the short-term nature of politics, the achievement of political buy-in is something for which credit should be given. All too often, politicians look at the next election, which is four or five years down the line,

rather than at the bigger picture, and they often make decisions that will deliver a four-year or five-year benefit but not a 10-year or 15-year benefit. The elected members of Birmingham deserve credit for that.

I have a couple of questions about culture change, which you identified. As a local authority member and as a member of Parliament, I recognise all too well that it is difficult to get people to accept a fundamental shift in priority in how money is spent. How do you engage with front-line staff and those who are delivering services on the front line? At the local authority level, I have found that the best ideas for new ways of working often come from the front line rather than from the top down. Have you got the balance right or will you look to speak to practitioners at the coal face to see whether they have ideas for ways in which things could be delivered differently?

Cheryl Hopkins: You are absolutely right. Did we get the balance right? I am not sure that we did because the initiative was radical and, to be honest, it came more from the top down than the bottom up at the outset. We had no blueprint when we started, because we were the first local authority to embark on this kind of work. It was not as if we could look elsewhere to see how other people had done it. Many local authorities had implemented individual programmes, but we were the first to take a whole-system approach and put together a portfolio. I am not sure that we got the balance right.

You are right to say that a lot of good ideas come from the front line. We did not capitalise enough on that by asking how we could improve processes and procedures and be smarter, leaner and more efficient. We could have done that as well as looking at evidence-based programmes, so I think that we missed a trick there.

Because they are so under the cosh and busy, front-line practitioners probably do not have the time to look at the research and evidence or at what is working elsewhere. They might not have that depth of knowledge, but they do know what works for families and what families want, and they engage more closely with families. They are very good at the processes.

The programme started off being almost separate from everything else that was going on. There was business as usual and then there was the brighter futures programme, which was all very interesting, but it was a bit detached. My advice to local authorities that might try to do the same would be to integrate better with business as usual from the outset.

If a programme is to be sustainable, we have to say, "This is what we do in Birmingham, or Aberdeen, or wherever, and this is the way we

work,” rather than, “We’ve got a project over here and an initiative over there—okay, we’ll wait and see, and then it will go away and we’ll get back to what we’ve always done.” There has to be mainstream involvement. Birmingham’s entire children’s services have been remodelled around more early intervention and prevention through family support teams, integrated assessments and evidence-based programmes, and that has helped. It has to be mainstream and business as usual, with practitioners delivering the programmes.

We need to train practitioners to work on the programmes instead of having experts coming in to deliver them, as we did at the beginning. Because we did not have enough capacity, we trained people outside the children’s centres to deliver the incredible years programme within the children’s centres. Now we are looking to train children’s centre staff because we have enough trainers and coaches to do that. It is about trying to strike a balance in engaging and trying to get business as usual and the main stream more involved from the get-go. I am not sure that we had got that balance completely right at the beginning.

Mark McDonald: There is also the community engagement aspect. My impression is that the people who will benefit most are often those who are the hardest to reach and to bring into the tent. What has been your experience of that? Beyond that, the early years services that the council delivers represent only a very small part of the child’s overall life experience. How are you working with other services, which will often liaise with families in hard-to-reach areas on different issues that are part of the social deprivation that you spoke about?

Cheryl Hopkins: You are absolutely right about the people who are the hardest to reach. The people who are most in need of the service are not the ones who come knocking on the door to ask for it. This is where data is so important. In the first year, we carried out a wellbeing survey that showed exactly where the areas of greatest need were, and we mapped that against where our children’s centres were so that we knew that in a particular area there were numbers of families who were desperately in need.

We started recruitment for the incredible years programme through the children’s centres, which identified the families they thought would benefit, and we screened those families because, unless they reached a threshold, the outcomes of the programme would not be delivered. We found that very few of the families who were referred through the children’s centres reached that threshold. If the children’s centres said to us, “Well, there obviously isn’t that level of need in our area,” we could say,

“Yes, there is. We know there is because we’ve got the data to prove it.” We had to find different ways of identifying the families in the greatest need. We engaged health visitors, who are very good at doing that because they get involved very early on. We had meetings in community halls and stood in supermarkets; we did all sorts of things to try to get to the families who needed help. There was huge pressure on me to drop the threshold, but I said, “No, these families are out there and we’ve got to find them.” The recruitment of families on to some of the programmes took much longer than I, or any of us, expected, because we really had to seek them out and use different ways to get to them. Mr McDonald is right that we have to be persistent about that and hold the line on thresholds.

Although other agencies did not put in money, they provided people and other resources such as rooms. For instance, the restorative justice programme that we ran involved a police officer. Obviously, family-nurse partnerships are run with health visitors and midwives. In the incredible years programme, health visitors are involved in screening and identification. A number of health visitors have been trained up in the incredible years programme, particularly in relation to children with special needs and autism. As part of the remodelling of children’s services, we now have health visitors working out of children’s centres. The approach has been a catalyst for much better integration and work across agencies.

Gavin Brown (Lothian) (Con): You mentioned that you have had a number of difficult conversations in which you had to tell people that what they had been doing for 10, 15 or 20 years was not having much impact. Can you give examples of interventions that no longer happen in Birmingham as a result of evidence that proved that they did not work?

Cheryl Hopkins: In England—Scotland is probably the same—there are always loads of initiatives. People bid for moneys for all sorts of initiatives, such as a parenting programme or all sorts of weird and wonderful programmes. Schools are particularly prone to implementing programmes that they are told will improve children’s concentration and so on. We tried to get a fairly extensive menu of proven models that had a pretty good evidence base. We then published that as the recommended programmes for our schools and children’s centres and asked them to have a good look at the other things that they were doing.

For example, there was a programme called rock and water that was about feminising aggressive young boys in schools. There was no evidence whatsoever for that, but it was about bringing out the more caring side of aggressive

kids in the classroom. Some social and emotional learning programmes in schools that are not as robust as PATHS have now been stopped. Teachers say that they used to do something else, but they now do PATHS, because it is the one that works. There are many parenting programmes on the market, but we have told our children's centres that incredible years is the parenting programme of choice, not any of the hundreds of others that are around.

When we commission voluntary organisations, we commission for outcomes and we tell the organisations that they must demonstrate that they are delivering outcomes and prove that their programmes have some kind of evidence base. Not everybody will have gold-standard randomised control type of evidence—that is unrealistic—but we consider the standards of evidence that people use in implementing programmes. If you commission for outcomes or use the payment by results approach, which we are considering, you need pretty robust evidence. The thinking is changing among providers of services and voluntary organisations. They are getting more savvy about providing for outcomes and using evidence to do that.

10:45

In one of the more interesting discussions that I had in our scrutiny committees with politicians, I was talking about evidence-based programmes and one of the politicians said, "This is really exciting. This is great because we can now put more money into homestart." I had to say that, actually, the evidence on homestart is not very robust. She nearly had a fit, as that was her favourite programme.

We have not proceeded by withdrawing funding immediately. If our voluntary organisations and providers are willing to change and to look at providing more evidence, okay, we will keep funding them. If they need to build extra capacity, we will help them to do that. Those that are not willing to change and are not interested in outcomes and providing evidence get decommissioned—end of. If they are willing to work with us, that is fair enough.

Gavin Brown: Paul Wheelhouse referred to the table of costs and cashable benefits under paragraph 3 of your written submission. We all understand that more money is to be invested at the beginning and that the benefits will come towards the end of the 15-year period. The programme has been running for only three of its 15 years, but how do the costs and benefits that you predicted over the first three years compare to where you are? Are they broadly in line? Have you done slightly better or worse?

Cheryl Hopkins: The costs and benefits have been less than expected. We have spent less, so the benefits have been less. However, I sound a note of caution because the financial climate has changed incredibly. Although we can evidence the benefits of the family-nurse partnership, IY and so on, realising those benefits is difficult because we have already had to take out a lot of the services that we said would benefit because of savings. For instance, we have reduced staffing for education psychology, education welfare and social work. All those services have been reduced, and we would have predicted that there would be savings on those services. We cannot double-count the savings. That is why, last year, just before I left, I took a report back to cabinet saying, "This is where we are now. Let's stop prudential borrowing"—that is, not borrow any more in the current financial climate—"Let's integrate the benefits that we predict with the savings that the children's services directorate needs to achieve and have one set of costs and benefits, because we can't keep double-counting." We had to do quite a lot of work to remodel and reprofile what the benefits would look like because some of those benefits had already been taken as savings.

Michael McMahon (Uddingston and Bellshill) (Lab): Good morning. Over the past few weeks, we have heard that there is a consensus around the value of preventative spend, early intervention and sustainability. Everyone agrees that those are the things that we should be looking at. However, whenever someone makes a suggestion or challenges the received wisdom that comes from each vested interest or organisation, the consensus starts to break down a bit. You have given some examples of evidence that has been presented to you by an agency or organisation of the way that it does something not matching the way in which you thought that it should be done. When there is robust evidence that an organisation is achieving outcomes but is still not doing things in line with how you would want it to do things, how do you resolve that conflict? If someone is not delivering or what they are doing is counterintuitive, it is easy to tell them that that is not the best way to do things and, if they do not buy into what you are saying, to cut them adrift. However, when there is robust evidence but it does not quite chime with the way in which you think that things should be done, is it your way or the highway?

Cheryl Hopkins: I think that one has to be rather more flexible than that. As long as we achieve better outcomes for children, I do not care how we do it. The programme represents only a small part of what children's services do overall, and it accounts for a small amount of the overall spend. We have gone for the highest standard of evidence because we know that it works. That is

why we have it in place. There is no doubt that there are other programmes in Birmingham that are achieving outcomes and which are being funded but on which we would probably not have top-level international evidence that they work. If something works and achieves outcomes, why would we not fund it?

Elaine Murray (Dumfriesshire) (Lab): You spoke about some of the successes of the programmes, such as the fact that children were not going into care or were not going on child protection plans. In response to Mark McDonald, you mentioned people who were difficult to engage and said that there were people whom you had to seek out. There have been high-profile cases in Scotland in which parents have deliberately avoided contact with health visitors and others, which has had very serious consequences for the welfare of the child. What reassurance can you give people that, when necessary, there will be intervention and that there will not be such a drive to make savings that the appropriate intervention is not made for very vulnerable children?

Given that it has a new and innovative way of doing things, Birmingham City Council could be extremely vulnerable if something goes wrong. The media would probably give it a good kicking for making savings and doing things differently. Do you have different ways of dealing with those people who do not want to be contacted? How do you mind your back and ensure that everyone knows that you could make invasive interventions, if they were required for the welfare of the child?

Cheryl Hopkins: That is a good point. Safeguarding has to be the priority—before we do anything, we have to ensure that children are safe. Birmingham City Council is highly vulnerable. In fact, during the pilot stage, we had a high-profile death, which caused some of our politicians to have quite a wobble. What you say is right. Child protection services must be delivered in the same way that they have always been. If there is an issue to do with the safety of a child, full child protection procedures must come into play and must be followed.

Some of the programmes are value added. For instance, with a vulnerable family who are on a child protection plan, if there are real safeguarding issues and parenting is an issue, we might well say, as part of the package, “We think that we have a very good programme for you, which is about parenting and managing your child better and so on.” Such programmes are an addition; they add value. They are not instead of child protection. The bottom line has to be safeguarding the safety of children.

The Convener: Thank you very much. I thank colleagues for their questions.

There is a lot of experience down in Birmingham that we in Scotland can learn from, instead of trying to reinvent the wheel. I do not know whether it would be possible to get some further information on the programmes that definitely work and those that definitely do not work, given that it is clear that there are a number of programmes in the middle that might not have been appropriately evaluated. That might help our deliberations.

We in Scotland are extremely enthusiastic about the early years. Indeed, there is an early intervention change fund that will deliver £270 million over three years for the early years, and an early years task force has been set up, which first met on 8 November, so we are taking the issue seriously. There is strong political support in Scotland for such initiatives.

I thank Cheryl Hopkins very much for coming here today. It has been very enlightening, as I am sure that colleagues would agree. We will certainly deliberate on the evidence that we have been given.

As we had only one formal item on our agenda, I close the meeting to the public and the official report. After a 10-minute natural break, we will reconvene to have an informal discussion on the Scotland Bill.

Meeting closed at 10:54.

Members who would like a printed copy of the *Official Report* to be forwarded to them should give notice to SPICe.

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