

## Children and Young People Improvement Collaborative – Vision and Outcome Aims

Quality Improvement throughout the child and young person journey to achieve excellence and equity by getting it right for every child. The CYPIC provides an overarching view of quality improvement work where specific quality improvement programmes for children and families can be affiliated and supported.

Pre-birth to 15 months		15 – 30 months	30 months – P1		P2 – P4	P5 – P7	S1 – S3	S4 – S6+	
The MCQIC aims are to reduce the incidence of harm in women and babies by 30% by 2019. This harm is defined for all 3 strands of the MCQIC programme – maternity , neonatal and paediatric care. For example, in maternity care – two of the defined aims are to reduce the rate of stillbirth and neonatal mortality. QI work in the CYPIC contributes to this programme and will be encouraged and supported		By 2020 at least 85% of Children within each SIMD quintile of the CPP will have reached all of their developmental milestones at time of their 13 -15 month child health review	By 2020, at least 85% of children within each SIMD quintile of the CPP will have reached all of their developmental milestones at the time of their 27 – 30 month child health review	By 2020, at least 85% of children within each SIMD quintile of the CPP will have reached all of their developmental milestones by the time of their 4-5 year child health review	By 2020, at least 85% of children within each SIMD quintile will have successfully achieved early level literacy, numeracy and are progressing in health and wellbeing as evidenced by SHANARRI indicators by the end of primary 1	By 2020, at least 85% of children, within each SIMD quintile will have successfully achieved CfE First level literacy, numeracy and progressing in health and wellbeing as evidenced by SHANARRI indicators by the end of primary 4	By 2020, at least 85% of children, within each SIMD quintile will have successfully achieved CfE Second level literacy, numeracy and are progressing in health and wellbeing as evidenced by SHANARRI indicators by the end of primary 7	By 2020, at least 85% of children, within each SIMD quintile will have successfully achieved CfE Third level literacy, numeracy and are progressing in health and wellbeing as evidenced by SHANARRI indicators by the end of secondary 3	By 2020 at least 95% of young people within each SIMD quintile of the CPP will go on to a positive participative destination on leaving school

Maternity and Children Quality Improvement Collaborative (MCQIC) spans the child journey from pre-birth to 18+ The aim is to improve outcomes and reduce inequalities by providing safe high quality care experience for all women, babies, children and families in the maternity, neonatal and paediatric healthcare settings in Scotland.

Stretch aims are essential to guide and evidence the progress of improvement work. They set a challenging ambition that harnesses the energy and motivation of those participating, and gives them something to strive towards. They should be measurable in order to demonstrate progress towards the desired outcome. Stretch aims differ from targets which are primarily set in order to achieve an expected goal, and to allow scrutiny and accountability of whether work achieves the level of success expected by the target.

**Note: These national stretch aims for CYPIC will require review as new data becomes available and a better understanding of baseline performance is established.**

## Revising Stretch Aims for the CYPIC

There are new and developing frameworks to capture national data at points on the child and young person journey. This provides the opportunity to align stretch aims for the CYPIC with key policy areas that will be measurable in the future and can be located at appropriate points of the child's journey from early years throughout their educational journey.

The EYC and RAfA programme both agreed stretch aims through engagement and advice from senior leaders and advisors at the beginning of each programme. These were based on the level of knowledge available at that time, creating a sense of urgency and focus for improvement activity.

There have been challenges across all of this work to answer the 'how will we know' question related to measuring outcomes and tracking progress towards the stretch aims.

National data is captured and published on stillbirths providing an outcome measure of MCQIC work and Workstream 1 of EYC.

There is also national data published on the uptake of 27-30 month child health reviews and developmental delay. This has provided outcome data on Workstream 2 of the EYC however it has been widely recognised that the data has not been a complete and accurate reflection of practice across the country.

It has not been possible until now to establish agreed outcome measures for workstreams 3 and 4 related to developmental milestones and early primary school.

In the RAfA programme, stretch aims were agreed and established in 2014 to align with levels of achievement against the experience and outcome levels of CfE. There was no way of measuring these nationally however they provided schools with a focus for improvement work.

The introduction of the Universal Pathway for Health Visiting and Child Health Reviews at 13-15 months and 4-5 years, in addition to the existing 27-30 month review, will capture national outcome data from 2017. ISD have reviewed the data set for the 27-30 month data capture and made adjustments to enable more accurate reflections of HV practice and developmental progress of children.

In education, prior to the development of the National Improvement Framework, it has not been possible to measure outcomes in attainment in broad general education. With a focus on equity and closing the educational attainment gap this new data framework will capture outcome data on attainment at each level of CfE related to Literacy, Numeracy and H&WB. These revised stretch aims are aligned to the Framework.

In consultation with a wide group of stakeholders it has been agreed that the current aims of the EYC and RAfA programme required review and revision to reflect the evolving next phase of a single Children and Young Person Improvement Collaborative. As well as agreeing that alignment with new national data sets provides focus for work, it has also been recognised that it is important to ensure that the aims create a sense of urgency to teams and practitioners working at different stages of the child and young person journey.

To reflect this and in response to stakeholder advice the aim dates have been adjusted to 2020 across all stages, ensuring that the improvement work at each stage of the child journey impacts on those children and young people who are influenced now and over the next few years, creating better opportunity for improved outcomes in the next 4 years and beyond.