NHS Board Meeting 25 November 2020 Lanarkshire NHS Board Kirklands Fallside Road Bothwell G71 8BB Telephone: 01698 855500 www.nhslanarkshire.scot.nhs.uk



SUBJECT: CHILD POVERTY ACTION REPORTS 2020

1. **PURPOSE**

The purpose of this paper is to provide Board Members with a copy of North and South Lanarkshire Local Child Poverty Action Reports.

For approval	\square	For endorsement	To note	
			 1	

2. ROUTE TO THE BOARD

This paper has been prepared by Kerri Todd and Vivian Boxall and the reports were shared with the NHS L Corporate Management Team.

3. SUMMARY OF KEY ISSUES

The Child Poverty (Scotland) Act 2017 introduced a new requirement for local authorities and each relevant Health Board to prepare Local Child Poverty Action Reports (LCPAR), as soon as reasonably practicable after the end of each reporting year.

Impact of Covid – 19

In normal circumstances, the expectation would be that the LCPAR would be published by the end of June each year. However the impact of the pandemic has meant that work on the report was delayed and as a result, the report will now be published by mid November 2020. Guidance was sought from the Scottish Government in April 2020 to ensure that this was acceptable. As well as the short term impact upon capacity to produce the report, it is accepted that there will be a longer term negative economic impact as a result of the pandemic. This is likely to not be felt equally across society; the impact will be particularly severe for those who are already on low and fixed incomes, suffering from poorer health and in insecure work. Therefore the challenges which were already being faced in reducing child poverty are likely to have been increased by the pandemic and this requires future consideration as the situation becomes clearer over the rest of the 2020/21 year.

4. STRATEGIC CONTEXT

The Local Child poverty action reports should describe any measures taken in the area of the local authority during the reporting year and planned measures for the year ahead. These should contribute to the four national income based child poverty reduction targets to be achieved by 2030.

- (1) Less than 10% of children are in relative poverty
- (2) Less than 5% of children are in absolute poverty
- (3) Less than 5% of children are in combined low income and material deprivation
- (4) Less than 5% of children are in persistent poverty.

The Scottish Government has made it clear that the introduction of the requirement to produce Local Child Poverty Action Reports signals an imperative to undertake new activity and a new approach to tackling Child Poverty; effectively a step-change in tackling child poverty. Where local partners are continuing with existing activity, they should be clear about the supporting evidence base indicating its effectiveness. The Poverty and Inequality Commission has been tasked by the Scottish Government to provide feedback on all the local action reports.

Child poverty is caused by a complex blend of structural issues relating to macro-economic and political factors governing the labour market, employment and social security. Social factors make particular groups especially vulnerable to poverty, e.g. children, lone parents, disabled people and Black & Minority Ethnic (BME) groups. The following diagram from the Scottish Government provides an overview of what its research indicates are the main drivers of child poverty.

Income from social security Income from employment Costs of living and benefits in kind Labour Housing Other Debt Generosity Eligibility Take-up of Skills and costs of of benefits criteria benefits qualifications market costs living Availability Availability Enablers of affordable of affordable access to credit, & accessible & accessible bank account, internet) transport childcare

Drivers of child poverty targets

This paper links to the following:

Corporate objectives	AOP	Government policy	\square
Government directive	Statutory requirement	AHF/local policy	
Urgent operational issue	Other		

5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

Three Quality Ambitions:

Safe [Effective	\square	Person Centred	
--------	--	-----------	-----------	----------------	--

Six Quality Outcomes:

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	\square
People are able to live well at home or in the community; (Person Centred)	
Everyone has a positive experience of healthcare; (Person Centred)	
Staff feel supported and engaged; (Effective)	
Healthcare is safe for every person, every time; (Safe)	
Best use is made of available resources. (Effective)	\square

6. MEASURES FOR IMPROVEMENT

Are contained within each of the plans

7. FINANCIAL IMPLICATIONS

Any financial implications will be met within existing budgets.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

The LCPAR continues to be a point of local and national scrutiny. This could have positive and/or negative impacts on perceptions of the partnership and proactive PR approaches will be required.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership		Effective partnerships	Governance and accountability	
	<u> </u>		 2	57
Use of resources		Performance	Equality	
		Management		
Sustainability				
Management				

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT / FAIRER SCOTLAND DUTY

EQIA in progress.

11. CONSULTATION AND ENGAGEMENT

Locality workforce and senior management consultation sessions were completed at the end of last year, with service users surveys completed in February 2020.

12. ACTIONS FOR THE BOARD

Approve	\square	Endorse	Identify further actions	
Note		Accept the risk identified	Ask for a further report	

The Board is asked to

1. Approve the Local Child Poverty Action Reports.

13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact: vivian.boxall@lanarkshire.scot.nhs.uk kerri.todd@lanarkshire.scot.nhs.uk