Education Scotland
Foghlam Alba

The British Psychological Society
Scottish Division of Educational Psychology

ASPEP
ASSOCIATION OF SCOTTISH PRINCIPAL EDUCATIONAL PSYCHOLOGISTS

Making a difference to excellence and equity for all:

The future of educational psychology services in Scotland

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Foreword

This report includes the work commissioned by the Scottish Government through the National Scottish Steering Group for Educational Psychologists (NSSGEP). The NSSGEP comprises of representatives from the Association of Scottish Principal Educational Psychologists (ASPEP), the Scottish Division of Educational Psychology (SDEP), Educational Institute of Education (EIS), Convention of Scottish Local Authorities (COSLA), the Association of Directors of Education in Scotland (ADES), Education Scotland, and the Directors of Dundee and Strathclyde educational psychology training courses. Education Scotland's inspection evidence from all educational psychology services (EPS) inspected during 2015 to 2017 has also been included in the 2019 report, along with other improvement work facilitated by ES.

The report demonstrates the strength and power of collaboration. Education Scotland has worked closely with educational psychology managers (ASPEP) and practitioners (SDEP) to help provide clarity of purpose, and to facilitate transformational discussions about the future delivery and governance of services going forward. In jointly writing the report, we have looked at the work that educational psychologists (EPs) have been doing to support collaborative research with teachers. Collectively, we have developed a workforce planning model which has allowed us to monitor the supply of, and demand for EPs in Scotland. This has resulted in funding from Scottish Government to support trainee placements, thereby ensuring a consistent supply of EPs. Together we have identified the important role of EPs in helping to overcome inequality in attainment and achievement of the most vulnerable groups of children and young people. EPs are empowering teachers in the classroom, and delivering high quality professional learning to support mental health and wellbeing, and improve teaching and learning.

The profession still have much to do to extend their reach and to balance their work with individual children with that of prevention and early intervention. Our co-produced report will strengthen the work already started by EPs, and help the profession to position itself more effectively in a changing education system. This is not the end of our collaboration, it is a sound basis on which to continue to build and improve.

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Introduction

Who are educational psychologists and what do they do?

EPs work with children and young people from birth to 19 years of age. They advise education authorities, school staff and, importantly, parents/carers on the needs of children and young people with additional support needs (ASN) and the educational provision required for them. Educational psychologists have a unique role in working at different levels within the education system, linking casework to the development of policy and strategy. They provide direct support to individual children and young people and often work with and through others. This enables more children and young people to benefit from educational psychological skills and knowledge. EPs undertake research and contribute to the professional development of, for example, teachers, social workers, and support staff to enhance outcomes for children and young people. A key role for EPs is prevention and early intervention. EPs work to support schools to create positive, inclusive environments which foster and develop children's and young people's resilience and wellbeing to impact positively on mental health. Much of this work results in raising attainment and equity for all, thereby extending beyond those children and young people with ASN. Currently, EPs are employed by local authorities who have a legislative duty to provide such services.

Legislative duties and national context

Section 4 of the Education (Scotland) Act 1980 requires education authorities to provide a psychological service for their area and sets out the functions of that service (which includes, for example, the study of children with ASN). The 1980 Act does not prescribe how this service is to be provided or how the service should be staffed as these are matters for each education authority.

EPS also have a duty to provide advice to the children's reporter on the needs of vulnerable children and young people, including those who commit offences or are in need of care and protection as outlined in the Education (Additional Support for Learning) (Scotland) Act 2004 (as amended). The publication of Education Governance: Next steps – Empowering our teachers, parents and communities to deliver excellence and equity for our children (2017), and the report on Excellence and equity for all - guidance on the presumption of mainstreaming: consultation analysis (2018) will influence the future delivery of EPS.

Evidence base

This report draws on the following evidence.

1. HM Inspectors' scrutiny of all EPS during the period 2015 to 2017 using a validated self-evaluation (VSE) inspection methodology.

2. Research data from the National Action Enquiry Professional Development Programme which focuses on closing the poverty-related attainment gap in the areas of numeracy and health and wellbeing (vis. a vis. Scottish Attainment Challenge (SAC)).

3. Outcomes from the National Conference 2016 jointly sponsored by Education Scotland, ASPEP and The British Psychological Society: Scottish Division of Educational Psychology (SDEP). Participants included EPS managers and practitioners, and a wide range of stakeholders from health, education authority staff and the Scottish Government. The two-day conference consulted on 'What Scotland needs from educational psychology'. (Appendices 2 and 3)

4. Event sampling data investigating the range and content of work undertaken by EPS across Scotland. (Appendix 1)

5. Workforce planning data collected over a four year period to look at patterns of employment, and the supply of, and demand for, EPs.

The report is co-produced, written by Education Scotland, in partnership with the ASPEP and the SDEP. It should be read alongside the inspection findings reported in Educational psychology services in Scotland: making a difference to excellence and equity for all: outcomes from inspection evidence 2015 to 2018. https://education.gov.scot/Documents/EducationalPsychologyServicesInScotland.pdf

The National Action Enquiry Professional Development Programme

In 2011, Education Scotland published a report, Educational psychology in Scotland: making a difference recommending that EPS should engage in research more to inform practice and evaluate outcomes better. During the period 2011 to 2015 there has been a noticeable increase in the use of evidence-based practice by EPs. National guidance has helped to raise the importance of research to inform practice and measure outcomes by schools and other educational establishments. This has been helpful in supporting EPs to use their knowledge of empirical research and child development, to inform teachers' and others' practice. However, only a few services were linking research to national policy effectively or comprehensively. To help services apply their knowledge more directly to national priorities, Education Scotland in collaboration with the profession and the Scottish Government launched a professional development research programme in 2015-16: The National Action Enquiry Professional Development Programme. Practitioners from across almost all authorities applied to take part in the programme. The research focused on closing the poverty-related attainment gap in numeracy and health and wellbeing. EPs worked in their education authority schools with teachers and other professionals to improve attainment and achievement in both curriculum areas. All interventions are informed by research and applied by Scottish practitioners. Summary reports can be found through this link.

The National Action Enquiry Professional Development Programme demonstrates the impact that high quality research can achieve in changing teaching practice and improving outcomes for children, young people and families. Methods which deploy pre- and post-intervention measures provide robust evidence of outcomes. This is exemplified in a number of the reports published by Education Scotland, a few of which have been developed further and reported in peer reviewed journals.[1]

Many of the approaches being used by EPs are beginning to impact on teaching and learning in the Pupil Equity Fund (PEF) schools and SAC authorities. EPS are beginning to use implementation science as a means of self-evaluation more and are helping teachers to apply improvement methodology to evaluate their classroom practice more robustly. The National Action Enquiry Professional Development Programme is allowing EPs to focus on research to help Scottish practitioners to improve their approaches to teaching numeracy, literacy and health and wellbeing, for example, the work undertaken by Fife psychologists. (Action enquiry research: Fife Council). The programme is also allowing EPs to work together to share skills and knowledge, thereby improving leadership across the profession. The emphasis on national priorities is allowing EPs to demonstrate the value added by applied research in Scottish schools and establishments more explicitly, for example, North Lanarkshire's work on numeracy. (Action enquiry research: North Lanarkshire Council). The focus of all the research is on closing the poverty-related attainment gap, however, not all services defined their poverty gap adequately. In January 2018, a second professional development programme started. All participants have been asked to define the poverty gap in their context (rural and urban), and to link with the related aim of achieving equity and excellence for all. This will help to ensure that services are developing their own and others' thinking about what works best and with which children and young people. Reports will be available in April 2019.

1 West Dunbartonshire paper ref Ellen Moran and Joanna Moir Closing the vocabulary gap in early years: Is 'Word Aware' a possible approach? *Educational & Child Psychology Vol. 35 No. 1*

To facilitate professional learning and to build capacity in schools, EPS should take active steps to link with university psychology departments across Scotland. Such collaboration should focus on using the respective strengths of academic research, as produced by psychology departments, and the EPs' ability to apply the research in schools, establishments and communities to improve outcomes for children and young people. Such symbiosis will help to ensure a constant flow of robust evidence to inform new and innovative ways of working. Additionally, policy makers should make more effective use of the collective knowledge which EPs have about child development, how children learn and how to apply this in educational and community contexts.

An example of the application of research to national priorities and school education is demonstrated by the Action Enquiry Programme undertaken by EPs across Scotland. This requires consolidation, and development as outlined above.

Recommendation 1: EPS should actively pursue opportunities to collaborate with university psychology departments more.

Event sampling

Background

In May 2015, the Principal Educational Psychologists of all 31 education authority EPS in Scotland participated in a national event sampling research exercise.

The research took place over one week in the month of May and provided quantitative and qualitative data about service delivery.

Psychologists were asked to provide a record of the activities they were involved in throughout the week and map each activity against the matrix used in the Currie report. In addition, psychologists were asked to record if the activity was associated with mental health. The number of hours spent on activities at each level (child/family; school/establishment; authority/council) for each core function (consultation; assessment; intervention; training; research) and the number of hours spent on activities associated with mental health were calculated.

Additionally, psychologists answered three open questions to help provide qualitative data. They were asked to provide some supporting information about activities which are not captured under the core functions, and about the strengths and challenges of their service delivery.

Findings from the event sampling

A 76% return rate was achieved.

The results are shown in Appendix 1. In summary:

- 38% of work is delivered at the individual level. Almost all individual work is delivered to the most vulnerable children and young people. Individual level work includes, for example:
  - psychological advice and consultation to other agencies to help meet children's and young people's needs in the least intrusive environment;
  - assessment of needs using psychometric tools and contextual assessments, observation, developmental interviews and information from teachers, parents/carers and other professionals; and
  - direct and indirect interventions such as mental health support through counselling, coaching and cognitive behavioural therapy, as well as the application of programmes to address autism and dyslexia.
- 35% of EP work is delivered at school and education authority levels. Almost all education authority work is strategic. Services provide advice on policy and specific approaches to meeting children's and young people's needs, such as nurture, restorative approaches, resilience, video interactive guidance, building staff capacity in teaching early literacy skills, working with children and young people on the autism spectrum, with dyslexia, and other ASNs.
- the remaining 27% of EP time is spent on other activities such as advice to other professionals, and working in partnership with other agencies out with the school or education authority. EPS across Scotland provide significant input to multi-disciplinary teams such as Getting it right for every child (GIRFEC).

- of the core functions, 60% involves consultation, assessment and intervention. 13% is spent on training and research and 27% on other activities such as administration, travel, and non-psychological activities. Services need to identify more clearly what 'other' activities are, if they involve the delivery of psychology, and whether they add value.
- 33% of EPs work across the five core functions relate to mental health work. The VSE evidence and event sampling data demonstrates an increasing role of EPS in the early identification and prevention of mental health problems, such as anxiety, trauma resulting from adverse childhood experiences, self-harm and suicide. Much of this work focuses on professional learning, work with individual children, young people and families, and authority guidance on issues such as managing traumatic and critical incidents (see Appendix 1).

Recommendation 2: EPS should take action to ensure that service delivery in mental health is recognised, measured for effectiveness, and aligned with NHS mental health services at policy levels better.

Implications of above on Currie functions and levels of engagement

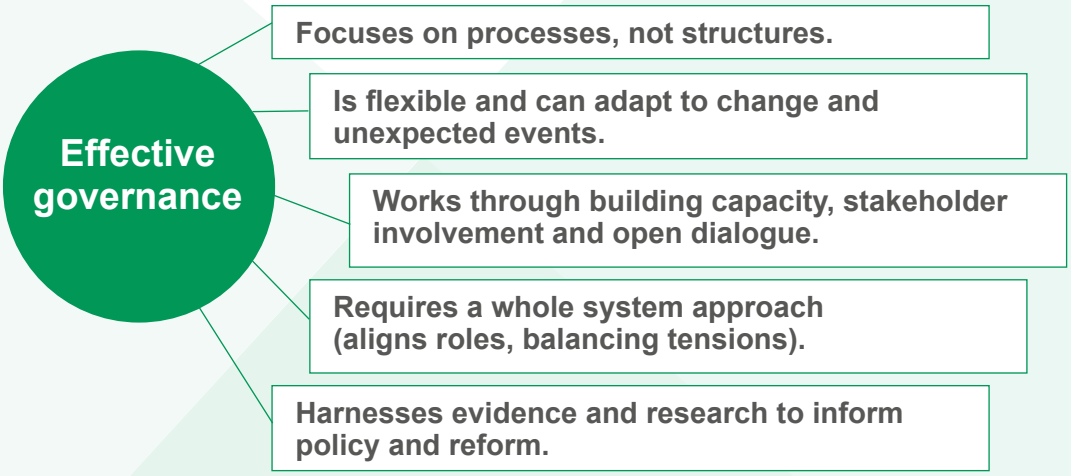
The event sampling, VSE scrutiny evidence, and The Action Enquiry Professional Development Programme, suggest that there has been a subtle, but important shift in the kind of activities in which EPS are now involved. Mental health interventions have increased, casework and capacity building for empowerment now have equal status. Research is still a small percentage of the overall service provided by EPS. However, it is more focused around national priorities, integrated with school improvement plans better, and gaining more interest and influence within local authorities, recognising the EPS' expertise in evaluation.

The Currie (2002) functions of consultation, assessment, intervention, training and research, are still a useful framework for EPS to ensure a full range of psychological services are delivered across Scotland. However, the functions now need to be considered holistically and not as discrete functions. Self-evaluation of each core function as a separate entity is no longer meaningful. The data from the event sampling demonstrates the symbiotic relationships across the core functions of consultation, assessment, intervention, training and research. It is impossible to deliver assessment, intervention and training without undertaking research. Similarly, assessment should always inform intervention. A more helpful framework may be to evaluate the quality of psychology delivered across individual, authority, regional and national levels. This will require a greater emphasis on outcomes and impact which was identified as an area for improvement in Education Scotland's scrutiny report.

The profession also needs to continue to improve how they evidence the value added of direct work with children and young people. They also need to show how indirect systemic work impacts on stakeholders such as teachers and other professionals, resulting in longer term outcomes for children and young people.

The Organisation for Economic Cooperation and Development (OECD) model of effective governance (see diagram 1 below) emphasises systemic change as an effective way of building capacity in others to remove barriers which impact negatively on children, young people and communities. The approach lends itself to a more integrated approach of the Currie (2002) functions, and has the potential to provide a model for future delivery of educational psychology in education establishments, Regional Improvement Collaboratives (RICs) and local communities.

Diagram 1: OECD model of effective governance*.



* Model developed by Carolyn Brown, Depute Principal Educational Psychologist, Fife Council Educational Psychology Service

Recommendation 3: The Currie functions require refinement to meet the changing needs of the education system more effectively.

Recommendation 4: Education Scotland should work with the profession to review and update the quality improvement framework Quality management in Local Authority Educational Psychology Services, parts 1 and 2.

Workforce planning data collected over a three year period to look at patterns of employment, and the supply of, and demand for, EPs

Background

The Currie Review (2002) and HM Inspector's aspect report: Educational psychology in Scotland: making a difference (2011) provide the context for the 2015 workforce planning survey of EPs in Scotland. The Currie Review (2002) commented on staffing levels in Scotland and the need for training and recruitment of more EPs. More recently, Education Scotland's inspection report noted the increasing demand for educational psychology input at child, school, education authority, and national levels. Additionally, psychologists are being used to support children, young people and families' mental health more than previously, and to help others to prevent mental health issues from arising. Going forward, Regional Improvement Collaboratives have the potential to add a new dimension to the delivery of educational psychology requiring further exploration.

EPS are reviewing their service delivery arrangements to ensure that they continue to meet the needs of vulnerable children, young people and families and contribute to national and local priorities for all children and young people. The increased emphasis nationally on Developing the Young Workforce and the post-school population is also resulting in significant increases in demand from schools and communities for psychological services. In response to the above, the ASPEP/ SDEP Workforce Planning Report 2012 recommended that:

> **"a Scottish National Steering Group be created to oversee the role and function of EPs in supporting local authorities and providing advice to the Scottish Government in terms of addressing its national priorities for education."**

The recommendation resulted in the establishment of the NSSGEP.

As noted previously, the NSSGEP agreed to commission the 2014-15 Workforce Planning Survey to provide baseline data of the EPS workforce in Scotland. In early 2014, the NSSGEP asked Education Scotland and ASPEP to develop an outline of the research tasks involved. They were also charged with collecting and analysing data.

Key aims of the workforce planning survey

The key aim of the survey, is to gather data and information on:

- staffing levels and staffing patterns of EPs;
- demographics of the workforce;
- maternity, sickness and turnover patterns;
- vacancies and recruitment;
- entry and exit patterns; and
- trainee and probationer EP numbers.

Findings

The workforce planning survey now has four years of data which allows services to monitor the supply and demand for EPs across Scotland. A summary of the findings is below.

In April 2018 there were 344.5 full-time equivalent (FTE) permanent EPs of all grades. Over the last four years of the survey there has been a decline in the number of FTE posts, (equivalent to 17 FTE). Current data suggests that the year-on-year decline may be levelling off. The number of vacancies is currently 33 FTE, whilst the number of new posts resulting from SAC and PEF has increased from 8.1 FTE in 2015-16 to 17.8 FTE in 2016-17, and 13.5 in 2017-18. Analysis of the age profile of the profession, the number of part-time and temporary contracts, and opportunities lost due to lack of availability of EPs to respond to increased funding through PEF in particular, requires rigorous monitoring by the profession.

Implications

The declining numbers of EPs is impacting on services' ability to deliver core functions across the three levels of engagement. A number of areas of work which were previously supported, such as input to colleges, and work with school leavers to promote positive destinations, have been discontinued, or significantly reduced. Almost all services in Scotland are looking at how they can reconfigure their models of service delivery to ensure equity for all stakeholders. The increased demands for assessment of ASN, interventions in relation to wellbeing and involvement in ASN tribunals as well as targeted support related to PEF is placing increased pressure on staffing. There is a danger that the potential of EPS to close the poverty-related gap is impaired as a result of insufficiently experienced staff.

To address the decline in numbers, the Scottish Government has agreed to fund training places in partnership with COSLA, ADES, and the profession. The funding of trainees will provide more EPs in the future. This will allow EPS to respond to the increasing demand from schools, authorities and families for psychological input. It will also help services to build on their important work in mental health, prevention and early intervention, together with addressing the poverty-related attainment gap, and achieving equity and excellence for all. Consideration should be given to how central funding provided to local authorities for specific areas of need such as care experienced children and young people, counselling services, and early years could be used to facilitate and enhance EPS activity and impact in these areas.

Recommendation 5: There continues to be a need to monitor the supply and demand of EPs nationally.

Robust data is required to ensure that EPS can deliver their statutory duties and support national priorities in education effectively. This should be linked to inspection evidence to allow a thorough investigation of how EPS are delivered and whether this is sustainable going forward.

Recommendation 6: EPS should ensure approaches to self-evaluation secure continuous improvement.

Self-evaluation for improvement and leadership of change is crucial to support continuous improvement in relation to the quality of services provided by EPs to children, young people and their families, particularly vulnerable groups such as those experiencing care. Given the investment in the training of EPs, services will need to be able to demonstrate the value added by them to key policy drivers such as those outlined in the NIF, SAC, and Getting it right for every child.

Looking forwards: recommendations for the delivery of EPS in Scotland – the future

Inspection evidence indicates that EPS are delivered effectively through a consultation model and direct assessment with advice on intervention strategies. Almost all stakeholders report that they value the EPs expertise during such consultations about individual children and young people. Evidence demonstrates effective work in building capacity across systems and services in the majority of services. In the best of practice, the impact of such interventions is to improve schools' and communities' ability to meet the needs of children and young people where they live and where they are educated. The majority of EPS work well with local authorities and partner agencies to implement national policy at both strategic and operational levels. However, almost all services struggle with the balance between working with individual children and young people and building capacity in the education system to intervene early and prevent future difficulties. Services are attempting to spread themselves too thinly. The traditional model of providing a regular EP link to every school in Scotland based on school roll and Scottish Index of Multiple Deprivation (SIMD) is becoming increasingly difficult to deliver. The NIF provides a clear direction for EPS to help them prioritise and add value through a well-chosen range of psychological services.

In 2016, Education Scotland hosted a national conference in partnership with ASPEP and SDEP, managers of EPS, representatives from SDEP, COSLA, ADES, local authorities, the Scottish Government and health. All partners participated in a transformational change exercise to explore the issue of: what Scotland needs from educational psychology. The outcomes from the discussion can be seen in Appendix 2 and 3.

As a follow-up to the conference, a working group from Education Scotland, ASPEP and SDEP investigated the possible structure of EPS in the context of changing needs and demands from stakeholders and the education system.

In looking at the possible structures it was agreed that the following principles should be applied.

1. Greater autonomy and empowerment of EPs will be required to meet the needs of individual children, young people and their families to ensure objectivity regarding advice given. Any future organisational arrangements should enhance and support the ability of EPs to provide independent, objective advice regarding the needs of children and young people. Greater autonomy may also include funding, employment of staff and managing the supply of and demand for staff.

2. Organisational arrangements should promote and develop the high quality strategic work of EPs currently being delivered to education authorities and schools to improve outcomes for children and young people. Greater strategic input at Scottish Government policy levels should also be facilitated.

3. Systemic change should provide structures and processes which improve EPs' ability to work in partnership across health, social care and education, with the possibility of joint funding streams.

4. Organisational structures should support and promote the key role played by EPS in research and development in order to embed the most effective evidenced-based practice across Scotland's schools, education establishments and communities.

Current model of EPS delivery

The working group considered the benefits from the current organisational structure and made reference to a number of other possibilities. The profession and stakeholders require further opportunities to debate the range of structures which will meet the principles outlined above.

Benefits of the current model

- Currently, EPS provide a range of Currie functions to education authorities, schools, children and young people. All of these services are quality assured by EPS, and overseen by the education authority. External quality assurance is provided by Education Scotland. This helps to ensure that the services delivered by EPS match the priorities of the council. EPS improvement planning is informed by the council's single outcome agreement, contributing to the overall objectives of the education authority. All of the above provides coherence with national, local and service priorities.
- Current arrangements benefit from the EPS' knowledge of the schools and families in the education authority which helps to improve the quality of their advice at both strategic and operational levels.
- EPS are protected within the education authority structure with guarantees of continued funding. They also benefit from the infrastructure provided within an education authority, such as human resources, payroll, complaints and child protection procedures, and other similar corporate policies.
- Generally, the working relationships between EPS and the education authority function well with agreements around the deployment of resources and the need to manage finances within council budgets. In many instances this has helped to improve inclusive approaches, and enhance provision for vulnerable groups.

Limitations of current model

There are risks that EPS, which are too closely aligned with the council budget, are not able to provide independent and objective advice. The British Psychological Society's Code of Ethics and Conduct (2018) helps to minimise such risks irrespective of organisational structure. The increase in EP work in mental health and wellbeing and the NIF priorities are all factors which could push EPS towards a more corporate structure to enable them to meet increased demands more effectively. Some of these models are presented below.

Other possible models considered were:

School based model

- Schools would have a delegated budget for EPS.
- EP service delivery would reflect professional guidance (Currie functions) and national legislation.

Regional Improvement Collaborative Model (RIC)

- RICs would have an allocation of funding to provide EPS as a cluster, for each authority or a combination of both.
- The RICs would establish the vision, values and aims for EPS and the priorities for service delivery in collaboration with managers of services.

Current model

National model

- A national engagement structure would oversee local and regional practice while responding to a national agenda with a common vision, values and aims.
- A national board would have a remit to develop and oversee guidance and operating procedures for the profession.

Third sector model

- EPS would be delivered by third sector providers with charitable status.
- They would work in partnership with EPs operating within local authorities, or provide additionality, working in specific areas of shortage.

All of the above models have risks and benefits which have been partially explored by the profession. The next step will be for the profession to take forward the debate in the context of a changing educational landscape. They will need to take account of increasing demands by children, young people, families and communities, for psychological support in the areas of ASN and mental health and wellbeing. The question will be, how does the profession adequately meet these demands within current and future service delivery models?

Recommendation 7a: A national debate regarding future organisational arrangements, funding and delivery contexts for educational psychology in Scotland is urgently required.

Recommendation 7b: There is a need to develop services' national role to inform policy and practice.

Summary

Recommendation 1: EPS should actively pursue opportunities to collaborate with university psychology departments more.

Recommendation 2: EPS should take action to ensure that service delivery in mental health is recognised, measured for effectiveness, and aligned with NHS mental health services at policy levels better.

Recommendation 3: The Currie functions require refinement to meet the changing needs of the education system more effectively.

Recommendation 4: Education Scotland should work with the profession to review and update the quality-improvement framework: Quality Management in Local Authority Educational Psychology Services, parts 1 and 2.

Recommendation 5: There continues to be a need to monitor the supply and demand of EPs nationally.

Recommendation 6: EPS should ensure approaches to self-evaluation secure continuous improvement.

Recommendation 7a: A national debate regarding future organisational arrangements, funding and delivery contexts for educational psychology in Scotland is urgently required.

Recommendation 7b: There is a need to develop services' national role to inform policy and practice.

Appendix 1: Event sampling of EPs activity

Activities recorded against Currie matrix

All grades

There were a total of 322 responses (9,388.75 overall hours) which could be analysed.

Table 1. Percentage of time recorded under each level, for all grades

Level	Percentage of time
Child and family	38%
School/establishment	18%
Education authority/council	17%
Other	27%

Table 2. Percentage of time recorded under each function, for all grades

Function	Percentage of time
Consultation/assessment/ intervention	60%
Training	8%
Research	5%
Other	27%

Table 3. Percentage of time recorded across each level and function, for all grades

Function	Level			Total
	1	2	3	
Consultation/assessment/ intervention	37%	14%	9%	60%
Training	0.5%	3%	4.5%	8%
Research	0.5%	1%	3.5%	5%
Other				27%

Of the overall total number of hours recorded, there were 2,670 hours recorded as time spent on activities associated with mental health. This was around 28% of the overall total hours.

Table 4. Total hours and percentage of time recorded on mental health under each level, for all grades

Levels	Level total hours	Total hours on mental health	Percentage of levels total hours on mental health	Percentage of overall total hours on mental health
Child and family	3594	1256.25	35%	13%
School/establishment	1703.5	529.5	31%	5%
Education authority/council	1549.25	553.75	36%	6%
Other	2542	330.5	13%	4%
Overall total	9388.75	2670	28%	

Table 5. Total hours and percentage of time recorded on mental health under each function, for all grades

Functions	Function total hours	Total hours on mental health	Percentage of function total hours on mental health	Percentage of overall total hours on mental health
Consultation/assessment/ intervention	5599.75	1886	34%	20%
Training	772	346	45%	4%
Research	475	188	40%	2%
Other	2542	330.5	13%	4%
Overall total	9388.75	2670	28%	

Management

There were a total of 60 responses from management (1,987 overall hours) which could be analysed.

Table 6. Percentage of time recorded under each level, for management

Level	Percentage of time
Child and family	22%
School/establishment	13%
Education authority/council	30%
Other	35%

Table 7. Percentage of time recorded under each function, for management

Level	Percentage of time
Consultation/assessment/ intervention	52%
Training	7%
Research	6%
Other	35%

Table 8. Percentage of time recorded across each level and function, for management

Function	Level			Total
	1	2	3	
Consultation/assessment/ intervention	22%	10%	20%	52%
Training	0% (Less than 1%)	2%	5%	7%
Research	0% (Less than 1%)	1%	5%	6%
Other				35%

Of the overall total number of hours recorded, there were 499 hours recorded as time spent on activities associated with mental health. This was around 25% of the overall total hours.

Table 9. Total hours and percentage of time recorded on mental health under each level, for management

Levels	Levels total hours	Total hours on mental health	Percentage of levels total hours on mental health	Percentage of overall total hours on mental health
Child and family	446.25	180.25	40%	9%
School/establishment	255.25	70.25	28%	4%
Education authority/council	600	181	30%	9%
Other	685.5	67.5	10%	3%
Overall total	1987	499	25%	

Table 10. Total hours and percentage of time recorded on mental health under each function, for management

Functions	Function total hours	Total hours on mental health	Percentage of function total hours on mental health	Percentage of overall total hours on mental health
Consultation/assessment/ intervention	1024.25	343.5	34%	17%
Training	149	33.5	22%	1%
Research	128.25	55.5	43%	3%
Other	685.5	67.5	10%	3%
Overall total	1987	499	25%	

Seniors

There were a total of 46 responses from seniors (1,278.5 overall hours) which could be analysed.

Table 11. Percentage of time recorded under each level, for seniors

Level	Percentage of time
Child and family	43%
School/establishment	18%
Education authority/council	15%
Other	24%

Table 12. Percentage of time recorded under each function, for seniors

Function	Percentage of time
Consultation/assessment/ intervention	60%
Training	11%
Research	5%
Other	24%

Table 13. Percentage of time recorded across each level and function, for seniors

Function	Level			Total
	1	2	3	
Consultation/assessment/ intervention	42%	11%	7%	60%
Training	1%	5%	5%	11%
Research	0% (Less than 1%)	2%	3%	4%
Other				24%

Of the overall total number of hours recorded, there were 420.5 hours recorded as time spent on activities associated with mental health. This was around 33% of the overall total hours.

Table 14. Total hours and percentage of time recorded on mental health under each level, for seniors

Levels	Levels total hours	Total hours on mental health	Percentage of levels total hours on mental health	Percentage of overall total hours on mental health
Child and family	555.75	192.5	35%	15%
School/establishment	224.25	80	36%	6%
Education authority/council	190.5	85	45%	7%
Other	308	63	20%	5%
Overall total	1278.5	420.5	33%	

Table 15. Total hours and percentage of time recorded on mental health under each function, for seniors

Function	Function total hours	Total hours on mental health	Percentage of function total hours on mental health	Percentage of overall total hours on mental health
Consultation/assessment/ intervention	770.5	277	36%	22%
Training	142.5	67	5%	5%
Research	57.5	15.5	27%	1%
Other	308	63	20%	5%
Overall total	1278.5	420.5	33%	

Maingrades

There were a total of 203 responses from maingrades (5,902.25 overall hours) which could be analysed.

Table 16. Percentage of time recorded under each level, for maingrades

Level	Percentage of time
Child and family	43%
School/establishment	20%
Education authority/council	12%
Other	25%

Table 17. Percentage of time recorded under each function, for maingrades

Function	Percentage of time
Consultation/assessment/ intervention	63%
Training	8%
Research	4%
Other	25%

Table 18. Percentage of time recorded across each level and function, for maingrades

Function	Level			Total
	1	2	3	
Consultation/assessment/ intervention	42%	16%	5%	63%
Training	1%	3%	4%	8%
Research	0% (Less than 1%)	1%	3%	4%
Other				25%

Of the overall total number of hours recorded, there were 1,733.5 hours recorded as time spent on activities associated with mental health. This was around 29% of the overall total hours.

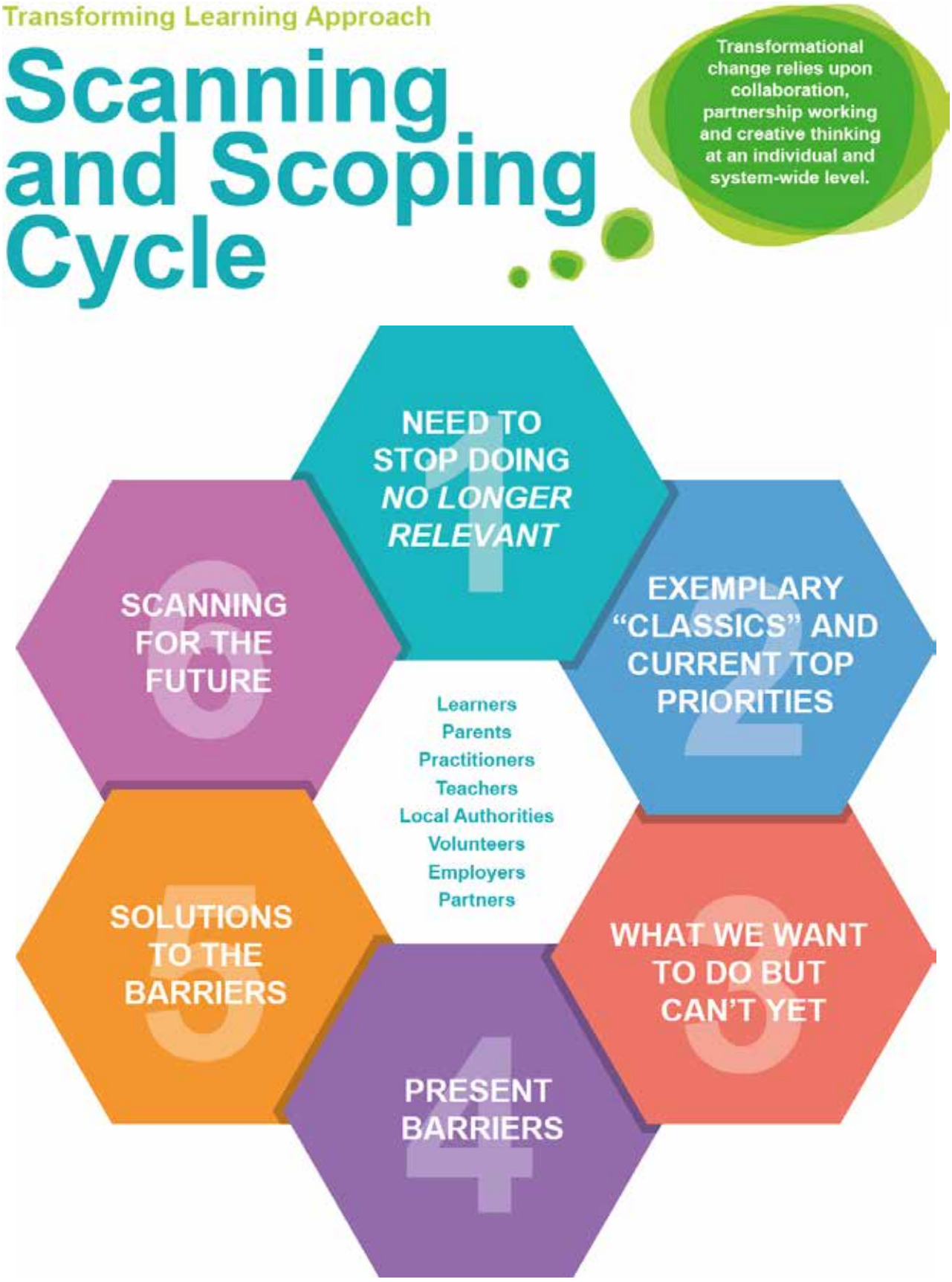
Table 19. Total hours and percentage of time recorded on mental health under each level, for maingrades

Levels	Levels total hours	Total hours on mental health	Percentage of levels total hours on mental health	Percentage of overall total hours on mental health
Child and family	2544	895	35%	15%
School/establishment	1160	392.25	31%	6%
Education authority/council	727.75	276.25	38%	5%
Other	1470.5	200	14%	3%
Overall total	5902.25	1733.5	29%	

Table 20. Total hours and percentage of time recorded on mental health under each function, for maingrades

Functions	Function total hours	Total hours on mental health	Percentage of function total hours on mental health	Percentage of overall total hours on mental health
Consultation/assessment/ intervention	3731	1241	33%	21%
Training	450.5	218.5	49%	4%
Research	250.25	74	30%	1%
Other	1470.5	200	14%	3%
Overall total	5902.25	1733.5	29%	

Appendix 2:


Transforming Learning Approach
Scanning and Scoping Cycle
Transformational change relies upon collaboration, partnership working and creative thinking at an individual and system-wide level.
1
NEED TO STOP DOING NO LONGER RELEVANT
2
EXEMPLARY "CLASSICS" AND CURRENT TOP PRIORITIES
3
WHAT WE WANT TO DO BUT CAN'T YET
4
PRESENT BARRIERS
5
SOLUTIONS TO THE BARRIERS
6
SCANNING FOR THE FUTURE
Learners
Parents
Practitioners
Teachers
Local Authorities
Volunteers
Employers
Partners

Transforming Learning Approach

Scanning and Scoping Cycle

Strategic impact at National and Local authority levels/Value added

Stop taking on strategic engagement that does not require educational psychologist involvement or tasks that we know don't have a significant impact or added value, that are peripheral to our role and that lie within the remit of other designations of staff.

Service Delivery

Stop thinking/working in silos and demonstrate impact through multiagency integrated engagement to avoid duplication of effort and target earlier intervention to produce a less reactive service delivery

Stop thinking only of delivering services in the traditional manner i.e. time allocation system. Develop a local model that utilises the creativity of services users in order to produce a high impact efficient, effective service.

Psychological Practice

Stop attending review, or other meetings, where there is no clear purpose, or role for psychology, where the psychologist has little to contribute and no impact to make, all meetings must have a stated aim.

Stop engaging in non-evidence based work, low impact casework and training interventions and don't responding to emergency type situations.

Where are we now and what needs to be different?

Instructions

Complete the scoping and scanning cycle above by responding to the six prompts to understand the past and present in your learning environment.Use this knowledge to consider what the top priorities are to be developed in order to be responsive to thefuture needs of all learners.

Transforming Learning Approach

Scanning and Scoping Cycle

Strategic impact at National and Local authority levels

Develop a national approach to government and local priorities that allows services to build capacity with stakeholders in terms of raising attainment and other national priorities and includes psychologists being involved at the design stage of strategy, policy initiatives, and research.

Have a national coherent profile that is consistent across boundaries. This will involve services working collaboratively and sharing knowledge and systems across authorities.

Liaise with the Scottish Government and CAMHS at a strategic level to have a joined up approach to mental health and wellbeing and to consider funding for early intervention.

Value added

Adding value by working across all levels, with a unique objective psychological perspective that allows us to make connections, innovate, and bring a holistic quality of evaluative thinking to lead change and influence culture.

Service Delivery

Plan for staffing levels that ensures time for psychology by having a clear understanding of supply and demand that makes provision for long term cover and ensures staff welfare

Have more efficient and effective, integrated and collaborative working within and between services and stakeholders.

Psychological Practice

Have a National hub to enhance the role research and best practice, to utilise technology to do this effectively in order that we can best support Government initiatives and action research within establishments

Continue to take the multi-agency lead and use our specialist ASN knowledge to support the team around the child in order to meet the needs of all young people at risk.

Develop a strategic approach to support children and young people that includes a more therapeutic response to mental health and wellbeing difficulties

Workforce planning

Review the current training qualification, investigate funding options and consider a greater focus on supporting the professional practice of psychologists throughout their career

Where are we now and what needs to be different?

Instructions

Complete the scoping and scanning cycle above by responding to the six prompts to understand the past and present in your learning environment.Use this knowledge to consider what the top priorities are to be developed in order to be responsive to thefuture needs of all learners.

Transforming Learning Approach

Scanning and Scoping Cycle

Strategic impact at National and Local authority levels

Developing an agreed understanding between the psychological service and the Local Authority about our role within establishments and our links with key priorities.

Structurally partnered in more strategic ways across psychology and well-being partners for example, CAMHS, that allows the development of informed therapeutic interventions and strategic conversations about the key psychological priorities

Develop a national approach to government and local priorities that allows services to build capacity with stakeholders in terms of raising attainment and other national priorities and includes psychologists being involved at the design stage of strategy, policy initiatives, and research.

Have a national coherent profile that is consistent across boundaries. This will involve services working collaboratively and sharing knowledge and systems across authorities nationally and should include for example: a universal approach to the way we support the needs of LAC and a shared understanding of what is meant by mental health

Service Delivery

Effectively utilise technology, embracing the revolution in technology in psychology practice, better use of ICT to promote efficient practices and support remote areas

More effective and efficient integrated and collaborative working within the service and with other services and stakeholders

Psychological Practice

More effectively translating research into practical approaches that practitioners then apply directly with establishments, children and young people. Research, including training for action research, within establishments which builds capacity and measures outcomes and the impact on all, including the most vulnerable

Workforce planning

Review the current training qualification, investigate funding options and consider a greater focus on supporting the professional practice of psychologists throughout their career

Plan for staffing levels that ensures time for psychology by having a clear understanding of supply and demand that makes provision for long term cover and ensures staff welfare

Where are we now and what needs to be different?

Instructions

Complete the scoping and scanning cycle above by responding to the six prompts to understand the past and present in your learning environment.Use this knowledge to consider what the top priorities are to be developed in order to be responsive to thefuture needs of all learners.

Transforming Learning Approach

Scanning and Scoping Cycle

Strategic input at National & LA Levels

EPS Staffing levels across Scotland lack equity
Major financial constraints across local authorities impact on effective EPS service delivery
The role & function of EPS is not well understood by partners, stakeholders and politicians and Scottish Government
The challenge for LAs services to work in genuine partnership, plan priorities consistently, & target resources to those who need it most equitably & effectively
No means yet for EPS to share best practice & research between EPS and on a national scale
Different Local Authorities processes & procedures across Scotland resulting in different EPS practice & service delivery
No forum for EPS to meet Scot Gov to engage, plan and contribute to national priorities
Lack of funding of for Eps Training Courses

Service Delivery

Conflicting service delivery models between Health & Education reduces potential impact of shared approaches towards achieving positive outcomes for vulnerable yp

Psychological Practice

Lack of joined up thinking across mental health and wellbeing at national & political levels & lack of understanding about the significant contribution EPs can make
Contradiction about supporting early years as a preventive model but still need to support high tariff support cases/issues - need to do both

Where are we now and what needs to be different?

Instructions

Complete the scoping and scanning cycle above by responding to the six prompts to understand the past and present in your learning environment.Use this knowledge to consider what the top priorities are to be developed in order to be responsive to thefuture needs of all learners.

Transforming Learning Approach

Scanning and Scoping Cycle

Strategic impact at National and Local authority levels

Greater collaboration between health and LAs re psychological service delivery and expertise. Consider integrated teams e.g. mental health and wellbeing.

Value added

Nationally coordinated with better links to national bodies e.g. ADES taking national overview –EPs giving evidence/direction at a national level to LAs.
Need to change expectations of stakeholders –role for managers in EPS. Be bolder in tackling the structures and systems that are barriers.

Service Delivery

Agreed National agenda around our service delivery.
Collaborative work across authorities on certain functions – via ASPEP? For more than information sharing – issues, costs, getting agreement.
Smarter use of Information Technology and put Technology solutions at the core of our practice (purchase, procure or commission).

Psychological Practice

Professional framework of standards:-agreed outcomes for the profession in Scotland. Being very clear about what we do well and being there at the beginning of developments.
Sharing outcomes across services and at a national level, our own improvement framework to sit alongside the NIF.

Workforce planning

Have authorities employ trainees or assistants and fund them through and increase the supply and quality of EPs. Ensure the sustainability of the training programmes.

Where are we now and what needs to be different?

Instructions

Complete the scoping and scanning cycle above by responding to the six prompts to understand the past and present in your learning environment.Use this knowledge to consider what the top priorities are to be developed in order to be responsive to thefuture needs of all learners.

Transforming Learning Approach

Scanning and Scoping Cycle

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Appendix 3: Outcomes from Managers of Educational Psychology Services in Scotland

A clear consistent service with a higher national profile that is involved in key strategic partnerships at a strategic planning level.

Research driven with national data frameworks focussed on impact & outcomes in relation to national priorities.

Refocused service delivery which is flexible & embedded in Children's Services.

Resources are targeted where needed.

Greater coherence across services; the workforce works flexibly across services, sharing skills & more active collaboration.

The training model if fit for purpose ensuring high quality recruits, equitable access & sufficient supply of EPs.

Stronger relationships with Education Scotland and The Scottish Government.

Involved in the design & implementation of policy & practice for national & local initiatives.

IT & social media actively used to enhance psychological practice.

Strong leadership at all levels.

Dream

Now

- Reliable, high quality, motivated workforce.
- The statutory & Currie functions.
- Unique contribution through theoretical knowledge & evidence practice including change management & implementation science.
- Developing constructive relationships with partners.
- Providing support & challenge
- Strong reflective practice & self-evaluation
- Supporting national priorities such as GIRFEC, Raising attainment, closing the poverty related attainment gap & mental health & wellbeing
- Climate of uncertainty & pressure on capacity.
- Workforce planning challenges
- Vulnerability of current MSc training programmes.

Stop doing

- Activities that do not have a clear rationale for psychology, that we do not add value to or someone else can do
- Working in isolation i.e. duplicating work across 32 EPSs
- Unnecessary paperwork, admin tasks & record keeping
- Low impact labour intensive tasks
- Allocating time in the way we always have
- Fostering dependency, gatekeeping
- Driven by e-mail communications
- Activities not on the improvement plan
- Invisible psychology

Keep doing

- Capacity building including with sustainability planned for
- Self-evaluation
- Research
- Measuring impact.
- Working in partnership at every level
- Five core functions.
- Focussed engagement from SDEP &ASPEP on specific areas such as training course content & selection; service delivery developments; raising profile & reputation.
- Managing change & implementing innovation
- Model psychology & solution orientated approaches
- Front line service working with the ASN core work, most vulnerable & preventing high cost external placements
- Explicit links between current work & national agenda
- Workforce planning

Start doing

- Working more collaboratively across EPSs e.g. joint work, VSE improvement partnerships.
- Improved communication, i.e. compatible IT, building better narratives of EP role in national priorities, HGIOS4 etc
- Review core functions & levels, to reflect GIRFEC and more integrated approach to the functions
- Review service delivery
- National priorities - being at the table & influencing at early stages & bringing EP skills to this
- Demonstrate the economics of what we do - cost benefit analysis
- Local, community needs approaches
- Stronger partnership links. E.g. ADES, universities

Risks

- Reduced capacity, impact &effectiveness. EPSs unable to function as they try to do everything with further cuts.
- Failure to recruit in a profession that is less attractive to join and training courses cease.
- Reduced to market forces - primary role undermined; stakeholders resisting change &managing other services.
- Legislative requirements unmet – ASL Act &inclusion – financial & moral cost
- Becoming a targeted service instead of a universal service
- Postcode inequalities increase in terms of access to psychology

5 years on…

- This will be used in the improvement plan & can help inform the next session.
- National level strategic work. : national strategic planning; cohesion; consistency, and collaboration across services and unity within the profession in terms of service delivery; additional National layer to Currie; linked to national priorities; better able to demonstrate short, medium term and long term outcomes
- Psychological theories, research and data used to target interventions that evidence our contribution in terms of improvements in outcomes for children, young people and their families.
- Fully embedded in local authority partnership structures. Impacting on strategic planning at this level, improved information sharing and collaborative relationships.
- Reviewed training courses leading to high quality training that is responsive to local and national needs. Equity of access was highlighted regardless of financial constraints for high quality candidates. Different routes into the profession would be explored.
- Reviewed balance of the Currie functions in relation to the context.
- Better visibility, marketing and naming of what EPS do.
- Embracing emergent technology and counter acting the dangers.
- Agreed staffing ratios sufficient to deliver a quality service.

Acknowledgments

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Frank Coletta: Depute Principal Educational Psychologist: NSSGEP member

Alison Crawford: Chair of British Psychological Society – Scottish Division of Educational Psychology, 2018 to date

Maura Kearney: Peer Reviewer, Action Enquiry Programme

Ellen Moran: Peer Reviewer, Action Enquiry Programme

Elaine Robertson: Peer Reviewer, Action Enquiry Programme

Vivienne Sutherland: Chair of the Association of Scottish Principal Educational Psychologists, 2018 to date

Barry Syme: Chair of the Association of Scottish Principal Educational Psychologists

Anne Wilson: Past Chair of the British Psychological Society Scottish Division of Educational Psychology, 2015 to 2018

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Education Scotland
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The British Psychological Society
Scottish Division of Educational Psychology

ASPEP
ASSOCIATION OF SCOTTISH PRINCIPAL EDUCATIONAL PSYCHOLOGISTS