Children and Young People Neurodevelopment Taskforce

Introduction

In 2021 Scottish Government published the Neurodevelopmental (ND) Specification for Children and Young People. In 2025, recognising both a changing context in relation to ND need, and emerging challenges in delivering on the Specification, COSLA and the Scottish Government jointly undertook a review of its implementation.

The Neurodevelopmental Specification Review Report outlines the process and findings of the review as well as 'Next Steps' identified to improve early support for children and families in relation to the Specification. These have been informed by engagement with stakeholders and have received broad support.

Purpose and Scope

The Taskforce will take an active, collaborative and task focused approach to supporting the delivery of the actions identified in the review report, provided at Annex A. It is recognised that, as the work progresses, this may evolve to ensure that the Taskforce remains responsive to emerging needs and system developments.

The initial scope of the Taskforce will be based on the age-range and definition of neurodevelopmental need set out within the Neurodevelopmental Specification, focussing on supporting its implementation. Similarly, it will work with services that have been involved in the Specification's delivery, recognising the importance of multi-agency contributions across health, education, third sector and the voluntary sector.

Meeting Frequency and Timescales

Once established, it is anticipated that the Taskforce will meet quarterly, with the expectation that, particularly in its initial stages of the Taskforce, meetings may need to take place more frequently as required by priorities.

Timescales for tasks to be completed will be agreed with the Chairs and provided to the Taskforce in order to provide clarity on the programme of work.

The Taskforce is expected to run in its current form until at least October 2026.

Quorum

The Taskforce will be considered quorate if at least half its membership is present inclusive of at least one member each representative of health, education and the third sector, in addition to the Chair.

Governance and Reporting

Regular updates on the Taskforce's progress will be provided to the Minister for Social Care and Mental Wellbeing and the COSLA Health and Social Care Board. Where the work of the Taskforce will result in substantive changes to policy, this will also be subject to final agreement via these routes.

Transparency and Communication

The terms of reference, progress reports, membership and summary notes of meetings will be published on the Scottish Government's website.

Membership
The Taskforce will be co-chaired by Dr Lynne Binnie, City of Edinburgh Council Head of Education for Inclusion, and Fiona Davies, Chief Executive of NHS Highland

Membership of the Taskforce will be comprised of cross-sector representatives from key stakeholders and partners ideally placed to progress the identified actions. This will include statutory services, national agencies and third sector representation. A full list of members is provided at Appendix A, which will be updated to reflect any membership changes as they occur.

Flexibility will be retained to ensure the membership remains best placed to progress actions. The Taskforce may also seek input from organisations, professional groups or academia outside of the core membership on an ad hoc basis, as appropriate.

Conduct
The Taskforce will seek to promote a safe and supportive environment for those participating in its work, respecting the privacy and confidentiality of any personal experiences and information shared by individuals. It will be sensitive to the needs of all Members and participants, including in respect of the language used, and will take a trauma-informed and responsive approach in its discussions and work.

If any concerns on behaviour or other issues arise, these should be raised in confidence with the Co-Chairs and the Secretariat.

Lived Experience
The Taskforce recognises the importance of hearing and responding to views of children and young people, parents and carers. The group will consider the views already shared during the review process, and through other routes, as well as ensuring ongoing engagement to support decision making going forward.

In order to support this, engagement with children and young people to date will be included in discussion and further lived experience engagement through existing ND groups and networks will be considered at appropriate points throughout the lifespan of the Taskforce, ensuring this is meaningful and well supported.

The Taskforce also recognises that members within the Taskforce are also likely to have their own lived experience of ND need. This is considered to be an asset to the group and its work.

Arrangements for Taskforce Papers
The Secretariat will seek to issue papers to Taskforce members at least one week in advance of meetings and presentations 48 hours before meetings. Where appropriate, recommendations will be made for a particular course of action.

Actions will be progressed either within Taskforce meetings, with the Chairs drawing clear conclusions from discussions, or between meetings by group members.

Where tasks set will require substantive engagement with stakeholder networks there will be clear, extended timelines set allowing for appropriate feedback to inform and progress the work.

Appendix A

Children and Young People Neurodevelopment Taskforce Initial Membership

- Association of Directors of Education Scotland (ADES)
- NHS Health Board Chief Execs
- Association of Directors of Education Scotland (ADES) Early Years
- Association of Scottish Principal Educational Psychologists (ASPEP)
- Education Scotland
- Scottish CAMHS Allied Health Professionals (AHPs) Leads Network
- CAMHS and Neurodevelopment Managers Network
- Royal College of Psychiatrists in Scotland (RCPsychiS)
- Children in Scotland
- Connect
- National Autism Implementation Team (NAIT)
- Child Health Commissioners
- Child Heads of Psychology Services (CHOPS)
- NHS Education Scotland (NES)
- Allied Health Professionals (AHPs)
- Public Health Scotland (PHS)
- Integrated Joint Boards (IJBs)

Annex A

Neurodevelopmental Specification Implementation Review Actions

The actions outlined in the Neurodevelopmental Service Specification Review are outlined below as they appear in the review report. The Children and Young People Neurodevelopment Taskforce will take on the role of working group**.**

Short Term Actions

1. Supported by the working group, the Scottish Government and COSLA will clarify current understanding of policy intent and intended direction of travel across a range of stakeholders.
   This will include:
   - Producing a political briefing for local and national elected members
   - Supporting understanding of the roles and responsibilities of different partners in delivery
   - Clarifying where the framework sits in relation to the wider legislative context

2. The Scottish Government, in collaboration with COSLA, will support a series of emerging practice sessions to share practice and learning to inform local and national approaches. These will focus on how key issues have been approached from a partnership perspective, and new and emerging practice. Initial proposals for shared learning sessions identified through the review feedback include
   - Support pathways
   - Assessment – use of digital tools and practice
   - Shared and Voluntary Care Arrangements

3. Together with the working group, the Scottish Government and COSLA will explore the benefits and opportunities for further family support, recognising its importance in meeting the needs of children and families, regardless of formal diagnosis or whether diagnostic criteria is met.

4. The Scottish Government, in collaboration with partners and the working group, will explore simple social media messaging and awareness raising that highlights reliable sources of information on neurodivergence to help parents find reliable information online.

5. Supported by the working group and with relevant partners, the Scottish Government, in collaboration with COSLA, will explore and share current training opportunities with parents and professionals supporting those with neurodevelopmental needs

6. On an ongoing basis, the Scottish Government will consider the potential implications of the LDAN Bill, the proposed review of ASL and other legislative and policy developments on ND policy and related training.

Medium Term Actions

1. Supported by the working group, and informed by the review and learning from short term actions, the Scottish Government and COSLA will revise the Specification ensuring language and context is up to date and giving specific consideration to the roles and responsibilities of partners, universal approaches, self-identification and the purpose of diagnosis and assessment.

2. Supported by the working group, lived experience and parent/carer groups, the Scottish Government and COSLA will develop a high-level descriptor of a neurodevelopmental pathway to support ongoing system change and communication to parents and delivery partners.

3. The Scottish Government and COSLA will explore funding models and how they might align to the high-level descriptor of the system.

4. Together with the working group, the Scottish Government and COSLA will develop principles to support information sharing, good practice and collaborative approaches around assessment and diagnosis.

Longer Term Actions

1. Delivery partners within each health board or local authority area should build on the high-level descriptor (medium term action 2), providing area specific detail to support local systems navigation.

2. Together with the working group, young people and families, the Scottish Government and COSLA will consider tools for self-evaluation against the Neurodevelopmental Specification to support ongoing improvement.

3. Supported by the working group, the Scottish Government and COSLA will consider appropriate data points to support understanding of current levels of need and the level of support children and young people currently receive. This should begin with working with health boards and local authorities to gain an understanding of what data is available and currently collected across the system, and how this could be used to demonstrate and support improvements for children and families.

4. The Scottish Government and COSLA will provide an interim update report on progress to deliver the actions set out in this report