



Getting it right for every child in Aberdeen

Operational Guidance 2019



CONCERNS ABOUT A CHILD OR YOUNG PERSON'S SAFETY

If you believe that a child or young person is at risk of harm, or has been harmed, you must share information with the Joint Child Protection Team (JCPT) on **01224 306877** immediately.

If you are unable to make immediate contact with the JCPT please phone:

- Police Scotland on **101**
- Social Work Reception during office hours on **0800 731 5520** or **01224 264198**
- Out of hours Social Work **0800 731 5520**

This will allow circumstances to be assessed in order to determine if immediate action needs to be taken to protect the child or young person.

Consent from the child or parent should not be sought. The concerns should be shared following the **National Guidance for Child Protection in Scotland 2014¹** and associated local Practitioners Guide to Information Sharing, Confidentiality and Consent. Record your concerns and the actions taken in the child or young person's file and/or where appropriate a chronology in keeping with the summarised guidance at the end of this Operational Guidance. Police Officers and Social Workers assessing the situation will let you know the outcome, and will contact the Named Person Service or Lead Professional to let them know what is happening.



Contents

Introduction	4	Assessing	25
		Wellbeing Indicators	25
Executive Summary	5	The My World Triangle	26
		The Resilience Matrix	28
Core Components, Values and Principles	6	Specialist Assessments	29
		Analysing assessment information	29
Aberdeen City Model of Tiered Intervention	8	The Five Questions	29
When wellbeing concerns may be a welfare concern	12		
Child or Young Person's Views	13	Planning	30
		The planning process	30
Working with Families	14	SMART action planning	31
		Information Management	32
Key Roles and Responsibilities	15	Single and integrated Chronologies	32
All Practitioners across the partnership	17	What is a 'significant event'?	34
The Named Person Service	17	Reviewing the chronology with children and young people and families	37
The Lead Professional	19	Sharing Information - seeking assistance	37
Transferring Responsibility	22	Sharing information during transitions	38
Supporting Transitions	23	Storage of Information	39
Duties of other services to support the Named Person Service and Lead Professional	23		
The Managers Responsibilities	24		
Opting out of the Named Person Service	24		



Introduction

Welcome to the Aberdeen Getting it Right for Every Child (GIRFEC) Operational Guidance.

We are committed to improving the outcomes of all Aberdeen's children and young people, in particular those who are most vulnerable. The Integrated Children's Services Board promotes the use of the GIRFEC approach to enable us to collectively achieve our vision for children and young people across Aberdeen City. All agencies have agreed to follow this Guidance to ensure that we Get it Right For Every Child in Aberdeen and have aligned our processes and procedures to support closer partnership working.

This Guidance, regardless of your role, will guide your work with children and young people, parents, carers and colleagues. Our GIRFEC approach builds on the good practice that we already deliver – where we work together irrespective of our job titles to ensure that we support children and young people to achieve the best possible outcomes.

This Guidance is subject to regular review and we welcome your feedback to ensure that it continues to support effective working practices. Please e-mail any comments or suggestions to **namedperson@aberdeencity.gov.uk** and your feedback will inform subsequent reviews.

Due to the need to routinely update this guidance you are advised not to download and print the whole document but rather to visit the website www.aberdeengettingitright.org.uk every time you are seeking guidance. By working in this way you can be confident that the information being viewed is current.



Executive Summary

The guidance summarises the core components of GIRFEC and provides an outline of the processes adopted by all partners in Aberdeen City.

The guidance clarifies the language that we use such as 'Named Person' and 'Lead Professional' and provides an overview of roles and responsibilities.

The GIRFEC approach is used for all children and young people. It is important however, to remember that most children and young people make their way from birth to the world of work and only need the support of their family and the Universal Services. A number of children and young people (between twenty and thirty percent) will need more help. The GIRFEC approach will ensure that vulnerable children and young people who need additional support get appropriate and proportionate help, as quickly as possible.

The Statutory Guidance on the Children and Young People (Scotland) Act 2014² guided our review of processes to ensure that they support both primary prevention and early intervention across the Universal Services. This guidance clarifies our refined approaches.

This guidance illustrates how the Aberdeen City Tiered Intervention Process works across the partnership, and how it supports close working relationships with a child or young person and their family as well as between partners. Strong partnership working will ensure that a shared understanding of need results in effective planning to help overcome barriers to wellbeing.

Close collaboration and shared accountability are crucial in supporting our vulnerable children and young people.



Core Components, Values and Principles

Nationally, Getting it Right for Every Child is founded on 10 core components:

- Focusing on improving outcomes for children, young people, and their families based on a shared understanding of wellbeing.
- Establishing a common approach to gaining consent and to sharing information where appropriate.
- Actively promoting the involvement of children, young people and families in assessment, planning and intervention.
- Taking a co-ordinated and unified approach to identifying concerns, assessing needs and agreeing actions and outcomes, based on the wellbeing indicators.
- Streamlining planning, assessment and decision making processes leading to the right help being available at the right time.
- Modelling high standards of co-operation, joint working and communication where more than one agency needs to be involved.
- Establishing a Lead Professional to co-ordinate and monitor multi-agency activity.
- Maximising the use of the skills of the workforce within Universal Services to address needs and risks as early as possible.
- Supporting staff to become confident and competent in their delivery of service to children, young people and their families.
- Sharing demographic, assessment, and planning information appropriately.

Our approach in Aberdeen City reflects legislation, standards, procedures and professional expertise. The values and principles are:

- promoting the wellbeing of individual children and young people;
- keeping children and young people safe;
- putting the child at the centre;
- taking a whole child approach;
- building on strengths and promoting resilience;
- providing additional help which is appropriate, proportionate and timely;
- supporting informed choice;
- working in partnership with families;
- respecting confidentiality and sharing information appropriately;
- promoting the same values across all working relationships;
- making the most of the collective expertise;
- coordinating help; and
- building a competent workforce to promote children's and young people's wellbeing.

Children and Young People (Scotland) Act 2014³ enshrines many aspects of children's services into statute. Parts 4 and 5 of the Act, provision of Named Person Service & of a Child's Plan have not yet passed into legislation. The Children and Young People(Scotland)(Information Sharing)Bill is currently making progress through parliament to make amendments to the Act which reflect the Supreme Court Judgment (July 2016). During this process, provision of the Named Person Service and the child planning process will be delivered on a policy rather than a statutory framework. All children and young people will have the right to advice and guidance from the Named Person Service from birth to 18, and such a right will also apply to young people beyond their 18th birthday if they remain on the school roll. Young people who are looked after on their 16th birthday are entitled to receive support from the local authority up to their 26th birthday.

The GIRFEC process is dependent on all those working with a child or young person being aware of and alert to their wellbeing, development and behaviour. The process is supported through the keeping of an accurate chronology of significant events.

The Act is founded on the **United Nations Convention on the Rights of the Child (UNCRC)**⁴ and we are guided to ensure that children, young people and families are fully involved in identifying and planning how best to address their wellbeing needs. Children and young people and families must be at the centre of all our processes. We must routinely seek their views of:

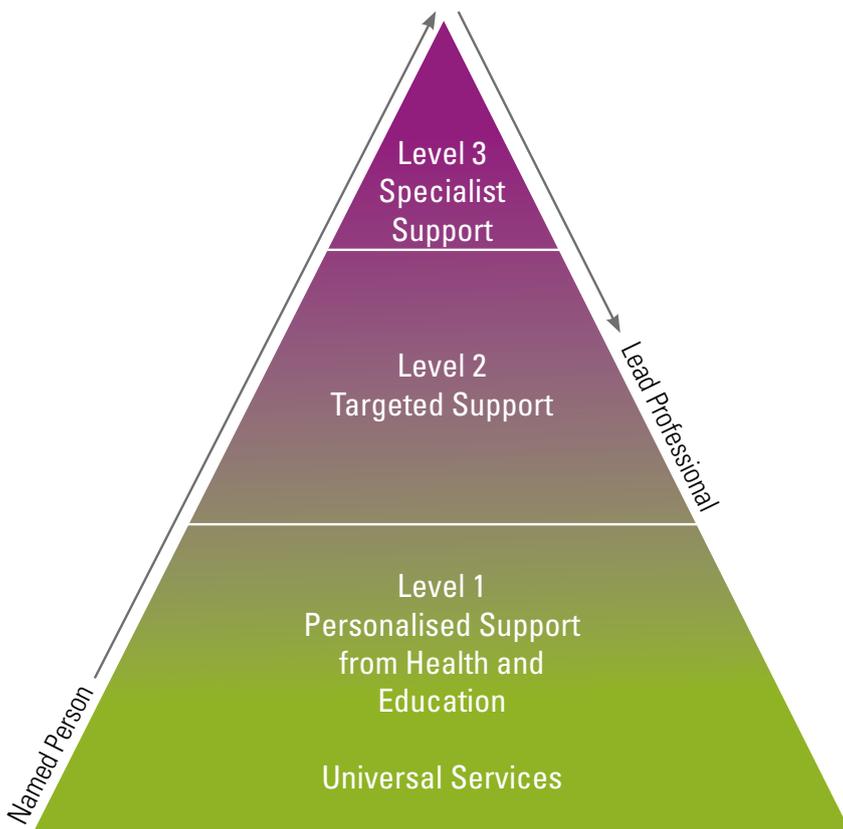
- their situation;
- any assessment of them; and
- any Child's Plan that is subsequently developed.

Partners across Aberdeen have agreed a single Tiered Intervention Process to support effective working practices. It relies on everyone working to support children, young people, parents and carers by using their professional expertise, experience and skills collectively to maximise support to a child or young person and their family at the earliest opportunity.

In addition to the information contained within this guidance, fuller information and training materials on how to conduct effective Child's Plan Meetings and engage children and young people in the process of considering wellbeing is available on the **Aberdeen GIRFEC Website**.⁵

Aberdeen City Model of Tiered Intervention

The GIRFEC approach in Aberdeen is based on partners working together at the earliest opportunity to support a child or young person, and their family. We work together to deliver interventions that are timely, appropriate, and proportionate to prevent a situation escalating.



Level 3 - Specialist support

Circumstances where there are enduring difficulties and a risk of significant harm. Needs may be persistent and families may be resistant to change. This may include those on statutory measures, those on the child protection register or in need of residential, foster, kinship or secure care accommodation. Intensive multi-agency support is in place and subject to on-going assessment and planning.

Level 2 - Targeted Support

More complex difficulties and needs exist. A Child's Plan may be required to ensure multi-agency support for the family. A clear action plan will co-ordinate targeted interventions and this may or may not include support from children's social work.

At level 1 Personalised Support

Universal Services of health and education work to support children and young people and their families, intervening to address concerns before they escalate. This will include an element of personalisation. Some children and young people may benefit from a non-statutory plan such as a Health Care Plan or Individual Education Plan (IEP).

Model of Tiered Intervention

Universal Services are provided by education and health. Universal Services are responsible for monitoring and overseeing all children and identifying as appropriate, any extra support that may be required for children, young people and their families.

The majority of children travel from birth to the world of work requiring only the support of the Universal Services. The diagram on the previous page shows a continuum of support from Universal Services through to the most acute end of the continuum and therefore of need. There are times when concerns for wellbeing extend to concerns for welfare.

When a Named Person or other Practitioner considers that a child or young person's wellbeing is being affected by something happening, or not happening, in their life, the following 5 key questions should be asked to help clarify the child or young person's needs and determine any appropriate action:

- What is getting in the way of this child or young person's wellbeing?
- Do I have all the information I need to help this child or young person?
- What can I do now to help this child or young person?
- What can my agency do to help this child or young person?
- What additional help, if any, may be needed from other agencies?

At level 1 the Universal Services of health and education work to support children and young people and their families, intervening early to address concerns before they escalate. This will include an element of personalised support. Some children and young people may benefit from a non-statutory plan such as a Health Care Plan or Individual Education Plan (IEP).

A Named Person will coordinate and monitor any support that the child or young person requires and will be responsible for maintaining a chronology. Whilst every child known to health will have a chronology, one will only be opened by education when there are concerns that the child or young person's wellbeing is being adversely affected. The Named Person Service will:

- review the effectiveness of supports that are generally available to maximise wellbeing through consideration of the 5 key questions above;
- discuss issues with colleagues and specialists within their own agency and use their supervision to ensure that they are maximising the support that they give to a child or young person;
- keep an accurate chronology of significant events including recording actions taken to address wellbeing needs when they have been identified; and
- put non-statutory plans in place where appropriate.

If single agency support at the universal level is not addressing wellbeing needs, consideration should be given to escalating to Level 2. Children and young people and their families should be part of this decision making. Where the Named Person Service is requesting support from outwith their service, there should be some discussion with the child/young person and their parents/carers on what information needs to be shared and why consent should be recorded in the case file and/or chronology if appropriate. Consideration of the child or young person's views should always inform decision making.

At level 2 the Universal Services continue to work to support the child or young person and/or their family. As wellbeing needs will have been identified, a chronology will be in place with all significant events recorded. The Universal Services will review their own approaches and put in place a higher level of support where possible being guided by any patterns and trends emerging from the chronology. A non-statutory plan may already be in place if needs are being met by the provision of resources that are generally available to the Universal Services.

In consultation with children or young people and families it may be agreed that more targeted supports such as child and adolescent mental Health Services, community services or social work would be helpful. Where supports have been identified as 'targeted' across the service, or are multi-agency in nature, a Child's Plan will be required to coordinate support. A multi-agency meeting will confirm who is best placed to assume the Lead Professional responsibility.

When the Child's Plan is reviewed and wellbeing concerns have been resolved, the Child's Plan will be closed in agreement with other partners, parents, children and young people. When this happens progress will be monitored by the Universal Services once again. However if the issues are continuing then further assessment and planning will be required.

The Named Person Service will:

- continue to use the chronology and National Practice Model to work with partners, including the child or young person and family to assess wellbeing and arrange a Child's Plan Meeting as appropriate;
- continue to consider the 5 key questions;
- ensure that the child or young person and family are able to engage in a discussion about wellbeing and are aware of progress;
- coordinate the writing, monitoring and review of appropriate plans;
- work with the child or young person and family to agree who to seek assistance from and coordinate these requests;
- share relevant and proportionate information in line with current Data Protection and Human Rights legislation to promote and support wellbeing; and
- note significant events in the child or young person's chronology.

If the interventions detailed in the Child's Plan have not effectively improved wellbeing, consideration should be given to escalating to Level 3. There may be circumstances where it is necessary to proceed directly to level 3 where significant risk is apparent. Children or young people and their families should be part of this decision making where possible as it involves seeking more specialist assistance. Where the Named Person is requesting support from a specialist service, the child or young person and their family should be made aware of what information will be shared. Although there is a duty to consider the wishes of the child or young person before sharing information all agencies also have a duty to share information if a child's wellbeing could be adversely affected. This second duty ultimately overrides the first although due consideration should be given to their wishes wherever possible.

Where the Named Person is requesting support from a specialist service, the child or young person and their family should agree what information will be shared, with whom and for what purpose. The Named Person should record that this conversation has taken place and the outcome of it. Consent should only be sought when there is a genuine choice in the matter. Where a child or young person is at risk of harm, practitioners should immediately follow child protection processes and should not seek consent.

At level 3 the supports or concerns are such that the child or young person will require specialist support from at least two agencies to address their wellbeing and welfare needs. A Lead Professional will be appointed to coordinate these supports. At Level 3 the Lead Professional in most cases will be a social worker, due to the nature of the wellbeing needs, but there may be occasions when another professional is best placed to take on this role. If there is a Child Protection Plan in place or a statutory order (child is Looked After and/or on a Compulsory Supervision Order) then Social Work will always be the Lead Professional. A comprehensive assessment will be completed to inform the planning of supports to meet identified need.

The Named Person:

- continues to monitor progress within their own service by considering the 5 key questions and coordinate plans/ elements of plans being delivered by that service;
- continues to keep a chronology of significant events and passes relevant information to the Lead Professional for inclusion in the integrated chronology; and
- makes sure that the child or young person is aware of their progress and able to engage in discussions about their wellbeing.

The Lead Professional:

- coordinates the integrated chronology;
- seeks support from other agencies if appropriate ;
- coordinates the writing, monitoring and review of the Child's Plan;
- coordinates meetings to keep the needs of the child or young person under review;
- makes sure that the child or young person is aware of progress; and
- shares relevant and proportionate information to support wellbeing.

The expectation is that this intervention will be for a finite period of time. The multi-agency interventions required to effect positive outcomes for the child, at which point the child or young person will move out of level 3 and back down the tiered intervention process. A multi-agency meeting will take place to enable the hand over from the Lead Professional. Core group meetings take place for a child whose name features on the child protection register. For a child whose name does not feature on the child protection register, but multi-agency intervention and planning is required, multi-agency meetings will take place.

Further clarification on the complimentary roles of the Named Person Service and Lead Professional roles can be found on the **GIRFEC website www.aberdeengettingitright.org.uk**

Where wellbeing is positively affected, the child or young person will move back down the Tiered Intervention Process.



When wellbeing concerns become welfare concerns

GIRFEC works to provide a continuum of support for children in need of help to promote their wellbeing. Wellbeing concerns about safety can indicate or lead to a welfare concern and it is important that we recognise GIRFEC processes as part of a continuum to support and safeguard our children and young people.

The statutory definition of a “child in need” contained within the **Children (Scotland) Act 1995⁶** is wide. For the purpose of planning and providing services within Aberdeen City Council, the following defines the basis for determining eligibility to Children’s Social Work Services:

- a child or young person who is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision of services by a local authority;
- a child or young person whose health or development is likely to be significantly impaired or further impaired, without the provision of services;
- a child or young person who is disabled; and
- a child or young person who is adversely affected by the disability of any other person in their family.

If you believe that a child or young person may be on a pathway to harm (i.e. without an appropriate intervention harm is likely), colleagues in Children’s Social Work will be able to advise on the appropriateness of a referral for a Social Work assessment and intervention. Advice and guidance is available to the Named Person through the Reception Team, free phone: **0800 7315520** or **01224 264198**. Outside office hours the Out of Hours Team can offer the Named Person Service advice on **0800 731 5520**. If you feel the child is at risk, please contact the Joint Child Protection Team (JCPT) **01224 306877**.

When confident that Social Work involvement is appropriate, the Named Person should send a current Child’s Plan or non-statutory plan, if available, to the Reception Team. Where there isn’t a plan in place, the core details and assessment section of the Child’s Plan can be sent to request Social Work involvement in a case. In many cases, Social Work colleagues will meet with the child and young person and family and then attend a Multi-Agency Meeting to help further develop the Child’s Plan.

The **THRESHOLDS SUITE OF MATERIALS⁷** can help further develop understanding of thresholds across agencies and services.



Child or Young Person's Views

The Act places a duty on service providers to seek and have regard for the views of children and young people. It requires the views of children, young people and parents to be sought in relation to the requirement for a Child's Plan and the subsequent preparation and management of the plan. Making sure that the views of the child or young person are included in any planning meeting is one of the most important responsibilities of the Named Person or Lead Professional.

We have a statutory duty to proactively seek and take account of the views of the child or young person where capacity of the child or young person allows, communication difficulties cannot be seen as sufficient reason for not doing this. This duty places the responsibility on all of us to use our professional skills and knowledge to decide how best to engage with children and young people and their families to promote their active involvement in taking decisions that will affect them.

We are required to seek the views of children and young people and their families on:

- their current situation and their wellbeing needs;
- the assessment as it is compiled;
- the Child's Plan that has been agreed; and
- our intention to share information and to take account of these where possible.

In order for children, young people and families to meaningfully engage with an assessment of wellbeing, it is imperative that they understand what we mean by wellbeing. A range of tools has been developed to support children and young people positively engaging with wellbeing and Practitioners should use a tool that is age and stage appropriate for the child or young person that they are supporting. At times it may be in the child or young person's best interest to only attend for part of a Child's Plan Meeting.

Consideration should also be given as to who is best placed to support the child or young person at the planning meeting and whether or not one of the tools should be used to collect the child or young person's thoughts. In some circumstances this will be shared with partners before the meeting. Decisions will be taken based on the individual needs and circumstances of the child or young person.

When a Practitioner considers that a child or young person's wellbeing needs ought to be supported by others, they will have a discussion with them about the potential benefits of sharing information. The discussion must include why the information needs to be shared, with whom it needs to be shared, as well as what might happen if the information is not shared. The date and detail of the discussion should be recorded.

IN KEEPING WITH CHILD PROTECTION PROCESSES, THE VIEWS OF CHILDREN OR YOUNG PEOPLE, PARENTS AND CARERS SHOULD NOT BE SOUGHT WHERE THIS COULD COMPROMISE THEIR SAFETY OR HINDER / DELAY A CHILD PROTECTION INVESTIGATION.

All of the tools are available on the Aberdeen GIRFEC www.aberdeengettingitright.org.uk

Working with Families

We also have a statutory duty to proactively seek and take account of the views of parents, carers and relevant persons where capacity of the parents, carers or relevant persons allows. Once again communication difficulties and challenges communicating with families where English is not the first language cannot be seen as sufficient reason for not doing this. This duty places the responsibility on all of us to use our professional skills and knowledge to decide how best to engage with families to ensure their active involvement in decisions that will affect their child.

The Named Person Service has a role in providing advice and guidance to all children and young people, parents and carers. Families may approach the Named Person Service for a number of reasons and in many cases, especially when the child or young person's needs are being met by the Universal Services, the Named Person Service will be able to signpost families to supports available in the Community. The **Family Information Service⁹** can be an extremely valuable support as they hold information on all available community supports. The Family Information Service can be contacted on **01224 764803**.

It is important that all partners build positive relationships with families so that families feel comfortable making an approach when in need of some additional support.

Effective relationships are built by:

- gaining the family's co-operation and commitment to the Child's Plan process;
- being open and honest with the family and treating them with respect;
- providing clear explanations at all stages appropriate to any communication needs;
- recognising and acknowledging that parents and carers are 'experts' on their children and know them better than anyone else;
- checking the accuracy of information contained in files and noting any disagreement;
- being sensitive to and aware of any cultural issues that might influence the child or young person or family's perspective; and
- discussing the benefits of sharing information, with whom information could be shared and what might happen if the information is/is not shared. The date of the discussion should be recorded.

The Multi-Agency Practitioner guidance on working with non-engaging families can be accessed on the GIRFEC website www.aberdeengettingitright.org.uk and will provide further advice and guidance.



Key Roles and Responsibilities

All Practitioners across the Partnership

Everyone who works with a child or young person has a responsibility to ensure that they are safe and have a duty to support and promote wellbeing.

If you have contact with any child or young person and have a concern about their wellbeing which indicates that, although they are not in need of immediate protection, they may be in need of some additional support, you should discuss the matter with parents/carers and the child or young person (depending upon age and capacity) and explain the potential benefits of sharing information with the Named Person. With their consent you should pass your concern onto the Named Person either by secure e-mail or by telephone and ensure that the concern has been received. If you are unsure of who the Named Person is, you can contact the single points of contact in both Health and Education for contact details.

Education **namedperson@aberdeencity.gov.uk**

Health **nhsg.mashv@nhs.net.**

Everyone who works with a child or young person has a responsibility to ensure that they are safe and have a duty to support and promote wellbeing.

The GIRFEC approach does not remove the responsibility of all staff to follow Child Protection procedures immediately if a child or young person is at risk of harm or has been harmed.

If you believe that a child or young person is at risk of harm, or has been harmed, you must share information with the Joint Child Protection Team (JCPT) on **01224 306877** immediately.

If you are unable to make immediate contact with the JCPT please phone:

- Police Scotland on 101
- Social Work Reception during office hours on 0800 731 5520 or 01224 264198
- Out of hours Social Work 0800 731 5520

This will allow circumstances to be assessed in order to determine if immediate action needs to be taken to protect the child or young person.

Concerns should be shared following the **National Child Protection Guidance**¹. Consent from the child, young person or family is not required. Record your concerns and the action taken. Police and Social Workers assessing the situation will let you know the outcome, and will contact the Named Person/Lead Professional to let them know what is happening.

When concerns are passed on, a record of the conversation should be noted to summarise the information shared and reasons for doing so. You should also note if the child or young person is aware that you have shared the information. You must only share information that is relevant and proportionate.

The Named Person and Lead Professional

Two roles have been established to support GIRFEC processes. These are the **Named Person** and the **Lead Professional**.

Every child and young person will have a Named Person from either Health or Education Services. If you are a Health Visitor, Family Nurse or work within the management / pastoral team of a school it is likely you will be a Named Person for a child or a young person. All Named Persons will have carried out the required training as specified in the **Named Person Order**⁹.

The Named Person is the first point of contact for children, young people and families. They are responsible for coordinating and monitoring plans to address any wellbeing needs, seeking assistance from others when necessary and for receiving and processing information from others. Special Consideration should be given to children and young people who are Young Carers and the Named Person has a lead in coordinating planning and support in keeping with the Young Carers Toolkit.

When two or more agencies are involved in supporting a child, a Lead Professional will be appointed. The Lead Professional will assume the role of developing, coordinating, and monitoring plans and will have a wider range of partners to coordinate with.

The appointment of a Lead Professional does not remove the need for a Named Person although the Lead Professional does become the main contact.

REMEMBER THAT IF THE CONCERN IS OF A CHILD PROTECTION NATURE YOU SHOULD NOT UNDERTAKE AN INVESTIGATION. THE RESPONSIBILITY TO UNDERTAKE A CHILD PROTECTION INVESTIGATION SITS WITH THE POLICE AND SOCIAL WORK AND YOU SHOULD FOLLOW CHILD PROTECTION PROCESSES PROMPTLY.

If you believe that a child or young person is at risk of harm, or has been harmed, you must share information with the Joint Child Protection Team (JCPT) on 01224 306877 immediately.

If you are unable to make immediate contact with the JCPT please phone:

- Police Scotland on 101
- Social Work Reception during office hours on 0800 731 5520 or 01224 264198
- Out of hours Social Work 0800 731 5520

This will allow circumstances to be assessed in order to determine if immediate action needs to be taken to protect the child or young person.



The Named Person

The Named Person is always based in the Universal Services of Health or Education.

The Named Person Service is responsible for making sure that every child or young person has the right support in place to maintain their wellbeing and to encourage them to reach their full potential. They have a duty to promote, support and safeguard wellbeing. These are not new responsibilities and are within the existing responsibilities of Health Practitioners including Health Visitors and Family Nurses, Head Teachers or members of the senior management or pastoral team in a secondary school. As part of the Named Person Service you will:

- be the first point of contact for children, young people and their parents or carers and make sure that the child or young person and their family know that you are the Named Person (Midwives will share information about the health Named Person with the pregnant women and her partner during the early weeks of pregnancy);
- ensure that access to confidential information within Management Information Systems (MIS) is limited to those undertaking the role of the Named Person;
- ensure that the personal core data and the content of the child or young person's record, file or notes within your agency is accurate and kept up-to-date;
- compile an accurate chronology for the child or young person within your agency and be responsible for contributing to, collating and compiling the multi-agency chronology when that is required;
- receive information from other agencies or individuals making sure that all information is appropriately recorded and safely stored (as PDF within an electronic record wherever possible) and proportionately shared with the Named Person of siblings in keeping with Data Protection and Human Rights legislation;
- consider any concerns in light of the child's history and current circumstances;
- identify if and when additional support is needed and then identify what extra help might be provided from within your agency;
- seek explicit current consent to share any information about them (if consent is verbal, ensure that this is recorded),
- make a note of any information shared when seeking assistance, the reasoning behind the sharing and outcome of sharing in the case file and/or chronology;
- inform the child or young person and their family of your desire to share any information about them and why, making a note of any information shared when seeking assistance, the reasoning behind it and outcome of sharing in the chronology;
- know when to involve other agencies and understand thresholds of intervention;
- coordinate the child or young person's Child's Plan, using the agreed template and identifying who is responsible for each of the actions included in the plan;
- review the effectiveness of the child or young person's plan 12 weeks after it is put in place and then at least every six months to ensure that progress is being made, and that the agreed actions are improving the outcomes for the child or young person;
- routinely review information held including at the point of transfer, to ensure that it is balanced, relevant and proportionate and note family agreement or disagreement with its content prior to transfer to any incoming Named Person; and
- contribute to planning for key transition points.

Age of child	Professional assuming the role of Named Person	Timescale of Responsibility	Comment
Birth until first day at primary school	Health Visitor or Family Nurse Partnership.	From birth until the first day at primary school.	The Health Visitor will continue to be the Named Person for any child where there is a deferred or delayed entry to primary school.
Primary School	Head Teacher or nominated member of the school's Management Team.	From the first day in primary 1 until the first day they attend secondary school despite attendance.	A child who repeats a year will continue to be supported by the primary school until they transfer to secondary school. Children who are excluded remain the responsibility of the Primary School Named Person
Primary School (school holiday cover)	Member of the central team; (subject to 6 monthly review).	Over school holiday periods	Enquiries received will be passed to the most appropriate central officer. The general Inclusion Team phone number and Named Person e-mail address will be made available with the team member best placed to support the child or young person being tasked with doing so.
Secondary School	An agreed member of the school's Management or Pastoral Team.	From the first day at secondary school until leaving school despite attendance.	Children or young people accessing Support Hubs who access some of their curriculum beyond the secondary school still retain the Named Person from the school that they are enrolled at. Young people who are excluded remain the responsibility of the Secondary School Named Person.
Secondary School (school holiday cover)	Member of the central team; (subject to 6 monthly review).	Over school holiday periods	Enquiries received will be passed to the most appropriate central officer. The general Inclusion Team phone number and Named Person e-mail will be made available with the team member best placed to support the child or young person being tasked with doing so.
Children from travelling families	Central Officer	If not enrolled in a school until school leaving age.	The general Named Person phone number and e-mail will be made available.
Children who are home educated	Central Officer	Until school leaving age.	The general Named Person phone number and e-mail will be made available.
From School leaving age until the child's eighteenth birthday	Central officer (subject to 6 monthly review).	From leaving school up to the young person's 18th birthday.	The general Named Person phone number and e-mail will be made available with the team member best placed to help being tasked with doing so.
Up to 18 and serving a custodial sentence	Prison Governor.	For duration of sentence or up to the age of 18.	

The Lead Professional

Where a Child's Plan involves Practitioners from two or more agencies in delivering targeted interventions, one of these Practitioners will be appointed as the Lead Professional.

The choice of the Lead Professional should be agreed taking account of the views of the child or young person and their family, the kind of support that they need, the complexity of the plan, previous contact and/or relationship with the child or young person and their family and if there are statutory responsibilities. The Lead Professional is expected to be the person best placed to support the child or young person's need and address any risk. The role will not automatically fall to any one agency but will vary depending upon the individual circumstances of the child or young person and the partners to the plan.

Where a child or young person is looked after or whose name is on the Child Protection Register, the Lead Professional will always be a Social Worker.

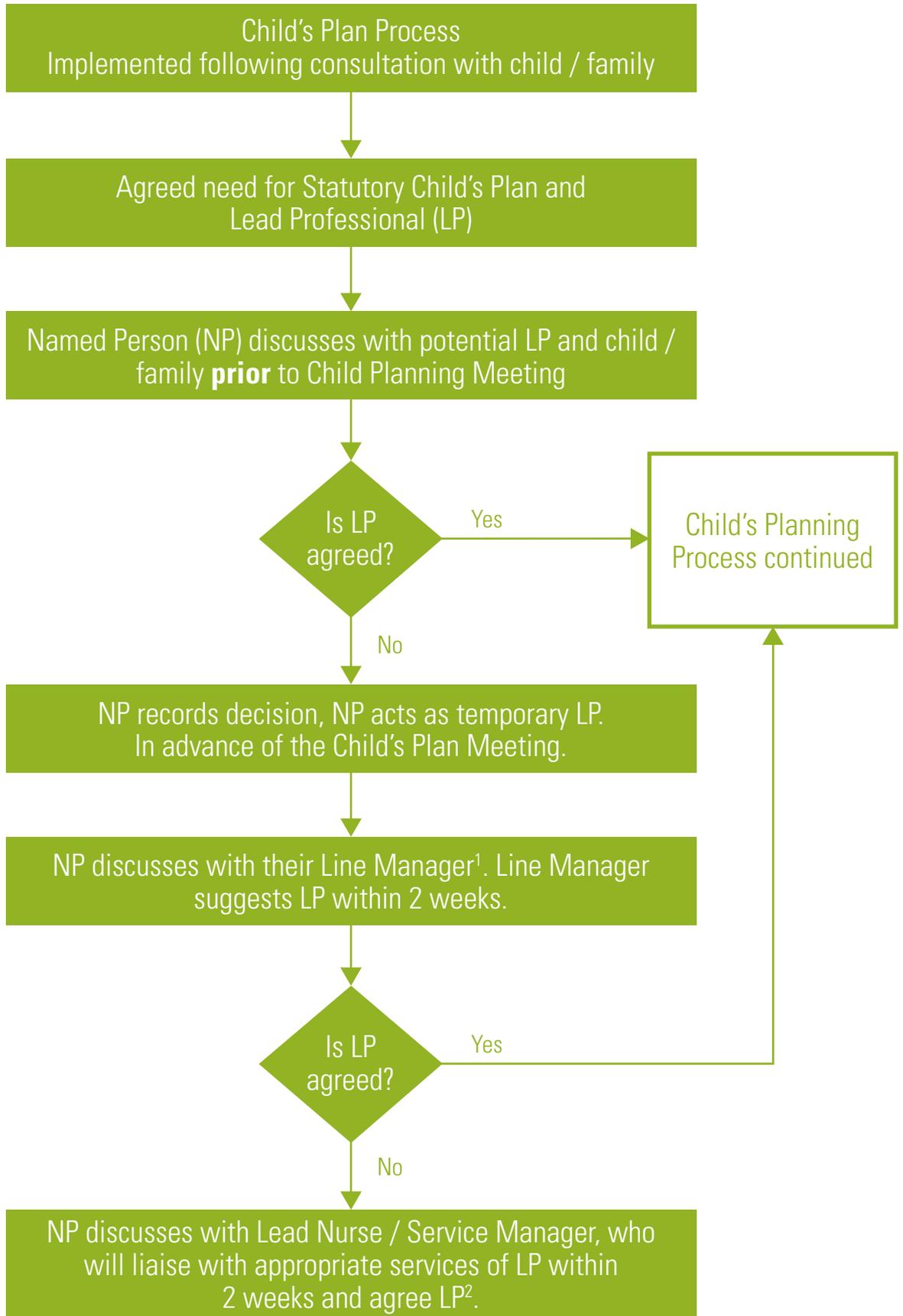
The Lead Professional will neither do all the work nor replace the Named Person. The Named Person will stay in contact with the child or young person and their family and liaise closely with all partners to the plan including the Lead Professional. The Named Person Service will continue to have responsibility for writing and monitoring the health and education parts of the Child's Plan. As a Lead Professional you will:

- be the first point of contact for the child or young person, their family and for the members of the team around the child;
- keep the Named Person informed of progress;
- support the child and family;
- coordinate assessment, planning and action;
- record the Child's Plan making sure that all partners to the plan are clear about their responsibilities;
- ensure that the support provided is working well and is achieving the outcomes specified in the plan;
- be familiar with the working practices of the different agencies;
- act as an advocate for the child or young person if necessary;
- where possible ensure that the views of the child or young person and their family are taken into account when decisions are made;
- make sure that the child or young person understands (age and stage appropriate) what is happening and support them so that they can participate in the decisions that affect them;
- maintain productive working relationships with the child or young person's family;
- ensure that the child or young person and/or their family understand the ongoing need for Practitioners to share their personal information in line with legislation; and
- make sure that the child or young person is supported through key transition points.
- manage the integrated chronology

When a Lead Professional is likely to be required, it is best practice for the Named Person to instigate a conversation around who is likely to be best placed to perform the role and to gain agreement prior to the matter being formally discussed at a Multi-Agency Meeting. In exceptional situations it may be difficult to agree who is best placed to undertake the role of Lead Professional. These situations should be escalated to Line Managers for resolution at the earliest opportunity. See on page 18 details of the Lead Professional Resolution Pathway.

The close working relationship of the Named Person and Lead Professional is crucial in supporting wellbeing. It is imperative that those undertaking these roles understand the mutually supportive nature in order to best support the child or young person. The grid on page 19 illustrates how the role of the Named Person changes slightly when a Lead Professional is in place.

Lead Professional Resolution Pathway



¹ Team Leader / Head Teacher / Depute Head / Quality Improvement Officer, depending on NP.

² If relevant authority will not agree to prepare Child's Plan (act as LP), it must provide a statement of reasons in support of this decision, to the Lead Nurse / QIO (Children and Young People's (Scotland) Act 2014, section 35(4))

Interaction of the Role and Responsibilities of the Named Person and Lead Professional

Named Person

Supporting the child and young person in their Universal Service

Building relationships

- Build and maintain good working relationships with the child, young person and their family and or carers in order to ensure effective support is delivered.
- Work to develop and maintain open honest communications with the child and their family and or carers keeping them informed of all and any actions that the Named Person takes to support them.
- Ensure that the views of the child young person and those of their family and or their carers are sought, heard and taken account when decisions are made.
- Ensure that the child or young person (age and stage appropriate) understands what is happening to support them and is involved in the planning of that support.

Receive Information

- Receive and act on information from those in contact with the child, young person and their family and or carers.
- Compile a single agency chronology.
- Develop a multi-agency chronology when needed.

Supporting Wellbeing

- Identify when additional support is required and what can be provided from your own agency.
- When universal support is not sufficient to meet child's wellbeing needs work with colleagues to develop a Child's Plan.
- Manage transition planning.

Sharing Information

- Identify when to involve other agencies. Inform the child and family of the intention to do that.

Managing a Child's Plan

- Prepare a single agency Child's Plan as required remembering to agree who is responsible for each action within the plan.
- Ensure that a Child's Plan is based on an accurate up to date assessment of the child's or young person's wellbeing and assess any risk on an ongoing basis.
- Ensure that the team around the child or young person is aware of their duties and responsibilities as detailed in the plan.
- Review the Child's Plan.
- Facilitate the choice of a Lead Professional when two or more agencies are involved in the delivery of support to the child or young person.

Lead Professional

Co-ordinate the support of the Multi-Agency 'Team around the child' as identified in the Child's Plan

Building relationships

- Build and maintain good working relationships with the child, family and or carers in order to support them.
- Ensure that the views of the child and their family are sought, heard, and taken account of when decisions are being made.
- Make sure that the child (age and stage appropriate) understands what is happening so that they can participate in planning.
- Co-ordinate the communications between all members of the 'Team around the child'.

Receive Information

- Receive information from those in contact with the child and their family.
- Maintain the child's multi-agency chronology.

Supporting Wellbeing / Managing a Child's Plan

- Review the Child's Plan as and when required ensuring the development of a reviewed action plan, making sure that all services and agencies that could help support the child's wellbeing are involved in the assessment and planning and that actions are allocated to a 'Team Member' for delivery.
- Ensure that all members of the team around the child are aware of their duties and responsibilities as detailed in the plan.
- Lead on the planning for both routine and exceptional transitions supporting the child, family and or carers through these transitions.

Sharing Information

- Keeping partners appropriately informed.

Named Person in support role to Lead Professional

- When a Child or young person has a Lead Professional they will continue to have regular contact with their Named Person.
- The Named Person will continue to have the following responsibilities to fulfil when there is a Lead Professional co-ordinating the delivery of a Child's Plan.
 - Build and maintain good communications and working relationships with the child and family and or carers.
 - Continue to develop the child's chronology and contribute to the multi-agency chronology
 - Communicate regularly and openly with the Lead Professional
 - Develop health/educational plans for inclusion in the Child's Plan. Continue to support the child or young person and their family and or carers, particularly at the point of transition.

Child's wellbeing improving, returns to single agency working with Named Person co-ordinating any required supports.

Transferring Responsibility

When the Named Person or the Lead Professional has to change for any reason, for example when a child or young person moves to another school, it is the responsibility of the current Lead Professional or Named Person to ensure that all relevant information about the child or young person is passed to the new Named Person/Lead Professional **without delay**.

The incoming Named Person must confirm in writing to all concerned that they have taken on the responsibilities of Named Person for the child or young person and from what date. In most cases this will be through re-issue of the Named Person leaflet and by making the information available on appropriate websites. Where a plan is already in place, the incoming Named Person should write to all partners contributing to the plan to advise them of the changes. This could be done as part of the transition process.

The discussion and the decision about the change of Lead Professional will be undertaken at the review meeting for the child or young person's Child's Plan. Early escalation to Line Managers should occur, where it is anticipated that there may be lack of agreement on who carries out the role of Lead Professional; please refer to the Lead Professional Resolution Pathway.

Where a member of staff undertaking the role of Lead Professional or Named Person suddenly and/or unexpectedly has to withdraw, for example because of sudden illness, their Manager is responsible for identifying an alternative member of staff to take on the role until they return to work. In the event of the Named Person or Lead Professional being a Head Teacher their Quality Improvement Officer (QIO) will be involved in the discussion and decision about the change. In the event the Named Person or Lead Professional being a Health Visitor or Family Nurse the Team Leader will be involved in the discussion about the change. The Manager is responsible for ensuring that the family and partners contributing to the plan are notified within 10 working days about this change.

When a child or young person no longer requires the involvement of more than one agency they will no longer need to have a Lead Professional. The review meeting for the child or young person will confirm the progress that has been made and that there is no longer a need for a multi-agency Child's Plan or Lead Professional. The Named Person Service will resume the responsibility for monitoring and supporting the child or young person within the Universal Services.



Supporting transitions

Most children and young people effectively transition through the already established transition processes. Some children and young people may need a more individualised approach. Key transitions should be planned for, such as a child beginning school or transferring from primary to secondary school. Where this is the case, timescales for effective transfer of information should be agreed with colleagues locally. There is no expectation that all information will be handed on at the same time. In some straightforward cases information can be shared in advance although more complex cases could involve a series of meetings over an extended transition period.

Some children or young people will require a higher level of planning for an effective transition and it is expected that some transitions will be planned around 2 years in advance.

It is imperative that contact details for the new Named Person and Lead Professional are shared as timeously as possible and this responsibility lies with the incoming Named Person and Lead Professional.

In all cases of transition, a Child's Plan should be reviewed in advance of the transition. This will help allay concerns and ensure that there is a shared understanding of the support that requires to be in place for the child or young person. The incoming Named Person or Lead Professional is a key partner in this process.

When a young person leaves school but is under the age of 18, the management of the Child's Plan falls to the central team and they should be invited to attend any review of the Child's Plan in advance of the young person leaving school.

In some cases, a young person at 18 who will no longer need a Child's Plan but may still require on-going support. When this is the case, Adult Services should be invited to attend the final review to close the Child's Plan.

Duty on others to support the Named Person and Lead Professional

There is an expectation that requests for assistance by the Named Person Service or Lead Professional are appropriately considered by other agencies and services. The Family Information Service is available to provide information regarding available services.

Where a particular service has been identified as being a potentially effective means of addressing a wellbeing need, and parents/carers and children and young people agree to sharing information, the Named Person Service or Lead Professional will make a request for assistance.

In most cases this request will be made by sharing the wellbeing assessment from within the Child's Plan. On occasion the Named Person Service/Lead Professional may choose to make an initial request for assistance by telephone and speak in general terms as this may satisfy them that information has been shared proportionately at this early stage and that the requested service will be of benefit to the child or young person.

Any organisation receiving a request for assistance should confirm receipt by e-mail as soon as the request has been received and give a timescale for response. The organisation should consider the request according to their own thresholds and respond to the request within 10 working days. If requests are turned down a clear justification should be shared with the Named Person or Lead Professional with other potential sources of support shared with a record kept of this decision making within agency or service records.

The Named Person or Lead Professional should log significant and appropriate events in the child or young persons chronology.

The Responsibilities of those line managing those discharging the Named Person and Lead Professional role

Managers have a number of responsibilities that will support effective partnership working.

Managers will:

- promote the GIRFEC for Every Child approach;
- encourage a holistic approach, to identifying the needs of the child or young person;
- guide the Named Person or Lead Professional to identify how best to support the child or young person;
- make sure that those acting as Named Person and Lead Professional deliver their responsibilities in keeping with this guidance;
- ensure that the Named Person/Lead Professional have the time to perform the duties;
- prevent an escalation of need by identifying and monitoring any risk and taking decisive action;
- help negotiate and resolve issues around the appointment of a Lead Professional;
- support the Named Person through the preparation for the review of a Child's Plan including making sure that an appropriate team that includes all the relevant agencies, is formed around the needs of the child or young person; and
- ensure the child or young person and their family are informed about any changes in the Named Person or Lead Professional without delay.

Opting out of the Named Person Service

The Children and Young People (Scotland) Act 2014 requires the Named Person service to be made available for children and young people from birth to their 18th birthday and to young people beyond if they remain on a school roll. The legislation does not apply to young people serving in the regular forces.

While the service must be made available, it is up to individual children, young people and parents whether they wish to engage with the service.

While parents may take the decision not to engage directly with the service, the service provider is still required to make the service available and is still required to inform the child or young person and parents of how to contact the service.

The Act guides those undertaking the role of Named Person to share information that the service intends to pass to the incoming Named Person, with children, young people and families, in keeping with the Data Protection and Human Rights legislation, if there are no legal restrictions such as that the sharing could interfere with a Police inquiry. Where parents have told the Named Person service provider that they do not wish to be contacted, the service provider, in considering the child or young person's wellbeing, should consider if they should still make contact with the parent and record their decision. Even in these circumstances, the Named Person Service has a duty to take into account the views of the child or young person if it is reasonably practicable to do so.

Where there are no wellbeing needs or concerns, non-engagement will not be a cause for concern. Where there are wellbeing needs, the Named Person Service should try to engage in dialogue with the child or young person and parents to present the positives in engaging with the service.

The duties of the Act remain in place for all children and young people. Where there are wellbeing concerns which constitute child protection concerns, national child protection procedures should be followed without delay.

Assessing and Planning

The National Practice Model is made up of 3 key areas, the Wellbeing Indicators, The My World Triangle and the Resilience Matrix.

The Wellbeing Indicators



The Wellbeing Wheel is the first element of the National Practice Model. It is used to consider the basic requirements for all children and young people to grow and develop so that they can achieve their full potential.

The Wellbeing Indicators are: **S**afe; **H**ealthy; **A**chieving; **N**urtured; **A**ctive; **R**espected, **R**esponsible and **I**ncluded. They are sometimes referred to collectively as **SHANARRI** Wellbeing Indicators.

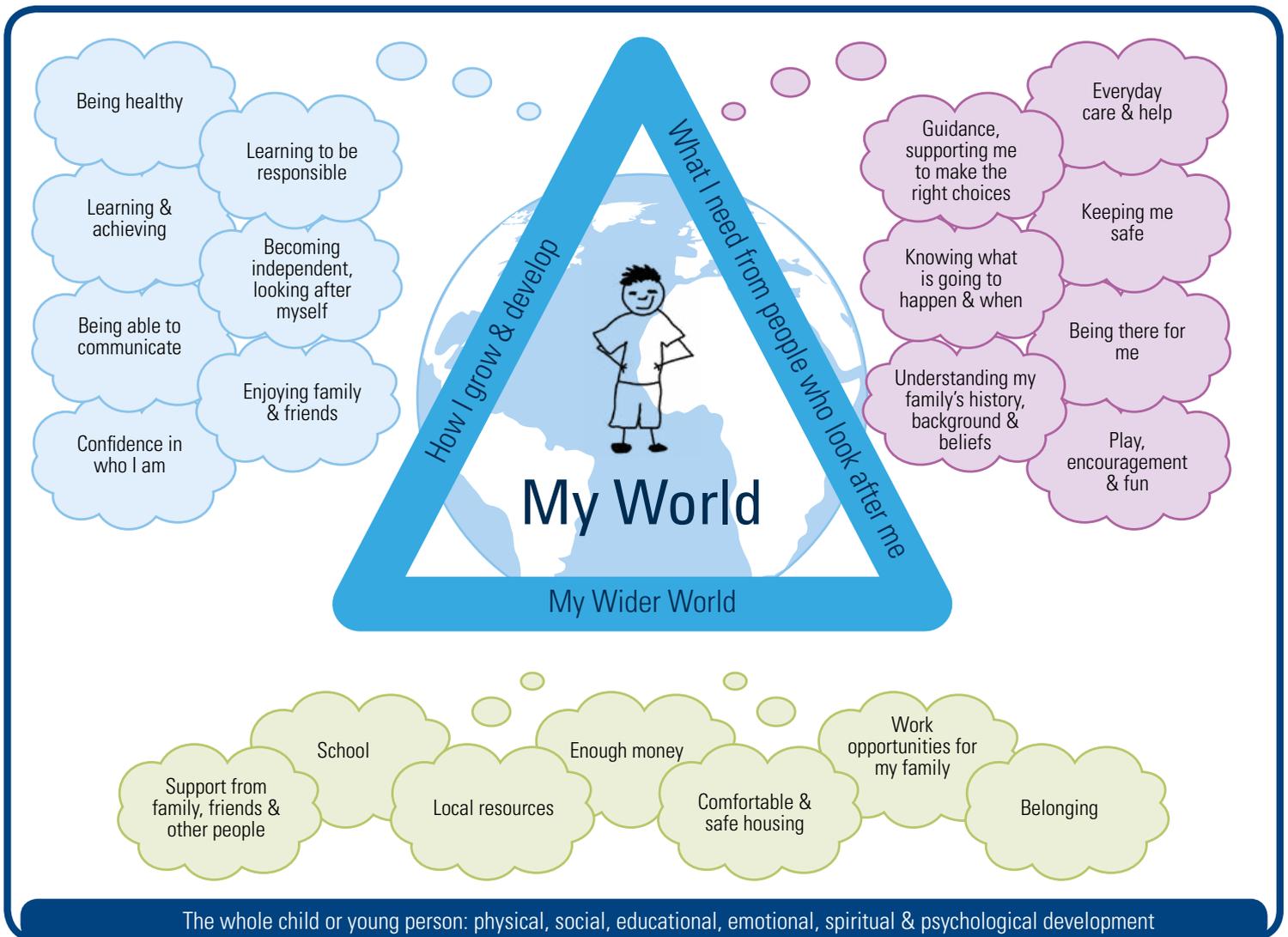
Children or young people progress differently depending upon their circumstances. However every child has the right to expect appropriate support from adults to allow them to develop as fully as possible across each of the Wellbeing Indicators.

All Practitioners (including the Named Person and Lead Professionals) should think about how well the child or young person's needs are being met by using the Wellbeing Wheel to help structure their thinking about a child or young person's development and identify which of the indicators are being adversely affected and need to be supported. In some cases all partners will be asked to consider wellbeing individually prior to coming together to complete a full assessment. In other cases it will be possible for the Named Person or Lead Professional to guide the discussion during a Child's Plan Meeting. Decisions will be taken depending upon the complexity of the needs and whether or not a Child's Plan is already in place. Contributions from all partners should be noted so that they can be further considered through use of the My World Triangle and Resilience Matrix. Partners are ultimately looking to identify areas of resilience, protection, vulnerability and adversity as these will help you to use areas of strength (resilience and protection) to address areas of vulnerability and adversity. Strategies that have previously been used should be considered with agreement sought on the extent of their success as this will be an indication of how best to proceed.

It is imperative that children and young people and families are guided to consider wellbeing. Support materials can be found on the **GIRFEC website www.aberdeengettingitright.org.uk**

The My World Triangle

Once the Wellbeing Indicators have been considered, The My World Triangle provides a guide to help further structure thinking and make sure that the child or young person's needs are comprehensively considered. The triangle contains areas of influence in a child or young person's life that are important in their development and should be considered every time an assessment is completed. In some cases making the triangle available to guide thinking at a Child's Plan Meeting may be helpful.



It is important to keep the child or young person's 'whole world' in mind, and to make sure that the information gathered is proportionate and relevant to the issues in hand.

You should think about the three sides of the triangle and the three headings:

'How I grow and develop'

'What I need from people who look after me'

'My wider world'

This consideration of the triangle will help to guide how you might address some of the need already identified.

Ask the following questions bearing in mind the age and developmental stage of the child or young person that you are assessing:

- What information do I have?
- Is this enough to assess the child or young person's needs and make a plan?
- If I do not have enough information what extra information do I need?
- Where could I gather that information from?

It is important to remember that every area need not be examined in detail and that the My World Triangle should be used proportionately. However a brief consideration of them all ensures that important information is not missed.

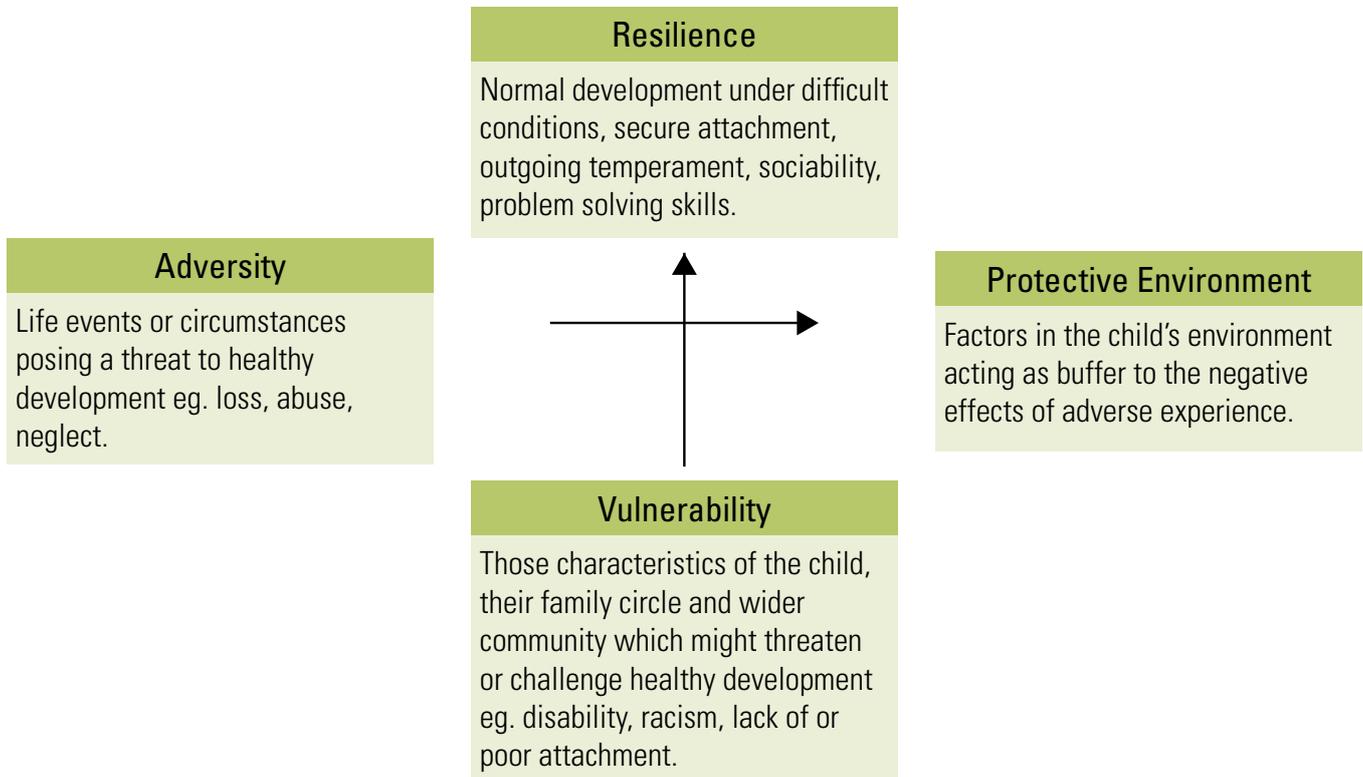
What is happening in one area can have a significant impact on another. A skilled Practitioner will guide the assessment and planning process to make use of areas of strength to address wellbeing needs or to clarify understanding of the root cause of a wellbeing need. Considering areas of resilience, vulnerability, protection and adversity will help you start to prioritise the action needed to support the child or young person.

When issues are interconnected, refer to this in your analysis of the information gathered within the Child's Plan. There will be times when colleagues interpret information in different ways or give a differing weight to information gathered. When this happens, the alternative interpretations should be noted. Each agency should evidence their findings and opinion and everyone should seek to come to a consensus about the meaning of the information in terms of its impact on the child or young person. Any disagreements with assessment findings should be recorded in the appropriate section of the Child's Plan.



The Resilience Matrix

In more complex cases, the Resilience Matrix provides a framework to help analyse the strengths and vulnerabilities in the child or young person's world, based on the information that has been gathered through consideration of the Wellbeing Indicators and The My World Triangle. The Matrix brings together the two dimensions of vulnerability and adversity and that of resilience and protective factors/environment.



The concept of resilience is fundamental to a child or young person's wellbeing. A resilience-based approach builds on the strengths in the child or young person's whole world, drawing on what the family, community and services can offer as support.

The Resilience Matrix allows Practitioners to take the strengths and pressures identified in the information gathered already, along with any specialist assessments, and to organise this information using the four headings of **resilience, vulnerability, protective environment and adversity**.

By doing the above and carefully analysing and interpreting the assessment information, Practitioners will be able to:

- identify need or difficulties;
- explain why these have happened;
- understand the impact of strengths and pressures on an individual child or young person;
- help children and young people and families and the Practitioners working with them agree what needs to change;
- describe desired outcomes against which changes can be measured; and
- construct the desired outcomes for the Child's Plan.

Focusing on the positives and the strengths in a child or young person's life is likely to help to improve outcomes by building a protective network around them. However, it is always important to be alert to whether there is any adversity or vulnerability that could put the child or young person's wellbeing at risk and to make sure that this is taken into account when planning support.

Specialist Assessments

Sometimes in order to complete a comprehensive assessment of a child or young person it is desirable or necessary to undertake a specialist assessment to inform and or underpin the analysis of the gathered information for the Child's Plan.

For example, it may be helpful to include an assessment completed by a Speech Therapist or an asset assessment of a child or young person's offending behaviour. The analysis of the information presented in the specialist assessment should clearly state the impact of the analysis on the child's growth and development.

Although the National Practice Model comprises of three stages, use of the Wellbeing Indicators, The My World Triangle and the Resilience Matrix, it is a fluid process and should be used proportionately. A single agency Child's Plan looking to support a child or young person's specific learning difficulty is unlikely to require consideration of the Risk Matrix when intervening at an early stage. More complex cases involving a number of agencies and partners will most likely require thorough consideration of all aspects of the National Practice Model to help shape the assessment and subsequent plan. Parents and carers and children and young people should be involved in decisions about the need for any specialist assessments.

Analysing Assessment Information

Careful analysis and interpretation of assessment information will enable Practitioners and families to:

- think about what is important and identify needs or difficulties;
- explain why these have come about;
- understand the impact of strengths and pressures on the child or young person;
- reach agreement about what needs to be improved;
- agree the priority issues, aims and goals in terms of improving the child or young person's wellbeing;
- agree desired outcomes; and
- construct and record the Child's Plan.

When analysing information it is important to:

- differentiate between facts, assumptions and opinions;
- be clear about the source of information and the reliability of that source. This will help to decide how significant the information is; and
- explain the thinking to the child, young person, their family and all the other people involved.

If the Child's Plan is being used to request support from another agency the chronology should always be attached.

The Five Questions

The following questions are designed to help you decide what to do to address a wellbeing need.

Asking these questions will help make the decision about any action that needs to be taken:

- (i) What is getting in the way of this child's wellbeing?
- (ii) Do I have all the information I need to help this child?
- (iii) What can I do now to help this child?
- (iv) What can my agency do to help this child?
- (v) What additional help, if any, may be needed from other agencies?

Once you have asked and answered these questions, you will be able to identify the desired outcomes you wish to move forward through provision of the Child's Plan.

Developing the planning section of the Child's Plan

Making sure that the views of the child or young person are included in any assessment or planning meeting is one of the most important responsibilities of a Named Person or Lead Professional and careful consideration of how best to do this should happen in advance. This will enable the child or young person to be able to influence approaches to the 'targeted interventions' being recorded.

The Partnership format will be used to record all plans including those of a single agency or service as well as complex support packages. When the plan has been initiated by a single agency and then becomes a multi-agency document, later versions of the plan should build on what has been agreed previously rather than beginning the process all over again.

The Planning Process

Some children and young people will have non-statutory plans in place such as a Health Care Plan to enable the Universal Services to support particular health needs or an Individual Education Plan (IEP) to address a barrier to learning. Effective early intervention and use of non-statutory planning by Universal Services will do much to prevent an escalation of needs resulting in the need for a Child's Plan.

When any child or young person needs support and intervention that is in addition to supports that are generally available through the Universal Services, a targeted intervention may be required. When targeted services or partners deliver that targeted intervention there is a need for close collaboration and careful planning. This need for collaboration triggers the need for a Child's Plan.

The Child's Plan format will be used to record the assessment of a child or young person and to help structure the planning of any additional support that is to be provided. The format will be used to collaboratively plan all interventions to ensure that all partners continue to work towards the agreed desired outcomes. This single approach ensures that supports are coordinated and effectively monitored to help improve the outcomes.

The Child's Plan will:

- include collated assessment information in line with the Wellbeing Indicators;
- capitalise upon the expertise of all present to state how identified needs will be addressed;
- outline who will be involved in the delivery of the support and what that support will look like;
- make it clear how everyone will know if the support has been effective;
- be regularly reviewed to check that a positive difference is being made to the child's or young person's wellbeing;
- be co-ordinated by the Named Person or a Lead Professional;
- be signed by all the team around the child including the child or young person and their family; and
- be written in such a way that it is easy for the child or young person to understand.

The Child's Plan template is divided into a number of sections including the core data, assessment of need (formed using the agreed national tools of the Wellbeing Wheel, The My World Triangle and the Resilience Matrix where appropriate) and the agreed action plan(s) to address the wellbeing needs.

Each of the sections will be completed in greater or lesser detail according to the complexity of needs. It is important to remember that not all the core data may be available at the start of the planning cycle. The information that is collected through the planning process will grow as the Child's Plan develops. Not all the fields contained in the template will be relevant for all agencies: only fields that are relevant to the plan that is being developed should be completed.

The Child's Plan may begin as a Single Agency Plan and become a Multi-agency Plan at a later date. When this is the case, the Named Person Service should securely send an editable Child's Plan to the Lead Professional. It is imperative that time is not spent repopulating plans that are already in place, rather that plans are added to and become an updated version of earlier plans.

Agreed Multi-agency guidance to support the actual completion of Child's Plans and exemplar plans are available from the **GIRFEC website www.aberdeengettingitright.org.uk**. Colleagues may also wish to familiarise themselves with the detailed resources available on how best to conduct Multi-Agency Meetings in order to populate the Child's Plan effectively. This can be found on the **GIRFEC** website.

SMART Action Plans

Use of the National Practice Model will have helped partners to identify areas to be addressed through provision of a Child's Plan.

Time should be spent considering these areas so that long term desired outcomes can be agreed. These long term desired outcomes could span more than one Wellbeing Indicator and will record the change we want to child or young person to make.

Once the desired outcomes have been agreed, consideration should be given as to what has to happen to support this change. In some cases a series of interventions and resulting changes will be required to help achieve the desired outcome. The changes that are a result of the interventions are the short term indicators of success. These short term indicators help measure the impact of interventions and keep a clear focus on designing interventions around the individual wellbeing needs of the child or young person. It is important that we think carefully about the change that the intervention will bring so that changes in wellbeing can be measured rather than the time commitment/effort of those delivering the targeted intervention.

Some desired outcomes will need only one indicator or measure; others will be more complex and will require a series of interactions to help improve the desired outcome.

Setting a limited number of targets avoids over burdening the child or young person, maintains focus, gives clear direction, and allows for purposeful allocation of resources. In some cases, areas to be developed may have to be prioritised for maximum impact.

As children and young people and families are key partners to the plan, make sure that you record how they can contribute towards the desired outcome.

Action plans for a child and/or young person need to be:

- SMART (Specific, Measurable, Achievable, Relevant and Time Bound);
- set at a level that will provide the child or young person with a challenge but not be completely beyond their reach; and
- written in plain English.

Where there are no existing statutory processes to review, you must review the plan at least every six months to ensure that progress is being made and that the agreed actions are improving the outcomes for the child or young person. The plan must include the high level targets from other plans with plans, such as Coordinated Support Plans being reviewed in tandem with the Child's Plan to avoid duplication.

It is anticipated that the Universal Services will meet with partners to the plan at least once a year. More regular reviews can be undertaken by other means if deemed appropriate.

Single and Integrated Chronologies of Significant Events

What is the purpose of a chronology?

The purpose of a chronology is to document significant achievements, events, developments, and changes in a child or young person's life, so that the pattern and impact of events on them are observed and responded to over time. Analysis of the chronology can help to identify trends or emerging risks so that they can be responded to at the earliest opportunity. Whilst a chronology is a key part of an assessment, it is not in itself an assessment, nor a record of all contact with a child or young person. It is a working tool which promotes engagement with children and young people and their families who use services. All the Practitioners in a child or young person's life will routinely record information in their single agency chronology. In the Universal Services this will often be done by the Named Person Service.

Who should have a chronology?

Health keep a chronology for all children. Within education a chronology is created when there is a concern that is impacting negatively upon wellbeing. Up until that point, colleagues in education will use pastoral notes to record progress. The National Practice Model sets out an expectation that, as a basic requirement, each agency involved with a child/young person and their family will collate key information into a single-agency chronology. Up until the point where a concern is identified, colleagues in education will use pastoral notes to record progress.

Some children or young people will have a high number of entries over a long period of time reflecting concerns at that time, others a series of entries over a shorter period whilst wellbeing concerns are being supported and reduced. Other children or young people who are thriving with the support of Universal Services may not have an active chronology.

What is an integrated chronology?

When other agencies are supporting a child or young person, relevant information is extracted from single agency chronologies to form an integrated chronology which is kept by the Lead Professional. An integrated chronology should therefore be started when there is concern about a child/young person's wellbeing, to support a multi-agency response. It is the role of the lead professional, in consultation with the named person, to collate the information from services involved with the child, and combine them into an integrated chronology. The integrated chronology only contains information that is relevant and proportionate to current wellbeing concerns to support an intervention.

When an integrated chronology is in place all agencies will continue to keep an up-to-date single agency chronology. Details of 'significant events' that are relevant and proportionate should be passed onto the Lead Professional so that the integrated chronology is kept up to date. This integrated approach allows the Lead Professional to assess holistically and gain a better understanding of events that have had a positive and negative influence on a child or young person's life and identify any emerging patterns that can help inform planning.

When sharing with other professionals you need to exercise professional judgement; adopt a common sense approach and only share on a need to know basis. Only share information that you consider relevant, necessary appropriate and proportionate to the wellbeing concern that has been identified.

What should be contained within a chronology?

It is important that a chronology contains information about events and issues that have had a positive effect on a child or young person as well as those events or issues that have had a negative influence. Positive entries help us to understand a child or young person's resilience better. Entries should detail significant events and be 'relevant and proportionate' to the wellbeing needs identified. The chronology should take account of the perspective of the child/young person, understanding the significance of events for them.

The chronology must be brief, accurate and up-to-date with facts and evidence being recorded as they are known. Significant events in a child or young person's life should be recorded in the chronology. If excessive details are recorded, it is difficult to pinpoint significant events and identify patterns.

Factual information is necessary and all records should avoid subjective and emotive language, never lose sight of the fact that you are writing about a child and in some cases it may be possible to compose the content of the entry with the child. We need to be mindful that any written records can be viewed by families and children and young people. Care should be taken to ensure that the reading of a chronology will not cause distress.

A chronology should always be:

- concise
- factual non objective
- dated
- accurate
- up to date
- written in plain English
- meaningful and sharable
- provide clear evidence of decisions made and actions taken
- include significant events and the impact of those events
- flexible so that detail collected may be increased if risk/concern increases or changes

A reviewed and analysed chronology should never include details of a third party.



What is a Significant Event?

Identifying what is or is not a significant event in a child or young person's life can be difficult as it depends on individual circumstances. A chronology should set out a series of significant events. The amount of detail in the chronology should depend largely on how a significant event is defined in relation to the individual child/young person and their needs. What is significant for one child or young person may not be for another. When recording specification and relevance are key. Specific incidents or concerns in isolation can be relevant. However, to gain a comprehensible view of the child/young persons current circumstances, patterns of incidents, injuries or concerns recorded with accurate dates and times are essential. Below are examples of events that may be identified as significant events across the partnership. The events identified should not be regarded as in any way definitive.

- Positive or negative changes in family care structure which impact on the child (e.g. separation, divorce, bereavement, custodial sentence)
- Positive or negative changes in family circumstances (e.g. housing, birth of a sibling)
- Physical and mental health and wellbeing of child or young person, parents/carers etc.
- Positive or negative changes in attendance/engagement with supports
- Positive or negative changes in parental presence, engagement or support with child or young person's development or learning
- Decision to initiate a Child's Plan and why
- Outcomes of internal assessment or joint assessment
- Significant allergies or illness
- Requests for assistance from the Named Person Service
- Information shared by others to the Named Person Service including the Police and any action taken
- Updates in legal status
- Domestic abuse incidents
- Child Protection referral, event, registration, case conference or core group meeting
- Referral to the Reporter
- Any other relevant concerns or positive improvements
- Details of when the chronology has been shared with child or young person and their family and agreement/disagreement

Health specific examples of significant events:

- Registration with a GP/change in GP or Health Visitor and date of transfer of notes
- Progress towards developmental milestones
- Childhood illnesses
- Dates of immunisations and if these are up to date or delayed
- Any diagnosis of a medical condition (e.g. asthma)
- Where a child or young person has a complex need, each condition should be specified
- Visits to accident and emergency and overnight hospital stays including name of Consultant
- Kept or missed appointments
- If the child or young person has a Healthcare Plan opened
- Outcome of specific assessments
- Parental health issues impacting on parental capacity

Education specific examples of significant events

- Change of school
- Positive or negative changes in performance, attainment or achievement
- Positive or negative changes in presentation and behaviour
- Change of teacher or other key member of staff from the child or young person's school
- Requests to change educational establishment
- Any threats or actual incidents of violence to staff by the parents, child or young person
- Episodes of exclusion or re-integration
- Identification of Additional Support Needs within staged intervention process (including requests for support services involvement (e.g. psychological service, targeted support team, care and learning)
- If the child has a Individual Education Plan, Child's Plan or Co-ordinated Support Plan opened
- Social exclusion within the school setting including evidence of bullying or positive support networks
- Achievements
- Significant periods of absence (e.g. illness, pregnancy, truancy)
- Performance in formal assessments
- Outcome of any risk assessment processes

Police specific examples of significant events

- Any incident involving a child or young person that would require notification to another agency
- Any incident involving an adult that would impact on the wellbeing of a child or young person
- Any incident where the environment or circumstances would impact on wellbeing
- Some convictions of an adult where they are part of or become part of a family
- Significant events where a child or young person is victim of, or are witness to a serious crime
- Where compulsory measures of supervision are likely to be required
- Where an Officer has repeated contact for minor behavioural issues in the family or community

Voluntary Organisations specific examples of significant events

- Police incident report in relation to child or young person or any family member
- Criminal conviction in relation to child or young person or any family member
- Date involvement commenced/ended
- Details of information given by another agency
- Contact from members of the public including any action taken

Social Work specific examples of significant events

- Date of referral and all subsequent re-referrals
- Information relating to health or parental lifestyles of parents/carer that significant impact on the child or young person
- Referral to Family Support Services, Home Support, Childcare or other agencies
- Closure of case
- Completion of initial assessment of a child or young person
- Comprehensive assessment (and any risk assessment)
- Any incident/harm to the child or young person (or other child in family)
- Any out of hours Social Work involvement
- Dates of requests for support from others (e.g. IAR, SBR)
- Report submitted with recommendation

- Any established patterns of missed appointments without acceptable reasons including refusal of entry or referrals to the Children’s Reporter including the grounds of referral
- Any other child or young person in the family becoming Looked After
- Case transfer and to whom (specify within ACC or to another council)
- Any Child Protection investigation and outcome for the child or young person (or another in the family)
- Any CPCC with details of whether registered or not and under which category
- Changes to legal status including primary and secondary statutes where applicable
- Any visits where the child or young person is not seen or the family are not at home or appointments cancelled
- Any multi-agency, planning meeting, case discussion or core group meeting
- Dates when summary statements, working agreements, risk assessments are completed
- Significant home visits

Housing specific examples of significant events

- Positive or negative changes in maintenance of tenancy agreement
- Positive or negative changes in neighbour relations or anti-social issues
- Evidence of, or referrals for suspected drug dealing, drug taking or excessive alcohol use
- Reports of anti-social behaviour on the child or young person or their parents
- Reports from Elected Members, members of the public or Anti-Social Behaviour staff regarding anti-social behaviour
- Any concerns about the safety or welfare of children or young people notes by housing staff or passed to them by others in the community (e.g children left unattended, poor standards of household cleanliness, children wandering the street or out in poor weather without adequate clothing)

A chronology should contain sufficient detail but should not be a substitute for recording in the child or young person’s file, record or clinical notes. Exemplar chronologies have been developed and can be found on the GIRFEC website.

If assistance is being sought from other partners, the reason for the request for assistance should be recorded. Subsequent contact will be contained within service records with only significant events/changes being recorded in the chronology.

Child’s Name:			DoB:		
Day/date/ time of significant event	Age of child/ young person	Significant Event	Source of Information/ date received	Action Taken Outcome	Name Title Agency
The day, date and time the event happened should be recorded	Age of the children or young person at the time of the significant event should be recorded.	A brief description of the event should be recorded here. Language should be clear, non judgemental, factual and concise so that the chronology improves understanding and supports good decision making.	Note the source and date this information was shared/ gleaned.	This may be simply monitoring or increased observation or a short statement of actions taken. This should be concise with detailed narrative kept in the child’s file.	Enter the detail of the practitioner recording this significant event.

Chronologies should not contain any information about third parties

Reviewing and analysing the chronology

Reviewing and analysing a chronology is an essential part of the information gathering for an assessment of need and risk. Simply gathering information and not analysing it makes the chronology meaningless and it will not assist in creating better outcomes for children and young people. It is best practice to review the chronology before handing it over to an incoming Named Person. Colleagues in Education should note that the new wellbeing module does not allow for deletion of information from pastoral notes. Information that is agreed to be relevant and proportionate should be created into a chronology by the outgoing Named Person for transition purposes. This should be shared with families, with agreement/disagreement noted prior to transfer, and should be shared as a PDF document uploaded to the child or young person's wellbeing file.

Sharing the chronology with children or young people and their families

Chronologies should be made available to the person that they are about, unless there are justifiable legal reasons for withholding this information. The child or young person should be helped and encouraged to read and contribute to their chronology both to make sure that it is accurate as well as offering an opportunity to discuss and assess the impact and importance of the events recorded within it. Regular reviewing and analysis of a chronology is essential to make sure that it is relevant and helpful. Sharing chronologies can also help in working together and building upon a sense of achievement and progress. Reviewing a chronology alongside children/young people and their families where appropriate, can facilitate identification of success.

As part of transition processes, the Named Person/Lead Professional should share the chronology with the child or young person and their family if capacity allows and there will be no risk to the child. Any agreements or disagreement should be noted as a further entry in the chronology before officially handing either a paper copy or PDF of the chronology to the incoming Named Person with a copy available to the child or young person and their family if requested.

If children and young people and families strongly challenge the information within the chronology, they should be guided to follow the published complaints process. Information on how to complain will appear in literature made available across the Universal Services.

The incoming Named Person coordinates the safe storage of the information that has been passed to them. This is usually stored within a Management Information System (MIS) attached to a child or young person's file as a PDF document.



Sharing information when the child or young person transfers

The Named Person Service officially transfers at key planned transition points as listed below:

- Pre-school children transfer from the health visitor to the primary head teachers on the first day of P1
- Children transition from the primary school head teacher to the secondary guidance teacher on the first day of S1
- Children leaving school before they turn 18 officially transition on the last day at school

It is anticipated that transition arrangements will be carefully planned by the outgoing and incoming Named Persons and will take place over several months and even years in some instances.

Although sharing information will be carefully planned, there are times when a decision will be taken to defer entry to school or make application for another school through the placement request procedure. It is anticipated that both outgoing and incoming Named Persons will make arrangements for the safe transfer of information as soon as reasonably possible.

Non-standard transitions such as where there is a change of GP surgery or school due to moving home etc. take place as soon as reasonably practicable.

When a child from birth until the first day at primary school moves from one GP practice to another the incoming Health Named Person will advise the outgoing Health Named Person. A transition conversation will take place and arrangements made for records including a chronology and any plans to pass from the outgoing to the incoming Named Person. The incoming Named Person will introduce herself /himself to the child or young person and parents then arrange a 'New to Area' home visit.

When a child is transferring to an Independent School, the outgoing Named Person should contact the incoming Named Person to make arrangement for transfer. A copy of the Pupil Progress Record (PPR) should be passed along with an editable Child's Plan if in place. Where appropriate a chronology should be created and shared with a PDF version attached to the child or young person's wellbeing file. Original paper documents should be retained by the school in keeping with normal practice.

When a child or young person is transferring to a local authority school outwith Aberdeen City, the outgoing Named Person should contact the incoming Named Person to make arrangements for transfer. A copy of the PPR should be passed along with an editable Child's Plan if in place. Where appropriate a chronology should be created with a PDF version attached to the child or young person's wellbeing file. Original documents should be retained by the school.

When a child or young person is transitioning to another country, the outgoing Named Person should contact the receiving school to pass on records and arrange for the secure transfer of any child protection files. A copy of the PPR should be passed along with a PDF chronology. Original documents should be retained by the school in keeping with normal practice. Original documents should be kept for a period of 5 years in line with the Pupils' Education Records (Scotland) Regulations 2003. Safe and well: Good practice in schools and education authorities for keeping children safe and well.

When a child or young person becomes home educated, the outgoing Named Person should contact the Authority Officer with responsibility for children and young people who are home educated. The outgoing Named Person should retain the PPR.

Children who are from travelling families and attend the same school in between travelling shall be retained by the Named Person in that school. Where this is not the case, the outgoing Named Person should contact the Service Manager (Specialist Provision) and arrange for the transfer of records.

When a child or young person resides in Scotland but attends a school out with Scotland, the Named Person role will be undertaken by the Inclusion Team. The outgoing Named Person should arrange transfer of information in keeping with current practice and inform the Inclusion Team so that arrangements can be put in place.

Information Sharing – when do you share and how?

It is anticipated that the Children and Young People (Scotland) Act 2014, once amended in light of the Supreme Court judgment of 28 July 2016, will create a new framework to share information. In the meantime, all information sharing should be in keeping with current data protection and human rights legislation. Detailed guidance is available in our local Practitioners Guidance to Information Sharing, Confidentiality and Consent.

Every inquiry into a child's death in the UK over the last 20 years, has demonstrated clearly that effective sharing of information within and between agencies is fundamental to improving the protection of children and young people. These findings illustrate the necessity of our keeping and sharing information effectively.

A distinction should be made between the type and extent of information sharing to 'support' a child or young person, and that needed to 'protect' a child,

There are several specific principles in relation to information sharing to ensure that a child or young person's wellbeing is protected:

- The safety, welfare and wellbeing of a child are of paramount importance when making decisions to lawfully share information with or about them
- All children and young people, despite any communication needs, have the right to express their views and have them taken into account.
- As a result of the Supreme Court judgment on July 2016, the full implementation of the Children and Young People (Scotland) Act 2014 is subject to review and amendment. The 2014 Act will be supported by the Information Sharing Bill and a code of practice.
- When sharing information about wellbeing concerns and any subsequent actions needed practitioners must be open, honest and transparent with children, young people and families. This means practitioners must explain and record the reason why they intend to share information; who they will share it with; exactly what information they intend to share; and seek their agreement and views on this. If Child Protection issue do not seek agreement and follow Child Protection guidance.
- At all times, information shared must be the minimum required but should be sufficient, relevant, necessary and proportionate to the circumstances of the child or young person, and limited to those who need to know.
- There needs to be a clear objective in sharing personal information with an understanding of the benefits that you expect to achieve and this should be documented. This means that practitioners must document the impact and anticipated positive outcome for the child or young person.
- All information sharing should be in keeping with human rights legislation, the principles of the General Data Protection Regulation and the General Data Protection Regulations 2018.

There are times when we need to share information in order to make sure that a child or young person gets the appropriate support. Sharing information openly, securely and appropriately is key to **GIRFEC**.



As the information holder, there are a number of steps that must be taken. They are:

- If the child or young person is at risk of significant harm, consent should not be sought and Child Protection processes should be followed immediately. If sharing information to 'support' a child or young person who is not at risk of significant harm, the information holder should discuss their concern with the child/young person and parents and carers and seek their explicit consent to share (if consent is verbal, ensure this is recorded). If consent is denied practitioners must record this, set an appropriate time frame to review and reassess the level of concern and risk, ensuring that the child, young person and family are aware.
- Be clear that the information in their judgement represents a concern about a child's wellbeing and likely to be relevant to the Named Person function to promote, support and safeguard a child or young person's wellbeing
- They must, in so far as reasonably practicable, ascertain and have regard to the views of the child or young person. Practitioners must be clear that the information they intend to share, in their professional judgment, represents a concern about a child or young persons wellbeing and is likely to be relevant to the Named Person function. This doesn't mean that they must comply with the child's views but that they must take their views into account when making a decision on whether to share or not. Practitioners may, depending upon the circumstances, legitimately decide not to share on the basis of the child's views.
- They must consider whether sharing the information would be likely to have a greater adverse impact on the child or young person's wellbeing than not sharing. If, in their opinion, sharing would be likely to have a greater adverse impact, they may decide not to share.
- They must consider whether sharing the information would be likely to prejudice the conduct of a criminal investigation or the prosecution of any offence. The rationale for this decision must be documented. Police Scotland should be consulted in such circumstances. If there would likely be such prejudice, the information should not be shared.

When a child or young person first needs help the Named Person will be the point of contact

If the Named Person considers that the involvement of another agency is appropriate they must explain to the child or young person (and where appropriate or necessary) their parent or carer why they believe sharing information is necessary as well as how and why it will be helpful.

When seeking consent to share information it is very important that children, young people and families or carers understand the following and this is recorded in the case file and/or chronology;

- what information is to be shared;
- why it needs to be shared;
- who it is to be shared with; and
- why sharing it with other people could make things better for the child or young person and what the possible consequences of not sharing might be.

When this discussion has taken place it is very important that all aspects of this discussion are recorded including the views of the child or young person and their family or carers about the decision to share.

Where a child or young person has a Child's Plan, practitioners must discuss and explain the privacy notice and clarify their views on what sections of the plan may or may not be shared. If a Child's Plan is not already in place and non-statutory plans are, practitioners must revisit and clarify the existing privacy notices and may share these if this will improve the wellbeing needs of the child or young person. In these circumstances, when making a referral, the core details, initial wellbeing assessment and analysis, outlining the concern within the single Child's Plan is sufficient.

Appropriate partners should be invited to attend a Child's Plan Meeting along with the child or young person and parents and carers. Ideally and where possible, partners should have contact with the child or young person or family prior to this formal meeting.

If parents feel that information should not be shared, and you consider there is no risk of harm, you should respect this decision. A date should be set for reviewing progress and further consideration of the level of risk to a child or young person.

This requires careful consideration. In most cases, sensitive discussion with the parent/carers, child or young person will result in agreement to share information they feel to be relevant and proportionate. We no longer seek written consent to share information but in most cases, children and young people and families will be comfortable providing verbal consent with the Named Person sharing information in order to access appropriate supports. **Any disagreement should be noted.**

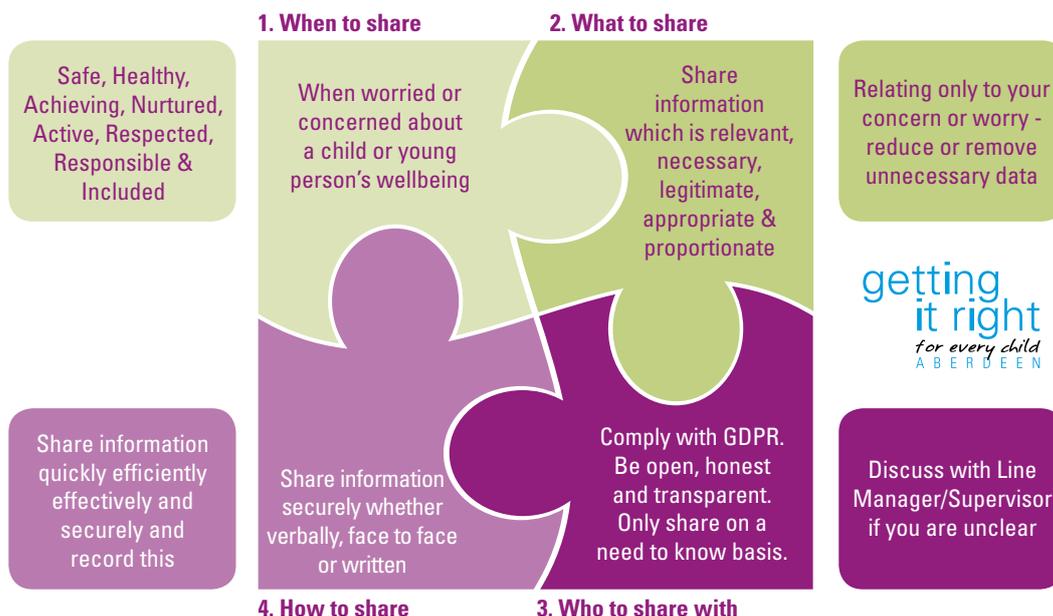
Consent should only be sought where there is a genuine choice.

Practitioners must also make clear to children/young people or their parents & carers that they have the right to withdraw consent at any time. Ensure that they know how they to go about withdrawing their consent should they wish too.

A helpful visual has been developed to support your decision making when sharing information with further information being available in our Local Practitioners Guide to Information Sharing, Confidentiality and Consent



Short Guide to Information Sharing, Confidentiality & Consent



For full guidance please see **A Practitioner's Guide to Information Sharing, Confidentiality and Consent to Support Children and Young People's Wellbeing**
<http://www.aberdeengettingitright.org.uk/sharinginformation.html>

THE 5 GIRFEC QUESTIONS

1. What is getting in the way of this child or young person's wellbeing?
2. Do I have all the information I need to help this child or young person?
3. What can I do now to help this child or young person?
4. What can my agency do to help this child or young person?
5. What additional help, if any, may be needed from others?

If the answer to any of these is 'No' or 'Don't Know' then find out

If there are concerns about wellbeing then it may be necessary to share information

CONSENT

- **If you have a concern about a child or young person's wellbeing then there is no requirement to seek consent.** The individual should be informed of the intention to share information and the reasons why.
- Consent or decision to share without consent **must always be recorded**

Consent should only be sought when the individual has a real choice.

It should be informed and explicit (they need to have understood and agreed) - implied consent (not stating that they do not want it shared) is not enough

- **Children and young people** subject to their age and developmental capacity, **can withhold or provide consent**

POINTS TO REMEMBER

Record **the reasons why you are sharing information** and/or not sharing information

Record **with whom you have shared the information** and **when you did so**

Keep all information **safe and secure at all times**

Always **identify the person you are communicating with**

Do not **give verbal information** where you can be **overheard**

Do not **leave information on answering machines or voicemail**

Be aware of your service/agency's e-mail policy - **always use secure e-mail; do not use fax**



More extensive information in safe information sharing is available from the Practitioners Guidance to Information Sharing, Confidentiality and Consent.

If you have concerns about the welfare or safety of a child you should share your concerns and information with the Joint Child Protection Team on 01224 306877.

Useful Links

¹ National Guidance for Child Protection in Scotland 2014

<http://www.gov.scot/Resource/0045/00450733.pdf>

² The Statutory Guidance on the Children and Young People (Scotland) Act 2014 -

<http://www.gov.scot/Resource/0049/00490013.pdf>

³ The Children and Young People (Scotland) Act 2014 -

<http://www.legislation.gov.uk/asp/2014/8/contents/enacted>

⁴ United Nations Convention on the Rights of the Child (UNCRC) -

http://www.unicef.org.uk/Documents/Publication-pdfs/UNCRC_PRESS200910web.pdf

⁵ Aberdeen GIRFEC Website -

<http://www.aberdeengettingitright.org.uk/>

⁶ Children (Scotland) Act 1995 -

<http://www.legislation.gov.uk/ukpga/1995/36/contents>

⁷ Understanding Thresholds documents.

⁸ Family Information Service -

https://synergy6.tribalhosted.co.uk/Aberdeen/FISO/Public%20Enquiry_FS/

Aberdeen City Child Protection Website -

<https://www.aberdeencity.gov.uk/services/social-care-and-health/child-protection>

Young Carers Toolkit -

<https://www.aberdeengettingitright.org.uk/2018/06/21/launch-of-young-carers-toolkit/>

Getting it right for every child

