**GETTING**

August 2023 Version 10

**IT**

**RIGHT**

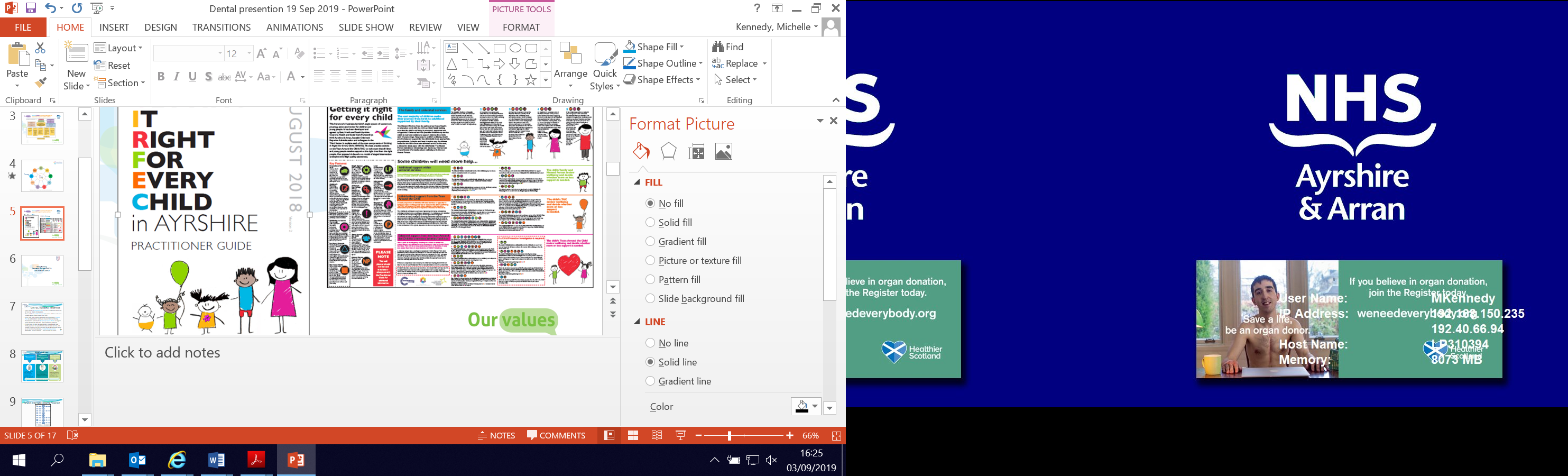
**FOR**

**EVERY**

**CHILD**

in AYRSHIRE

PRACTITIONER GUIDE



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Chapter 1

**INTRODUCTION**

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| Getting it right for every child (GIRFEC) (see glossary) is the Scottish Government’s commitment to provide all children, young people and their families (for definition of child/young person and family see glossary) with the right support at the right time - so that every child/young person in Scotland can reach their full potential.  **GIRFEC** is the national approach to improve outcomes and support the wellbeing of children and young people by offering the right help at the right time from the right people. All practitioners have a role to play in promoting, supporting and safeguarding the wellbeing of children and young people through their professional expertise and day to day work, individually and in partnership with other practitioners. The approach is underpinned by the *United Nations Convention on the Rights of the Child (UNCRC)* and is in place to benefit all children from birth to 18 years and beyond if still in school.  GIRFEC is a way of working which empowers children, young people and their families by recognising and promoting their rights. This means putting their views and needs at the heart of service development and delivery. [*Ayrshire’s* *Child and Young Person’s Pathway*](http://girfec-ayrshire.co.uk/wp-content/uploads/2023/08/Wall-planner-updated-Aug23.pdf) ensures effective delivery of the approach as practitioners develop good quality relationship based practice that meaningfully embraces partnership working as a Team with the Family as the most effective way of improving wellbeing outcomes.  **National GIRFEC Policy Statement**  GIRFEC as a strengths-based approach seeks to realise children’s rights on a day-to-day basis and is therefore underpinned by key values and principles:   * Placing the child/young person and their family at the heart, and promoting choice, with full participation in decisions that affect them; * Working together with families to enable a rights-respecting, strengths-based, inclusive approach; * Understanding wellbeing as being about all areas of life including family, community and society; * Valuing difference and ensuring everyone is treated fairly; * Considering and addressing inequalities; * Providing support for children, young people and families when they need it, until things get better, to help them to reach their full potential; and * Everyone working together in local areas and across Scotland to improve outcomes for children, young people and their families.   Based on these principles, GIRFEC is about enhancing the wellbeing of all children and young people as well as building a flexible scaffold of support: where it is needed, for as long as it is needed. This is delivered through the core components of:   * a named person who is a clear point of contact for children, young people and families to go to for support and advice. A named person can also connect families to a wider network of support and services so that they get the right help, at the right time, from the right people; * a shared and holistic understanding of wellbeing and a single model of how this can be considered and supported; and * a single, shared and rights-based approach to planning for children and young people’s wellbeing where support across services is needed, co-ordinated by a lead professional.   This is supported by use of the National Practice Model ([Practice Guidance 1](https://www.gov.scot/publications/getting-right-child-girfec-practice-guidance-1-using-national-practice-model/)) which sets out a shared framework and approach to identification, assessment and analysis of wellbeing needs. It provides a consistent way for practitioners to work with children, young people and their families to understand the child/young person’s individual growth and development in the context of their rights, unique family circumstances and wider world, exploring strengths, resilience, adversities and vulnerabilities.  Wellbeing is considered and assessed across the aspects of children and young people being Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible and Included. These are the wellbeing indicators (see glossary) as referred to within section 96(2) of the Children and Young People (Scotland) Act 2014, commonly known as SHANARRI. The UNCRC provides a foundation for the wellbeing indicators (SHANARRI). They are overlapping and connect areas that are fundamental to understanding what a child/young person need in order to grow, develop and reach their full potential.  This promotes access to early support to meet wellbeing needs and also supports immediate action when necessary to keep a child/young person safe. GIRFEC ensures that a child/young person and their families can easily access information, advice and support. While all practitioners should respond to a child/young person and their families when they need or seek assistance, the pathway makes available a named person for every child/young person and they act as a point of contact to promote, support and safeguard the child/young person. A child/young person may need additional support at some point, or indeed throughout their lives, due to difficulties with any aspect of wellbeing.  The GIRFEC approach facilitates appropriate and proportionate assessment, using the *National Practice Model* as part of everyday practice to engage with a child/young person and families, and where necessary plan and offer access to additional support. Following the Ayrshire’s Child and Young Person’s Pathway allows for a Team with the Family, co-ordinated by a lead professional/named person (sometimes this is done by the named person), to support the family. As other supports are identified, to meet the needs of the child/young person, a *Request For Assistance* is used to identify appropriate supports and thus new members to the Team with the Family, to provide support, thus ensuring improved wellbeing.  A Child and Young Person’s Plan (‘My Plan’) is produced for any child/young person who has identified wellbeing needs and this is reviewed based on the child/young person’s current needs.  [*National Policy Statement*](http://girfec-ayrshire.co.uk/wp-content/uploads/2022/12/getting-right-child-policy-statement-2022.pdf)  **National GIRFEC Priorities**   * **United Nations Conventions on the Rights of the Child (UNCRC)**   The UNCRC is a United Nations treaty, it is a holistic framework for the rights of all children and is the most widely ratified international treaty in the world. The UNCRC Articles set out the civil, political, economic, social and cultural rights of every child. The Articles should be considered universal, inalienable, indivisible, and interdependent, meaning they apply to everyone under the age of 18 (see glossary), cannot be taken away, they are all of equal importance, and they depend on each other to provide a single framework that is essential to upholding the rights of children. There are four General Principles which underpin how the Convention should be interpreted and put into practice. These are that children:   * Should not be discriminated against (Article 2); * Should have their best interests accounted for as a primary consideration (Article 3); * Have the right to survive and develop (Article 6); and * Have the rights to have their views heard and given due weight in accordance with their age and maturity (see Article 12).   The UNCRC (Incorporation) (Scotland) Bill was passed unanimously by the Scottish Parliament on 16 March 2021. This will be implemented into legislation as soon as practically possible.   * **Tackling Child Poverty**   There are strong links to the Child Poverty (Scotland) Act 2017 and to the national mission to tackle child poverty. Article 27 of the UNCRC makes clear that every child/young person has the right to a standard of living that is good enough to meet their physical and social needs and support their development. The priority groups affected by child poverty can be found [here](https://www.healthscotland.scot/population-groups/children/child-poverty/child-poverty-overview/priority-groups-affected-by-child-poverty#:~:text=Priority%20groups%20affected%20by%20child%20poverty%201%20lone-parent,the%20mother%20is%20under%2025%20years%20of%20age.).   * **Keeping the Promise**   There is a shared commitment to build on the foundations of The Promise, to reorganise how we think, plan and prioritise for children, young people and their families. Those foundations of Voice, Family, Care, People, and Scaffolding of The Promise carry over into the first of three Plans: The Plan 21-24 with priorities in A Good Childhood, Whole Family Support, Supporting the Workforce, Planning and Building Capacity. For GIRFEC to be applied using a rights-respecting approach, the views of children and young people should be sought and listened to. There must be a compassionate and caring decision making culture focused on children and young people and those they trust. A child/young person should be meaningfully and appropriately involved in all matters which affect them, including in decision making about their care.  In Scotland, Family Support is broadly understood to be a range of services to help families meet their individual needs. The aim is to improve families’ wellbeing by providing advice and support to ensure the earliest possible help at the right time.  Getting It Right For Every Child (GIRFEC) is the Scottish Government's approach to supporting Children and Young People. GIRFEC is a strengths based approach, working in partnership with families, and providing an early offer of support to improve outcomes for the child/young person and family.  The Scottish Government Leadership Group designed the Routemap for Whole Family Support focusing on Children, Young People and Families at the Centre, Availability and Access, A Whole System Approach and considerations from Workforce and Culture  [Routemap and National Principles of Holistic Whole Family Support (www.gov.scot)](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.gov.scot%2Fbinaries%2Fcontent%2Fdocuments%2Fgovscot%2Fpublications%2Fstrategy-plan%2F2022%2F07%2Froutemap-national-principles-holistic-whole-family-support2%2Fdocuments%2Froutemap-national-principles-holistic-whole-family-support%2Froutemap-national-principles-holistic-whole-family-support%2Fgovscot%253Adocument%2Froutemap-national-principles-holistic-whole-family-support.pdf&data=05%7C01%7CMichelle.Kennedy2%40aapct.scot.nhs.uk%7Ce2ee33f42b814710768e08db7d3d3370%7C10efe0bda0304bca809cb5e6745e499a%7C0%7C0%7C638241474175882334%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=uxBuFuJEVF76YqbsveJLsknoxv6xpjVDF9FkTHNQ8Co%3D&reserved=0) |

Chapter 2

**NAMED PERSON**

**Access to a named person is part of Getting it right for every child (GIRFEC) to promote, support and safeguard the wellbeing of a child/young person.**

Most children and young people get all the help and support they need from their parent(s)/carer(s), wider family and community, but sometimes they may need a bit of extra support.

**GIRFEC** gives all children and young people from birth to 18, or beyond if still in school, access to a named person to help support their wellbeing.

Children and young people and their families need to know who they can contact when they need access to relevant support for their own or their child/young person’s wellbeing. Within the GIRFEC approach, these foundations are carried out through the role of a named person who is able to provide a clear point of contact within universal services, if a child/young person or their family want information, advice or help.

A named person will be a central point of contact if a child/young person or their parent(s)/carer(s) want information or advice, or if they want to talk about any worries and seek support.

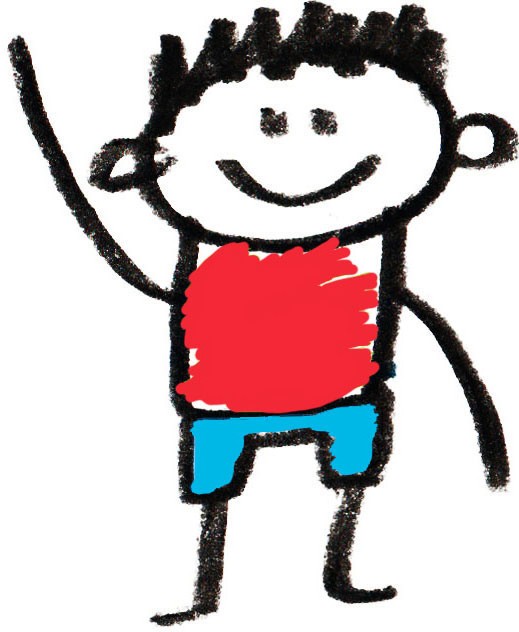
The named person can also, when appropriate, request assistance from different services who can help.

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| **Who will be a named person?**  NP  A named person will be the health visitor or family nurse for a pre-school child and a promoted teacher - such as a head teacher, or guidance teacher or other promoted member of staff - for a school age child/young person.  A named person will be available to listen, advise and help a child/young person and their parent(s)/ carer(s) by contacting other agencies via the Request For Assistance process. A child/young person is entitled to a named person, they can decline the support offered by the named person at any time.  **What will a named person do?**  The named person will promote, support and safeguard a child/young person’s wellbeing. These functions are:   * to offer information, advice or direct support; or help to access a service or support; or * to raise a matter with other services or authorities.   A named person will be available to listen, advise and help a child/young person and their parent(s)/ carer(s), provide direct support or help them access other services. For example: a health visitor might request assistance from a speech and language therapist, or a guidance teacher may put parents in touch with a local bereavement counselling service.  They will also be a point of contact for other services if they have any concerns about a child/young person’s wellbeing need.  In his or her own agency, the *named person* will:   * Be a point of contact for the child/young person and/or parent(s)/carer(s) seeking information or advice or wishing to discuss a concern; * Ensure that the views of a child/young person and families are sought and recorded at every stage; * Be the person who ensures a child/young person and families are fully involved in decisions that affect them; * Ensure, when information needs to be shared, that a child/young person and families know why this information should be shared, and that agreement has been given and recorded, unless, in exceptional circumstances, there is good reason not to (see information sharing flowchart and guidance); * Follow the Ayrshire Child and Young Person’s Pathway when wellbeing needs are identified, including carrying out a wellbeing assessment, requesting assistance from others, involving the Team with the Family and ensuring a Child/Young Person’s plan (‘My Plan’) is produced and reviewed as required; * Work with the lead professional, when there is one, as part of the Team with the Family;   Record any decisions or actions taken as appropriate within agency systems and AYRshare, as required; and   * If concerned that the child is at risk of significant harm, follow child protection procedures.   **What happens when a wellbeing need is identified?**  When the child/young person, their parent(s)/carer(s), or someone who works with them identifies a wellbeing need, a named person will use the wellbeing indictors and carefully consider the situation by asking the **five questions:**   1. **What is getting in the way of this child/young person’s wellbeing?** 2. **Do I have all the information I need to help this child/young person** 3. **What can I do now to help this child/young person?** 4. **What can my agency do to help this child/young person?** 5. **What additional help, if any, may be needed from others?**   Once they have considered the situation, a named person will discuss this with the child/young person or parent(s)/carer(s) and other appropriate professionals if required, to assess what needs to be done to improve the a child/young person’s wellbeing.  They will then plan what action(s) will be taken with the child/young person and their parent(s)/carer(s) and arrange appropriate review dates for the plan. Each situation and information will be unique to the child/young person, and the way they are supported will be tailored to their individual needs.  A named person will only offer advice or support in response to a request from a child/young person or parent(s)/carer(s), or when a wellbeing need is identified. They can help a child/young person or their parent(s)/carer(s) address their concerns early and in some cases avoid bigger concerns or problems developing.  Some families may have access to more than one named person, e.g. health visitor, primary school and secondary school, due to the ages of their children. These named persons should work closely to assess, plan and deliver support to meet the needs of the child/young person and their family, if support is required.  There should be discussion with the child/young person and their family, to ensure there is clear understanding of the decision-making. This support could be provided from within education or health, or from a targeted or specialist service, or from the third sector. This kind of trust and cooperation is fundamental to the success of GIRFEC. Additional information may be required and the gathering of this could include more specialist assessment of a particular aspect of a child/young person’s needs, such as an assessment of mental health needs. In this case, the specialist assessment should build further on the information that has already been gathered.  There is no obligation to accept the offer of advice or support from a named person. A decision not to access this support at any particular time does not prevent support being accessed in future. Likewise accepting support at any particular time does not create an obligation to continue to accept support.  **Who will provide and support the named person?**  Health and Education services make sure a named person is available to a child/young person wherever they live or learn. They will make sure the child/young person and parent(s)/carer(s) know the roles and responsibilities of the named person and what it means for them.  Other organisations, such as independent or grant-aided schools, secure accommodation services and the Scottish Prison Service (for the small number of young people held in custody), have a responsibility to ensure a named person is available to the children and young people in their care.  In line with the Information Sharing Guidance in Chapter 5 information about a child/young person’s needs, specific circumstances and the help they have already received may be shared with a named person and proportionately with other services if they are asked to provide additional support.  Named persons have processes and procedures to make a Request For Assistance.  **Who is the named person for young people leaving school before their 18th birthday?**  For young people who leave school before their 18th birthday, the local authority where they live, will make available a named person, who meets the following criteria:   1. **Knows the young person where possible;** 2. **holds a post within the organisation which is the service provider in relation to the young person; and** 3. **has had training and experience in providing educational and personal support to a young person.**   Given the potential needs of this group, the named person may continue to be the Guidance Teacher or will be someone with the experience and knowledge to provide educational and personal support to children relevant to their age, their wellbeing needs and the nature of their participation in post-school activity. This support may be provided directly from or via signposting to other services. They should be able to access and assess relevant wellbeing information from the young person’s previous named person, or their systems, and help young people access local support networks if required.  The named person may also be able to give information and advice to other services and practitioners, for example, the police or social work.  Where a young person has a plan in place at the transition from school, the Team with the Family meeting will agree updates. The named person will be a partner to the plan and will link with the lead professional to agree updates to the plan and roles moving forward.  **Who is the named person for gypsy travelers?**  For children and young people who travel, the local authority where they are living, will make available a named person. Given the potential needs of this group, the named person will be someone with the experience and knowledge to provide educational and personal support to a child/young person, relevant to their wellbeing needs and the nature of their participation in education. This support may be provided directly from the named person or via signposting to other services. They should be able to access and assess relevant wellbeing information from the child/young person’s previous named person, or their systems, and help a child/young person access local support networks if required. The named person may also be able to give information and advice to other services and practitioners when wellbeing needs are identified.  **Who is the named person for home educated children?**  For a child/young person who is home educated the Education Department of the local authority where they are living will make available a named person. Where a child/young person has more significant wellbeing needs, the named person will need to initiate child/young person’s planning processes, and follow the *“Team with the Family”* model and identify a lead professional. When a child/young person’s plan is in place the named person will be a partner to the plan and will link with the lead professional.  **Transition between named persons**  Clear ways of informing a child/young person and families of the transition from their Health Visitor to their new named person, across the child/young person’s primary education, regardless of whether they have engaged with the named person previously. When attending secondary school, the named person role is usually fulfilled by a principal teacher of guidance. In some cases it may be a depute head teacher or head teacher (or other promoted teacher). During the young person’s transition to secondary school, the local authority continues to have a role in ensuring young people and their families are aware of their new named person who should be the consistent point of contact throughout their young person’s secondary education, regardless of whether they have previously engaged with the named person.  At any point in time the named person can change within health or education and when this happens the child/young person and their family would be clearly informed.  Where the transition is outwith Ayrshire, the child/young person’s outgoing named person should provide the appropriate information, with consent, to the incoming named person.  **Knowledge and skills required to deliver the role of the named person**   * The values and principles underpinning the GIRFEC approach; * Assessment of wellbeing using the National Practice Model (please see [Practice Guidance 1](https://www.gov.scot/publications/getting-right-child-girfec-practice-guidance-1-using-national-practice-model/)); * Taking account of children’s rights in line with the UNCRC; * Recognise, evaluate and respond proportionately to a wellbeing need using a strengths based approach; * Work together with children, young people and their families, including supporting them to fully participate, including where communication barriers exist, how to access appropriate support if required; * Lawfully record and process information, in line with information sharing guidance. See chapter 5 below (and the national [Practice Guidance 4](https://www.gov.scot/publications/getting-right-child-girfec-practice-guidance-1-using-national-practice-model/)); * Develop, use and manage a chronology; * Recognise when the response to a wellbeing need(s) demonstrates a requirement for a Child/Young Person’s Plan (‘My Plan’) (see glossary); * Be aware of the grounds for a referral to the Scottish Children’s Reporters Administration (SCRA) and recognise when a referral is appropriate in relation to the child/young person; and * Understand the relationship between a wellbeing need and a child protection concern and how to follow local child protection procedures. * Record information on your local system and share, when appropriate on the child/young person’s record on AYRshare.   **How do you reach a child/young person’s named person?**  Contact details of how to reach the named person will be maintained on the Ayrshire GIRFEC website. [**www.girfec-ayrshire.co.uk**](http://www.girfec-ayrshire.co.uk/)within “What is GIRFEC”, then “Who is a named person” section  For more information visit:  [*National named person guidance*](http://girfec-ayrshire.co.uk/wp-content/uploads/2022/12/getting-right-child-practice-guidance-2-role-named-person-2022.pdf)  [National guidance for child protection in Scotland 2021 - gov.scot (www.gov.scot)](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.gov.scot%2Fpublications%2Fnational-guidance-child-protection-scotland-2021%2F&data=05%7C01%7CMichelle.Kennedy2%40aapct.scot.nhs.uk%7C28a8cfb29f104c0e58c408db342d2709%7C10efe0bda0304bca809cb5e6745e499a%7C0%7C0%7C638161140752572026%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=78VgujYn4sGXWOTIpH62ld9zPKXSkaSHMzsrYlDIU%2Bo%3D&reserved=0)  [http://girfec-ayrshire.co.uk/young-people/](http://girfec-ayrshire.co.uk/young-people/%20) or <http://girfec-ayrshire.co.uk/parents-carers/> |

Chapter 3

**LEAD PROFESSIONAL**

**The lead professional is the person who works alongside the named person and coordinates multi-agency planning and makes sure that the different services provide a network of support with the child/young person and their family in a seamless, timely and proportionate way.**

There are some circumstances where child/young person’s wellbeing needs involve two or more agencies working together delivering services to the child/young person and their family. Where this happens, in all cases, a lead professional will be needed to provide support. The lead professional becomes the person within the network of practitioners supporting the child/young person and family who will make sure that the different agencies act as a team and the help they are all offering fits together seamlessly to provide appropriate support for the child/young person and their family.

The lead professional has a significant role in

working with other agencies to coordinate the

child/young person’s plan (‘My Plan’).

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| **What is the role of the lead professional?**  Where it has been agreed that identified interventions are required to support a child/young person’s wellbeing a child/young person’s plan should be prepared. There will be a lead professional to make sure that the plan is managed properly and to co-ordinate the support described in the plan. The lead professional will;   * support children and young people and their family to fully participate in discussions about what is happening in a child/young person’s world, where this is in their best interests and in consideration with their full spectrum of rights; * ensure as far as possible, that the child/young person and their family understand what is happening at all times and support them to participate in decisions being made; * act as a main point of contact for all, particularly to ensure the child/young person and their family are not required to tell their story multiple times to multiple professionals; * oversee the implementation of the child/young person’s plan and check that it is reviewed, accurate and kept up-to-date; * ensure that targeted support is helping to improve agreed wellbeing outcomes for the child/young person and call an early review, if required; * promote teamwork between agencies, and work in partnership with the named person; * support the child/young person and their family during key transition points (see glossary), particularly any transfer to a new lead professional; and, * have an awareness and understanding of the working practices of other agencies. The lead professional is accountable to their own agency for:   + meeting individual professional tasks; and   + achieving the responsibilities which the lead professional role entails, as above.   Using the National Practice Model, the lead professional should coordinate the wellbeing assessment required, including information from any specialist assessments, make sense of that information and lead on constructing the Plan (otherwise known as “My Plan”). All agencies involved have a joint accountability to ensure the plan is progressed and reviewed to meet the needs of the child/young person and agreed outcomes.  **When the plan has been agreed, the lead professional should:**   * be a point of contact with the child/young person and their family in relation to the plan to ensure it is working well and achieving the agreed outcomes, ensuring they have accessible information relating to their plan; * be a point of contact for all practitioners who are delivering support for the child/young person to feedback progress on the plan or raise any issues; * ensure that the support provided is consistent with the child/young person’s plan (‘My Plan’), aligning with the outcomes and the outcomes that the child/young person, Family and practitioners have agreed; * promote team work between agencies, to avoid duplication and drift; * work with the child/young person and their family and the practitioner network to make sure that the child/young person and their family’s rights are respected, they are able to fully participate in the plan, and, when necessary, link the child/young person and their family with specialist advocacy services; * ensure the plan is informed by an awareness that a child/young person can experience multiple and overlapping inequalities and address these in a child-focused manner; * support the child/young person and their family to make use of support from practitioners and agencies; * monitor how well the child/young person’s plan is working and whether it is improving the child/young person’s wellbeing and achieving agreed outcomes; * coordinate the provision of other help or specialist assessments which may be needed, with advice from other practitioners where necessary, and make arrangements for these to take place; * arrange a joint review including the child/young person and their family, all agencies involved, and amend the child/young person’s plan (‘My Plan’), when required; and * support the child/young person and their family through key transition points and ensure a careful and planned transfer of responsibility where roles change. For example, child/young person and their family should be supported to fully participate when another practitioner is to become the lead professional and when a multi-agency child/young person’s plan (‘My Plan’) is no longer needed, meaning that the lead professional role is no longer required.   The lead professional is responsible to make sure other practitioners are clear about the different roles they have and the contributions they make to implement the child/young person’s plan (‘My Plan’); they are not responsible for the actions of other practitioners or services.  The lead professional often chairs the Team with the Family meeting. Refer to [*Guidance*](http://girfec-ayrshire.co.uk/practitioners/document-downloads/) on chairing a Team with the Family meeting.  The lead professional will be someone employed by one of the services involved in supporting the child/young person and family. When a child/young person’s plan (‘My Plan’) is prepared, the partners to the plan, including the child/young person and parent(s)/carer(s), where appropriate, will need to consider who the right person is to take on the role of lead professional. Where a child/young person is looked after or involved in a child protection investigation or proceedings the lead professional will be a Social Worker.  The lead professional changes, as appropriate, to support the child/young person’s plan at any particular time and should change appropriately as the wellbeing needs of the child/young person change. The child/young person should be asked who they would prefer their lead professional to be depending on their age and stage.  **How will a lead professional be chosen?**  LP  The lead professional should generally be the professional with the most expertise in relation to the child/young person’s plan (‘My Plan’). When deciding who should take the role of lead professional, practitioners should ask who can:   * bring the most relevant knowledge and expertise to the child/young person’s plan (‘My Plan’); * lead and co-ordinate the child/young person’s plan (‘My Plan’); * arrange the review of the child/young person’s plan (‘My Plan’); * provide confident leadership; and * work effectively with the child/young person and their family.   **Choosing the lead professional should be influenced by:**   * the child/young person and/or family’s needs and views; * the best interests of the child/young person; * the child/young person and their family’s full participation in decision-making; * previous contact or positive relationship with the child/young person and their family; and * any statutory obligation defined in law towards a child/young person, for example the Looked After Plan under the Children (Scotland) Act 1995.   Depending on the situation, including consideration of the child/young person’s needs, the lead professional and named person may be the same person.  **The relationship between lead professionals and others in contact with the child/young person and their family**  It is the lead professional’s responsibility to make sure everyone is clear about the different roles they have and the contributions they make to implement the child/young person’s plan (‘My Plan’). In some cases, much of the day-to-day work with the child/young person or their family may be carried out by practitioners other than the lead professional. The lead professional should have sufficient direct contact with the child/young person and their family to ensure that they are well-informed and fully involved in decision-making, and that the child/young person’s plan (‘My Plan’) is working properly and to good effect. Over time, circumstances may change and it may be appropriate for a different practitioner to take over the role of lead professional.  Whenever this happens, the child/young person and their family should be supported to fully participate in any decisions and changes that affect them, and fully supported with transition to a new lead professional.  [*National lead professional guidance*](http://girfec-ayrshire.co.uk/wp-content/uploads/2022/12/getting-right-child-practice-guidance-3-role-lead-professional-2022.pdf)*.* |

Chapter 4

**Using the GIRFEC National Practice Model**

**Considering the quality of a child/young person’s lives.**

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| The Children and Young People (Scotland) Act 2014 is about improving the wellbeing of children in Scotland. The Act is wide ranging and includes key parts of ***Getting it right for every child***, commonly known as **GIRFEC**.  For Guidance on Information Sharing go to Chapter 5 and follow the Ayrshire Information Sharing Flowchart.  Wellbeing sits at the heart of **GIRFEC** and reflects the need to tailor the support and help that children and their families are offered to support their wellbeing.  A child/young person’s wellbeing is influenced by everything around them and the different experiences and needs they have at different times in their lives. |

### **What is wellbeing?**

**Protected from abuse, neglect or harm at home, at school and in the community.**

**SAFE**

**Having the highest attainable standards of physical and mental health, access to suitable healthcare and support in learning to make healthy, safe choices.**

**HEALTHY**

**Being supported and guided in learning and in the development of skills, confidence and self-esteem, at home, in school and in the community.**

**ACHIEVING**



**Having a nurturing place to live in a Family setting, with additional help if needed, or, where possible, in a suitable care setting.**

**NURTURED**

**Having opportunities to take part in activities such as play, recreation and sport, which contribute to healthy growth and development, at home, in school and in the community.**

**ACTIVE**



**Having help to overcome social, educational, physical and economic inequalities, and being accepted as part of the community in which they live and learn.**

**INCLUDED**

**Having opportunities and encouragement to play active and responsible roles at home, in school and in the community, and where necessary, having appropriate guidance and supervision, and being involved in decisions that affect them.**

**RESPONSIBLE**

**Having the opportunity, along with carers, to be heard and involved in decisions that affect them.**

**RESPECTED**

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| **What do the wellbeing indicators mean?** These eight wellbeing indicators are sometimes known collectively as SHANARRI. While each indicator is separately defined, in practice, the indicators are not discrete, but connected and overlapping. In this way, they give a holistic view of each child/young person and allow the child/young person and the adults supporting them, to consider strengths as well as barriers to growth and development.  ***Child protection services will continue to protect children and young people at risk of significant harm.***  **IF YOU HAVE A CHILD PROTECTION CONCERN FOLLOW YOUR CHILD PROTECTION PROCEDURES.**  **How are the wellbeing indicators used?**  Each child/young person is unique and there is no set level of wellbeing that a child/young person should achieve. Each child and young person should be helped to reach their full potential as an individual.  The wellbeing indicators help make it easier for everyone to be consistent in how they consider the quality of a child/young person’s life at a particular point in time.  Families and people working with children can use the wellbeing indicators to identify what help a child/young person needs in order to help them access the right support or advice.  All services working with a child/young person, and those who care for them, must play their part to promote, support and safeguard child/young person’s wellbeing. **Key facts about wellbeing**  1. **Every child/young person or should be safe, healthy, achieving, nurtured, active, respected, responsible and included.** These eight wellbeing indicators help make sure everyone – child/young person, parent(s)/carer(s), and the people who work with them, such as teachers and health visitors – have a common understanding of wellbeing. 2. **The eight wellbeing indicators connect and overlap.** For example, a health difficulty may have an effect on a child/young person achieving their goals. When considered together the different elements of wellbeing give the whole picture of a child/young person’s life at a particular point in time. 3. **A child/young person’s wellbeing is influenced by everything around them.** This includes their individual circumstances, the support they get from their family and community, and the services that support them. Factors such as adequate sleep, play and a healthy balanced diet have a positive impact on all aspects of a child/young person’s wellbeing. While the effects of poverty and isolation can have a negative effect on their wellbeing. 4. **It is up to all of us – families, early learning providers, health visitors, teachers, GPs, police (this is not an exhaustive list) – to work together to promote, support and safeguard the wellbeing of the child/young person.** A child/young person has different experiences and needs at different times in their lives. Understanding how this affects their wellbeing, and providing the right support when they need it, helps them grow and develop and reach their full potential. |
| **What do we mean when we consider a child/young person’s wellbeing?** It is important to consider the context of the child/young person’s life with their parent(s)/carer(s), wider family and community. A key element of GIRFEC is building on strengths and promoting resilience, and any assessment should therefore identify positive wellbeing as well as concerns. While it is expected that professional judgement will be used to decide whether there are any short or long term concerns, it is important that practitioners recognise that children can thrive in different environments. They must therefore be respectful of and responsive to the child/young person or parent(s)/carer(s) education, communication capacity, life experiences, socio- economic status, lifestyle and beliefs. This has relevance to all aspects of wellbeing. Each of the wellbeing SHANARRI indicators are linked to the articles with the United Nations Convention on the Rights of the Child (UNCRC).  Safe - protected from abuse, neglect or harm (UNCRC Articles 11, 19, 22, 32, 33, 34, 35, 36, 37, 38):  Every child has the right to be safe and protected, and to feel safe and protected from any avoidable situation or acts of commission or omission which might result in that child/young person:   * Being physically, sexually or emotionally harmed in any way; * Put at risk of physical, sexual or emotional harm, abuse or exploitation; * Having their basic needs (food, clothing, shelter, sanitation, education, healthcare) neglected or experiencing that their needs are met in ways that are not appropriate to their age and/or stage of development; * Being denied the sustained support and care necessary for them to thrive and develop; * Being denied access to appropriate health care and treatment, and social care support; * Being exposed to demands and expectations which are inappropriate to their age and stage of development; and * Being harmed by the behaviour of themselves or others.   Healthy - having the best possible standards of physical and mental health; support to make healthy, safe choices (UNCRC Articles 3, 6, 24, 39):   * Every child/young person has the right to a standard of health that supports them in fulfilling their developmental potential; * The health of children should be promoted, supported and safeguarded to maximise their health throughout their life course; and * A child/young person should have access to timely, acceptable and appropriate health care, and support of appropriate quality.   Achieving - accomplishing goals and thereby boosting skills, confidence and self-esteem; ‘being all they can be’ (UNCRC Articles 4, 18, 28, 29):   * Every child/young person has the right to fulfil his or her potential; * Improving achievement and attainment often go hand-in-hand, and both lead to improved life chances; Supporting all our children to accomplish goals and develop skills, ambition and know-how helps them to fulfil their potential and aspirations; and * Achievement also applies to a child/young person’s development as a social being with a fully-formed and autonomous personality. An achieving child/young person is more likely to feel they belong and be able to navigate their way through life with knowledge, understanding, and confidence in their ability to cope with new and different challenges.   Nurtured - having a loving and stimulating place to live and grow (UNCRC Articles 4, 5, 18, 20, 21, 25, 27):   * The right of every child/young person to thrive and develop into a safe, healthy, happy, well-adjusted child/young person – and, ultimately, a respected and responsible adult – is fundamental; * Having clear boundaries and support from adults whose actions are predictable and can be trusted; and * Having the opportunity to form a secure attachment with a care giver. There is clear overlap between being nurtured and being safe, healthy, achieving, respected, responsible and included.   Active - having opportunities to take part in a wide range of activities (UNCRC Articles 3, 23, 31):  Being active is not just about ‘doing’. It is also about a child/young person, within their capabilities:   * having access to and being encouraged to explore their home and community environment; * expressing themselves in different ways; * developing new skills; * learning how to assess and manage risks; and * acting co-operatively within groups.   Above all, activity and play are essential to the child/young person’s subjective sense of wellbeing; the positive feelings about the self that come from having fun.  Respected - being enabled to understand their world, being given a voice, being listened to, and being involved in the decisions that affect their wellbeing (UNCRC Articles 2, 3, 4, 5, 8, 12, 13, 14, 16, 17, 18, 30):   * The UNCRC highlights the importance of parent(s), carer(s), and practitioners in children’s services, recognising every child/young person’s right to be treated with respect and dignity at all times; regardless of the child/young person or their parent’s or legal guardian’s race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status; * Respect and being respected are multi-dimensional concepts. Every child/young person has the right to express their views on matters that directly affect them, in the manner most appropriate to them; and to have those views given due weight in accordance with their age and developmental level, by the adults who care for them, or come into contact with them in a professional or personal capacity. Communication or learning difficulties should not be a barrier to obtaining and having regard to the child/young person’s views; * Where decisions are being taken in respect of a child/young person in a legal forum or elsewhere, there should be a record of the child/young person’s views, which should be considered before any decision is taken, and where necessary, advocacy or other appropriate support should be provided to assist the child; * The child/young person who is treated with respect is more likely to be safer, emotionally, physically and spiritually healthier, happier, more nurtured, more likely to feel and be included, more likely to be active, and more likely to respect themselves and others, and behave in a considerate and responsible way.   Responsible - taking an active role within their home, school and community (UNCRC Articles 3, 12, 14, 15, 40):  Being responsible is about:   * accountability; * understanding the rules and parameters which guide how we live alongside each other; * leadership and decision making, with support as appropriate; * the capacity for moral judgement; * showing respect and compassion for others; * being honest with yourself and others; * taking an active role in your peer group; * resisting pressure to engage in inappropriate, dangerous or anti-social behaviour; * self-control; * being patient when your wishes are not instantly gratified; * not resorting to aggression or violence to get your own way; and * learning how to negotiate with others.   Included - being a full member of the communities in which they live and learn; receiving help and guidance to overcome inequalities (UNCRC Articles 3, 6, 18, 23, 26, 27):   * Every child/young person has the right to be included; * Inclusion is about the acceptance of all, and the recognition that each person, regardless of their differences, can make a valuable contribution to the community; and * Involves the removal of social, economic, cultural, religious, personal, communication and physical barriers that prevent the child/young person and their families from accessing services, exercising their rights and engaging with their community, and society at large.   **As a practitioner how do I assess wellbeing?**  Assessments of wellbeing will be required in a wide and varied range of circumstances. Local authorities, health and social care partnerships and other service providers and related services have local training, policies and procedures in place to support their employees in assessing wellbeing.  All practitioners should know how to identify a wellbeing need.  A wellbeing need may be identified by the child/young person or by anyone who knows or supports the child/young person and can be identified for many reasons, such as (but not limited to) the following:   1. a child/young person may be worried, anxious or upset about an event/set of circumstances, including socio-economic circumstances; 2. a parent(s)/carer(s) or family member may have noticed a change in the child/young person’s behaviour, demeanor or developmental progress; 3. a parent(s)/carer(s) or family member may have concerns about the impact on their child/young person of an event or set of circumstances; 4. a practitioner may have concerns for a child/young person’s health, or may have noticed a change in their behaviour, demeanour or development; and 5. a child may be offending, or putting themselves at risk of harm.   Any indication that a child/young person’s wellbeing is, or is at risk of being adversely affected, can constitute a wellbeing concern.  The wellbeing need will arise from observation or assessment which indicates that one or more aspects of wellbeing is, or is at risk of being, adversely affected or subject to an effect by factors related to the child/young person. Professional judgement based on experience and training and information about the child/young person and their circumstances, will be key to identifying wellbeing needs. In some cases a single observation or incident may be judged to represent a risk to wellbeing and be considered a need. In other cases the context of the observation or assessment and wider knowledge of the child/young person’s general wellbeing and circumstances, may either heighten or reduce the need. The nature of the need will be specific to the individual child/young person, their age, stage of development and circumstances, so what represents a wellbeing need for one child/young person, may not be judged a need for another child/young person. Consideration should be given to whether or not these wellbeing needs should be communicated to the child/young person’s named person.    [National guidance for child protection in Scotland 2021 - gov.scot (www.gov.scot)](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.gov.scot%2Fpublications%2Fnational-guidance-child-protection-scotland-2021%2F&data=05%7C01%7CMichelle.Kennedy2%40aapct.scot.nhs.uk%7C28a8cfb29f104c0e58c408db342d2709%7C10efe0bda0304bca809cb5e6745e499a%7C0%7C0%7C638161140752572026%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=78VgujYn4sGXWOTIpH62ld9zPKXSkaSHMzsrYlDIU%2Bo%3D&reserved=0)  ***Child protection services will continue to protect children and young people at risk of significant harm.***  **IF YOU HAVE A CHILD PROTECTION CONCERN FOLLOW YOUR CHILD PROTECTION PROCEDURES.**  Keeping children and young people safe and upholding their rights to protection is part of a continuum moving from early help and family support to more targeted interventions. Both the Getting it right for every child Guidance, and the National Child Protection Guidance (2021) are aligned.  There may be times more targeted child protection measures require to be utilised to respond to the unmet need identified. This should be seen, and experienced, as a ‘step up step down’ approach for families and with agencies. While there may be formal processes taken forward in a child protection context this should not be viewed as separate to those ways of communicating and planning core to Getting it right for every child. Once the immediate need is addressed, the Plan should reflect a step down once more.  This is part of a commitment to children, young people and families that ways of engaging are adaptable to need, rather than families requiring to adapt to process. **Sharing information at transition points**  Particular consideration should be given to information sharing at points of transition in a timely manner. Those who are on enhanced transition will need more time. Practitioners should discuss and agree with the child/young person and parents/carers, what information should be shared. Points of transition could include a change of school, GP Practice, moving into a new area or a change in practitioner supporting the child/young person or parent(s)/carer(s) or moving on from school.  Follow your local transition processes.  **GIRFEC National Practice Model**  The National Practice Model diagram summary below brings together the ‘My World’ Triangle, Resilience Matrix, eight wellbeing indicators (SHANARRI) (see glossary) and the four contexts for learning within Curriculum for Excellence, to support overall assessment. It is intended to provide a structure to support practitioners, working together with children, young people and families, to make effective use of assessment information. This information will likely have been gathered from multiple sources, including regular information gathering processes on the progress of a child/young person, with full participation from the child/young person.   * When assessment, planning and action are needed, the GIRFEC National Practice Model can be used in a single or multi-agency (see glossary) context; * It provides a framework to structure and analyse information consistently to take account of the strengths, challenges faced by a child/young person, alongside their needs, and to consider the scaffolding of support that may be required; and * It enables full participation of a child/young person and their families in gathering information to assess what support they may need, and to make joint decisions to plan and deliver that support.     The National Practice Model has four steps outlined below. The voice of the child/young person should be evident at all stages; their opinions and perspectives need to be taken into account in accordance with age (see glossary) and maturity of the child/young person (UNCRC, Article 12) in a developmentally appropriate way:   * The Wellbeing Indicators: Using the wellbeing indicators (SHANARRI) in the ‘Wellbeing Wheel’ to observe, discuss and record information which may indicate the scaffolding of support needed for a child/young person. * The ‘My World’ Triangle: Helps to understand a child/young person’s whole world. It can be used to explore their experience at every stage, recognising there are connections between the different parts of their world. In the assessment process, it can be used to explore strengths, needs and risks. * The Resilience Matrix: Used in more complex situations, the Resilience Matrix helps organise and analyse information when there is a perceived risk to a child/young person. * Planning, action and review using the ‘Wellbeing Wheel’: When the child/young person’s needs are clear, they can be summarised using the Wellbeing Wheel to develop an individual plan to provide support.   Wellbeing is considered and assessed across the aspects of children and young people being Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible and Included. These are the wellbeing indicators (SHANARRI) as referred to within section 96(2) in Part 18 of the Children and Young People (Scotland) Act 2014.  **1. Observing and recording using the Wellbeing Wheel**  Firstly ask the five questions and take any early action at this stage where possible:   1. **What is getting in the way of this child/young person’s** **wellbeing?** 2. **Do I have all the information I need to help this child/young person?** 3. **What can I do now to help this child/young person?** 4. **What can my agency do to help this child/young person?** 5. **What additional help, if any, may be needed from others?**   Now using the Wellbeing Indicators analyse the answers, record appropriate and relevant information that may indicate a need or concern and complete the wellbeing assessment, using the following, additional National Practice Model Tools. If a plan cannot be put in place at this point, continue the wellbeing assessment using the following National Practice Model Tools:  **2. The ‘My World’ Triangle**  **Undertaking an assessment using the ‘My World’ Triangle**    The main tool for assessing the current circumstances in a child/young person’s whole world is the ‘My World’ Triangle. The fundamental importance of supportive and trusted relationships can be explored using the ‘My World’ Triangle, which is especially relevant considering our ambition of all children and young people growing up loved, safe and respected. The ‘My World’ Triangle has been developed from a knowledge and research base in relation to children’s development and its use helps to support the realisation of children and young people’s rights.  **Using the ‘My World’ Triangle**  Practitioners should support children, young people and families to fully participate in discussions about what is happening in a child/young person’s world. Using the ‘My World’ Triangle allows practitioners, together with a child/young person and families, to consider:   * How the child/young person is growing and developing; * What the child/young person needs and has a right to from the people who look after them; and * The impact of the child/young person wider world of family, friends, community and society.   If practitioners are concerned about harm or significant harm related to a child/young person, refer to the Child Protection Guidance (2021). In all cases, information should be divided into strengths and challenges faced by a child/young person and family. Practitioners should consider all sides of the Triangle in relation to a child/young person, but it may not be necessary to gather detailed information on all sides of the ‘My World’ Triangle if this is not proportionate to the issues identified.  Many factors shape the child/young person’s development from before birth, throughout childhood, adolescence and beyond. These include a mixture of genetic and individual factors (nature) and the child/young person’s experiences (nurture) in their family environment, learning settings and communities. This includes impacts of poverty, inequality and discrimination. Secure attachments to adult caregivers are crucial for healthy childhood development, future relationships and emotional wellbeing into adulthood. Adverse or traumatic experiences can impact on the child/young person’s healthy development and wellbeing. A child/young person can be more vulnerable to the impacts of adversity and trauma (compared to adults) because their brains are still developing.  Studies of adverse childhood experiences (ACEs) show that early, effective support is important to support resilience and mitigate the impact of adversity and trauma. Brain adaptability in childhood means children and young people are particularly responsive to healing interventions at this life stage.  The ‘My World’ Triangle examines key aspects of the child/young person’s wellbeing across the three sides of the Triangle. These enable practitioners, together with the child/young person, to think about what is happening in a child/young person’s whole world. Using the information to assess a child/young person’s needs. Practitioners routinely gather some of the information across the sides of the ‘My World’ Triangle through their work with a child/young person and families. The information gathered, alongside any assessments undertaken, should determine the need for and right to additional support. It is important to consider that what is happening on one side of the ‘My World’ Triangle may have a significant impact on another side. There may be overlap between the different sides of the ‘My World’ Triangle. Use of The ‘My World’ Triangle should be proportionate to the need identified.  Some critical questions for practitioners to consider during the assessment:   * What are the views of the child/young person and their family? * What are the strengths, talents and needs of this child/young person? * Which aspects of family relationships promote the child/young person’s development and wellbeing? * How can the parent-child/young person relationship be strengthened? * What other factors are influencing the child/young person’s wellbeing and development? * What would help the parents to support the child/young person to reach their full potential?   A child/young person’s age and stage of development should have a bearing on the assessment of their needs and the planning and actions taken to support them.  Practitioners should take account of factors that may enhance a family’s support, such as the availability of good relationships with extended family, friends or community, and factors promoting personal resilience.  When adult services are working with an individual, they should consider how their help can positively impact upon children and young people.  To supplement an assessment of the child/young person’s needs or to explore specific areas of the ‘My World’ Triangle in more depth, practitioners may wish to make use of specialist reports from other professionals, including the third sector. These specialist reports may be made available through the family, or the practitioner may need to discuss with the child/young person and their family the benefits of securing these from specialists. **Analysing Information using The Resilience Matrix** The Resilience Matrix allows the practitioner, child/young person and their family to take the strengths and challenges identified from gathering information using the ‘My World’ Triangle, along with any specialist assessments, and to group that information within the four headings of resilience, vulnerability, adversity and the protective environment.  The concept of resilience is fundamental to a child and young person’s wellbeing and is used in assessments by practitioners from many agencies. Resilience in this context is understood as the process of a child/young person adapting well in the face of adversity, stress and trauma. A focus on resilience is not to suggest that adversity can be overcome by individual effort or that a child/young person should be able to be resilient in the face of severe abuse and neglect, or multiple adversities; it is rather to recognise children and young people’s achievements despite such experiences.    Evidence shows that a resilience approach should look beyond individual coping characteristics and should focus on changing environmental hazards and stressors, as well as enhancing individual, family and services responses and support. Research has identified a range of protective factors which support resilience, which include: support from a trusted adult, education, safe schools and neighbourhoods, financial security, participation in sports and community activities, and supportive social networks and communities.    Assessing resilience and vulnerability: Practitioners generally find that the individual characteristics that enable a child/young person to grow up to be resilient (e.g. self-worth, problem-solving skills, self-esteem), are so intertwined with their experiences of parents, families (e.g. attachments, harmony, consistency) and wider environments (e.g. schools, neighbourhoods and friendships) that it is difficult to disentangle these.  Assessing adversity and protective factors/environment: It is emphasised that a resilience approach should look beyond individual coping characteristics and should focus on changing environmental hazards and stressors, as well as enhancing individual and family responses to adversities.  Used in more complex situations to help practitioners organise and analyse information when required. Here is the [*guidance*](http://girfec-ayrshire.co.uk/wp-content/uploads/2018/03/National-Risk-Framework.pdf) on how to use the matrix. More information can be found within the National Risk Assessment Framework.  **Planning, action and review using the Wellbeing Wheel**  Once the child/young person’s needs are clear, they can be summarised using the Wellbeing Wheel to develop a child/young person’s plan (‘My Plan’).  Wellbeing indicators can be used to identify priorities, describe what needs to change to improve the child/young person’s wellbeing and identify the expected outcomes.  **Planning, taking action and reviewing:**  In the GIRFEC approach, any child/young person who requires additional support should have a plan (‘My Plan’) to address their needs and improve their wellbeing. This could be a single-agency plan or a multi-agency plan co-ordinated by a lead professional. GIRFEC promotes an integrated and co-ordinated approach to multi-agency planning. It looks to practitioners to work in accordance with legislation and guidance but also expects agencies to think beyond their immediate remit, drawing on the skills and knowledge of others as necessary and thinking in a broad, holistic way. For example, a care plan for a child/young person looked after by the local authority, a health care plan, or an individualised education plan should be incorporated within the plan (‘My Plan’) where the child/young person’s circumstances require this. Every plan (‘My Plan’), whether it is single or multi-agency, should include and record:   * the views of the child/young person and their family; * reasons for the child/young person’s plan (‘My Plan’); * partners to the child/young person’s plan (‘My Plan’); * a summary of the child/young person’s needs; * what is to be done to improve a child/young person’s wellbeing; * details of action to be taken; * resources to be provided; * timescales for action and for change; * contingency plans; * arrangements for reviewing the child/young person’s plan (‘My Plan’); * lead professional arrangements where they are appropriate; and * details of any compulsory measures if required.   Using the Information Sharing Flowchart and Guidance in chapter 5, consider whether the sharing of information could support, promote or safeguard the wellbeing of the child/young person and could provide additional help, if needed, from others.  Discuss this with the child/young person and decide whether a Request For Assistance should be made to a service or agency, or convene a Team with the Family meeting to consider how the child/young person’s wellbeing needs could be best met. |
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#### Chapter 5

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| **SHARING INFORMATION to support children and young people’s wellbeing** |

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| **This guidance is to assist all practitioners who work with children, young people and their families in Ayrshire.**  All partners have different functions and responsibilities but need to share information between and among ourselves at different times and for different purposes.  We can do this electronically, verbally or in writing.  All practitioners have a role to play in promoting, supporting and safeguarding the wellbeing of children through their professional expertise and day to day work, individually and in partnership with other practitioners.  When any practitioner has a concern about a child/young person’s wellbeing or has identified a wellbeing need, consideration needs to be given to whether or not these wellbeing needs should be communicated to the child/young person’s named person. You should consider the **five** key questions, on page 7.  As a practitioner you may also require to share information about a child/young person for the following reasons:   * Safeguarding the child/young person’s wellbeing; * Provision of information to help develop the wellbeing assessment; * Requesting assistance from services; * Requesting a specific assessment; * To inform the child/young person’s plan (‘My Plan’); * Changing how a service is provided as part of a child/young person’s plan (‘My Plan’), particularly at transition points; and * Transfer of a child/young person to a different named person/lead professional or change to a member of Team with the Family.   Sharing relevant information at the right time is an essential part of promoting, supporting and safeguarding the wellbeing of the child/young person, including protecting them from neglect or physical, mental or emotional harm.  Information sharing should always be guided by the best interests of the child/young person. This chapter provides guidance on sharing information relating to wellbeing concerns.  IF YOU HAVE A CHILD PROTECTION CONCERN FOLLOW YOUR CHILD PROTECTION PROCEDURES  [National guidance for child protection in Scotland 2021 - gov.scot (www.gov.scot)](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.gov.scot%2Fpublications%2Fnational-guidance-child-protection-scotland-2021%2F&data=05%7C01%7CMichelle.Kennedy2%40aapct.scot.nhs.uk%7C28a8cfb29f104c0e58c408db342d2709%7C10efe0bda0304bca809cb5e6745e499a%7C0%7C0%7C638161140752572026%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=78VgujYn4sGXWOTIpH62ld9zPKXSkaSHMzsrYlDIU%2Bo%3D&reserved=0)  **Legislative Framework**  **The Promise, the report of the Independent Care Review**  [The Plan 21-24](https://thepromise.scot/plan-21-24-pdf-spread.pdf) is the first of three Plans providing Scotland with a clear outline of the priorities and actions required to Keep the Promise by 2030. Within this first set of priorities to be implemented by 2024, Scotland must be committed to ensure that:  **“Organisations with responsibilities towards children and families will be confident about when, where, why and how to share information with partners. Information sharing will not be a barrier to supporting children, young people and their families.”**  Ensuring compliance with the legislation and principles below will allow practitioners to confidently share relevant information fairly and transparently, to support children, young people and their families in a manner which respects the rights of the individuals involved.  **Human Rights Act 1998**  Article 8 of the Act states “there shall be no interference by a public authority with the exercise of this right except as is in accordance with the law and is necessary in a democratic society in the interests of:   * national security; * public safety; * the economic wellbeing of the country; * for the prevention of disorder or crime; * for the protection of health or morals; or * for the protection of the rights and freedoms of others.   Article 8 gives everyone the right to respect for their private and family life, their home and their correspondence. Sharing personal information is likely to interfere with that right. For that interference to be lawful, the information must be shared in a way that is proportionate to the achievement of a legitimate aim.  There is a two-part test (below) that needs to be met to ensure that a child/young person and their family member’s human rights are respected and that any interference is justified as lawful and proportionate. Provided the information sharing is compliant with data protection legislation and you assess the information sharing in the particular circumstances to be in the best interests of the child/young person and to promote, support or safeguard their wellbeing, the conditions of the first part of the test will be met.  In addition, the impact on the child/young person’s right to privacy must not be disproportionate to the aim of sharing. If there is an alternative option, which is less intrusive but still achieves the aim, then the interference with an individual’s private and family life will be disproportionate.  You must share the minimum confidential or sensitive information necessary with the minimum services or individuals necessary in the interests of the child/young person.  **Part 1 of the test: Is the interference “in accordance with the law”?**  In order for the interference to be in accordance with the law, you must consider the following:   * In your opinion, could sharing the information for example, protect the physical, mental or emotional wellbeing of the child/young person? * Can you share this information in a way that complies with data protection legislation (further information below)? * Have you complied with all other relevant laws such as the law of confidentiality (further information below)?   **Part 2 of the test: Is the interference “necessary in a democratic society”?**  You must consider if the interference is necessary to achieve one of the legitimate aims set out in Article 8. One clear example of a legitimate aim is where data is shared for the purposes of safeguarding a child/young person.  You also need to consider whether it is proportionate to share the information. This means you have to weigh up the importance of ensuring the child or parent’s rights are respected against the importance of achieving the “legitimate aim” (for example, for safeguarding purposes). The impact on the person’s ECHR rights must not be out of proportion to the benefit you are sharing information to achieve. If there is another option, which has less of an impact on their right to privacy but still achieves the aim, then you should take that option. You should only share the information that is relevant to achieving the legitimate aim.  If you believe that a child/young person needs to be protected from neglect or physical, mental or emotional harm you should have a basis for justifying a breach of the child/young person’s Article 8 European Convention on Human Rights (ECHR) rights.  You should record your actions and the reasons for them.  **United Nations Convention on the Rights of the Child**  Article 16 of the UNCRC makes it clear that a child/young person has the right to privacy, just like adults. The rights found at Article 16 are similar to those found at Article 8 of the Human Rights Act 1998. Provided that you comply with the Article 8 test set out above, you will comply with Article 16 of the UNCRC.  Data Protection Legislation  The UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018 provide a framework to ensure that personal information is ‘processed’ or shared appropriately. Data protection legislation enables fair and proportionate data sharing. It does not prevent or limit information sharing that is necessary and proportionate for the purpose of protecting children and young people from neglect or physical, mental or emotional harm.  Data Protection Legislation regulates the use of personal data and sets out six principles to ensure that personal data is:   1. processed lawfully, fairly and in transparent manner; 2. collected for specified, explicit and legitimate purposes; 3. adequate, relevant and limited to what is necessary; 4. accurate and, where necessary, kept up to date; 5. kept in a form which permits identification of the data subjects for no longer than is necessary for the purposes for which those data are processed; and 6. processed in a manner that ensures appropriate security of the personal data.   **Key considerations for compliance with data protection legislation are as follows:**  **Information sharing must be fair and transparent**  In general, fairness means that you should only handle personal data in ways that people would reasonably expect and not use it in ways that have unjustified adverse effects on them. You need to stop and think not just about how you can use personal data, but also about whether you should.  Transparency is fundamentally linked to fairness. Transparent processing is about being clear, open and honest with people from the start about who you are, and how and why you use their personal data.  If you as a practitioner have a concern about a child/young person’s wellbeing or have identified a wellbeing need that you think needs to be communicated to the child/young person’s named person, you need to discuss this with the child/young person and where appropriate their family.  The reason why information needs to be shared should be communicated openly and honestly with the child/young person, and where appropriate their families.  You should ensure that the child/young person and their family understands:   * The purpose for which information is to be shared and the anticipated improvement to wellbeing outcome; * What information is to be shared; and * With whom it is to be shared.   **You must have a lawful basis**  **Wellbeing Concerns**  For **wellbeing** concerns, the lawful basis under data protection legislation is likely to be consent or explicit consent (see Appendix 1)  **Consent**  Data protection legislation sets a high standard for relying on consent as a lawful basis, including that the person must have been able to disagree without being concerned about the consequences (i.e. there must be no imbalance of power). The Information Commissioners Office guidance states that public authorities and other organisations in a position of power over individuals should not rely on consent unless they are confident they can demonstrate it is freely given.  It is essential that consent is “specific and informed” and “freely given” in order for consent to be relied on as the lawful basis. Although there is no lower age limit on the right of the child/young person to express their views, data protection legislation provides that in Scotland, children aged 12 or over are presumed to be mature enough to have legal capacity to provide their own consent or exercise the rights conferred by data protection legislation. A determination of their capacity would be required to assert this is not the case.  Advocacy, translation or communication support may be helpful, or in some cases essential, to ensuring the child/young person and their families fully understand and are able to provide informed and freely give consent.  When consent is used as a lawful basis, the consent must be recorded and the record kept for as long as the information is stored, used or shared based on the consent. If consent is withdrawn, this does not affect the lawfulness of any information sharing that has taken place up to the point of the withdrawal of consent. It simply means that no further information sharing that is based on consent can take place from the time at which the consent is withdrawn.  A good example of where consent would be appropriate is where a school offers to refer parents to a local authority parenting support programme. The parents’ participation in the programme is entirely optional. The school should advise the parents that they can contact the parenting support programme themselves; or the school could offer to make the referral. If the school makes the referral it would require to pass on the parents’ contact details. Before doing so the school should seek the parents’ explicit consent.  In other words, any optional sharing of information would fall under ‘consent’ for the lawful basis. In situations where you are obliged to share information, even without consent, consent should not be sought but the reasons for sharing, and with whom, should be carefully explained to the individuals involved (where appropriate to do so).  **Routine Service Provisions**  For **routine service provisions**, the lawful basis is likely to be public task/substantial public interest (see Appendix 1).  **Public Task/Interest**  In situations where information sharing is necessary to deliver a service, child/young person and families should be informed before they agree to engage with the service, what information needs to be shared, with whom, and for what purpose.  In many cases, it will be clear whether processing is necessary or not. For example, if you are concerned about protecting the wellbeing of a child/young person. However, for the processing to be necessary, you must make sure that any information you share is:   * targeted so that you are not sharing more information than necessary; and, * proportionate to the aim.   **You should take into account:**   * the sensitivity of the information, * the purpose of sharing, and * whether there is a way to achieve the aim that interferes less with the person or people’s privacy.   It may be that you have to share information about a parent or sibling (not just the child/young person) in order to achieve support for a child/young person. When sharing personal information, you must consider and respect each individual’s rights, and identify a lawful basis for each person.  You should record your actions, the reasons for them, and any views expressed.  **Special Category Data**  The sharing of criminal offence data or other ‘special category data’ (data revealing racial or ethnic origin, political opinions, religious or philosophical beliefs, trade union membership, biometric data, health or data concerning a natural person’s sex life or sexual orientation) requires an additional lawful basis under Article 9. For wellbeing needs, this is likely to be ‘explicit consent’ (slightly higher criteria than consent) or ‘substantial public interest’ (again, higher criteria than public interest).  **Recording decisions**  Children and young people have a right to express their views and have them taken into account particularly when decisions are made about what should happen to them.  If the child/young person and their family are agreeable to the information being shared then proceed with the information sharing. Record the views of the child/young person and their family, what information you have shared; who with, when and why, including the anticipated improvement to wellbeing.  If the child/young person or their family are not agreeable to the information being shared then do not proceed with the information sharing. Record the views of the child/young person or their family and the reasons for not sharing the information. You must fully explain to the child/young person and/or their family, the consequences of not sharing the information.  In all but exceptional cases, sharing information on wellbeing concerns will be with the agreement of the child/young person and their family. To share information relating to wellbeing concerns without the agreement of the child/young person and their family you would be required to justify your decision and have a lawful basis under Data Protection Legislation. Advice should be sought from your Line Manager, Child Protection Health Team or your organisation’s Data Protection Officer.  **Sharing for Specific Purposes**  The information sharing must be necessary for the specific purpose. Information should only be shared if there is no other reasonable way to achieve that purpose that interferes less with people’s privacy. You must exercise professional judgement and adopt a common sense approach to sharing. When sharing, information should be shared only with those individuals who need to have it, and only share the information that is required. You should ensure that the information is accurate and up to date and shared in a timely fashion.  How to share information  Information can be shared verbally by telephone, face to face and at Team with the Family discussions, as well as electronically or in writing. Locally the AYRshare system is used to share information on a child/young person.  You must process and share personal data securely and with appropriate organisational and technical measures in place. Information should be kept safe and secure at all times, ensuring no unauthorised access. Always identify the person who you are communicating with before sharing and do not give verbal information where you can be overheard.  Practitioners should always adhere to the Information Sharing Flowchart:  [GIRFEC - Ayrshire Information Sharing Flow Chart (girfec-ayrshire.co.uk)](https://www.east-ayrshire.gov.uk/Resources/PDF/G/GIRFEC-Ayrshire-Information-Sharing-Flow-Chart.pdf)  Any further information required on sharing personal data can be sought from your organisation’s Information Governance team.  Confidentiality  All Practitioners working within the public, private and third/voluntary sector in Scotland are subject to professional codes of practice and frameworks and a Common Law and Statutory Obligation of Confidence. Practitioners must abide by these.  The general position is that if information is given in circumstances where it is expected that a duty of confidence applies, that information cannot normally be disclosed without the information provider's consent.  It is generally accepted that the common law allows disclosure of confidential information if:   * 1. The information provider has consented;   2. It is required by law, or in response to a court order; and   3. It is justified in the public interest.   Please see the table in Appendix 2, which outlines the relevant lawful basis under Data Protection Legislation and condition met to satisfy Common Law Duty of Confidentiality that are being relied upon for the sharing of information for, the purposes of:   * Child Protection concerns; * Wellbeing needs; and * Routine service provision. |

Chapter 6

**CHILDREN’S PLANNING**

**Providing a consistent approach to planning, delivery and coordinated support.**

A wide range of children and young people may present with a wellbeing need at some point and these can most often be met with support from their family, community resources or the support generally available within universal services provided by NHS Ayrshire & Arran, Health and Social Care Partnership and/or Local Authority. This is assessed and recorded using children and young person’s planning.



GIRFEC policy ensures a single planning framework

– the child/young person’s plan (‘My Plan’) – will be available for children and young people who require extra support that is not generally available to address a child/young person’s needs and improve their wellbeing.

The child/young person’s plan (‘My Plan’) is part of GIRFEC to promote, support and safeguard the wellbeing of children and young people.

See the [*Ayrshire Child and Young Person’s Pathway*.](http://girfec-ayrshire.co.uk/wp-content/uploads/2023/08/Wall-planner-updated-Aug23.pdf)

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| **What is a child/young person’s plan - known as (‘My Plan’)?** P  A child/young person’s plan (‘My Plan’) supports the child/young person and their family by detailing what support is required to improve wellbeing outcomes. The plan is considered and developed in partnership with the child/young person and their parent(s)/carer(s) and the Team with the Family.  Not every child/young person will require a child/young person’s plan (‘My Plan’). It supports and streamlines planning for a child/young person who need it and any child/young person who requires additional support. Here is a link to the [*Additional Support Needs (ASN)*](https://www.gov.scot/publications/supporting-childrens-learning-statutory-guidance-education-additional-support-learning-scotland/)list.  It brings together current planning processes used for children and young people, including those with additional support needs or child protection arrangements, to ensure plans are coordinated and tailored to meet the specific needs and circumstances of individual child/young person. **Key facts about the child/young person’s plan (‘My Plan’)**  1. **The child/young person’s plan (‘My Plan’) will offer a consistent approach to how support is planned, delivered and coordinated.** It will help services to coordinate additional help offered to a child/young person, tailored to meet their specific needs and circumstances. 2. **Not every child/young person will require a plan (‘My Plan’).** A child/young person’s plan will be available for any child/young person who requires one to address their needs and improve their wellbeing. 3. **A plan (‘My Plan’) is developed in partnership with the child/young person and their parent(s)/carer(s) and the services involved.** It will be coordinated by a lead professional who will ensure that the plan is managed, coordinated and reviewed to meet the needs identified. 4. **The plan (‘My Plan’) will contain information about why it has been created, what it is aiming to achieve, and the actions to be taken to improve the child/young person’s wellbeing.**  |  | | --- | | ***Relationships and communication are key to everything.*** |   **When is a child/young person’s plan (‘My Plan’) required?**  If a wellbeing assessment has been carried out and a plan (‘My Plan’) is required to measure improved outcomes for the child/young person and a child/young person’s plan (‘My Plan’) is developed. Currently only Looked After Plans and Co-ordinated Support Plans are statutory. All other child/young person’s plans are non-statutory.  **What is in a child/young person’s plan (‘My plan’)?**  ‘My Plan’ should include and record:   * information about the child/young person’s wellbeing needs including the views of the child/young person and their parent(s)/carer(s); * the outcome that the plan aims to achieve; * details of the action to be taken; * the service(s) that will provide the support; * the way in which the support is to be provided; * when the plan should be reviewed; and * when the outcome is achieved.   All children and young people and their parent(s)/carer(s), where appropriate, should have actions within their plans to work towards improving their wellbeing.  ‘My Plan’ will also record who will coordinate the support. The named person or the lead professional for the plan will work with the child/young person and their parent(s)/carer(s) to keep them informed.  Refer to [*Good Practice Outcomes Guide*](http://girfec-ayrshire.co.uk/wp-content/uploads/2018/09/Good-Practice-Outcomes-Guide-September-2018-2.0.pdf)re smart planning. **When should a child/young person’s plan (‘My Plan’) be reviewed?** Reviewing a child/young person’s progress should be an essential part of a child/young person’s plan. Revisit the five key GIRFEC questions (see page 7) in considering a child/young person’s wellbeing needs. Ensuring the full use of the National Practice Model leads to the action required to improve wellbeing for the child/young person and their family. The child/young person and parent(s)/carer(s) should be fully involved in this.  **Team with the Family**  Team with the Family is a proportionate approach to meet the needs of the child/young person and is facilitated by the named person and lead professional (if there is one) from early intervention stages up to Child Protection planning meetings.  The child/young person’s plan (‘My Plan’) is reviewed within the Team with the Family meeting. Meetings happen at regular stages on the continuum of a child’s development, in line with our Ayrshire child/young person’s pathway, to coordinate support based on the identified wellbeing needs of the child/young person.  Children and young people are supported to participate. This may be directly in the meeting or in other ways agreed with the child/young person. This includes being consulted in preparation as to where and how the meeting will be structured with their priorities understood, the space for the meeting, who they feel safe with and how they wish to be involved in whole, in part or at a distance. There is more detailed guidance for [*Chairs of the Meeting*](http://girfec-ayrshire.co.uk/wp-content/uploads/2023/08/Chairing-Team-with-Family-Meeting-guidance-updated-Aug23.docx).  In planning for the meeting, the named person(s) should consider everyone involved in the family. This has particular relevance in relation to other children and young people in their family network including brothers and sisters.  This will help inform whether the focus of the meeting is to consider an individual child/family or a family group.  This helps keep in clear sight the needs, unmet needs and/or impact which may be different depending on stages of child/young person’s development or wellbeing needs.  The Action Plan part of the child/young person’s plan (‘My Plan’) should be updated as part of the meeting and the child/young person and their family should leave with a copy of this.  The plan should involve the child/young person and their family and they should have appropriate actions within it. Their views on the Action Plan should be clear.  **Request For Assistance**  When asking a service provider or relevant authority for help by acting to support, promote or safeguard the wellbeing of a child/young person, a named person or lead professional, in conjunction with the Team with the Family, will be specific in identifying the wellbeing need to be addressed and the desired outcome required.  The assistance a service provider or relevant authority may provide could include:   * undertaking an assessment; * providing a service; * change in provision of service; * provision of information; * provision of a resource; * change in provision of a resource; * transition to nursery; and * transition to school.   It is good practice for a discussion to take place with the service provider to agree the most appropriate action. Once agreed, the service guidance should be used to complete the Request For Assistance form.  When considering a Request For Assistance from, a named person or lead professional, a service provider or relevant authority should consider the potential affect or effect on the wellbeing of the child/young person. They must do this taking into consideration all wellbeing indicators. This may be of particular significance when prioritising the provision of a service or resource, for example;   * request to provide a service urgently when a waiting list exists; or * request to provide an extraordinary resource.   The service provider requires to complete the Request For Assistance form, detailing the support to be provided to the child/young person and their family.  If, for whatever reason, the service cannot be provided, the service provider must provide clear reasoning via the Request For Assistance *‘feedback’* form.  An agreed Request For Assistance form is in place across Ayrshire and there are a number of guides on how to respond to a Request For Assistance. These are available on the Ayrshire GIRFEC website.  To access the Request For Assistance documents, including the Request For Assistance form, Request For Assistance guidance and Request For Assistance service guidance, please go to the “My Account” section on the Ayrshire GIRFEC website here -  [http://www.girfec-ayrshire.co.uk.You](http://www.girfec-ayrshire.co.uk.You/) should have been issued with a user name and password. Scroll down the page to ‘practitioners’ and click on ‘find out more’. **Chronology of Significant Events** A Chronology informs the child/young person’s plan (‘My Plan’). It should be completed on single agency systems and when appropriate for the Team with the Family, the significant event should be entered in the Integrated Chronology in the child/young person’s AYRshare record.  The significant event must be succinct, factual and evidence based and the action or outcome must show the impact on the child/young person.  The integrated chronology as a tool should be considered in every Team with the Family meeting to concentrate on current significant events and how they are impacting on the child/young person and their family.  The National Chronology Guidance, Care Inspectorate Guidance and Check List can be found here – <http://girfec-ayrshire.co.uk/practitioners/document-downloads/>  **AYRshare**  AYRshare is the system used to share information on children, young people and their families with all members of the Team with the Family. The system is used to share the child/young person’s plan (‘My Plan’) and also to compile an integrated chronology of significant events. Significant events from all agencies are included in the chronology and this is used as a tool to safeguard a child/young person. Other appropriate documents can be included in the child/young person’s folder including Request For Assistance forms, Co-ordinated Support Plans, Individualised Learning Plans etc. All practitioners working with a child/young person should have an AYRshare account and contribute when a child/young person has a plan (‘My Plan’).  There are Quality Assurance Standards for AYRshare. You will find the Quality Assurance Standards, Quick Guide and full AYRshare User Guide [here](http://girfec-ayrshire.co.uk/wp-content/uploads/2017/12/AYRshare_User_Guide_V5.docx) and also within the help section of [AYRshare](http://girfec-ayrshire.co.uk/ayrshare/). The use of AYRshare is not optional. |

Chapter 7

FURTHER

INFORMATION

**Additional Resources**

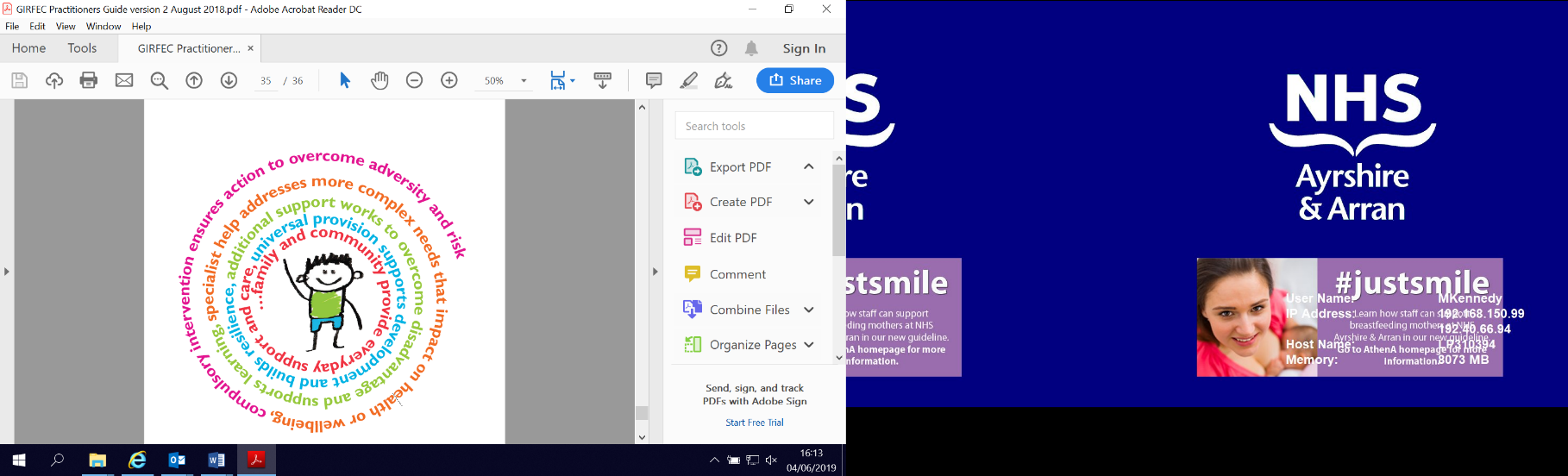
1. [*Ayrshire GIRFEC website*](http://www.girfec-ayrshire.co.uk/practitioners/document-downloads/)
2. [*Scottish Government GIRFEC website*](https://www.webarchive.org.uk/wayback/archive/20180514160952/http:/www.gov.scot/gettingitright)
3. [*United Nations (1989)* ***United Nations Convention of the Rights of the Child (UNCRC****), Geneva, United Nations*](http://www.scotland.gov.uk/Topics/People/Young-People/Childrens-Rights)
4. [*Resilience animation*](https://www.youtube.com/watch?v=XHgLYI9KZ-A)
5. [*Ian Wright video*](https://www.youtube.com/watch?v=omPdemwaNzQ)
6. [*The Promise*](https://thepromise.scot/)
7. [National guidance for child protection in Scotland 2021 - gov.scot (www.gov.scot)](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.gov.scot%2Fpublications%2Fnational-guidance-child-protection-scotland-2021%2F&data=05%7C01%7CMichelle.Kennedy2%40aapct.scot.nhs.uk%7C28a8cfb29f104c0e58c408db342d2709%7C10efe0bda0304bca809cb5e6745e499a%7C0%7C0%7C638161140752572026%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=78VgujYn4sGXWOTIpH62ld9zPKXSkaSHMzsrYlDIU%2Bo%3D&reserved=0)
8. [National Risk Framework](https://www.gov.scot/publications/national-risk-framework-support-assessment-children-young-people/)

**Appendix 1**

**GLOSSARY**

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| **Advocacy**  Advocacy can mean different things in different contexts. In this context, advocacy is empowering children and young people to make sure that their rights are respected and that their views and wishes are fully considered and reflected in decision making about their own lives.  **Advocate/Advocacy Worker**  Someone who provides advocacy. In many situations, this person should be a trained, professional advocacy worker.  **Agency/agencies**  In this suite of documents the term ‘agency/agencies’ means an organisation or business providing a particular service.  **Age of a child**  GIRFEC and the UNCRC (which Scottish Government intends to incorporate into Scots law to the maximum extent possible) applies to everyone under 18. Before birth, midwives and maternity professionals can apply the values and principles of GIRFEC and support to the parents in considering their wellbeing, and that of the unborn baby. During a Children and Young Person’s life, GIRFEC then continues to apply to all children and young people up to the age of 18, or older if still at school, including young people who have left school but are not yet 18. Where young adults have specific needs, other legislation ensures ongoing support for them beyond 18 years of age, including Section 29 of the Education (Additional Support for Learning) (Scotland) Act 2004, where the definition of a young person refers to those having attained the age of 16 and are still at school. The Children and Young People (Scotland) Act 2014, extends continuing care for eligible young adults up to the age of 21 and after care for young adults who have care experience, up to the age of 26. These Acts ensure ongoing support for these young adults beyond the ages defined above in the GIRFEC framework.  **Assessment of Wellbeing**  An assessment of wellbeing is carried out using the National Practice Model and refers to an assessment of an individual child/young person to determine whether ‘their wellbeing is being, or would be, promoted, safeguarded, supported, affected or subject to an effect’. In terms of this guidance these terms have the following meanings and form the basis of an assessment:   1. promoted – actively encouraged or further developed; 2. safeguarded – protected from harm or damage; 3. supported – given assistance, approval, encouragement; 4. affected – influenced, changed; and 5. subject to an effect – likely to be affected by a set of circumstances.   **Child/young person**  An individual who has not yet attained the age of 18 years.  **Child protection**  The processes involved in consideration, assessment and planning of required action, together with the actions themselves, where there are concerns that a child/young person may be at risk of harm from abuse, neglect or exploitation.  **Children’s human rights and UNCRC**  Human rights are the basic rights and freedoms which we all have in order to live with dignity, equality and fairness, and to develop and reach our potential. Human rights are a list of things that all people – including a child/young person – need in order to live a safe, healthy and happy life.  The European Convention on Human Rights (ECHR) has been incorporated into UK domestic law through the Human Rights Act 1998 (HRA). Everyone, including a child/young person, has these rights, no matter what their circumstances. Under international law, States/Governments are obliged to respect, protect and fulfil human rights. Those delivering public services should respect human rights when they make decisions, plan services and make policies.  Children and Young People’s human rights span the entire spectrum of civil, political, economic, social, cultural and environmental rights. A child/young person also has additional rights that recognise that childhood is a special, protected time, in which a child/young person must be allowed to grow, learn, play, develop and flourish with dignity. Specific human rights for children are set out in the UN Convention on the Rights of the Child (UNCRC). The UNCRC offers a vision of the child/young person as an individual and as a member of a family and community. By recognising children’s rights in this way, the Convention firmly sets the focus on the child/young person as a whole and multi-faceted person. It is important to be clear that all rights are equal, there is no hierarchy of human rights.  We know that children and young people face unique barriers to realising their rights. Their future often depends on the action taken by adults to implement their rights in practice. As children their voices can be unheard, or more easily dismissed. For that reason, the UNCRC recognises that children and young people are human beings with fundamental rights that are written into international law. It also makes clear that special action needs to be taken to ensure those rights are respected, protected and fulfilled. As one of the core United Nations (UN) human rights treaties, the UNCRC helps to safeguard the dignity and the equal and inalienable rights of all children and young people. It does this by making sure that important rights set out in other international human rights treaties are applied in a way that is relevant and appropriate to the needs of all children and young people.  **Child/Young Person’s Plan (known as ‘My Plan’)**  A personalised plan, ‘My Plan’, is developed when those working with the child/young person and family identify that a child/young person needs extra support planned, delivered and co-ordinated. The plan should reflect the child/young person’s voice and explain what should be improved for the child/young person, the actions to be taken and why the plan has been created. “My” can be replaced with the child/young person’s name.  **Chronology of Significant Events**  A chronology of significant events is a timeline of child/young person and their family circumstances. It provides a record of significant events in the order that they happened.  **Consent**  In the context of information management, a person’s freely given, informed, clear and specific agreement to their personal information being processed. ‘Freely given’ and ‘informed’ are explained at section 10.3 of [Practice Guidance 4 – Information Sharing](https://www.gov.scot/publications/getting-right-child-girfec-practice-guidance-1-using-national-practice-model/).  **Criminal offence data**  This is personal information about criminal convictions and offences or related security measures. UK GDPR gives extra protection to criminal offence data. This includes information about offenders or suspected offenders in the context of criminal activity, allegations, investigations and proceedings. It also includes information about unproven allegations and information relating to the absence of convictions, and covers a wide range of related security measures, including personal information about penalties, conditions or restrictions placed on an individual as part of the criminal justice process, or civil measures which may lead to a criminal penalty if not adhered to. The Information Commissioner’s Office (ICO) provide more detail at Criminal offence data.  **Data/information**  Data means raw facts and figures, and information is data that has been managed, put into a context, often in order to make sense of it. In the interests of avoiding overly complicated technical details, within this guidance, references to information or data should be taken to mean both, and refer to information about living individuals.  **Ecological Model**  This is a model that is based on the idea that a child/young person’s development is influenced by the relationships they have with their parents, then by school and community environment, then by wider society and culture. These layers of relationships and environments influence and interact with each another as well as the child/young person’s development and resilience. This theory was originally developed by Urie Bronfenbrenner and Stephen J. Ceci in 1994.  **Family/families**  Not all family units look the same. In this suite of documents the term ‘families/family’ can mean adoptive, biological, foster, kinship, extended, composite and others, for example settings and homes that have felt like family. A child/young person may belong to more than one family.  **Getting it right for every child**  This is Scotland’s national approach to promoting, supporting, and safeguarding the wellbeing of all children and young people. It provides a consistent framework, shared language and common understanding of wellbeing. GIRFEC puts the child/young person at the heart and helps a child/young person get the right support from the right people at the right time.  **Information/data**  Data means raw facts and figures, and information is data that has been managed, put into a context, often in order to make sense of it. In the interests of avoiding overly complicated technical details, within this guidance, references to information or data should be taken to mean both, and refer to information about living individuals.  **lead professional**  When a child/young person and their families require the help and support of a child and young person’s plan, a lead professional will be needed. The lead professional is an agreed, identified person within the network of practitioners who is working alongside the child/young person and family. In most cases, the professional who has the greatest responsibility in coordinating and reviewing the child/young person’s plan (‘My Plan) will undertake this role.  **Lawful basis**  A reason or justification for sharing information that is recognised by data protection law.  **Lawful bases**  The plural of lawful basis.  **named person**  This is a clear point of contact for times when children, young people and families require information, advice or help. The named person is provided by health and education services and is usually someone who is known to the child/young person and their family and who is well placed to develop a supportive relationship with them. Local arrangements and the term used to describe this role or function may vary from area to area. A named person can help children, young people and their families to access relevant support for a child/young person’s wellbeing. Where there is a child/young person’s plan (‘My Plan’) in place, the named person will work alongside the lead professional, continuing to provide general advice or support, while the lead professional will be the point of contact in relation to the plan (‘My Plan’). In some cases the named person will also be the lead professional.  **Parent**  This document uses the term ‘parent’ within the meaning of section 15 of the Children (Scotland) Act 1995. The term ‘parent’ includes a person who is a genetic parent of a child/young person, a parent by adoption, and those who are parents by virtue of Human Fertilisation and Embryology legislation. In this document, the term also embraces a person who has parental responsibilities in relation to the child/young person, who has care of the child/young person, or who is a guardian of the child/young person whether appointed by parents or the court.  **Practitioner**  In this guidance, practitioner means any person involved in working with a child/young person and/or their families, whether on a voluntary basis or through paid work. In addition to roles typically thought of as working with children and young people such as health visitors and teachers; this includes wider activities that work with a child/young person and their families, such as housing services or police.  **Processing**  Doing almost anything with data is processing; including collecting, recording, storing, using, analysing, combining, disclosing or deleting it.  **Public body**  Any organisation that is publicly funded to deliver a public or government service. This includes health, education, social work, housing, police and many others.  **Public task**  In situations where information sharing is necessary to deliver a service, child/young person and their families should be informed before they agree to engage with the service, what information needs to be shared, with whom, and for what purpose.  **Processing personal data “in the exercise of official authority”.**  This means public functions and powers that are set out in law, or to perform a specific task in the public interest that is set out in law. Public task is explained in more detail above and on page 36.  **Special category data**  Information that is sensitive and personal (for example, information concerning race, ethnic origin, politics, religion, trade union membership, genetics, biometrics used for identification (ID) purposes, health, sex life, or sexual orientation). Data protection law provides greater protection for this information because of its sensitive nature.  **Team with the Family**  Team with the Family is a proportionate approach to meet the needs of the child/young person and is facilitated by the named person and lead professional (if there is one) from early intervention stages up to Child Protection planning meetings.  Refer to page 41.  If the young person requests it, ‘the family’ can be substituted with the young person’s name i.e. Team with Joe Bloggs.  **Transition**  A transition is a change, from one stage to another. Most children and young people will experience transitions as they move into an early learning and childcare (ELC) setting, from there to primary, from stage to stage, from primary to secondary, between schools and from secondary to further education and beyond. This can also occur between named persons at any stage.  **Wellbeing**  For the purposes of these guidance documents, wellbeing is a measure of how a child/young person is doing at a point in time and if there is any need for support. The eight wellbeing indicators (SHANARRI) provide a framework for assessment and planning in relation to wellbeing.  **Wellbeing indicators (SHANARRI)**  Any assessment of a child/young person’s wellbeing should be founded on the 8 wellbeing indicators: Safe, Healthy, Active, Nurtured, Achieving, Respected, Responsible, Included, sometimes referred to as SHANARRI. The wellbeing indicators (SHANARRI) are informed by the UNCRC. They are overlapping and connect areas that are fundamental to understanding what a child/young person need in order to grow, develop and thrive (see chapter 4). |

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| **Appendix 2**  **Relevant lawful basis under Data Protection Legislation and condition met to satisfy Common Law Duty of Confidentiality that are being relied upon for sharing information** | | | |
| **Reason for sharing “relevant, appropriate and proportionate information”** | **Data Protection Lawful basis**  **Article 6** | **Data Protection Lawful basis**  **Article 9** | **Common law duty of confidentiality** |
| Child Protection Concern (significant risk of harm)  **FOLLOW YOUR CHILD PROTECTION PROCEDURES** | 6(1)(e)necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller  **OR**  6(1)(d) necessary in order to protect the vital interests of the data subject or of another natural person | 9(2)(b) necessary for the purposes of carrying out the obligations and exercising specific rights of the controller of the data subject in the field of employment and social security and **social protection law**  In particular “safeguarding of children and individuals at risk” Data Protection Act (DPA) 2018 Schedule 1 Paragraph 18 | It is justified in the public interest\*  \* the benefits to a child(ren) that will arise from sharing the information outweigh both the public’s and individual’s interest in keeping the information confidential |
| Wellbeing Need | 6(1)(a) the data subject has given consent to the processing of his or her personal data for one or more specific purposes | 9(2)(a) the data subject has given explicit consent to the processing of those personal for one or more specified purposes | The information provider has explicitly consented to the information sharing |
| Routine Service Provision | 6(1)(e) necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller | 9(2)(h) necessary for the purposes of preventative or occupational medicine, for the assessment of working capacity of the employee, medical diagnosis, **the provision of health or social care, or treatment** or the management of health or social care systems | The information provider has consented – implied consent acceptable for routine service provision  Information on how personal information will be processed should be explained in privacy notices, and supplementary service specific leaflets |

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