



**West Dunbartonshire Council's
(WDC) implementation of the
Getting it Right for Every Child
(GIRFEC) guidelines**

getting
it right
for every child

Date: 17 January 2012

West Dunbartonshire Council's (WDC), Community Health and Care Partnership (CHCP); and partnership services implementation of the Getting it Right for Every Child (GIRFEC) guidelines

Introduction

The purpose of this report is to provide the information requested by COSLA's Education and Young People's Executive on the progress to date of implementing GIRFEC, with a focus on examples of good practice.

Background –what is GIRFEC?

GIRFEC is a national programme that aims to improve outcomes for all children and young people (C&YP) in Scotland. It seeks to do this by providing a framework for all services and agencies working with children and families to deliver, where necessary, a coordinated approach which is proportionate, appropriate and timely.

The Environment for Implementation.

The successful implementation of GIRFEC will require changes to culture, systems and practice and it is recognised that this is more achievable when situated within an organisational structure or structures that reflect positive integrated working.

Prior to October 2010 the responsibility for implementing GIRFEC lay with the local authority and Community Health Partnership (CHP) working together through joint forums and services within partnership agreements.

In October 2010 the Council's CHCP was established integrating social care and health services within the one organisation and establishing a new arrangement through the Scheme of Establishment to work in partnership with local authority services and the third sector.

The new set up and structure bring with it not only new challenges but also opportunities to improve our services further and we are already experiencing, and are able to evidence, real benefits for those who use our services

The Core Components

The framework is founded on ten core components, which can be applied in any setting and in any circumstance. These components are at the heart of WDC's approach to practice and provide a benchmark for monitoring progress. What follows is a list of the ten components organised for ease of discussion in future sections of this document. Under each section are listed key activities or approaches which are responsible for delivering the core components for that section.

Section one - shared understandings

- A focus on improving outcomes for children, young people and their families based on a shared understanding of well-being.

- Consistent high standards of co-operation and communication where more than one agency needs to be involved, locally and across Scotland.
- A common approach to gaining consent and to sharing information where appropriate.
- The capacity to share demographic, assessment and planning information electronically, within and across agency boundaries, through the national eCare programme where appropriate.

Section two - involving stakeholders

- An integral role for children, young people and their families in assessment, planning and intervention.

Section three - streamlined and unified approaches

- Streamlining planning, assessment and decision making processes that lead to the right help at the right time.
- A coordinated and unified approach to the identifying of concerns, assessing needs, agreeing of actions and outcomes based on the Well-being Indicators.

Section four - staff development and deployment

- A Lead Professional to coordinate and monitor inter-agency activity where necessary.
- A confident and competent workforce across all services for children, young people and their families.
- Maximising the skilled workforce within universal services to address needs and risks at the earliest possible time.

Section one - shared understandings

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The Community Planning Partnership

West Dunbartonshire Community Planning Partnership's Single Outcome Agreement (SOA) is an agreement between the West Dunbartonshire Community Planning Partnership (CPP) and the Scottish Government. It identifies areas for improvement and sets out how the Community Planning Partners and the Scottish Government will deliver better outcomes for the people of West Dunbartonshire. This SOA was developed from the West Dunbartonshire Community Plan which was launched in

September 2007 and set out the 10 year strategic vision and high level actions to enable West Dunbartonshire to flourish.

Working in partnership we want to reduce poverty and exclusion, deliver better services and continue to improve the quality of life for everyone living in West Dunbartonshire whilst protecting our natural environment.

(SOA vision for WDC, 2007)

The framework of the SOA consists of several themes which are as follows:

- Safe and Strong Communities.
- Creating Sustainable and Attractive Living Environments.
- Improving Health and Well-being
- Developing Affordable and Sustainable Housing.
- Promoting Lifelong Learning
- Regenerating and Growing our Local Economy

Education and Lifelong Learning (E&LL) Thematic Group is primarily, but not exclusively, responsible, for improving outcomes for young people. There are currently 4 CPP funded programmes under the E&LL Theme; namely

- Support for Children and Families
- More Choices More Chances (MCMC)
- Youth Services
- Physical Activity

Programme 1: Support for Children and Families

The programme is delivered through a framework of Integrated Children's Service, involving the services of Health, Social Work and Education. The programme has primarily been developed to address the needs of vulnerable children (aged from 0 to 19 years of age) and their families. In line with the Scottish Government's Early Years Framework the emphasis is on giving all children the best start in life through support for parenting, early intervention, and addressing barriers to learning and health inequalities. The programme is dependent on highly effective integrated working which overcomes the barriers to successful multi-agency working. The use of shared budgets for training and the sharing of staff between agencies have addressed potential difficulties. There is a single referral pathway to access services across the three agencies.

The programmes closely monitor their performance and can demonstrate the impact of their activities in many areas. A list of a few key achievements of the programme for 2009/10 is as follows:

- 95% increase in the number of families affected by parental addiction being offered support;
- 88% increase in the number of parents engaged with addiction services;
- 6% increase in the number of children with mental health issues (looked after away from home) provided with support;
- 292% increase in the number of families with pre-5 aged children provided with support;

- 134% increase in the number of vulnerable children participating in group-work programmes;
- 418% increase in the number of parents participating in education and social work group-work programmes;
- There are three case studies describing how support from this programme made a difference to the life of some of the Council's most vulnerable children; and,
- The number of families being offered a parenting group has shown a positive trend since 2007.

Programme 2: MCMC

The Scottish Government is committed to ensuring that all children have the best start in life and are ready to succeed. It is also committed to ensuring that our young people are successful learners, confident individuals, effective contributors and responsible citizens. This is reflected in the Scottish Government's National Indicator relating to higher proportions of school leavers moving into positive and sustained destinations. The Council supports this aim through its More Choices More Chances (MCMC) Programme.

The MCMC programme increases the number of young people in the Council area that move into positive destinations of training, education or employment by developing a number of innovative partnership strategies to engage young people aged 14 to 19 years of age. The programme uses an effective early intervention strategy for children at risk and is delivered through a range of innovative and strong partnerships including one with Dumbarton Football Club.

The programmes closely monitor their performance and can demonstrate the impact of their activities. A list of a few of the key achievements of the programme for 2009/10 is as follows:

- In the current economic downturn West Dunbartonshire has managed to reduce its NEET population from 13.5 per cent in 2009 to 12.3 per cent in 2010.
- School leavers entering positive destination has increased by 5.1 per cent to 88.1 per cent in 2009/2010 compared to 83.0 per cent in 2008/2009.
- Looked after children (LAC), considered to be most vulnerable, from West Dunbartonshire have the 6th highest school attendance rate among other local authorities which was 3 per cent higher than the Scottish average for LAC of 87.8 per cent in 2009/10.
- Initial destination of LAC from West Dunbartonshire in positive destination was 78 per cent compared to the Scottish average for LAC of 59 per cent.

Programme 3: Youth Services

The Youth Services programme had a key aim of bringing together a disparate landscape of provision and ensuring improved cohesion through a range of agencies and organisations working better together to provide a more co-ordinated service to young people within the community. This is supported through the work of Community Learning and Development; Y-sort it Youth Information & Support Network; and Tulloch 'Inspiring Scotland.' A number of projects make up this

programme and there has been considerable progress in relation to joint/collaborative working across agencies. There is a wide variety of activity which has successfully engaged with and involved young people across West Dunbartonshire through high profile events, surveys, activities and specialist interventions. What follows is a list of some key achievements of the programme for 2009/10.

Summer Programme

- 315 young people engaged in Summer Programme activities.
- Although fewer partners were involved due to lack of funding, there was evidence of good partnership working in referring young people and ensuring that there was no duplication of services.
- Evaluations also showed that the young people were happy with the range and quality of the activities provided.

Y sort-it

- 425 young people engaged through Mobile Cyber Stations (MICS).
- 718 engaged with Outreach Workers.
- 376 attended Drop In Services.
- 336 participated in Group Work programmes.
- 2 Young Carer Groups were established and an awareness raising pilot held in Vale of Leven Academy.
- The 2 Young Carer Groups also held Spring and Summer programmes attended by 30 young people.

Tullochan

- 160 pupils aged 13-17 years who are identified as being at risk are supported through various life skills programmes including residential experiences.

Programme 4: Physical Activity

The Physical Activity Programme has two key aims.

- To increase and then sustain children, young people and families' participation in, and lifelong learning through, physical activity and sport with a clear focus on areas of greatest deprivation.
- To improve people's confidence and self-esteem while also challenging the health and well-being inequalities that exist in West Dunbartonshire.

There are two distinct strands to the project, both of which are situated in the Sports Development Service that is currently in the department of Educational Services.

- Sports & Physical Activity Project (Early Intervention, Disability and Families)
- Club Coach and Volunteer Development Project

The Sports and Physical Activity Project aims to increase the participation levels and improve the health of children aged 0-5, families, adults/parents and people with a disability. This is achieved primarily through increased delivery, support, and training and development opportunities for people in the community, EECC (Early Education and Childcare Centre) staff, parents, volunteers, childminders and Community Groups. There is a clear focus on inclusion and SIMD areas within the

project as 100% EEECs are engaged and over 1,600 children participate in the project every week. The project won a GOLD COSLA Award for delivering excellence in Health Improvement in 2007 and has had national recognition as a result of its success. The Club, Coach and Volunteer Development Project has a focus on building community capacity in local areas by supporting the development of local clubs and community groups and through the education of local volunteers, sports leaders, coaches and clubs to provide sustainable, high quality services to local residents. The project achieves its objectives by developing very strong partnerships with Youth Services, Educational establishments, pupils and teachers, Community Learning and Development, National Governing Bodies and local sports clubs.

Other effective strategies and interventions to support the core components within section one.

The **Integrated Assessment Framework** for Children ensures that integrated working is accepted as the norm where a child's needs cannot be met within a single agency and are complex. The processes put in place at service level engage services with each other and promote the "team around the child approach."

The council and the CHCP are represented on many key national forums.

West Dunbartonshire CHCP and local authorities are signatories to the **Greater Glasgow and Clyde Information Sharing Protocol**. Where consent is required and appropriate information requires to be shared our multi-agency process includes the provision of information to the child, parent or carer about consent and a single agency approach to gathering the consent for the specific purpose only.

The capacity to **share information electronically** has proved a challenge. The national eCare solution is not available. West Dunbartonshire Council and CHCP are able to share information when it is appropriate and legal to do so through secure email.

UNICEF Rights Respecting Schools Award (RRSA) WD January 2012

UNICEF's Report Card 7 demonstrated that out of the 21 wealthiest countries in the world the UK was 21st in terms of children's wellbeing. The Scottish Government published their response in November 2009 called Do the Right Thing listing the 21 priority areas that the Scottish Government has agreed it will take action on. The 21 priorities included:

- Priority 1 Monitoring the UNCRC in Scotland.
- Priority 2 Promoting children's rights in the Scottish Government.
- Priority 3 Raising awareness of the UNCRC, especially among people who work with children.
- Priority 7 Participation of children and young people in schools.

The RRSA will help deliver these priorities. In addition it fits well with existing national priorities:

- Curriculum for Excellence.
- GIRFEC.
- Equality Act (2010).

The UNICEF Rights Respecting Schools Scheme aims to:

- Raise pupil achievement including attainment.
- Improve the quality of their own and their families' lives.
- Help children learn about their rights and responsibilities according to the United Nations Convention on the Rights of the Child (UNCRC) and how to use this understanding as a guide to living.

In September 2011 the Scottish Government introduced a consultation on the Rights of Children and Young People Bill to enshrine children's rights into Scots law. Schools pursuing the RRSA will be well placed to meet the likely requirements of such legislation. West Dunbartonshire educational services therefore support schools and early years' establishments to become Rights Respecting Schools. Currently there are twelve primary schools, three Secondary schools, and six EEECs involved.

The Council's **Parenting Strategy** builds on the existing skills and expertise of our workforce who have been delivering a range of parenting programmes for some time. The Parenting Strategy sets out the overarching principles within which these programmes are delivered and we have put in place systems to co-ordinate and evaluate our activity. The child-centred ethos in our educational establishments from early years right through to work with school leavers has been regularly and consistently commented upon positively during inspection of our services. There is very good joint work and involvement of other appropriate professionals in our schools and centres.

To underpin our Parenting Strategy, the Council has invested in training in **the Solihull approach** across agencies. This, again, is emphasising common principles and a common language for staff from different professional backgrounds and, along with embedding GIRFEC, is reinforcing good joint working. The Council has training for trainers in place on the Solihull approach and are committed to continuing with this programme, given the very positive feedback we have had from staff.

The Young Families Support Service is available to provide targeted intensive support to vulnerable young families. Outreach Workers are also based in some of our Early Years Centres. Following a successful pilot, we now have nurture groups in eight of our primary schools.

Families and School Together (FAST) is an eight week evidence based multi family group programme which builds protective factors to enhance children's resilience. With supportive relationships between families and school, research shows the child is less likely to experience school failure, drug and alcohol abuse, youth delinquency, child abuse and neglect and mental health problems. The programme is for children aged 8 or less. FAST has been run in three Primary schools over the last fourteen months and plans are in place for two more schools to join the programme. The funding has been secured through effective partnership with Save the Children. The Council has now received two of the three evaluations of the Programme. The summary of outcomes has demonstrated significant improvements in the following areas:

- the quality of family relationships especially between parent and child;
- children's behaviour at home and in school;
- parents' relationship with school staff;
- friendships between families;

- the numbers of parents seeking advice on further education or employment; and,
- children's eating habits.

A multi-agency Action Group including Choose Life oversees the implementation of **Seasons for Growth**. Professionals from health, social work and voluntary agencies work alongside school staff to deliver this programme for people experiencing issues related to loss, bereavement and change. Groups are run in primary, secondary and special schools, specific LAC groups and most recently adult groups. Evaluations show that participants feel more included and less alone; are more able to talk about their feelings, learn strategies to help them cope; know how to seek help and are more able to support others in need.

The **PATHS pre-school programme** is a comprehensive, developmentally based curriculum aimed at promoting social, emotional competence and thereby reducing behaviour problems in children aged 3 – 5 years. This has been very successful in five of our nurseries. The materials used in the programme map well to Curriculum for Excellence experience and outcomes.

Roots of Empathy has an evidence base from Canada. Research results indicate significant reductions in bullying, aggression and violence and increases in pro-social behaviour for classes who participate. Roots of empathy promote caring relationships and a better understanding of emotions and feelings as well as helping to develop young children's capacity for responsible citizenship, and responsive parenting. All this fits well with the experiences and outcomes of curriculum for excellence.

Action for Children has funded a programme in 5 primary schools in WDC. Schools were selected on the basis of deprivation indices and stability of staffing as we needed continuity and commitment over the whole school year. The programme will run over 27 weeks in a primary 3 class and will be facilitated by a staff member from Action for Children working alongside the class teacher. The programme involves a neighbourhood baby and parent visiting the classroom nine times over the school year. The programme has nine themes e.g. crying, caring and planning, emotions, sleep, safety, etc. The flow of the work involves preparation for the parent and baby visit, the visit of the baby to the class, follow up from the visit. Most if not all of our schools have been able to identify and recruit a willing parent and baby both of who gain a great deal from the programme as well as the school children.

An independent **Youth Counselling Service** is provided in all our secondary schools. The West Dunbartonshire Youth Counselling Service is jointly commissioned by the Council and the CHCP.

Section two – involving stakeholders

An integral role for children, young people and their families in assessment, planning and intervention.

Our **Young Carer's** pilot project placed heavy emphasis on capturing the views of pupils. All pupils were surveyed in a pre and post pilot questionnaire to ascertain their level of knowledge and understanding of young carers. In addition, first and second year personal development lessons were piloted with two classes in each year group. These classes gave comprehensive feedback on the lessons which changed significantly as a result of the feedback from the young people. Young Carers attending support groups with Y-Sort-It (our local information service for young people) have been advising a drama group on information to include in a video for use with staff and pupils beyond the pilot project. Young Carers also designed the information booklet being used across the authority for young carers and advised and commented upon the information contained in the guidance for practitioners.

All Early Years Centres are taking part in the initiative "**The Right Wee Blether**" organised by the office of Scotland's Commissioner for Children and Young People. Children between the ages of 2 and 5 will take part in a consultation exercise and each conversation will be recorded by parents or early year's staff. Along with the "**Right Blether**" for 6 to 18 year olds, this is the widest and biggest consultation exercise for young people ever in Scotland.

In all of our formal processes, the **voice of the child** is captured routinely as all proformas for child protection case conferences, looked after children's reviews and hearings have a section for the child's views. Prior to each case conference or children's hearing, the Social Worker explains processes to children and families and discusses the contents of the reports provided to these meetings. The chair of the child protection case conference ensures that the child has the opportunity to contribute to the meeting, but also takes account of age and stage. The level of trust in our systems is reflected in the high number of parents attending case conferences.

Supporting vulnerable children with additional support needs is a key strength. A sub group of the Disability Review and Improvement Group has compiled a practice guideline, "**Helping Children and Young People to have their say**" which, using the principles of GIRFEC, looks at a range of means of consulting with children both on an individual basis and in terms of wider strategic planning. The document can be used as a reference for staff embarking on a child protection investigation where the child has a communication difficulty. It can also be helpful to staff undertaking discussions with a child about keeping themselves safe and in preventative work. The group is in the process of compiling a pictorial consultation and evaluation proforma in order to ensure that children who have a communication difficulty are able to express their views. The child's plan reflects outcomes for the child rather than input from services. There are routine evaluations carried out in the joint work across Social Work, Health and Education in the Locality Autism Assessment Team (the LAAT) and in the new ADHD Diagnostic Assessment Team.

During **joint investigative interviews** the Children with Disabilities Team has worked flexibly with colleagues in Education and Health, especially teachers and speech and language therapists, who know the child best and can greatly facilitate communication.

All young people who are missing or have absconded from school are interviewed on their return. Police Officers, including the "**Campus Cop**", are regularly involved in

joint work within schools around issues such as internet safety, stranger danger and information about diversionary initiatives. When a child is referred to the Reporter to the Children's Hearing, their case is allocated to a named reporter and communication with the family gives a contact name and details of how to get in touch. West Dunbartonshire was one of the pilot areas for the system of **flash cards** that are used for children attending hearings. If, during a hearing, the child wants to speak or feels the focus has moved away from them, then they hold up the flash card and the chair's attention is drawn back to the child. This system has now been rolled out nationally. All children attending children's hearing are asked about their views through the "**Having your Say**" form. This is standard practice across the country but, within West Dunbartonshire, any relevant person attending a hearing is also given a Having your Say form to complete.

Section three - Streamlined and Unified approaches

Streamlining planning, assessment and decision making processes that lead to the right help at the right time.

A coordinated and unified approach to the identifying of concerns, assessing needs, agreeing of actions and outcomes based on the Well-being Indicators.

A shared understand of **well-being** is promoted through the referencing of GIRFEC principles and approaches within appropriate strategic and policy documents produced by the Council and CHCP with an expectation that this will be translated into practice across services for children.

A recent review of the use of the GIRFEC **assessment and planning toolkits** demonstrated a high level of compliance with the production of an effective Child's Plan.

Young people in any educational establishment requiring additional support are assessed within the Council's **Stage of Intervention (SI) guidelines** which ensure a consistent approach to assessing need. The resources allocated are commensurate with the level of need, and helps other agencies to target their resources for maximum effectiveness. The use of SI has created a common understanding and lexicon amongst staff which has helped to streamline decision making and create a culture of transparency. The number of children identified as being on the SI is taken into account when allocating support staff to each school and early years centre.

In our secondary schools, we have well established **Joint Agency Teams (JATs)** with consistent commitment from partner agencies to identify young people where early intervention is required to maintain them within school and tackle difficulties. All young people being discussed at JAT have to be assessed as being at the requisite level of the SI guidelines (see above). Group workers from social work are actively involved in our schools. Our schools also have pupil and family support

workers who can offer additional support to targeted young people. If a young person cannot be maintained within mainstream schools, despite every effort to support them there, we have a range of alternative programmes which are accessed through a referral to the Multi-Agency Consultation (MAC) group. All decisions about the use of day and residential placements, if required, are agreed jointly by Social Work and Education.

Within Education, the **MAC (multi-agency) Group** meets on a regular basis to offer advice, share good practice and make recommendations for young people whom schools, through their Staged Intervention and JAT procedures, have identified as requiring additional support. The group tries to ensure that as many vulnerable young people as possible have the opportunity to remain in their mainstream school by supporting schools to access appropriate alternative curricular packages which adequately address the needs of individuals. Where this is not appropriate the group will forward information to the Education / Social Work Liaison Group for discussion regarding an alternative placement.

The 16+ Learning Choices **Joint Action Team (JAT)** is for every young person and gives particular attention to those at risk of moving into a negative destination. In West Dunbartonshire a risk matrix identifies those who may not make a successful transition to a positive post school destination.

For most young people 16+ Learning Choices will translate into an offer of post school learning well in advance of their school leaving date. It is however important that we maintain a focus on these young people post school and look to apply post school interventions and support when required. This is done through our Post 16 JAT with core representation from Education, Skills Development Scotland, Social Work and Throughcare. At key times we measure the post 16 progress of those young people who appeared on the matrix and where required apply the agreed support and activity that will best respond to and support individual need.

The Council introduced a tiered response to school attendance issues which streamlined the process of informing parents and referring entrenched cases to the multi-agency **Attendance Review Committee (ARC)**. The ARC is designed to act as an early intervention strategy to deal with children whilst still at primary school or in the early years of secondary school.

The Pre-School Assessment Team (PreScAT) is a group of professional personnel from Education, Health and Social Work. The core members of the team have access to the services, supports and information that their agency can provide. PreScAT offers a single door route of referral to a wide range of Education, Health and Social Work services for children with additional support needs in the 0-3 age range.

The local **Children's Hearing Services Working Group (CHSWG)** is a multi-disciplinary group, including service users, which takes the lead in integrated service delivery for deaf children and their families. The main focus of the group is to monitor, develop and improve the services delivered to deaf children and their parents and other family members through the processes of ongoing support. The

CHSWG operates on both strategic and practical levels. The aims of the group include:

- setting objectives for the Children's Hearing Services Working Group,
- agreeing a framework for multi-agency working,
- delivering these standards across all the services involved in the integrated service delivery,
- monitoring delivery of these standards, and
- communicating the achievements and unresolved issues of the services to strategic planners and key stakeholders.

A **Visual Impairment Review Group (VIRG)** and a Joint **Functional Vision Assessment (FVA)** Clinic have been established in WDC. Both the VIRG and the FVA are multi-agency groups which aim to:

- develop clear and integrated care pathways for children with a visual impairment and their families,
- develop data collection procedures that are linked to multi-agency reviews and planning, and
- address gaps in service provision.

The Highly Dependent Learners (HDL) Committee is a multi-agency group consisting of colleagues from health and estates. The aims of the group are to:

- assess the additional physical support needs of Highly Dependent Learners,
- identify, coordinate and organise all training needs, equipment and building adaptation requirements for Highly Dependent Learners,
- ensure the most cost effective solutions for the physical support of Highly Dependent Learners,
- consider recommendations to purchase specialist equipment for pupils with a sensory impairment and approve where appropriate,
- oversee the organisation and storage of specialist equipment related to sensory impairment and HDL across West Dunbartonshire, and
- ensure the effective adjustment, servicing and repair of specialist equipment related to sensory impairment and HDL across West Dunbartonshire.

Public Health Nurses identify vulnerable families at an early stage using the GIRFEC Practice Model underpinned by the Solihull approach, putting in interventions as appropriate such as parenting programmes. We are currently piloting the use of an assessment tool based on the SHANARRI indicators. The School Nursing Service provides targeted direct clinical care, health assessment and referral, if required, to other appropriate services. **The School Nursing Team** takes action to intervene and support vulnerable young people and liaise regularly with colleagues in Education and Social Work. Along with Education staff, school nurses have been involved in the development of a girls group for identified vulnerable young people in S1. As we have embedded the GIRFEC **Pathfinder** for Domestic Abuse, work is underway to implement the **Multi Agency Support and Screening Team (MASST)** which will build on pathfinder good practice. The MASST is due to replace the pathfinder process in December and will extend the application of early and effective intervention strategies across all vulnerable children and young people referred for both offence and non offence referrals. We recognised that with the further implementation of GIRFEC we needed to review our existing screening and referral arrangements in order to build capacity and reduce duplication. The

development of the MASST is supported by the act of commitment of all relevant partners including Police, Social Work, Health, Education and Housing.

The need for **more streamlined administration forms and procedures** was identified by a GIRFEC Audit and through School staff consultations which indicated that education staff were overwhelmed by the different forms required to gather assessment information on vulnerable young people. The recommendation following the audit was to improve education paperwork to increase efficiency by standardising how information is gathered and recorded for vulnerable young people.

Templates for recording assessment information based on the GIRFEC practice model were prepared in order to be more efficient in gathering and recording information on vulnerable young people. The templates detail how the GIRFEC Practice Model is shaping how practitioners think and act to help young people grow and develop. All secondary schools then agreed to pilot the new paperwork systems which covered:

- initial referrals to JAT,
- multi-agency meeting minutes
- referrals for additional support/resources/placements and
- Transitions to adulthood.

Within integrated services there is a clear understanding of the role of the **Lead Professional**. If the matter is related primarily to an educational matter such as attendance the Head Teacher or Head of Centre (early years) would retain responsibility, if however, the issues were more complex and primarily were related to family or social factors or a Statutory Order was in place, a Social Worker would be responsible for the coordination of actions. When supporting a child under the age of 5, the health visitor would be responsible if the child was not yet attending an early years centre. The range of staff involved who have participated in recent years has been extensive and all key agencies have been involved at some stage. However, CHCP representatives and Education representatives have developed an approach and action plan to strengthen the development of the Lead Professional.

WDC offers arrange of **training and mentoring opportunities** to its staff. Within education alone there were 120 training sessions available during 2011 with many more multi-agency training opportunities. In addition, the senior Depute Head Teachers of each secondary school have been provided with enhanced training in Health and Well-being Indicators, Named Person; Integrated Assessments and the use of the common practice model.

The multi-agency committees and groups such as PreScAT; MASST; VIRG; FVA; HDL and JATs have all been established to ensure early and effective intervention which maximises the best use of the skilled workforce in WDC.

A comprehensive programme of CPD has been provided for staff across all partner agencies including a well attended **summer briefing** for over 400 staff from all sections of the Council where there is involvement with children.

In September 2011, West Dunbartonshire Council's Education and Lifelong Learning Committee and its Community Health and Care Partnership (CHCP) Committee approved a new **Relationships, Sexual Health and Parenthood Education (RSHPE)** Policy. The new policy was introduced following a 12 month consultation

period with teachers, parents and young people. The final version of the new policy was presented to the Parental Strategy Group, the members of which expressed full support for both the principles and the details of the policy document.

The new policy was developed by the Council's **Sexual Health Strategy Group**, which is co-chaired by the Executive Director of Educational Services and a Head of Service in the CHCP. It contains detailed guidance for age appropriate RSHPE for young people aged 3-18 and is fully aligned to the principles of Curriculum for Excellence and all recent national guidance on RSHPE. The Greater Glasgow and Clyde Sexual Health Team have delivered training to teaching staff in all WDC primary and secondary schools on the new policy and this training has been highly evaluated.

Also in September 2011, the CHCP approved a separate Sexual Health and Relationships Policy for staff working with Looked After Children. This policy takes account of the special vulnerability of this group of young people in the field of sexual health. Again, the policy builds on best practice and was finalised after extensive consultation with young people and staff. Staff in all residential units have now been trained in the new policy, which has been very favourably received.

Conclusion

Within West Dunbartonshire Council, CHCP and partners, all agencies involved can take some pride in both the range and effectiveness of multi-agency activities which focus on the needs of the child, and provide support in an appropriate and timely manner. This work is due in part to the quality and competency of the Council's well trained work force. However, there is recognition that more time is needed before GIRFEC is successfully implemented across all sectors of children's services. Progress is constantly monitored and there is no complacency. Improvements are guided by the GIRFEC Improvement Group.