



getting it right

for every child
in North Lanarkshire

Children and Young People's
pathway for planning
and support



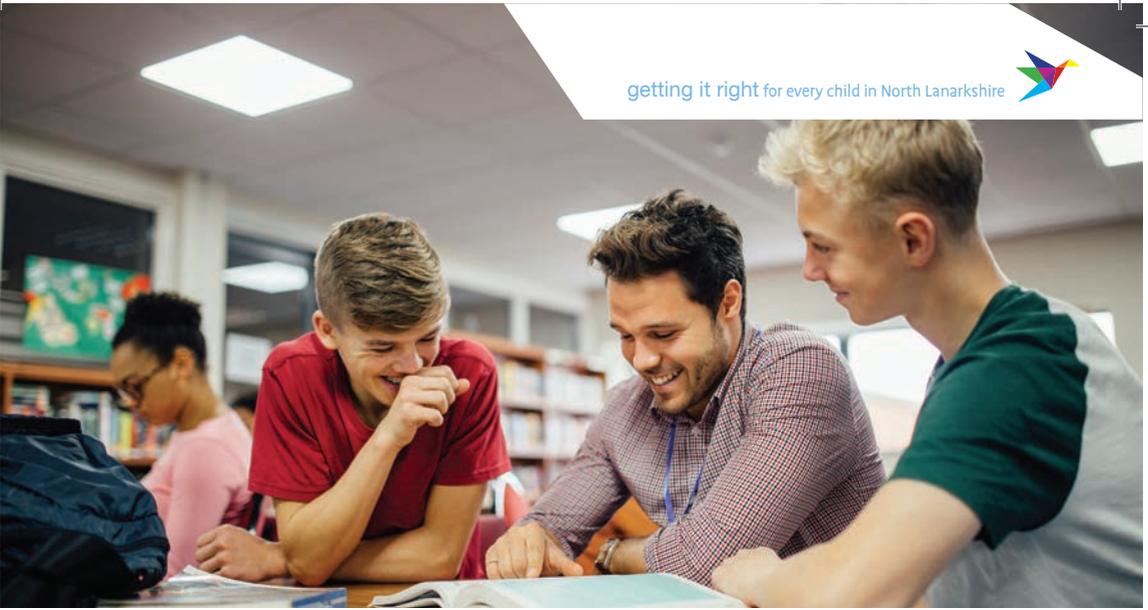
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Getting it right for every child is the national approach in Scotland to improving outcomes and supporting the wellbeing of our children and young people by offering the right help at the right time from the right people.

It supports them and their parent(s) to work in partnership with the services that can help them.

It puts the rights and wellbeing of children and young people at the heart of the services that support them - such as early years services, schools and the NHS - to ensure that everyone works together to improve outcomes for a child or young person.





The National GIRFEC approach

- is **child-focused**.
It ensures that the child or young person - and their family - is at the centre of decision making and the support available to them.
- is based on an understanding of the **wellbeing of a child**. It looks at a child or young person's overall wellbeing – how safe, healthy, achieving, nurtured, active, respected, responsible and included they are.
- is based on **tackling needs early**.
It aims to ensure needs are identified as early as possible to avoid bigger concerns or problems developing.
- requires **joined-up working**.
It is about children, young people, parents, carers and the services they need working together in a coordinated way to meet their specific needs and improve their wellbeing.

In line with the national practice model of GIRFEC, the questions below help to inform the pathway for planning and support.

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

Children and Young People’s Pathway for Planning and Support in North Lanarkshire is the process by which agencies within North Lanarkshire work together to assess, plan and support children, young people and their families to develop their wellbeing. The pathway enables agencies across Education, Health and Social Work to use the Core Components of GIRFEC to ensure the most timely and proportionate support is available to children, young people and their families. The Children and Young People’s Pathway for Planning and Support encompasses the five levels of GIRFEC; Universal, Additional, Joint, Integrated and Compulsory Intervention which are reflected within the Model of Staged Intervention.

glossary

Staged Intervention is a framework that enables agencies to provide the most appropriate and least intrusive assessment, planning and support for any child or young person with wellbeing needs, including those with additional support needs...

There are four levels of support;

- **Level 1:** universal support within the universal service
- **Level 2:** additional support within the universal service
- **Level 3:** joint working with other agencies
- **Level 4:** integrated and compulsory working

HART Meeting: (Health and Wellbeing Resource Team) is a multiagency meeting organised by school staff and held in school, to discuss how best to improve outcomes for children and young people. The HART meeting occurs at Level 3 of Staged Intervention and involves a multiagency, joint approach. The HART meeting takes place regularly, as required, and is for children and young people who attend secondary school.

Early Years MAST: (Early Years Multiagency Support Team) is a multiagency meeting that seeks to address any concerns regarding the wellbeing of children and their families. The children discussed are aged pre-birth to 5yrs (including unborn babies). The meeting will identify any appropriate services and supports available to improve outcomes.





GIRFEC Core Components are used throughout the Children and Young People's Pathway for Planning and Support.



The **Named Person** will help to ensure that a child or young person's wellbeing needs are fully supported.



Single agency assessment part 1 (Wellbeing assessment)

is used to gather, assess and analyse strengths and concerns using the eight wellbeing indicators;

Safe

Healthy

Achieving

Nurtured

Active

Respected

Responsible

Included



Single agency assessment Part II (My World Triangle assessment)

- is used to gain a deeper understanding of the child or young person's 'wider world' and the impact that has on their wellbeing.



Single Agency Plan

In NHS Lanarkshire the single agency plan is called a 'Wellbeing Plan'. This plan follows on from a Health Visitor's assessment of wellbeing and begins at level 1 of the staged intervention framework.

In North Lanarkshire Education, Youth and Communities the

single agency plan is called a 'Getting it right for me plan' (Girfme plan). This plan can be used from level 1 of the staged intervention framework. The plan is designed so that it can capture and support all interventions and outcomes at all levels of the staged intervention framework, thus moving from a single agency to a multiagency plan where joint working is necessary to improve outcomes for the child or young person.

Social work will not have a single agency plan for a child or young person, all their planning will take the form of a Child's Plan.



What I Think tool

This is used to gather children and young people's views about their wellbeing. Also available is the GIRFEC App and the Wellbeing Web.



Single agency and integrated chronologies

- are used to provide a summary of significant events which may have a positive or negative impact on the child. Each single agency chronology may be shared across agencies. An integrated chronology would follow a multiagency decision to create one.





Information Sharing -

Practitioners will speak with children and young people and their families, provided it does not put the child's wellbeing at further risk, to discuss with them what information they would like to share, for what purpose and with whom. The views of the child and parent are considered as part of the decision by all practitioners when deciding to share or not to share the information.



Integrated assessment - is created following a multiagency decision.

This would require integrated working between agencies. An integrated assessment would enable practitioners to review single agency assessments and plans.



Resilience Matrix - tool to support process of analysis.



Request for Assistance - this tool is in an agreed format which should be used to ask for help for a child from health, social work, education, the Children's Reporter, adult services or the third sector.



Child's Plan - GIRFEC ensures that everyone is working to a single planning framework and that a Child's Plan is available whenever a child needs one.

The Child's Plan is created when agencies need to work together to develop the child's wellbeing and follows the staged approach to assessment and planning. It follows on from an integrated assessment and specifies the desired outcomes and the actions necessary to achieve them. It would be expected that any child who has a social worker as their Lead Professional would have a Child's Plan.



The **Lead Professional** manages and reviews the Child's Plan. They will keep the child and their parents informed.



The Network of Support will consider whether a Child's Plan is required and will agree who is best placed to manage it. On occasions it may be the Named Person.





Levels of service

There are five levels of service identified based on the nature of support required by the child and family.

-  **Universal Working**
-  **Additional Working**
-  **Joint Working**
-  **Integrated Working**
-  **Compulsory Intervention**



Universal Working

Most babies (including unborn babies), children and young people's wellbeing develops with the help of their family, their community and the universal services of maternity, health and education. As children grow and develop from birth to early years and on to school age they will connect in turn with each of the universal services of maternity, health and education and each child will have a Named Person who will be a main point of contact for this period. The Named Person's role is to support, promote and safeguard the wellbeing of the child or young person. They monitor wellbeing in children and young people and can use single agency assessments to focus action and begin planning when it is needed, to improve wellbeing. (Wellbeing plan is used in health and Getting it right for me plan is used in education.) From time to time, children and young people may need some extra help available through the universal services. This will be sought using the Request for Assistance process. Any request for assistance should be accompanied by evidence of assessment and /or planning for the child or young person.

The Named Person will usually inform the child, and where there is no risk to the child's wellbeing, their parents that they intend to share relevant and proportionate wellbeing information about the child in order to support them carry out their role as Named Person. The views of the child and where appropriate the parents, will be sought and considered by the Named Person when they make any decision about what information they are likely to share and with whom.

Core components	
Named Person	
Single Agency Assessment part I	
Request for assistance	
Information sharing	
What I Think tool?	
Single Agency Planning	

Additional Working

Some children need a bit of extra help from within universal services to make sure their wellbeing develops as it should. The Named Person uses the Single Agency Assessment part 1, Wellbeing assessment to identify any help a child or young person might need. Appropriate planning is put in place, health use their single agency Wellbeing plan and education their Getting it right for me plan. The 'What I Think tool, Wellbeing App or Wellbeing Web is used at this stage to seek the views of children and young people. The Single Agency Chronology can be used to help track and monitor wellbeing.

Core components	
Named Person	
Single Agency Assessment part I	
Request for assistance	
Information sharing	
What I Think tool?	
Single Agency Chronology	
Single Agency Planning	

Joint Working

Some babies (including unborn), children and young people may require the universal service to work with another service. For example education may require to work with health in order to support a child or young person with a communication difficulty. In these situations a 'Getting it right for me plan' is required. This allows education and health to record strategies, resources or outcomes in a single plan (Girfme plan) when joint working is in place. The Named Person is then responsible for co-ordinating, monitoring and reviewing planning as well as ensuring that the supports in place are meeting the needs of the child or young person. On some occasions the child's Network of Support may suggest, following an integrated assessment, that a Child's Plan should be prepared and a Lead Professional identified to manage the Child's Plan.

Core components	
Named Person	
Single Agency Assessment part I and part II	
Single Agency Plan	
Request for assistance	
Information sharing	
What I Think tool?	
Single Agency Chronology	
Lead Professional	
Integrated Assessment	
Child's Plan	



Integrated Working

A small minority of children will need a number of services to work closely together to make sure children and young people have appropriate, proportionate and timely help to develop their wellbeing. In these situations the actions in one agency may impact on decisions in others and a child's wellbeing can only be developed through close communication and co-operation. In some cases, but not all, multiagency activity will be guided by legislation such as the Children's Hearings Scotland Act 2011 or Education (Additional Support for Learning) (Scotland) Act 2004, 2009. In every case, the relevant universal services will be involved in assessment, planning and action. For all children and young people needing specific intervention consideration should be given to the requirement for an Integrated Assessment and Child's Plan. The agencies helping the child will meet regularly to discuss and agree what needs to change and to make sure that any actions are improving their wellbeing.

The multiagency group will also discuss and review the most appropriate person to undertake the role of the Lead Professional.

Core components	
Named Person	
Single Agency Assessment part I and part II	
Request for assistance	
Information sharing	
What I Think tool?	
Integrated Chronology	
Lead Professional	
Integrated Assessment	
Child's Plan	
Resilience Matrix	

Compulsory Intervention

Children who are subject to statutory measures and require a high level of integrated planning would be expected to have a Child's Plan. This would include children and young people who are Looked After at home or away from home or those on supervision orders. In these cases the role of Lead Professional will be carried out by social work and this person would be responsible for preparing and monitoring the Child's Plan. The plan should support existing statutory planning and related statutory planning meetings.

Core components	
Named Person	
Single Agency Assessment part I and part II	
Request for assistance	
Information sharing	
What I Think tool?	
Integrated Chronology	
Lead Professional	
Integrated Assessment	
Child's Plan	
Resilience Matrix	

Child Protection

All child protection concerns will continue to be referred through the standard Child Protection procedures and should not be delayed. Staff should implement the Notification of Concern.

In these cases the role of Lead Professional is always carried out by Social Work.

The Early Years

Current policy drivers identify that the antenatal period is crucial to implementing early intervention strategies to identify and address support needs at the earliest point in a child's life (Refreshed Framework for Maternity Services, 2011; A New Look at Hall 4, 2011; The Early Years Framework 2008 and Universal Pathway 2017). The Universal Pathway determines the contact a Health Visitor must have with children up to school age. It includes assessment at specific ages and stages.

Utilising the Single Agency Assessment the Named Person (Midwife / Health Visitor) will plan and co-ordinate care around the child and family, requesting assistance as required from within health or from another agency. Systems are in place to ensure that support needs are addressed in a timely and proportionate manner through both single agency and multiagency discussions. Recording significant events on a single agency and integrated chronology is crucial to the assessment process and can alert practitioners to the need for further intervention.





Early Years Multi Agency Support Team (MAST)

The Early Years MAST is a multiagency meeting chaired by a Health Visitor Team Leader. (Unborn) babies and children (0 - 5 years) will be discussed at the Early Years MAST where concerns exist in relation to their wellbeing. The Midwife or Health Visitor in their role as the Named Person will bring unresolved issues or wellbeing concerns to this meeting. These unresolved issues or concerns may be brought to the attention of the Named Person by another professional following single agency assessment and planning. Evidence of this assessment and planning should be submitted to the Named Person when requesting assistance from the Early Years MAST.

Core membership:

- Health Visitor or Team Leader
- Midwifery Team Leader
- Senior Social Worker
- Additional Support Manager
- Housing

The following partners may be invited as and when required however this list is not exhaustive;

- Police
- Integrated Addictions Manager
- Community Mental Health Team representative.

Frequency of meetings;

The Early Years MAST will meet 4 weekly at an agreed time and venue and is administered via Public Health.

Following discussion at Early Years MAST, a Lead Professional may require to be identified if this hasn't already happened, and where appropriate an Integrated Assessment and Child's Plan completed. Any decisions taken will be recorded using a standardised one page format. The Chair of the Early Years MAST will provide update reports to the Locality Children's Planning Group.

A review of Early Years Mast is currently under way and is due to be completed by summer 2018. Any changes to practice will be notified to all practitioners and partners.



School Age

Staged intervention is a planning framework which enables establishments to provide the most appropriate and least intrusive level of support for a child or young person with additional support needs. This is embedded in the Education (Additional Support for Learning) (Scotland) Act 2004, 2009. This planning framework is reflected in GIRFEC as most children and young people are supported by the class teacher at Level 1 of the staged intervention framework (Universal Service). For some children and young people consideration needs to be given as to whether consultation, advice or direct support from education services out with the school or establishment is required at Level 2 of the staged intervention framework. Systems should be identified to ensure that support is appropriate and planned and that any duplication is avoided. It is important to ensure that there is a clear record of chronology of interventions and support sought for a child or young person in order to inform discussions - single agency discussions at levels 1 and 2 and - multiagency discussions at levels 3 and 4 of the staged intervention framework, and that these discussions are supported by the appropriate planning documents, e.g. all assessments, analysis of wellbeing, Getting it right for me plan, Coordinated Support

Plan (CSP), Health Care Plan, all requests for assistance, chronology and the views of the child or young person.

Within Primary schools and Specialist provision this planning and support is typically coordinated by the head of establishment or the depute head/head teacher in their role as Named Person until such time as a Lead Professional may require to be identified.

Multiagency meetings are held as required, with a clear purpose. These meetings should be attended only by those directly involved with the child or young person's planning.

Meetings can be overwhelming for children, young people and their parents; staff should invite only key people and ask for reports from everyone else. There should be no-one at the meeting that the child, young person or parent does not know.

Primary schools will be invited to a transition HART once a year to share information about relevant pupils. This is in addition to transition arrangements already in place between establishments for the move from Primary to Secondary.



Health and Wellbeing Resource Team (HART)

The HART is the multiagency support team which discusses information about a child or young person for whom further analysis of their wellbeing is required to support the planning process. It is co-ordinated by the depute head teacher with responsibility for pupil support, who will provide information about the process to parents and young people.

In their role as Named Person, a principal teacher of pupil support may request assistance from the HART.

Prior to requesting assistance from the HART the following should be completed.

- Assessment and analysis of wellbeing
- The views of the child or young person
- Evidence of staged approach to planning
- Chronology when appropriate

The child or young person and parents should be made aware prior to the HART meeting what information is likely to be shared, the purpose of sharing and with whom the information is likely to be shared. The views of the child or young person and parents should be recorded.

Core Membership:

- HT/DHT
- Named Person, (principal teacher pupil support)
- Educational Psychologist
- Social Worker
- School Nurse
- Home School Partnership Officer
- Additional Support Manager

Other partners may be invited as and when required such as; Police or a representative from Housing.

Frequency of meetings: HART meetings will generally be held on a regular basis, every 4 to 6 weeks. (Frequency will be dependent on the specific needs of the school population.)



Outcomes from the HART may include:

- Additional information being used to enhance planning
- Request for Assistance to seek support from other agencies

These outcomes are subject to an ongoing cycle of assessment and review with the child or young person and their family to ensure that planning continues to be appropriate and effective.

The operation of the HART takes place in the context of the guiding principles on the basis that earlier intervention for children and young people with wellbeing needs can be a significant factor in preventing the development of more complex and entrenched difficulties.

Whilst discussion at HART may not necessarily result in direct service delivery from one or more agency, the value of consultation and advice from professional colleagues is well demonstrated and can lead to more focused planning and support.

Process for requesting further assistance for children and young people of all ages and stages:

Within the multiagency planning process, there may be a small number of children and young people who, following extensive integrated planning and support, still require additional input to improve their wellbeing. It may be that service delivery needs to be provided in a different way, or a different resource is required or a more specialised intervention needs to be considered. In these circumstances the Lead Professional may request assistance from relevant Area and Locality Managers.

Prior to a request for assistance being made the Lead Professional should consider the suitability of the request, whilst ensuring the following information is collated:

- **The views of the child or young person**
e.g. What I Think tool, Wellbeing App, Wellbeing Web
- **Child's Plan**
- **Chronology of intervention and support**

The Request for Assistance and all supporting evidence will be sent electronically to the Area Additional Support Manager (ASM) Education, Youth and Communities who will ensure criteria for the request is relevant and all supporting paperwork is evident.

If this Request for Assistance is made on behalf of a child or young person who is in a specialist provision, including out of authority provision, then the Request for Assistance should be made to the ASM in the child or young person's home area.

The ASM will then distribute the paperwork to the relevant Managers in other agencies including Health and Social Work where appropriate.

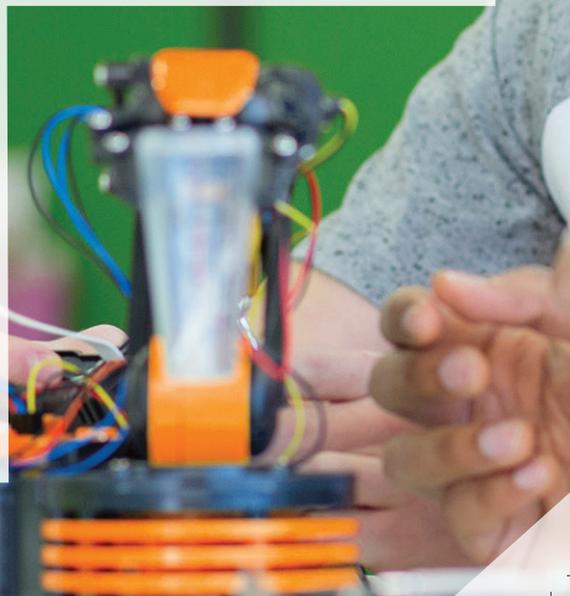
The relevant Managers for each agency will then check to ensure that all aspects of planning and support have been explored within their own agency and provide any additional advice or support where relevant.

Part of this process may also include consultation within their own agency, with key members of the team supporting the child or young person and family or with multiagency partners.

Any action taken at this point should be communicated to other relevant Managers for information.

All information is then fed back to the Lead Professional who will be responsible for updating and/or amending the Child's Plan whilst communicating any changes to the child or young person's Named Person and the Network of Support.

Implicit to the process is the active involvement of and collaboration with children and young people and their families and carers.





For any further information please contact the Additional Support Manager in your area:

North Area: 01236 632363
(Cumbernauld, Chryston and Kilsyth)

Central Area: 01236 632844
(Airdrie, Bellshill and Coatbridge)

South Area: 01698 274656
(Motherwell, Wishaw and Shotts)

